LOCUM INDEPENDENCE

# Locum Agency Recruiter Guide

How to introduce a benefit no other agency offers, and position your agency as a long-term partner in a physician's independent career.

# What's Inside

01

SECTION

## The Introduction

Your role is to open a door. Locum Independence does the rest.

#### THE NATURAL VERSION

> "A lot of our docs tell us the business side of locums is the hardest part. We give physicians access to resources around taxes, retirement, contracts, and financial planning. Most agencies never address any of that. If it's ever useful, I'm happy to share more."

The goal is consultative, not scripted. This should feel like an extension of the relationship you already have, not a pivot into a pitch.

02

SECTION

## Timing

The right moment is when a physician signals stress, curiosity, or a transition. The wrong moment is during a rate negotiation, where anything you introduce reads as a substitute for money.

#### SIGNALS THAT THE MOMENT IS RIGHT

- A physician mentions taxes, an accountant, or a filing surprise
- A physician is new to 1099 and asking logistical questions
- A physician is working across multiple states
- A physician mentions being overwhelmed by the business side

#### SOFT INTRODUCTION LANGUAGE

> "This is completely optional. I just wanted you to know it exists."

> "A lot of our physicians have found this helpful, especially early on."

> "You can explore it on your own terms. No pressure."

Lead with the physician's situation. Never lead with features.

03

SECTION

## Competitive Positioning

When another agency offers a higher rate, you are not defending your rate. You are expanding what the physician is comparing.

### ON A HIGHER RATE ELSEWHERE

> "A higher rate doesn't always mean a better outcome. What a physician keeps depends heavily on entity structure and tax planning, and most physicians have never had either one looked at."

### ON VALUE BEYOND COMPENSATION

> "Most agencies stop at placement. We try to support the business side of independent practice, which nobody else in this market addresses."

### ON LONG-TERM OUTCOMES

> "The rate is one piece. Coordinated planning, tax strategy, and the right entity structure affect what you actually keep. That's the part we can help with."

Stay non-defensive. You are widening the conversation, not winning an argument. Never comment on a competitor.

04

SECTION

## Physician Pain Points

Independent physicians carry a business burden employed physicians never face. Understanding it is what makes the conversation credible.

| | |
|---|---|
| **Tax burden**<br>High 1099 income with no employer withholding, quarterly estimates they have to calculate themselves, and deduction complexity nobody has walked them through. | **Entity confusion**<br>LLC versus S-Corp decisions with real consequences, often deferred for years because no one has forced the question. |
| **Retirement uncertainty**<br>No employer match, unclear Solo 401(k) options, and contribution habits that never got established. | **Coordination overload**<br>A CPA, an advisor, an insurance broker, and a contract attorney, none of whom talk to each other. |

05

SECTION

# Example Conversations

### The new locum physician

> "The business side catches a lot of new locums off guard. We partner with a platform called Locum Independence. Docs use it to get oriented on the financial and business setup. Happy to connect you if it ever feels relevant."

### The experienced locum physician

> "You've clearly got the clinical side dialed in. Some of our experienced docs use Locum Independence more for coordination, making sure their CPA, advisor, and contracts are actually aligned. Worth knowing it exists."

### The physician comparing agencies

> "Totally fair to shop around. One thing I'd mention: we give physicians access to business and financial resources, which most agencies don't. Our goal is to support you long term, not just fill a shift."

### The physician overwhelmed by contractor logistics

> "You're not alone in that. Most of our docs say the business side is the hardest part. That's exactly why we built this partnership. Let me send you the information."

06

SECTION

# Objections

### "I already have a CPA."

> "That's good. This isn't a replacement. It's about coordination, making sure your advisors are working toward the same goal instead of separately."

### "I only care about the rate."

> "Understood. The rate matters. I'd only mention that a lot of docs find what they keep matters more than what they earn. No pressure either way."

### "I can handle this myself."

> "I believe you. This is just here if it ever becomes useful. A lot of physicians say they were managing fine until they realized how much coordination they were missing."

### "Sounds expensive."

> "There's no cost to explore the resources. Some specialist engagements have fees, and you'd know the scope before committing to anything."

### "I'm not interested."

> "No problem. Just wanted you to know it's there. If anything changes, I'm happy to revisit."

### "I work with another agency."

> "Totally fine. This isn't exclusive. It's something we offer, and it's worth knowing about regardless."

07 SECTION

## The Referral Process

Keep this operationally simple. You are making a warm handoff, not closing a deal.

**01 Identify the moment**

A physician signals stress, curiosity, or a transition.

**02 Make the introduction**

Low pressure, optional, brief.

**03 Submit the referral**

Physician name, specialty, years in locums, and one pain point. That is all we need.

**04 Set expectations**

A specialist from Locum Independence will reach out within a few business days for an exploratory conversation. No commitment.

08 SECTION

## Language Rules

| USE | AVOID |
|---|---|
| **Resource**, not product or service | Tax or legal advice of any kind |
| **Support**, not management or oversight | Investment promises or income projections |
| **Coordination**, not control | Rate or earnings guarantees |
| **Education**, not advice | Urgency or pressure framing |
| **Optional benefit**, not requirement | Any comment about a competitor |
| **Business side of locums**, not finances | Anything that makes you sound like a financial salesperson |
| **Independent physician**, not contractor | Overselling outcomes |

When in doubt, default to optionality. **"You don't have to do anything with this"** is always a safe close.

THE BOTTOM LINE

### Introduce, don't sell.

Your role is to open the door.

### Build loyalty.

Physicians stay with agencies that invest in something beyond the next assignment.

### Win competitive conversations.

Differentiate with a value story no other agency in this market can tell.

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Most agencies stop at placement. Supporting the full physician experience is a difference physicians remember.