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Insights into Pharmaceuticals and Medical Products

A vision for Medical Affairs in 2025



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As innovation transforms the healthcare landscape, science and data are becoming the foundation for pharma to meet its obligations to patients and customers—and realize commercial opportunities. This imperative is further accelerating the evolution of Medical Affairs as the third strategic pillar of the organization alongside R&D and Commercial.

Medical Affairs—a third strategic pillar for the pharmaceutical enterprise

Innovation in both digital technology and the biological sciences is advancing at a furious pace, while the quantity of data generated is skyrocketing. Estimates suggest that 2.5 quintillion bytes of data are currently created every day—and the pace will only accelerate as technology advances, not least through wearable devices and the Internet of Things (IoT). Over the past two years, so much data was generated that we created 90 percent of the total data that has ever existed.¹

The extent to which the new science and data are already reshaping the pharmaceutical landscape and the inner workings of the pharmaceutical organizations that operate within it is already becoming apparent. Business models are starting to evolve both around and beyond the “product” to encompass the wider therapeutic context, while organizations seek to explain and contextualize the ever more complex medical science to a diverse range of stakeholders (physicians, patients, payers). Advanced analytics of patient data have become central—for example, to support decision making on product use and to demonstrate patient value in a real-life setting—driven by the appetite of both external and internal stakeholders for meaningful interpretation of this data.

Individual organizations within pharma have reacted to these trends in a number of ways. However, the winners will be those organizations that succeed in positioning their science—especially their ability to combine, analyze, and interpret disparate datasets—to inform their interactions with stakeholders and ultimately improve patient outcomes. This will involve real-world evidence (RWE), electronic medical records (EMR) and novel sources of data such as genomics in combination with innovative ways of mining and interpreting that data. With this in mind McKinsey has been working closely with industry executives to define and advance a new

¹ Bernard Marr, “How Much Data Do We Create Every Day? The Mind-Blowing Stats Everyone Should Read,” *Forbes*, May 21, 2018, [Forbes.com](https://www.forbes.com).

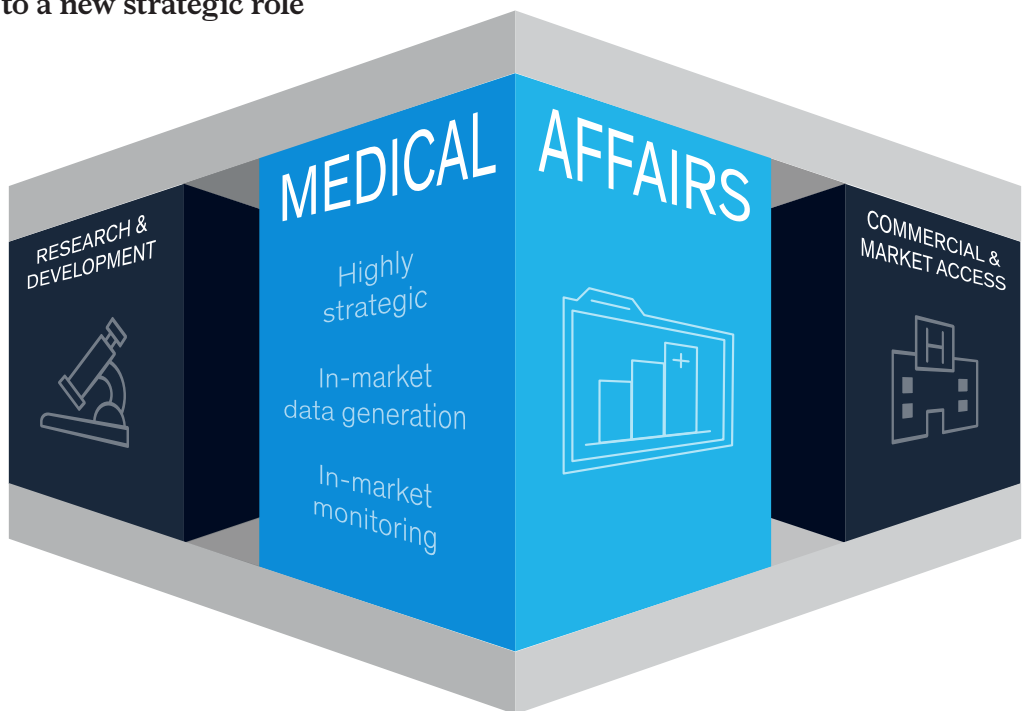
and far more ambitious vision for the Medical Affairs function in 2025: one that embraces these profound changes and consequently seeks to drive positive impact for patients, caregivers, and healthcare professionals by enhancing Medical Affairs' strategic focus and optimizing the impact of its activities.

Medical Affairs professionals are the natural owners of scientific data across the lifecycle

How then can the pharmaceutical industry best respond to this future? Step forward Medical Affairs. With their medical credentials, scientific know-how, and credibility among stakeholders, Medical Affairs professionals are emerging as the natural “owners” of scientific knowledge and data within the organization and across the lifecycle. This potential offers Medical Affairs the opportunity to leave behind its former status as principally a support function and to forge a new role as a primary strategic pillar of the organization alongside Research and Development, Commercial, and Market Access (Exhibit 1).

Exhibit 1

Medical is transitioning to a new strategic role within the organization



In our previous report Pharma Medical Affairs: 2020 and beyond, we saw that Medical Affairs was already at a crossroads: the definition of value was broadening and there was a greater need for evidence to prove that value; at the same time, new decision makers were emerging and patients were becoming more enfranchised; finally, we predicted that the number and types of users of medical data and information would continue to expand rapidly, while data proliferation and demands for transparency would also accelerate.

Today, we see an even clearer case for Medical Affairs to take on a more strategic leadership role in the face of current technology, economic, and regulatory trends.

Digital—transforming the entire healthcare landscape

All of this has come to pass as the basis from which Medical Affairs must now address the transformed healthcare landscape. Digital—in its many guises—is of course at the forefront of multiple advances, especially via its ability to harness new insights through novel types of data and analytics—such as applying AI to clinical trials, RWE, customer interactions, and internal data—as well as by providing new ways for pharma to connect and engage with stakeholders. Digital has transformed the way society as a whole interacts (for example, social media) and disrupted numerous industry models, many of which are significantly ahead of pharma. Now, however, digital is transforming both patient and physician experiences across multiple dimensions: virtual reality, robotics, telemedicine, and IoT being just a few of them.

Importantly, digital has also brought a new transparency to the medical landscape by democratizing healthcare. In common with the trend observed in other industry sectors, consumers—patients—have become increasingly sophisticated in terms of their understanding. Social media and digital have supported consumers through the dissemination of knowledge and raised expectations; in healthcare this has brought demands from patients, healthcare practitioners (HCPs), and medical leaders at payers, health systems, and elsewhere, as they want more complex but digestible and relevant information at their fingertips. This offers new

opportunities for engagement (but on the recipients' terms), and Medical Affairs professionals are ideally placed to respond.

Given this context, significant aspects of Medical Affairs activity need to be updated: for instance, to rethink medical performance management to maximize the *impact* of medical activities. As discussed, there is an overwhelming need to embrace the power of data and analytics, as well as digital engagement techniques—this is essential if Medical Affairs is to deliver on its future aspirations. There have of course been some advances. Yet, to date, many of these initiatives have been ad hoc, even experimental in nature. Medical leaders should endeavor to anticipate what the future will look like for their function in 2025 and beyond and develop a more systematic and comprehensive approach to get there.



A bolder vision for Medical Affairs

A far larger and more ambitious vision for Medical Affairs is defined by four core areas of activity that combine to maximize patient experiences and outcomes (Exhibit 2). However, if Medical Affairs is to fulfill its ambitions of becoming the “third pillar,” core medical activities will have to undergo a significant transformation over the next five to ten years, in order to achieve these goals. We explore important concepts in turn below and how we believe they will play out in 2025. Further detail appears in the sidebar “By 2025, Medical Affairs will elevate performance across medical activities to optimize experiences and outcomes for patients and physicians.”

Looking forward, Medical can drive improved patient experiences and outcomes.



Source: Medical Affairs Leader Forum

Core deliverables for Medical Affairs

- 1 Lead rapid-cycle, integrated evidence generation** across HEOR, RWE, Phase IIIb/IV and other data, supported by micro-analysis to tailor information to needs of individual patients.
- 2 Clearly articulate clinical and economic value** (including data) to build trust with partners and accelerate access to treatment to ensure that the right patient gets the right treatment at the right time.
- 3 Upgrade physician and patient decision making** by engaging providers, patients, and others with tailored information that improves outcomes, supported by a reimaged insight-generation process.
- 4 Provide strategic medical direction to the organization** steering resources for maximum medical impact, injecting new capabilities, and upgrading performance at scale.

1. Innovate evidence generation: Leading rapid-cycle integrated and comprehensive evidence generation

How we gather, integrate, and interpret data will define the future. Rapid-cycle, integrated evidence generation across health economics and outcomes research (HEOR), real-world evidence (RWE), Phase IIIb/IV studies, and so on will be supported by micro-analysis that tailors the vast amount of available information to the needs of individual patients. Medical Affairs teams, through their deep understanding of science, data capabilities, and their dialogue with stakeholders, will be well positioned to understand how to seek the evidence required to support the entire lifecycle of the offering to optimize patient outcomes.

Embracing innovation in data generation. The new healthcare landscape is starting to shape the types of evidence generation required both from a regulatory perspective and in response to increasing stakeholder sophistication with evidence. For example, over the medium term (next three to five years) we anticipate increased FDA receptiveness to RWE and acceptance of this data beyond label expansion and safety purposes, albeit that this will be variable by division. Equally, regulators will be open to novel trial designs and endpoints. Meanwhile, the shift to value-based pricing relies on real-world insights to evaluate the comparative effectiveness of treatment options, and this presents an opportunity for Medical Affairs to better support payers. Similarly, there is potential to support health systems develop their own pathways and guidelines based on their own data, to enhance decision support for clinicians and precision medicine through big data, and to derive population-level insights. Finally, patients are increasingly doing their own research and also looking to track their own data to monitor their own outcomes. Their desire to share their own experiences and also to seek for guidance from others presents further opportunities for Medical Affairs to engage.

Unlocking significant value with better insights and evidence generation. Effective data analysis can lead to rapidly improving outcomes and accelerated access in key markets—for example, cutting-edge cancer immunotherapy drugs are achieving reimbursement at record speed. Further benefits include expanded patient access resulting from improved value-demonstrating evidence; increased market share based on comparative evidence and marketing; a larger addressable market—for instance, through finding treatment-eligible rare disease patients via registry development; and cost savings with fewer and smarter randomized control trials (RCTs).

AI-facilitated integrated data generation powering efforts to meet the needs of individual customers. Data will be the name of the game and digitalization will be the norm—and Medical Affairs teams will be at the center of the action. Data will not only be much more specific but will also be repurposed—for instance, RWE data will be accepted for label changes; in many cases it will also be available in real time. Moreover, there will be much more of it—really big data. Expect to see patient-reported outcomes across all trials, with some outcomes also monitored in real time. Data pools will grow significantly due to strong partnerships connecting disparate data sources and providing wider access, while claims and EMR data across all geographies will be harnessed by innovative analytics teams housed in Medical Affairs. With the majority of data originating outside of pharma companies, Medical will need to conduct fit-for-purpose evidence generation—for example, by combining RWE with machine learning and advanced analytics—while still remaining nimble enough to respond to data generated externally. In this context, Medical will need to build proactive and responsive capabilities, and to develop deep expertise that is continuously refreshed. Best-in-class data generation requires:

- Deep understanding of stakeholder evidence needs
- An evidence-generation process that is continuously refreshed and agnostic to data type as long as it gets to the right insights
- Deep expertise in all forms of evidence generation (including novel data-generating technologies) such that the Medical teams know when and how to apply it
- A competitive intelligence capability that scans externally generated data via automated intelligence, which then feeds into medical strategies

2. Accelerating access to treatments: Articulating clinical and economic value to make our products an option for patients who need them

Medical Affairs teams are similarly well positioned to understand and interpret the cost and competitive pressures across the care landscape, potentially enabling them to accelerate access to products and services for the benefit of patients. This is already of significance in the context of the growing interest in risk-sharing schemes focused on the medical drivers of cost of care and the key medical influencers on outcomes in real-world settings. Going forward we expect to see a clear articulation of clinical and economic value to providers, corporatized providers, and patients. This will be supported by robust, customer-centric data models and medically led outcomes-based contracting that provide the required data to ensure the right patient gets the right drug at the right time.

Navigating a landscape defined by cost and competitive pressures. Cost pressures on health systems and payers are intensifying in response to an increased focus on value. In parallel, competition is also intensifying—for example, the growth of oncology and immuno-modulator pipelines across the industry—and market exclusivity time is shrinking for first-in-class products as competitors follow on faster.

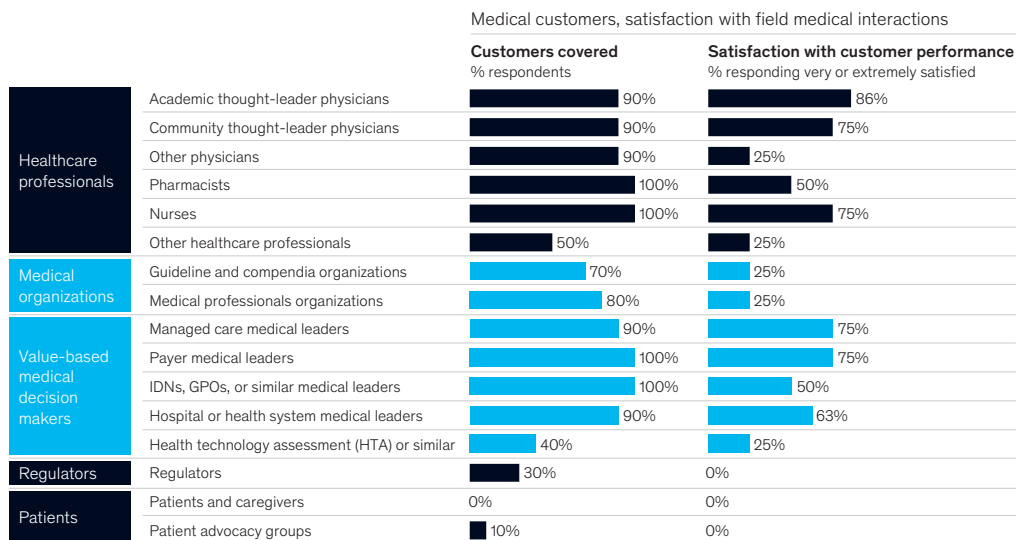
Understanding innovative payment models to deliver excellent customer service. Given this competition and the focus on value, we are seeing renewed interest in risk-sharing schemes. Medical will be critical to the growing number of innovative payments models. In this context a number of factors are important:

- Ability to understand and model risk
- Definition of endpoints and approach to measurement
- Capabilities to engage and influence providers on overall care pathways to manage total cost of care
- Patient care support models such as call centers, adherence solutions, monitoring

Overall, while all medical groups cover a broad range of stakeholders, there is work to improve customer satisfaction, especially for those who control access: for example, there is a need to improve support for medical organizations and value-based customers (Exhibit 3). Understanding the underlying cost of care behaviors will be critical to support access and value discussions.

Exhibit 3

Medical can improve engagement with medical organizations and value-based medical decision makers.



QUESTIONS:
Which external stakeholders does your organization define as US field medical customers?
How satisfied are you with the performance of your US field medical against the following customers?
SOURCE: Field medical working group (2017)

Best-in-class Medical engagement will look very different from today.

Becoming an expert partner externally and internally. Managed entry agreements and outcome-based contracting will become more common with Medical a key contributor to these arrangements. Medical is well positioned with an expert field force actively engaged with payers and providers to generate data on outcomes and total cost of care on their specific patient populations. Expect to see formal partnerships with payers designed to reduce the total cost of care and improve patient outcomes across the portfolio. As the internal experts on the medical drivers of cost of care and outcomes in real-world settings, Medical Affairs must effectively facilitate understanding of the medical drivers of cost of care and drive optimal patient care, especially where the organization is taking on risk: for instance, engaging with pathway committees, supporting physicians, and engaging with patients on their care provision. Medical and colleagues in Market Access will work fully hand-in-hand to provide a comprehensive view of value.

3. Transform and personalize medical engagement: Upgrading physician and patient decision making around our product

Best-in-class Medical engagement will look very different from today. The future will see a broad expansion of medical engagement across providers, patients, and others—and across a range of touchpoints that will be increasingly digital, and designed to provide tailored information focused on improving outcomes. This activity will be supported by a reimagined insight-generation process that pools customer data across a range of internal and external sources, enabling us to understand and inform the decisions of individual customers. Already we are seeing Medical transitioning to a personalized approach that seeks to understand physician preferences across their entire journeys, and tailors interactions to the individual doctor. Meanwhile, medical impact is increasingly being measured at individual provider level, including use of test-and-learn dynamics to understand the most helpful activities, while modes of engagement are also continuously refined at the level of the individual physician. Medical's deep understanding of new data sources will enable the function to pilot ways to use and interpret this information—likely in conjunction with Development and, at times, Commercial. Medical is also emerging as a key provider of information to patients through a seamless combination of engagement on social platforms and new tools that support patients on their medical journey in fully compliant ways. At the cutting edge of physician interaction, Medical will be championing innovative approaches such as virtual reality medical education.

Understanding individual prescriber and patient journeys. Enhanced understanding of customer journeys—whether this be the patient or the physician's journey—provides multiple benefits, including the acquisition of valuable knowledge and insights. Prescriber and patient journey maps are designed to represent people's needs, mindsets, and emotional ups and downs during the full course of therapy: they highlight challenges and opportunities from the prescriber or patient's perspective, and reveal the pain points and major reasons for understanding and

choosing therapy, as well as its rejection or discontinuation. Many Medical organizations have seen digital as meaning “more channels” creating fragmented, low-impact offerings. Indeed, in other industries, best-in-class companies plan and execute along the entire customer journey, not individual touch-points. Given these factors and the digital trends described above, Medical must develop more personalization capabilities to understand and deliver tailored engagement to physician and patients. There is a need to:

1. Develop much deeper and more personalized provider journey maps incorporating mindsets as well as practices to develop personally tailored communication strategies
2. Measure unmet need quantitatively at the individual physician level and develop a test-and-learn capability to constantly refine interactions
3. Engage patients more directly and in ways that meet them where they are already getting their information to support them in their treatment journey.

Listening to patients and physicians... and acting on the insights. Medical has the option to lead a revolution in improving outcomes for patients with innovative approaches to the use of real-world data. Expect digital tools to replace many face-to-face interactions meaning strong medical and scientific content will become ever more critical for engagement, while collaboration with independent medical education platforms will become the new norm of medical education. Meanwhile, robust insight-generation processes will feed into all internal decisions. In future, impact measures will be taken to the individual physician level to understand how communications are impacting care. For instance, a few companies are starting to explore the impact of medical activities using data from claims and EMR to quantify how a single Medical Affairs interaction drives improved patient outcomes (Exhibit 4).

Exhibit 4

Transforming Medical Affairs by measuring the impact of medical activities.

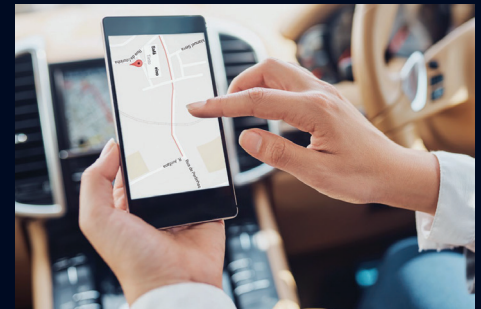
From traditional navigation of Medical Affairs



Progress against high-level objectives tracked without a clear sense of what achievement of these objectives delivers

Time and money wasted on objectives that provide limited value

To digital navigation that maximizes the impact of Medical Affairs



Wealth of available data and cutting-edge analytics leveraged to measure impact on patient outcomes and demonstrable progress against goals

Data driven performance management **maximizes impact on patient health**, efficient use of limited resources, and trust of patient and physicians by focusing on what really matters to them

Keeping pace with patient expectations on digital. Simultaneously, Medical Affairs organizations should also define their approach toward patients. Digital tools and apps that support patients to play a more active role in understanding their disease and adhering to treatment will become the norm. Digital therapeutics—a connected device plus drug with a digital component and data output—will enable efficacy beyond the drug and, ultimately, automated treatment with minimal physician-patient interaction in aspects such as dosing, frequency, monitoring, and the prevention and treatment of side effects. Patient engagement will be carried out systematically, focusing on three areas:

- Gathering patient insights through advanced analytics and big data, behavioral economics to identify unmet need, and online patient communities and social listening
- Engagement across the patient journey in places patients frequent (for example, through social media and via engagement of patient opinion leaders such as bloggers) and supported by use of behavior change tools, treatment support, and decision aids
- Patient data and evidence generation through real-time data capture and feedback via wearables and sensors; real-world data and patient-reported outcomes; and patient-centered trials (for example, site-less trials, wraparound support)

4. Step up internal medical leadership: Delivering strategic medical direction to the organization

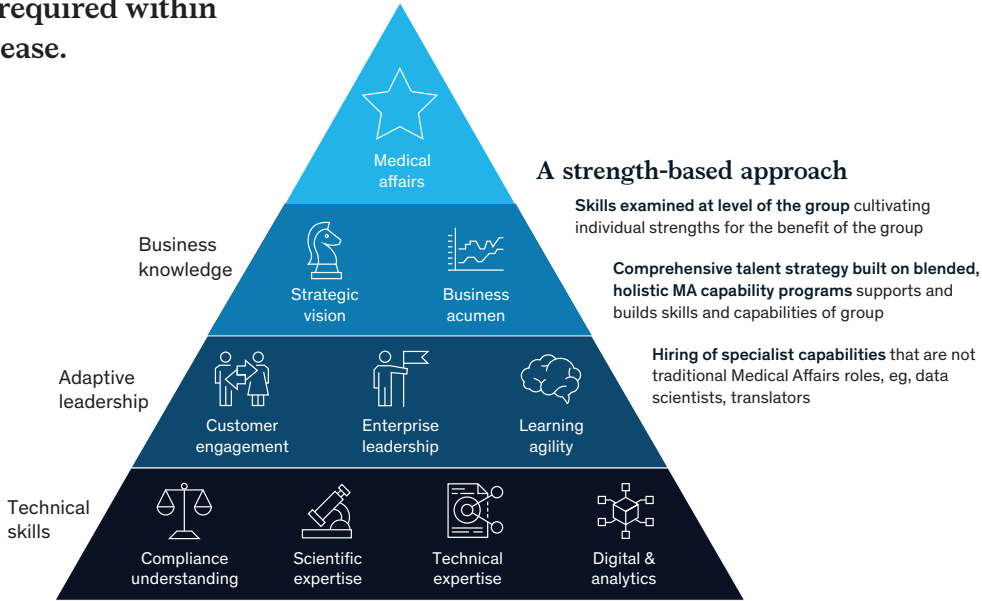
A radical transformation of medical leadership beyond traditional roles will see Medical Affairs leading from the C-suite, transforming public opinion of the industry, putting the patient front and center, and rethinking how company performance is measured to prioritize improved patient outcomes. We see this transformation of Medical Affairs teams happening across three dimensions:

- The elevation of medical strategic planning across all critical processes within and outside of Medical Affairs
- An imperative to acquire and nurture strategic medical talent to deliver on these bolder ambitions
- A focus on performance management and resource allocation to drive and elevate performance in this new future.



The implications of this approach include the adoption of an integrated analytics system to quantify medical impact and provide insights into how different medical activities and strategies drive outcomes: one example is the development of a system for understanding the “next-best action” for field medical. Along with such shifts comes a requirement to upgrade capabilities across Medical Affairs: for instance through adopting “modern learning journeys”—incorporating new technologies and adult learning principles to advance a comprehensive set of strategic (including personal) skills and medical expertise—and to inject a new type of talent into Medical Affairs with a focus on digital. This will require investment in analytics expertise such as data scientists, data engineers, and translators—people with an understanding of how to apply advanced analytics to business challenges (Exhibit 5). In addition, this approach will demand new, agile ways of working such as rapid prototyping and solution development. Once in place, Medical Affairs is positioned to create additional value for the organization. So what differences will we see going forward?

Exhibit 5
The scope of capabilities required within Medical continues to increase.



SOURCE: Medical Affairs Leader Forum

Becoming more business savvy and agile. In the context of the market changes described above, Medical will experience growing demands from the business, and medical leadership will acquire greater strategic influence: for example, by providing medical insights to identify strategic opportunities or risks for the company. At the same time, new ways of working will be important—in order to engage dynamically with stakeholders and adapt faster to a changing environment, Medical will need to become more agile, balancing three vital capabilities: speed (with a structure and governance that enables nimble responses to changes in the landscape), stability (a long-term purpose, vision, and strategy that delivers sustainable results), and flexibility (the ability to sense and creatively adapt to pursue value-generating opportunities). In other words, Medical Affairs organizations need to purposefully assign people to activities of the highest impact in more visible ways than done previously.

Using strategic partnerships to unlock value. Medical Affairs is set to become a critical partner to ensure product success, including successful launches based around scientific excellence. Going forward, an effective Medical Affairs group with strong influence over other functions provides the opportunity to eliminate cost related to, for example, launched products that don't meet customer needs—currently such costs tend not to be measured. Equally, Medical needs to understand and grasp the opportunity to shape a better medical and corporate strategy, and engage in strong partnerships with Development, Commercial, and Market Access to ensure the success of the company. Looking ahead, we can expect to see Medical Affairs leaders becoming “C-suite ready” while more generally Medical will be at the center of medical and scientific decisions from product to disease.

Transforming day-to-day activities in Medical Affairs. By 2025 traditional medical activities will be completely transformed by cutting-edge digital and analytical tools and the impact of these activities will be quantified and compared. Traditional approaches are no longer fit for purpose. There is an urgent requirement to upgrade the operational efficiency of core medical activities today via technology—for instance, natural language processing of medical information requests both to better address individual requests and also as a source of strategic insight.

Four levers in combination optimize patient and HCP experiences and outcomes

By addressing these four critical areas in combination, Medical Affairs is positioned to optimize patient experiences and also to improve outcomes. At the same time, specific focus should be placed on supporting patients and providers by enhancing knowledge and understanding—and

hence their ability to make informed decisions. There should be a particular emphasis on representing the voice of the patient internally in order to drive innovation and customer satisfaction.

Promoting safe and appropriate use. Fostering safe and appropriate use of medications, alongside a focus on ease of use for patients and physicians, will remain a primary consideration for Medical Affairs—as will enhancing outcomes. It will continue to require medical and scientific excellence. However, the ability to optimize such activity will be transformed by many of the advances described above, notably the facility to link activity to outcomes and the ability to rapidly provide the right information (and the

right drug) at the right time to patients, providers, and payers. This will almost inevitably entail system-wide changes regarding update and uptake of new guidelines for drug use and ensuring access and availability through effective engagement of payers and medical decision makers. A further consideration will be to assist patients with a comprehensive understanding of a disease and its implications. Finally, all of these activities should feed into new research to advance our understanding of a drug and a disease.

Enhancing physicians' ability to make optimal decisions in partnership with patients.

Patients today are increasingly savvy, making greater demands for information and seeking access to cutting-edge drugs (for instance, via demands for early access to drugs still in trial). At the same time, we are witnessing an expansion of providers' focus beyond traditional clinical data

There should be a particular emphasis on representing the voice of the patient internally.

to new areas: these include issues of access and cost and value, personalization of medicine with treatments targeted to narrower patient populations, and demands for data transparency.

Building the voice of the patient into business innovation. Frequently today, there is a lack of advocacy and failure to represent the patient voice internally—this not only risks the organization not meeting patient needs, but also serves to promote skepticism around pharma motivations within the healthcare ecosystem. Medical has a major opportunity to address this issue by serving as the voice of the customer and patient internally—at the highest levels of the company. The ambition is for Medical Affairs to lead the way in regaining the trust of physicians, patients, and the public. To do this successfully demands new thinking around how to engage with patients. Areas to consider include: how to quantify and reduce patients' unmet medical needs, how to be patient centric when designing clinical studies, how to improve patient support programs, and how to translate insights into opportunities to better help patients.

In conclusion, the four levers described above combine to position the patient experience and outcomes at the core Medical Affairs activity going forward. This new role will be facilitated by the function's ability to acquire and harness powerful digital capabilities and methodologies to interpret advancing medical science and technology on behalf of the patient and other stakeholders.

Recommendations



By 2025 Medical Affairs will have advanced significantly in terms of its vision, role, and influence—see sidebar “How will Medical Affairs be different in 2025?” Organizations seeking to develop a best-in-class Medical Affairs function should begin to address a number of factors to improve both their external engagement and their internal structures, processes, and capabilities, while focusing on core value-adding activities:

- Embrace the power of technology to transform medical—especially digital, including AI and other new tools, advanced analytics, and new datasets—by defining a prioritized set of use cases, building a technology capability stack, and developing a strategic plan for one, three, and five years ahead.
- Measure how the organization performs in terms of maximizing patient outcomes both by understanding the real-world consequences of specific Medical Affairs activities and then also having the performance-management capability to make better use of such insights to drive the excellence of the right activity.
- Directly address patient medical needs, for example through a seamless combination of engagement on social platforms and new tools that support patients on their medical journey.
- Modernize ways of working in order to embrace new value-creation opportunities (for example, through a deep understanding of new data-generation sources and the ability to interpret this information alongside internal partners), and build strategic leadership know-how with enhanced skills and capabilities, in order to engage in strong partnerships with R&D and Commercial.
- Seek out cross-industry collaboration where appropriate to advance the function and build talent—examples include: PhactMI, the Medical Affairs Leadership Academy (MALA) and the Medical Affairs Professional Society (MAPS).

By 2025, Medical Affairs will elevate performance across medical activities to optimize experiences and outcomes for patients and physicians.

	Key MA activities	Aspirations for 2025
Innovate evidence generation	Integrated evidence planning 	<ul style="list-style-type: none"> – Patient oriented evidence planning ensures all data generated optimizes patient experiences and outcomes – Global approach to integrated evidence planning with a centralized view of all data generation activities across the lifecycle in all regions world-wide that covers all data types and end points including detailed customer insights – Impact of data generation activities measured in terms of change in patient outcomes
	Advanced analytics (including RWE) 	<ul style="list-style-type: none"> – Claims and EMR data will be harnessed across all geographies by innovative MA analytic teams enabling real-time monitoring of outcomes on more granular patient sub-segments – Rapid insight generation will enable MA to steer the company in the right direction – Apps, drug+ and other solutions will create real-time data which will be used to improve patient outcomes
	Phase IIIb/ IV trials 	<ul style="list-style-type: none"> – Optimized trials will heavily leverage RWE data to be faster and cheaper with better outcomes – Virtual trial models will leverage virtual platforms and advanced analytics to radically transform traditional trial models
	Collaborative research 	<ul style="list-style-type: none"> – Shift to collaborative research models that leverage the full extent of industry's deep R&D expertise to ensure rapid output of high quality research from academics and other independent researchers
	Publications 	<ul style="list-style-type: none"> – Equal use and trust of both peer-reviewed publications and other robust, credible evidence available on digital channels – Automated publication technology will drive workflows and radiation of content into all related communication materials
Accelerate access to treatments	Value data generation 	<ul style="list-style-type: none"> – Incorporation of value endpoints in all studies to ensure data produced meets the needs of payers and other value-based medical decision-makers – Centralized HEOR analytics capabilities with deep brand expertise develops value data and messages in line with global strategy
	Value-based field medical 	<ul style="list-style-type: none"> – Formal partnerships between MA and payer medical decision-makers will jointly reduce the total cost of care and improve patient outcomes (e.g., managed entry agreements, outcomes based contracting) – Medical and Market Access will work fully hand-in-hand to provide a comprehensive view of value provided
	Patient-facing activities 	<ul style="list-style-type: none"> – Patient medical engagement will be systematically carried out by MA supported by digital tools that enable patients to play a more active role in their disease and treatments – MA is the voice of the patient working at the highest levels of the company to shape strategy to provide patient value based on advanced analytics and insights from direct patient engagement – MA owns all medical communications to patients as digital disruptors circumvent the pharma industry to put drugs, clinical information and decision-making directly into the hands of the patients

Source: Medical Affairs Leader Forum (2018)

	Key MA activities	Aspirations for 2025
Transform & personalize medical engagement	Stakeholder management 	<ul style="list-style-type: none"> – Global approach to medical and value stakeholder engagement with robust central field medical excellence function – Robust customer insight-generation process captures detailed and nuanced data from MA customer interactions and other data sources, and uses these insights to shape strategy and ways of working – Deep understanding of the impact of field medical and other medical activities on the health of patients transforms the way field medical teams are measured and deployed – Connected device + drug + digital component + data will allow for efficacy beyond the drug
	Field medical 	<ul style="list-style-type: none"> – Rigorous analytical approach to identify and prioritize KOLs globally and coordinate across countries – Field medical engages a broad set of healthcare stakeholders and tailors their approach to meet individual's medical needs and preferences – Patient medical engagement will be systematically carried out by MA supported by digital tools that enable patients to play a more active role in their disease and treatments – Digital tools will replace many face-to-face interactions
	Medical information 	<ul style="list-style-type: none"> – Automation and digitization will be the norm with centralized natural language processing enabling a consistent experience and way to measurable impact
	Events and congresses 	<ul style="list-style-type: none"> – E-congresses and other innovative methods of stakeholder engagement increase reach of medical programs while improving physician medical decisions and patient outcomes
	Medical education and grants 	<ul style="list-style-type: none"> – Collaboration with independent medical education platforms and digital programs will become the new norm
Step up internal medical leadership	Medical strategy 	<ul style="list-style-type: none"> – MA is the "third pillar" of the company with internal and external recognition for the critical role it plays in ensuring the success of the brand and the health of patients – MA will lead the company-wide brand strategy incorporating customer insights and advanced analytics to develop a deep and nuanced understanding of the customers – MA will lead the way for pharma to regain the trust of physicians, patients, and public – Transition to digital Advisory Boards which use virtual technology to gain rapid insights from external medical
	Talent and capabilities 	<ul style="list-style-type: none"> – Pharmaceutical company CEOs will come out of MA – A robust MA-focused capability building journey will transform MA professionals as required to excel in 2025 – Cutting-edge digital and analytical tools built on automated processes will completely transform medical functions (e.g., automated content production and management, automated virtual interfaces)
	Performance management 	<ul style="list-style-type: none"> – The impact of all medical activities on patient outcomes can be quantified and compared across medical activities enabling effective prioritization – Rigorous adoption of performance management supported by new, robust metrics will optimize impact of MA activities and elevate performance

How will Medical Affairs be different in 2025?

Looking across the range of core Medical Affairs activities—from stakeholder management to talent and performance measurement—three areas stand out.

Stakeholder management

We expect to see a global approach to medical stakeholder engagement applied locally across a broad range of medical and value decision makers (including an expanded customer view to include employers, health systems, patients, and so on). There will be a robust central field medical excellence function to support a local focus on execution: for example, identification, prioritization, call planning, content development, all carried out by Global Medical Affairs.

A robust customer insight-generation process will capture detailed and nuanced data from MA customer interactions and other internal and external data sources, and use these insights to shape ways of working to support stronger customer relationships through transparency and learnings.

Deep understanding of the impact of field medical and other medical activities on the health of patients will transform the way field medical teams are measured and deployed, promoting a focus on providing physicians with the tools and capabilities to optimize patients' health and outcomes.

Digital therapeutics (connected device + drug + digital component + data) will allow for efficacy beyond the drug as well as automated treatment—ultimately with minimal physician-patient involvement. This will include aspects such as dosing, frequency, monitoring, and prevention and treatment of side effects.

Field medical

MSLs will engage a broader set of healthcare stakeholders, including KOLs, selected healthcare professionals (HCPs), payers, and patient advocacy groups; individual interactions will be high quality and tailored to individual needs and preferences.

Digital tools will replace many of today's face-to-face interactions, informed by analytics and data.

Patient engagement will be systematically carried out using digital tools and apps that support patients to play a more active role in their disease and treatment.

Medical information

Automation and digitization will be the norm with centralized natural language processing (NLP) in medical information, enabling consistent experience and a measurable impact across markets so that HCPs can immediately access needed information how, where, and when they want it.

McKinsey and Company has been working closely with industry executives over the long term to build a deep understanding of the Medical Affairs function. Over 15 years, McKinsey has published more than 30 white papers with a view to raising aspirations and mapping the path forward for Medical Affairs within the wider industry. This body of work includes a series of papers (first published in 2008) outlining a new vision for Medical Affairs, of which “A vision for Medical Affairs in 2025” is the latest, most ambitious example. Throughout these efforts, our aim has been to elevate the role of Medical Affairs professionals as we seek to drive positive impact for patients, caregivers, and healthcare professionals by enhancing Medical Affairs’ strategic focus, and optimizing the impact of its activities.

Our thinking is based on the longstanding Medical Affairs Leader Forum, which has brought together hundreds of industry leaders since it was founded in 2006. It seeks not only to forge a common understanding around a forward-looking vision for the function but, importantly, to jointly tackle the most challenging issues facing Medical Affairs professionals within a broad industry context. Through this collaboration, we have developed a rich database covering medical organizations’ resourcing and design, with half a million data points capturing the evolution of Medical Affairs organizations during the past ten years. At the same time, we have jointly crafted a Medical Affairs Leadership Academy for up-and-coming medical leaders, which has successfully prepared more than 300 medical leaders over the last four years to lead the Medical Affairs organizations of the future.



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