RevRx AI Consulting

MEDTECH ACCESS GUIDE

IDN and GPO Strategy Playbook

Physicians can want your device. The system still has to buy it.

For MedTech leaders who need system-level access, not one hospital at a time.

Map — Choose a path — Find decision makers — Value story — Contract — Pull-through

Physician Demand Is Not a Purchase Order

A physician who wants your device is a great start. But in a health system, the decision moves through several groups before anyone can place an order.

1. **Physician interest**
2. **Value analysis**
3. **Supply chain and contract**
4. **Purchasing setup**
5. **First order**

GPO

GROUP PURCHASING ORGANIZATION

Negotiates contracts that many hospitals and systems can buy through.

IDN

INTEGRATED DELIVERY NETWORK

A health system with several hospitals and sites that often makes buying decisions at the system level.

Local agreement

A contract made directly with one system or facility, outside a GPO contract.

Letter of access

A short agreement that lets a facility buy from you under agreed terms without a full contract. Terms vary by system, so confirm them with supply chain.

Know the path to an order before you spend months on clinical interest.

COPY THIS PROMPT INTO YOUR AI TOOL. FILL IN THE BRACKETS.

Explain how **[health system type]** typically decides to buy a new **[device category]**. List the groups involved, from physician interest to first order, and what each group needs to say yes. Mark anything that varies by system so I know what to confirm with the account.

Know the System Before You Walk In

Map each target system before the first meeting. Fill in what you know and mark what you need to find out.

HEALTH SYSTEM	NUMBER OF HOSPITALS	GPO AFFILIATION	VALUE ANALYSIS (SYSTEM OR LOCAL)	CURRENT VENDOR IN YOUR CATEGORY	THEIR CONTRACT RENEWAL DATE	KNOWN PHYSICIAN CHAMPION

TIP **A competitor's contract renewal date is often your best opening. Find it early.**

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Using only public sources, summarize what is known about **[health system name]**: number of hospitals, locations, service lines related to **[device category]**, and any public information on how they buy. List what I should confirm directly with the account. Do not guess at their GPO affiliation or contract terms.

Three Ways In

Every system has a way to buy. Your job is to find the one that fits your device, your stage, and their rules.

	GPO CONTRACT	LOCAL AGREEMENT	LETTER OF ACCESS
What it is	Your device is on a contract many systems can use	A direct contract with one system	A short agreement that lets a facility buy without a full contract
When it fits	You need reach across many systems	The system wants to move before a GPO contract exists	You need to start with one facility or a pilot
What to confirm	Your tier, pricing, and which members can use it	Who signs, the term, and pricing for sister facilities	Whether the system allows it, and for how long

● **Some GPOs have programs for new technology. Ask about them early.**

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Act as a national accounts advisor. For **[device]** in **[care setting]**, map the likely contract paths into **[health system type]**: GPO, local agreement, or letter of access. List what to confirm with the account. Do not invent contract terms.

Sell to the System, Not Just the Surgeon

System decisions need people at two levels: the system and each facility. Know who matters at both.

System level

Supply chain leader
cost, contract fit, standardization

System value analysis
evidence, safety, total cost

Service line leader
outcomes, growth, physician alignment

Finance
budget impact, reimbursement

Chief medical or nursing officer
quality and workflow

Facility level

Physician champion
clinical results and ease of use

Department or procedure area manager
workflow and staff training

Local value analysis
fit with local needs

Materials manager
item setup and ordering

Who owns each relationship

ROLE	WHAT THEY NEED FROM YOU	OUR OWNER
Supply chain leader		
System value analysis		
Service line leader		
Finance		
Physician champion		

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For [device] at [health system type], list the system-level and facility-level stakeholders likely involved in a purchase decision. For each one, list what they care about, what they will ask us, and what we should bring to the first meeting. Do not assume titles; mark roles that vary by system.

A System Buys a Different Story Than a Hospital

One hospital asks, “Will this work here?” A system asks, “Will this work everywhere, and what does it do to our total cost?”

HOSPITAL STORY

one physician, one department, one budget, local results.

▶

SYSTEM STORY

many sites, standard care, total cost, results that repeat across facilities.

Value story builder

Clinical

What outcomes does your evidence support? Where has it been shown?

Operational

How does it affect time, staff, and workflow across sites?

Financial

What is the budget impact for the system? How does reimbursement work?

Strategic

How does it support the system’s goals, such as growing a service line, standardizing care, or keeping patients in the system?

Use only claims you can back with evidence. Systems will check.

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Help me build a system value story for **[device]** at **[health system type]**. Organize it into clinical, operational, financial, and strategic value. Use only these facts and evidence: **[paste]**. Mark any claim that needs a source before we use it with a system.

Be Ready Before the Contract Window Opens

Contracts open on the system's schedule, not yours. Be ready when the window opens.

Have this ready

- [ ] Evidence summary for value analysis
- [ ] System value story (page 6)
- [ ] Pricing tiers and how they change with volume
- [ ] Pricing for sister facilities
- [ ] Plan for training and support across sites
- [ ] Plan for converting from the current vendor
- [ ] A named champion inside the system

Terms to discuss

- Contract length
- Pricing by tier or volume
- Which facilities are included
- Training and support you will provide
- How and when you will review results together

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Help me prepare for a contract discussion with **[health system type]** for **[device]**. List what we should have ready, the terms they are likely to raise, and questions we should ask them. Use customer-friendly language. Do not invent pricing, fees, or contract terms.

A Contract Is a Hunting License

A signed contract does not mean orders. Every facility still has to set up the item, name a champion, and run the first case.

FACILITY	ITEM SET UP IN PURCHASING	CHAMPION NAMED	FIRST CASE DATE	USAGE TREND	OWNER
	☐ Yes ☐ No	☐ Yes ☐ No		☐ Up ☐ Flat ☐ Down	
	☐ Yes ☐ No	☐ Yes ☐ No		☐ Up ☐ Flat ☐ Down	
	☐ Yes ☐ No	☐ Yes ☐ No		☐ Up ☐ Flat ☐ Down	
	☐ Yes ☐ No	☐ Yes ☐ No		☐ Up ☐ Flat ☐ Down	
	☐ Yes ☐ No	☐ Yes ☐ No		☐ Up ☐ Flat ☐ Down	

Three rules for pull-through

1
Start with the facility that has the strongest champion.

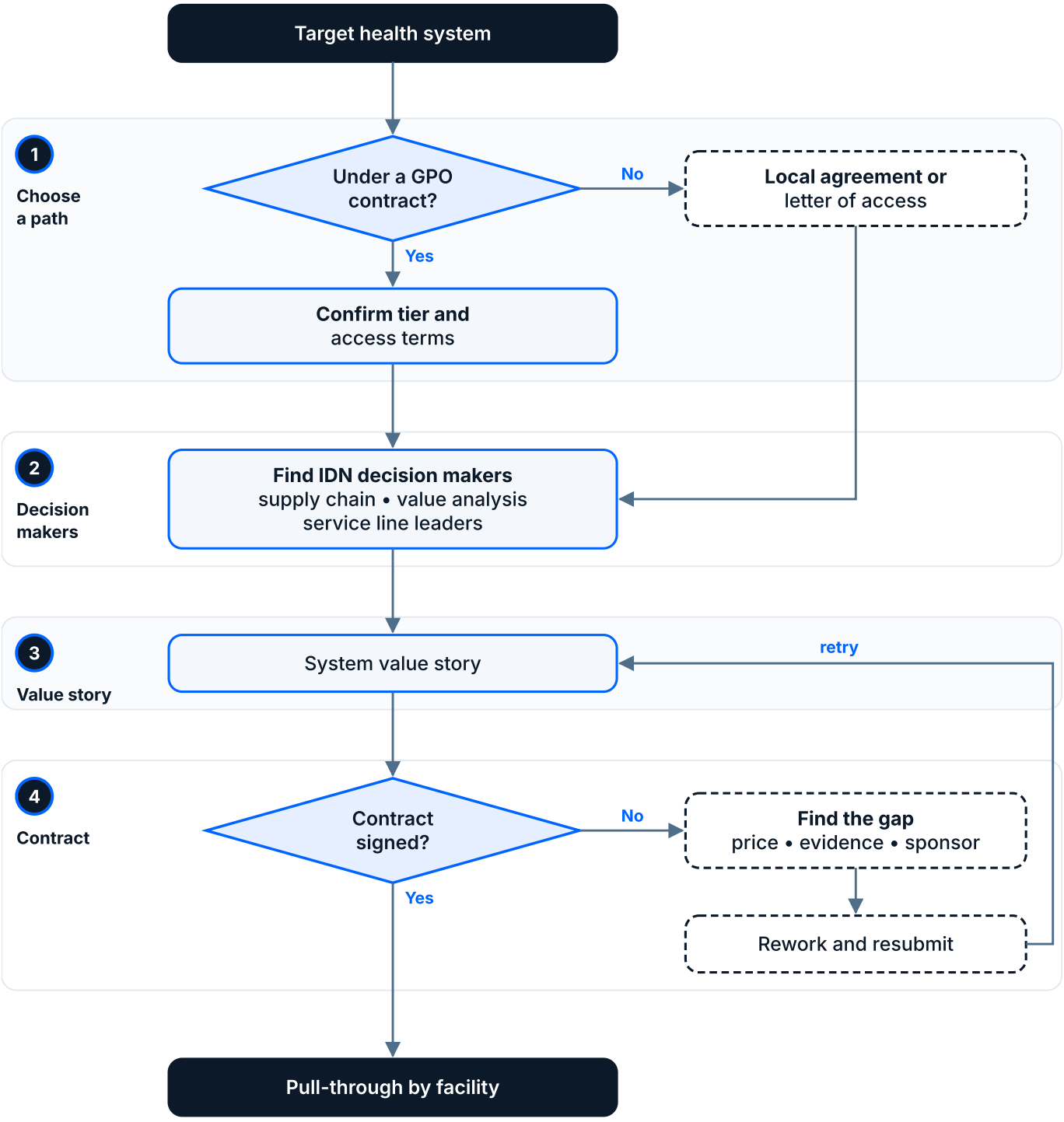
2
Share results from the first site with the next one.

3
Review the tracker with the system every **[month or quarter]**.

COPY THIS PROMPT INTO YOUR AI TOOL. FILL IN THE BRACKETS.

Create an IDN account plan template for **[device]** with stakeholders, contract status, system value story, pull-through steps by facility, owners, and review cadence.

From Target System to Orders at Every Facility



Solid boxes are the main path. Dashed boxes are where you stop and fix before moving on.

09 | NEXT STEP

Find Where Your System Access Stalls

RevRx AI helps MedTech teams win system-level access and turn contracts into orders.

STEP 1

Take the Revenue Friction Scorecard

Answer a few short questions and see where friction is slowing your revenue path.

Take the Revenue Friction Scorecard

revrxai.com/medtech-tools

STEP 2

Book a Discovery Call

A 30-minute call to walk through your health system strategy and where it stalls.

Book a Discovery Call

https://api.revrxai.com/widget/bookings/30-minute-meeting-with-terryrovrku

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