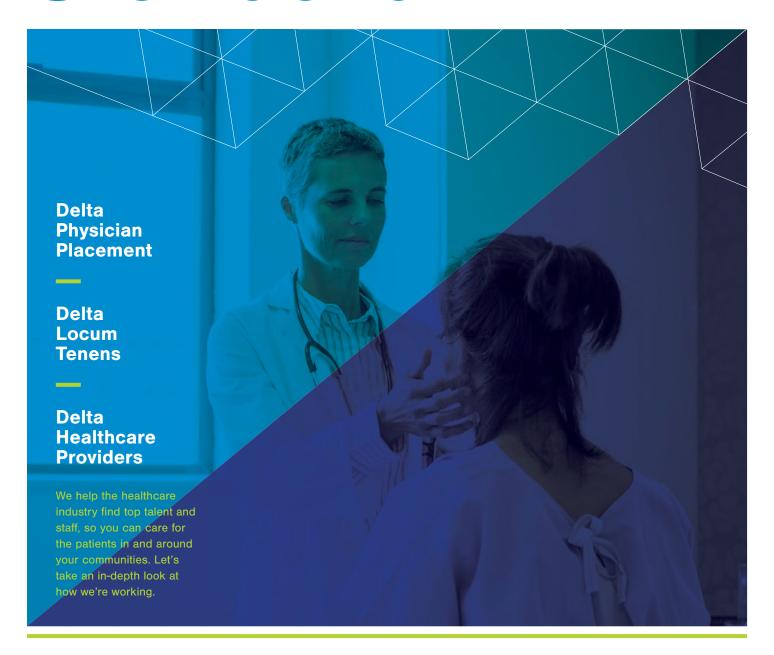
# The Standard





# New providers captured

Count of new providers obtained from July - December 2019.

## Allied

Total 8,	660
Other Allied	705
Advanced Practitioners	3,892
Therapists	4,063

# Physician

Total	610
Surgery	. 685
Primary Care	. 2,063
Hospital Based	. 862

Total New Leads 12,270

# **Procurement outreach by channel**

Effective search fulfillment efforts by outreach channel from July – December 2019.



**Conferences**: 2 attended 362 candidates sourced



Mass Emails: 3,400 campaigns 6,537,492 emails sent



Direct Mail: 5,600 pieces sent

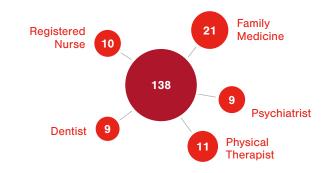


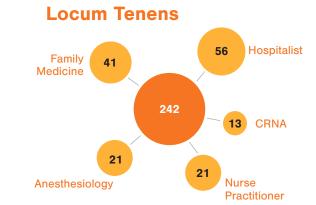
**Dials**: 115 marketers and recruiters 8,970 dials per day / 287.5 hours per day

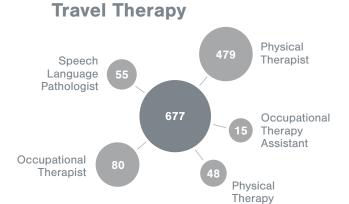
# **Total candidates placed**

Data indicates the number of placed candidates by specialty from July – December 2019. **(Top 5 placements listed.)** 

### **Permanent Placement**







Assistant



# **Specialty demand**

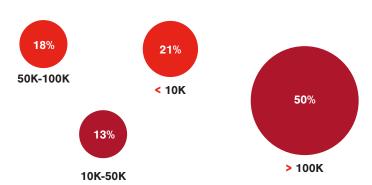
The top requested searches initiated by Delta Physician Placement

1 Family Medicine	6 Geriatric Medicine
2 Hospitalist	7 Internal Medicine
3 Obstetrics & Gynecology	8 Nurse Practitioner
4 Psychiatry	9 Dentist
5 Anesthesiology	10 Physical Therapist

# Placements by population setting

The amount and percentages of placements made by population size from July – December 2019.

Total 138	3
Greater than 100K residents	9
50K to 100K residents	8
10K to 50K residents	8
Less than 10K residents	9



# **Average Compensation**

\*Variance +/- 5%

Placements and interviews by Delta Physician Placement over the six-month survey period.

The compensation information presented indicates the rate at which candidates are choosing to interview or sign.

Title	Salary	Bonus	Relocation Assistance
Orthopedic Surgery	\$550,000	\$25,000	\$10,000
Oncology	\$525,000	\$50,000	\$10,000
Pediatric Surgery	\$500,000	\$35,000	\$10,000
Gastroenterology	\$481,000	\$25,000	\$10,000
Cardiology - Non-Invasive	\$475,000	\$20,000	\$10,000
Surgery - Vascular	\$472,000	\$20,000	\$10,000
Surgery - General	\$425,000	\$50,000	\$5,000
Anesthesiology	\$410,000	\$25,000	\$15,000
Emergency Medicine	\$395,470	\$35,000	\$10,000
Pulmonary Critical Care Medicine	\$384,250	\$20,000	\$10,000
Neurology	\$327,075	\$30,000	\$10,000
Hospitalist	\$302,233	\$20,000	\$10,000
Psychiatry	\$291,000	\$18,000	\$16,000
Obstetrics and Gynecology	\$290,000	\$20,000	\$13,333
Pediatric Ophthalmology	\$280,000	\$15,000	\$5,000

# The Benefits of Universal Healthcare Credentialing

The Consortium for Universal Healthcare Credentialing (C4UHC), along with 45 healthcare suppliers, providers, and vendor credentialing organizations, have successfully realized their goal for the streamlining healthcare industry representative (HCIR) credentialing process.

As of January 2019 when the National Electrical Manufacturers Association Supplier Credentialing, known as NEMA SC1, became recognized as a standard with the American National Standards Institute (ANSI), providers, facilities, and suppliers were granted this improved process for verification and credentialing. Here's a roundup of the positive impacts of universal healthcare credentialing.



# PROVIDERS: Reduced Stress and Less Red Tape

With universal credentialing, all providers will benefit, but locums tenens professionals in particular will feel the change. Locum tenens providers have been particularly burdened by the credentialing process because they're required to complete an application packet for each facility in which they want to work, regardless of length of assignment.

"This means the same verifications must be requested and obtained by the prospective medical staff offices over and over," explains Andrea West, Vice President of Operations for The Delta Companies. "This process is repeated with each new facility the provider onboards at and doesn't allow for the sharing of information and verifications from the previous affiliations."



# "

Providers would get credentialed quicker, provide the needed coverage sooner, and this would tremendously increase the capacity of credentialing staff members who could now onboard more providers in a timely manner."

Universal credentialing will help to reduce redundancy and the inefficiencies abundant in the existing verification process. West further explains that one credible, centralized resource could house all provider primary-sourced verifications (education and experience) and could be updated as needed. Comprehensive current, clinical references could also easily be shared with any prospective facilities, reducing stress, repetition, and wasted time.

# HOSPITALS AND HEALTH SYSTEMS: Get Providers to Work Faster

Streamlined credentialing allows for better staff management as well as a reduction in payroll costs due to the efficiencies gained by standardization.

"Providers would get credentialed quicker, provide the needed coverage sooner, and this would tremendously increase the capacity of credentialing staff members who could now onboard more providers in a timely manner" West adds.

### **SUPPLIERS:**

### **Reduced Costs**

The U.S. health system spends more than \$1 billion every year on unstandardized and duplicative supplier credentialing. (Supplier organizations include those that provide medical device, nutritional, and pharmaceutical products.) Standardizing credentials for these suppliers reduces costs, saves time, and enables these organizations to bring providers new and innovative products at a faster cadence.

# PATIENTS: Faster Treatment

When providers are credentialed faster, they can be onboarded faster, and begin delivering patient care sooner. Standardization empowers providers and hospitals to give patients the treatment they need expeditiously while continuing to protect their health, privacy, and safety, all of which leads to better quality of life.

The benefits of universal healthcare credentialing will impact the industry exponentially. Providers and facilities can leverage this power to the benefit of everyone.

"A uniform, universal credentialing process would be a revolution in the healthcare industry," West adds, "and would offer an invaluable benefit to the provider, the institution, and the credentialing liaisons."

The U.S. health system spends more than \$1 billion every year on unstandardized and duplicative supplier credentialing.



# The right position with the right community

We help connect hospitals and healthcare facilities with travel therapy staffing solutions. From Physical Therapists to Occupational Therapists to Speech Language Pathologists, we pride ourselves on helping our clients find the right match for the right position. Our entire team is dedicated to actively promoting job openings for travel opportunities.

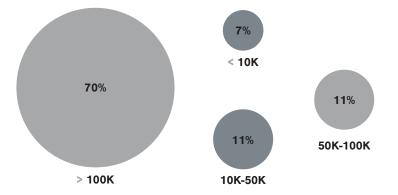
# Placements by population setting

The amount and percentage of placements made by population size July – December 2019.

Total Placements 614	
Greater than 100K residents	
50K to 100K residents	
10K to 50K residents 75	
Less than 10K residents · · · · 42	

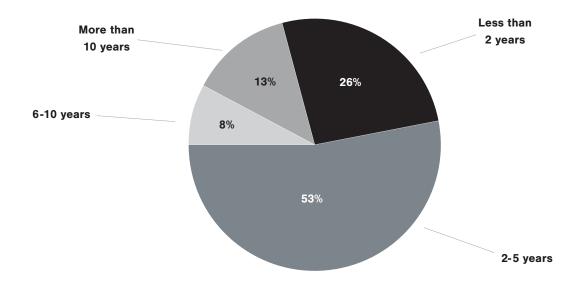
Total Placements

\*Variance +/- 5%



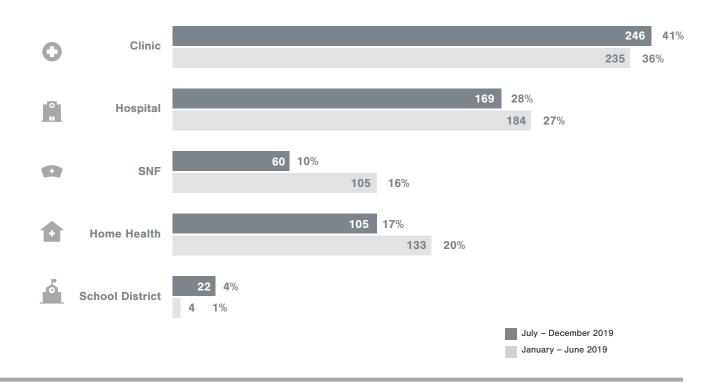
# Years of experience

Data represents the percentage of placed candidates from July – December 2019 by years of experience.



# Placements by facilities

Number of placements made by practice setting from July – December 2019.



# **The Standard**

JULY - DECEMBER 2019

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