

DOCS BY JULIE SILVER, M.D. ON THE

Locum tenens physicians find temporary positions offer career flexibility and the chance to try out different practice styles.

All that's needed is a little black bag and an adventurous spirit.

ON the television drama "ER," Peter Benton is a 30-something physician who has a young son with a serious hearing impairment. His surgical resident's salary is not enough to pay for the cochlear implant his son may need, so he decides to do a locum tenens stint in rural Mississippi. His "office" is a dilapidated shack and patients wait on lawn chairs for hours in the blazing sun. Tempted to flee immediately, Dr. Benton decides to fulfill his two-week locums obligation after he rescues a farmer's young son who is caught under an overturned tractor. Although the vast majority of locum assignments lack that kind of excitement, the story on "ER" gave many of us the opportunity to experience vicariously what it might be like to do locum tenens.

Two days to two years

Locum tenens is something many physicians have heard of, but don't know much about. Taken from the Latin "to hold the place of, to substitute for" locum tenens physicians fill in on a temporary basis where there is a need in a variety of different practice opportunities and geographic locations. Essentially any physician can do locums, but certain specialties are in higher demand than others; primary-care physicians, radiologists, and surgeons are among the most common. Locum tenens doctors work as independent contractors for a generally predetermined amount of time that may last anywhere from a few days to more than a year.

Although individuals can seek out and set up their own locums opportunities, the traditional way to go about it is to use an established agency

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that “matches” doctors with employers who need temporary coverage. Agencies simplify the process by finding the opportunity; paying the physician’s salary, travel, and room; and taking care of crucial details such as licensing and credentialing. Housing arrangements vary but a rental house, furnished apartment, or room at a mid-priced hotel are common. Food costs are usually up to the physician. The agency has an incentive to try and make a good “match” so that both the employer and physician will want to work with it again in the future. Thus, whether it’s two days, two weeks, two months, or two years, working as a locum tenens physician can be administratively worry free.

Dan Groth, the president of the Ohio-based locum tenens agency LOCUM Medical Group, explains that physicians seeking locum tenens opportunities typically fall into four general categories:

(1) those who have recently completed training and are still trying to decide on a permanent position; (2) those who are in mid-career and have accumulated several weeks of vacation time that they are looking to fill; (3) those who are between positions due to unavoidable circumstances such as a hospital bankruptcy; and (4) those who are at the mature end of their careers and are looking to cut back and do something a little different. For a physician at any career stage, locum tenens may provide a unique opportunity for enhancing one’s quality of life.

Groth points to two examples of physicians who choose locum work for that reason. One, a radiologist in his 50s and an expert pilot, travels the country to idyllic locations where he has the opportunity to participate in rugged outdoor adventures as well as visit extended family. The other is Christine Julian, a 40-year-old internist who wanted to re-

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For Your Information

The following locum tenens agencies all place physicians representing a variety of specialties in short- and long-term assignments throughout the country.

CompHealth

Contact: Dana Sirstens or
Matt Eilers

Phone: 888-250-4866

e-mail: info@comphealth.com

Web site: www.comphealth.com
4021 South 700 East Suite 300
Salt Lake City, UT 84107

Daniel & Yeager

Phone: 800-955-1919

e-mail: info@daniel-yeager.com

Web site: www.daniel-yeager.com
200 Clinton Ave. #400
Huntsville, AL 35801

Interim Healthcare

Contact: Carol Tiballi

Phone: 800-333-7828

e-mail: caroltiballi@interim.com

Web site:

www.interimhealthcare.com
2050 Spectrum Blvd.
Ft. Lauderdale, FL 33309

J&C Nationwide

Contact: Mark Stinnett

Phone: 800-272-2707

e-mail: connect@jcnationwide.com

Web site: www.jcnationwide.com
1150 Hammond Dr. Ste. A-1200
Atlanta, GA 30328

Locum Medical Group

Contact: Dan Groth

Phone: 800-752-5515

e-mail: locum@ibm.net

Web site: www.locummedical.com
3690 Orange Place Suite 260
Cleveland, OH 44122

Medical Doctor Associates

Contact: Jim Ginter

Phone: 888-383-6700

Web site: www.mdainc.com

145 Technology Parkway, NW
Norcross, GA 30092

Medstaff

Contact: Rhonda Abashian

Phone: 800-476-3275

E-mail: rabashian@aol.com

Web site: www.medstaffLT.com

P O Box 15538

Durham, NC 15538

On Call America

Contact: Tom Kelly

Phone: 800-997-2030

E-mail: ocainc@mindspring.com

Web site: www.oncallamerica.com

1038 First Ave.

Columbus, GA 31901

Spencer Reed Group

Contact: John Guerra

Phone: 800-381-7660

E-mail:

john.guerra@spencerreed.com

680 Craig Rd. Ste. 106

St. Louis, MO 63141

StaffCare, Inc.

Contact: Dustin Koger

Phone: 800-685-2272

e-mail: dkoger@mhagroup.com

Web site: www.locumsnet.com

222 West Las Colinas Blvd.

Suite 1230

Irving, TX 75039

Weatherby Locums, Inc.

Phone: 800-365-8900

e-mail: Fphillips@whc.mail.com

Web site: www.whcfirst.com

5352 Northwest 21st Terrace

Ft. Lauderdale, FL 33309

main close to where she has lived for many years but wanted a hassle-free job so that she could attend school to become a professional chef. Dr. Julian first experienced working as a locum tenens physician after she completed residency and wanted time to study for her upcoming board examinations in 1988. After working for four months, she took her exam and found a permanent position that she kept for approximately eight years. Not wanting to move but looking for a position that would "afford me flexibility," Julian once again turned to locum tenens work. Groth found her a job in northern Ohio that was within commuting distance from her home. Julian now works in a long term (more than three years), part-time (32-36 hours/week) locum tenens position at an ambulatory facility for Kaiser Permanente.

Although Julian gives numerous reasons why she turned again to locum tenens work (and has kept the job so long), she admits, "The real reason I took this job is that I wanted to take some professional cooking classes." Now a licensed chef, Julian reports that the dishes she prepares for the clinic's potluck parties are much anticipated by her co-workers. But improving her culinary skills is not the only accomplishment for the doctor-turned-chef. While earning her keep as a locum tenens physician, Julian went to Kenya for two and a half weeks in November 1998 on an international research mission. She also takes a variety of continuing education courses at the local university and frequently takes time off to visit out-of-state family members.

Dustin Koger is the vice president of Staff Care, a national locum tenens agency. (For a listing of other national agencies, see "For Your Information," this page.) He estimates that the number of physicians doing locums has doubled over the past few years—a trend he believes is due to doctors' desires to improve their quality of life. Koger says that physicians frankly tell him, "I don't want to work 80 hours a week" or "I am more interested in raising my kids and pursuing other interests."

Time for family and fun

For physicians who are interested in pursuing interests in addition to medicine, locum tenens is often ideal. Clinical hours are scheduled in advance and call and weekends are optional. Physicians are paid either daily or weekly and a primary-care physician

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Christine Julian is an internist who wanted a hassle-free job so she could attend school to become a professional chef. Although she still earns her living as a physician, the dishes she prepares for the clinic's potluck parties are much anticipated by her co-workers.

can expect to be paid in the range of \$50 per hour or \$400 for an eight-hour day. (Most physicians take home 10 to 30 percent less than what they would in a permanent practice situation). Call, weekends, and extended shifts are generally paid at an overtime rate that is negotiated in advance. Agencies generally charge employers 30 to 50 percent above what they pay physicians in order to cover costs and make a profit.

In large part because of quality of life issues, physicians are choosing to do locums for longer periods of time. Many physicians are taking the equivalent of a sabbatical from their usual practice situations and working for months to years doing locums. Others are choosing to do locums for several years immediately after completing residency. This latter trend has creat-

ed essentially another option for graduating residents. Instead of choosing to go into managed care or academic or group practice, they may choose to be a career locum tenens physician.

Five years ago, Jennifer Carney was completing her family practice residency and wasn't sure what she wanted to do after graduation. Although she had numerous job offers, she decided to try locum tenens for a year instead. In Carney's residency program, it was common for physicians to do locums immediately after graduation. In fact, Carney says, "[Locums] was a tradition—totally accepted." After doing locums for a year, she decided to settle down into a permanent practice situation, but it lasted only a year. "I hated it," she says. Her reasons include being overwhelmed by administrative work, call, and the demands of a practice

that was top heavy with obstetrics patients. So, Carney returned to locum tenens. "It's wonderful. You get to travel and gain confidence in your skills. I now have friends all across the country," she says.

Dr. Dean Chier is a 36-year-old family practitioner who did career locums for seven years. He says he initially wanted the chance to travel and pay off school loans. During his locums travels, Chier saw much of the United States and even did a six-month stint in Australia. As a "substitute doctor," Chier says, "I felt guilty about what I cost, but not what I made." This prompted him to set up many of his own locums jobs—a task that became easier once he had worked with several agencies and had developed a network of contacts in the field. Although Chier is enthusiastic

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about doing locum tenens work, he recently accepted a full-time practice position. When asked why he stepped off the career locums ladder, he says, "I got tired of being the little Dutch boy where you always have your finger in the dike." Chier also cites personal reasons, including wanting to settle down and get married one day.

The right stuff

Locum tenens work is not for everyone. Carney says that the best locums physicians are "cautious people who love adventure." Locums physicians must be flexible and adapt to new settings with ease. They must be able to get along well with people with whom they work and with patients with whom they don't have a previous rapport. Locums physicians must "make do" in a variety of clinical settings and still deliver state-of-the-art medical care. Although, according to Carney, in most practice situations the staff "bends over backwards to help [locums physicians]," Carney also admits that she has experienced less than supportive co-workers. She says in one assignment, which she calls her worst locums experience, one doctor was less than receptive to her "independent" practice style. He became infuriated when Carney wouldn't do things the way he wanted them done, she says. One day, "He took a swing at me. It was witnessed, and he was fired."

Although Carney is quick to point out that confrontations of any kind are extremely rare, working as a locums physician can be isolating. "It is very lonely. You have to be able to go to dinner and the movies by yourself," she says. Carney also dispels the notion that doing locums is the same as going on a vacation. "Locums is hard work. You have to pack your suitcase at a moment's notice, hoping the rental car

and housing are ready for you."

Finding a good agency to work with can make things go much more smoothly, however. Agencies who make their physicians a priority will attend to details such as making sure cars and maps are ready and waiting for physicians. Its staff will have checked out the housing to ensure that it is safe, clean, and an easy commute to the work site. All of the licensing and hospital credentialing will have been done in advance so that the physician is ready to concentrate on clinical affairs. Carney has worked for two agencies and says she found comfort in the ability to contact someone at Staff Care 24 hours a day in case there was a problem.

No employee, no benefits

Physicians considering a career as a locum tenens doctor must do some planning for the benefits that their counterparts in permanent practice leave to employers. Some agencies cover occurrence malpractice, but some don't cover any malpractice. Since locums physicians work as independent contractors, they are responsible for all federal and state tax withholding as well as Social Security taxes. Arrangements must be made for life, health, and disability insurance and retirement planning. If career locum tenens physicians become ill or need to take time off, they don't get paid. Thus, they need to take measures to protect themselves financially. For tax purposes, they also need to maintain some type of permanent address. A financial adviser and/or accountant may be helpful in addressing the issues surrounding working as an independent contractor.

Although many physicians seek out locum tenens opportunities in order to improve their quality of life, others fall into it because they are in a desperate situation and need time to regroup. Dr. Tom McGunigal was excited to take a

new job in Delaware as a physiatrist who would head a traumatic brain injury unit. The hospital he worked for initially sent him out of state for a three-month "training" period in which he had the opportunity to update his skills and learn from their "flagship operation." Shortly after returning to Delaware, McGunigal was notified that the hospital had declared bankruptcy. Realizing that he needed to find a new position but leery of moving his family yet again, McGunigal decided to stay in Delaware and work locum tenens while trying to find another permanent position that would suit both his practice style and would provide an optimal geographic location and lifestyle for his family. Rather than going through an agency, he started making contacts on his own and found another physiatrist who was willing to let McGunigal work as an independent contractor for the two months it took him to find a permanent position in a nearby state. In an era of corporate medical mergers, downsizing, and well-established hospitals declaring bankruptcy, locum tenens may provide displaced physicians an opportunity to evaluate what step to take next in their medical careers.

Locum tenens can provide enticing opportunities for independent, adventurous—and sometimes desperate—physicians who are seeking to enhance their medical skills, meet new people, travel, and continue to earn money all the while. Whether you want to live at home and work for a few days or you want to travel nationally or internationally for months at a time, locum tenens may provide just the right opportunity. ■

Julie Silver, MD is an instructor at Harvard Medical School in the department of physical medicine and rehabilitation. She has edited two practice management books, including The Business of Medicine, and written numerous practice management articles.