

WHITE PAPER

PathfindEHR and the New Clinical Intelligence Model for Pharmaceutical Growth

Turning EHR-connected clinical intelligence into coordinated, measurable action across the full product lifecycle — for Medical Affairs, HEOR, Government Affairs, Thought Leader Liaisons, Commercial, and Marketing.

Executive Summary

Pharmaceutical organizations are under pressure to improve launch precision, accelerate clinician engagement, generate stronger real-world evidence, and sustain post-launch growth with greater speed and accountability than legacy commercial models were built to support. In that environment, the differentiator is no longer access to more data alone, but the ability to turn clinical intelligence into coordinated action across Medical Affairs, HEOR, Government Affairs, TLLs, Commercial, and Marketing.¹

PathfindEHR is positioned as a cross functional clinical intelligence platform that helps pharmaceutical teams operate with a shared view of patient opportunity, clinician behavior, care gaps, and evidence priorities across the full product lifecycle. This model aligns with the enterprise AI success patterns described in The Six Percent Report, which found that the most successful organizations integrate AI into core business functions, move more than half of pilots into production, and realize measurable business outcomes quickly.²

The opportunity is especially relevant in complex, specialty, and rare disease markets, where patient journeys are fragmented, diagnosed-but-untreated populations are often substantial, and clinician education needs vary meaningfully by specialty, site of care, and geography. For these markets, a workflow level intelligence layer can improve not only patient identification, but also launch planning, account targeting, evidence generation, health equity strategy, and revenue performance.

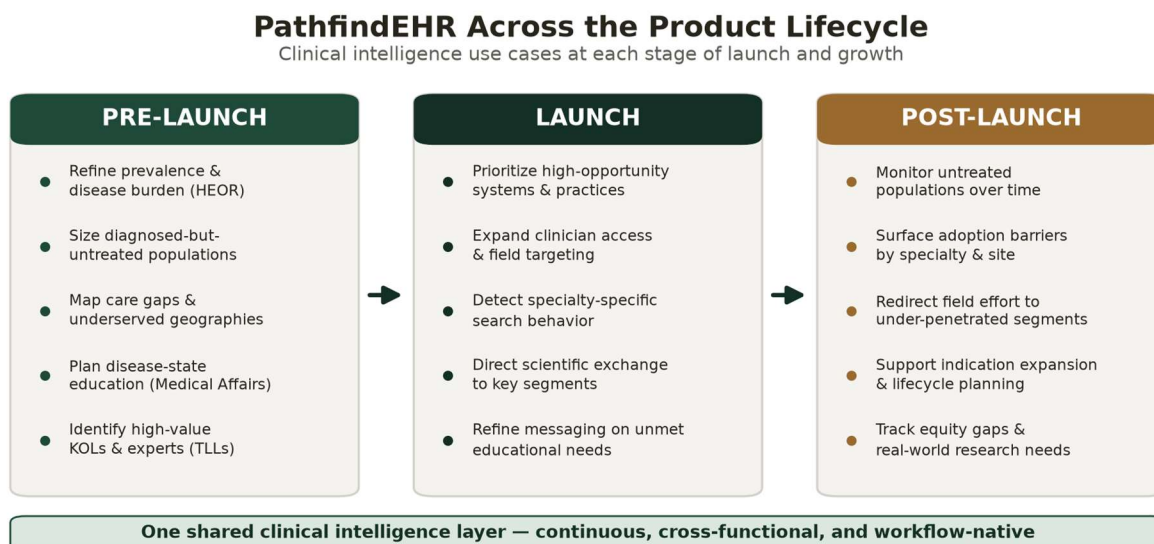


Figure 1. PathfindEHR use cases mapped across the pre-launch, launch, and post-launch stages of the product lifecycle.

Why Pharma Needs a New Intelligence Layer

The traditional pharmaceutical operating model was not designed for a market in which clinical, commercial, and evidence generation decisions must be updated continuously. Pre-launch teams often rely on static epidemiology, retrospective claims views, and generalized segmentation models, while post-launch teams

¹Winsome Marketing analysis of the Reuters Insights / Scale AI Six Percent Report, "6% of Enterprises Are Making AI Work: Here's How" (June 2026). <https://winsomemarketing.com/ai-in-marketing/6-of-enterprises-are-making-ai-work-heres-how>

²Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

frequently inherit lagging indicators that explain what happened but not why it happened or where the next opportunity sits.³

This creates predictable execution gaps. Medical Affairs may identify scientific barriers that do not reach field teams quickly enough. HEOR may refine disease burden assumptions without those insights informing account prioritization. Government Affairs may pursue equity programs without a detailed operating picture of where diagnosed-but-untreated populations are concentrated. Marketing may see channel performance without a direct view into specialty specific unmet educational needs. The result is not simply inefficiency; it is missed adoption, slower evidence development, and incomplete access to addressable patients.

Medical Affairs is increasingly expected to serve as the connective tissue between development, clinical practice, external experts, and commercial strategy. At the same time, product launch excellence increasingly depends on tight orchestration before and after launch, with pre-commercial planning, stakeholder education, and evidence strategy all linked to in market execution. That raises the bar for any platform supporting launch and lifecycle performance: it must support coordinated action across functions, not just analytics for one team.

The “Six Percent” Standard

The Reuters Insights and Scale AI study surveyed nearly 500 senior AI decision makers and identified a small cohort of organizations, 6.5% of the sample, that met three criteria at once: AI was thoroughly integrated across most business functions, more than half of AI pilots had reached full production, and the organizations were significantly ahead of plan in their AI programs.⁴ The broader lesson for pharmaceutical leaders is that enterprise advantage comes from operationalizing intelligence, not experimenting with isolated tools.

Several of the study’s findings are particularly relevant to life sciences organizations evaluating clinical intelligence platforms. Two-thirds of the “Six Percent” reported measurable business outcomes within six months of pilot start, compared with fewer than one in three in the broader successful deployment group.⁵ More than four in ten of the Six Percent’s successful builds were hybrid models combining internal and external capabilities, while off-the-shelf deployments were uncommon among successful outcomes and more common among stalled efforts.⁶ The Six Percent also showed substantially stronger confidence in their data foundations, with 81% reporting they were extremely confident their data layer could support AI.⁷

The report also found that successful organizations frontload the hard work. Executive sponsorship, data preparation, training, and change management are established before scale, rather than added after pilots stall.⁸ For pharmaceutical executives, that is a useful filter: any platform intended to support launch and post-launch performance should be evaluated by whether it can become part of how the business operates, deliver

³Winsome Marketing analysis of the Reuters Insights / Scale AI Six Percent Report, "6% of Enterprises Are Making AI Work: Here's How" (June 2026). <https://winsomemarketing.com/ai-in-marketing/6-of-enterprises-are-making-ai-work-heres-how>

⁴Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

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⁶Reuters Insights & Scale AI, "The Six Percent Report: Inside the Companies Making Enterprise AI Work." <https://insights.reutersevents.com/scale-ai>

⁷Winsome Marketing analysis of the Reuters Insights / Scale AI Six Percent Report, "6% of Enterprises Are Making AI Work: Here's How" (June 2026). <https://winsomemarketing.com/ai-in-marketing/6-of-enterprises-are-making-ai-work-heres-how>

⁸Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

measurable value quickly, integrate into existing workflows, and function as a strategic partner capability rather than a disconnected point solution.

How PathfindEHR Aligns With the Six Percent Playbook

The four behaviors that separate enterprise AI leaders — mapped to PathfindEHR

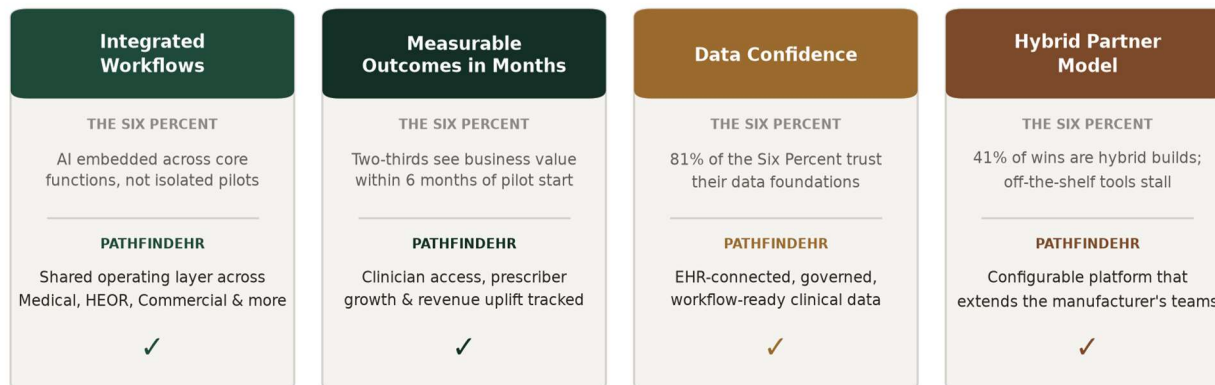


Figure 2. How PathfindEHR maps to the four behaviors that distinguish the Six Percent: integrated workflows, measurable outcomes in months, data confidence, and a hybrid partner model.

What PathfindEHR Is

PathfindEHR can be framed as an EHR connected clinical intelligence platform that translates care pattern data into cross functional insight and action. Rather than serving only as a patient finding engine, it is better understood as a strategic operating layer that helps pharmaceutical teams identify untreated opportunity, understand clinician behavior, refine prevalence and burden estimates, prioritize expert engagement, and coordinate field execution across the brand lifecycle.

This matters because pharmaceutical organizations do not need another passive reporting environment. They need a system that helps teams move from observation to action. In that sense, PathfindEHR maps well to the success logic of the Six Percent: strong outcomes are associated with tools that are embedded in business processes, supported by high quality data, compatible with existing workflows, and deployed through strategic hybrid models rather than generic, lightly configured software.⁹

For executive audiences, the platform story should therefore be told in business terms. The value is not merely that PathfindEHR surfaces insight from EHR connected environments. The value is that it creates a common operating picture for multiple functions that are otherwise forced to work from disconnected proxies, lagging data, and function specific assumptions.

⁹Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

Pre-Launch Value Creation

Pre-launch is where many brands lock in structural advantages or disadvantages that become visible only after launch. In this phase, commercial, medical, access, and evidence teams need a more accurate picture of disease burden, patient flow, clinician concentration, referral patterns, and untreated populations than traditional pre-launch models typically provide.

For HEOR, PathfindEHR can support more precise prevalence refinement and a clearer understanding of diagnosed-but-untreated populations. That helps sharpen market sizing, budget impact assumptions, and value narratives, especially in conditions where claims data alone may not capture diagnostic complexity or care fragmentation. For Government Affairs, the same intelligence layer can help identify underserved geographies and care gaps that support health equity strategies tied to real service deficits rather than broad assumptions.

For Medical Affairs, pre-launch value is equally important. Better visibility into care pathways and clinician behavior can improve disease state education planning, scientific exchange prioritization, and the design of real-world research initiatives. This aligns with the broader industry view that Medical Affairs plays a central role in linking science, external stakeholders, and launch readiness. For TLLs, PathfindEHR can also improve identification of high value KOLs and external experts by grounding prioritization in observable care activity and influence patterns rather than relying only on publication history or reputation-based heuristics.

The strategic benefit of this pre-launch model is that it shifts teams from abstract targeting to evidence-based preparation. A brand team that understands where undertreatment is concentrated, which specialties are most active, and where educational barriers appear before launch enters the market with a stronger operating hypothesis and a more credible resource allocation plan.

Launch Performance Acceleration

The first months after launch often determine whether a brand establishes durable momentum or enters a reactive cycle of course correction. During this period, pharmaceutical executives need fast, clinically grounded visibility into where awareness exists, where prescribing is lagging, which clinicians are reachable, and what educational or access barriers are suppressing uptake.

PathfindEHR can support launch execution by helping Commercial teams expand clinician access, prioritize higher opportunity systems and practices, and focus effort where diagnosed-but-untreated opportunity is visible. It can also help Marketing understand specialty specific behavior, search patterns, and unmet educational needs, which is critical for message refinement when one-size-fits-all launch communications underperform. Medical Affairs can use the same operating picture to direct scientific exchange toward the questions and segments most likely to influence adoption.

This is the kind of cross functional deployment logic that mirrors the Six Percent model. The report emphasizes that successful organizations do not measure AI by adoption rhetoric alone; they measure it through business outcomes such as revenue, quality, risk management, and retention.¹⁰ For pharmaceutical launch teams, the

¹⁰Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

equivalent is not whether dashboards were viewed, but whether clinician reach improved, whether new prescriber adoption accelerated, and whether patient opportunity translated into earlier revenue capture.

Post-Launch Growth and Lifecycle Optimization

Post-launch success depends on what happens after the initial field push. Brands must identify where early adoption is stalling, where untreated patients remain concentrated, where clinical uncertainty is slowing expansion, and where additional evidence or education can unlock broader use. In many organizations, that view is fragmented across separate teams and delayed reporting cycles.

PathfindEHR provides a way to connect these signals. Medical Affairs can identify real-world research opportunities and unresolved clinical questions emerging from practice. HEOR can use the same environment to refine burden and access narratives. Commercial teams can redirect field resources toward high opportunity segments that remain underpenetrated. Marketing can update campaign design based on observed clinician behavior rather than generic segment assumptions. Government Affairs can continue to track inequities in diagnosis and access, ensuring that health equity strategy remains tied to measurable care gaps rather than aspirational language alone.

This is where the enterprise framing becomes especially valuable. The Six Percent report argues that the highest performing organizations treat AI as part of how the business runs, not as a discrete technology experiment.¹¹ For pharmaceutical leaders, PathfindEHR should be positioned in precisely that way: as an operating capability that supports lifecycle management, indication expansion planning, and sustained growth by making clinical intelligence continuously usable across functions.

Cross-Functional Operating Value

A strong case for pharmaceutical executives should make the cross functional model explicit. The value of PathfindEHR is amplified when multiple teams draw on the same clinical intelligence layer and act on it in coordinated ways.

¹¹Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

Cross-Functional Value from a Shared Intelligence Layer

FUNCTION	PATHFINDEHR OUTPUT	STRATEGIC RESULT
Medical Affairs	Care-gap maps, RWE opportunities, stakeholder segments	Stronger scientific engagement & evidence strategy
Government Affairs	Underserved-population & care-inequity analysis	More credible health-equity & policy programs
HEOR	Refined prevalence & diagnosed-but-untreated burden	Stronger value narratives & evidence packages
TLLs	KOL / expert mapping by care activity & influence	Higher-value expert engagement planning
Commercial	High-opportunity clinicians, systems & geographies	Faster adoption & stronger prescriber growth
Marketing	Specialty search patterns & unmet educational needs	Sharper messaging & more efficient campaigns

Figure 3. Cross-functional value: each team's PathfindEHR output and the strategic result it enables from one shared intelligence layer.

Function	How PathfindEHR Supports the Team	Strategic Result
Medical Affairs	Identifies educational gaps, real-world research opportunities, and clinically relevant stakeholder segments	Stronger scientific engagement and more targeted evidence strategy
Government Affairs	Surfaces underserved populations and care inequities tied to real-world service gaps	More credible health equity programs and policy engagement
HEOR	Refines prevalence, diagnosed-but-untreated burden, and access-related opportunity	Stronger value narratives and evidence packages
TLLs	Identifies high-value KOLs and external experts based on care activity and influence patterns	Better expert mapping and higher-value engagement planning
Commercial	Prioritizes high-opportunity clinicians, systems, and geographies for field action	Faster adoption, better access, and stronger prescriber growth
Marketing	Reveals specialty-specific behavior and unmet educational needs	Sharper messaging, more relevant campaigns, and improved channel efficiency

This integrated model is increasingly important because launch and post-launch performance now depend on coordination, not just functional excellence in isolation. When each team sees a different market, organizations waste time reconciling competing assumptions. When teams work from a common clinical intelligence layer, execution becomes faster and more coherent.

Demonstrated Impact and Business Case

Demonstrated Impact Across Implementations

Sponsor-provided implementation results — internal figures pending independent validation

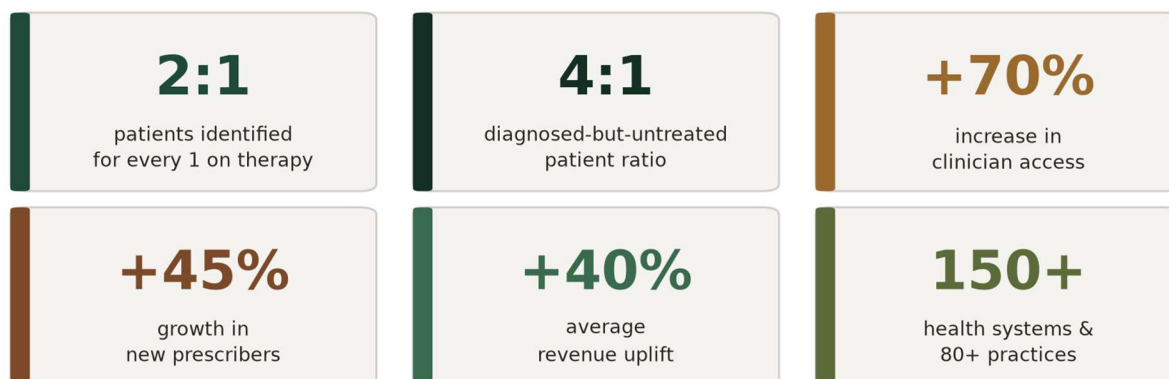


Figure 4. Headline outcomes observed across PathfindEHR implementations. Sponsor provided figures pending independent external validation.

Across PathfindEHR implementations, the reported operating impact is substantial. Sponsor-provided implementation results indicate approximately two patients identified for every one patient currently on therapy, a four-to-one ratio of diagnosed but untreated patients, a 70% increase in clinician access, 45% growth in new prescribers, and an average revenue uplift of 40%. The same data indicates experience across more than 150 health systems and more than 80 independent practices. These sponsor-provided figures should be treated as internal implementation results pending independent external validation.

Even with that caveat, the structure of these outcomes matters. They align with the type of scorecard the Six Percent report argues is most relevant for serious enterprise deployments: measurable outcomes tied to quality, growth, operational performance, and business value rather than vague adoption metrics.¹² For pharmaceutical executives, the implication is straightforward. A platform that improves clinician reach, expands prescriber adoption, identifies untreated opportunity, and contributes to revenue performance is operating on the right side of the value equation.

The commercial logic is especially important in markets with high diagnosed-but-untreated burdens. If a brand can identify materially more patient opportunity than treatment volumes currently suggest, then the constraint on growth may be less about demand creation in the abstract and more about precision in education, access support, and account prioritization. That shifts resource allocation from broad coverage to smarter clinical-commercial coordination.

Why the Model Works

The business case for PathfindEHR rests on more than data acquisition. It rests on the operational advantages created when one platform supports multiple decisions across the lifecycle. First, it reduces the lag between signal detection and action. Second, it improves the quality of targeting by grounding choices in clinical context

¹²Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

rather than market averages alone. Third, it enables different functions to reinforce one another instead of working from parallel but disconnected analyses.

This is consistent with the Six Percent findings on hybrid deployment, data readiness, and speed to value. Successful organizations move faster because they have already aligned sponsorship, data foundations, workflow compatibility, and implementation discipline. They also prefer strategic partner relationships and hybrid models that combine internal capabilities with external platforms rather than relying on inflexible off-the-shelf software.¹³ PathfindEHR fits that model when positioned not as a standalone vendor tool, but as a configurable strategic capability that extends the manufacturer's own teams.

For pharmaceutical executives, that distinction is not semantic. It directly affects adoption. Platforms that require large behavioral shifts without creating shared value across functions tend to stay confined to pilots or departmental use. Platforms that fit into the operating rhythms of Medical, HEOR, Commercial, and access related functions are more likely to become part of the enterprise model and therefore more likely to generate durable returns.

Implementation Considerations

The strongest implementation path is likely phased rather than all-at-once. A manufacturer can begin with one priority brand, one disease area, or one high-value product lifecycle question, such as diagnosed-but-untreated burden, launch account prioritization, or health equity gap identification. From there, the program can expand by adding functions and use cases against a shared KPI structure.

A practical rollout model would include executive sponsorship, cross functional governance, clear rules for compliant data use, and agreed metrics for impact. These factors track closely with the Six Percent report's observation that successful organizations frontload leadership time, data preparation, training, and change management before expecting returns.¹⁴ In life sciences, that discipline is especially important because insight without governance will not scale, and governance without measurable business value will not sustain investment.

Representative KPIs for a PathfindEHR Program

- Diagnosed-but-untreated ratio
- New prescriber growth
- Clinician access expansion
- Time to first adoption in priority accounts
- Evidence generation throughput
- Equity gap closure in underserved populations
- Revenue uplift in targeted segments

Framing the implementation around these metrics helps keep the platform tied to business and patient value.

¹³Reuters Insights & Scale AI, "The Six Percent Report: Inside the Companies Making Enterprise AI Work." <https://insights.reutersevents.com/scale-ai>

¹⁴Scale AI in partnership with Reuters Insights, "The Six Percent Report" (2026). <https://scale.com/six-percent>

Strategic Implications for Pharmaceutical Leaders

The broader implication is that pharmaceutical companies are entering a period where clinical intelligence quality will increasingly shape commercial performance. Health equity expectations are expanding, Medical Affairs is being asked to play a more integrated strategic role, and launch models are becoming more dependent on real-world visibility across providers, settings, and patient pathways. In this environment, brands that still rely on disconnected data assets and siloed execution will struggle to match the speed and precision of organizations with integrated intelligence models.

The Six Percent report offers a useful analog. The organizations creating the most value from enterprise AI are not those that merely bought tools; they are those that embedded them into the operating model, aligned them to measurable outcomes, and treated data and vendor choice as strategic decisions.¹⁵ Pharmaceutical leaders should apply the same standard here. The question is not whether a platform can generate insights. The question is whether it can improve lifecycle performance across the teams responsible for education, evidence, access, engagement, and growth.

Conclusion

PathfindEHR represents a compelling model for pharmaceutical organizations seeking stronger pre-launch precision and post-launch performance. By turning EHR connected clinical intelligence into coordinated action, it can support Medical Affairs, Government Affairs, HEOR, TLLs, Commercial, and Marketing from a shared operating picture rather than disconnected proxies and lagging reports.

That model is consistent with the performance logic identified in The Six Percent Report: the strongest enterprise outcomes come from integrated workflows, measurable business value, strong data foundations, and strategic deployment discipline rather than isolated pilots or generic software.¹⁶ For pharmaceutical executives, the core opportunity is clear. The next competitive advantage is not simply access to more information, but the ability to operationalize clinical intelligence across the full product lifecycle.

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