ASK THE EXPERTS:
HANDLING ELECTIVE SURGERY
OBJECTIONS LIKE A PROFESSIONAL

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THE CURRENT STATE
OF THE PATIENT
EXPERIENCE

THE EDUCATIONAL SPECTRUM - LASIK

Prospect tired of glasses or contact lenses
Starts to consider what life
would be like without glasses or
contact lenses

15% to 40%
"Investigators"

15% to 30%
Heavy duty fact
finding

60% to 80%
CMI

Currently Not Investigating

Has thought about LASIK but isn’t sure if it’s for him

Puts LASIK in a mental "file drawer"—doesn’t
think about it

Still living with problems of your vision—still
tolerable

60% to 80%

$900

Money changes hands - $900

An appealing message will put them back on the Spectrum
CONSUMERS LEARN ABOUT OUR SERVICES VIA:

=  

TODAY’S CONSUMERS LEARN ABOUT OUR SERVICES VIA:

=  

=  

=  
CONSUMERISM AND THE PATIENT EXPERIENCE

- 94% of marketing budgets are spent on persuading a customer to call
- Only 6% of marketing budgets are spent on answering the call

The #1 question asked on the call is...

How much is it???
LET'S REVIEW SOME CALLS!

Call 1

Call 2

WHY IS CONSISTENCY LOST ON THE PHONES?

• Wrong people answering the phones
• Improper training, or No training at all
• Phone staff are multitasking
• Staff turnover

8 STEPS TO BETTER CONVERSIONS

1. Assign informed and well educated counselors to handle your “premium”/elective calls
2. Ensure that calls follow a format that maximizes the potential of gaining new business
3. Script your calls in advance so you can dependably predict the outcome
4. Ensure that your staff is kind and correct on every call
5. Call your own office as a patient to experience and improve upon your own front office
6. Research your competition and improve upon their style
7. Allow your staff to answer your calls uninterrupted
8. Prepare to make mistakes and accept that they will be made - the key is to learn from them while maintaining morale which ultimately reflects on your call quality
THE PATIENT IS IN YOUR OFFICE…NOW WHAT?

SALES BASICS

• Raise your hand if you are in sales
• Who has had a good sales experiences?
• Who remembers bad sales experiences?

• What is selling?
  • Convincing someone to do something?
  • Manipulating a response?

SALES BASICS

• Selling is the ability to give someone else confidence to make a decision
• Selling is consulting – allow them to make the choice to purchase
• Selling is accomplishing one thing at a time - Focus on the next step
  • What do they need to do next
• Selling is listening
  • 60/40 rule
• Selling is creating an emotional response
  • 80/20 rule
MOVIE TIME

• https://www.youtube.com/watch?v=lzixdS-qWh8

THE MESSAGE YOU CONVEY

• 55% Body Language
• 38% Tone Of Voice
• 7% Words Used

• Where does this come from?
  • Showing there is no danger – open hands and shake with sword hand (since you can’t embrace or hug)

BODY LANGUAGE BASICS

• Dress to impress – first impressions
• Firm handshake
• Smile
• Lean forward
• Nod
OBJECTION HANDLING 101

• Objection handling is listening
• "Sit Down Next To Them On The Couch"
• Understand the question (objection)
  • Make sure this is the TRUE question
• Reiterate the question to be clear you have the correct question
  • "Just to be sure"
  • "If I’m hearing you correctly"

TOP OBJECTIONS

• Price
• Fear
• Time
• Convenience
• Shopper
• Hesitation
  • One legger
  • Thinker

OBJECTION TECHNIQUES

• FEEL, FELT, FOUND
  • I understand how you feel,
  • Many people have felt that way in the past,
  • But what they’ve found is…..

• Put the patient’s mind at ease by offering
  the appropriate response:
  • reinforce your value proposition by highlighting
    the accepted benefits
  • continue to build value by asking
    conversational probes to identify possible
    features to bridge as benefits.
    * Tim Brathwaite
OBJECTION TECHNIQUES
PEPP – C MODEL

- **Probe** – make sure you understand the objection
- **Empathize** – convey to them that they are not alone with their concern
- **Present** – show them a different angle to look at the subject
- **Prove** – present the facts...doctor, technology, etc.
- **Close** – the objection should be sufficiently addressed, find out if there is another one

PROBING TO FIND OUT...

- I understand where you are coming from, there is a lot of competition out there and you want to make sure you are paying for the best, but not paying too much. If you don’t mind me asking, what were you expecting to pay?
- I think I understand your concern. Are you asking what makes the technology we’ve invested in and the experience of our doctor validate our price compared to what you’ve seen somewhere else?
- Did you have a certain number in mind? I would like to make sure we are on the same page with expectations.

PROBING TO FIND OUT...

- Would it be safe to say, if price wasn’t an issue, that you are ready to move forward with the procedure?
- Yes, price is important and that is why we need to look at this as an investment instead of a cost. If we look at this as an investment, your R.O.I. on this purchase is very attractive and these are the reasons why...
- I get where you are coming from, it seems like a large number at first. Unfortunately, because of the cost associated with investing in this level of technology and the commitment to follow up care that is included in the price, we really don’t have much wiggle room without compromising care.
FOLLOWING UP

- Be thorough
- Be accountable
- Set expectations
- Use the law of reciprocity

QUESTIONS???

THANK YOU!

Bill Mercier
&
Cuinn Merrigan