



Just Say 'No' to Cold Calls

■ FRANK H. LEONE, MBA, MPH

In sales, the term “cold call” may mean different things to different people. I define a cold call as an unannounced visit to a prospect company, whether the intention is to seek an unscheduled meeting or to drop off literature and/or gifts.

I do not consider an initial telephone call a cold call, presuming it follows an introductory letter and/or email correspondence advising the prospect of the impending call.

Consider the following, and the negatives associated with unexpected drop-ins:

1. *Sometimes cold calls do, in fact, work.* Put me in a major league baseball uniform and I might get a hit or two just by swinging. The same is true with cold calls; they work just often enough to keep you coming back.
2. *It's a heck of a way to make a first impression.* Do you have a well-meaning neighbor or friend who frequently knocks on your door unannounced? It's OK sometimes, but a bit annoying when you are engrossed in another matter.
So it is with cold-calling; as often as not, the prospect not only spurns the sales advance but also finds it annoying. Sales is about developing relationships, not dooming them from the start.
3. *A face-to-face cold call is not necessarily a victory.* Even if you do get in the door for an impromptu meeting, that meeting might not occur within the prospect's time comfort zone.
Every in-person meeting should be dictated by the prospect's schedule, not the sales professional's schedule.
4. *Don't toss preparation to the wind.* Reviewing a prospect's website prior to a cold call is not appropriate preparation.



Frank Leone is president and CEO of RYAN Associates and executive director of the National Association of Occupational Health Professionals. Mr. Leone is the author of numerous sales and marketing texts and periodicals, and has considerable experience training medical professionals on sales and marketing techniques. E-mail him at fleone@naohp.com.

When you use the real sales cycle (letter—phone call—reminder—appointment—follow-up), you are increasing the odds of walking in better prepared. For example, a scheduled in-person call can be preceded 24 hours in advance by a call from clinic management to set the stage for the sales professional's call. You can't create such an edge during a cold call.

5. *Time is money.* A sales professional's most valuable commodity is time; an hour saved is an hour earned for more targeted and planned sales calls. Time spent doing one or more personal cold calls involves round-trip auto travel, parking, and waiting time. Two hours of unproductive cold-call time can easily be converted to two hours of active telephone time from the comfort of your office.
6. *Forget the "leave them some literature" myth.* Even in conjunction with an unsuccessful sales call, you have the opportunity to leave literature behind for the prospect to review. Thus, the thinking goes, even if you don't get a face-to-face meeting, you can connect with the prospect by leaving something behind.
Literature or brochures, however, are invariably discarded. If someone left behind literature at my office, for example, I would consider it a negative. It would strike me as an impersonal, even desperate move, and I would be less, not more, inclined to welcome overtures in the future.
At times, prospects actually suggest that they would prefer to receive literature from a program as a first step. However, this approach is likely to be counter-productive. As the saying goes, “Watch what they do, not what they say.” The odds are very high that said literature will never be reviewed and that such a request is but a way to defer the sales professional.

Are there times and/or circumstances when a cold call can be justified? Sure. When it comes to sales and marketing, nothing is set in concrete.

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CODING Q & A

Table 3. New Codes Related to Cognitive Abnormalities

ICD-9 Code	Description of Cognitive Abnormalities
799.51	Attention or concentration deficit
799.52	Cognitive communication deficit
799.53	Visuospatial deficit
799.54	Psychomotor deficit
799.55	Frontal lobe and executive function deficit
799.59	Other signs and symptoms involving cognition

Table 4. New Codes Related to Disorders of Defecation

ICD-9 Code	Defecation Disorder
787.60	Full incontinence of feces
787.61	Incomplete defecation
787.62	Fecal smearing
787.63	Fecal urgency
560.32	Fecal impaction

Table 5. New Codes Related to Obesity

ICD-9 Code	Degree of Morbid Obesity
V85.41	Body Mass Index 40.0-44.9, adult
V85.42	Body Mass Index 45.0-49.9, adult
V85.43	Body Mass Index 50.0-59.9, adult
V85.44	Body Mass Index 60.0-69.9, adult
V85.45	Body Mass Index 70 and over, adult

- The code **V25.1** for insertion of an intrauterine contraceptive device is now *invalid*.
- Continue reporting code **V25.42** for routine checking of intrauterine contraceptive device.

■ **New codes for cognitive abnormalities:** The new codes detailed in **Table 3** allow physicians to better specify types of cognitive deficits.

■ **New codes for lumbar spinal stenosis:** Physicians can now use different codes for spinal stenosis to differentiate between patients with and those without neurogenic claudication:

- **724.02** Spinal stenosis, lumbar region, without neurogenic claudication
- **724.03** Spinal stenosis, lumbar region, with neurogenic claudication

■ **New code for disorders of defecation:** Codes in the **787.6 series** have been added to specify disorders of defecation (**Table 4**). Code **560.39** (Other impaction of intestine) is still valid, but should no longer be used to code for a diagnosis of fecal impaction.

■ **Codes related to Obesity.** New **V85.4 series (Table 5)** codes allow physicians to classify levels of morbid obesity by body mass index.

A related new code (**278.03**) indicates the diagnosis of *obesity hypoventilation syndrome*.

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OCCUPATIONAL MEDICINE

There are marked downsides to engaging in such exceptions, however.

Think of a recovering alcoholic; he might take a drink at some point, thinking, “What’s one drink?” But that drink is likely to lead to a “just one more can’t hurt” mentality and, in short order, the alcoholic falls off the wagon.

In sales, one exception leads to two, then three, and soon to a return to the bad old habit of sequential cold calls.

I met recently with an experienced sales professional whose sales plan overwhelmingly centered around cold

calls. When I raised my concern, she countered by telling me that she had worked her comparatively small market for 11 years with a previous employer, and knew most of the key contacts in her community. If there were ever an exception to the in-person, no-cold-call rule, this was it. Yet, all in all, I believe she could have leveraged her name and personal relationships just as effectively from her office.

Respect your prospect’s time, above all. Cold calls fall short in this respect. ■