

# Selling to the “Sticks” BY MICHAEL T. FERRIS



**O**ne of the biggest challenges facing rural home care and hospice providers is having enough referrals. The principles are the same for selling and marketing home care and hospice in rural America; the stage is just smaller. Smaller markets mean less competition, but fewer patients. Salespeople working in large urban areas covet smaller markets because they wouldn't have many competitors. Those working rural areas are just the opposite; it's the case of the proverbial 'greener grass'!

Home care and hospice salespeople spend a lot of time in the car in any size market. The primary difference for rural representatives is they have longer stretches of open road between calls, and greater distances between clusters of referral sources. They must turn these into opportunities. Learning by listening to CDs on sales can help improve skills. Carry a recorder, making notes of what you think is needed to take action on later.

Because people in rural America like to do business with local companies, you must look for marketing opportunities to create a local presence. Billboards provide an inexpensive way to do this. Participation in and supporting local causes are also ways to accomplish this. To insure visibility in the community, field staff should wear name badges and uniforms. Referral sources need to understand the agency is supporting the community, that care providers live in their community, and that salespeople are visibly providing great service.

Trends show small community hospitals are closing, necessitating calls to urban medical centers and hospitals serving rural patients. This brings another group of referrals into the equation — case managers, social workers, and

those involved in the discharge process. Skilled nursing facilities are another referral source which may be located in another town, but which have patients residing in your service area. The key selling point to make is that the agency can serve all of the rural patients within the service area. Coverage area is a big competitive advantage for the rural agency. Prepare maps with a list of pharmacies within the service area. This provides the referral source with a visual aid to determine your agency does in fact serve their patients' needs. By including something of added value (a pharmacy list), you make their lives easier.

Territory management becomes an important skill set for success. Because the territory is large and sparsely populated, routing calls is critical to succeed and avoid burnout. Create geographic zones and then list all of the “A” accounts within the zone. Analyze which is the best day for the biggest accounts, and calendar accordingly. Prepare a route list of other accounts or prospects within the zone. The “A” accounts must be seen at least once a week, and others every other week or once a month. Supplement visits with phone calls to check in with the best accounts more frequently. The inside sales can support the outside sales by making outbound calls to these accounts.

This will mean account ratings must be adjusted to reflect the market. It will take a lesser number of referrals to qualify as an “A” account. The salesperson will still need to manage a top twenty or twenty-five list of “A” accounts they are visiting on a weekly basis. The key activity driving referrals will always be the number of face-to-face (F2F) meetings. An F2F is defined as a substantive conversation with a decision maker. Since there is more driving time involved, each F2F has a greater value than one in an urban area. The larger the account, the greater the value of each F2F encounter.

Since communication is an important element in determining satisfaction, the salesperson must be active in ensuring adequate, appropriate and thorough dialogue with the account occurs. For this to happen in a large territory, there must be strong communication between the agency and the outside sales rep as well. Customer relationship management (CRM) practices in rural areas will enable complete team communication with the account. If a telehealth solution is employed to manage a patient's care, then that should be part of the sales process.

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The salesperson must focus on areas that are consistent with those that the clinical department can staff. Taking every appropriate referral is central to a strong sales program. By having patient referrals in same area, the clinical department’s job is easier. Work closely with the clinical team to know where patients are and those areas where staffing is a challenge. Don’t push the bounds of what they can staff without their buy-in. This will come back to the salesperson many fold. Once an area becomes well developed, the agency can consider opening a branch office. The sales representatives can and should assist with recruiting staff in growing areas.

Management should hire salespeople who know everyone in the area, and who are perceived as being a “home town” product. They should also be committed to delivering a high level of personal service. If the salesperson makes the lives of referral sources easier, they will be successful. It is an advantage to hire a nurse who can sell in rural territories, but this should not be the primary consideration. They must still be able to perform as a top notch sales rep with or without a nursing license.


Relationships take more time to build into “A” accounts. Most rural doctors have a greater focus on patient care issues, are more hands on, and enjoy long term relationships with patients and their families. To meet their needs, the salesperson must communicate with the referral source about specific patients and their care. This will enhance your ability to establish the agency as the only logical choice for home care referrals.

Technology may actually be an easier sale to the country doctor than an urban counterpart. For example, Anodyne therapy was originally developed for use with horses. Sales representatives tell me country doctors were immediately familiar with this type of treatment, whereas most city doctors had to have the technology and theory explained to them. Telehealth is more readily accepted because the doctors can see a benefit for rural patients.

Employing needs assessment selling is essential in rural sales programs. It is the determination of the referral source’s needs, and positioning the agency’s services as the solution.

While this is the most important training for all sales, it is especially necessary for rural sales.

Most, if not all of these principles apply to selling home care and hospice in any size market.

Happy Selling and Marketing! 

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**About the Author:** *Michael Ferris, is Principal, Home Care Marketing Solutions, Chapel Hill, NC. He is the author of: “How To: Market and Deliver Legendary Service,” “Managing Home Care Sales Teams for Legendary Results,” “101 Home Care Promotional Strategies” and “The Complete Guide to Home Care Sales & Marketing for Legendary Results.” NAHC Members receive a 15% discount on these publications. Mike may be contacted at [mike@hcmarketingsolutions.com](mailto:mike@hcmarketingsolutions.com). Sign up for his free home care and hospice sales and marketing newsletter at [www.hcmarketingsolutions.com](http://www.hcmarketingsolutions.com).*