

Home

Register

Contac

Blog





Medi-Alerts

For alerts on health related topics, enter your email below. Anyone subscribing will be entered for a FREE draw for a copy of the book: "MediCrats"

Υοι	ır Email *		
Mu	st check one *		
	Patient		
	Doctor		
	Hospital		
	Other		

FEATURED TOPICS

One Million Saved

Free Tools

Healthcare Bill

Press

Videos

← Powering America: What is Radiation

Private Exchanges a Solution, but Not for All Insurance Agents | LifeHealthPro \rightarrow

Recruiting Firm Says Solo Physician Practice is Dead: SK&A

Posted on August 2, 2012 by Ralph

Like 3

It is getting harder and harder for physicians with their own practice to keep the doors open. Taxes, paperwork, and regulations are increasing, taking away time from quality patient care. Extra staff for simply the administrative work is a large cost, as is malpractice insurance, not to mention rent on an office building.

Solo practice is being killed by <u>mainstream insurance</u>, but they are thriving on MediBid. If you <u>need medical care</u>, just <u>register at MediBid</u>, make a request, and you'll be amazed at the prices.

Recruiting Firm Says Solo Physician Practice is Dead

http://www.skainfo.com/healthcare_industry_articles/healthcare_recruiting-071012.php?kw=EB8_12

It's no secret that solo practice by doctors has been diminishing. But a new finding by recruitment firm Merritt Hawkins declares that solo practice is all but dead.

In its annual review of physician recruiting incentives, Merritt Hawkins found that recruitment of doctors into solo practice settings is nearly nonexistent. Only 1 percent of its search assignments in 2011/2012 (down from 22 percent 11 years ago and 2 percent in last year's report) were for recruitments of doctors into solo practices.

That recruitment of doctors into solo settings is down is not a surprising finding said Kurt Mosley, vice president of strategic alliances for Merritt Hawkins and Staff Care, companies of AMN Healthcare, a nationwide healthcare staffing organization.

"It's not necessarily that surprising, but it dropped so dramatically," Mosley said. "That's what I think is really the telltale, I guess, the death knoll of the private practice that we've seen. As I think (the Merritt Hawkins' press release noted), nobody wants Marcus Welby any more. That concept doesn't play anymore and it's not effective."

As hospitals watch solo doctors closing practices due to financial and regulatory burdens, they do not want to spend the money to recruit a physician into solo practice when he or she may not be able to make it and will shut the practice down in a year or two, Mosley noted.

"When nobody is recruiting them that means that practice style is going away," Mosley said. Glen Stream, MD, president of the American Academy of Family Physicians (AAFP), does not dispute that solo practices are in distress but he disagrees with the recruiting report's assumption that a lack of recruiting requests for solo practice settings means solo practice is dead.

"I think it's way premature to put the nail in the coffin of solo practice," he said.
"If you're really trying to assess what's the current status of solo practice, you'd have to do a survey of solo practices ... as opposed to using this recruiting information as any reliable proxy for the status of solo practice."

That aside, Stream noted that he wouldn't discount what Merritt Hawkins' recruitment report has to say about the employment trends it found.

Trends that AAFP and the healthcare industry as a whole have been watching are reflected in Merritt Hawkins' report, such as

- Recruitment of physicians into hospital settings continues to grow. Merritt
 Hawkins noted that 63 percent of its search assignments in 2011/2012
 were for hospital employment of physicians, up from 56 percent the year prior and 11 percent eight years ago.
- As the national focus turns to primary care providers, those physicians continue to be the most sought after by hospitals and other medical groups. Family physicians and internists were the most requested recruitment searches. Other trends noted by Merritt Hawkins' survey of 2,710 physician and other healthcare search assignments conducted by

Search



Marketplace For Medicine®

The
Affordable
Insurance
Alternative

Click Here To Learn More



Categories

- Business and Medicine (227)
- Hospital Management (44)
- Hospital Safety (41)
- Incentives matter (40)
- Canadian Healthcare (276)
- Cost of Health Care (1271)
- Hospital Bills (52)
- Insurance (267)
- Medical Loss Ratio (14)
- Economics (2683)
- Employer Health Plan (66)
 - Health Insurance (53) Health (taking care of yourself) (132) Charity (13)
- Health Care Innovation (487)
- Common Sense Health Care Solutions (159)
 Free market medicine
- (401)
 Health Care Reform (790)

- the company between April 1, 2011 and March 31, 2012 include
- A "silent shortage" of psychiatrists. Psychiatry was the third most requested recruitment search as noted in the recruitment report. Unlike the shortage of primary care physicians, the shortage of psychiatrists is not discussed as much, said Mosley, but it is just as dire a situation as the demand for psychiatry services continues to grow.
- Physician compensation packages continue to replace income guarantees with salaries and, in a nod to the continuing difficulties in the housing market, to offer relocation and housing allowances.
- For the first time since Merritt Hawkins began its recruitment review, anesthesiology was not among the top 20 search assignments. Up-and-coming specialties are in pulmonology, reflecting the higher rates of patients with chronic obstructive pulmonary disease (COPD), Mosley noted, and oncology.

By Stephanie Bouchard, from Healthcare Finance News, July 10, 2012

Related content:

- 1. Government Medicine vs the Hippocratic Oath
- 2. 25% of Primary Care Physicians struggle financially, boosting shortage
- 3. Doc says 'physicians have reached a tipping point' [VIDEO]
- 4. Study Finds Small Group Health Insurance Enrollment Declined
- 5. Will My Doctor Still Care if I Point a Gun at Him?
- 6. Obamacare is Wrong for Women
- 7. Caution: Health Insurance May be Hazardous to Your Health
- 8. Paying cash to doctors affects the treatment plan
- 9. Health Care Battle Brewing In Tenn.
- 10. Why the Doctor Can't See You

Like 3

- Health Care Repeal (262)
- Healthcare Exhange (30)
- Dbámacare (406)
- obamacare exchange (26)
- Tort Reform (22)
- Health Law and Legislation (390)
- Fee Splitting (8)
- Health Care Taxes (241)
- Patient Privacy (47)
- Tax Increases (165)
- Medibid Television (3469)
- Medicaid expansion (16)
- Medical Tourism (150)
- Medical Travel (59)
- News (433)
- Health Care News (356)
- Politics (168)
- Uncategorized (43)
- Videos & Podcasts (61)

At <u>MediBid</u>, we restore market forces to medical care. <u>Doctors</u> get to set their own rates based on their training, experience, and outcomes, and patients get to shop for medical care across state lines and international borders. Many times with MediBid, you will find procedures that are more effective than procedures allowed, or covered by health plans. Transparency and competition are the only way to achieve reasonable costs. Many of our employer clients offering group health insurance through MediBid save \$5,000 per employee per year. Those are substantial savings. <u>Patients</u> are saving an average of 48% vs. insurance discounted rates, or 80% vs. retail. Contact us for more information.



Powered by Facebook Comments

This entry was posted in <u>Cost of Health Care</u>, <u>Economics</u>, <u>Free market medicine</u>, <u>Health Care News</u>, <u>Health Care Reform</u>, <u>Health Care Taxes</u>, <u>Health Insurance</u>, <u>Health Law and Legislation</u>, <u>Insurance</u>, <u>Medical Tourism</u>, <u>Obamacare</u>, <u>Tax Increases</u> and tagged <u>cash pay</u>, <u>Cato</u>, <u>Cost of Health Care</u>, <u>direct contracting</u>, <u>Free market medicine</u>, <u>government medicine</u>, <u>Health care reform</u>, <u>health care repeal</u>, <u>Obamacare</u>, <u>Tax increases</u>. Bookmark the <u>permalink</u>.

← Powering America: What is Radiation

Private Exchanges a Solution, but Not for All Insurance Agents | LifeHealthPro →

Home Register Contact Blog Copyright MediBid 2009-2011

ä