







PRIMARY CARE ASSOCIATION

supporting Alaskans' health care home.







CHCs AND PHYSICIAN RECRUITING

THERE'S GO OF WSWS





FIRST, THE BAD NEWS

THE PHYSICIAN SHORTAGE IS LIKELY TO GET WORSE BEFORE IT GETS BETTER





RISING DEMAND

50 million more people from 2000 to 2020





RISING DEMAND

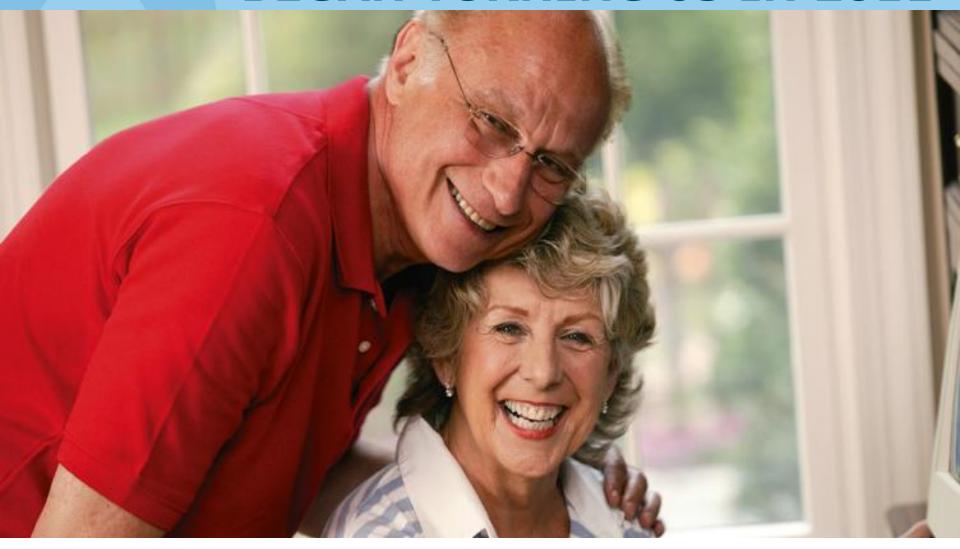
150,000,000 Additional Physician Visits Per Year By 2020 Based On Population Growth Alone (3.0 visit per/pop X 50 million population growth)

Does not factor in age demographic





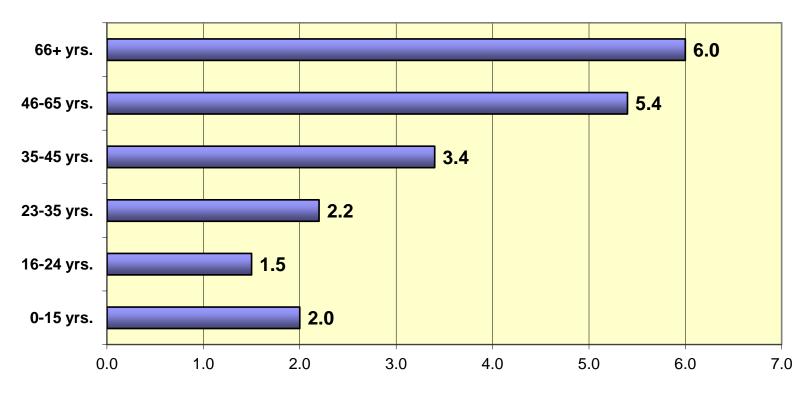
75 MILLION BABY BOOMERS BEGAN TURNING 65 IN 2011





PATIENT VISITS BY AGE

Physician Visits By Age



of Annual Visits

Source: National Ambulatory Medical Care Survey; www.cdc.gov



FLORIDA IS OUR FUTURE

By 2030, the entire country will be as old, on average, as Florida is now.





Source: U.S. Census Bureau



SUPPLY STATIC

PHYSICIAN SUPPLY HAS BEEN STATIC FOR ABOUT 20 YEARS

24,000 – 25,000 new doctors per year



MEDICAL STUDENTS ARE TAKING THE ROAD TO SUCCESS

Radiology
Ophthalmology
Anesthesiology
Dermatology



SHRINKING FTEs

The Physicians Foundation reports physicians are working 6% fewer hours versus four years ago...

A loss of 44,000 FTEs







HEALTH REFORM IS UPON US

THE GOAL:

EXPAND ACCESS
TO 32 MILLION
PEOPLE





HEALTH REFORM: HOW MANY MORE PCs?



32 million newly insured patients

X

2 additional patients visits per year

=

64 million patient visits

divided by

4,000

16,000 additional primary care doctors

Source: The Lewin Group



WE HAVE SEEN THIS MOVIE BEFORE





A TEST CASE: MASSACHUSETTS

98% of residents covered



SOURCE: *UPI, July 27, 2007
** New York Times, April 4, 2008



REFORMED MASSACHUSETTS

- 40% of family physicians in Massachusetts no longer accept new patients, up from 30% in 2007.
- Almost 60% of general internists have stopped taking new patients, up from 49% in 2007
- Yet Massachusetts has 108 primary care physicians per 100,000 population, third highest in the country (the national rate is 79 per 100,000 pop.)

Source: Massachusetts Medical Society



A GROWING GAP

The Coming Gap Between Physician Supply & Demand (2020)



Source: Council on Physician and Nurse Supply





PROJECTED SHORTAGE OF PHYSICIANS BY SPECIALTY BY 2025

Doctor Deficits

Primary care......46,000 (37% deficit)

Surgery......41,000 (33% deficit)

Other patient care...29,000 (23% deficit)

Medical specialties....8,000 (7% deficit)

Source: Association of American Medical Colleges/Modern Healthcare/December 1, 2008



NOW, THE GOOD NEWS

CHCs ARE IN THE SPOTLIGHT

- \$2 billion from the recovery act
- \$11.5 billion from Health Reform
- Teaching Health Centers (THCs) to train physicians
- \$1.5 billion for National Health Services Corp
- 10% bump in Medicare fees for primary care and general surgeons working in HPSAs



A NEW MANDATE, A NEW CHALLENGE

• From 20 million patients per year to 40 million

• 1,750 current physician openings

• 5,000 current clinicians openings

• Number of centers / delivery sites to increase



MORE GOOD NEWS

• Physicians are seeking alternatives to traditional practice

• Part-time, employment, locum tenens, independent

One size does not fit all

• Between 2000 and 2007, the number of patients seen at the nation's community health centers grew by 67%



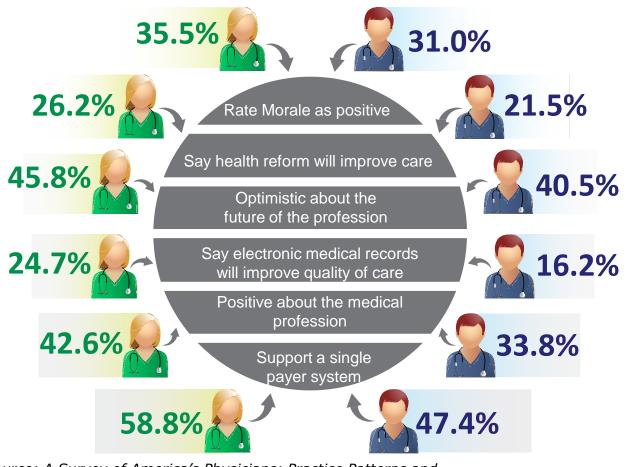
WHAT TO YOU PLAN TO DO IN THE NEXT ONE TO THREE YEARS?

Continue as I am	48.8%
Cut back on hours	22.0%
Retire	13.4%
Switch to concierge practice	6.8%
Relocate	10.9%
Cut back on patients seen	9.6%
Seek a non-clinical job in healthcare	9.9%
Seek employment within a hospital	5.6%
Work part-time	6.5%
Work locum tenens	6.4%
Seek a non-clinical job	6.4%
Close my practice to new patients	4.0%





ARE FEMALE PHYSICIANS MORE OPTIMISTIC THAN MALE DOCTORS?





Source: A Survey of America's Physicians: Practice Patterns and Perspectives, The Physicians Foundation/Merritt Hawkins, 2012



A HAMBURGER IS STILL



HEALTHCARE: NO LONGER "TAKE TWO ASPRIN..."



- ✓ Close to 200 Board Certified Specialties
- ✓ Over 10,000 prescription drugs
- ✓ Organ Transplants
- √ Face Transplants
- √ Teleradiology/Telemedicine
- ✓ Non-invasive Techniques
- ✓ Gene Therapy
- ✓ Qualcomm Tricorder X Prize, a \$10 million global competition



CHCs

THE RIGHT MODEL AT THE RIGHT TIME?



Source: The Physicians Foundation, Health Reform and the Decline of Physician Private Practice



CASE HISTORY: UNITED HEALTH CENTERS OF SAN JOAQUIN VALLEY

- √ 7 sites, 25 doctors, 5 PAs, 2 NPs
- ✓ Salary with production bonus, full benefits
- √ 23 appointments, \$17,000 bonus
- √ 25 appointments, \$29,000 bonus
- √ \$200,000 income achievable
- ✓ Pay for call (not obligatory) and hospital duties
- ✓ Retention bonus
- ✓ Loan forgiveness through NHSC





Source: The Physicians Foundation, Health Reform and the Decline of Physician Private Practice



CASE HISTORY: UNITED HEALTH CENTERS OF SAN JOAQUIN VALLEY

- ✓ No overhead, staffing worries
- √ 7 weeks of leave, 9 paid holidays
- √ 40 hours, no fixed schedule, tailored practice
- √ 10 doctors work part-time
- ✓ Can teach medical students







THE COMMUNITY HEALTH CENTER "BRAND"

- Service Driven
- Intellectually Stimulating
- Minimal Administration
- Loan Forgiveness
- Fair Compensation
- Quality of Life
- Secure Patient Base / No Practice Marketing

A "medical mission" without the need for a passport





BECOMING A DOCTOR MAGNET: A SOUND MODEL IS A GOOD BEGINNING

JUST AS IMPORTANT:

A <u>SENSE OF URGENCY</u>

Hospitals, medical groups, other CHCs – all are looking for the same doctor you are



THE RIGHT MINDSET

PHYSICIANS ARE THE KEY TO CARE AND REVENUE





MORAL: VALUE YOUR PHYSICIANS

Despite the growing number of providers, physicians are at the center of the system and control 87 percent of all spending on personal health.

Quality

Cost Effectiveness And Alignment

Are largely in their hands

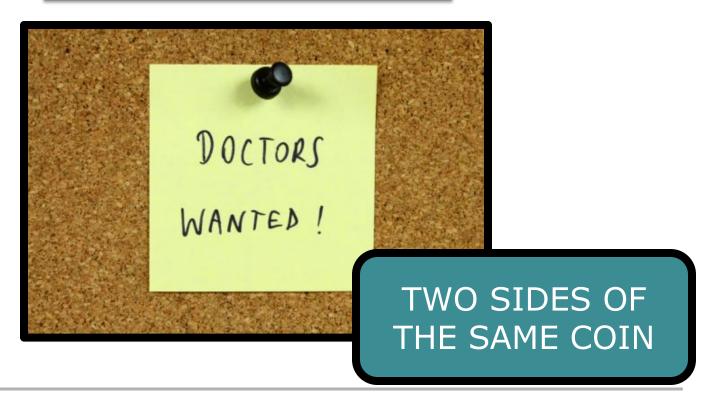
(Clinicians generate between \$1,800 and \$2,300 per day in net revenues for their affiliated community health centers.)

Source: Boston University School of Public Health, Feb. 2009, NACHC



RECRUITMENT AND RETENTION

RECRUITMENT AND RETENTION





A CHANGING MINDSET

In a matter of two years:

- 1. The recruitment process
- 2. The focus on retention
- 3. Financial considerations



ENHANCE THE "WORKSHOP"

First and foremost consider the "primacy of the workshop".

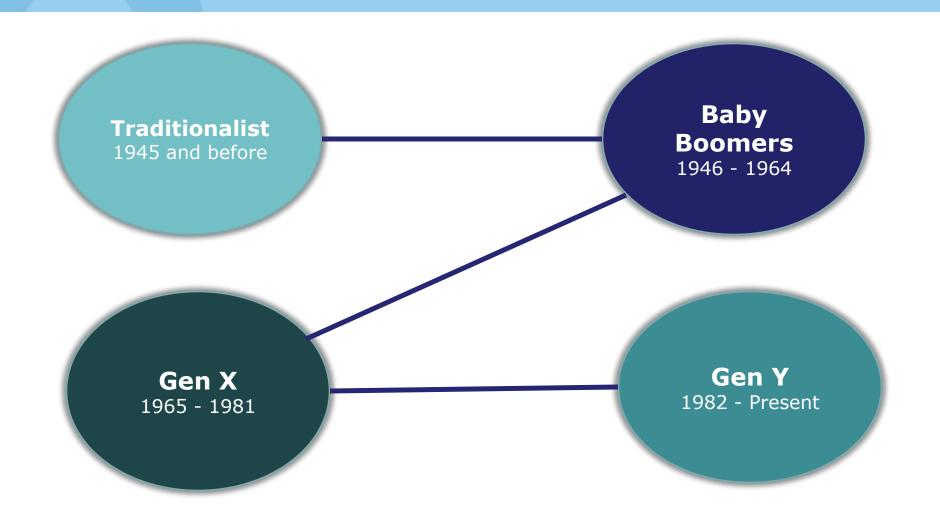
Give physicians a haven.

- √ Physician communication (formal and informal)
- ✓ Physician employment
- ✓ Pay for ED call
- √ Hospitalist program
- √Gain Sharing/Joint Ventures
- ✓Appropriate nurse staffing
- √Timely test turnaround
- ✓Access to patient data
- √ Consistent OR availability
- ✓ Enhanced ER triage
- √ Convenient parking
- ✓ Marketing/Contracting





4 GENERATIONS OF DOCTORS





ARE PA'S AND NP's THE ANSWER?

83,000 Physicians Assistants 2/3 in specialties 1/3 in primary care Median salary: \$91,000

155,000 Nurse practitioners 75% in primary care 25% in specialties Mean salary: \$93,310

A 20% deficit of by 2025



Source: American Academy of Physician Assistants, American Academy of Nurse Practitioners, "Physician shortage isn't the only looming one," Advance for Nurse Practitioners & Physician Assistants, July 28, 2011



SETTING THE STAGE

• WHO IS WRITING YOUR GRANT APPLICATIONS?

- IS PHYSICIAN STAFFING PART OF THE EQUATION?
- NACHC CAN ASSIST YOU!



INCENTIVES / CONTRACTS

STANDARD RECRUITING CONTRACTS TODAY TYPICALLY WILL COVER...

- Salary and production bonus
- Income guarantee
- Educational loan forgiveness
- Continuing Medical Education
- **Duties/Patient Encounters**
- √ Hours/Schedule
- ✓ Vacation
- ✓ Benefits
- Termination







INCENTIVES SHOULD BE "IN THE BALL PARK"

CHC RANGES FOR FAMILY PRACTICE

\$90,000 to \$220,000



INCENTIVES / CONTRACTS

Family Practice Compensation Surveys

	7 - 5 - 7 - 5 - 5
Medical Group Management Association (MGMA)	\$200,701
Hospital & Healthcare Compensation Services (HHCS)	\$191,835
American Medical Group Association (AMGA)	\$231,318
Hay Group	\$168,700
Merritt Hawkins	\$189,000

Merritt Hawkins

Community Health Centers

NACHC

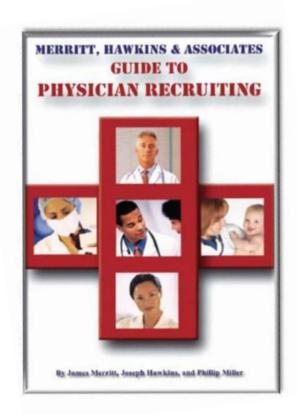


\$168,500



THE BOARD MUST BUY-IN

EDUCATION IS KEY





UNDERSTAND LEVELS OF LOAN REPAYMENT AVAILABLE

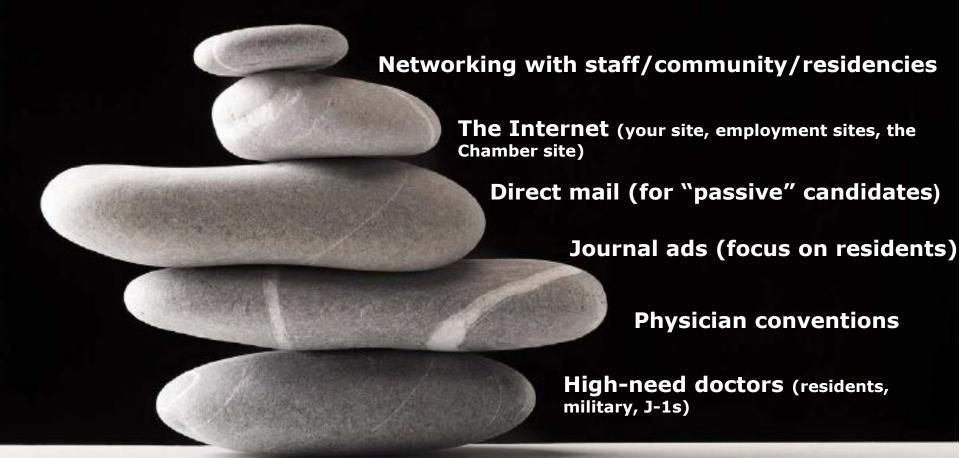
The Loan Repayment Program offers two levels of funding, based upon the need of the community in which a provider works. The LRP will provide up to \$60,000 to primary care providers practicing at an NHSC-approved site with a HPSA score of 14 or above and those practicing at an NHSC-approved site with a HPSA score of 13 and below, up to \$40,000.

Source: nhsc.hrsa.gov



SOURCING CANDIDATES

LEAVE NO STONE UNTURNED





SOURCING CANDIDATES

Basic Recruiter

Basic Richs 101

MI

MEASURABLE ACTIVITY
=
MEASURABLE RESULTS

This is the "science" of physician recruiting



SOURCING CANDIDATES



SOMEONE HAS TO GET ON THE PHONE
Usually after hours or on weekends

Suggested Telephone Metrics/In-House Recruiters

√ 100 dials per week

√ 10 physician contacts per week

√ 3 Healthcare Center opportunity presentations

√ 1-2 candidate referrals from physicians contacted

√ 1 potential candidate sourced per week



SCREENING

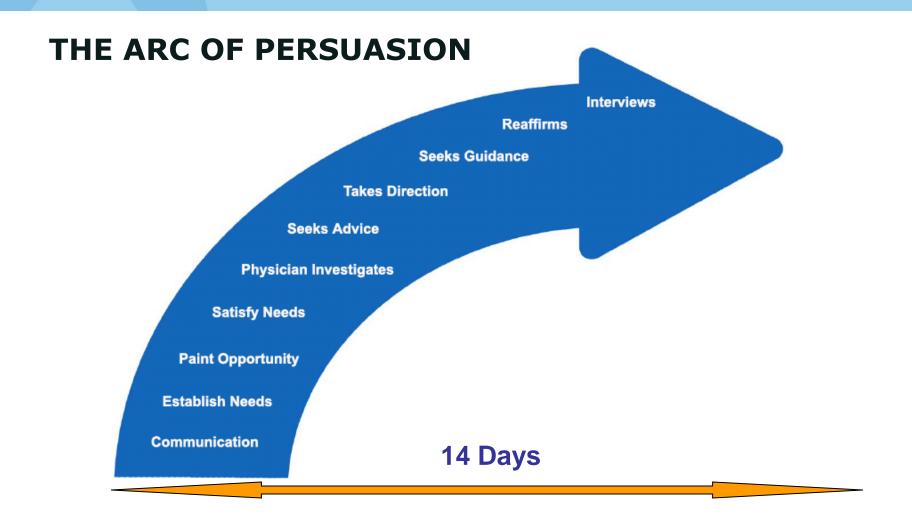
A CANDIDATE IS ON THE PHONE

NOW, WHAT DO YOU SAY?

THE "SCREEN" IS THE "ART" OF PHYSICIAN RECRUITING, AND A KEY PART OF THE "ICEBERG"



SCREENING





THE INTERVIEW



You've got a lot of sweat equity in this search, BUT...

- ✓ You know your candidate (written profile, professional and personal)
- The candidate knows you (setting, hours, finances, mission, etc.)
- ✓ Your offer is ready
- √ Your team is ready
- ✓ The interview itinerary is ready

EXPECTATIONS ARE CLEAR on both sides.



THE INTERVIEW

WHAT IS THE INTERVIEW FOR?

Confirmation not **Exploration THE "70/30" RULE**

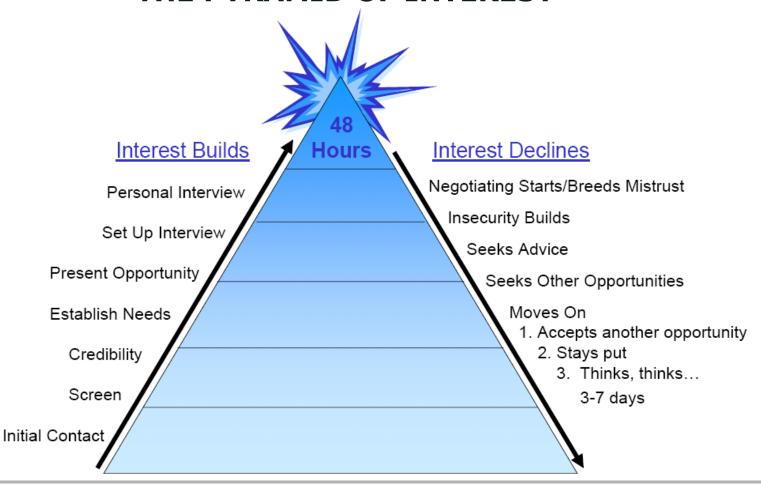


ONE INTERVIEW ONLY, PHYSICIAN AND SPOUSE



THE DECISION

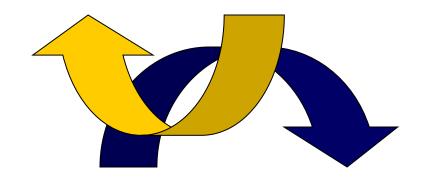
THE PYRAMID OF INTEREST





SUCCESS!

Now, it is time to incorporate the new physician into the **Retention Program** while the **Recruitment Cycle** begins again.





2014 PRO BONO PHYSICIAN SEARCH



Our unique Pro Bono Physician Search Program was developed in part to acknowledge our gratitude to the healthcare industry and to help fulfill our commitment to community service.

In addition, the Pro Bono Physician Search Program is intended to highlight a longstanding and persistent problem – the shortage of physicians in thousands of communities throughout the country.

Through our Pro Bono Physician Search initiative, Merritt Hawkins provides a full service physician recruitment program to a medically underserved community, waiving our customary retainer and fees. The program saves the selected community or hospital recruitment costs. Of more significance, the program provides a qualified physician to provide care where medical services are urgently needed.

Look for 2014 Pro Bono Physician Search Application on www.merritthawkins.com in April 2013.



FOR FURTHER INFORMATION AND DISCUSSION...



A Raised Hand – Blog by Kurt Mosley

http://www.merritthawkins.com/ clients/ask-experts-blog.aspx

Follow on Twitter:

@Kurt_Mosley





If you would like a copy of the Physicians Foundation survey or "10 Keys to Physician Retention" whitepaper, email me at:

Kurt.Mosley@amnhealthcare.com

Follow Us:























