

REPORT



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INNOVATION IN 2025

a solli Roundtable

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MEDIA GROUP

INNOVATION IN 2025 - ROUNDTABLE

March 26, 2025  Manhattan, NYC

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INTRODUCTION

The pace of change in pharmaceutical media is not just accelerating—it's transforming the very way our industry connects with patients and professionals alike.

solli convened a dynamic cross-section of industry leaders in NYC to tackle the most urgent and exhilarating frontier facing us: innovation in pharma media.

From rethinking how we use AI to forging new standards of personalization, this wasn't just a roundtable - it was a collaboration of stakeholders united by a shared goal: to raise the bar for the entire industry.

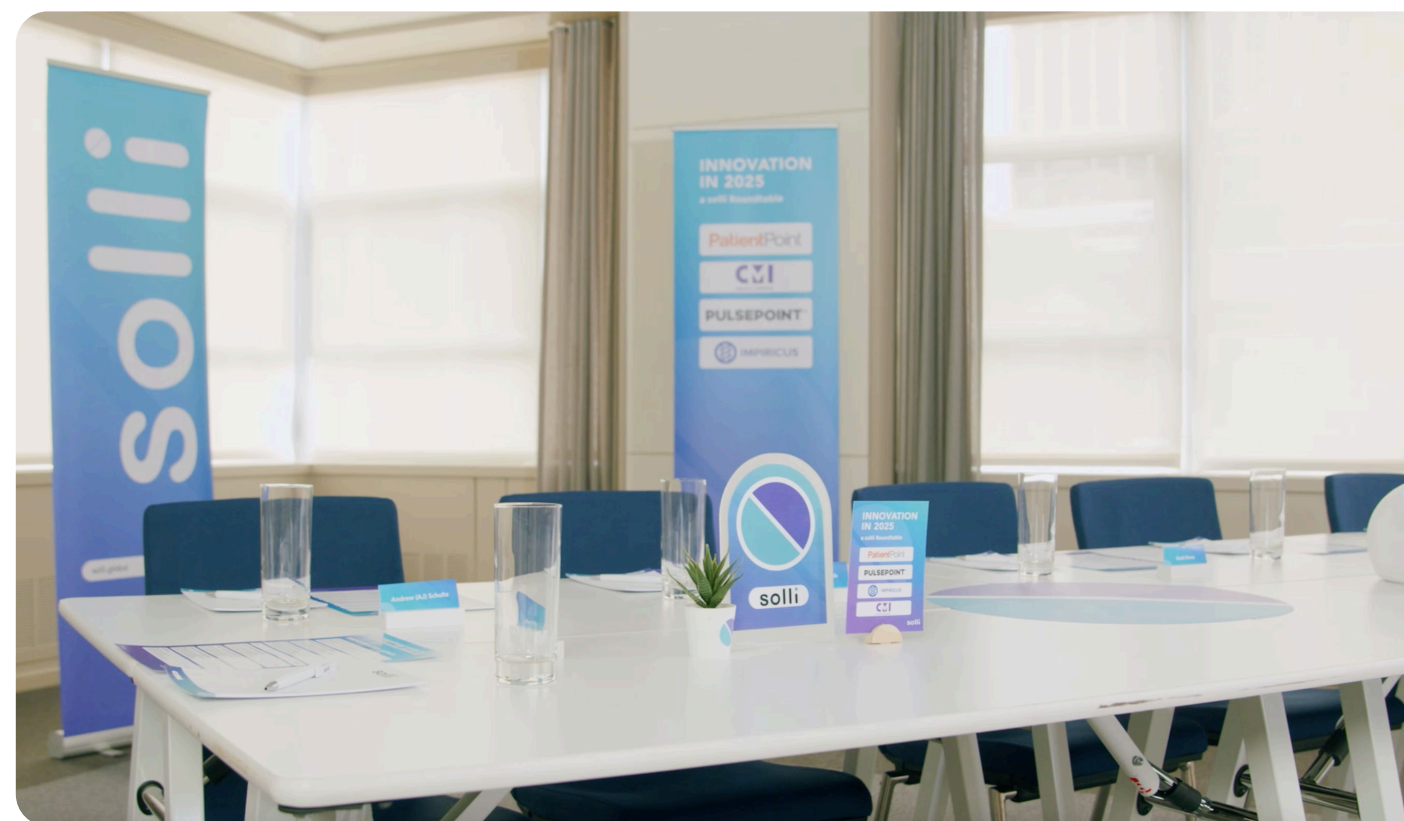
This report distills the key themes that emerged, capturing insights from

the leaders driving change across pharma brands, media agencies, media networks, and tech companies. These aren't theoretical concepts; they are real-world challenges and solutions shaping campaigns and decisions right now.

Each section dives deep into one of the six defining themes from the event.

Innovation in pharma media isn't just about flashy tech or headline-worthy trends—it's about finding smarter, more human ways to connect. The true breakthroughs are those that enhance how HCPs and patients engage with brands, with the ultimate goal of improving real-world health outcomes.

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1. PRECISION TARGETING, ADAPTIVE ENGAGEMENT & PRIVACY

WATCH THE DISCUSSION HERE

If the last years were about reaching the right audience at scale, 2025 and beyond are about reaching them at the right moment with the right message.

Across the roundtable, precision targeting emerged as a foundational element—but now supercharged by adaptive intelligence and behavioral data.

Panelists discussed how real-time responsiveness is replacing static audience segmentation. The industry is embracing an always-on model that not only knows who the target is but also when they are most likely to engage.

Adaptive optimization was outlined as the process of using dynamic data points to assess when a target—such as a physician—

is most likely to engage. Instead of simply identifying who to target, it focuses on when to reach them for maximum relevance and effectiveness.

It's a step beyond personalization—it's about contextual sensitivity. This approach relies on layering behavioral patterns, timing windows, and digital signals to ensure outreach happens when impact is highest.

The roundtable underscored a key shift: success now hinges not just on knowing who the target is, but when they're most likely to engage. This move toward moment-based engagement reflects the industry's embrace of real-time, adaptive strategies that prioritize timing as much as targeting.

“It's a mindset.
It's not
actually just a
moment

– Charles Hecht, Paid Media
TA Lead, Novo Nordisk



“We know exactly whom your physician customer is. The question is: are we reaching them when they're most receptive?

– Malcolm Halle, VP of Strategic Accounts, PulsePoint

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2. REAL-WORLD APPLICATIONS AND ETHICAL BOUNDARIES OF AI

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“Start with the operational AI that saves time, so teams can focus on strategy

– Glenniss Richards, Senior Director,
Digital Media Activation, Bayer US
Pharma



AI's moment has very much arrived—but with it comes responsibility. The discussion at the roundtable was rich with excitement, caution, and hard-earned realism. It's clear that artificial intelligence is reshaping pharma media, from generative content to workflow automation. But the focus is rapidly shifting from capability to accountability.

Charles Hecht from Novo Nordisk emphasized a critical point: “The first priority within AI is safety and the balance of human interaction with the technology of AI.” In highly regulated industries like pharma, ensuring ethical integrity is non-negotiable.

Beyond compliance, participants discussed how AI can either build trust or erode it. Misinformation, patient confusion, and brand overreach were all cited as potential pitfalls. But AI was also hailed as a creative and operational ally. It's already being used to automate EHR workflows, summarise clinical content, and optimize engagement strategies in real time.

Malcolm Halle from PulsePoint cut through the hype, saying, “Every company says they're an AI company now—but we're learning to tell who's for real.” As the ecosystem evolves, cross-functional collaboration will be essential to vetting true innovation.

The group agreed: AI should enhance—not replace—the human element in media. Alison Tapia captured this sentiment well: “It doesn't take the place of an individual. Hopefully it helps to elevate the efforts of the team.”

The takeaway? AI isn't just a trend—it's an inflection point. Used well, it can humanize, streamline, and elevate how we connect with HCPs and patients alike.



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3. PERSONALIZATION AS A VALUE DRIVER, NOT JUST A TACTIC

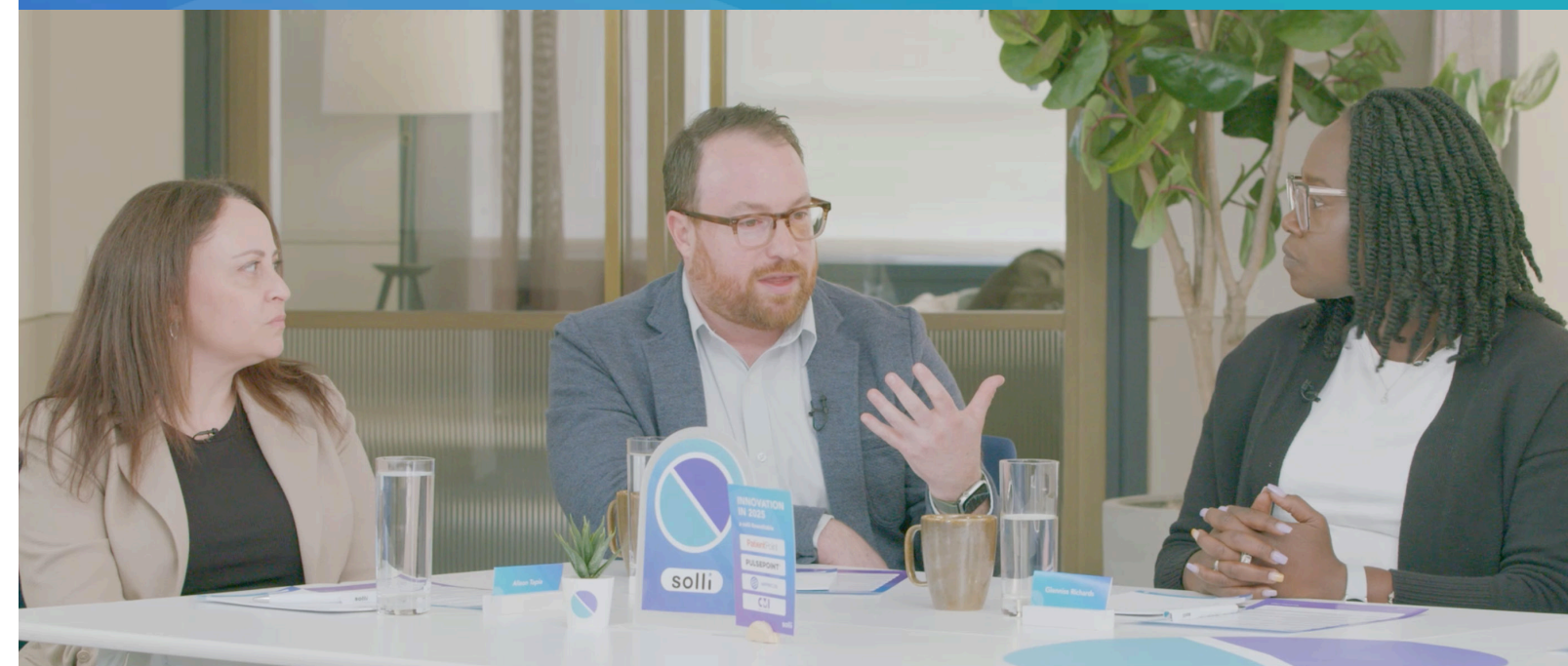
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Personalization is no longer a campaign checkbox—it's the key to building real value for patients and professionals. During the roundtable, leaders championed a reframing of personalization from a tactical function to a strategic imperative.

AJ Schultz from PatientPoint highlighted this shift in focus, explaining that there's a tremendous opportunity to reach patients "in a moment where they're ripe for making healthcare decisions." When executed well, this kind of contextual engagement doesn't just feel relevant—it drives results.

Participants emphasized that personalization is not just about algorithmic targeting. It's about utility, empathy, and timing. The stakes are high. "You only get so many darts to throw at the dartboard before you lose trust," said Charles Hecht from Novo Nordisk, underscoring the critical need for thoughtful execution.

This sentiment echoed across the room: personalization should reflect human needs—not just demographics. If it's done superficially, it risks alienating the very people it seeks to engage.



“You could be getting to the right level of targeting in the right channel at the right time. But if that message is not resonating... it's not going to land.”

– Alison Tapia, Former Senior Director, Performance Marketing & Digital Innovation, Dermavant an Organon Company



“Relevance drives action”

– AJ Schultz, President, PatientPoint Precision



4. THE CHANGING NATURE OF HCP AND PATIENT INTERACTIONS

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The traditional HCP-patient-media triangle is being reimagined. With both HCPs and patients becoming increasingly digitally fluent, pharma media strategies must evolve to meet their converging expectations and behaviors.

Glenniss Richards framed the shift bluntly: “Physicians are consumers too. They use TikTok, they stream. Why aren’t we showing them the same ads we show patients?” This reflection sparked a broader agreement around the need to unify communications across audiences.

Rather than creating two separate ecosystems, attendees emphasized the value of aligning message tone, creative assets, and technical delivery between HCPs and patients. This alignment is increasingly made possible by advancements in media technology-tools that enable scalable personalization, dynamic content delivery, and shared creative across both groups.



Several speakers highlighted how innovation is enabling message orchestration across digital channels, point-of-care touchpoints, and EHR systems. When the same technology stack powers both HCP and patient engagement-drawing on shared signals, triggers, and formats-brands can drive greater consistency and relevance.

The group emphasized that this integrated approach increases trust and brand resonance. With smarter use of data and infrastructure, pharma marketers can ensure their messaging reaches all stakeholders at the right moment, in the right context, with the right tone. The goal is not to simplify the experience-but to unify it.

“**Consolidate
the message.
Consolidate the
tech. Make it
work together.**”

– Glenniss Richards, Senior
Director, Digital Media
Activation, Bayer US Pharma

5. OPERATIONALIZING INNOVATION THROUGH COLLABORATION

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Innovation in pharma media is no longer limited to ideation - it must be embedded into how teams operate. Roundtable participants stressed that unlocking the full value of AI, automation, and emerging tech requires rethinking roles, processes, and partnerships.

True innovation doesn't happen in isolation. It depends on alignment across internal teams and external collaborators. Attendees discussed how cross-functional collaboration is evolving to meet the demands of modern media execution. From AI councils and pilot programs to tech integrations and shared KPIs, innovation is being formalized across organizations.

As Alison Tapia put it: "AI is just another

member of the cross-functional team." This mindset shift-treating AI and data tools as strategic partners-was echoed throughout the discussion.

Glenniss Richards shared a practical progression: start with time-saving automation that frees teams to focus on creative and strategic thinking. "You need that operational AI that's going to make your team more efficient first."

Several attendees emphasized that collaboration is no longer optional. It's the infrastructure that supports innovation. Whether it's working across departments or aligning with tech and media partners, successful teams are prioritizing openness, shared learning, and agile workflows.



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“We’re all figuring it out together and really being open and honest with one another.”

– Shannon O’Malley, Executive Vice President,
Group Client Director, CMI Media Group

6. INCLUSION, ACCESS, AND PURPOSE-DRIVEN PLANNING

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Innovation must include everyone. The roundtable concluded with a powerful and candid discussion on health equity, representation, and the need for purpose-driven planning in pharma media.

Glenniss Richards brought clarity and urgency to the conversation: “It’s not just about spending on DE&I. It’s about doing the right thing with the entire budget.” This sentiment resonated widely across the room.

Rather than treating inclusion as an afterthought or isolated effort, participants emphasized the importance of embedding equitable thinking across the entire planning process—from creative development to media partnerships. This means investing in minority-owned media, reflecting real-world patient

experiences, and building inclusive strategies from the outset—not retrofitting them after the fact.

Several speakers cautioned against performative actions, underscoring that translation is not the same as inclusion, and that relevance must come from genuine understanding—not assumptions. The conversation reinforced that equitable planning isn’t just good ethics—it’s smart strategy.

As Alison Tapia noted, “You have to know who the health care decision maker is in a particular household.” Often, it’s not who marketers assume. Innovation, she suggested, means looking beyond traditional profiles to recognize—and intentionally serve—the people who truly drive care decisions.

“Partnering with the minority-owned companies is one thing, but also making sure that we’re challenging our supplier community”

– Shannon O’Malley, Executive Vice President, Group Client Director, CMI Media Group

“There’s different levels of access to digital technologies. There’s different levels of connectivity.”

– Mike Gelber, SVP, Product, Impiricus



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FROM DISCUSSION TO ACTION

This roundtable was not a theoretical exercise. It was an action-oriented exchange between professionals who are already building what pharma media will look like in the coming months and years. If there was one consensus, it was this:

We can no longer afford to innovate in silos.

Precision. Purpose. Personalization. Partnership. These are the four pillars that emerged from this groundbreaking session.

Whether you're a marketer, strategist, data scientist, or agency leader, the future isn't coming-it's already here. Let's meet it with clarity and collaboration.

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