

## Physicians & the “S” Word – Sales

Author: Kriss Barlow, RN, MBA

In healthcare, most internal experts now admit that sales has a role. After all, the desire is for healthcare to operate more like the business community. Managed care and expansion into the employer market have implemented sales within the external environment. What about physician sales? Actually, bringing hospital products and services to physicians and encouraging referrals. What if this is at the expense of a competitor? Do we have to sell? Frankly, the answer is "Yes." The time is right and there is a need.

### **Why Physicians Need to Be Sold**

#### ***Time***

Physicians are spending less time in the hospital. More patients are treated on an outpatient basis and extended hospitalizations have become the exception. In addition, private practice physicians understand they have to see more patients to make the same income as in previous years. There is no longer time to visit in the doctors' lounge.

#### ***Pressure***

The pace of today's physicians means they seldom spend time-sharing thoughts and ideas - learning what their colleagues are doing that might be innovative.

#### ***Complexity***

The explosion of technology and service delivery options requires explanation and communication for use. The rules of the game in healthcare delivery are complex. Factor in the number of times that physicians are bombarded with messages from pharmaceutical representatives, stockbrokers, physician recruiters, patients, families and many others. It is difficult to filter details and be innovative under those circumstances. A sales approach that matches the physician's needs with the benefits of your service provides focus in a cluttered environment.

#### ***Mobility***

Physicians are simply more mobile. The average resident leaves his first practice opportunity in two to three years. A host of younger physician with years of knowledge about your facility is the rare exception today. There needs to be a conduit for hospital information, perspective, background and responsiveness.

#### ***Dollars***

Survival management is now a reality for many facilities. The healthcare dollar is becoming thin and each facility and each person in the chain wants a piece of the decreasing healthcare dollar. In most markets, physicians have a great deal of influence as to where patients receive services.

There are certainly more than enough reasons to consider enhanced relationships and referral patterns with physicians, but where should you start?

## **What Needs to Happen Internally to Develop the Process**

Any discussion of a sales strategy will surely give way to opinions within the hospital environment. For this reason, many have taken a "back door" approach to sales with a liaison or customer service as the vehicle to initiate sales. This works unless there is a non-selling methodology. For example, the liaison position may have been structured to gather problems - not develop solutions. Credibility suffered when complex problems were uncovered by an individual who had no power to facilitate the solution. Regardless of title and history, success in today's market requires support from top levels of administration. In most cases, the salesperson offers the best eyes and ears the administrator can have in learning perceptions of the medical staff. The administrative team needs to value this and recognize the relationship of the physician and the salesperson. Using the information that is gained must be done delicately - managed, not abused.

An effective physician sales approach positions the internal clinical function and the responsibilities of the clinical team. There will always be the exceptional clinical person who is able to perform well in the role of sales and clinical service. This is not normally the case. Because of physicians' focused expertise, lack of sales training and time considerations, a better approach is to develop sales as a separate function. This provides occasion to integrate several clinical areas in the salesperson's repertoire - one representative calling on the physician rather than a representative from each service line.

While not responsible for "front line" sales, the clinical team has a significant duty to perform in the sales process. The clinical team members are the experts. Once the salesperson has established rapport with the physician and identified a need for the service line, the clinical team should be used to consult with the physician in the sales process. The clinical team is accountable for the delivery of their product from a sales perspective. Further, the team is responsible for responding to the objective feedback received by the sales team - both positive and negative.

Internal consistency will move the effort to enhance referrals to a new level. It is best done with guidelines and some level of shared accountability for the outcome. Joint efforts need to overshadow the "we-they" mind-set that has hindered many facilities in their ability to achieve exceptional results. It is never because one department is good or bad or because one area is right or wrong. As the cliché describes, "Old habits die hard."

## **Who is the Right Person to Sell to Physicians?**

At risk of sounding evasive, there is no one perfect person for sales. Ask senior administrators who have hired staff for years and they will admit that the longer they hired staff, the less they believed they knew how to pick the perfect person for any role!

If there were some "do's" and "don'ts" for hiring relationship sales process, here is what they would be:

Don't . . .

- Hire someone internally because there is no other position for him or her.
- Hire a person to settle a turf war between departments.
- Hire someone because of excellent clinical knowledge in one area of the facility - unless the person has all the other skills you need.
- Assume that a slick sales professional that was excellent with selling a product can sell services, especially to physicians!

Do . . .

- Hire people who actually like to work with physicians and are not intimidated by them.
- Hire people who are straight shooters. Physicians are not impressed by eloquence without meaning.
- Hire someone who is tenacious. The selling process isn't quick or easy.
- Hire someone who understands and has had experience, formal or informal, in selling intangibles - concepts.
- Hire someone who is bright and articulate, a self-starter.
- Hire someone who can manage rejection and risk.
- Support the talent you have hired.

Beyond finding the ideal salesperson, there are steps that must be taken internally to start the process on the right foot. Perhaps it sounds trivial, but you must determine what you want them to sell and then train them.

Taking time to set priorities and determine how you measure sales success at the onset will allow the salesperson to "hit the ground running." It seems too simple, yet there are organizations that hire a representative and make them responsible for determining the products to sell. They may hit the mark, but they may not!

To give the right person a good send-off in the world of physician sales, support the process with simple concise communication. Don't load the salesperson down with the baggage of political sensitivity so that they can't sell.

Recognize that it is hard to handle all the internal garbage and put on a happy face for selling. Consider using support staff and your administrative team to manage customer service issues. Position this with the salesperson so that they understand their role and stay focused on sales activities.

### ***Pay Person for Performance***

If this is truly sales and you have established measurable outcomes, pay for performance. Consider a package that includes a base, individual incentives and a team incentive.

### **How Should Physicians Be Sold?**

A biased view is that most sales representatives are comfortable with:

- Hearing about the physician's issues and concerns
- Product presentations

The tension increases when the sales team is asked to speak to a deeper clinical level. There are steps that can be taken to make this easier for the sales team.

Required Steps for Effective Sales

- Administrative Support
- Internal Structure Established
- Define Products to Sell
- Structure the Position
- Pay
- Training
- Support
- Clinical Interface
- Goals

## Recruit Staff

The clinical team must avoid thinking, "But, they aren't clinical," and teach the salesperson the process of their service and the delivery methodology. This does NOT mean that the salesperson should become a clinical expert. It is merely to state that it is important for the salesperson to understand the process by which the product performs, the audience that it targets and the differential advantages from a clinical perspective. Laying the groundwork with this type of information means the salesperson can establish a dialogue and better determine what the physician needs.

The sales staff uses the clinical team as the expert for the second line of sales with a qualified prospect. Once the stage is set, the clinical details can be described by the clinician in a dialogue that is facilitated by the sales staff.

Motivated people like to have an answer when a question is asked of them. This is very true of salespeople, especially when they want to make a good impression. This can spell the beginning of the end for a salesperson's credibility. By educating the sales staff, they will begin to understand what issues they don't need to know. The clinician takes for granted that there are pieces of information that they just would never memorize or know off the top of their head. The salesperson doesn't know this. They need to be educated and supported.

## **Sales Steps for Success**

Once the internal homework is complete, there are some general guidelines that make the process more effective: Have an agenda planned for each physician visit. While the physician's issues might mean you don't get through your plans, physicians are process-oriented. They like to know the steps you plan to proceed with and what you are hoping to accomplish. Remember most of the physician's time is spent with others coming to them with problems, looking for solutions. You have two options: position your sales process to follow their format or work with them to allow you to be the problem solver. Both approaches work, but plan an approach.

- Don't dump the bucket with a full packet of information on all the products your hospital has had since it opened. Be responsible: select and prioritize the information you provide.
- Dialogue eventually creates opportunity. Take advantage of and control this reality. Don't give a sales pitch - you will become one of the masses of salespeople.
- Be cognizant of the physician's time, read body language and observe the crowd in the waiting room. Ask the office staff and the physician about their time considerations.
- Work with the physician's support team, but don't work only with the staff. Time with the physician is essential.
- Don't be afraid to ask tough questions. The long-term relationship demands mutual understanding and that's often deeper than superficial niceties.
- Quantify your information and support your recommendations with data in addition to the "We're nicer" or "We're better" rationale.
- Recognize the type of personality you are selling and give information accordingly. Some physicians want no detail: others will want all the nitty gritty.
- Don't get into a contest. Much has been written about the egos of physicians. They are probably matched by the ego of successful salespeople. The ego is delicate, so sell to their value system.
- As for the close, don't expect the physician to "close the deal." Determine how you are going to measure sales success and then put that information on the table. "Dr. Smith, can I anticipate that we will have 30 mammography patients from your practice next month?"

- Physician sales can be very rewarding and the hospital benefits can be substantial. As in all new programs, there will be challenges along the way. The fortunate part is that many of the issues have to do with internal patterns of action. While they may seem insurmountable, the system has control over the process and old systems sometimes need a new look. It shouldn't surprise us that our physicians often see this first.

The salesperson becomes the vehicle for communication. There will be dialogue and understanding of changes and enhancements the hospital can offer. The salesperson facilitates the process of matching the needs of the physician and their patients with the programs your hospital provides. Mutual gains occur when patients receive what is needed, the physician feels positive about the referral and the hospital benefits from the opportunity to treat a patient that otherwise would have gone elsewhere.

The greatest waste is the physician who goes elsewhere simply because they didn't know what you had to offer.



*Kriss Barlow, Corporate Health Group,*  
[www.corporatehealthgroup.com](http://www.corporatehealthgroup.com), 1-888-334-2500