PharmaVOICE Podcast Series

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In this episode, Taren Grom, Editor-in-Chief of PharmaVOICE magazine meets with Kim Mehle, VP, Oncology Commercial Services, IQVIA.

Taren: Kim, welcome to our WoW podcast program.

Kim: I'm happy to be here. I can't wait to talk to you today.

Taren: Me likewise to you. Kim, tell me about your current role as VP Oncology Commercial Solutions. What does that mean?

Kim: Sure. It's funny, I tell people I lead a team of go-to market resources for oncology commercial solutions and they nod their head and people like my dad go, "So what does that really mean?" Well, what it means is that I lead a business development team of very talented professionals who help our oncology clients answer their commercial business questions by leveraging real world de-identified patient data. And when I think of their questions, they range from understanding market trends to what are the treatment pathways for an oncology patient, to how do we get information in the oncologist's hands faster. And that's what my team does; we take that real-world data, translate it into insights and then we empower our clients to make decisions and help the oncology and cancer patients.

Taren: That's awesome, because in that field of oncology I don't think there's any of us who haven't been touched by cancer in some way or another, especially through our own personal journeys or through a family member or a friend. So you told me about some of those questions, what are some of the hot things you're working on right now to make that oncology patient journey easier?

Kim: When I think of oncology and it is getting more complex by the day, it's getting very patient-centered, and we're trying to take a look and see what we can do with the analytics and the data we have. One of the things that's hot right now and new is really using artificial intelligence, machine learning, predictive analytics to help us kind of fill in some of those blanks that may be in the data to allow us to identify patients and groups better so we can understand the treatment patterns and what's happening in the market. It's very exciting right now because we just keep advancing our analytics.

Taren: That's great. Kim, when you say more complex, is that because we're getting more to — moving more towards personalized oncology treatments for patients based on their genetic make-ups and their specific type of cancer?

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Kim: Exactly. You hit it on the head right there. It is. It's getting very specific, and now when you go and say for lung cancer, you're doing all kinds of biomarker testing and screening and then there are drugs now out there targeted for your specific mutation. So just think of all the information that the doctor has and needs to make his treatment decisions. That's what we're trying to look at and really help understand what that means and help our clients with that information.

Taren: That's fantastic. So let's delve into a little bit more of this analytic solutions stuff because it's kind of complex and I am certainly no analytics expert. So you've been active in the pharma industry for the past 18 years or so – I didn't want to date you there, but you have a tremendous amount of expertise in this field. So let's talk about what you're seeing in terms of AI, machine learning and how all that as you alluded to before is really helping what you all do in terms of data and analytics.

Kim: Definitely, and I can even step back a little bit. When I started in this industry it was early 2000, and I started with a company called Verispan. As I look at the analytics and the market, do you know what it was dominated by? – Script activity. We were following prescription activity and Verispan said, well, you know what, let's do this thing called anonymize patient level data and let's see what we can do and can we drill down into more information. Well guess what? We succeeded in it.

Patient data now is the base for most real-world data analytics. It really does provide that deeper insight into the trends, into the diseases. It's one thing to look at it from the clinical activity, what you're seeing in the clinical trials to how it's really being used in the real world and that analytics has just evolved and has really gotten sophisticated, kind of like you said about the AI and the machine learning, we're using more of that.

We're putting more datasets together really to link them behind the scenes in a very HIPAA compliant way, but link them to give us that insight and figure out what is the patient on for early stage breast cancer doing, what is the patient in later stage and are there more options. And the neat thing is there's more options out there. And by using our information, we can really help our clients get a little bit more precise.

Kind of when I think of this past year with the pandemic and the need for information, I was very impressed with our team and what they did to look at the market and the data we had and really kind of dig into it and see what was happening. Were patients not going in, say, for their screenings and what did that mean for them. Were we seeing patients diagnosed with more severe diseases and what does that mean.

IQVIA published a weekly and then a monthly newsletter about COVID and the oncology team was part of it. So when I think of that, that's just like the latest example of the evolution of data analytics over the past two decades, which is just an exciting time to be in.

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Taren: It is an exciting time to be in. Kim, through all that analysis over the last year to 18 months, what are some of the most surprising if you will insights that you all uncovered during the pandemic? Were people not going to screenings as much? Did you see disease change?

Kim: It did. What we saw is the use of telemedicine, telehealth in oncology where you always would go to an oncologist's office. Now, the oncologist is trying to figure out what could you do by phone. There are some treatments that you have to be there because it's an infusion. Other ones, they were still doing in their practice. We were seeing patients not going for their mammograms, for their colonoscopies and things like that. And when does it start back? We're watching those trends because the concern is for those patients that didn't go in, are they going to be diagnosed later down the road and is their disease going to be more severe?

When you think about what was happening, people were more scared of going into the doctor's office than they were about maybe that pain or maybe just feeling off, so they didn't do it. So that was some insights that we saw that was happening and really looking at when are we going back to normal and what does that mean.

Taren: Exactly. And I think that is still the big played out right, so especially as we're looking at the Delta variant now and what havoc that's going wreak, just as we started to kind of get our footing back we're seeing all this disturbing news come out. So obviously we're not near the end of the pandemic. Maybe we saw the light to begin at the beginning of the end of the tunnel, but here we are again. And in that term, what should we be watching for in the next 18 months from your perspective? What types of things are you looking at shorter term?

Kim: In regards to the pandemic or just the overall?

Taren: Overall, I think. Let's talk about it in terms of your specific area of expertise. And so if you're looking at where we were in terms of the pandemic and how it influenced patients, are we going to see those same cards play out for the next 18 months or are we going to start to see some different movement?

Kim: I think we're going to start to see some like return to normal, but I think the new normal is going to be different than it was. And we're definitely going to see the use of technology for physicians and how they interact with patients. There's nothing like having a face-to-face conversation, but I could definitely see some of that screening and pre-meetings happening on the phone.

I also think about what's happening in oncology, and one thing that did not stop during the pandemic was new drugs getting approved, and that's still happening. Every month we'll see about a new approval or a new clinical trial and it's not for just the big cancers, like breast and prostate; it's also for more rare diseases like neuroblastoma or VHL, things we may not have heard about, but there's now treatment options for patients. I just love that idea, and when I think about that and it's very precise as we were talking about. Now we have to keep up with it.

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So I would keep my eye on the different analytics that are happening and how we're evolving and adding more insight and information at a deeper level for our clients to understand the treatment patterns, so then we can help physicians with their patients.

Taren: Interesting. Do you think that – well, let me say it this way, were you surprised by the adoption of telemedicine by physicians specifically oncologists during the pandemic or did you think yeah, of course, that was going to happen?

Kim: I am surprised, but I am also not surprised on the low percentage like less than 10% of visits were telehealth. Unlike if you're looking at your normal PCP, the majority of their discussions could be telehealth. But what I thought was neat was the resiliency and the way oncologists and their office staff made it work for them and for their patients. They looked at ways to make the patient more comfortable and understand it – and one physician I think he even said, he got to know his patients that he could hear in their voice on what they were telling him.

So it just really shows you the care and the concern that physicians have for their patients and the way they adapted at the time and adopted technology, whether it was for them or even getting information about the drugs and the diseases and the new things coming out. They stayed on top of that during the pandemic and gained that information.

Taren: Wonderful. Let's shift gears just a little bit and let's talk about your experience in building high performing, customer-focused delivery teams. What are some of your keys to success? And then as a follow up, what are some of the qualities that you look for for high performing teams?

Kim: Well, thinking about my cases success there's a couple of areas, but I really do think they all tie together. And one is just taking the time to listen. Listen to your peers, hear what they're saying, listen to your team and what they're asking and what they're experience and listening to your clients and what they're trying to tell you. And as you're listening, you're building relationships with them so you can better understand what they want, where they're going, what they're trying to do so you can come up with the right solutions. It's like putting all the puzzle pieces together to really get that answer.

And one of the things I found out from working with the team is let them do their job. We hired them for a reason and they have the right qualities that we wanted, so don't take over. If they want to talk about something, brainstorm with them, give advice, but don't do it. And then finally, is really acknowledging and celebrating success. I think this is really important. It's taking the time to say to somebody that was awesome. You know what, I know you worked over the weekend to get the job done, or I saw the study that you ran and the insights were great. I'm really excited about what you did, what the team did, it's just taking the time to proceed the work because it means a lot to them and you can also then acknowledge what they're doing over their day. It consumes so much of us. So I think that's an important thing to do.

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Taren: A little appreciation goes a long way, that's for sure. I'm sorry, I didn't mean to cut you off there.

Kim: No, I was just going to say it kind of goes into the qualities of a team as I think of that. It's working together, sharing your experiences, sharing information with each other, being proactive, coming up with new ideas. Don't be comfortable just sitting where you are, but looking to drive towards success and we all have our own goals, look at those goals and look at the team goals. We should be working together.

When I think of my current team, I think how they're invested in this success of like he we are and our clients, but also each other. They'll share tips and studies with each other. My favorite email to see is 'has anyone done...' and then you kind of wait, and next thing you see there's emails going back and forth with the team. Somebody is saying 'oh yes, I did that type of study for this client' or 'I did this and here's a little thought,' or 'I've done work in that market.' And it's just neat because it's helping each other out and then the person who asked the question has a lot of options as they put together the solution that they want to propose back to their client.

Taren: Awesome. And over your very successful career, you have no doubt figured out some of the ways to move up the ladder. Tell me what about some of those keys to success that you've had in progressing your career. What advice can you share to other women who may want to reach that executive level?

Kim: I think a couple of things come to mind, but my biggest recommendation is don't be afraid to do the work. Take on the tough assignments. Volunteer to do the extra. Be willing to work more than 9:00 to 5:00. Honestly, sometimes my best ideas came after 5 o'clock. My emails quieted down a little bit. The office might have gotten quiet, and I could think and really put all the pieces together to come up with a solution. Or I could be looking at the data trends without the interruptions and say oh, this is what's happening.

And then learn from each assignment, each project that you take think about it. When I think about ones that I learned the most of; it wasn't the one that went so easy and succeeded really early. It was the ones with the bumps in the road, things that didn't go well, things didn't look right and I had to dig into, those were the ones I had to get my hands around. And it's what I learned the most with, whether it was in analytics, whether it was working with the client, whether it was working within my organization trying to get the solution to come to resolution. I learned so much. Make the connections then. Like I just said, working with others on that, by working together and having that connection, you can really do awesome things.

I'll end with this one — one of the best pieces of advice that I got from one of my mentors one time was to be balanced. You can't be perfect. Don't make yourself crazy. Don't make others crazy for perfection. It's just not going to happen. Something is going to go wrong. And she wasn't telling me, just to be sloppy and just get it done; but I really took her advice as think about what I'm trying to do. Is it good? You could expend all kinds of energy trying to be perfect and make everyone nuts, but you know what, for that last 5 percent of your time, was it

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worth it? Or was it really better to worry about and work on something else or maybe even take some down time for myself. So, I try to remember that and keep that balance between perfection and really good and successful.

Taren: Right. What do they say – the enemy of good is perfection... or however that saying goes. I loved your first tip about taking some of that time after 5:00 and giving yourself the head space to think through some things and make those connections because we're so busy and task-oriented and getting to the next thing and getting that done and going to the next thing, that it does require time to reflect and to think. Because as you said, those are when the good ideas pop up sometimes.

Kim: Yeah, exactly. What I hate the most is if it feels like somebody just did a checklist, done and checked it off. Did you take the time to think about it or look at it? And people notice. People really do notice when you do that.

Taren: Sure. And then it makes you feel good, like my contribution was recognized and it was appreciated as you said – and going back to the appreciation part because somebody took the time to reflect on it. That's wonderful advice. Finally, tell me about – speaking of accomplishments – an accomplishment or a wow moment that either shaped your career or changed the trajectory of your career.

Kim: My wow moment.

Taren: That would be the one.

Kim: It has to be one. I was going to say it's kind of hard to narrow it down and maybe I'll tell you how I think of my career and I think that'll put it in context. I kind of think of it as journey, like in a sense my own personal cross country trip. There's different stages of my career. I've come to crossroads and the on and off ramps and the slip ramps and sometimes just turning left and turning right and the decisions that you make along the way and each adjustment changes your career or changes your path in little ways you're not even thinking of.

For example, before I started in pharma I did instructional design, and my last position had ended and I was looking for a new job and a friend told me about a new opening. Do you remember that company called Verispan, well they were looking for a project manager. It sounded intriguing, a little more focused on my project management experience than my training, but it was different. So I decided to apply, see what would happen.

I can still remember the interview. I can remember where it was. I can remember the building and who I talked to and what they shared about the pharma industry and what I'd be doing. I thought it went well, but I wasn't sure because I was a little different than some of the other candidates that they were talking to. Well, I got the job offer and really had to make a decision. In a sense, my crossroads per se, do I stay on the road that I was on and stay in training or do I take the risk and head in a new direction and try to do something different.



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Well, I took the risk. I changed my career trip and you know what, I've never looked back. I love what I do. I love the industry I'm in, the team I work with, the company I work for and the future that it brings and what it holds because it's constantly changing and challenging and there's so much you can do. So for me, that change, that risk, all the adjustments worked and it worked well. I'm happy on the path I'm on, and I'm not done yet. I'm sure I'm going to come up to another on ramp or off ramp and make adjustments as I go.

Taren: That's awesome. Thank you for sharing that story and I'm so glad you decided to make that left turn because...

Kim: So am I.

Taren: ... you've made such a great impact on the industry so far and I definitely think you're not done yet. So when we talk again in the future I can't wait to hear what you're next wow moment is.

Kim, thank you so much for sharing what you're doing at IQVIA. Thank you so much for what you're doing on behalf of the industry, especially for oncology patients. The work you're doing is really important and I don't know that it's always appreciated by folks who are out there because you do it behind the scenes and that you're having such a tremendous impact. So thank you and thank you for being part of our wow podcast program.

Kim: Taren, thanks so much for having me. It was great talking with you today.

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