Data-Driven Decisions Unlock Sales Potential: Achieved 3x Higher ROI

Novo Nordisk Spain and BTS

Best Results of a Learning Program

November 2024

Company Background

Company-at-a-Glance	
Headquarters	Copenhagen, Denmark
Year Founded	1923
Revenue	232,261 DKK Million
Employees	64,000
Global Scale (Regions that you operate in or provide services to)	Novo Nordisk operates in 80 offices around the world, and market our products in 170 countries.
Customers/Output, etc. (Key customers and services offered)	Novo Nordisk's treatments today are benefiting millions of people living with diabetes, obesity, and rare blood and endocrine diseases. From their labs to their factory floors, they are discovering and developing innovative biological medicines and making them accessible to patients throughout the world.

Industry	Healthcare
Stock Symbol	NVO
Website	novonordisk.com

Company Background

Company-at-a-Glance	
Headquarters	Stockholm, Sweden
Year Founded	1986
Revenue	MSEK 2,530 in 2022
Employees	> 1200
Global Scale (Regions that you 2pérate in or provide services to)	35 offices across Europe, Asia-Pacific, North America, South America, Africa, Middle East.
Customers/Output, etc. (Key customers and services offered)	BTS partners with nearly 450 organizations, including over 30 of the world's 100 largest global corporations. The organization's clients are some of the most respected names in business: Microsoft, SAP, Chevron, Coca-Cola, Volvo Group, Citigroup, Salesforce, and Tencent. BTS serves a wide range of client needs, including: - Assessment centers for talent selection and development. - Strategy alignment and execution. - Business acumen, leadership, sales and marketing training programs. - On-the-job business simulations and application tools. - Coaching as a practical tool to shift mindsets and turn strategy into action.
Industry	Professional Services

Stock Symbol	OMX Nordic Exchange Stockholm: BTS b.
Website	www.bts.com

Budget and Timeframe

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Fit to the Needs

Building on its heritage of developing groundbreaking diabetes medicine, Novo Nordisk has become a leading healthcare company that drives change to defeat serious chronic diseases. They do this by pioneering scientific breakthroughs, expanding access to medicines, and working to prevent and ultimately cure diseases. Novo Nordisk, headquartered in Copenhagen, has operations in 80 offices around the world and markets its products in 170 countries. Novo Nordisk is currently yielding great results in terms of both patient value and robust market growth, thanks to its lifechanging innovations, and is looking to consolidate its leading position through research and development that can take patient value to new heights.

In line with this, Novo Nordisk has launched a product that aims to improve patients' quality of life through a dosage regimen that blends more seamlessly into their day-to- day. This product, which is intended to treat Type II Diabetes, has also been discovered to have cardiovascular benefits for patients.

Due to this discovery, the product, typically prescribed by endocrinologists, is also prescribed by cardiologists. As this cardiovascular benefit has been discovered relatively recently, Novo Nordisk Spain has taken the lead in boosting adoption among cardiologists.

In beginning this effort, Novo Nordisk Spain identified the following gaps:

- Difficulty in prioritizing the right HCPs and executing the commercial strategy due to a lack of clearly defined segmentation fields and criteria.
- Poor quality of the data input by Sales Representatives, when compared to data from other sources.

To address these gaps, Novo Nordisk Spain defined a more objective and data-based segmentation model based on specific criteria. This more accurate segmentation was intended to help Sales Representatives make better informed decisions on which HCPs to visit and how to approach them depending on where they fall within the segmentation model.

However, some Sales Representatives were skeptical about the usefulness of the segmentation and thought that the guidelines were too rigid. They also maintained that any attempt at guiding them on how to better segment their HCPs did not take into account the impact this would have on their relationships with some of the HCPs.

To tackle this issue, Novo Nordisk Spain worked with BTS to develop a program that would allow the company to cascade the segmentation model throughout the salesforce and help Sales Representatives overcome the mindset barriers that sometimes prevent them from doing a more data-based segmentation, enabling them to better plan their interactions with cardiologists.

Overview

The program's objectives include enabling Sales Representatives to do the following:

1. Understand that segmentation is about using the information they already have, but in a different way
2. Recognize how small adjustments in the call plan can help them make more sales with the same effort
3. Explore the segmentation tool and understand why it is built on solid/fact-based criteria
4. Plan next cycle's visits using the segmentation tool and analysis

After roll-out and follow-up, Novo Nordisk achieved the objectives, with participants exhibiting the following:

1. A solid understanding of the segmentation model
2. A strong commitment to using the segmentation tool
3. An improvement in segmentation accuracy
4. More reliable commercial excellence findings and recommendations based on more robust input data

Design of the Program

The program was built based on a simple premise: for an individual to be motivated to change their behavior, they must recognize the impact of doing the things they do now and the opportunities that they can seize by doing things differently.

The project team designed and delivered the program using a five-step process:

- STEP 1: Define solid segmentation criteria and build segmentation model and tool (Feb-April)

- STEP 2: Test and validate the model in the field (May)
- STEP 3: Design a gamified simulation to bring segmentation model to life (Jun-July)
- STEP 4: Engage sales representatives in the competitive segmentation simulation (Sep)
- STEP 5: Enable participants to extract the learnings from the simulations and build their real call plan using the segmentation tool (Sep).
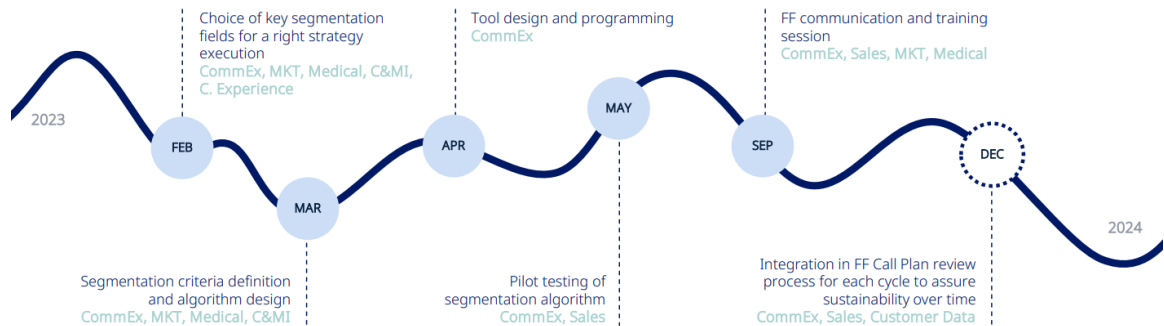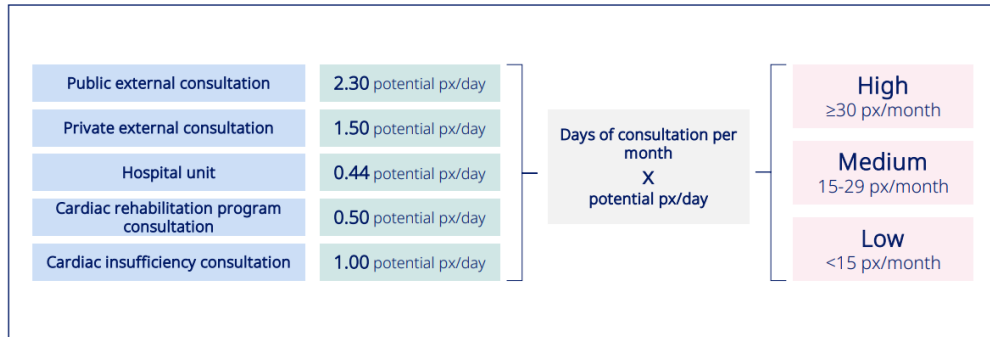

To build an effective training program, the project team had to define solid segmentation criteria. The need for this was apparent because there seemed to be no correlation between promotional activity directed at cardiologists deemed "high potential" and sales in the territory. This suggested the cardiologists were not being properly identified. The new criteria would enable more accurate identification of high-potential cardiologists, which would allow the Sales Representatives to target their efforts more effectively. The criteria and accompanying segmentation model are illustrated below.
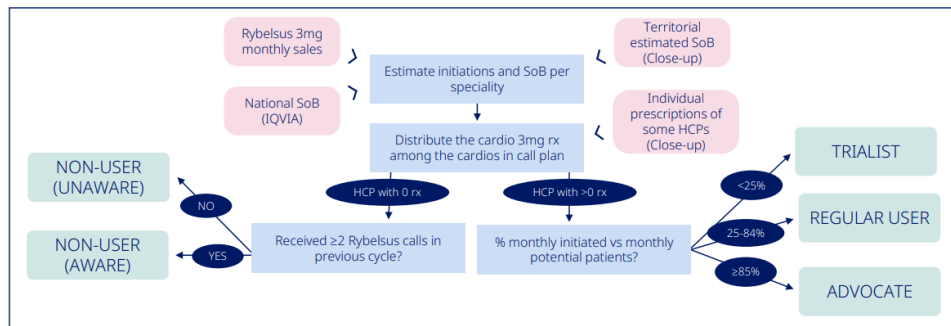
POTENTIAL	ADOPTION LADDER	PRESCRIPTION DRIVER
The value they can bring to NN	Their adoption of our product	Their thoughts about our product

POTENTIAL

- **Robust estimation of daily Rybelsus potential patients** per consultation based on total daily patients, prevalence of diseases, length of hospital stay, workload per HCP and reimbursement situation
- **Input of FF** (surveys for 7 reps and 1 sales manager), **marketing** and **medical** teams
- **Testing pilot with another 6 reps** to ensure the recommendations are solid and valid for different territories

Public external consultation	**2.30** potential px/day	
Private external consultation	**1.50** potential px/day	
Hospital unit	**0.44** potential px/day	
Cardiac rehabilitation program consultation	**0.50** potential px/day	
Cardiac insufficiency consultation	**1.00** potential px/day	

Days of consultation per month
X
potential px/day

High
≥30 px/month

Medium
15-29 px/month

Low
<15 px/month

ADOPTION LADDER

- **Objective criteria: % of monthly new initiations / total monthly potential patients**
- We help the rep to make a **more accurate estimation** of patients initiated per month per cardio **by providing data**: 3mg sales, national SoB, and individual prescriptions from some HCPs.

Rybelsus 3mg monthly sales

Territorial estimated SoB (Close-up)

National SoB (IQVIA)

Estimate initiations and SoB per speciality

Individual prescriptions of some HCPs (Close-up)

Distribute the cardio 3mg rx among the cardios in call plan

NON-USER (UNAWARE)

NO

HCP with 0 rx

HCP with >0 rx

TRIALIST

<25%

REGULAR USER

25-84%

NON-USER (AWARE)

YES

Received ≥2 Rybelsus calls in previous cycle?

% monthly initiated vs monthly potential patients?

≥85%

ADVOCATE

PRESCRIPTION DRIVER

- We generated **five key questions** for the rep to think about and use in their conversations with their cardios.
- To consider that a cardio is convinced of Rybelsus' CV benefits, **all five criteria** must be met.

	OTHER DRIVERS		CV BENEFITS DRIVER
What is the patient profile that comes to mind when they think of Rybelsus?	Patient with Diabetes	Patient with obesity	Patient with CV disease and diabetes
In which cardiac pathology do they place Rybelsus?	Reduce symptomatology (cardiac insufficiency and atrial fibrillation)		Reduce risk of coronary events (CV disease)
Do they usually prescribe Rybelsus at the same time as other CV treatments (statins, antiaggregants, iSGLT2)?	No		Yes
Due to Ozempic stock problems, has it been a problem for them to prescribe Rybelsus instead?	They prefer Ozempic because they believe it is more effective	They didn't use Ozempic	They don't consider it a problema in terms of effectivenesss
If Rybelsus wouldn't have weight reduction benefit, would they continue to prescribe it only because of its CV benefits?	No		Yes

Taking these segmentation criteria as a base, the Plan Better, Win More Sessions were designed. These sessions, tailored to Sales Representative's needs, were structured around the why, what, and how of the new segmentation model:

Why conduct Plan Better, Win More sessions?

To evolve the Sales Representative's mindset about segmentation by:

- Helping them shift from seeing segmentation as a mere reporting effort to believing in it as an opportunity to improve their performance
- Equipping them to base commercial execution on segmentation—and not the other way around
- Alleviating fears that segmentation will force them to execute against their will

What are the Plan Better, Win More sessions?

Sessions to align everyone on the new segmentation model by explaining the logic behind it through a conceptually simple process.

**How** is the new segmentation model applied?

The sessions help Sales Representatives acquire the capabilities to take advantage of the new methodology by tackling the gaps in data usage and analysis and ensuring a correct understanding of the model and the implications for its application.

Delivery of the Program

To achieve the training objectives, a gamified, team-based learning experience led by BTS and Novo Nordisk facilitators was designed in which approximately a 100 participants take the role of a Sales Representative in a fictious company and manage a fictious territory. The experience is set in a simulated world constructed to reflect the types of customers, challenges, and opportunities Sales Representatives encounter in real life.

Ten Cardiologists distributed across six different hospitals, each with a different prescription potential, adoption level, and prescription driver.
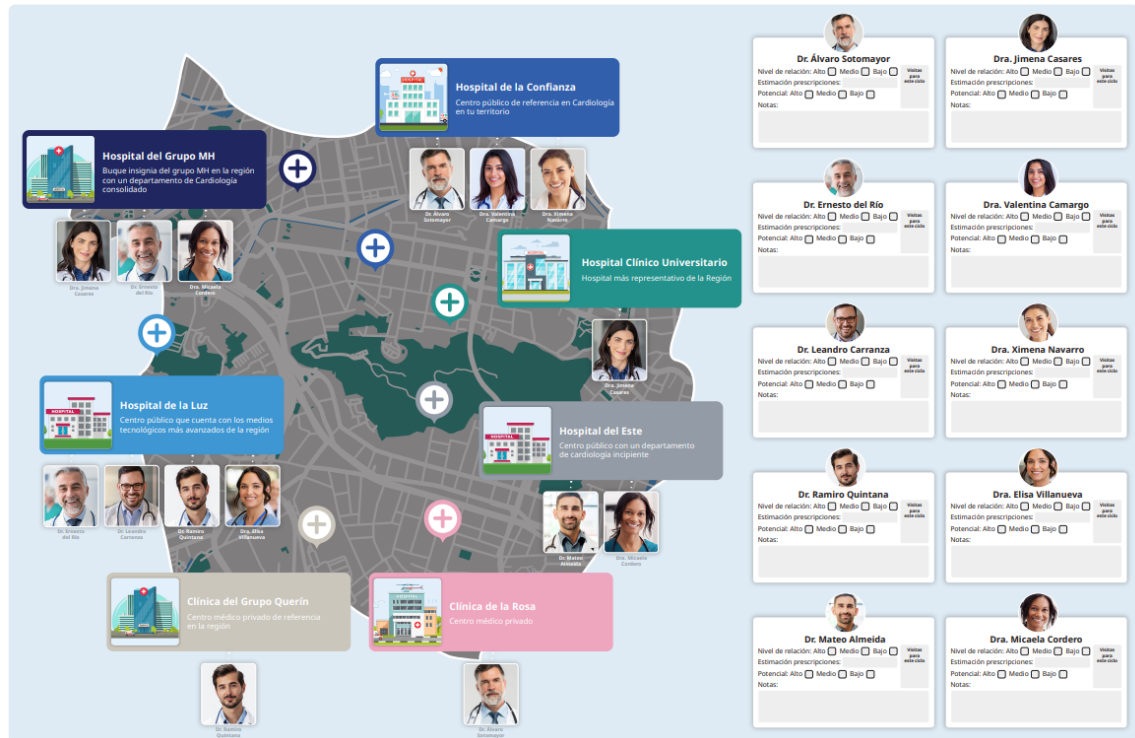
Four performance metrics that teams impact through their decisions:

1. **Projected prescriptions:** An estimate of box sales throughout the cycle. Maximizing projected prescriptions depends on the number of visits assigned to each doctor and is impacted by how teams deal with unexpected situations.

2. **Average relationship level:** Refers to the average level of relationship teams have developed with doctors in their territory based on the service the Sales Representatives give these customers.

3. **Quality of the visit:** Measures how well teams handle customer visits based on segmentation, transmitting the right messages and having appropriate conversations based on where the HCP is in the decision-making process.

4. **Accuracy:** To segment doctors correctly, the estimated distribution of sales per doctor must be as accurate as possible. This metric measures how accurately teams allocate sales per doctor based on the information available.

Teams compete to maximize business results and obtain the highest performance of any team in the larger group. They manage their accounts over three rounds, each of which represents one year. Each round is incrementally complex, progressively adding segmentation criteria, to enable the learning process and help participants see how doing a more accurate segmentation positively impacts their KPIs. The new segmentation model is progressively introduced.

Each round presents a set of challenges and decisions:

ROUND 1

- Assign current prescriptions to each HCP based on available information
- Estimate prescription potential based on available information
- Assign number of visits to each HCP from a total of 41 available visits
- Deal with an unexpected situation: one of the HCPs has retired and the team needs to decide to which of the other HCPs they will assign the extra available time.

ROUND 2

- Assign current prescriptions to each HCP based on available information
- Calculate prescription potential using segmentation model
- Estimate the adoption level based on calculated potential and estimated current prescriptions
- Assign number of visits to each HCPs from a total of 41 available visits
- Deal with two unexpected situations:
- Decide how to approach a conversation with an HCP based on the team's initial understanding of their prescription driver
- Decide whether to manually adjust the prescription potential calculated by the segmentation tool of a doctor with whom the team has a stronger relationship, in order to invite him to a symposium, since only doctors with a high potential can be invited

ROUND 3

- Assign current prescriptions to each HCP based on available information
- Review previously assigned prescription potential
- Calculate each HCP's prescription driver based on available information
- Estimate the adoption level based on calculated potential and estimated current prescriptions

- Assign number of visits to each HCP from a total of 41 available visits
- Deal with an unexpected situation: Decide how to approach a conversation with an HCP based on the team's initial segmentation
- Decide which type of message to share with each HCP based on the initial segmentation

After each decision-making round, participants engage in feedback sessions in which the teams' business results are compared and the Sales Representatives reflect on the impact of their decisions on the performance metrics. These sessions build the link between the impact of their simulation decisions and what these mean for them in the field.

Each feedback session covers specific learning points:

FEEDBACK SESSION 1

- Doctors often exaggerate their prescriptions, and people tend to be optimistic by nature. Sales Representatives need to look for all possible clues to estimate the sales realistically.
- Knowing each doctor's sales is important, but it's not enough to decide where to focus efforts. Sales Representatives can get a much more accurate estimate of each doctor's potential from the number of days per type of consultation they do.
- Having a strong relationship with all doctors is critical. But since a Sales Representative's time is limited, they have to invest it well:
  - There are doctors with whom, though they already buy a lot, there isn't much room to grow.
  - Some doctors are not buying much yet but represent significant growth potential.
- With the same effort and proper planning, Sales Representatives can improve the profitability of their visits.
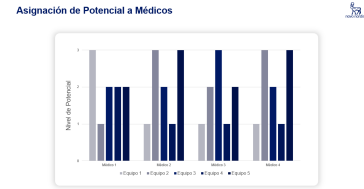
FEEDBACK SESSION 2

- Depending on how much time a Sales Representative is already spending with a doctor, an extra visit has a different impact on the relationship. If they are spending too little or too much time, the visit will be less effective.
- To properly focus the visit, they need to be sure of where the doctor is on the adoption ladder.
- No two doctors are the same, even if they are in the same place on the adoption ladder. The number of prescriptions per doctor does not alone determine where they are on the adoption ladder, but is based on their potential.
- The greater the adoption, the greater the profitability. But Sales Representatives should be careful not to focus only on regular buyers of a medication, as losing their business could have serious consequences.
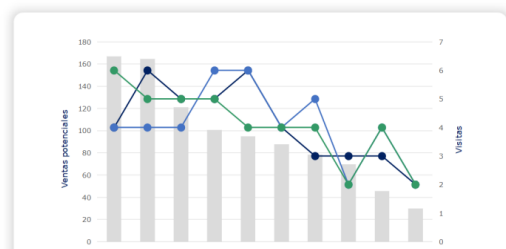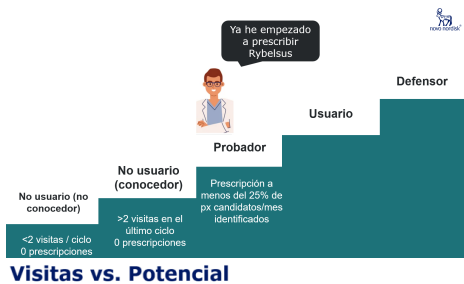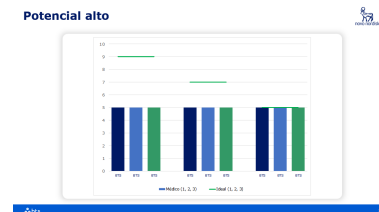
FEEDBACK SESSION 3

- To properly focus conversations with a doctor, Sales Representatives must be sure of the doctor's prescription driver. To be sure of the cardiovascular approach, the doctor has to meet all the criteria.
- A cardiologist will prescribe more when convinced of the cardiovascular benefit (as opposed to weight loss benefits) of the medicine.
- The recommendations coming from the segmentation tool are based on a robust methodology and can help Sales Representatives increase the profitability of their visits.
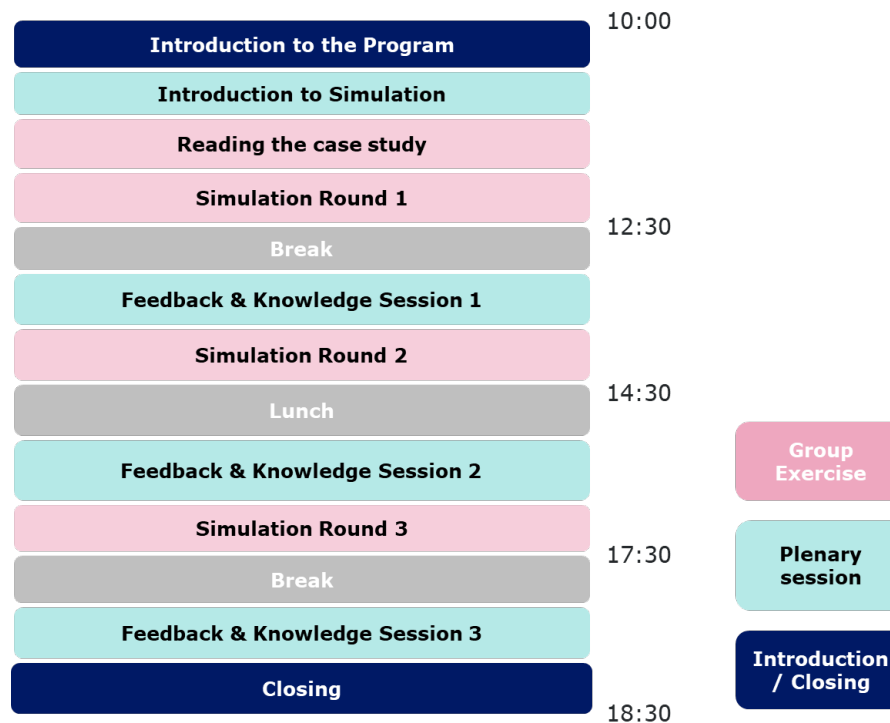

This program was an eight-hour session and the agenda of the session was as follows:

Schedule	Time
Introduction to the Program	10:00
Introduction to Simulation	
Reading the case study	
Simulation Round 1	
Break	12:30
Feedback & Knowledge Session 1	
Simulation Round 2	
Lunch	14:30
Feedback & Knowledge Session 2	
Simulation Round 3	17:30
Break	
Feedback & Knowledge Session 3	
Closing	18:30

Legend:
- Group Exercise
- Plenary session
- Introduction / Closing

After completing the simulation and gaining an understanding of how an accurate segmentation can improve their performance in the field, **participants engage in a five-hour application session** to guide them through the process of using the real segmentation tool with their real HCPs.

Even if some participants are initially reluctant to apply the new segmentation model, the simulation and feedback help them overcome the mindtraps that held them back from segmenting their HCPs in a more objective way.

During the application session, participants:

- Take the allocated time to work on something they would have to do anyway, but leverage the shared knowledge in the room to build a more solid call plan
- Share experiences and best practices on how to better engage and segment their HCPs
- Live firsthand the applicability of the segmentation model and comprehend that applying it will yield better results

Measurable Benefits

Results were measured on three levels, taking the Kirkpatrick model as a reference:

LEVEL 1: How well did participants like the learning process?

LEVEL 2: How well did participants learn and apply key concepts?

LEVEL 3: To what extend did the program generate results back in the business?

LEVEL 1

Level 1 was measured using NPS. NPS measures the customer experience, specifically customer satisfaction, loyalty, and enthusiasm, using a single survey question: On a scale of 1 to 10, how likely are you to recommend it?

The program rolled out across Spain, with five sessions in five cities.

NPS for each city:

Altea	Madrid	Zaragoza	León	Córdoba
92/100	59/100	75/100	100/100	87.5/100

Overall, the aggregated NPS Score was 82.7, meaning that 82.7% of participants would strongly recommend the sessions to a colleague.

Some comments from participants below:

> Doing the three *trial-and-error rounds has helped me a lot to better understand* how I should do my actual segmentation.
>
> **Madrid, September 27th**

> Very *realistic, well-defined scenarios*, useful to know my cardios better and moving forward with them.
>
> **León, October 4th**

> **Teamwork has allowed me to share and clarify concepts** that will help me to better understand the methodology so I can execute it.
>
> **Córdoba, October 11th**

> I loved everything, a super *practical and very well-designed course* that helps us in the field and helps us to sell more.
>
> **León, October 4th**

> It has allowed me to **reflect on what is really important** when it comes to customer segmentation.
>
> **Zaragoza, September 29th**

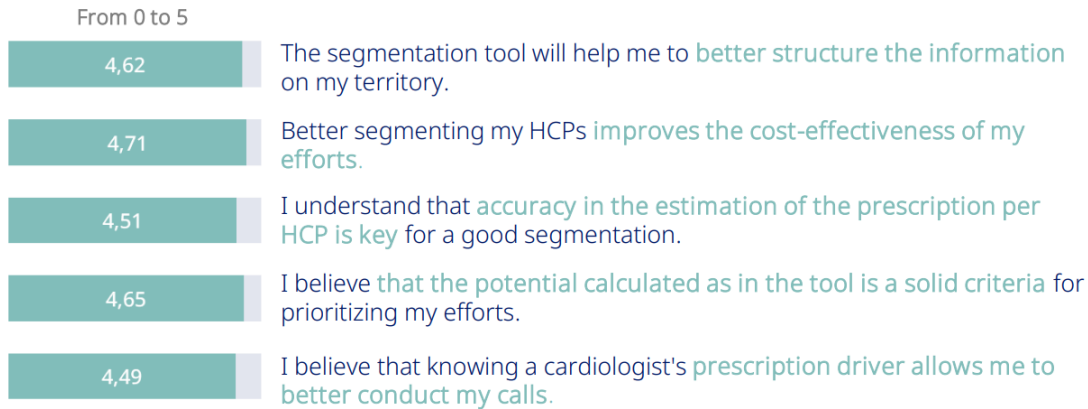> **Practical** and valuable content in a fun format.
>
> **Altea, September 8th**

LEVEL 2

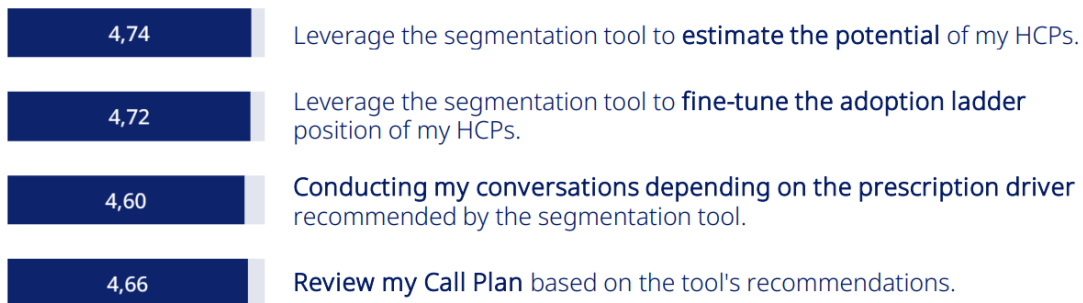Level 2 results measured the following elements:

- Understanding of the segmentation model
- Commitment to using the segmentation tool

To measure this, participants were asked to rank, on a scale from 0 to 5, how much they agreed with the following statements:

From 0 to 5

4,62	The segmentation tool will help me to better structure the information on my territory.
4,71	Better segmenting my HCPs improves the cost-effectiveness of my efforts.
4,51	I understand that accuracy in the estimation of the prescription per HCP is key for a good segmentation.
4,65	I believe that the potential calculated as in the tool is a solid criteria for prioritizing my efforts.
4,49	I believe that knowing a cardiologist's prescription driver allows me to better conduct my calls.

Participants were also asked to rank, on a scale from 0 to 5, how likely they are to do the following coming out of the sessions:

4,74	Leverage the segmentation tool to estimate the potential of my HCPs.
4,72	Leverage the segmentation tool to fine-tune the adoption ladder position of my HCPs.
4,60	Conducting my conversations depending on the prescription driver recommended by the segmentation tool.
4,66	Review my Call Plan based on the tool's recommendations.

LEVEL 3

Business results point to having overcome the gaps that had been previously identified:

1. Lack of solid and objective segmentation data. Sales Representatives had difficulty in identifying high-potential HCPs and tended to assign a higher volume of sales to HCPs with whom they had a better relationship.
2. Commercial execution feeding an intuition-based segmentation. There was no correlation between commercial activity intensity and the HCPs that had been identified as key HCPs.

After completing the program, participants have started segmenting with a more objective and realistic approach. This has improved the quality of segmentation accuracy. A number of changes have been observed:

- A 73% reduction in declared monthly initiations, meaning that participants are much less prone to overestimate the volumes that their HCPs are prescribing.
- In line with the previous metric, the number of HCPs classified as non-users has doubled (going from 25% to 52%), and the number of regular users and advocates has been reduced (going from 26% to 7%).

These numbers indicate that Sales Representatives are placing their HCPs in the right place in the adoption ladder.
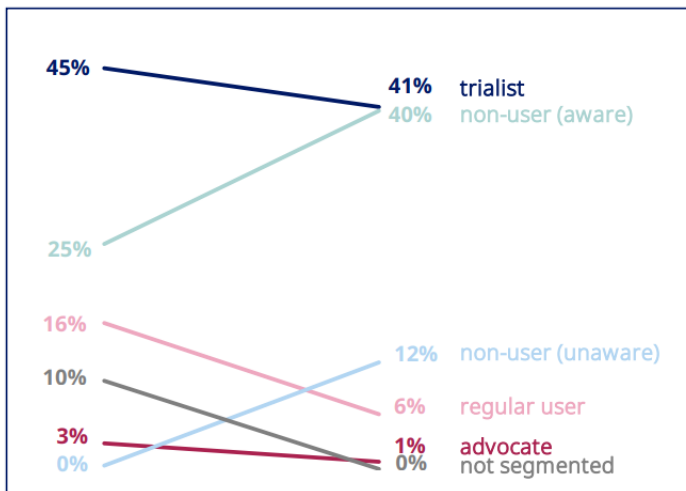

Analysis of the reported dynamic cardiology prescribers of Novo Nordisk's products reveals a significant improvement. The graph below shows a comparison between the estimated cardiology prescribers by an external source (IQVIA) (left), and the estimate based on input from the field force (right).
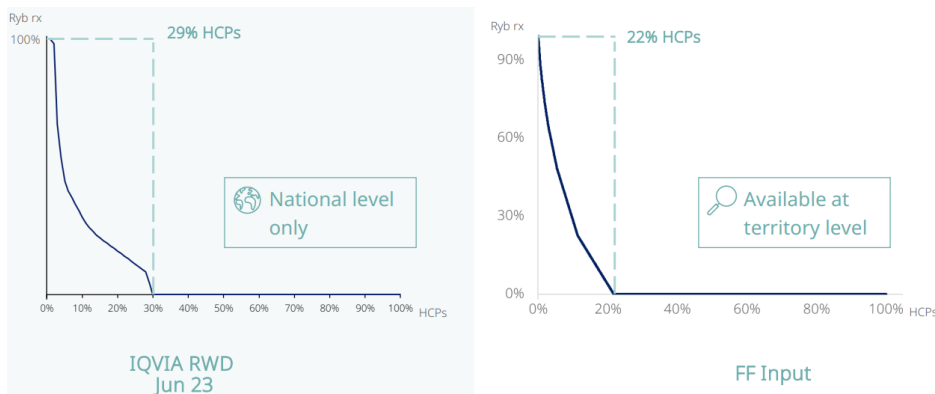
These graphs show only a seven-point variation, with a very similar distribution between the sources, which ultimately highlights the accuracy of the field force's segmentation efforts.

Additionally, being able to segment HCPs more accurately is likely to boost the cost-effectiveness of commercial efforts since the cost-effectiveness of promotional efforts is three times higher in high- vs. low-potential HCPs:
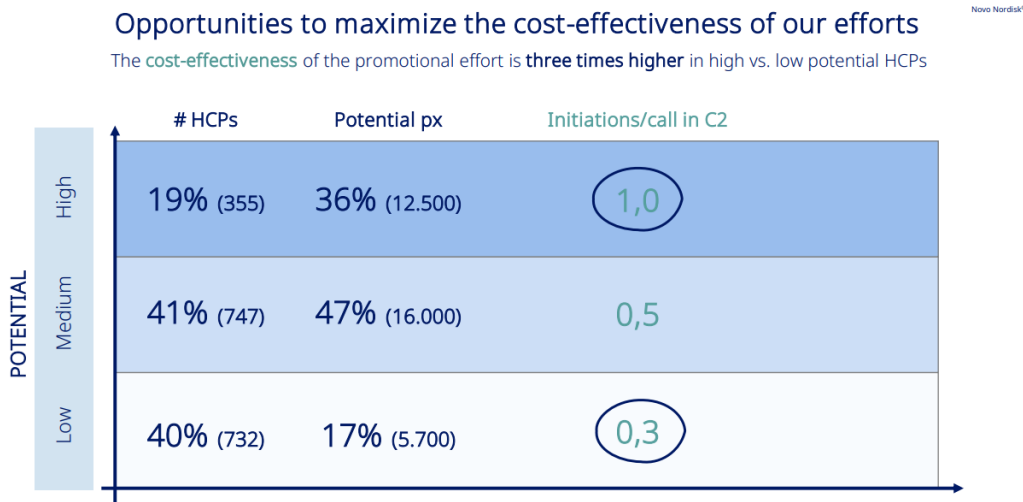
Prescriptions indicated by the Initiations/Call in C2 metric in green

Enabling Sales Representatives to see the gap close firsthand has allowed Novo-Nordisk to narrow the gaps in execution and make sure that future efforts are targeted at seizing the prescriptions that can come from cardiologists who are moved up the   adoption   ladder.
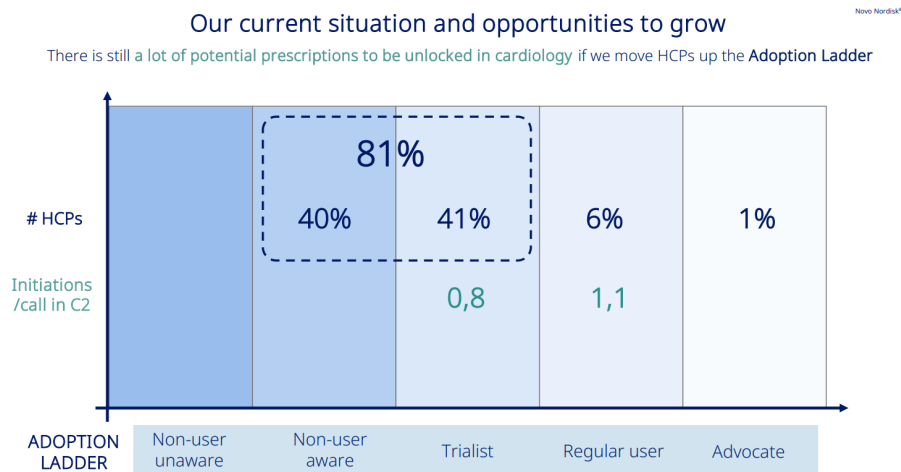
Overall

Overall, the biggest conclusions are that this program has:

1. Helped align Sales Representatives around the importance of more fact-based segmentation and why this will yield them better results.

2. Ensured all Sales Representatives use the Segmentation Tool and feed Novo Nordisk with more accurate and valuable data.

3. Identified specific gaps to work on to keep growing the business. Among these are the following:

- The cost-effectiveness of the promotional effort is three times higher in high- vs. low-potential HCPs identified by the new segmentation methodology.

- Perception-based planning processes had led to suboptimal allocation of resources.

- There are significant gaps in the cluster selection compared to the HCPs potential.

- The investment of the promotional budget and calls effort is sub-optimally distributed.

- There are still a lot of potential prescriptions to be unlocked in cardiology if HCPs are moved up the adoption ladder.

Our current situation and opportunities to grow

Novo Nordisk®

There is still a lot of potential prescriptions to be unlocked in cardiology if we move HCPs up the **Adoption Ladder**

	Non-user unaware	Non-user aware	Trialist	Regular user	Advocate
# HCPs	40%	41%		6%	1%
Initiations /call in C2			0,8	1,1	

81% (spanning Non-user aware and Trialist area)

ADOPTION LADDER

Prescriptions indicated by the Initiations/Calls in C2 metric in green

- There is a gap in how we manage the planning and the execution monitoring processes that we need to work on.

With this in mind Novo Nordisk is taking action to make sure the gaps exposed by rolling out the program are tackled and there is a sustained use of the segmentation tool. This will in turn lead to improved performance in the market.

In light of the success of this program, Novo Nordisk is designing similar workshops for other therapeutic areas, such as Primary Care.

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