

Appendix A

Survey Instruments

AMA Physician Practice Information (PPI) Survey

Web Preview

July 2023

The following document is a preview of the web survey. The survey should be completed online.

Please note that when you are completing the survey online, you may not see all the questions from this preview version because you may skip over some questions that are not relevant based on your prior responses. In addition, the web survey will display information like the name of your practice. This web preview will display a generic fill for this information.

AMA Physician Practice Information (PPI) Survey

Mathematica is conducting a survey of physician practices for the American Medical Association (AMA). Your participation is voluntary but critical to our effort to **support accurate physician payment**. The data you and other practices provide will be used to develop national estimates of practice expense per hour of patient care provided. Those estimates are an important part of developing fair and accurate physician payment and will be shared with the Centers for Medicare & Medicaid Services (CMS).

This survey will collect three broad categories of information:

- GENERAL INFORMATION about your practice (for example, practice location, specialties at this practice, and practice ownership),
- THE NUMBER of physicians, qualified health care professionals, and other staff in your practice, and
- THE ANNUAL PRACTICE EXPENSES and REVENUE that the practice incurred related to patient care services paid for via PHYSICIAN PAYMENT systems.

If your physician practice includes more than one specialty, this survey will ask you to ALLOCATE the above information to the specialty level.

Your practice will need to access a variety of data to complete this survey, such as:

- Your 2022 federal tax forms
- 2022 payroll information including salary and benefits
- Your accounting/financial reporting software

This survey should be completed by the person who is best able to answer questions about 2022 finances and expenses for the physician practice. This will likely be the Chief Financial Officer (CFO) or VP of Finance for the practice (*at larger practices*)/practice manager or owner (*at smaller practices*).

In addition to the information collected in this survey, we will also ask for the average number of direct patient care hours per week provided by physicians in your practice. To collect this information, we hope to ask for input directly from the physicians in your practice with a separate survey that will take less than five minutes.

The information you provide will be kept private. It will be used and reported to CMS only in the aggregate and not on an individual practice or physician level.

After this data collection effort is complete, participating practices will receive a report that compares their own data with national averages. In addition, the specialty societies that have endorsed this effort will receive a report with the national averages for their specialty.

If you are not able to answer questions about finances and expenses for this physician practice, please continue and you will be able to share the contact information for a more appropriate practice contact. If you have any questions about this survey, please contact Mathematica by email at PPISurvey@mathematica-mpr.com or by telephone at 1-833-770-1032.

Important

- If you are not able to answer questions about finances and expenses for this physician practice, please continue to the next screen and enter the name and contact information for a more appropriate practice contact. If you have any questions about this survey, please contact Mathematica by email at PPISurvey@mathematica-mpr.com or by telephone at 1-833-770-1032.
- If your physician practice has multiple locations/practice sites please respond about the practice as a whole (including all locations/practice sites).
- The survey has been optimized to run on a desktop or laptop computer, and is best viewed in the latest versions of Chrome, Safari, Firefox, or Microsoft Edge.
- You may find it helpful to adjust the size of the text on your screen (by zooming in or out in your browser window) to better view the tables in this survey. The option to do this is available in the upper right corner of your browser window (it is called "Zoom").

Instructions

- To preview the survey: [Click Here](#).
- Please answer all questions to the best of your ability.
- Click on the "Back" button at the bottom of the screen to go back to a previous question.
- Use the "Save and Next" button to proceed to the next question. Your answers are saved each time you click the "Save and Next" or "Back" button.
- You do not have to complete the survey all at once. Be sure to click the "Save and Next" button to save your answers before exiting the survey. You will resume at the next unanswered question when you return to the survey.
- After about two hours of idle time, the survey may time out, but your answers will be saved. If that happens, you will be redirected to the login page prior to resuming the survey where you left off.
- If you have questions please email the Help Desk by clicking on "Contact Us" at the bottom of the screen.

S. SCREENER

Before you start the survey, we would like to confirm that we have reached the correct person at the practice, and that our contact information for this practice is up to date.

S1. Are you best able to answer questions about the finances and expenses for [PRACTICE] in 2022?

This survey should be completed by the person at this practice who is best able to answer questions about finances and expenses for the practice in 2022 at the specialty level. This person should have access to the practice's 2022 federal tax forms, 2022 payroll information, and the practice's accounting/financial reporting software.

Yes → GO TO S4 ON NEXT PAGE

No

S2. Please provide the name, job title, and email address of the person at the practice who is best able to answer questions about finances and expenses for the practice in 2022.

Name: _____

Job Title: _____

Email Address: _____

Thank you. We will reach out to this person about the survey.

If you would like to forward the information you received about the survey to the correct person at your practice, that would be appreciated.

If you have questions, please email PPISurvey@mathematica-mpr.com or call 1-833-770-1032.

To exit the survey, simply close the browser tab/window. Thank you again for your time.

If you are unable to provide the name, job title, and email address of the person at the practice who is best able to answer questions about finances and expenses for the practice in 2022, please answer Question S3 below.

S3. Please tell us why you are unable to provide this information.

MARK ONE ONLY

I am not affiliated with this practice

This practice was not seeing patients or closed in 2022

I am currently affiliated with this practice, but do not know the right person at this practice to contact regarding these data from 2022

I am affiliated with this practice, but am not comfortable sharing this information

Other (specify) _____

Thank you for letting us know, we will update our information accordingly.

If you have questions, please email PPISurvey@mathematica-mpr.com or call 1-833-770-1032.

To exit the survey, simply close the browser tab/window. Thank you again for your time.

S4. Please provide your name, job title, and email address so we may contact you if we have any questions.

Name: _____

Job Title: _____

Email Address: _____

Phone Number: |_|_|_|_| - |_|_|_|_| - |_|_|_|_|_|
Area Code Number

S5. Please review and update the contact information below for this physician practice.

We understand your physician practice may have multiple locations/practice sites, and these may each have a slightly different name. The name below should be the name of your physician practice. The address can be any address where mail for the physician practice is delivered and will reach the Chief Financial Officer (CFO) or VP of Finance (*at larger practices*)/practice manager or owner (*at smaller practices*).

Practice Name: _____

Street Address 1: _____

Street Address 2: _____

City, State, Zip Code: _____

Practice Phone Number: |_|_|_|_| - |_|_|_|_| - |_|_|_|_|_|
Area Code Number

- S6. The questions in this survey ask about practice expenses and revenues. We understand that a practice's fiscal year for reporting expenses and revenues may vary (i.e., fiscal year may be the same as the calendar year and end December 31, or fiscal year may end on another date during the year). Please enter the practice's fiscal year end date for the most recent year for which you have completed financial data (i.e., tax returns).**

____/____/____
Month Day Year

If the end date for your most recent fiscal year is before 6/30/2022: To ensure we are capturing comparable information across practices, we ask that expense and staffing information be reported for a fiscal year ending on or after 6/30/2022.

This survey will be open through April 2024. Please return and complete this survey at a later date when your practice has more recent completed financial information (i.e., tax returns), but prior to April 30, 2024. If you will not be able to report your practice's financial information within this timeframe, please let us know by emailing us at PPISurvey@mathematica-mpr.com or calling 1-833-770-1032.

If the end date for your most recent fiscal year is on or after 6/30/2022: Thank you. The questions in this survey ask about expenses and staffing in 2022 or 2023, depending on the year that you entered at S6. The web survey is programmed to display the correct year (2022 or 2023) throughout the rest of the survey depending on your response. However, in the web preview this will look like "[2022/2023]". By "[2022/2023]", we mean your practice's fiscal year ending on the date that you entered at S6.

- S7. The questions in this survey ask about finances and expenses for the physician practice in [2022/2023] at the specialty level for 65 Medicare defined specialties. Please see the linked mapping document (*included here at the end of this PDF*) to view how the over 250 physician specialties/subspecialties were grouped into the 65 Medicare defined specialties.**

The number next to each specialty is the corresponding Medicare specialty code.

In [2022/2023], did [PRACTICE] have physicians from more than one of these 65 Medicare defined specialties?

Addiction Medicine - 79
Adult Congenital Heart Disease - D8
Advanced Heart Failure and Transplant Cardiology - C7
Allergy/Immunology - 03
Anesthesiology - 05
Cardiac Electrophysiology - 21
Cardiac Surgery - 78
Cardiology - 06
Colorectal Surgery - 28
Critical Care (Intensivist) - 81
Dermatology - 07
Diagnostic Radiology - 30
Emergency Medicine - 93
Endocrinology - 46
Family Medicine - 08
Gastroenterology - 10
General Practice - 01
General Surgery - 02
Geriatric Medicine - 38
Geriatric Psychiatry - 27

Gynecological/Oncology - 98
Hand Surgery - 40
Hematology - 82
Hematology/Oncology - 83
Hematopoietic Cell Transplantation and Cellular Therapy - C9
Hospice and Palliative Care - 17
Hospitalist - C6
Infectious Disease - 44
Internal Medicine - 11
Interventional Cardiology - C3
Interventional Pain Management - 09
Interventional Radiology - 94
Maxillofacial Surgery - 85
Medical Genetics and Genomics - D3
Medical Oncology - 90
Medical Toxicology - C8
Micrographic Dermatologic Surgery - D7
Nephrology - 39
Neurology - 13
Neuropsychiatry - 86
Neurosurgery - 14
Nuclear Medicine - 36
Obstetrics/Gynecology - 16
Ophthalmology - 18
Orthopedic Surgery - 20
Osteopathic Manipulative Medicine - 12
Otolaryngology - 04
Pain Management - 72
Pathology - 22
Pediatric Medicine - 37
Peripheral Vascular Disease - 76
Physical Medicine and Rehabilitation - 25
Plastic and Reconstructive Surgery - 24
Preventive Medicine - 84
Psychiatry - 26
Pulmonary Disease - 29
Radiation Oncology - 92
Rheumatology - 66
Sleep Medicine - C0
Sports Medicine - 23
Surgical Oncology - 91
Thoracic Surgery - 33
Undersea and Hyperbaric Medicine - D4
Urology - 34
Vascular Surgery – 77

1 Yes

0 No

S8. Is your physician practice able to allocate [2022/2023] practice expenses and staffing to the Medicare defined specialties in your physician practice?

MARK ONE ONLY

- 1 Yes, we can allocate this information by specialty to all of the specialties in this practice
- 2 Yes, we can allocate this information by specialty to some of the specialties in this practice
- 3 No, we cannot allocate this information by specialty to any of the specialties in this practice

→ *Thank you for this information. We are only collecting data from physician practices that are able to allocate [2022/2023] revenue, expenses, and staffing at the specialty level. This is to ensure we have the data we need to be able to calculate accurate practice expense per hour of patient care data for each specialty.*

If you have questions, please email PPISurvey@mathematica-mpr.com or call 1-833-770-1032.

Thank you for confirming this information. **Prior to beginning the survey online, we encourage you to print a preview of the survey questions to determine what information you will need to collect from expense report systems and tax forms.**

You do not have to complete the survey all at once. Be sure to click the “Save and Next” button to save your answers before exiting the survey. You will resume at the next unanswered question when you return to the survey.

If you have any questions while taking the survey, please contact us at PPISurvey@mathematica-mpr.com or 1-833-770-1032 for assistance. You can access our contact information any time by clicking on “Contact Us” at the bottom of the screen.

Once you have completed the survey, you will have the opportunity to review and/or print your answers before submitting the survey.

When you are ready to begin the survey, please click the “Save and Next” button at the bottom of the screen.

1. GENERAL PRACTICE INFORMATION

We understand your physician practice may have multiple locations/practice sites. Please respond about the physician practice as a whole (including all locations/practice sites).

P1. Which of these best describes the ownership structure of this physician practice at the end of [2022/2023]?

As a reminder, by [2022/2023] we mean your practice's fiscal year ending on [DATE ENTERED AT S6].

This practice was...

MARK ONE ONLY

- 1 Wholly owned by one or more physicians in the practice
- 2 Wholly owned by a hospital/hospital system
- 3 Jointly owned between physicians and a hospital/hospital system
- 4 Wholly owned by a Health Maintenance Organization (HMO), Managed Care Organization, or insurer
- 5 Wholly owned by a not-for-profit foundation
- 6 Wholly owned by a private equity firm or other similar type of organization
- 7 Jointly owned between physicians and a health plan, private equity firm, or other similar type of organization
- 8 Other (specify) _____

P2. Is this physician practice part of a vertically integrated health system?

A vertically integrated health system is an organization that includes at least one hospital and at least one group of physicians providing comprehensive care, and who are connected with each other and with the hospital through common ownership or joint management.

- 1 Yes
- 0 No

P8. How many physicians (MDs and DOs) worked at this physician practice at the end of [2022/2023]?

MARK ONE ONLY

- 1 1-10
- 2 11-49
- 3 50 or more

P3. Which of the following 65 physician (MD/DO) specialties were part of [PRACTICE] in [2022/2023]? These 65 physician (MD/DO) specialties are considered Medicare defined specialties. Please see the linked mapping (included here at the end of this PDF) to understand how the over 250 physician specialties/subspecialties were grouped into the 65 categories.

The number next to each specialty is the corresponding Medicare specialty code.

SELECT ALL THAT APPLY

- 1 Addiction Medicine - 79
- 2 Adult Congenital Heart Disease - D8
- 3 Advanced Heart Failure and Transplant Cardiology - C7
- 4 Allergy/Immunology - 03
- 5 Anesthesiology - 05
- 6 Cardiac Electrophysiology - 21
- 7 Cardiac Surgery - 78
- 8 Cardiology - 06
- 9 Colorectal Surgery - 28
- 10 Critical Care (Intensivist) - 81
- 11 Dermatology - 07
- 12 Diagnostic Radiology - 30
- 13 Emergency Medicine - 93
- 14 Endocrinology - 46
- 15 Family Medicine - 08
- 16 Gastroenterology - 10
- 17 General Practice - 01
- 18 General Surgery - 02
- 19 Geriatric Medicine - 38
- 20 Geriatric Psychiatry - 27
- 21 Gynecological/Oncology - 98
- 22 Hand Surgery - 40
- 23 Hematology - 82
- 24 Hematology/Oncology - 83
- 25 Hematopoietic Cell Transplantation and Cellular Therapy - C9
- 26 Hospice and Palliative Care - 17
- 27 Hospitalist - C6
- 28 Infectious Disease - 44
- 29 Internal Medicine - 11
- 30 Interventional Cardiology - C3
- 31 Interventional Pain Management - 09
- 32 Interventional Radiology - 94
- 33 Maxillofacial Surgery - 85
- 34 Medical Genetics and Genomics - D3
- 35 Medical Oncology - 90
- 36 Medical Toxicology - C8
- 37 Micrographic Dermatologic Surgery - D7
- 38 Nephrology - 39
- 39 Neurology - 13

- 40 Neuropsychiatry - 86
- 41 Neurosurgery - 14
- 42 Nuclear Medicine - 36
- 43 Obstetrics/Gynecology - 16
- 44 Ophthalmology - 18
- 45 Orthopedic Surgery - 20
- 46 Osteopathic Manipulative Medicine - 12
- 47 Otolaryngology - 04
- 48 Pain Management - 72
- 49 Pathology - 22
- 50 Pediatric Medicine - 37
- 51 Peripheral Vascular Disease - 76
- 52 Physical Medicine and Rehabilitation - 25
- 53 Plastic and Reconstructive Surgery - 24
- 54 Preventive Medicine - 84
- 55 Psychiatry - 26
- 56 Pulmonary Disease - 29
- 57 Radiation Oncology - 92
- 58 Rheumatology - 66
- 59 Sleep Medicine - C0
- 60 Sports Medicine - 23
- 61 Surgical Oncology - 91
- 62 Thoracic Surgery - 33
- 63 Undersea and Hyperbaric Medicine - D4
- 64 Urology - 34
- 65 Vascular Surgery - 77

P4. So that we can develop estimates of practice expense per hour of patient care provided at the specialty level, we aim to collect separate data for each of the [NUMBER] physician (MD/DO) specialties you checked in the previous question. While we prefer to have data reported at the specialty level, we understand that some practices combine certain specialties when tracking practice expenses and staffing information. So that we can make answering this survey easiest for you, please indicate below whether you are able to provide expense and staffing information for each individual specialty or whether you combine expense and staffing information for certain specialties. .

Practice expenses may include general overhead, medical supplies, drugs, medical equipment, professional liability insurance, information technology, and other expenses.

	Staffing and expense data can be reported for this specialty <u>alone</u>	Staffing and/or expense data can only be reported <u>in combination with another specialty</u>
a. [SPECIALTY A]	1 <input type="radio"/>	2 <input type="radio"/>
b. [SPECIALTY B]	1 <input type="radio"/>	2 <input type="radio"/>
c. [SPECIALTY C]	1 <input type="radio"/>	2 <input type="radio"/>

P5. Please indicate which of the other physician (MD/DO) specialties this specialty is combined with when tracking staffing and expense information.

[SPECIALTY A]

SELECT ALL THAT APPLY

- 1 [SPECIALTY]
- 2 [SPECIALTY]
- 3 [SPECIALTY]
- 0 We do not actually combine this specialty with others.

P6. Please note that in place of this question, question P5 will repeat in the web survey until all specialties have been combined as needed.

P7. Here are the physician (MD/DO) specialties you indicated are combined when tracking practice expenses and staffing information. Please confirm this is correct before proceeding. If this is not correct, please click on the “Back” button to change your response to a prior question.

Please note that the combinations you have created here will display in the tables later in the survey. If any of these are incorrect, please go back to change your responses before proceeding.

[SPECIALTY COMBINATIONS LISTED HERE]

- 1 Yes, this is correct

P9. Where possible, this survey will also collect information on qualified health care professionals (QHPs) who can also independently bill for services using their National Provider Identifier (NPI) number. Please indicate below which types of QHPs were part of your physician practice in [2022/2023]?

The number next to each type of QHP is the corresponding Medicare code.

SELECT ALL THAT APPLY

- 1 Nurse Practitioner - 50
- 2 Physician Assistant - 97
- 3 Anesthesiologist assistant - 3
- 4 Audiologist - 64
- 5 Certified clinical nurse specialist - 89
- 6 Certified nurse midwife - 42
- 7 Certified registered nurse anesthetist - 43
- 8 Chiropractor - 35
- 9 Clinical psychologist/Psychologist - 68/62
- 10 Dentist - C5
- 11 Oral Surgeon - 19
- 12 Licensed clinical social worker - 80
- 13 Occupational therapist – 67
- 14 Optometrist – 41
- 15 Physical therapist - 65
- 16 Podiatrist - 48
- 17 Registered dietitian/Nutrition professional - 71
- 18 Speech language pathologist - 15
- 0 This practice did not have any QHPs in [2022/2023]

P10. Please indicate whether your physician practice can allocate practice expenses and staffing information to each type of QHP that was part of the practice in [2022/2023].

Practice expenses may include general overhead, medical supplies, drugs, medical equipment, professional liability insurance, information technology, and other expenses.

We understand practices may not be able to allocate expenses to QHPs. This is okay, and if this is the case, please select the second response option in the table below (“Practice expenses cannot be allocated to this QHP”). Later in the survey you will be asked to allocate QHPs’ hours of patient care to the physician specialties with which they work (rather than being asked to allocate expenses to your QHPs).

	Practice expenses and staffing can be allocated to this QHP	Practice expenses and staffing cannot be allocated to this QHP
a. [QHP 1]	1 <input type="radio"/>	0 <input type="radio"/>
b. [QHP 2]	1 <input type="radio"/>	0 <input type="radio"/>
c. [QHP 3]	1 <input type="radio"/>	0 <input type="radio"/>

2. STAFFING, HOURS/WORK RVUs, AND COMPENSATION

This section of the survey gathers information on the number of physicians and other staff who work in your physician practice, the annual physician and other qualified healthcare professional (QHP) work relative value units (RVUs) (if you track them), and annual compensation.

Please review the definitions for each of these variables below.

Definitions of the individuals who work in a practice

Physicians: MDs and DOs

Qualified health care professionals (QHP):

QHPs may independently report services using their National Provider Identifier (NPI). Per Medicare payment rules, QHPs include the following professions:

Anesthesiologist assistant - 32	Nurse practitioner - 50
Audiologist - 64	Occupational therapist - 67
Certified clinical nurse specialist - 89	Optometrist - 41
Certified nurse midwife - 42	Oral surgeon – 19
Certified registered nurse anesthetist - 43	Physical therapist - 65
Chiropractor - 35	Physician assistant - 97
Clinical psychologist/Psychologist – 68/62	Podiatrist - 48
Dentist – C5	Registered dietitian - 71
Licensed clinical social worker - 80	Speech language pathologist - 15

Clinical staff:

- Includes registered nurses (RNs), licensed practical nurses (LPNs), medical assistants, medical physicists, laboratory technologists, imaging technologists, and other clinical personnel not allowed to have an NPI number, nor report services under Medicare regulation.
- Work under the supervision of a physician or other qualified healthcare professional (QHP).
- DO NOT INCLUDE: clinical staff time and salary supported through other payment systems (e.g. hospital inpatient, hospital outpatient, ambulatory surgical centers, and clinical lab fee schedules).
- [CMS list of clinical staff](#)

Administrative/clerical staff:

- Are primarily involved in non-clinical administrative, managerial, secretarial, legal, information technology, or clerical activities.
- Include financial and other leadership staff, office managers, practice managers, transcriptionists, medical records personnel, receptionists, schedulers and billing staff, coding staff, information technology staff, scribes, and custodial personnel.
- DO NOT INCLUDE: administrative staff time and salary supported through other payment systems (e.g. hospital inpatient, hospital outpatient, ambulatory surgical centers, and clinical lab fee schedules).

Note: If clinical staff also conduct administrative work, please categorize them as clinical staff unless their administrative work accounts for more than half of their hours.

Note: Please include owner/partner physicians as well as those who are employed in the practice.

Note: If your physicians, QHPs, and other staff include contract workers/locum tenens (different than employees) please

include them, along with their work RVUs, and compensation, in the following tables.

Definitions of patient care hours for QHPs:

Certified registered nurse anesthetists and anesthesiologist assistants: Direct patient care includes:

- Personally anesthetizing patients (including pre-anesthesia evaluation and patient preparation, drug and equipment preparation, and monitoring patients post-surgery)
- Managing patients in ICUs and performing hospital visits
- Performing pain management services (acute, chronic, and post-operative)
- Communicating with the patient, family members, payers, and other professionals through written, electronic, or verbal methods
- Documenting in the medical record
- DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, or travel time

All other QHPs: Direct patient care includes:

- Seeing patients (either in-person or via telehealth)
- Reviewing and interpreting imaging and/or tests
- Preparing for and performing surgery/procedures
- Communicating with the patient, family members, payers, and other professionals through written, electronic, or verbal methods
- Documenting in the medical record
- DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, or travel time

Definitions of Compensation

Monetary compensation:

- Please include all compensation from medical practice paid through salaries, retainers, bonuses, deferred compensation, and other forms of monetary compensation related to the **provision of patient care**.
- DO NOT INCLUDE: compensation for research, administrative or teaching activities; investment income from medical-related enterprises independent from your medical practice; the value of benefits (e.g., health insurance)

Benefits:

- Include: the dollar value of benefits (e.g., health insurance, dental insurance, life insurance, employer contributions to retirement plans, employer's share of FICA, payroll, and unemployment insurance taxes etc.) related to the **provision of patient care**.

Table A. Physicians and QHPs

A1. How many hours per week was your physician practice open to provide patient care in [2022/2023]? If your practice has sites that have different hours, then please provide the average hours per week across all sites.

As a reminder, by [2022/2023] we mean your practice's fiscal year ending on [DATE ENTERED AT S6].

____ NUMBER

A2. In [2022/2023], what was the minimum number of hours per week a physician had to work to be considered "full time" in your physician practice?

____ NUMBER

A3. In [2022/2023], what was the minimum number of hours per week a QHP had to work to be considered "full time" in your physician practice?

____ NUMBER

A4. Did your physician practice track total annual work relative value units (RVUs) by specialty during [2022/2023]?

1 Yes

0 No

A5. *Question A5 has been omitted from this web preview because it only applies to a specific subgroup of practices. This question will not be displayed in your web survey.*

A6. In Part 1 of the table below, please enter the following for each of the specialties (or combinations of specialties) to which you can allocate expenses:

1. The average number of part-time and full-time physicians (columns 1a and 1b) at the physician practice during [2022/2023]

2. The percent of time that physicians at the practice billed in non-facility settings in [2022/2023]

For example, include non-facility place of service code 11 – Office, but do not include facility place of service codes such as 21 - Inpatient Hospital, 22 - Outpatient Hospital, 23 - Emergency Room-Hospital, or 24 - Ambulatory Surgical Center.

3. Column 3 has been omitted from this web preview because it only applies to a specific subgroup of practices. This question will not be displayed in your web survey.

4. Column 4 has been omitted from this web preview because it only applies to a specific subgroup of practices. This question will not be displayed in your web survey.

5. The total annual work RVUs provided by all physicians in aggregate in [2022/2023] (Please note this column will only display if you indicated at A4 that your practice tracks this information)

6. The total annual compensation for all physicians in aggregate (broken out by monetary compensation and benefits – columns 6a and 6b) in [2022/2023]

Please round all dollar amounts to the nearest dollar. Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter “0” (for “zero”) in that cell. If any of this is information that you prefer not to or are unable to report, please enter “R” (for “not reported”) in that cell.

Reminder: If you have questions on how to enter information in this table, please click “Contact us” at the bottom left of the screen to reach us by email or by phone.

TABLE A. Physicians: ANNUAL Work RVUs, and ANNUAL Compensation, by specialty in [2022/2023]

Part 1	Average # of physicians at the practice during [2022/2023]		2. Percent of time physicians billed in non-facility settings	5. Total ANNUAL work RVUs provided by ALL physicians	Total ANNUAL COMPENSATION for ALL physicians	
	1a. part-time (less than [Y] hours per week)	1b. full-time (at least [Y] hours per week)			6a. Monetary compensation	6b. Benefits
[SPECIALTY]						
[SPECIALTY]						
TOTAL	<i>Total</i>	<i>Total</i>		<i>Total</i>	<i>Total</i>	<i>Total</i>

A7. In Part 2 of the table below, please enter the following for each of the QHPs:

1. The average number of part-time and full-time QHPs (columns 1a and 1b) at the physician practice during [2022/2023]

2. The percent of time that QHPs billed in non-facility settings in [2022/2023]

For example, include non-facility place of service code 11 – Office, but do not include facility place of service codes such as 21 Inpatient Hospital, 22 - Outpatient Hospital, 23 - Emergency Room-Hospital, or 24 - Ambulatory Surgical Center.

3. The percent of time that QHPs billed independently (under their own NPI)

4. The number of weeks worked by the average QHP in [2022/2023].

Please do not include days or weeks spent on vacation, at a conference, out due to illness, or when your practice was closed. Please do not include days or weeks when QHPs provided care at other sites or facilities not affiliated with this practice.

5. The total aggregate sum of weekly hours of direct patient care provided by all QHPs at this practice in an average week during [2022/2023]

[6. The total annual work RVUs provided by all QHPs in aggregate in [2022/2023]] *(Please note this column will only display if you indicated at A4 that your practice tracks this information)*

7. The total annual compensation for all QHPs in aggregate (broken out by monetary compensation and benefits – columns 7a and 7b) in [2022/2023]

Please round all dollar amounts to the nearest dollar. Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter “0” (for “zero”) in that cell. If any of this is information that you prefer not to or are unable to report, please enter “R” (for “not reported”) in that cell.

Reminder: If you have questions on how to enter information in this table, please click “Contact us” at the bottom left of the screen to reach us by email or by phone.

TABLE A. QHPs: WEEKLY hours, ANNUAL Work RVUs, and ANNUAL Compensation, by specialty in 2022

Part 2	Average # of QHPs at the practice during 2022		2. Percent of time QHPs billed in non-facility settings	3. Percent of time QHPs billed independently (under their own NPI)	4. Number of weeks worked in 2022 by the AVERAGE QHP at the practice	5. Total aggregate sum of WEEKLY HOURS of direct patient care provided by ALL QHPs	6. Total ANNUAL work RVUs provided by ALL QHPs	Total ANNUAL COMPENSATION for ALL QHPs	
	1a. part-time (less than [#] hours per week)	1b. full-time (at least [#] hours per week)						7a. Monetary compensation	7b. Benefits
[QHP]									
[QHP]									
TOTAL	<i>Total</i>	<i>Total</i>				<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>

A8. You indicated earlier that your physician practice cannot allocate expenses to certain QHPs. So that we can better understand where their expenses are captured, please distribute their hours of patient care to the specialties in the practice with which they work. The first row of the table below displays the total weekly hours of direct patient care provided by the QHPs in an average week in [2022/2023] that you reported in column 5 in the prior table. The bottom row of the table below will auto sum the hours as you enter them, and should match the total displayed in the top row when you have finished.

Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter “0” (for “zero”) in that cell. If any of this is information that you prefer not to or are unable to report, please enter “R” (for “not reported”) in that cell.

	[QHP A]	[QHP B]	[QHP C]
[Total weekly hours of patient care]	[QHP HOURS OF DIRECT PATIENT CARE FROM TABLE A]	[QHP HOURS OF DIRECT PATIENT CARE FROM TABLE A]	[QHP D HOURS OF DIRECT PATIENT CARE FROM TABLE A]
a. [SPECIALTY A]	_____	_____	_____
b. [SPECIALTY B]	_____	_____	_____
c. [SPECIALTY C]	_____	_____	_____
TOTAL	<i>Total</i>	<i>Total</i>	<i>Total</i>

Table B. Clinical and administrative/clerical staff in your practice.

The next set of questions is about the clinical and administrative/clerical staff in your physician practice.

Clinical staff:

- Includes registered nurses (RNs), licensed practical nurses (LPNs), medical assistants, medical physicists, laboratory technologists, imaging technologists, and other clinical personnel not allowed to have an NPI number, nor report services under Medicare regulation.
- Work under the supervision of a physician or other qualified healthcare professional (QHP).
- DO NOT INCLUDE: clinical staff time and salary supported through other payment systems (e.g. hospital inpatient, hospital outpatient, ambulatory surgical centers, and clinical lab fee schedules).
- [CMS list of clinical staff](#)

Administrative/clerical staff:

- Are primarily involved in non-clinical administrative, managerial, secretarial, legal, information technology, or clerical activities.
- Include financial and other leadership staff, office managers, practice managers, transcriptionists, medical records personnel, receptionists, schedulers and billing staff, coding staff, information technology staff, scribes, and custodial personnel.
- DO NOT INCLUDE: administrative staff time and salary supported through other payment systems (e.g. hospital inpatient, hospital outpatient, ambulatory surgical centers, and clinical lab fee schedules).

Note: If clinical staff also conduct administrative work, please categorize them as clinical staff unless their administrative work accounts for more than half of their hours.

Note: If your staff include contract workers please include them.

B1. Please allocate the clinical and administrative/clerical staff full-time equivalents (FTEs), as well as their aggregate compensation, to each of the physician specialties [and to the QHPs] in your practice as of the end of [2022/2023]. Please include contract workers as well as employed staff.

- For example, if your physician practice had 1 FTE clinical staff member whose time was split equally among 3 specialties in your practice in [2022/2023], you should fill in 0.33 clinical staff in the rows for each of those 3 specialties.
- In contrast, if that FTE staff member supported only 1 specialty in [2022/2023], you would fill in 1 clinical staff in the row for that specialty and 0 clinical staff in the rows for the other specialties.

As a reminder, by [2022/2023] we mean your practice’s fiscal year ending on [DATE ENTERED AT S6].

Please round all dollar amounts to the nearest dollar. Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter “0” (for “zero”) in that cell. If any of this is information that you prefer not to or are unable to report, please enter “R” (for “not reported”) in that cell.

Reminder: If you have questions on how to enter information in this table, please click “Contact us” at the bottom left of the screen to reach us by email or by phone.

TABLE B Clinical and administrative/clerical staff in your physician practice at the end of [2022/2023]									
	Clinical staff			Administrative/clerical staff			Clinical + administrative Staff		
	Total aggregate ANNUAL COMPENSATION			Total aggregate ANNUAL COMPENSATION			Total aggregate ANNUAL COMPENSATION		
	# of staff FTE(s)	Monetary compensation	Benefits	# of staff FTE(s)	Monetary compensation	Benefits	# of staff FTE(s)	Monetary compensation	Benefits
Physician Specialty									
[Specialty]							<i>Total</i>	<i>Total</i>	<i>Total</i>
[Specialty]							<i>Total</i>	<i>Total</i>	<i>Total</i>
[Specialty]							<i>Total</i>	<i>Total</i>	<i>Total</i>
QHPs									
[QHP]							<i>Total</i>	<i>Total</i>	<i>Total</i>
[QHP]							<i>Total</i>	<i>Total</i>	<i>Total</i>
TOTAL in practice	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>

3. PRACTICE EXPENSE

This section of the survey gathers data on **practice expense that was tax deductible in [2022/2023]**. These costs should include only those that relate to patient care services that are paid under physician payment systems. **Please do not include expenses paid through other payment systems (e.g., hospital inpatient, hospital outpatient, ambulatory surgical centers, and clinical lab fee schedules).** Do not include practice expense related to the provision of cosmetic supplies or services. Do not include compensation – you have already included it in the prior section. Please refer to the following definitions below as you complete these questions.

<p>General office overhead:</p> <ul style="list-style-type: none"> Rent, mortgage interest, and depreciation for medical buildings Office maintenance Property taxes Utilities Janitorial, laundry services Security Storage Refrigeration unrelated to vaccines <u>Non-medical</u> office equipment (e.g., waiting room furniture) <u>Non-medical</u> office supplies (e.g., paper, pens) 	<p>Medical supplies:</p> <ul style="list-style-type: none"> Supplies that are related to patient care and are not reusable on more than one patient (e.g., gloves, needles, bandages, catheters, software specific to a procedure/test) Do NOT include medical supplies that are separately billable (e.g., diabetic testing supplies, contrast agent, orthotics, and casting supplies) Do NOT include drugs or office supplies CMS list of medical supplies <hr/> <p>Non-billable drugs:</p> <ul style="list-style-type: none"> All non-billable drugs administered in the office <u>Do NOT include drugs that are separately billable (e.g., chemotherapy agents, vaccines).</u> <hr/> <p>Billable drugs:</p> <ul style="list-style-type: none"> All billable drugs administered in the office <u>ONLY include drugs that are separately billable (e.g., chemotherapy agents, vaccines).</u> 	<p>Medical equipment:</p> <ul style="list-style-type: none"> Equipment used in the diagnosis or treatment of patients (e.g., exam tables, patient scales, imaging equipment, Picture Archiving and Communication System (PACS) workstations) Total amount paid for leased/rented medical equipment in [2022/2023] Depreciation on medical equipment that was tax deductible in [2022/2023] Maintenance contract expense for medical equipment in [2022/2023] Interest on medical equipment loans in [2022/2023] CMS list of medical equipment
<p>Information Technology:</p> <ul style="list-style-type: none"> Information technology Hardware, software, servers, cloud services Cybersecurity expense Electronic health record system Laboratory information system Augmented/artificial/assisted intelligence technology DO NOT INCLUDE Picture Archiving and Communication System (PACS) workstations (SEE MEDICAL EQUIPMENT) 	<p>Professional liability insurance:</p> <ul style="list-style-type: none"> If premium payments are shared between physicians and the practice, include both components If the practice is self-insured, include the annual accrued self-insured expense Tail coverage should be included Mandatory surcharges to state-run Patient Compensation Funds 	<p>Other Expenses:</p> <ul style="list-style-type: none"> Contracted billing services Legal fees Marketing/advertising Office management services Credit card or banking fees Professional car leasing, maintenance and depreciation Maintenance of certification, licensure or accreditation Continuing education and journals Professional association memberships Meals/entertainment Charitable contributions Any other expenses not listed above Do not include any expenses that are paid under a different payment system.

C1. Please indicate the method your physician practice used to allocate the following expenses in [2022/2023].

MARK ALL THAT APPLY PER ROW

	Split equally among specialties	Revenue	FTE	Utilization	Square footage	Other
a. General overhead.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
b. Medical supplies.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
c. Non-billable drugs.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
d. Billable drugs.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
e. Medical equipment.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
f. Professional liability insurance.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
g. Information technology.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
h. Other expenses.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>

If you responded "other" to any of the expenses in C1, C2 will ask you to specify what method you used to allocate those expenses. If you did not select "other" as the method used to allocate any of the expenses at C1, please skip to the next page.

C2. Please specify what method your physician practice used to allocate these expenses in [2022/2023].

TYPE OF EXPENSE	METHOD OF ALLOCATION
a. [EXPENSE FROM C1].....	_____
b. [EXPENSE FROM C1].....	_____
g. [EXPENSE FROM C1].....	_____

C3. In the table below, please enter the total dollar amount for each type of expense allocated to **[[SPECIALTY NAME]]**/each of the specialties or combined specialties] [and the QHPs] at your physician practice in [2022/2023]. Please allocate expenses based on whatever method your practices used in [2022/2023] [(as you reported in question C1 [and question C2])]. *Note that compensation has already been filled in from your responses in Tables A and B.*

As a reminder, by [2022/2023] we mean your practice's fiscal year ending on [DATE ENTERED AT S6].

Please round all dollar amounts to the nearest dollar. Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter "0" (for "zero") in that cell. If any of this is information that you prefer not to or are unable to report, please enter "R" (for "not reported") in that cell.

Please note that in the web survey, the totals in the columns for "Physician compensation" and "Clinical and administrative/clerical staff compensation" will fill with your responses from Tables A and B.

Reminder: If you have questions on how to enter information in this table, please click "Contact us" at the bottom left of the screen to reach us by email or by phone.

TABLE C. ANNUAL expenses by Specialty (and by QHP) in [2022/2023]											
	Physician and QHP compensation	Clinical and administrative staff compensation	General overhead	Medical supplies	Non-billable drugs	Billable drugs	Medical equipment	Information technology	Professional liability insurance	Other expenses	Total
	Physician Specialty										
[SPECIALTY]	<i>[Total SPECIALTY compensation from Table A, Part 1 (columns 6a and 6b combined)]</i>	<i>[Total compensation for clinical and administrative staff who support SPECIALTY from Table B (columns 9 and 10 combined)]</i>									<i>Total</i>
[SPECIALTY]	<i>[Total SPECIALTY compensation from Table A, Part 1 (columns 6a and 6b combined)]</i>	<i>[Total compensation for clinical and administrative staff who support SPECIALTY from Table B (columns 9 and 10 combined)]</i>									<i>Total</i>

TABLE C. ANNUAL expenses by Specialty (and by QHP) in [2022/2023]											
	Physician and QHP compensation	Clinical and administrative staff compensation	General overhead	Medical supplies	Non-billable drugs	Billable drugs	Medical equipment	Information technology	Professional liability insurance	Other expenses	Total
	QHPs										
[QHP]	<i>[Total QHP compensation from Table A part 2 (columns 7a and 7b combined)]</i>	<i>[Total compensation for clinical and administrative staff who support QHP from Table B (columns 9 and 10 combined)]</i>									<i>Total</i>
[QHP]	<i>[Total QHP compensation from Table A part 2 (columns 7a and 7b combined)]</i>	<i>[Total compensation for clinical and administrative staff who support QHP from Table B (columns 9 and 10 combined)]</i>									<i>Total</i>
Total	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>

4. REVENUE AND BAD DEBT

This section of the survey gathers data on [2022/2023] practice revenue and bad debt, again reported separately for each of the specialties [and for the QHPs] in your physician practice. As a reminder, by [2022/2023] we mean your practice's fiscal year ending on [DATE ENTERED AT S6].

As with practice expense, the revenue and bad debt you report should only stem from patient care services that are paid under physician payment systems and NOT those that relate to services paid under hospital or other facility payment systems. Do not include practice revenue or bad debt related to the provision of cosmetic supplies or services.

Please refer to the following definitions below as you complete these questions.

Net patient services revenue:	Bad debt:	Emergency Medical Treatment and Labor Act (EMTALA) of 1986:
<ul style="list-style-type: none"> • INCLUDE all revenue received from the provision of services to patients, including revenue received from all payers (patients, private insurers, Medicare, Medicaid, Workers Compensation, and other payers) and in all forms (fee-for-service, capitation, bundled payments, shared savings, pay-for-performance or other bonuses). This revenue should be net of negotiated discounts, contractual allowances, denials from payers, and write-downs for bad debt. • EXCLUDE non-patient care revenue such as grants, subsidies, and philanthropic contributions. 	<ul style="list-style-type: none"> • Unpaid fees that <u>were the responsibility of the patient</u> that have been determined to not be collectible and were therefore written off. • Bad debt <u>does not include</u> the difference between the amount billed to an insurer and the contracted allowance. 	<ul style="list-style-type: none"> • A federal requirement that hospitals and physicians screen and stabilize patients presenting at hospital emergency departments regardless of the patients' ability to pay.

D1. In the table below, please enter the [2022/2023] net patient service revenue, bad debt, and percent of bad debt due to EMTALA for each of the specialties and the QHPs at your practice.

As a reminder, by [2022/2023] we mean your practice's fiscal year ending on [DATE ENTERED AT S6].

Please round all dollar amounts to the nearest dollar. Please do not leave any cells blank in the table below. If any of this information is not applicable to your practice, please enter "0" (for "zero") in that cell. If any of this is information that you prefer not to or are unable to report, please enter "R" (for "not reported") in that cell.

Reminder: If you have questions on how to enter information in this table, please click "Contact us" at the bottom left of the screen to reach us by email or by phone.

TABLE D. ANNUAL revenue, bad debt, and percent of bad debt due to EMTALA by Specialty [(and by QHP)] in [2022/2023]			
	Net patient service revenue	Bad debt	% of bad debt due to EMTALA
Physician Specialty			
[SPECIALTY]			
[SPECIALTY]			
[SPECIALTY]			
QHPs			
[QHP]			
[QHP]			

D2. Below is a summary of your responses from Tables A, B, C, and D. Please review to confirm that this looks correct before proceeding. If this is all correct, please click “Save and Next” to move forward.

If you need to change your response to a prior question, click on the “Back” button at the bottom of the screen until you get to the question you want to change. After you change your response, click the “Save and Next” button to record and save your revised response.

	# of part-time providers (Table A)	# of full-time providers (Table A)	# of clinical staff FTE(s) (Table B)	# of administrative/ clerical staff FTE(s) (Table B)	Total annual expenses (providers, staff and practice expenses) (Table C)	Net patient services revenue (Table D)
Physician Specialty						
[SPECIALTY]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>
[SPECIALTY]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>
[SPECIALTY]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>
QHPs						
[QHP]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>
[QHP]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>
[QHP]	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>	<i>Total</i>

5. SURVEY CLOSEOUT

- E1. In order to calculate estimates of practice expense per hour of patient care provided, we will need to collect data on the average weekly hours that physicians spent providing direct patient care. We would like to collect this information directly from the physicians at the practice. Would you be willing to share a hyperlink to a brief (under five minute) survey with the physicians in your practice? This survey will ask physicians how many hours of direct patient care they provide in a typical week and how many weeks they worked at your practice in 2022. You can click [here](#) to view a preview of this survey.

Please note that this survey of physicians is a critical part of the study. We cannot develop estimates of practice expense per hour of patient care provided in each specialty if we do not obtain the amount of time physicians spend providing direct patient care.

If you need to consult with others at your practice before making this decision or would like more information, please select “send an email with details” and we can send you an email with details about this survey that you can review and share with others at your practice.

Yes

No → GO TO E3

Send me an email with details → GO TO E4

- E2. Thank you. Please share the text and the link below with your physicians. This will also be emailed to you at the email address you provided at the beginning of the survey.

Please note that the link to the Physician Hours Survey is not available in this web preview, but it will be displayed online in your web survey.

Physician Hours Survey

This survey will ask about the total hours of patient care you provided in 2022 at [PRACTICE], and it will take less than five minutes to complete. This survey is part of a larger study led by the American Medical Association to better advocate for accurate resource-based physician payment in the Medicare program and from other payers.

Our practice agreed to participate in a survey that gathers detailed data on 2022 practice expenses. The hours and weeks worked information that you and other physicians provide will be combined with the practice expense data and similar information from other participating practices to develop national estimates of practice expense per hour of patient care. In early 2025, that information will be provided to the Centers for Medicare & Medicaid Services in support of accurate resource-based physician payment.

We are asking our physicians to participate. Your participation is voluntary but important. The information you provide will be kept private. It will be used and reported only in the aggregate and not on an individual level. Your responses will not be shared with our practice.

If you have questions while completing this survey, please email PhysicianHoursSurvey@mathematica-mpr.com or call 1-833-770-0010.

Please note that E3 will only display if you selected "No" at E1.

E3. We understand. We would like to reach out to the physicians at your practice to collect this information. We have a list of physicians affiliated with your practice from data used to sample practices for this survey. We will reach out and ask them to participate. The survey takes less than five minutes to complete and their participation is voluntary but vital. We cannot develop estimates of practice expense per hour of patient care provided for each specialty if we do not obtain the amount of time physicians spend providing direct patient care.

If you have concerns about our contacting the physicians in your practice, please contact us by email at PPISurvey@mathematica-mpr.com or by phone at 1-833-770-1032.

E4. Thank you, we will send you an email to the following email address. Click "Next" if this email address is correct. If this is not correct, please edit the email address before proceeding.

Email Address: _____

E5. *Question E5 has been omitted from this web preview because it only applies to a specific subgroup of practices. This question will not be displayed in your web survey.*

E6. *Question E6 has been omitted from this web preview because it only applies to a specific subgroup of practices. This question will not be displayed in your web survey.*

E7. Thank you for completing this survey. Please add any comments about this survey or other feedback for the AMA here. If you have feedback about a specific survey question, please include the question number in your comment.

Thank you for completing this survey.

If you have any questions, please email PPISurvey@mathematica-mpr.com or call 1-833-770-1032.

Mapping of physician specialties/subspecialties to the 65 Medicare defined specialties used in this survey

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
Addiction Medicine	79	Addiction Medicine
Addiction Psychiatry		
Adult Congenital Heart Disease	D8	Adult Congenital Heart Disease
Advance Heart Failure & Transplant Cardiology	C7	Advanced Heart Failure and Transplant Cardiology
Allergy		
Allergy & Immunology		
Clinical Laboratory Immunology (Allergy & Immunology)	03	Allergy/Immunology
Immunology		
Pediatric Allergy		
Adult Cardiothoracic Anesthesiology		
Anesthesiology		
Internal Medicine/Anesthesiology	05	Anesthesiology
Obstetric Anesthesiology		
Pediatric Anesthesiology		
Pediatrics/Anesthesiology		
Clinical Cardiac Electrophysiology	21	Cardiac Electrophysiology
Congenital Cardiac Surgery	78	Cardiac Surgery
Pediatric Cardiothoracic Surgery		
Cardiovascular Disease		
Nuclear Cardiology	06	Cardiology
Pediatric Cardiology		
Colon & Rectal Surgery	28	Colorectal Surgery
Proctology		
Anesthesiology Critical Care Medicine (Emergency Medicine)		
Critical Care Medicine (Anesthesiology)		
Critical Care Medicine (Emergency Medicine)		
Critical Care Medicine (Internal Medicine)	81	Critical Care (Intensivist)
Critical Care Medicine (Obstetrics & Gynecology)		
Neonatology		
Pediatric Critical Care Medicine		
Clinical & Laboratory Dermatological Immunology		
Dermatologic Surgery		
Dermatology		
Dermatopathology	07	Dermatology
Internal Medicine/Dermatology		
Pediatric Dermatology		
Pediatrics/Dermatology		
Procedural Dermatology		
Abdominal Radiology		
Cardiothoracic Radiology		
Diagnostic Radiology		
Musculoskeletal Radiology		
Neurology/Diagnostic Radiology/Neuroradiology	30	Diagnostic Radiology
Neuroradiology		
Pediatric Radiology		
Radiological Physics		
Radiology		
Emergency Medical Services		
Emergency Medicine		
Emergency Medicine/Family Medicine		
Internal Medicine/Emergency Medicine		
Internal Medicine/Emergency Medicine/Critical Care Medicine	93	Emergency Medicine
Medical Toxicology (Emergency Medicine)		
Pediatric Emergency Medicine (Emergency Medicine)		
Pediatric Emergency Medicine (Pediatrics)		
Pediatrics/Emergency Medicine		
Urgent Care Medicine		
Diabetes		
Endocrinology, Diabetes, & Metabolism	46	Endocrinology
Pediatric Endocrinology		
Adolescent Medicine (Family Medicine)		
Family Medicine	08	Family Medicine
Family Medicine/Preventive Medicine		
Gastroenterology		
Hepatology		
Pediatric Gastroenterology	10	Gastroenterology
Pediatric Transplant Hepatology		
Transplant Hepatology		
General Practice	01	General Practice

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty		
Abdominal Surgery	02	General Surgery		
Pediatric Surgery				
Surgery-General				
Surgical Critical Care				
Transplant Surgery				
Trauma Surgery				
Geriatric Medicine (Family Medicine)	38	Geriatric Medicine		
Geriatric Medicine (Internal Medicine)	27	Geriatric Psychiatry		
Geriatric Psychiatry	98	Gynecological/Oncology		
Gynecological Oncology	40	Hand Surgery		
Hand Surgery				
Hand Surgery (Orthopedic Surgery)				
Hand Surgery (Surgery)				
Surgery of the Hand (Plastic Surgery)				
Hematology (Internal Medicine)				
Hematology/Oncology	82	Hematology		
Hematology/Oncology	83	Hematology/Oncology		
Pediatric Hematology/Oncology	C9	Hematopoietic Cell Transplantation and Cellular Therapy		
Hematopoietic Cell Transplantation and Cellular Therapy				
Hospice & Palliative Medicine				
Hospice & Palliative Medicine (Anesthesiology)				
Hospice & Palliative Medicine (Emergency Medicine)				
Hospice & Palliative Medicine (Family Medicine)				
Hospice & Palliative Medicine (Internal Medicine)				
Hospice & Palliative Medicine (Obstetrics & Gynecology)				
Hospice & Palliative Medicine (Pediatrics)				
Hospice & Palliative Medicine (Physical Medicine & Rehabilitation)				
Hospice & Palliative Medicine (Psychiatry & Neurology)				
Hospice & Palliative Medicine (Psychiatry & Neurology)				
Hospice & Palliative Medicine (Radiology)				
Palliative Medicine				
Hospitalist			C6	Hospitalist
Infectious Disease			44	Infectious Disease
Pediatric Infectious Diseases			11	Internal Medicine
Adolescent Medicine (Internal Medicine)				
Clinical & Laboratory Immunology (Internal Medicine)				
Internal Medicine				
Internal Medicine/Family Medicine				
Nutrition				
Occupational Medicine				
Interventional Cardiology				
Interventional Cardiology	C3	Interventional Cardiology		
Pain Management	09	Interventional Pain Management		
Pain Medicine (Anesthesiology)				
Regional Anesthesiology and Acute Pain Medicine				
Endovascular Surgical Neuroradiology (Radiology)	94	Interventional Radiology		
Interventional Radiology-Independent				
Interventional Radiology-Integrated				
Vascular & Interventional Radiology	85	Maxillofacial Surgery		
Oral & Maxillofacial Surgery				
Clinical Cytogenetics	D3	Medical Genetics and Genomics		
Clinical Genetics				
Clinical Molecular Genetics				
Internal Medicine/Medical Genetics				
Medical Biochemical Genetics				
Medical Genetics				
Medical Microbiology				
Molecular Genetic Pathology				
Molecular Genetic Pathology (Medical Genetics)				
Pediatrics/Medical Genetics				
Oncology			90	Medical Oncology
Medical Toxicology	C8	Medical Toxicology		
Micrographic Dermatologic Surgery	D7	Micrographic Dermatologic Surgery		
Nephrology	39	Nephrology		
Pediatric Nephrology				
Brain Injury Medicine (Neurology)	13	Neurology		
Child Neurology				
Clinical Neurophysiology				
Endovascular Surgical Neuroradiology (Neurology)				
Epilepsy				
Internal Medicine/Neurology				
Neurology				
Psychiatry/Neurology				
Vascular Neurology				

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
Neuropsychiatry	86	Neuropsychiatry
Endovascular Surgical Neuroradiology (Neurological Surgery)		
Neurological Surgery	14	Neurosurgery
Pediatric Surgery (Neurology)		
Nuclear Medicine	36	Nuclear Medicine
Nuclear Radiology		
Female Pelvic and Reconstructive Surgery		
Female Pelvic Medicine & Reconstructive Surgery		
Gynecology		
Maternal & Fetal Medicine	16	Obstetrics/Gynecology
Obstetrics		
Obstetrics & Gynecology		
Reproductive Endocrinology & Infertility		
Ophthalmic Plastic & Reconstructive Surgery		
Ophthalmology	18	Ophthalmology
Pediatric Ophthalmology		
Adult Reconstructive Orthopedics		
Foot & Ankle Orthopedics		
Musculoskeletal Oncology		
Orthopedic Surgery	20	Orthopedic Surgery
Orthopedic Surgery of the Spine		
Orthopedic Trauma		
Pediatric Orthopedics		
Osteopathic Manipulative Medicine	12	Osteopathic Manipulative Medicine
Osteopathic Neuromusculoskeletal Medicine		
Craniofacial Surgery		
Facial Plastic Surgery		
Head & Neck Surgery		
Neurotology (Otolaryngology)	04	Otolaryngology
Otolaryngology		
Pediatric Otolaryngology		
Plastic Surgery within the Head & Neck (Otolaryngology)		
Pain Medicine		
Pain Medicine (Neurology)	72	Pain Management
Pain Medicine (Physical Medicine & Rehabilitation)		
Pain Medicine (Psychiatry)		
Anatomic Pathology		
Anatomic/Clinical Pathology		
Blood Banking/Transfusion Medicine		
Chemical Pathology		
Clinical & Laboratory Immunology (Pediatrics)		
Clinical Biochemical Genetics		
Clinical Informatics (Pathology)	22	Pathology
Clinical Pathology		
Cytopathology		
Forensic Pathology		
Hematology (Pathology)		
Neuropathology		
Pediatric Pathology		
Selective Pathology		
Adolescent Medicine		
Child Abuse Pediatrics		
Developmental-Behavioral Pediatrics		
Internal Medicine/Pediatrics	37	Pediatric Medicine
Medical Toxicology (Pediatrics)		
Neonatal-Perinatal Medicine		
Pediatrics		
Peripheral Vascular Disease	76	Peripheral Vascular Disease
Brain Injury Medicine (Physical Medicine and Rehabilitation)		
Internal Medicine/Physical Medicine & Rehabilitation		
Neuromuscular Medicine		
Neuromuscular Medicine (Physical Medicine & Rehabilitation)	25	Physical Medicine and Rehabilitation
Pediatric Rehabilitation Medicine		
Pediatrics/Physical Medicine & Rehabilitation		
Physical Medicine & Rehabilitation		
Spinal Cord Injury Medicine		
Cosmetic Surgery		
Plastic Surgery		
Plastic Surgery within the Head & Neck	24	Plastic and Reconstructive Surgery
Plastic Surgery within the Head & Neck (Plastic Surgery)		
Plastic Surgery-Integrated		

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
General Preventive Medicine		
Internal Medicine/Preventive Medicine	84	Preventive Medicine
Public Health & General Preventative Medicine		
Child & Adolescent Psychiatry		
Forensic Psychiatry		
Internal Medicine/Psychiatry		
Neurodevelopmental Disabilities		
Neurodevelopmental Disabilities (Pediatrics)	26	Psychiatry
Pediatrics/Psychiatry/Child & Adolescent Psychiatry		
Psychiatry		
Psychiatry/Family Medicine		
Psychoanalysis		
Psychosomatic Medicine		
Pediatric Pulmonology		
Pulmonary Disease	29	Pulmonary Disease
Pulmonary Disease & Critical Care Medicine		
Radiation Oncology	92	Radiation Oncology
Pediatric Rheumatology	66	Rheumatology
Rheumatology		
Sleep Medicine		
Sleep medicine (Anesthesiology)		
Sleep Medicine (Internal Medicine)	C0	Sleep Medicine
Sleep Medicine (Otolaryngology)		
Sleep Medicine (Pediatrics)		
Sleep Medicine (Psychiatry & Neurology)		
Orthopedic Sports Medicine		
Pediatric Sports Medicine		
Sports Medicine (Emergency Medicine)	23	Sports Medicine
Sports Medicine (Family Medicine)		
Sports Medicine (Internal Medicine)		
Sports Medicine (Physical Medicine & Rehabilitation)		
Advanced Surgical Oncology	91	Surgical Oncology
Surgical Oncology		
Thoracic Surgery	33	Thoracic Surgery
Thoracic Surgery-Integrated		
Undersea & Hyperbaric Medicine	D4	Undersea and Hyperbaric Medicine
Undersea & Hyperbaric Medicine (Emergency Medicine)		
Pediatric Urology	34	Urology
Urology		
Phlebology		
Vascular Medicine	77	Vascular Surgery
Vascular Surgery		
Vascular Surgery-Integrated		

Physician Hours Survey

Web Preview

April 2024

The following document is a preview of the web survey. The survey should be completed online.

Please note that when you are completing the survey online, you may not see all the questions from this preview version because you may skip over some questions that are not relevant based on your prior responses. In addition, the web survey will display the name of your practice. This web preview will display a generic fill for this information.

Physician Hours Survey

Thank you for agreeing to complete this survey, which will take **about two minutes**. The survey will ask for the total hours and weeks of patient care you provided in 2022 at [PRACTICE]. This survey is part of a larger study led by the American Medical Association to better advocate for accurate physician payment in the Medicare program and from other payers.

Your participation is voluntary but important. The information you provide will be kept private. It will be used and reported only in the aggregate and not on an individual level. Your responses will not be shared with your practice.

Instructions

- Please answer all questions with your best estimate.
- Click on “Back” at the bottom of the screen to go back to a previous question.
- Use the “Next” button to proceed to the next question.
- See the web survey for full instructions on navigating and submitting your survey online.
- If you have questions while completing this survey, please email PhysicianHoursSurvey@mathematica-mpr.com or call 1-833-770-0010.

Important

We understand your practice may have multiple physical locations/practice sites. Please respond about the physician practice as a whole (including all physical locations/practice sites).

1. Are you currently an owner or employee of, or do you contract with, [PRACTICE]?

1 Yes

0 No → *Thank you for your time. We are only collecting data from physicians who are currently an owner or employee of, or contracting with, this practice.*

2. Did you start working at [PRACTICE] in 2022 or before 2022?

0 In 2022 → *Thank you for your time. We are only collecting data from physicians who started working at this practice prior to 2022. This is to ensure that the information we collect on hours and weeks spent providing patient care is for the full calendar year so we can calculate accurate estimates of practice expense per hour of patient care provided.*

1 Before 2022

3. Please select your Medicare defined specialty from the list below. In total there are over 250 physician specialties/subspecialties; if needed please see the linked mapping document (*included here at the end of this PDF*) to understand how this larger list of physician specialties/subspecialties has been grouped into the 65 Medicare defined specialties used in this survey.

The number next to each specialty is the corresponding Medicare specialty code.

MARK ONE ONLY

- 1 Addiction Medicine - 79
- 2 Adult Congenital Heart Disease - D8
- 3 Advanced Heart Failure and Transplant Cardiology - C7
- 4 Allergy/Immunology - 03
- 5 Anesthesiology - 05
- 6 Cardiac Electrophysiology - 21
- 7 Cardiac Surgery - 78
- 8 Cardiology - 06
- 9 Colorectal Surgery - 28
- 10 Critical Care (Intensivist) - 81
- 11 Dermatology - 07
- 12 Diagnostic Radiology - 30
- 13 Emergency Medicine - 93
- 14 Endocrinology - 46
- 15 Family Medicine - 08
- 16 Gastroenterology - 10
- 17 General Practice - 01
- 18 General Surgery - 02
- 19 Geriatric Medicine - 38
- 20 Geriatric Psychiatry - 27
- 21 Gynecological/Oncology - 98
- 22 Hand Surgery - 40
- 23 Hematology - 82
- 24 Hematology/Oncology - 83
- 25 Hematopoietic Cell Transplantation and Cellular Therapy - C9
- 26 Hospice and Palliative Care - 17
- 27 Hospitalist - C6

- 28 ○ Infectious Disease - 44
- 29 ○ Internal Medicine - 11
- 30 ○ Interventional Cardiology - C3
- 31 ○ Interventional Pain Management - 09
- 32 ○ Interventional Radiology - 94
- 33 ○ Maxillofacial Surgery - 85
- 34 ○ Medical Genetics and Genomics - D3
- 35 ○ Medical Oncology - 90
- 36 ○ Medical Toxicology - C8
- 37 ○ Micrographic Dermatologic Surgery - D7
- 38 ○ Nephrology - 39
- 39 ○ Neurology - 13
- 40 ○ Neuropsychiatry - 86
- 41 ○ Neurosurgery - 14
- 42 ○ Nuclear Medicine - 36
- 43 ○ Obstetrics/Gynecology - 16
- 44 ○ Ophthalmology - 18
- 45 ○ Orthopedic Surgery - 20
- 46 ○ Osteopathic Manipulative Medicine - 12
- 47 ○ Otolaryngology - 04
- 48 ○ Pain Management - 72
- 49 ○ Pathology - 22
- 50 ○ Pediatric Medicine - 37
- 51 ○ Peripheral Vascular Disease - 76
- 52 ○ Physical Medicine and Rehabilitation - 25
- 53 ○ Plastic and Reconstructive Surgery - 24
- 54 ○ Preventive Medicine - 84
- 55 ○ Psychiatry - 26
- 56 ○ Pulmonary Disease - 29
- 57 ○ Radiation Oncology - 92
- 58 ○ Rheumatology - 66
- 59 ○ Sleep Medicine - C0
- 60 ○ Sports Medicine - 23
- 61 ○ Surgical Oncology - 91
- 62 ○ Thoracic Surgery - 33
- 63 ○ Undersea and Hyperbaric Medicine - D4
- 64 ○ Urology – 34
- 65 ○ Vascular Surgery - 77

4. How many weeks did you work at [PRACTICE] in 2022? Please do not include days or weeks when you were on vacation, at a conference, out due to illness, or when your practice was closed. Please do not include days or weeks when you provided care at other sites or facilities not affiliated with this practice.

Please round to the nearest week.

□□□ NUMBER OF WEEKS

5. On average during those weeks, how many hours per week did you spend providing direct patient care at [PRACTICE]?

Please round to the nearest hour.

____|____|____| NUMBER OF HOURS OF DIRECT PATIENT CARE PER WEEK

For **anesthesiology**, direct patient care includes:

- Personally anesthetizing patients (including pre-anesthesia evaluation and patient preparation, drug and equipment preparation, and monitoring patients post-surgery) or medically directing qualified anesthesiologists (e.g., CRNAs and anesthesiologist assistants)
- Managing patients in ICUs and performing hospital visits
- Performing pain management services (acute, chronic, and post-operative)
- Communicating with the patient, family members, payers, and other professionals through written, electronic, or verbal methods
- Documenting in the medical record

DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, or travel time.

For **pathology**, direct patient care includes:

- Examining and interpreting surgical, cytology, and other pathology or clinical diagnostic laboratory specimens and providing pathology clinical consultations
- Performing written clinical diagnostic laboratory, molecular pathology, and blood bank/transfusion physician interpretations (-26 modifier Medicare billable services)
- Communicating with the patient, family members, payers, and other professionals about surgical, cytology, or other pathology findings or pathology clinical consultations on anatomic, clinical, and molecular pathology services
- Preparing for and performing diagnostic and therapeutic procedures (e.g., for FNA, apheresis, and bone marrow biopsy)
- Documenting in the medical record

DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, travel time, or time spent performing autopsies, or supervising laboratory technicians and medical laboratory personnel.

For **diagnostic radiology**, direct patient care includes:

- Reviewing and interpreting imaging studies
- Performing diagnostic and therapeutic procedures
- Supervising technologists
- Communicating with the patient, family members, payers, and other professionals through written, electronic, or verbal methods
- Documenting in the medical record

DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, or travel time.

For **all other specialties**, direct patient care includes:

- Seeing patients (either in-person or via telehealth)
- Reviewing and interpreting imaging and/or tests
- Preparing for and performing surgery/procedures
- Communicating with the patient, family members, payers, and other professionals through written, electronic, or verbal methods
- Documenting in the medical record

DO NOT INCLUDE: stand-by time, break time, administrative time, on-call time, or travel time.

Question 5a below is for physicians who did not provide direct patient care at this practice in 2022 (i.e., your response to Question 5 is zero). If you indicated at Question 5 that you provided at least one hour of direct patient care, you will skip to Question 6.

5a. In the prior question you indicated you provided 0 hours of patient care in an average week in 2022. What type of work did you do at [PRACTICE] in 2022?

SELECT ALL THAT APPLY

- 1 Administrative work
- 2 Teaching
- 3 Research
- 4 Was on leave
- 5 Other (*please specify*) _____

6. Thank you for completing this survey. Please add any comments about this survey or other feedback for the AMA here. If you have feedback about a specific survey question, please include the question number in your comment.

Thank you for completing this survey.

If you have any questions, please email PhysicianHoursSurvey@mathematica-mpr.com or call 1-833-770-0010.

Mapping of physician specialties/subspecialties to the 65 Medicare defined specialties used in this survey

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
Addiction Medicine	79	Addiction Medicine
Addiction Psychiatry		
Adult Congenital Heart Disease	D8	Adult Congenital Heart Disease
Advance Heart Failure & Transplant Cardiology	C7	Advanced Heart Failure and Transplant Cardiology
Allergy		
Allergy & Immunology		
Clinical Laboratory Immunology (Allergy & Immunology)	03	Allergy/Immunology
Immunology		
Pediatric Allergy		
Adult Cardiothoracic Anesthesiology		
Anesthesiology		
Internal Medicine/Anesthesiology	05	Anesthesiology
Obstetric Anesthesiology		
Pediatric Anesthesiology		
Pediatrics/Anesthesiology		
Clinical Cardiac Electrophysiology	21	Cardiac Electrophysiology
Congenital Cardiac Surgery	78	Cardiac Surgery
Pediatric Cardiothoracic Surgery		
Cardiovascular Disease		
Nuclear Cardiology	06	Cardiology
Pediatric Cardiology		
Colon & Rectal Surgery	28	Colorectal Surgery
Proctology		
Anesthesiology Critical Care Medicine (Emergency Medicine)		
Critical Care Medicine (Anesthesiology)		
Critical Care Medicine (Emergency Medicine)		
Critical Care Medicine (Internal Medicine)	81	Critical Care (Intensivist)
Critical Care Medicine (Obstetrics & Gynecology)		
Neonatology		
Pediatric Critical Care Medicine		
Clinical & Laboratory Dermatological Immunology		
Dermatologic Surgery		
Dermatology		
Dermatopathology	07	Dermatology
Internal Medicine/Dermatology		
Pediatric Dermatology		
Pediatrics/Dermatology		
Procedural Dermatology		
Abdominal Radiology		
Cardiothoracic Radiology		
Diagnostic Radiology		
Musculoskeletal Radiology		
Neurology/Diagnostic Radiology/Neuroradiology	30	Diagnostic Radiology
Neuroradiology		
Pediatric Radiology		
Radiological Physics		
Radiology		
Emergency Medical Services		
Emergency Medicine		
Emergency Medicine/Family Medicine		
Internal Medicine/Emergency Medicine		
Internal Medicine/Emergency Medicine/Critical Care Medicine	93	Emergency Medicine
Medical Toxicology (Emergency Medicine)		
Pediatric Emergency Medicine (Emergency Medicine)		
Pediatric Emergency Medicine (Pediatrics)		
Pediatrics/Emergency Medicine		
Urgent Care Medicine		
Diabetes		
Endocrinology, Diabetes, & Metabolism	46	Endocrinology
Pediatric Endocrinology		
Adolescent Medicine (Family Medicine)		
Family Medicine	08	Family Medicine
Family Medicine/Preventive Medicine		
Gastroenterology		
Hepatology		
Pediatric Gastroenterology	10	Gastroenterology
Pediatric Transplant Hepatology		
Transplant Hepatology		
General Practice	01	General Practice

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
Abdominal Surgery	02	General Surgery
Pediatric Surgery		
Surgery-General		
Surgical Critical Care		
Transplant Surgery		
Trauma Surgery		
Geriatric Medicine (Family Medicine)	38	Geriatric Medicine
Geriatric Medicine (Internal Medicine)	27	Geriatric Psychiatry
Geriatric Psychiatry	98	Gynecological/Oncology
Gynecological Oncology	40	Hand Surgery
Hand Surgery		
Hand Surgery (Orthopedic Surgery)		
Hand Surgery (Surgery)		
Surgery of the Hand (Plastic Surgery)	82	Hematology
Hematology (Internal Medicine)		
Hematology/Oncology	83	Hematology/Oncology
Pediatric Hematology/Oncology	C9	Hematopoietic Cell Transplantation and Cellular Therapy
Hematopoietic Cell Transplantation and Cellular Therapy	17	Hospice and Palliative Care
Hospice & Palliative Medicine		
Hospice & Palliative Medicine (Anesthesiology)		
Hospice & Palliative Medicine (Emergency Medicine)		
Hospice & Palliative Medicine (Family Medicine)		
Hospice & Palliative Medicine (Internal Medicine)		
Hospice & Palliative Medicine (Obstetrics & Gynecology)		
Hospice & Palliative Medicine (Pediatrics)		
Hospice & Palliative Medicine (Physical Medicine & Rehabilitation)		
Hospice & Palliative Medicine (Psychiatry & Neurology)		
Hospice & Palliative Medicine (Psychiatry & Neurology)		
Hospice & Palliative Medicine (Radiology)		
Palliative Medicine		
Hospitalist	C6	Hospitalist
Infectious Disease	44	Infectious Disease
Pediatric Infectious Diseases	11	Internal Medicine
Adolescent Medicine (Internal Medicine)		
Clinical & Laboratory Immunology (Internal Medicine)		
Internal Medicine		
Internal Medicine/Family Medicine		
Nutrition		
Occupational Medicine		
Interventional Cardiology	C3	Interventional Cardiology
Pain Management	09	Interventional Pain Management
Pain Medicine (Anesthesiology)		
Regional Anesthesiology and Acute Pain Medicine		
Endovascular Surgical Neuroradiology (Radiology)	94	Interventional Radiology
Interventional Radiology-Independent		
Interventional Radiology-Integrated		
Vascular & Interventional Radiology	85	Maxillofacial Surgery
Oral & Maxillofacial Surgery		
Clinical Cytogenetics	D3	Medical Genetics and Genomics
Clinical Genetics		
Clinical Molecular Genetics		
Internal Medicine/Medical Genetics		
Medical Biochemical Genetics		
Medical Genetics		
Medical Microbiology		
Molecular Genetic Pathology		
Molecular Genetic Pathology (Medical Genetics)		
Pediatrics/Medical Genetics		
Oncology	90	Medical Oncology
Medical Toxicology	C8	Medical Toxicology
Micrographic Dermatologic Surgery	D7	Micrographic Dermatologic Surgery
Nephrology	39	Nephrology
Pediatric Nephrology	13	Neurology
Brain Injury Medicine (Neurology)		
Child Neurology		
Clinical Neurophysiology		
Endovascular Surgical Neuroradiology (Neurology)		
Epilepsy		
Internal Medicine/Neurology		
Neurology		
Psychiatry/Neurology		
Vascular Neurology		

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
Neuropsychiatry	86	Neuropsychiatry
Endovascular Surgical Neuroradiology (Neurological Surgery)		
Neurological Surgery	14	Neurosurgery
Pediatric Surgery (Neurology)		
Nuclear Medicine		
Nuclear Radiology	36	Nuclear Medicine
Female Pelvic and Reconstructive Surgery		
Female Pelvic Medicine & Reconstructive Surgery		
Gynecology		
Maternal & Fetal Medicine	16	Obstetrics/Gynecology
Obstetrics		
Obstetrics & Gynecology		
Reproductive Endocrinology & Infertility		
Ophthalmic Plastic & Reconstructive Surgery		
Ophthalmology	18	Ophthalmology
Pediatric Ophthalmology		
Adult Reconstructive Orthopedics		
Foot & Ankle Orthopedics		
Musculoskeletal Oncology		
Orthopedic Surgery	20	Orthopedic Surgery
Orthopedic Surgery of the Spine		
Orthopedic Trauma		
Pediatric Orthopedics		
Osteopathic Manipulative Medicine	12	Osteopathic Manipulative Medicine
Osteopathic Neuromusculoskeletal Medicine		
Craniofacial Surgery		
Facial Plastic Surgery		
Head & Neck Surgery		
Neurotology (Otolaryngology)	04	Otolaryngology
Otolaryngology		
Pediatric Otolaryngology		
Plastic Surgery within the Head & Neck (Otolaryngology)		
Pain Medicine		
Pain Medicine (Neurology)	72	Pain Management
Pain Medicine (Physical Medicine & Rehabilitation)		
Pain Medicine (Psychiatry)		
Anatomic Pathology		
Anatomic/Clinical Pathology		
Blood Banking/Transfusion Medicine		
Chemical Pathology		
Clinical & Laboratory Immunology (Pediatrics)		
Clinical Biochemical Genetics		
Clinical Informatics (Pathology)		
Clinical Pathology	22	Pathology
Cytopathology		
Forensic Pathology		
Hematology (Pathology)		
Neuropathology		
Pediatric Pathology		
Selective Pathology		
Adolescent Medicine		
Child Abuse Pediatrics		
Developmental-Behavioral Pediatrics		
Internal Medicine/Pediatrics	37	Pediatric Medicine
Medical Toxicology (Pediatrics)		
Neonatal-Perinatal Medicine		
Pediatrics		
Peripheral Vascular Disease	76	Peripheral Vascular Disease
Brain Injury Medicine (Physical Medicine and Rehabilitation)		
Internal Medicine/Physical Medicine & Rehabilitation		
Neuromuscular Medicine		
Neuromuscular Medicine (Physical Medicine & Rehabilitation)	25	Physical Medicine and Rehabilitation
Pediatric Rehabilitation Medicine		
Pediatrics/Physical Medicine & Rehabilitation		
Physical Medicine & Rehabilitation		
Spinal Cord Injury Medicine		
Cosmetic Surgery		
Plastic Surgery		
Plastic Surgery within the Head & Neck	24	Plastic and Reconstructive Surgery
Plastic Surgery within the Head & Neck (Plastic Surgery)		
Plastic Surgery-Integrated		

Specialty	CMS Medicare Specialty Code	CMS Medicare Specialty
General Preventive Medicine	84	Preventive Medicine
Internal Medicine/Preventive Medicine		
Public Health & General Preventative Medicine		
Child & Adolescent Psychiatry	26	Psychiatry
Forensic Psychiatry		
Internal Medicine/Psychiatry		
Neurodevelopmental Disabilities		
Neurodevelopmental Disabilities (Pediatrics)		
Pediatrics/Psychiatry/Child & Adolescent Psychiatry		
Psychiatry		
Psychiatry/Family Medicine		
Psychoanalysis		
Psychosomatic Medicine		
Pediatric Pulmonology	29	Pulmonary Disease
Pulmonary Disease		
Pulmonary Disease & Critical Care Medicine		
Radiation Oncology	92	Radiation Oncology
Pediatric Rheumatology	66	Rheumatology
Rheumatology		
Sleep Medicine	C0	Sleep Medicine
Sleep medicine (Anesthesiology)		
Sleep Medicine (Internal Medicine)		
Sleep Medicine (Otolaryngology)		
Sleep Medicine (Pediatrics)		
Sleep Medicine (Psychiatry & Neurology)		
Orthopedic Sports Medicine	23	Sports Medicine
Pediatric Sports Medicine		
Sports Medicine (Emergency Medicine)		
Sports Medicine (Family Medicine)		
Sports Medicine (Internal Medicine)		
Sports Medicine (Physical Medicine & Rehabilitation)		
Advanced Surgical Oncology	91	Surgical Oncology
Surgical Oncology	33	Thoracic Surgery
Thoracic Surgery		
Thoracic Surgery-Integrated	D4	Undersea and Hyperbaric Medicine
Undersea & Hyperbaric Medicine		
Undersea & Hyperbaric Medicine (Emergency Medicine)	34	Urology
Pediatric Urology		
Urology	77	Vascular Surgery
Phlebology		
Vascular Medicine		
Vascular Surgery		
Vascular Surgery-Integrated		

Appendix B
Facility-based Place-of-Service Codes

Table B.1. Facility-based place-of-service codes with detailed descriptions

LINE_PLACE_OF_SERVC_CD Value	Description
02	Telehealth. The location where health services and health related services are provided or received, through a telecommunication system. (Effective January 1, 2017)
05	Indian Health Service - Free-standing Facility. A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to American Indians and Alaska Natives who do not require hospitalization.
06	Indian Health Service - Provider-based Facility. A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services rendered by, or under the supervision of, physicians to American Indians and Alaska Natives admitted as inpatients or outpatients.
07	Tribal 638 - Free-standing Facility. A facility or location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members who do not require hospitalization.
08	Tribal 638 Provider-based Facility. A facility or location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members admitted as inpatients or outpatients.
09	Prison/Correctional Facility. A prison, jail, reformatory, work farm, detention center, or any other similar facility maintained by either Federal, State or local authorities for the purpose of confinement or rehabilitation of adult or juvenile criminal offenders.
21	Inpatient Hospital. A facility, other than psychiatric, which primarily provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services by, or under, the supervision of physicians to patients admitted for a variety of medical conditions.
22	Outpatient Hospital. A portion of a hospital which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.
23	Emergency Room – Hospital. A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided.
24	Ambulatory Surgical Center. A freestanding facility, other than a physician's office, where surgical and diagnostic services are provided on an ambulatory basis.
26	Military Treatment Facility. A medical facility operated by one or more of the Uniformed Services. Military Treatment Facility (MTF) also refers to certain former U.S. Public Health Service (USPHS) facilities now designated as Uniformed Service Treatment Facilities (USTF).
31	Skilled Nursing Facility. A facility which primarily provides inpatient skilled nursing care and related services to patients who require medical, nursing, or rehabilitative services but does not provide the level of care or treatment available in a hospital.

LINE_PLACE_OF_SERVC_CD Value	Description
34	Hospice. A facility, other than a patient's home, in which palliative and supportive care for terminally ill patients and their families are provided.
41	Ambulance - Land. A land vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.
42	Ambulance – Air or Water. An air or water vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.
51	Inpatient Psych Facility. A facility that provides inpatient psychiatric services for the diagnosis and treatment of mental illness on a 24-hour basis, by or under the supervision of a physician.
52	Psychiatric Facility - Partial Hospitalization. A facility for the diagnosis and treatment of mental illness that provides a planned therapeutic program for patients who do not require full time hospitalization, but who need broader programs than are possible from outpatient visits to a hospital-based or hospital-affiliated facility.
53	Community Mental Health Ctr. A facility that provides the following services: outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically ill, and residents of the CMHC's mental health services area who have been discharged from inpatient treatment at a mental health facility; 24 hour a day emergency care services; day treatment, other partial hospitalization services, or psychosocial rehabilitation services; screening for patients being considered for admission to State mental health facilities to determine the appropriateness of such admission; and consultation and education services.
56	Psychiatric Residential Treatment Center. A facility or distinct part of a facility for psychiatric care which provides a total 24-hour therapeutically planned and professionally staffed group living and learning environment.
58	Unassigned. N/A
61	Comprehensive Inpatient Rehabilitation Facility. A facility that provides comprehensive rehabilitation services under the supervision of a physician to inpatients with physical disabilities. Services include physical therapy, occupational therapy, speech pathology, social or psychological services, and orthotics and prosthetics services.

Source: Chronic Condition Data Warehouse CODEBOOK Medicare Fee-For-Service Claims (for Version K) April 2020 Version 1.6.

Appendix C List of Strata

Table C.1. Detailed list of 248 explicit strata with number of TINs in frame 1

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
1	Yes	n/a	n/a	n/a	n/a	n/a	36
2	No	Allergy/Immunology	all	1-4	n/a	Corporate + unknown	473
3	No	Allergy/Immunology	all	1-4	n/a	Physician	568
4	No	Allergy/Immunology	all	5-300	n/a	all	68
5	No	Anesthesiology	0-24 pct	1-100	n/a	Corporate	141
6	No	Anesthesiology	0-24 pct	1-100	n/a	Physician	362
7	No	Anesthesiology	25-74 pct	1-10	n/a	all	131
8	No	Anesthesiology	25-74 pct	11-1000	n/a	all	25
9	No	Anesthesiology	75+ pct	1-10	n/a	Corporate	647
10	No	Anesthesiology	75+ pct	1-10	n/a	Physician	450
11	No	Anesthesiology	75+ pct	11-100	n/a	Corporate + unknown	286
12	No	Anesthesiology	75+ pct	11-100	n/a	Physician	322
13	No	Anesthesiology	75+ pct	101+	n/a	all	42
14	No	Anesthesiology	unknown	1-10	n/a	Corporate + unknown	431
15	No	Anesthesiology	unknown	1-10	n/a	Physician	368
16	No	Anesthesiology	unknown	11-100	n/a	all	37
17	No	Cardiology	0-24+unk	1-10	n/a	Corporate + unknown	482
18	No	Cardiology	0-24+unk	1-10	n/a	Physician	1008
19	No	Cardiology	0-24+unk	11-100	n/a	all	20
20	No	Cardiology	25-74 pct	1-10	n/a	Corporate + unknown	371
21	No	Cardiology	25-74 pct	1-10	n/a	Physician	548
22	No	Cardiology	25-74 pct	11-100	n/a	all	27
23	No	Cardiology	75+	1-10	n/a	all	216
24	No	Cardiology	75+	11-100	n/a	all	22
25	No	Cardiothoracic Surgery	0-74	1-10	n/a	all	106
26	No	Cardiothoracic Surgery	75+	1-100	n/a	all	232
27	No	Dermatology	all	1-10	n/a	corporate	692
28	No	Dermatology	all	1-10	n/a	Physician	3042
29	No	Dermatology	all	1-10	n/a	Unknown	0
30	No	Dermatology	all	11-300	n/a	all	89
31	No	Emergency Medicine	0-49	1-10	n/a	Corporate + unknown	227
32	No	Emergency Medicine	0-49	1-10	n/a	Physician	346
33	No	Emergency Medicine	0-49	11-300	n/a	all	29
34	No	Emergency Medicine	50++unk	1-10	n/a	all	289
35	No	Emergency Medicine	50++unk	11-100	n/a	Corporate	651

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
36	No	Emergency Medicine	50++unk	11-100	n/a	Physician	359
37	No	Emergency Medicine	50++unk	101+	n/a	all	53
38	No	Endocrinology	0-24+unk	1-100	n/a	Corporate + unknown	209
39	No	Endocrinology	0-24+unk	1-100	n/a	Physician	514
40	No	Endocrinology	25+	1-100	n/a	all	167
41	No	Family Medicine	0-24+unk	1-10	n/a	Corporate	2614
42	No	Family Medicine	0-24+unk	1-10	n/a	Physician	8693
43	No	Family Medicine	0-24+unk	1-10	n/a	Unknown	0
44	No	Family Medicine	0-24+unk	11-100	n/a	all	179
45	No	Family Medicine	25-74 pct	1-10	n/a	Corporate + unknown	293
46	No	Family Medicine	25-74 pct	1-10	n/a	Physician	897
47	No	Family Medicine	25-74 pct	11-100	n/a	all	40
48	No	Family Medicine	75+ pct	1-10	n/a	Corporate + unknown	336
49	No	Family Medicine	75+ pct	1-10	n/a	Physician	355
50	No	Family Medicine	75+ pct	11-100	n/a	all	28
51	No	Gastroenterology	0-24+unk	1-100	n/a	all	252
52	No	Gastroenterology	25-74	1-10	n/a	Corporate + unknown	408
53	No	Gastroenterology	25-74	1-10	n/a	Physician	762
54	No	Gastroenterology	25-74	11-300	n/a	all	81
55	No	Gastroenterology	75+	1-10	n/a	Corporate + unknown	192
56	No	Gastroenterology	75+	1-10	n/a	Physician	223
57	No	Gastroenterology	75+	11-100	n/a	all	21
58	No	General Practice	0-24+unk	1-100	n/a	Corporate	260
59	No	General Practice	0-24+unk	1-10	n/a	Physician	1056
60	No	General Practice	0-24+unk	1-10	n/a	Unknown	0
61	No	General Practice	25+	1-10	n/a	all	208
62	No	General Surgery	0-24	1-10	n/a	Corporate + unknown	127
63	No	General Surgery	0-24	1-10	n/a	Physician	320
64	No	General Surgery	25-74	1-100	n/a	Corporate + unknown	370
65	No	General Surgery	25-74	1-100	n/a	Physician	753
66	No	General Surgery	75++unk	1-10	n/a	Corporate + unknown	636
67	No	General Surgery	75++unk	1-10	n/a	Physician	911
68	No	General Surgery	75++unk	11-100	n/a	all	56
69	No	Geriatric Medicine	0-24	1-10	n/a	all	117
70	No	Geriatric Medicine	25+	1-10	n/a	all	104
71	No	Hand Surgery	all	1-100	n/a	all	168

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
72	No	Hematology/Oncology	0-24	1-10	n/a	Corporate + unknown	183
73	No	Hematology/Oncology	0-24	1-10	n/a	Physician	230
74	No	Hematology/Oncology	0-24	11-300	n/a	all	38
75	No	Hematology/Oncology	25++unk	1-10	n/a	all	176
76	No	Hematology/Oncology	25++unk	11-100	n/a	all	21
77	No	Hospital Based	0-24	1-10	n/a	all	202
78	No	Hospital Based	25-74	1-100	n/a	all	183
79	No	Hospital Based	75++unk	1-10	n/a	Corporate + unknown	1023
80	No	Hospital Based	75++unk	1-10	n/a	Physician	786
81	No	Hospital Based	75++unk	11-300	n/a	all	137
82	No	Internal Medicine	0-24+unk	1-10	n/a	Corporate	2215
83	No	Internal Medicine	0-24+unk	1-10	n/a	Physician	8519
84	No	Internal Medicine	0-24+unk	1-10	n/a	Unknown	0
85	No	Internal Medicine	0-24+unk	11-100	n/a	all	29
86	No	Internal Medicine	25-74 pct	1-100	n/a	Corporate + unknown	552
87	No	Internal Medicine	25-74 pct	1-100	n/a	Physician	2154
88	No	Internal Medicine	75+	1-100	n/a	Corporate	678
89	No	Internal Medicine	75+	1-100	n/a	Physician	834
90	No	Internal Medicine	75+	1-10	n/a	Unknown	0
91	No	Interventional Cardiology	all	1-10	n/a	all	110
92	No	Interventional Pain Medicine	0-24	1-10	n/a	all	348
93	No	Interventional Pain Medicine	25+	1-10	n/a	all	126
94	No	Interventional Radiology	all	1-10	n/a	all	86
95	No	Multiple	0-24+unk	2-4	No other descriptors	Corporate + unknown	1131
96	No	Multiple	0-24+unk	2-4	No other descriptors	Physician	1678
97	No	Multiple	0-24+unk	5-10	No other descriptors	Corporate	548
98	No	Multiple	0-24+unk	5-10	No other descriptors	Physician	343
99	No	Multiple	0-24+unk	11-100	No other descriptors	Corporate	591
100	No	Multiple	0-24+unk	11-100	No other descriptors	Physician	111
101	No	Multiple	0-24+unk	101-300	No other descriptors	All	57
102	No	Multiple	0-24+unk	300+	No other descriptors	all	21
103	No	Multiple primary	0-24+unk	2-4	primary care >75%	Corporate + unknown	420
104	No	Multiple primary	0-24+unk	2-4	primary care >75%	Physician	830
105	No	Multiple primary	0-24+unk	5-10	primary care >75%	Corporate	250
106	No	Multiple primary	0-24+unk	5-10	primary care >75%	Physician	135
107	No	Multiple primary	0-24+unk	11-100	primary care >75%	all	303

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
108	No	Multiple primary	0-24+unk	101-300	primary care >75%	all	24
109	No	Multiple family medicine	0-24+unk	2-4	max pct 65-<75, family medicine	all	120
110	No	Multiple family medicine	0-24+unk	5-100	max pct 65-<75, family medicine	all	35
111	No	Multiple internal medicine	0-24+unk	2-100	max pct 65-<75, internal medicine	all	96
112	No	Multiple	25-74 pct	2-4	No other descriptors	Corporate + unknown	430
113	No	Multiple	25-74 pct	2-4	No other descriptors	Physician	686
114	No	Multiple	25-74 pct	5-10	No other descriptors	Corporate	396
115	No	Multiple	25-74 pct	5-10	No other descriptors	Physician	230
116	No	Multiple	25-74 pct	11-100	No other descriptors	Corporate	996
117	No	Multiple	25-74 pct	11-100	No other descriptors	Corporate	191
118	No	Multiple	25-74 pct	100-300	No other descriptors	all	337
119	No	Multiple	25-74 pct	301-1000	No other descriptors	all	150
120	No	Multiple	25-74 pct	1000+	No other descriptors	all	32
121	No	Multiple primary	25-74 pct	2-4	primary care >75%	all	208
122	No	Multiple primary	25-74 pct	5-10	primary care >75%	all	64
123	No	Multiple primary	25-74 pct	11-1000	primary care >75%	all	73
124	No	Multiple, orthopedic surgery	25-74 pct	2-10	max pct 65-<75, orthopedic surgery	all	81
125	No	Multiple, orthopedic surgery	25-74 pct	11-300	max pct 65-<75, orthopedic surgery	all	85
126	No	Multiple	75+	2-4	No other descriptors	Corporate + unknown	417
127	No	Multiple	75+	2-4	No other descriptors	Physician	394
128	No	Multiple	75+	5-10	No other descriptors	Corporate + unknown	450
129	No	Multiple	75+	5-10	No other descriptors	Physician	310
130	No	Multiple	75+	11-100	No other descriptors	Corporate	1364
131	No	Multiple	75+	11-100	No other descriptors	Physician	512
132	No	Multiple	75+	101-300	No other descriptors	all	284
133	No	Multiple	75+	301-1000	No other descriptors	all	98
134	No	Multiple	75+	1000+	No other descriptors	all	28
135	No	Multiple primary	75+	2-10	primary care >75%	all	196
136	No	Multiple primary	75+	11-300	primary care >75%	all	70
137	No	Multiple, emergency medicine	75+	2-10	max pct 65-<75, emergency medicine	all	26
138	No	Multiple, emergency medicine	75+	11-1000	max pct 65-<75, emergency medicine	all	101
139	No	Nephrology	0-24	1-100	n/a	Corporate + unknown	157
140	No	Nephrology	0-24	1-10	n/a	Physician	242

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
141	No	Nephrology	25-50+unk	1-10	n/a	Corporate + unknown	209
142	No	Nephrology	25-50+unk	1-10	n/a	Physician	320
143	No	Nephrology	25-50+unk	11-300	n/a	all	80
144	No	Nephrology	50+	1-100	n/a	Corporate + unknown	159
145	No	Nephrology	50+	1-10	n/a	Physician	247
146	No	Neurology	0-24+unk	1-100	n/a	Corporate	299
147	No	Neurology	0-24+unk	1-100	n/a	Physician	1228
148	No	Neurology	0-24+unk	1-10	n/a	Unknown	0
149	No	Neurology	25-74	1-10	n/a	Corporate + unknown	104
150	No	Neurology	25-74	1-10	n/a	Physician	345
151	No	Neurology	25-74	11-300	n/a	all	26
152	No	Neurology	75+	1-100	n/a	Corporate + unknown	123
153	No	Neurology	75+	1-100	n/a	Physician	160
154	No	Neurosurgery	0-74	1-100	n/a	Corporate + unknown	80
155	No	Neurosurgery	0-74	1-100	n/a	Physician	177
156	No	Neurosurgery	75+	1-100	n/a	Corporate + unknown	157
157	No	Neurosurgery	75+	1-100	n/a	Physician	294
158	No	Obstetrics/Gynecology	0-24+unk	1-10	n/a	Corporate	1042
159	No	Obstetrics/Gynecology	0-24+unk	1-10	n/a	Physician	2461
160	No	Obstetrics/Gynecology	0-24+unk	1-10	n/a	unknown	0
161	No	Obstetrics/Gynecology	0-24+unk	11-1000	n/a	all	90
162	No	Obstetrics/Gynecology	25-74	1-10	n/a	Corporate + unknown	324
163	No	Obstetrics/Gynecology	25-74	1-10	n/a	Physician	598
164	No	Obstetrics/Gynecology	25-74	11-100	n/a	all	44
165	No	Obstetrics/Gynecology	75+	1-10	n/a	all	152
166	No	Obstetrics/Gynecology	75+	11-300	n/a	all	36
167	No	Ophthalmology	0-24+unk	1-10	n/a	Corporate	1054
168	No	Ophthalmology	0-24+unk	1-10	n/a	Physician	2287
169	No	Ophthalmology	0-24+unk	1-10	n/a	unknown	0
170	No	Ophthalmology	0-24+unk	11-100	n/a	all	64
171	No	Ophthalmology	25-74	1-10	n/a	Corporate + unknown	914
172	No	Ophthalmology	25-74	1-10	n/a	Physician	1345
173	No	Ophthalmology	25-74	11-300	n/a	all	108
174	No	Ophthalmology	75+	1-300	n/a	all	87
175	No	Orthopedic Surgery	0-24	1-100	n/a	Corporate + unknown	211

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
176	No	Orthopedic Surgery	0-24	1-10	n/a	Physician	496
177	No	Orthopedic Surgery	25-74+unk	1-10	n/a	Corporate + unknown	754
178	No	Orthopedic Surgery	25-74+unk	1-10	n/a	Physician	1196
179	No	Orthopedic Surgery	25-74+unk	11-300	n/a	all	168
180	No	Orthopedic Surgery	75+	1-100	n/a	Corporate + unknown	223
181	No	Orthopedic Surgery	75+	1-100	n/a	Physician	181
182	No	Otolaryngology	0-24+unk	1-10	n/a	Corporate + unknown	388
183	No	Otolaryngology	0-24+unk	1-10	n/a	Physician	1270
184	No	Otolaryngology	0-24+unk	11-300	n/a	all	37
185	No	Otolaryngology	25+	1-100	n/a	all	215
186	No	Pain Medicine	0-24+unk	1-10	n/a	Corporate + unknown	131
187	No	Pain Medicine	0-24+unk	1-10	n/a	Physician	304
188	No	Pain Medicine	25+	1-100	n/a	all	165
189	No	Pathology	0-74	1-100	n/a	all	145
190	No	Pathology	75++unk	1-10	n/a	all	204
191	No	Pathology	75++unk	11-100	n/a	all	21
192	No	Pediatrics	all	1-100	n/a	Corporate + unknown	159
193	No	Pediatrics	all	1-10	n/a	Physician	234
194	No	Phys Med & Rehab	0-24+unk	1-100	n/a	Corporate	293
195	No	Phys Med & Rehab	0-24+unk	1-10	n/a	Physician	737
196	No	Phys Med & Rehab	0-24	1-10	n/a	Unknown	0
197	No	Phys Med & Rehab	25-74	1-100	n/a	Corporate + unknown	80
198	No	Phys Med & Rehab	25-74	1-10	n/a	Physician	135
199	No	Phys Med & Rehab	75+	1-100	n/a	Corporate + unknown	531
200	No	Phys Med & Rehab	75+	1-100	n/a	Physician	307
201	No	Plastic Surgery	0-24	1-10	n/a	Corporate + unknown	88
202	No	Plastic Surgery	0-24	1-10	n/a	Physician	369
203	No	Plastic Surgery	25-74+unk	1-100	n/a	Corporate + unknown	183
204	No	Plastic Surgery	25-74+unk	1-10	n/a	Physician	684
205	No	Plastic Surgery	75+	1-100	n/a	Corporate + unknown	180
206	No	Plastic Surgery	75+	1-100	n/a	Physician	581
207	No	Psychiatry	0-24+unk	1-10	n/a	Corporate	979
208	No	Psychiatry	0-24+unk	1-10	n/a	Physician	2690
209	No	Psychiatry	0-24+unk	1-10	n/a		0

Stratum number	Private equity	Stratum specialty	Facility billing category	TIN size category	Multiple specialty descriptor	Ownership category	Number of eligible TINs
						Unknown	
210	No	Psychiatry	0-24+unk	11-300	n/a	all	67
211	No	Psychiatry	25-74	1-10	n/a	Corporate	391
212	No	Psychiatry	25-74	1-10	n/a	Physician	992
213	No	Psychiatry	25-74	1-10	n/a	Unknown	0
214	No	Psychiatry	25-74	11-100	n/a	all	79
215	No	Psychiatry	75+	1-10	n/a	Corporate	629
216	No	Psychiatry	75+	1-10	n/a	Physician	807
217	No	Psychiatry	75+	1-10	n/a	Unknown	0
218	No	Psychiatry	75+	11-300	n/a	Corporate	125
219	No	Pulmonary Disease	0-24+unk	1-10	n/a	Corporate + unknown	109
220	No	Pulmonary Disease	0-24+unk	1-100	n/a	Physician	242
221	No	Pulmonary Disease	25-74	1-100	n/a	Corporate + unknown	148
222	No	Pulmonary Disease	25-74	1-100	n/a	Physician	309
223	No	Pulmonary Disease	75+	1-100	n/a	Corporate + unknown	167
224	No	Pulmonary Disease	75+	1-100	n/a	Physician	225
225	No	Radiation Oncology	0-74	1-10	n/a	all	229
226	No	Radiation Oncology	0-74	11-100	n/a	all	22
227	No	Radiation Oncology	75++unk	1-100	n/a	all	236
228	No	Radiology	0-24	1-10	n/a	Corporate + unknown	205
229	No	Radiology	0-24	1-10	n/a	Physician	298
230	No	Radiology	0-24	11-300	n/a	all	213
231	No	Radiology	25++unk	1-10	n/a	Corporate + unknown	320
232	No	Radiology	25++unk	1-10	n/a	Physician	191
233	No	Radiology	25++unk	11-100	n/a	Corporate	292
234	No	Radiology	25++unk	11-100	n/a	Physician	250
235	No	Radiology	25++unk	101-1000	n/a	all	43
236	No	Rheumatology	all	1-100	n/a	Corporate + unknown	227
237	No	Rheumatology	all	1-100	n/a	Physician	607
238	No	Sleep Medicine	all	1-10	n/a	all	86
239	No	Urology	0-24	1-10	n/a	Corporate + unknown	197
240	No	Urology	0-24	1-10	n/a	Physician	519
241	No	Urology	0-24	11-100	n/a	all	43
242	No	Urology	25+	1-10	n/a	Corporate + unknown	139
243	No	Urology	25+	1-10	n/a	Physician	256

Appendix D
Population Counts of Practices by Strata

Table D.1. Population counts of TINs for frame 1 by explicit strata, with release sample counts (main sample allocation plus supplements) and allocated anticipated number of completed interviews

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
1	Private equity TINs	36	36	11
2	Allergy & Immunology, TIN size 1-4, corporate-owned	473	45	14
3	Allergy & Immunology, TIN size 1-4, physician-owned	568	53	16
4	Allergy & Immunology, TIN size 5+	68	7	2
5	Anesthesiology, 0-24% practice-level facility billing, TIN size 1-100, corporate-owned	141	12	4
6	Anesthesiology, 0-24% practice-level facility billing, TIN size 1-100, physician-owned	362	27	8
7	Anesthesiology, 25-74% practice-level facility billing, TIN size 1-10	131	10	3
8	Anesthesiology, 25-74% practice-level facility billing, TIN size 11+	25	20	2
9	Anesthesiology, >75% practice-level facility billing, TIN size 1-10, corporate-owned	647	69	21
10	Anesthesiology, >75% practice-level facility billing, TIN size 1-10, physician-owned	450	42	12
11	Anesthesiology, >75% practice-level facility billing, TIN size 11-100, corporate-owned	286	36	8
12	Anesthesiology, >75% practice-level facility billing, TIN size 11-100, physician-owned	322	42	9
13	Anesthesiology, >75% practice-level facility billing, TIN size 101+	42	20	2
14	Anesthesiology, unknown practice-level facility billing, TIN size 1-10, corporate-owned	431	35	11
15	Anesthesiology, unknown practice-level facility billing, TIN size 1-10, physician-owned	368	30	9
16	Anesthesiology, unknown practice-level facility billing, TIN size 11-100	37	10	2
17	Cardiology, 0-24% + unknown practice-level facility billing, TIN size 1-10, corporate-owned	482	41	12
18	Cardiology, 0-24% + unknown practice-level facility billing, TIN size 1-10, physician-owned	1008	74	22
19	Cardiology, 0-24% + unknown practice-level facility billing, TIN size 11-100	20	20	2
20	Cardiology, 25-74% practice-level facility billing, TIN size, 1-10, corporate-owned	371	34	10
21	Cardiology, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	548	40	11
22	Cardiology, 25-74% practice-level facility billing, TIN size 11-100	27	20	2
23	Cardiology, 75+% practice-level facility billing, TIN size 1-10	216	17	5
24	Cardiology, 75+% practice-level facility billing, TIN size 11-100	22	22	2
25	Cardiothoracic Surgery, 0-74% practice-level facility billing	106	17	5
26	Cardiothoracic Surgery, 75% practice-level facility billing	232	82	25
27	Dermatology, corporate-owned, TIN size 1-10	692	58	17
28	Dermatology, physician-owned, TIN size 1-10	3042	224	66
29	Dermatology, unknown ownership, TIN size 1-10 (removed)	0	0	0
30	Dermatology, TIN size 11-300	89	30	4
31	Emergency Medicine, 0-49% practice-level facility billing, TIN size 1-10, corporate-owned	227	20	6

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
32	Emergency Medicine, 0-49% practice-level facility billing, TIN size 1-10, physician-owned	346	26	7
33	Emergency Medicine, 0-49%+ practice-level facility billing, TIN size 11-300	29	20	2
34	Emergency Medicine, 50%+ & unknown practice-level facility billing, TIN size 1-10	289	23	6
35	Emergency Medicine, 50%+ & unknown practice-level facility billing, TIN size 11-100, corporate-owned	651	74	17
36	Emergency Medicine, 50% & unknown practice-level facility billing, TIN size 11-100, corporate-owned	359	41	10
37	Emergency Medicine, 50% & unknown practice-level facility billing, TIN size 101+, corporate-owned	53	20	2
38	Endocrinology, 0-24% & unknown practice-level facility billing, TIN size 1-100, corporate-owned	209	36	11
39	Endocrinology, 0-24% & unknown practice-level facility billing, TIN size 1-100, physician-owned	514	53	16
40	Endocrinology, 25%+ practice-level facility billing, TIN size 1-100	167	30	9
41	Family Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	2614	204	59
42	Family Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	8693	640	171
43	Family Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
44	Family Medicine, 0-24% & unknown practice-level facility billing, TIN size 11-100	179	17	5
45	Family Medicine, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	293	24	7
46	Family Medicine, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	897	66	17
47	Family Medicine, 25-74% practice-level facility billing, TIN size 11-100	40	6	2
48	Family Medicine, 75+% practice-level facility billing, TIN size 1-10, corporate-owned	336	26	7
49	Family Medicine, 75+% practice-level facility billing, TIN size 1-10, physician-owned	355	27	8
50	Family Medicine, 75+% practice-level facility billing, TIN size 11-100	28	7	2
51	Gastroenterology, 0-24% & unknown practice-level facility billing, TIN size 1-100	252	19	6
52	Gastroenterology, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	408	33	10
53	Gastroenterology, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	762	57	16
54	Gastroenterology, 25-74% practice-level facility billing, TIN size 11-300	81	40	4
55	Gastroenterology, 75+% practice-level facility billing, TIN size 1-10, corporate-owned	192	16	5
56	Gastroenterology, 75+% practice-level facility billing, TIN size 1-10, physician-owned	223	17	5
57	Gastroenterology, 75+% practice-level facility billing, TIN size 11-100	21	7	2
58	General Practice, 0-24% & unknown practice-level facility billing, TIN size 1-100, corporate-owned	260	42	13
59	General Practice, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	1056	88	26

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
60	General Practice, 0-24% & unknown practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
61	General Practice, 25+% practice-level facility billing, TIN size 1-10,	208	20	6
62	General Surgery, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	127	13	4
63	General Surgery, 0-24% practice-level facility billing, TIN size 1-10, physician-owned	320	23	6
64	General Surgery, 25-74% practice-level facility billing, TIN size 1-100, corporate-owned	370	31	9
65	General Surgery, 25-74% practice-level facility billing, TIN size 1-100, physician-owned	753	57	16
66	General Surgery, 75+% practice-level facility billing, TIN size 1-10, corporate-owned	636	56	17
67	General Surgery, 75+% & unknown practice-level facility billing, TIN size 1-10, physician-owned	911	76	23
68	General Surgery, 75+% & unknown practice-level facility billing, TIN size 11-100	56	7	2
69	Geriatric Medicine, 0-24% practice-level facility billing	117	75	22
70	Geriatric Medicine, 25+% practice-level facility billing	104	72	22
71	Hand Surgery	168	131	39
72	Hematology/Oncology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	183	18	5
73	Hematology/Oncology, 0-24% practice-level facility billing, TIN size 1-10, physician-owned	230	19	5
74	Hematology/Oncology, 0-24% practice-level facility billing, TIN size 11-300	38	20	2
75	Hematology/Oncology, 25+% & unknown practice-level facility billing, TIN size 1-10	176	15	5
76	Hematology/Oncology, 25+% & unknown practice-level facility billing, TIN size 11-100	21	9	3
77	Hospital-Based, 0-24% practice-level facility billing, TIN size 1-10	202	17	5
78	Hospital-Based, 25-74% practice-level facility billing, TIN size 1-10	183	17	5
79	Hospital-Based, 75+% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	1023	95	29
80	Hospital-Based, 75+% & unknown practice-level facility billing, TIN size 1-10, physician-owned	786	63	17
81	Hospital-Based, 75+% & unknown practice-level facility billing, TIN size 11-300	137	14	4
82	Internal Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	2215	214	65
83	Internal Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	8519	620	162
84	Internal Medicine, 0-24% & unknown practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
85	Internal Medicine, 0-24% & unknown practice-level facility billing, TIN size 11-100	29	9	3
86	Internal Medicine, 25-74% practice-level facility billing, TIN size 1-100, corporate-owned	552	48	14
87	Internal Medicine, 25-74% practice-level facility billing, TIN size 1-100, physician-owned	2154	160	46

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
88	Internal Medicine, 75+% practice-level facility billing, TIN size 1-10, corporate-owned	678	64	19
89	Internal Medicine, 75+% practice-level facility billing, TIN size 1-10, physician-owned	834	64	19
90	Internal Medicine, 75+% practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
91	Interventional Cardiology	110	110	33
92	Interventional Pain Medicine, 0-24% practice-level facility billing	348	59	20
93	Interventional Pain Medicine, 25+% practice-level facility billing	126	100	30
94	Interventional Radiology	86	86	38
95	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 2-4, corporate-owned	1131	103	31
96	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 2-4, physician-owned	1678	152	46
97	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 5-10, corporate-owned	548	56	17
98	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 5-10, physician-owned	343	37	11
99	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 11-100, corporate-owned	591	76	23
100	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 11-100, physician-owned	111	14	4
101	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 101-300	57	57	8
102	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 301+	21	20	6
103	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 2-4, primary care specialties > 75%, corporate-owned	420	41	12
104	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 2-4, primary care specialties > 75%, physician-owned	830	75	23
105	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 5-10, primary care specialties > 75%, corporate-owned	250	23	7
106	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 5-10, primary care specialties > 75%, physician-owned	135	14	4
107	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 11-100	303	41	12
108	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 101-300	24	23	7
109	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 2-4, family medicine 65-<75%	120	14	5
110	Multiple specialties, 0-24% & unknown practice-level facility billing, TIN size 5-100, family medicine 65-<75%	35	7	2
111	Multiple specialties, 0-24% & unknown practice-level facility billing, internal medicine 65-<75%	96	10	3
112	Multiple specialties, 25-74% practice-level facility billing, TIN size 2-4, corporate-owned	430	40	12
113	Multiple specialties, 25-74% practice-level facility billing, TIN size 2-4, physician-owned	686	67	20

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
114	Multiple specialties, 25-74% practice-level facility billing, TIN size 5-10, corporate-owned	396	37	11
115	Multiple specialties, 25-74% practice-level facility billing, TIN size 5-10, physician-owned	230	23	7
116	Multiple specialties, 25-74% practice-level facility billing, TIN size 11-100, corporate-owned	996	102	31
117	Multiple specialties, 25-74% practice-level facility billing, TIN size 11-100, physician-owned	191	23	7
118	Multiple specialties, 25-74% practice-level facility billing, TIN size 101-300	337	130	14
119	Multiple specialties, 25-74% practice-level facility billing, TIN size 301-1000	150	80	9
120	Multiple specialties, 25-74% practice-level facility billing, TIN size 1001+	32	32	10
121	Multiple specialties, 25-74% practice-level facility billing, TIN size 2-4, primary care specialties > 75%	208	21	6
122	Multiple specialties, 25-74% practice-level facility billing, TIN size 5-10, primary care specialties > 75%	64	7	2
123	Multiple specialties, 25-74% practice-level facility billing, TIN size 11+, primary care specialties > 75%	73	30	4
124	Multiple specialties, 25-74% practice-level facility billing, TIN size 2-10, orthopedic surgery specialties 65-<75%	81	12	4
125	Multiple specialties, 25-74% practice-level facility billing, TIN size 11+, orthopedic surgery specialties 65-<75%	85	29	4
126	Multiple specialties, 75+% practice-level facility billing, TIN size 2-4, corporate-owned	417	44	13
127	Multiple specialties, 75+% practice-level facility billing, TIN size 2-4, physician-owned	394	36	11
128	Multiple specialties, 75+% practice-level facility billing, TIN size 5-10, corporate-owned	450	45	14
129	Multiple specialties, 75+% practice-level facility billing, TIN size 5-10, physician-owned	310	31	9
130	Multiple specialties, 75+% practice-level facility billing, TIN size 11-100, corporate-owned	1364	138	42
131	Multiple specialties, 75+% practice-level facility billing, TIN size 11-100, physician-owned	512	51	15
132	Multiple specialties, 75+% practice-level facility billing, TIN size 101-300	284	119	12
133	Multiple specialties, 75+% practice-level facility billing, TIN size 301-1000	98	97	11
134	Multiple specialties, 75+% practice-level facility billing, TIN size 1001+	28	28	8
135	Multiple specialties, 75+% practice-level facility billing, TIN size 2-10, primary care specialties > 75%	196	20	6
136	Multiple specialties, 75+% practice-level facility billing, TIN size 11+, primary care specialties > 75%	70	20	2
137	Multiple specialties, 75+% practice-level facility billing, TIN size 2-10, emergency medicine specialties 65-<75%	26	8	2
138	Multiple specialties, 75+% practice-level facility billing, TIN size 11+, emergency medicine specialties 65-<75%	101	10	3
139	Nephrology, 0-24% practice-level facility billing, corporate-owned	157	17	5
140	Nephrology, 0-24% practice-level facility billing, physician-owned	242	20	6

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
141	Nephrology, 25-49% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	209	21	6
142	Nephrology, 25-49% & unknown practice-level facility billing, TIN size 1-10, physician-owned	320	31	9
143	Nephrology, 25-49% & unknown practice-level facility billing, TIN size 11-300	80	20	3
144	Nephrology, 50+% practice-level facility billing, corporate-owned	159	18	6
145	Nephrology, 50+% practice-level facility billing, physician-owned	247	24	7
146	Neurology, 0-24% & unknown practice-level facility billing, corporate-owned	299	26	8
147	Neurology, 0-24% & unknown practice-level facility billing, physician-owned	1228	95	28
148	Neurology, 0-24% & unknown practice-level facility billing, unknown ownership (removed)	0	0	0
149	Neurology, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	104	10	3
150	Neurology, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	345	29	9
151	Neurology, 25-74% practice-level facility billing, TIN size 11-300	26	20	3
152	Neurology, 75+% practice-level facility billing, corporate-owned	123	32	5
153	Neurology, 75+% practice-level facility billing, physician-owned	160	13	5
154	Neurosurgery, 0-74% practice-level facility billing, corporate-owned	80	11	3
155	Neurosurgery, 0-74% practice-level facility billing, physician-owned	177	14	4
156	Neurosurgery, 75+% practice-level facility billing, corporate-owned	157	19	6
157	Neurosurgery, 75+% practice-level facility billing, physician-owned	294	27	8
158	Obstetrics/Gynecology, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	1042	109	33
159	Obstetrics/Gynecology, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	2461	217	65
160	Obstetrics/Gynecology, 0-24% & unknown practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
161	Obstetrics/Gynecology, 0-24% & unknown practice-level facility billing, TIN size 11+	90	30	4
162	Obstetrics/Gynecology, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	324	28	9
163	Obstetrics/Gynecology, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	598	51	15
164	Obstetrics/Gynecology, 25-74% practice-level facility billing, TIN size 11+	44	8	2
165	Obstetrics/Gynecology, 75+% practice-level facility billing, TIN size 1-10	152	16	5
166	Obstetrics/Gynecology, 75+% practice-level facility billing, TIN size 11+	36	20	2
167	Ophthalmology, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	1054	101	30
168	Ophthalmology, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	2287	177	53
169	Ophthalmology, 0-24% & unknown practice-level facility billing, TIN size 1-10, ownership unknown (removed)	0	0	0
170	Ophthalmology, 0-24% & unknown practice-level facility billing, TIN size 11+	64	7	2
171	Ophthalmology, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	914	85	26

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
172	Ophthalmology, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	1345	112	34
173	Ophthalmology, 25-74% practice-level facility billing, TIN size 11+	108	13	4
174	Ophthalmology, 75+% practice-level facility billing	87	10	3
175	Orthopaedic Surgery, 0-24% practice-level facility billing, corporate-owned	211	19	6
176	Orthopaedic Surgery, 0-24% practice-level facility billing, physician-owned	496	36	11
177	Orthopaedic Surgery, 25-74% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	754	71	22
178	Orthopaedic Surgery, 25-74% & unknown practice-level facility billing, TIN size 1-10, physician-owned	1196	106	32
179	Orthopaedic Surgery, 25-74% & unknown practice-level facility billing, TIN size 11+	168	50	6
180	Orthopaedic Surgery, 75+% practice-level facility billing, corporate owned	223	22	7
181	Orthopaedic Surgery, 75+% practice-level facility billing, physician-owned	181	13	4
182	Otolaryngology, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	388	36	11
183	Otolaryngology, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	1270	103	31
184	Otolaryngology, 0-24% & unknown practice-level facility billing, TIN size 11+	37	20	2
185	Otolaryngology, 25+% practice-level facility billing	215	22	7
186	Pain Medicine, 0-24% & unknown practice-level facility billing, corporate-owned	131	27	8
187	Pain Medicine, 0-24% & unknown practice-level facility billing, physician-owned	304	76	23
188	Pain Medicine, 25+% practice-level facility billing	165	30	9
189	Pathology, 0-74% practice-level facility billing	145	17	5
190	Pathology, 75+% & unknown practice-level facility billing, TIN size 1-10	204	23	7
191	Pathology, 75+% & unknown practice-level facility billing, TIN size 11+	21	7	2
192	Pediatrics, corporate-owned	159	13	4
193	Pediatrics, physician-owned	234	19	5
194	Physical Medicine & Rehabilitation, 0-24% & unknown practice-level facility billing, corporate-owned	293	33	10
195	Physical Medicine & Rehabilitation, 0-24% & unknown practice-level facility billing, physician-owned	737	64	19
196	Physical Medicine & Rehabilitation, 0-24% & unknown practice-level facility billing, unknown ownership (removed)	0	0	0
197	Physical Medicine & Rehabilitation, 25-74% practice-level facility billing, corporate-owned	80	9	3
198	Physical Medicine & Rehabilitation, 25-74% practice-level facility billing, physician-owned	135	14	4
199	Physical Medicine & Rehabilitation, 75+% practice-level facility billing, corporate-owned	531	57	17
200	Physical Medicine & Rehabilitation, 75+% practice-level facility billing, physician-owned	307	90	10
201	Plastic Surgery, 0-24% practice-level facility billing, corporate-owned	88	10	2
202	Plastic Surgery, 0-24% practice-level facility billing, physician-owned	369	31	9
203	Plastic Surgery, 25-74% & unknown practice-level facility billing, corporate-owned	183	19	6

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
204	Plastic Surgery, 25-74% & unknown practice-level facility billing, physician-owned	684	57	17
205	Plastic Surgery, 75+% practice-level facility billing, corporate-owned	180	21	6
206	Plastic Surgery, 75+% practice-level facility billing, physician-owned	581	51	15
207	Psychiatry, 0-24% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	979	105	32
208	Psychiatry, 0-24% & unknown practice-level facility billing, TIN size 1-10, physician-owned	2690	218	65
209	Psychiatry, 0-24% & unknown practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
210	Psychiatry, 0-24% & unknown practice-level facility billing, TIN size 11+	67	20	2
211	Psychiatry, 25-74% practice-level facility billing, TIN size 1-10, corporate-owned	391	37	11
212	Psychiatry, 25-74% practice-level facility billing, TIN size 1-10, physician-owned	992	77	23
213	Psychiatry, 25-74% practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
214	Psychiatry, 25-74% practice-level facility billing, TIN size 11+	79	8	2
215	Psychiatry, 75+% practice-level facility billing, TIN size 1-10, corporate-owned	629	66	20
216	Psychiatry, 75+% practice-level facility billing, TIN size 1-10, physician-owned	807	70	21
217	Psychiatry, 75+% practice-level facility billing, TIN size 1-10, unknown ownership (removed)	0	0	0
218	Psychiatry, 75+% practice-level facility billing, TIN size 11+	125	14	4
219	Pulmonary disease, 0-24% & unknown practice-level facility billing, corporate-owned	109	11	3
220	Pulmonary disease, 0-24% & unknown practice-level facility billing, physician-owned	242	20	6
221	Pulmonary disease, 25-74% practice-level facility billing, corporate-owned	148	13	4
222	Pulmonary disease, 25-74% practice-level facility billing, physician-owned	309	26	8
223	Pulmonary disease, 75+% practice-level facility billing, corporate-owned	167	18	5
224	Pulmonary disease, 75+% practice-level facility billing, physician-owned	225	19	6
225	Radiation Oncology, 0-74% practice-level facility billing, TIN size 1-10	229	25	8
226	Radiation Oncology, 0-74% practice-level facility billing, TIN size 11+	22	8	2
227	Radiation Oncology, 75+% & unknown practice-level facility billing	236	25	8
228	Radiology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	205	20	6
229	Radiology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	298	23	7
230	Radiology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	213	50	6
231	Radiology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	320	31	9
232	Radiology, 25+% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	191	15	5
233	Radiology, 25+% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	292	25	8
234	Radiology, 25+% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	250	23	5
235	Radiology, 25+% & unknown practice-level facility billing, TIN size 1-10, corporate-owned	43	20	2
236	Rheumatology, corporate-owned	227	24	7

Stratum number	Stratum description	Number of eligible practices	Release sample allocation	Anticipated number of completed interviews
237	Rheumatology, physician-owned	607	59	18
238	Sleep Medicine	86	86	26
239	Urology, 0-24% practice-level facility billing, TIN size 1-10, corporate-owned	197	17	5
240	Urology, 0-24% practice-level facility billing, TIN size 1-10, physician-owned	519	39	11
241	Urology, 0-24% practice-level facility billing, TIN size 11+	43	8	2
242	Urology, 25+% practice-level facility billing, TIN size 1-10, corporate-owned	139	14	4
243	Urology, 25+% practice-level facility billing, TIN size 1-10, physician-owned	256	22	7
244	Urology, 25+% practice-level facility billing, TIN size 11+	32	7	2
245	Vascular Surgery, 0-24% practice-level facility billing, corporate-owned	144	29	9
246	Vascular Surgery, 0-24% practice-level facility billing, physician-owned	154	25	8
247	Vascular Surgery, 25+% practice-level facility billing, corporate-owned	91	16	5
248	Vascular Surgery, 25+% practice-level facility billing, physician-owned	104	18	5
TOTAL		106,618	11,225	3,088

Table D.2. Population counts of IMS_ORG_IDs for frame 2 by explicit strata, with release sample counts (main sample allocation) and allocated anticipated number of completed interviews

Stratum number	Stratum description	Number of eligible practices	Augmented sample cases	Anticipated number of completed interviews
1001	Pediatrics, IMS_ORG_ID size 1-4, corporate-owned	6,112	110	33
1002	Pediatrics, IMS_ORG_ID size 1-4, physician-owned	6,440	144	43
1003	Pediatrics, IMS_ORG_ID size 5-10, corporate-owned	1,523	54	16
1004	Pediatrics, IMS_ORG_ID size 5-10, physician-owned	447	14	4
1005	Pediatrics, IMS_ORG_ID size 11+	249	14	4
TOTAL		14,771	336	100

Appendix E

Communication Materials

Help Us Help You! This is an important opportunity to represent physician practices!

We are writing to ask for your support of a national study about physician practices, currently being sponsored by the American Medical Association (AMA) and supported by more than 170 health care organizations. The objective of this study is to help document changes in the U.S. health care delivery system that impact your practice every day. One of the recurring comments that we hear from physicians is that decision-makers and payers are not fully informed about the broad clinical, operational, and financial challenges that their practices face. This study represents your opportunity to communicate accurate financial and operational information to policymakers, including members of Congress and the Centers for Medicare & Medicaid Services. Data from this survey will be used to help determine physician payment levels. Our profession is presented with an important opportunity and your participation in this study will ensure that the voice and priorities of your practice is clearly heard.

The AMA has contracted with Mathematica, an independent research company with extensive experience in survey methods as well as care delivery and finance reform, to conduct the survey. Physician practices will be selected randomly to collect their confidential responses. The AMA and Mathematica will make data collection as convenient for you and your practice as possible and assure you that your individual data will be kept private. Financial information is critical to this survey and we, therefore, anticipate that financial experts will be needed to complete this portion of the data collection effort. Please afford your staff the necessary time so that your voice may be included in the final study results. Additionally, it is critical that we understand the direct patient care hours provided in your practice. Thus, we anticipate that many physicians will need to respond to a few questions to collect this information accurately.

Thank you in advance for your consideration. We hope that you will take the opportunity to participate in this critical study. Your involvement will make certain that the information collected will accurately represent your practice, patients, and profession.

Organizations that have endorsed the study

American Medical Association	Alaska State Medical Association	Arizona Medical Association	Arkansas Medical Society
California Medical Association	Colorado Medical Society	Connecticut State Medical Society	Florida Medical Association
Hawaii Medical Association	Idaho Medical Association	Illinois State Medical Society	Indiana State Medical Association
Iowa Medical Society	Kansas Medical Society	Kentucky Medical Association	Louisiana State Medical Society
Maine Medical Association	Massachusetts Medical Society	MedChi, The Maryland State Medical Society	Medical Association of Georgia
Medical Association of the State of Alabama	Medical Society of Delaware	Medical Society of New Jersey	Medical Society of the District of Columbia
Medical Society of the State of New York	Medical Society of Virginia	Michigan State Medical Society	Minnesota Medical Association
Mississippi State Medical Association	Missouri State Medical Association	Montana Medical Association	Nebraska Medical Association
Nevada State Medical Association	New Hampshire Medical Society	New Mexico Medical Society	North Carolina Medical Society
North Dakota Medical Association	Ohio State Medical Association	Oklahoma State Medical Association	Oregon Medical Association
Pennsylvania Medical Society	Rhode Island Medical Society	South Carolina Medical Association	South Dakota State Medical Association
Tennessee Medical Association	Texas Medical Association	Utah Medical Association	Vermont Medical Society
Washington State Medical Association	West Virginia State Medical Association	Wisconsin Medical Society	Wyoming Medical Society
Academy of Consultation-Liaison Psychiatry, Inc.	Academy of Nutrition and Dietetics	AMDA - The Society for Post-Acute and Long-Term Care Medicine	American Academy of Allergy, Asthma & Immunology
American Academy of Audiology	American Academy of Child and Adolescent Psychiatry	American Academy of Dermatology	American Academy of Family Physicians
American Academy of Hospice and Palliative Medicine	American Academy of Neurology	American Academy of Ophthalmology	American Academy of Otolaryngic Allergy

American Academy of Otolaryngology-Head and Neck Surgery	American Academy of Pain Medicine	American Academy of Pediatrics	American Academy of Physical Medicine and Rehabilitation
American Academy of Physician Associates	American Academy of Sleep Medicine	American Association for Hand Surgery	American Association for Physician Leadership
American Association of Clinical Endocrinology	American Association of Clinical Urologists	American Association of Hip and Knee Surgeons	American Association of Neurological Surgeons
American Association of Neuromuscular & Electrodiagnostic Medicine	American Association of Oral and Maxillofacial Surgeons	American Association of Orthopaedic Surgeons	American Chiropractic Association
American Clinical Neurophysiology Society	American College of Allergy, Asthma and Immunology	American College of Cardiology	American College of Chest Physicians (CHEST)
American College of Emergency Physicians	American College of Gastroenterology	American College of Lifestyle Medicine	American College of Medical Genetics and Genomics
American College of Nuclear Medicine	American College of Obstetricians and Gynecologists	American College of Physicians	American College of Radiation Oncology
American College of Radiology	American College of Rheumatology	American College of Surgeons	American Epilepsy Society
American Gastroenterological Association	American Geriatrics Society	American Medical Group Association	American Nurses Association
American Occupational Therapy Association	American Optometric Association	American Orthopaedic Foot & Ankle Society	American Osteopathic Association
American Pediatric Surgical Association	American Physical Therapy Association	American Podiatric Medical Association	American Psychiatric Association
American Psychological Association	American Rhinologic Society	American Society for Clinical Pathology	American Society for Dermatologic Surgery Association
American Society for Gastrointestinal Endoscopy	American Society for Metabolic and Bariatric Surgery	American Society for Radiation Oncology	American Society for Reproductive Medicine
American Society for Surgery of the Hand	American Society of Addiction Medicine	American Society of Anesthesiologists	American Society of Cataract and Refractive Surgery
American Society of Clinical Oncology	American Society of Colon and Rectal Surgeons	American Society of Cytopathology	American Society of Echocardiography
American Society of General Surgeons	American Society of Hematology	American Society of Interventional Pain Physicians	American Society of Neuroimaging
American Society of Neuroradiology	American Society of Nuclear Cardiology	American Society of Plastic Surgeons	American Society of Regional Anesthesia and Pain Medicine
American Society of Retina Specialists	American Society of Transplant Surgeons	American Speech-Language-Hearing Association	American Thoracic Society
American Urogynecologic Society	American Urological Association	American Vein and Lymphatic Society	American Venous Forum
Association of American Medical Colleges	Association of University Radiologists	College of American Pathologists	Congress of Neurological Surgeons
Endocrine Society	Heart Rhythm Society	Infectious Diseases Society of America	International Society for the Advancement of Spine Surgery
Medical Group Management Association	National Association of Medical Examiners	National Association of Social Workers	North American Neuromodulation Society
North American Spine Society	Obesity Medicine Association	Outpatient Endovascular and Interventional Society	Radiological Society of North America
Radiology Business Management Association	Renal Physicians Association	Society for Cardiovascular Angiography and Interventions	Society for Pediatric Dermatology
Society for Vascular Surgery	Society of American Gastrointestinal and Endoscopic Surgeons	Society of Cardiovascular Computed Tomography	Society of Critical Care Medicine
Society of Hospital Medicine	Society of Interventional Radiology	Society of Nuclear Medicine and Molecular Imaging	Society of Thoracic Surgeons
Spine Intervention Society	The American Society of Breast Surgeons	The American Society of Dermatopathology	Undersea and Hyperbaric Medical Society



INVITATION LETTER

[Date]

[Name], [Title]
[Practice Name]
[Address 1] [Address 2]
[City], [State] [Zip]

Dear [Name],

We are writing to ask for your participation in a national survey of physician practices led by the American Medical Association (AMA). The objective of this survey, which has been endorsed by over 170 medical societies and associations, is to gather accurate and updated practice information in order to develop national estimates of practice expense per hour of patient care provided at the medical specialty level. Please see the enclosed letter for the full list of medical societies and associations who have endorsed the survey. The AMA will provide the survey results in aggregate to the Centers for Medicare & Medicaid Services (CMS) in support of accurate resource-based physician payment. CMS will use this information to update the Resource-Based Relative Value Scale (RBRVS) and the Medicare Economic Index (MEI).

The AMA has contracted with Mathematica, an independent research company with extensive experience in survey methods as well as health care delivery and practice costs, to conduct this survey. Your physician practice has been randomly selected to participate.

To access the Physician Practice Information (PPI) Survey, please go to the following website and enter your practice's login ID and password.

Website: <https://www.PPISurvey.com>

Login ID: [Username]

Password: [Password]

When you visit this URL, you will be able to preview and print the survey to see the type of information it contains. The information you provide will be kept private. It will be used and reported in the aggregate to CMS to inform payment policies and to medical specialty societies for advocacy purposes only and will not be reported on an individual practice or physician level. To thank you for your participation, we will send you [Payment_Fill: a \$100 check and] a summary report with your survey responses compared to the aggregate responses of other similar practices.



Since the survey focus is on collecting financial information, it should be completed by the person at the practice who is best able to answer questions about finances and expenses for the practice. Documents and data you may need to complete this survey include your practice's federal tax returns from your fiscal year ending in 2022 or later, payroll information, and access to your practice's financial reporting software. Please allow your staff the necessary time to complete the survey, which will vary depending upon the size and complexity of the practice, so that your voice may be included in the final study results.

In addition to financial information, we will also gather the average number of direct patient care hours per week provided by physicians in your practice. [Info_Fill: To collect this information, we will ask for input from the physicians in your practice as well, with a separate survey that will take less than five minutes] Both the financial information and the hours information are needed to develop accurate estimates of practice expense per hour of patient care provided at the medical specialty level.

We hope that you will take the opportunity to participate in this important survey. If you have questions or would like to speak with someone about the survey, please contact Mathematica at PPISurvey@mathematica-mpr.com or by phone at 1-833-770-1032. Please be on the lookout for an email invitation from PPISurvey@mathematicasurvey.org with the subject line, "American Medical Association requests your input on physician practice expense and patient care hours" which will include a link to the survey.

Thank you in advance for your voluntary participation.

Sincerely,

James L. Madara, MD
CEO, Executive Vice President,
American Medical Association

Eugene Rich, MD
Senior Fellow, Mathematica



INVITATION EMAIL

Subject Line: The American Medical Association requests your input to update physician payment

From: Physician Practice Information (PPI) Survey

Re: [PRACTICE NAME]
[STREET ADDRESS 1] [STREET ADDRESS 2]
[CITY] [STATE] [ZIP]

Dear [RESPONDENT NAME]:

We are writing to ask for your participation in a national survey of physician practices led by the American Medical Association (AMA). The objective of this survey, which has been endorsed by [SPECIALTY_SOCIETY_FILL], the [STATE_SOCIETY_FILL], and [over 170 other medical societies and associations](#), is to gather accurate data on practice costs and the hours of patient care that physicians provide. **The aggregated survey results will be used in support of fair and accurate physician payment.**

It is critical that this survey be completed to ensure needed updates to Medicare physician payment!

The AMA has contracted with Mathematica, an independent research company with extensive experience in survey methods as well as health care delivery and practice costs, to conduct this survey. Your physician practice has been randomly selected to participate.

The survey is focused on collecting financial information and should be completed by the person(s) at your practice who can best answer questions about finances and expenses.* The time it takes to complete this survey will vary depending on the size and complexity of your practice. **To thank you for your participation, we will send you [FOR SMALL, PHYSICIAN-OWNED PRACTICES: a \$100 check and] a summary report that compares your own data with national averages.**

Please click on the link below to begin the survey for [PRACTICE NAME].

[Enter Physician Practice Information (PPI) Survey.]

If you are unable to access the survey through the direct link above, or prefer to type in the link yourself, please go to the following website and enter your practice's unique Login ID and Password, which are listed below.

Website: <https://www.PPISurvey.com>

Login ID: [USERNAME]

Password: [PASSWORD]

[For all practices that are NOT small and physician-owned:] As an additional thank you for completing the survey, **we will provide a 1-year complimentary subscription to the AMA RBRVS DataManager**, a \$320 value. This AMA online resource provides an insider's view of how CPT and HCPCS Level II codes are created, valued, and utilized in the Resource-Based Relative Value Scale (RBRVS) payment system relied on by the Centers for Medicare & Medicaid Services and most other payers. Quickly search for CPT/HCPCS codes from a computer or mobile device, complete with code long descriptors, RVUs, valuation information, detailed descriptions of physician work, clinical vignettes, Medicare claims data, and much more.

Your participation in the survey is voluntary but important. **The information you share will be kept private, reported in aggregate, and used only for the purpose of informing the national estimates of practice expense per patient care hour.** If you have any questions or trouble logging into the survey, please contact Mathematica at PPISURVEY@MATHEMATICA-MPR.COM, or via phone at 1-833-770-1032.



Thank you for participating in this important survey.



Sincerely,

James L. Madara, MD
CEO, Executive Vice President,
American Medical Association

Eugene Rich, MD
Senior Fellow, Mathematica

*If you are not the person best able to answer questions about finances and expenses, please let us know. You will have the opportunity to do this in the survey, or you can contact us by email at PPISURVEY@MATHEMATICA-MPR.COM or by phone at 1-833-770-1032.

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Click [here](#) to unsubscribe from emails related to the Physician Practice Information Survey



INVITATION LETTER

[Date]

Dr. [Name]
[Practice Name]
[Address 1] [Address 2]
[City], [State] [Zip]

Dear Dr. [Name],

We are reaching out to ask you to complete a brief (less than five minute) survey about the total hours of patient care you provided in 2022 at [PRACTICE NAME]. This survey is part of a larger effort led by the American Medical Association (AMA) to better advocate for accurate resource-based physician payment in the Medicare program and from other payers. The AMA asked Mathematica, an independent research company with extensive experience in survey methods and health care delivery and practice costs, to conduct this survey.

[PRACTICE NAME] has agreed to participate in a separate survey that gathers detailed information on 2022 practice expenses. The information you and your colleagues report about total hours of patient care provided will be combined with the practice expense data and similar information from other participating practices to develop national estimates of practice expense per hour of patient care provided for each medical specialty.

This survey has been endorsed by over 170 medical societies and associations. Please see the enclosed letter for the full list of medical societies and associations who have endorsed the survey.

To access the Physician Hours Survey, please go to the following website and enter your login ID and password.

Website: <https://www.PhysicianHoursSurvey.com>

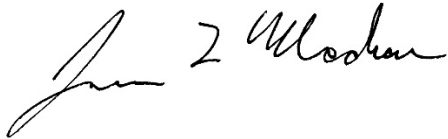
Login ID: [Username]

Password: [Password]

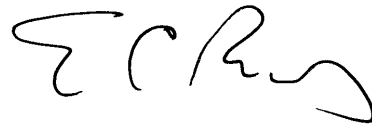
Your participation in the survey is voluntary but important. **The information you share will be kept private, reported in aggregate, and used only for the purpose of informing the national estimates of practice expense per patient care hour.** If you have any questions or trouble logging into the survey, please contact Mathematica at PhysicianHoursSurvey@mathematica-mpr.com, or via phone at 1-833-770-0010.

Thank you for participating in this important survey.

Sincerely,

Handwritten signature of James L. Madara in black ink.

James L. Madara, MD
CEO, Executive Vice President,
American Medical Association

Handwritten signature of Eugene Rich in black ink.

Eugene Rich, MD
Senior Fellow, Mathematica



INVITATION EMAIL

Subject line: Please help to update accurate physician payments

From: Physician Hours Survey

Dear Dr. [PHYSICIAN LAST NAME],

RE: [PRACTICE NAME]

We are reaching out to ask you to complete a two-minute survey on the hours and weeks of patient care you provided in 2022. This survey is part of a larger effort led by the American Medical Association (AMA) to better advocate for accurate physician payment.

Your response is critical to provide needed updates to support accurate physician payment.

A sample of practices, including [PRACTICE NAME], have been invited to participate in a separate but related survey that gathers detailed information on 2022 practice expenses. The information you and your colleagues report about total hours of patient care provided will be combined with practice expense data to develop national estimates of practice expense per hour of patient care provided for each medical specialty. This information will be shared with the Centers for Medicare & Medicaid Services in early 2025 to advocate for accurate physician payment.

Click on the link to begin the survey: [Enter Physician Hours Survey]

If you are unable to access the survey through the direct link above, or prefer to type in the link yourself, please go to the following website and enter your unique Login ID and Password, which are listed below.

Website: <https://www.PhysicianHoursSurvey.com>

Login ID: [USERNAME]

Password: [PASSWORD]

This survey has been endorsed by over 170 medical societies and associations. To see a full list of medical societies/associations that have endorsed this survey, please see [here](#). The AMA asked Mathematica, an independent research company with extensive experience in survey methods and health care delivery and practice costs, to conduct this survey.

Your participation is voluntary but important. The information you share will be kept private, reported in aggregate, and used only for the purpose of informing the national estimates of practice expense per patient care hour. If you have any questions or trouble logging into the survey, please contact Mathematica at PhysicianHoursSurvey@mathematica-mpr.com or via phone at 1-833-770-0010.

Thank you for participating in this important survey.

James L. Madara, MD
CEO, Executive Vice President,
American Medical Association

Eugene Rich, MD
Senior Fellow, Mathematica

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