



# Lab Sales Strategy

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09-14

The famous heavy weight boxer, Mike Tyson, was noted as saying, "everyone has a plan until they get punched in the mouth." Very insightful, Mike—but is it too late to devise a new strategy? No.

Indeed, *everyone* needs a strategy in order to be a winner. High on the list include military leaders, politicians, those in business and those competing in sports. A strategic approach is still considered preferable to one that is merely tactical in nature. Together, however, they make beautiful music.

## **Derivation and Definition**

The word "tactic" comes from the Greek word, *taktikos*. It originally meant "the science of military movements." Strategy also derives itself from the Greeks. They used the word *strategos*, and it was used in the context of "the general's art" or "the art of command."

Having a strategy suggests the ability to step back and look up from the short term to view the long-term and overall components of the competition (or enemy). The most appropriate way to define strategy is *the art of creating power*. One does not have to rely on brute strength or size. The animal kingdom has many examples. But human history also provides numerous illustrations.

## **Perfect Example**

One of the most common and illustrative stories involving power versus an ostensible weakling underdog is David and Goliath. The background as to how and why Goliath and David came to oppose each other is another story. But, the point about using strategy and appropriate tactics within this story remains compelling.

Goliath was a giant of a man—he stood more than seven feet tall, and was very strong and bulky. He donned bronze armor plates from head to toe. Historians suggest that the covering, itself, weighed over 100 pounds. He was prepared for battle at close range where he could solidly position himself, ward off blows and then deliver a mighty thrust with his spear. Not only did he have a short-range spear, but he also wore a sword on his hip and, in the other hand, a javelin. A formidable opponent, indeed.

His adversary stood as an average-height, slight-framed shepherd boy that went by the name of David. He held a sling and wore a satchel containing a few stones. David had a reputation as an excellent slinger, having killed a bear and a lion on different occasions protecting his sheep. David's king—King Saul—offered armor and a sword because the king knew of Goliath's size and power. But David felt he couldn't defeat the giant wearing burdening protection and attacking with a sword. Instead, he devised a different strategy—one of swiftness and a totally diverse method of attack: launch a stone from his sling at Goliath's only exposed vulnerable location: the forehead. David quickly ran toward Goliath, swinging his sling at six revolutions per second. Not far from the bewildered Goliath, David jettisoned the stone from his whirling sling, and—almost equal to the speed of a modern-day bullet—it embedded itself into the giant's unprotected forehead, knocking him to the ground. However, David didn't stop there. His strategy was to ensure he *killed* the giant, not just knock him down. So, the conquering hero picked up his opponent's sword and severed the giant's head.

Victory was at hand by means of a winning strategy, followed by effective tactics. King Saul perceived power in terms of physical might; he didn't appreciate the fact that power can be devised through the use of a successful strategy. David used swiftness, a simple leather sling and a stone. He aimed at the right location and made use of the enemy's own weapon to win at what would seem at impossible odds. Oh, yes—one comment about the aftermath. David eventually became King over Israel and Judah. It's good to be the king. It's also good to be an excellent strategist.

### **Today's Business Environment**

Interestingly, in modern times, references to *business* strategy were rare before 1960. But things started to take off in the 1970s and, within 30 years, references to business strategy became more frequent than references to military strategy! In today's world, if a company doesn't have a strategy, it will undoubtedly fail. Companies must create a strategy by means of an integrated *set of choices* that uniquely positions their firm in order to create sustainable advantage and superior value relative to the competition.

### **Sales Strategy**

A portion of a company's strategy involves a robust sales component. One of those “set of choices” mentioned above is the question, “*how will our Company win in our marketplace?*” Additionally, not only must the sales department have an overarching strategy, but also salespeople should develop *specific* strategies for each target account. Every prospect is as different as a fingerprint and a snowflake.

### **The Complex Sale**

People use the term “complex sale” fairly extensively in business settings. Let's define what it is and how it differentiates from a simple sale.

Selling a laboratory testing service is a complex sale. It's not that it comprises of medical terms, test names and intricate IT connectivity. One could sell cocoa beans to the Hershey Company and still be involved in a complex sale. What makes the sale tricky is the fact there are typically several people involved in the decision-making process. In a physician's office setting, there resides the practice manager, the lead

healthcare provider (perhaps other physicians), nurses and medical assistants, nurse practitioners, physician assistants, someone in charge of billing and so forth. All or *any one* of these people may give their approval or input before “the boss” makes a decree to use (or not) a certain laboratory. There sits *one* decision-maker within a doctor's practice—and, frequently, the head physician occupies this role. *But not always*. Irrespective of the role, *someone* has the final authority to say “yes” or “no” —and everyone else must abide. Knowing who is—and making a presentation to—this one person stands as a significant component of an account strategy.

When selling reference-testing services to hospitals, there stand a number of people that become involved in the decision to use an esoteric lab. The director of the lab is, obviously, a key individual. But, there is also the head pathologist (and his/her associates), Ph.D. scientists in charge of various departments, and the administrative vice president that oversees the laboratory. Department supervisors can play a part in decision-making and even the individual in charge of referral testing. In small community hospitals, the chief executive officer and/or the chief financial officer may be incorporated in reference laboratory decisions. I have also observed situations in which the chief of a clinical area (OB, oncology, infectious disease, etc.) has had significant influence in introducing another reference laboratory. A hospital may be part of a healthcare system in which a purchasing department becomes enmeshed with referral testing services.

The take home point: there is no shortage of people with whom to build relationships! Leave *no* stone unturned. Yes, it's important to speak to highly influential people and “the boss”, but employees that you may regard as “peripheral” or “low-on-the-food-chain” could potentially be very helpful.

### **The Simple Sale**

In contrast to all of these varied individuals implicated in a complex sale, there exists something called the “simple sale.” This affects just one person, and it's typically a low-value item. If you are on a trip, for example, and you want to buy a magazine before boarding the plane, you, alone, agree to this “simple sale.” However, especially in a doctor's office setting (or a hospital), the higher the value of the service (or product), several people typically give input as to whether to move forward, which choice, what cost (where applicable) and what time-line.

I should hasten to add that, in some situations, a doctor might be autocratic in his/her choice. He/she may dictate to the staff members (including the office manager) the lab he/she wants to use, and they must go along with it. Many would define this as a “simple sale” due to its single-person decision. However, a word of caution: it is always prudent to build good relationships with the office personnel. If the decision-maker selects a lab, and the staff becomes irritated with certain aspects, employees may angrily complain to the new vendor, causing misery for the salesperson, lab personnel, and even the courier. The take-home lesson is: treat a physician's office as a complex sale, despite what may appear as a decision-maker autocrat.

### **Essential Point: Position**

Understanding your *position* with regard to an account is *the* primary consideration. It gives you an indication of where you are at the current point in time, and where you might have to go to increase your chances of success. Fully understanding your position (when selling to office practices) translates to grasping a significant amount of data:

- (1) the main competitor (and secondary labs)
- (2) strong influencers
- (3) the ultimate decision-maker
- (4) draw in-house or refer patients to a PSC
- (5) their feeling about you
- (6) their feeling about your laboratory
- (7) their attitude of the incumbent lab(s)—*and* the respective field rep(s)
- (8) hospital/corporate ownership situation
- (9) specific issues they could be having with their current lab (or not)
- (10) how they receive reports
- (11) how decisions are made—and by whom
- (12) insurances they accept (including sole-source lab contracts)
- (13) courier pick-up time(s)
- (14) location of competitor's PSCs vs. your lab's
- (15) the client's tenure with the incumbent lab
- (16) the competitor's location
- (17) what key basic differences your laboratory has vs. the competition
- (18) their method of creating test requests
- (19) lab billing

As you can see, there stands a considerable amount to uncover, using good questions and communication skills, visual observation and peppered with some intuition. Because it's unreasonable to unearth every piece of data on a single visit, you will be making numerous calls. Consequently, you need to ask yourself before each encounter, "*How do I feel right now about getting business from this customer?*" Listen to your gut and don't kid yourself. It could be weak and unpredictable; it could be just OK or it could be strong and predictable. Your feelings may not be the whole story, but they are a necessary starting point for each sales call.

### **The Pre-Call Plan**

As an inchoate sales rep many years ago, my boss scheduled co-rides with me on occasion to provide coaching and observe how I was managing my territory. I always finished the day appreciating his being there, and I valued his guidance. I remember the first time we rode together as I pulled into a doctor's office parking lot. My boss said to me, "*Before we go in, let me ask you: what's your objective here? What's your plan?*" I looked at him with trepidation and mumbled, "*Well, I-I-I want to sell the account and get his lab business.*" "*Oh, is that all?*" my boss responded in a teasing manner. It was at this point we talked about a pre-call plan.

I learned the pre-call plan for a sales call should have two elements: (1) a legitimate reason for visiting the office—some rationale the *client* would appreciate and (2) some

type of commitment objective—something the client will do for *me* (however large or small) that gets the client involved. If this were a service call on a current client, and there was no intent of “selling”, my boss told me I should still have a justifiable reason for wanting to take someone's time out of their busy day. It could be talking about something the client isn't completing properly on a requisition form, a new test the lab introduced, perhaps a new methodology or even an appropriate abstract from a medical journal.

Unless the client is hopping mad about an aspect of their incumbent laboratory (which involves hitting the proverbial lottery of being at the right place at the right time), they typically don't want to waste their time listening to a sales pitch on a topic in which there's no obvious interest. Presenting something relevant to their job or an educational piece—now *that* could be received very differently (not to mention building your credibility).

Coming from my boss, all of this made sense, so I retrieved a company brochure about toxoplasmosis testing that my lab had recently introduced. This was going to be my valid reason. My commitment objective was to ask for a copy of the requisition they use, because I wanted to compare it to my lab's form. My manager told me that one of the most important aspects of a good strategy is to learn as much as I can about my competition, regardless of the apparent triviality.

### **Roles and Response Types**

It's essential to understand the key people that may have impact on laboratory decisions. Along with understanding your position, this component of strategy remains supreme.

Within an office practice setting, there reside four general roles: (1) the administration person (e.g., office manager), (2) the users (e.g., provider(s), medical assistants, and nurses), (3) the decision-maker and (4) the coach. Each one of these people can have differing opinions about you and your lab, as well as the incumbent lab (and its field rep). You have to effectively position yourself with those that play each role. It's no small task, and it's time-consuming—but it's extremely important.

You have to recognize the *perceptions* of these various people as it pertains to labs. There are four response types.

1. **Future seeking:** there are staff members that deal with the lab every day, and they may want the latest-and-greatest, but they're currently not getting it. For example, the doctor may have just read about a certain state-of-the-art test or methodology. A medical assistant may love to have a computerized logging method for specimens. The office manager may be interested in a courier using a scanning bar-code system. It's important to recognize that, in this situation, the lab provides acceptable service levels and the client may be basically satisfied. However, there exists in all of these examples a discrepancy between the reality and the desired results. And, when that happens, people make changes.
2. **Trouble:** this is the response type that every sales rep would love to run into every day! A client may be very dissatisfied—for whatever reason—with their

current lab's service (turnaround time, lost specimens, missed pick-ups, lack of communication, billing, etc.). Again, there is a discrepancy between the desired results and reality. And, when that happens, people make changes.

3. **Happy/Even Keel:** there is no denying it—individuals in this mode are not interested in expending time listening to someone babble about his/her testing service. They're satisfied with reality; there's no discrepancy. No discrepancy, no need to change. Having said this, there may be an opportunity to describe some differences. Following some insightful questions, you can show them their reality isn't as suitable as they currently believe, or you can illustrate the results they have settled for are far short of those they can achieve (i.e., guide them into a "future-seeking" client). Another way to address a happy client is to have another highly influential person inside the account (who favors your lab) discuss with the decision-maker a reassessment of labs. Finally, you can maintain high visibility and drop off important information with each call (new test/methodology, journal abstract, CDC announcements, etc.). This activity helps build your trust and credibility (a topic discussed later). As you can imagine, it's sometimes possible to move a "happy" client off their pedestal and into the land of "ultimate happiness." This requires, however, adroit strategic questioning and competent tactical presentations.
4. **Overconfident:** unfortunately, there are people that go overboard when explaining the relationship they have with their laboratory. They pontificate about how their reference lab is perfect in every thing it does, and it would be out of the question to think that a different lab could do better. One might describe the overconfident response as a "perceptual disability." This person has a false reading of the situation and a very strong resistance to change. The best way to manage someone like this—similar to a happy client—is to provide updated information on a continuous basis and, therefore, build credibility.

Your starting point is always the same: it's *how* the individual *feels* about the current situation as it relates to their perception of lab services. Someone may be in trouble mode, someone could have an overconfident response, and someone else could be happy—all within the same account. It's not hard to understand that this type of knowledge becomes crucial when creating your strategy.

### **The Coach**

The administrative person, the users and the decision-maker already exist in their roles. A coach, however, needs to be "developed." Just about every successful sale has a "helper"—what people refer to as a coach, a guide or a mentor. This individual can be found anywhere within the prospective customer's office (a common scenario), but also, possibly, within your own laboratory or independent of both. In fact, it's possible to have more than one coach for a specific account. For example, you may know a consultant that works with your prospect, and he/she maybe able to offer some helpful insights. An employee within your laboratory may have accurate historical information from previous encounters. A pharmaceutical rep with years in the territory can frequently provide valuable information during an impromptu meeting (e.g., in the parking lot). A coach can validate the accuracy of your information and/or provide data that you haven't been able to get elsewhere. Your guide can help you understand other

key employees and tell you about their individual degree of influence. A coach can give you the “inside scoop” pertaining to (a) various staff personalities, (b) reoccurring laboratory problems, (c) office dynamics and culture, (d) important competitive information and (e) decision-maker expectations in a lab service. In an account that you “share” with another competitor, your driver may be able to play part of a coaching role based on what he/she sees or hears when picking up specimens. An important point to remember: you shouldn't expect a coach to perform any “selling” for you (although it's possible a coach may do this intuitively on their own); their primary role stands as a *guide* to help you throughout the sales process.

There are three criteria that an “official” coach needs to fulfill:

1. **Your credibility:** your coach has to believe in you and feel that you could be trusted in a professional, selling capacity. It's optimal if you have known this person for some time (even from a different office practice or job). But, if not, it will probably take a number of interactions for you to sufficiently build your credibility.
2. **The coach's credibility:** a good coach must be well respected. It's obvious that if you aim to develop someone that has minimal credibility, your chance of success greatly diminishes.
3. **Wants to see you succeed:** this criterion is crucial to your success. Your coach must feel that if the office decides to use your laboratory, he/she will be better off or, at least, proud to have helped you become a vendor. You can ask yourself this question: “Does this individual see a personal win in my making this sale?”

Unless your candidate satisfies this criteria triad, you should be very cautious about considering someone a genuine coach.

### **The Competition**

One of the most important aspects of determining strategy deals with the “other guy”—your competitor(s). The main concern circles around what the other lab is doing to gain market share.

A sales rep needs to think out-of-the-box when believing a competitor equates to just “another lab.” *Any* alternative solution to your laboratory *is* your competition. As an example, in today's pathology environment, many large urology, gastroenterology and dermatology practices employ certain billing arrangements for biopsies that include the technical and professional component (TC/PC split). In these situations the prospective customer uses *internal* resources in part or in whole. Another “competitor” equates to inaction—maintain the *status quo*. And finally—a very popular aspect in today's medical practice environment—a local hospital or corporation purchases a physician's office and expects their “employee” to refer lab testing to a specific lab. In many cases, there isn't a legal-binding document requiring this action but, rather, the moral power of *quid pro quo* obligation (i.e., feed the hand that feeds you).

This author feels adamantly that a sales rep *must* have “mirror knowledge” between his employer and competitors. Due to the fact that customers commonly regard labs as commodities, a marketing representative simply can't survive by being ignorant of what

his/her rivals offer. Even what may appear as the smallest, insignificant difference could be a sensitive spot for a client. My mantra to my sales reps has always been: “*Dig deep into your competition—very deep. Your effectiveness is compromised until you know your competitors as well as your own lab.*”

### **Avoid a Reactive Strategy**

It remains an important point to mention that using a *reactive* competitive strategy is the wrong way to go. You want to stay away from this during a client conversation: “*Yes, we can do that, too*” or “*We have that, as well.*” These kinds of statements place you in a vulnerable position—leading to an attenuated strategy. Instead, when your client espouses a certain service they receive from their lab, your strategy should include statements (e.g.) that *all* laboratories must offer those things in order to compete in the marketplace. Your presentation must embrace differences your competitors do *not* offer (or, learning through conversation, things the competition offers but hasn’t informed their client). Careful questioning techniques will educate you, giving a basic understanding of the components you want to describe that equate to positive client feelings. When you use a *proactive* competitive strategy, you set the agenda and the standards.

### **Reposition the Competition**

One of the strategic aspects that many people fail to incorporate in their game plan is that of repositioning the competition.

But, let's first step back for a moment to gain a better picture. Just like the memory of a computer, the mind has a slot for each bit of information it has chosen to retain. However, there is one important difference: a computer must accept what you put into it—the mind doesn’t. In fact, it's quite the opposite. The mind *rejects* new information that doesn't “compute.” It admits what it wants to, and filters out everything else. Therefore, to cope with lots of information, people have learned to rank things in their head.

Providers have a “lab ladder” in their mind and each rung represents the name of a laboratory. If you want to increase your share of business, you must either dislodge XYZ Lab altogether (hard to do if everything is running smoothly) or somehow relate your lab to the competitor’s *position*. This is where repositioning comes into focus. In essence, the crux of a repositioning program is *undercutting an existing concept*. I do not mean in *any* manner that you should denigrate your competition! You simply want to suggest *differences* that shed an altered light on your competitor—something to which the client may not have given any previous thought.

For a repositioning strategy to work, you must say something that causes the prospect to change his/her mind—not about *your* laboratory, but about your *competitor*. Just saying, “*we're better than our competition*” isn’t repositioning. It’s comparative selling and, certainly, not very effective.

As an example, if your lab is local, and the doctor's office uses XYZ Lab out-of-state, you could say something like, “*Area providers have told me they prefer using a laboratory*



*that is near their office as opposed to an out-of-state laboratory. In addition to being a convenience factor in several ways, they've said they want to support our local economy and help with the employment base instead of backing a company from Faraway State."* These two sentences kill two birds with one stone. One, it uses the concept of "social norms." People's behavior is largely shaped by the behavior of those around them. In particular, people are often motivated by their desire to conform with the group, especially if it's a group with which they identify. Second, it positions XYZ Lab as "far away" vs. being "around the corner." It brings logic to the forefront. The client may say, "*Huh, I never thought of that in those terms before. I see the point. That makes sense.*"

Another example of repositioning is the following scenario. Let's assume the competitor laboratory is located, for example, an hour or more away, and your laboratory sits in the same town as your prospective customer. Your lab offers equivalent service as your competitor (if not more).

**Rep:** "*Doctor, I assume you have an excellent reputation here in Any Town .....Right?*"

**Client:** "*Yes, certainly. I am proud of the practice I've built here.*"

**Rep:** "*Let's imagine there is a patient that lives just down the road from your office, and they need to see a specialist such as yourself. However, they drive about 50 miles to Farawayville to see a doctor. Wouldn't you scratch your head and ultimately want to talk to that person to explain about your excellent reputation you told me you have—that there's no need to waste time and gas for such a trip?*"

**Client:** "*Yes, I would, and I can see your point. It doesn't make logical sense they would need to drive such a distance when I can easily help them right here.*"

**Rep:** "*Well, that's exactly how I feel about our laboratory. We offer an excellent service in your relative backyard; however, you send your specimens to a laboratory that's at least 50 miles away.*"

This type of repositioning strategy places your laboratory and the doctor in the same boat. You aren't knocking the competition. But you have brought up a valid point that may cause the doctor to get his "competitive juices" flowing—he's losing patients to someone else who is far away! It's logical that you *both* would like to service the local population. The key is to ensure the doctor states first that he/she provides excellent service to patients. This concept aligns itself when you say that *your* lab offers an excellent, local service, as well.

### **Basic Differences**

I hold a simplistic tenet in selling lab services: differentiate or die. The problem is, many lab sales representatives are not trained properly in the art of differentiation. Compounding this is the fact that the vast majority of office practices treat laboratories as a commodity. Why is this commoditization happening? It's because marketers act in ways that *dilute* their laboratory brand ("*we provide the same thing...*") instead of trying to *build* and *expand* it.

The issue is, clients are on autopilot. A specimen goes out to a lab—a report returns. It just works (for the majority of times). However, due to the complexity of testing services (proper specimen collection and transport supply, specimen logistics,

specimen lability, laboratory processing and reporting, IT, billing, report format, phone communication and hold times, result interpretation, turnaround time, professional staff support, test menu, etc.), one would be hard-pressed to say that all laboratories precisely mimic each other in every facet. As a result, I firmly stand by the declaration that all laboratories are different—and *can* be effectively differentiated.

As Harvard University's well-known Ted Levitt said on this subject in his 1991 book entitled, *Thinking About Management*:

“Differentiation is one of the most important strategic and tactical activities in which companies must constantly engage. It is not discretionary. And everything can be differentiated, even so-called “commodities” ....”

In my opinion, there is no such thing as a commodity—only people who *act* and *think* like commodities. Every commercial laboratory, including hospital outreach programs, hold this ultimate marketing objective: retain our customers and, at the same time, attempt to take customers away from our competitors. That's what differentiation can do.

Three final points:

1. Basic differences are only significant if the *client* thinks they are important in their situation. Your laboratory could have the latest and greatest test methodology, but if the client doesn't feel it applies to them, it's *not* a valuable difference. You can try to demonstrate *why* it should be important, and you may be successful. But, the point is, don't go into a selling situation spouting out all of your laboratory's differences, thinking that the client will be grinning with excitement. This is where deft questioning comes into play. The right questions will ferret out what the client feels is important. You then can “backtrack” into your basic difference benefit(s).
2. In client-bill situations, price is often the enemy of differentiation. By definition, being different should be worth something. But when low price becomes the focus of a message or a laboratory's primary marketing activity, you begin to undermine your chances of being perceived as being unique. What you are doing is making price the main consideration for picking you over another laboratory. That's an unhealthy way to go. Another lab rep can waltz in and offer even lower pricing, and you're out the door.
3. Communicate your difference. Every aspect of your lab's marketing communication should reflect your difference— especially your tactical presentation.

### **The Sales Pipeline/ Funnel**

A sales strategy is not complete without a customer pipeline or funnel. There exist four general areas:

1. A potential prospect
2. A qualified prospect
3. Building rapport and credibility
4. Close the business

Each area associates itself with a particular kind of detective and/or selling work, and you have to be proficient in all four areas.

Many companies transform a sales funnel into a timeline—say, four months down to one month. An interesting phenomenon I have noticed is that inexperienced sales representatives notate a similar number of prospects in the one-month column as they do in the four-month column! Unfortunately, the art of the sale doesn't work that way. It's only natural that you will have more at the top of the funnel. As time goes by, qualified prospects get whittled down to one or two at the bottom, indicating you expect they will activate within a month's time.

### **Target Accounts**

In conjunction with the topic of a sales funnel, a good strategy involves knowing exactly the type of accounts the marketer needs to see. Obviously, the laboratory's testing focus dictates the various specialties. Some labs, however, take for granted their field person knows where to exert his/her energies. A good sales strategy should contain a roster of doctor's names, addresses, contact information, office times and key personnel. This—when used in a planned geography concentration—promotes good time management and productivity. It also translates to a professional approach when entering the client's office and requesting without hesitation (or "name-fumbling") to speak to a specific individual.

### **Up-Selling Strategy**

Up-sells from existing customers come in a variety of forms: (1) repatriating lab specimens from a competitor to your lab, (2) directing additional insurances to your lab and (3) educating clients about a test/methodology they haven't previously ordered. Expanding your business from existing customers is *the* most cost-effective method to increase lab revenues—and, frequently, it's an easier method from a marketing person's standpoint. Optimally, you have previously built trust and credibility within your account—an activity that takes significant time with a new prospect. The take away point: *always* be sleuthing for additional opportunities to increase business within your existing customers.

### **Solution vs. Insight Strategy**

The past several decades have witnessed a type of selling strategy called, "solution" or "consultative" selling. Using this model, salespeople use open-ended questions designed to uncover background client information and recognize customer needs that are currently not being met. The issue arises, however, when a sales representative realizes the vast majority of customers appear perfectly satisfied with the lab(s) they use! The client has no raw material where a sales rep can build a "solution" presentation. In these cases, a representative simply turns around and marches out of the office—feeling rejected and defeated. After all, he thinks, *"My lab offers the same service as what they're currently getting from ABC Lab. Since there aren't any apparent, immediate problems, I guess I'll have to play the "waiting" strategy—simply keep returning in the hopes of finding dissatisfaction at some point in time."* This is one way to approach the situation. But you may be waiting a long time.

It is here where an “insight” selling strategy comes into play. The objective is for the sales representative to “disturb the client’s equilibrium” that makes the status quo untenable, but without putting the client on the defensive. Marketers need to diagnose the prospect’s situation and find evidence of the *absence of value*.

There exist four areas in which doctors appreciate help from vendors:

1. Keep me informed (e.g., compliance areas that reduce risk, CMS/CDC announcements, helpful hints for my practice, etc.)
2. Provide convenience for me, my staff and my patients
3. Help me improve healthcare to my patients (new tests, methods, journal abstracts, etc.)
4. Help me control healthcare costs (not necessarily cheap test prices)

If a sales representative outlines these four areas to a prospective customer and demonstrates through show-and-tell examples how his laboratory fills most, if not all, of the categories, it becomes a potent sales strategy. In essence, the marketing representative “chalks the field” for the client. He/she *re-sets* the buying criteria. He/she explains what the client *should* be getting from a laboratory vendor that equates to a higher value than current conditions. This is an antidote to the conventional client response, “*Everything’s fine with our lab. We have no issues. See ya later.*”

### **Personalize Your Selling Strategy**

I have left this final component to the end because this equates to the apex of sales strategy. When a marketing person starts out new in a territory and has not had a chance to build strong, positive relationships with customers and prospects, he/she sits in a fragile position. On the other side, those reps that have established themselves and fostered trust and credibility with clients—employing good strategy and tactics—they tend to activate business (exercising continual visibility) on a consistent basis.

We humans have an invisible “relationship staircase” pre-constructed. It reflects six levels one can have with another person (ascending from the bottom):

People who value a relationship with you  
People who respect you  
People who are friendly with you  
People who like you  
People who know your name  
People who do not know you

The last two steps endure as the most challenging and time-consuming to achieve. Many business relationships are at the “know-your-name” step—or maybe at the “like you” or even “friendly” stage (depending on specific employees). However, *successful* sales representatives yearn to progress higher, and they do so partly by performing expected *and unexpected*, unselfish acts—all leading to trust and credibility. They aim to reach the staircase pinnacle with the decision-maker and those that are highly influential.

Most everyone has an invisible sign inscribed across his/her forehead: *make me feel important*. In a sales situation, for example, education becomes a very significant strategy. When you simply try to make a pitch about your lab's services, you break rapport; but when you *educate*, you build it. Most everyone enjoys learning something new. You can make someone feel important when you say, "*I saw this short article about \_\_, and I thought you would enjoy reading it.*" You are not selling anything. Done appropriately, you're building rapport. And when you build rapport, you make advances to the top of the relationship staircase.

There are four activities in fostering a good business relationship:

1. What you think (i.e., a positive mind-set)
2. What you ask
3. What you do
4. How you do it

It stands to reason that if the salesperson falters on execution, provides misinformation or takes longer than expected to resolve an issue, his/her credibility takes a plunge (sometimes precipitously). Depending on the situation, it can take a long time to swing perceptions back to a more positive direction.

It may sound almost too simplistic. Building trust and credibility—aiming for the bulls-eye where the customer *values a relationship* with their field rep—equates to the cornerstone of a solid sales strategy. Omit this, and your strategy becomes sorely compromised—even dying on a vine. With the exception of political and friendship situations, people buy *you—first*. It's an automatic reflex decision for the client. The verdict hinges on internal questions the customer asks him-herself: Do I like you? Do I trust you? Are you honest, credible and knowledgeable? Are you someone with whom I can work at a professional level? Don't forget: *people buy you first*.

### **Summary**

Over the years in past conversations with salespeople about their strategy for certain prospects, I would frequently hear something akin to, "*I had a great conversation with Mary Jane at Dr. Johnson's office today. She's gonna talk to the doctor and tell him all of the great things I explained about our lab. I hope she follows through, and I hope he will seriously consider switching to us from ABC Lab.*" My two responses? Number 1: "*Hope is not a strategy!*" Number 2: "*Don't expect someone else to translate your incredibly impressive message to someone else. It rarely happens. Your job demands confident, effective communication with the person that can say, "Yes—I will make it happen."*"

It all circles back to strategy's definition: *the art of creating power*. Selling strategically means that you approach your job with a planned system of documented steps that are logical and repeatable. It's the way a professional salesperson does things, and it sets him/her apart from the competition. The strategist looks at every challenge as an opportunity to *out-think* competitive approaches. Treat your strategy as a *dynamic* system, because things are always changing with customers. Thus, when you get "punched in the mouth", you find alternative ways to deal with the situation (instead of

feeling dejected and rejected). Be a strategist *first*—just like a young shepherd boy in biblical times. You, too, can become King/Queen of your territory!

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