True-Lift Modeling: Mining for the Most Truly Responsive Customers and Prospects

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Fidelity Investments

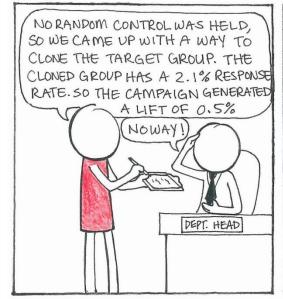
¹Also with Bentley University

















Stop spending direct marketing dollars on customers who would purchase anyway!

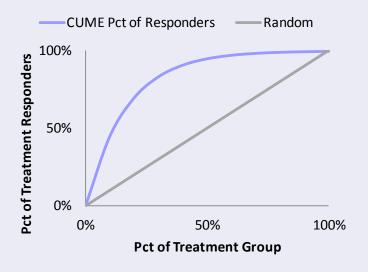
- True-lift modeling can identify:
 - which customers will purchase without receiving a marketing contact
 - which customers need a direct marketing nudge to make a purchase
 - which customers have a negative reaction to marketing (and purchase less if contacted)
- This discussion will describe:
 - the basic requirements needed to succeed with true-lift modeling
 - scenarios where this modeling method is most applicable
 - the pros and cons of various approaches to true-lift modeling

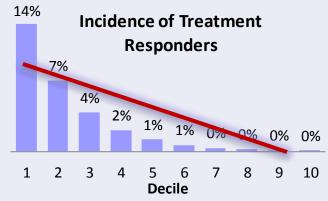


Outline

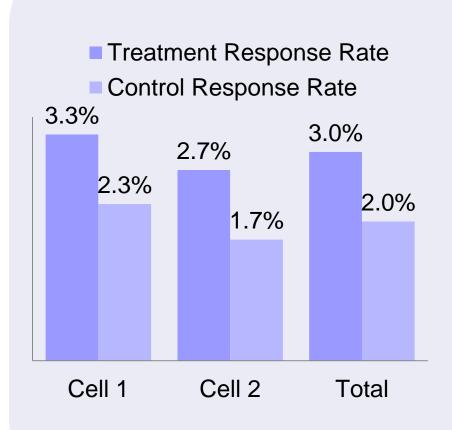
Why do we need true-lift modeling? 10min
What are the methods of true-lift modeling? 10min
What is the context where true-lift modeling is most necessary & useful? 10min
Questions 10min

What's wrong with this picture?



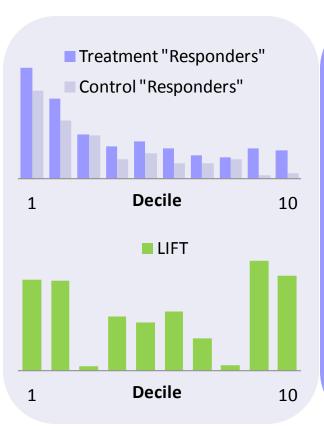




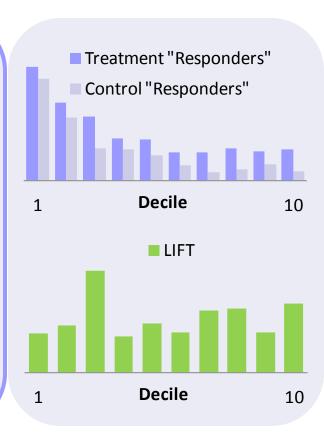


A successful marketing campaign









Why do we need true-lift modeling?

Look-alike model = find people who will take Action A

=P(A)

Standard response model
= find people who will take
Action A after receiving a
treatment
=P(A | Treatment)

True-lift model = find people who will take Action A <u>only</u> after receiving a treatment

=P(A | Treatment)P(A | no Treatment)

- Standard response models often behave more like Lookalike models than like True-lift models
- Why spend marketing \$\$\$ on people who would do Action A anyway?

Why do we need true-lift modeling?

Look-alike model = find people who will take Action A

- When is a look-alike model good enough?
 - Responders can only take
 Action A if they receive one unique marketing contact
 - Single channel
 - > Single contact
 - No other way to take Action A

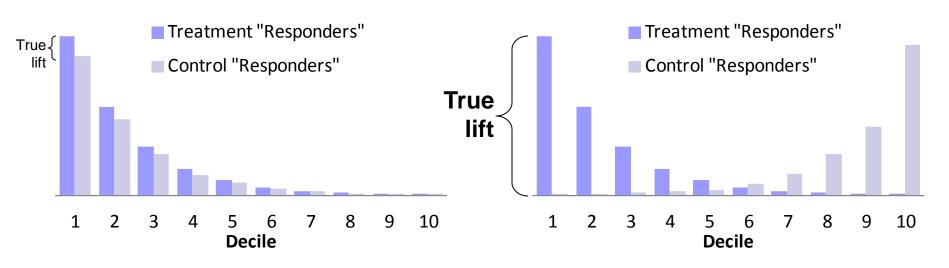
True-lift model = find people who will take Action A *only* after receiving a treatment

- When is a true-lift model needed?
 - Responders have many opportunities to take
 Action A
 - Multiple channels
 - Multiple contacts



The True-Lift model objective

 Maximize the Treatment responders while minimizing the control "responders"



A standard response model

A True-Lift response model



True-Lift model solutions

- A. Difference of two models: Treatment Control
- B. Two sequential models: Treatment Actual Control Prediction
- c. Binned & Averaged dependent variable

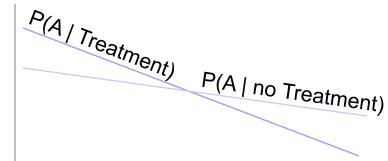


Solution A1: Difference of two models: Treatment - Control

- Model 1 predicts P(A | Treatment)
 - □ Dependent variable = Action A
 - ☐ Model Population = Treatment Group
- Model 2 predicts P(A | no Treatment)
 - □ Dependent variable = Action A
 - ☐ Model Population = Control Group
- Final prediction of lift =

Model 1 Score – Model 2 Score

- Pros: simple concept, familiar execution (x2)
- Cons: indirectly models true-lift, the difference may be only noise, 2x the work, scales may not compare, 2x the error, variable reduction done on indirect dependent vars



Solution A2: Single combined model using Treatment interactions P(A / Treatment)

- Model population = Treatment & Control together
- Dependent variable = Action A
- Independent variables are attributes x,y,z:
- Conceptually:

```
P(Action A) = P(A \mid not Treated)
                                            + P(A | only if Treated )
               = {some coefficients} * {x,y,z}
                                            + 0/1 treatment flag * {some coefficients } * {x,y,z}
```

During model development, the interaction flag is 0 for control records and 1 for treatment records

Lift

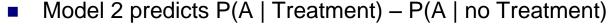
- Final prediction of lift = difference of two scores
 - = Prob(response if Treated) Prob(response if not Treated)
 - = score with interaction flag set to 1 score with interaction flag set to 0
- Pros: combined model minimizes compounded errors
- Cons: indirectly models true-lift; large number of independent terms; collinearity of terms; reduction needed; adding two model scores may compound errors

P(A | no Treatment)

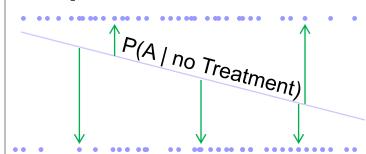


Solution B: Two sequential models: Treatment actual – Control prediction

- Model 1 predicts P(A | no Treatment)
 - □ Dependent variable = Action A
 - ☐ Model Population = Control Group

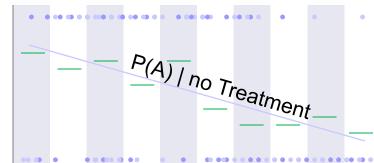


- □ Dependent variable = Action A Model 1 Score
- □ Model Population = Treatment Group
- Final prediction of lift = Model 2 Score
- Pros: more directly models true-lift; identifies variables that are directly correlated with true-lift (some of which are drivers of lift)
- Cons: the Model 2 dependent variable contains Model 1 errors; 2x the work,
 Model 1 scores and Action A should (but might not) share the same scale



Solution C1: Binned & averaged dependent variable

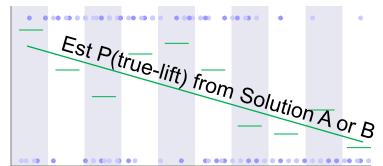
- Model 1 predicts P(A | no Treatment)
 - □ Dependent variable = Action A
 - ☐ Model Population = Control Group
- Create N bins for Treatment & Control population together, ranked by Model 1 score (control "response")



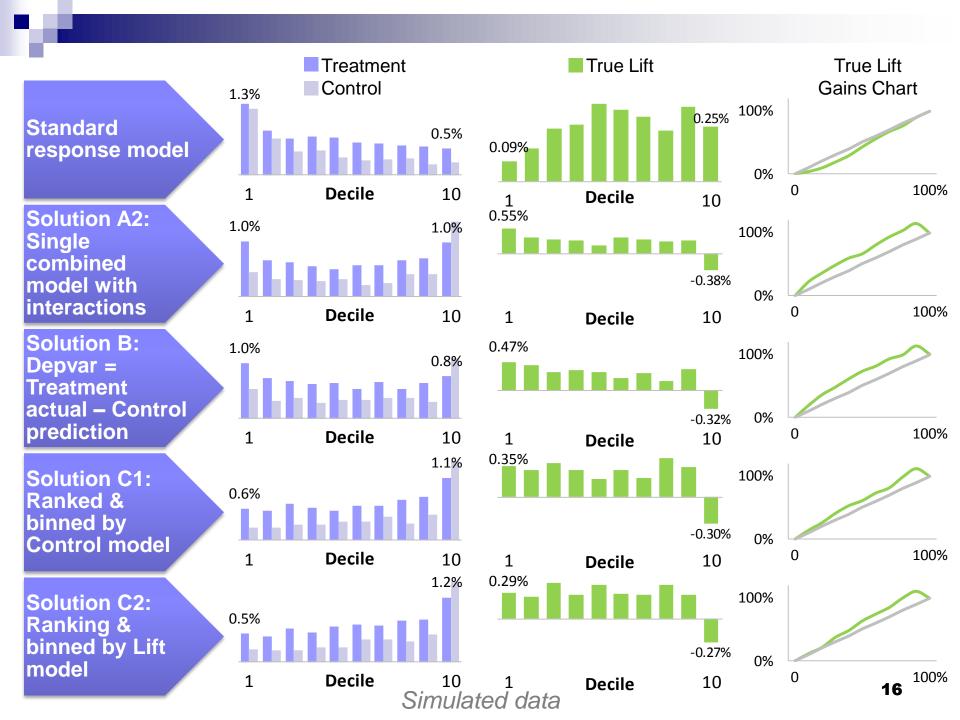
- Calculate dependent variable value for each BIN:
 - Treatment response rate Control response rate
- [Could stop here, using the bin average lift as the predicted lift, or continue with]:
- Model 2 predicts actual average lift of each bin
 - Dependent variable = Average lift within each bin
 - □ Model Population = Treatment Group
- Final prediction of lift = Model 2 Score
- Pros: directly models true-lift; identifies variables that are directly correlated with true-lift (some of which are drivers of true-lift)
- Cons: 2X the work; the approach requires variation in average lift across bins (which might not exist); control response needs to be correlated to true-lift response

Solution C2: Solution A or B + binned & averaged dependent variable

- Complete Solution A or B first to rank-order observations by estimated lift
- Use Solution A/B model score to rank and bin the observations: create N bins for Treatment & Control population together, ranked by Solution A/B score



- Calculate dependent variable value for each BIN:
 - Treatment response rate Control response rate
- [Could stop here, using the bin average lift as the predicted lift, or continue with]:
- Model 3 predicts actual average lift of each bin
 - □ Dependent variable = Average lift within each bin
 - □ Model Population = Treatment Group
- Final prediction of lift = Model 3 Score
- Pros: directly models true-lift; this approach is more likely to maximize the variation in average lift across bins; identifies variables that are directly correlated with "lift" (some of which are drivers of lift)
- Cons: 3X the work





Other solutions, variations & applications

- Decision trees
- Clustering / K-nearest neighbor
- Bootstrapping
- Optimization

- Personalized medicine
- Other marketing situations (how to separate very similar groups who act differently)



Ideal conditions for true-lift modeling

- A randomized control group is withheld!
- Treatment does not cause all "responses"
- "Response" is not correlated to "lift" (i.e., response model is not good enough)
- Lift-to-noise ratio is large enough
- If overall lift is near 0, then you need pockets of both negative lift and positive lift
- Repeated campaigns, or at least test campaign precedes rollout



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Glossary

- "Response" = taking the desired action (Action A); might have done Action A whether treated or not
- True-lift = taking the desired action (Action A) only in response to the Treatment; would not have done Action A if not treated (aka uplift, net lift, incremental lift)