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Introduction

Pharma organizations' engagement models are at a pivotal point, with the expansion and continued adoption of hybrid and digital engagement strategies across the drug life cycle, from clinical trials to post-commercialization. As the industry struggles with increasing pressure to deliver consistent and connected experiences to relevant stakeholders across the drug life cycle, legacy engagement approaches rooted in siloed systems, manual processes, and disconnected functions are falling short. Fragmented data, inconsistent messaging, and the lack of personalization hinder stakeholder trust and weaken engagement impact.

Achieving seamless, personalized, and consistent experiences with Healthcare Professionals (HCPs), Key Opinion Leaders (KOLs), patients, or payers requires pharma organizations to solve the inherent complexity of cross-functional collaboration. As each organizational function manages the engagement journey's different phases, staying aligned on data, messaging, and decision-making demands a more intelligent and integrated approach to engagement – one that only AI can effectively deliver. AI is uniquely positioned to transform pharma engagement through its ability to unify vast, diverse data sets, automate real-time intelligent insights, and enable predictive personalization at scale.

This Viewpoint explores the potential of an end-to-end, Al-enabled engagement platform that can transform how pharma organizations collaborate across the stakeholder life cycle. By integrating data across clinical, commercial, medical, and patient services, such a platform can deliver real-time intelligence, orchestrate personalized experiences, and create a cohesive journey for stakeholders.

This report shares Everest Group's findings from a survey of 75 senior pharma leaders, highlighting:

- Limitations in current engagement models across organizational functions
- Organizations' expectations from a unified stakeholder journey
- Functional building blocks and an Al-powered engagement platform's strategic use cases
- Business benefits and Rol expectations that drive an organization's willingness for platform adoption
- Barriers to scale and change management considerations

Pharma organizations can use this Viewpoint to explore how AI-enabled engagement platforms can help bridge existing operational silos across organization functions. The report also helps gauge industry readiness and willingness to deploy end-to-end AI-enabled stakeholder engagement platforms.

To understand how the pharma industry prioritizes Al-enabled engagement platforms, Everest Group conducted a targeted survey with 75 senior pharma executives. The respondents included C-level executives, presidents, senior VPs, directors, senior managers, and functional leaders overseeing commercial, medical, clinical, and patient services domains.

Exhibit 1 presents respondent distribution by organization size.

Exhibit 1: Respondents' profile by organization size

Source: Everest Group (2025)



Defining the current state of pharma engagement

Uncovering engagement gaps

The current pharma stakeholder engagement quality is suboptimal due to technology and operational siloes in and across organizational functions. Fragmented systems, data siloes, and manual workflows are the key obstacles.

As the pharma industry responds to rising stakeholder expectations, omnichannel engagement, and digital transformation, the urgency to reimagine seamless engagement across the drug life cycle has never been greater. Today's stakeholders, HCPs, KOLs, patients, study participants, or payers, expect compliance and connected, proactive experiences that adapt depending on where they are in the engagement life cycle. Their needs evolve from education to access, support to evidence, and real-time answers to long-term outcomes, requiring sustained engagement across drug life cycle channels and phases.

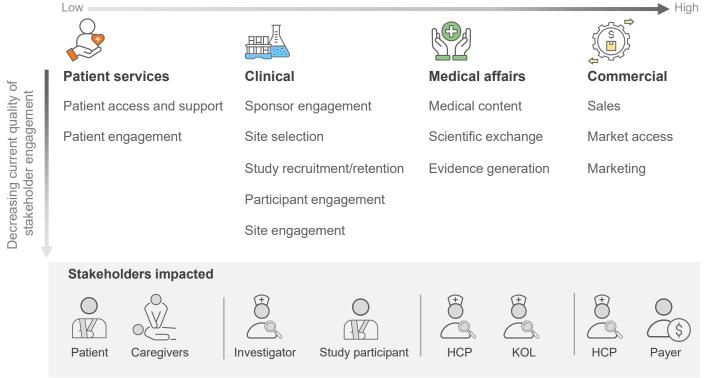
Even today, most pharma organizations rely on legacy engagement models, designed around function-specific platforms and workflows. These models struggle to support today's data-rich, multi-stakeholder environment. The problem is not the intent; it is infrastructure. Fragmented systems, siloed data, and uneven technology maturity across organizational functions limit the industry's ability to execute a cohesive engagement strategy.

Our survey findings reveal where integration breaks down across organizational functions and how these gaps compromise the consistency and quality of stakeholder engagement. Exhibit 2 highlights the progressively declining quality of pharma stakeholder engagement from commercial and medical toward clinical and patient services, indicating that stakeholders such as study participants, patients, and caregivers currently experience the lowest engagement quality.

Exhibit 2: The current stakeholder engagement quality across organization functions and sub-functions

Source: Everest Group (2025)





The exhibit shows where the engagement quality is perceived to be the lowest within an organization's functions. For instance, site and participant engagement in clinical functions suffer the most from fragmented communication and limited real-time visibility, resulting in inefficiencies that can hinder trial execution and performance. Similarly, in patient services, patients need round-the-clock access and support, including benefits verification and financial assistance, which are relatively better catered to versus patient needs around onboarding, education, and adherence monitoring. The absence of shared context or data between functions results in patients not receiving vital support at key decision points.

Structural disconnects undermining engagement quality

We now discuss some highlighted themes that have emerged as the most prominent whitespaces and gaps in the survey analysis that limit the stakeholder engagement's quality.

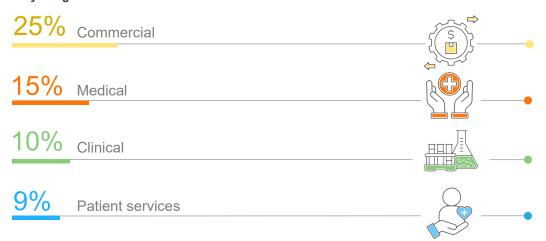
Silos within a function dilute stakeholder engagement

Teams operating within the same function frequently use disconnected systems, follow misaligned workflows, or work toward siloed objectives. For instance, in the commercial function, sales representatives, marketing professionals, and access teams engage the same HCP independently without coordination, resulting in redundant touchpoints. Similarly, in clinical development, clinical operations, clinical data, and compliance teams lack a unified view of study participants or clinical site operational metrics.

Exhibit 3 outlines survey results, which reflect a function's internal fragmentation. Commercial is the most internally integrated function, followed by medical, clinical, and patient services. However, even the commercial function sees only 25% full integration, highlighting that no function has meaningfully addressed the integration challenge. These internal disconnects create inconsistent experiences for stakeholders, making it difficult for organizational functions to act as cohesive units.

Exhibit 3: Internal function integration in delivering stakeholder engagement Source: Everest Group (2025)

Percentage of pharma stakeholders who highlighted the internal function integration extent as **fully integrated**



Silos that cut across functions undermine quality and engagement continuity

Even when individual functions align internally, engagement can still fail at the handoffs between them. Medical-commercial and clinical-patient services support the same HCP and patient at different points, yet rarely exchange data or context, leaving gaps in continuity and coordination. Similarly, clinical trial insights rarely flow into commercial planning for coordinated HCP targeting.

Exhibit 4 reflects weak cross-functional synergies. Integration between clinical and commercial functions is reported as low (8% fully integrated), with similarly limited alignment between clinical and patient services (11%). These gaps fragment stakeholder experience and prevent organizations from realizing the full value of data and insights generated across the drug life cycle. Bridging cross-functional silos is essential to deliver seamless, stakeholder-first engagement.

Exhibit 4: Cross-functional integration in delivering stakeholder engagement Source: Everest Group (2025)

Percentage of pharma stakeholders who highlighted the cross-functional integration extent as **fully integrated**

	Patient services	Medical	Clinical
Clinical	11%		
Commercial	20%	24%	8%
Medical	11%		24%

Siloed data environments fuel inconsistencies

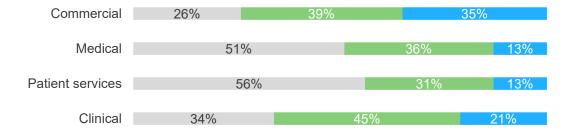
Fragmented stakeholder journeys often reflect fragmented data environments. While each function has modernized its systems, they remain disconnected, leading to inconsistent experiences. In clinical and patient services, siloed data ecosystems and insufficient patient engagement delay trial execution and disrupt care continuity. Commercial functions, despite having more mature Customer Relationship Management (CRM) and automation tools, struggle to synchronize content and interactions across functions and channels, highlighting strong internal function enablement but weak integration with upstream and downstream touchpoints. Though central to scientific communication, medical teams often operate without real-time access to insights from clinical or commercial functions, limiting their ability to adapt messaging or identify emerging needs.

Uneven technology maturity further compounds the issue

The differentiated technology maturity across organizational functions compounds the challenge of delivering consistent, Al-enabled engagement. Exhibit 5 demonstrates that commercial functions lead the curve with platforms such as CRM, Content Management System (CMS), marketing automation, and sales enablement showing higher maturity, with more than one-third of survey respondents identifying them as being in advanced Al adoption stages. Clinical platforms show moderate advance, though a significant share remains in earlier stages, highlighting continued reliance on manual processes in trial oversight. In contrast, medical and patient services platforms, including scientific engagement systems, publication tools, and patient support tools, lag noticeably behind, with most respondents rating their capabilities as basic or developing. This emphasizes significant gaps in automation and Al-driven personalization capabilities in key stakeholder-facing functions.

Exhibit 5: Current engagement platforms' maturity by organization function Source: Everest Group (2025)

- Stage 1: basic (limited capability)
- Stage 2: established (data-driven personalization, moderate automation)
- Stage 3: advanced (highly automated, Al-driven personalization)



Together, these limitations highlight a vital gap between aspiration and execution. To close this gap, pharma organizations must rethink stakeholder engagement not as a series of isolated interactions but as a continuous and coordinated engagement journey. Such a journey begins with a unified engagement layer that bridges people, processes, technology platforms, and functions across the drug life cycle.

Envisioning the ideal stakeholder engagement journey

End-to-end pharma engagement across the drug life cycle is the way forward

Ideal engagement journey should be designed around stakeholder needs that evolve across the drug life cycle. An Al-enabled platform that unifies data, intelligence, and cross-functional action is the answer.

The pharma industry's current approach to stakeholder engagement strategies falls short. Fragmented systems, siloed ownership, and disconnected workflows have made it challenging to deliver a consistent, coordinated experience. Different functions own and manage distinct parts of the stakeholder engagement journey with varying objectives, resulting in inconsistent messaging and disjointed interactions.

Stakeholder roles are never static; their goals and touchpoints evolve across the drug life cycle stages, amplifying the need for aligned workflows, connected systems, and coordinated teams. For instance, an HCP may participate as a trial investigator during the clinical development phase, act as a KOL guiding scientific discourse during launch, and transition into a prescriber or care provider post-commercialization. Patients, too, may begin as study participants, later become therapy adopters, and eventually contribute Real-world Evidence (RWE). The challenge lies in contextualizing these evolving roles, ensuring each stakeholder receives timely, relevant, personalized engagement in the journey.

As roles evolve across the drug life cycle, organizations move to a lifecycle-based model that prioritizes stage-specific, cross-functional coordination, anchoring engagement around five key stages: clinical development, pre-launch, launch, post-launch, and post-commercialization. Adopting this model allows pharma organizations to align better with evolving stakeholder needs. The result is more connected experiences, where insights from one phase inform the next, whether turning trial outcomes into launch messaging or using RWE to refine long-term support.

Exhibit 6 illustrates each stage of the drug life cycle, highlighting key stakeholders that pharma organizations should engage, the primary organization functions that are responsible, and the secondary functions that work in tandem to enable a seamless experience. It also shows key use cases that the primary and secondary functions need to own and coordinate to draw cross-functional synergies. It is important to deliver relevant and coordinated stakeholder engagement across stages.

Exhibit 6: A snapshot of key stakeholders and functional roles across the drug life cycle Source: Everest Group (2025)

	Key stakeholders to engage	Primary function(s)	Secondary function(s)
Clinical development	Clinical Study investigator participant	Clinical: Patient recruitment, site coordination, and study oversight	Patient services: Participant onboarding and support
Pre-launch	KOL Payer Clinical investigator	Medical: Activate KOLs and advisory boards and evidence preparation Commercial: Articulate market messaging, HCP mapping, and market access strategy	Clinical: Study data and insight access
Launch	HCP	Commercial: Omnichannel strategy, sales rep-MSL launch coordination, and campaign management	Medical: Align on market messaging, KOL activation Clinical: Study data & insight access
Post-launch support	HCP Patient	Patient services: Access support, engagement, and adherence programs Commercial: RWE-driven engagement strategy	Medical: Adverse event and safety reporting and RWE collation and dissemination Clinical: Adverse event and safety reporting
Post-commercialization	HCP Patient Payer	Medical: RWE generation and continual market education Patient services: Continual access and engagement support	Commercial: RWE-driven access strategy

In clinical development, study participants and investigators seek clear communication, transparency in trial design, and real-time support to ensure smooth onboarding and participation. As therapies move into the pre-launch phase, investigators, KOLs, and payers expect early access to clinical insights and scientific evidence. Cross-functional coordination at this stage helps translate clinical results into early advocacy and access readiness. At launch, HCPs seek credible, timely, and tailored information to guide prescribing decisions, requiring consistent messaging and connected sales rep-Medical Science Liaison (MSL) engagement that combines scientific credibility with commercial execution. As we move to the post-launch period, patients and HCPs expect continued, streamlined engagement through adherence programs and real-world insights. Similarly, in post-commercialization, patients, HCPs, and payers continue to expect clear evidence of long-term therapeutic value, which means leveraging RWE for continual market education and refining access strategies informed by evolving treatment outcomes. Coordinated engagement throughout the drug life cycle ensures that each touchpoint reinforces trust, accelerates decision-making, and supports long-term value realization.

Cross-functional coordination is a key enabler for effective engagement across the drug life cycle, from clinical development to post-commercialization. While responsibilities may shift between clinical, medical, commercial, and patient services functions, the most impactful moments, whether onboarding study participants, activating HCPs at launch, or supporting patient adherence, depend on timely data flow, aligned messaging, and unified execution. Al is pivotal in orchestrating this coordination, delivering real-time insights and next-best actions, and automating content alignment across functions. Al excels in such use cases by powering individual touchpoints and driving continuity across them.

Exhibit 7 lists use cases that reflect where organizations prioritize improving engagement across key phases of the drug life cycle. Individual functions lead some of these efforts, while others are inherently cross-functional. Together, they form the foundation for a more connected, stakeholder-first engagement strategy.

Exhibit 7: Function-specific and cross-functional use cases that pharma organizations prioritize

Source: Everest Group (2025)

Applicable functions for each highlighted use case

Prioritized AI use cases	Stakeholder impacted		Clinical	Commercial	Medical	Patient services
Predict protocol deviation risk in real-time during a clinical study	Study participant	Site investigator				
Refine campaign strategy in real-time based on HCP/patient engagement patterns	HCP	KOL				
Automate MLR workflows and audit trails to streamline medical content review	HCP					
Deliver personalized support via chatbots to improve therapy adherence	Patient	Caregiver				
Synchronize clinical study outcomes with commercial narrative for consistent HCP and patient communication	HCP	O W Patient				
Streamline access to clinical insights and RWE from drug utilization and treatment outcomes to support scientific messaging and education	HCP	KOL				
Facilitate continuous and coordinated engagement with HCPs/KOLs from study design through commercialization for stronger advocacy, avoiding redundant interactions	HCP	KOL				
Enable seamless transition by creating clear pathways for patient support post-study to ensure care continuity	Study participant	O W Patient				
Leverage RWE (prescribing patterns, patient adherence, and treatment outcomes) alongside market intelligence to drive informed commercial decisions on HCP targeting	HCP					
Automate MLR workflows and audit trails to ensure consistency and integrity in promotional and scientific evidence	HCP					
Integrate patient engagement and brand analytics, delivering insights into what is working and what is not across the patient journey, ensuring they better reflect real-world patient needs and experiences	Study participant	Patient				

Engagement quality across the pharma life cycle is still undermined by internal and cross-functional silos. A unified, Al-enabled layer is now critical to close this execution gap.

The blueprint for Al-enabled engagement to unify data, insights, and action

As stakeholder roles evolve throughout the drug life cycle, aligning clinical data, commercial strategy, medical guidance, and patient support is essential. This is where an Al-enabled engagement platform comes in, not as another tool in the technology stack, but as the orchestration layer that combines data, decisions, and delivery across the drug life cycle. To enable this, the platform must operate across three layers: a foundational ingestion layer to unify data, an intelligence layer to interpret and learn from it, and an impact layer to drive meaningful, personalized interactions from clinical development to post-commercialization stages.

Exhibit 8 presents the three-layered engine that drives stakeholder engagement's future.

Exhibit 8: Three-layered Al-enabled stakeholder engagement platform

Source: Everest Group (2025)

Impact layer

Engagement channels SMS Call Email Social media Web portals In-person interactions Mobile app Conference

Drug life cycle



Clinical development

Al-based trialparticipant matching and recruitment

Al-enabled site selection and management

Real-time trial monitoring

Predict trial risk and protocol deviation

Personalized consent and ePRO enablement



Pre-launch

KOL sentiment analysis tracking

Trial data and RWEdriven market messaging

Advisory board engagement

Dynamic HCP/KOL segmentation and targeting



Launch

Personalized omnichannel engagement

Personalized and compliant content creation

Real-time Al-driven campaign enhancement

Next-best action execution



Post-launch

Real-time patient journey and sentiment tracking

Al-driven patient access, benefits verification, prior authorization, and financial assistance

Proactive patient adherence and HCP prescription risk management



Postcommercialization

RWE-driven field engagement

RWE-driven payer targeting

Feedback loop

Intelligence layer





Data unification

Unifies fragmented HCP, patient, payer, and engagement data



Predictive intelligence

Next-best action, segmentation, trend analysis, and opportunity prioritization



Behavioral intelligence

Sentiment analysis, engagement tracking, and preference learning



Regulatory and compliance intelligence

Consent management, data access and control, and content governance



Organization platforms



- CTMS
- Patient engagement platforms
- CRM and marketing automation
- CMS
- Medical information systems
- Publication management tools

Third-party data sources



- Prescription and claims data
- Market intelligence data
- Competitive intelligence data



External data sources



- · Scientific literature
- · Social media listening tools
- Real-world Data registries
- Public health data
- Patient forums

Ingestion layer: establishes a unified data foundation

Every robust engagement begins with trusted data. Several pharma organizations still have stakeholder information scattered across disconnected organizational platforms, such as Clinical Trial Management System (CTMS), CRM, CMSs, and third-party and external data sources. This fragmentation limits visibility and introduces inconsistencies, preventing organizational functions from forming a comprehensive view of HCPs, KOLs, study participants, patients, and payers.

To address this, organizations are creating a unified data foundation, a single source of truth that consolidates data across clinical, commercial, medical, and patient services functions. By collating data around key personas, organizations can begin to interpret stakeholder behavior through digital footprints, creating the conditions for 360-degree insights.

Intelligence layer: transforms data into actionable insights

Once data is unified, the next challenge is extracting meaning from it. Think of data as musical notes: without an orchestrator, they remain disjointed. In this context, the orchestrator is the engagement platform's Al layer, transforming scattered stakeholder data into a deep understanding of needs and opportunities. In the pharma industry, this intelligence becomes highly important. Engagements span diverse stakeholders, each operating within strict regulatory and scientific frameworks. Al-enabled platforms that unify and analyze this complex data can guide teams across functions by predicting next-best actions at key points in the stakeholder journey, from site activation and trial recruitment to omnichannel launch campaigns and post-market evidence generation.

These predictive insights improve as the system learns from previous interactions, including feedback from field representatives, digital engagement touchpoints, and medical inquiries. Predictive AI excels at forecasting behaviors, generative AI helps automate content creation, and a newer form, agentic AI, takes intelligence further by autonomously making context-driven decisions.

Impact layer: delivers personalized engagement across the drug life cycle

The final layer brings intelligence to life, where insights become actions, and engagement happens in real time. The hybrid engagement model is gaining traction across the drug life cycle due to the rise in digitally empowered stakeholders. Where digital and in-person interactions coexist, delivering the right message through the right channel at the right moment separates thoughtful stakeholder engagement from noise. While optimizing channels is important, contextualizing each interaction's nature based on where the stakeholder is in the drug life cycle ensures maximum impact.

With clinical development, Al-enabled platforms support more personalized trial onboarding journeys for study participants and site engagement by offering study start-up task alerts, study issue and protocol deviation management, and automated risk-based monitoring. As therapies move into the pre-launch phase, Al refines scientific messaging using KOL sentiment insights and optimizes advisory board engagement by identifying the most relevant experts based on influence and therapeutic alignment.

At the launch stage, stakeholder-facing execution becomes even more vital, where HCPs receive tailored content and next-best action prompts through coordinated omnichannel campaigns. The post-launch phase emphasizes patient continuity, where AI enables proactive adherence support, access assistance, and timely education, followed by post-commercialization, where AI helps field teams and access functions deliver RWE-driven engagement and refine payer strategies to support long-term value realization. Across all stages, the impact layer ensures engagement is personalized, compliant, coordinated, and continuously evolving. In this layer, AI truly meets the stakeholder, translating data and intent into meaningful actions.

When these three layers work together, they establish a self-reinforcing feedback loop. Data moves effortlessly from the point of capture (the ingestion layer) to insight generation (the intelligence layer) to stakeholder engagement (the impact layer), enriching the system with every interaction. Agentic AI takes engagement even further, going beyond task automation to operate at the intersection of the intelligence and impact layers. It makes autonomous, context-driven decisions with minimal supervision, whether flagging protocol risks or tailoring HCP outreach, and continuously adapts based on evolving input patterns. The impact layer brings these intelligent capabilities directly into stakeholder interactions, enabling real-time, personalized engagement across the drug life cycle.

How agentic Al supercharges stakeholder engagement

Agentic AI represents a transformative leap from traditional rule-based AI systems. While conventional assistants operate within static, pre-programmed logic, agentic AI introduces autonomous, goal-oriented agents capable of conducting tasks autonomously. These agents execute workflows and adapt in real time, learning from stakeholder behavior and evolving context to optimize outcomes.

In the pharma industry, AI agents can be tailored to the distinct needs of varied stakeholders across functions. For instance, an agent supporting an MSL might review the latest publication trends or cross-reference recent KOL interactions across commercial and medical functions. Meanwhile, agents assisting site investigators could streamline trial documentation, flag protocol risks, or trigger real-time nudges to improve recruitment timelines. For sales representatives, these agents can dynamically recommend content or channel combinations that align with an HCP's engagement history and therapeutic interests.

This intelligent orchestration, powered by cross-functional data integration, enables proactive, context-aware engagement strategies, enhancing overall operational efficiency across clinical, medical, commercial, and patient services functions.

By autonomously handling eligibility checks, engagement scoring, or early risk detection, these agents free up experts to focus on high-value interactions. The future of pharma engagement will rely on this synergy of agentic Al delivering precision at scale, and human functions steering organization goals with strategic foresight.

Organizations leveraging agentic Al unlock five core benefits: **continuous self-learning**, **contextual adaptation**, **autonomous decision-making**, **proactive problem-solving**, **and scalable execution**. Together, these benefits help build a more adaptive and impactful engagement ecosystem, capable of keeping pace with stakeholder expectations in a dynamic and highly regulated industry.

Outlining the business case and key success factors for Al-enabled engagement platforms

An end-to-end Al-enabled engagement platform's benefits

The expected benefits are varied and cut across business and operational efficiency. However, only few are fully committed to it while most are exploring. Supporting the Al-enabled platform with function-agnostic KPIs, role-based change management initiatives are key to move the needle on adoption.

A well-defined business case articulating an end-to-end Al-enabled engagement platform's clear benefits is essential for pharma organizations to justify investment and drive organization-wide adoption. While full-scale adoption remains aspirational, many pharma organizations are recognizing the substantial potential benefits of such a platform, outlined below.

Accelerated time to market

In the highly competitive pharma landscape, where timely market entry significantly influences product success, leveraging real-time insights becomes indispensable. An Al-enabled platform empowers organizations to accelerate time to market by enabling faster site selection, improved patient recruitment, and enhanced cross-functional readiness. Simultaneously, it improves launch impact by optimizing messaging, segmentation, and outreach cadence based on real-time market signals

Improved cross-functional alignment

An end-to-end engagement platform acts as a binding force for organizational functions, such as clinical, commercial, medical, and patient services, preventing them from operating in isolation. The platform ensures cohesive outreach across the drug life cycle by leveraging the ingestion layer to unify stakeholder data across functions and employing predictive, generative, and agentic AI within its intelligence and impact layers. This unified approach directly enhances cross-functional coordination by aligning teams around shared insights, objectives, and workflows, significantly reducing inconsistent messaging and improving fragmented stakeholder experiences

Increased operational efficiency

Organization stakeholders, including sales representatives, MSLs, and patient support teams, spend too much time on repetitive tasks, such as manually logging stakeholder interactions, scheduling follow-up meetings or calls, updating CRM records, and ensuring compliance documentation is accurate and complete. While Al does not eliminate those tasks, it just gets them done faster and more accurately. Freeing up key time to prioritize value-addition components, such as relationship-building or strategic planning, leads to better operational and financial outcomes. For instance, if an Al agent manages medical inquiries and pre-populates call notes, sales representatives can increase their weekly HCP interaction numbers

Enhanced customer retention and adherence

An Al-enabled platform actively enhances retention and adherence by employing predictive analytics to identify stakeholders at risk of disengagement and proactively addressing their concerns. Patients receiving timely reminders, tailored education, and other contextualized engagement touchpoints feel encouraged to stick with their therapy, lowering drop-off rates and improving overall health outcomes. Similarly, for HCPs, timely RWE updates on long-term efficacy, comparative outcomes, and automated alerts about formulary changes keep them invested in the drug and encourage continued prescription. In both cases, adherence means fewer delayed treatments and a more consistent revenue flow

Better customer experience

Stakeholder perceptions of a brand are significantly influenced by each interaction they experience. An Al-enabled platform enriches these interactions by utilizing a unified data foundation (the ingestion layer) for a holistic understanding of stakeholder preferences, leveraging predictive analytics (the intelligence layer) to anticipate their needs precisely, and delivering personalized, contextually relevant interactions (the impact layer) at scale. By dynamically adjusting messaging, timing, and channels based on real-time insights, the platform converts routine engagements into meaningful, personalized experiences. This consistent personalization fosters increased loyalty and builds trust

The pharma industry's readiness and willingness to adopt an Al-enabled engagement platform

As Al-enabled platforms move from concept to organization priority, understanding the current state of organizational readiness becomes essential. This section explores how prepared pharma organizations are to adopt such platforms.

Despite growing recognition and the potential AI benefits in transforming stakeholder engagement, adoption readiness varies widely across pharma organizations. Exhibit 9 illustrates the current industry sentiment, highlighting varied preparedness levels, from early adopters fully committed (17%) to those interested yet cautiously exploring AI solutions (48%).

Exhibit 9: Organizational sentiment toward Al-enabled stakeholder engagement platform adoption

Source: Everest Group (2025)

17%

48%

24%

9%

2%

Organizations are fully committed to adopting an Alenabled end-to-end stakeholder engagement platform, backed by strategic leadership alignment and early internal investments

Organizations are interested but remain in exploration mode, highlighting strong intent tempered by uncertainty around execution

Organizations are
neutral, recognizing
Al's potential but still
evaluating the best-fit
strategy before
making significant
investments

Organizations
remain **skeptical**about Al-driven
stakeholder
engagement, citing
concerns around
Rol, adoption
challenges, and
data governance

Organizations are
strongly opposed to
Al-enabled stakeholder
engagement platforms,
preferring traditional
engagement methods
due to regulatory
uncertainties or
organizational
resistance

The pharma industry is leaning toward a moderate readiness state, indicating early to mid-stage exploration. Several organizations recognize Al's potential in integrating clinical, commercial, medical, and patient services workflows to deliver stakeholder-centric engagement across the drug life cycle. However, only a few consider themselves highly prepared to adopt such a platform. Pharma organizations with strong digital foundations and cross-functional collaboration strategies are ahead in the adoption maturity curve. However, the overall industry readiness is expected to evolve rapidly over the next two years due to incremental yet consistent strategic investments in Al to differentiate stakeholder engagement.

Key success factors to mitigate adoption challenges

Pharma organizations must overcome several strategic and operational hurdles to move the needle on adoption and unlock the promised benefits of an end-to-end Al-enabled stakeholder engagement platform.

Exhibit 10 highlights primary challenges, particularly data silos and regulatory compliance, and secondary yet critical hurdles.

Exhibit 10: Challenges in adopting an end-to-end Al-enabled stakeholder engagement platform

Source: Everest Group (2025)

Primary challenges



Data silos and interoperability



Regulatory and compliance hurdles

Secondary challenges



Change management



Uncertain Rol



Cross-functional workflow/process integration



Misaligned objectives of organization functions

The technology architecture for orchestrating Al-enabled engagement discussed in the blueprint for Al-enabled engagement to unify data, insights, and action section provides direct, inherent solutions to these primary and secondary challenges.

Primary challenges

Data silos and cross-functional workflow

The Al-enabled platform's ingestion layer addresses data siloes by consolidating disparate data sources, including study data, HCP engagement records, KOL insights, and patient support interactions into a single, unified foundation. This consolidation enhances data visibility and interoperability across functions. The platform also addresses cross-functional process workflows and integrations essential for end-to-end engagement across the drug life cycle, ensuring seamless collaboration. For example, KOL insights gathered by medical affairs teams automatically inform commercial strategies, aligning HCP outreach with educational content delivery. Shared task lists enable coordinated workflows, ensuring cross-functional alignment throughout the drug life cycle and minimizing inconsistencies.

Regulatory and compliance hurdles

Given the pharma industry's stringent compliance requirements, the platform incorporates governance and compliance protocols within its ingestion and intelligence layers. Features such as automated audit trails, robust security, and role-based access controls bolster compliance transparency. Furthermore, agentic AI proactively identifies and manages compliance risks in real time, ensuring immediate corrective actions, thus reinforcing compliance adherence.

Secondary challenges

Common Key Performance Indicators (KPIs) across organizational functions Challenge mitigated: misaligned objectives and uncertain Rol

The clinical, medical, commercial, and patient services functions define success differently. Organizations are beginning to align around five KPI categories: time and efficiency, retention, compliance, cross-functional collaboration, and business value. Among these, cross-functional KPIs are vital for realizing organizational value. Metrics such as frequency of RWE use in shaping commercial strategy or clinical insights informing post-launch messaging reflect coordination efficacy. These KPIs, including aligned incentives and connected data use, tangibly illustrate platform-driven unified execution, thus validating RoI.

Exhibit 11 outlines the five KPI categories with examples of how each can be tracked to improve transparency and justify platform investment.

Exhibit 11: KPIs to measure Al-enabled stakeholder engagement impact Source: Everest Group (2025)

Time and efficiency

- Study start-up and site activation:
 Time to First Patient In (FPI), time to
 Last Patient In (LPI), site activation
 rate, and protocol completion time
- Operational speed: Turnaround for data lock, regulatory submissions, marketing materials, and real-time insights
- Next-best action prediction accuracy:
 The percentage of next-best action executed by teams

Compliance

- Regulatory alignment: Right-firsttime documentation, minimal protocol deviations, and data privacy adherence
- Data quality: Screen Failure Rate (SFR), accuracy of medical content, and reduced human error in trial data capture
- Safety and risk mitigation: Early signal detection and adverse event reporting efficiency

Retention

- Patient retention: Dropout rate, adherence level, and patient lifetime value
- HCP engagement:
 Frequency/duration of HCP portal visits, prescription trends, and content consumption ratio
- Cross-channel touchpoints: The number of interactions per user, return visit rate, and satisfaction scores

Cross-functional collaboration

- Seamless process integration:
 Fewer handoffs, coordinated
 workflows across clinical, medical,
 commercial, and patient services
 during key engagement touchpoints
- Connected data use across functions: Frequency of one function using another's insights (RWE used in refining commercial strategy), and the number of content-related compliance errors (medical-commercial)
- Aligned incentive structure: Shared understanding of what defines quality engagement across functions with aligned incentives



Business value

- Financial impact: Reduced operational costs, cost savings versus traditional methods, and resource utilization metrics
- Revenue acceleration: Market penetration rate, time to market for new therapies or devices, and sales cycle speed
- Lifetime value measures: Patient lifetime value and omnichannel initiatives' Rol



Role-based change enablement initiatives

Challenge mitigated: change management

Effective adoption is fundamentally driven by people. Organization stakeholders, such as sales representatives, MSLs, site coordinators, and patient services teams, experience profound shifts in engagement, decision-making, and success measurement with Al platforms. Role-specific training, hands-on onboarding, and workflow alignment with platform functionalities facilitate smoother transitions. Demonstrating early, tangible successes in operational efficiency and enhanced stakeholder responses builds confidence, fostering sustained change acceptance.

Implementing an AI-enabled engagement platform redefines stakeholder interactions across the drug life cycle. A phased rollout anchored in clear business value and rigorous compliance readiness allows organizations to scale deliberately, minimizing disruptions. Starting with targeted, low-risk use cases, such as trial recruitment or KOL engagement, helps build confidence and validate outcomes. Involving compliance teams from inception ensures alignment with regulatory expectations. As adoption broadens, the platform evolves from a tactical tool into an embedded organizational capability, reinforcing sustained cross-functional alignment governed by shared standards and unified KPIs.

Conclusion

Today, pharma organizations face significant challenges with stakeholder engagement due to siloed workflows, fragmented data environments, and inconsistent crossfunctional integration. Survey results highlight that commercial is the most internally integrated function, but even here, only 25% report full integration, while clinical (10%) and patient services (9%) are far less integrated. Such siloes hinder the pharma industry's ability to deliver cohesive stakeholder experiences, resulting in fragmented and inconsistent interactions across the drug life cycle, from clinical trials through post-commercialization.

The envisioned solution, an Al-enabled end-to-end engagement platform, offers a robust blueprint for transforming stakeholder engagement. Organizations can achieve seamless coordination by establishing a unified data foundation through an ingestion layer, generating actionable insights via an intelligence layer, and delivering personalized engagement through an impact layer. Furthermore, agentic Al capabilities offer autonomous decision-making and contextual adaptability, enabling precise, timely interactions at every stakeholder touchpoint. Adopting such a platform empowers pharma organizations to move from fragmented interactions to fully connected stakeholder experiences, driving deeper engagement and operational efficiencies.

However, adopting an AI-enabled stakeholder engagement platform requires pharma organizations to address key success factors rigorously. Over 57% of senior pharma leaders identified data interoperability and 60% flagged regulatory compliance as top challenges to platform adoption, making them the two most critical barriers to address, alongside managing cross-functional integration, aligning objectives, and clearly demonstrating RoI. Addressing these factors through common cross-functional KPIs and targeted change management initiatives is essential for successful adoption. As organizations progress along their adoption journeys, establishing clear governance, demonstrating early wins, and scaling thoughtfully will be vital for harnessing AI-driven engagement's full potential.



This study was funded, in part, by Salesforce

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