S&P

Strategy & Performance

Life Sciences. Market Reality. Measurable Impact.

FROM BREAKTHROUGH TECHNOLOGY TO BETTER CARE.

Where medical innovation meets, patient need, market reality and sustainable value.

A BREAKTHROUGH IS NOT YET A MARKET-READY SOLUTION.

Prove the benefit. Validate the pathway.
Build clinical confidence.

Clinical evidence

Demonstrate meaningful clinical benefit.

Safety

Confirm safety and risk mitigation.

Regulatory readiness

Navigate MDR, IVDR and global requirements.

Workflow integration

Enable real-world use and operational fit.

Adoption

Drive clinician and patient adoption for lasting impact.

Technology becomes value when evidence, compliance and practical use come together.

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ICCBA® – REAL-WORLD CUSTOMER INTELLIGENCE WHERE DECISIONS ARE MADE

Point of Prescription / Recommendation / Adoption ("Point of Sale")

Not just expert opinion. Real-world perception where prescribing, recommendation and adoption actually happen.

Traditional Expert Formats

- focus groups
- KOL / professor opinions
- strategic expectations
- valuable – but not sufficient

VS

ICCBA Real-World Intelligence

- daily prescribers
- recommenders
- users
- real market behaviour

Don't ask only those who explain the market. Ask those who actually make the market.

Traditional focus groups with professors, KOLs, and top experts are useful, but they can be misleading if they are treated as market reality.

ICCBA Proprietary Real-World Performance Tool

What really matters is how real prescribers, recommenders, and users perceive the client/brand versus competitors in daily clinical practice.

ICCBA captures that real-world customer perception and translates it into **management action.**

INTRINSIC PERFORMANCE

Product / brand perception

up to ~80 tailored questions

- medical benefit
- efficacy
- safety
- innovation
- differentiation
- usability

ONE ASSESSMENT. UP TO 8 COMPARATORS.



EXTRINSIC PERFORMANCE

Company / service perception

up to ~80 tailored questions

- medical affairs
- scientific communication
- field force
- services
- customer orientation
- company performance

Up to 6 HCP Groups

Reference design: n ≥ 40 per group

Office-based specialists | **Hospital specialists** | **Subspecialists** | **High-prescribers** | **Clinical decision-makers** | **Other target HCP groups**

Simultaneously assessed, where operationally feasible. | *Separately analyzed, where strategically relevant.*

Each participating HCP evaluates the client/brand and all included comparators within the same assessment.
This creates a differentiated and directly comparable customer-perception profile across competitors and HCP groups.

CONTROLLED ON-SITE ASSESSMENT

identity check | individual codes / QR | standardised tablet workflow | start / resume | pseudonymised analysis | ~3 hours

Share of Voice & Resources → **Market Performance / Market Shares** → **Customer Quality Perception**

Individual questions › clusters › segment profiles › competitive profiles › strategic priorities

THE MISSING LINK

ICCBA reveals how real-world customer perception translates market activity into competitive outcomes.

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ICCBA® - THE MISSING LINK BETWEEN MARKET ACTIVITY AND MARKET PERFORMANCE

Pharmaceutical companies know their market activities, investments and market shares. What is often missing is reliable information on how the product and the company are actually perceived by relevant customers in direct comparison with key competitors.

THE THREE MANAGEMENT DIMENSIONS

SHARE OF VOICE & RESOURCES

Market engagement · Communication · Medical & Commercial Activities · Resource allocation

MARKET SHARE GAINED / LOST

Market position · Market-share development · Competitive dynamics

CUSTOMER QUALITY PERCEPTION

THE MISSING LINK

How do relevant customers actually assess product and company — and how does this perception compare with competitors?

ICCBA DOES NOT MEASURE IN ISOLATION - IT COMPARES.

- The client and its brand are at the center of the assessment.
- Within the same assessment, the client/brand is evaluated against up to eight relevant competitors or comparator brands.
- Crucially, each participating healthcare professional evaluates the client/brand and every included comparator using the same questions and evaluation criteria.
- This creates a complete within-respondent competitive comparison for every participant.

CLIENT / BRAND *versus* **COMPETITOR 1 · COMPETITOR 2 · COMPETITOR 3 · COMPETITOR 4 COMPETITOR 5 · COMPETITOR 6 · COMPETITOR 7 · COMPETITOR 8**

TWO PERSPECTIVES - ONE INTEGRATED COMPETITIVE POSITION

INTRINSIC PERFORMANCE

Product-related perception

- Medical benefit
- Efficacy
- Safety
- Innovation
- Usability / ease of use
- Clinical differenitation
- Other product-specific performance dimensions

EXTRINSIC PERFORMANCE

Company-related perception

- Medical Affairs
- Scientific communication
- Field force
- Services
- Customer orientation
- Company performance
- Other relevant performance dimensions

ICCBA combines both perspectives into an integrated relative competitive position.

TARGET GROUPS

Up to 6 relevant HCP groups: office-based specialists · hospital-based specialists · subspecialists · high-prescribers · clinical decision-makers · other project-specific groups

S&P reference design: up to 6 HCP groups × n ≥ 40 per group · total N ≥ 200

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FROM CUSTOMER PERCEPTION TO MANAGEMENT ACTION

ICCBA does not end with a survey. The analysis systematically translates individual ratings into a strategic management diagnosis.

ANALYSIS CHAIN

1. **Individual Questions**
2. **Clusters**
3. **Intrinsic / Extrinsic Performance**
4. **Integrated Competitive Position**
5. **Strengths • Weaknesses • Competitive Gaps**
6. **Priorities for Management Action**

STATISTICAL POWER THROUGH THE COMPARATIVE DESIGN

- ICCBA's statistical strength comes not only from sample size, but from the paired / within-respondent design.
- Each participating HCP evaluates all included competitors personally.
- The same respondent therefore serves as his or her own reference in direct competitive comparisons, reducing between-person noise versus separate respondent groups.
- This increases the statistical efficiency and precision of relative competitive comparisions.

S&P reference design: up to 6 HCP groups × n ≥ 40 per group = total N ≥ 200

Final statistical power is determined and confirmed before project start based on expected effect size, variance, number of comparisons and planned subgroup analyses.

CURRENT POSITION → PRIORITY LEVERS → FUTURE POSITION

1 | CURRENT POSITION

Where does the client stand today?

- Which product and company-performance dimensions are evaluated better or worse than competitors?

2 | PRIORITY LEVELS

Which perception differences are strategically relevant?

- Where are resources already being translated successfully into perceived quality?
- Where is there a gap between resource input and customer perception?

3 | FUTURE POSITION

Which performance areas should be changed with priority?

- Which actions have the greatest potential to improve the future competitive position?

ICCBA measures current perception and provides the evidence base for future strategic positioning.

AI-ENHANCED ANALYTICS - SENIOR-LED INTERPRETATION

AI-SUPPORTED

- Data validation
- Plausibility and consistency checks
- Pattern recognition
- Cluster analysis
- Competitive comparisons
- Identification of relevant deviations

SENIOR-LED

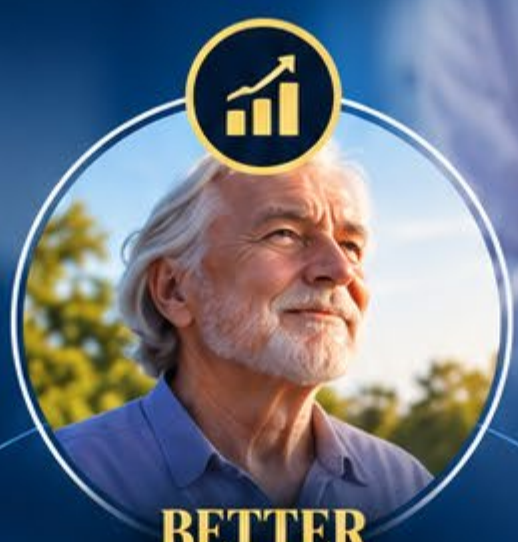
- Medical interpretation
- Assessment of clinical relevance
- Strategic interpretation
- Competitive diagnosis
- Derivation of concrete management options

AI accelerates the analysis. Senior expertise determines what it means.

THE RESULT: Where do we stand compared with our competitors - why are we there - and which performance areas must we change to improve our future position?

THE PATIENT NEED IS THE STARTING POINT. NOT THE TECHNOLOGY.

Technology creates value only when it solves a meaningful medical problem.



BETTER OUTCOMES

Improves clinical and quality-of-life outcomes for patients.



EARLIER DIAGNOSIS

Enables earlier and more accurate detection of diseases.



SAFER THERAPY

Supports more effective and safer treatments with fewer risks.





REDUCED CARE GAPS

Expands access and delivers equitable care across populations.



MORE EFFICIENT PATHWAYS

Simplifies treatment pathways and integrates into real-world care delivery.

Patient-centered innovation creates relevance, adoption and value.

FROM ISOLATED DEVICES TO INTELLIGENT CARE ECOSYSTEMS.

Sense. Connect. Interpret. Intervene. Learn.

Sensors

Closed-loop systems

AI diagnostics

Remote monitoring

Telemedicine

Interoperability

Interoperability transforms devices into care solutions.

CLINICAL VALUE NEEDS A PATHWAY TO REIMBURSEMENT.

Medical benefit. Economic evidence. Market access. Commercial adoption.



Market success depends on **access, pricing logic and a credible value story.**

GREAT TECHNOLOGY NEEDS GREAT EXECUTION.

The right strategy. The right leadership. The right market.

Stabilize, refocus and unlock value.

Medical & market intelligence

Clear differentiation that wins.

Turnaround

Positioning



Partnerships

Leadership

The right partners for greater reach and value.

Experienced teams that turn strategy into results.

Go-to-market

Aligned execution across markets, channels and customers.

Not more innovation activity. More measurable market impact.

APPROVAL IS A MILESTONE. ADOPTION IS THE BUSINESS.

A development asset must navigate the correct regulatory route and establish an economically credible pathway to real-world adoption.

Biotech / Biopharma



MedTech / Diagnostics / Digital Health



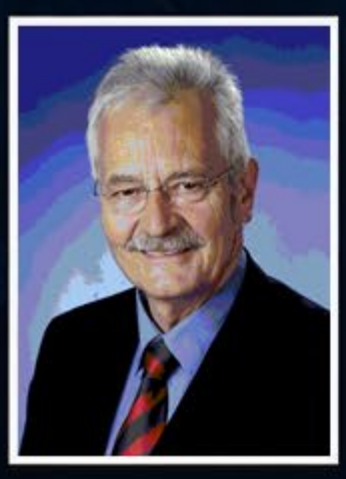
The right pathway determines both timing and value.

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LET'S TURN MEDTECH POTENTIAL INTO MEASURABLE VALUE.



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