Vision Care Direct
Objection Handling Masterclass
Training Tutorial with Post-Study Assessment & Answer Key

This training tutorial is designed to help Vision Care Direct Sales Directors confidently handle objections through trust-based communication, emotional intelligence, active listening, and consultative problem-solving.

SECTION 1 — UNDERSTANDING OBJECTIONS

Objections are not necessarily rejection. In many cases, objections are signs of concern, uncertainty, fear, confusion, or interest.

Strong Sales Directors understand that objections often indicate a stakeholder is engaged and evaluating risk.

The goal is not to overpower objections, but to understand, validate, and address them professionally.

SECTION 2 — COMMON TYPES OF OBJECTIONS

- Price objections
- Timing objections
- Trust objections
- Administrative concern objections
- Network/provider objections
- Fear of disruption
- Employee satisfaction concerns
- Decision-making delay objections

SECTION 3 — THE VCD OBJECTION HANDLING PHILOSOPHY

- Listen before responding
- Validate concerns without becoming defensive
- Ask clarifying questions
- Respond consultatively instead of aggressively
- Focus on understanding rather than winning
- Maintain professionalism and emotional control

SECTION 4 — THE VCD OBJECTION HANDLING FRAMEWORK

Step 1 — Listen Fully: Do not interrupt or rush to answer.

Step 2 — Validate the Concern: Acknowledge the stakeholder’s perspective.

Step 3 — Clarify the Real Issue: Ask thoughtful follow-up questions.

Step 4 — Respond Thoughtfully: Address the concern calmly and professionally.

Step 5 — Confirm Understanding: Ensure the stakeholder feels heard and supported.

SECTION 5 — EXAMPLES OF TRUST-BASED RESPONSES

Price Objection: Stakeholder: 'Your plan costs more than what we have now.'
Response: 'I completely understand why cost is important. Beyond pricing alone, what areas are most important for your organization when evaluating overall value?'

Timing Objection: Stakeholder: 'We're not ready to make changes yet.'
Response: 'Completely understandable. What concerns or timing factors are most important for your team right now?'

Trust Objection: Stakeholder: 'We've heard promises from carriers before.'
Response: 'I can completely understand why you'd feel cautious after those experiences.'

Administrative Concern: Stakeholder: 'Our HR team is already overwhelmed.'
Response: 'It sounds like minimizing disruption and administrative burden is extremely important for your organization.'

SECTION 6 — QUESTIONS THAT HELP UNCOVER THE REAL OBJECTION

- Can you tell me more about that concern?
- What specifically worries you most about that?
- How long has that been a concern for your organization?
- What would ideal improvement look like from your perspective?
- What would help you feel more comfortable moving forward?

SECTION 7 — MISTAKES TO AVOID

- Interrupting
- Becoming defensive
- Talking too much
- Arguing with stakeholders
- Attacking competitors
- Using pressure tactics
- Overpromising
- Rushing into presentations

SECTION 8 — THE ROLE OF EMOTIONAL INTELLIGENCE

Strong objection handling requires emotional intelligence. Sales Directors should recognize frustration, fear, skepticism, or uncertainty and respond with empathy and professionalism.

SECTION 9 — MOST IMPORTANT TRAINING PRINCIPLE

The stakeholder should feel understood before they feel persuaded. That is the foundation of effective objection handling at Vision Care Direct.

Objection Handling- Most Frequent

Broker Objection

“**We already have a vision plan.”**

Response:
“Most employers do. The real question is whether their current plan is creating loyalty, provider satisfaction, and meaningful employee value.”

“Your Rates are too high versus VSP, EyeMed etc.”

WHY THEY ARE REALLY SAYING THIS:
The prospect is usually not saying the vision plan costs too much.

They are asking:
• Why should I pay more?
• What additional value am I receiving?
• How do I justify this decision?

POOR RESPONSE:
"Our plan is better."
This creates an argument.

RECOMMENDED RESPONSE:
"I completely understand. Cost is an important consideration for every employer.
Out of curiosity, when evaluating benefits, do you typically focus only on the monthly premium, or do you also consider employee satisfaction, utilization, provider access, customer service, and the overall value employees receive when they actually use the benefit?"

(Allow them to answer.)

"Many organizations find that the lowest monthly premium doesn't necessarily create the best employee experience or the lowest overall cost at the point of service.
Vision Care Direct was built differently. We focus on provider choice, independent doctor relationships, personalized service, preventive eye health, and helping employees receive meaningful value when they use the plan. For many employers, those factors outweigh a small difference in monthly premium. When you consider cost at time of service our overall annul costs to the employee often are lower"

TRANSITION QUESTION:
"What would you consider more important: saving a few cents per employee per month or offering a benefit that employees genuinely value and use?"

"WE DON'T MAKE BENEFIT CHANGES MID-YEAR."

WHY THEY ARE REALLY SAYING THIS:

This is often not a rejection.

It is simply a timing objection.

POOR RESPONSE:
"Can you make an exception?"
This creates resistance.

RECOMMENDED RESPONSE:
"That makes complete sense. Most organizations prefer to review benefits during their normal renewal cycle. I'm not necessarily asking you to make a change today.
What I'd like to do is understand your current situation, learn what is working well, identify any areas where you would like to see improvement, and determine whether it makes sense for us to have a conversation before your next renewal."

(Allow them to respond.)
"If there may be an opportunity to improve employee satisfaction, provider access, service, or overall value, would it be worthwhile to schedule a brief review several months before your renewal so you have time to evaluate your options?"

TRANSITION QUESTION:
"When is your next benefits renewal date?"

"WE'VE NEVER HEARD OF VISION CARE DIRECT."

WHY THEY ARE REALLY SAYING THIS:
This objection usually means:
• Help me reduce my perceived risk.
• Prove credibility.
• Show me that others trust you.

POOR RESPONSE:
"Well, we've been around a long time."
This sounds defensive.

RECOMMENDED RESPONSE:
"That's actually very common, especially outside of our core markets.
Vision Care Direct has been serving employers, employees, and independent eye care providers for more than two decades. We are a doctor-owned organization that was created specifically to offer a more provider-friendly and patient-focused alternative to traditional vision plans.

Many of our growth opportunities come from referrals from brokers, employers, and providers who appreciate having another option besides the large national carriers."
(If appropriate)

We currently serve thousands of members across multiple states and maintain relationships with independent eye care providers who share our commitment to quality care and patient choice. If you'd like to hear from some of our current groups, I'd be happy to provide a few references."

TRANSITION QUESTION:
"What would you normally look for when evaluating a benefits partner you've not worked with before?"

Employer Objections- (see broker objections above)

" Your rates are higher than your competitors."

Response:
"Vision plans are often one of the most visible and appreciated benefits employees use every year. Our plans create real value and when you look at cost at time of service, often our plans are less expensive overall. "

Provider Objections

This is one of the most important sections of your Provider Relationship Excellence and Objection Handling training because these objections are rarely about the actual question being asked.

The provider is often expressing one of four underlying concerns:
Profitability ("Will I make money?")
Workload ("Will this create more headaches?")
Trust ("Are you just another vision plan?")
Risk ("What if I join and nothing happens?")

The goal is not to "overcome" the objection.

The goal is to:

- educate
- clarify,
- create understanding,
- and allow the provider to reach their own conclusion.

OBJECTION #1
"I already have too many vision plan patients. I don't want another vision plan."
What They're Really Saying

Often this means:" I am frustrated with low reimbursements."
Or
"I am tired of plans that create more work than profit."
Or
"My schedule is already full."

Recommended Response

"I completely understand. We hear that frequently from doctors who have spent years dealing with plans that create a lot of work without generating much value for the practice.

One thing that makes VCD different is that we're not trying to become another high-volume, low-profit vision plan.

Our goal is to create a better relationship between patients, providers, employers, and the benefit plan.

In fact, many providers find that VCD patients are more profitable than patients from traditional vision plans because they maintain greater flexibility in how they manage their practice and optical.

Before making any decisions, I'd love to understand what specifically has created frustration with other plans so we can determine whether VCD would create the same concerns or address them."

Follow-Up Question

"When you say you already have too many vision plan patients, is your biggest concern reimbursement, administrative burden, retail competition, or something else?"

This uncovers the real objection.

OBJECTION #2
"VCD doesn't pay enough."
What They're Really Saying

This objection deserves respect.
Do not argue.
Many providers compare:
exam reimbursement only and ignore total patient value.

Recommended Response

"That's a fair concern, and I appreciate you bringing it up.

Most providers naturally look at the exam reimbursement first because it's the easiest number to compare, the good news on that front is that our exam reimbursement is typically the highest in the industry, especially for PLUS providers.

What we've found, however, is that the profitability of a patient is determined by much more than the exam fee alone.

The real question is:

'What is the total financial value of the patient relationship?'

When providers evaluate VCD, we encourage them to consider:

- optical revenue,
- lens upgrades,
- patient retention,
- practice autonomy,
- administrative simplicity,
- and overall profitability.

Other important differentiators between VCD and the other plans include:

- You choose what lab to use
- You decide what lenses to dispense
- You have the choice of what covered progressive is offered
- We never steer patients to company owned retail outlets because we don’t have them
- We’ll teach you how to maximize profitability and grow both unit sales and margins

Strong Educational Follow-Up

"Would it be helpful if we reviewed your current vision plan mix and identified where you may actually be losing profit today?"

This positions VCD as a consultant.

Staff Version

For office managers:
"One thing we often discover is that staff members are working incredibly hard to process plans that don't necessarily produce the best financial outcome for the practice.

Sometimes improving profitability isn't about seeing more patients—it's about seeing the right patients."

OBJECTION #3
"How many lives do you have? When you get more lives, I'll join."
What They're Really Saying

"I don't want to take the risk first or go to additional effort if I’m not going to see patients."

Recommended Response
"I completely understand that perspective.
Every provider wants to know there will be patients available before making a commitment.
The challenge is that employers and brokers ask us the exact opposite question:
'Do you have enough providers in this area?'

To successfully grow membership in a market, we need both providers and lives.
In reality, providers are one of the key reasons employers choose a plan in the first place. If you’re not on the panel it makes it harder for us to bring you better paying vision plan patients"

Educational Explanation

"Think about it this way:

If we have no providers, employers won't buy the plan.

If employers don't buy the plan, there are no lives.

It becomes a chicken-and-egg situation.

That's why our most successful markets are usually built by a group of forward-thinking providers who help establish the network first."

Strong Value Statement

"The good news is that every time VCD replaces a traditional vision plan in a group, providers generally receive a more profitable patient than they had before.

In many cases, replacing a traditional plan with VCD effectively gives providers a raise on the patients they are already seeing."

That statement is powerful and it's the truth.

Follow-Up Question

"If we were able to demonstrate growth potential in this market, would you be open to revisiting participation?"

OBJECTION #4

"I don't want to be a PLUS provider because you force me to give AR and progressives."

First Rule Never say:

"No we don't."

Instead, educate.

Recommended Response

"I appreciate you bringing that up because there are a lot of misconceptions about the PLUS program. The goal of PLUS is not to force providers to give anything away. The goal is to create a patient experience that encourages members to choose PLUS providers over standard providers."

Educational Explanation

"The most important thing to understand is that PLUS providers typically:

- see more VCD patients,
- generate higher optical utilization,
- sell more premium products,
- and often achieve greater overall profitability than standard providers.

That's why so many PLUS practices are some of our happiest providers.

Strong Profitability Discussion

"When we analyze practices participating in PLUS, we often find that the additional patient volume, increased conversion rates, and stronger optical sales more than offset the cost of the PLUS enhancements.
In most cases, PLUS providers make more money—not less."

Business Consultant Approach
"Rather than focusing on the cost of AR or progressives alone, we encourage providers to evaluate:

- total revenue per patient,
- total profit per patient,
- capture rate,
- premium lens utilization,
- and patient retention.

That's where the real story usually appears."

Staff-Oriented Explanation
For office managers:

"Many office managers tell us that PLUS actually makes patient conversations easier because patients feel they're receiving additional value.

That often leads to:

- higher patient satisfaction,
- fewer pricing objections,
- stronger optical conversion,
- and better patient retention."

THE VCD CONSULTING DIFFERENTIATOR

This may be the most powerful response of all.

Most vision plans offer:

- a contract,
- a fee schedule,
- and a promise of seeing vision plan patients.

VCD can offer something far more valuable.

Suggested Language
"When you're a VCD provider, one thing we'd love the opportunity to do is help your practice become more successful. We regularly provide complimentary consulting and practice-development support to providers.

We can help evaluate:

- profitability,
- optical performance,
- patient retention,
- staff communication,
- workflow,
- premium lens utilization,
- and opportunities for growth.

Our philosophy is simple:
When independent practices succeed, patients receive better care, providers thrive, and our entire network becomes stronger."

Closing Statement for Providers

This is the statement I would train every VCD representative to use:
"We're not asking you to become another provider on another vision panel.
We're asking you to consider becoming part of a doctor-owned organization that is actively trying to create a better experience for independent practices, staff, patients, employers, and providers.

Whether you join today, six months from now, or never, we'd welcome the opportunity to learn more about your practice and see if there are ways we can help you become even more successful."

That response is difficult to argue with because it is respectful, educational, relationship-focused, and completely aligned with the VCD mission.

Post-Study Assessment (Google Forms Ready)

Recommended Google Forms Settings:
- Enable Quiz Mode
- Assign 1 point per question
- Shuffle answer choices
- Require responses
- Collect participant email addresses

1. What are objections often signs of?

- A. Immediate rejection
- B. Engagement and concern
- C. Contract approval
- D. Administrative completion

2. What is the first step in the VCD Objection Handling Framework?

- A. Respond immediately
- B. Present pricing
- C. Listen fully
- D. Close the sale

3. Which of the following is a common objection type?

- A. Timing objections
- B. Trust objections
- C. Administrative concerns
- D. All of the above

4. According to VCD philosophy, how should Sales Directors respond to objections?

- A. Aggressively
- B. Defensively
- C. Consultatively
- D. Competitively

5. Why is validating concerns important?

- A. It lowers defensiveness
- B. It builds trust
- C. It shows empathy
- D. All of the above

6. Which response best demonstrates trust-based objection handling?

- A. 'Our plan is better than theirs.'

- B. 'That sounds like a very reasonable concern.'
- C. 'You shouldn’t feel that way.'
- D. 'You need to decide today.'

7. What should Sales Directors avoid during objection handling?

- A. Clarifying questions
- B. Active listening
- C. Attacking competitors
- D. Emotional intelligence

8. Why do Sales Directors ask follow-up questions?

- A. To uncover the real concern
- B. To pressure stakeholders
- C. To shorten meetings
- D. To avoid listening

9. What role does emotional intelligence play in objection handling?

- A. It helps identify and respond to emotions professionally
- B. It increases pricing leverage
- C. It shortens presentations
- D. It eliminates objections

10. What is the most important principle in this training?

- A. Stakeholders should feel pressured
- B. Stakeholders should feel understood before persuaded
- C. Stakeholders should avoid questions
- D. Stakeholders should focus only on price

Answer Key & Simplified Grading Guide

Question	Correct Answer	Learning Focus
1	B	Understanding objections
2	C	Framework steps
3	D	Types of objections
4	C	Consultative communication
5	D	Validation and trust
6	B	Trust-based responses
7	C	Mistakes to avoid
8	A	Clarifying questions
9	A	Emotional intelligence
10	B	Core philosophy

Recommended Passing Score: 8 out of 10 correct answers (80%)

Instructor Coaching Notes

- Practice objection handling through roleplay exercises.
- Focus heavily on emotional intelligence and active listening.
- Train Sales Directors to pause before responding.
- Coach reps to validate emotions before presenting solutions.