

» SALESFORCES

THE SALESFORCE OF THE FUTURE

Our experts agree: the salesforce of the future will be more specialized, more technically advanced, and more clinically savvy; oh, and there will be **FEWER FEET ON THE STREET**, finally.

If the past year is any indication, the salesforce of the future is going to experience an extreme makeover. For one, it will be much smaller. The cutbacks and layoffs of 2008 continued heavily into 2009, with patent expiries and mergers felling reps by the thousands. Almost daily, the news featured stories of industry sales reps layoffs, massive buyout packages, plant closings, and acquisitions. The salesforces that survive will be lean and specialized.

To succeed in the tough times ahead, salesforces — what's left of them — will need to reinvent the way they approach physicians from both a messaging and a method point of view. Reps will use more targeted interactions via the Internet rather than face-to-face meetings, our experts say. These drastic changes are not bad news; rather, the results of a highly educated salesforce could lead to better patient outcomes.

Despite all the changes, no one expects the role of the sales representative to disappear, but it will become more service-oriented and grow to include expertise on third-party payers and pharmacy benefit managers.

In the future, sales representatives will be more highly educated and trained; consultative; comfortable with evidence-based medicine and clinical studies; and knowledgeable about their product, competitive products, and the disease state, as well as each healthcare professional's practice, says Rick Keefer, president and CEO of Publicis Strategic Solutions Group.

"We believe there will always be a place for professional field sales teams in biopharma," Mr. Keefer says. "The model, however, will expand to include other types of representatives; many companies will have a highly customized mix, including traditional field sales representatives, customer field service teams, clinical health educators, medical science



Dr. Evan Demestihias
The Medical Affairs Company

"Future field-based teams will have a greater reliance on clinical studies and evidence-based medicine."

liaisons, virtual or inside sales and service teams, and live video detailing experts."

This multitalented sales mix is a current trend in the industry that is gaining traction, says Nicholas Landekic, president and CEO of PolyMedix.

"Salesforces may be smaller, but they will be more diverse in terms of the specialists on the team," he says. "A successful team will include MSLS to provide clinical information to practitioners, as well as economists and financial analysts to interface with formulary and benefits managers."

Celeste Mosby, regional VP, life sciences, at Wilson Learning, says the current model will evolve into more of a regional customer service model, helping customers with service-related issues and appropriately integrating product-focused messages into their dialogues.

To facilitate this customer-focused model, territories will become regionalized, so the reps



Jeff Baker
Noble Marketing Group

"Custom-designed educational tools that the sales rep can use as a sales and detailing tool will grow in popularity to showcase the brand's message."

can become intimately knowledgeable with state reimbursement and government policies, and therefore better at addressing needs particular to the healthcare provider, employer groups, payers, and patients, Ms. Mosby says.

"There is a focus in some organizations on restructuring salesforces into regional business units," she says. "This type of service model will require more internal support from across functional areas of expertise, including expertise in government and reimbursement."

Raj Singh, VP and general manager at Formedic, agrees with Ms. Mosby's prediction.

"The salesforce of the future will highlight education and interaction, while being more regionally based," Mr. Singh says. "I predict there will be a model that combines elements of how oncology drugs are sold and how international salesforces work, highlighting professional standards and pertinent information,

while giving sales reps more regional control to address issues.”

Jeff Baker, president and CEO of Noble Marketing Group, says pharma salesforces would do well to focus most of their efforts on policymakers and payers, who increasingly determine which medicines are prescribed.

Mr. Landekic agrees. “The reps of the future will need to employ more nondetailing promotion, such as direct mail, publications featuring clinical trial data, local symposia, and, in particular, targeting decision makers at managed care providers to place drugs on formularies in the new world.”

The new salesforce will not lose sight of the physicians’ informational needs. According to Evan Demestihias, M.D., R.Ph., CEO of The Medical Affairs Company, the salesforce of the future will be a scientifically based field team whose primary skill will be that of a learned, credible resource to physicians.

“They will be comprised of more healthcare professionals who can provide a peer-to-peer interaction with a greater use of clinical studies and evidence-based medicine,” he says. “As the model evolves, this will help fulfill the enhanced value proposition of providing genuine worth to physicians’ practices.”

Nancy Lurker, CEO of PDI, says physicians are demanding more value from their interactions with pharmaceutical reps.

“If physicians are going to give a pharmaceutical rep face time in today’s ever-changing healthcare delivery environment, they expect to learn more than the product information they might get through detail aids or nonpersonal delivery,” she says. “They want to know the latest formulary changes and how it impacts their patients, what is the latest science on the brand’s impact on disease state management, what current healthcare issues are impacting their community, and how they might better serve their patients. This need for a higher-quality interaction is driving the industry to look more closely at their customer and rep profiles to optimize resource alignment and ensure that physician needs are appropriately met. Now more than ever, hiring reps with the right intrinsic characteristics and then providing them with best-in-class training and next-generation customer management tools is critical to future success.”

With payers becoming more important in influencing prescription decisions, account management skills and knowledge about payer policies will also become increasingly necessary to the sales rep and the salesforce as a whole, says Manish Gupta, director at Indegene.

“Reps will need clinical and pharmacoeconomic knowledge to be able to discourse on a higher, more sophisticated level than is simply required with a detail call,” Mr. Landekic adds. “They will need to be able to address the tangi-



Manish Gupta
Indegene

“Physician engagement platforms will enable pharma companies to add significant value to a physician’s practice and hence build a relationship of trust.”

Patrick Brundage
Cognizant

“A sales rep will need deep therapeutic expertise, be able to interact with large organizations, and be a specialist in a particular area and a trusted information source for the physicians.”



ble clinical reasons when to use, and not use, a drug, and the pharmacoeconomic benefits and advantages to the financial decision makers.”

Under this new service model, Ms. Mosby expects that there will be more shared responsibilities.

“The responsibility for outcomes will not fall solely on the sales function,” she says. “There will be a need for team support; specialists in reimbursement and governmental policies will add direction and focus. Team leaders on the sales side might be account managers coming from managed markets or specialty representatives who have become experts in specialty therapeutic areas.

“Those in these leadership roles should work with district managers to ensure pull-through of the value-based message,” Ms. Mosby adds. “There will still be a line drawn between sales and medical, but because the messages and activities of sales will be more medically focused on outcomes data and clinical research, it will be easier to work effectively as an internal team because some of the same goals and expected outcomes will prevail.”

A NEW SALES PARADIGM: CRM AND SAMPLING

In the coming years, more nonpersonal sampling modalities will be employed — vouchers, coupons, sample cards, e-sampling, telesampling — to supplement the cutbacks of sales reps and the merging of resources and budget constraints. And CRM will take a leading role in educating and servicing physicians.

“Today, many field salesforces are still a primary distribution route for samples, but increases in alternative distribution modalities,” Mr. Keefer says. “In the future, there will



Rick Keefer
Publicis Strategic Solutions Group

“CRM allows the industry to move from a broadcast approach to one that allows real conversations with customers.”



Celeste Mosby
Wilson Learning Worldwide

“The sales model as we know it today is shifting to more of a service model with a focus on patient outcomes.”

likely be a cap on the samples allocated to physicians. Technology will continue to enable significant advances in how samples are allocated, distributed, and tracked in ways that we may not have envisioned in the past.”

Patrick Brundage, practice leader for enterprise analytics practice at Cognizant, say in addition to the changing role of the individual representative, sales reps are being asked to implement new technologies, such as tablet-based detailing to create a richer, more customized interaction with each physician.

Our experts say CRM will become more important as reps use more nonpersonal promotion following secular sales trends.

“Sampling may migrate to nonpersonal promotion or diminish, as its ROI may be sub-optimal in commoditized product and therapeutic classes,” Mr. Nugent predicts.



Raj Singh
Formedic

"The sales rep of the future will not only have to have product knowledge but also have a pharmacoeconomic background."



Nancy Lurker
PDI

"The need for a higher quality interaction is driving the industry to look more closely at their customer and rep profiles to optimize resource alignment and ensure that physician needs are appropriately met."

"Salesforces will see fewer initiatives toward sample distribution because this is already under scrutiny," Mr. Singh says. "The trend toward leaner salesforces will mean that physician education and CRM will be key for all healthcare practitioners and these tactics will rely on more electronic communication and data capture."

Ms. Mosby says as analytics for key healthcare providers are tracked, the output of this information should be linked to individualizing messages and service opportunities for the salesforce to position.

"While there is never going to be a diminishing need for educating healthcare providers, there will be more of an emphasis on training physicians on how to make the right prescribing decisions," she says. "Salesforces will need to share educational resources with healthcare providers that are rooted in research and that examine the impact of treatment on various patient profiles."

CRM allows the industry to move from a

broadcast approach to one that enables real conversations with customers, says Mr. Keefer.

"True integration of all customer touch points — field sales and service teams, virtual and inside sales and service, clinical health educators, direct mail, Websites, speaker bureaus, e-marketing, and so on — can be a challenge," he says. "Technology that allows for true integration and a single customer view is here. In the next few years, this integrated approach will be the norm rather than the exception."

Mr. Landekic predicts that as physician education continues to become more centralized and more fundamental, the focus will move to clinical benefits rather than "brute-force" promotion.

The industry will shift away from using branded products to create awareness in the physician office to a more comprehensive educational marketing strategy.

"Logoed products are a thing of the past," Mr. Baker says. "The shift to educational marketing is good for healthcare providers, patients, and the brands that serve them. The brands that adapt the fastest will find themselves best positioned to capture the market share of their competitors." ♦

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Nicholas Landekic
PolyMedix

"In an ever-changing world, the traditional sales rep is continuing to become less relevant to product marketing."

EXPERTS ON THIS TOPIC

JEFF BAKER. President and CEO, Noble Marketing Group, a provider of PhRMA-compliant creative marketing solutions for pharmaceutical, biotech, and healthcare providers. For more information, visit gonoblerx.com.

PATRICK BRUNDAGE. Practice Leader, Enterprise Analytics Practice, Cognizant, a provider of information technology, consulting, analytics, and business process outsourcing services. For more information, visit cognizant.com.

EVAN DEMESTIHAS, M.D., R.PH. CEO, The Medical Affairs Company, a full-service contract medical organization that provides the pharmaceutical, biotechnology, and medical-device industries with strategically sound, expertly staffed, and flawlessly executed medical affairs solutions. For

more information, visit themedicalaffairscompany.com.

MANISH GUPTA, B.TECH., MBA. Director, Indegene, a provider of transformational services, including scientific content, creative services, and business intelligence solutions to enhance commercialization and marketing success of life-science companies worldwide. For more information, visit indegene.com.

RICK KEEFER. President and CEO, Publicis Strategic Solutions Group, a division of Publicis Healthcare Communications Group, which aligns four Publicis message delivery companies under one cohesive leadership team. For more information, visit publicishealthcare.com.

NICHOLAS LANDEKIC. President and CEO of PolyMedix Inc., an emerging biotechnology company focused on the development of novel drugs and biomaterials for the treatment

of infectious diseases and acute cardiovascular disorders. For more information, visit polymedix.com.

NANCY LURKER. CEO, PDI Inc., which provides strategic flexibility; sales, marketing, and commercialization expertise; and a philosophy of performance. For more information, visit pdi-inc.com.

CELESTE MOSBY. VP, Life Sciences, Wilson Learning Worldwide, which provides human performance improvement solutions for Global 2000, Fortune 500, and emerging organizations worldwide. For more information, visit wilsonlearning.com.

TERRY NUGENT. VP Marketing, Medical Marketing Service Inc., which provides lists that maximize results and minimize costs in the dynamic medical marketing industry. For more information, visit mmslists.com.

RAJ SINGH. VP and General Manager, Formedic, a provider of customized, professional medical forms to more than 200,000 physicians in more than 23 specialties. For more information, visit formedic.com.



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» SALESFORCES

VIDEO DETAILING IS A TOOL,
NOT A THREAT

Despite the benefits, **UPTAKE OF THE VIRTUAL EXPERIENCE HAS BEEN SLOW.**

Earlier this year, Manhattan Research released a report that concluded that physicians are amenable to video detailing. The ePharma Physician v8.0 study found that the majority of physicians who have engaged in online video meetings with a pharma sales rep or call center reported that they were satisfied with the experience. However, industry experts don't anticipate that the virtual mechanism will replace face-to-face sales calls any time soon, even in this economy.

Terry Nugent, VP of marketing at Medical Marketing Service, calls the slow uptake of e-detailing "one of the mysteries of medical marketing."

Mr. Nugent believes that some of the resistance may stem from incumbent salesforces that perceive e-detailing as a threat, or perhaps the industry's inability to incentivize physicians to participate.

"The innovation cannot replace the relationship achieved by successful reps with receptive practices, but it is still a good tool," he says. "This is clearly the solution to much of the problem facing pharma — the industry needs to adopt secular sales trends. Personal selling is much less a factor in secular business than it once was; much more sales activity has been done electronically via e-mail or phone. Younger physicians will be much more receptive to this avenue of communication and the technology is there to make it work."

Ahnal Purohit, Ph.D., president and CEO of Purohit Navigation, says undoubtedly there will always be room for alternative methods of sales interaction.

"While the ratio of technologically advanced approaches will change, I believe

there will always be a need for live meetings," Dr. Purohit says.

When e-detailing was first introduced to the industry, people talked about the possibility of it replacing live details. That hasn't happened yet, because the face-to-face relationship is still viable, says Nancy Beesley, executive VP, at HC&B Healthcare Communications.

"Nothing will ever replace the doctor-rep relationship; there is a connection, and trust and loyalty are built," she says. "That relationship, however, is strengthened by ongoing dialogue. Video detailing will have its place, but I hope it's always as an adjunct to traditional detailing."

"Video detailing is definitely the wave of the future," says Patrick Brundage, practice leader for enterprise analytics practice at Cognizant. "More physician interaction is going digital."

Nick Colucci, president and CEO at Publicis Healthcare Communications Group, calls e-detailing "the future of physician selling," and notes that the present barrier to universal adoption might be resolved with a slight shift in perspective.

"Successful e-detailing is built on the premise of strengthening relationships with physicians by improving how they work — faster, smarter, more proactive — at a time when patients demand better, more informed care," Mr. Colucci says. "E-detailing can be added to the marketing mix without removing the sales rep from the relationship."

The key is to trust the established relationship between the sales rep and doctor, and then develop tools that are flexible enough for a sales rep to use, based on the different needs of his or her call base.

"Using technology to supplement in-person detail efforts, sales reps can provide data from leading journals, professional conferences, other physicians' experiences, and drug company literature virtually, while also reaching lower-deciles targets through cost-effective measures," he says. "Nothing will replace the interpersonal relationship between a sales rep



Nancy Beesley
HC&B Healthcare Communications

"Video detailing will have its place, but I hope it's always as an adjunct to traditional detailing."



Nick Colucci
Publicis Healthcare Communications

"Successful e-detailing is built on the premise of strengthening relationships with physicians by improving how they work — faster, smarter, more proactive — at a time when patients demand better, more informed care."

and a physician, regardless of the expansion or constriction of the industry. But, in times of constriction, sales reps need more tools in their bag to create relevance, connectivity, and relationships with the entire physician practice, and video detailing can be one of those tools.”

As traditional methods of detailing become more difficult to maintain based on both the diminished salesforce and the physicians’ economic pressures to limit face time with sales reps, e-detailing can provide a flexibility and economy to the marketing plan by enabling physicians to choose either a self-guided or interactive review of product messaging.

E-DETAILING BEYOND THE COMMERCIAL

“The e-detail is evolving beyond the simple Internet-based commercial to become an advanced educational and marketing tool that can be carried by the rep for both interactive or leave-behind convenience,” says Michael Laferera, senior VP, sales and marketing, at J. Knipper. “The latest breed of e-detail also collects information based on responses to interactive content for improved marketing results.”

Evan Demestihis, M.D., R.Ph., CEO of The Medical Affairs Company, believes the technology can evolve even further.

“Largely a factor of convenience, video detailing still does not address the issue of physicians who desire more scientific information via this medium,” he says. “The industry should transform video detailing into a more medically based scientific exchange to meet the expectations of those physicians preferring electronic communications.”

As the market and salesforces become more complex, newer channels such as live video detailing are being added to augment the field sales team’s impact, says Rick Keefer, president and CEO of Publicis Strategic Solutions Group.

“Novel channels such as live video detailing will increasingly be part of the message delivery mix” he says.

“Video detailing/e-detailing and other ways to engage physicians in nonpersonal means will continue to gain importance and value,” says Mike Myers, president of Palio. “I would not, however, recommend diving in complete-

Dave Ormesher
Closerlook

“Physicians appreciate short, high-quality virtual details that are available on an as-needed basis.”

ly at the onset. Salesforces are going to need to experiment with new approaches and be willing to change their approach based on feedback and results.”

The power of online communication is its ability to time-shift dialogue. Someone can post an entry on Facebook or a blog knowing that friends will comment over the course of the day as they check their online accounts.

“In the same way, busy physicians rarely have time for a synchronous conversation, whether in-person or online, that is not originated by them out of a specific need,” says Dave Ormesher, CEO, Closerlook. “Physicians appreciate short, high-quality virtual details that are available on an as-needed basis. We’ve come a long way in creating the virtual rep concept in piecemeal — it will be imperative to proactively build these strategies from the ground up as we move forward.”

Dave Chapman, managing partner, CommonHealth, says scientific reps will have to be Web and communication experts able to access information instantly to provide the physician with the fullest array of depth across therapeutic information and clinical information.

“If a Twitter feed direct from the surgical suite at the Cleveland Clinic is what will move that doctor, reps need to be able to use that technology,” he says. “One word of caution, however, regulatory and legal constraints will need to be completely rethought and revamped so that the only information they can provide isn’t old and prepackaged.”

Video detailing should be used as a sustainability tool, not the foundation for developing

Kim Levy
MicroMass

“Most video detailing is still information being pushed to the physician rather than a two-way conversation.”



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SALES & Marketing



Dr. Ahnal Purohit
Purohit Navigation

"While the ratio of technologically advanced approaches will change, there will always be a need for live meetings."

the main customer relationships, which should be the purpose of face-to-face meetings with sales reps.

"A best practice would be to include as part of the video detail, discussion points to be addressed by sales reps during follow-up face-to-face interactions," says Celeste Mosby, VP, life sciences, of Wilson Learning Worldwide. "These touch points will become part of a continuous messaging and learning process for the physician. Physicians have welcomed this new approach because they like to examine information when they have time to fully understand the details of the messages."

"Research states that it takes an average of seven times to hear a message before there is a change in a physician's prescribing habits,"

Ms. Mosby says. "Therefore, video detailing should be considered the awareness component, which positions key information that enables reps to come in, build relationships, and ask the right questions that link to quicker product and service solutions. Because of the reduction in salesforces, there could potentially be longer periods of time that physicians might not be exposed to important messages. Video detailing allows for more frequent touch points over an extended period of time."

For Kim Levy, senior VP at MicroMass Communications, the point is less about the channel and more about the experience.

"Whether a conversation is started by a rep or through an online tool, it has to be a dialogue experience that has a real impact," she says. "Most video detailing is still information being pushed to the physician rather than a two-way conversation." ♦

PharmaVOICE welcomes comments about this article. E-mail us at feedback@pharmavoice.com.

EXPERTS ON THIS TOPIC

NANCY BEESLEY. Executive VP, Client Services, HC&B Healthcare Communications, an independent, full-service healthcare advertising agency. For more information, visit hcbhealth.com.

PATRICK BRUNDAGE. Practice Leader, Enterprise Analytics Practice, Cognizant, a provider of information technology, consulting, analytics, and business process outsourcing services. For more information, visit cognizant.com

DAVE CHAPMAN. Managing Partner, CommonHealth, a WPP company, is a network of highly specialized healthcare marketing companies, all aligned to build brands that dominate. For more information, visit commonhealth.com.

NICK COLUCCI. President and CEO, Publicis Healthcare Communications Group, a fully integrated division of Publicis Groupe SA. For more information, visit publicishealthcare.com.

EVAN DEMESTIHAS, M.D., R.PH. CEO, The Medical Affairs Company, a provider of

strategically aligned and customized MSL programs. For more information, visit themedicalaffairscompany.com.

RICK KEEFER. President, CEO, Publicis Strategic Solutions Group, a division of Publicis Healthcare Communications Group, which aligns four Publicis message delivery companies under one cohesive leadership team. For more information, visit publicishealthcare.com.

MICHAEL J. LAFERRERA. Senior VP, Sales and Marketing, J. Knipper & Co. Inc., a provider of healthcare marketing solutions for direct marketing, sampling, compliance, information technology, and salesforce productivity. For more information, visit knipper.com.

KIM LEVY. Senior VP, MicroMass Communications, a behavioral science-based marketing organization that provides communication strategies and solutions for the healthcare industry. For more information, visit micromass.com.

CELESTE MOSBY. VP, Life Sciences, Wilson Learning Worldwide, a human performance

improvement solutions provider for Global 2000, Fortune 500, and emerging organizations worldwide. For more information, visit wilsonlearning.com.

MIKE MYERS. President, Palio, a full-spectrum advertising and marketing firm serving primarily the pharmaceutical industry. For more information, visit palio.com.

TERRY NUGENT. VP Marketing, Medical Marketing Service Inc., provides lists that maximize results and minimize costs in the dynamic medical marketing industry. For more information, visit mmslists.com.

DAVE ORMESHER. CEO, Closerlook Inc., a strategic marketing agency specializing in healthcare with an emphasis on strategy, creativity, and innovation. For more information, visit closerlook.com.

AHNAL PUROHIT, PH.D. President and CEO, Purohit Navigation, an independent, full-service brand solutions company that navigates the full potential of small- to midsized specialty brands. For more information, visit purohitnavigation.com.

Sound Bites From The Field

PHARMAVOICE ASKED INDUSTRY EXPERTS TO IDENTIFY THE TOP FACTORS THEY BELIEVE ARE CURRENTLY IMPACTING SALESFORCES.

KARLA ANDERSON is Managing Director, Pharmaceuticals and Life-Sciences Advisory Services Group, PricewaterhouseCoopers, which provides industry-focused assurance, tax, and advisory services. For more information, visit pwc.com or e-mail karla.s.anderson@us.pwc.com.

“The customer interaction model is changing, including the movement from face to face as the primary interaction method to a more multichannel interaction model and the changing allocation of field resources focused on the customer segments—funders, payers, prescribers, intermediaries, and consumers.

There is a growing market demand by all customer segments for relative value demonstration from the manufacturers, which in turn requires the manufacturers to modify pricing approaches, to refine market messages, to increase postmarketing surveillance focus, and to create outcomes/evidence-based differentiation.

There is increasing demand for a more integrated market approach from the clinical, promotional, service, and safety perspective, including the need to account for the requirement of REMS, the customer demand for more clinically oriented interactions, and the need to wrap support services into product offerings for selected therapeutic areas to establish differentiation.

The changes to the sales model must be transformational. The new model has to create value in the market and yet be cost-effective in light of price compression. Companies need to think about the customer interaction model from an integrated approach and the idea of using their field forces as coordinators of an overall set of customer interactions within a local market.”



DAVE CHAPMAN is Managing Partner at CommonHealth, a WPP company, is a network of highly specialized healthcare marketing companies, all aligned to build brands that dominate. For more information, visit commonhealth.com.

“There is a level of demoralization within the sales ranks. Can you imagine hearing virtually every day in every channel that you’ve become obsolete, watching your group get continually downsized, or knowing your bread-and-butter brand is about to lose patent with no replacement? A few minutes on any Café Pharma chat room will make you laugh and cry.

Access — both definitions — are impacting the sales arena. The first meaning is that even great data and a trusted relationship can’t overcome a product with highly restricted access due to an exorbitant co-pay or requirement for prior authorization. The second, means more and more no-see physicians; productivity rules the practice and groups, hospitals, and academia are banning sales representatives as way to eliminate ‘influence’ and control costs.

Digital media are changing the sales arena. First is the physical aspect of moving away from paper-based ‘detailing’ visual aids and toward interactive tablet PC selling. It’s just not a shift every salesperson can make, and it will change the qualities of and qualifications for who is recruited. Second is the Internet. New information, product launches, clinical trial results, and more are in the doctor’s hands at the speed of light. How do you wow someone with a reprint carrier that took months to get out of regulatory and legal review when the physician received a tweet on the study results and discussed with colleagues on Sermo the day it came out?”



NICK COLUCCI is President and CEO of Publicis Healthcare Communications Group, a fully integrated division of Publicis Groupe SA. For more information, visit publicishealthcare.com.

“Aging product portfolios, coupled with reimbursement-driven comparative effectiveness, are forcing pharma companies to rethink the hallmarks of effective detailing. The selling experience is shifting toward improving product adherence and

compliance through patient assistance programs, reimbursement, and patient education.

Niche indications, orphan diseases, and high-profile chronic health concerns require a more discernable level of knowledge and insight drawn from diagnosis, treatment, and drug registries. This shift is transforming sales reps into customer-centric, subject-matter experts.

Clinical expertise is hard to access and come by — it’s the coin of the patient-treatment realm. Medical science liaisons offer expertise and a skill set separating the company and brand from the pack. And, with sales reps having a tougher time gaining physician access, science-specific visits cross the medical-practice moat easily and with greater appreciated value.”

PAUL DREYER is Chief Commercial Strategist at Friday Morning, a new company formed to help clients address the pervasive distrust that increasingly characterizes the relationship between physicians and the pharmaceutical industry. For more information, visit fridaymorning.com.

“Restoring trust is the most critical issue facing pharma. When the relationship with pharma’s key customer — the physician — is broken, even the most skillfully crafted communication will not be heard. Effective communication of a brand’s benefits and risks to potential prescribers and their patients is a critical responsibility of a pharma company and its agency. When this communication process is done well, patient outcomes are improved. But when this communication process breaks down, all of the innovation our industry is renowned for comes to naught. It is critical to take steps to improve trust.”



DAVID MERKEL is Senior VP, Business Solutions, at J. Knipper & Co. Inc., a provider of healthcare marketing solutions for direct marketing, sampling, compliance, IT, and salesforce productivity. For more information, visit knipper.com. more >

Sound Bites From The Field (continued)

“Restricted access to doctors is still the primary barrier for salesforces. Not only are doctors limited in time, many facilities and practices continue to create policies limiting rep access.

Data restriction programs limit representatives' abilities to view information about a doctor and a practice. Numerous state legislations will add additional pressures and limit the pharmaceutical companies from purchasing script data, making measuring results more challenging.

The move toward more online information sharing crowds out rep visit time. As doctors access the vast resources on the Internet, they are able to use resources and pull information on their schedule. Salesforces must integrate their personal interactions with technology platforms to cater to doctors' preferences.”



NANCY LURKER is CEO of PDI Inc., a provider of strategic flexibility; sales, marketing, and commercialization expertise; and a philosophy of performance. For more information, visit pdi-inc.com.

“Today's selling environment may limit the rep's ability to a visit that is nothing more than a sample drop. This is a role better suited to a lower-level rep, rather than a highly trained, experienced rep. What the experienced rep has to do is to get back to the basics of relationship building and finding ways to bring value to the customer — be they physicians, physician assistants, office managers, nursing home managers, payers, etc.

The evolving role of technology in terms of content delivery — e-detailing, Webcasts, and other uses of the Internet — are all wonderful tools savvy reps can use to enhance their customer relationships. When used effectively, these are productive tools in overcoming some of the downside resulting from limited face time.”

CELESTE MOSBY, VP, Life Sciences, Wilson Learning Worldwide, a human performance improvement solutions provider for Global



2000, Fortune 500, and emerging organizations worldwide. For more information, visit wilsonlearning.com.

“With tightening promotional controls and smaller salesforces, those in sales positions will need to learn how to leverage intellectual and emotional customer engagement as a key differentiator and learn how to build stronger relationships with greater trust and empathy. Healthcare providers engage with those who they feel most comfortable with and trust. Physicians in particular must be able to trust the information that is coming from representatives. Becoming credible sources of valued information to help physicians and healthcare providers achieve better patient outcomes is and will continue to be the focus, and ultimately that which differentiates one representative from another.

The impact of managed care restrictions will increase the need for defined plans that include roles and responsibilities of each member of the sales team. Even primary-care sales professionals must move from a reactive to a proactive approach in order to add value to their interaction with physicians who contract with many insurers. Most managed care expertise and discussions used to be a big part of managed markets account managers' responsibilities; now every level of those who support the sales function will have to transition and integrate valuable resources that help healthcare providers analyze all aspects about products in a specific therapeutic class, including co-pay and formulary access. This geographic-specific approach will need to change everything from training on how to have these discussions, to the development of key access messages and sales aids that make it easy for sales professionals to help healthcare providers make sense out of all of the complexity.

Creating training for sales professionals and sales managers that truly changes behaviors and impacts performance warrants an approach to training that necessitates a drastic change from the way it has been done in the past. Training today requires a focus on

extending the learning beyond the classroom to ensure reinforcement and application of the new skills. Learning journeys and environments by which there is a venue to reach more learners, more frequently, with more applicable tools are needed. Extended learning platforms that leverage both face-to-face and virtual touch points enable the delivery of consistent core and individual learning opportunities, equipping the salesforce to be more grounded and fluent in integrated value-based messages.”



RAJESH NAIR, MMS, MBA, is President and CEO of Indegene, a provider of transformational services, including scientific content, creative services, and

business intelligence solutions that leverage a global services model to enhance commercialization and marketing success of life-sciences companies worldwide. For more information, visit indegene.com.

“The ability to generate and maintain meaningful relationships with physicians is significantly impaired. This is being driven by the dramatic reduction in face time — detail time — with doctors, changing information-seeking behaviors of physicians, and rigid communication and promotional guidelines that make it difficult to deliver customized information and support.

The current economic milieu is adversely impacting the training process. The restructuring of salesforce portfolios as well as the complex nature of new products being launched require an increasing quantum of training. The time as well as the budgets available for training, however, are reducing in the face of accelerated launch schedules and overall cost rationalization initiatives.

The sales process is getting more complex, with increasing numbers of stakeholders impacting the prescription decision. There are newer prescriber and influencer groups, including nurse practitioners, physician assistants, and pharmacists apart from physicians. The salesforce needs to understand and manage the needs and expectations of these new stakeholders to ensure success.”



innovation. For more information, visit closerlook.com.

DAVE ORMESHER is CEO of closerlook inc., a strategic marketing agency specializing in healthcare with an emphasis on strategy, creativity, and

“The top three factors impacting sales in 2010 will contribute to undermining the confidence of pharmaceutical sales representatives.

The first factor is that hostile office staff and a general suspicion of the industry will continue to create a negative daily work environment for many sales reps. Second, the fear of being downsized will continue to be a threat as large pharma companies attempt to rationalize their acquisitions and reduce their costs to maintain profitability. And third, a lack of value-add benefits to offer the physician in light of PhRMA guidelines highlights the dearth of good marketing support.”



pharmaceutical, biotechnology, and medical-device industries with strategically sound, expertly staffed, and flawlessly executed medical affairs solutions. For more information, visit themedicalaffairscompany.com.

BETH PRICE is Executive VP at The Medical Affairs Company, a full-service contract medical organization (CMO) that provides the

“Possessing clinical expertise is no longer a nice-to-have requisite but a mandatory requirement for biopharmaceutical and medical-device field-based personnel. Healthcare-degreed professionals are best suited for these positions based on the evolving peer-to-peer discussions between physicians and sales representatives.

Federal, state, and company-driven compliance programs continue to limit the value and service provided by a traditional sales representative.

Access issues continue to hinder the service and value that physicians have traditionally received from sales representatives, as numerous institutions and

healthcare practice policies have adopted no-see policies. Additionally, access is a challenge based on physicians' perceptions that limited value will be provided. When a representative can provide information, including evidence-based clinical discussions, physicians are then more apt and amenable to meet with a representative.”



agencies: Core-Create, Alpha & Omega Worldwide, and Brandkarma. For more information visit, thecorenation.com.

KEN RIBOTSKY is President and CEO of The Core Nation Inc., a holding company created to leverage strategic talent and resources across the three

“It will be a rocky road for the traditional salesforce model. The industry's salesforce as a whole is already shrinking and will continue to decline further in the years to come.

By 2015, the U.S. salesforce is expected to be 30% less than what it was a decade earlier. Diminished access to physicians, greater scrutiny on marketing practices, and more promotional guidelines will mean ongoing challenges for the traditional selling and marketing model.

Additionally, companies will expect their smaller salesforces to do more in less time while carrying more products in their bag. They will be expected to increase their

number of calls per day and become experts in a greater number of products and physician specialties. They will also be challenged to achieve tougher stretch sales goals.

Because of this, nondirect promotions, digital, and other new media will continue their sharp trajectory toward greater importance and use. More targeted promotions that go beyond simply achieving a greater share of voice will carry more significance in the effort to influence healthcare professionals, patients, and consumers.”



and biotechnology professionals. For more information, visit healthstrategies.com.

RICK ROSENTHAL is Principal and Practice Leader, Sales Force Effectiveness, at Health Strategies Group, which provides market intelligence and research to pharmaceutical

“Customer interactions typically consist of repetitive, product-focused key messages. This approach succeeds in achieving legal/regulatory compliance, but it also positions representatives poorly. Physicians often view representatives as having little knowledge beyond the package insert, and possessing more concern about products than about patients.

Low product differentiation forces marketing teams to accentuate product attributes that, from a prescriber's perspective, represent relatively minor differences.”



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