Pharmaceutical Brand Management
“Achieving Managed Care Pull-Through Performance”
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Pharmaceutical Brand Management

Healthcare Marketing
Overview

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Introduction

- Effective managed care pull-through enhances prescription Plan performance as formulary compliance leads to:
  - Lower copays for patients
  - Less service issues for patient, physician, pharmacist and Plan from non-preferred agents being dispensed
  - More immediate/consistent rebate returns for Plan
  - Strategic advantages for pharmaceutical manufacturers
Introduction

• Your Brand is seeking share through prescriber choice based on Brand/clinical attributes and managed care access.

• An incumbent agent wants to expand its share at your Brand’s and former co-preferred agent’s expense.

• A former co-preferred agent is trying to preserve its share.

• Your Brand and its new formulary status seek physician attention, so are non-competitive agents also promoting their preferred status and managed care access.
Introduction

• Multiple stakeholders are involved:
  – Patients
  – Physicians
  – Pharmacists
  – Plan Sponsors (Employer, Medicare, Medicaid, TRICARE, etc.)
  – The Plan (CMS, MCO and/or PBM)
Some Plans limit or do not engage in pull-through initiatives with pharmaceutical manufacturers

- They believe claims processing edits and communications sent via their formulary bulletins to physicians and pharmacies are adequate

- Some Plans do not want to appear to be “partnering with pharma” by implementing assertive pull-through initiatives
Managed care entities will evaluate the Brand according to:

- Clinical performance/care and cost outcomes
- Impact on their patient/member populations
- Brand, multi-source and generic competitors
- Managed care value proposition
- Contracting arrangements (price, rebate, etc.)
Introduction

- PBMs owned by Plans usually follow the yes/no pull-through policy of their parent

- Independent PBMs will set their own pull-through rules when supporting patients, clients and pharmaceutical manufacturers

- Unless the Brand is unique in its indication with no competitors, pull-through measures are necessary

- Plans and pharmaceutical manufacturers mutually expect greater performance through price negotiations, rebates and preferred formulary positions
Does your Plan account for all stakeholders?

Does the Brand have a managed care identity?
• Pull-through measures must be accounted for during negotiation of the formulary contract

• Methods/timelines need to be specified:
  – Patient/member communications
  – Coverage/claims processing edits
  – Physician communications (via Plan and pharma sales representatives)
  – Pharmacy (retail and mail order)
  – E-mail/Internet communications
  – Programs/services provided via the Plan
• Communications to physicians and patients/members are part of due course of business for a Plan:

  – In some cases, it may not be legal to pay a Plan to issue patient, physician and pharmacist communications

  – Assign fair market value when paying for any actions or distribution of material the Plan undertakes on behalf of the Brand outside of due course of business

  – Consult counsel for guidance regarding payment to a Plan for pull-through activity and compliance matters
• If your Brand is sharing preferred status with another agent, use of certain pull-through measures may be limited due to legal constraints:

  – The Plan’s communication of your Brand’s new status may/may not contractually disadvantage the other preferred agent(s) on the formulary so certain initiatives will require further legal review before implementing

  – Most field-based initiatives carried out by the new preferred Brand are exempt from these issues
Legal parameters differ according to methods and state laws

Include Pull-through as part of the negotiated contract
• Assess Plan according to its degree of formulary control:
  – Those with least control will require more resources to steer formulary compliance and conversion to your Brand
  – Those with high control may offer greatest potential for solid results but may negotiate greatest concessions from pharmaceutical manufacturers
• Work with the Plan to determine where their primary geographic concentrations of patients/members are
Planning

• Analyze internal market data to define business opportunity:
  – Number of sales representatives/districts impacted
  – Number of high prescribers in Plan’s geographic areas
  – Present share and expected increase from new formulary status and pull-through initiatives
  – Market position and strength of direct/indirect competitors
Planning

• Strategic physician targeting is critical

• Regionalize focus and deployment of resources if possible

• Based on the Brand’s budget and the specific business opportunity, assign a pull-through budget based on ROI:
  
  – Do not over allocate resources, keep them aligned with forecasted ROI
  
  – Determine what the impact of the initiative is to your Brand goals and corporate objectives
Segment the Plan and market, align potential to Brand and corporate objectives.

Allocate pull-through resources according to forecasted ROI.
Determine primary methods the Plan uses to communicate formulary changes to physicians and pharmacies:

- Maximize communications through these conduits as physicians are used to receiving them from the Plan/PBM
- They may include electronic and/or print communications to physicians and pharmacies in their provider networks
Engage the Plan to issue at least 2 initial communications to physicians regarding your Brand’s new preferred status:

- Initial communication to physicians should be about 2-4 weeks in advance of start date, if done earlier, physicians may not recall it.

- A reminder message should be issued closer to actual effective date of formulary change.

- A combination of email and print communications should be used in each instance.
Some Plans limit the length of time new Brand formulary status is communicated, 1 year is a reasonable timeframe.

After the start phase, at least 3-4 different formulary communications should be issued over the first 12 months.

One at launch date, then 2-3 issued at intervals over the next several months.

Provides for continually sustained promotion of the Brand and its preferred formulary status in the marketplace.

The Brand is able to promote multiple attributes/indications over course of pull-through series.
Professional Communications

- A series of messages reinforces Brand presence in practices while lessening profile of competitive agents

- Physicians are informed of multiple attributes combined with patient/physician access benefits

- Sales representatives are adequately equipped with tools to maintain momentum of the pull-through initiative

- Formulary announcements may also be featured and alternated at the Brand’s website in sidebar displays to correspond with what is presently issued in the field
Professional Communications

- Each one will feature a Brand/clinical message and Plan formulary status
- Use both sides of printed pieces whenever possible
- Different dimensions may be used for distinct promotional purposes
- A clinical message requires an indication be printed on piece and be accompanied with a PI
- Certain clinical studies may have direct relevance to certain indications communicated and add further value
In letters and formulary announcements to physicians keep the messaging focused:

- Key Brand message
- Clinical message
- Coverage status message
- Feature the Plan and your Brand’s website addresses
Featuring your Brand and incumbent’s co-preferred status is option of last resort for communications issued by your company:

- Incumbent agent has already positioned itself within formulary, has existing volume/share

- Your Brand is establishing itself and seeking to gain share from incumbent and former co-preferred agent

- During contract negotiations, seek an exclusive time period of at least 6-9 months to promote only your Brand in your print and internet communications
• By some Plans wishing to avoid perception of “partnering with pharma”, Brand aesthetics may have to be minimized.

• To minimize content, formulary announcements may feature coverage status message coupled with the Brand’s logo and product or packaging images along with website addresses.
  – If no claim is featured using this option, an indication will not have to be printed on formulary announcement nor will a PI be required.
• Approved formulary announcement bulletins printed by sales representatives are serviceable reminder items:
  
  – They serve as “quick hit” tools in physician calls and are highly economical

  – If they are issued via print-ready PDFs, they can be changed periodically over the course of the initiative

  – They may have content limitations and can not carry a clinical message unless the copy features an indication and it is delivered with a PI
Professional Communications

• Formulary announcements or letters may also be distributed with sample cases shipped to doctor’s offices or mailed to physician separately coinciding with sample request

• Clinical sales aids allow for a sale representative to have a more in-depth conversation with a physician featuring 2-3 Brand attributes coupled with a formulary status message

• Clinical sales aids featuring formulary status, Brand/clinical messaging and detailed product attributes will require an indication to be included in the copy and a PI
Avoid:

- “Fax blasting”
- Over-deployment of resources to areas where the preferred access is not significant
- Over-fortifying individual communications resulting in access and Brand/clinical messages diluting one another
- Complacency in believing Plan measures will accomplish share goals as competitive activity is always present
Deliver an ongoing series of clinical attributes and access benefit messages.

Reinforce Brand identity, feature product images in Pull-Through communications.
Supporting Measures

- Electronic formulary communications are essential to pull-through initiatives

- Physicians increasingly rely on electronic means of getting information, maintaining patient records and managing their practices
  - Ease of access and up-to-date information is important
  - Stronger incentives by Medicare and commercial Plans for their use to lower costs and streamline prescription data collection and maintenance
• MediMedia and FingerTip formulary data are adjunctive tools augmenting the Plan’s and pharmaceutical manufacturer’s central pull-through activities:

  – They serve as autonomous reference sources to determine managed care formulary status

  – Not all Plans permit their names to be published in them

  – Many Plans provide this information to physicians directly or through their website
Supporting Measures

• Accessory pull-through measures may augment the Plan’s patient communications:
  
  – Patient prescription savings cards specific to the Brand distributed in key physician offices in primary patient/member regions
  
  – Closed-circuit television ad media in physician offices
  
  – Communications to large groups by the Plan and/or pharmaceutical manufacturer via employer initiatives
Formulary referencing is evolving due to technology and industry need.

E-prescribing and electronic formularies are industry mainstays.
Pharmacies

- Communicate the Brand’s new preferred status to retail pharmacy providers for coordinated effort with their store units, particularly in markets with high Plan member concentration.

- PBMs are proficient with communicating formulary status to their retail pharmacy network providers.

- Most national chains centralize internal communications at the corporate level to notify their pharmacies of significant Plan formulary changes.

- In certain instances, pharmacies see opportunity during formulary changes to switch patients from a former preferred agent to a “cash and carry” generic.
Pharmacies

- For maintenance medication, mail order conversions are critical for your Brand

- They represent immediate, ongoing volume dispensed in approximately 90-day increments to individual patients

- Mail order programs are fortified with clinical staff and claims processing system edits to facilitate conversion of prescriptions to new preferred agents
Pharmacies

Most Plans/PBMs offer clinical programs/services:

- Brand-to-Brand interchanges
- Claims processing system edits
- Employer communications
- Patient communications
- Physician detailing
- Prior authorization
- Step therapy
Pharmacies

- Plan support varies by complementary and paid services to support pharmaceutical manufacturer initiatives
- Data reporting is critical to monitor the Brand’s performance
- Some programs may provide support on a national basis, serving as gap fillers
- Programs which may be regionalized offer reinforcement in key markets
- There is potential to develop your own program with the Plan/PBM which may be disease-specific to fully fortify the Brand’s position
Pharmacies

- Plans and PBMs offer a host of complementary and paid services to support pharmaceutical manufacturer initiatives.
- Data reporting is critical to monitor the Brand’s performance.
- Some programs may provide support on a national basis, serving as gap fillers.
- Programs which may be regionalized offer reinforcement in key markets.
- There is potential to develop your own program with the Plan/PBM which may be disease-specific to fully fortify the Brand’s position.
There is potential to develop your own clinical program with the Plan/PBM:

- It may be disease-specific to fully strengthen the Brand’s position and be proprietary in nature

- The Brand may align to clinical programs and patient care initiatives already in place

- Its preferred status and addition to the program may enhance fortification of what the Plan has underway
Pharmacies

- Depending upon your Brand’s 2\textsuperscript{nd} or 3\textsuperscript{rd} tier formulary position and its status versus generics, mail order programs may support your initiative or work against it:

  - Your Brand’s focus should be on gaining share within its category against its direct competitor(s) whether they are on the Plan’s formulary or not

  - Plans seek to deliver an optimum balance for patients and their clients between generic utilization and preferred Brand formulary compliance
Pharmacies

- Overall, what cumulative support does the Plan and/or mail order provider offer which provides the Brand with a competitive advantage?

- Engage only the paid programs which specifically augment your pull-through initiative

- Monitor performance of complementary and paid programs
If the Brand is a maintenance medication, mail order pharmacy performance is pivotal to your Brand’s success.
Patient Communications

- Determine primary methods the Plan uses to communicate formulary changes to patients:
  - Maximize results through these means as Plans typically have well-fortified patient communication SOPs
  - These will include electronic and/or print communications to patients, their employers and other associated entities such as Third-party administrators and employee benefit consultants
Patient Communications

- Typically, the Plan issues letters to patients notifying them of formulary change and the necessity of having their physician change their prescription to be formulary compliant.

- It is important to verify with the Plan:
  - Patient communications are sent prior to formulary change.
  - A subsequent one sent to patients whom are still non-formulary compliant 4-6 weeks following the Brand’s new preferred status activation – and a third one to those still non-compliant 6 months after the change.
There may be limited opportunities to issue promotional material to patients via mail order provider after special review/approval:

- Material must be specific to formulary changes
- No exchange of patient identity involved (HIPPA), materials are provided to Plan, directly to mail order provider or outside fulfillment center for distribution
- Some state laws prohibit all such activity, seek legal counsel to remain within compliance
Patient and physician Pull-Through communications are of equal importance.

New Plan members and established patients getting new prescriptions represent opportunity.
• Physicians increasingly engage online sources for professional dialogue, clinical information (including drug coverage status) and other applications:

  – Depending upon the particular Plan, Epocrates is a key application to transmit formulary status to reach doctors

• There are numerous social media venues worth piloting to communicate the Brand’s preferred formulary status

• Depending upon the Brand and indications, basic access messaging can be executed via sponsored blogs, disease-focused venues and other options applying to physicians and/or patients
Depending upon the Brand and its treatment segment, basic access messaging can be executed via sponsored blogs, disease-focused venues and other options applying to physicians and/or patients.

Regionalization and tracking may be difficult to accomplish unless interactive response, hits and specific re-direction to a Plan’s or your Brand’s website may be quantified.

Wide, undefined pull-through messaging opportunities are available in social media with growing potential as venues evolve according to user needs and preferences.

Keep the message simple, focus on access/formulary status – indications/clinical applications involve PI content which may not be accommodated by certain Social Media venues and this could result in FDA and/or compliance issues.
Social Media

• Patients and physicians increasingly rely on web-based communications and sources of information for Brands to be present in

• Choose specific venues to deploy resources in which can be measured for reach, frequency and performance

• Monitor activity carefully and be prepared to discontinue and/or reallocate messaging resources to developing venues

• Maintain a well-fortified Brand website for all stakeholders to access
Social media represents an evolving channel of Brand and Pull-Through messaging.

Social media Brand promotion and Pull-Through measures should align to FDA promotional guidelines.
Field Communication

• As pull-through communications are released, sales representatives should maintain a consistent, high level of Brand clinical/access messaging to physicians

• Sales representatives should be focusing on their highest prescribing physicians and seek to gain share not only from the outgoing agent but from the incumbent agent(s) as well

• Incumbent competitor activity should be closely monitored and countered as appropriate to minimize their gain from the change in formulary opportunity
Field Communication

• The Brand’s managed care sales executive responsible for the initiative should:
  
  – Coordinate ongoing patient, physician and pharmacy communications from the Plan up to/after effective date
  
  – Collaborate with district managers, sales representatives and medical liaisons in key markets
  
  – Monitor activity of complementary and paid Brand conversion programs conducted by Plan/PBM
  
  – Cultivate executive involvement with the initiative for cohesive marketing and sales support tactical execution
What are competitors doing to get more share?

Brand marketing, managed care and field sales collaboration are required.
Summary

• Pull-Through benefits all key stakeholders, be sure to feature it through communication/promotional initiatives in the formulary contract agreement

• Fortify the Brand’s position from a clinical and cost perspective for patients, physicians and managed care stakeholders

• Assign resources by target area, initiative potential and ROI

• Combine Plan/Brand resources to develop communications for effective reach to all stakeholders
Summary

• Provide physicians a steady stream of clinical and access messaging throughout the Pull-through initiative

• Use established and new approaches to gain access to physician mindshare

• Be actively involved throughout process to strengthen performance of the Pull-Through initiative and minimize competitive countermeasures
Go to:


for ongoing business and clinical healthcare industry resources