

The State of Customer Experience in Pharma: Patient Interactions

by Michael Cook, Tim van Tongeren, and Hannah Price

Executive Summary

Patients seeking and receiving care depend on a complex system of health providers—an environment in which pharmaceutical companies play an important role. When seeking care, patients gravitate to experiences that other patients rated well; when receiving care, they prefer experiences that consistently meet or exceed their expectations. To understand how well pharma firms deliver experiences when directly interacting with patients, DT Consulting teamed up with Carenity, a leading digital patient platform, to field an online survey to 763 patients in the US and Europe. While our respondents paint a bleak picture of their direct interactions with pharma firms, their responses clearly show where companies can improve their patient experience efforts.

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MEASURING INTERACTIONS BETWEEN PATIENTS AND PHARMA COMPANIES

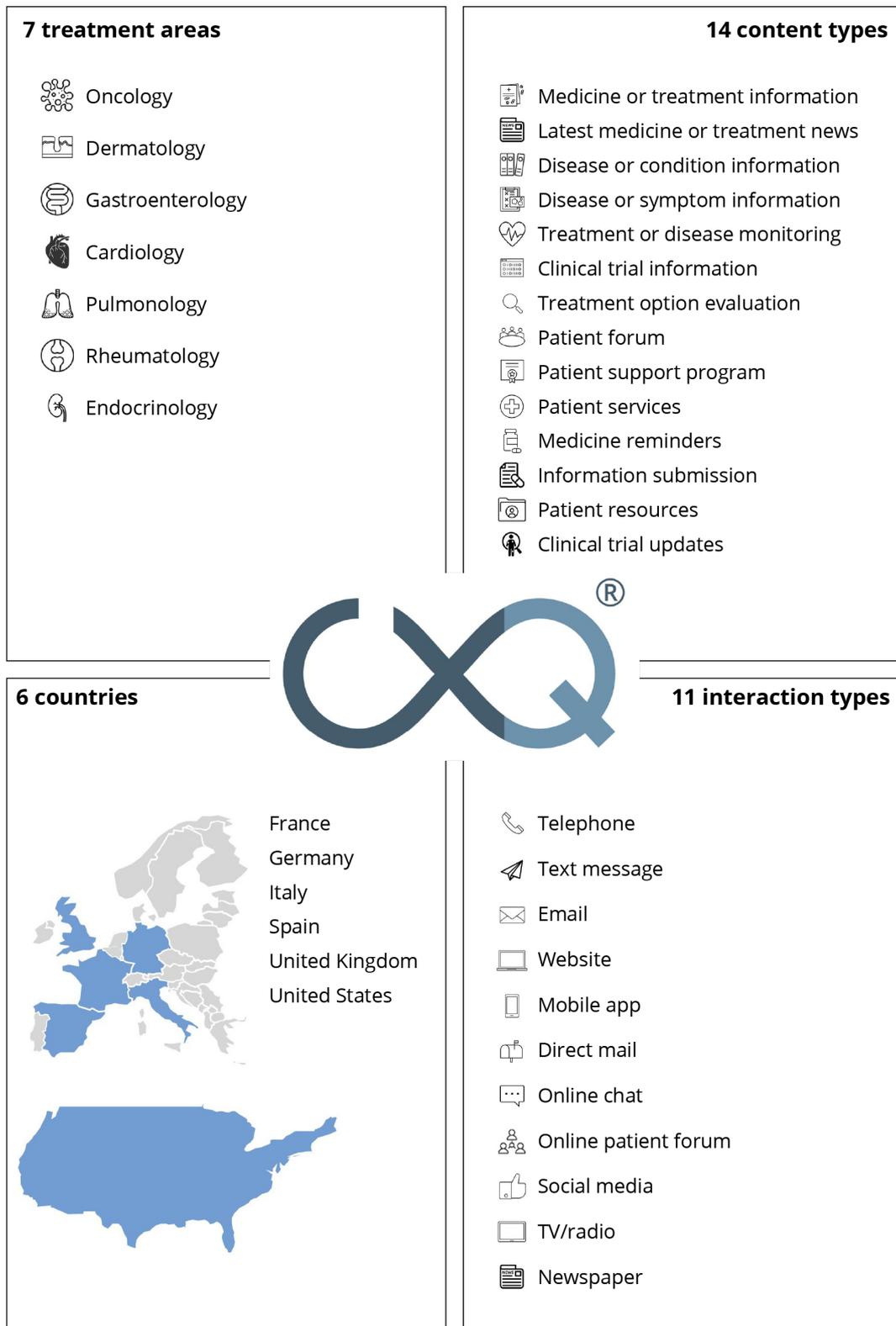
Over the past decade, digital technologies have been enabling patients to take a more prominent role in researching and discussing treatment options and even managing their treatment. As a consequence, stakeholders—including large pharmaceutical companies—addressing patient needs are rethinking how to best deliver patient information and services. While providing information and service direct to patients is heavily regulated and thus limited, we wanted to understand how well pharmaceutical firms address these needs and provide great experiences to patients when and where they can.

The CXQ[®] Framework Measures the Patient Experience in Their Pharma Interactions

One component of the overall perception or experience that patients have with pharma firms is rooted in their interactions with pharma information and services. In order to measure and understand the current state of these experiences, we:

- **Fielded an online survey to patients.** DT partnered with Carenity, a leading digital patient platform, to survey 763 patients online in March and April 2019 (see Figure 1). Respondents live in the US or one of the five largest countries in Europe and represent seven disease areas: cardiology, dermatology, endocrinology, gastroenterology, pulmonology, and rheumatology.
- **Asked patients about their most important expectations.** CXQ[®] relies on first understanding people's expectations for certain interactions and then measuring to what degree providers—in this case, large pharmaceutical companies—meet their expectations. We found that patients' primary expectations during interactions with pharma firms are that the company will treat them as individuals; provide trustworthy, accurate, and up-to-date information; and make the interactions simple (see Figure 2). Interestingly, patients' top five expectations don't vary much across different therapy areas (see Figure 3).
- **Asked patients to describe and rate their experiences.** Armed with these expectations, we then asked patients to think back to their most recent interaction with a pharma brand or company and rate how well it met their expectations. We also gave patients the opportunity to describe the interaction to reveal the company or brand they interacted with; the intent of the interaction (see Figure 4); and the communication channel in which the interaction took place (see Figure 5). This allowed us to better understand where firms excel or lag in providing patients a great experience.

Figure 1: The Patient Customer Experience Quotient® Survey, Patient Interactions



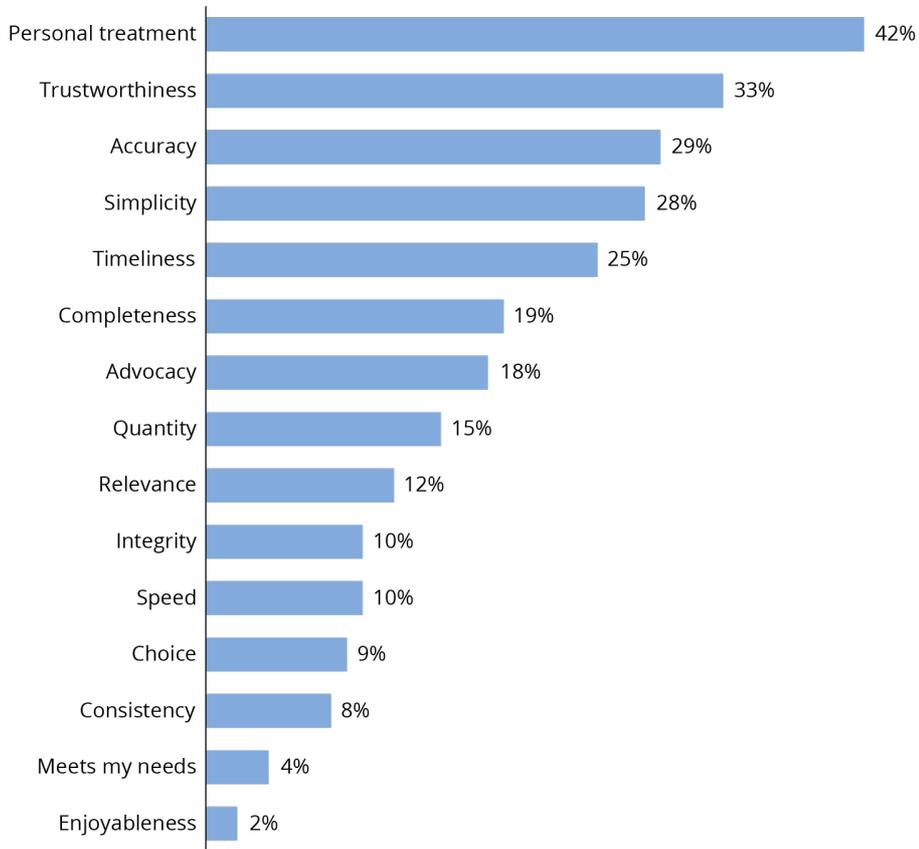
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Source: DT Consulting / Carenity



Figure 2: Patients want a “pharma” experience that is personal, trustworthy, accurate, and simple

“Thinking in general about the way pharmaceutical companies should share information or provide a service, which of the following are most important to you?”



Base: 763 patients in Europe and the US who have interacted with pharmaceutical firms (multiple responses were accepted)

Source: DT Consulting / Carenity Customer Experience Quotient (CXQ®) Survey, Patient Interactions 2019

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Source: DT Consulting/ Carenity

Figure 3: Patient expectations are very similar across different disease areas

| | All areas | Oncology | Neuro | Gastro | Pulmo | Rheuma | Endo | Cardio | Derma |
|--------------------|-----------|----------|-------|--------|-------|--------|------|--------|-------|
| Personal treatment | 42% | 55% | 47% | 42% | 41% | 41% | 39% | 38% | 38% |
| Trustworthiness | 33% | 28% | 44% | 29% | 30% | 33% | 35% | 44% | 31% |
| Accuracy | 29% | 27% | 26% | 32% | 31% | 28% | 27% | 27% | 41% |
| Simplicity | 28% | 20% | 18% | 25% | 35% | 28% | 34% | 22% | 23% |
| Timeliness | 25% | 24% | 32% | 25% | 23% | 28% | 23% | 20% | 23% |
| Completeness | 19% | 36% | 21% | 18% | 15% | 10% | 24% | 24% | 26% |
| Advocacy | 18% | 23% | 26% | 22% | 24% | 14% | 16% | 16% | 13% |
| Amount | 15% | 15% | 9% | 21% | 12% | 13% | 16% | 24% | 23% |
| Relevance | 12% | 9% | 3% | 13% | 5% | 15% | 14% | 7% | 21% |
| Integrity | 10% | 8% | 6% | 18% | 8% | 12% | 10% | 7% | 5% |
| Speed | 10% | 8% | 18% | 4% | 9% | 13% | 9% | 7% | 8% |
| Choice | 9% | 7% | | 8% | 14% | 10% | 9% | 5% | 8% |
| Consistency | 8% | 8% | 9% | 6% | 7% | 10% | 7% | 11% | 5% |
| Meets my needs | 4% | 3% | 15% | 7% | 5% | 3% | 6% | 2% | 3% |
| Enjoyableness | 2% | 4% | | | 1% | 3% | 3% | 4% | 3% |

Base: 763 patients in Europe and the US who have interacted with pharmaceutical firms

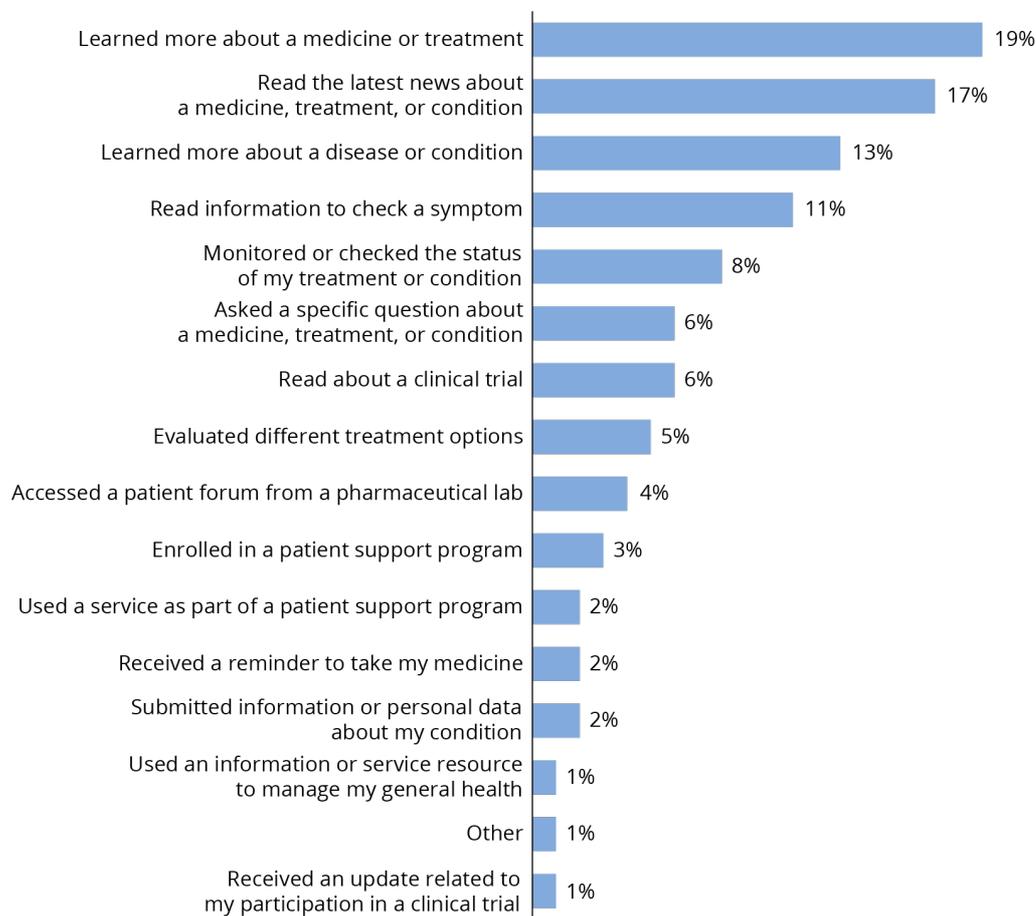
Source: DT Consulting / Carenity Customer Experience Quotient (CXQ®) Survey, Patient Interactions 2019

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Figure 4: Patients' pharma interactions were mostly to get information about diseases, products, or treatments

"What was the last service or information you used that came from and was created by a pharmaceutical company?"



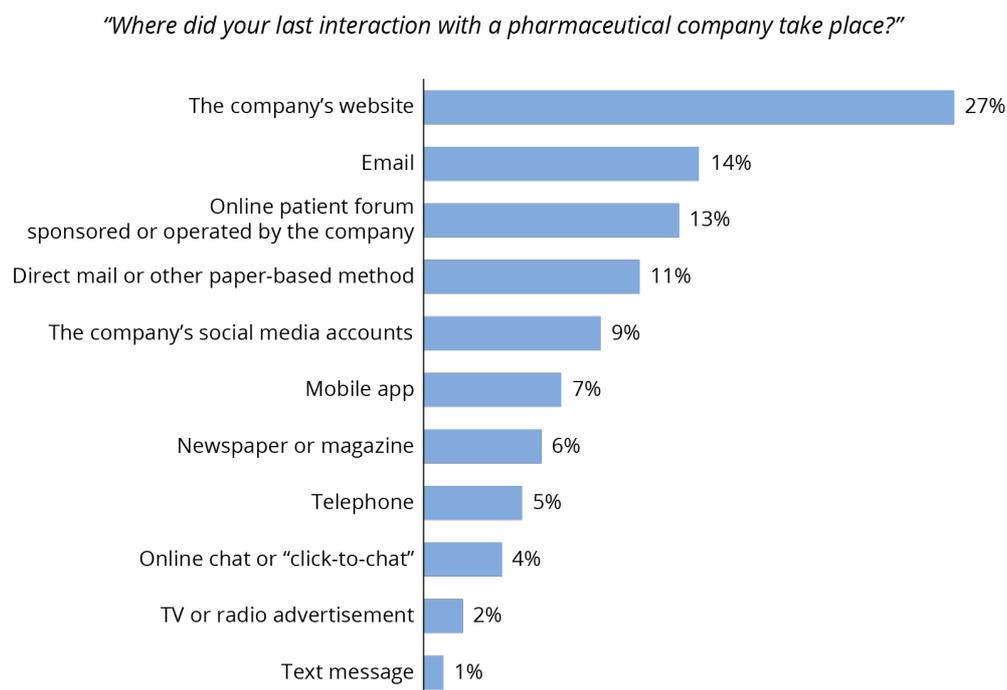
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Figure 5: Patient interactions most often took place on the pharmaceutical company's website



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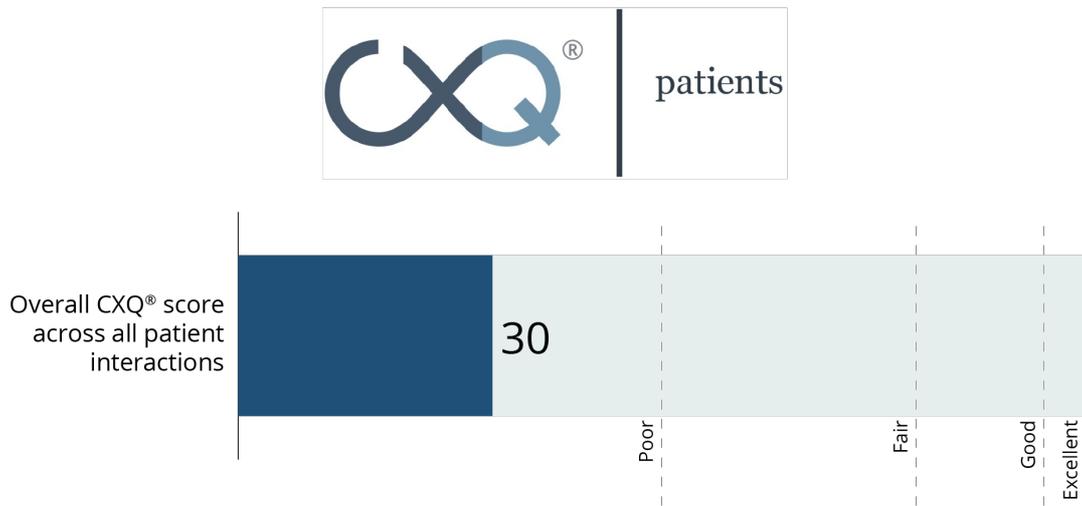
Source: DT Consulting / Carenity

PATIENTS' EXPERIENCES DON'T MEET THEIR EXPECTATIONS

By applying our CXQ[®] methodology to the customer experience (CX) ratings of the 763 patients we surveyed, we can calculate the quality of different aspects of the interactions as well as the overall experience. We found that:

- **No firm achieved even a Fair CXQ[®] score.** The pharmaceutical industry received an overall CXQ[®] score of 30 out of 100, which falls in the Poor zone (see Figure 6). In comparison, the CXQ[®] score for pharma firms' interactions with healthcare providers is 77. On average, pharma firms perform best—but still poorly—in cardiology and endocrinology therapy areas and worst in rheumatology and neurology (see Figure 7). Looking at CXQ[®] scores for each of the various “most important” customer experience expectations, pharma firms best live up to customer expectations in terms of completeness of information, speed, and choice (see Figure 8). The most important expectations receive CXQ[®] scores between 28 and 33. Unfortunately, pharma firms are least likely to meet patient expectations for integrity and advocacy—doing what is best for patients, not what's best for the firm.
- **Most patient services rate poorly.** Six of ten interactions between pharma (content) and patients revolve around patients educating themselves about their medicine, treatment, or condition. The challenge for pharma is that these patients give these interactions some of the lowest ratings (see Figure 9). Conversely, general health resources and medicine reminder services rate the highest yet comprise only 3% of all interactions. Interactions strictly related to patient support programs, which represent 5% of the most recent interactions between pharma firms and patients, achieve CXQ[®] scores between 26 and 30.
- **Channel execution is poor.** Three-quarters of the most recent patient interactions occur in digital channels; a third of these digital interactions are via pharma company-sponsored websites. Ten percent of all interactions flow through companies' social media accounts, and 7% occur on mobile apps. From a channel performance perspective, pharma firms are creating the best customer experiences in a non-digital channel: the telephone (see Figure 10). Text messaging and email, which are typically personal in nature, simple, and relevant, come in second and third. There's a big CX gap between these somewhat more traditional forms of communication and pharma firms' digital assets such as websites, apps, and social media accounts.

Figure 6: Most interactions that patients had with pharma firms disappointed



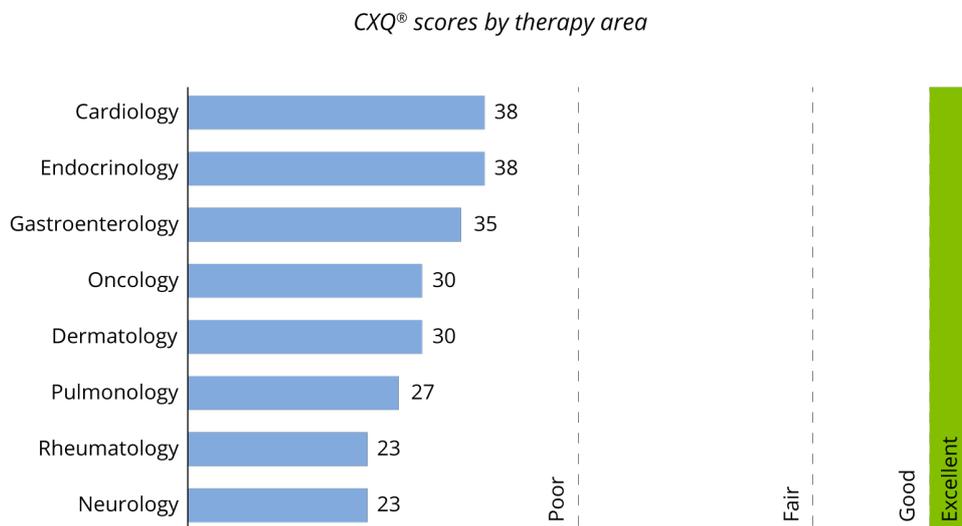
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Figure 7: Regardless of therapy area, pharma firms don't meet patient expectations



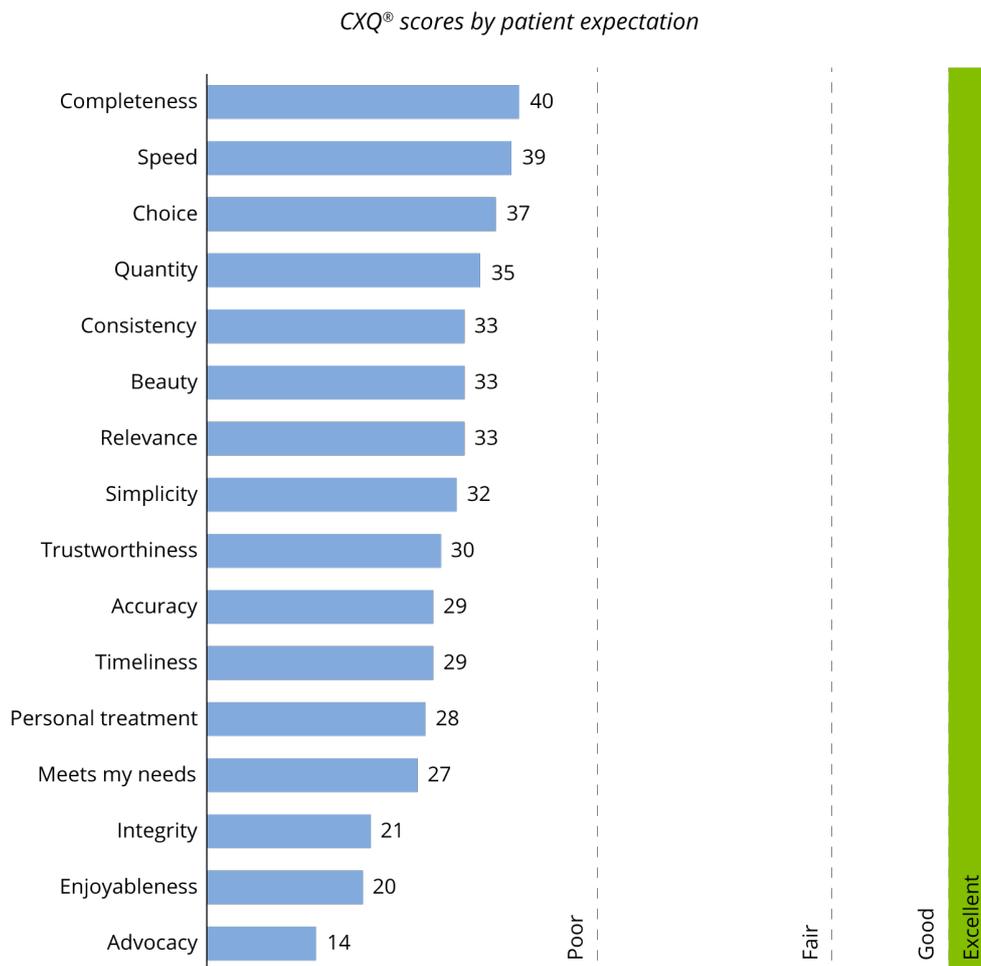
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Figure 8: Pharma firms best live up to completeness and speed in providing information, do worst in “advocacy”



Base: 763 patients in Europe and the US who have interacted with pharmaceutical firms

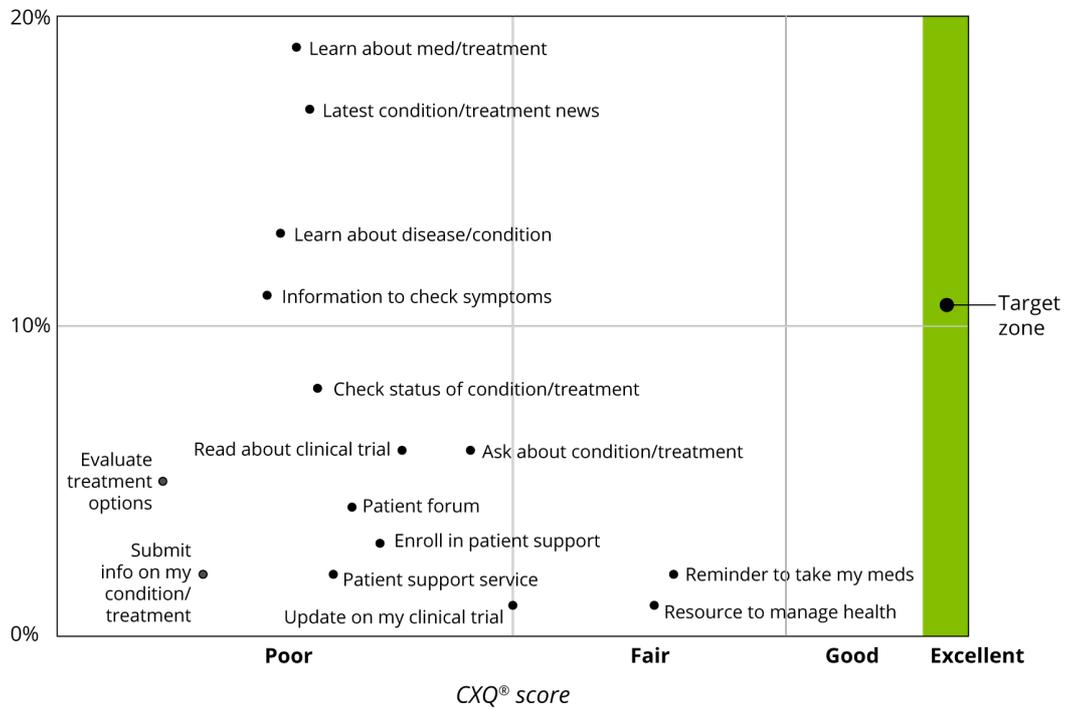
Source: DT Consulting / Carenity Customer Experience Quotient (CXQ®) Survey, Patient Interactions 2019

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Figure 9: Pharma information and services that patients need the most deliver the worst customer experiences

“What was the last service or information you used that came from and was created by a pharmaceutical company?”



Base: 763 patients in Europe and the US who have interacted with pharmaceutical firms

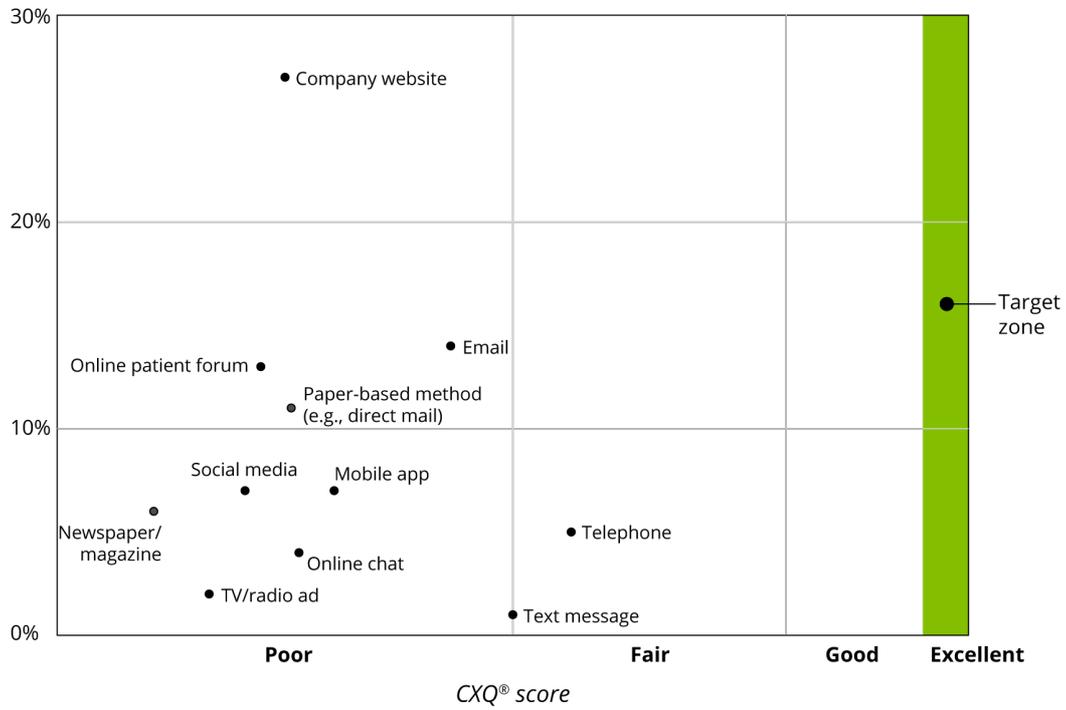
Source: DT Consulting / Carenity Customer Experience Quotient (CXQ®) Survey, Patient Interactions 2019

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Figure 10: Redesigning website experiences will bring pharma firms the most benefit

“Where did your last interaction with a pharmaceutical company take place?”



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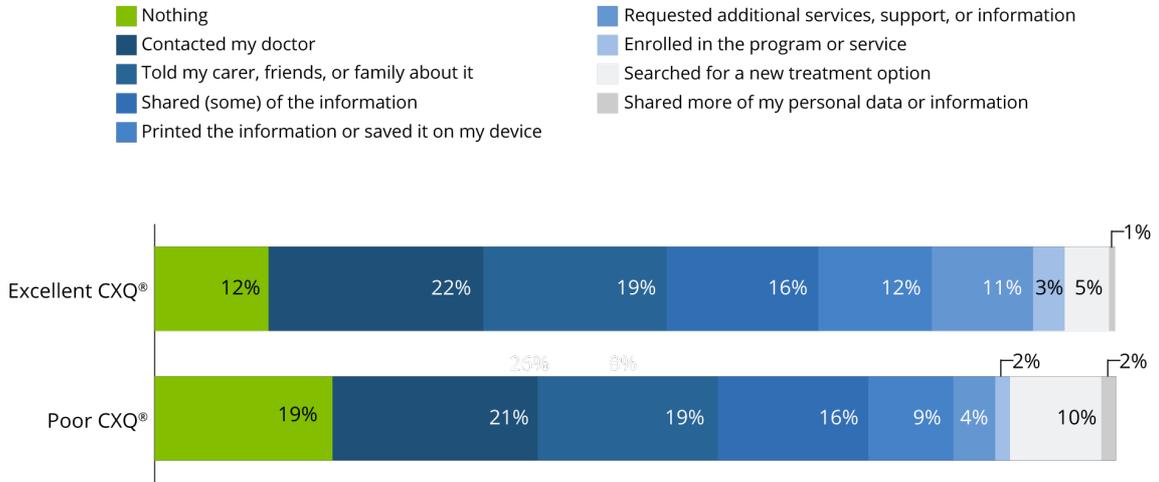
WELL-DESIGNED PATIENT EXPERIENCES PRODUCE DESIRABLE OUTCOMES

Across Europe and the US, patients rate most of their interactions with pharma companies as Poor — although they rate about 14% of all interactions as Good or better. We grouped these to understand if the delivery of customer experience can change patients' engagement with pharma firms and their overall perceptions. We found that:

- **Overall engagement goes up.** When a pharma company gets a low CXQ[®] rating due to substandard interaction quality, patients are nearly 60% more likely to do nothing following an interaction with it. More alarmingly, they're twice as likely to search for a new treatment option. But patients who have great experiences are 30% more likely to save information, nearly three times as likely to request additional information, and three times as likely to enroll in a program or service (see Figure 11). The message is clear: well-designed patient experiences lead to greater patient engagement.
- **Patients' reflections on outcomes and their perceptions of a company or therapy improve.** While interactions rated Fair or worse don't negatively affect patients' opinions, their perception of the effectiveness of their treatment, quality of life, ability to manage their pain and/or condition, and ability to make good decisions all increase when they have positive experiences with a pharma firm (see Figure 12). Patients receiving well-designed interactions are significantly more likely to be directly involved with their treatment.

Figure 11: Great patient experiences improve patient outcomes

“What did you do as a result of your most recent interaction with a pharmaceutical company?”



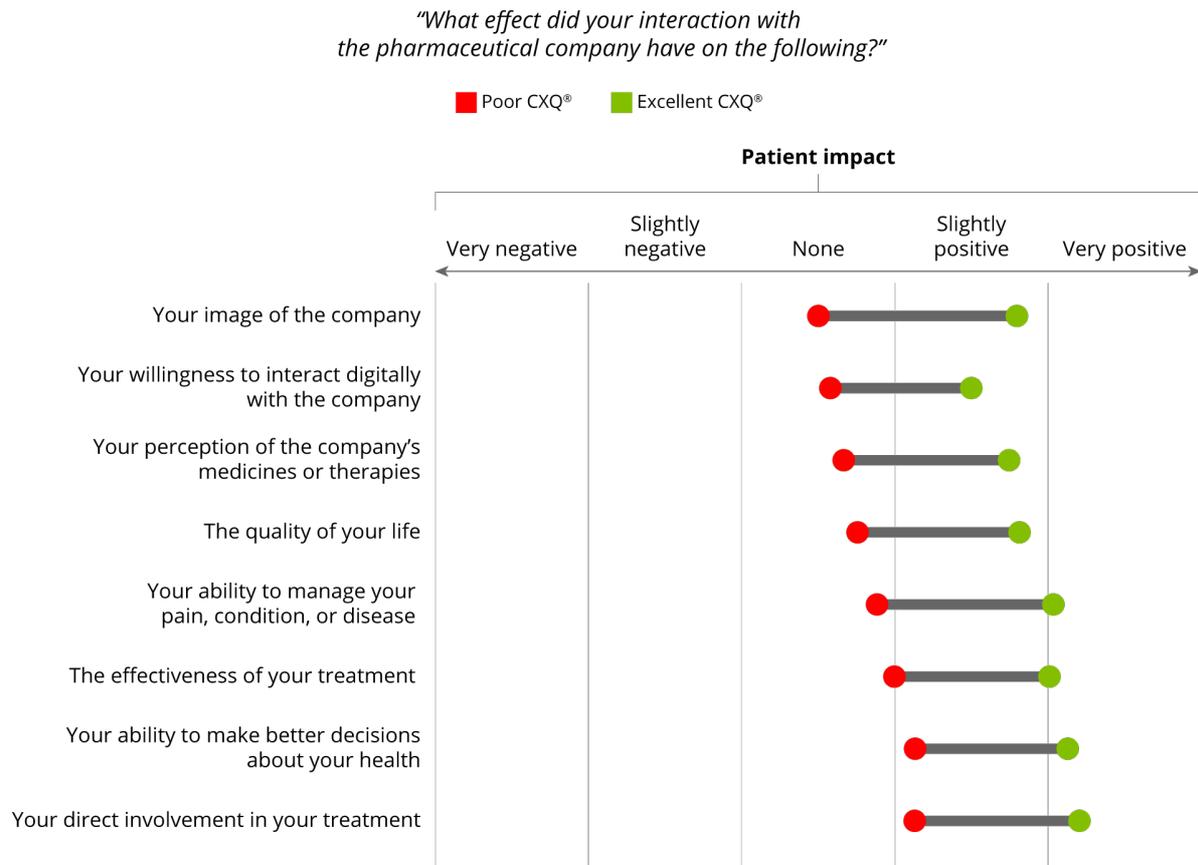
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Figure 12: Great experiences change perceptions about firms more than immediate therapy-related actions



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RECOMMENDATIONS

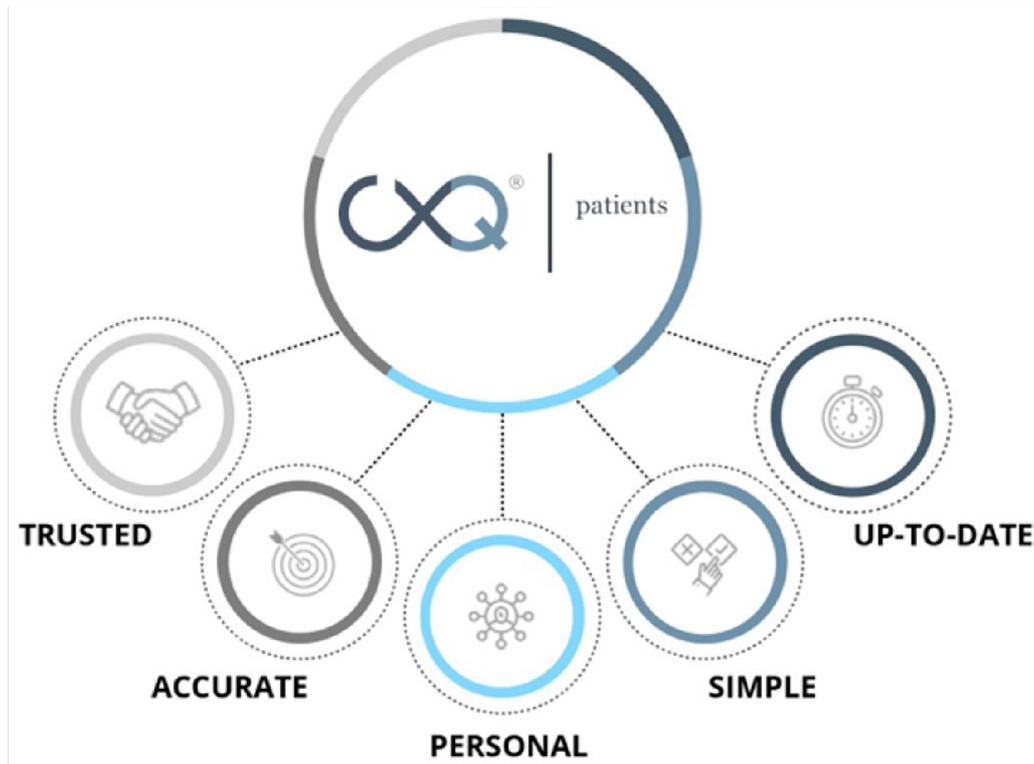
PLAN, DESIGN, AND EXECUTE BETTER PATIENT INTERACTIONS TO BOOST CX

Unlike in other industries, pharmaceutical firms don't own the customer experience of their products from end to end; rather, they are part of a complex system of stakeholders in the patient's journey. But that doesn't mean they can let go of CX thinking and doing. On the contrary: from a pharma firm perspective, there is a wealth of opportunity in addressing patient needs, and patients and other healthcare ecosystem stakeholders value pharma's role in achieving this. Pharma firms can own these interactions and build and master capabilities that allow teams to understand, manage, and improve how they interact—both directly with patients and indirectly with stakeholders who engage patients. To meet patient expectations and improve CXQ[®] scores, pharma firms need to double down on vital CX focus areas including:

- **Patient experience design.** One fundamental capability is to have teams strategically focus on the creation and continuation of patient interactions as part of a patient journey like a clinical trial or a more specific service such as a patient support or advocacy program. While most pharma teams are comfortable developing a patient strategy, applying the principles of design thinking to connect unmet customer needs to business strategy is a relatively new practice. To accomplish this, teams require tools and related training including service blueprints, journey and experience maps, personas, and (competitive) landscape assessments.
- **Digital technology.** Patient experiences rely on technology—in the form of patient-facing websites, apps, and social media and back-office tech like data and analytics platforms and content management systems. This reliance will only become more acute. While patient experience organizations can currently piggyback on the achievements of their colleagues in commercial operations, they will eventually require other technologies. Two overarching objectives behind patient experience organizations' technology road maps stand out: establishing links into the healthcare system to deliver virtual care and generating data through digital health technologies to understand and personalize the patient's experience.
- **Patient experience measurement.** Regardless of whether they work in clinical ops, medical affairs, or sales and marketing, teams need to know if their interactions with patients are meeting expectations. Understanding how patients (or other stakeholders) interact with patient-focused information, services, or programs and analyzing the resulting perceptions, attitudes, and behaviors lends valuable insight into whether patient needs are being addressed. A measurement framework—such as DT's CXQ[®] for Patients, which combines interaction-level analytics with overall patient perceptions and behaviors—provides not only a structure, but also a way to foster cross-functional collaboration (see Figure 13). As part of the measurement capability, an alliance with market research is desirable, as some experience data resides in bespoke ethnographic studies, focus groups, or patient interviews. Another alliance is with the digital technology team in order to get analytics or activate survey capabilities for touchpoint- or journey-specific insights.

Figure 13: DT's Customer Experience Quotient® Framework for Patient Interactions

The CXQ® measures the **perceptions** patients have about their interactions with your company, based on these attributes:



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Source: DT Consulting / Carenity

Methodology

DT Consulting's Customer Experience Quotient® Survey, Patient Interactions 2019 is an online survey fielded in conjunction with Carenity over March and April 2019. The survey covered 763 patients from oncology, dermatology, gastroenterology, cardiology, pulmonology, rheumatology, and endocrinology specialist areas. Via email we invited patient users of Carenity to take the online survey. Respondents came from France, Germany, Italy, Spain, the UK, and the US. To keep our sample statistically significant, we excluded pharmaceutical firms represented by fewer than twenty responses from any CXQ® ranking. Please note that respondents who use online networks, are triggered by email, and participate in online surveys have more digital experience and are more likely and confident to interact with companies digitally than those with less experience.

Related Research

- The State Of Customer Experience In The Pharmaceutical Industry, 2018: HCP Interactions"
- Ranking the Experience Of European Physicians' Interactions With Pharma"
- The State Of Customer Experience In European Pharma, 2017: Physician Interactions"

About DT Consulting

As a strategy consulting firm, we drive data transformation by building the capabilities that life sciences companies require to thrive in the digital age for continued customer experience success for patients, physicians, and payers. Engaging DT Consulting means that clients will harness the power of data, capitalize on new technology, transform into intelligent operations, master customer experience design, and build customer-centric digital talent and culture.

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The Customer Experience Quotient® (CXQ®)

Our solutions leverage assessments and benchmarking data to provide tailored insights into critical aspects of your organization's digital transformation efforts.



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DT's Customer Experience Quotient helps pharma companies:

- Thoroughly understand the quality of your customer experience.
- Benchmark your customer experience performance against that of competitors.
- Track your customer experience progress over time.
- Simulate the business impact of CX improvements.
- Pair with other key metrics, like Net Promoter Score®, for deeper customer insights.
- Identify clear, actionable customer experience improvement opportunities.
- Understand how CX affects your organization's culture, process, and capability.

See the CXQ® in action and better understand how it will help you improve your customer experience. If you would like to understand how the CXQ® will help you improve your customer experience through a free demonstration, please contact us at enquiry@dt-consulting.com.

About Carenity



Carenity is a leading digital patient platform with 400,000 members worldwide. Carenity, the Patient Insights company, delivers timely and compliant access to real-world patient data for the life sciences industry, enabling the development of better drugs and services.

Our solutions include RWE studies with publication of results, Clinical Trial Optimization and PatientLive to get access to real-time insights.

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For more information, please contact us: pro@carecity.com

About the Authors

Michael Cook



Michael is the Director of Research at DT Consulting, with responsibility for DT's overall thought leadership and strategic market engagement. He identifies how digital technologies and changing customer expectations are reshaping the life sciences industry and will continue to do so. Michael has an established reputation as a leading researcher, thinker, and speaker with an extensive background in qualitative and quantitative research, forecasting, and strategic analysis. His experience spans the services and consulting world and includes disciplines such as customer experience, advisory, digital workforce and talent solutions, cybersecurity, and intelligent automation.

Michael came to DT Consulting from Cognizant, where he co-led its Centre for the Future of Work thought leadership division in EMEA. In this role, he spoke at hundreds of industry and technology events on the impact of digital technologies in society and the workplace. Michael's research has been featured at high-profile events such as the World Economic Forum and in major publications including the Wall Street Journal, Forbes, and the Financial Times. Prior to Cognizant, Michael served as a global research director at HfS Research with joint responsibility for digital workforce and talent solutions, cybersecurity, intelligent automation, and data services.

Michael earned a bachelor's degree (B.Comm.) in economics and econometrics and a post-graduate degree in international trade and development from the University of Johannesburg.

Tim van Tongeren



For more than fifteen years, Tim has worked with commercial leaders to navigate their strategic and organizational transformations required to thrive on digital technology change. In his current role as Managing Partner, he leads DT's Solutions and Consulting offerings to advise the world's largest pharmaceutical firms on how to best achieve customer experience success through digital transformation. He also directs DT's ongoing effort to provide the pharma industry with the most relevant insights on digital strategy, digital health, and organizational change.

Tim's recent client engagements include digital excellence maturity assessments, customer experience strategy definition, digital capability road maps, embedding CXQ[®] into the fabric of company-wide customer experience measurement, and training (global) marketing teams on reviewing and improving the customer experience of their digital presence.

Prior to joining DT Consulting, Tim served as senior advisor at Eli Lilly's Digital Hub in Europe and had leadership roles at GlaxoSmithKline's Digital Centre of Excellence to transform its customer experience and digital analytics capability. Before that, he served in SapienNitro's Strategy Consulting, helping firms across industries develop and execute their digital marketing strategies and multichannel presence. Tim started his career at Forrester Research as lead analyst of the customer experience practice in Europe.

Tim holds a bachelor's degree (B.Sc.) in business economics and a postgraduate degree (M.Sc.) in international business and economics from Tilburg University.

Hannah Price



Hannah has more than a decade of experience working with commercial and technology leaders focused on digital and customer experience transformation. She advises organizations on how to evolve their customer offering to take advantage of digital capabilities and develop the internal competencies required to effect this transformation. In her current role as Director of Customer Experience, she leads DT's customer experience practice, guiding the world's largest pharmaceutical firms towards creating deliberate, holistic experiences for customers that leverage digital channels and deliver business value.

Prior to joining DT Consulting, Hannah was a principal consultant at Forrester Research, where she worked with organizations developing customer experience strategies. These holistic strategies encompassed both the intended external experience delivered to customers and the internal capabilities required for customer experience operational success. Before that, she was a manager at Deloitte Digital, specializing in transforming firms' customer multichannel propositions and managing the resulting operational impacts. Hannah started her career at Accenture working on business transformation projects across a range of industries.

Hannah received a bachelor's degree (B.A.) in management studies from the University of Nottingham.