



The A-B-Cs of Change

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If there exists one simple truth about sales, it's that every salesperson sells the same thing: change. For those that market laboratory testing services, they know the bulk of customers don't want—or see the need—to change anything about the labs they use.

As a result of this infrequent desire to change, lab reps find it difficult to spend a few minutes talking to an office manager (or anyone else) about their lab. Sure, the rep can “buy” his/her way into the client's domain by providing lunch for the staff; that's about the only sure-fire methodology to speak to the provider(s) and staff in one sitting. But, even after spending money to have this idyllic audience, most practices continue on their merry way—without making any changes in the lab(s) they use.

Oh, well, claims the salesperson. *I'll keep periodically stopping in to check on service levels and, hopefully, I'll catch them on a day when things aren't going well.* Upper management expects that kind of visibility to occur, but the question remains: how long is *that* strategy going to take for the situation to develop into a positive one for the rep? Frankly, if “checking in” is the rep's strategy, that could translate to *years*, if ever.

Marketing Materials

If you were to examine various labs' marketing materials, the messaging is fairly similar (lab specialty dependent):

- High quality
- Fast turnaround time
- Patient collection centers
- Electronic reporting
- State-of-the-art instrumentation/methodologies
- Professional consultation
- Strong focus on patient care and office satisfaction

Frequently, the client that is satisfied with their lab instructs the rep to, “Just leave your information. We’ll look it over and call you if we’re interested.” The unsophisticated marketer excitedly hands over the piece and fantasizes about the doctor at the end of the day reclining in his office chair, his feet resting on the desk. He’s perusing the lab’s material while sipping coffee—totally captivated by the alluring content of electronic result integration, 24-hour turnaround time, free collection supplies, courier pick-up, cutting edge instrumentation and unsurpassed customer service. The rep’s fantasy continues: these points create a rapt effect that trigger an impulsive action: he asks his practice manager to step into his office. The doctor hands over the brochure, requesting an appointment for the field rep to return. The physician wants to tell him how enthralled he is—and about using this extraordinary lab service. Alas, the tale ends with the marketer walking to his car with a smile on his face and feeling rather smug. After all, it was the *client* that asked for his brochure. It contains a detailed overview of his lab’s services, *and* it has colorful pictures of someone peering into a microscope and a lab tech staring intently into a test tube. Whoa! How could anyone *not* be impressed? Let’s join this representative now and re-play this scene in a more realistic fashion. It would have been more appropriate during the initial interaction to respond with, “I’d be happy to leave my brochure. But, the contents are only part of our story. I really need to speak directly to _____ because I have to ask a few questions to see if there is a good fit with my company. May I make an appointment?”

Bottom line: unless your lab offers a unique, validated test or something else totally different from other competitors, a pretty 4-color pamphlet will not be the deciding factor in winning a client. You have it to demonstrate your lab’s legitimacy.

Insight Selling

So, if we’re going to discount the lab’s collateral as having no true impact on winning business, what does? There exist four different scenarios:

- (1) ownership or political situations
- (2) exclusive insurance contracts
- (3) the customer is knee-deep in dissatisfaction with some aspect of their lab
- (4) a salesperson’s effectiveness.

The first three are what one would describe as an “easy lay-up.” The fourth one, however, is far more challenging.

Customers anticipate reps from different companies stopping in their facility throughout the day. But, in the case of a lab rep, if there’s nothing of substance to talk about other than, “I’d like to talk to the office manager about my lab”—and the client is content with their lab’s services—the “nothing new” visit frequently ends up at a dead end. Quite frankly, can you blame anyone for wanting to escape spending precious time on a topic that holds no interest?

This is where “insight” selling comes to bear. It’s obviously not solution selling, because (more frequently than not) the customer claims there are no problems significant enough to go through the hassle of changing labs. Using insights demonstrates that, despite the provider’s

previous learning, he/she may have missed something in the recent news that's relevant to office operations and/or patient care. Perhaps your lab has instituted a new policy or procedure that pertains to convenience to patients or the office staff. Affording educational and relevant information will provide a valid reason to see an influential staff member (or provider), lead to greater credibility and, simultaneously, generate rapport. There are important topics such as a new methodology, new test or profile, announcements from the CDC, FDA or USPSTF, testing algorithms, proper use/interpretation of genetic tests, pertinent journal abstracts, etc. One can freely find the latest government agency notices on the Internet. The lab's vendors (including the reference lab) are another resource.

Mental Models

It's a common theme (right off the bat) to ask a client about any issues they face with their lab that they want to see changed. When customers state there are no major problems, what some marketers fail to fully appreciate is that current client behavior remains significantly more entrenched than they might like to think. An underlying set of assumptions, perceptions and habits constitute the customer's world. Psychologists call this a "mental model." A mental model matters significantly, because *that's* what drives the customer's behavior in the first place.

So, it stands to reason: if you want to substitute behavior of an otherwise satisfied client, you first have to change the mental model. Or, another way to say it: the only way to replace how a client *acts* is to first alter the way that client *thinks*. Through my own experience, as well as observing top representatives, I've found the importance of understanding a customer's mental model. *It stands as the primary leverage point for driving customer behavior change.* Consequently, rather than engaging prospects in a debate on the merits of your lab's wonderful services, a strategic approach is to initially involve customers in a discussion of their perceptions about the incumbent lab.

There exists a good question that can be used to uncover a mental model: what the client *likes* about their laboratory service. The answer reveals testimony of that person's impressions (emphasis on *that* person—not necessarily every employee). Not only is their response important, but so is his/her expressive manner. I remember a situation when I once asked a Director of Nursing what she liked about her laboratory service. Her expression was stone-faced. Then she said abruptly, "*nothing.*"

Baring that extraordinary reaction, people typically have perfunctory comments: adequate turnaround time, quality results, EMR connectivity, reliable logistics, etc. Hey—doesn't every lab need to offer those things to remain competitive? So, it's during this discussion where the representative can diplomatically deconstruct the client's current mental model by reviewing those (for lack of a better word) "me-too" categories.

Breaking Down the A, Building Up the B

To simplify this idea, let's distill it into a binary thought: the customer's *current* beliefs and behavior on one side and the *desired* beliefs and behaviors on the other side. "Desired beliefs"

translate to what a lab rep essentially wants a prospect to believe and do—because that behavior will most likely lead to the choice of the proposing lab. I'll represent this simplistic model with an A connected to a B:

A



B

Current beliefs/ behavior

Desired beliefs/behavior

If you look at your sales collateral, it's typically a description of services. The messaging attempts to convince customers that whatever they're doing (A) couldn't possibly be as good as what life *could* be (B). So, it's really a battle for the B side.....right? Uh-uh-uh—not so fast my friend.

Being in the lab sales business for many years, I've come to conclude the real challenge in changing customer buying behavior is *not* a crisper articulation of the B benefits. It's an insightful uncovering of the rudimentary or the incomplete (or maybe even pain) of A. By not doing this, the B may seem terrific, but the A still remains "good enough." Winning the sale, in other words, isn't so much an initial crusade for B nearly as much as a repositioning of A. Thus, the important lesson becomes break down the A before you build up the B.

It needs to be stated that simplifying the A may not always be possible. That's why initially asking what the customer likes about their lab remains a valuable question. It lets you know where your contact person's mental model sits—and how your lab positions itself within that framework. There may be nothing different your lab can offer. If the client's response includes an overconfident behavior ("I love the lab— they're perfect. We've been using them for years.") or something specific your lab can't match ("The doctor's daughter works for the lab."), you know you are in a less-than-ideal position (again, according to that individual).

However, if the "likes" discussion circles around ho-hum, me-too services, it might be possible to attack these routine features and reposition the competition. To demonstrate, let's pick up at a point within the conversation between a successful rep and an office manager (loosely translated from a real-life sales call). It should be noted that, from a psychological standpoint, asking a client about what attributes they like about their lab will typically be viewed as a positive inference; it has a non-threatening, non-salesy tone.

Rep: "Mary, given this initial background information you've just described, I'd like to ask another question: what do you like about XYZ's lab service?"

Mary: "Gee no one's asked me that before. Let me think about it. Well....they've integrated their results into our EMR and their turnaround time is good; Dr. Johnson hasn't complained about their testing quality, so I assume that aspect is good; they have convenient patient draw centers, and, Eric, the courier, has been very reliable. Oh, yes—our rep, Johnny, comes by every so often to check on service. Everything just seems to work. We really don't have any major issues with XYZ Lab."

Rep: “It’s nice to know things are running smoothly for the office. Do you think most competitor labs offer the same things?”

Mary: “Well.... yes. I say that because I hear a similar story from other reps when I have time to talk to them. There’s nothing they explain that seems any different from what we’re currently getting. They ask me if I’m happy with our lab service, and I tell them yes. They show me their brochure, review the usual blah, blah, blah about turnaround time, interfacing, and great customer service. The conversation ends with asking me to call if service degrades. You should see the stack of lab promotional info I’ve held on to! I guess I shouldn't bother to keep taking them anymore.”

Rep: “My lab also offers the necessary services you’ve mentioned; we have to in order to be competitive. Besides, we have many satisfied clients that prove my point. But, are there any additional aspects you would like to see from a lab vendor that you don’t currently get?”

Mary: “I can’t think of any.....but, to tell you the truth, I’ve never given it any thought. What I’ve mentioned is all we expect: specimen out, report back, quality results and good customer service.”

Rep: “Let me take a deeper dive into my previous question: if a laboratory offered support tools that may help keep healthcare costs in check, and/or showed ways to improve patient care and/or helped the doctor stay informed of new test applications and so forth, would you consider that an expansion of the role a laboratory could play in your practice?”

Mary: “Well, sure. But our rep doesn’t talk to us about those things. He just stops in to see if we’re happy with his lab. Why do you ask? Is that what your lab does?”

Let’s dissect what’s happening in this conversation. Our intrepid representative has started to commoditize the A (current beliefs) by getting Mary to admit that XYZ Lab does just the essentials. He *repositions* the incumbent lab as me-too. Mary’s interest begins to rise. She starts to think differently.

And, by the way—where sits the rep’s lab in the A-to-B questioning? It's nowhere. The A-to-B isn't a story about the salesperson’s laboratory. It exists as a value proposition designed to describe what the customer *could* have—it “sets-the-table” for the payoff.

We, therefore, need to assign a letter to the proposing lab, and that’s obviously going to be C. If a lab person effectively breaks down the A and then successfully builds up the B, the customer will probably want to know more. As a result, the lab rep must be able to confidently state (because of prior research and practice), “Let me show you how my lab differentiates itself beyond being a simple transactional service.” This is the power and elegance of insight selling.

Building the Case for C

In current healthcare publications, conferences and webinar events, the messaging revolves around providing healthcare *value*. Specifically, topics such as:

- improving patient outcomes
- keeping healthcare costs in check
- offering clinical decision support tools (professional consultation, reprints, algorithms)

It remains the marketing person's (and laboratory management's) responsibility to unearth the lab's differentiators. What does their lab do (or can do) that fall into the above classifications? The rep's job evolves into an interpreter that connects the dots, employing show-and-tell examples (third-party and/or home-grown) and explaining how their lab tailors its services into at least one (or preferably all) of the above categories. In short, describe how the lab brings value.

If I were a physician (or an administrative person), and a representative described how his/her lab distinguishes itself by demonstrating ways it can add worth beyond a simple commodity pick-up and delivery service, I would think to myself: *This person gets it—and understands my business. His presentation is unlike what I hear from other lab reps that review the same things that are my basic expectations I can get from any lab. This person is talking about value for my practice. I'd rather deal with this lab that has a more strategic focus.*

I previously suggested “keeping healthcare costs in check.” Do not translate that concept into lowering test prices in client bill situations. There are other ways to show how a lab can help lower healthcare expenses (e.g., testing algorithms for certain diseases, a medical society's test recommendations, the proper use of genetic tests, etc.).

Yes, repositioning the competition and adroitly progressing from A-to-B-to-C takes (1) initial in-house “digging-in-the-weeds”, (2) conversations with lab management and (3) practicing a strong message that connects the dots. It distills down to research and thought-provoking work. But, articulated professionally, it turns a lab rep into Cinderella or Prince Charming. You are *teaching* versus selling. It aligns with the age-old phrase: “People love to buy, but they hate to be sold.”

Summary

After spending 44 years in the sales and marketing of laboratory services, I have learned a number of things. One of the important points is that my slick-looking capability piece is probably not going to win new clients, irrespective of how proud I am to show it to someone. Another important realization is that “checking in” with a prospect (without having a valid reason the client would appreciate) isn't the most productive use of my time—nor the client's. Agreed, it's a common strategy, but it's also a time-consuming and expensive “throw-of-the-dice” approach. [For an eye-opening exercise, spend a minute or two to calculate the fully-loaded cost of the expense it takes to make just one visit.]

The real challenge in shifting a prospect's buying behavior is *not* about an initial discussion of the superlative attributes of your lab. It's a verbalization of the commodity perception of A. Without that, the B may seem great, but the A is still “good enough.” You have to systematically—and diplomatically—commoditize the A before you build up the B, and then shine the spotlight on C. Granted, it takes time and thought to excavate your lab's value-add characteristics that has true meaning to a customer. But, after that, it's like singing your A-B-Cs.

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