Provider Hours, Pay, Nights, & Vacations

David Calder, MBA Loma Linda University Health



Trends in Hours & Salary – All Ranks

	2013	2015	2016	2017	2018
Avg. Base Compensation	\$223,413	\$ 228,119	\$ 236,680	\$ 242,957	\$ 243,915
% Change Base Comp		2.1%	3.8%	2.7%	0.4%
Avg. Total Salary	\$260,250	\$ 272,084	\$ 285,716	\$ 292,927	\$ 296,940
% Change Total Salary		4.5%	5.0%	2.5%	1.4%
Avg. Base Clinical Hours	1,045	1,014	991	1,030	1,019
% Change Base Clinical Hours		-2.98%	-2.19%	3.85%	-1.07%
Avg. Annual Clinical Hrs	1,103	1,082	1,073	1,094	1,080
% Change Annual Hours		-1.9%	-0.8%	2.0%	-1.2%
Avg. Assumed Weeks in a Year	48	47	48	48	48
Avg. Standard Professional Enrichment Allotment				\$ 4,879	\$ 4,851
Number of Records	1,233	1,233	1,693	2,071	1,981

Chairs and Chiefs exluded. FTE >= 0.99. Pure Peds EM excluded



Nocturnist Data

	2013	2015	2016	2017	2018	2018
Avg. Base Compensation	\$223,413	\$ 228,119	\$ 236,680	\$ 242,957	\$ 243,915	\$ 256,853
% Change Base Comp		2.1%	3.8%	2.7%	0.4%	
Avg. Total Salary	\$260,250	\$ 272,084	\$ 285,716	\$ 292,927	\$ 296,940	\$ 320,089
% Change Total Salary		4.5%	5.0%	2.5%	1.4%	5.6%
Avg. Base Clinical Hours	1,045	1,014	991	1,030	1,019	1,180
% Change Base Clinical Hours		-2.98%	-2.19%	3.85%	-1.07%	16.76%
Avg. Annual Clinical Hrs	1,103	1,082	1,073	1,094	1,080	1,268
% Change Annual Hours		-1.9%	-0.8%	2.0%	-1.2%	18.4%
Avg. Assumed Weeks in a Year	48	47	48	48	48	47
Avg. Standard Professional Enrichment Allotment				\$ 4,879	\$ 4,851	\$ 4,924
Number of Records	1,233	1,233	1,693	2,071	1,981	95

Chairs and Chiefs exluded. FTE >=0.99. Pure Peds EM excluded



List Serve Questions 2018

- Wanting to know if the group pays base attachments for your Nocturnist and if so how much. Also, do you have a different RVU target for your Nocturnist? Faculty members or staff physicians? (17 responses)
- We are particularly interested in how you schedule your physicians to cover weekends and other "undesirable" shifts (evenings/nights)? (2 responses)
- Some of you allot annual [vacation] leave for faculty. What is your process if faculty want to take more than allotted? Do you allow more time? What is your process for allowing more time? (21 responses)



All Things APP

Travis Schmitz, PhD, MBA Northwestern University



Before we get started...

 Nomenclature – what do we call them? And what should we NOT call them?

 Content of this session – questions or thoughts about APP topics?



Autonomy – what do you think?

ONE CHAIR'S TAKE: "It is important to understand that for lower acuity patients, beyond the diagnostic work, 80% of the tasks (and time) to manage these patients do not require the skill sets of an EM physician. These tasks involve data-gathering, reviewing past history, keyboarding and documenting the patient encounter using current electronic health records, tracking and reviewing results, writing prescriptions and other routine patient management tasks."

ANOTHER CHAIR'S RESPONSE TO THIS: "In recent years, however, we have experienced that some of the advantages provided by MLPs, can be provided by scribes at 25% of the cost. This assertion and several others outlined in your article call for carefully designed studies of the quality and cost outcomes of health care extenders."



Annual Base Clinical Hours

- AAAEM Survey for 1.0 FTE
 - 40th% 1680 hours (could be 36 hours/week * 46.67 weeks)
 - 50th% 1724 hours (could be 36 hours/week * 48 weeks)
 - 60th% 1751 hours (could be 36 hours/week * 48.6 weeks)
 - (FYI the assumed weeks in a year for full-time was tightly wrapped around 46-48 weeks, as that comprised the 40th-90th percentiles)
- Just from the looks of the math, it seems that many people are potentially giving 4 hours a week credit for non-clinical work but still counting as part of FTE



2017 APP Salary Survey Highlights

- \$109,142 Median Total Comp
 - Midwest \$110,323
 - Northeast \$108,234
 - South \$110,512
 - West \$107,331
- Salary by years post-training
 - -0-2 = \$106,997
 - -2-5 = \$105,740
 - **-** 5-10 = \$114,531
 - -10-15 = \$113,412
 - -15-20 = \$121,780
 - -20 + = \$129,358

Tier 2 MIP Structure

Based on Sullivan Cotter APP Market Study

Model 2: Midpoints at P65					
Year rates					
Years of					
Experience	Tier 2	% Increase	Hourly Rate		
0	\$99,275		\$47.73		
1	\$101,756	2.50%	\$48.92		
2	\$106,844	5.00%	\$51.37		
3	\$111,118	4.00%	\$53.42		
4	\$113,896		554.76		
5	\$116,743	2.50%	\$56.13		
6	\$119,662	2.50%	\$57.53		
7	\$122,653	2.50%	\$58.97		
8	\$125,720	2.50%	\$60.44		
9	\$128,863	2.50%	\$61.95		
10	\$132,084	2.50%	\$63.50		
11	\$135,386	2.50%	\$65.09		
12	\$138,771	2.50%	\$66.72		
13	\$142,240	2.50%	\$68.38		
14	\$145,796	2.50%	\$70.09		
15	\$149,441	2.50%	\$71.85		

"Increase of 5% from Tier 1 to Tier 2.	Increase of 8.5% from Tier 2 to
Tier 3 to account for the greater sala	ry demand placed on certain
specialties within the market.	



Flexible ED Rates 0-5 Years					
Year rates					
Years of	rearr	ates			
Experience	Tier 2	% Increase	Hourly Rate		
0	\$106,080		\$51.00		
1	\$107,671	1.50%	\$51.77		
2	\$110,363	2.50%	\$53.06		
3	\$113,122	2.50%	\$54.39		
4	\$114,819	1.50%	\$55.20		
5	\$116,743	1.68%	\$56.13		



Other topics

Cost/Benefit Analysis

Patients Seen per hour

Ways to recruit folks to work nights

Exempt v. non-exempt and how to pay for extra shifts if exempt

Differences in PA's and NP's

Other?



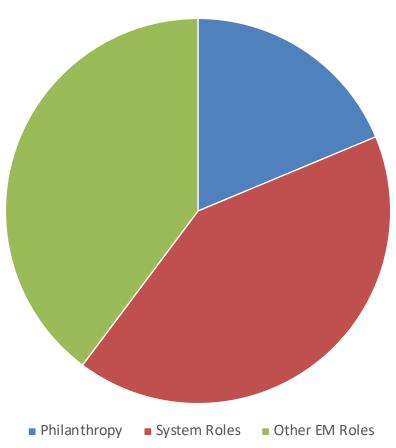
Funding From Different EM Roles/Philanthropy

Steven T. Petrovich, MBA
Executive Director – Business & Admin
University of Cincinnati Physicians
University of Cincinnati College of Medicine



Non-Clinical Funding







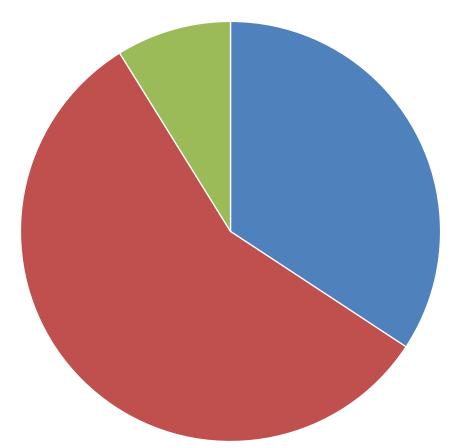
Philanthropy

■ Historical Reserves

■ Greatful Patients

Alumni



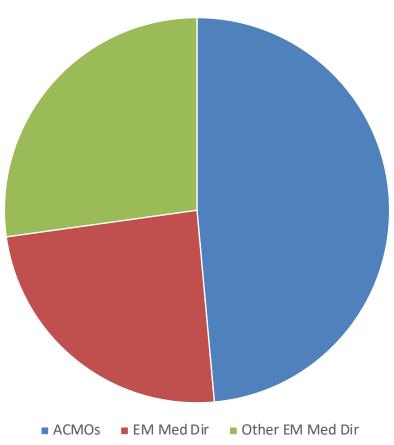


- 8 Endowments
 - 6 Completed
 - 2 Active
- 2 Endowed Lectures



System Roles

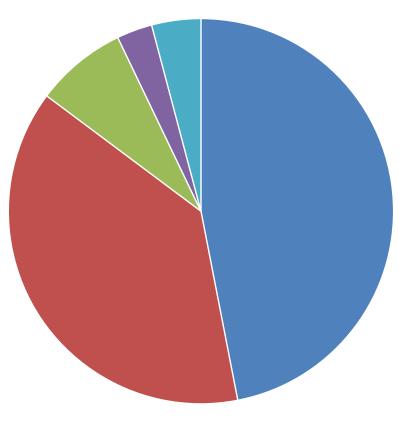






Other EM Roles

Annual Funding - \$1,326,619



■ Stroke Call Coverage ■ EMS Med Direction ■ NFL Duties ■ Poison Control Call ■ LifeCenter Med Direction



Discussion





ACGME vs Non-ACGME Fellowships

Amy Jameson, MPhil, MA, MBA
Department Administrator C2
Department of Emergency Medicine
The University of New Mexico



ACGME vs. Non-ACGME Fellowships

ACGME

- Funding from Institution
- Monitored & reviewed for accreditation
- Regulated
 - Duty hours, protected time, defined faculty roles
 - Eligible for competitive application process
- Training license falls under GME
- Learner/attending roles are not allowed
 - Open to interpretation,
 depending on institution





ACGME vs. Non-ACGME Fellowships

Non-ACGME

- Self-funded by Department
- More training flexibility
 - Unsupervised, no duty hours to report
- Credentialing and licensing more intense
- Allowed to bill in some locations
 - Dependent on system
- Flexible application process
- Does not have to be continued





ACGME vs. Non-ACGME Fellowships

Summary Considerations

- In 2018, 45% of faculty are fellowship trained
- Non-ACGME compensation -~70K-~120K.
- ACGME compensation House Officer compensation
- Faculty pipeline
- Mission and priorities
- Appropriate training/opportunities
- Support infrastructure
- Fellow trained attending compensation

