# Whitepaper - HCP Personalization Across the Pharma Industry

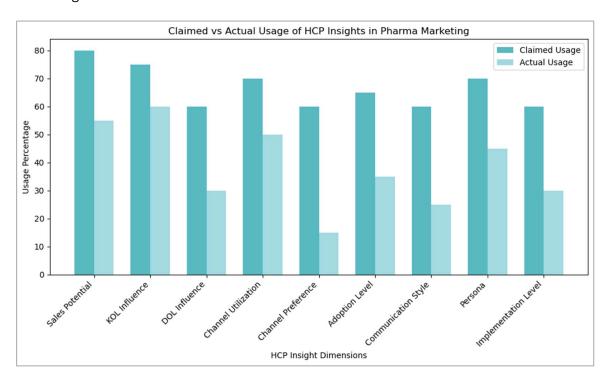
Data Jukebox, August 2025

# **Executive Summary**

Based on the latest insights from Data Jukebox internal research and global industry experts, this whitepaper explores how pharmaceutical companies use doctor-level HCP data across key marketing dimensions. It includes estimated adoption rates and discusses the gap between claimed and actual usage levels.

# **Summary**

The following chart illustrates the estimated percentage of companies effectively using each insight dimension:



#### Sales Potential

Understanding HCP sales potential allows pharma companies to prioritize field force engagement and ensure effective product launches. Doctor level data allows better targeting compared to group (brick) data. However, only about 55% of pharma companies effectively leverage this data to prioritize field force engagement. Many still rely on outdated segmentation models or using group data (at brick level not at doctor level). Companies leading in this area use predictive analytics to forecast future value,



not just historical performance. Integration with omnichannel strategies is growing, but full personalization based on sales potential remains underutilized.

#### **KOL Influence**

Key Opinion Leaders (KOLs) are central to shaping peer behavior. KOLs influence through research, publications, and speaking engagements. Pharma companies map these influencers using network analysis and social listening tools. Around 60% of companies have formal KOL engagement strategies. The most advanced firms blend both types to amplify reach and credibility. However, many still struggle to quantify influence beyond traditional metrics like publication count or conference presence.

### **DOL Influence**

Digital Opinion Leaders (DOLs) are an important subset of KOLs and leverage digital platforms to reach broader audiences, especially younger clinicians. Ignoring DOLs can lead to missed opportunities in digital channels, reducing engagement with tech-savvy HCPs. Only 30% actively integrate DOLs into their campaigns. Many still struggle to quantify influence beyond traditional metrics like publication count or conference presence. The most advanced firms blend both types (KOL and DOL) to amplify reach and credibility.

### **Channel Utilization**

Tracking channel utilization (e.g., email open rates, click rates, webinar attendance) provides insights into HCP engagement patterns. It helps to measure the effectiveness of outreach efforts. Ideally channel utilization is used to monitor the effectiveness of initiatives based on channel preference. Yet only 50% of companies systematically collect and act on channel utilization data. The rest often default to one-size-fits-all approaches, leading to disengagement. Omnichannel orchestration platforms are helping bridge this gap, but adoption is uneven.

### **Channel Preference**

Understanding how individual HCPs prefer to receive information - email, rep visits, phone calls, or social media - is critical for engagement. True channel preference is not derived from tracking data. It requires understanding an HCP's personality type, cognitive style, and decision-making traits. This is a leading indicator - predicting future behavior and is especially valuable for new product launches. Only about 15% of companies actively collect and act on preference data. Leaders use psychographic profiling and AI to align outreach with genuine preferences, improving engagement and trust. Companies that personalize outreach based on channel preference see significantly higher engagement and conversion rates.

# **Adoption Level**

Adoption level refers to how quickly and consistently an HCP integrates a new therapy into practice. Pharma companies track this via prescription data, formulary access, and



patient outcomes. Early adopters are often targeted for pilot programs and peer education. However, only 35% of companies have robust systems to monitor and respond to adoption curves at the individual HCP level. Most rely on lagging indicators like quarterly sales. Advanced firms use real-time dashboards and predictive models to identify barriers and tailor support, such as patient education tools or reimbursement assistance.

# **Communication Style**

Tailoring messaging to an HCP's communication style - data-driven, empathetic, concise, or exploratory - can significantly improve engagement. Natural language processing and rep feedback loops help identify these preferences. Despite its impact, only 25% of pharma companies actively personalize communication style at scale. Most reps still use standardized scripts. Companies that do invest in this area often see improved trust and message retention. The future lies in dynamic content generation that adapts tone and format based on real-time interaction data.

#### Persona

HCP personas combine demographic, behavioral, and psychographic data to create actionable segments - e.g., "evidence seekers," "tech-savvy educators," or "cost-conscious pragmatists." These personas guide content, channel, and timing strategies. About 45% of pharma companies use persona-based marketing, but only 20% update them regularly with fresh data. Static personas risk becoming irrelevant. Leaders in this space use machine learning to continuously refine personas based on new interactions, ensuring relevance and resonance. Persona-driven campaigns consistently outperform generic ones in engagement and conversion.

## **Implementation Level**

Despite the availability of rich HCP insights, full implementation across commercial functions remains limited. Only 30% of pharma companies integrate these dimensions into a unified strategy. Silos between sales, marketing, and medical affairs often hinder execution. The most advanced organizations use centralized data lakes and crossfunctional teams to ensure insights translate into action. Implementation maturity is a key differentiator in competitive markets, especially for new product launches, specialty and rare disease therapies where precision is paramount.



# **Summary Table**

The following table illustrates the estimated percentage of companies effectively using each insight dimension:

# **Claimed vs Actual Usage**

Insight Dimension	Claimed Usage (%)	Actual Usage (%)
Sales Potential	80	55
KOL Influence	75	60
DOL Influence	60	30
Channel Utilization	70	50
Channel Preference	60	15
Adoption Level	65	35
Communication Style	60	25
Persona	70	45
Implementation Level	60	30

## **Discussion**

The gap between claimed and actual usage of HCP insights in pharma marketing stems from a mix of organizational, technical, and cultural challenges. Here's a breakdown of the key reasons:

# **Over-Reliance on Legacy Metrics**

Many companies still use outdated KPIs (e.g., rep visits, script volume) as proxies for deeper insights. This leads to inflated perceptions of capability, especially in areas like sales potential and adoption.

#### **Siloed Data Systems**

Sales, marketing, medical affairs, and market access often operate in silos. Even when data exists, it's not integrated or shared effectively, limiting implementation across functions.

## **Tech vs. Execution Gap**

Companies may invest in advanced CRM, AI, or omnichannel platforms, but lack the change management or training to use them effectively. This leads to underutilization of tools that could support personalization, persona development, or communication style adaptation.



## **Misinterpreting Engagement Signals**

Channel utilization is often mistaken for preference. For example, high email open rates may reflect convenience, not interest. Without psychographic or behavioral context, engagement data is misleading.

#### **Lack of Real-Time Feedback Loops**

Few companies have systems to continuously update HCP insights based on new interactions. As a result, personas and preferences become outdated, and strategies stagnate.

## **Compliance and Risk Aversion**

Fear of regulatory scrutiny can lead to conservative approaches in personalization and digital engagement, especially in communication style and DOL engagement.

#### **Cultural Inertia**

Many teams are still structured around traditional field force models. Shifting to insight-driven, omnichannel engagement requires a cultural transformation that is slow and uneven.

# **Outlook & Opportunities**

As the pharmaceutical industry continues its digital transformation, the personalization of HCP engagement is poised for significant evolution. The next frontier lies in real-time, Al-driven orchestration of insights across all touchpoints - sales, marketing, and medical affairs.

### **Unified HCP Profiles**

Integrating behavioral, clinical, and psychographic data into a single, dynamic profile will enable hyper-personalized engagement strategies.

#### **DOL Activation at Scale**

With the rise of digital-native HCPs, structured DOL programs can amplify reach and credibility, especially in underpenetrated therapeutic areas.

#### **Predictive Engagement Models**

Leveraging machine learning to anticipate HCP needs, content preferences, and adoption triggers will shift strategies from reactive to proactive.

#### **Omnichannel Precision**

Moving beyond channel utilization to true preference-based orchestration will improve message resonance and reduce fatigue.

#### **Cross-Functional Implementation**

Breaking down silos between commercial and medical teams will ensure insights are not only gathered but acted upon consistently.



# **Compliance-Enabled Innovation**

Embedding regulatory intelligence into digital tools will allow for more confident personalization without compromising compliance.

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