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2023 **ACG FUNCTIONAL GI & MOTILITY DISORDERS SCHOOL & MIDWEST**
REGIONAL POSTGRADUATE COURSE

 **AUGUST 25-27, 2023** | RADISSON BLU MALL OF AMERICA
MINNEAPOLIS, MN

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ACG Institute

**ADVANCED LEADERSHIP
DEVELOPMENT PROGRAM**

Application Deadline: September 15, 2023
Apply Online: gi.org/advanced-leadership

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2023 **ACG ENDOSCOPY SCHOOL
& ACG/VGS/ODSGNA**
REGIONAL POSTGRADUATE COURSE

SEPTEMBER 8-10, 2023 | WILLIAMSBURG LODGE
WILLIAMSBURG, VA

Register online: meetings.gi.org




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ACG INSTITUTE
FOR CLINICAL RESEARCH
AND EDUCATION

The ACG
Edgar Achkar **Visiting
Professorship**
*Providing Noteworthy Speakers
for Training in Your Communities*

Deadline: Friday, August 18, 2023

The ACG Edgar Achkar Visiting Professorship Program provides an opportunity for a national expert to visit your institution, spend time with your fellows, educate colleagues, and visit with young faculty as mentors.




ACG Visiting Scholar in Equity, Diversity & Ethical Care

Apply Now: www.gi.org/eavp

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ACG Virtual Grand Rounds
universe.gi.org

Participating in the Webinar




Moderator:
Radha A. Tamerisa, MD

All attendees will be muted and will remain in "Listen Only Mode"

Type your questions here so that the moderator can see them.
 Not all questions will be answered but we will get to as many as possible.

A handout with the slides and room to take notes can be downloaded from your control panel.



Exit

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ACG Virtual Grand Rounds universe.gi.org

ACG Virtual Grand Rounds

Join us for upcoming Virtual Grand Rounds!




Week 34 – Thursday, August 24, 2023
 Management of Patients With Acute Lower Gastrointestinal Bleeding: An Updated ACG Guideline
 Faculty: Neil Sengupta, MD
 Moderator: Lisa L. Strate, MD, MPH, FACC
At Noon and 8pm Eastern




Week 35 – Thursday, August 17, 2023
 ACG Clinical Guideline: Diagnosis and Management of Biliary Strictures
 Faculty: Jennifer L. Maranki, MD, MSc
 Moderator: Anna Tavakkoli, MD
At Noon and 8pm Eastern

Visit gi.org/ACGVGR to Register

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REGISTRATION IS OPEN!

➤ REGISTER ONLINE: ACGMEETINGS.GI.ORG

VANCOUVER





2023

OCTOBER 20-25, 2023 | VANCOUVER, CANADA

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ACG Standard Slide Decks

Colorectal Cancer Screening and Surveillance Slide Deck

Ulcerative Colitis Slide Deck

ACG has created presentation-ready, semi-customizable MS PowerPoint clinical slide decks for your unique teaching and learning needs.

Visit gi.org/ACGSlideDecks to learn more and request access to the standard slide decks!

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 Virtual Grand Rounds
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ACG VIRTUAL GRAND ROUNDS: CAREER EDITION

Contract Negotiations
WEDNESDAY, AUGUST 16, 8:30-9:30 PM ET



Dennis Hursh, Esq.
Speaker



Kyle Claussen, JD
Speaker



Jami A.R. Kinnucan, MD, FACP
Panelist



Supriya Rao, MD
Panelist



Radha A. Tamerisa, MD
Moderator

Register: gi.org/ACGVGR

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PHYSICIAN CONTRACT NEGOTIATIONS

ACG Virtual Grand Rounds: Career Edition
Dennis Hursh & Kyle Claussen

 Virtual Grand Rounds

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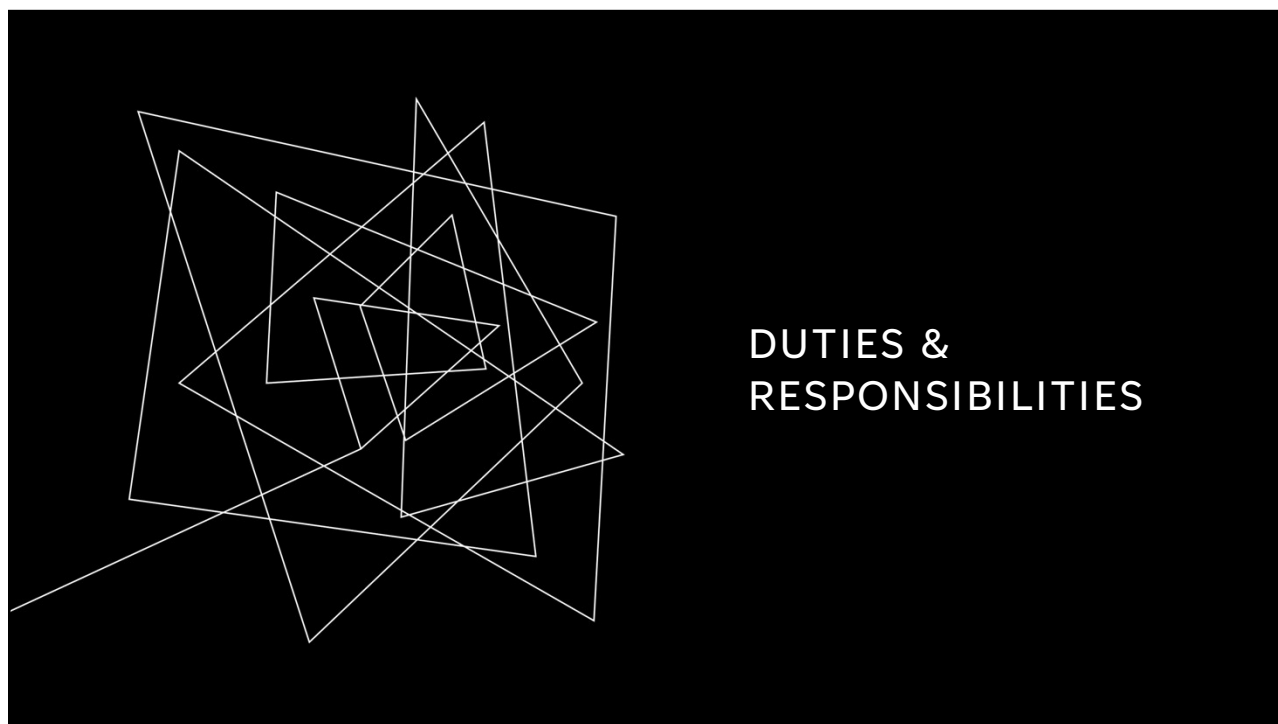


THE BIG 4

1. DUTIES & RESPONSIBILITIES
 - Schedule
 - Call
 - Locations
2. TERMINATION ISSUES
 - Non-Competes
 - Tail
3. COMPENSATION & BENEFITS
 - Fair Market Value
4. HOW TO NEGOTIATE
 - "Standard Contracts"
 - Leverage

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ISSUE SPOTTING

SCHEDULE/DUTIES

- Locations of Practice
- Days of the Week
- Call
- Outside Activities
- Intellectual Property
- Supervision of APP's
- Time Allocations for Admin/Research

 Virtual Grand Rounds

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HOW IT'S SOLD

Position details are:

- Hospital Employed
- Full Time - will work IP, OP general ID, and HIV OP clinic
- Will join 2 physicians and 2 APPs
- 3-week rotation: 7 day IP (also on call); 5 day clinic; 1 week off
- Competitive base salary
- Full benefits including malpractice, health, dental, life, disability, etc.
- 7 days CME; \$7,500 CME allowance
- Relocation and sign on bonus offered

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HOW IT'S DRAFTED

Employee shall devote Employee's utmost and best professional knowledge, skill, and effort on a full-time basis to providing physician services in the Specialty for the Program and at Hospital and exclusively in the interest of Employer.

Full-time basis is defined as a minimum of Two Thousand Two Hundred Eighty (2,080) hours per year of employment, and Employer shall define a schedule of days and hours to be worked, in Employers sole discretion.

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TERMINATION ISSUES

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ISSUE SPOTTING

TERMINATION

- Notice Periods (and how delivered)
- For Cause Issues
- Tail Coverage
- Non-Competes
- Access to Medical Records
- Payment of Production Bonus
- Repayment Obligations
- Liquidated Damages
- Force Majeure

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Welcome to Town! Now Leave...

- Time
- Restricted Area
- Scope
- Exclusions



resolve

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HOW DETRIMENTAL ARE NON-COMPETES & TAIL?

37%

37% = 111,000/year

30 year career @ 5% growth rate

\$9.3 million in career earnings

\$5,000

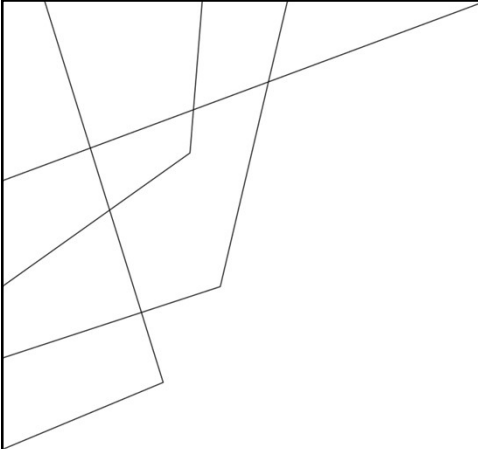


\$150,000 +

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MAJOR ISSUES IN COMPENSATION

➔ DON'T COMMIT TO ANYTHING IN DISCUSSIONS, GIVE YOURSELF FLEXIBILITY TO OBTAIN BENCHMARKS IN COMPENSATION.

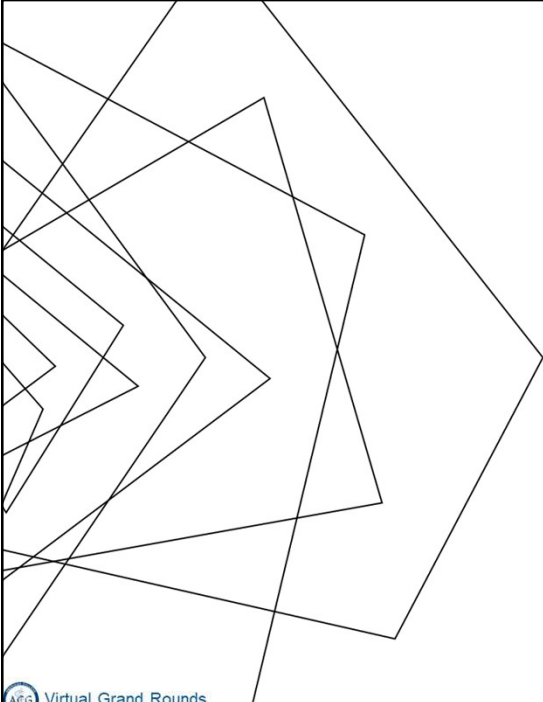
➔ YOUR COMPENSATION SHOULD NOT BE BASED ON PRODUCTIVITY FOR AT LEAST THE FIRST TWO YEARS. YOU SHOULD HAVE A BASE SALARY WITH THE POTENTIAL FOR BONUSES IF YOU ARE PRODUCTIVE.

➔ THERE SHOULD BE A SIGNING BONUS. THERE SHOULD ALSO BE A RELOCATION ALLOWANCE. IF YOU ARE NOT MOVING, ASK IF THE RELOCATION ALLOWANCE CAN BE ADDED TO THE SIGNING BONUS.

- Attempt to have the signing bonus paid shortly after execution, not after you begin working
- If repayment is required for the signing bonus, attempt to get exceptions for your death or disability, if you terminate the agreement because of a breach by the employer or if the employer terminates your agreement without cause. Ideally, repayment should not extend beyond the time your salary is guaranteed.
- In addition to actual moving expenses, attempt to have house hunting trips included.


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MAJOR ISSUES IN COMPENSATION

- ➔ YOU SHOULD HAVE THE ABILITY TO CONFIRM CALCULATIONS OF PRODUCTIVITY BONUSES.
- ➔ IF PRODUCTIVITY IS BASED ON WRVU PRODUCTION, YOU SHOULD BE CREDITED WITH THE PRODUCTION AT THE DATE OF SERVICE, NOT THE DATE OF BILLING. YOUR PRODUCTION SHOULD NOT BE SUBJECT TO REIMBURSEMENT MODIFIERS.
- ➔ OBTAIN AN MGMA COMPENSATION ANALYSIS. MGMA HAS BENCHMARKS FOR SIGNING BONUSES, RELOCATION ALLOWANCES, GUARANTEED COMPENSATION, CME, VACATION, PTO, WRVU PRODUCTION, AND COLLECTIONS. FOR MANY SPECIALTIES YOU CAN DRILL DOWN INTO THE GEOGRAPHIC AREA (SOMETIMES DOWN TO THE STATE LEVEL) AND DIFFERENTIATE BETWEEN PHYSICIAN OR HOSPITAL EMPLOYERS.

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IF APPLICABLE, ATTEMPT TO NEGOTIATE A RESIDENCY/FELLOWSHIP STIPEND WHILE YOU ARE IN TRAINING.

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BENEFITS

- Malpractice insurance, as discussed above
- CME (MGMA benchmarks)
- Board certification and recertification costs separate from CME
- Medical staff dues
- DEA and state equivalent registration fees
- Medical licensure costs
- AMA or AOA and state and local medical societies
- ACG
- Medical school debt assistance
- Cell phone and usage plan
- Laptop computer
- Vacation (MGMA benchmarks)

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HOW TO NEGOTIATE

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YOU HAVE COMPETED
YOUR WHOLE LIFE TO GET
WHERE YOU ARE, BUT
ONCE THE JOB OFFER IS
MADE THE COMPETITION
IS OVER.

RECRUITING A PHYSICIAN IS EXPENSIVE.

RECRUITERS RECEIVE A LARGE COMMISSION
(OFTEN AS MUCH AS $\frac{1}{2}$ A YEAR'S SALARY OF
THE PHYSICIAN). MORE IMPORTANTLY,
PHYSICIANS SPENT SIGNIFICANT TIME
REVIEWING CVS AND INTERVIEWING. THIS
WAS TIME TAKEN AWAY FROM REIMBURSABLE
ACTIVITIES.

**BY THE TIME AN OFFER IS MADE
THEY HAVE MADE A HUGE
INVESTMENT IN PICKING YOU.**

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YOU ARE THE ONE THEY WANT!

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DON'T SELL YOURSELF SHORT. THERE ARE MANY PHYSICIANS IN THE UNITED STATES, BUT THERE ARE NOT NEARLY ENOUGH.

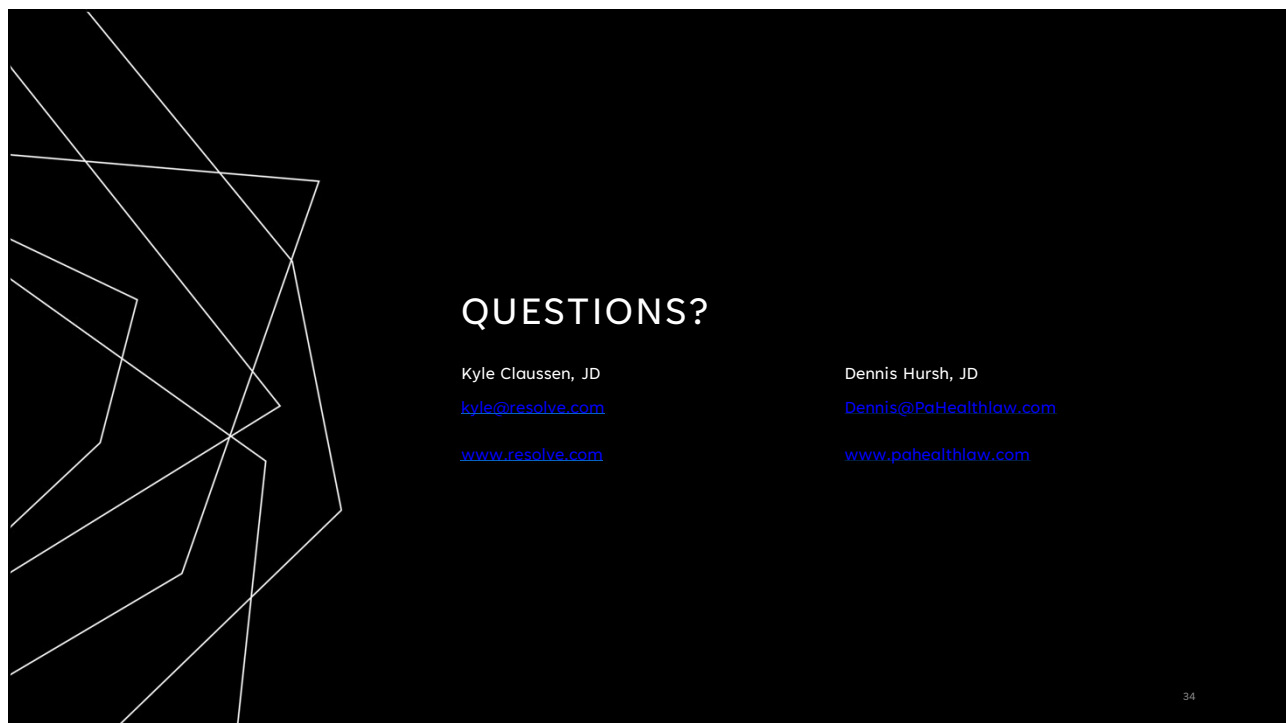
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YOU HAVE THE RIGHT (AND THE OBLIGATION IF YOU HAVE A FAMILY) TO RECEIVE APPROPRIATE COMPENSATION AND BENEFITS. BENCHMARKS ARE AVAILABLE TO DETERMINE WHAT IS APPROPRIATE.

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