

BEYOND RECRUITING:

how to onboard & retain your best physicians

TILLER : HEWITT marketware





Carrie Bennett, FACHE

VP of Client Strategy, Marketware

- •17 years of experience in physician recruitment, onboarding and outreach
- •Additional areas of expertise include patient engagement, community marketing and service line development
- •Board certified in Healthcare Management by the American College of Healthcare Executives





SCOUT[©]
data analytics tool

ascend⁼
manage relationships

centric[©]
targeted messaging







Tammy Tiller-Hewitt, FACHE

CEO, Tiller-Hewitt HealthCare Strategies

- •Nationally recognized physician relations and retention strategic outreach pioneer, keynote speaker and writer.
- •Board certified in Healthcare Management by the American College of Healthcare Executives
- Certified John C. Maxwell Leadership Coach
- •Healthcare and Private Sector Leadership Team
 - Physician Mentor/Coach
 - LEAN Six Sigma Advisors
 - Myers-Briggs Communication Facilitator
 - Health & Wellness Coach





tiller-hewitt signature programs

Physician-i-Hospital RelationsProgram

Outreach / Liaison / Sales Programs
Launch/Refresh/Assess

Market Share Growth

Service Line Development

LEAN Process Improvement

tracker PLUS*

PRM Tracking Software

Market Intelligence

Referral Data Management

Issue Resolution Tracking

onboard PLUS*

Physician & APP Onboarding &

Navigation

Mentorship

Family /Community Integration

MAKEİT MATTER SALES TRAINING PROGRAM

Onsite Corporate Sales Training
Public Training Workshops

Friday from the Field

MAKEYou MATTER

Leadership Coaching

Professional Development

Personal Wellness



early physician turn-over common, expensive



historical attrition within 3-5 years post commitment



for the same role



missed opportunity costs



challenges to recruiting the perfect fit

demand

- Intensified Poaching by Recruiters
- Gaps in In-Demand Specialists
- Danger of Simply Plugging the Hole

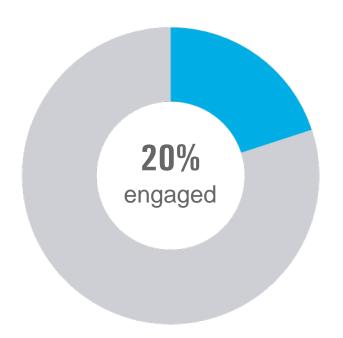
supply

- Increase in Physician Burn-out
- Millennials Desire for Work-Life Balance
- Call Support
- Rise in Employment Contracts

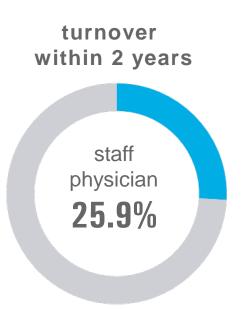


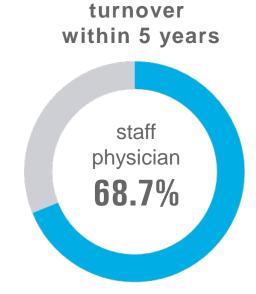
landscape: the engagement gap

engagement among physicians is very low



how many years do you expect to stay with your current organization?

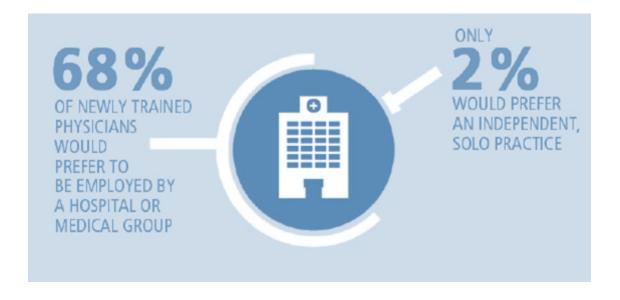






competition is fierce







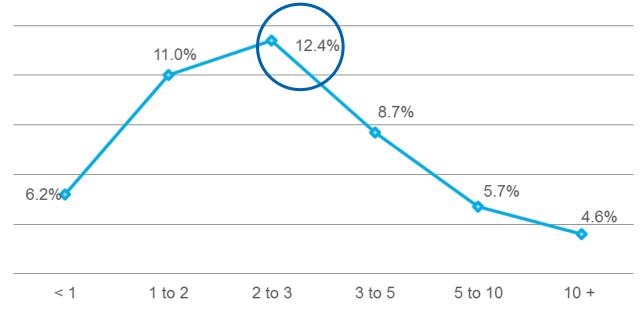
physician turnover

early years are most critical

annual physician turnover at all-time high

6.8% average

turnover rate by years of service





turnover costs

well over \$1 million per physician

recruiting costs

\$250,000

search expenses, sign-on bonuses, income guarantees, relocation costs

lost revenue

\$1,000,000+

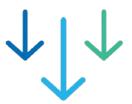
\$1,448,458 avg. annual revenue generated per physician**



when done right physician onboarding drives results



increased retention



decreased ramp up



improved productivity



increased satisfaction

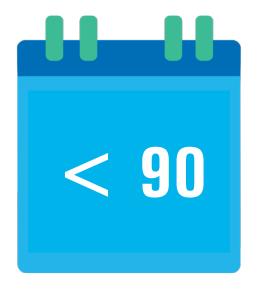


increased system alignment



we do onboarding! why are we still facing a gap?





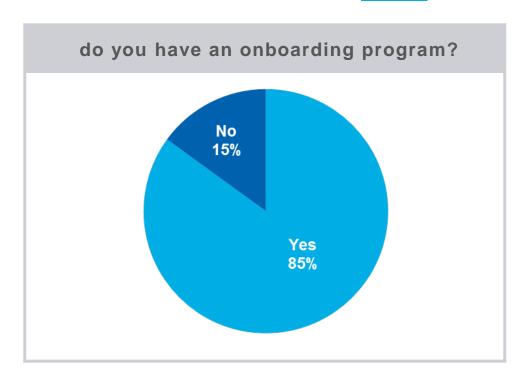


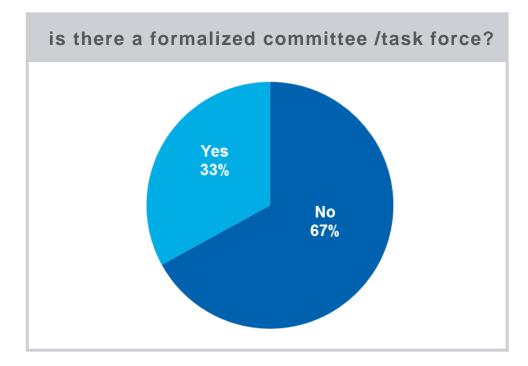


formalized onboarding

majority of teams report having an onboarding program in place but

only 1/3 formally structure the program



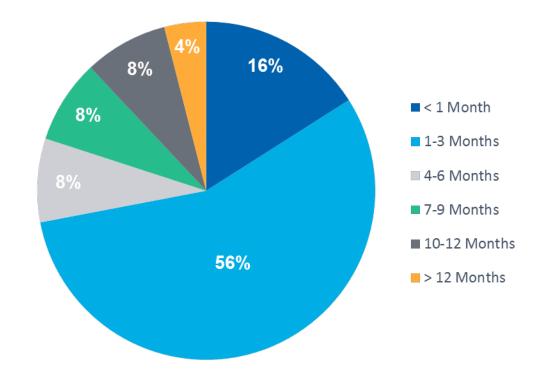




typical onboarding

how long does your provider onboarding last?

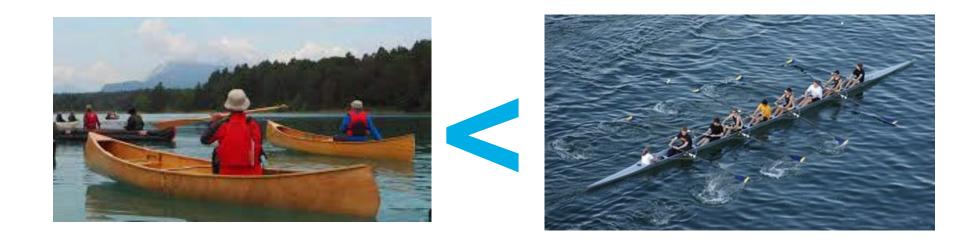
the majority of
administrators mistakenly
believe brief "orientation"
is the same as
"onboarding"





tiller-hewitt onboarding 4 c's

collaboration | coordination | consistency | communication



recruitment & orientation is not equal to onboarding & navigation



orientation vs onboarding





onboarding & navigation program

- 1. Determine Baseline Reality
 - Build the Case with Surveys and Data
- 2. Identify and Assemble Team
 - Strong Lead & Scribe
 - Establish Expectations
 - Assign Roles & Responsibilities
 - Create Accountability System
- 3. Conduct Lean Process Rapid Improvement Events Action Plan
- 4. Develop and Implement Master Checklist
- 5. Assess/Implement Mentorship Program
- 6. Continuous Onboarding & Navigation





where to start what's your reality & baseline



- Cost to Recruit
- Vacancy Rate and Cost of Vacancy
- Ramp up to Break-Even and beyond
- Turn-over rate (compared to national / regional norms)
- Resources Dedicated to Retention / Navigation
- Focus on Community Assessment / Involvement
- Pulse of Recently Recruited Providers



strategic impact report



Serves a 20-county area in Ohio and eastern Indiana

Affiliation with Wright State University School of Medicine

115+ employed physicians and professional staff

2000 + employees and volunteers

Challenge

- Difficult subspecialty searches
- Slow Ramp-up
- Retention Issues
- Lack of Internal Collaboration
- Liaison / Practice Management



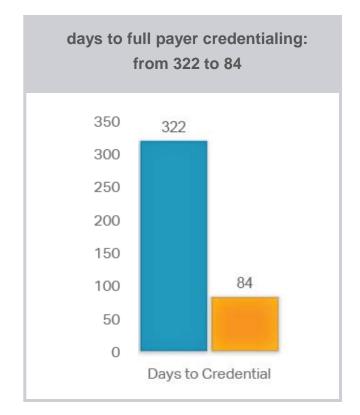
Solution

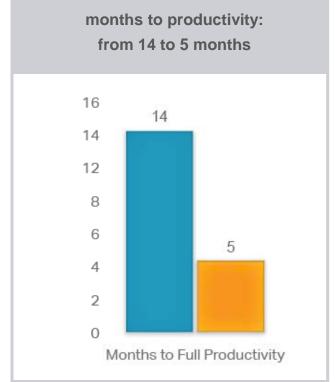
- Launched Formal Program
- Convened Team and Champion
- Conducted Lean Rapid Improvement Event
- Included a Formalized Mentor Lead & Program

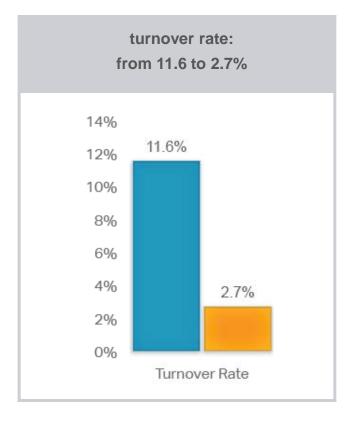


onboarding use case - results





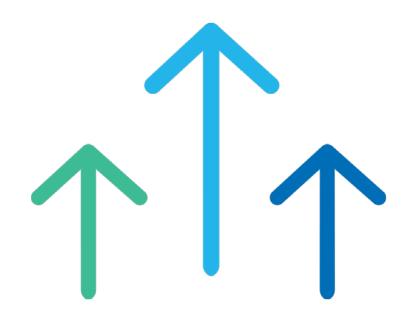






critical success factors





- Identified an onboarding lead ("owner")
- Set measurable goals and report key dashboard metrics
- Continually sought feedback from physicians who recently completed onboarding
- Defined the process for physicians to help set expectations
- Assigned a mentor for a full-year commitment



strategic impact report

client profile

Based in Brentwood, TN

65 Hospitals - primarily located in non-urban markets

Internal recruitment team

Hospital-based PODS

Centralized physician outreach

Client Need: Difficulty recruiting and retaining providers in non-urban.

Data Discoveries: Studied retention challenges at hospital, regional and system levels to identify key touchpoints and best practices for onboarding success.

Actions Taken: Formalized the onboarding process including key touchpoints, persons responsible and deadlines tied to start date. Increase in recruitment materials & effort. Centralized physician outreach planning & accountability.

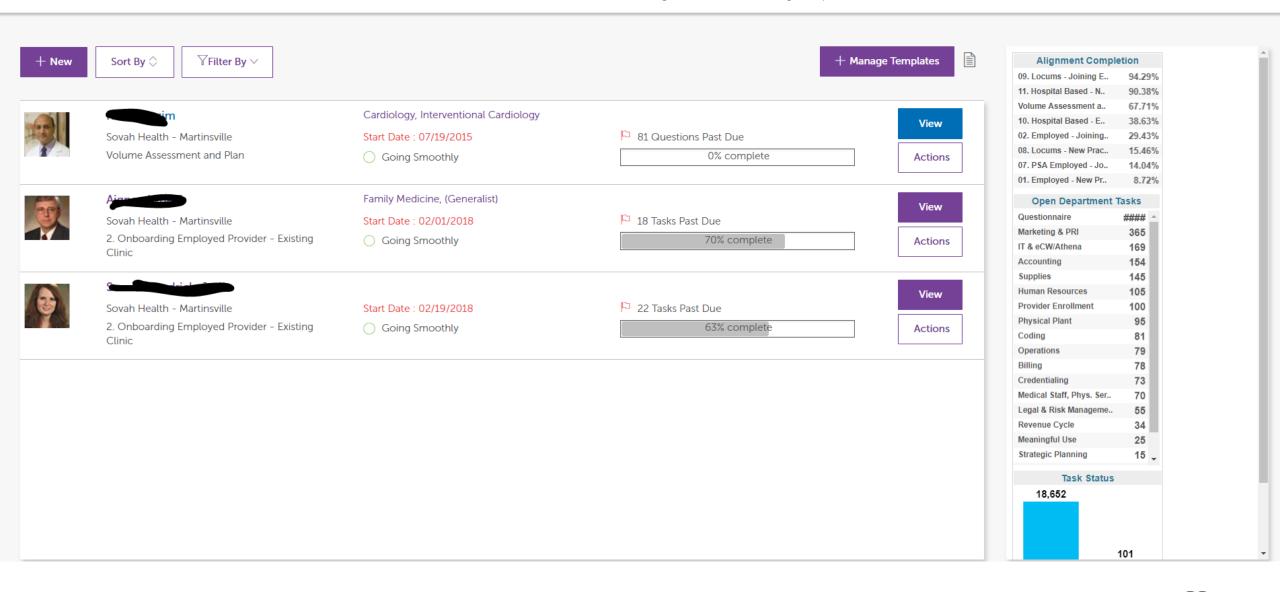
Initial Results: Strong growth in provider engagement, satisfaction & retention.





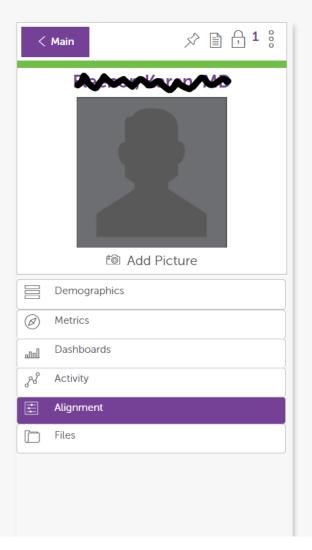
Switch To ∨

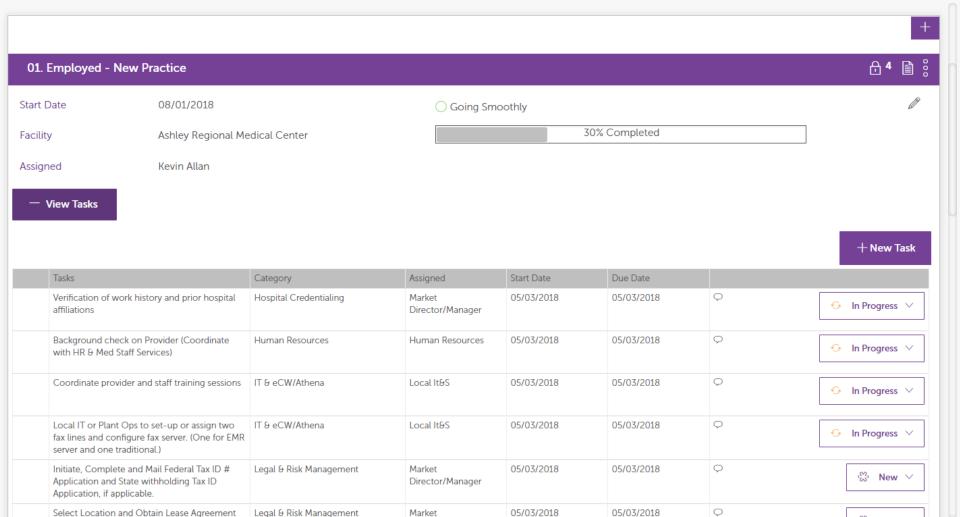
Profiles Issues Alignment Lists Routing Reports Home Initiatives





Home **Profiles** Initiatives Issues Alignment Lists Routing Reports









Actions +

Clear All

ascend^{*}

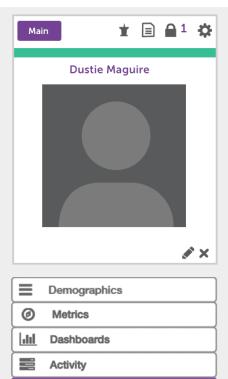
Switch to: SCOUt°





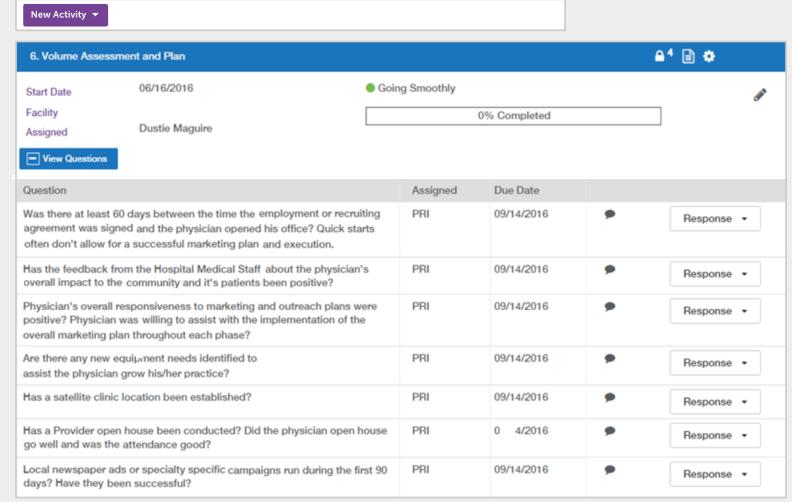
Abc ▼ search names... Q

Home Profiles Initiatives Issues Alignment Referrals Lists Routing Reports



Alignment

Files



some best demonstrated practices for onboarding

- PRI to set up provider-to-provider appointments in advance of taking provider in the field
- Don't forget about facilities & other referral sources including the competitor depending on niche
- PRI have Intro collateral material to hand out about provider Spotlight what makes him/her unique?
- Preparing the provider for the introduction
 - Dressing the Part
 - Binder with who provider will see & background
 - Businesscards/flyer for contact on intake process

- Coaching in the car for a successful sales call
- Thank you notes to facilities & providers visited
- Capture visits to highlight who was visited and downstream impact
- Monitor trends over time
- Schedule time to make 90-day revisits





coordination & accountability





map out touchpoints



roles & timeline



physician feedback



engaging others

to identify touchpoints across continuum



Recruitment

Relocation

Integration

Creating Connections

Beyond
Practice Launch



identifying & maximizing key touchpoints

recruitment

- Understanding the need
- Inclusive site visits
- Honest, open view
- Interviewing for 'fit'
- Contracts that meet joint expectations

relocation

- Relocation guidance
- Immediate credentialing
- Shared data collection
 & processing
- Practice set up support

integration

- Orientation to practice
- Introductory meetings
- Call coverage
- Systems training
- Mentorship

creating connections

- Identifying patient pipelines
- Understanding capabilities & key differentiators
- Marketing guidance
- Introduction to community
- Facilitate strategic outreach visits
- Don't forget about the family

beyond practice launch

- 100-day mark
- 200-day mark
- 300-day mark
- Check-ins during years 2 & 3
- Incorporate physician feedback tools

 (i.e. New physician focus groups, satisfaction surveys, exit interviews)



mapping key touchpoints



Signed contract received

120+ days prior to start

Kick off meeting - launch alignment plan, appoint project manager & assign tasks/deadlines within Ascend within 7 days of signed contract

Meet with physician by phone to review plan & points of contact within 15 days of signed contract

Team members complete assigned tasks & document - within Ascend Alignment Tab

Execution of 100-day volume development plan within 15-30 days of practice launch

Meet with physician by phone or during house-hunting visit to finalize volume development & marketing plan 45-60 days prior to launch

Bi- Weekly Touchpoints with Physician

Review & update progress with team bi-weekly via Ascend Alignment Reports Practice Launch

Review practice volume & referral development trends monthly.

100-Day Assessment

Implement recommended plan adjustments if below volume projections

Physician is transitioned from onboarding to retention once specific practice performance criteria is met.



using onboarding checklists to ensure consistent roles & timeline

□ Complete: 66.0%

■ Start Date: 7/1/2017

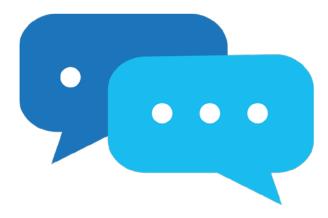
Dr. Tim Smith (Orthopedics)

Community Integration	Going Smoothly				
Summary	Assigned	Start Date	Due Date	Status	Notes
Develop a list of networking targets by specialty & zip code, incorporate these into new practice marketing/networking plans	Bus Dev	6/1/2017	6/1/2017	Complete	16 providers with emphasis on 09876, 098821 markets
Plan & execute road show introducing the provider to other providers & key individuals in the market	Liaison	6/15/2017	7/15/2017	Complete	68% completed; additional follow ups to be scheduled
Assist provider & family in establishing links to the community (setup bank accounts, enroll children in school & activities, eat at local restaurants, ect.)	Recruiter	5/1/2017	5/1/2017		
Schedule speaking engagements for provider	Marketing	7/1/2017	10/1/2017	IP	
Email family list of local contacts	Recruiter	5/1/2017	5/1/2017		
Partner with hospitality committee to Include family in upcoming community event	Recruiter	6/1/2017	8/30/2017	IP	
Orientation	Liaison	6/25/2017	6/30/2017	Complete	
Send provider med staff meeting schedule	Med Staff	6/1/2017	6/1/2017		
New provider orientation lunch	СМО	6/30/2017	6/30/2017	Complete	



engaging the new provider

- What is the service line vision and how does the new provider's practice fit in strategically?
- Who is the providers 'ideal' patient?
- What does the typical patient pipeline look like for their specialty?
- What was their motivation to moving to the area?
- What excited them most about this particular practice opportunity?
- What are some growth accelerators that may need to be emphasized or promoted?
- What are some potential growth barriers that may need to be minimized?
- What have others in their same specialty done successfully to build a practice?
- Who are they outside of medicine and how might this support connectivity?





data-enabled growth

- Supports the development of stronger strategic priorities
- Provides foundational support needed to build & redirect alignment
- Focuses resources where they add the most value
- Increases ability to measure & effectively communicate ROI tied to growth initiatives





getting trendy



Identify key
targets by specialty
& market



Use claims data to understand the strength of their shared patient connections



Ensure network integrity by acting on opportunities that won't impact from your existing base



Create a plan for active referral follow up



strategic impact report

client profile

Member of system that includes:

48 hospitals

166 Primary Care Clinics

496 Specialty Care Clinics

29 Ambulatory Surgery Centers

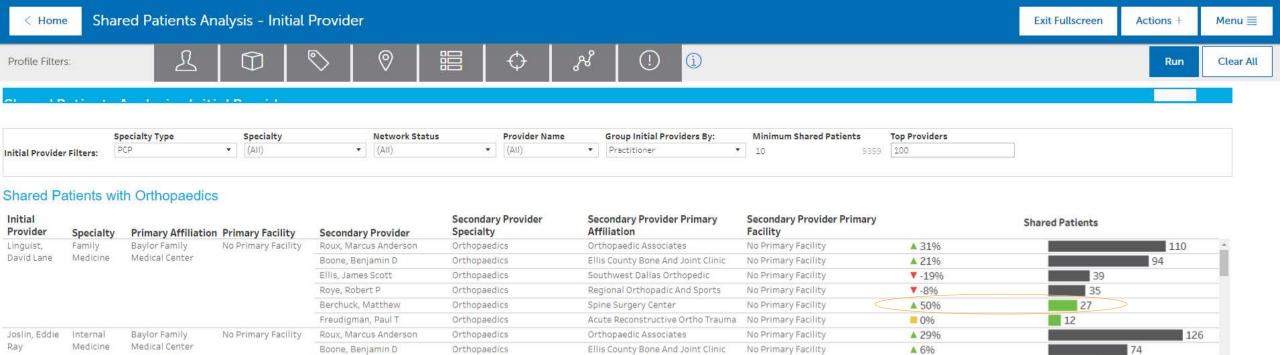
Client Need: Newly employed orthopedic surgeon hungry to fill his open patient slots.

Data Discoveries: Used network connections analysis within SCOUT to identify targeted PCP partners.

Actions Taken: Quickly facilitated physician-to-physician introductions & CME events with PCPs as well as patient-directed educational seminars.

Initial Results: Within 1 month, surgeon was booked out six weeks, bringing an estimated \$104,000 in incremental revenue between the practice and hospital.





Southwest Dallas Orthopedic

Regional Orthopadic And Sports

▼ Group Sec... Practitioner

Spine Surgery Center

Acute Reconstructive Ortho Trauma No Primary Facility

No Primary Facility

No Primary Facility

No Primary Facility

▼ -4%

0%

▲ 44%

A 9%

Ellis, James Scott

Freudigman, Paul T

Berchuck, Matthew

(M... V Network S... (AII)

Roye, Robert P

▼ Specialty

Specialty T... (All)

Secondary Provider Filters:

Orthopaedics

Orthopaedics

Orthopaedics

Orthopaedics

▼ Provider N... (All)



50

24

23

12

strategic impact report

client profile

80 Urologists

15 Physician Assistants

18 Ambulatory Surgical Centers

21 Offices

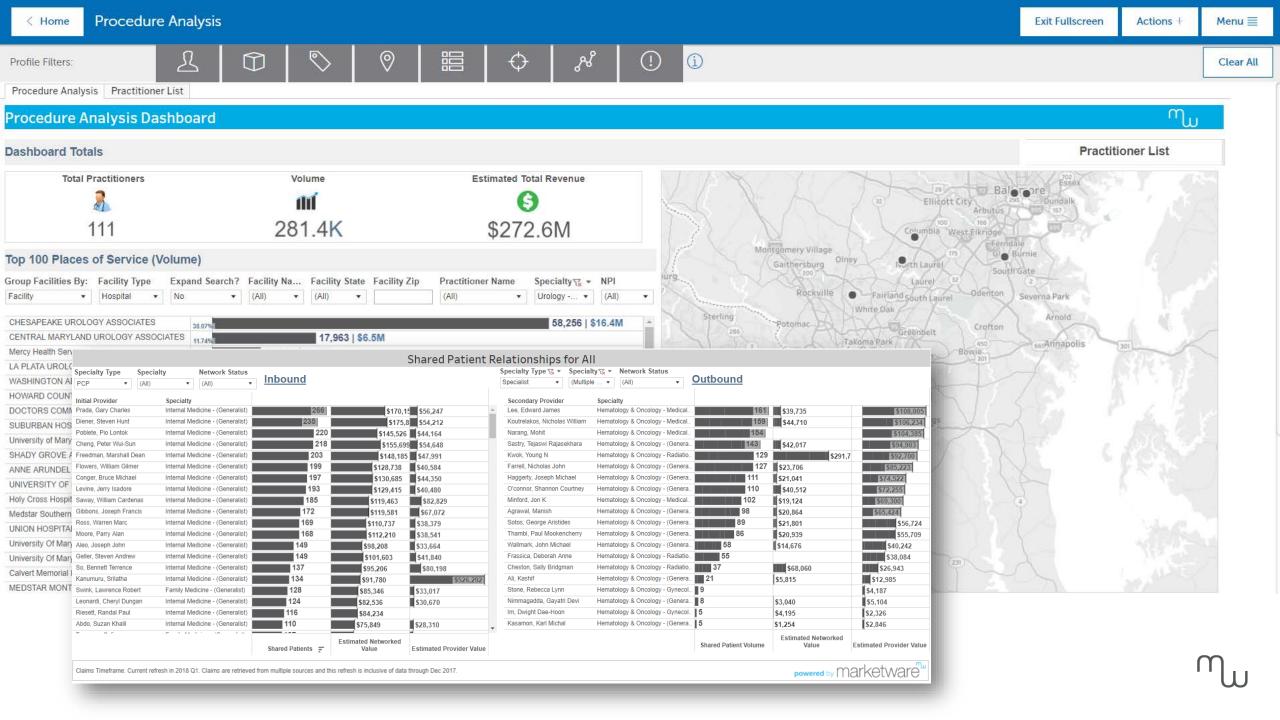
Client Need: Desire to redirect patients from competing entities in an effort to capture stronger market share.

Data Discoveries: Used market analysis report within SCOUT to discover top urology providers in market. Then, leveraged shared patient claims to uncover splitters with potential to emerge as partners.

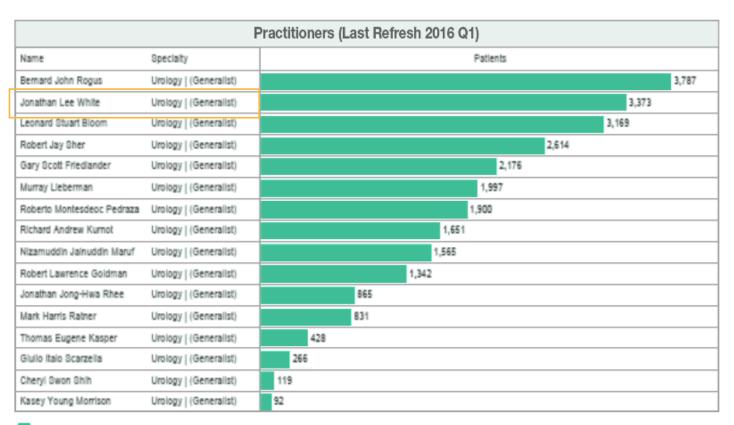
Actions Taken: Targeted introductions between new CUA urologists and 6 identified providers from shared patients report.

Initial Results: Solid increase in referrals from core group of physicians within six month of campaign launch.





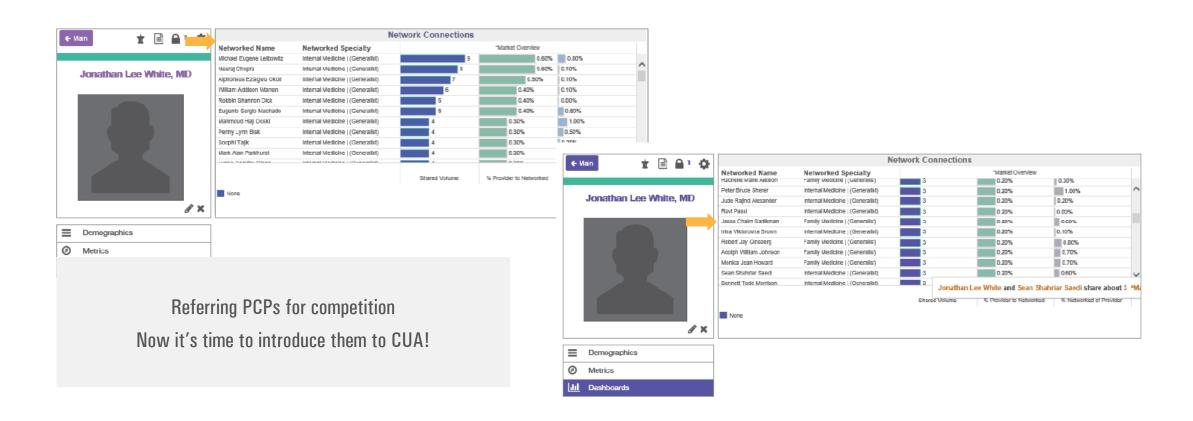
understanding key players



Marketware Facility Market Share
Report for Urology in Montgomery
Co. MD



reverse targeting





redirecting patient pipelines

TARGETS	UROLOGY REFERRALS TO CUA	
	PRIOR TO INITIATIVE	CURRENTLY
Dr. W	4	10
Dr. P	3	16
Dr. W	0	1
Dr. G	0	4
Dr. A	7	15
Dr. S	8	18



strategic impact report

client profile

15 Oncologists

5 Mid-Level Providers

Active in imaging, radiation therapy, research and pharmacy

10 Offices

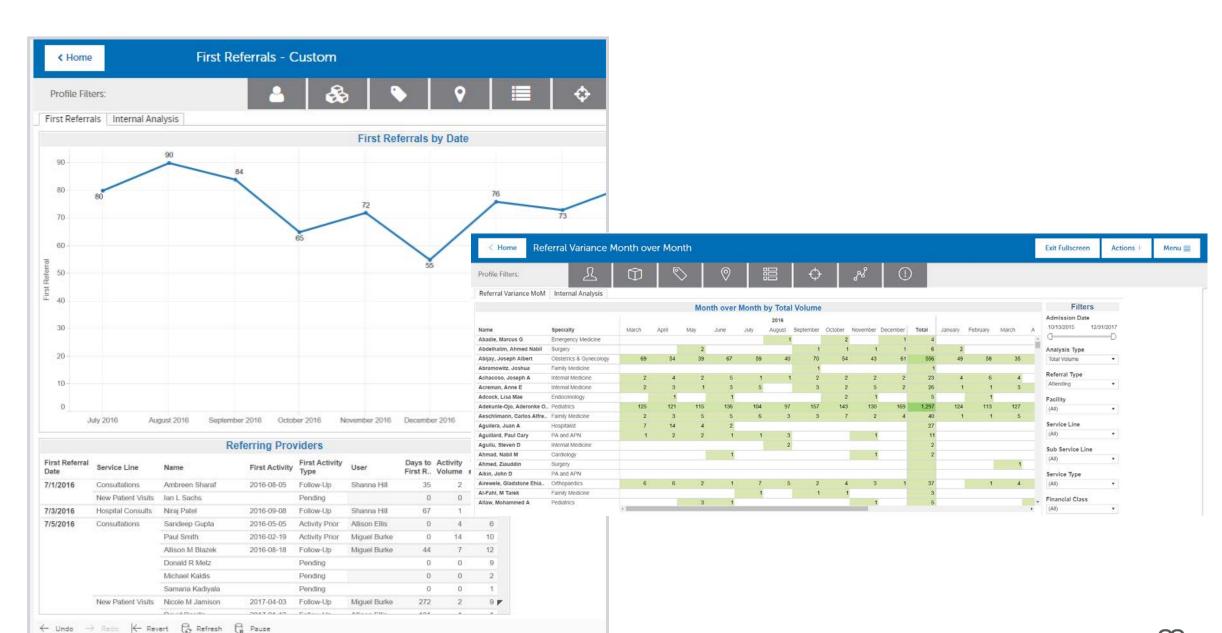
Client Need: Desire to understand value of liaison who is more targeted in outreach efforts.

Data Discoveries: Used internal data within SCOUT to visualize both service recovery and growth opportunities within key markets.

Actions Taken: Used these insights to nurture key provider relationships. Results were used to help highlight impact of individual liaisons.

Initial Results: Strong return on investment for pursuing first referrals (\$350k+) as well as recovery of key relationships (\$60k).







sample impact: oncology outreach

liaison activity	volume impact	estimated impact on bottom line
Outreach visits to secure first-time referrals	30	\$90,000
Outreach visits following first referral to secure second referral	12	\$36,000
Outreach/service recovery visits to providers with substantial variances over time	6	\$54,000
	48	\$180,000
	Campaign Costs	\$(26,000)



additional keys to playing matchmaker

- Use internal, external and field data to collect the intelligence you need to establish or advance the relationship
- Determine the best format and players for the ideal encounter
- Pre-game by coaching on key messages that should be shared that establish relevance from the perspective of both providers
- Follow up with supportive materials & conversations
- Monitor trends over time





nurturing growth



monthly meetings



timely connections



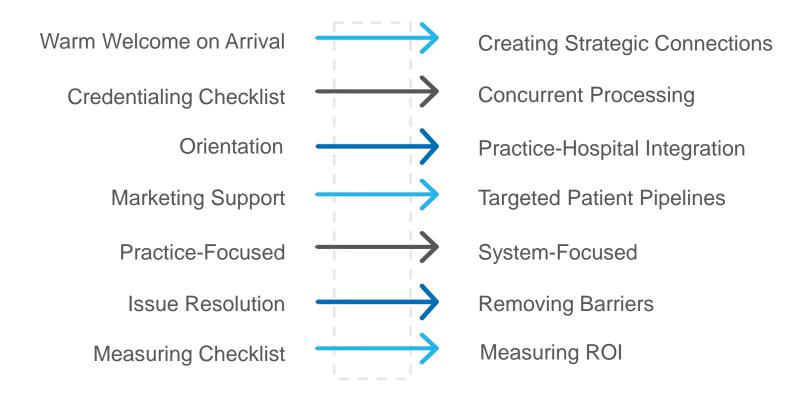
structured check-ins



family matters



onboarding programs are evolving where can your team fill in the gaps?





questions?



thank you

marketware.com

