

GEOGRAPHIC SEGMENTATION WITHOUT REORGANIZATION

Live Webcast: October 7, 2010 at 12:00 PM ET
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EVENT OVERVIEW:

Geographic Archotyping - An Innovative Approach to Integrated Pharmaceutical Marketing or "How to achieve geographic segmentation without reorganization"

Over the last decade, U.S. pharmaceutical spending on market access, direct selling, and consumer promotions has grown at a faster rate than top line sales. The resulting pressure on profit margins has led a number of leading companies to rethink their U.S. commercial models and, in some cases, make radical organizational changes.

In addition to broad reductions in primary care sales forces, several pharmaceutical companies have recently restructured their customer-facing activities into four or five regional business operations. Decision-making has been pushed closer to the providers and insurers in an attempt to better serve their distinct needs.

This solution of reorganization and regionalization does not directly address the underlying problem: Marketing and sales resource requirements may differ vastly in two adjacent territories due to underlying variances in a) the nature of physicians, b) the power of managed care, and c) the behavior of consumers. By measuring and understanding these three discrete factors, marketers can see that there are greater differences within a single sales district than across four or five national sales areas.

While pharmaceutical marketers have focused on understanding differences in physician attitudes and product adoption patterns, they have yet to sufficiently incorporate an understanding of the geographic differences in managed care and consumer behavior. New data which captures important metrics on managed care dominance, patient cost-sharing disparities, and patient response to out-of-pocket expense, is now available at a highly granular geographic level.

By integrating these data and capturing the underlying differences in the "sphere of influence" of physicians, managed care,

and consumers, pharmaceutical companies can be both more efficient and more effective at allocating resources. More importantly, a systematic approach to "archotyping" the geographic differences in influence allows pharmaceutical marketers to achieve these goals without radical organizational change — "Geographic segmentation without reorganization"!

WHO SHOULD ATTEND:

- VP & DIRECTOR OF MANAGED MARKETS
- VP & DIRECTOR OF PHARMACEUTICAL SALES
- VP & DIRECTOR OF MARKETING
- VP & DIRECTOR OF MARKET RESEARCH
- VP & DIRECTOR OF SALES OPERATIONS

KEY LEARNING OBJECTIVES:

1. Understand how to leverage new information to assess the relative influence that providers, payers, and patients have on brand performance across all levels of geography.
2. Learn how to translate these underlying differences into a set of integrated sales, managed markets, and direct-to-patient strategies to maximize brand performance.
3. Learn a new approach, "geographic archotyping" which will provide a process for managing the complexity of executing and monitoring multiple strategies simultaneously.



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