

Dear Physicians,

The Board of Directors approved last week, with slight modification to the MA Pay Committee's recommendation, an option for you to add a "wage factor" or "extra pay" (\*) to your MA's hourly pay if you feel it is needed. That factor, and its related tax and benefits costs, can be anywhere between \$0 and \$3 per hour and is charged to you as a production deduction. While any MA is eligible to receive it, we strongly encourage you to consider carefully **IF** it should be given, **WHO** should be receiving it and **HOW MUCH** it should be. For the most part, we anticipate that MA pay will go on just as usual and possibly most WON'T need to receive an adjustment. The Board certainly does not want to have any physician feel they must offer it. **The intent behind the option is to retain quality MAs who you wish not to lose**. Honestly, the 'basic' MA who just does the minimum standard to get by should not be eligible for consideration.

The process would go something like:

- Determine the need for it on behalf of one or more of your MAs. This could include that they are looking elsewhere and you don't want to lose them, or you sense some 'non-permanency' and you don't want them to go looking elsewhere.
- Ask yourself "does this MA have potential, is trainable, adds value to my practice, follows through on my directions, is considerate to patients, is someone I and my practice just can't live without" to determine WHO and HOW MUCH.
- Visit with Lindsey, or Administration, on what the cost would be to you based on your choice of amount.
- Visit with your area CSS (area MA supervisor) to get input on this MA's status in fulfilling the basic requirements of being an MA at Tanner Clinic. If not meeting basics, they should not be eligible for factor. A good chance for CSS to provide training. If they really are a good MA, there should be no problem here.
- Along with your CSS, if you choose, determine any other metrics the MA should fulfill for them to warrant a pay factor. (\*)
- Visit with your MA, along with your CSS, about why they are valuable to you and what they have done to deserve this factor. The CSS will then process the necessary pay change paperwork. (Note: if you have more than one MA and only one gets a factor, you would also want to be prepared, as needed, to have a conversation with the other MA on why they DIDN'T get the factor and train them up on how that may change going forward.)

\* As a "wage factor", it, or part thereof, can be tied to the successful achievement of pre-defined criteria and paid out, say quarterly, as achieved but also not paid out if not achieved. Pop Health metrics fit perfectly in this scenario. As "extra pay" it is awarded for its original intent of retention and invaluable contribution to practice as noted above.

The Board has wrestled with this for a long time. Much input was received from the committee and providers. Many thanks to the committee for their endless hours of review on this. There is no perfect solution. It may change along the way but is hopefully a little breathing room to not lose good talent to other employers while at the same time retaining some control so things don't get out of hand as they had historically done. In the end, though, would rather risk losing a little control than continue losing invaluable MAs.

Always open for input.

Thanks, Steve and Theron on behalf of the Board of Directors