Consumers are exerting unprecedented control over their healthcare spending, leaving payors and providers alike scrambling to adopt a customer-focused mind-set. For these organizations, which have direct contact with patients, the move to offer better customer service and greater access to information is a necessity amid fierce competition. But does this imperative of putting the customer first extend to all players in the healthcare industry, even those that don’t interact directly with patients?

Jean-Christophe (J.C.) Tellier believes so. Tellier joined UCB in 2011 after a distinguished career in which he held senior positions at pharmaceutical companies such as Macrogenics and Novartis. UCB, a Belgium-based multinational that focuses on drugs to treat neurological and immunological chronic diseases, has 8,500 employees in approximately 40 countries and generated nearly $4 billion in revenues in 2014.

Since taking the helm in January 2015, Tellier has sought to promote the concept of “patient value” throughout the organization. UCB has pursued a range of strategies to forge a stronger connection with the end users of its products. Tellier believes that UCB can deliver lasting value only by better understanding the specifics of complex diseases and truly listening to the real needs of patients in order to improve their quality of life.

Heidrick & Struggles’ Bob Atkins recently spoke with Tellier to learn about UCB’s efforts to embrace a patient value mind-set at all levels of the organization, how UCB measures progress in this area, and the critical role that culture plays in putting the patient front and center.

Heidrick & Struggles: How you would define your patient-focused approach?

J.C. Tellier: Traditionally, the patient has been relatively far from the pharma industry’s consciousness. If you think about the past 10 to 20 years, biopharma companies have been organized
around key functions: for example, regulatory compliance, account management, and sales. None of these functions was really focused on the patient. A stronger patient focus reminds us every day that our purpose is helping people who suffer from chronic diseases to manage their condition and improve their quality of life.

Now, our challenge is to take patient centricity — or what I call patient value — to the next level. It involves integrating the patient into every step of our activity chain, from research to marketing and sales, to drive better solutions and meet the patients’ diverse needs more effectively.

**Heidrick & Struggles:** Has patient value also changed UCB’s approach to research and clinical development?

**J.C. Tellier:** Today, the vast majority of clinical development involves taking all the patient populations with one disease — rheumatoid arthritis, Parkinson’s disease, epilepsy — and then dividing them randomly into two groups: one exposed to the new treatment, one that is a control group. The results from a relatively large number of patients are observed over a long period of time to see if their response is typical for this disease.

This approach does not give you a very true picture of reality. Chronic diseases are indeed very complex conditions with diverse symptoms and root causes. By better connecting science with patients from the start and by leveraging new scientific advances such as human biology, biomarkers, genetics, and analytics, we can define specific patient populations more precisely and gain a better understanding of how different patients react to potential treatments. The likelihood of success significantly increases, and the odds that we can come up with breakthrough solutions and create more targeted value for the patient become much higher.

A good example of this approach is romosozumab, one of the key drugs on UCB’s late-stage development pipeline. The drug, an anti-sclerostin monoclonal antibody, was developed as a result of our observations of a small group of South African people with a specific genetic profile: they suffer from a disorder called sclerosteosis; it is caused by a specific gene and characterized by bone overgrowth. Our scientific research around that gene enabled us to explore the potential it might have in rebuilding bone mass in people who are suffering from bone-reduction diseases such as osteoporosis. If successful, UCB’s romosozumab would probably be the first compound that could be used not just to stop bone resorption but to stimulate bone formation.

**Heidrick & Struggles:** Has the move to patient value changed how the organization is structured?

**J.C. Tellier:** UCB is not organized by function but by the patient value that we want to create. We have patient value teams in each of our major therapeutic areas. That has facilitated cross-functional teams working at every level of the organization to be as close as possible to the customers and to the outcomes that we want to deliver.

Patient value is also a key focus for the many employees — such as those in human resources, legal, or research — who don’t have that direct connection between their work and the potential value for patients. Our solution is to give them field experience with a sales representative or an account manager to learn about the lives of patients, how they interact with their physicians, and, more important, to understand the business we are in. When they come back, they don’t see the company the same way. They gain an understanding of how we can all look at our resources, the time to maximize the impact, and the value that each of us can create for the patient.

The key characteristic of our organizational structure is that it is more connected. No one person owns the solution. It’s always the result of a cross-functional team with shared accountability working together to understand the complexity of the environment.
Nothing can come just from the top through directives and a hierarchical culture. To be efficient in that more open and complex environment, you need to be crystal clear on the vision, the objective, the expectation, and the framework. Within this framework, however, each of us needs space to own the solution in order to create patient value.

**Jean-Christophe Tellier**

### Education
Doctor of Medicine (M.D.), University of Reims Champagne-Ardenne, France

Post-graduate: Rheumatology, University of Paris V; France Executive business programs at Harvard and INSEAD

### Career highlights
**UCB**
- CEO (2015–present)
- Executive Vice President, Biopharma Brands and Solutions (2011–2014)

**Ipsen**
- President and General Manager of North American Operations (2009–2011)

**Macrogenics**
- Executive Vice President and Chief Commercial Officer (2008–2009)

**Novartis**
- Chairman and CEO, Novartis Pharma France (2006–2008)
- CEO, Novartis Pharma Belgium (2003–2006)

**Heidrick & Struggles**: It’s always been my belief that, in any kind of organizational change, the single most important factor is that the senior management team models the right behaviors.

**J.C. Tellier**: Every employee looks to the senior leadership team, and in particular the executive committee, to see if we are “walking the talk.” Culture is probably one of the most important elements in achieving this strategy, because it’s essential in creating consistency throughout the company. If the organization sends one message, the leader sends another message, and the strategy sends a third message, then it’s very difficult to overcome this misalignment. Making sure that we have an organization built on the value that we can create for patients is an important element. Consistency is critical to make these changes successful.

It’s also important to have transparency and share the progress together. Then people can see what we are doing right, where we are improving, and where we are facing some challenges. I do think that also creates a lot of energy. When we share the same learnings, when we share the same objectives, and we respect each other, we can leverage the team’s differences and diversity to make the whole company much stronger. And that makes the overall organization much more confident in our ability to deliver what we are aiming for.

From my perspective, it’s very important to build this environment of trust and safe space. Otherwise, you never will get the feedback that you need in order to continue to grow.

**Heidrick & Struggles**: How do you measure progress?

**J.C. Tellier**: First, I’m convinced that if we are doing good things for the patient, we are doing good things for UCB and for the shareholders. That’s the best way to maximize our impact. Second, we think these strategies should translate into a higher engagement from our people, so we are measuring the level of
engagement on a regular basis. The third element is customer satisfaction. A couple of years ago, we started conducting in-depth analysis of the level of satisfaction of our partners, or other people with whom we are interacting. We started with physicians to get a qualitative idea of their experience. And so we are doing that on a more regular basis.

We are also considering how we can evaluate the patient experience across geographies and understand how it can be improved. Getting more input from stakeholders, including our employees and patients, will be the way to go.

Heidrick & Struggles: Do you agree that the industry is still pretty much in the early stages of the patient-centric journey?

J.C. Tellier: I do, and I think we are moving in the right direction. In the past century or so, the life expectancy has increased by 30 years. A good share of this progress is due to medication, but it’s not always recognized. The industry should embrace its achievements: I think that we can be reasonably proud of what has been achieved during the past century and how medications have helped patients to manage their condition and extend their life span.

The new patient value approach we’re advocating for will hopefully enhance the industry’s reputation compared with what we have today. A key to the industry’s success going forward will be for all stakeholders to learn how to work better together rather than fall into an adversarial dynamic of industry against payers or regulators or physicians.

Clearly, there is value to building cross-discipline relationships and putting different stakeholders together to achieve results, avoid wasted effort, and make sure that any dollar invested by any key partner creates the maximum value for the patients. As the industry continues to evolve, the voice of the patient will be more and more powerful in helping us to work better together — for them.

This interview was conducted by Bob Atkins, a partner in Heidrick & Struggles’ Philadelphia office and a member of the Healthcare and Life Sciences Practice (ratkins@heidrick.com).