HOW GM HIRES ITS CLINICIANS

Per-visit fees and multistate licenses carry 50-state virtual primary care

5

open clinical requisitions: four in Clinical, one recruiter in Ops

$50 / $35

per completed video visit, physician / nurse practitioner

10–15

hours a week on 1099 terms: 10–12 for physicians, 12–15 for NPs

≥30%

of the U.S. population each NP license must cover; physicians 20–30%

Key findings

01 Five handoffs carry a candidate from page view to first shift

02 Four clinical requisitions are open; the recruiter seat is in Ops

03 Video pays the physician $50 and the NP $35; chat pays $12 and $8

04 Licensure coverage, not headcount, sets which states GM can serve

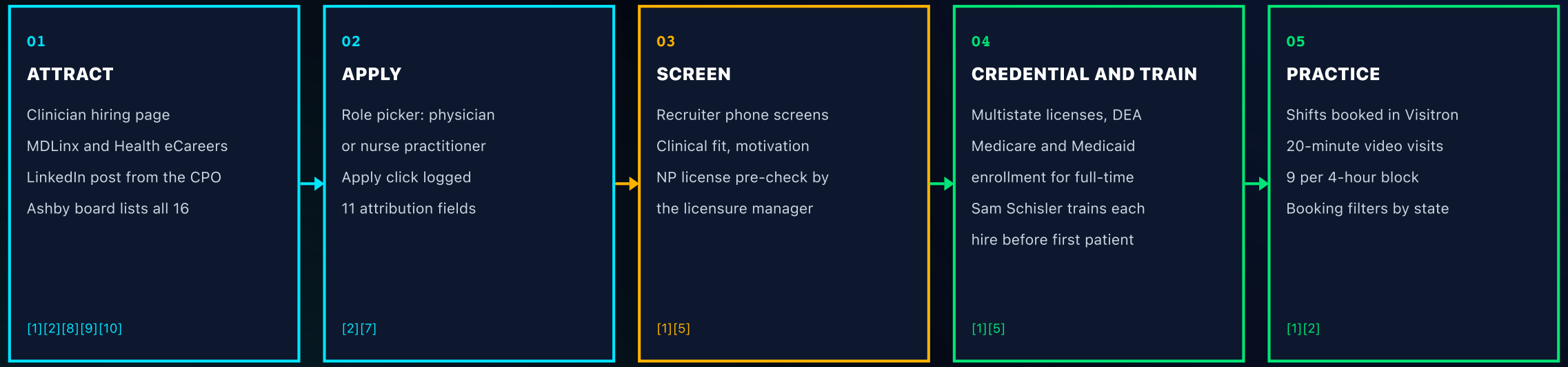
05 One sourcing-heavy recruiter and public job boards feed the pipeline

06 The hiring page and the postings disagree on hours, scope and pay

The constraint is licensed supply, and the fee schedule is the recruiting pitch

[1] Ashby job board · [2] GM clinician hiring page

Recruiting runs as a five-step funnel

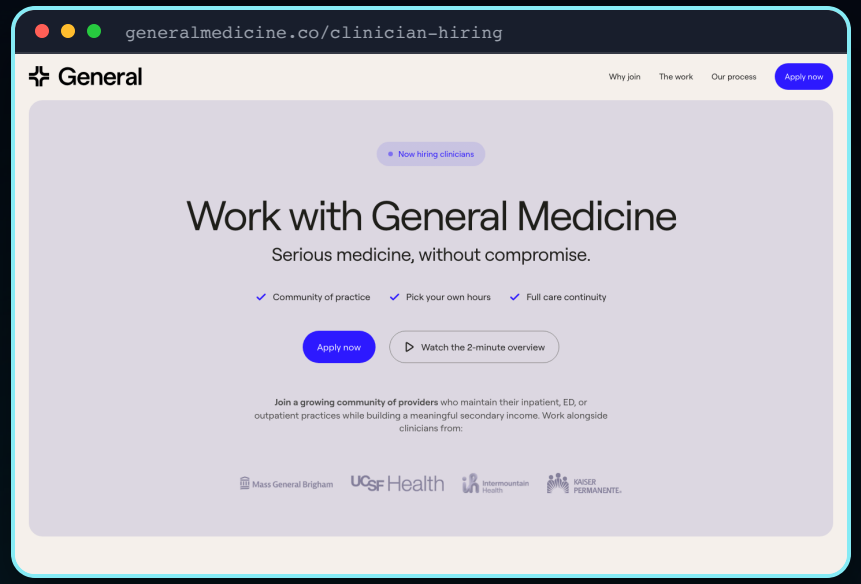


Each step hands the candidate to a different function: the page and boards at the top, the recruiter through offer, the licensure manager on NP licenses, credentialing and training before the first patient, and the booking service on the state gate.

The requisition ends at offer; the first visit waits on licensure and training

[1] Ashby job postings · [2] **Clinician hiring page** · [5] GM bios · [7] Apply modal and attribution · [8] MDLinx · [9] Health eCareers · [10] **LinkedIn post**

The pitch sells supported, specialist-backed medicine



Top of the page at a 1440×900 viewport. The four logo slots render Mass General Brigham, UCSF Health, Intermountain Health and Kaiser Permanente; the third slot carries the Stanford Medicine image label.[2]

FIVE MODALITIES

Video visits | Async chat | Labs and imaging | Specialist e-consults | In-person referrals

LOGOS ON THE PAGE

Mass General Brigham · UCSF Health · Intermountain Health · Kaiser Permanente. The image label still reads Stanford Medicine for the third slot.[2]

WHAT WE OFFER, WITH THE EARLIER COMPETITIVE PAY CARD NO LONGER DISPLAYED

1099 flexibility
Designed to fit alongside primary clinical roles

White-glove onboarding
Expedited, compensated process for referred clinicians

Interesting cases
Exposure to diverse and clinically complex patients

Clinician community
A growing group of like-minded physicians

Lauralee Yalden, MD, FAAFP
"The tools from General Medicine have been transformative to my medical practice."

Johnny Guzman, DO
"Unlike telemedicine platforms I have worked on, the General Medicine technology allows me to spend more time relating and connecting with my patients"

Karla Noel, MD, FAAFP
"I love working with General Medicine as a part of a collaborative and supportive team."

Daniel McConnell, MD
"The ability to reach patients wherever they are, using powerful physician-created clinical tools"

Sam Schisler, AGACNP, FNP
"Working as a nurse practitioner with General Medicine has reminded me why I went into healthcare in the first place."

The page sells a community and a care model, and states the fee per visit elsewhere

[2] **Clinician hiring page**, 2026-10-19 · [6] Clinician hiring content module (recovered): testimonials, logos, offer cards, process steps

Four clinical requisitions are open

Live Ashby board, 2026-10-19: 16 listed roles. The four Clinical-department requisitions are below; the Clinical Recruiter sits in Ops and appears on slide 9.

ROLE	TYPE	POSTED	HOURS/WK	PAY	LICENSURE BAR	REQUIREMENTS
Virtual Advanced Nurse Practitioners - 1099	Contract	2026-07-23	≈12–15	$35 video $8 chat	Active unrestricted NP license covering ≥30% of the U.S. population; CA, TX, FL, NY preferred	Family or internal medicine; 3+ years primary care; U.S. based; independent judgment
Full Time Physician - Primary Care	Full-time	2026-03-04	36 clinical	$180,000–$200,000 + equity	Active unrestricted U.S. license, multi-state required; credentialing support provided	MD or DO, board-certified IM or FM; 2+ years; DEA; Medicare and Medicaid enrollment
Virtual Physician (Part-Time - 1099)	Contract	2026-09-17	≈10–12	$50 video $12 chat	Active unrestricted license covering 20–30% of the U.S. population; CA, TX, FL, NY preferred	MD or DO, board-certified FM or IM; U.S. based; telehealth experience a plus
Manager, NP Licensure & Collaborative Practice	Full-time	2026-10-12	Not posted	Not posted	NP/APRN licensure, credentialing or collaborative practice experience; state board processes	CPA templates; collaborating-physician bench; primary-source verification; state filings; pharmacy escalations

Two requisitions buy licensed capacity; one buys the agreements that let NPs practice

[1] **Ashby job board**, 2026-10-19 · [3] **GM Careers** lists the same 16 roles

Pay is per completed visit, priced off the salaried model

VISIT TYPE	PATIENT PAYS	MD FEE	NP FEE	MD MARGIN	NP MARGIN
Video, cash	**$100**	**$50**	**$35**	50%	65%
Chat, cash	**$30**	**$12**	**$8**	60%	73%
Video, insured	$25 copay	$50	$35	**-$25**	**-$10**
Chat, insured	$25 copay	$12	$8	**+$13**	**+$17**

Margins are the fee subtracted from the patient price, before platform, lab, pharmacy and overhead costs. Insured figures exclude payer reimbursement.

DERIVED FROM POSTED TERMS

MD ceiling **$112.50/hr**

2.25 visits an hour × $50

NP ceiling **$78.75/hr**

2.25 visits an hour × $35

Salaried labor per visit **≈$46–$51**

$180,000–$200,000 ÷ 3,888 visits

A 1099 physician earns the same $50 on a $100 cash video visit that a salaried physician costs in labor, which is what pricing off the employed model looks like. The Health eCareers listing advertises "$100 - $190 Hourly" on a pay-per-visit model.[9]

A $25 copay does not cover a $50 physician fee until the claim pays

[1] Ashby postings: 1099 fees, $180,000–$200,000 salary, 36 clinical hours, 9 visits per 4-hour block · [9] Health eCareers listing · Derived from posted terms: 2.25 visits an hour; 36 hours × 48 weeks = 1,728 hours and 3,888 visits a year

Licensure coverage, not headcount, sets national reach

20–30%
of the U.S. population a 1099 physician's license must cover

≥30%
for each nurse practitioner; California, Texas, Florida and New York preferred

50 states + DC
the public claim, met by overlapping multi-state licenses rather than one clinician per state

THE LICENSURE MANAGER'S JOB

- Track capacity across a bench of collaborating physicians, match agreements to NPs, onboard new collaborators.
- Build state-specific and provider-specific collaborative practice agreement templates and their paperwork.
- Run primary-source verification and license viability review for new and existing NPs.
- File state paperwork, track licensure status, and drive licenses to viability.
- Resolve escalations, such as a pharmacy declining to fill an NP-written prescription in a state.
- Review NP candidates before hire and send feedback to recruiting through Ashby.

The booking flow collects the patient's state and filters the clinician pool on the server, so the browser never receives the licensed set. When no clinician is licensed in that state, the patient sees no availability rather than an unlicensed clinician.

A national network is a portfolio of state licenses, administered by one manager

[1] Ashby postings: coverage thresholds and licensure-manager duties · [4] GM FAQ: clinicians licensed in all 50 states, including DC

Academic logos describe the leaders, not the 1099 panel

DISPLAYED INSTITUTION	NAMED PERSON	ROLE AT GM	WHERE THE AFFILIATION APPEARS
UCSF Health	Dr. Pallabi Sanyal-Dey, MD	Medical Director	Associate clinical professor at Zuckerberg San Francisco General; directed clinical operations for the Division of Hospital Medicine
Mass General Brigham	Dr. Marjory Bravard, MD; Dr. Poushali Bhattacharjee, MD, MS, FACP	Director of Clinical Partnerships; leads clinical operations	Director of Operations and Director of Inpatient Medicine at Mass General; hospitalist and instructor in medicine at Mass General
Kaiser Permanente	Dr. Adam Carewe, MD	Physician, clinical informatics	13 years at Kaiser Permanente Colorado; rose from physician optimization lead to Chief Medical Informatics Officer
Stanford Medicine (label) Intermountain Health (image)	No named leader on the 20 bio pages	Specialist e-consult network, per the earlier briefing	The image served in that slot renders the Intermountain Health wordmark. Dr. Bravard lists Intermountain Healthcare among prior employers.

5
operating clinical leaders: Sanyal-Dey, Bravard, Bhattacharjee, Carewe, Schisler

3
founders and executives: Muralidharan, Cohen, Parker

12
content clinicians, physician assistants and health writers

Counts cover the 20 public bio pages. A logo is a pedigree claim about named leaders, and a bio page is not proof of employment, ownership or panel size.

The logos describe where the leaders trained, and one of them does not render as labeled

[2] **Clinician hiring page** (logo slots) · [5] GM bios for Sanyal-Dey, Bravard, Bhattacharjee, Carewe and Schisler · [6] Recovered page content: four logo imports, Stanford named third

One recruiter seat and job boards feed the pipeline

OPS DEPARTMENT · PUBLISHED 2026-09-22

Clinical Recruiter, Physicians

Full-cycle and sourcing-heavy: "building pipeline from scratch, not just managing what comes through the door." Multiple physician requisitions at once, high-volume phone screens, Ashby tracking, AI-enabled sourcing tools.

- 2–5 years full-cycle clinical recruiting; physician recruiting required
- Telehealth or virtual care recruiting strongly preferred
- Ashby experience a plus; comfort with high call volumes
- Listed in Ops, not Clinical

LISTINGS OFF THE ASHBY BOARD

- **MDLinx:** Virtual Physician (Part-Time, 1099), location Texas, contact allison@nile.health
- **Health eCareers:** same role, "$100 - $190 Hourly", "Pay per visit model", same contact
- **LinkedIn:** the CPO posts "General Medicine is hiring clinicians" with the practice-model copy

EVERY APPLY CARRIES ATTRIBUTION

The role picker offers Physician or Advanced Nurse Practitioner. Each apply click is logged with the role and the attribution cookies, then the same 11 fields are appended to the Ashby URL:

```
utm_source, utm_medium, utm_campaign, utm_content, gclid, gbraid, wbraid, fbclid, msclkid, kad_cid, oppref
```

One recruiter covers several physician requisitions, so the boards and referrals carry volume

[1] Ashby posting, Clinical Recruiter · [7] Apply modal and 11 attribution fields · [8] **MDLinx listing** · [9] **Health eCareers listing** · [10] LinkedIn post

Clinicians join a capped, shift-based production model

4–6
HOUR SHIFT BLOCKS
Monday to Friday, 7 a.m. to 7 p.m. MT; weekend and evening expansion underway

20
MINUTE VIDEO VISITS
Maximum **9** per 4-hour block, a **75%** slot ceiling

3
HOUR CHAT WINDOW
Asynchronous triage and follow-up in Zendesk, separate from the video schedule

36
CLINICAL HOURS A WEEK
Full-time physicians; non-clinical tasks handled by operations

5
PLATFORMS
Athena records, Zoom video, Zendesk chat, Slack, Nabla scribe

18+
ADULT ONLY
No pediatrics, advanced psychiatry or controlled substances

The cap leaves slack for charting and chat, and it caps clinician earnings too

[1] Full Time Physician – Primary Care posting: practice model, platforms and scope · 75% is 9 of the 12 possible 20-minute slots in a 4-hour block

Where the pitch and the postings diverge

CLAIM	POSTINGS AND OPERATING TERMS	IMPLICATION
"This is not telehealth as a side hustle."	1099 roles are 10–12 hours a week for physicians and 12–15 for NPs, built to fit alongside an existing practice.	The page sells depth of practice; the contract is part-time.
"Pick your own hours."	Shifts run in 4–6 hour blocks, Monday to Friday, 7 a.m. to 7 p.m. MT. Weekend and evening coverage is described as underway.	Scheduling is block-based inside one time zone.
No insurance paperwork (Executive Briefing slide 9).	Full-time physicians must be enrolled, or willing to enroll, as Medicare and Medicaid participating providers; GM accepts insurance including Medicare and Medicaid.	Operations absorbs scheduling and coordination, not payer enrollment.
"Selective by design: peer referrals prioritized, fit matters."	A sourcing-heavy recruiter, MDLinx and Health eCareers listings, and a posted "$100 - $190 Hourly" range.	Outbound and job-board channels run alongside referrals.
82% of U.S. counties (AlphaSense, not the hiring page).	Each physician license covers 20–30% of the population; each NP covers 30%. Booking filters by patient state.	County reach is a network claim, not a per-clinician one.
An earlier "Competitive pay" card is no longer displayed.	$50 and $35 per completed video visit; $12 and $8 per chat visit. No hourly rate appears on the hiring page.	A specific per-visit fee replaced an above-market claim.

Read the postings for the real employment terms, and the page for the positioning

[2] **Clinician hiring page** · [1] Ashby postings · [11] AlphaSense Company Primer, 2026-10-19 (82% of counties) · [6] Recovered page content (Competitive pay card commented out) · [12] Executive Briefing slide 9 (insurance paperwork claim)

Open questions

Panel size
How many 1099 physicians and NPs are active? No headcount is published, and the board shows requisitions, not filled seats.

Utilization
What share of the 9-visit block is filled? The cap is a ceiling, and the 75% slot math assumes full video density.

Credentialing vendor
Postings promise expedited credentialing and covered renewals, and name no vendor. Is the work in-house or outsourced?

Retention
What is 12-month retention for 1099 clinicians? Secondary-income roles compete with the primary practice that supplies them.

Training length
The page promises an extended, compensated trial period with visit shadowing. How long is it, and what does it pay?

Coverage hours
When do weekend and evening shifts open? The posting says expansion is underway, and the FAQ already promises some after-hours visits.

Six numbers would change the operating plan, and none of them are public

[1] Ashby postings, 2026-10-19 · [2] **Clinician hiring page** · [4] **GM FAQ**

Sources

#	SOURCE	DETAIL	RETRIEVED
[1]	Ashby job board API	16 listed roles with titles, departments, types, publish dates and full descriptions. `rea/osint/deep-dives/ashby_job_board_2026-10-19.json`	2026-10-19
[2]	GM clinician hiring page	Page text and HTML: hero, four logo slots, testimonials, modalities, offer cards, process. `rea/osint/deep-dives/gm_public_pages_2026-10-19.json` key `/clinician-hiring`	2026-10-19
[3]	GM careers page	Role list and locations. Same snapshot, key `/company/careers`	2026-10-19
[4]	GM FAQ	50 states plus DC; care for adults 18 and older; support hours. Same snapshot, key `/faq`	2026-10-19
[5]	GM clinician bios	Sanyal-Dey, Bravard, Bhattacharjee, Carewe, Schisler. Same snapshot, keys `/bio/*`	2026-10-19
[6]	Clinician hiring content module	Testimonial text, logo imports, offer cards with Competitive pay commented out, process steps. `lib/hardcoded-data/ClinicianHiring/clinician-hiring-content.tsx`	2026-10-19
[7]	Apply modal and attribution hook	Role picker URLs, apply-click logging, 11 attribution fields. `components/Refresh/Modals/JobModal/JobModalContent.tsx` ; `hooks/useAttributionTracking.tsx`	2026-10-19
[8]	MDLinx listing	Virtual Physician (Part-Time, 1099), Texas, contact allison@nile.health. career.mdlinx.com	2026-10-19
[9]	Health eCareers listing	Same role, "$100 - $190 Hourly", pay-per-visit model. healthecareers.com	2026-10-19
[10]	LinkedIn post	CPO hiring post carrying the practice-model copy. `raw/osint/linkedin_team_and_posts.json`	2026-10-19
[11]	AlphaSense Company Primer	82% of U.S. counties; dual pricing and per-visit billing quotes. `wiki/raw/alphasense/alphasense-company-primer-2026-10-19.md`	2026-10-19
[12]	Executive Briefing	Slide 9 (clinician recruiting) and Appendix C.09 (hiring subsystem index). `deck/index.html`	2026-10-19

Snapshot files sit under `rea/osint/deep-dives/` ; page captures and job descriptions were pulled on 2026-10-19.