

To: katie_robinson@mckinsey.com[katie_robinson@mckinsey.com]
Cc: Rosen, David (Sales and Marketing)[David.Rosen@pharma.com]
From: Cadet, Ronald
Sent: Fri 3/28/2014 12:37:29 PM
Subject: RE: Updated version of your EOT presentation (including new slide)
EOT Update on Team #6 26March 2014.pptx

Attached

Ron

203.588.7257 | ronald.cadet@pharma.com

From: katie_robinson@mckinsey.com [mailto:katie_robinson@mckinsey.com]
Sent: Friday, March 28, 2014 11:59 AM
To: Cadet, Ronald
Cc: Rosen, David (Sales and Marketing)
Subject: Updated version of your EOT presentation (including new slide)

Ron,

As we work to finalize the EOT presentations and send to the group today, David mentioned that you had an additional slide to add ("Local information differentiates field force") - was wondering if you could send me the updated version of the doc with that slide included.

Also, I noticed that we didn't have any specific "asks" for the EOT in the presentation. What specifically are we asking of the EOT with regards to this presentation. Once you share your thoughts, I will add a slide in to the beginning that captures them.

Thanks for your help with this!

Best,
Katie

Katie Robinson

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Produced Natively



Objective

Gain approval from EOT to move forward with Healthcare Regional Marketing in an effort to:

- better optimize our current resources and
- introduce an innovative, scalable, and measurable regional marketing solutions

Situation

New call list *reflects multiple factors* that influence the likelihood of prescribing:

- Historic OxyContin TRx volume
- Opioid market volume
- Managed care access
- Generic share of extended release opioids
- New to Brand (NBRx) scripts

Currently taking a “Broad Brush” approach to messaging:

- Know there are Geographic variability
- Want to better understand local/regional differences

Methodology and implementation practice can be leveraged for Butrans and future product launches

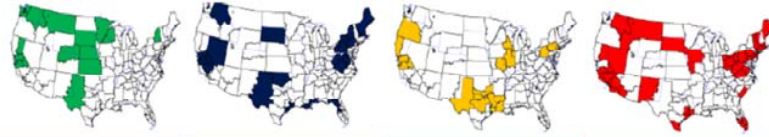
Variability Is a Result of Many Factors and Each Market Factor Can Have Many Metrics

Payer/Provider (46)		Prescriber (25)	
Commercial Market 12 Mth TRx Commercial Brand X 3 Mth TRx Share Commercial All Competitor 3 Mth TRx Share Medicare Market 12 Mth TRx Medicare Brand X 3 Mth TRx Share, by dose Medicare All Competitors 3 Mth TRx Share Brand X Advantaged Brand X Disadvantaged Competitor A Advantaged Competitor A Disadvantaged # of Hospital Types (Clinic, DOD, HMO, LTC, VA, Misc, other, and total) Brand X Unit Volume by hospital type (Clinic, DOD, HMO, LTC, VA, Misc, other, and total)		# of Specialists, Specialists Brand X 3 Mth TRx Share # of Brand X TRx's per Specialist # of PCPs, PCP Brand X 3 Mth TRx Share # of Brand X TRx's Per PCP PCP Brand X 3Mth TRx % of Business # of All Others MDs All Others Brand X 3 Mth TRx Share # of Brand X TRx's Per All Other MD # of Decile 10 MDs # of Decile 10 TRxs Decile 10 Brand X 3 Mth TRx Share Decile 10 Brand X TRx/MD # of Decile 9 MDs # of Decile 9TRxs Decile 9 Brand X 3 Mth TRx Share Decile 9 Brand X TRx/MD	
Population (9)		Product (65)	
Smokers over 40 by State Specialist Per Population PCPs per Population MDs per Population % 65+ per Population % African American Per Pop % Hispanic per Population % Poverty per Population		Market TRx Market NRx Brand XTRx & NRx Share Competitor A TRx & NRx Share Competitor B TRx & NRx Share Competitor C TRx & NRx Share Competitor D TRx & NRx Share Competitor E TRx & NRx Share Competitor F TRx & NRx Share Brand X 3 & 6 Month TRx Share Growth Competitor A 3M & 6M TRx Share Growth Competitor B 3M & 6M TRx Share Growth Competitor C 3M & 6M TRx Share Growth Competitor D 3M & 6M Month TRx Share Growth Competitor E 3M & 6M TRx Share Growth Competitor F 3M & 6 Month TRx Share Growth Brand X Adherence	
		Place (47)	
		Total Reach (Manuf A, Manuf B, Ttl) Total Frequency (Manuf A, Manuf B, Ttl) % of Specialists Reached # of Details per Specialist Brand X NRx per detail Decile 10 Reach Decile 10 Frequency Decile 9 Reach Decile 9 Frequency Avg # attendees per Program Decile 5-8 Reach Decile 5-8 Frequency Decile 1-4 Reach Decile 1-4 Frequency Speaker Programs	

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Integrated Marketing Plan









- All districts have an opportunity to maximize activity against each driver and improve product performance
- The district mapping indicates where market conditions are most favorable to do so for each driver



# of Districts	Top MD 71	Mid-Decile MD 44	Brand Friendly 63	Favorable Formulary 55
Driver Group Definition	Districts with high # Top MDs and low reach and frequency to those MDs	Districts with high # of Mid-Deciles and low reach and frequency to those MDs	Districts with high competitive branded share and an opportunity to gain share	Districts with a Low % of Prior Authorizations
Strategy	Resources aligned toward increasing reach and frequency with Top MDs	Resources aligned toward increasing in Reach and Frequency with Mid-Decile & PCP	Resources aligned toward competitive messaging	Resources aligned toward increasing pull-through for the coverage that does exist

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Example of Integrated Tactical Plan Focused Around the 4 Market Drivers

Activity Toward Top MDs	Activity Toward Mid-Deciles	Brand Friendly	Favorable Formulary
<p>Drive the Drivers Website</p>  <p>Text Campaign</p>  <p>A Few Moments</p> 	<p>Customized Posters</p>  <p>State Sell Sheets</p> 	<p>Second Opinion™</p>  <p>Commitment Brochure</p> 	<p>Multi-Payer Access Campaign</p> 

Local Information Differentiates Field Force

Opportunity

- ▶ Need to capture physician attention in an innovative way
- ▶ Local information complements national message in a way that resonates with physicians

Strategy

- ▶ Developed state/district specific sell sheets with local facts
- ▶ Tailored for each geography using local disease prevalence and risk factor information
- ▶ Field representatives can highlight geography unique characteristics
- ▶ Execute 3-4 times per year

Feedback

- ▶ *"This accurately reflects our market and therefore enables our teams to give focused and impactful openers. This will be the cover page for my team."*
– District Manager
- ▶ *"The 'Have You Heard' piece is fantastic! It can help my team expand into a longer detail!"*
– Regional Manager

No Two Sell Sheets Are Alike!

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As we saw earlier, the selling environment is becoming more challenging and the need to differentiate ourselves and our message is even more critical.

By incorporating **local information that complements the national** message into a sell sheet series called “ the Have you Heard” series, the reps are equipped with new information that captures the uniqueness of each TACU. It helps the field respond to requests for localized data to help overcome physician objections about data not being relevant for their patient population.

This series contains district specific data on one side of a sell sheet and a DMT message on the other, integrating the national message with local information.

Over the last year, we worked with the Zolof, Lipitor and Norvasc DMTs to create the “Have you Heard” series.

The response has been overwhelmingly positive. Read Quotes—”give focused and impactful openers” and “help expand into longer details”

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Follow Up Questions From January 2014 EOT meeting

1. **Resource Needs/ HRM Support:**
 - How many resources does HRM plan to provide in the April-January period and how much interaction and/or reliance they will need from our internal resources?
2. **Data Gathering:**
 - What is meant by the “quantitative data gathering” and how/who will do this? Both from HRM and Purdue?
3. **IT Support:**
 - Is it possible to tie into our existing SAP system as opposed to having a separate dashboard? This will help us determine how much Purdue IT support we will need.
4. **Field Force Training Strategy:**
 - What level of training support is provided?
5. **Timeline for Rollout**
6. **2015 and beyond:**
 - What does 2015 look like? Spend, work, updates, etc.

1. Resource Needs/ HRM Support

➤ HRM Core Team – Phase One

- Account Lead (Account Supervisor/Director - Primary Contact)
- Account Team (2 additional team members – VP and Account Executive)
- Market Intelligence VP

➤ HRM Internal Support

- Additional on-site resource from April-January
- Onsite bi-weekly for 2 days
 - 50/50 split of time allocation between internal support and normal project work
- Responsibilities
 - On-site project management and facilitation
 - Bi-weekly cross-functional team working meeting
 - MLR review champion

- Karen Snay will be the main point of contact for all day-to-day project activities. She will be supported heavily by her account team and the HRM Market Intelligence Director, Karrie Sanderson.
- Internal resource requirements should be limited due to Karen's being on-site for the project. Initially, she will need a primary contact to on-board her (quality training, meeting key contacts, general "where to go" directions) but that need will become much less as the project progresses.
- Appropriate internal resources will be participants at bi-weekly cross-functional staff meetings.

2. Quantitative Data Gathering

- **Process/Output**
 1. Conduct data kick-off meeting to identify data sources and respective data owners – complete applicable TPAs
 2. Collect applicable data based on actionable business drivers
 - Brand specific data (i.e. reach/frequency data from sales force automation system)
 - External data sources (i.e. prescribing information from IMS)
 3. Build brand specific HRM database for analysis
 4. Determine key cluster combinations of market drivers
 5. Each district assigned to one of the clusters
- HRM on-site lead will facilitate the data gathering process with the Purdue data owners



3. Purdue IT Support

- HRM does not anticipate any issues with being able to create a data feed directly into Purdue's SAP database to allow Purdue to create the dashboards within our existing system.
 - Need to determine required data formats and dashboard requirements before HRM can fully understand what would be required to move forward with this request.

4. Field Force Training Strategy

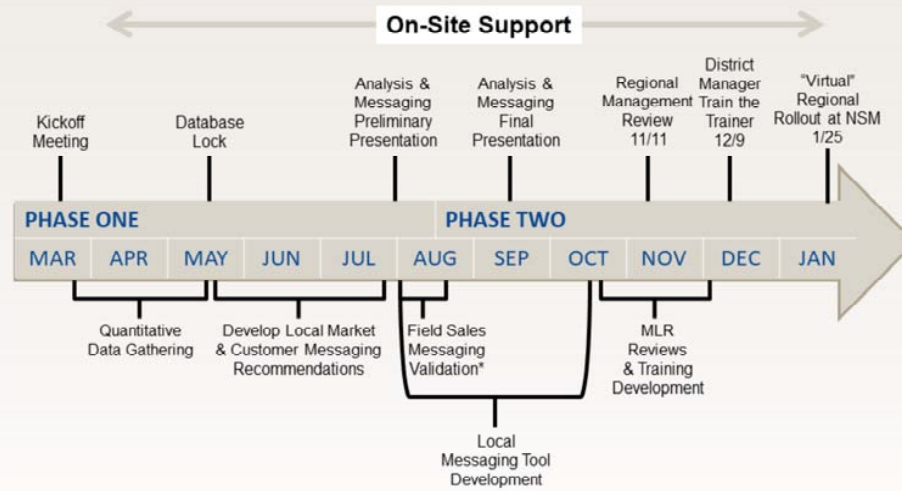
Deliverables

- Overall Training Deck and Materials
- Detailed Implementation Guide per Deliverable
- Activation Activity (Role Play/Rep Testimonial)

Key Timeline Activities

- November 11, 2014: RM Training during Strategy Meeting
- December 9, 2014: Train-the-Trainer Program for District Manager during Managers Meeting
- January 25, 2015: “Virtual” Regional Rollout at National Sales Meeting

5. Proposed Timeline



* *Optional HCP validation decision point*

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5. 2015 and Beyond

- Beyond metrics, the scope of 2015 is dependent on the results of HRM's data analysis. We plan to report out a comprehensive 2015 plan of action during the September Analysis & Messaging Final Presentation.
 - Typically, these recommendations would include a mix of internally driven (AOR) projects and regional (HRM) initiatives.
- 3 options proposed:
 - ~25% of HRM's clients choose a less expensive, "tactical option" for year 2
 - ~25% choose a "full-service option" and more expensive option for year 2
 - ~50% are in the middle.



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2014 Investment

Phase One	March 2014 – August 2014
Local Market Analysis & Planning	\$200,000
Local Message Strategy Development	\$100,000
Phase One TOTAL	\$300,000
Phase Two	August 2014 - January 2015
Rep Local Messaging Detail Tool	\$100,000
Messaging Rollout Training for Field Force	\$100,000
Local Messaging Validation via HCPs (<i>if needed</i>)	\$75,000
Metrics/Best Practices (<i>completed in 2015</i>)	\$0
Phase Two TOTAL	\$275,000
On-Site Support	April 2014 – January 2015
On-Site Support (<i>164 hours + T&E</i>)	\$71,390
Grand Total	\$646,390

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Next Steps

- Gain agreement
- Finalize SOW
- Set Up Kick-off meeting for April
- Evaluate Potential SAP Integration Requirements