



CHALLENGE 10

Measuring Pipeline Activity Instead of Commercial Readiness

Part of the Provider-Informed Field Guide

Whose Lens Is Your Health IT Go-to-Market Strategy Built Through?

"A healthy pipeline is a collection of buyers demonstrating evidence that they are moving toward a decision."



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A practical chapter for Health IT founders, revenue leaders, and commercial teams selling to hospitals and health systems.

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THE CORE IDEA

Pipeline Activity and Buyer Progress Are Not the Same Thing

A Health IT company can have a large pipeline, a busy sales team, frequent demos, positive prospect feedback, and a growing number of proposals—and still have very little predictable revenue.

A meeting happened. A demo was completed. A proposal was sent. A pilot is being discussed. The prospect said they liked the solution. Those are useful events, but none proves that the provider is actually moving toward a buying decision.

Commercial readiness requires evidence that the problem matters, the right stakeholders are engaged, the business case works, risk is understood, the Decision Process is moving, and the provider is committing resources toward action.

A healthy pipeline is not a collection of interested prospects. It is a collection of buyers demonstrating evidence that they are moving toward a decision.

SELLER'S LENS VS. BUYER'S LENS

Sales organizations naturally measure what their teams are doing. Providers reveal commercial readiness through what the buying organization is doing in response.

SELLER'S LENS

“The deal is moving.”

- Another meeting scheduled
- A successful demo
- Positive stakeholder feedback
- A proposal requested
- A pilot being discussed
- Additional contacts engaged
- An opportunity advancing in the CRM
- An expected close date on the forecast

BUYER'S LENS

“Are we actually moving toward a decision?”

- Increasing urgency around the problem
- Additional decision-makers involved
- Financial case validated
- Internal resources committed
- Security and governance progressing
- Decision Criteria agreed
- Decision and Paper Processes advancing
- Actions that reduce the likelihood of doing nothing

Seller activity shows that the opportunity is active. Buyer evidence shows whether it is advancing.



WHY THIS BECOMES A GTM PROBLEM

Busy Opportunities Can Remain Commercially Weak

When pipeline management rewards activity rather than buyer evidence, opportunities can remain artificially healthy long after the provider has stopped making meaningful progress toward a decision.

Meetings Are Mistaken for Momentum The calendar stays busy, but conversations produce little new buying evidence.	A Proposal Becomes a Buying Signal Pricing or documentation requests are interpreted as proof of purchase intent.
Positive Feedback Inflates Confidence Stakeholders like the technology, but no resources or political capital are committed.	CRM Stages Outrun Buyer Progress The opportunity advances because seller activities occurred, not buyer commitments.
Close Dates Keep Moving The forecast reflects seller hope rather than the provider's Decision Process.	No Decision Is Underestimated The team focuses on named competitors while doing nothing remains the easiest alternative.
An opportunity can remain busy for months without becoming more buyable.	



PROVIDER PERSPECTIVE

Three Lessons From Buyer-Evidence Discipline

LESSONS FROM THE FIELD

Activity Is Easy to Measure. Buyer Commitment Is Harder.

CRMs make it easy to count calls, meetings, demos, proposals, and opportunities. Those metrics can be useful, but they do not answer whether the buyer is becoming more committed. Ask what has changed internally, who has become involved, what resources have been committed, and what uncertainty has been removed.

The most important pipeline evidence often comes from the buyer's actions, not the seller's activity.

LESSONS FROM THE FIELD

A Proposal Is Not Proof of Intent

Providers may request pricing for budgeting, benchmarking, internal evaluation, comparison, or simply to understand the potential investment. A proposal becomes commercially meaningful when it sits inside a known Decision Process with agreed criteria, stakeholders, timing, and next actions.

Sending a proposal proves the seller completed a step. It does not prove the buyer made a commitment.

LESSONS FROM THE FIELD

"No Decision" Is a Competitor

A Health IT company may prepare extensively against other vendors while underestimating the most common alternative: do nothing. If Pain is not important enough, the business case is weak, risk remains unresolved, or priorities shift, the provider may simply keep the status quo.

The deal does not have to be lost to another vendor to be lost.



HOW TO DIAGNOSE COMMERCIAL READINESS

Separate Activity From Evidence

For every major sales activity, ask what buyer evidence it produced.

SELLER ACTIVITY	BUYER EVIDENCE
• Demo completed • Meeting held • Proposal sent • Security documents delivered • Pilot discussed	• Pain quantified • Champion provided internal access • Economic Buyer engaged • Decision Criteria clarified • Business case validated • Security requirements identified • Decision Process mapped • Next decision agreed

Do not ask only “What happened?” Ask “What did we learn or prove about the buyer?”

Build Pipeline Stages Around Buyer Commitments

Pipeline stages become more reliable when they represent a meaningful change in the provider’s buying process. An opportunity should not advance simply because a demo happened; it should advance because the demo produced the buyer evidence required for the next stage.

The strongest stage exit criteria describe what the buyer has demonstrated—not what the seller has completed.



HOW TO DIAGNOSE COMMERCIAL READINESS

Forecast From the Provider's Decision Process

A seller may want the deal to close this quarter. That is not a forecast methodology. A credible close date should reflect the provider's expected decision timing, remaining approvals, Economic Buyer engagement, security and governance, procurement, contracting, budget availability, and dependencies outside the seller's control.

A close date should be derived from the buyer's process—not reverse-engineered from the seller's quota period.

Use MEDDPICC® as Evidence, Not Administration

MEDDPICC® becomes valuable when it helps the sales team test what it actually knows about the opportunity—not whether CRM fields have been completed.

- Metrics
- Economic Buyer
- Decision Criteria
- Decision Process
- Paper Process
- Identified Pain
- Champion
- Competition

MEDDPICC® should expose uncertainty in the deal—not hide it behind completed CRM fields.

DIAGNOSTIC CONTENT — BOTTOM LINE

Commercial readiness is not measured by how much activity surrounds an opportunity. It is measured by the accumulating buyer evidence that makes a decision increasingly likely.



BETTER DISCOVERY QUESTIONS

Don't Ask / Ask Instead

Good pipeline management does not simply ask what happened since the last call. It asks what changed in the buyer's ability and willingness to make a decision.

DON'T ASK	ASK INSTEAD
"How did the meeting go?"	"What did the buyer do or tell us that increases—or decreases—our confidence that they are moving toward a decision?"
"When do you think this will close?"	"What remaining provider decisions and approvals support that expected close date?"
"What's our next step?"	"What is the buyer's next decision, and what evidence must exist for them to make it?"

The objective is not to keep the opportunity moving. It is to determine whether the buyer is moving.



CHECKLIST + BUYER'S-LENS TEST

From Pipeline Activity to Commercial Readiness

Before treating an active opportunity as a qualified opportunity, the sales team should be able to show evidence that the provider is progressively reducing uncertainty, committing resources, involving the right stakeholders, and moving through a recognizable Decision Process.

1. Questions Health IT Companies Should Be Able to Answer

• Is the Pain important enough to act on now? • Have meaningful Metrics been established? • Is there a tested Champion? • Is the Economic Buyer known? • Are the Decision Criteria understood? • Is the business case validated by the provider?	• Is the Decision Process mapped? • Is the Paper Process understood? • Are security and governance requirements progressing? • What buyer commitments have occurred? • What could still result in no decision? • Does the provider's process support the forecasted close date?
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If the opportunity has significant activity but these answers remain vague, the pipeline stage may be overstating commercial readiness.



THE BUYER'S-LENS TEST

A Commercially Ready Opportunity Should Pass Five Tests

A commercially ready opportunity should allow the sales team to answer “yes” to each of the following:

✓ **Yes, the provider has a compelling reason to act.**

The Pain and consequences of doing nothing are understood.

✓ **Yes, the right people are participating.**

The Champion, Economic Buyer, and critical stakeholders are visible.

✓ **Yes, the provider has validated the value.**

Metrics, economics, workflow, risk, and expected outcomes support the decision.

✓ **Yes, we understand how the decision will happen.**

Decision Criteria, Decision Process, and Paper Process are mapped.

✓ **Yes, the buyer is demonstrating commitment.**

Actions—not simply positive words—show the organization is moving toward purchase.

When those five answers are present, the pipeline is no longer being qualified by activity. It is being qualified by buyer evidence.

DAVID'S GTM TAKEAWAY

A large pipeline feels reassuring. It creates activity, forecasts, and numbers for leadership to discuss. But pipeline volume does not create revenue unless the opportunities inside it contain buyers who are actually progressing toward decisions.

Look beyond demos, meetings, proposals, stages, and close dates. Ask what the buyer has done, what evidence has changed, what remains unknown, and what could still cause no decision.

Use MEDDPICC® to expose the gaps. Use stage exit criteria to prevent seller activity from masquerading as buyer progress. Forecast from the provider's Decision Process—not the seller's desired close date.

A healthy pipeline is not a collection of interested prospects. It is a collection of buyers demonstrating evidence that they are moving toward a decision.

Through the buyer's lens, the question is not simply “How much pipeline do we have?” It is “How much of that pipeline contains providers that are actually becoming ready to buy?”



PART OF THE COMPLETE FIELD GUIDE

Whose Lens Is Your Health IT Go-to-Market Strategy Built Through?

Challenge 10 is one chapter in a 10-part provider-informed field guide examining the most common reasons promising Health IT companies struggle to move from initial interest to predictable revenue and scalable provider relationships.

The strongest Health IT go-to-market strategies are not built around how the vendor wants to sell. They are built around how the provider needs to buy.

01 Problem Importance	02 Pilot ≠ Commercial Validation
03 Payback Period	04 Workflow & Adoption
05 Security, Governance & Risk	06 The Buying Committee
07 Procurement, GPOs & Contracting	08 Policy, Standards & Interoperability
09 Scaling Sales Too Early	10 Pipeline vs. Commercial Readiness

[Explore the Complete Field Guide →](#)



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David Hacker brings more than 30 years of experience across healthcare delivery, Health IT, sales leadership, and go-to-market strategy. His provider-side and vendor-side experience shapes Elevate HIT Sales' practical approach to helping Health IT companies sell more effectively into complex healthcare organizations.

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