



**Connecting Physician Recruitment,
Retention and Revenue**

JACKSON
Physician Search



Projected physician shortfall between 40,800 and 104,900 by 2030.

Demographic trends continue to be the primary drivers of increasing demand from 2015 to 2030.

Physician's retirement decisions are projected to have the greatest impact on supply.

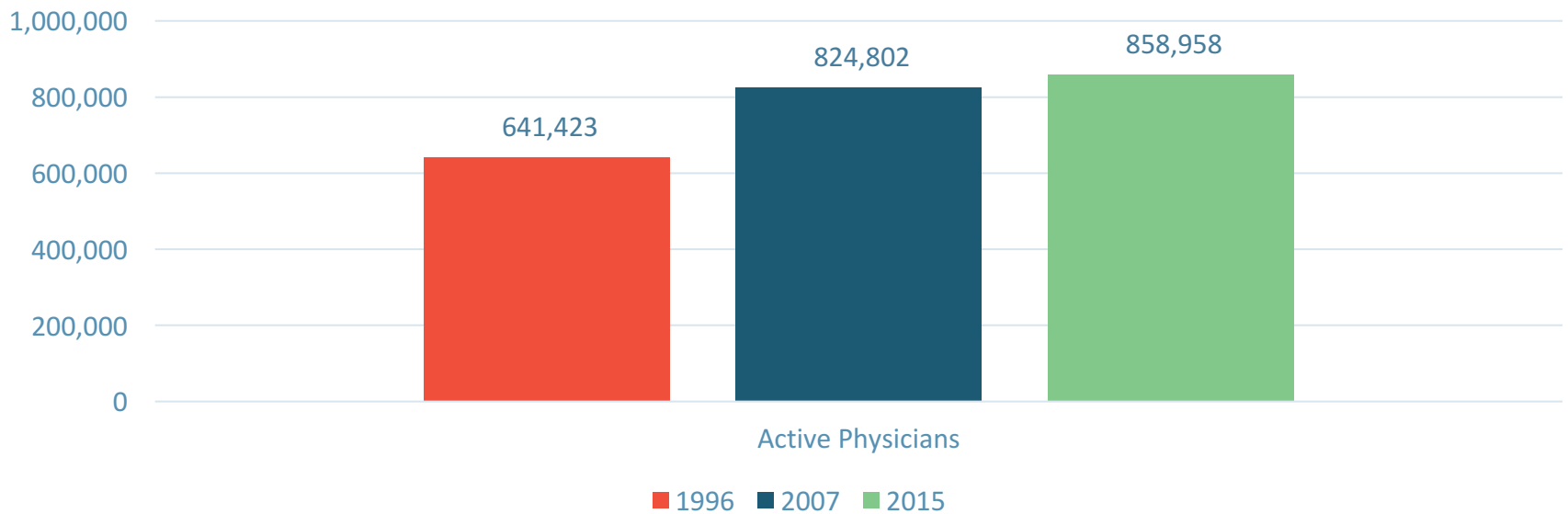
If underserved populations had standard care utilization patterns, demand for physicians would rise substantially.

Achieving population health goals will likely raise demand for physicians.

Source: "The Complexities of Physician Supply and Demand 2017 Update: Projections from 2015 to 2030." IHS Markit for Association of American Medical Colleges. February 2017

PHYSICIAN LANDSCAPE

Active Physicians in the US (1996 – 2015)

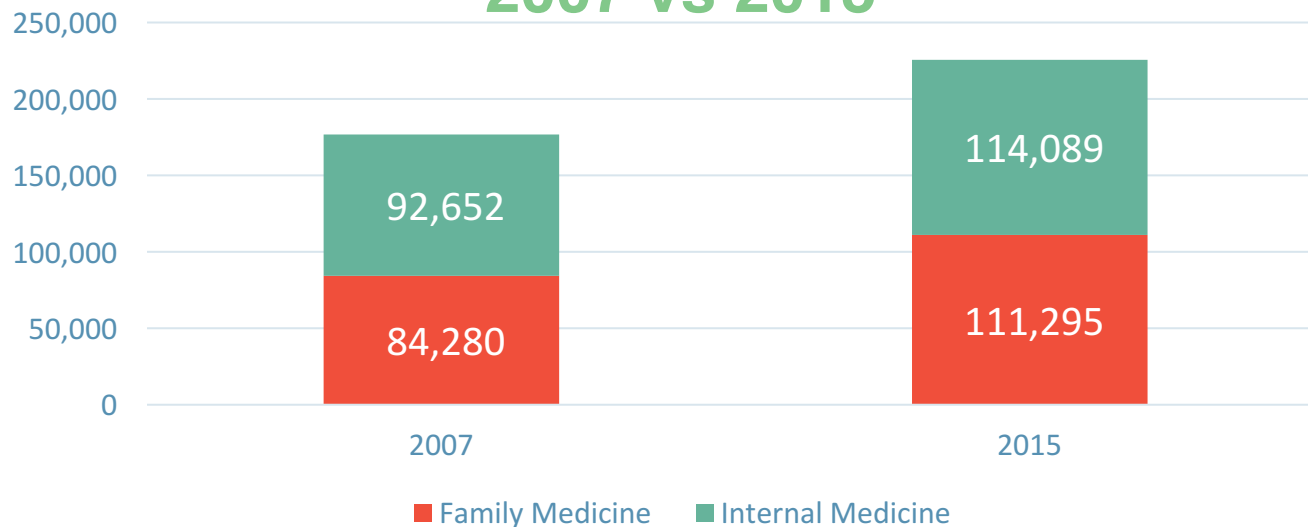


Source: AAMC 2008 Physician Specialty Data and AAMC 2016 Physician Specialty Data Report

PHYSICIAN SUPPLY INCREASING... BUT NOT ENOUGH

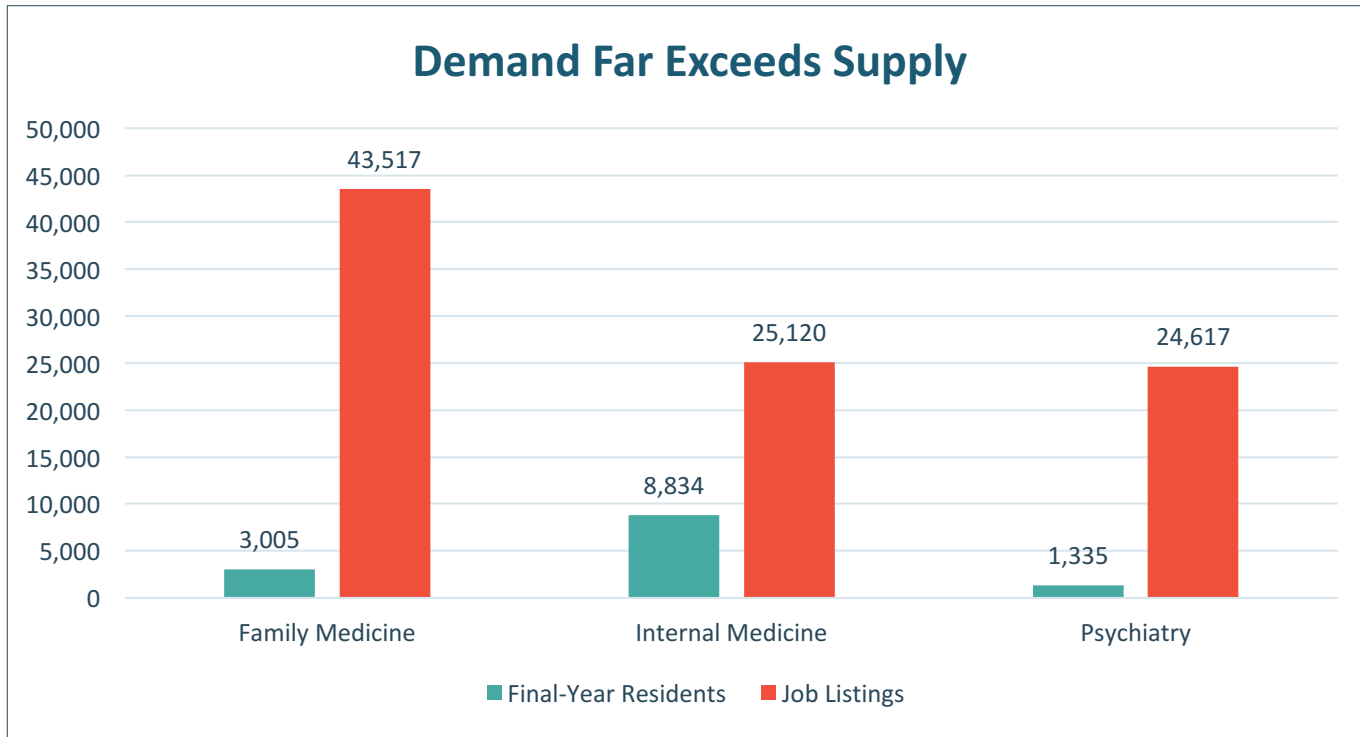
Though the *total* pool of active primary care physicians is growing, it is **not enough to keep up with demand and population growth** which exceeds these numbers significantly.

Active Primary Care Physicians 2007 vs 2015



Source: AAMC 2008 Physician Specialty Data and AAMC 2016 Physician Specialty Data Report

PHYSICIAN SHORTAGE



Source: Jackson Physician Search analysis of job board listings; MMS Resident Physician Data. May 2017.

SHORTAGE IS ACCUTE OUTSIDE OF MAJOR CITIES



About 20%

of Americans live in rural areas where many do not have easy access to primary care or specialist services

Only 10%

of physicians practice in rural areas

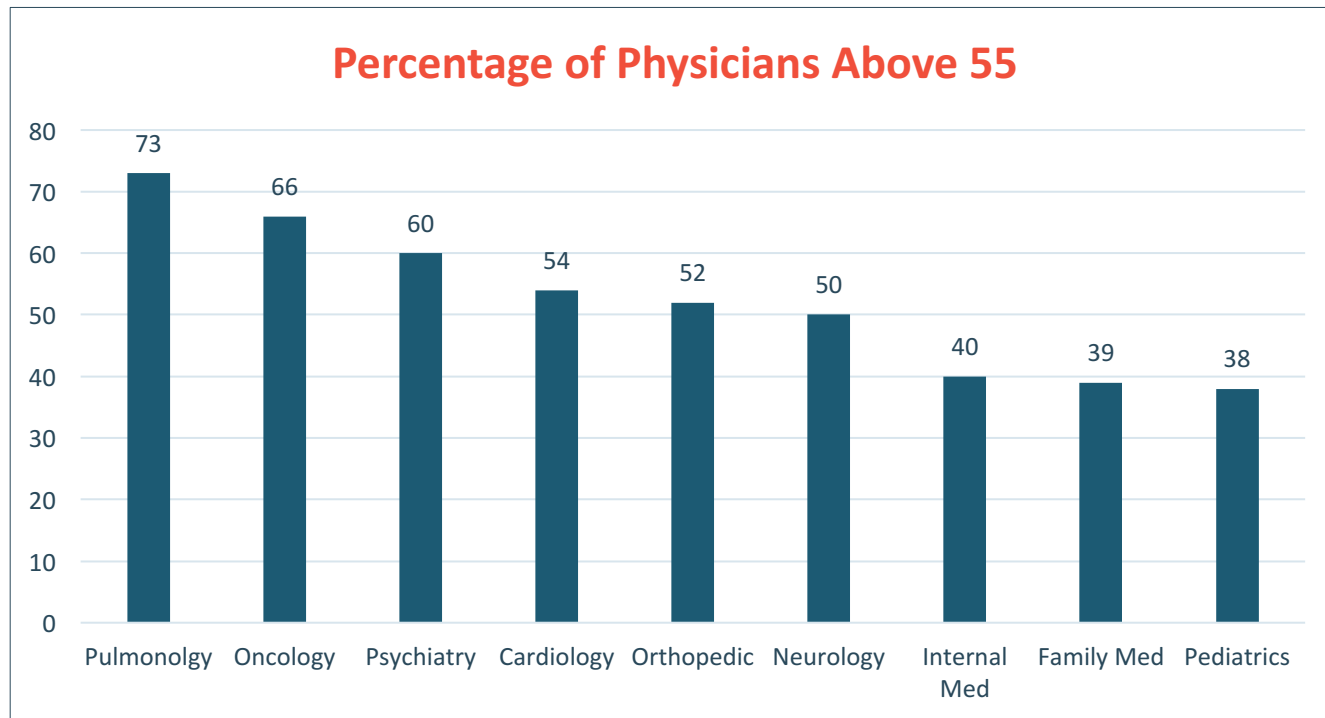
Source: Trend Watch, American Hospital Association, January 2015 and Doximity

Aging Physician Workforce 2007 vs 2015

Proportion of physicians over 55 has
risen to over 43%

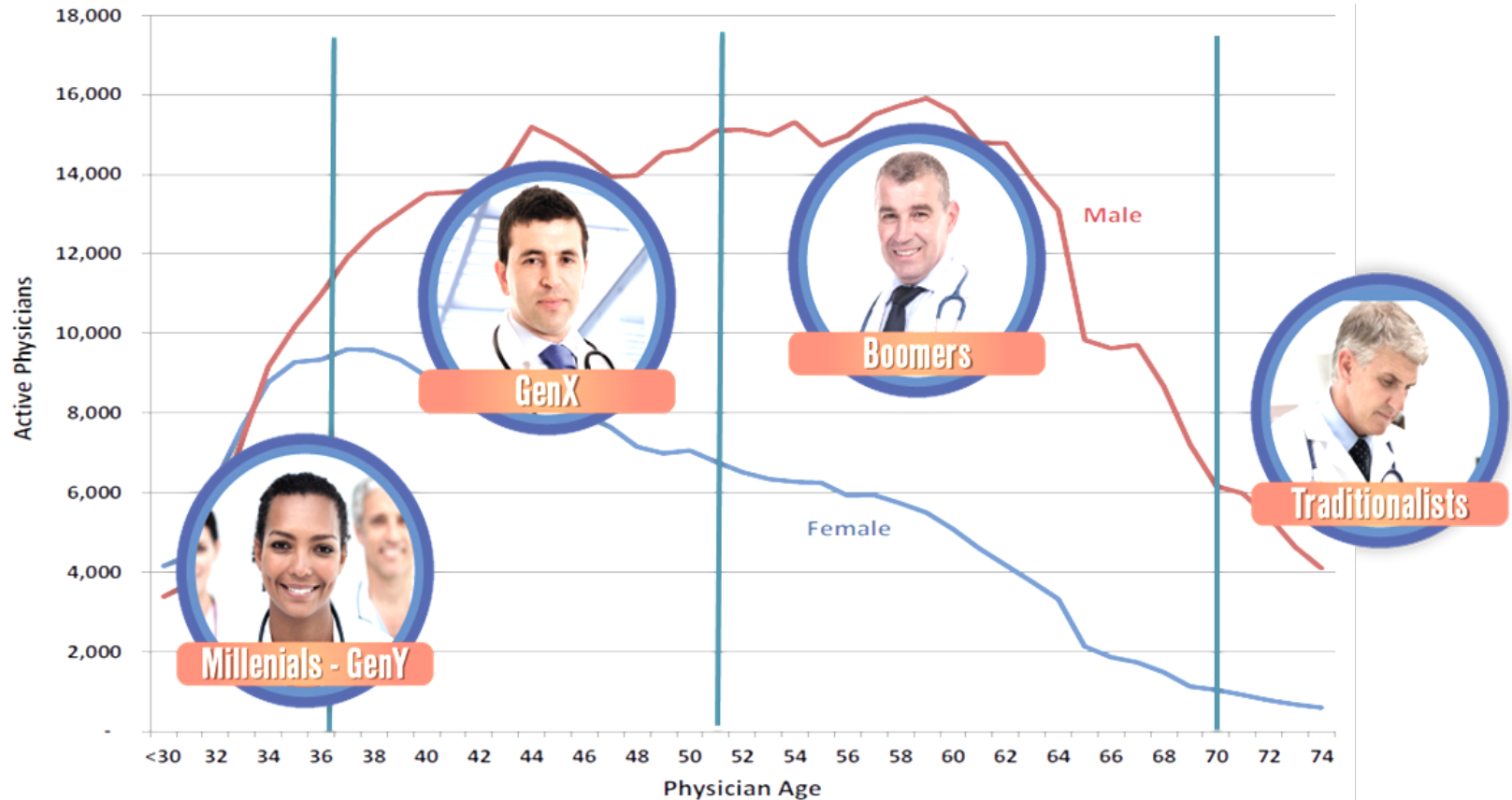
Source: AAMC 2008 Physician Specialty Data and AAMC 2016 Physician Specialty Data Report

AGING PHYSICIAN WORKFORCE



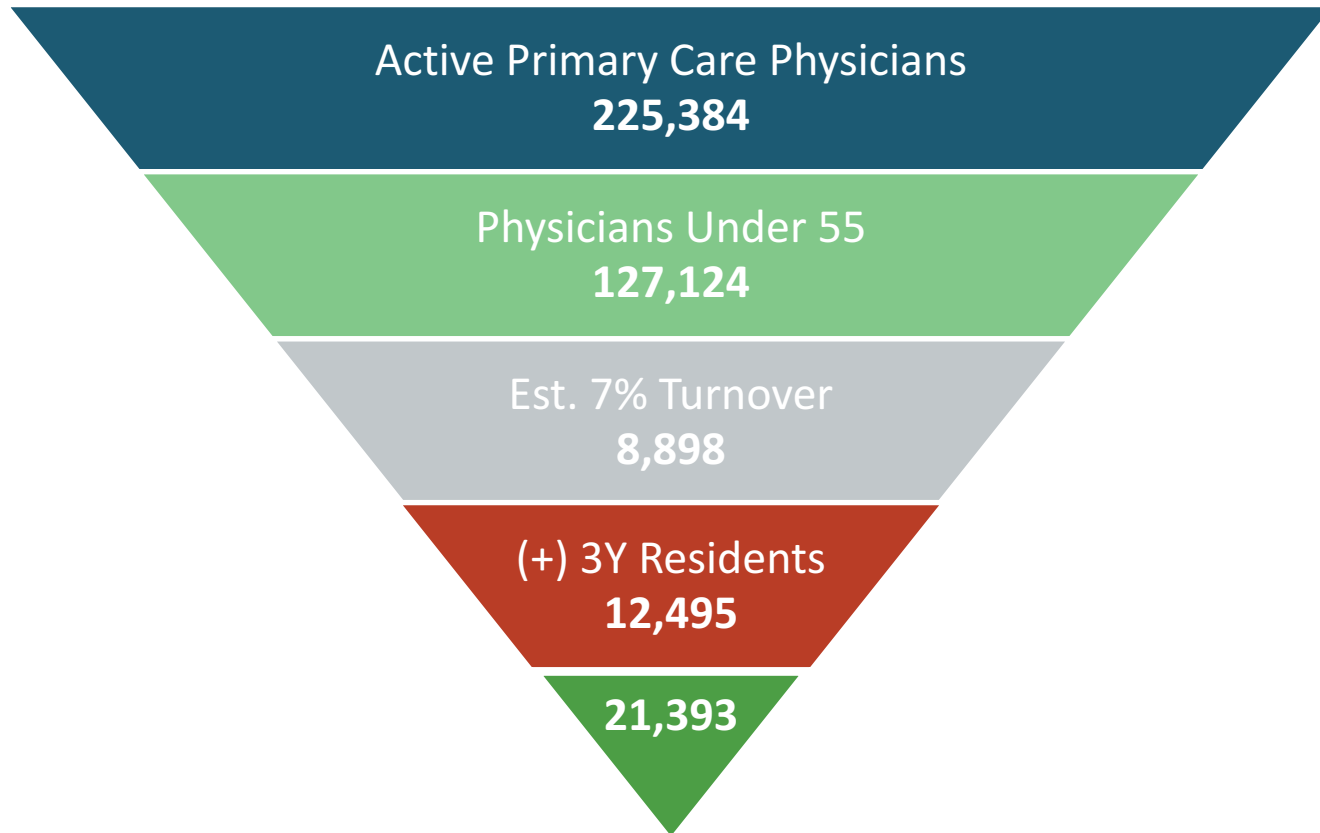
Source: Doximity Talent Finder

CHANGING FACE OF MEDICINE



Source: AAMC The Complexities of Physician Supply and Demand, April 2016

PRIMARY CARE CANDIDATE POOL



Source: 2015 AAMC State Physician Workforce Data Book



COMPONENTS OF COMPENSATION

Be as
transparent as
possible
regarding how
the compensation
formula works

Salary

Benefits

Bonuses

Incentives

COMPONENTS OF COMPENSATION

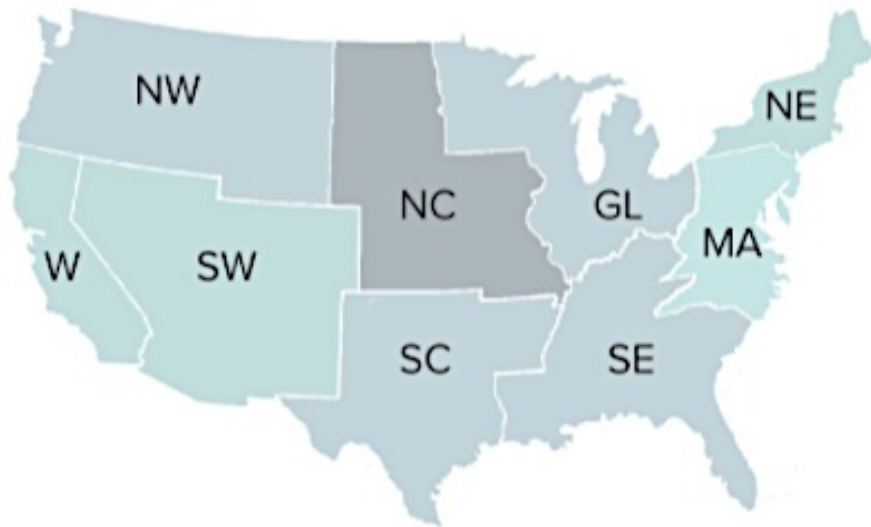
Examples of Popular Hiring Incentives

- ✓ Stipend while training
- ✓ Student loan repayment
- ✓ Relocation
- ✓ Signing Bonus
- ✓ CME
- ✓ Paid Time Off
- ✓ Personalized Incentives



GEOGRAPHIC COMPENSATION TRENDS

Physician Compensation by Geographic Region

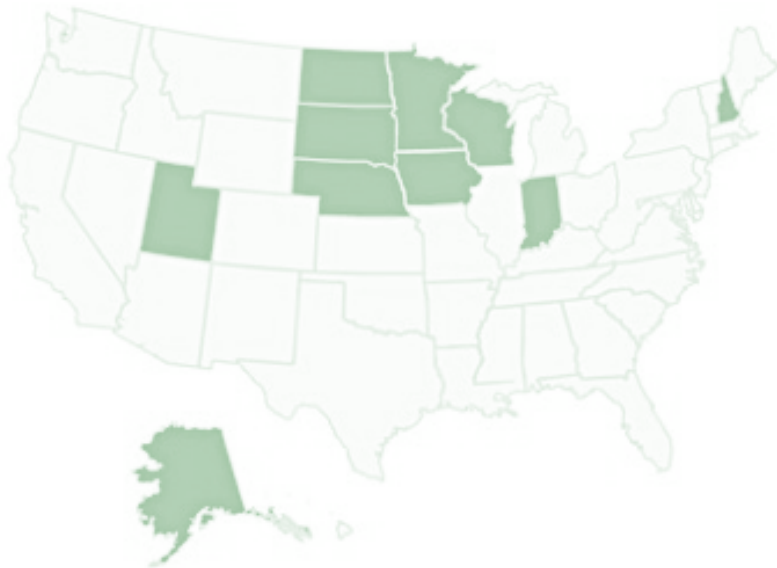


\$317k	North Central
\$303k	Great Lakes
\$301k	Northwest
\$300k	South Central
\$297k	Southeast
\$296k	Northeast
\$292k	Southwest
\$290k	West
\$282k	Mid-Atlantic

Source: Medscape Physician Compensation Report 2017

GEOGRAPHIC COMPENSATION TRENDS

Top Earning States for Physicians Overall



\$361k North Dakota
\$359k Alaska
\$354k South Dakota
\$346k Nebraska
\$337k New Hampshire
\$332k Wisconsin
\$327k Utah
\$325k Iowa
\$324k Minnesota
\$322k Indiana

Source: Medscape Physician Compensation Report 2017

MORE IMPORTANT THAN MONEY

Confidence

62% My hospital / health system is a name I can always trust

45% My hospital / health system delivers on what they promise

Integrity

46% My hospital / health system always treats me fairly

36% My hospital / health system can always be counted on to reach a fair resolution

Pride

66% My hospital / health system makes me proud to be a part of

48% My hospital / health system treats me with respect

Passion

35% My hospital / health system is perfect for physicians like me

25% My hospital / health system is one where I can't imagine a world without them



SOCIAL AND DIGITAL MEDIA



94% of *all* physicians use **smartphones** for professional reasons

Source: Maximizing Multi-Screen Engagement Among Clinicians, Epocrates, Inc. 2013; MedTech Media 2015

SOCIAL AND DIGITAL MEDIA



31% of *all* physicians use **social media**
for **professional** networking

Source: Maximizing Multi-Screen Engagement Among Clinicians, Epocrates, Inc. 2013; MedTech Media 2015

SOCIAL AND DIGITAL MEDIA

over

95%

of physicians prefer to receive information about
job opportunities via email.

49% of healthcare professionals read job opportunity
emails **after 6 p.m.**

Source: MMS Job Opportunity Preferences

REACHING CANDIDATES

We are overfilling physician candidate's plates –
We must be more targeted and *strategic*.

39%

of physician candidates
reported being
**contacted multiple
times per week** about
job opportunities.

Less than

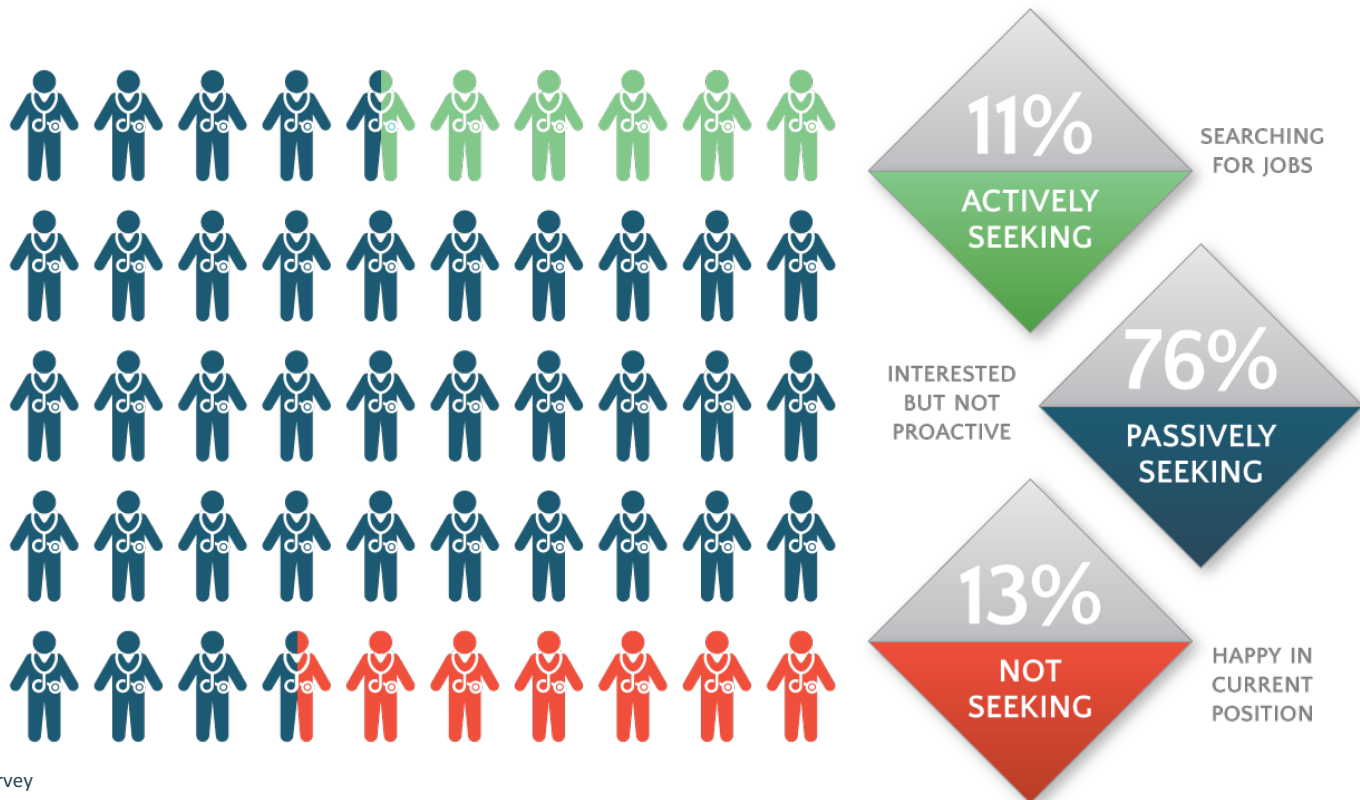
10%

of **recruiter
communications are
relevant** as reported by
the majority of physicians.

Source: Doximity Physician Survey

REACHING DIGITAL OMNIVORES

Low Supply and High Demand Means Increased Need to Reach Passive Candidates



Source: Doximity Member Survey

SUCCESS FACTORS FOR RECRUITMENT



Identify the **controllable variables** that you can **leverage for successful outcomes**



Adopt **modern recruiting technologies and techniques** that provide a competitive recruitment edge



Create **benchmark metrics** that will measure recruitment performance and return on investment



THE KEY TO ROI



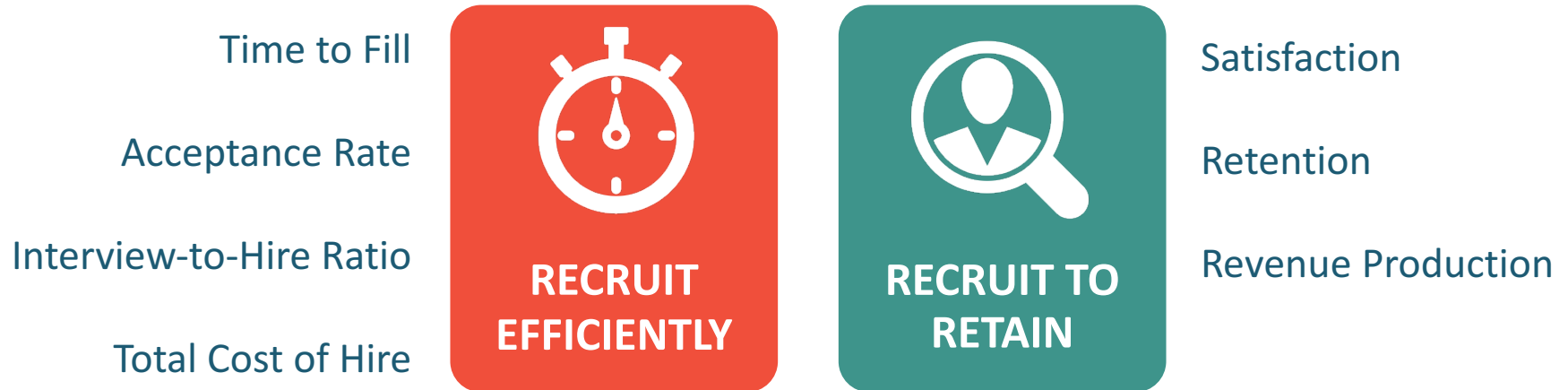
**RECRUIT
EFFICIENTLY**



**RECRUIT TO
RETAIN**

**Optimize Recruitment Efficiency while Sourcing Candidates
Who will Fit, Succeed, and Stay.**

BENCHMARK METRICS THAT DRIVE ROI



**Optimize Recruitment Efficiency while Sourcing Candidates
Who will Fit, Succeed, and Stay.**

BE FAST *AND* STRATEGIC

**Streamline the Process to
Shorten the Time-to-Fill,
Helping to Minimize Expenses
and Maximize Return**



BE FAST *AND* STRATEGIC

Accelerating your search by

30 days

can equate to over

\$69,000

in revenue

****Averages for Primary Care – extended Specialist vacancies
equate to even more lost revenue***



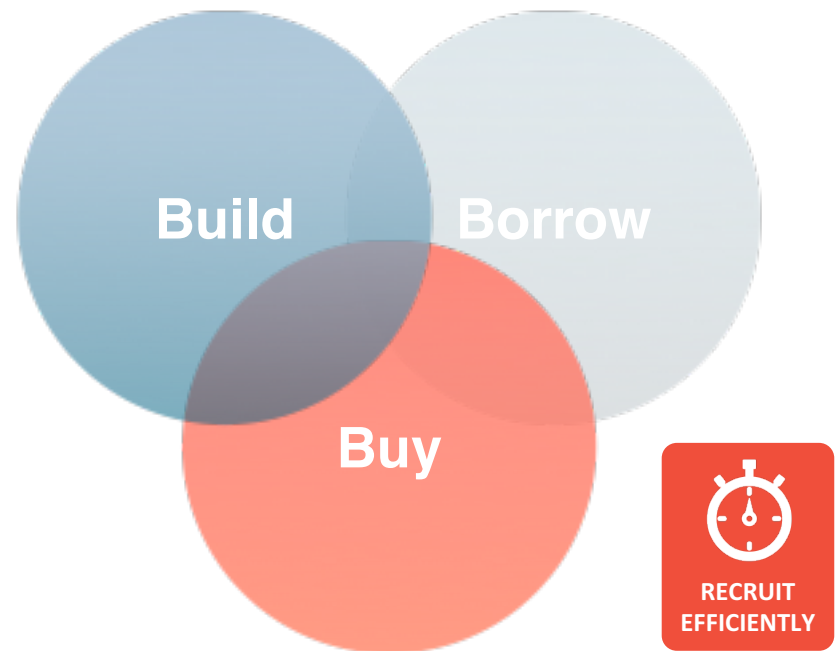
Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report

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BE FAST AND STRATEGIC

Crafting an Agile and Strategic Recruiting Process

- ✓ Physician database
- ✓ Social media sites
- ✓ Mobile compliant website
- ✓ Online application system
- ✓ Email marketing system
- ✓ Job board presence
- ✓ Proactive communication
- ✓ Candidate vetting process
- ✓ Outreach and event presence



BE FAST AND STRATEGIC

How to Lower the Cost of Hire and Maximize Revenue

**Reduce
Interview-to-Hire
Ratio from
5:1 to 3:1
for Cost Savings of
\$18,000**

** Estimating \$6,000 per Interview in travel
and team hours*

**Improve
Acceptance Rate
from 70% to 90%
for Cost Savings of
\$24,000**

** Estimating \$24,000 to restart search
and resume interviews for declined offer*

**Shorten Vacancy Time
by 60 days
for Revenue Gain of
\$138,000**

** Given \$828,000 average revenue per
primary care physician per year
(specialists will be more)*



Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report

RECRUIT TO RETAIN AND DRIVE ROI

Avoid the **Cost of the Wrong Hire**

What does it cost to hire the wrong doc?



Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report

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RECRUIT TO RETAIN AND DRIVE ROI

Avoid the **Cost of the Wrong Hire**

\$828,000 - \$1,575,782

in Lost Annual Revenue

** Cost of lost revenue varies by specialty. Range showing primary care to general surgery.*



Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report

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RECRUIT TO RETAIN AND DRIVE ROI

Avoid the **Cost of the Wrong Hire**

\$250,000

in Recruiting Expenses

** Including Search Expenses, Sign-on Bonuses, Income Guarantees,
Relocation Costs, Marketing Expenses, etc.*



Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report

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RECRUIT TO RETAIN AND DRIVE ROI

Avoid the **Cost of the Wrong Hire**



in **Hidden Turnover Expenses**

** Including Orientation, Credentialing, Training, Additional Administrative Time, Decreased Productivity and Morale, Lost Patient Loyalty, etc.*



Source: AMGA 2017 Medical Group Compensation and Production Survey, MGMA 2017 Practice Compensation Report



CULTURE AND ENGAGEMENT

in your organization...

**who sells the
Vision?**

CULTURE AND ENGAGEMENT

in your organization...

who shows the
Culture?

CULTURE AND ENGAGEMENT



In order to achieve a state of active engagement...

Hospital Systems

actively seek to optimize the physician experience, even if cultural and organization structures must be modified.

Successful recruitment and retention requires leaders, physicians and the community to think and act in new ways.

CULTURE AND ENGAGEMENT

The Interview: Window to Your Culture



CULTURE AND ENGAGEMENT

The Interview: Selling the Vision

Bring Your “A” Game to *Every* Interview



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graph TD; A[Bring Your "A" Game to Every Interview] --> B[Involve the Spouse / Family]; B --> C[Make Them Both Feel Special]; C --> D[Sell the Vision and Culture of Your Organization];
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Involve the Spouse / Family

Make Them Both Feel Special

Sell the Vision and Culture of Your Organization

ADDITIONAL RESOURCES

[Physician Salary Calculator](#)

[White Paper: Physician Workforce Through 2030](#)

[Guide to Developing a Strategic Physician Recruitment Plan](#)

[Infographic Guides: Physician Trends, Engagement and Networking](#)

[Case Studies](#)

Find these and more at:
www.jacksonphysiciansearch.com