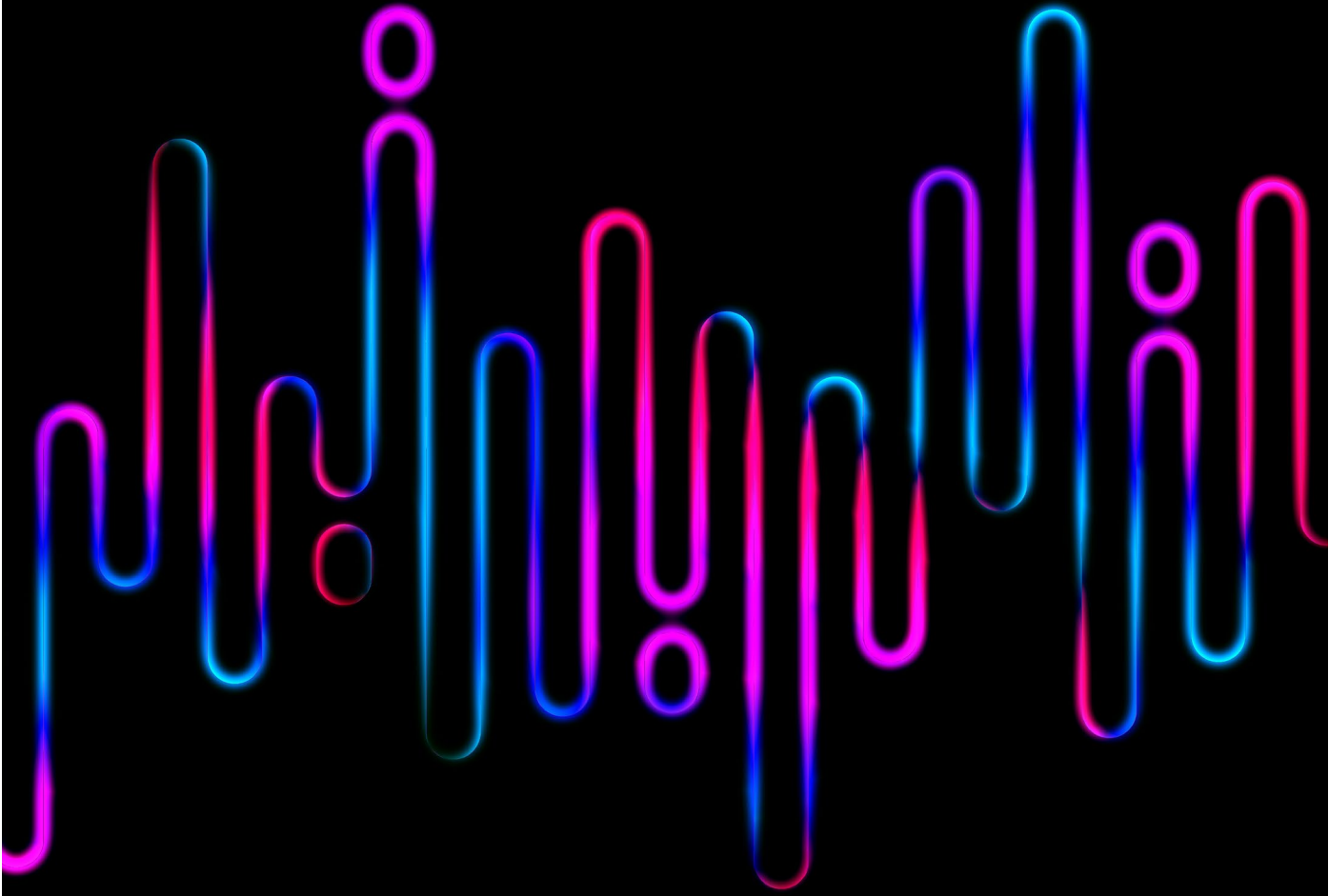


Omnichannel's Pulse on AI

Integrating technology to help brands personalize engagement
throughout the customer journey



Omnichannel's Ongoing Evolution



Melissa Fleming
Senior content writer,
Haymarket Studio

Consumers today may discover a brand on a website or on their phone, through a social media post or a search engine. A consistent seamless experience across all these channels can help brands keep consumers engaged and build better relationships. Pharma brands can harness artificial intelligence (AI) to consider the customer journey and deliver relevant and meaningful campaigns to that individual at the right time.

In MM+M's latest eBook, we explore how pharma brands can harness AI to engage consumers more effectively.

A seamless omnichannel experience depends on data, technology and cross-functional strategy. AI can bridge the data gaps to help pharma brands connect powerful insights that not only create hyper-personalized journeys but also accelerate market impact.

Healthcare's increased investment in AI signals a push to integrate the technology into everyday workflows. AI tools are now reshaping marketing efforts to activate consumers, turn patient intent into action, streamline the patient journey, automate orchestration and more.

The industry is shifting toward a unified healthcare ecosystem that eliminates boundaries between virtual tools and tangible care. Brands that incorporate the often overlooked physical marketing channel with digital have a better chance of achieving true omnichannel and influencing consumers across all touchpoints. Physical environments offer an opportunity to provide immersive experiences and contextual relevance when it's most needed.

We hope you enjoy this eBook.

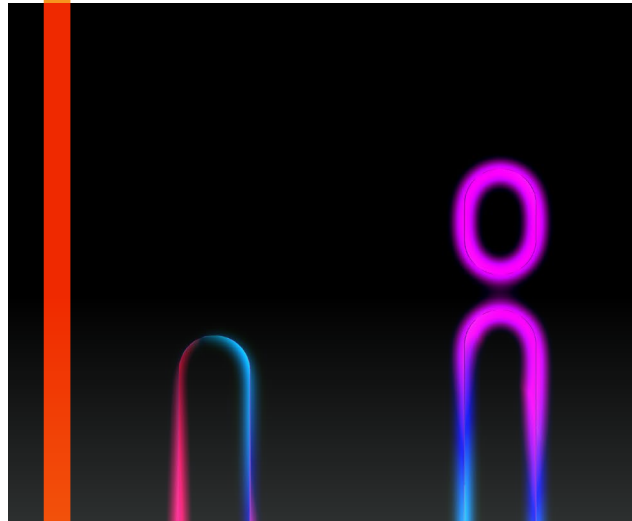


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Your Omnichannel Strategy Targets Segments. The HCPs That Matter Are Individuals.

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The Connection Engine: Realizing the Promise of Omnichannel

How AI is bridging data gaps, accelerating speed-to-market and fueling human-centric innovation

BY MELISSA FLEMING

● **The pharmaceutical industry has long struggled** to connect disparate data into a more cohesive journey that predicts the needs of healthcare providers (HCPs) and patients. Orchestrating a seamless omnichannel experience requires a delicate balance of data, technology and cross-functional strategy. As organizations look toward the future, AI is emerging not just as a tool for efficiency but as the “alchemy” that connects insights and accelerates market impact.

BREAKING DOWN SILOS

Historically, pharma companies have focused on vanity metrics such as clicks and opens, measurements that often fail to link back to clinical outcomes. AI helps shift the focus from simple engagement toward a unified, outcome-oriented customer journey.

“Omnichannel should be all about connection, but connection with an outcome,” says Kelly Smith, chief executive of the health sector and media sector, Four Agency Worldwide.

Instead of viewing an email or a banner click in isolation, AI allows marketers to connect the data points across the entire lifecycle to demonstrate true business impact. “It has to be very customer-focused and that’s what pharma companies want,” she adds. This evolution enables brands to focus on how personalized engagement actually supports treatment decisions.

However, internal data silos remain a hurdle. AI has the potential to act as the connective tissue between commercial, medical and other areas. “To do omnichannel really well requires data plus the marketing strategy plus a technology delivery component plus touching

“To do omnichannel really well requires data plus the marketing strategy plus a technology delivery component plus touching channels that may sit in the commercial sales force and other functional silos.”



WILL REESE
Inizio Evoke

channels that may sit in the commercial sales force and other functional silos,” explains Will Reese, chief innovation officer, Inizio Evoke. “You need a bit of alchemy to bring all that together.”

Brands have to be equipped to embrace personalization, harmonize fragmented information and move at a faster pace. “It requires a higher level of agility, both in how you use customer insight as well as how you create assets and content experiences based on that insight,” he says. “AI helps you democratize your intelligence and your insights.”

“A key part of AI is not cutting corners, it’s creating opportunities.”

KELLY SMITH
Four Agency Worldwide



AI allows marketers to move beyond broad segments to add specific context around individual customers. For example, identifying an HCP in a private practice in Iowa helps a brand “to make content elements specific to that circumstance and why my brand is valuable to them,” he explains. “It starts to realign the whole value chain and the way of working.”

Rather than a back-end automation tool, AI is becoming a front-end strategic driver. “AI is that missing link for omnichannel,” Smith notes. “It shouldn’t just fill gaps where we see there’s a problem, it should be a part of that whole omnichannel strategy solution from the start.”

This allows for a more proactive and efficient approach to marketing, where AI guides the foundational solution, optimizing CRM performance and Medical, Legal and Regulatory (MLR) reviews before content even reaches the market.

CREATING REAL-TIME AGILITY

One of the most transformative impacts of AI is the compression of the speed-to-market cycle. While other industries pivot quickly, pharma has traditionally remained tied to annual brand plans. AI is changing that.

“As a marketer, I now can quickly synthesize hundreds of pages of insights and research and use a digital twin on top of that research to ask a proxy version of my customer in real time about a decision,” Reese explains.

By leveraging AI and a customer proxy, organizations can get a readout on an idea in real time, shorten the execution cycle and create campaign variations. “The smarter you can do, the more informed you can create strategy, the more likely you are to drive your growth,” he emphasizes.

The creation of synthetic HCP personas and digital twins allows brands to analyze vast amounts of data in real time. “As an industry, we used to have to go out and survey 100 or 1,000 doctors, and ask them what they thought about things, and now we’re able to get that

information quickly,” Smith explains. By validating the synthetic models against real-world focus groups, Four Agency was able to ensure that their decisions are rooted in accurate data.

Virtual replicas of patients help brands “anticipate not only prescription journeys, medical journeys, but also requirements for patients,” she said. “It allows us to get drugs through the pipeline more quickly, understanding how they’re going to support patients and the patient pathway not only in marketing but how we operate as an industry.”

The next frontier for AI in omnichannel strategy is moving beyond reactive signals to predictive simulations. This allows marketers to act like “portfolio investment managers,” Reese suggests. Marketers can run simulations to ensure capital is funneled into the channels and assets that offer the highest return for the business and the customer.

HUMANIZING INNOVATION

Perhaps the most counterintuitive benefit of AI is that it makes marketing more human. By automating low-value administrative tasks and data analysis, AI frees up the marketer’s most valuable resource: time.

“AI allows us to get back time to be more collaborative and innovative, push the boundaries and be able to achieve more,” Smith explains. “A key part of AI is not cutting corners, it’s creating opportunities.”

Ultimately, AI is not just a tool but a team member. “I have a real-time insight expert that is sitting on the team with me that I could bring to a conversation or to a meeting and get insight out of like I would another individual,” Reese says. “That role-based experience and being able to create and work together is the future of work and the future of engagement.”

Even with AI’s insights, humans remain a key differentiator for brands. “The machine cannot replace curiosity, imagination and creativity,” he emphasizes. ●

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Let's Get Phygital

Worlds collide when a physical marketing channel incorporates the digital, lending true 'omni' to omnichannel

By Steve Madden

● **The promise of omnichannel is that a marketer** can be everywhere, all at once, all the time (and all of those touchpoints influence each other). But are you really everywhere you need to be? When we talk about “everywhere,” we tend to mean on the web, in email, on social media, on linear TV and sometimes even in print. With omnichannel, we mostly focus on the digital. That generally means phones and computers, not the real world.

The most obvious channel in the omnichannel playbook often gets overlooked: the physical. The kind of thing that tells the story of a brand or a product when the customer picks it up and touches it. Or walks through it. Or wears it. Or uses it to navigate through space and time.

Perry DeGregorio, founder and chief experience officer of Alacqua Marketing, argues that physical marketing represents pharma's most underleveraged channel. Traditional direct-to-consumer ads, he says, have worn out their welcome with standard tropes and the ominous fair-balance recitations that produce a “sea of sameness.” The result, he says, is a “shutdown” as audiences have learned to tune out entirely.

Physical environments, by contrast, operate under different rules. For example, by designing an immersive installation around disease education and help-seeking

rather than direct drug promotion, brands can sidestep fair balance altogether. “I’m meeting you where you are,” DeGregorio says. “I’m causing this disfluency. You’re walking with your wife in Short Hills Mall [in New Jersey] and all of a sudden you see this beautiful immersive environment.” The approach, he argues, delivers something TV and digital simply can’t: a “pleasurable experience” that drives brand recall without intrusion. As for why the industry has been so slow to catch on, DeGregorio is blunt: “The agencies don’t understand the physical, and that’s why nobody has paid attention to it. They’re so fixated on the compliance issues with the FDA.”

Here are three examples of physical forms of marketing, a few of which even verge into the phygital:

UBER JOURNEYS

For marketers, the primary appeal lies in the unique combination of a captive audience and deep contextual relevance. Because the average Uber trip lasts 20 minutes, brands are afforded a rare extended window of engagement. Uber’s internal data indicates that users view the content for an average of more than 100 seconds.

More to the point, the service leverages Uber’s first-party data about a rider’s specific destination. By understanding whether a passenger is headed to a pharmacy,



a grocery store or a healthcare facility, marketers can deploy precisely timed messages that serve as a pre-purchase nudge at the exact moment a consumer is traveling toward a point of sale. You don't get much more physical, or phygital, than that.

UCB'S WORLD RECORD BALL OF BANDAGES

To draw attention to hidradenitis suppurativa (HS), a painful inflammatory skin condition, UCB worked with Havas network Jacques and advocacy group HS Connect to create the [world's largest ball of adhesive bandages](#). The October 2025 effort took place in New York City's Times Square and was an unavoidable 281-pound physical manifestation of the bandages used by HS patients. It was recognized by the Guinness World Records as the largest bandage ball ever assembled. "We are using Times Square to give HS patients the platform they deserve by combining live storytelling, cultural spectacle and global visibility to rewrite the narrative about HS," said Brindley Brooks, founder and CEO of HS Connect, an advocacy group. UCB makes Bimzelx, an injectable therapy to treat HS.

HYPERSN'S HOLOGRAMS

Looking to get wicked phygital? Spend some time with [Hypersn](#), which uses digital technology to create physical marketing tools, such as holograms. The platform transforms digital assets into high-definition 3D visuals that appear to float in mid-air, enabling a strategy that connects digital content with real-world environ-

ments. Think: end-of-aisle displays in pharmacies and grocery stores, for example.

Health and wellness companies such as Colgate, Oral-B and the U.K.'s Birmingham Hospital have used the technologies for both promotional and educational applications.

Marketing professionals use this technology to facilitate immersive storytelling, particularly at events where 3D models can illustrate complex products or data without requiring specialized eyewear. Beyond static displays, the technology can be integrated with interactive avatars to serve as brand representatives that greet visitors and manage inquiries in high-traffic settings, perfect for stopping traffic at trade show booths.

In the pharmaceutical and healthcare marketing sectors, this technology is frequently applied to differentiate brands within highly competitive exhibition environments. At the recent Drug Information Association Expo in Boston, [software company SAS utilized a multiunit holographic wall](#) to present detailed 3D visuals. By deploying large-scale, floating imagery in a crowded conference hall, the company was able to increase booth traffic and provide a more engaging medium for communicating technical information. For healthcare marketers, this application demonstrates how holographic displays can be used to elevate brand presence at major industry gatherings, providing a memorable alternative to traditional video screens and printed signage while improving the retention of complex scientific or analytical messaging. ●

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3 AI Tools that Actually Work

Clients vouch for these new products from CMI Media Group, Klick Health and The Rx Assistant

BY STEVE MADDEN

● **As the artificial intelligence breakthroughs pile up, so do the warnings.**

In late February, Eli Lilly reported that it had brought online LillyPod, a proprietary AI supercomputer that it claims is the strongest in pharma. Lilly says it doesn't consider the computer IT infrastructure, but a new piece of scientific equipment. The company touts that it can now test billions of molecule ideas per year rather than the 2,000 it had been limited to.

Not everyone is as sanguine about AI as Lilly. In a [widely circulated and bracingly sober blog post](#), AI entrepreneur Matt Shumer warns that AI has reached a critical "intelligence explosion" phase where it can now autonomously complete complex professional tasks and even assist in creating its own next-generation versions. Shumer urges readers to integrate these tools into their daily work as quickly as possible and prioritize becoming professionally adaptable, because nearly all white-collar professions face massive AI-induced disruption within the next few years.

With that in mind, we present three AI tools currently making a difference in medical marketing. Clients and other company outsiders will vouch for these products. We didn't ask if the use of these tools has disrupted marketing jobs, but we do know the people who use them all say they're making their work better — and that means the tools are delivering on the real promise of AI.

CMI MEDIA GROUP

CMI Media Group created [Empower](#), an AI-driven SaaS tool that manages paid media placements at scale and, in the words of at least one user, allows for true hyper-personalization of HCP outreach. It takes omnichannel marketing to another level; call it "omni-dynamic." By unifying a brand's owned, earned and paid media, Empower allows marketers to deliver orchestrated, narrative-form touchpoints across all channels.

KC Collins used the operating system when she worked in senior marketing roles at Seagen and Pfizer. (She's now senior director of digital marketing and communications at startup Vera Therapeutics.) Partnering with CMI, Collins developed a unique, "inverted" omnichannel model. While many AI systems are, she says, "set it and forget it," Collins operated off a model where she "acted as the engine that triggered the decisions."

This strategy used a sophisticated three-layer approach. The first was an "always on" layer, while the second used brand-level triggering. The most innovative element was the third layer: a cross-brand "accelerator." In a market with high overlap between products, Collins noted the necessity of operating as a "collective ecosystem" to avoid internal competition and rising costs. Collins also noted that the cost savings she realized while using Empower didn't mean she reduced her budget, rather, she had more money to spend to expand her marketing efforts.

The results of this automated orchestration were immediately obvious. By navigating all forms of its media collectively, Collins' team saw a significant decrease in cost per engagement. Efficiency was further driven by a "next-day decisioning cycle," where signals identified on, say, Monday were executed by Tuesday. "That speed significantly reduced the time

between the first engagement and the ultimate sale,” she says.

One of the most significant advantages of the Empower ecosystem is its transparency. Collins contrasts this with competitor systems, which she describes as “black boxes, where the user hands over the target list, and the vendor decides what to do with it.” Without visibility, marketers can’t “interrogate what is happening” or truly understand their KPIs. In contrast, the CMI partnership allowed for deep visibility into which processes were running, enabling granular control over programmatic media messages.

For peers looking to modernize their media stack, Collins emphasizes that technology is only half the battle. “It is crucial to be philosophically aligned in media execution with the company’s business philosophy,” she advises. Whether a company is conservative or consumer-focused, success requires choosing partners and capabilities that align with that specific approach.

Collins says that as brands look to gain a definitive competitive edge, the move toward automated, “transparent systems like Empower are the new standard.”

Klick Guardrail

As long as there has been medical promotion, there has been a choke point in the workflow that’s been the bane of a marketer’s existence: the medical, legal and regulatory process known by its shiver-inducing abbreviation, MLR.

Enter [Klick Guardrail](#), an AI-powered compliance and decision-support platform designed to improve the quality of promotional materials before they reach the MLR review.

Rather than positioning the use of AI to automate approvals, Guardrail looks upstream. “We’ve all heard about moving MLR faster,” says Julie Turnbull, SVP, science and regulatory at Klick Health. “Our hypothesis is that if you increase the quality of materials going into the



MLR system, that’s what actually enables things to move faster.”

Guardrail harvests claims from existing promotional assets such as web materials, email, PDFs and images using an AI model to build a centralized claims library. New materials are reviewed against that library for exact and semantic matches, while the system tracks references, footnotes and prior approval history. It then evaluates claims against prescribing information, FDA guidance and brand strategy through a decision-intelligence framework developed with Rainbird.ai.

The result: a binary, pass/fail assessment with a clear rationale. If a claim overstates clinical data or omits required context, the platform flags the issue, cites the relevant regulatory logic and suggests changes. The system also accounts for different audience types (DTC, HCP, payer) and can be calibrated to brand-specific risk tolerances such as prior FDA letters or REMS requirements.

B.J. Jones is the chief commercial officer of New-Amsterdam Pharma and served as an industry representative on the jury that awarded Klick Guardrail the grand prize in Klick’s 2024 internal innovation competition. He says the differentiator is not just functionality but philosophy.

“I see Klick Guardrail as decision support that helps teams ask better, more informed questions earlier in the MLR process, particularly in growing organizations where complexity can increase faster than institutional memory,” Jones says.

He emphasizes that the tool elevates engagement on both sides of review. “Making risk more visible earlier in the MLR process encourages teams



to come to review better prepared and to have more substantive conversations with regulators,” he says. “Rather than narrowing creativity, it enables more intentional experimentation by making risk more visible and discussions more productive.”

Jones also points to transparency as a defining feature. “Klick Guardrail is a glass-box AI tool, so it shows its decision-making and makes it easy to validate responses,” he says. “Most AI systems are black boxes that give answers without explanation.”

While still in early commercialization, Klick Guardrail has been implemented by more than 20 clients in various models. Jones sees its greatest impact upstream — in early drafts, conceiving and modular content development — where it can serve as a risk triage and consistency engine.

“The value is very significant when you look at its ability to improve the quality and consistency of what reaches review,” he says. “Reviewers can spend less time on routine issues and more time on nuanced discussion and higher-value decision-makers. It isn’t about automating approvals; it’s about raising the level of thinking and responsibly pushing the work forward.”

THE RX ASSISTANT

The [Rx Assistant](#) is aimed squarely at one of the medical marketing industry’s most stubborn challenges: turning patient intent into action. Founded in 2024 by 21-year-old entrepreneur Sage Khanuja, the AI-powered platform serves as a digital concierge, consolidating fragmented tools into a single, intuitive interface available 24/7 via voice, SMS and web chat.

The platform addresses a critical gap: Nearly one in three Americans leaves a prescription at the pharmacy due to cost, confusion or administrative hurdles. “For a lot of people, navigating the healthcare system is confusing and their time is scarce, leading to significant drop-off at every step,” says Khanuja. “The Rx Assistant was built to simplify the patient journey by giving people the answers they need to take action.”

Real-world application of this technology is already yielding results for pharmaceutical brands. Matt Rossen, VP of marketing at Tarsus Pharmaceuticals, turned to The Rx Assistant to enhance the patient and clinician experience. Tarsus used The Rx Assistant to launch its Lashley chatbot on [Xdemvy.com](#) in 2023 to provide real-time, guided support for patients.

According to Rossen, the tool’s unique approach leverages sophisticated AI to streamline the journey and guide users to information in a “clear, efficient and intuitive way.” Beyond answering product questions, Lashley features a built-in symptom assessment quiz and a find-a-doctor tool. The impact has been tangible. “We have seen meaningful increases in utilization and time spent with the chat bot,” Rossen says.

At its core, The Rx Assistant handles complex tasks such as verifying insurance benefits, scheduling appointments and supporting prior authorization workflows, all without requiring users to navigate multiple portals. Khanuja frames this as “using AI to humanize healthcare” by solving real-world problems through action.

For manufacturers, the platform functions as connective infrastructure, turning digital engagement into measurable outcomes. Rossen recommends the platform for any company seeking an “always-on engagement device.” He describes the team at The Rx Assistant as a “true partner” that is “responsive, willing to evolve based on feedback and always seeking to elevate the offering to drive results.” ●

The Precision Play: How AI and Human Judgment are Reshaping Pharma's Engagement Playbook



● **Pharmaceutical marketing** has always had a decisioning problem. Which healthcare professionals do you reach? What patients do they see? What message, through which channel? For decades, brand teams made those decisions from incomplete data — reasonable calls, but slow, broad and expensive to course correct.

AI changes the math — not by replacing decisions, but by changing the intelligence and speed behind them. Where traditional engines use predefined rules and batch logic, AI processes millions of real-time signals — prescribing patterns, engagement, channel preference, peer influence — enabling faster optimization and greater personalization at scale.

THE SIGNAL PROBLEM AI WAS BUILT TO SOLVE

The disconnect between what pharma thinks it's doing and what HCPs experience has reached a breaking point. Most digital outreach goes unanswered — a problem not with creative or channel, but with fragmented data. Sending more of what's already being ignored isn't a strategy. It's noise.

Most commercial teams operate in silos where offline interactions are disconnected from online behaviors. An HCP might receive a generic email two days after a deep clinical discussion with an MSL. The data exists; it just lacks the connective tissue to reach decision-makers in time to matter.

A human team reviewing monthly reports cannot detect that a high-value prescriber's engagement dropped four weeks before their prescribing did; AI can. That shift from reactive to proactive, informed by real-time HCP preferences and patient mix, is where brand separation is built.



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WHAT AI-DRIVEN DECISIONING ACTUALLY LOOKS LIKE

AI-driven engagement works through a predictive layer between behavioral data and omnichannel activation. Each HCP is scored continuously — prescribing behaviors, digital engagement, promotional response history, channel affinity — and that score drives the next action dynamically, not on a predetermined calendar.

An HCP whose engagement score is rising gets a different next touchpoint than one who has gone quiet. A prescriber who responded to clinical email but ignored promotional display gets routed toward peer-to-peer scientific formats. A territory showing early share erosion gets escalated before quarterly numbers confirm what the signal already knew. Early intervention costs a fraction of what recovery costs after decline shows up in claims data.

WHERE HUMANS STAY ESSENTIAL

The efficiency case for AI is clear. The precision case depends on something AI cannot provide: judgment about what the decisions should be.

In a regulated industry, guardrails matter as much as speed. Human verification isn't just caution, it's what ensures AI-driven decisions are precise, not just fast. Strategists define which signals trigger which actions, which assets deploy at each stage and what escalation thresholds apply to different HCP profiles. Teams monitor model outputs to catch drift before it compounds.

AI handles scale and speed. Humans handle the integrity of the execution framework. Neither works without the other.

CONNECTING DECISIONS TO OUTCOMES

When every touchpoint is logged, scored and connected to downstream prescribing behavior, marketing becomes a demonstrable growth driver. How much share did trigger-based escalation protect during field coverage reduction? Which touchpoint sequence produced the fastest movement from awareness to first prescription?

These aren't hypothetical — they're answerable with the right data, AI capabilities and human oversight. The new metric is shifting from reach to relevance. Brands that make that shift operationally, not just philosophically, accumulate an engagement intelligence advantage that grows more precise with every interaction and decision.

That's the real promise of AI in pharma marketing: not automation for its own sake, but a precision decisioning engine that moves at the speed of data, operates within boundaries human judgment defines and gets measurably smarter over time. ●

The Next Audience Signal May Arrive Before the Visit

As traditional claims struggle to keep pace, upstream signals are helping to close the gap between market activity and media activation



COLIN JACOBSEN
VP, product management – advertising,
PurpleLab

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● **Healthcare marketers have spent** the past decade refining precision, improving measurement and building more sophisticated ways to reach providers and patients. Yet one of the industry's most persistent challenges has remained largely unchanged: timing. While audience targeting has become more advanced, much of the data informing those decisions still arrives too late to influence the moments that matter most. In an industry where treatment decisions can evolve quickly, delayed visibility into patient and provider activity can limit the effectiveness of even the most well-planned campaigns.

For many pharmaceutical brands, claims data has become the standard for understanding market activity. It has helped commercial teams identify prescribing trends and healthcare utilization, measure campaign impact and build audience segments based on real-world behavior. However, claims data is inherently retrospective. By the time a claim is generated, processed and made available for analysis, the patient has often already moved through a critical stage of care. The provider visit has happened, the prescription decision may have been made and the opportunity to shape that journey may have already passed. As expectations for performance continue to rise, relying

solely on historical data has become increasingly difficult to justify.

That lag creates a disconnect between how healthcare actually happens and how healthcare marketing responds. Brand teams are being asked to make faster decisions in an environment where audience data can still reflect what happened weeks earlier. Agencies are under pressure to improve efficiency while working with targeting inputs that can become stale before a campaign fully launches. Commercial organizations are trying to better align media investments with business outcomes, yet they often lack a signal that captures patient movement in a more immediate way. The result is a market that has become more accountable, but not necessarily more responsive.

The hurdle may not be finding more data, but finding earlier, and even predictive, data.

One emerging opportunity comes from a source that has historically existed outside of media strategy altogether: healthcare eligibility verification. Before a patient arrives for an appointment, provider offices routinely confirm insurance coverage with payers. This transaction is the request submitted by the provider to verify eligibility, including the payer's response confirming coverage details such as benefits, copays and deductibles.

Although these transactions have traditionally served an administrative purpose, they also reveal something marketers have long struggled to identify compliantly: a near real-time signal that a provider is about to have a patient encounter. That earlier visibility has the potential to change how healthcare

marketing operates. Rather than waiting for downstream claims to confirm that a visit has already occurred, marketers can begin identifying relevant activity before the appointment itself. This creates an opportunity to build more dynamic audience strategies that reflect current patient and provider flow instead of relying entirely on past utilization patterns. For pharmaceutical marketers, that means media can become better aligned with live market conditions. For agencies, it opens the door to more efficient targeting and less wasted spend. For commercial teams, it introduces a new way to understand where demand is building before it becomes visible in traditional datasets.

PurpleLab's latest innovation, **Eligibility Alerts**, was built to solve this challenge by giving pharma marketers four to seven days of pre-visit intelligence. It helps brands reach providers actively seeing relevant patients, improve campaign efficiency by moving beyond static historical audiences and optimize media investment using earlier market signals. By surfacing these engagement opportunities before appointments, teams can activate media and messaging when it is most relevant.

As healthcare marketing continues to evolve, competitive advantage will increasingly depend on how quickly organizations can respond to change. The companies that lead the next phase of the industry may not simply be the ones with more data, but the ones with data that enables connection at the most opportune moments, driving conversions and better health outcomes. ●

[Contact us](#) to learn more.

Omnichannel in the Age of AI



MICHAEL COLE
Chief strategic business development officer,
Relevate Health



● **There is a structural truth at the center of pharma commercialization** that does not get discussed enough: Omnichannel and AI are a perfect fit. Not metaphorically — structurally. Omnichannel programs generate data AI systems are designed to learn from: continuous, repetitive and rich with behavioral signals. Every rep visit, email, digital impression and congress interaction produces a data point — and the scale that overwhelms human analysis is precisely the scale at which AI performs optimally.

What makes this more than an observation is the compounding effect. AI does not just improve omnichannel performance — it accelerates it. Traditional programs optimize quarterly. AI-enabled programs continuously optimize, meaning the performance trajectory doesn't just improve — it steepens over time.

But acceleration requires a transition many organizations are still navigating: from big data to performance data. Big data is the raw material; performance data is what you get when those signals are validated as predictive of commercial outcomes. The best-performing organizations have invested in two capabilities: a Commercial COE for strategic context and guardrails, and a Technical COE to ensure AI infrastructure is sound, current and continuously learning. One without the other is incomplete.

That infrastructure exists to reach healthcare providers at two moments that matter most. The first is the Point-of-Learning — the process through which an HCP builds understanding of a therapy or disease state. Delivering the right information requires knowing where each HCP is in that journey, not where a segment model assumes. The second is the Point-of-Clinical-Decision — the moment where upstream engagement either converts into prescribing behavior or doesn't. Both require intelligence that is current, precise and fully connected.

This is where the ELE Decision Engine earns its place. What makes ELE different is not that it automates next-best-action — it pairs historical engagement intelligence with real-time clinical signals, so the system understands not just what an HCP has done, but what they are likely to need next and when. That combination moves omnichannel from a coordinated communication plan into something that behaves like a continuously learning commercial nervous system — the HCP journey dynamically orchestrated by everything the system knows and everything happening right now.

None of this scales without confronting what may be the most underappreciated problem in AI-enabled omnichannel: the limitation of pilots. Pilots are structurally incompatible with how AI actually learns. They constrain the data volume, variation and time horizon models need to perform. Even when pilots succeed, they stall before becoming enterprise programs — because the adoption investment required was never built into the plan. Too many companies never scale because they are stuck in pilot-ville.

Finally, winning with AI and omnichannel means embracing ambiguity. Best practice today may need to be reconsidered in six to nine months. This is not a reason for caution — it is a reason to build adaptive capability rather than fixed solutions, plan in shorter cycles and develop organizations comfortable in a landscape that will keep moving. The competitive advantage belongs not to those who found the perfect answer, but to those who built the capacity to keep finding better ones.

The technology is one part of the equation. The rest is people and experience — and bringing all three together into something that works in the real world is where the real work begins. That is OMNI KNOW-HOW. Not as a proof of concept. As a practice. ●