



## Employment Agreement Checklist

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| <ul style="list-style-type: none"><li><input type="checkbox"/> Define the parties<ul style="list-style-type: none"><li>○ Individual(s) or corporation(s)</li></ul></li><br/><li><input type="checkbox"/> Define the employment term<ul style="list-style-type: none"><li>○ Specific period</li><li>○ Auto renewal clause</li></ul></li><br/><li><input type="checkbox"/> Compensation<ul style="list-style-type: none"><li>○ Method</li><li>○ Frequency</li><li>○ Leadership stipends</li></ul></li><br/><li><input type="checkbox"/> Benefits<ul style="list-style-type: none"><li>○ Same as all employees, or specific to physician</li><li>○ Vacation</li><li>○ Sick time</li><li>○ CME – time &amp; expenses</li><li>○ Health, life, disability insurance, etc.</li></ul></li><br/><li><input type="checkbox"/> Performance<ul style="list-style-type: none"><li>○ Medical record completion</li><li>○ Work schedule</li><li>○ Call</li><li>○ Hospital, nursing home and/or home care duties</li><li>○ Advanced Practice Practitioner supervision</li></ul></li></ul> | <ul style="list-style-type: none"><li><input type="checkbox"/> Separation<ul style="list-style-type: none"><li>○ Terms<ul style="list-style-type: none"><li>▪ With notice</li><li>▪ For cause</li></ul></li><li>○ Non-compete<ul style="list-style-type: none"><li>▪ Time</li><li>▪ Distance</li></ul></li><li>○ Non-solicitation<ul style="list-style-type: none"><li>▪ Patients</li><li>▪ Employees</li></ul></li><li>○ Tail Coverage</li><li>○ Enforcement/penalties</li><li>○ Medical record ownership</li><li>○ Patient notification</li></ul></li><br/><li><input type="checkbox"/> Termination for cause<ul style="list-style-type: none"><li>○ Process</li><li>○ Corrective action</li></ul></li><br/><li><input type="checkbox"/> Partnership requirements<ul style="list-style-type: none"><li>○ Buy In Process</li><li>○ Process<ul style="list-style-type: none"><li>▪ Automatic, time triggered</li><li>▪ Vote of partners</li></ul></li><li>○ Determining value</li><li>○ Payment methodology</li></ul></li><br/><li><input type="checkbox"/> Retirement<ul style="list-style-type: none"><li>○ Buy Out Process</li><li>○ Mandatory age</li><li>○ Notice required</li><li>○ What is full time vs. part time</li><li>○ Process</li></ul></li></ul> |
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### Key Interview Questions:

1. Does the geography fit your lifestyle?
2. How enthusiastic is your family about relocating?
3. Do your perspectives/ethics align with the practice? What if ... happened? What would you do?
4. Do your patient care perspectives align with the practice?

\*Disclaimer: This is not an inclusive checklist and does not substitute for legal advice