Physician Relations CERT Model -- Needs Assessment Profile

Understand the Physician, Their Environment and Their Practice

Review of CERT Model

A staple of CHG's customer sales training seminars, the CERT model is a needs analysis tool to help salespeople manage the on-going dialogue and customer buy-in through dialogue. By using CERT, the salesperson uses a step-by-step process to gain a deeper understanding of the impact a customer's motives and conditions make on his purchasing decision. Think of it as getting to the heart of the matter – stripping away the outer layers to find the most valuable customer information which, in turn, leads you to the right solution for your customer.

C is for Confirmation

The first part of your process involves assessing the current customer situation and gathering and substantiating information. Use this step to:

- ❑ Gather history or background
- ❑ Assess what information you currently have
- ❑ Determine what other information is needed
- ❑ Confirm opportunities as needs
- ❑ Assure that data is accurate
- ❑ Reveal discrepancies

Know the three times in the sales call when "C" questions should be used:

1. During discovery of customer needs and opportunities and the credibility-building phase.
2. Immediately before presenting any new product or service data to the practice.
3. When building the foundation for the close.

E is for Expansion

This phase assesses where the customer would like to be. Her responses give you details about her desired solution and expectations, including the desired or required results. This step is a valuable tool for evaluating and positioning the customer's:

- ❑ Desired advantage or gain
- ❑ True needs
- ❑ Desired value or satisfaction
- ❑ Desired situation and status (for example, an easy-to-administrator program)
- ❑ Perception of you, the salesperson, in the measured outcome (will the bar stay the same, or will it move to a new level?)

When should you use "E" questions?

1. When determining which product offerings are of most interest to your customer. It gives him a chance to sort through his options.
2. When learning what the key issues are, then prioritizing value and opportunity vs. need.
3. Before introducing benefits that match your customer's needs.

R is for Research

The third step of the CERT model focuses on your customer's buying motives, roles, politics and dollars. Here, you can gain information on how the buying decision is made and by whom. These questions also serve to broaden the customer's mental picture of what buying from you can do for him. A caveat: Keep in mind that you need to ask "R" questions every time. Don't make assumptions – you may get sandbagged later. Situations change. Staffs change. Priorities change. Stay in the loop.

"R" questions allow you to ask:

1. "Who else is involved?"
2. "May I help to present to your board of directors?"
3. "Would the committee like me to answer questions?"
4. "When is your budget year?"
5. "How often are healthcare decisions made, and by whom?"

"R" questions are effective tools in:

- ❑ Determining the customer's values and attitudes.
- ❑ Understanding the scope of the decision-making process in the organization.
- ❑ Getting a feeling for the company's hierarchy and processes.

T is for Fit to a "T" Agreement

The last part of the CERT model culminates in confirming the information you've mined thus far – and proposing an action plan. You identify the customer's desired outcome. You propose the next steps in addressing her needs and/or presenting a solution. And, ideally, both parties agree that the benefit you've introduced fits the needs and wants – and that there's a mutual desire to move forward.

Step #1

"T" is actually two steps that get you to your goal. The first step is to recap what you've learned and confirm that it's correct according to your customer. Present a synopsis of everything to date. Remember, that if anything isn't quite right, now's the time to back up and get the correct answers before moving forward.

Upon confirmation that your current information is correct, your next step is to put it in a context that's relevant to the customer and make your proposal. This is your opportunity to suggest the next actions – maybe it's a tour, writing a proposal or having your rep meet with the organization's clinician.

Step #2

Though your customer doesn't yet have a product in their hand, you need to recognize the signs that she is engaged and ready for a solution. Consider this your opportunity to put out a trial balloon and see if she is, indeed, serious about moving forward.

Designing Your Personal Assessment Tool:

The assessment tool should be structured to use CERT Questions and provide:

C = Confirmation Questions

- Yes/No
- Factual data elements

E = Expansion Questions

- Perceptions, feelings, beliefs, and judgments
- Ideas on solutions
- Measures of success
- Current and future needs
- Opportunities for internal development.

R = Research Questions

- Who, what, when, where, how and why
- Understanding of the decision-making process

T = Fit to a "T"

- Confirm what you've learned and propose a next step or solution

A series of questions should be developed allowing you flexibility to respond to the appointment and customer; but allowing you some control over obtaining key information required to assist you in the sales effort. The question sequence and design will confirm information, expand the sales person's current information base, allow the sales person to research specific areas in the decision-making process and transition the customer to the next level in the sales relationship.

The questions follow the relationship sales model. The sales team, familiar with these concepts, will be required to evaluate the current status of the relationship with the customer. Based on this assessment, staff members will initiate dialogue to gain response to the questions.

The process requires the sales person to gather information through dialogue vs. the behavior of "pitching products." However, it must be positioned so the sales person realizes that information gathering is not the outcome required from the process. Dialogue with the client results in better understanding of the client needs and opportunity to respond to those needs with the services they sell.

Proposed Outcomes:

1. Gain in-depth information about the physician, their practice and their patients.
2. Increase awareness of opportunities for value added, or differential advantages.
3. Learn the customer's expectations and measures of success in working with a provider organization.
4. Develop an additional tool to monitor effectiveness of the sales person and the system in supporting the referral process.
5. Uncover potential areas for internal service expansion.

C = Confirmation Questions

DESCRIPTION: Survey questions designed to obtain yes/no and factual information and confirm existing data about them, their practice and their patients.

FOR EXAMPLE: "Dr. ________, this is really a busy office. On average, how many patients do you see a day?"
Answer: ___________ patients a day.

"I know we see you at XYZ Hospital with your OB patients. Is that the only facility where you do deliveries now?"
Answer: YES NO
Comments: ____________________________

"Your office manager indicated you recently signed up to participate in United Health, is that the case?

Answer: YES NO

QUANTITATIVE QUESTIONS:

How many patients do you see daily?
In the office
In the hospital

What is the most common diagnosis for the patients you see?

Demographic profile of patients:
Zip code: Age:
Gender: Insurer:

Clinical referral patterns: Where are patients referred, why?
OB/GYN
Cardiology
Oncology
Urology, etc.

How many patients are referred per _____time period?

Are there clinical services that are not currently provided?

Who provides ancillary support services?
Use a list.

What is the volume for these services?
Use a list.

What is the current management arrangement for the practice?

How much of the practice is computerized?

Who manages the business side of the practice?

Are there plans for growth in the practice?

Other:

E = Expansion Questions

DEFINITION: Survey questions designed to obtain the client's perceptions or beliefs about a specific topic. This also allows you to learn their base expectations and measures of success.

FOR EXAMPLE: "Dr. ________, which hospital in our community does the best job in their *emergency* room?
Answer; ___________ Hospital
"Why?"

"Do you feel there is an adequate number of young leaders in the medical staff at _________ hospital?
Answer: YES NO Comments _________________

PERCEPTION QUESTIONS:
Who is the best hospital for
Cardiology
Oncology
Orthopedics
Etc.

And why? How do you measure best – what standards, process or results for you, your patients or practice is important to you?

Where do your patients prefer to go for

Cardiology
Oncology
Orthopedics
Etc.

And why? How do you measure best – what standards, process or results for you, your patients or practice is important to you?

Who is best hospital for clinical support services including:

Nursing
Therapy services
Anesthesia
Etc.

And why? How do you measure best – what standards, process or results for you, your patients or practice is important to you?

Describe the current medical staff support, is there:

Adequate communication
Adequate involvement
Leadership development among the medical staff
Comments, needs, ideas…

How do you feel the hospital functions overall

Adequate physical plant
Location ion
Operations

Where do they function the best – where is there room for improvement and what do you suggest in terms of improvement?

Overall, how effective is the hospital is communicating

With patients
With physicians
With the public
From administration to the medical staff
How does this compare with other facilities?

Who does it best? What makes them the best?

Current and Future Needs:

DEFINITION: Questions designed to focus on customer need or current problems that can be solved by positioning capabilities of the systems service lines.

FOR EXAMPLE; "Dr. Smith, you mentioned that the Emergency Department at XYZ is "a mess", tell me more about what you believe is required to solve this dilemma.

Answer: ____

The hospital is interested in having physicians participate in developing a leadership program for young physicians. Would you be interested in participating?

Answer: YES NO Comments: _________________________

QUESTIONS TO DETERMINE NEED:

If there is one area within the patient care delivery process that you are most passionate about, what would it be?

Describe for me the typical patient today.

Do you see opportunities to improve the hospital capabilities in the *specialty* service?

Would this impact your desire to use the service?
How important is:

Service
Price
Referral relationship Managed care
etc.

Share with me the typical scenario when you refer a patient for *(procedure, surgery, etc.)*

Determine whether a referral is required. It yes, what is your involvement in the process after the referral is made?

Do you have interest in being more or less involved? How would that best be managed?

How is your current (*ancillary service*) needs being met?

What criteria do you use to judge which provider you select for (*ancillary service*)?

Is it your preference to have one provider for all (*ancillary service*) needs?

Is your current provider able to provide everything, including, (*differential advantage)* services?

If we were able to meet all your criteria, would you we willing to consider us for *(ancillary service) when you* next review your contract? Is the contract renewal in June?

Are there educational needs for your *staff or* the office in general?

Coding
Telephone etiquette
Managing and scheduling
Supplier options
Etc.

How often are you at the hospital?

What is your routine at the hospital?

What would make the hospital routine better for you?

What are the most difficult aspects of practicing medicine today?

What are your expectations of me as the physician relations staff member?

What is the process for orienting your new partner?

R = Research Questions

DESCRIPTION; Questions designed to gain understanding of the functional and operational issues within the physician office and how they make a referral decision.

FOR EXAMPLE: "The new systems for documenting payment seem to require so much paperwork and record keeping. How are you managing to keep ahead of it?" Answer: ______________________________

"Dr. __________, as the senior partner, are you responsible for much of the operational detail of the practice?
Answer; YES NO Comments ______________________

INTERNAL ORGANIZATIONAL/PROCESS AND SYSTEM QUESTIONS:
How are decisions made within the office?

Is there generally consensus among the parties before changes are made?

How many decisions and what kind are group based vs. individual preference?
Include: Vendors
Service providers
Staffing
Referral physicians
Locations for privileges, etc.

Do all the partners meet on a regular basis?

Is there a formal agenda?

Are outsiders ever invited to attend and provide information?

Are there clinical business or personal interest topics that would be appropriate for the group meeting?

Do you feel that your office support team and management is stable?

Fit to a "T" – Testing Questions

Does this approach make sense to you?

Based on what you told me, it sounds like the next step is for me to bring out our clinical education coordinator so we can discuss the hospitals diabetes education program for your patients…does that make sense? Is there anyone else you'd like to involve?