

Creating an Environment that Attracts Top Physician Talent

By Mike Coppola, Dr. Jeff Morris and Julie O'Shaughnessy

The current shortage of physicians and surplus of vacancies mean competition for physician talent is high. While health systems benefit from physicians making the shift from private practice to health system employment, the “war for talent” is only escalating in an increasingly competitive healthcare landscape. Healthcare organizations that demonstrate they can provide the cultures, reimbursement models, working relationships and compensation packages physicians are looking for in health system employment will set themselves apart from the competition as a top employer of choice.

Healthcare organizations that provide what physicians are looking for will set themselves apart from the competition as a top employer of choice.

Culture: Physician Wellness Is Essential

A health system's organizational culture reflects its shared values, goals and behaviors, all of which significantly impact the physician. Healthcare leaders work hard to establish positive workplace cultures, but they have a major systemic problem working against them: burnout. In a recent survey from [Medscape](#), more than 15,000 physicians revealed just how bad burnout really is, both physically (increased substance abuse, lack of sleep, exacerbated medical conditions) and emotionally (increased depression, deterioration of relationships, suicide and suicidal ideation). Leaders cannot develop and preserve the workplace cultures that physicians are looking for if they do not address physician well-being and resilience first.

While it is impossible to completely eliminate all of the sources of burnout, healthcare leaders can greatly reduce its detrimental effects in three ways. First, leaders must make it clear that they take physician well-being seriously and remain committed to providing a safe, supportive and fulfilling clinical environment. Second, leaders should include physicians in developing tactics for preventing burnout. Burnout solutions must be about addressing the day-to-day work, not creating escapes from the day-to-day work. Given their vantage point on the front lines, physicians are experts when it comes to understanding the policies, processes and administrative tasks that make it harder to do their job. By working together, leaders

and physicians can create greater ease of practice. Lastly, healthcare organizations must have a system in place that helps physicians safely and effectively manage burnout. Consistent education on building resiliency, on-site access to mental health services and improved processes that support efficiency can all help to mitigate burnout.

Reimbursement: Transparency, Transparency, Transparency

Healthcare organizations have been struggling with the complex world of reimbursement for years. In 2019, Centers for Medicare & Medicaid Services (CMS) announced [five primary care reimbursement models](#) that will debut in 2020. The five models are designed to shift a physician's primary focus from revenue cycle back to where it belongs: caring for their patients.

Though these models aim to benefit patients and physicians, it is the healthcare organizations that bear responsibility for managing reimbursement. With limited visibility into how the system works, physicians have no way of knowing if they are being reimbursed appropriately, which does nothing to enhance trust in the physician-health system relationship. Leaders can lessen the pain of reimbursement by increasing transparency in three ways.

First, physicians need to know what's expected of them. Consistent communication on the organization's clinical goals and definition of success can help to make a physician's role crystal clear. Second, physicians need to know how well they are performing against those expectations. It is critical for physicians to have timely, specific and actionable feedback on their performance. Lastly, physicians need to know that their employer can be trusted to handle reimbursement. By educating physicians on the process and making reimbursement information clear and readily available, physicians will know where they stand and trust that their employer has their best interest in mind.

The Physician-Health System Relationship: Collaborate and Partner With Physicians

The transition from private practice to health system employment doesn't mean that physicians are necessarily happier working in health systems, or that they were unhappy working in private practice. If it were not for the financial burden, many in private practice may not have moved. Healthcare leaders have an opportunity to transform the physician-health system relationship by giving physicians the best of both worlds: job security with the ability to influence organizational decisions, work-life blend with unique career opportunities, and less administrative burden while maintaining a sense of independence.

Including physicians in the decision-making process helps them feel supported and appreciated. Physicians who are invested in their roles as care provider, teammate and influential stakeholder are more likely to enjoy the work they do, giving them good reason to stay with one employer for the long term. Further, health systems that have a reputation for investing in their physicians and valuing their input are more attractive to physicians looking for their next move.

Compensation: Transform Compensation by Connecting It to Outcomes

As physicians continue to leave private practice for employment in health systems, there is an opportunity for leaders to differentiate their organizations as employers by developing new models for compensating and incentivizing physicians. Many healthcare organizations offer physicians a signing bonus, funding for continuing medical education and student loan repayment. However, compensation packages aren't necessarily the key to making newly recruited physicians more successful. [Research confirms](#) that, although physician compensation has increased considerably, productivity has increased only marginally. In short, more money is not leading to greater output — or better quality.

Recognizing this problem, some healthcare organizations have instituted bonuses tied, in part or in whole, to outcomes such as better patient experiences, improved population health, shorter wait times, improved quality metrics, and improved accuracy of diagnosis and treatment. In this compensation model, the organization and the physician are more closely aligned with the industry's shift toward valuebased care. This creates greater transparency, both for the patient in understanding what they're paying for and for the physician in understanding exactly what is expected of them and how they get paid. Aside from a paycheck, healthcare leaders should explore other forms of compensation; increasing ease of practice, research funding, flexibility of hours, more paid time off, well-being services and greater shift coverage can help restore the sense of autonomy physicians tend to lose when moving from private practice to health system employment.

The combination of the physician shortage and a surplus of vacancies means healthcare leaders must reevaluate their relationships with physicians — and quickly. By understanding the physician mindset — their pain points, how they think and what they want out of health system employment — healthcare leaders can attract the best physician talent and build robust physician-health system relationships to make them stay.

Key Takeaways

To put themselves ahead of the competition for physician talent, healthcare leaders should:

Think differently.

Redefine the physician-health system relationship as a collaborative partnership rather than an employer and its subordinates.

Plan differently.

Put the systems and processes in place to address and solve for physicians' most pressing challenges.

Act differently.

Communicate openly about expectations and provide full visibility into reimbursement.



[huronconsultinggroup.com](https://www.huronconsultinggroup.com)

© 2022 Huron Consulting Group Inc. and affiliates. Huron is a global consultancy and not a CPA firm, and does not provide attest services, audits, or other engagements in accordance with standards established by the AICPA or auditing standards promulgated by the Public Company Accounting Oversight Board ("PCAOB"). Huron is not a law firm; it does not offer, and is not authorized to provide, legal advice or counseling in any jurisdiction. 20-0137