



8 Silent Objections That Will Kill a Healthcare Deal And How to Powerfully Overcome Them in Your Copy

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Most sales professionals understand the importance of overcoming buyer objections. Anticipating these objections—and knowing how to address them—can very easily determine the final outcome of a sale.

It's no different with marketing or sales copy. As prospective customers read your marketing communications, they will naturally raise objections. They will have reservations about contacting you, engaging with you, moving forward to the next step or purchasing your healthcare solutions.

In face-to-face selling, you can read a prospect's body language; you can sense when there may be concerns, questions or objections. But when writing copy, it's difficult to predict what these potential roadblocks will be. Therefore, to increase your chances of success, your copy must *anticipate* and *overcome* these objections as quickly and effectively as possible.

The good news is that most of the objections buyers raise when reading copy for healthcare products and services are fairly predictable and almost always fall into one of eight categories. Which ones you'll encounter depends on the types of products and services you're selling and where your prospect sits in the buying cycle.

Put your copy through the test. How does it address these potential buyer objections?

Objection #1: “We Don't Need Your Solution”

This objection usually arises when prospects have “latent” pain. That is, they have a problem but don't know it, or have a problem but don't know a solution exists.

To overcome this, your copy needs to help the prospect understand the nature of the problem you help to solve, its severity and how your solution and services can solve this problem. You then want to create an appropriate call to action so that those who identify with that pain—and want to find out more—can “raise their hands” and identify themselves to you.

This objection can also come up when you don't clearly identify with the prospect's key business drivers and issues. For example, if your audience (or part of the evaluation team) includes C-level executives, you need to ask yourself: Does the copy address issues such as ROI, cost savings, revenue improvements, productivity, risk mitigation or customer retention? Does it address the major issues they're currently facing, such as regulatory compliance, security threats, or disaster recovery?

Each influencer in an evaluation team will have his or her own set of critical issues and concerns. To succeed, your materials must connect with each of these groups by proving how your healthcare solution effectively impacts these core issues.

Objection #2: “We Don’t Have a Budget for This” (Or ... “We Can’t Afford Your Product Right Now”)

The classic “budget objection,” although sometimes legitimate, is often a symptom of the copy’s inability to identify a pressing problem and offer a viable solution—especially when the product is unknown and still in the “early adoption” phase of the cycle.

An impressive Web site or collateral won’t save you here. Instead, you must show prospects what your product will do for them by bringing out the pain, agitating it, offering a solution (your product), demonstrating its *value* and reducing any perceived risk in the solution’s investment. It’s also helpful to show how you’ve helped similar companies or individuals effectively solve similar problems.

When appropriate, showing how the problem could worsen (if it’s ignored) can be a very compelling way to initially overcome the budget issue.

Objection #3: “I Don’t Think It Will Work for Us”

Does your healthcare product force users to substantially change their habits or behaviors? Is the implementation seen as painful, costly and frustrating? Does it typically cause great disruption?

If so, you understand the kind of resistance you can expect. This objection typically surfaces later in the buying cycle when **fear** starts rearing its ugly head. The prospect wonders if the solution will work, how long it will take to implement, whether the implementation will be successful and whether the prospect has considered all the risks.

In these situations, case studies and testimonials can help overcome these natural concerns if they’re properly written and relevant to the prospect. Make sure that they provide sufficient evidence as to how you’ve been able to help similar companies overcome these obstacles with minimal disruption and frustration.

Objection #4: “I Don’t Believe Your Claims” (Or ... “I Don’t Trust You”)

Are you supporting your claims with substantial proof? Check your copy for hyperbole or unnecessary “chest-beating.” Make sure you’re not making claims or statements that aren’t properly supported or explained (specificity sells!). Also, make sure they’re believable and are focused on your prospect’s key issues and concerns.

Powerful tools to make your claims more convincing include:

- Analyst commentary

- Third-party endorsements
- Independent test results
- Awards
- Customer lists
- Customer testimonials
- Case studies
- News and press releases
- Partnerships and alliances
- Track record (financial performance, reviews, years in business, growth rate)
- Company leadership

Objection #5: “Who Are You and Why Haven’t I Heard of You?”

Younger healthcare companies—or those with products in the “early adoption” phase—come across this objection frequently.

This is another issue of trust, as in Objection #4 above, and needs to be overcome if you want to be taken seriously. Put yourself in your prospect’s shoes, and think of ways you can overcome their fears of making the wrong decisions.

No one wants to bet a career on your product! How can you prove you’re not a fly-by-night operation? How can you assure your prospect that you’ll be around to support, upgrade or customize the product in the future? Again, reference the bulleted list of ideas above.

Objection #6: “You’re Not the Market Leader”

This is fear in its purest form. However, market leader or not, here’s what truly matters in the end:

Are you identifying with your prospect’s problems? Are you demonstrating your competence, expertise and track record in solving these kinds of problems?

Are you providing them with compelling case studies that show how you’ve helped *similar* companies and individuals in *similar* situations solve similar problems?

Sure, many prospects will only feel comfortable talking to the market leader. *But what can you do better than the “big guy”?* What is your value proposition? How can you leverage your size? Are you more responsive, receptive or nimble? What other attributes (besides size) make you a better fit?

Let them know. Prove it. The days of “nobody ever got fired for buying IBM” are over!

Objection #7: “We Don’t Have the Time”

A company’s short- or medium-term healthcare plans simply may not include replacement of major medical devices (if that’s what you’re selling).

This same objection also comes up when you’re proposing a healthcare product or supplement your prospects have never heard about, or when you’re bringing up a problem they didn’t even know they had. Have you anticipated this common roadblock in your copy?

Consider the following questions:

- Are you clear about the problems you help to solve and how you solve them?
- Are you presenting the problem as being useful, important or urgent? (Obviously, important or urgent problems have the highest probability of starting a sales cycle.)
- Are you specific about the kind of value the prospect can expect?
- How are you supporting your ROI claims?
- In direct mail and e-mail campaigns, are you getting right to the point? Do you quickly state a problem that you help to solve and describe how you solve it?
- Do you have a good white paper or report that helps explain your value proposition? This is one of the best ways to educate the market on the value of your solution. It’s a critical piece in many healthcare buying processes.
- Are you building credibility through some of the suggestions listed earlier?
- Are you framing your message in an interesting, benefit-oriented manner?
- Is your copy clear, specific and full of benefits that matter to your prospect?
- Are you speaking your prospect’s language? Do you understand what makes them tick? What keeps them awake at night?

Objection #8: “I Don’t Understand What You Do”

Healthcare companies are often the target of this comment. In an effort to sound unique, innovative and cutting-edge, some of their copy can end up being more confusing than informative.

You wouldn’t want to oversimplify your value proposition, but make sure your copy speaks the prospect’s language. Make sure you clearly explain what you do, for whom you do it and why you’re better or different (stated in a prospect centered way).

Remember this: Your prospects’ main concern is to find solutions to their problems. Therefore, know what those problems are and let your prospects clearly know how you can help to solve them.

Conclusion

It's always easier to write stellar copy when you're the undisputed industry leader, or when your product helps to solve an urgent problem that few others are addressing, or when your products are already well understood by your prospects.

But most of us are not in that enviable position. And because marketing materials are often responsible for generating the initial prospect inquiry, the message they communicate will often determine your overall level of success.

Make sure these materials are as good at anticipating and overcoming objections as your top salespeople are.

About John Emmanuel

John Emmanuel helps healthcare companies write direct-response pieces that feed pipelines and drive revenue. John's focus on producing results oriented copy stems from a successful sixteen-year career in the health and wellness industry.

He has written successful copy for healthcare companies such as Healthy Back Institute, Harvard Medical School, Belvoir Media Group, SmileSteps.com, Maudsley Hospital, Bethlem Hospital and Guys Hospital—as well as for firms in other industries such as LotusHR, IFA at Positive Solution, Remax and Chrispel Media.

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