

PoC3 Marketplace Update

November 2021



Point of Care Communication Council

Agenda

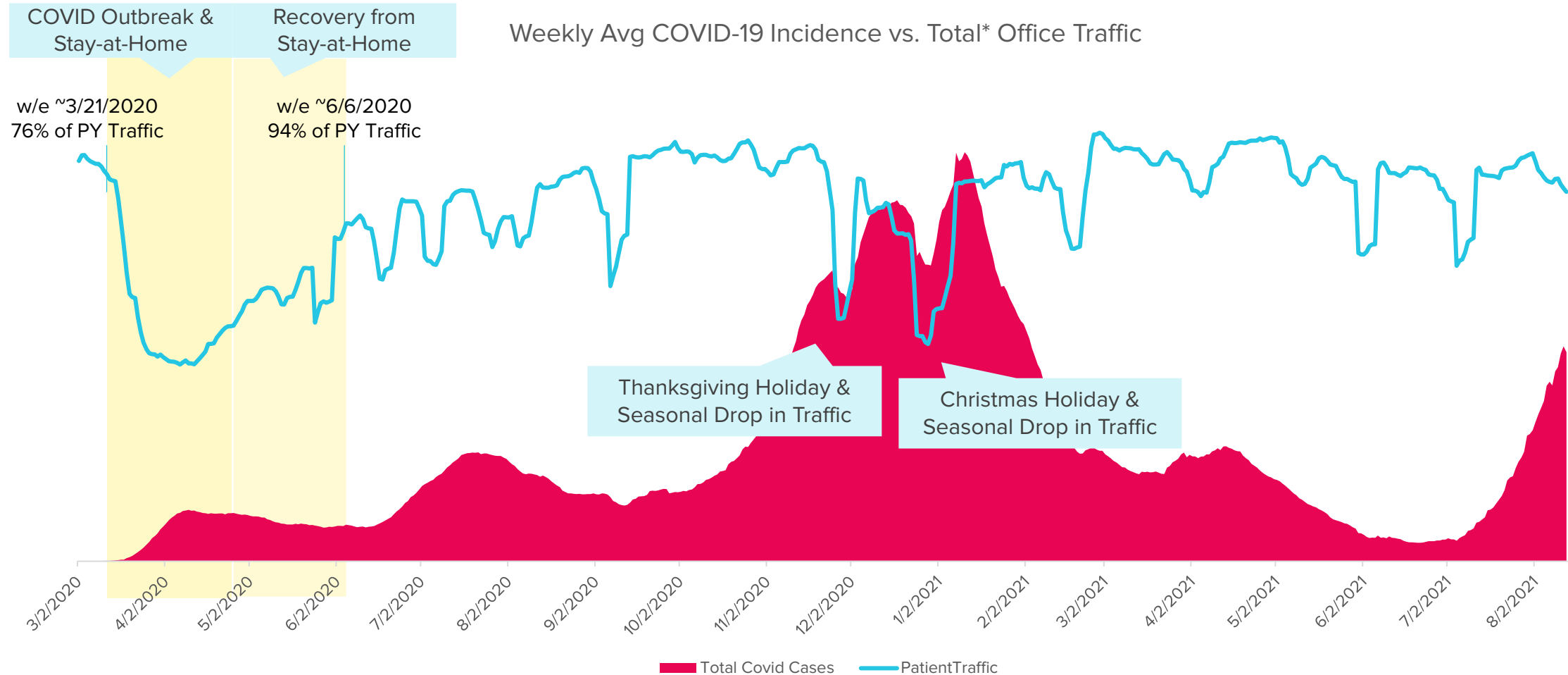
- COVID Patient Traffic Analysis
- In-office and Patient Behavior Trends
- POC Performance During COVID
- Industry Insights
- Key Takeaways
- Q&A

Executive Summary

- In-person patient visits have recovered
- Patients are spending time in the waiting room again
- More offices are displaying materials vs. a year ago
- When patients interact with health media, they take action
- Blockbuster brands with targeted POC campaigns saw the strongest ROI during COVID
- Pharmacy programs are effective at reaching consumers and driving performance
- Precision targeting is a core benefit of POC to help achieve business results

Stay-at-home Period Had The Greatest Impact On Patient Traffic

COVID's Incidence has Little Impact on Patient Traffic & Was Limited to the Stay-at-Home Period



Public Announcements Urging Patients to Visit Their Doctor

Senator Amy Klobuchar



“But I hope my experience is a reminder for everyone of the value of routine health checkups, exams, and follow-through.”

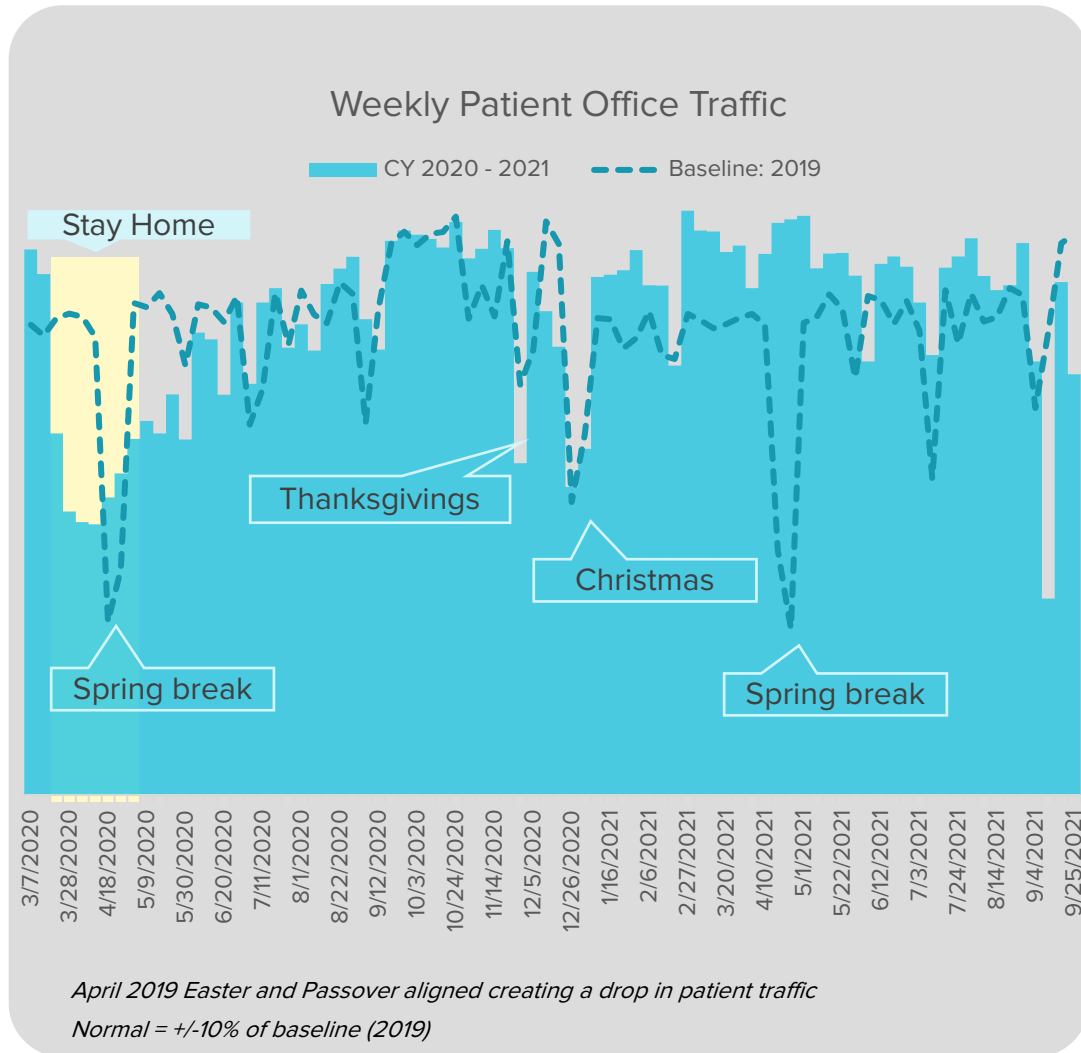
It's time to go back to the doctor's office. In person this time.

There's no reason to delay any longer.



Courtesy of Stop Medical Distancing

Patient And HCP Conversations Continue to Increase



- COVID's impact on patient traffic was sudden and acute and varied by specialty
- 2H '20 – 1H '21 drop-in Primary Care visits was almost completely due to a mild Cold and Flu season
- Visits for chronic disease remained constant during the 2H '20 – 1H '21
- Many visits were not lost but delayed
- IQVIA expects hundreds of millions more Patient/HCP conversations expected to happen vs. 2020

Almost All Patients Wait In The Waiting Room



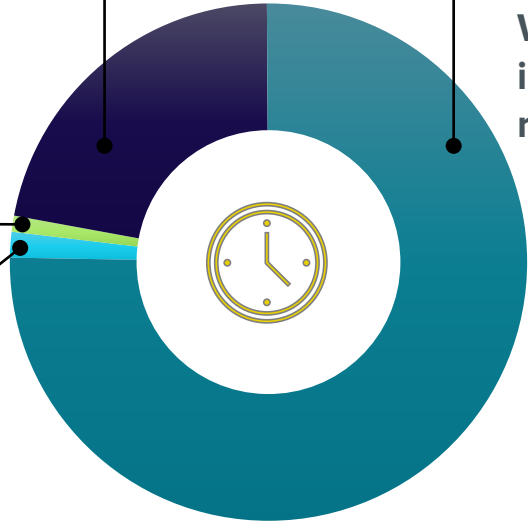
22% Waited outside/ in car and in the waiting room

1% Waited only outside or in the car

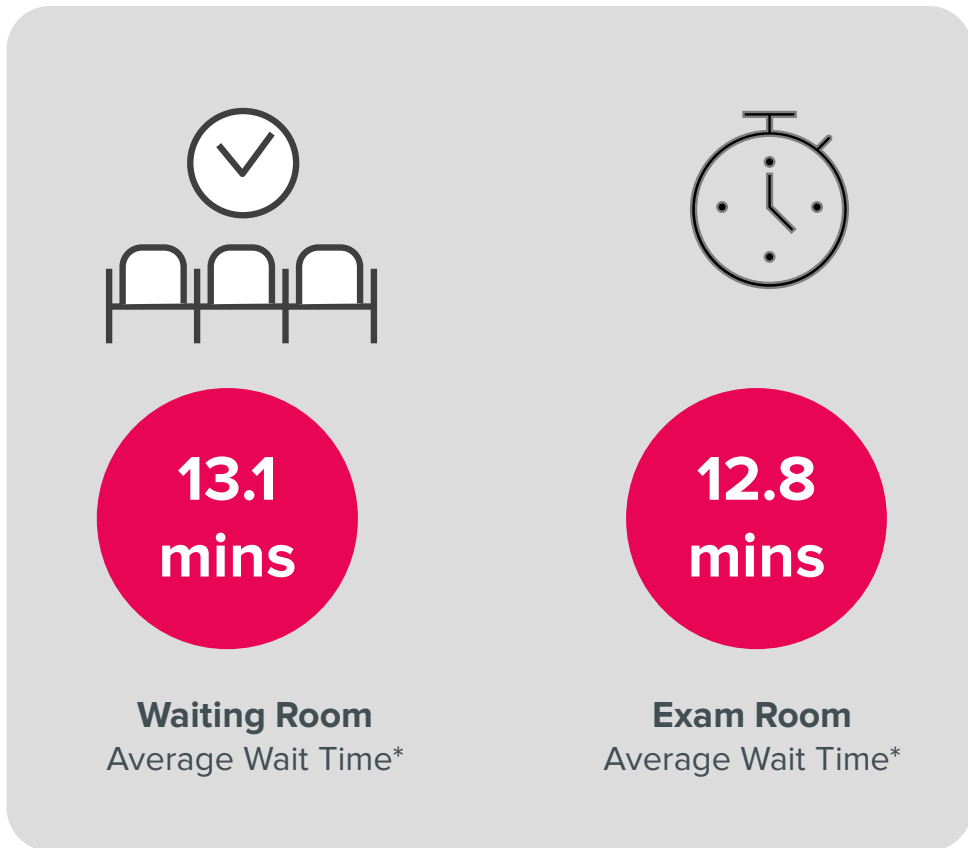
2% Did not wait

75%

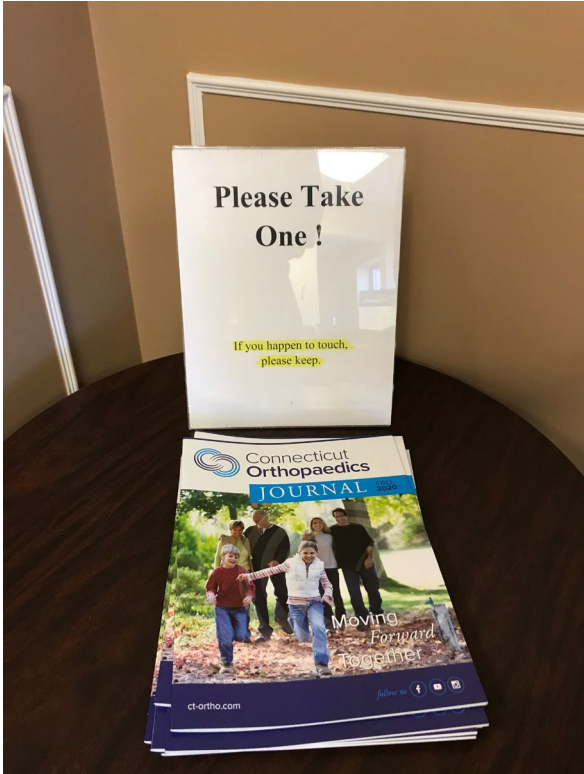
Waited only in the waiting room



Patients Are Still Waiting But the Experience May Be Different



Offices are displaying materials in a safe manner to ensure patients receive educational materials



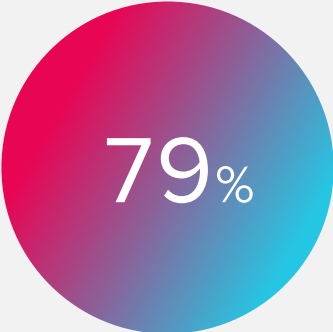
*2021 Nationwide Web Surveys of 739 respondents who visited physician offices installed with the PatientPoint Interact Program. Data as of 7/31/21

**2021 Nationwide Web Surveys of 2190 respondents who visited physician offices installed with the PatientPoint Communicate, Educate, and/or Interact Programs. Data as of 8/25/21

**TMH conducted survey wave 4 (Aug 2021) is based on the 86 respondents to date

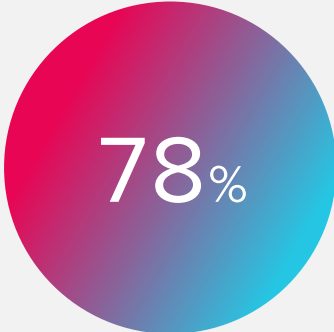
Patients in Hospital Systems Engage with Media and Take Action

Health content viewed on hospital TVs to be helpful



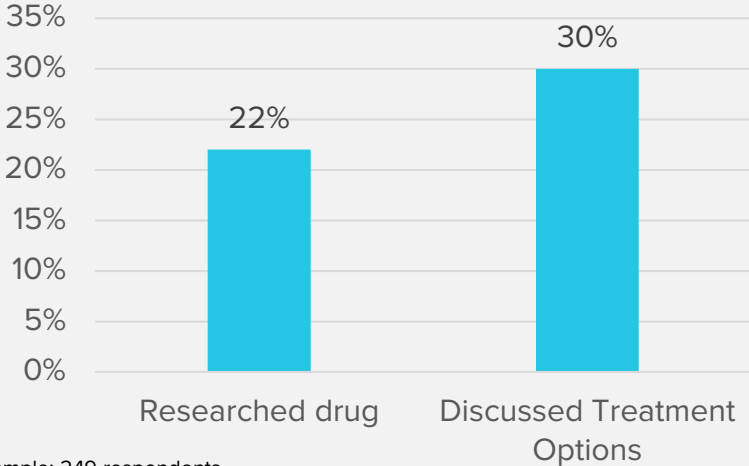
Sample: 438 respondents

Of people watching Hospital TV reported being able to recall health-related ads



Sample: 500 respondents

Because of the health content I saw on Hospital TV, I took the following actions



Sample: 249 respondents

Point of Care
Media was
effective during a
pandemic, but
results varied

Campaign
Targeting

Tactic

Volume of
investment

Despite a dip in patient visits, POC still performed

ZS Conducted ~180 Marketing Mix Analyses with consumer POC media July '20 – July '21 across specialties

Blockbuster brands with highly targeted POC buys had strong ROI

5:1 to 7:1 ROI

POC channel generated a strong ROI on par with TV and Digital

Median ROI for all brands using POC

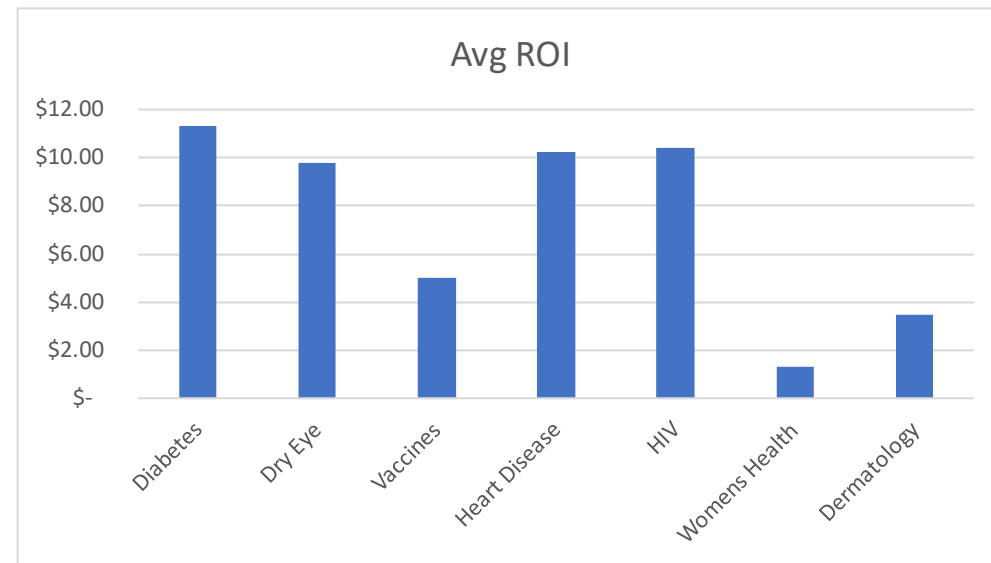
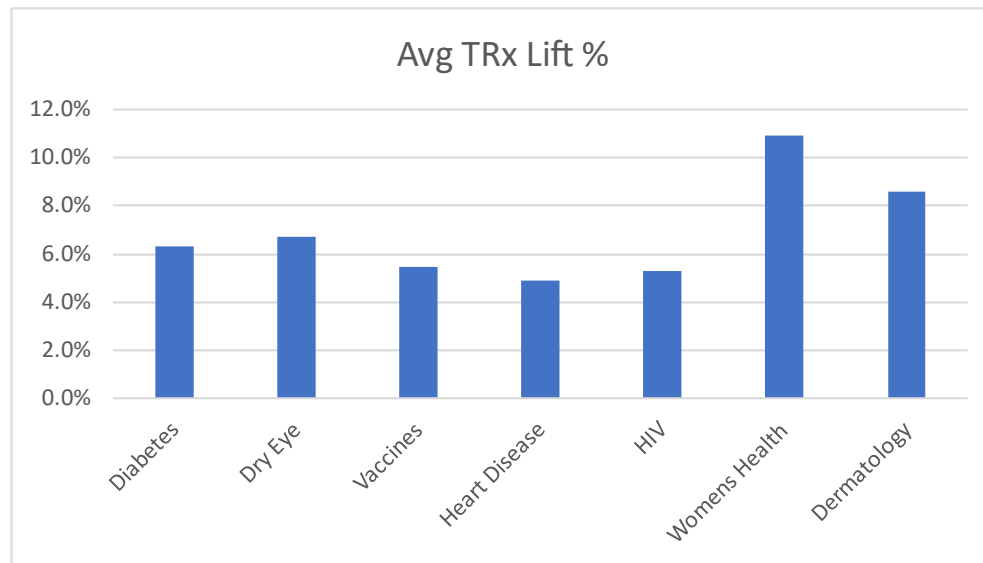
1.75:1 ROI

POC performance expected to increase to pre-COVID levels since patient traffic is back

Pharmacy Programs Proven to Be Effective During COVID

- Pharmacy became the most essential business delivering medications and basic necessities
- Visits were down at the peak of stay-at-home orders but resulted in short term impediment to campaign results

Average lift in total prescriptions of over 5% and ROIs greater than 4:1 across therapeutic categories



Q&A with Nicole Divinagracia and Sarah Bast



Nicole Divinagracia

Executive Director

PoC3

- POC performance during COVID
- 2022 Predictions
- PoC3 Certification Seal
- POC Specialists
- Health Inequities



Sarah Bast

SVP, Point of Care Lead

PHM

Industry Insights: Q & A

NICOLE:

- After seeing the marketing mix analysis from ZS, how do the POC results for programs that ran during COVID compare to what you have seen at PHM?

SARAH:

- We saw POC conversion trends in 2020 followed closely with COVID-19 related closures. Overall, we saw reduction in new patient starts during April-June 2020 which correlates with shelter at home mandates. We saw improved cost per new patient starts in 2020 over 2019.
- Looking at 1H result for 2021, we are seeing the POC channel as one of the highest conversion rates for incremental new patient starts compared to all media channel performance.
- We are also seeing Waiting Room TVs resonates higher from an incremental new patient rate as well as driving volume.
- Given these results we anticipate investment levels continuing

Industry Insights: Q & A

NICOLE:

- As you finalize your plans for next year, are there any lingering concerns regarding COVID and the impact it will have on POC media in 2022?

SARAH:

- We are seeing interest in POC grow and therefore budgets increase. Not only does the data from IQVIA and SHS show that office volume is back to pre-pandemic levels, but brands are also relying on in-office POC to work harder as their Personal Selling models have changed due to the pandemic.
- Further we see added opportunity, such as telemedicine and the expansion of POC networks to ensure improved inclusivity and representation

NICOLE:

- Would you say there is less of a concern about including waiting room tactics on your plan for 2022 now that patients are back in the waiting room?

SARAH:

- Yes, there is less of a concern however we are evaluating each therapeutic category separately and making decisions not only based on the disease state but also based on budget levels. Each situation is going to be different.

Industry Insights: Q & A

NICOLE:

- Do you think brands who scaled back last year due to COVID will make POC a priority again now that the patient experience has normalized?

SARAH:

- Absolutely! Brands that stayed with POC are increasing their budgets and brands that paused POC are entering back into the space. But I would say the definition of “normal” is forever changed.

NICOLE:

- POC is anywhere and everywhere a consumer is receiving care with an HCP. COVID has really emphasized this concept with the types of locations expanding beyond the traditional doctor office. Are you seeing more brands adopting the approach that POC should be considered beyond the waiting and exam room of a doctor office?

SARAH:

- That’s an excellent point and we couldn’t agree more. For our clients, In-office remains the setting where we see the largest investment. Pharmacy is the area we seeing growing the most. We are seeing Pharmacy become a bigger play as patients' relationships with their pharmacist have become deeper, foot traffic has increased with vaccinations happening more at the pharmacy, and POC partners are expanding their footprints and offerings within pharmacy.

Industry Insights: Q & A

SARAH (Continued):

- We are also reclassifying POC as a foundational media strategy. Other marketing and media efforts have helped to get the patient to the doctor's office or virtual visit. Point of Care is the last opportunity for a media touchpoint before treatment decisions are made, where we can educate and empower patients to have the right discussions with their HCPs.
- The importance of this is foundational to our media plans. Yes, the price of entry for POC is higher but there is an opportunity to focus on the right offices where a brand can make the biggest impact and ultimately help the right patients.

NICOLE:

- The PoC3 Verification and Validation Guidelines have a standardized approach for auditing to ensure agencies and clients have comfort in where they are investing their money. Since the beginning of this year, we have provided the PoC3 Seal to nearly 40 product lines across media companies which means their audits passed our standards. This process is very exciting and big news for our industry. Is PHM incorporating the PoC3 Seal as part of your planning process and what does a tactic with the PoC3 seal mean for you and your clients?

Industry Insights: Q & A

SARAH:

- This was a tremendous effort by the PoC3 and we are grateful for all the work that has been done. The Seal means a great deal. It means, trust, transparency, accuracy.
- We are absolutely factoring this into our planning evaluations and decisions.
- At PHM we have our own proprietary program called PHM Validate where identified publisher partners are led through a rigorous evaluation process to ensure their capabilities meet the standards PHM expects and requires on behalf of its clients. For our POC partners, Verification and Validations and the PoC3 Seal are one of criteria.
- This is an area where we need to continue to focus and re-evaluate as we innovate in the space to expand POC settings and tactics.

NICOLE:

- The PoC3 will be working closely with the V&V Committee and Industry Advisory Council to continuously monitor the landscape to ensure our guidelines are adequate for all media channels. We want to make sure that as new offerings come to market or the technology changes that our guidelines are accounting for this. We are also in the process of fine tuning the document, so be on the lookout for new versions in the coming months.

Industry Insights: Q & A

NICOLE:

- Over the last 2 months I've had the opportunity to meet with many industry leaders on the agency and client side as an introduction into this new role. It appears that POC is ramping up again as plans are being developed for 2022. There has also been some movement in the industry with agencies creating POC specialist teams. I understand this is area that PHM is also supporting. Can you tell me why this approach is important at PHM and if developing talent for this channel is a signal that POC is becoming a bigger emphasis for brands?

SARAH:

- Specialized teams in many media channels are important including POC. I think back 10+ years ago when I had to get Google ad words certified and run paid search campaigns. We quickly added a dedicated Paid search team. As channels evolve and grow each agency will need to evaluate building a specialized team. For us it was based on a few factors:
 - PHM + industry spend increases coupled with the acceleration of new POC settings drove the need to establish a dedicated POC capability
 - Ensuring all health & wellness clients have access to a team that is well versed in POC strategy, data and activation – not just relying on the OOH team.
 - We have tripled the size of our team over the last year, including an EHR specialist, and expanding quickly.
 - Having specialists allows us to educate on the effectiveness of POC and develop a tailored approach for every brand and campaign.

Industry Insights: Q & A

NICOLE:

- Over the years I've seen strategy and various investment teams pick up the responsibility for POC. There is a learning curve when you start working in POC as there are nuances associated with the channel that differ from other media. One of the initiatives the PoC3 plans to launch next year is a formal training program to educate professionals on the POC space. It is important that anyone planning/buying POC have the resources to provide informed recommendations to their clients. What are your thoughts on this training program for those working in the POC space?

SARAH:

- This will be tremendously helpful for agencies and clients that don't have specialized teams but quite honestly helpful for someone like us PHM that does have a dedicated team. I am a strong believer in collaboration and everyone having access to education is important.

NICOLE:

- I'd like to end our discussion on a very important topic and one that is gaining a lot of traction at PHM. COVID really laid bare the inequities that have long existed in health, across the industry and specialties. It has accelerated the search for solutions. Can you share what PHM is working on regarding this topic?

Industry Insights: Q & A

SARAH:

- We see an increased interest in our clients wanting to better address the health inequities that took the world stage during pandemic, which has forced point of care, all of us to take a hard look at what our point of care strategies should be.
- A lot of work is being done and at PHM and we are focused on the media. How to reach patient populations where they are with content that speaks specifically to them with critical and relevant information, information that can really make an impact and change health outcomes.
- POC solutions today do not effectively reach or engage non-white/non-Hispanic patient populations for optimal outcomes.
- Limited access to care for underserved populations is a significant barrier for health engagement.
- Patients with limited health engagement require unique approaches to push them into care.
- We have broken this down to making changes in 3 areas, planning, reach, and measurements.
 - Planning
 - The practice of using HCP target list for POC planning is not reflective of these audiences. Target lists are based on Rx behavior and do not effectively take into consideration the populations where health inequities are happening.
 - We need to use a different data source to determine populations we should be reaching (e., census data, FQHC)
 - Total population campaigns do not effectively reach or speak to these audiences. One solution is to separate out campaigns and budget allocations – most of us have experienced that the first thing that gets cut is the Spanish language website. We need to ensure this does not keep happening.
 - Reaching Audiences
 - Creating a POC Network which reduces disparities in current POC offerings, expands diversity health engagement & authentically speak to audiences.
 - We are partnering with the POC Media Partners to understand their networks and gaps and working on expanding.

Industry Insights: Q & A

NICOLE:

- It is great to hear how you are initiating conversations among the media partners. What was their reaction to this initiative?

SARAH:

- We are having a lot of conversations. We were already aware that several of the POC Media partners were working on initiatives of their own. Collaboration is key as we all need to be focused on this initiative to keep it moving.
- The conversations we are having are not only with our POC partners.
- We also know that these audiences are not at POC and we need to redefine POC media and expand into OOH placements that are health adjacent
 - In health mind set – gym
 - Close proximity – taking a bus to a Dr appt or to work and passing an urgent care center
 - Culture/community environment – barber shops, salons, places of faith, community centers
 - Transforming Place of Culture into Points of Connection to Point of Care
- There needs to be an emphasis on content. Not only ensuring that our brands are creating culturally relevant content for each audiences. Also, ensuring our partners are creating content that speaks to each audience in their voices, their first languages at the right health literacy levels

Industry Insights: Q & A

NICOLE:

- As you start to make changes in media and messaging, how will you determine success?

SARAH:

- We need to look at both quant and qual measures
 - KPIs aligned to audience hurdles that can showcase how audiences are engaging more with healthcare and moving along their healthcare journey
 - Audience exposure surveys to understand message awareness, sentiment and other criteria associated with engaging in Healthcare
 - Finally, we need to challenge ourselves to think about accountability measures: Identify the biases or gaps that exist in your data set and measurement processes as well as setting a baseline on initiatives today and goals of expanding and increasing these initiatives
 - I challenge you to look at what you are doing today and begin to think about what you and your organizations can do. Meet with 2 people over the next week to brainstorm ideas. Then set a 30, 60, 90-day plan for developing your initiatives.
 - We are a work in progress when talking about solving for health equity. This isn't only a program for PHM but for our industry and we all need to be focused on it.

Thank You

Nicole Divinagracia

Executive Director, PoC3

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Biographies



Nicole Divinagracia, Executive Director – PoC3

Nicole brings more than 20 years of experience to PoC3 and previously served as VP, Group Director of POC Investment at Havas Media Group, a global marketing and communications group. During her time at Havas, Nicole created and managed their Point of Care capability, which included the emerging telehealth marketplace. As an advocate for POC, she is committed to educating agency partners and brands about the benefits and importance of connecting with patients and caregivers in this channel.



Sarah Bast, SVP, Point of Care Lead – PHM

Sarah brings 15+ years of pharmaceutical experience to the table and most recently led marketing and media strategy for Bayer, Johnson & Johnson and AstraZeneca at PHM.

Sarah is a multi-channel health and wellness marketing strategist specializing in Point of Care, Electronic Health Records, and Telehealth media and partnerships.