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## MGMA Physician Placement Starting Salary Survey Highlights

The 2009 Physician Placement Starting Salary Survey, a collaborative effort by the Medical Group Management Association (MGMA) and the National Association of Physician Recruiters (NAPR), was recently released, providing timely data to aid hospitals and medical groups in making competitive and realistic offers. In this increasingly challenging recruitment environment, employers need tools to help determine the right mix of salary, bonus, and benefits that are needed to recruit physicians.

Based on 2008 data, this 2009 report represents the participation of over 600 groups and is based on offers accepted by 3,500 providers across the country. The survey reports on starting salary data by specialty, practice type, geographic region, and practice model and size. Salary data is categorized by years of experience, including in which specialties new graduates' salaries are exceeding those of experienced physicians. Also included in the report are data on bonuses — production and signing, tail coverage, loan forgiveness, vacation, and CME time. New this year is a section on nonphysician providers, including CRNAs, physical therapists, psychologists, and more.

Economic pressures are complicating employers' decisions on the best structures of offers. They must be competitive while still minimizing the groups' risk and taking into account financial parameters. Decisions are equally complicated for job-seeking physicians who are balancing the need to reduce high debt but still face the uncertainties of the housing and employment markets. The results of this

study will help groups to learn what is being offered and determine the right mix of compensation, benefits, and incentives.

Some states are experiencing more success than others in recruiting physicians. Between 2006 and 2008, only seven states have shown an increasing trend in placements. These states are Virginia, Florida, Kentucky, Louisiana, Missouri, Oregon, and Colorado. Ten states have had a decrease in placements, most notably in Pennsylvania, Wisconsin, Nevada, Arizona, Massachusetts, and Mississippi. Some states that reported high placement numbers (including Illinois and North Carolina) attracted more physicians right out of training, while California, Florida, and Texas hired more experienced physician candidates. Interestingly, many physicians are relocating within a state, such as in Florida, North Carolina, and New York.

The physician recruiting market, largely affected by shortages, is driving up median salaries so much that groups and organizations are being pushed to be more competitive. In fact, in some specialties, graduating fellows are being offered the same or more than experienced physicians. Specifically, fellows in infectious diseases and hematology/oncology are being offered more than their practicing colleagues. This is happening most notably in hematology/oncology, with median compensation offered to fellows at \$350,000 and \$300,000 to newly hired, experienced oncologists. Similar trends are noted in emergency medicine and neonatology, though the differences are slight.

There are also differences in compensation level based on the type of model a physician joins, whether a single or multispecialty

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group practice or an employed hospital group. With the exception of only three specialties — surgery, GI, and endocrinology — starting salaries were the highest for physicians joining employed hospital practices. Many recruiters have commented on the increasing number of physicians who chose employed hospital practices over private practices.

When looking at how salaries have changed from 2005 to 2008, some specialties have seen significant increases, while other areas have experienced only minor increases and even some decreases. The greatest change in starting salaries has been in pulmonary medicine. In 2005, the median salary offered was \$180,000, and in 2008, it was \$249,531, representing a 38.6% change. Interestingly, though, the median dropped 2.1% from 2007 to 2008, from a high of \$274,358. In dermatology, from 2005 to 2008, the median increased by 36.5% from \$197,000 to \$270,000. In gastroenterology, the median salary has dropped by 1.5% over the past four years.

In primary care, around which there has been significant dialogue among health care leaders concerning the projected collapse of primary care infrastructure, median salaries increased from 2007 to 2008, most notably in internal medicine in which a 10% increase occurred. While overall there was a 10% increase in median compensation in all specialties, there were decreases in invasive cardiology, obstetrics/gynecology, otorhinolaryngology, psychiatry, and urology.

The survey represents a broad sampling of physicians and employers. While the majority of placements reported are among physicians with 1 to 2 years of experience (representing 46.8% of the survey group), over 21% of responses are based on offers to physicians with 3 to 7 years experience. Over 18% are with 8 to 17 years. There is

more information available on male compensation, comprising over 65% of the survey's results; however, with over half of recently enrolled medical students being women, future surveys will most certainly represent more women's salaries.

The majority of employers represented in this survey are including production bonuses as part of the physician compensation formula. Notably, however, 37% are not. With the increasing use of pay-for-performance measures, the use of bonuses, whether they are individual or group-based, is bound to be reported more frequently. The gap is closing among employers who offer tail coverage. While 52% of surveyed employers are not offering tail coverage as part of their offers, 43.9% are.

The signing bonus is an often-used incentive to get physicians to sign employment contracts. Over half of survey respondents are offering sign-on bonuses. The amounts vary among specialties. In primary care, the average bonus is \$15,000; in specialty care, it is \$25,000. The highest bonus offered in 2008 was in orthopedic surgery for \$45,000. While not part of the survey, a number of employers are evaluating the effectiveness of retention bonuses.

Another incentive to entice physicians to sign on the dotted line is loan forgiveness. It is not prevalent among surveyed employers, however. Only 10% of groups and hospitals are offering loan forgiveness. The majority of employers are paying relocation expenses, with much variety as regards to amounts.

**Summary**

The 2009 Physician Placement Starting Salary Survey is a valuable tool that recruiters and the hospitals and medical groups for which they recruit can use to develop competitive offers in an increasingly competitive market. Recruiters who submit data for the survey can receive complimentary copies

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**MARKET WATCH**

**Median Comparison of Compensation and Signing Bonuses for New and Established Physicians**

	Compensation First Year out of Residency or Fellowship	Compensation All Physician (Excluding First Year out of Residency or Fellowship)	Signing Bonus First Year out of Residency or Fellowship	Signing Bonus All Physician (Excluding First Year out of Residency or Fellowship)
<b>All Primary Care:</b>	<b>\$ 140,000</b>	<b>\$ 145,000</b>	<b>\$ 15,000</b>	<b>\$ 10,000</b>
Family Practice (without OB)	\$ 140,000	\$ 145,000	\$ 15,000	\$ 15,000
Internal Medicine **	\$ 140,000	\$ 153,000	\$ 10,000	\$ 10,000
Pediatric/Adolescent Medicine**	\$ 130,000	\$ 135,000	\$ 15,000	\$ 10,000
<b>All Specialists:</b>	<b>\$ 240,000</b>	<b>\$ 250,000</b>	<b>\$ 20,000</b>	<b>\$ 20,000</b>
Anesthesiology **	\$ 250,000	\$ 300,000	\$ 10,000	\$ 20,000
Cardiology: Invasive **	\$ 350,000	\$ 400,000	\$ 29,500	\$ 25,000
Cardiology: Noninvasive	\$ 275,000	\$ 360,000	\$ 17,500	\$ 25,000
Dermatology **	\$ 250,000	\$ 246,500	\$ 20,000	\$ 15,000
Emergency Medicine	\$ 194,000	\$ 190,000	\$ 7,500	\$ 10,000
Gastroenterology	\$ 240,000	\$ 350,000	\$ 20,000	\$ 25,295
Hematology/Oncology **	\$ 250,000	\$ 315,000	\$ 20,000	\$ 25,000
Neurology	\$ 186,500	\$ 216,500	\$ 17,500	\$ 20,000
Obstetrics/Gynecology	\$ 205,000	\$ 225,000	\$ 20,000	\$ 17,500
Ophthalmology	\$ 150,000	\$ 215,000	\$ 10,000	\$ 20,000
Orthopedic Surgery **	\$ 325,000	\$ 450,000	\$ 48,000	\$ 30,000
Otorhinolaryngology	\$ 220,000	\$ 335,000	\$ 15,000	\$ 25,000
Psychiatry**	\$ 165,000	\$ 200,000	\$ 10,000	\$ 10,000
Pulmonary Medicine	\$ 250,000	\$ 260,000	\$ 10,000	\$ 15,000
Radiology: Diagnostic**	\$ 250,000	\$ 390,000	\$ 35,000	\$ 35,000
Surgery: General	\$ 250,000	\$ 275,000	\$ 15,000	\$ 20,000
Urology	\$ 300,000	\$ 350,000	\$ 20,000	\$ 22,188

\*\*Represents specialties that are combined.

Source: "2009 Physician Placement Starting Salary Survey," conducted by the Medical Group Management Association ([www.mgma.com](http://www.mgma.com)) and the National Association of Physicians Recruiters ([www.napr.org](http://www.napr.org)). To purchase a copy of the study, visit [www.mgma.com/pm/article.aspx?id=9198](http://www.mgma.com/pm/article.aspx?id=9198), call (877) ASK-MGMA (275-6462), or e-mail [support@mgma.com](mailto:support@mgma.com).

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of it. The NAPR encourages greater participation each year to make survey data richer. In fact, respondents can now enter data on a perpetual basis so that the information can be entered when placements are made. They can then be stored, compiled, and submitted at the end of the year, rather than requiring respondents to save the data as it's obtained and then enter all of it for the year in one sitting. Depending on the volume, this can be very time-consuming. Recruiting in today's market requires a comprehensive understanding of market dynamics, and the Physician

Placement Starting Salary Survey is one more tool to help build that understanding.

Source: "2009 Physician Placement starting Salary Survey," conducted by the Medical Group Management Association ([www.mgma.com](http://www.mgma.com)) and the National Association of Physicians Recruiters ([www.napr.org](http://www.napr.org)). To purchase a copy of the study, visit [www.mgma.com/pm/article.aspx?id=9198](http://www.mgma.com/pm/article.aspx?id=9198); call (877) ASK-MGMA (275-6462); or e-mail [support@mgma.com](mailto:support@mgma.com).

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**What's New at NEJM?**

**LOCUM TENENS JOBS AVAILABLE AT NEJM CAREERCENTER**

**Timely, Targeted, Trusted**

Whether you are looking to hire a locum tenens physician for one week, one month, one year, or even longer, NEJM CareerCenter ([nejmjobs.org](http://nejmjobs.org)) is where physicians find jobs. NEJM has packages available for jobs in all specialties, and your ads will be posted within 24 hours. Packages range from one job to an unlimited number of jobs. Put the most trusted name in medicine to work for you, and we'll find your next locum tenens hire. NEJM CareerCenter was ranked as the #1 online jobs source in terms of usefulness by physicians in a recent independent study.\* For more information, contact NEJM at (800) 635-6991 or e-mail [nejmads@nejm.org](mailto:nejmads@nejm.org).

\*"2008 How Physicians Search for Jobs," an independent, blind study conducted by Zeldis Research Associates, Inc.

**UPCOMING  
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**National Rural  
Recruitment and  
Retention Network**  
September 23–25, 2009  
Albuquerque, NM  
[www.3rnet.org](http://www.3rnet.org)

**Northeast Physician  
Recruiters Association**  
October 28–30, 2009  
Portsmouth, NH  
cbourbeau@  
brishosp.chime.org  
mcragon1@elliott-hs.org

**Midwest Recruiters  
Conference**  
November 4–6, 2009  
Chicago, IL  
[www.isprnet.org](http://www.isprnet.org)

**Association of American  
Medical Colleges\***  
November 8–9, 2009  
Boston, MA  
[www.aamc.org](http://www.aamc.org)

**American Heart  
Association\***  
November 15–17, 2009  
Orlando, FL  
[www.americanheart.org](http://www.americanheart.org)

**American Society of  
Hematology\***  
December 5–7, 2009  
New Orleans, LA  
[www.hematology.org](http://www.hematology.org)

\*Call (800) 635-6991 or e-mail [nejmads@nejm.org](mailto:nejmads@nejm.org) for more details on bonus convention distribution of your paid recruitment ad in selected NEJM issues at these physician conventions.

**PROMOTIONAL NOTES/NEWS**

**Reach Final-Year Residents and Fellows in ALL Specialties\* with the October and November Resident Reach NEJM Issues!**

**Run a paid advertisement in both the October and November Resident Reach issues of the *New England Journal of Medicine* (NEJM), and in addition to the 200,000 physicians that read NEJM regularly, you'll reach over 30,000 final-year residents and fellows in ALL specialties with each issue for FREE!**

Your ad will be reprinted in a special booklet and mailed to these job-seeking physicians, giving you the best access to candidates. You can also connect to thousands of top physicians online because your ad can also be posted to NEJM CareerCenter ([nejmjobs.org](http://nejmjobs.org)).\*\*

Issue	Closing Date	Specialties
October 8	September 18	ALL Specialties — Over 100!*
November 12	October 23	ALL Specialties — Over 100!*

Contact us at (800) 635-6991 or [nejmads@nejm.org](mailto:nejmads@nejm.org) to reserve your ad space for these issues and for complete promotional details.

\*The recruitment section of each NEJM *Resident Reach* issue is reprinted and mailed to approximately 30,000 final-year residents and fellows in all specialties whose address records appear on the AMA database. Counts are estimates and are subject to change based on data collected by the AMA.

\*\*Processing fees apply to post your ad to the searchable part of the website.

**Make More Informed Advertising Decisions — Get Your Free Copy of the 2009 Essential Journal Study and Learn Which Journals and Sources of Job Leads are Essential to Physicians!**

In an independent, blinded, and unaided survey, physicians in 13 specialties were asked to name the journals they consider “essential” to their practice — meaning they read them sooner, more thoroughly, and were the ones more likely to contain ads of interest when compared with “nonessential” journals.

Additionally, the Essential Journal Study surveyed those same practicing physicians in 13 specialties to rank sources of job leads used in their most recent job search.

To order your free copy of the Essential Journal Study, please e-mail us at [nejmjobssupport@nejm.org](mailto:nejmjobssupport@nejm.org) and indicate whether you wish to receive the study via PDF or as a hard copy.