

[View this email in your browser](#)



Idaho Medical Association

Table of Contents:

In this Issue...

- [Non-Physician Provider Patient Care Concerns](#)
- [New IMA Members](#)
- [2019 IMA Board of Trustees Elections](#)
- [Primary Care Physician Supply in All 50 States, Ranked](#)
- [IMA Practice Model Needs Assessment Survey](#)
- [Registration is Open for the 2019 IMA Annual Meeting!](#)
- [ISDA Conference: June 14](#)
- [Crisis Center Coming to the Palouse](#)
- [Senators Introduce Surprise Medical Bill Ban with Arbitration](#)
- [Pre-Order Your 2020 Coding, Billing and Resource Manuals Today!](#)
- [AMA Webinars](#)
- [Employed Physicians Now Exceed Those Who Own Their Practices](#)
- [Help Prevent Older Adult Falls: New Clinical Tools from the CDC](#)
- [Pre-Order Your 2019 Directory of Idaho Physicians](#)
- [Medical Practice Opportunities](#)

IMAgEs

May 15, 2019

Non-Physician Provider Patient Care Concerns

Idaho physicians have become very concerned about the public health implications of the expansion of scopes of practice of various non-physician providers in Idaho in recent years. Examples include pharmacist prescribing, naturopath licensure, prescribing by psychologists, chiropractic injections, and others.

At the 2018 Idaho Medical Association Annual Meeting and House of Delegates, Resolution 203(18) was adopted directing IMA to develop an information collection system where Idaho physicians can send in anecdotes and reports on potentially dangerous care practices and/or adverse patient outcomes derived from care by non-physician providers in Idaho.

Here is the specific language in Resolution 203(18):

"RESOLVED, Idaho Medical Association will adopt policy and create an internal process to gather information voluntarily shared by its members on adverse outcomes derived from care by non-physician providers in Idaho. The information gathered in this process would be for internal Idaho Medical Association use. If it is determined the use or release of this information outside of the Idaho Medical Association would be advantageous for a specific purpose, the Idaho Medical Association Board of Trustees would have authority to approve the use or dissemination of the information and set guidelines for its use."

You can share your experiences by completing a five-question survey at <https://www.surveymonkey.com/r/WSFXV9J>. Please do not include protected patient information in your entries. We want general information and may contact you if additional details are needed. Please be assured we will never disclose any information you provide without first getting your permission.

If you have questions, please contact Susie Pouliot, IMA CEO, at 208-344-7888.

[\[Back to Top\]](#)

**New look,
same
protection.**

- Serving the professional liability needs of physicians since 1975
- No profit motive and low overhead
- Vastly superior dividend policy

 Insurance by physicians, for physicians. miec.com

[Learn more](#)

Tirelessly defending the practice of
GOOD MEDICINE.



 **THE DOCTORS COMPANY**
medical malpractice insurance

Save the date ...

127th IMA Annual Meeting
July 19 - 21, 2019 ~ Coeur d'Alene Resort

Make your hotel reservation today by calling 1-844-403-1920 and using room block code: IMA19

Online registration and information is available at www.idmed.org.

([See related article below.](#))

The Idaho Medical Association Welcomes New Members A warm welcome to these physicians who have recently joined the IMA:

- John Bagwell, MD, Infectious Diseases, Idaho Falls
- Donald Blaskiewicz, MD, Neurological Surgery, Meridian

Sarah E. Davis, DO, Family Medicine, Meridian
 Duncan D. Harris, MD, Urology, Idaho Falls
 Lance G. Jacobson, MD, Orthopedic Trauma, Idaho Falls
 Stephen R. Lucht, MD, Internal Medicine, Meridian
 Amanda C. Mason, MD, Pediatrics, Nampa
 Mayra Rodriguez, MD, Nephrology, Idaho Falls

[\[Back to Top\]](#)

2019 IMA Board of Trustees Elections Four positions on the IMA Board of Trustees are up for election at the 2019 House of Delegates: Speaker of the House, Vice-Speaker of the House, AMA Alternate Delegate and Young Physician Section (YPS) Representative. Current Speaker of the House, David Rice, MD, Lewiston, has indicated his intention to seek re-election and Vice-Speaker, Daniel Reed, MD, Eagle has also indicated his intent to seek re-election. Current AMA Alternate Delegate Keith Davis, MD, Shoshone, has indicated his intention to seek re-election, and the YPS Representative slot is open for election.

These positions all have two-year terms and will be up for election again in 2021. This year's elections will be held at the IMA House of Delegates July 19 -21 in Coeur d'Alene. It is recommended (but not required) that candidates attend the meeting. (More information about the IMA House of Delegates meeting is available on Page 4.) Any IMA active member may seek election to these open positions, and we encourage your involvement!

Election to the IMA Board of Trustees allows you to provide policy input and guidance to the organization at the direction of the House of Delegates. The Board meets four times per year, and the expertise of the IMA professional staff ensures that your workload will be minimal. All travel, meals, and lodging expenses for these positions are reimbursed by the IMA. The following briefly describes the qualifications and responsibilities of these individual positions:

Speaker of the House of Delegates shall preside at HOD meetings and shall perform such other duties as parliamentary usage may require. The Speaker shall appoint all committees authorized by the HOD, unless otherwise provided in the IMA Bylaws. The Speaker shall be a member of the Board.

Vice Speaker shall act as Speaker in the absence of, or at the request of, the Speaker. Should the office of Speaker become vacant, the Vice Speaker shall preside during the unexpired term. The Vice Speaker shall be a member of the Board.

AMA Alternate Delegate shall be a member of the Board and shall act for the delegate in his or her absence or disability. He or she shall attend all meetings of the House of Delegates of the American Medical Association in regular or special sessions. The AMA Alternate Delegate shall, at all times while in office, be a member of the American Medical Association.

Young Physician Section Representative shall be a physician 40 years of age or younger, or a physician who has been in practice less than eight years regardless of age. The YPS Representative shall, at all times while in office, be a member of the American Medical Association. This person shall be a voting member of the Board and shall represent the young physicians within the state of Idaho, attending and representing IMA and young physicians at the American Medical Association annual and interim meetings.

If you are interested in serving on the IMA Board, please complete the Nomination Form and fax it to the IMA at 208-344-7903 by June 14, 2019. The nomination form is available on the homepage of the IMA website www.idmed.org in the "News" section.

[\[Back to Top\]](#)

Primary Care Physician Supply in All 50 States, Ranked Primary care is the backbone of the U.S. healthcare system given its inextricable link to positive health outcomes and health equity, yet the availability of these integral healthcare providers varies greatly state by state.

The average number of primary care physicians per 100,000 people in the country is 156.7, but Rhode Island (264.5) sits at the highest end of the spectrum and Idaho (95.7) at the lowest in terms of supply. Values reflect the number of active primary care physicians per 100,000 population. Primary care here includes general practice, family practice, obstetrics and gynecology, pediatrics, geriatrics and internal medicine.

A greater number of primary care physicians has been linked to longer life spans and better patient outcomes, including lower rates of low birthweight and all-cause mortality, according to the United Health Foundation (UHF). UHF factors primary care physician availability as an indication of health when calculating its annual America's Health Rankings report, which is the longest-running annual assessment of the nation's health on a state-by-state basis.

View the complete report including the complete state-by-state rankings the foundation used to calculate states' 2018 overall health scores at <https://assets.americashealthrankings.org/app/uploads/ahrannual-2018.pdf>. [Gable, *Becker's Hospital Review*, 5/20]

[\[Back to Top\]](#)

IMA Practice Model Needs Assessment Survey The IMA Board of Trustees developed a strategic plan to recognize and create solutions for issues impacting the practice of medicine in Idaho. You should have recently received an email with information regarding a survey that will help identify relevant issues within each model of practice and assist IMA in developing resources and tools to address the topics important to Idaho physicians.

Please provide your input! Access the survey at <https://www.surveymonkey.com/r/J5FHSTX>.

[\[Back to Top\]](#)



Registration is Open for the 2019 IMA Annual Meeting!

Join us this summer in beautiful Coeur d'Alene! Bring your ideas and energy to the Idaho Medical Association's Annual Meeting July 19-21. The House of Delegates helps shape IMA policy on legislative priorities and direction on issues that affect you and your patients. But we can't do it without YOU! Registration and meeting details are available on the IMA website at www.idmed.org and registration brochures have been mailed to IMA members.

Did you know that Annual Meeting registration fees are included with your IMA membership dues? Along with free registration, if you take advantage of the stipend for travel or lodging expenses offered by many of the local societies, the majority of your costs could be covered. Contact us if you have questions regarding local society stipends at 208-344-7888 or rebecca@idmed.org.

In addition, this year the IMA will be recognizing the society that recruits the highest percentage of delegates for their society! Be sure to represent your region and help your society meet its delegate representation goals.

Make your room reservations now. Now's the time to make your reservation and take advantage of conference rates at the Coeur d'Alene Resort. Reserve your room by calling 1-844-403-1920 and reference IMA room block code IMA19. Our room block will be released June 21 and the resort tends to sell out during the summer months.

[\[Back to Top\]](#)

ISDA Conference: June 14 The Idaho State Dental Association (ISDA) is hosting a conference focused on the opioid epidemic and how medical practitioners can contribute to the solution. You're invited to join them for the keynote: *Addiction is Emotional* with Austin Eubanks, a Columbine survivor [*Editor's Note: Please see below.*], and *The Big 3: Opioids, Alcohol, and Marijuana* with pharmaceutical expert Dr. Harold Crossley. The conference will be held Friday, June 14, 2019, at Boise Centre West from 7:30 am to 4:00 pm.

ISDA is hosting two nationally-known speakers: Austin Eubanks and Dr. Harold Crossley, who will speak about their personal and professional experiences with opioid misuse and how it has shaped their careers and lives.

- Keynote: The tragic passing of the Keynote, Austin Eubanks, is a difficult reminder of the addiction prevalence in our communities and the critical role medical professionals play in the opioid epidemic. ISDA is investigating options for the Keynote that allow them to honor the work Austin was doing and bring the human side of the story to the conference.
- Dr. Harold Crossley DDS, MS, Ph.D., is an internationally recognized dentist and expert on street drugs, chemical dependency, and pharmacology of dental drugs. Dr. Crossley has been a consultant for the United States Drug Enforcement Administration since 1974.

The information shared will be relevant to all as practitioners, as parents, and as members of our community. A registration form is available on the home page of the IMA website in the "News" section at www.idmed.org. Additional information about the conference is available at <https://www.theisda.org/events/annual-session>.

If you would like to attend either or both speakers on Friday, June 14, 2019, please return the registration form to ISDA at info@theisda.org before May 28. Space is limited, and registrations will be processed on a first come first served basis.

[\[Back to Top\]](#)

Crisis Center Coming to the Palouse The first crisis center in northcentral Idaho is expected to open this July next to the Latah Recovery Community Center (LRCC) in downtown Moscow.

"We're really excited about it," said Carol Moehrle, district director for Public Health - Idaho North Central District. "It's about time our region had some crisis services."

LRCC Director Darrell Keim said the crisis center, which he hopes will open in July, would provide a soothing environment for those experiencing a mental health crisis. He said at least two certified mental health professionals would be staffed to screen patients to determine if they require crisis services or other health services and to treat patients.

Potential patients would enter the recovery center, get screened and then enter the crisis center next door if those services are deemed appropriate, Keim said.

He said recovery center staff will ensure patients' safety while they are treated in the crisis center.

The crisis center will be comprised of six semi-private resting rooms, office spaces, a kitchen, shower and restroom. Patients can stay at the center for as long as 24 hours at a time, but most tend to stay for

significantly less time, Keim said.

The crisis services will be funded by the state and the facility will be managed by the recovery center, which is renting the space.

Moehrle said the goal is to provide a crisis center in each of Idaho's Region II counties - Latah, Nez Perce, Clearwater, Lewis and Idaho - with the focus on setting up services in Latah and Nez Perce counties first. Each center will be called the Rural Crisis Center Network.

The approach is different than other Idaho crisis center models, Moehrle said. For example, the Northern Idaho Crisis Center in Coeur d'Alene - the nearest crisis center to Moscow - provides services to the five northernmost Idaho counties. Moehrle said a crisis center in each Region II county will allow people to access a center more quickly in times of need.

"In those areas, they should have opportunities for resources there as well, so we're really excited that this model will benefit those in the communities that they live," Moehrle said. Keim said a crisis center is absolutely needed in the area. [Cabeza, *Moscow-Pullman Daily News*, 5/16]

[\[Back to Top\]](#)

Senators Introduce Surprise Medical Bill Ban with Arbitration

A bipartisan group of senators released legislation May 16 to ban surprise medical bills, and landed on arbitration as a final resort if hospitals, specialty physicians or insurers aren't happy with the pay rate proposed for out-of-network treatment.

The new bill from Sens. Bill Cassidy (R-La.) and Michael Bennet (D-Colo.) has been in the works nearly a year. Under the proposal, a patient's insurer would automatically pay the out-of-network doctor or hospital about the same rate it would pay if the service were in network.

But adding arbitration gives industry an appeals process that hospitals and specialty physicians want.

The White House isn't a proponent of arbitration. Leaders of the House Energy and Commerce Committee left it out of the [discussion draft proposal](#) they released on May 14.

At a press conference, Cassidy said he sees the method as landing on a "sweet spot" where doctors keep getting paid but have recourse.

Cassidy, Bennet and other members of the working group - including Sen. Maggie Hassan (D-N.H.) who first proposed arbitration last fall as a way to settle disputes - have been working on legislation for months, through extensive discussions with industry players and patient advocates. Cassidy told reporters that he was skeptical of the approach at first, but that he and Hassan worked together on the bill.

However, their measure isn't the final word for the upper chamber: the Senate health committee is expected to release a packet of proposals shortly, all with the aim to lower healthcare costs. This package will include a provision on surprise medical bills.

The Cassidy bill uses the median negotiated insurer rates as the benchmark rather than charges. Specialty physician groups like emergency department doctors and anesthesiologists, have been pushing for a policy like the one New York adopted for its individual market: where a percentile of average charges is used as the benchmark with arbitration as a backstop.

But analysts of all stripes warn that basing a pay rate on average charges from typically expensive doctors could bake in higher rates and drive up premiums, whether an arbiter is involved or not.

The bipartisan coalition of senators who gathered Thursday to introduce the bill all voiced their constituents' deep dissatisfaction with the current healthcare system, where surprise medical bills are a prominent feature.

Bennet told reporters that his scheduler had recently received a bill from the anesthesiologist who attended the birth of her baby - one year later. Sen. Todd Young (R-Ind.) read from a constituent letter that

described balance billing practices as fraud.

Senate health committee Chair Lamar Alexander (R-Tenn.) told President Donald Trump last week he hopes to send a healthcare package to his desk by July, as the Trump administration and Congress push for more transparency across the healthcare system. [Luthi, *Modern Healthcare*, 5/16]

[\[Back to Top\]](#)

Pre-Order Your 2020 Coding, Billing and Resource Manuals Today! Do you want to accurately increase reimbursement? Or, work with the secure knowledge that your claims are coded appropriately and safe from payer audits? Make sure your coding and billing staff have the most accurate information. As part of your membership, the Idaho Medical Association offers most coding, billing and reference manuals at a significant discount. This saves you and your office money when you provide your staff with the tools to help you ward off unwelcome challenges to your revenue.

The CPT[®] book from AMA provides guidelines and illustrations throughout the book that other publishers may not provide. The guidelines include information that is helpful to determine the most accurate code is submitted for the procedure or service performed. We have increased our offerings from Optum 360° to include Optum's CPT[®] coding book. The Optum CPT[®] coding book costs significantly less than the AMA book and is a good coding book to have as a backup for additional coders to use.

There are many resources that are specific to specialty coding as well, such as procedures in cardiology, gastroenterology, obstetrics and gynecology and dermatology to name a few. There are resources that explain modifiers and how they should be used as well as MACRA, HIPAA and more. The order form for 2020 publications is available on the IMA website at

https://www.idmed.org/idaho/Idaho_Public/Resources/Products_and_Services/

If there is a type of book you don't see but would like to purchase, please contact Rebecca Adams at rebecca@idmed.org or 208-344-7888. We are happy to help offices obtain the resources and materials at substantial discounts to keep the money you work so hard to earn. Books will be shipped once they are released from the publisher. Please contact us with any questions today!

[\[Back to Top\]](#)

AMA Webinars The American Medical Association's Transforming Clinical Practice Initiative team is putting on two webinars this month as part of their Share, Listen, Learn (SL2) series – May 22 and May 29.

Thriving in practice - Staywell Performance Story: May 22 at 12pm CT

A long-time physician will share her practice's journey through the phases of transformation and how both the struggles and the triumphs have prepared the practice team for operating and succeeding in an APM.

Registration Link: <https://cc.readytalk.com/r/j42ybdhntike&eom>

Family Caregivers Providing Complex Care: May 29 at 12pm CT

20 million family caregivers provide complex care. These family caregivers need more support and instruction from health professionals according to Home Alone Revisited: Family Caregivers Providing Complex Care. Susan C. Reinhard, RN, PhD, FAAN, Senior Vice President and Director, AARP will share findings from the report and how to access resources and tools for the family caregiver.

Registration Link: <https://cc.readytalk.com/r/mh3ntc5gwu2h&eom>

[\[Back to Top\]](#)

Employed Physicians Now Exceed Those Who Own Their Practices

Chances are now slightly more likely that a physician is employed by someone and not a physician who owns his or her practice.

In 2018, 47.4 percent of practicing physicians were employed, while 45.9 percent owned their practices, according to a new entry in the AMA Policy Research Perspectives (PRP) series. The PRP is based on data from the 2018 AMA Physician Practice Benchmark Survey, which included 3,500 physicians from 50 states and the District of Columbia who provide at least 20 hours of patient care weekly and do not work for the federal government. The new ownership figures are a milestone, marking the first time the number of employed physicians is greater than the number of those who own practices. But it does not mean physician-owned practices are going away.

The PRP, "Updated Data on Physician Practice Arrangements: For the First Time, Fewer Physicians are Owners Than Employees," shows there are still a large number of physician practice owners. And it notes that this decline is the continuation of a trend that medicine has been monitoring for more than three decades.

In fact, the rate at which physician ownership is falling is slower today than it was in the late 1980s and early 1990s. The share of physicians who are owners fell by more than seven percentage points in the six years between 2012 and 2018, data from the Benchmark Surveys shows. Between 1988 and 1994, ownership fell 14.4 percentage points, from 72.1 percent in 1988 to 57.7 percent by 1994.

"Given that only now has the point been reached where the number of employed physicians exceeds the number of owner physicians, caution should be taken in assuming current trends will continue indefinitely," says the PRP, written by Carol K. Kane, PhD, Director of Economic and Health Policy Research at the AMA.

In 2018, ten percent of physicians were employed in practices that are entirely owned by other physicians, also called private practice. In total, and including the practice owners and the physician employees and independent contractors who work for them, more than half of physicians – 54 percent in 2018 - worked in practices that are entirely owned by physicians, according to the PRP. That number is down from 2012, when the share stood at 60.1 percent. But the numbers indicate the downward trend has been slowing because half of the shift occurred in just the first two years of that six-year period.

Learn more at <https://www.ama-assn.org/about/research/employed-physicians-now-exceed-those-who-own-their-practices>.

[\[Back to Top\]](#)

Help Prevent Older Adult Falls: New Clinical Tools from the CDC The Centers for Disease Control and Prevention (CDC) released two new complimentary clinical tools to help health care providers reduce older adult falls:

- Coordinated Care Plan to Prevent Older Adult Falls: Framework for implementing a Stopping Elderly Accidents, Deaths, and Injuries (STEADI)-based clinical fall prevention program. (https://www.cdc.gov/steady/pdf/Steady-Coordinated-Care-Final-4_24_19.pdf)
- STEADI: Evaluation Guide for Older Adult Clinical Fall Prevention Programs: Key steps for measuring and reporting on the success of your program. (https://www.cdc.gov/steady/pdf/Steady-Evaluation-Guide_Final_4_30_19.pdf)

Older adult falls are the leading cause of all fatal and nonfatal injuries among adults age 65 and over in the United States, accounting for over 3 million emergency department visits, 962,000 hospitalizations, and approximately 30,000 deaths in 2016. Help keep your older adult patients safe, independent, and STEADI. To learn more visit the webpage at <https://www.cdc.gov/steady/>.

[\[Back to Top\]](#)

Pre-Order Your 2019 Directory of Idaho Physicians The IMA is now accepting pre-orders for the 2019 Directory of Idaho Physicians. The Directory provides the office address and telephone number of every physician in Idaho.

As a membership benefit, IMA physician members receive one complimentary copy of the Directory and additional copies are available for \$40.

Order forms are available on the [IMA website](#).

[\[Back to Top\]](#)

Medical Practice Opportunities

Physician – Kellogg

Physician - Post-Acute Care – Coeur d'Alene

Psychiatric Nurse Practitioner or Physician Assistant – Behavioral Health – Coeur d'Alene

The mission of Heritage Health is to deliver a healthcare experience that provides hope, inspires change and extends life for our patients and our community. Heritage Health is a growing patient-centered practice who is looking for a full-time physician in Kellogg, a full-time physician for the Post-Acute Care team in Coeur d'Alene and a full-time psychiatric nurse practitioner or physician assistant in Coeur d'Alene.

The Heritage Health physician provides high quality care in accordance with national guidelines to all Heritage Health patients in a culturally competent manner. The Heritage Health physician strives to provide care consistent with Heritage Health's mission statement. The physician provides clinical support to all providers and staff on an as needed basis. The Heritage Health physician is a strong leader who treats all staff with respect and supports teamwork and a positive work environment.

The NP or PA provides diagnosis, treatment, and management in a behavioral health clinical setting to a specified population. Provides consultation for in-house patients for Heritage Health providers and, if needed, assumes responsibility for psychiatric care. Counsels and educates patients regarding treatment and refers to ancillary and support services.

Additional information including job descriptions and minimum qualifications along with online applications are available at www.myheritagehealth.org/careers. Heritage Health is an Equal Opportunity Employer.

Remote/Independent Contractor Physician: Board certified or eligible in ob/gyn, urology, family medicine, emergency medicine, preventative medicine

We are Ro, a mission-driven healthcare technology company where doctors, pharmacists and engineers are working together to reinvent the way the healthcare system works. Ro is currently seeking remote physicians to provide care to our members via our telemedicine platform.

For more information, visit <https://ro.co/>. To apply, please contact athena@ro.co

Large, Independent Multi-Specialty Group Looking to Grow
Nampa, Meridian, Boise and Caldwell, Idaho
Full-Time

Saltzer Medical Group (SMG) is seeking growth opportunities with other like-minded physicians interested in joining an independent, multi-specialty practice in Idaho's Treasure Valley. Current specialties include Family Practice, Internal Medicine, OB/GYN, Pediatrics, Neurology, Ophthalmology, Orthopedics, Pulmonology, Rheumatology, Sleep Medicine and Urgent Care. Opportunities exist for Primary Care and Specialty Physicians, as well as Advanced Practice Providers, to join a well-established group of 50 plus providers.

SMG is an independent physician-led, professionally managed, large multi-specialty practice with six locations in Nampa, Meridian, Boise and Caldwell, Idaho. SMG was established in 1961 by Dr. Joseph Saltzer and the friendly, patient-oriented approach that characterized his practice is still faithfully adhered to, even in these technologically advanced times.

Contact: Vicki Tyler at 208-463-3158 or vdt Tyler@saltzmed.com for additional information.

BC/BE Clinical Gastroenterologist
Nampa, Idaho
Full-Time

Saltzer Medical Group (SMG) is an independent physician-led, professionally managed, large multi-specialty practice with six locations in Nampa, Meridian, Boise, and Caldwell, Idaho. SMG was established in 1961 by Dr. Joseph Saltzer and the friendly patient-oriented approach that characterized his practice is still faithfully adhered to, even in these technologically advanced times.

SMG is seeking a BE/BC Gastroenterologist to work in our on-site Endoscopy Suite. Candidate would be assuming a mature practice and join a well-established, multi-specialty independent practice in Idaho's Treasure Valley. The practice offers a competitive salary with incentive and comprehensive benefits, along with a strong referral base within the practice.

Contact: Vicki Tyler at 208-463-3158 or vdt Tyler@saltzmed.com for additional information.

Primary Health Medical Group, Boise

Primary Health Medical Group (PHMG) is hiring full-time board certified/eligible FAMILY PHYSICIANS for OUTPATIENT FAMILY MEDICINE positions in Boise, Nampa, and Meridian, Idaho. Our clinics are based on a patient centered medical home model that gives the family doctor the support and time that encourages trusting relationships with their patients. Family physicians work 4-4.5 days per week and hospital call is 1 out of every 20 nights consisting of nurse triaged phone calls with no visits to the hospital.

URGENT CARE positions are also available for FAMILY PHYSICIANS, PHYSICIAN ASSISTANTS or NURSE PRACTITIONERS – Our ideal candidate would be board certified/eligible. Urgent care positions require the provider to work approximately 14 twelve-hour shifts per month and be comfortable with the fast paced environment of an urgent care clinic. Our clinics are based on a combination clinic that has urgent care and appointment family medicine practice at the same site. Urgent care and appointment providers work together to address the patients' episodic and chronic care problems. Must be willing to work some weekends and twelve hour shifts.

Primary Health is an independent, predominantly primary care medical group with 15 clinics (soon to be 17) and more than 300,000 patient visits per year. A leader in implementing quality programs, PHMG has been using electronic health records since 2007. Physicians follow evidence-based guidelines and engage with patients in innovative ways to promote wellness. PHMG has received local and national recognition for providing efficient, quality care. Primary Health has been voted among the top 10 Best Places to Work in Idaho, and employee turnover is low. The group provides a supportive environment where family doctors develop lasting relationships with patients and enjoy a schedule that allows time to experience the many activities Idaho has to offer. Providers also have the opportunity to invest in the medical group and become an owner.

PHMG offers the following benefits to all full time physicians: – Medical and dental insurance with PHMG covering roughly 95% of the premium. – Group life insurance with options to voluntarily buy-up – A generous own occupation/own specialty long term disability policy – \$500 worth of free services in our own clinics for the physician and his/her family (per year) – A 401(k) plan with a guaranteed match – Payment for malpractice insurance, licensing fees, professional memberships and CME. PHMG offers a strong benefits package and very competitive salaries. A detailed summary of our benefits may be found on our website www.primaryhealth.com.

To place a Medical Practice Opportunities Classified Advertisement, please contact:
Margy Leach, Director of Communications at 208-344-7888 or by email margy@idmed.org.

[\[Back to Top\]](#)

Idaho Medical Association
P.O. Box 2668, 305 West Jefferson, Boise, ID 83701
Phone: (208) 344-7888 - Fax: (208) 344-7903 - Email: mail@idmed.org

[Click here](#) to choose the types of mailings that we send to you.
[Click here](#) to Unsubscribe.

