Locums Tenens

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- At the end of this presentation the attendee will be able to :

- Define the term Locum Tenens
- List the advantages of Locum Tenens employment
- Discuss the disadvantages of Locum Tenens employment
- Review one provider’s experiences

Definition of Locum Tenens

- Latin Term “To hold the place of”
- Person who stands in temporarily for someone else
  - Of same profession
- Think of it as a substitute teacher in the medical world
- Why Health Care system hires a locums provider
  - Cover Maternity leave/vacation time/FMLA
  - Until full-time provider hired
  - Always have locums because unable to find full-time provider
    - Common in remote locations

Locums Companies

- Barton Associates
  - https://www.bartonassociates.com/
- Jobs2Careers
  - https://www.jobs2careers.com/
- Wetherby
  - https://weatherbyhealthcare.com/
- Wilderness Medical-rural and remote areas
  - https://wildernessmedicalstaffing.com/

Many Locums companies available

- Provider NEVER pay a fee to locums company
- Locums company should pay provider’s
  - Travel
  - Housing (or paid by health care entity)
  - Salary
  - Malpractice-deal breaker for you if not paid?
- Remote locations usually pay every day of assignment
  - Whether clinic or not

Advantages of locums work

- Money…big money…but variable
- Can make $30,000+ for a 4-week assignment
  - More remote the location higher the pay
  - Greater the expectations
  - Hourly vs Daily
  - Some assignments pay you every day on assignment
    - In clinic or not – usually very remote locations
  - Some assignments also pay a per diem
    - a daily rate for food/expensive
  - On-call paid
  - Overtime for holidays
  - 1099 vs W-2

Advantages Continued

- Flexible scheduling
  - Provider picks scheduling time frame
  - 2 weeks
  - 4 weeks
  - 3-6 months
  - Longer-if you want
  - Location – Same multiple times? Multiple locations?

- Some providers work 4-6 months/year as a locums
- …and that's all…

Disadvantages of locums

- Heavy paperwork
  - State license @ each assignment-PA Compact
  - System credentialing @ each assignment
  - Collaborating physician/state dependent
  - PA vs NP regarding physician collaboration
  - EVERY system you work in
- Constant learning curve
- “Short timer”

Disadvantages continued

- Constant adaptation to
  - New EHR/ practice workflows
- “Outsider”
- Loneliness and Isolation-included in social activities
- All while maintaining
  - Self-employment taxes
  - LLC yearly status-if you incorporate
  - State business license-if required
  - DEA & state narcotic board
    - Not every state has an OBN equivalent-may only need DEA
    - Remember DEA is location dependent-must be unrestricted (pay fee)

Is Locums for me?

- New Grad-Be VERY VERY cautious
- Remote locations require years of experience
- Variable income
- Need benefits? some Locums are W-2
  - Insurance
  - Paid Time Off (PTO)
  - Retirement

- Money CAN “soften the blow”

One Provider's Experience

Maniilaq

Kotzebue & Point Hope

Yukon Kuskokwim Health Center (YKHC) – Bethel & Beyond

Alaska Native Health System

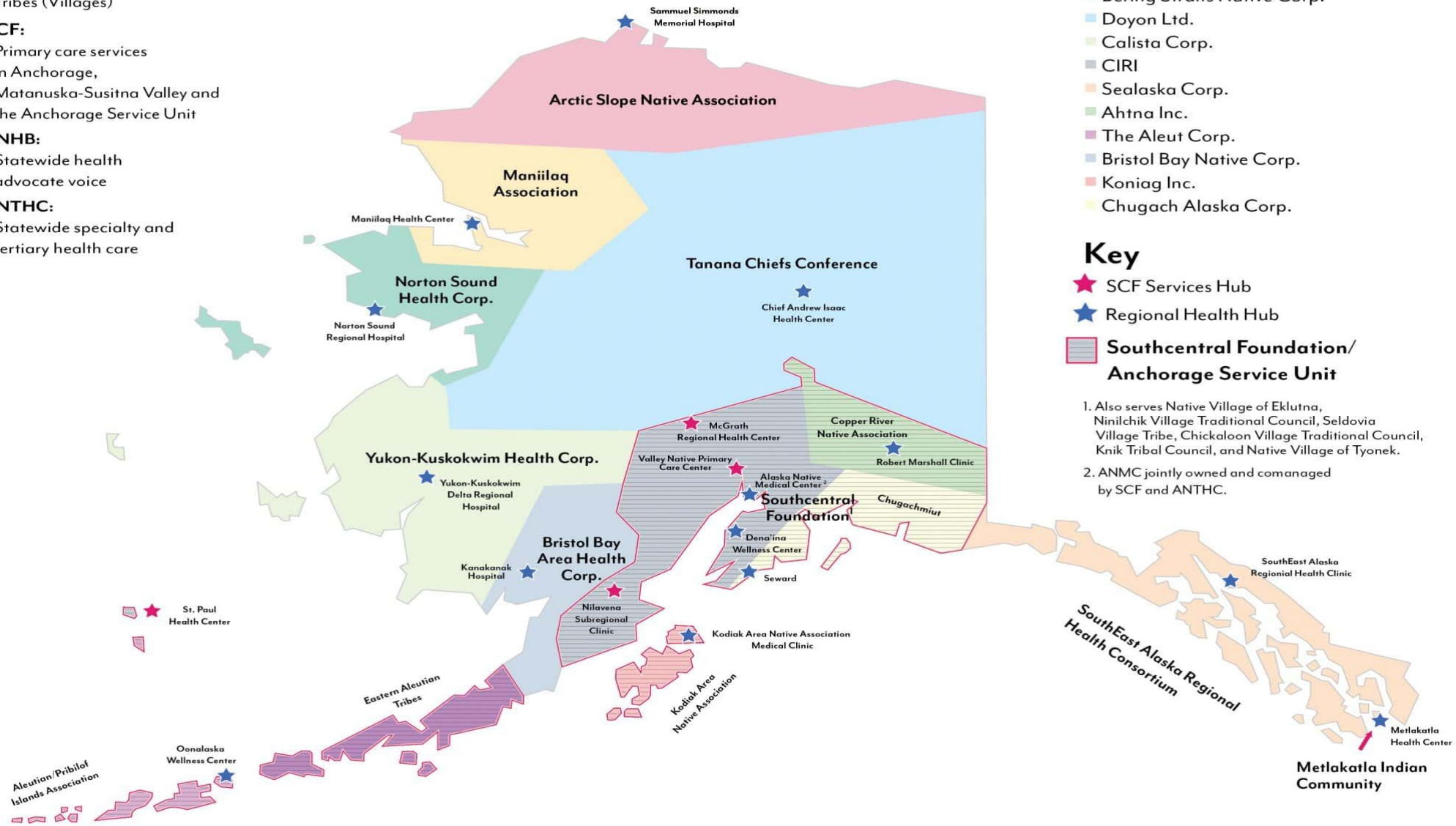
Facts

229 Federally Recognized Tribes (Villages)

SCF:
Primary care services in Anchorage, Matanuska-Susitna Valley and the Anchorage Service Unit

ANHB:
Statewide health advocate voice

ANTHC:
Statewide specialty and tertiary health care



Regional Native Corporations

- Arctic Slope Regional Corp.
- NANA Regional Corp.
- Bering Straits Native Corp.
- Doyon Ltd.
- Calista Corp.
- CIRI
- Sealaska Corp.
- Ahtna Inc.
- The Aleut Corp.
- Bristol Bay Native Corp.
- Koniag Inc.
- Chugach Alaska Corp.

Key

- SCF Services Hub
- Regional Health Hub
- **Southcentral Foundation/ Anchorage Service Unit**

1. Also serves Native Village of Eklutna, Ninilchik Village Traditional Council, Seldovia Village Tribe, Chickaloon Village Traditional Council, Knik Tribal Council, and Native Village of Tyonek.
2. ANMC jointly owned and comanaged by SCF and ANTHC.

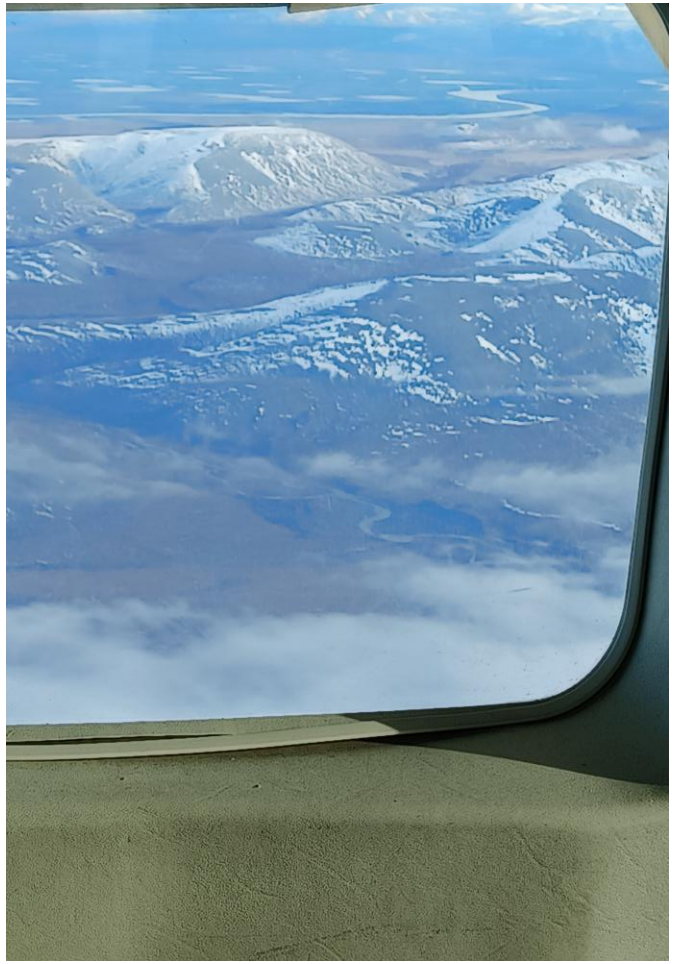
Alaska assignments

- Alaska is a HARD place to work
  - **BE SAFE BE SEEN**
  - **Ice cleats/reflective vest/head lamp**
- Medicine is Medicine…NOT
- Weather
  - Kotzebue & Point Hope - October
  - 7-foot storm surge/On Disaster Team
  - Moved out of housing to higher ground
  - Bethel – November & December
    - 8-10 patients on schedule
    - Unable to get to Anchorage for 3 days
- Expensive
  - Small loaf of bread $7.99
  - 1/2 gal of ½ & ½ $14.99

Maniilaq

- Kotzebue (Qikiqtaġruk) – orientation
  - 33 miles north of Arctic Circle population of 2783
- Point Hope (Tiagara) – village assignment
  - 125 miles north of Arctic Circle population of 830

- 10-seater Bering Air
  - Western coast of Alaska/Eastern shore of Bering Sea
  - Clinic/urgent care/ED/ICU waiting on medevac
    - No x-ray/dispense meds/draw labs & start IV's
    - May have a Health Aide
      - Alaska specific trained provider
      - State so remote
    - Provider box & Crash Cart



YKHC

- Yukon Kuskokwim Health Center (YKHC)
  - Bethel
    - orientation population of 6325
  - Emmonak
    - Sub Regional Clinic population of 759
  - Hooper Bay
    - Sub Regional Clinic population of 903

  - Populations of all Alaska villages are variable

I’m old enough to know…

I may need to keep you alive for a day or two…
before the plane gets there

Questions?