Impact of COVID-19 on physician interactions and learning

Survey findings

June 2020

EY

Building a better working world

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Exploring the ripple effects of the pandemic on physicians

The pandemic has upended traditional norms around when patients seek care and how physicians provide it — and the impacts may resonate in the sector long after COVID-19 treatments are developed and social distancing fades from memory. Yet, for physicians, that's just one of many interactions with new implications.

For example, how are physicians achieving their continuing medical education (CME) credits, now that typical live events have been sidelined? How do digital platforms compare with in-person events in terms of effectiveness? The answers offer indications about how best to continue learning and spread best practices at a critical moment for the sector.

Separately, how are physicians interacting with sales reps from the pharmaceutical industry? In the past, these discussions were largely in-person and occurred frequently, up to three times a week — yet today, this activity offers another opportunity for the virus to spread. What alternatives exist across different communication channels, and how useful are they?

These are the questions we posed to about 400 physicians, across six specialties and in hospital and office settings, in June 2020. With a focus on the now, next and beyond, we present the insights that they shared with us to better understand the dynamics of the current and post-pandemic environments.

Executive summary: now, next and beyond

Results from the survey are grouped into three categories:

CME activities

Now:

Online testing is the most common channel used to earn credits, whereas conferences were cited the most before the pandemic.

of respondents see online channels comparable to in-person events.

Next and beyond:

Medical education functions should restructure and **pilot more virtual education content**, using using teams aligned by therapy area (TA) and in-house or third-party technological platforms to help drive engagement.

Sales representative engagement

Now:

About half of physicians say sales reps are **not permitted in their offices/hospitals**, and **about half have not received sample drops**. Online sampling went from being infrequent to being a major consideration.

Next and beyond:

Physicians largely do not support the resumption of traditional sales methods. Marketing functions should **adjust staffing and technological/user experience capabilities** for a more digital approach.

Patient engagement

Now:

Nearly half of physicians feel up to 25% of patient visits could be better handled virtually.

believe that patient communication technology is properly suited to complete patient interactions.

Next and beyond:

Over **80% anticipate that telehealth will continue to increase**. To enable agile telehealth discussions, prioritize practices based on specific needs and consider communication channel factors.

We conducted an online survey with 401 US-based physicians to understand the impact of COVID-19 on various activities and stakeholder interactions

Online COVID-19 physician survey

Survey topics

- COVID-19 impact on **continuing medical education activities**
- COVID-19 impact on **sales representative engagement**
- COVID-19 impact on **patient engagement**

Survey methodology details

- **Online survey** was conducted in **June 2020**.
- Physicians answered **29 questions** to understand their behaviors before, during and after COVID-19, including the topics of **CME, sales representative interactions and remote/virtual patient engagement**.
- **401 US-based physicians** practicing in either an office or hospital setting were included across **six specialties**.
- The following specialties were included in the survey sample:
  - Cardiology (N=61)
  - Endocrinology (N=60)
  - Neurology (N=59)
  - Obstetrics/gynecology (OB/GYN) (N=60)
  - Oncology (N=61)
  - Primary/family care (N=100)

Sample details

Region	Number (% of total)
Northeast	164 (41%)
Southeast	87 (22%)
Midwest	67 (17%)
West	56 (13%)
Southwest	27 (7%)

Practice setting	Number (% of total)
Academic hospital	121 (30%)
Community hospital	198 (49%)
Other*	82 (21%)

* Physicians selecting "Other" were office-/private practice-based physicians.

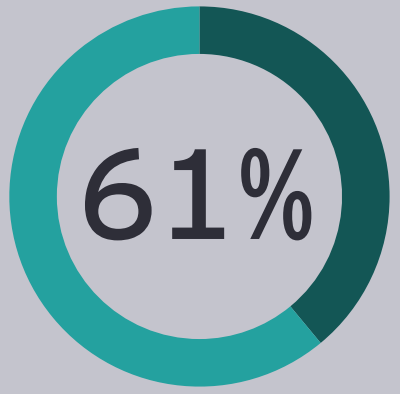
1 COVID-19 impact on continuing medical education activities

Now: Methods of obtaining CME credit have transformed since the onset of COVID-19

Before COVID-19:

Physicians most frequently participate in **conferences** to gain CME credits, and **88%** have experience using online platforms.

Of the physicians who participated in **online/virtual learning platforms**



consider online platforms **comparable** to in-person CME activities.

For **PC*** and **OB/GYN physicians, self-study** is the most frequent CME activity.

Since COVID-19:

Online testing has become the most common channel used to earn CME credits.

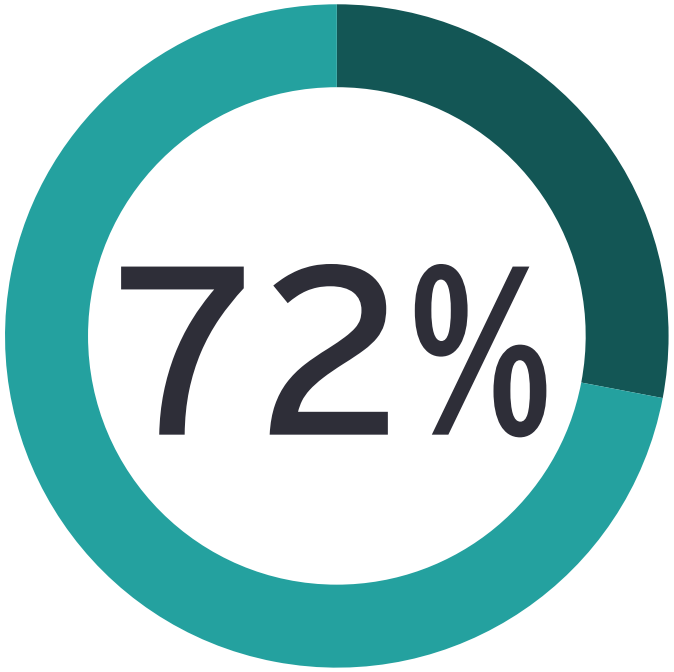
* PC means primary care.

Next and beyond: Internet learning is expected to drive physician CME activity in light of the COVID-19 pandemic

of oncologists who don't currently use online/virtual platforms anticipate increasing the rate of use of online/virtual platforms to at least **double**.

Oncologists specifically indicate **conferences** will still be a frequent CME activity.

Of those who didn't use online/virtual learning platforms for CME credits prior to COVID-19,



plan to **increase usage of online learning platforms** in the future.

Operating model implications

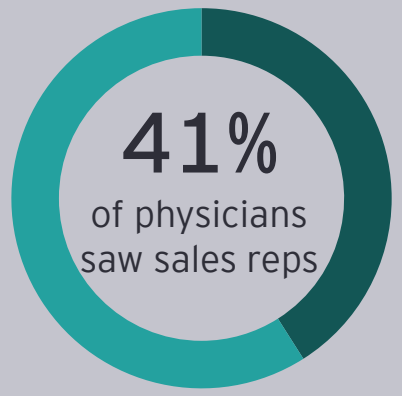
Medical education/medical affairs functions should restructure and pilot more virtual medical education content.

- Develop TA-aligned teams to launch specialized medical education programs based on health care provider (HCP) practice needs
- Design online platform in-house or collaborate with third-party technological platform to increase HCP engagement with company

2 COVID-19 impact on sales representative engagement

Now: Before COVID-19, physicians had frequent, in-person interactions with sales reps; however, COVID-19 restrictions are forcing a shift in communication channels

Before COVID-19:



Most interactions were **product discussions** and **sample drops.**

>4x per week.

Since COVID-19:

49%
say reps are not permitted in office.

52%
have not received sample drops.

Current interactions:

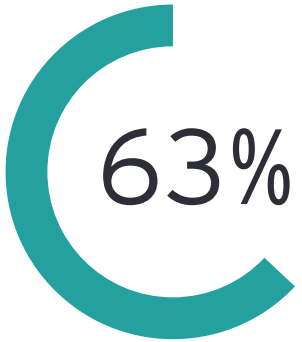
30% are communicating now by **email.**

20% are communicating now by **video chatting/conference.**

18% are communicating now by **phone calls.**

After COVID-19, as stay-at-home orders and social-distancing measures are lifted:

37% of physicians anticipate allowing modified access to their offices by sales reps.



63% of physicians will either re-assess at a future date or further delay access.

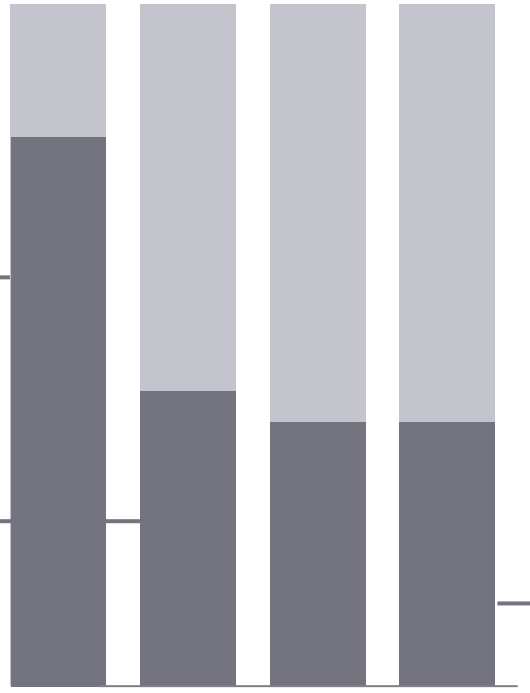
Now: Before COVID-19, physicians typically saw sales reps up to three times per week; however, frequency and duration differed across practice setting and specialty

Drivers by **practice setting**

Academic and community hospitals reported interacting with sales reps fewer than four times per week, while **nonhospital physicians** reported interacting more frequently with sales reps.

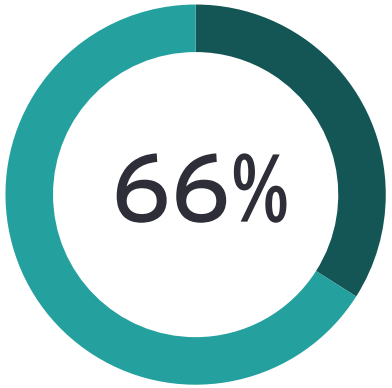
76% of academic hospital physicians + **55%** of community hospital physicians see sales reps **up to 3x per week.**

57% of nonhospital physicians see sales reps **more than 3x per week.**



Drivers by **specialty**

Endocrinologists interact most frequently with sales reps to discuss products, while OB/GYN and PC physicians typically engage in sample drops.



of sales reps interactions are in-depth product discussions.

- For **OB/GYN and primary care physicians, sample drop** only was their most common interaction.

21% of endocrinologists see sales reps **10x per week.**

Endocrinologists have the highest proportion of survey participants. They think these interactions are too frequent.

Now: While online sampling was infrequent, it has become a major consideration across specialties

Before COVID-19:

Since COVID-19:

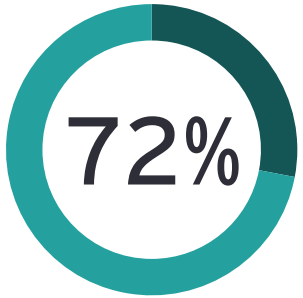
100% **would like to conduct virtual meetings** with manufacturers.

41% **are interested in online sampling** in the future.

20% **have participated in online sampling** since the lockdown.

***Endocrinology** is the only specialty to participate.*

This was driven by:



of **academic hospital physicians** did not participate in online/automated program sampling prior to COVID-19.

of **nonhospital physicians** interact with sales reps to receive **in-person sample drops only.**

Next: Most physicians anticipate a significant decrease in rep interactions, but some physicians maintain that face-to-face sales methods are preferred

of physicians anticipate future sales rep interactions will **decrease by 50%.**

Prefer online sampling

57%

Prefer virtual meetings

48%

Nonhospital physicians prefer to participate in online sample ordering

44%

Community hospital physicians prefer to participate in online sample ordering

40%

Academic hospital physicians prefer virtual meetings

51%

of physicians anticipate post- and pre-COVID-19 interactions will **remain the same (with face-to-face being the preferred** method).

Cardiologists prefer face-to-face interactions

57%

Neurologists prefer face-to-face interactions

54%

Endocrinologists are the only non-OB/GYN or PC specialists where the majority prefer online sampling

55%

Beyond: Ultimately, physicians are not supportive of resuming traditional sales methods

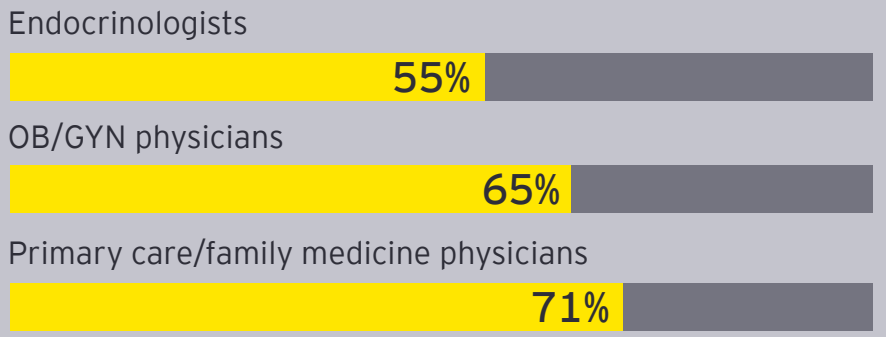
Interactions with sales reps …

37% of physicians anticipate allowing **modified access** to their offices for sales reps.

63% of physicians **will re-assess or further delay** access.

70% of physicians who anticipate a decrease in in-person sales interaction expect that **decrease to exceed 50%.**

… and delivery channels will change



want to engage in **online sample ordering** from the manufacturer.

Operating model implications

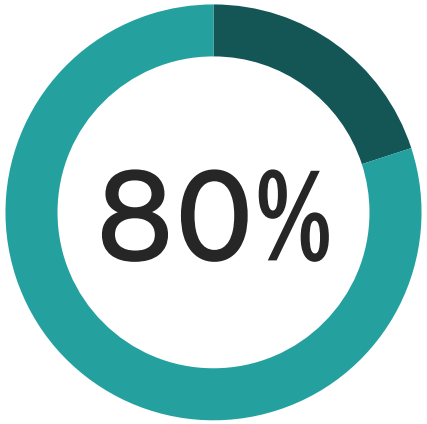
Marketing functions at pharmaceutical and biotech companies should adjust staffing and technological/user experience capabilities to meet HCP needs. This may include:

- Per diem/contractor sales reps to fluctuate as needed
- Democratization of IT department
- Shifted power from chief operating officers to chief information officers
- Increased data analytics capabilities to track customer needs and personalize the response

3 COVID-19 impact on patient engagement

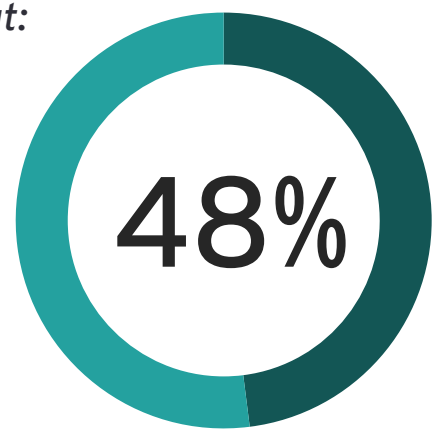
Now: Although digital technology wasn't widely used prior to COVID-19, nearly half of physicians feel a portion of visits could be better handled virtually

Before COVID-19:



of physicians **did not utilize virtual technology** (i.e., telehealth) to interact with patients.

But:



of physicians say that up to **25%** of patient interactions could be better handled virtually.

Since COVID-19:

95%

of physicians have **increased their virtual technology usage.**

58%

of those have **increased usage by 50%.**

58% **of physicians**

feel patient communication technology is properly suited to complete patient interactions and feel there is proper training to leverage digital tools for patient interaction.

Now: Physician sentiment around virtual patient interaction is mixed; many practices will continue to make digital investments post-COVID-19

	*Do you think **in-person patient interaction** is **unnecessary** and **could be virtual?***		*Is your practice **investing in digital technologies** for patient interactions?*
Neurologists	**No**	Neurologists had **the lowest proportion** of survey participants who say 26%–50% or 51%–75% of patient interaction could be better handled virtually (35% and 8%, respectively).	✓ Yet, 49% of neurologists consider their practice as having "to a large extent" invested in digital technologies (with a rating of 5, 6, or 7 out of 7).
Oncologists and primary care physicians	**Yes**	Forty-four percent of oncologists and primary care physicians believe that 26%–50% of patient interactions are unnecessary and could be better handled virtually.	✗ Oncologists and primary care physicians had the highest proportion of **low rating** (4 out of 7) regarding level of practice investment in digital technology.
Endocrinologists	**Yes**	Most endocrinologists say that either 26%–50% or 51%–75% (46% and 15%, respectively) of patient interactions could be better handled virtually.	✓ Endocrinologists had the **highest rating** (6 out of 7) regarding level of practice investment in digital technology.

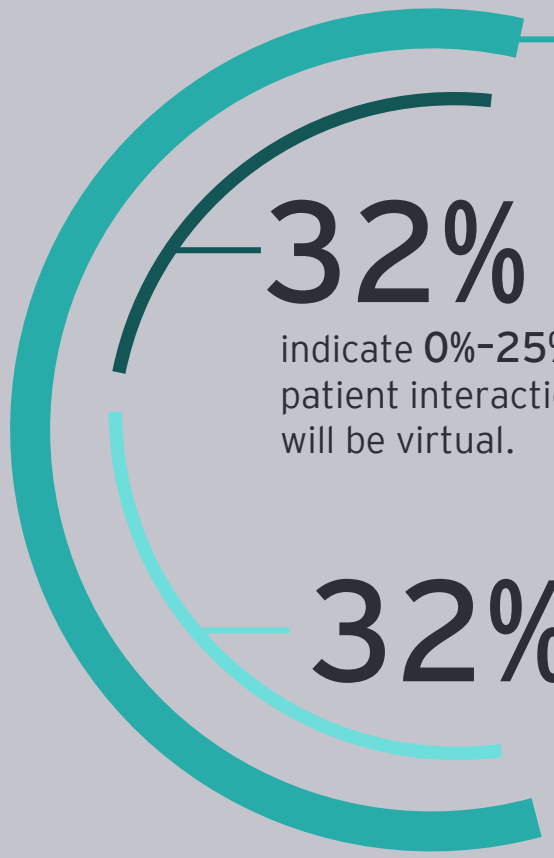
Next: HCPs expect an increased emphasis on and usage of patient communication technology even after the COVID-19 pandemic

88%

of physicians feel that the **importance of patient communication technology will continue to increase.**

82%

anticipate their **usage of virtual technology** (i.e., telehealth) **will continue to increase.**



65% of physicians anticipate they will use virtual technology for up to **50%** of patient interactions.

32% indicate **0%–25%** of patient interactions will be virtual.

32% indicate **26%–50%** of patient interactions will be virtual.

Beyond: While reliance on technology differs across specialties, it is clear that marketing functions should reorient to address HCP needs

Neurologists have the highest proportion (22%) of survey participants providing the **highest rating** (7 out of 7) regarding anticipated willingness of their practice to invest more in advanced digital technology for patient interactions.

Oncologists have the highest proportion (30%) of survey participants providing the **lowest rating** (4 out of 7) regarding anticipated willingness of their practice to invest more in advanced digital technology for patient interactions.

Note: Oncologists gave the same rating on expected level of practice investment compared to current level of practice investment.

Operating model implications

Marketing operation functions will launch innovation centers and push technology throughout the organization, to enable discussion with patients in an agile way.

- HCP practices will be grouped by innovation expectation and prioritized based on practice needs.
- Communication channels will vary by HCP practice expectations.

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