



THE STUDENT LOAN DILEMMA

Small Pay Gap Between Younger, Veteran Family Physicians



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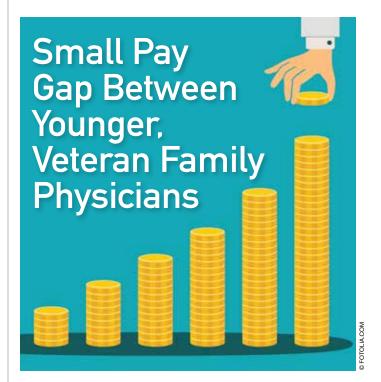
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From staff reports

ounger family medicine physicians, those 40 years and under, are making just about as much as their veteran colleagues, according to a new report from **Medscape.com**.

With an annual compensation of \$190,000 for practitioners 40 and younger, family medicine physicians ranked 21st out of the 26 physician specialty categories ranked in the report. Orthopedics and dermatology led the young physician salary list at \$329,000 and \$321,000, respectively. Compensation was for patient-care activities only. Data are based on 311 U.S. physician survey respondents.

Maybe more important to family medicine residents, the disparity in income between younger and older (40-and-over) physicians was only \$22,000 per year, according to the report. That was the smallest difference in income in any of the physician groups. By comparison, the difference in income between the orthopedists was \$150,000 per year, while plastic surgeons (\$140,000) and radiologists (\$135,000) also had six-figure gaps between younger and older practitioners.

The report authors noted, "Current trends suggest that the relatively small difference in income between younger and older primary care physicians may reflect recent incentives to entice residents to pursue a generalist path. The small differences between older and younger physicians in the generalist groups also may simply be due to lower annual increases compared with those of proceduralists."

APPLE HEALTH HIRES YOUTUBE STAR FOR FAMILY MEDICINE EFFORT

From staff reports

echnology giant Apple reportedly has hired
Canadian physician and social
media superstar Mike Evans,
MD, to spearhead its family medicine efforts in Apple's health
division, according to the CBC.

Dr. Evans is known for his YouTube videos that tackle common medical problems and general health issues. He has more than 70,000 followers to his general medicine channel, with his videos attracting as many as 1 million views. Dr. Evans' videos feature him speaking over a series of animated whiteboard cartoons. He has worked

previously for Apple, "helping to chart the future of family medicine," according to the CBC report.

"I think why they are engaging me is the messaging," Dr. Evans told CBC Radio, without offering any other details. "We're searching for consistency, not perfection."

Dr. Evans previously was a staff physician at St. Michael's Hospital in Toronto as well as held academic roles with the University of Toronto and others.

"They were most interested, interestingly, in how I worked with creatives," he told the CBC.

MORE: Check out some of Dr. Evans' best

videos here.

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Continuing MEDICAL EDUCATION

Don't ignore CME—make a plan and take advantage of vast resources

By Richard Quinn

MILY BRIGGS, MD, is a planner, so when it comes to managing continuing medical education (CME), she says young physicians can't start early enough.

"CME is not something you can cram into the end," says Dr. Briggs, a family physician in New Braunfels, Texas, and a past member of the American Academy of Family Physicians (AAFP) Board of Directors. "You can't cram it into the last two months of the three [residency] years and still be successful. "I would say even people that are loosey-goosey on other things, that this is something you want to at least know about ahead of time to be able to plan that and have a good idea of what those requirements are."

Managing CME isn't always easy, particularly early on in a career when there are challenges to getting established that fade over time. But there are ways to make it easier. Dr. Briggs' tips for young physicians include:

- *Plan ahead* and note what timeline requirements there are. Set deadlines to complete modules and other interim work that come between renewing board certification every 10 years.
- Take advantage of your state organizations or the AAFP.
 These groups aggregate and house multiple online modules that make both for-profit and free training available.
- Attend group CME outings, which offer opportunities that didactic or online learning does not. "It's difficult for me to take an hour out of my day to be able to go to that brown-bag lunch at the hospital ... and I am not one to necessarily go to an online option because I really value

that social connection," Dr. Briggs says. "Getting away, I tell my office, 'I'm gone for the next three days. You guys can't page me. Page my partner, so I actually can get away and really focus on learning."

- Don't assume that being a year or two out of residency means that CME isn't as important for you as it is for long-practicing family physicians. "It's very tempting, at least it was for me," she says, "to just breathe after getting out of residency and just say, 'You know what? I've got life to worry about. I've got my family. I have to get this practice up and running. ... I don't need to go back and study anything because I'm up-to-date compared to any other physician in my community. I just got out of all that stuff.'... Make sure that you don't know what you don't know so always look for more."
- Realize that CME, while regulated, isn't supposed to be a
 punishment. "This is supposed to be lifelong learning," Dr.
 Briggs says. "Treat it that way." ■

Richard Quinn is a freelance writer in New Jersey.

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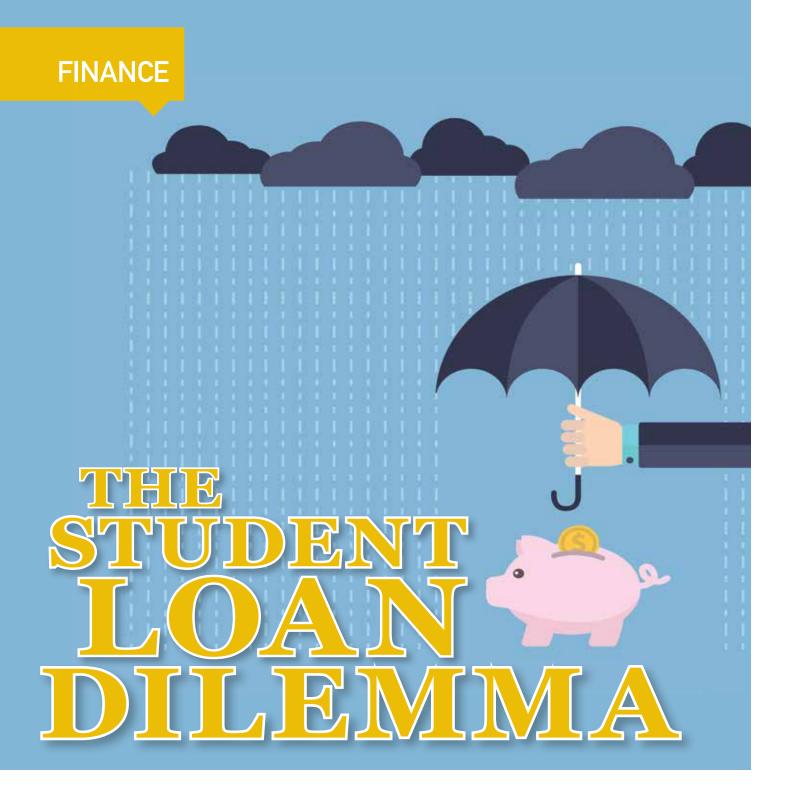
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BEFORE YOU REFINANCE, THINK ABOUT YOUR CAREER PATH AND LONG-TERM REPERCUSSIONS

By Candace Mitchell

TUDENT LOANS: the dark cloud hanging over your first job search and a key consideration in any job offer. It's not a thrilling topic for early-career family medicine physicians, and for most, it's probably one they try to avoid. However, if there's an opportunity to save thousands of dollars by addressing the elephant in the room a little earlier, you might want to reconsider your options.

"Don't put your head in the sand and say, 'I'll deal with this in a couple years," says David Weliver, founding editor of the website Money Under 30. "In many cases, the longer you wait, the more you're going to pay."

Physicians with serious student loan debt should first think about consolidation or refinancing loans. Some take advantage of this option right out of medical school, while others prefer to wait (defer) until they secure a full-time position and know what they can afford to pay.

When you refinance, you're taking on a brand-new loan to change the terms of a previous loan, explains Leslie Tayne, founder of Tayne Law Group. And, therefore, there are a couple things to be aware of. What you may think is a good deal might not actually be, she says.

"You want to look at whether there are closing costs involved. What are the default terms? How long do you have to pay that loan?" Tayne says. "It's a business decision."

Reasons to Refinance

According to Weliver, the ideal situation for refinancing a loan is when you're settled in a job, you know what you're going to earn, and you know what you owe. And, therefore, you want to refinance to pay off your student loans as comfortably and quickly as possible while still saving on interest.

Best-case scenario (and best savings)? You agree to a shorter term—that you can still manage—and refinance at a lower rate. This, of course, increases the monthly payment but dramatically lowers interest costs, Weliver explains.

That perfect scenario, however, is not always available, Weliver cautions. Sometimes, people refinance simply to get a lower monthly payment by extending the loan (e.g., from 10 years to 12 or even 20). Longer loan terms could be a tempting scenario for a family medicine resident who has a lot of loans. Experts suggest you weigh all the costs and select a term that fits your career track.

Tayne also warns against jumping the gun on a refinance. "I wouldn't refinance a loan if you don't have a job," she says. "How do you know what your budget is to pay it?"

What You'll Need

If you do decide it's the right time to refinance, there are a few things you'll need to qualify, according to Money Under 30's guide to repaying student loans:

- First and foremost, you must show that your loans were used to pay for a degree from an accredited institution.
- You must prove job security and, more specifically, that you earn enough at your job to pay off the loan.
- · Finally, you need good credit. They'll look at your entire

financial picture, Weliver says, including other debts, what your rent or mortgage costs, etc.

Risks

Refinancing student debt offers a lot of potential savings, but there are things to be wary of.

You can refinance more than once, but each transaction costs money. "Ideally, it might be a process that you only want to do once," Weliver says.

Another risk is potentially losing the benefits that certain public loans offer.

"If you're taking out a private loan to refinance or consolidate a [government-backed] loan, you want to be very careful because ... income-based or income-sensitive options may disappear," Tayne says.

Weliver concurs, noting that some of the benefits you might be required to give up include loan deferment and income-based repayment options.

Candace Mitchell is a freelance writer in New Jersey.



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