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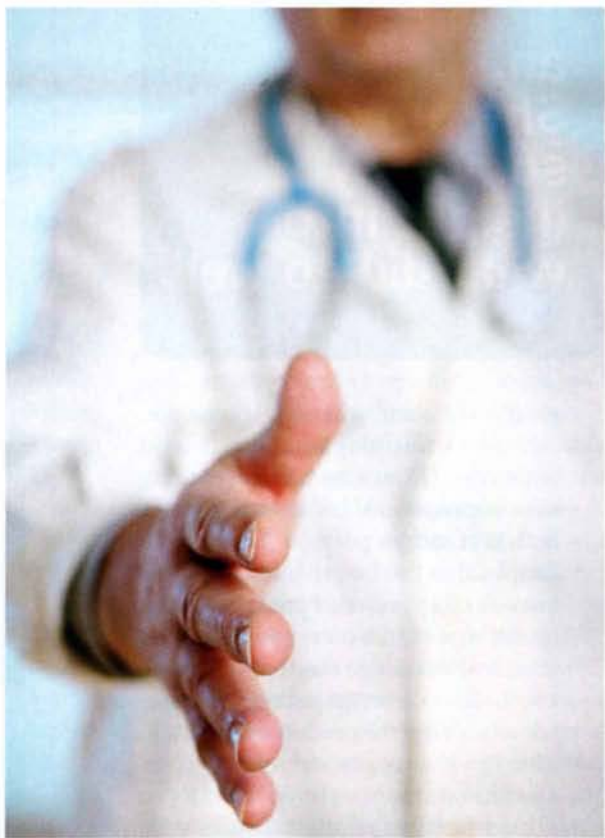
HOW TO LAUNCH A NEW BRAND
STOPPING THE NO-SEE TREND

AND:

PAM MARINKO REVIEWS
THE BLACK SWAN

Modified behavior

Stopping the trend of no-see doctors
by Manny Gaspar and Rick Rosenthal



Does the following experience sound familiar?

The instant you walk into a physician's office, the staff informs you that the physician doesn't see representatives anymore. Valiantly, you try to convince the staff that the physician should continue to see you, but to no avail. You resign yourself to a smile, a sample drop and one more physician to classify as "no-see."

This troubling trend of physicians' unwillingness to spend time with representatives is real and impacts your business. Further, Health Strategies Group's annual industry assessment, "The State of the Selling Environment," found that representatives expect the percentage of physicians they identify as hard-see or no-see will continue to rise (see Figure 1 on the next page).

What factors drive physicians to decide the service you provide is unneeded? Is it something you're doing? Something you're not doing?

Diagnosis

More and more doctors are no-see or hard-to-see

Prescription

Changing physicians' perceptions will help open doors

Physicians decide to manage or eliminate the time they spend with representatives based on the demands of practicing medicine, and sometimes due to their conclusions about the value of interacting with the representatives they meet.

You can't do much about the demands of practicing medicine, but you can impact physicians' conclusions about the value of meeting with at least one representative – you. This article examines today's environment and discusses ways to help you avoid creating more no-see physicians.

Appreciate your customer's busy schedule

Today's physicians have daunting schedules, filled with 15-minute appointments, double bookings, holds for patient emergencies, pharmacy callbacks, patient callbacks, charting and other administrative duties. You may believe that you compete with other representatives for a physician's time. In fact, you compete against the physician's busy schedule (see Figure 2 on the next page).

Physicians are forced to look hard at how they use their time, and where they invest it. Most physicians strive to spend more time with their patients, deliver high-quality care and get home to their families at a reasonable hour. Within this framework, they may decide to shorten lunch breaks, streamline paperwork, and reduce or eliminate time spent with you and your pharmaceutical industry colleagues.

The demands on a physician's time cause them to question the value of the role that

representatives play in their practices and, therefore, the access they allow. Your behavior can determine the degree to which physicians elect to manage, minimize or eliminate that access.

Know and follow the rules

Learning the ropes of a new office is one of the first tasks a representative undertakes. This includes understanding any rules or guidelines the office has that govern the way the physician interacts with representatives. While the implementation of highly restrictive rules is more common in hard-see or no-see offices, even the most accessible physicians are likely to have some policies on representative access.

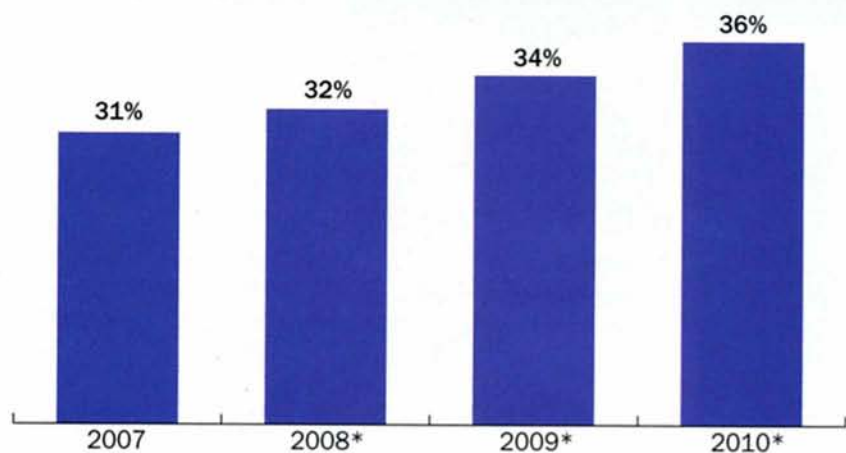
The consequences of these rules vary. Less-restrictive rules manage the circumstances of your interactions, for example, limiting them to certain days of the week or requiring lunches. The most restrictive rules may practically eliminate interactions. Figure 3 (on the next page) illustrates common rules instituted by physicians, categorized by the extent to which they restrict access.

You can begin by recognizing that restricted access is still access. Rules that *restrict* interaction still *permit* interaction. In fact, these types of rules afford all representatives the opportunity to interact with the physician. Surprisingly, our research indicates that many representatives fail to take advantage of this access. According to physicians, even though they specify days or times to call on them, many representatives are repeatedly turned away for calling outside of these periods.

Understanding the types of rules a physician uses, and working effectively within them, can improve access. For example, if Dr. Rees sees representatives between 8:00 and 10:00 AM, but sometimes falls behind schedule and only signs for samples, arriving at 7:30 AM, before he has a chance to fall behind, increases the chances that you will have a meaningful interaction when he begins seeing representatives at 8:00.

Beyond knowing the rules governing access, understanding the motives underlying these rules can actually increase your access, and help you avoid creating more no-see doctors. For example, suppose Dr. Rees only meets with representatives when they

Figure 1: Percentage of hard-see/no-see physicians



* Health Strategies Group Projection

Figure 2: Representatives need to fit into a busy day



Pharmacy callbacks



Increased paperwork



Lower reimbursements



Representative churn



More patients

8:00am	M. Jones-Physical	F. Munoz-Flu Shot
	D. Johnson-Short of breath	
	J. Irving-Nausea/fever	
9:00am	M. Hill-Foot injury	Hold for Emergency
	G. Miller-Blurred vision	
	G. Patterson-Sore throat	
	C. Bloom-Migraine	
10:00am	J. Gould-Flu shot	Hold for Emergency
	G. Roecker-Sinus symptoms	
	A. Daniels-Hand injury	
	T. Billet-Ankle sprain	
11:00am	S. Gracey-Physical	Pharmacy Callbacks
	D. Peterson-Physical	
12:00pm	Lunch	
	Patient callbacks/dictation/charting	
1:00pm	J. Peppers-Arthritis flare	
	P. Johnson-Dizziness	
	J. Hancock-Insomnia	
	R. Bobby-Panic attacks	
2:00pm	F. Barnett-Physical	Hold for Emergency
	C. Sumi-Allergies	
	C. Trybulski-GERD	
3:00pm	C. Alabaster-Rash	Hold for Emergency
	T. Gonzalex-Cold symptoms	
	F. Sanchez-Cold symptoms	Pharmacy Callbacks
	T. Ortwein-Arthritis	
4:00pm	M. Schulz-GERD	Hold for Emergency
	S. Johnstone-Flu Shot	
	J. Tritt-Cold symptoms	
	K. Rogers-Short of breath	
5:00pm	Pharmacy Callbacks	
6:00pm		
7:00pm	Dinner, L. Ristorant-Hypertension	
8:00pm		

Figure 3: Rules physicians use to manage time with representatives

Less Restrictive	Management Used to control the circumstances under which representatives may interact with physicians	I see sales representatives <ul style="list-style-type: none"> • by appointment • if they have a new product • if accompanied by higher-level managers in their company • if I contact them • on certain days of the week 	<ul style="list-style-type: none"> • at certain times of the day • when they bring lunch • if accompanied by medical science liaisons from their company • if we have a relationship I value
	Minimization Used to restrict the number or types of interactions representatives may have with physicians	<ul style="list-style-type: none"> • I will only see a set number of representatives (e.g., daily, monthly) • I limit the number of lunches and appointments sales representatives can make with me (e.g., two per year) 	<ul style="list-style-type: none"> • I sign for samples but do not engage in product discussions
	Elimination Used to stop representatives from interacting with physicians	<ul style="list-style-type: none"> • I do not see sales representatives • I do not see sales representatives, but a member of my office staff does and shares information 	<ul style="list-style-type: none"> • I do not see sales representatives, but another physician in my practice does and shares information
More Restrictive			

are accompanied by a scientific liaison or a manager. Perhaps in his experience, Dr. Rees has found that reps typically lack the education or clinical training required to conduct the type of conversation he prefers. His underlying motive is to engage in more clinically relevant discussions than he finds he can get from many representatives he meets.

Once you understand Dr. Rees' motive, you can implement tactics to address it. These tactics should be aimed at proving to Dr. Rees that you are prepared to have the meaningful, clinically relevant discussion he desires. Such tactics may include:

- Reading journals relevant to Dr. Rees' practice and seeking input from him to understand his perspective on the topics addressed
- Over-preparing for all sales calls, thereby ensuring you are organized and focused in your interactions
- Consistently supporting discussions with evidence from journals or authors Dr. Rees respects
- Interacting with office staff to learn about Dr. Rees' patient population and the treatment challenges they experience
- Arranging to meet Dr. Rees at grand rounds so he sees that you are enhancing your medical knowledge

As Dr. Rees gains confidence in your education and training, you may begin to see access improve. For example, you may wait less when visiting during "regular" hours, and may find that you can gain access at times not available to other representatives.

Understanding a physician's rules and the

motives underlying them can help you sustain and even increase access over time. As you will see below, ignoring these rules or professional standards of conduct can have a disastrous effect on all representatives' access, creating more no-see doctors.

Behave professionally

Representatives are always seeking ways to differentiate themselves, build rapport with physicians and impact their prescribing. In an effort to accomplish these goals, some representatives lose sight of the line between *creative* and *unprofessional*. Their behavior can damage their credibility and even lead a physician to eliminate further visits.

"One rep told one of my patients in the waiting room to ask for his product."

"A rep once showed up to push a sleep aid dressed in pajamas and carrying milk and cookies, disrupting the entire waiting room."

"When a rep is too pushy and doesn't honor office rules, they'll be banned."

Although you cannot control competitors' behavior, "bad apples" affect access for everyone. Our research shows that physicians who have had to ban a representative add new access rules to manage all representatives. Therefore, one representative's poor behavior will drive physicians to increase the level to which they manage their interactions with all representatives.

Summary

The next time you enter a physician's office, remember that it's their place of work and you're a guest. Numerous representatives

walk through their door every day, all seeking time to communicate the benefits of their products. Physicians implement rules to manage their demanding schedules, and knowing and following their rules allows you take advantage of the access they offer. To build competitive advantage, you must address the underlying motives for these rules.

While many factors can dictate how physicians spend their time, by applying the strategies and tactics described in this article, you can increase access and avoid creating more no-see physicians.

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