NEW MARKETING APPROACH FOR HEALTHCARE PROFESSIONALS

The healthcare landscape is changing.
Are your brands keeping up?

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greyhealth group
Workflow is the medium that matters.

Electronic Health Records (EHRs) are now the dominant digital resource for HCPs, who use them more than twice as much each day than all other digital resources combined. Increasingly, messages and services not available in the HCP’s workflow get less attention.

Performance counts.

The majority of physicians are now employed or managed by a health system or ACO, creating a shift in focus on meeting quality and performance measures. The ACA and latest government guidelines sharpen the teeth of reporting requirements, and providers face “downward adjustment” if they fail to successfully report nine quality measures. These factors are changing the landscape for providers and require a new approach to marketing strategy that goes beyond traditional product differentiation.

This document summarizes important trends and effective new ways to adapt marketing programs to maintain engagement and relevance with healthcare professionals.
Optimizing your marketing programs for today's healthcare landscape

Enhance customer engagement with EHRs, the HCP's dominant digital channel

As a marketer, if your marketing mix represents an archer's target, the EHR is located right in the bull's-eye, at the intersection of HCP workflow, time spent, and point of care.

When you think about your strategic plan, the EHR is now a must-have. But how do you execute an effective plan in a highly fragmented EHR landscape? The key is to optimize EHR strategy to leverage EHRs and partners with the highest reach and most effective services.

3.3 hrs/day
Average daily HCP use of EHRs, more than double all other digital resources combined

80%
of US physicians use an EHR

85%
of US physicians are ePrescribing

82%
of HCPs want clinical and patient management tools in their workflow

520%
Average ROI for pharma-sponsored patient financial support programs in the eRx/EHR workflow

References: Manhattan Research, Taking the Pulse, 2015; Cognizant, 2015; CDC/NCHS, National Ambulatory Medical Care Survey and National Ambulatory Medical Care Survey, Electronic Health Records Survey; What Physicians Want and Need From Pharma 2013, CMI/Compass.
EHRs are now an effective engagement platform for marketers

Why should doctors have to dig around for the valuable services and information that pharma brands provide? The good news is that now they no longer have to.

For marketers seeking a practical way to deliver education, messaging, and support in the fragmented EHR landscape, there are new technologies and service providers available to make this process easy and effective. EHR aggregators, such as OptimizeRx, provide technology platforms that connect content and services seamlessly to hundreds of EHRs, and allow marketers to reach their customers with a variety of sponsored programs, including patient financial support, patient education/adherence programs, ePrior Authorization, clinical messages, and Clinical Decision Support alerts—all delivered right within the point-of-care workflow!

As marketers begin to leverage opportunities to sponsor programs in the EHR, HCPs no longer have to leave the workflow for the services they need, and brands achieve engagement with customers in the medium that matters most.

Provide the Information and Services Your Customers Need – Right at the Point of Care

- Patient Financial Support
- Clinical Decision Support
- Rep/MSL/Doctor On Call
- Patient Education
- Access & ePrior Auth
- Adherence Programs
What else is changing for the healthcare professional?

Doctors are becoming employees

Driven by changes in healthcare reform, providers are increasingly moving from private practice to employment in health systems or ACOs. This shift has made doctors employees who are required to follow the rules and protocols of their employers, and their time, while always in demand, is no longer their own.

63% of physicians are employed or managed by a health system or ACO

700-900 physicians move from independent practice to hospital/health system umbrella each month

101 million people approximately 2/3 of the nation's privately insured are part of a risk-based model

The new normal: sales force access is at an all-time low

In 2015, for the first time in 50 years, sales force access to healthcare professionals dipped below 50%. Only 20% of sales representatives were able to speak directly to the doctor, and more than a billion marketing dollars were wasted in “infeasible calls.”

Now more than ever, marketing plans must rely on non-personal communications to reach their customers. Targeting communications in the contexts that matter most to physicians will have the highest engagement and impact.

Reference: ZS Associates’ 2014 AccessMonitor Survey, based on data for more than 240,000 prescribers.

In 2015

**Less than 50%**

of sales force had access to promote to physicians

**20%**

were able to speak to the doctor

**$1–1.5 Billion**

amount of money pharmaceutical companies wasted on “infeasible calls”
High-risk patients represent risk to providers and health systems

More than 25% of US adults have multiple chronic conditions, posing a threat to the success of a health system.

Patients with multiple chronic conditions are at high risk for costly hospitalizations and procedures. Providers are well aware of the problem these patients present but are often challenged to identify empowered patients who will maintain a medication regimen and lifestyle behaviors that will result in improved outcomes.

High-risk patient populations represent an immediate opportunity for pharmaceutical companies to sponsor programs that improve outcomes and lower costs.

To maintain relevance and engagement with their customers, healthcare marketers must understand the changes that are occurring and participate in programs that meet the wider spectrum of needs of providers, health systems, payers, and patients.

New commercial models are forcing health systems to deliver better outcomes at lower costs

The disruptive healthcare landscape is transforming the industry from fee-for-services to pay-for-performance

As the primary target of healthcare reform, health systems are taking the brunt of the change requirements.

In order to meet new requirements, novel collaborative contracting arrangements are emerging between employers and health systems, like Boeing’s new contracts with Mercy in St. Louis, the Roper St. Francis Health Alliance in Charleston, South Carolina and the Providence-Swedish Health Alliance in Seattle (see article). A key component of these new relationships is to give health systems more control over every aspect of the healthcare journey, including formulary decisions, clinical prioritization, protocol integration, resource allocation, and cost management.

As health systems move toward performance-based vs fee-based models, healthcare professionals face increased pressure to meet both clinical and business imperatives.

As a result of the pressures, health systems and providers are therefore driven to be first to market with innovative ideas about how to improve the process and identify ways to have more control on their risk and success.

—David Nash  
Professor of Health Policy  
Jefferson School of Population Health

“Value Centric Care: No Outcomes No Income”

—David Nash  
Professor of Health Policy  
Jefferson School of Population Health
Population health initiatives are a growing trend

Driven by the need to reduce risk and manage chronic conditions, population health programs are quickly becoming a top priority for health systems to achieve better outcomes at lower costs.

- At the History of the Healthcare Information and Management Systems Society (HIMSS) conference in 2016, **>31 sessions were devoted to Population Health and Clinical Decision Support**

- For health systems moving into risk-based models, **becoming a high-control environment is critical to ensuring that providers and protocols align to maximize best outcomes at lower costs**

- Physicians and physician groups are organizing to become part of these health systems, and, in turn, forming Integrated Delivery Networks (IDNs) to become successful

Historically, pharmaceutical companies have had only a peripheral role in collaborating with health systems on population health programs. With health systems urgently needing to implement end-to-end solutions, **an opportunity has emerged for pharma to take an active role in collaborating and supporting these programs**. The value proposition creates a win-win that improves outcomes and lowers costs, while at the same time supporting appropriate use of the brand and its services.
Now is the time to get involved. Here’s why:

Aggregator services, like those provided by OptimizeRx, have created an **EHR channel** for marketing to achieve great customer reach and high-impact services.

Research has shown that **82% of HCPs want clinical and patient management tools in their workflow**.

The **ROI for EHR marketing is 520%**, on average, for patient financial-support programs, according to Cognizant, 2015.

**Healthcare reform and risk-based models are creating opportunities for willing collaboration** between pharma, health systems, and providers to improve outcomes and lower costs.

Reference: What Physicians Want and Need From Pharma 2013, CMI/Compass.
Core competencies and partnerships focused on innovation in EHR and population health

ghg is uniquely positioned to leverage the new paradigm for both providers and deliverers of healthcare. Our Expert Interdisciplinary Team includes digital strategists, health system experts, pharmacy experts, health economists, data analysts, and EHR channel partners with the ability to plan, execute, and measure successful programs.

• **A Holistic Approach to EHR**, Population Health, and custom Health System strategy, throughout the life cycle of the brand

• **Our Proven Track Record** of successfully helping clients hit the ground running at launch, prelaunch, or late-stage

• **Custom Programs**, like the work we are doing now with leading academic institutions and rural health systems to implement custom protocols into the HCP workflow

• **Strong ROI Results**, including an average of 5:1 ROI for EHR patient financial support, the highest ROI of any digital tactics measured, according to studies conducted by Cognizant

• **The Latest Trends and Industry Viewpoints**, like those shared in this document, available to you on-demand for free

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**Communication is the Cure.™**

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**Partnerships & Investments**

- **OptimizeRx**
  Leading EHR aggregator with network of 350 partner EHRs reaching over 300,000 doctors

- **PARx solutions**
  Leading provider of a concierge Prior Authorization service

- **IBM Watson Health**
  Co-development partner with revolutionary cognitive computing engine

- **RxWiki**
  Integrated platform in over 2,000 mobile pharmacy apps

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