



Primary Care Recruiting – Everyone's New Priority

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*Let us
help get **your**
search inline.*

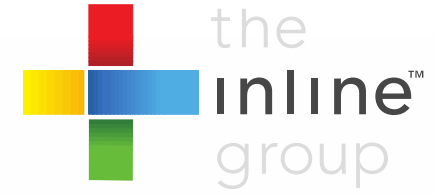
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Learning Objectives



- *Identify the current primary care environment and its challenges.*
- *Describe the new payer models that incentivize primary care physicians.*
- *Explain the role of the advanced practitioner.*
- *Illustrate techniques for enticing physicians to your facility.*
- *Recognize the technology required to reach candidates today.*
- *Formulate a comprehensive plan for recruiting primary care providers.*

Changing Competition



Yesterday

Care Options

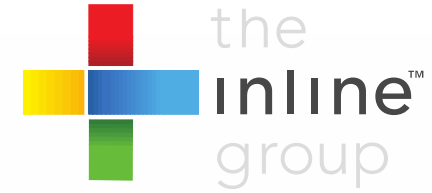
- *Physician's Office*
- *Hospital*
- *ER*

Today

Care Options

- *Urgent Care Center*
- *Retail Clinic*
- *Telemedicine*
- *Community Healthcare Centers*
- *Boutique Offices*
- *Physician's Office*
- *Hospital*
- *ER*
- *Direct Primary Care Practices*
- *Home Health*

Primary Care Market



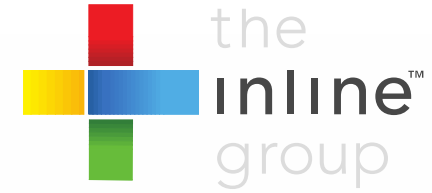
- *Association of American Medical Colleges (AAMC) predicts a shortage of 46,100 to 90,400 physicians by 2025 with anywhere from 14,900 to 35,600 of those primary care.*
- *AAFP estimates a global deficit of 149,000 primary care providers by 2020.*
- *ASPR reports that 3/4 of survey participants searched for a family medicine physician in 2015. (398 in-house physician recruiters with 155 organizations participated in the survey.)*
- *ASPR reports that 1 in 3 participants searched for a nurse practitioner or a physician assistant in 2015.*

Advanced Practitioner Supply and Demand

- *55,400 NPs in clinical care in 2010*
- *72,100 estimated in clinical care by 2020*
- *27,700 PAs delivering primary care in 2010*
- *43,900 PAs will be delivering primary care in 2020*
- *According to the AANP website 23 states allow an NP to practice independently of physician supervision*

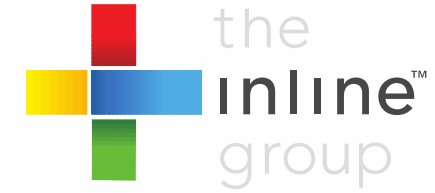
Critical to the delivery of medicine is the integration of advanced practitioners into the supply chain.

Primary Care Market



- *Limitations currently being considered for H1B visas could have a chilling effect on our ability to utilize foreign trained physicians.*
- *For all specialty categories, physician retirement decisions are projected to have the greatest impact on supply; over one-third of all currently active physicians will be 65 or older within the next decade.*
- *A single primary care physician can bring \$1.8 million in revenue to a facility annually.*
- *Actions designed to increase the number of physicians entering primary care specialties have largely been unsuccessful in increasing supply.*
- *Fewer physicians are choosing primary care.*

Reimbursement – From Volume to Value



How does the reimbursement environment impact the recruitment of physicians?

- ***Salary requirements are increasing for in-demand providers.***
 - *2010 – Average Family Medicine Salary was \$160,000*
 - *2015 – Average Family Medicine Salary is \$240,000 (Harder to fill opportunities may be required to pay \$300,000+)*
- ***Use of advanced practitioners in the value-based reimbursement models can be significant.***
- ***MACRA requirements apply to all physicians: systems who can provide assistance with or responsibility for compliance have a recruitment advantage.***

Regardless of the current instability of ACA – the payer model is moving to value over volume.

Reimbursement – From Volume to Value



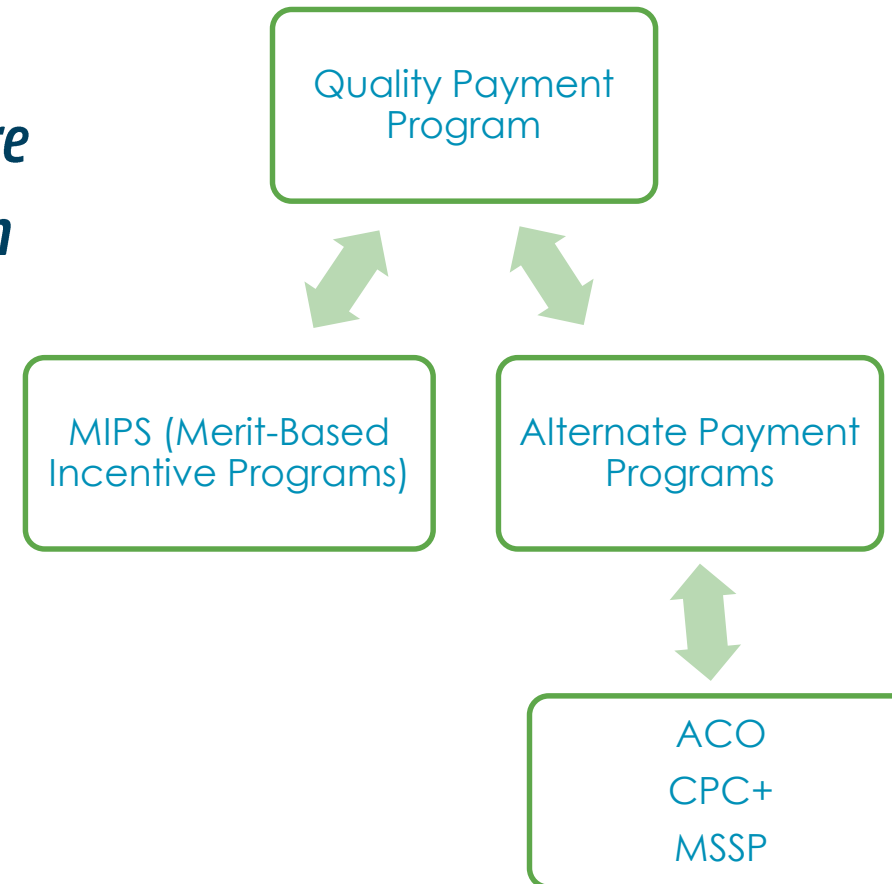
MACRA – Medicare Access & CHIP Reauthorization Act – 2005

- ***MACRA repeals the Medicare Sustainable Growth Rate (SGR) method of reimbursement.***
- ***MACRA offers two options for reimbursement under the Quality Payment Programs (QPP).***
- ***Reimbursement models will focus on quality and efficiency of care over the practice of fee-for-service that entice providers to perform more services to increase reimbursement.***
- ***Value based models focus on quality of care and integration of services and data.***

Regardless of the current instability of ACA – the payer model is moving to value over volume.

Reimbursement – From Volume to Value

- **ACO – Accountable Care Organizations**
- **CPC & CPC+ – Comprehensive Primary Care**
- **MSSP – Medicare Shared Savings Program**
- **PCMH – Patient Centered Medical Homes**
- **Bundled Payments**



Payment Model Changes Effect Physician Compensation



- *MACRA targets physicians, but impacts the entire medical system.*
- *Fee for service models resulted in 50% of the functions performed by a physician daily that were not reimbursable.*
- *Compliance requires resources and investment.*
- *2017 is a pivotal year and will impact 2019 reimbursements.*
- *Value over volume will impact referrals and admissions to hospitals.*
- *Providers and medical systems must work together to identify the risk and rewards.*

What Matters to a Physician?

44% of graduating residents list quality of life as their #1 job factor.

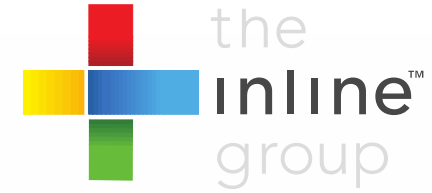
34% of graduating residents list location as the #2 factor in their job decision.

70% of primary care candidates surveyed list location as their first consideration in a job change.

80% of candidates ask about salary as the first question after location.

When a candidate leaves due to discontent, they almost always note, “My opinion was not valued or requested,” as the reason.

Incentives For Primary Care Practice



- **ACA incentives to increase primary care providers have not been funded.**
- **The Centers for Medicare and Medicaid Innovation (CMMI) initiated the Comprehensive Primary Care Initiative (CPCI).**
 - *CPCI – offers primary care providers a management care fee for the coordination of medical care to participants*
- **Alternative payment methods can increase the compensation of a physician for quality efficient patient care.**
- **Direct Primary Care - “A meaningful alternative for fee-for-service models.”**
 - *Physicians charge a retainer for all or most of the routine care a participant needs, including: well-visits, labs, consultative services, and coordination of care.*

Recruiting A Physician

What Happens Without a Plan



What Happens After You Plan



Success Starts with a Plan

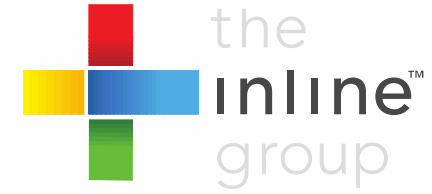


Physician recruitment is best performed by a motivated, properly compensated recruiter within the facility.

Successful Recruitment Requires:

- *A viable, marketable opportunity to market to candidates.*
- *A person or group of persons who can sell this opportunity to the candidate, understanding the market, the opportunity and the community.*
- *An efficient process to identify, interview, communicate and negotiate*

Traditional External Recruiting Resources

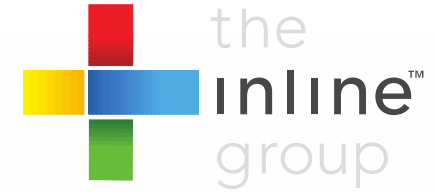


While the internal recruiter is the best person to actually recruit the physicians – due to the volume and complexities of each search – other tools are critical to the success.

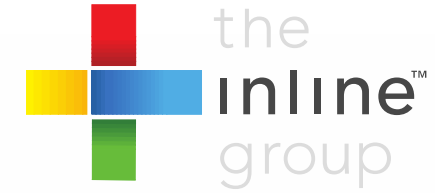
Pieces of the process such as, sourcing or advertising can be outsourced to quality, transparent organizations.

Traditional External Recruiting Resources

- *Retained Physician Search - \$35,000 per physician search*
- *Contingent Physician Search - \$21,000 - \$28,000 per physician search*
- *Database / Job Board Posting - passive*
- *Conferences/Referrals - passive*
- *Journal Ads - passive*
- *Social Media - passive*
- *Candidate Sourcing and Marketing*



Recruiting Resources Available

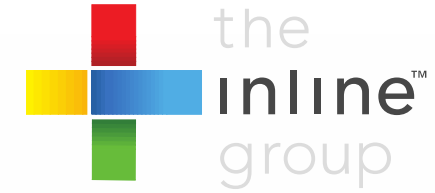


According to the latest ASPR Benchmarking Report, sources used by organizations to fill positions included:

Source	Percentage
Internet Job Boards	20.9%
Organization Website	20.2%
Referrals	19.7%
Internal Transfer	5.9%
Residency & Fellowship Programs	3.5%
Search Firms (Contingency)	3.1%
Former Employee	3.1%
Internal Trainees	2.7%
Job Fairs	2.4%

Source	Percentage
Locum/Per Diem Converted to Perm	1.9%
Email	1.5%
Search Firms (Retained)	1.5%
Direct Mail	0.6%
Journal Ads	0.5%
Cold-Calling	0.5%
Provider Specific Association Meetings	0.3%
Social Media	0.3%
Other	11.5%

Planning & Needs Assessment



- ***Start Early – 161 Days on Average to Fill***
- ***Complete the Planning and Needs Assessment Checklist***
- ***Set Goals, Review Oversight***
- ***Determine Employed or Contract Staff***
- ***Create Your Position***
- ***Define Your Ideal Candidate***
- ***Define Your Must Have Candidate***
- ***Define the Unique Attributes of Your Opportunity***
 - ***Independent Contractor/Employee***
- ***Define Your Compensation Package***
 - ***Salary, Benefits, Malpractice, CME, PTO***

Prepare Your Plan

- ***Identify Your Available Resources***
- ***Identify Your Interview Process***
 - *Who will contact candidates?*
 - *Who will do sourcing and screening?*
 - *Interview Process*
- ***Prepare Your Contract***
- ***Set Up Your Time-frame***
- ***Review Your Mobile Recruiting Resources***
- ***Review Internal Resources***
- ***Consider External Resources***

Where to Market

Technology

- *90% of candidates open email on smart phone or pad*
- *8pm is the best time for job search*
- *95% of physicians have a smart phone*
- *Physicians were early adopters of technology*



What to Do

Technology

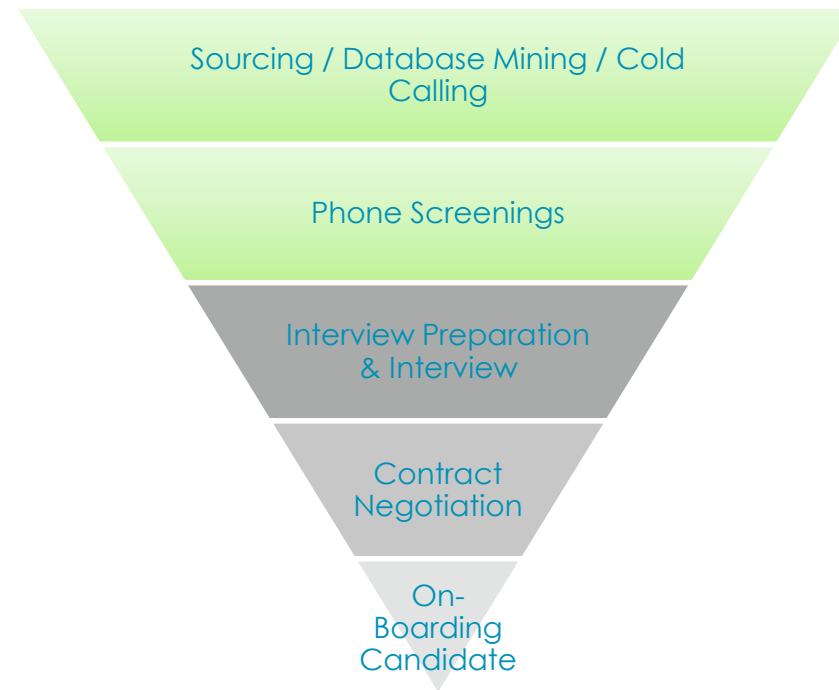
- *Put your jobs where candidates look*
- *List jobs on responsive sites with candidate friendly content*
- *Online ability to connect and initiate contact*
- *Post jobs to an app*
- *Utilize technology to communicate with candidates*



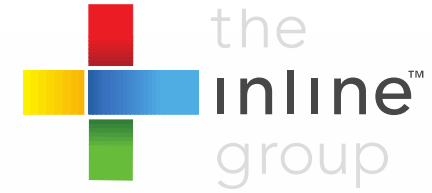
Execute The Plan

Execute your plan with precision and dedication!

- *Track Each Step – analyze problem areas*
- *Source Everyday – keep pipeline alive*
- *Grow Relationships – residency programs*
- *Mine Existing Relationships*
- *Consider Every Candidate*



Retention



The best retention plan begins at the point of recruitment

- *Set expectations at the very beginning to avoid dissatisfaction.*
- *Ensure your community can meet the needs of the candidate (i.e. schools, religion, culture).*
- *Mentor each candidate and family.*
- *Identify career path and concerns of the new hire and resolve to work through them.*
- *Evaluate and reward accomplishments.*
- *Include physicians in decisions.*
- *Assess burnout and take actions.*

Real Life Applications



- *Recruitment can happen anywhere – so always be recruiting (meetings, training, conferences, past colleagues, etc.).*
- *Open positions are lost money – plan ahead and keep sourcing for candidates, as they are elusive.*
- *Only you know the best things about your facility – make sure everyone knows.*
- *Use technology to your advantage.*
- *Completing the checklists gives you a roadmap to success.*

Always keep your lure in the water!

Questions

