



**HCP  
ENGAGEMENT  
END-TO-END  
CONTINUUM**

# Objectives

- **BACKGROUND – TRANSPARENCY IN HEALTHCARE CONTINUES TO GROW**
- **HEALTHCARE PROFESSIONAL ENGAGEMENT SURVEY RESULTS – 39 COMPANIES PARTICIPATED**
- **ADDITIONAL BENCHMARKING – SPEAKER PROGRAM CANCELLATION, MEAL LIMITS AND PATIENT FMV**

## YOUR PANELISTS

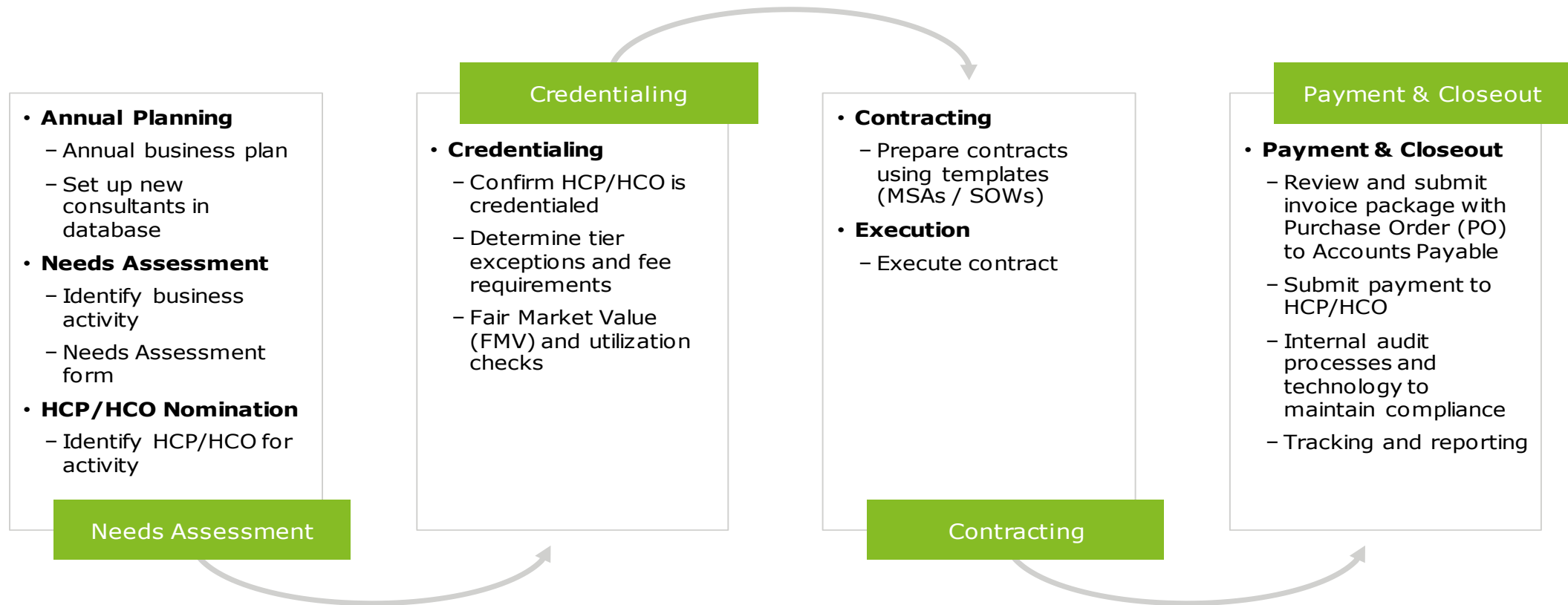
**Bryan Timer, MS**, Director, Data Analytics & Transparency, Merck & Co., Inc.

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**Mark Linver, MS**, Managing Director, Deloitte & Touche LLP

# End-to-End Healthcare Professional Engagement Survey

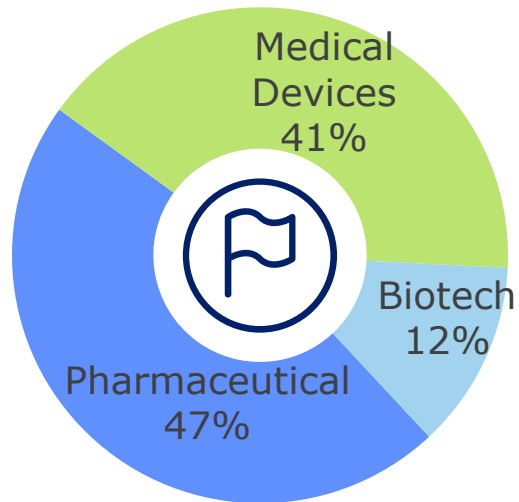
**For purposes of this survey and this presentation, the End-to-End HCP Engagement process is defined below.**



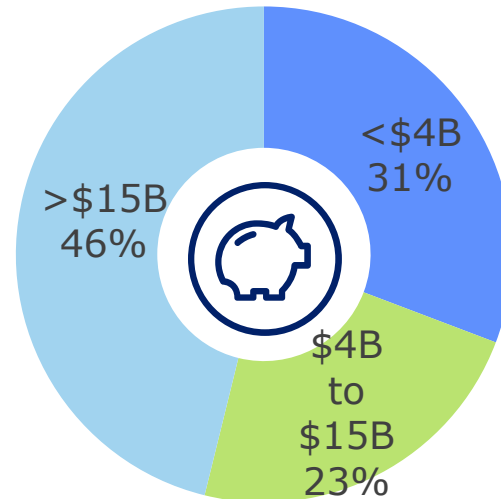
# End-to-End Healthcare Professional Engagement Survey

The objective of the survey was to better understand industry practices for managing the End-to-End Health Care Professional (HCP) engagement process. The survey received 39 valid responses from across the life sciences industry. Respondents were representative of compliance, operations, contracts, and legal functions.

## Primary industry



## Market capitalization



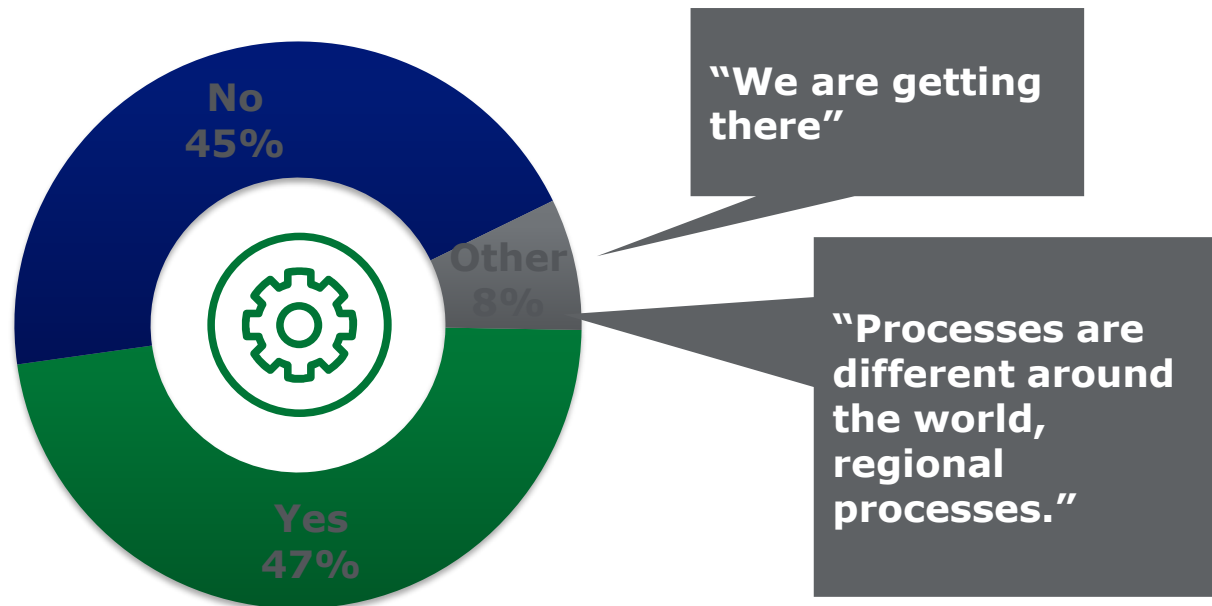
## Global presence



Responding organizations reported operating in 1 to 160 countries and beyond. Most respondents were global in nature, with operations between **30 and 90 countries**. More than half of respondents indicated that their compliance role was global.

# End-to-End Healthcare Professional Engagement Survey

**Survey question:** Do you have consistent processes and technology for HCP Engagement across all regions?



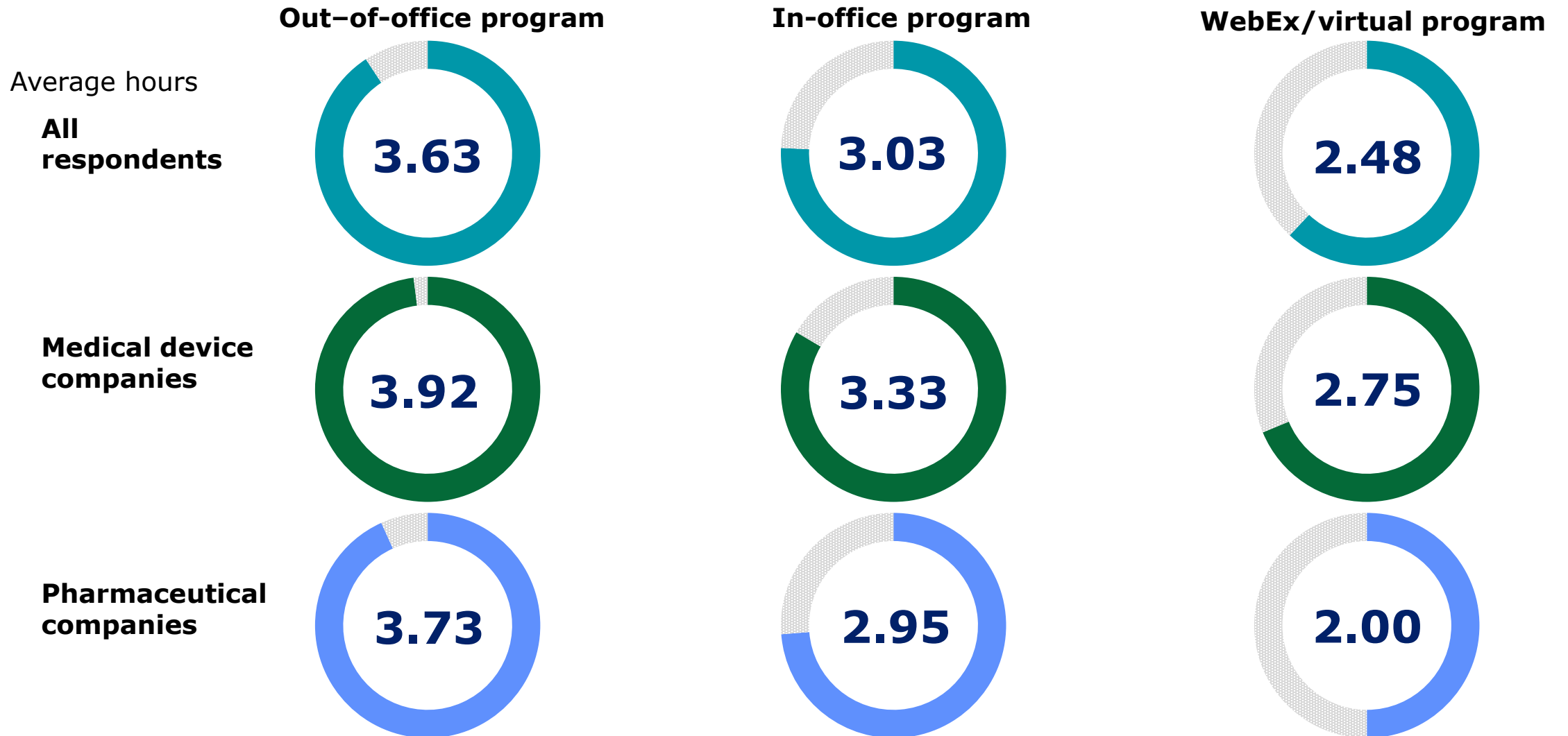
# End-to-End Healthcare Professional Engagement Survey

**Survey question:** How frequently do you review your speaker roster, utilization and contract status of speakers?



# End-to-End Healthcare Professional Engagement Survey

**Survey question:** If applicable, what is the average level of effort/time taken by speakers for the below speaker programs including preparation and service time (in hours)?



# What function owns your company's HCP engagement process?

COMPLIANCE/LEGAL

COMMERCIAL

FINANCE

MEDICAL

MULTIPLE FUNCTIONS OWN DIFFERENT PARTS OF THE HCP ENGAGEMENT PROCESS

DONT KNOW



# End-to-End Healthcare Professional Engagement Survey

**Survey question:** What part of the organization is primarily responsible for completing the below HCP engagement activities?

## Number of responses



Activities	Compliance/ Legal	Commercial	Finance	Medical	R&D	Other*	Not Applicable
Needs Assessment / Business Rationale	4	21	0	2	0	12	0
HCP Selection from approved list	2	18	0	2	0	13	4
Do Not Use List / Debarment / OIG Watch List	20	6	3	0	0	8	2
Fair Market Value Determination	28	3	2	2	0	5	0
HCP Tiering Determination	15	6	2	10	0	7	0
Contracting with HCP	6	9	1	2	0	19	1
Consent Collection	7	10	0	1	1	13	7
Event Planning (Logistics/Travel for HCPs/etc.)	1	14	1	3	0	18	2
Event Reconciliation (capture sign-in sheets)	2	18	1	2	0	14	3
Confirmation of Service Completed (proof of performance)	3	15	2	2	0	15	1
Payment to HCP	2	7	21	1	0	8	1
Reporting of Payment to HCP	22	4	5	1	0	6	1
Post-event Reconciliation	2	12	2	3	0	16	4

# End-to-End Healthcare Professional Engagement Survey

**Survey question:** Are HCP engagement processes supported with an application/tool or supported manually?

## Number of responses

Activities	Off the Shelf Software	Custom Software	Spreadsheet	Manual	Other	None
Needs assessment / business rationale	7	7	11	11	3	0
HCP selection from an approved list	6	9	4	10	5	6
HCP screening do not use list / debarment / OIG watch list	12	8	2	10	4	3
Fair Market Value	11	8	11	6	4	0
HCP Tiering Determination	8	7	8	16	1	0
Contracting with HCP	14	7	0	17	2	0
Consent collection	6	4	1	20	1	7
Event planning (logistics, travel for HCPs, etc.)	8	5	2	16	7	1
Event reconciliation (capture sign-in sheets)	5	5	0	21	5	3
Confirmation of service completed	6	7	0	20	3	2
Payment to HCP	19	10	0	9	0	0
Reporting of payment to HCP	12	14	0	9	4	0
Post event reconciliation	5	8	1	19	2	3



# When does your company plan to automate the HCP engagement continuum?

In 1-2 years

In 3-4 years

We are already automated

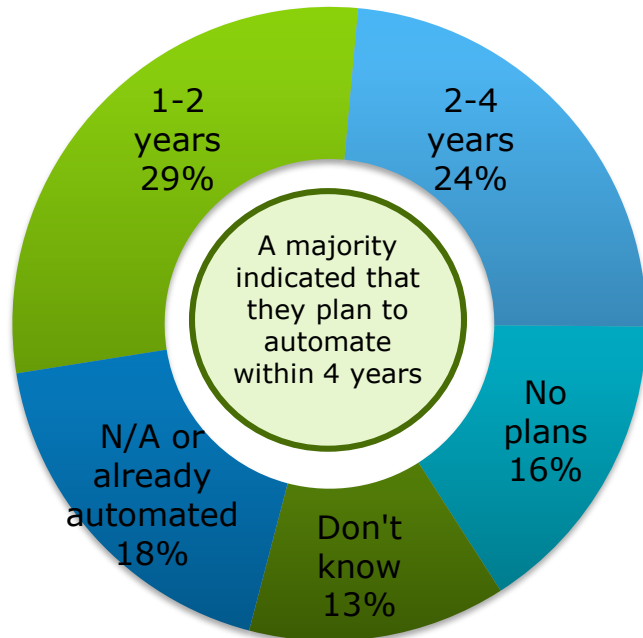
No Plans

Don't Know

# End-to-End Healthcare Professional Engagement Survey

**Survey question:** If partial/no automation, does your company have plans in place for an automated end-to-end process in the future?

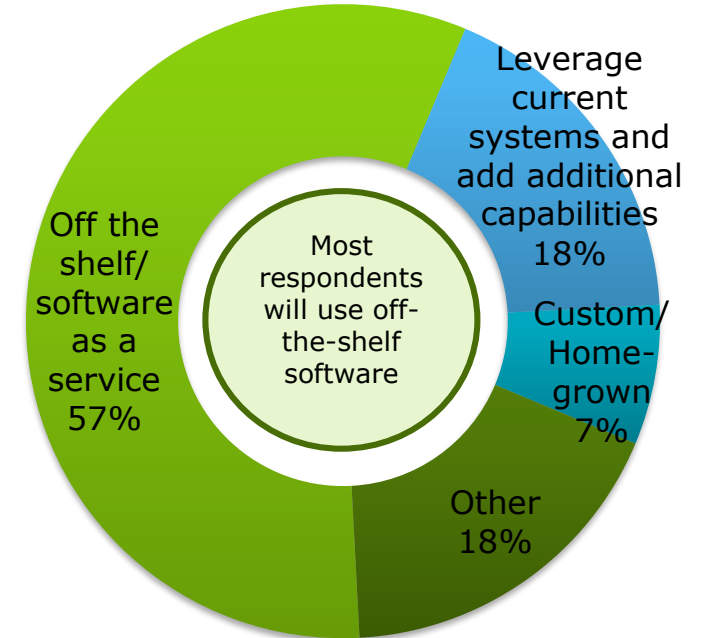
**Survey question:** If there are plans to automate an end-to-end process, what solution is the company's preference?



**Automation plans by company size**

Company Size	Planning to automate within 4 years	Don't know or no plans	Already automated
<\$4B	4	7	0
\$4b to \$15B	4	2	1
>\$15B	11	2	5

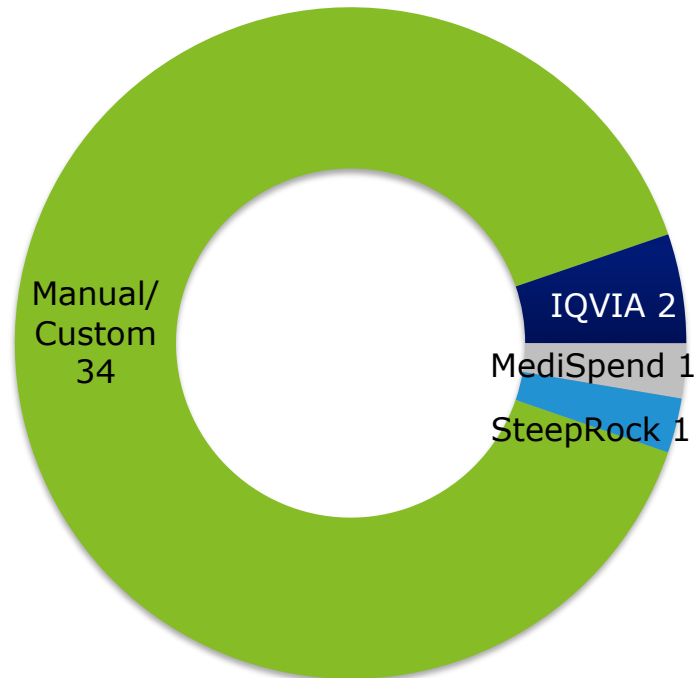
- **50%** of small- and mid-cap companies reported plans to automate within 4 years. One is already automated.
- **89%** of large-cap companies reported plans to automate, or are already automated.



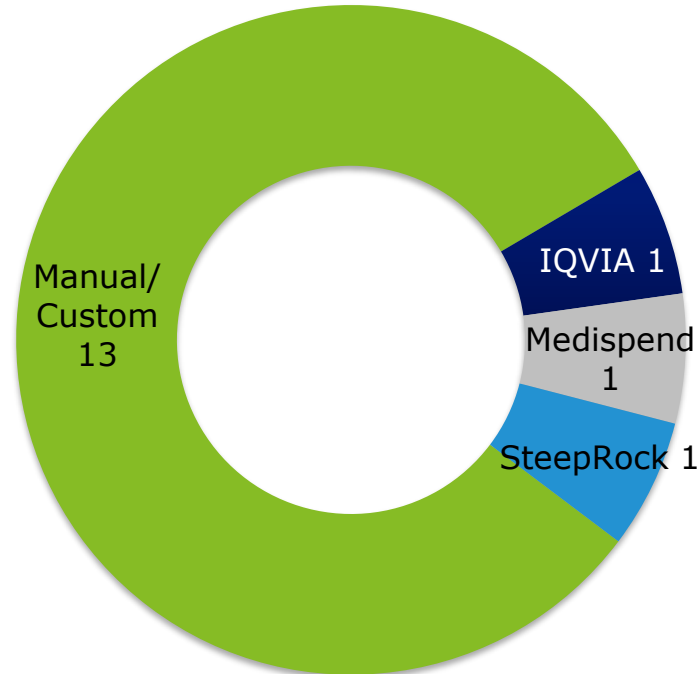
# End-to-End Healthcare Professional Engagement Survey

**Survey question:** Are HCP engagement processes supported with an application/tool or supported manually? If 'off-the-shelf software' or 'other' selected above, please explain

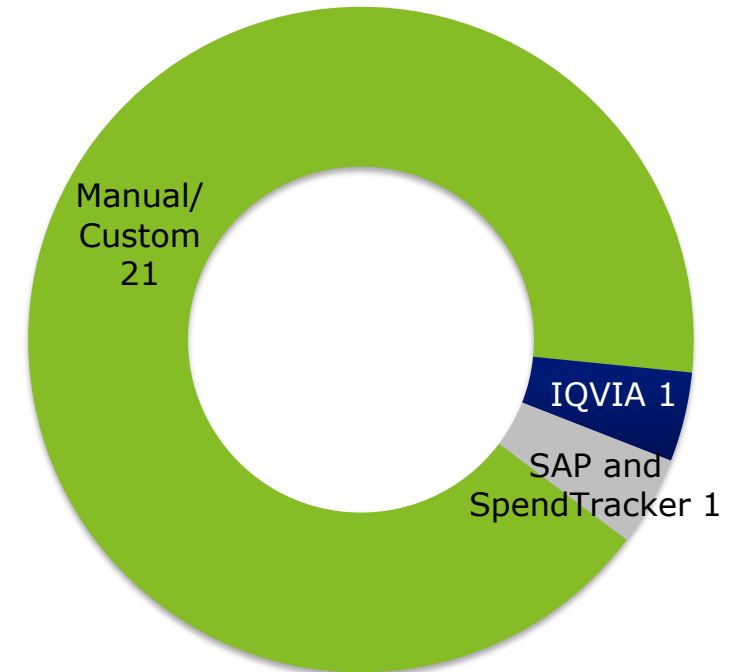
**All respondents**




**Medical device companies**




**Pharmaceutical companies**





# What is your biggest challenge with the HCP engagement process



CONTRACTING

EXECUTING CROSS-BORDER ENGAGEMENTS

GAINING APPROVAL FOR FMV

HCP MASTER DATA

PAYING HCPs ON TIME

USABILITY OF THE SYSTEM

Other

# End-to-End Healthcare Professional Engagement Survey

**Survey question:** Please rank what do you consider to be the most challenging aspect of the end-to-end HCP engagement process. (1=most challenging and 7=least challenging)

## Three most challenging aspects for respondents

1

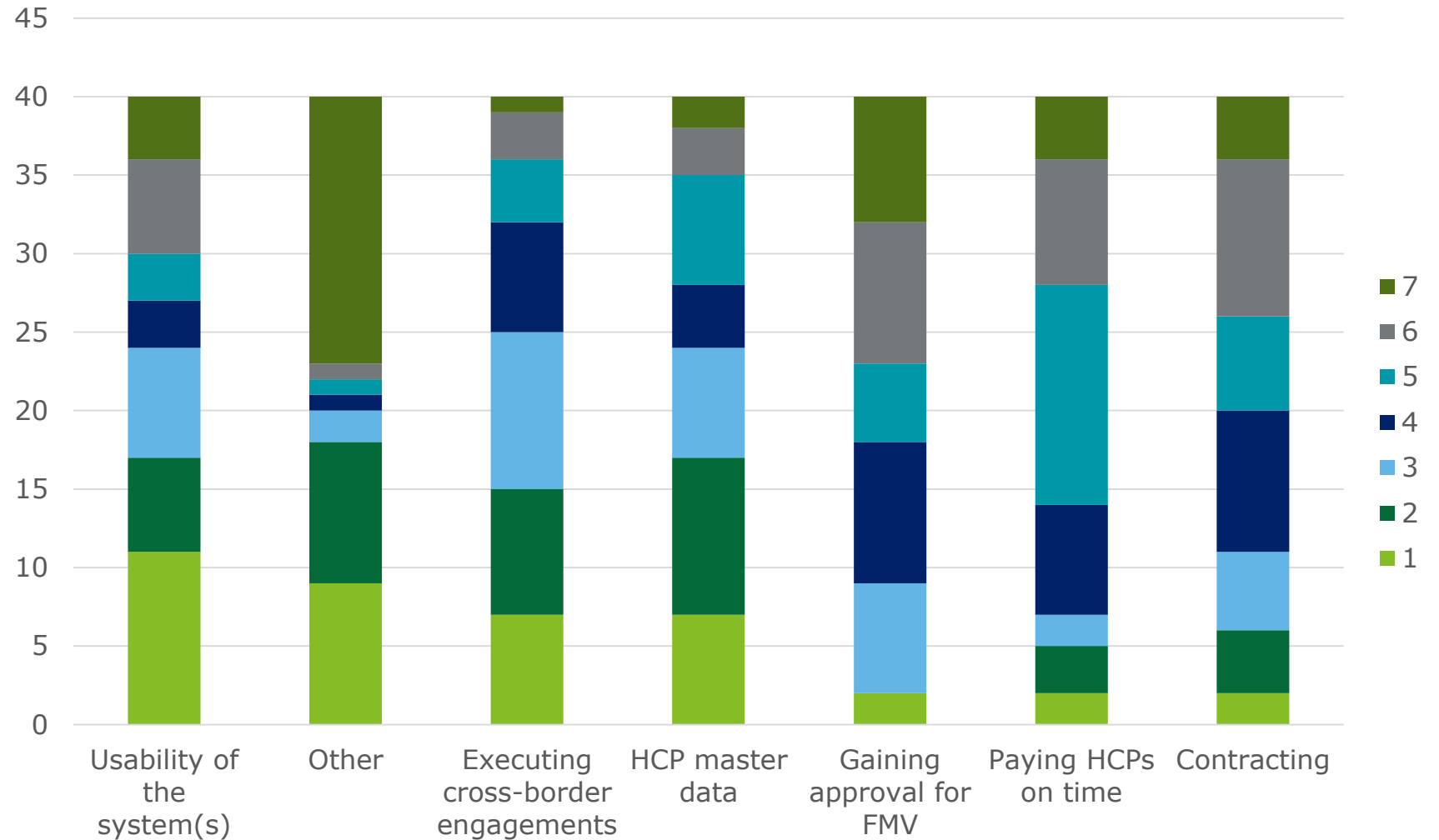
Usability of the system(s)

2

HCP master data

3

Executing cross-border engagements



# **ADDITIONAL BENCHMARKING**

Speaker Program Cancellation, Meal Limits and Patient FMV



# HCP Meal Limits and Speaker Program Cancellation

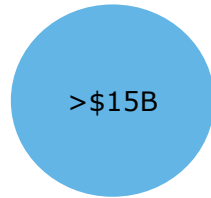
## Company

## Revenue

## Speaker cancellation policy

## Per person meal limits

1

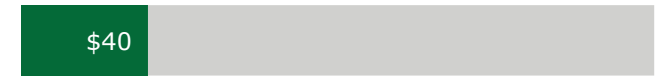


- More than 5 Days Prior to Program – No Payment
- Less than 5 Day Prior to Program – 100% Payment

Out of Office



In Office



2



- More than 2 Days Prior to Program – No Payment
- Less than 2 Days Prior to Program – 100% Payment

Out/In Office Dinner



Out/In Office Lunch



Out/In Office Breakfast



3



- More than 3 Days Prior to Program – No Payment
- Less than 3 Day Prior to Program – 100% Payment

Out of Office Dinner



Out of Office Lunch



Out of Office Breakfast



In Office



# HCP Meal Limits and Speaker Program Cancellation

Company	Revenue	Speaker cancellation policy	Per person meal limits																		
4	\$1-5B	<ul style="list-style-type: none"> <li>More than 3 Days Prior to Program – No Payment</li> <li>Between 1 and 3 Days Prior to Program – 50% Payment</li> <li>Less than 24 Hours Prior to Program – 100% Payment</li> </ul>	<table border="1"> <tr><td>Out of Office Dinner</td><td>\$125</td><td>\$150 in Certain Cities</td></tr> <tr><td>Out of Office Lunch</td><td>\$35</td><td></td></tr> <tr><td>Out of Office Breakfast</td><td>\$35</td><td></td></tr> <tr><td>In Office Dinner</td><td>\$60</td><td></td></tr> <tr><td>In Office Lunch</td><td>\$35</td><td></td></tr> <tr><td>In Office Breakfast</td><td>\$35</td><td></td></tr> </table>	Out of Office Dinner	\$125	\$150 in Certain Cities	Out of Office Lunch	\$35		Out of Office Breakfast	\$35		In Office Dinner	\$60		In Office Lunch	\$35		In Office Breakfast	\$35	
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# When paying patients FMV rates, do you tier patients, e.g., pay patients differently based on a set of criteria?

Yes

No

Don't Know

WE DON'T HIRE PATIENTS FOR  
FEE-FOR-SERVICE CONSULTING ACTIVITIES

# If you do tier patients, how do you tier?

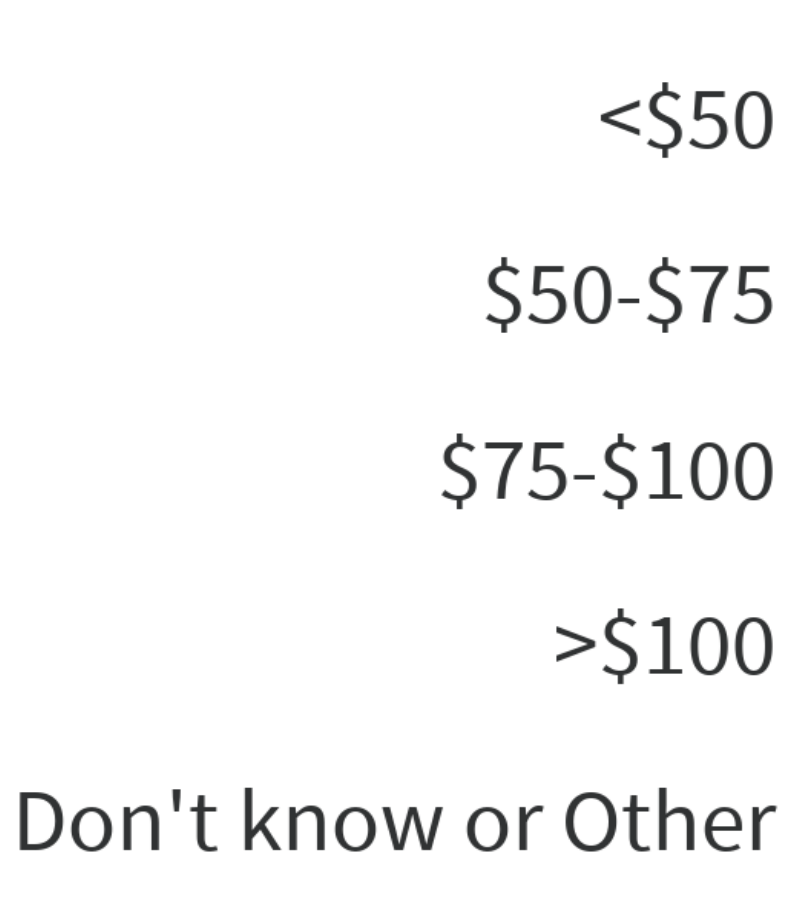
WE HAVE TWO TIERS  
FOR PATIENTS

WE HAVE THREE TIERS  
FOR PATIENTS

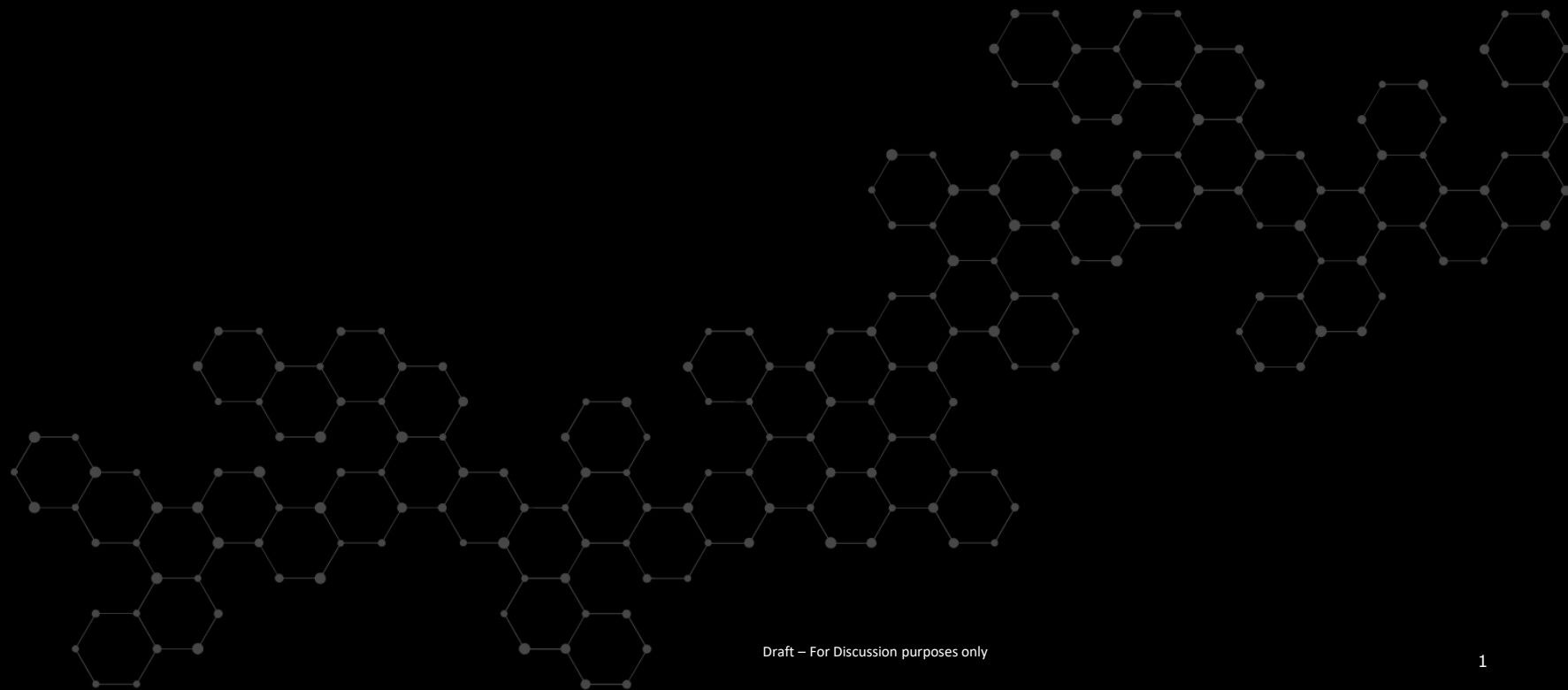
WE DON'T TIER  
PATIENTS

Don't Know

# If you do pay patients what is the average rate you pay patients per hour?



# QUESTIONS?





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