



Guidelines for Incentive Payments Within Market Research

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Introduction

BHBIA members are encouraged to use this guide to reduce problematic pressures on respondent incentive¹ payments based on 'fair market values', known as FMVs, during the primary market research process. Within the market research industry, remuneration paid to participants is generally referred to as the 'incentive' (sometimes the term 'honoraria' is also used).

It is important to note that incentive payments must never be more than the fair market value permitted by the client, and readers should familiarise themselves with section 4.9 (Reimbursing respondents) of the BHBIA's legal and ethical guidelines.

Background

Each pharmaceutical company establishes a range of monetary values that they must keep within when making payments to health care professionals (HCPs) and non-HCPs, including physicians, nurses, payers, patients or the public, to ensure that these payments cannot be considered inappropriate. This can vary from company to company as each company will have their own methodologies to calculate FMV.

The requirement to consider this is mandated by industry regulations, but each pharmaceutical company decides their own levels, with these decisions often being made high up in the organisation or parent organisation. The concept of FMV is used for a wide range of interactions and engagements, and not just for market research.

Challenges can occur within the market research process when there is misalignment between the incentives the commissioning client company is able to pay, and the level of incentive payment that a third-party company organising the fieldwork would like to be able to offer to recruit respondents in a way that is commercially viable. This misalignment can occur for reasons unrelated to the market research, such as:

- International rates are used that are not tailored to the UK market
- The FMV rates or bands have not been updated, sometimes for many years, or draw no distinction between seniority or expertise of the respondent
- The rates were set by a team (sometimes a compliance, medical or procurement team) that is remote from and has very little knowledge of market research and the demand and competition for participants
- The rates are not tailored or adjusted for different types of input or activities, they are often based on types of engagements different to and not comparable with MR.

Respondents taking part in market research will compare the incentive they are offered to take part with those offered for previous projects, and with FMV rates varying within the industry, this can cause additional challenges when recruiting.

¹ An incentive is defined by the UK Market Research Society as "any gift, payment or other consideration offered to participants to encourage participation in a project."





Minimising pressure on FMVs

This guide acknowledges that in most cases nobody within the typical market research supply chain is able to significantly alter the FMV levels used by the commissioning pharmaceutical company.

However, there are circumstances in which it is reasonable and fair for respondents to receive higher levels of incentives, and there are also ways of conducting market research to ensure that pressure on FMVs can be minimised.

The BHBIA recommends transparency during the RFP process, and encourages commissioning companies to include information on relevant FMV ranges as part of this wherever possible, and with appropriate confidentiality measures in place.

This guide is designed to help our members remunerate those that participate in healthcare market research fairly, protect the quality of the sample and the quality of the data produced, whilst working within the necessary industry regulations and company requirements.

Split into three sections, each provides guidance to help with the main issues reported by the BHBIA membership. Each section contains information that will help you to understand, highlight and check all the factors that can impact FMVs and alert you to the situations where some flexibility may be required.

1. Respondent characteristic framework

This section recognises that some respondents can command higher levels of incentive payments. Failure to acknowledge this may lead to a degradation of the quality of the research. If FMVs are too low, they will attract only a specific subset of the potential universe and this will bias the sample and the results. It may also have a wider damaging impact on the market research industry as respondents become disillusioned and disengage.

The characteristic framework has been designed to help inform companies at all stages of the market research process, and to create a consensus within the industry as to which respondent characteristics and attributes can influence the level of incentive payment reasonably required.

2. Fieldwork commissioning checklist

In some cases, pressure on FMVs can be reduced through more transparent communication between the commissioning party and the agency organising the fieldwork at the point when quotations are requested.

This checklist provides a prompt to bring to light factors that might impact the recruitment process, or recommended incentive payments, so that agencies organising fieldwork can build these into their quotes from the outset.

3. Support for commissioning executives

As noted above, the market research executives commissioning market research are not normally responsible for setting FMVs within their organisation, and are required to work with the rates that have been set internally. However, in exceptional circumstances and where appropriate, these executives are sometimes able to make an internal case for augmented FMV levels.

It is important for commissioning executives to understand the challenges faced by Market Research agencies and Fieldwork agencies and the impact this can have on the outcomes of market research projects. This final section sets out some arguments that can be used by commissioning executives to support their internal case for higher FMVs.





1) Respondent Characteristic Framework

Why use this framework?

Irrespective of the research being conducted, certain types of respondent require higher levels of incentive payment than others in recognition of various attributes, characteristics or personal circumstances. This could be as a result of an economic reality, or ethical principle.

In order for the industry to produce good quality, meaningful and unbiased insights, it is important that we recognise these characteristics and encourage these respondents to engage with market research through appropriate remuneration.

This framework seeks to establish a consensus within the industry regarding these characteristics, to inform research and to help ensure commissioning companies are able to pay appropriate incentives to encourage voluntary participation without opening themselves up to accusation of overpayment / inappropriate payments.

Who is it for, and when should it be used?

All BHBIA member companies engaged in pharmaceutical market research should make themselves familiar with this framework.

It should be used as a basis to discuss appropriate FMVs for relevant respondent types <u>at the</u> beginning of the market research commissioning process.

Characteristic Framework

The following respondent characteristics may reasonably impact the level of incentive payment it is appropriate to pay as remuneration for their participating in market research.

HCP characteristics

Characteristic	Rationale
High demand specialism	Certain disease areas experience far higher demand for research participants than others, such as Oncology, which impacts the level of incentive payment required to attract HCPs to take part
Grade, experience or expertise of HCP	Incentives should acknowledge the relative value provided by more senior, experienced or expert specialists, and the competing pressures on the time of these respondents
Working Environment	Some specialities (e.g. surgeons) are less office-based and taking part in Market Research, and in particular in long surveys, can be less convenient for these HCPs

Patient characteristics

Characteristic	Rationale
Severity of condition	Patients with limiting conditions and limited life expectancy will value their time more greatly than those with milder illness
Stage of condition	As above, patients in later stages of a researched condition are likely to value their time more greatly, or may find partaking in research requires more effort and time
Age of respondent	Young and elderly respondents may require additional time to complete their engagement in the research, and additional travel time
Level of independence	Respondents may require the help of others to take part in the research, particularly if travel to a central location is required





As a footnote, the focus and subject of research being conducted may also influence the extent to which some of these attributes affects the incentive payment required.

Motivation to take part = altruism + fair reward

Where the respondent can see a clear and direct benefit of the research to patients or the health and social care system, a level of altruism is likely to contribute to their motivation (which we can recognise, but must be careful not to exploit).

Where the research subject is more commercial in nature (such as branding research) the altruism element of the motivation will be lower.





2) Fieldwork Commissioning Checklist

Why use this checklist?

The fieldwork agency sector of our industry has reported significant challenges introduced into the recruitment process as a result of requirements coming to light after initial quotes have been provided.

In some cases, these requirements have an impact on the fieldwork agency's ability to recruit respondents with the efficiency expected, and result in pressure to increase incentive levels to compensate (as raising the level of incentive offered, increases the recruitment rate in most cases). This in turn creates issues for the pharma client, who often have limited room for manoeuvre due to internal and regulatory constraints.

Who is it for, and when should it be used?

By completing this checklist and discussing it with the fieldwork agency <u>before</u> they are asked to quote for the project, agencies and pharma companies commissioning the fieldwork can reduce the potential for pressure on FMVs once the fieldwork is underway.

Fieldwork agencies will use this information to assess potential challenges they may encounter during the recruitment stage, and if additional resource or time will be required to fulfil the sample, this can be factored into the recommendations, fees and timelines they quote for the job from the outset.

The more transparency there is at the start of the process, the better.

This checklist highlights common factors that may affect the recruitment rate agencies experience (positively and negatively). If your project has other attributes not mentioned, but which you expect to be relevant in this context, you are encouraged to make a note of this on the checklist too.

Checklist

Factors regarding the respondent universe

Here are some of the universe-based factors that could impact the ease of recruitment, the fieldwork agency should be informed of these from the outset:

- > The prevalence rate of the disease is low
- The universe of this type of respondent is relatively small and or the target audience is a sub-specialty within a group of HCPs (e.g. consultants with 15 years' experience)
- Patient subsets, such as those recently diagnosed, or on a particular treatment etc.
- Screen-outs, such as not having taken part in market research in the past X months
- A sample to be drawn from a client supplied list which necessarily limits the pool of potential respondents
- A quota or quotas will be applied (e.g. treats at least #, has prescribed drug X in the past three months etc.), and in particular, the requirement for interlocking quotas should be flagged (e.g. treats at least # and 50% use drug X and 50% don't, of the 50% that don't use the drug half of these should be lapsed users or experience and rank/seniority)
- Location specifics, such as catchment areas or attributes of the location such as "city based"
- Specific attributes are required of their organisation, such as hospital type, Specialist Treatment Centres, or Centres of Excellence
- Requirement for variety of location types to be included (for instance could be an issue finding a rare disease in a rural area etc.), or limits on numbers of respondents from individual institutions





Factors regarding the project

Sometime attributes of the project itself can have an impact on the recruitment of respondents. Inform the agency of any of the following:

- Any specific requirements with regard to the screening questionnaire. For instance, is it longer than the BHBIA's standard template screener? (See the BHBIA's 'Screener design and best practice' guide for further information: https://www.bhbia.org.uk/resources/screener-design-and-best-practice)
- Time restrictions on interviews, including available time slots, or necessity for interviews to be at a particular time of day (e.g. so colleagues in a different country can watch, or if it is only possible to do interviews outside or during work hours)
- Complexities in the project or methodology to be used. For instance, the need to access material online, or to download and use a particular app as part of the project
- Time critical factors, such as a need for fieldwork to be completed within a particular time frame (e.g., during August) or short time frame
- Requirement for follow ups or multi-stage research
- > Requirement to live-stream, video record or audio record the interview
- Adverse event reporting requirements over and above those required by the ABPI and BHBIA guidance
- A sample to be drawn from a client supplied list which necessarily limits the pool of potential respondents
- Restrictions on payment methods, in particular the mandating of bank transfer as the only means of payment².

Factors that might impact the FMV directly

Some factors may influence the incentives required to ensure the respondent is fairly compensated. The fieldwork agency should be made aware of the following so they can suggest a suitable rate:

- ➤ The length of the interview, particularly if a short or long interview is anticipated. It is important to be aware that both incentives and FMVs cannot be correlated directly with interview length³
- > Requirement to do pre or post interview research or work, e.g. PRFs, technical checks etc.
- > Requirement for interview to be face to face, or at a central location, requiring travel time
- Use of more complex techniques during the interview, e.g. creative tasks, conjoint methodologies, requiring more effort and input than more standard approaches
- Requirement to collect data longitudinally, e.g. daily tasks for two weeks

² Some physicians will not provide their bank details for incentive payments due to concerns about online financial fraud. Fieldwork agencies are finding that a sizable minority of HCPs are refusing to participate in market research if their only payment option is via bank transfer. In this situation, alternative traceable and auditable means of payment should be used

³ e.g. a 10 minute interview will command a higher incentive than 16.6% of the remuneration for a 60 minutes interview, as there are perceived 'entry costs' for HCPs in particular and the recruitment process is a fixed cost and generally of very similar length irrespective of interview duration. So, if £75 is offered for 1 hour and this is pro-rated and an offer made of £12.50 for a 10 minute interview, this is extremely unlikely to meet a physician's minimum remuneration threshold, especially when they must declare and pay the tax on this.





3) Support for commissioning executives

Why use this section?

Although FMVs are typically set high up in organisations and apply more widely than market research, in many organisations it is possible to put forward the occasional case for increases in FMVs where there is a sound, ethical rationale for doing so.

Who is it for, and when should it be used?

This section is designed to support market research executives within commissioning companies to make internal arguments for increased incentive payments when considered reasonable and proportionate to do so.

Pharma executives commissioning research will find the earlier parts of this document useful when communicating to colleagues internally on the subject of appropriate incentivisation of respondents. For completeness, some additional arguments which have not appeared earlier in this document have been set out below.

Reasonable considerations for augmented incentive payments

Over researched cohorts

Certain respondent types are in particularly strong demand for market research, and have the opportunity to take part in many market research projects, often experiencing a range of incentive levels. This being the case, they are very aware of their market research value. For example, the expectations of oncologists who treat specific cancers and/or have strong experience and expertise regarding fair remuneration for participating in market research are very different to those of a Registrar.

Wider market value of the respondent

Some physician types have a range of 'consultancy' options, some of which may be more lucrative than the FMV range or rate that market research must adhere to e.g. dermatologists may be involved in private skincare/aesthetic services, the higher rate for which sets expectations for any alternative 'consultancy' such as market research.

How engaging is the market research

Respondents are more willing to engage in market research when the focus is upon topics they find interesting or when they can attach wider benefits to the work i.e. they can see the benefits for treatment or patients. Where the project's focus is commercial or less engaging in nature, this may not at first appear to be a reason to pay a respondent more, but the economic reality is that HCPs are less likely to take part in such market research projects without additional incentives. (see the altruism note on page 4)

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