On-Call Pay Varies Widely By Specialty

Kathleen Struck

Surgeons commanded more than $1,000 a day for being on-call at the hospital, while primary care physicians reported compensation rates of around $150 a day, according to annually compiled data.

Family physicians whose practice included obstetrics reported the lowest median daily on-call compensation -- $75 -- while anesthesiologists reported the highest -- $2,400 -- for days on call, according to the MGMA Medical Directorship and On-Call Compensation Survey.

Median daily on-call pay rates for some specialties in 2012 and 2011, respectively, included:

Family Medicine (without obstetrics): $150, $100
Obstetrics/Gynecology: $500, $500
Neurology: $600, $650
Orthopedics (all surgery): $953, $854
Cardiology: $900, $650
General Surgery: $1,000, $920
Radiology: $1,000, $1,000
Anesthesiology: $2,400, $1,500

"It used to be, of course, that physicians would apply for hospital privileges and build portions of their practice out of the emergency room or from inpatients at the hospital," said Peter P. Cebulka III, director of recruiting and training with Merritt Hawkins, a physician search and recruitment firm headquartered in Irving, Texas. They would share a call rotation of those patients, he explained.

But that has changed drastically, he said, because the process is more driven by outpatient medicine as opposed to inpatient medicine.

"There's a very strong trend toward hospital employment at this point," with some physicians employed full-time by the hospital paid additionally for on-call services, Cebulka said. The on-call compensation rates reflect compensation that has been broken out into a separate category outside of salary and bonus.

The trend now is to minimize on-call responsibility and increase quality of life, he noted.

"A lot of hospitals are using an on-call daily rate compensation as a retention tool," Cebulka said, "to keep positions in the community and help maintain a strong relationship with the medical staff."

The data are based on responses from 3,950 providers in 295 groups, said Todd

Evenson, director of data solutions at MGMA-ACMPE in Englewood, Colo. MGMA-ACMPE, formed by a merger of the Medical Group Management Association and the American College of Medical Practice Executives, is a membership association for professional administrators and leaders of medical group practices, according to its website.

Some data for daily rates was affected by increases in sample size. In one specialty, the association received 35 responses in 2011; for the same specialty a year later, the association received 135 responses.

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