## Benefits and drawbacks of major hospitalist models

<table>
<thead>
<tr>
<th>Model</th>
<th>Pros</th>
<th>Cons</th>
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| Hospital-based or hospital corporation | • No worries about patient payer status or billing issues  
• Hospital is responsible for practice management and liability  
• Good working relationships with hospital staff  
• Limited, or no, running between hospitals  
• Hospital-based jobs at academic medical centers offer research and teaching opportunities | • May report to non-MD administrator who may not understand clinical issues  
• Entrepreneurship is not rewarded  
• Can't decline patients  
• Heavy involvement with Joint Commission reviews |
| Single-specialty or multispecialty group | • Unless specifically contracted, group can refuse indigent, nonassigned patients.  
• Unless contracted, hospitals cannot dictate quality or performance measures  
• Ownership mentality  
• SHM reports hospitalists who work for multispecialty/primary care groups have the highest median salary of all models | • Practice management and liability concerns  
• Lack of geographic flexibility  
• Possible lack of mentoring/training  
• Possible nonstandard benefits |
| Local, hospitalist-only group         | • Respect from community physicians and hospital administrators  
• Pride of ownership  
• Can decline patients  
• Rewards entrepreneurship  
• Can set own hours  
• Potential to work as much or as little as desired  
• No worries about loss of hospital contracts because allegiance is to primary care physicians | • Responsibility for running a business  
• Market forces could affect pay  
• Hours could be irregular  
• Possible daily running between hospitals  
• Possible lack of mentorship  
• Potential lack of infrastructure  
• Lack of geographic flexibility to move and retain salary/benefits |
| Multistate hospitalist group or hospitalist management company | • Standardized benefits, incentives  
• Ability to relocate without loss of seniority  
• More sophisticated information systems, established infrastructure  
• No responsibility for collections | • Possible daily running between hospitals  
• Duties defined by hospital contract  
• Must adhere to written schedule; cannot make own hours  
• Turnover can affect schedules and add to workloads |