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Cynthia provides physician alignment consulting, organizational marketing strategies and recruitment for 15 Central lowa area hospitals affiliated with Mercy Medical Center, Des Moines, IA. She has 17 years of experience in recruitment and business development providing all facets of

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recruiting success throughout an organization including, field staffing, corporate hiring, and led and overseen all recruiting process design. Over the course of her career she has partnered with Human Resources and Operations to develop and analyze recruitment forecasts to create successful strategies to achieve organizational results.

She is highly experienced in employing using traditional sourcing strategies as well as developing new, creative recruitment and marketing ideas to search and obtain top talent. Cynthia enjoys the rewarding journey of representing her local communities and assisting physicians find the best place to live and practice.

In her spare time, she likes to: bake, run, travel, and participate in cancer fund raising events.

Rediscovering Rural Practice Opportunities: Think you Know Rural? Think Again!

As a Physician Recruiter for a large rural network of hospitals and clinics, my job is to connect physicians with great practice opportunities. There tends to be a real disconnect between the perception that many doctors have about rural medicine, and the reality of living and working in these rural communities.

Every day, I talk with physicians and residents who are burdened with student loan debt, who are feeling overworked and underappreciated, who are looking for a better work-life balance, and who are eager for exciting professional development and leadership opportunities.

At the same time, I constantly hear from rural hospital administrators who struggle to find the right physician candidates. Too often, residents and physicians outside of rural America have misconceptions about what it's like to work in a rural practice. The reality of practicing medicine in a rural setting is far more lucrative and more personally rewarding than most physicians might expect.

Here are a few common misconceptions that I hear from physicians who are asked to consider practicing medicine in a rural setting – and some facts about the reality of rural medicine: "Practicing in a rural setting would be a big pay cut."

The reality is, rural doctors earn almost as much as their big-city counterparts if not more. The days of the humble "country doctor" who gets paid by bartering medical services for fresh eggs are long gone. According to a Jan. 2005 study from the Center for Studying Health System Change (HSC), average annual physician base incomes in rural areas were \$204,000 vs. \$218,000 in urban areas.

While \$14,000 might sound like a big reduction in income, the HSC study also found that this difference is not statistically significant – because \$204,000 goes a lot farther in a rural area than it does in a city. In fact, when adjusted for cost of living, the average income of rural physicians was higher than urban doctors: \$225,000 vs. \$199,000.

Living in a rural area typically offers a much lower cost of living – cheaper (and bigger) houses, shorter commutes (and less money spent on gas and car maintenance), lower prices on groceries, and a more relaxed pace of life that makes it easier to live comfortably on a physician's income.

For example, according to this CNBC survey on the cost of living in all 50 states, my state of lowaranked #19 for the lowest cost of living, much cheaper than big city locations like California (#46), New York (#47) and New Jersey (#45).

"I can't afford to make this move – I have too much student loan debt to pay off."

As the cost of medical education continues to climb, many medical residents are understandably concerned about their levels of student loan debt. But working in a rural setting makes it easier to get out of debt faster. In addition to the lower cost of living that makes it possible to direct a higher percentage of income to paying off loans, many rural areas offer a variety of loan repayment programs and incentives to directly reward physicians who choose to practice in these communities.

In states such as lowa, there are student loan repayment programs specially allotted by the state government as a way to retain top medical talent who practice in designated Health Professional Shortage Areas. There are also numerous federal programs such as the National Health Service Corps loan repayment program, and various incentive programs from the Centers for Medicare and Medicaid Services. The Central lowa group I represent offers partial if not full loan repayment as an additional back up shall you not qualify for these programs.

"Rural physicians have to work too hard. I don't want to be on call all the time."

Rural areas tend to have a shortage of medical professionals. Many urban physicians think this means that rural doctors are constantly overworked. The reality is that rural physicians generally have better work-life balance than big city doctors. According to a survey of rural physicians from LocumTenens.com, 61% of rural doctors said that the pace of rural health care practices is slower than in urban/suburban areas, while another 31% said it was about the same as in urban or suburban practice. Eighty-four percent said that rural medicine is about the same as (47%), or less frustrating than (37%), larger-city practice.

"I don't want to be isolated, cut off from professional networking and career growth opportunities, living in a small town where there is nothing to do."

Many residents and urban physicians think that living in a rural setting is isolating. They think that they will be cut off from professional peers and colleagues, removed from professional development opportunities, and unable to enjoy entertainment options and amenities available in a bigger city.

The truth is, life in a rural setting is more connected, rewarding and fulfilling than most young doctors might expect. Early-career physicians often find that there are fewer barriers to advancement and less competition in a rural setting. Rural doctors might work at smaller hospitals or have a smaller peer group in their immediate geographic area, but they have all the state of the art services and equipment they need and many opportunities to build a supportive professional network throughout their larger region or state. Rural physicians also tend to serve a broader group of patients with a broader range of medical needs. This constant variety of clinical practice keeps rural doctors feeling challenged and intellectually stimulated.

As for entertainment and urban amenities, even if a small town can't offer everything that a big city can offer, the lower cost of living in a small town makes it easier for doctors to travel more

often (and afford more expensive vacations to bigger cities). As a rural physician, it's possible to create a rich, stimulating, cosmopolitan lifestyle, while still having a financially rewarding career and spending lots of time with family.

To those residents and early-career physicians who are considering making the move to a rural practice, I suggest asking yourself: "Why did you choose a career in medicine? Why did you want to be a physician in the first place?"

- Was it for the intellectual challenge and sense of accomplishment?
- The sense of mission and service to others?
- The money, status and lifestyle?
- Or to provide the best possible life for your family with your skills, while serving those in need?

Now ask yourself, "How would you like to have all of these things?"

Physicians in rural areas are some of the luckiest people in America, because they can truly "have it all." Rural doctors have the income to enjoy a very comfortable standard of living, while still having plenty of free time to explore nonprofessional pursuits.

Rural physicians are some of the most well traveled people I've ever met. They lead mission trips to developing countries to donate medical care. They take international vacations with their families. They are pilots, marathon runners, triathletes, artists, and community leaders.

Perhaps most important of all, rural doctors typically have to do rounds at only one hospital with a manageable call schedule. They have time to drive their children to school, attend every school concert and baseball game, and they can afford to buy their dream home right out of residency.

Choosing where to practice medicine is an expression of what you value most in life. Doctors who make the choice to practice in these underserved rural areas are making a statement that they value investing in time with their families, expanding their professional skills, and choosing to serve a grateful community where they are urgently needed and highly appreciated. Success as a physician is often a matter of looking closely and seeing things that other people might have overlooked. Are you ready to look beyond the misconceptions? Consider the financial rewards, career opportunities and personal fulfillment that rural medicine can offer you and your family. Learn more and take a closer look.

Cynthia Forsyth is a Physician Recruiter with Mercy Health Network in Des Moines, Iowa, specializing in connecting physicians with practice opportunities at hospitals and clinics throughout rural Iowa.