PMSA Supposium



NOVEMBER 9-10, 2023

FLAMINGO HOTEL

LAS VEGAS, NV

Data Science Methodologies for Successful Design and Implementation of Dynamic Call Planning

Saurabh Sarker, Director, Axtria Neha Rastogi, Director, Axtria



Agenda

What is Dynamic Call Planning?

Execution – Orchestration

Data Science Methodologies

Wrap-up

Q&A



What is Dynamic Call Planning? Key Benefits & Lenses



Agenda

"Dynamic" Call Planning





Matching call planning approaches to selling environments

	P F F F F F F F F F F F F F F F F F F F		MAR NO	
Selling environment	Patient-Hunting	B2B	Dynamic	Mature & Stable
Example	Oncology launch	Bill & Buy for a complex treatment	Growth brand with new indications	Older blockbuster in retail
Call planning objective	Find doctors with eligible patients	Account selling	Balance Share of Voice with faster insights	Share of Voice
Call planning approach	No call plan: KOL list, patient triggers	Account plans	Dynamic Targeting / Dynamic Call Plans	Traditional call plans

Next Best Action/Engagement can complement any of these models.



Dynamic Call Planning hits the timing sweet spot

Steady (monthly¹) **Slow** (qtr./yearly) Fast (daily) NBA NBA gets overutilized ······ for non-urgent actions (Alerts, Triggers) Dynamic Call Planning Call plans move too slowly to reflect latest **Traditional Call Plans** insights ***** Segmentation does not Strategic Segments & reflect the current Targeting environment

The Timing Paradigm



Key benefits

RESPONSIVE	Doctors' involvement in events and interactions are captured and acted upon on a near real time basis.	
SMART	Predictive machine learning algorithms are employed to better target promotionally responsive doctors.	
FAST	Doctors' profiles updated and insights published frequently.	
REP INFORMED	Inputs from the field become critical and are leveraged fully.	



Success in Dynamic Call Planning requires both ML algorithms and a great rep experience





Dynamic Call Planning – The Oncology Lens





Reference: Argiles G, Arnold D, Prager G, et al. Maximizing clinical benefit with adequate patient management beyond the second line in mCRC. ESMO Open 2019;4:e000495. doi:10.1136/esmoopen-2019-000495

Dynamic Call Planning – The Rare Disease Lens

Using ALS¹ as an example





The FDA approved Radicava[®] as a treatment for ALS on May 5, 2017.
The recommended dose is 60mg, administered via 60-min IV infusion.



Note: In the US, Radicava[®] is manufactured and distributed by Mitsubishi Tanabe Pharma America Inc. The dosage and plan shown above were obtained from FDA records, as well as from the Radicava[®] microsite (<u>https://www.radicava.com/</u>); 1 – ALS – Amyotrophic Lateral Sclerosis, a rare disease with an incidence rate of around 1 in 50,000 (ref. The ALS Association).

Identification of Sufferers of Rare Diseases Using Medical Claims Data, Jieshi Chen & Artur Dubrawski; https://ojphi.org/ojs/index.php/ojphi/article/view/7607

What we are trying to achieve

Orchestration Algorithms



Dictate Recommend

Best CustomerBest Channel

Best Content/Message
Every Day

Veeva crm Medscape doximity

> salesforce marketing cloud

> > a b | e a u[.]



Different channels present different challenges in controlling activity





Agenda

Execution Orchestration in the field



Marketing plans are typically static for longer periods of time for large segments of customers







Images generated by OpenAl's DALL·E 2, May 17, 2023 Illustrative & Simplified

In Dynamic Call Planning, ML algorithms optimize content and channels on a frequent basis





In Dynamic Call Planning, ML algorithms optimize content and channels on a frequent basis (contd.)





Data Science Methodologies
Our Guiding Principles



Agenda

Guiding Principles



Preference for simplicity

Ensure transparency; avoid blackboxes

Guide &

recommend vs.

dictate

Consistent with brand strategy

Rep – an indispensable partner

Demystify

Constrained by

guardrails &

business rules



Agenda

Data Science Methodologies The Nuts & Bolts



Traditional vs. Dynamic Call Planning

Traditional Call Planning



Dynamic Call Planning

Finding & Prioritizing Targets Segmentation



Agenda

K-Means Clustering / Segmentation – Unsupervised ML Algo.

Segmenting the entire target universe based on 2 variables – avg. income within HCP's zip, and scripts written in a month





K-Nearest Neighbors – Supervised ML Algorithm

Determining segment membership for new targets, and for existing ones whose characteristics have evolved





K-Nearest Neighbors – Supervised ML Algorithm

Determining segment membership for new targets, and for existing ones whose characteristics have evolved





Random Forest – Supervised ML Algorithm

Segmenting 64 new physicians into "high" and "low" buckets based on monthly script volume

9	16	26	43	42	7	4	2
19	5	29	15	30	18	4	46
14	42	4	28	26	47	39	7
26	12	13	8	87	50	17	49
5	21	13	47	18	18	46	30
36	16	1	22	41	6	48	42
49	18	13	34	13	26	25	37
26	1	16	50	47	9	37	8





Random Forest – actual decision trees





Selecting the "Champion Model" for Segmentation

Simple & Intuitive	Accuracy & Repeatability	Computing Power & Time	Other Factors
 KNN is intuitive and easy to interpret Non-Blackbox nature helps drive buy-in 	 KNN is more accurate¹ Both are repeatable 	 Random Forest consumes significant computing power Takes longer to execute 	 Random Forest requires careful selection / determination of hyperparameters

Consider "lookalike analysis" if data is scarce.



Segmentation – finer points





Agenda

Allocating Effort Promotion Response



Promotion Response – Long-term

Aligned to brand strategy; built semesterly or yearly

 $\begin{aligned} Response &= A_0 + k + A(1 - e^{-Cx}) \\ k &= A_1 NRx_1 + \lambda_2 NRx_2 + \cdots \\ x &= PDE + \lambda_1 PDE_1 + \lambda_2 PDE_2 + \cdots \end{aligned}$





Promotion Response – Short-term

Directional guidance to facilitate Dynamic Call Planning initiatives





Selecting the "Champion Model" for Short-term Promotion Response

Random Forest Regression is usually preferred

Availability of Limited Data

- Random Forest can work with limited data
- Linear Regression requires a larger number of datapoints

Detecting Short-term Trends

- Random Forest can extract short-term trends
- Linear Regression
 "averages out" points

Other Factors

• Some of the factors discussed earlier apply



Sequencing Channels Optimally Omnichannel Strategy



Agenda

Setting it all up



Set constraints

- Max frequency for each of the selected channels
- F2F calling capacity of a rep
- HCP-specific constraints
- Time period
- Maximum total exposure for each HCP
- Others

Sample ML output showcasing ROI on tactics

Optimizing "action sets" to determine best promotional sequences

							Action Per	riod
1 1	0		Timeframe of					
HCP ID	Actual / Simulation	Week 1	Week 2	Week 3	Week 3 Week 4 F		Rx predicted	ROI
130015228	Actual	Call	None	RT Email	None	4.5	5.3	2.36
130015228	Actual	None	Display	None	None	3.4	2.2	1.29
130015228	Actual	Call	CRM Email	None	None	2.9	1.1	0.76
130015228	Actual	CRM Email	RT Email	None	Display	3.3	6	3.64
130015228	Actual	CRM Email	CRM Email	None	None	6.5	3.9	1.20
130015228	Actual	Call	CRM Email	None	None	3.9	4.3	2.21
130015228	Actual	None	Display	Call	RT Email	1.7	2.5	2.94
130015228	Simulation	Call	None	RT Email	CRM Email	7.3	1.3	0.36
130015228	Simulation	Display	Display	None	Display	3.5	0.1	0.06
130015228	Simulation	Call	None	RT Email	RT Email	3.9	4.3	2.21
130015228	Simulation	None	None	Call	None	1.7	5.5	6.47

Determining top "action sets"

- Analyze historical promotional sequences for each HCP
- Shortlist plausible sequences
- Determine impact/ROI for each
- Rank/score
- Select the best plausible sequence
 - Model learns with each iteration
- Utilize trained model to generate future "action sets"

Action Sets



1 – This analysis assumes one promotional tactic per HCP per week for a four-week period ("action period") for calculating ROI, which is typical. However, the "action period" could be a fortnight, a week, or any other period of time.

Illustrative & Simplified

Best sequence analysis: ML-based simulation used to identify sequences with maximum impacts

Models that learn channel interactions, sequencing, and content from historical data





*Note: HCP response or impact can be measured in terms of Rx, profit, ROI, patient count or any other metric that the client/pharma company deems fit.

Illustrative & Simplified



Wrap-up Key Takeaways



How to get started? - A Roadmap

Towards achieving a soft landing and maximizing the chance of success





Note: The above is a general simplified roadmap, presented in the form of a checklist, of key factors that a pharma company may need to consider as it starts thinking about implementing Dynamic Call Planning. Hence, it is not exhaustive. Since Dynamic Call Planning is a highly-specialized process and given that every company is different, such a solution would need to be customized to address specific needs.

Our learnings

One size does not fit all

- Fast: Action Periods, frequency/cadence
- Smart: Selection and fine-tuning of data science approaches

Customer 360° is key

- HCP profiles built and updated over time
- Segment personas dictate tactics

Platform & Environment

- Well-designed and easy to use platform(s)/app(s)
- Ensure transparency, efficient issueresolution/ticketing workflow

Digital Data Backbone

- Always-on and in-sync systems
- Support for downstream processes

Collaboration & Partnerships

- External: data vendors, consultants and others
- Internal: all relevant stakeholders and teams



Platform & Environment – an example

2											2					
*	Dynamic Ta	argeting								88	<u>Ç</u>					
*	Quick Filters	My Next Best C	ustome	er List												
Sales Hub	Close To Me	Customer	Rank	Adopt'n	Last Call Date	Digital Rec.	Target Tie	r Calls /	Active NBAs	Feedbac	<u> </u>					
R	Right Now	Goldman, Samuel	1	Trialing	Sep 26, 2023	Email	Gold	0	NBA							
NBA	Digital	Gormley, Elizabeth	2	Using	Sep 29, 2023	Email	Gold	0	NBA							
**	Friendly	Buckley Susan	3	Aware	Oct 11 2023	Kemote	Gold	1	NBA							
Business Insights	Show One	Berry, Paul	5	Trialing	Oct 29, 2023	-	Silver	0	NBA							
	Route	Herr														
Pre-call Planning	Not Seen 90 Days	M	\wedge	Ne	xt Best	Actio	า			Q Sea	rch Custom	ers			ē # #	2
-		La		All Bra	nds Metha	ing) (Weet		miyar								
(S)			*													
mountives			105	Next	Best Action						Suggestie	ons Acted	on			
Ð			R			4 Calls	3 鯚				Accepted		10%	155		
Feedback			NBA	(6	2 Emails	1 🗭		34		Dismissed		10%			
			2	Per	nding Actions				Predicted TR	x Lift		Self	Peer's Av	erage		
		Bu	usiness hsights	My S	uggostions											
				Pend	ing Acted											
JD		Inc	entives												0.00	
				8	Dr. Michael Sm Please Call Dr.	iith 斛 Smith									 Silver 	(
● Logout				Call D	r. Michael Smith h	nas a large patie	ent populatio	n covered	by Anthem He	ealth. Meth	anol recentl	y obtained p	riority			\sim
		Fe	edback	-	algement attitus.		c u cui to im	2111 01:01	nur una une pri	001100 0000	it this positi	ve enange.				
-			晤	© Po:	ited on Mar 23	(=) Opportuni	ty ⊺↓ Aci	ive Growe	er "⊃ Las	st visit was	on Feb 23	Ut Ho	old C	C Accept	4,11 Dismiss	
			Field		Dr. Priya Menor	n										
		Ŭ	onneer		Please Send an	n Email to Dr.Me	non about N	lethanol F	rescription						 Silver 	
				Dr. Me engag	inon has recently je Dr. Menon rega	written 2Rx of arding the effica	Competitor E icy of Methai	irand for t nol. Last e	mail engagem	ent was 4 v	eriod. Pleas veeks ago. I	e send an er Dr. Menon ha	nail to is high			
				email	engagement.											
				(§ Pos	sted on Mar 23	© Opportuni	ty†↓ Act	ive Growe	er t⊃ Las	st visit was	on Feb 23	() Ho	ld (C Accept	यी Dismiss	
			JD		Dr. Michael Sm	ith 핟										
					Please Send an	n Email to Dr.Sn	hith about Me	thanol Pr	rescription							
		8	Logout													







Thank you.

Credits:

Asheesh Sharma, Sr. Principal; David Wood, Sr. Principal; Mani Sethi, Principal; Sanjay Srivastava, Principal; Ashvin Bhogendra, Principal; Charles Rink, Principal; Vineet Rathi, Principal; Neha Jain Pulyani, Sr. Director; Kimberly Mosquera, Director

