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How to Compete for Primary Care Physicians

By Kathy Jordan – President, Jordan Medical Consultants and Regina Levison – President, Levison Search Associates

When you work in the healthcare industry, you see articles on the physician shortage nearly every day. Some articles analyze the maldistribution of primary care physicians, some promote the need to establish more training programs, and others try to predict how a national health program will impact the shortage. The focus of this article is how to compete for primary care physicians in the current market.

With the physician shortage and demand for primary care physicians accelerating, candidates have the luxury of being highly selective about their practice choices. The key to recruitment is to generate interest quickly, maintain interest throughout the process and make an offer that is competitive and accommodates the priorities of the new recruit.

Data Will Help Sell Your Opportunity

Hospitals frequently perform medical manpower studies to determine how many physicians in which specialties are needed to ensure community healthcare needs are met. Medical groups, HMOs, IPAs, and clinics often document need in their strategic planning process. This information is essential to share with primary care physicians considering an opportunity in your community. Candidates want to know there is a genuine need for their services and that they will be welcomed by other physicians in the community. Contact your local hospital's CEO, CMO, or Director of Physician Relations to request access to this information. Don't be shy about sharing data that will help sell your opportunity to prospective candidates!

Write a Description of the Opportunity

Help prospective candidates get excited about what you have to offer by writing a description about your opportunity and community that you can e-mail to them. You'll stand out because you have the position described in writing. Be honest and don't exaggerate, but emphasize the positives and minimize the negatives in your presentation. We recommend you include the following information:

- Brief history of practice including reason(s) you are currently recruiting
- Number and specialty of physicians and mid-level practitioners
- Sources of patients and payer mix; is there an existing practice to assume or a waiting list for new patients
- Ideal candidate specifications including skill sets, experience desired, and foreign language capabilities
- Anticipated schedule including days/hours to be worked, and/or average patients seen per day by existing medical providers
- Call schedule and/or description of Hospitalist service
- Information about office automation including electronic medical records
- Compensation and production incentives, benefit package and partnership options
- Description of local hospitals and website addresses
- Description of community where practice is located including website addresses for Chamber of Commerce and Tourist Bureau
- Contact name, phone number, e-mail address, and practice website address

Having a written position description also provides the advantage of allowing you to reach consensus in the practice regarding the need to recruit another physician. It is essential that all physicians in the group are on the same page.

Be Realistic About Candidate Parameters

Flexibility when considering prospective candidates is essential in a competitive market. The primary care candidate pool is ever-changing with a higher percentage of female and international medical graduates as well as physicians seeking part-time employment. By remaining flexible and incorporating diversity into the practice, you enhance your chances of filling the position in a timely manner. Part-time and job-sharing options are also a draw for many quality candidates and will result in greater job satisfaction and physician retention.

Offer Mentoring From Senior Staff

Recent graduates often seek a mentor in the practice so be prepared to invest time with a newly-trained associate. This includes physician mentors to assist with clinical issues and administrative mentors to help with practice operations and coding questions. Knowing that mentoring is available may sway a physician to join your practice instead of another.

Recruit Close to Home

Primary care physicians often go into practice near their home town or near their families. Focus on utilizing resources that will help you identify physicians with a direct tie to your state/community including where they were born, attended medical school, completed residency, and where their spouse/significant other grew up.

Networking with regional residency programs, local physicians, and your state and local medical associations is a good start. There are select physician search firms who offer a cost effective service of identifying and presenting candidates that fit your culture while your practice manages other recruiting activities.

Be Competitive with Compensation, Hours and Call

In the past, you may have competed with compensation paid by local practices. Now you compete with practices all over the country. Be sure to access the most recent compensation data (such as MGMA and AMGA) to ensure your package is competitive enough to land the candidate you want to hire. Don't be surprised if you are asked to provide a two-year salary guarantee instead of the traditional one-year for primary care physicians.

Physicians younger than 35 are typically focused on the amount of free time they will have much more than previous generations. Generation Y physicians feel work hours, call schedule, and the practice setting are often more important than compensation. Young physicians often seek practices that utilize a Hospitalist service to care for inpatients. To remain competitive, identify means by which a physician can opt-in or opt-out of inpatient care. By allowing physicians the leisure time they desire you enhance your ability to compete for new recruits and ensure job satisfaction.

Medical school debt is especially burdensome for primary care physicians. Be open to requests for loan repayment and signing bonuses. Find out if your area qualifies for loan assistance programs and/or talk with your local hospital to see if they can help cover loans for the new hires. Loan repayment and signing bonus options will often make the difference between hiring or losing your top candidate.

The Early Bird Theory

Yes, it's true in recruitment as well. The sooner you make contact with a candidate, the more likely you are to recruit the best prospect to your practice. With a shortage of primary care physicians you must put your best foot forward and compete to get the candidates to consider your opportunity.

The importance of calling and sending an e-mail or text message to a prospective candidate the moment you become aware of their interest in your opportunity cannot be over-emphasized. Schedule and

conduct a telephone interview as soon as possible and if the telephone interview goes well, invite the physician and spouse/significant other for a site visit.

Make the telephone interview and site visit about the candidate. Candidates often say the doctors in the practice talked more about themselves rather than getting to know the candidate. While it is important to tell your story, the candidate needs to feel the practice is interested in their goals and priorities as well. By focusing on the candidate you will be better equipped to determine if they are a good fit for your position.

Don't forget about the spouse or significant other. Experience has shown they will have more impact on the final decision than the physician themselves. Talk with the spouse prior to the interview and arrange a separate itinerary to address their needs. This may include exploring housing options, visiting schools, a luncheon with others that share similar interests or even meetings scheduled with potential employers.

Have the employment contract prepared and ready before you start recruiting. It is extremely frustrating to lose your top candidate because they have other offers in hand and can't wait for a contract to be developed by your attorney.

Keep Your Promises

Now that you have hired your ideal recruit, how do you keep them for the long term? The first step is to keep your promises. Physicians change jobs because the promises they were initially made were not kept. Document your commitments to a newly recruited physician. Meet with your new associate frequently during the first year to ensure the transition has been smooth and that expectations are being met on both sides.

Look for steps to help you develop an effective physician retention plan in an upcoming e-newsletter.

Top 10 Tips for Maximizing Candidate Telephone Interviews

By Julie Sherriff – President, Sherriff & Associates

After receiving curriculum vitae or resumé responses to an open position and selecting your top candidates, the next step is to conduct telephone interviews. Here are 10 tips for maximizing telephone interviews:

1. Define your goals ahead of time. Make a list of criteria for the position and use the list to prepare your telephone questions. This will help you evaluate if the candidate meets your hiring goals and it will ensure that each candidate is fairly assessed.
2. Don't delay in contacting candidates of interest! Competition is fierce for the best candidates, so by not acting quickly, you are leaving the door open for your competitors. To minimize this risk, contact the candidate the same day you receive the CV/resumé (even if it is just to set an appointment).
3. Make the phone interview the most important item on your calendar. You will impress a candidate by scheduling an appointment for the call. Also, let candidates know the expected length of the call so they can plan accordingly.
4. Just prior to the call, take time to again review the candidate's CV and become familiar with their education, experience and their interests outside of medicine. It is important to refer to these items during the conversation, as it is an indication of your interest as well as your attention to detail.
5. Initiate the call with pleasantries by briefly discussing the weather, sports, an appropriate current event or another topic to break the ice and create an interest. This will make both of you more comfortable throughout the conversation.
6. After pleasantries, describe the position including duties, hours, call responsibilities, colleagues, and place(s) of service. Explain why you are recruiting and briefly discuss the goals and criteria for the position.

7. Briefly and honestly (but not negatively) describe any challenges that resulted in the decision to hire. Also, don't dwell on, but never hide, problems that might be obvious during a site visit. Your fair and honest assessment of the opportunity can preclude future surprises or disappointments. And remember, the challenges can actually be opportunities for the candidates considering your position.
8. Review the CV/resumé for evidence of achievement in their specific field including awards, research grants, publications, and other accomplishments.
9. Next, ask the candidate to visualize and discuss how he or she would see themselves in the position. If it is favorable, sell the candidate on your practice and community. You will have learned by now what their professional and personal needs are, so provide specifics about how you see them matching your criteria and fitting into the community.
10. Last, invite the candidate to ask questions, and then ask for honest feedback on the candidate's perception and interest in the opportunity. If it is positive and the candidate meets your defined criteria, invite the candidate to interview and set a date. If the feedback is negative, but you are interested in the candidate, don't give up. Take time to probe further to determine if there is a misconception about anything or if simply the job and/or the community are not a fit. If it is obvious that the candidate does not meet your criteria or has minimal interest, thank the candidate for his or her time and politely end the call.

In next month's issue of *Focus: Physician Recruitment*, we will examine the Top 10 Specialties Being Recruited.

Nurse Practitioners Help Relieve Primary Care Shortage

By Karen Zeller – President, Rocky Mountain Medical Search

Meeting the demands for clinical services where they are needed most – in primary care – is increasingly falling to nurse practitioners. According to the American Association of Nursing, 60–80% of primary care can be performed by nurse practitioners. Additionally, the growing emphasis on prevention and public health will provide even more excellent and diverse opportunities for nurse practitioners.

Classified as mid-level providers, nurse practitioners and physician assistants are often evaluated and associated together. However, they are trained differently and treated differently by state regulatory agencies. Many states grant the authority for nurse practitioners to practice independently. The goal of nurse practitioners is independence and collegiality, rather than dependence and supervision.

The doctoral level nurse practitioners will further expand the scope of practice for nurse practitioners. These nurse practitioners are trained to practice at the level of family physicians with full hospital admitting privileges. These clinicians can provide care at a range of sites: hospital inpatient and emergency departments, offices, nursing homes and rehabilitation facilities.

Research shows high levels of patient satisfaction with nurse practitioner providers. Studies focus mainly on clinical quality and effectiveness and continue to provide supportive data. Throughout these studies, health outcomes were similar to those of physicians, with equal or lower costs, shorter waiting times, and higher patient satisfaction.

Bonnie J. Nesbitt, PhD, ANP-BC; Director of Graduate Program of Nursing at Viterbo University in LaCrosse, Wisconsin is seeing changes in the practices their graduates are choosing. Many more graduates are specializing in fields including cardiology, acute adult care (Mayo Clinic utilizes nurse practitioners as hospitalists), pain management, palliative care, and neurology. Dr. Nesbitt reports that slightly more than half of their graduating nurse practitioners are choosing specialty practices.

How will this affect recruitment for nurse practitioners in the future? Recruiting primary care nurse practitioners will become more competitive as more graduates choose specialties. Nurse practitioner students tend to be part-time students fully integrated in the communities where they receive their graduate training. Thus, the talent pool is more likely to remain regional or local. A good strategy for recruiting nurse practitioners is to cultivate relationships with the nearest graduate training programs.

According to the American Academy of Nurse Practitioners (AANP), there are 125,000 nurse practitioners in practice in the U.S. today. Eighty-five percent of these are practicing in primary care settings, defined as adult health care, family medicine, women's health and pediatrics. Three hundred twenty-five schools in the U.S. are graduating approximately 6000 nurse practitioners annually.

The 2008 compensation survey by the American Medical Group Association (AMGA) shows \$87,627 as the mean salary for a full-time nurse practitioner.

RA Cooper. "Weighing the evidence for expanding physician supply." *Annals of Internal Medicine*. 2004. 705-714.

RJ Hooker. "Review of U.S. Experience." *Medical Journal of Australia*. 2006. 185,4-7.

Locum Tenens Corner: Family Medicine

By Joan Pearson – President, Catalina Medical Recruiters

There are over 100,000 family medicine physicians in the United States. Even though that seems like a large number, we continue to hear of the physician shortage. The Association of American Colleges Center for Workforce Studies (AAC) reports the U.S. will have a physician shortage in all specialties of 200,000 by the year 2020.

As an administrator or physician, what happens when you are short staffed? How do you handle patients when your physician is out due to:

- CME
- Sabbatical
- Illness
- Retirement
- Vacation
- Maternity Leave
- Increased patient load
- Bridge while recruiting

If your physician typically sees 20–25 patients per day, who sees these patients?

If they are not seen at your office/hospital, where will they go?

If you are short-staffed, the patient has a couple of options. They may choose not be seen at all and therefore their condition may worsen or, they may choose to be seen by one of your competitors. Neither option is acceptable to you.

Consider locum tenens to help with your short and long term staffing needs. A locum tenens firm has a pool of well-trained, qualified, and experienced physicians who enjoy seeing a diverse patient population. The physicians are ready to step in, even at the last minute, to assure continued medical care to your patients. Locum tenens physicians adapt well to new surroundings and are accustomed to interacting with new patients and staff members. Often the physician is asked back repeatedly as they become more and more familiar with the medical facility and community.

How does it work? A locum tenens firm charges a daily rate, reimburses the physician, and arranges malpractice insurance. Your facility retains all the fees generated by the physician. This solution will enable you to continue providing quality medical care to your patients along with continuing your revenue stream.

If your facility has a need for additional staffing, please contact Joan Pearson at Catalina Medical Recruiters at 800-657-0354 or joan@catalinarecruiters.com.

Compensation Corner: Family Medicine

Traditional Family Practice:

East:	\$173,000
Midwest:	\$188,000
South:	\$200,000
West:	\$188,000

With OB:

East:	\$169,000
Midwest:	\$212,000
South:	\$205,000
West:	\$186,000

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