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2013 ASPR In-House Physician Recruitment Benchmarking Report — Executive Summary

The Association of Staff Physician Recruiters (ASPR) is pleased to announce that the 2013 *ASPR In-House Physician Recruitment Benchmarking Report* is now available. The published *Report* is an annual survey conducted by the Association of Staff Physician Recruiters, a professional organization exclusively for in-house physician recruitment professionals. ASPR is the leading authority on physician recruitment and retention. ASPR is comprised of approximately 1,300 in-house physician recruitment professionals employed directly by hospitals, clinics, physician practices, academic medical centers, and managed care organizations from across the United States and Canada.

The goal of the *ASPR In-House Physician Recruitment Benchmarking Report* is to provide accurate and timely metrics that help in-house physician recruitment professionals better understand their industry and enable them to quantify and codify recruitment expectations with relation to organization size and type, population, geography, and other factors that impact recruitment results. New this year is a Departmental Expense section, which provides a broader overview of recruitment expenses to improve decision making in budgeting for the full scope of recruitment activities — candidate expenses, marketing, search firm fees, and departmental expenses/overhead.

The 2013 *ASPR In-House Physician Recruitment Benchmarking Report* provides a detailed analysis of key statistics on provider recruitment searches conducted by in-house physician recruiters during the 2012 calendar

year. A total of 154 organizations participated providing data for 366 in-house physician recruiters and 4,719 active searches.

Please refer to the full *Report* and Searchable Results for comprehensive information.

Demographics

The geographical distribution of participating organizations was relatively balanced with 31.2% in the Midwest, 27.9% in Eastern states, 23.4% in Southern states, and 17.5% in Western states. Regarding population size of the organization's primary location, 35.3% of reporting organization's primary location was in a metropolitan area of 100,001 to 250,000 people, 25.3% were located in a metropolitan area of more than 500,000 people, 17% were located in an area with a population of 50,001 to 100,000 people, 19% were located in an area with a population of 10,001 to 50,000, and 3.9% were located in an area with 10,000 or less people.

The typical responding organization performed 20 active searches during 2012 and employed one in-house physician recruiter. The number of searches conducted per in-house physician recruiter varies by geography, population size, and total number of searches conducted by the organization. The median number of searches conducted per recruiter overall was 15.

Searches

The Searches section relays key statistics about 4,719 searches, nearly 45% of which was to replace a departing provider. Approximately 58% of active searches were filled by year-end; 33% remained open; 6% were cancelled; and 4% were put on hold. Approximately 8% of all active searches in

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2012 used *Locum Tenens*. This percentage has remained nearly unchanged over the past 3 years. Approximately 72% of the reported searches were for multispecialty practices.

Primary Care continues to be in high demand both for physicians and advanced practice providers. The specialties for which physician searches were most frequently performed during 2012 included Family Medicine, Hospital Medicine, Internal Medicine, General Pediatrics, and Emergency Medicine. Nearly 70% of responding organizations searched for a Family Medicine provider. More than 17% of all searches were for advanced practice providers. Approximately 38% of Nurse Practitioner searches and 43% of Physician Assistant searches were specifically for Primary Care.

In an effort to further examine the days to fill data, searches were grouped into four divisions: Advanced Practice, Primary Care, Specialty Care, and Surgery. Of these divisions, Advanced Practice searches were filled in 90 days, while surgical specialties required 184 days. Primary Care and Specialty Care positions were typically filled in 131 and 148 days, respectively.

Recruiter Profile and Compensation

The Profile and Compensation section reports data on 366 in-house physician recruitment professionals from 152 organizations. As in past studies, the most frequently cited position title was “Physician Recruiter,” the typical respondent has seven years of recruitment experience and 84% are female. Ninety percent (90%) or more of respondent’s time is generally spent recruiting. Approximately 27% supervise staff and 60% have provider onboarding responsibilities. In addition to a physician recruiter, 24% of organizations also employ a “Physician Recruitment Coordinator/Assistant.”

As reported in previous studies, 75% of individuals involved in in-house physician

recruiting hold a Bachelor’s degree or higher (21% hold a Master’s degree or higher). Nearly 30% of in-house physician recruiters are certified as a Fellow of ASPR (FASPR) or have obtained designations towards certification.

All compensation values were reported by a member of the organization’s Human Resources department.

The median recruiter’s total compensation was \$70,000, which has steadily increased from \$67,066 in 2010. Approximately 1/3 of all in-house physician recruiters were eligible to receive a bonus in 2012. The median bonus received was approximately \$6,000. Those with higher titles were more likely to receive bonuses.

As expected, a correlation exists between years of experience and total compensation. The highest income earners are more likely to have ASPR certification/designation, advanced degrees, responsibilities for supervising staff, and more years of experience.

The median total compensation for a FASPR was approximately \$34,000 more than those who have not attained any ASPR Fellowship designation or certification (not controlled for years of experience or title).

Expenses

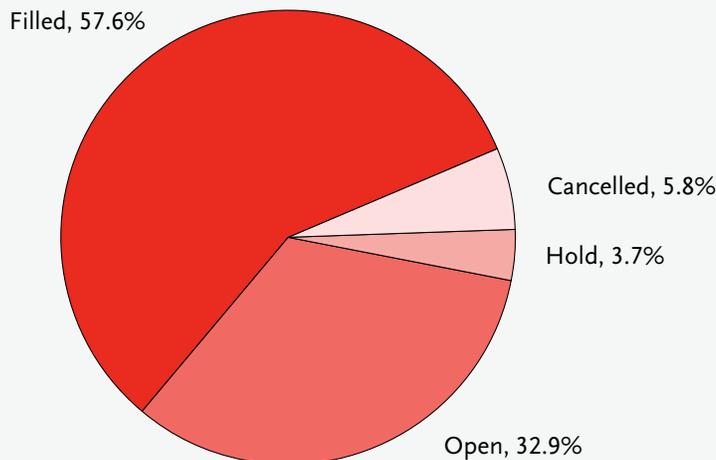
The Expenses section has been revised this year to better reflect the cost of operating a full-service recruitment program. Data was captured within four categories: Candidate Expenses, Search Firm Fees, Marketing Expenses, and Departmental Expenses. Ninety-three (93) organizations provided their expense data for this year’s survey.

The typical organization reported an annual recruitment budget of \$245,000 (\$462,000 on average). Budgets varied based on the number of searches the organization conducted. The median range spanned from \$115,000 for those with fewer than

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MARKET WATCH

Status of Active Searches in Calendar Year 2012



Source: 2013 ASPR In-House Physician Recruitment Benchmarking Report

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10 searches to \$700,000 for those with more than 50 searches. Reported budgets also show variation based on geographic region and population size.

When evaluating costs per search for all organizations, candidate expenses were typically \$2,000 per search, search firm fees were \$2,800 per search, marketing expenses were \$1,500 per search, and organizations reported \$540 in departmental expenses per search. Seemingly due to efficiencies and economies of scale, the various costs per search fell considerably for larger organizations. If an organization that conducted 10 searches per year were to apply this data to their organization, they should expect to spend approximately \$20,000 on candidate expenses, \$28,000 on search firm fees, \$15,000 on marketing expenses, and \$5,400 on general departmental expenses per year. To more accurately forecast the costs for a recruitment program it is advised that the expense tables related to number of searches and size of community, available in the full *Report*, be consulted for more accurate projections.

Seventy-one percent (71%) of participating organizations paid fees to a search firm during the year. Of those reporting search firm expenses, larger organizations were somewhat more likely to have incurred search firm fees than were smaller organizations; however utilization as a percentage of total searches appears to be much lower. If search firm fees are estimated at \$20,000, the median fee for all organizations (\$2,803) would indicate approximately 1 in every 7 searches utilizes a search firm. Departments with more than 50 searches reported a median fee of only \$934 placing utilization at 1 in every 21 searches.

Access the Full Report and Searchable Data

Access to the full *Report* and Searchable Data may be obtained at aspr.org/benchmarking. Survey participants receive free access to the Report and Searchable Data as well as an *Organizational Benchmarking Report* that compares their data to national data. Those that did not participate in the survey may purchase access to the *Report* and Searchable Data. Discounts are available to purchase prior year's *Reports* as well. ■

What's New at NEJM?

NEW HOSPITALIST SPECIAL ISSUE

In 2014 the NEJM CareerCenter will be introducing a new recruitment special issue that targets current and potential hospitalists. When you place a recruitment ad of any size in the March 27, 2014, issue of NEJM, your ad will automatically run in this special issue at no additional charge. The special issue is mailed directly to over 30,000 current and potential hospitalists as well as handed out to hospitalists at the 2014 Society of Hospital Medicine (SHM) annual conference. Call us today at (800) 635-6991 to be included in this new and exciting opportunity to reach hospitalists.

**UPCOMING
RECRUITER
MEETINGS
AND MEDICAL
CONVENTIONS**

**American Medical
Student Association
(AMSA)**

**March 6–9, 2014
New Orleans, LA
amsa.org**

**Society of Hospital
Medicine (SHM)**

**March 24–27, 2014
Las Vegas, NV
hospitalmedicine.org**

**American College of
Cardiology (ACC)**

**March 29–31, 2014
Washington, DC
cardiosource.org**

Call (800) 635-6991
or email

ads@nejmcareercenter.org
for more details on bonus
convention distribution of
your paid recruitment ad
in selected NEJM issues at
these physician conventions.

PROMOTIONAL NOTES/NEWS

Are You Recruiting for a Hospitalist Position?

Don't miss out on one of our best values with our **new Hospitalist** recruitment special issue. Participation is simple — run a paid print (line or display) ad of **any** size in March 27 issue of NEJM and the ad will automatically be included in our new *Hospitalist* recruitment special issue. This special issue is mailed **directly** to over 30,000 current and potential hospitalists and is also handed out to attendees at the 2014 Society of Hospital Medicine (SHM) conference.

Additionally, your ad will run on NEJMCareerCenter.org, the heavily trafficked companion website of the *New England Journal of Medicine*.^{*} Our unique solution offers unmatched reach to physician passive jobseekers!

Reserve your space today! Contact us at (800) 635-6991 or at ads@nejmcareercenter.org.

SPECIAL ISSUE: *Hospitalist*

NEJM ISSUE: March 27, 2014

CLOSING DATE: March 7, 2014

AUDIENCE: Current and potential hospitalists

BONUS REACH: 30,000[†]

Contact us at (800) 635-6991 or ads@nejmcareercenter.org to reserve your ad space today!

**Processing fees may apply to have your ad posted on the searchable part of the website.*

†Specialty, direct mail list, and email counts are estimates only and are subject to change based on data collected by SHM and AMA.