The Evolving Health Care Landscape and Its Impact on Plastic Surgeon Practice and Satisfaction

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Purpose:

In the setting of rapidly evolving health care, physician job satisfaction has been impacted. We elucidate the landscape of jobs and contracts in plastic surgery and its evolution.

Methods:

A survey was created based upon the authors’ experience eliciting current opinions with matters surrounding the stated purpose. Members of the American Society of Plastic Surgery were asked to complete a SurveyMonkey (Copyright © 1999-2014) based survey. Responses were analyzed and p-values of less than 0.05 were deemed significant.

Results:

A total of 573 board certified plastic surgeons responded. Experience included: 30(5.2%) <3 years, 128(22.3%) 3-10 years, and 415(72.4) >10 years. Practice settings included 17.3% academic, 44.0% private, 19.2% private with a clinical appointment, 8.0% multispecialty group, and 12.2% unspecified.

Since beginning practice, 225(39.2%) surgeons changed employment. This occurred in the first three years of practice (50%), between year 3-6 (32.7%), between year 6-10 (15.9%), or after >10 years in practice (1.3%). Twenty-eight surgeons (12.4%) changed from an academic to another academic practice, 62(27.4%) academic to private, 113(50.0%) private to another private, 16(7.1%) private to academic practice. No change in employment is planned by 271(49.7%) surgeons and 132(24.2%) are unsure. Timing of those surgeons who anticipated employment change was one to three years (15.6%) or five to ten years (10.5%). Practice setting of those who anticipated changing employment included, 42(29.6%) academic, 55(38.7%) private, 27(19.0%) private with a clinical appointment and 18 (12.7%) multispecialty practices.

Surgeons that changed employment ranked base salary (p=0.0031), earning potential (p=0.0001), and incentive structure (p=0.0001) as most important. Those that did not change employment ranked lifestyle (p=0.0048), location (p=0.0001), and desire to teach (p=0.0002) as more important. Compared to senior surgeons, junior surgeons significantly ranked location (p=0.0130) and desire to teach (p=0.0304) as more important.

Compared with those in private practice and mixed practices respectively, those in academic practice were more satisfied with their case mix (p=0.0005, OR=NS) (p=0.0002, OR=NS) and less satisfied with their incentive structure (p=0.0001, OR=0.3155) (p=0.0001, OR=0.2628) and payor mix (p=0.0005, OR=0.6156) (p=0.0055, OR=NS). Overall satisfaction was not significantly related to practice setting.
Conclusions:

A significant number of plastic surgeons have changed practices throughout their career and half are considering a change currently. Those who changed employment did so most frequently for monetary etiologies, while those who did not valued non-monetary reasons strongly. Younger surgeons value factors which have led to long term employment in their more senior colleagues. While happy with their case mix, incentive structures should improve to retain academic surgery faculty.

Financial Disclosures:

The authors have no financial disclosures regarding this research.