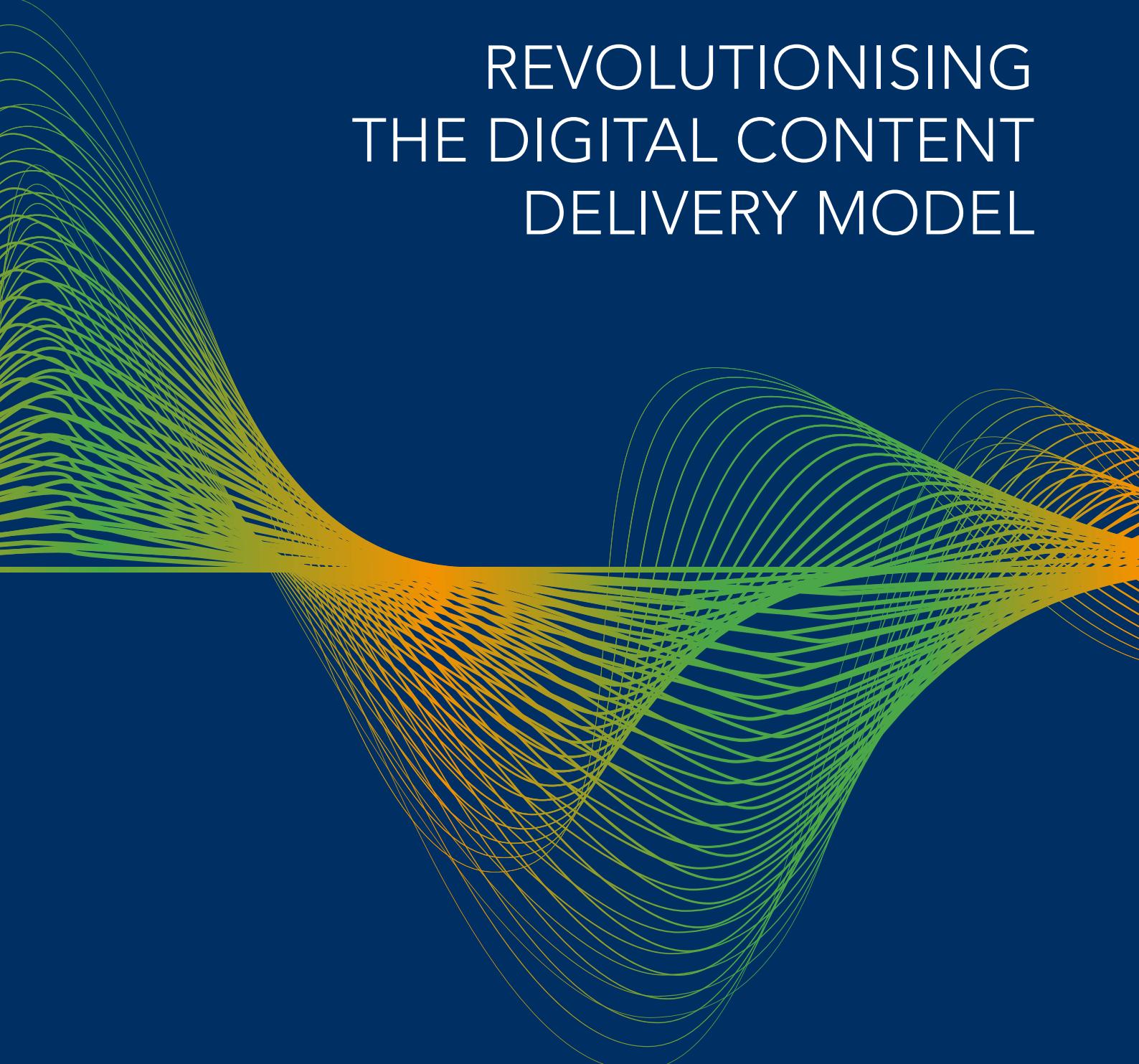


REVOLUTIONISING THE DIGITAL CONTENT DELIVERY MODEL



DEVELOPING A MARKET-LEADING STRATEGY AND PLAN

Pharmaceutical industry processes don't have to make the delivery of marketing campaigns slow and unmanageable, and thus ineffective. Changing working practices and really, truly thinking differently about how to deliver materials in a new and faster way is possible, but only if companies are ready to consider and embrace new, novel ways of working.

One company that has been innovating its marketing in the UK is MSD, as Merck & Co's operations outside the US and Canada are known. Taking an established women's health product in a traditional, noise-driven market, the company revolutionised its go-to-market model through a ground-breaking digital transformation project that saw it form a true partnership with its service partner M3, which operates the Doctors.net.uk online network of 230,000 UK doctors and recently celebrated its 20 year anniversary.

At a time when 'doing more with less' is a familiar refrain heard across many industries, there are ways that marketing can play to its digital strengths and deliver a return-on-investment, even as companies across the pharmaceutical sector become leaner and sales and marketing budgets face ever-greater pressure.

Despite these constraints, pharmaceutical companies are still producing high levels of content, whether for sales teams, congresses, digital channels, publications or market access. The challenge is to ensure that the content is timely, effective and can drive a return-on-investment.

In this whitepaper we will examine the theory behind developing a purely digital brand promotion partnership and look at a real-life case study of how to make a success of digital transformation within the pharmaceutical industry. In doing so MSD developed a market-leading strategy and plan for a maturing brand and forged an innovative way of reaching and engaging with doctors via digital channels.

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TRANSFORMING THE GO-TO-MARKET MODEL

In this time of diminished salesforces and reduced marketing budgets, pharmaceutical companies are struggling to gain, and maintain, a high share of voice. An effective way to overcome this challenge is through digital content that resonates and can be developed and deployed quickly and constantly.

But it's not simply a matter of using digital to replace off-line activities. The content also has to be capable of cutting through the online noise and for that a high-quality approach is key. If that can be achieved it can produce highly engaged customers.

M3 is one company where the axiom 'content is king' is truly embedded. Its sustained content investments have been the long-term driving force behind the wide and active audiences of doctors found within its online communities. So, the company was no stranger to the need for a regular flow of new, different, interactive and engaging content, underpinned by a long-term dissemination plan. It used these learnings to produce a digitally-enhanced engagement model that can be applied to the full marketing mix of promotional and non-promotional content.

It's an approach MSD was keen to apply to one of its mature brands. This product had previously been supported by the more traditional sales model of representatives generating face-to-face contact with healthcare professionals, supplemented by some digital interaction. But it was no longer working.

Emma Prosser, a digital lead in MSD's UK marketing team, explained: "With that model, we simply were not achieving the levels of interaction that we needed with our key customers. We weren't getting the share of voice that we needed; that was the first challenge we faced. On top of this, we know that our customers – and the market – are changing. Doctors are busier than ever and want to interact with us at a time and a place to suit them."



The company was looking to improve the profitability of this mature brand. MSD believed the brand still had some growth potential and knew its market was very competitive and promotionally sensitive, with two strong rival brands marketed by other pharmaceutical companies. So, it was vital for the company to be able to not just maintain, but increase, its reach and the frequency of contact with its high-potential target audiences in terms of how many interactions they had, the frequency of those against their competitors and how timely they could be.

This required a completely new working model, one that would transform MSD's standard way of working and see it swap a traditional salesforce-driven model for a purely digital brand promotion, one that would provide a new end-to-end approach.

"We knew that our particular type of customer responded well to digital contact," said Emma. "Our challenge was to move to a more digital go-to-market model, but we had a few restrictions with it internally. First of all, we didn't have that digital reach across our key customers. By that, I mean we didn't have permission to email them, an important point now that GDPR has come into effect.

"Secondly, we didn't have the internal capacity for a model like this. To achieve the sorts of levels of interaction that we needed, we had to have an approval process that would allow us to publish a lot of content, and we simply didn't have the capacity for that. That's why we moved into the partnership with M3."

The level of integration required between client and service agency was new to both partners. Tim Russell, VP, head of business

Demonstrating efficiencies due to close partnership



development at M3, explained: "This was the first time we have embarked on a project of this type, in terms of this level of engagement and the depth of partnership we needed to develop with MSD. We proposed a very intensive project; it was ambitious in terms of the amount of content that required approval, and the tight timescales that we would all need to keep to."

MSD's previous average timeline to approve one page of content was 75 days. For M3, its own standard timeline to produce a piece of content and put its medical writing and design through the appropriate review processes to get it approved was 42 days. M3 proposed streamlining the entire process so that it could launch 24 pieces of content within a 12-month period, meaning that every single piece of content would have to take on average just 12 days to plan, design, write, build, approve and disseminate.

"We knew that our particular type of customer responded well to digital contact. Our challenge was to move to a more digital go-to-market model."

"We knew we had to come up with something different if we were to fill the gap left by the sales reps for this brand," Tim said. "We also knew what our audience liked; in order to keep them interested we needed to provide them with new, interesting, high-quality content – the better the content the more engaged they would be and the more they would want to see. You wouldn't be able to feed this interest with a single piece of content or a small project that just ticks a digital marketing box, and that is why we developed such an intensive proposal for MSD. We challenged each other to deliver an unprecedented volume of content in order to create a real uplift in engagement, and that is what makes the project so impactful."

AN EMBEDDED CONTENT DELIVERY PARTNERSHIP

To make a substantial difference to MSD's marketing content lead times its work with M3 required a level of joint working rarely seen between a pharmaceutical company and its service sector partner.

Certain elements of the work were 'decoupled' or outsourced in their entirety to M3. "Both parties are invested in the success of the project," said MSD's Emma Prosser. "There are certain parts that we have decoupled to M3, such as the design, production and copywriting for the content that we require. But this partnership is about far more than just outsourcing. We are both involved in the strategic planning behind it, as well as the customer engagement model we follow."

In bucking industry trends around the digital go-to-market model, MSD placed a lot of faith in M3, as Tim explained. "The challenge for MSD, as it would be for any pharmaceutical company, was that changing a large organisation inevitably comes with a certain level of risk. MSD put a huge amount of faith in us as a business, trusting us to act on their behalf, to work compliantly and ensure all messaging was on brand and told the right story. They afforded us a great deal of autonomy, but in doing so freed us up to work more effectively and overall this really strengthened our relationship."

To achieve this and keep all parties up to date, MSD and M3 scheduled daily 'scrum' meetings and weekly calls to ensure that channels of communication between the pharmaceutical company and its service partner continued to be fully open and that they remained on track with the project's KPIs.

"We built this level of open, frequent communication into the partnership from the very beginning, so that as soon as there was a blocker or a problem, we could address it very quickly because we regularly had all key players in the same place. We could ask

questions and get those questions answered really quickly. That was key to the success of this project as well," said Emma.

Tim added: "In order to truly partner with MSD, we had to feel like we were part of the brand team. This was a very different approach to normal working principles and was driven by the fact that this project was a key priority for both businesses."

To this was added MSD's agile way of working – a concept that often means different things to different organisations. "The agile principles that we were striving to adhere to with this partnership was about



Process to achieve efficiencies



that rapid iteration of the content as part of our marketing approach. So, staying close to the data, then making changes to the content to increase engagement," Emma said.

By applying this approach, MSD's approval times for content, encompassing its conception, design, copywriting, approval and production, were indeed considerably shortened. As importantly, once created, the content could still be continuously refined to ensure that it met doctors' needs as well as MSD's business objectives.

Tim said: "This meant that we could employ user experience tracking, mouse tracking

and other tools to assess the impact of any given piece of content. It gave us the ability to quickly change and iterate content to maximise engagement."

"So, if mouse tracking or heat mapping showed that a particular call to action was not in optimal position, it could be changed, re-approved and re-launched within 24 hours," Tim said, noting that a crucial piece of the puzzle for the project was having a dedicated medical review and approval contact at MSD and that M3 in turn provided a dedicated project manager that was assigned to the project five days a week.

This allowed time-savings to be made at every single step of the delivery process, from copywriting to HTML build, medical and legal review to certification, shaving 67.5 working days off the total delivery time for a piece of content. As soon as one wave of content was being disseminated the testing and development of the next batch of content would begin, allowing continuous waves of content to be created, reviewed, approved and made live. All the while that this high frequency of contact with the target audience was being achieved, there were ongoing reviews to ensure alignment with brand guidelines and messages, and regular checks of results against the brand's KPIs.

ALIGNMENT OF GOALS AND PERFORMANCE INDICATORS

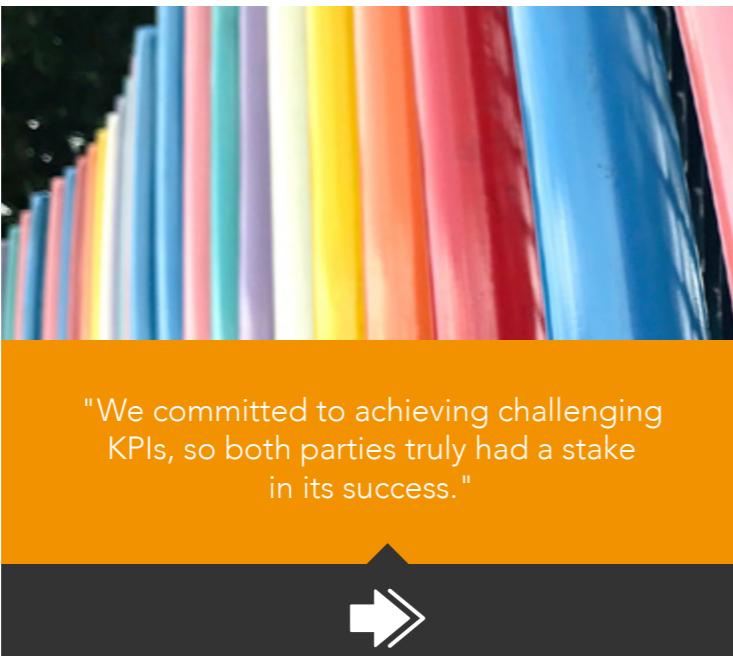
The level to which M3 was embedded in MSD was not the only unusual aspect of this digital marketing project. The companies also took the bold step of committing to an annual contract with industry-leading KPIs that they were contractually obligated to achieve.

To do this, the first year of the work focused on getting the initiative up and running as a proof-of-concept project. That has been fulsomely demonstrated and, with the project commissioned for a second year, attention has turned to incentivising the purely digital marketing approach and looking for a correlation between the activity and the brand's sales.

Tim said: "To ensure that we offered the best possible return-on-investment to MSD, in-line with their significant input of time and capital, we committed as a business to achieving challenging KPIs, so both parties truly had a stake in its success."

Emma explained: "The contract already included some get-out clauses, should MSD's KPIs not be met, as a way of ensuring both partners stayed really close to the data and knew at every step of the way whether they were on track or not. That was the key to the success of this partnership."

"There were quite a few KPIs that we now hold M3 accountable for, the lead one



being engagement metrics.

The business question that we addressed was can we increase the reach and frequency of interaction with our key customers, so that was the first thing that we measured.

"Secondly, were we changing behaviour? To be able to understand that we had to segment our customers based on their beliefs and their behaviours and then measure whether those interactions were actually changing based on these."

To facilitate that, M3 leveraged its medeConnect market research arm to analyse behaviour change. The campaign was evaluated at every step of the way with market research that assessed the perceptual shift among engagees and non-engagees. This longitudinal market research allowed MSD to see how doctors' perceptions of all the products within this marketplace had changed over time.



SEGMENTING CUSTOMERS AND MAPPING THEIR JOURNEYS

Once the project's foundations, including MSD and M3's cross-functional brand team, were in place, the first step was to segment MSD's customers. This was done based on their current usage of the product and then overlaying their beliefs and their behaviours. Then for each segment, desired beliefs and behaviours were agreed. With those in place the companies could decide what kind of content and messaging would be needed, and that could then be built into a journey for each customer segment.

Knowing MSD's customers and understanding what kinds of content each segment would need to see – and in what order to drive behaviour change – M3 produced a series of ideal customer journeys for the branded content. Those were then interspersed with some more high-value educational, non-branded content to assist with building trust among these customers.

"We worked very closely with MSD's customer engagement and brand teams to devise a clear customer journey for each of the different segments."

"We weren't just throwing some highly-branded material at them that could put them off or reduce our levels of engagement," Emma said. "We had four different target segments and four different customer journeys. We then tracked the progress of the customer through those journeys, based on the level of interaction they had with each piece of content."

In doing so MSD and M3 ensured that they followed the data, so that day-by-day, week-by-week, they knew at every step of the way through those journeys whether they were still on course. In doing so it was possible to make continual course corrections by, for example, reworking planned content or changing its order for better effect.

"We worked very closely with MSD (with their customer engagement team and the brand team), to devise a clear customer journey for each of the different segments," said Tim. "We then developed a content plan that would take them on that journey. This plan was of critical importance for the project, as the number of doctors completing this journey was a key KPI for the programme."

For the initiative's second year, the team is focusing on how to continue these journeys, over a longer period of time and keep the healthcare professionals even more engaged and involved.



A PROVEN PROOF-OF-CONCEPT

Already the digital transformation of MSD's go-to-market approach stands as a successful proof-of-concept project, one that maximises both reach and frequency to better engage with healthcare professionals.

M3 has reduced MSD's standard review process for marketing content from 75 days per piece, ensuring that one piece of content was created and approved every 7.5 days across the whole year. In doing this MSD found it achieved the same level of reach within six weeks of this new model, that it achieved in a full 12 months of working traditionally. It's just an early indicator for the work but, for MSD, it demonstrated that the new model worked as planned. Moreover, it's not just time that MSD saves by following this digital content delivery model.

Every time a doctor engages with a piece of content that has been developed by a pharmaceutical organisation there's a cost. Sales representative costs vary, according

to whether a primary care rep is used as opposed to a very experienced one in oncology, for example, but typically rep costs are in the range of £120-150 per interaction, or sales call. Within this project M3 was ultimately able to deliver a piece of content to a doctor for less than £10 – a vastly reduced cost-per-engagement and a far more cost-effective approach when targeting GPs and additional specialties.

Representatives' face-to-face interactions allow different types of dialogue with healthcare professionals, which viewed in isolation can be seen as being more valuable but they lack the reach and frequency, not to mention the cost-effectiveness, that digital channels can provide.

MSD's application of the digital content model saw each of its target doctors have sight of 8-10 pieces of content per year, with lower associated costs and higher return-on-investment than would be possible with traditional marketing channels. Digging deeper into the results achieved by M3 shows just how efficient using an alternative marketing channel to sales representatives can be, providing a lower cost-per-engagement, higher frequency of contact and much improved content satisfaction and recognition rates.

The first eight months' worth of market research by M3's medeConnect division shows that all but one of MSD's key customer segments for its established brand have



MSD's brand engagement and prescribing analysis

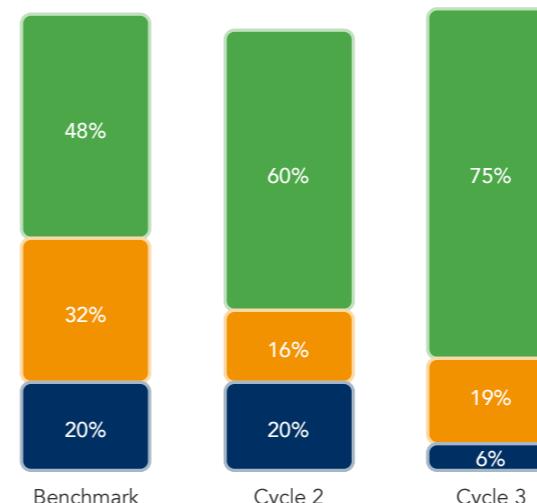


Longitudinal analysis

Q1 Which of the following statements best describes your familiarity with the following products?

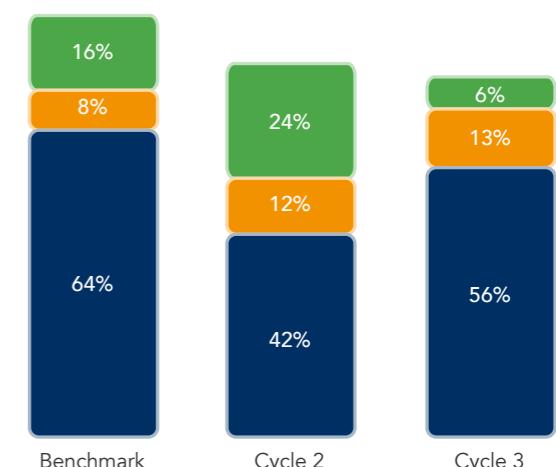
- I regard it as one of my standard therapies for the majority of my patients suitable for this type of treatment and I'd recommend it to colleagues
- I regard it as one of my standard therapies for the majority of my patients suitable for this type of product
- I regard it as one of my standard therapies for a subset of patients suitable for this type of product

MSD's brand



3 in 4 targeted GPs will advocate MSD's brand to colleagues

Competitor



Base: GPs n=25

changed their beliefs and their behaviours. But the really exciting results that came back were those that identified the impact of applying the digital content delivery model on the brand's sales.

MSD saw increased intention to prescribe, advocacy and referral rates for its brand. Only early sales figures are currently available, but they indicate an increase in prescribing between those who have engaged with M3's content versus those who haven't.

It's clear that, for the project detailed in this whitepaper, the complete replacement of the sales team worked well, given the particular needs of MSD's brand. However, the model can also be applied to other scenarios.

"Each of MSD's target doctors have sight of 8-10 pieces of content per year, with lower associated costs and higher return-on-investment than would be possible with traditional marketing channels."

These could include, where a sales team is being reduced, but not entirely replaced. In that case the approach could be used in areas where they no longer have coverage, and to complement those areas with ongoing rep activity (therefore maximising frequency of contact in the areas of highest potential for the brand).

Other options would be for when a sales force remains, but the brand team has to increase frequency and share-of-voice, or where a sales team is unable to see all of those involved with, or influential to, prescribing decisions.

CONTENT MARKETING WITH IMPACT FOR PHARMA

By revolutionising digital marketing content lead times and dramatically increasing MSD's reach to, and frequency of contact with, its target doctors, M3 has broken new ground for pharmaceutical marketing. It has proved that there is an effective alternative channel to sales representatives and that digital content can be used for fast-paced, manageable and effective marketing campaigns. It has also shown that new ways of working are possible if both sides commit to it in the spirit of true partnership.

When they do, the use of the digital channel on its own can change behaviour through impactful, targeted content and, more importantly, the early signs are positive that there is the potential to achieve the ultimate expression of return-on-investment: a clear, tangible sales increase.

As detailed in this whitepaper, the model was applied on a bespoke basis to meet MSD's strategic aims for one particular brand, but as a blueprint for revolutionising the delivery of digital content it is eminently

transferable to other therapy areas and target segments of doctors. It could even be used to complement sales representative activity, adding additional depth and frequency, or as a replacement for sales representatives in certain areas or for certain types of doctors.

As a genuinely new model for the pharmaceutical industry to maximise the impact of content, by keeping it new, engaging and highly-targeted to its intended audience, the first steps taken with this project are just the beginning.

"As a blueprint for revolutionising the delivery of digital content this model is eminently transferable to other therapy areas and target segments of doctors."



M3 - Creating Connections, Improving Healthcare

M3 is the world's largest network of verified doctors with 4.5 million members across key markets; our closed, local communities of doctors are trusted by our members as places where they can reach content relevant to their profile and geography. These communities include Doctors.net.uk in the UK, Vidal in France and m3.com in Japan and offer clients a unique opportunity to communicate with doctors. M3's deeper engagement model enables clients to build lasting and effective relationships with their target doctors. Through market research and precise profiling capabilities M3 can provide an in-depth understanding of target audiences, ensuring that all messaging is shaped for maximum effect. This bespoke content can be localised, translated and delivered according to compliance regulations in each of our communities. Using its analytics capabilities M3 can provide insights, demonstrate campaign impact and prove return on investment.

M3 is committed to its mission to use technology to help people live longer, healthier lives and reduce costs in healthcare.

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Tim Russell

An experienced international marketer, Tim has spent over 20 years in the pharmaceutical industry. For the last five years he has worked for M3, connecting clients with doctors in its online communities. He is passionate about offering compelling solutions that meet clients' commercial objectives and offer clear and tangible value.

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Emma Prosser

Emma Prosser is a digital lead in MSD's UK marketing team. Emma has a wide range of experience having worked in the pharmaceutical industry for the last 23 years. She has enjoyed success in sales, market access, marketing and management and is passionate about innovation in marketing and taking an omnichannel approach.