GRASSROOTS SOURCING · 2026

Sourcing Clinicians for Your FQHC on a Zero-Dollar Budget

Three tactics that bypass expensive job boards by reaching candidates who have already self-selected into community health.

$5,475	30%+	55%	46%
Average cost-per-hire non-executive U.S. roles (SHRM 2025)	of all hires sourced via employee referrals (SHRM benchmarking)	faster hire time for referred candidates (Jobvite Index)	higher retention rate for referral hires (Jobvite Index)

Job board spend is the easiest line item to grow and the hardest to defend. SHRM's 2025 Benchmarking Report puts average cost-per-hire at $5,475 for non-executive roles and $35,879 for executive roles — and those figures are rising. The three tactics below cost effectively nothing but rebuild your candidate funnel from the ground up using sources your competitors aren't mining.

Tactic 1 — The Residency & Program Pipeline

Reach out directly to program coordinators of regional family medicine, internal medicine, pediatrics, OB/GYN, and psychiatry residency programs. Request a 10–15 minute slot to present to the graduating class on:

- The National Health Service Corps Loan Repayment Program ($75K tax-free over 2 years for primary care)
- State Loan Repayment Programs (up to $75K primary care / $50K dental & mental health)
- FTCA federal malpractice immunity and what it eliminates from their first contract
- HPSA scoring and what makes your site competitive

New grads carry an average of $200,000+ in student debt and have not yet been exposed to most loan-elimination mechanics. A 15-minute presentation, delivered once or twice a year, plants seeds that mature into 2-year contracts.

Tactic 2 — The Re-Engineered Referral Engine

> *"Companies hire referred candidates 55% faster than those sourced through career sites … employees hired through referrals have a 46% higher retention rate."*
>
> *Jobvite Index, industry-standard recruiting benchmark*

A $1,000 lump-sum referral bonus does not motivate clinicians. A structured $10,000 milestone bonus does. Pay it across the new hire's integration ramp so your cash exposure tracks billable revenue:

- **$2,500** at contract signing
- **$2,500** at the 90-day mark (post-credentialing, billing active)
- **$5,000** at the 1-year anniversary

THE SELF-FUNDING MATH

A primary care provider generates roughly $1.5–$2.4M in annual revenue at typical FQHC encounter volumes. The new hire's billable encounters generate the $10,000 referral bonus within their first 2–3 weeks of active practice. Your net cash exposure is structurally negative from week one.

Tactic 3 — State Loan Repayment Program Databases

Every state operates a State Loan Repayment Program. Many states publish public registries of past and present participants. Access these registries through your state's Primary Care Office (PCO) or the HRSA NHSC State LRP page. The clinicians on those lists have already demonstrated:

- Active interest in safety-net practice
- Willingness to commit to multi-year service obligations
- Familiarity with HPSA designation and underserved-area practice

An outreach list built from SLRP alumni converts at materially higher rates than cold-pulled LinkedIn searches because the candidates have self-selected into the community health framework.

Bonus — The NHSC Health Workforce Connector

If your site is NHSC-approved with a strong HPSA score, post your open positions on the Health Workforce Connector directly. It is the only national job board where every candidate has self-identified as wanting to serve at an NHSC-approved site. Postings are free and require only your existing NHSC site approval.

Ready to Solve Your Hiring Gap? Let's Talk.

Direct hire, contingency, retained — zero up-front risk. info@titanplacement.com · (941) 269-1000

SOURCES & FURTHER READING

Citations supporting this guide

Every statistic, regulation, and benchmark cited in this document is sourced from a primary authority — federal agencies (HRSA, NHSC, CMS), peer-reviewed journals, industry associations (AAFP, AMA, ADA, ADHA, APA, NACHC, MGMA, AAPPR), or named research reports. Links below allow you to verify any claim directly.

1. HR Dive — Cost-per-Hire and Cost-per-Application Rose Sharply in 2025 (Appcast 2026 Benchmarks)
https://www.hrdive.com/news/cost-per-hire-application-increase-2025-recruitment-appcast/812612/

2. Pin — Cost-Per-Hire: Complete Breakdown and Benchmarks 2026
https://www.pin.com/blog/cost-per-hire-benchmarks/

3. Indeed — How Paid Job Posts Work (pricing structure)
https://www.indeed.com/hire/resources/howtohub/how-pricing-works-on-indeed

4. LLCBuddy — Employee Referral Statistics 2025 (30%+ of all hires from referrals)
https://llcbuddy.com/data/employee-referral-statistics/

5. Hire Priority — Jobvite Index referenced: 55% faster, 46% retention
https://hirepriority.com/hiring-efficiency-candidate-referral/

6. Pin — Employee Referral Programs: How to Build One That Works
https://www.pin.com/blog/employee-referral-program-guide/

7. NHSC — Determine State Loan Repayment Program Eligibility & Requirements
https://nhsc.hrsa.gov/loan-repayment/state-loan-repayment-program/application-requirements

8. NHSC — Loan Repayment Program (NHSC Health Workforce Connector posting)
https://nhsc.hrsa.gov/loan-repayment/nhsc-loan-repayment-program

9. NHSC — HPSA Score Class Year 2026
https://nhsc.hrsa.gov/scholarships/requirements-compliance/jobs-and-site-search/hpsa-score-class-year