## **Community Tracking Study**

## Physician Survey Instrument 2000-01 (Round Three)



600 Maryland Avenue, SW Suite 550 Washington, DC 20024 www.hschange.org

**Technical Publication No.** 

37

**May 2003** 

#### **COMMUNITY TRACKING STUDY (CTS)**

The Center for Studying Health System Change (HSC) documents changes in health care systems over time and tracks the effects of those changes on people. Through surveys and site visits, HSC seeks to describe and analyze how the interactions of providers, insurers, policy makers and others determine the accessibility, cost, and quality of locally delivered health care. The core of these efforts is HSC's Community Tracking Study (CTS), a set of periodic surveys and site visits that allows researchers to analyze information about local markets and the nation as a whole. Because health care delivery is primarily local, both the surveys and site visits are centered around communities in the U.S. In addition, because the focus of the CTS is on change as well as communities, the study is longitudinal.

#### CTS PHYSICIAN SURVEY

The CTS includes a periodic national survey of physicians. The survey samples are concentrated in 60 communities that were randomly selected to provide a representative profile of change across the U.S. Among these communities, 48 are "large" metropolitan areas (with populations greater than 200,000), from which 12 communities were randomly selected to be studied in depth. Those 12 communities have larger survey samples and also comprise the communities used for the site visits. The survey data can be used to draw conclusions for the nation and for individual communities.

The Physician Survey is a nationally representative telephone survey of non-federal, patient care physicians. Each year of the Physician Survey contains observations from more than 12,000 physicians who spend at least 20 hours a week in direct patient care. The survey is conducted by The Gallup Organization. Physician Survey questions cover a range of topics, including financial incentives, care management, acceptance of new patients, provision of charity care, practice characteristics, income and career satisfaction.

The Physician Survey has been conducted in 1996-97 (Round One), 1998-99 (Round Two) and 2000-01 (Round Three).

#### ADDITIONAL INFORMATION

For more information on the CTS Physician Survey and related HSC Technical Publications, please visit the HSC web site (www.hschange.org).

This is one in a series of technical documents that have been done as part of the Community Tracking Study being conducted by the Center for Studying Health System Change (HSC), which is funded exclusively by The Robert Wood Johnson Foundation and is affiliated with Mathematica Policy Research, Inc.

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<sup>1</sup> There is no Section E.

## CRT

#### HARD COPY REQUIRED

FINANCE, RWJ50259 F259

ROUND #3

# FIELD FINAL - AUGUST 28, 2000 (Columns are "absolute") (Revisions listed on last page)

AC6934	THE GALLUP ORGANIZATION			
PROJECT REGISTRATION #130663 THE CENTER FOR STUDYING HEALTH SYSTEM CHANGE (RWJ)	X APPROVED BY CLIENT			
Washington, D.C. Physicians Study - Round #3 Government/Max Larsen Mike Ellrich/Stacey Richter Brenda Sonksen, Specwriter August, 2000	X APPROVED BY PROJECT	Г MANA	AGER	
I.D.#:		0	(1	-6)
**AREA CODE AND TELEPHONE NUM		(649		658)
**INTERVIEW TIME:				
		(716	_	721)
	"Fone" file) (NOTE TO on "Intro" screen)			
		(232		234)

#### \*\*STATE: (Code from "Fone" file) 01 Alabama - SC 30 Montana - W 02 Alaska - W 31 Nebraska - NC 04 Arizona - W 32 Nevada - W 05 Arkansas - SC 33 New Hampshire - NE New Jersey - NE 06 California - W 34 80 Colorado - W 35 New Mexico - W 09 Connecticut - NE New York - NE 36 37 10 Delaware - SC North Carolina - SC 11 Washington D.C. - SC 38 North Dakota - NC 12 Florida - SC 39 Ohio - NC 13 40 Georgia - SC Oklahoma - SC 15 Hawaii - W 41 Oregon - W 16 Idaho - W 42 Pennsylvania - NE 17 Illinois - NC 44 Rhode Island - NE 18 Indiana - NC 45 South Carolina - SC 19 Iowa - NC 46 South Dakota - NC Kansas - NC 20 47 Tennessee - SC 21 Kentucky - SC 48 Texas - SC 22 Louisiana - SC 49 Utah - W 23 Maine - NE 50 Vermont - NE 24 Maryland - SC 51 Virginia - SC 25 Massachusetts - NE 53 Washington - W 26 Michigan - NC 54 West Virginia - SC Minnesota - NC 27 55 Wisconsin - NC 28 Mississippi - SC 56 Wyoming - W 29 Missouri - NC (213) (214)\*\*COUNTY: (Code from "Fone" file)

(274

303)

## <u>SECTION A</u> INTRODUCTION AND SCREENING

("FOI	NE" MANAGEMENT NOTE: Any T&T's should send the		
	case to a special "HOLD" category that could be reactivated by refusal converters if necessary)		
s1.	DOCTOR TYPE: (Code from "Fone" file)		
	1 MD 2 DO		(227)
S1b.	REPLICATE NUMBER: (Code from "Fone" file)		
	[SET BY JOHN SELIX]		
S1c.	PANEL: (Code from "Fone" file)		
	<pre>1 New 2 Re-interview 3 Non-respondent</pre>		(228)
(The	re are no S1d-S1f)		
S2.	DOCTOR NAME: (Code from "Fone" file)		
		(	- )
S3.	PRIMARY SPECIALTY: (Code from "Fone" file)		
		(232	- 234)
S4.	SITE NUMBER: (Code from "Fone" file)		
		(229	- 231)

			"gender"	at top of sci	reen)				
(NOTE	то	SURVENT:	Display	"doctor's	name"	and			
	1 2	Yes No						_ (2	67)
S6a.	PRES	SEND CHEC	K EXPERIMENT	: (Code from	'Fone" fi	Le)			
							(203		207)
S6.	ZIP	CODE: (	Code from "F	one" file)					
	1 2	_	ntensity tensity/Natio	nal				_ (	)
S5.	SITE	TYPE:	(Code from "	Fone" file)					

#### INTRO #1

(If code "1" or "3" in S1c, Continue;
Otherwise, Skip to "Intro #2"

Hello, Dr. (name from "Fone" file), my name is \_\_\_\_\_, from The Gallup Organization. A short time ago, you should have received a letter from the Robert Wood Johnson Foundation indicating that Gallup is conducting a national survey of physicians for the Foundation. The survey is part of a study of changes in the health care system in communities across the nation. It concerns how such changes are affecting physicians, their practices and the health care they provide to their patients.

The interview will take about 20 minutes and we are providing an honorarium of \$25 as a small token of our appreciation. All the information you provide will be kept strictly confidential. It will be used in statistical analysis and reported only as group totals. I can conduct the interview now or at any time that's convenient for you.

- O Gatekeeper soft refusal
- 1 Respondent available (Skip to #A1)
- 2 Gatekeeper not available (Set time to call back)
- 3 No longer works/Lives here (Skip to S8)
- 4 Never heard of respondent (Skip to S7)
- 5 Gatekeeper hard refusal
- 6 Answering service/Can't ever
   reach physician at this number (Skip to S11)
- 7 Physician not available (Set time to call back)
- 8 Physician soft refusal
- 9 Physician hard refusal

(1052)

#### INTRO #2

Hello, Dr. (name from "Fone" file), my name is \_\_\_\_, from The Gallup Organization. You should have received a letter from the Robert Wood Johnson Foundation indicating that Gallup would be calling you again to participate in the third round of the study of changes in the health care systems in communities across the nation. The study concerns how these changes are affecting physicians, their practices and the health care they provide to their patients.

The interview will take about twenty minutes, and we are again providing an honorarium of \$25 as a small token of our appreciation. All the information you provide will be kept strictly confidential. It will be used in statistical analysis and reported only as group totals. I can conduct the interview now, or at any time that's convenient for you.

- O Gatekeeper soft refusal
- 1 Respondent available (Skip to #A1)
- 2 Gatekeeper not available (Set time to call back)
- 3 No longer works/Lives here (Skip to S8)
- 4 Never heard of respondent (Continue)
- 5 Gatekeeper hard refusal
- 6 Answering service/Can't ever
   reach physician at this number (Skip to S11)
- 7 Physician not available (Set time to call back)
- 8 Physician soft refusal
- 9 Physician hard refusal

(1052)

S7. (If code "4" in "Intro", ask:) I would like to verify that I have reached (phone number from "Fone" file). 1 Yes - (Thank and Terminate; Skip to S11) 2 No - (INTERVIEWER READ:) I am sorry to have bothered you. - (Reset to "Intro") 3 (Thank and Terminate; (DK) Skip to "Directory Assistant") 4 (Refused) (Thank and Terminate; Skip to "Directory Assistant") (2418) S8. (If code "3" in "Intro", ask:) Dr. (response in S2) is a very important part of a medical study for the Robert Wood Johnson Foundation. Do you have the address or telephone number where I can reach (him/her)? 1 Yes - (Skip to S10) 2 No/Unknown (Continue) 3 (DK) (Continue) (Continue) 4 (Refused) (2419) (Retired) - (Thank and Terminate) (If code "2", "3" or "4" in S8, ask:) Do you S9. happen to know if the doctor is still in this area, or is (he/she) in another city? Same area - (Thank and Terminate; Skip to S11) Different city - (Continue) (DK) (Thank and Terminate; Skip to S11) (Refused) (Thank and Terminate; Skip to S11) (2420)

PHONE NUMBER AND POSSIBLE.	D ADDRESS	OR AS	MUCH	OF	IT	AS		
WORK PHONE NUMBER	<b>:</b>							
							(2421	- 243
HOME PHONE NUMBER	<b>:</b>						(2441	245
							(2441	- 243
STREET ADDRESS:							(2892	- 293
CITY:								
							(2591	- 262
STATE:								
							(2431)	(2432
ZIP CODE:								
							(2433	- 243

(All in S10, Thank and Terminate;
Call new number and reset to "Intro";
If "blank" in "WORK PHONE NUMBER" and
"HOME PHONE NUMBER" in S10, Continue)

S10. (If code "2" in S9, OR code "1" in S8:) ENTER

S11. (FDIRECTA) (If code "1", "3" or "4" in S7, OR code "6" in "Intro", OR code "1", "3" or "4" in S9, OR "blank" in "WORK PHONE NUMBER" and "HOME PHONE NUMBER" in S10:) (Call directory assistance for most recent city or area code. Ask for directory assistance using full name from "Fone" file.) (Original phone number from "Fone" file) (Original city from "Fone" file) or ("CITY" from S10) (Name from "Fone" file) 1 New number - (Enter on next screen) 2 No number/Match - (Thank and Terminate; \_\_\_\_(894) Save Case ID) (All in S11, call new number, and Reset to "Intro")

CLOCK:

- Al. Are you currently a full-time employee of a federal agency such as the U.S. Public Health Service, Veterans Administration or a military service? (Probe:) Do you receive your paychecks from a federal agency? (If respondent works parttime for a Federal Agency, ask:) Do you consider this (Federal Agency) your main practice?
  - 1 Yes (Continue)
  - 2 No (Skip to #A2)
  - 3 Retired (Thank and Terminate, and Set to "Failed Screener")
  - 4 Out of country (Thank and Terminate, and Set to "Failed Screener")
  - 5 Institutionalized (Thank and Terminate, and Set to "Failed Screener")
  - 8 (DK) (Thank and Terminate)
  - 9 (Refused) (Thank and Terminate)

(If code "1" in A1,

INTERVIEWER READ:)

In this survey, we will not be interviewing physicians who are Federal employees. So it appears that we do not need any further information from you at this time, but we thank you for your cooperation. - (Thank and Terminate)

(1053)

- A2. Are you currently a resident or fellow?
  - 1 Yes (Continue)
  - 2 No (Skip to #A3)
  - 8 (DK) (Thank and Terminate)
    9 (Refused) (Thank and Terminate) (1054)

#### (If code "1" in #A2,

#### INTERVIEWER READ:)

In this survey, we will not be interviewing physicians who are residents or fellows. So it appears that we do not need any further information from you at this time, but we thank you for your cooperation. - (Thank and Terminate)

- A3. During a TYPICAL week, do you provide direct patient care for at least twenty hours a week?

  [(If necessary, say:) Direct patient care includes seeing patients and performing surgery.] [(If necessary, say:) INCLUDE time spent on patient record-keeping, patient-related office work, and travel time connected with seeing patients. EXCLUDE time spent in training, teaching, or research, any hours on-call when not actually working, and travel between home and work at the beginning and end of the work day.]
  - 1 Yes (Skip to "Note" before #A3a)
  - 2 No (Continue)
  - 8 (DK) (Thank and Terminate)
  - 9 (Refused) (Thank and Terminate)

#### (If code "2" in #A3,

#### INTERVIEWER READ:)

In this survey, we will not be interviewing physicians who typically provide patient care for less than 20 hours a week. So it appears that we do not need any further information from you at this time, but we thank you for your cooperation. - (Thank and Terminate)

(1055)

# (If code "1" or "3" in S1c, Continue; Otherwise, Skip to #A4)

A3a.		king back to April, 1998, at that time, were a full-time employee of a federal agency?	
	1 2 8 9	Yes No (DK) (Refused)	 (1615)
A3b.	In A	pril, 1998, were you a resident or fellow?	
	1 2 8 9	Yes No (DK) (Refused)	 (1616)
A3c.		pril, 1998, were you providing direct patient for at least twenty hours a week?	
	1 2 8 9	Yes No (DK) (Refused)	(1617)
	-	(	 ( = - <b>-</b> / )

A4.	Do you currently provide patient care in one		
	practice, or more than one practice? [(If		
	<pre>necessary, say:)</pre> We consider multiple sites or		
	offices associated with the same organization to		
	be only one practice.] (INTERVIEWER NOTE #1:		
	Examples are: a private MD with a downtown and		
	suburban office is one practice; a regional		
	organization with member doctors practicing in		
	numerous satellite clinics or offices is one		
	<pre>practice; and multiple sites with DIFFERENT</pre>		
	organizations are different practices.)		
	(INTERVIEWER NOTE #2: Do not count non-patient-		
	care activity, such as teaching or administrative		
	jobs, as practices.)		
	1 One - (Skip to #A5)		
	1 One - (Skip to #A5)		
	2 More than one - (Continue)		
	8 (DK) (Skip to #A5)		
	9 (Refused) (Skip to #A5)		(1056)
	(SIIII)		(=000)
A4a.	<pre>(If code "2" in #A4, ask:) In how many different practices do you provide patient care? (Open ended and code actual number)  DK (DK) RF (Refused)</pre>		
		(1057)	(1058)
A5.	We'd like you to think about the practice location at which you spend the greatest amount of time in direct patient care. Is this practice located in (county and state from "Fone" file)? (INTERVIEWER NOTE: Surgeons should give the location of their office, not the hospital where they perform surgery.)		
	1 Yes - (Skip to "Note" before #A5b)		
	2 No (Continue)		

8

9

\_\_\_\_(2634)

(Continue)

(Continue)

(DK)

(Refused)

A5a.	(If code "2", "8" or "9" in #A5, ask:) In what county and state is the practice located. (Open ended) (VERIFY SPELLING)	
	DK (DK) RF (Refused)	
	COUNTY:	
	-	(2834 – 2858)
	STATE:	
		(2859) (2860)
	(If code "15 - Hawaii" or "02 - Alaska"  in #A5a - "State", Continue with  "Interviewer Read";  Otherwise, Skip to #A5b)	
(INT	ERVIEWER READ:)  We are not interviewing physicians in your state at this time. So it appears that we do not need any further information from you, but we thank you for your cooperation.  - (Thank and Terminate)	
A5b.	What is the zip code of your practice? (Open ended and code all five digits of zip code)	
	99998 (DK) 99999 (Refused)	
		(1618 - 1622)

#### (If code "2" in S1c, Skip to #A7; Otherwise, Continue)

A6.		_		_	_			_		
	complet	ing	your 1	underg	gradua	ate ar	ıd gr	raduate	medi	cal
	trainin	g?	(INTE	RVIEW	ER N	OTE:	Α	reside	ency	or
	fellows	hip	would	be	consi	idered	gr	aduate	medi	cal
	trainin	g.)	(Open	ended	d and	code	all	four d	igits	of
	year)	TON)	E TO	SURV	ENT:	Force	e iı	ntervie	wers	to
	enter F	OUR	DIGITS	5)						

DK (DK) RF (Refused)

(1623 - 1626)

#### (If code "999" in S3, Skip to #A8; Otherwise, Continue)

- A7. We have your primary specialty listed as <u>(response in S3)</u>. Is this correct? [<u>(If necessary, say:)</u> We define primary specialty as that in which the most hours are spent weekly.]
  - 1 Yes (Autocode response in S3 into #A8)
  - 2 No (Continue)
  - 8 (DK) (Thank and Terminate)
  - 9 (Refused) (Thank and Terminate)

(1065)

A8. (If code "2" or "blank" in #A7, ask:) What is your primary specialty? [(If necessary, say:) We define primary specialty as that in which the most hours are spent weekly.] (Open ended and code from hard copy) (INTERVIEWER NOTE: Probe for codeable response)

#### (If code "1" in S1 [MD-AMA LIST])

301 202	Abdominal Radiology AIDS/HIV Specialist	(AR)
001	Allergy	(A)
133	Adolescent Medicine Pediatrics	(ADL)
127	Addiction Medicine	(ADM)
132	Addiction Psychiatry	(ADP)
002	Allergy & Immunology	(AI)
003	Allergy & Immunology/	(211)
	Diagnostic Laboratory Immunology	(ALI)
005	Aerospace Medicine	(AM)
085	Adolescent Medicine (Internal Medicine)	(AMI)
006	Anesthesiology	(AN)
007	Pain Management	(APM)
026	Abdominal Surgery	(AS)
103	Anatomic Pathology	(ATP)
104	Bloodbanking/Transfusion Medicine	(BBK)
190	Cardiovascular Surgery	(CDS)
049	Clinical Biochemical Genetics	(CBG)
800	Critical Care Medicine (Anesthesiology)	(CCA)
050	Clinical Cytogenetics	(CCG)
191	Craniofacial Surgery	(CFS)
128	Critical Care Medicine (Internal	
	Medicine)	(CCM)
086	Critical Care Pediatrics	(CCP)
027	Critical Care Surgery	(CCS)
009	Cardiovascular Disease	(CD)
051	Clinical Genetics	(CG)
054	Child Neurology	(CHN)
010	Child & Adolescent Psychiatry	(CHP)
105	Clinical Pathology	(CLP)
052	Clinical Molecular Genetics	(CMG)
055	Clinical Neurophysiology	(CN)
011	Colon & Rectal Surgery	(CRS)
124	Cardiothoracic Surgery	(CTS)
012	Dermatology	(D)
164	Dermatologic Surgery	(DS)
013	Clinical & Laboratory	(DDT )
025	Dermatological Immunology	(DDL)
035	Diabetes	(DIA)

106	Dermatopathology	(DMP)
014	Diagnostic Radiology	(DR)
015	Emergency Medicine	(EM)
308	Internal Medicine/Emergency Medicine	(MEM)
036	Endocrinology, Diabetes & Metabolism	(END)
302	Epidemiology	(EP)
016	Sports Medicine (Emergency Medicine)	(ESM)
140	Medical Toxicology (Emergency	
	Medicine)	(ETX)
303	Flex Residents	(FLX)
018	Forensic Pathology	(FOP)
019	Family Practice	(FP)
020	Geriatric Medicine (Family Practice)	(FPG)
078	Facial Plastic Surgery	(FPS)
021	Sports Medicine (Family Practice)	(FSM)
022	Gastroenterology	(GE)
061 023	Gynecological Oncology General Practice	(GO)
023	General Practice General Preventive Medicine	(GP) (GPM)
024	General Surgery	(GS)
062	Gynecology	(GYN)
037	Hematology	(HEM)
038	Hepatology	(HEP)
107	Hematology Pathology	(HMP)
030	Head & Neck Surgery	(HNS)
136	Hematology/Oncology	(HO)
070	Hand Surgery Orthopedics	(HSO)
101	Hand Surgery Plastic	(HSP)
031	Hand Surgery	(HSS)
201	Hospitalists	
039	Clinical Cardiac Electrophysiology	(ICE)
040	Infectious Diseases	(ID)
004	Immunology	(IG)
041	Clinical & Laboratory Immunology (IM)	(ILI)
042	Internal Medicine	(IM)
194	Interventional Cardiology	(IC)
043	Geriatric Medicine (IM)	(IMG)
044	Sports Medicine	(ISM)
309	Sports Medicine (Physical Medicine	/ TD TATA (
120	and Rehabilitation) (IM)	(PMM)
129 138	Legal Medicine Medical Management	(LM)
063	Maternal & Fetal Medicine	(MDM) (MFM)
304	Maxillofacial Radiology	(MXR)
053	Medical Genetics	(MG)
108	Medical Microbiology	(MM)
195	Internal Medicine/Family Practice	(IFP)
± / J	THE CHICAL TICAL CHIC / LAMILLY LLACOLOC	( /

137	Internal Medicine/Pediatrics	(MPD)
099	Public Health & General	
	Preventive Medicine	(MPH)
056	Neurology	(N)
310	Internal Medicine/Neurology	(MN)
311	Neurology/Physical Medicine	(1114)
711	and Rehabilitation	(NPR)
058	Critical Care Medicine (Neurosurgery)	
		(NCC)
045	Nephrology	(NEP)
057	Nuclear Medicine	( NM )
109	Neuropathology	(NP)
087	Neonatal/Perinatal Medicine	(NPM)
117	Nuclear Radiology	(NR)
305	Neurology/Diagnostic Radiology/	
	Neuroradiology	(NRN)
059	Neurological Surgery	(NS)
060	Pediatric Neurosurgery	(NSP)
046	Nutrition	(NTR)
071	Adult Reconstructive Orthopedics	(OAR)
064	Obstetrics & Gynecology	(OBG)
065	Obstetrics	(OBS)
066	OB Critical Care Medicine	(OCC)
134	Foot & Ankle Orthopedics	(OFA)
068	Occupational Medicine	(OM)
072		
	Musculoskeletal Oncology	(OMO)
047	Medical Oncology	(ON)
073	Pediatric Orthopedics	(OP)
069	Ophthalmology	(OPH)
074	Orthopedic Surgery	(ORS)
028	Other Specialty	(OS)
075	Sports Medicine (Orthopedic Surgery)	(OSM)
076	Orthopedic Surgery of the Spine	(OSS)
079	Otology	(OT)
197	Otology/Neurotology	(NO)
080	Otolaryngology	(OTO)
077	Orthopedic Trauma	(OTR)
082	Psychiatry	(P)
312	Psychiatry/Family Practice	(FPP)
313	Internal Medicine/Psychiatry	(MP)
130	Clinical Pharmacology	(PA)
147	Pulmonary Critical Care Medicine	(PCC)
110	Chemical Pathology	(PCH)
111	Cytopathology	(PCP)
088	Pediatrics	(PD)
089	Pediatric Allergy	(PDA)
306	Pediatric Anesthesiology (Pediatrics)	(PAN)
098	Pediatric Cardiology	(PDC)
0 7 0	rearactic caratorogy	(100)

198	Pediatric Cardiothoracic Surgery	(PCS)
193	Pediatric Emergency Medicine	(EMP)
090	Pediatric Endocrinology	(PDE)
145	Pediatric Infectious Diseases	(PDE)
081	Pediatric Otolaryngology	(PDO)
091	Pediatric Pulmonology	(PDP)
192	Pediatrics/Psychiatry/Child &	( === )
	Adolescent Ps	(CPP)
118	Pediatric Radiology	(PDR)
032	Pediatric Surgery	(PDS)
139	Medical Toxicology (Pediatrics)	(PDT)
144	Pediatric Emergency Medicine	(PE)
017	Pediatric Emergency Medicine	
	(Pediatrics)	(PEM)
135	Forensic Psychiatry	(PFP)
092	Pediatric Gastroenterology	(PG)
093	Pediatric Hematology/Oncology	(PHO)
112	Immunopathology	(PIP)
094	Clinical & Laboratory Immunology	
	(Pediatrics)	(PLI)
143	Palliative Medicine	(PLM)
100	Physical Medicine & Rehab	(PM)
314	Internal Medicine/Physical Medicine	, ,
	& Rehabilitation	(MPM)
200	Physical Medicine & Rehabilitation	(/
	(Pediatrics)	(PMP)
142	Pain Medicine	(PMD)
095	Pediatric Nephrology	(PN)
146	Pediatric Opthalmology	(PO)
113	Pediatric Pathology	(PP)
096	Pediatric Rheumatology	(PPR)
102	Plastic Surgery/Cosmetic Surgery	(PFR)
199	Pharmaceutical Medicine	
307	Public Health	(PHM)
		(PH)
097	Sports Medicine (Pediatrics)	(PSM)
114	Anatomic/Clinical Pathology	(PTH)
141	Medical Toxicology (Preventive	, ·
	Medicine)	(PTX)
116	Pulmonary Diseases	(PUD)
196	Internal Medicine/Preventive Medicine	(IPM)
083	Psychoanalysis	(PYA)
084	Geriatric Psychiatry	(PYG)
119	Radiology	(R)
067	Reproductive Endocrinology	(REN)
048	Rheumatology	(RHU)
115	Radioisotopic Pathology	(RIP)
120	Neuroradiology	(RNR)

123	Radiation Oncology	(RO)
121	Radiological Physics	(RP)
150	Spinal Cord Injury	(SCI)
149	Sleep Medicine	(SM)
151	Surgical Oncology	(SO)
148	Selective Pathology	(SP)
033	Trauma Surgery	(TRS)
152	Transplant Surgery	(TTS)
125	Urology	(U)
025	Undersea Medicine	(UM)
126	Pediatric Urology	(UP)
131	Unspecified	(US)
122	Vascular & Interventional Radiology	(VIR)
165	Vascular Medicine	(VM)
034	Vascular Surgery	(VS)
210	Developmental & Behavioral Pediatrics	(DBP)
159	Proctology	(PRO)
124	Thoracic Surgery	(TS)
997	Other (list) - (USE VERY SPARINGLY;	
	Thank and Terminate)	
998	(DK) (Thank and Terminate	2)
999	(Refused) (Thank and Terminate	-
222	(nerused) (illatik and lerilitiate	= /
		(1066 - 1068)

## (If code "2" in S1 [DO-AOA LIST])

301	Abdominal Radiology	AR	
202	AIDS/HIV Specialist		
002	Allergy and Immunology	ΑI	
003	Allergy-Diagnostic Lab Immunology	ALI	
004	Immunology	IG	
005	Preventive Medicine-Aerospace Medicine	AM	
006	Anesthesiology	AN	
006	Anesthesiology	CAN	
006	Anesthesiology	IRA	
006	Anesthesiology	OBA	
006	Anesthesiology	PAN	
007	Pain Management	APM	
007	Pain Management	PMR	
008	Critical Care-Anesthesiology	CCA	
009	Cardiovascular Diseases-Cardiology	С	
009	Cardiovascular Diseases-Cardiology	CVD	
009	Cardiovascular Diseases-Cardiology	IC	
190	Cardiovascular Surgery	CDS	
191	Craniofacial Surgery	CFS	
010	Pediatric Psychiatry	CHP	
010	Pediatric Psychiatry	PDP	
011	Colon & Rectal Surgery	CRS	
012	Dermatology	D	
015	Emergency Medicine	EM	
014	Diagnostic Radiology	DR	
308	Internal Medicine/Emergency Medicine		MEM
015	Emergency Medicine	EMS	
015	Emergency Medicine	FEM	
015	Emergency Medicine	IEM	
302	Epidemiology	EP	
016	Sports Medicine (Emergency Medicine)		ESM
017	Pediatric Emergency Medicine	PEM	
303	Flex Residents	FLX	
018	Forensic Pathology	FOP	
019	Family Practice	FP	
019	Family Practice	UFP	
020	Geriatrics-General or Family Practice	GFP	
020	Geriatrics-General or Family Practice	GGP	
021	Sports Medicine-Family or General Practice	SFP	
021	Sports Medicine-Family or General Practice	SGP	
022	Gastroenterology	GE	
023	General Practice	GP	
		Ŭ-	

024	Preventive Medicine	PVM
025	Undersea Medicine	UM
026	Abdominal Surgery	AS
027	Critical Care-Surgery or Trauma	CCS
027	Critical Care-Surgery or Trauma	CCT
028	Other Specialty	OS
029	Surgery-General	S
030	Head & Neck Surgery	HNS
031	Hand Surgery	HS
031	Hand Surgery	HSS
201	Hospitalists	
032	Pediatric Surgery	PDS
033	Traumatic Surgery	TRS
034	Vascular Surgery-General or Peripheral	GVS
034	Vascular Surgery-General or Peripheral	PVS
036	Endocrinology	END
037	Hematology	HEM
039	Cardiac Electrophysiology	ICE
040	Infectious Diseases	ID
041	Diag Lab Immunology-Int Med	ILI
042	Internal Medicine	IM
194	Interventional Cardiology	IC
195	Internal Medicine/Family Practice	IFP
042	Internal Medicine	IP
043	Geriatrics-Internal Medicine	GER
309	Geriatrics-Internal Medicine	GIM
044	Sports Medicine (Physical Medicine &	
	Rehabilitation)	PMM
044	Sports Medicine	ISM
044	Sports Medicine	PMS
044	Sports Medicine	RMS
044	Sports Medicine	SM
045	Nephrology	NEP
046	Nutrition	NTR
047	Oncology	ON
048	Rheumatology	RHU
050	Clinical Cytogenetics	CCG
051	Clinical Genetics	CG
053	Medical Genetics	IMG
054	Pediatric or Child Neurology	CHN
054	Pediatric or Child Neurology	PDN
055	Clinical Neurophysiology	CN

056	Neurology	N
310	Internal Medicine/Neurology	MN
311	Neurology/Physical Medicine & Rehab	NPR
056	Neurology	NMD
056	Neurology	NP
056	Neurology	NPN
305	Neurology/Diagnostic Radiology/	
	Neuroradiology	NRN
057	Nuclear Medicine	NI
057	Nuclear Medicine	NM
057	Nuclear Medicine	NV
058	Critical Care-Neuro Surgery	NCC
059	Neurological Surgery	NS
061	Gynecological Oncology	GO
062	Gynecology	GS
062	Gynecology	GYN
063	Maternal & Fetal Medicine	MFM
304	Maxillofacial Radiology	MXR
064	Obstetrics & Gynecology	OBG
064	Obstetrics & Gynecology	OGS
065	Obstetrics	OBS
066	Critical Care-Obstetrics & Gynecology	OCC
067	Reproductive Endocrinology	RE
068	Occupational Medicine	OCM
068	Occupational Medicine	MO
069	Ophthalmology	COR
069	Ophthalmology	OAS
069	Ophthalmology	OCR
069	Ophthalmology	OGL
069	Ophthalmology	OPH
069	Ophthalmology	VRS
070	Hand Surgery-Orthopedic Surg	HSO
071	Adult Reconstructive Orthopedics	OAR
072	Musculoskeletal Oncology	OMO
073	Pediatric Orthopedics	OP
074	Orthopedic Surgery	AJI
074	Orthopedic Surgery	OR
074	Orthopedic Surgery	ORS
075	Sports Medicine-Orthopedic Surgery	OSM
076	Orthopedic Surgery-Spine	OSS
078	Facial Plastic Surgery	OPL
080	Otolaryngology or Rhinology	OTL
080	Otolaryngology or Rhinology	OTR
080	Otolaryngology or Rhinology	RHI
197	Otology/Neurotology	NO

081	Pediatric Otolaryngology	PDO
082	Psychiatry	P
312	Psychiatry/Family Practice	FPP
313	Psychiatry/Internal Medicine	MP
083	Psychoanalysis	PYA
084	Geriatric Psychiatry	PYG
085	Adolescent Medicine-Family or	
	General Practice	AFP
085	Adolescent Medicine-Family or	
	General Practice	AGP
086	Pediatric Intensive Care	PIC
087	Neonatology	NE
088	Pediatrics	PD
089	Pediatric Allergy & Immunology	PAI
306	Pediatric Anesthesiology (Pediatrics)	PAN
091	Pediatric Pulmology Medicine	PDX
198	Pediatric Cardiothoracic Surgery	PCS
092	Pediatric Gastroenterology	PG
093	Pediatric Hematology-Oncology	PHO
094	Pediatric Diag Lab Immunology	PLI
095	Pediatric Nephrology	PNP
192	Pediatrics/Psychiatry/Child & Adolescent Ps	CPP
096	Pediatric Rheumatology	PPR
097	Sports Medicine - Pediatrics	PSM
098	Pediatric Cardiology	PDC
099	Preventive Medicine, Epidemiology	
	or Public Health	EPI
099	Preventive Medicine, Epidemiology	
	or Public Health	OE
099	Preventive Medicine, Epidemiology	
	or Public Health	PH
099	Preventive Medicine, Epidemiology	
	or Public Health	PHP
199	Pharmaceutical Medicine	PHM
100	Physical Medicine & Rehabilitation	PM
100	Physical Medicine & Rehabilitation	IAR
100	Physical Medicine & Rehabilitation	PDR
314	Internal Medicine/Physical Medicine &	
	Rehabilitation	MPM
100	Physical Medicine & Rehabilitation	RM
200	Physical Medicine & Rehabilitation	
	(Pediatrics)	PMP
101	Hand Surgery-Plastic Surg	HSP
102	Plastic Surgery	OOP
102	Plastic Surgery	PLR
103	Anatomic Pathology	AP

104	Blood Banking-Transfusion Medicine	BBT
104	Blood Banking-Transfusion Medicine	LBM
105	Clinical Pathology	CLP
106	Dermatopathology	DPT
107	Hematology-Pathology	HEP
108	Medicine Microbiology	MMB
109	Neuropathology	NPT
110	Chemical Pathology	CP
111	Cytopathology	CY
112	Immunopathology	IPT
113	Pediatric Pathology	PP
114	Anatomic/Clinical Pathology	APL
114	Anatomic/Clinical Pathology	PTH
115	Radioisotopic Pathology	RIP
307	Public Health	PH
196	Internal Medicine/Preventive Medicine	IPM
116	Pulmonary Diseases	PUD
116	Pulmonary Diseases	PUL
117	Nuclear Radiology	NR
118	Pediatric Radiology	PRD
119	Radiology	DUS
119	Radiology	R
119	Radiology	RI
119	Radiology	RT
119	Radiology	RTD
120	Neuroradiology	NRA
121	Radiological Physics	RP
122	Angiography & Intervent'l Radiology	ANG
122	Angiography & Intervent'l Radiology	SCL
123	Radiation Oncology	RO
123	Radiation Oncology	TR
124	Cardiovascular or Thoracic	
	Cardiovascular Surgery	CVS
124	Cardiovascular or Thoracic	
	Cardiovascular Surgery	TS
125	Urology	U
125	Urology	URS
126	Pediatric Urology	UP
127	Addictive Diseases	ADD
128	Critical Care-Medicine	CCM
129	Legal Medicine	LМ
130	Clinical Pharmacology	PA
131	Unknown Blank	
133	Adolescent Medicine	ADL
134	Orthopedic Foot & Ankle Surg	OFA
135	Forensic Psychiatry	FPS

136 137 139 142 145 146 147 153 154 155 156 157 158 159 160 161 162 209	Internal Med-Pediatrics Toxicology Psychosomatic Medicine Pediatric Infectious Diseases Pediatric Ophthalmology Pulmonary-Critical Care MOHS Micrographic Surgery Hair Transplant Osteo Manipulative Treat +1 Osteopathic Manipulative Medicine Sports Medicine - OMM Osteo Manipulative Medicine Proctology Internship Retired Transitional Year Nuclear Cardiology	HEO IPD TX PYM PID PO PUC DMS HT OM1 OMM OMS OMT PRO IN RET TY NC	
210	±	DBP	
159 124	Proctology Thoracic Surgery	PRO TS	
997	Other (list) - (USE VERY SPARINGLY; Thank and Terminate)		
998 999	(DK) (Thank and Terminate) (Refused) (Thank and Terminate)		
		(1066 –	1068)

(If code "003", "005-007", "013-014", "018", "025",

"028", "057", "099", "103-115", "117-122", "129131", "135", "138-141", "148", "160-162", "209" or
"301-307" in #A8,

In this survey, we are only interviewing physicians in certain specialties, and your specialty is not among those being interviewed. So, it appears that we do not need any further information from you at this time, but we thank you for your cooperation. - (Thank and Terminate)

(If code "201" in #A8, Skip to #A17;

If code "042", "088", "137" or "195" in #A8, Continue;

If code "001-002", "004", "009", "012", "015-016",

"020-022", "024", "035-041", "043-048", "055-056",

"085", "116", "128", "136", "142", "143",

"147", "149", "194", "196", "199", "308",

"310", "314" or "313" in #A8,

Skip to #A9a;

If code "017", "049-054", "063", "086-087",

"089-094", "095-098", "133", "144-145",

"192", "193", "200" or "210" in #A8,

Skip to #A9b;
Otherwise, Skip to #A15)

- A9. (If code "042", "088", "137" or "195" in #A8, ask:) Do you spend more hours weekly in general (response in #A8), or a subspecialty in (response in #A8)? (INTERVIEWER NOTE: If respondent says "50/50 split", code as "1")
  - 1 General (Skip to #A15)
  - Subspecialty (including adolescent
    medicine or geriatrics) (Skip to #A10)
  - 8 (DK) (Skip to #A15) 9 (Refused) (Skip to #A15) \_\_\_\_ (1069)

- A9a. (If code "001-002", "004", "009", "012", "015-016", "020-022", "024", "035-041", "043-048", "055-056", "085", "116", "128", "136", "142", "143", "147", "149", "194", "196", "199", "308", "310", "313" OR "314" in #A8, ask:) Do you spend most of your time practicing in (response in #A8), or in general internal medicine? (NOTE TO INTERVIEWER: If respondent says "50/50 split", code as "1")
  - 1 Subspecialty
  - 2 General internal medicine (or general family practice)
  - 3 General pediatrics
  - 8 (DK)
  - 9 (Refused)

(2720)

#### (All in #A9a, Skip to #A15)

- A9b. If code "017", "049-054", "063", "086-087", "089-098", "133", "144-145", "192", "193", "200" or "210" in #A8, ask:) Do you spend most of your time practicing in (response in #A8), or in general pediatrics? (NOTE TO INTERVIEWER: If respondent says "50/50 split", code as "1")
  - 1 Subspecialty
  - 2 General internal medicine (General Family Practice)
  - 3 General pediatrics
  - 8 (DK)
  - 9 (Refused)

(1357)

#### (All in #A9b, Skip to #A15)

Al0. (If code "2" in #A9, ask:) And what is that subspecialty? (If "More than one", say:) We're interested in the one in which you spend the most hours weekly. (Open ended and code from hard copy) (CHECK SPELLING)

#### (If code "1" in S1 [MD-AMA LIST])

301 202	Abdominal Radiology AIDS/HIV Specialist	(AR)
001	Allergy	(A)
133	Adolescent Medicine Pediatrics	(ADL)
127	Addiction Medicine	(ADM)
132	Addiction Psychiatry	(ADP)
002	Allergy & Immunology	(AI)
003	Allergy & Immunology/	
	Diagnostic Laboratory Immunology	(ALI)
005	Aerospace Medicine	(AM)
085	Adolescent Medicine (Internal Medicine)	(AMI)
006	Anesthesiology	(AN)
007	Pain Management	(APM)
026	Abdominal Surgery	(AS)
103	Anatomic Pathology	(ATP)
104	Bloodbanking/Transfusion Medicine	(BBK)
190	Cardiovascular Surgery	(CDS)
049	Clinical Biochemical Genetics	(CBG)
800	Critical Care Medicine (Anesthesiology)	(CCA)
050	Clinical Cytogenetics	(CCG)
191	Craniofacial Surgery	(CFS)
128	Critical Care Medicine (Internal	
	Medicine)	(CCM)
086	Critical Care Pediatrics	(CCP)
027	Critical Care Surgery	(CCS)
009	Cardiovascular Disease	(CD)
051	Clinical Genetics	(CG)
054	Child Neurology	(CHN)
010	Child & Adolescent Psychiatry	(CHP)
105	Clinical Pathology	(CLP)
052	Clinical Molecular Genetics	(CMG)
055	Clinical Neurophysiology	(CN)
011	Colon & Rectal Surgery	(CRS)
124	Cardiothoracic Surgery	(CTS)
012	Dermatology	(D)
164 013	Dermatologic Surgery	(DS)
013	Clinical & Laboratory Dermatological Immunology	(DDL)
035	Diabetes	(DIA)
033	DIADECES	(DIA)

106	Dermatopathology	(DMP)
014	Diagnostic Radiology	(DR)
015	Emergency Medicine	(EM)
308	Internal Medicine/Emergency Medicine	(MEM)
036	Endocrinology Diabetes & Metabolism	(END)
302	Epidemiology	(EP)
016	Sports Medicine (Emergency Medicine)	(ESM)
140	Medical Toxicology (Emergency	
	Medicine)	(ETX)
303	Flex Residents	(FLX)
018	Forensic Pathology	(FOP)
019	Family Practice	(FP)
020	Geriatric Medicine (Family Practice)	(FPG)
078	Facial Plastic Surgery	(FPS)
021	Sports Medicine (Family Practice)	(FSM)
022	Gastroenterology	(GE)
061	Gynecological Oncology	(GO)
023	General Practice	(GP)
024	General Preventive Medicine	(GPM)
029 062	General Surgery	(GS)
082	Gynecology Hematology	(GYN) (HEM)
037	Hepatology	(HEP)
107	Hematology Pathology	(HMP)
030	Head & Neck Surgery	(HNS)
136	Hematology/Oncology	(HO)
070	Hand Surgery Orthopedics	(HSO)
101	Hand Surgery Plastic	(HSP)
031	Hand Surgery	(HS)
201	Hospitalists	, ,
039	Cardiac Electrophysiology	(ICE)
040	Infectious Diseases	(ID)
004	Immunology	(IG)
041	Clinical & Laboratory Immunology (IM)	(ILI)
042	Internal Medicine	(IM)
194	Interventional Cardiology	(IC)
043	Geriatric Medicine (IM)	(IMG)
044	Sports Medicine	(ISM)
309	Sports Medicine (Physical Medicine	
	and Rehabilitation) (IM)	(PMM)
129	Legal Medicine	(LM)
138	Medical Management	(MDM)
063	Maternal & Fetal Medicine	(MFM)
304	Maxillofacial Radiology	(250)
053	Medical Genetics	(MG)
108	Medical Microbiology	(MM)
195	Internal Medicine/Family Practice	(IFP)

137	Internal Medicine/Pediatrics	(MPD)
099	Public Health & General	( /
	Preventive Medicine	(MPH)
056	Neurology	(N)
310	Internal Medicine/Neurology	(MN)
311	Neurology/Physical Medicine	
	and Rehabilitation	(NPR)
058	Critical Care Medicine (Neurosurgery)	(NCC)
045	Nephrology	(NEP)
057	Nuclear Medicine	( NM )
109	Neuropathology	(NP)
087	Neonatal/Perinatal Medicine	(NPM)
117	Nuclear Radiology	(NR)
305	Neurology/Diagnostic Radiology/	/ NTDNT \
059	Neuroradiology Neurological Surgery	(NRN) (NS)
060	Pediatric Neurosurgery	(NSP)
046	Nutrition	(NTR)
071	Adult Reconstructive Orthopedics	(OAR)
064	Obstetrics & Gynecology	(OBG)
065	Obstetrics	(OBS)
066	OB Critical Care Medicine	(OCC)
134	Foot & Ankle Orthopedics	(OFA)
068	Occupational Medicine	(MO)
072	Musculoskeletal Oncology	(OMO)
047	Medical Oncology	(ON)
073	Pediatric Orthopedics	(OP)
069	Ophthalmology	(OPH)
074	Orthopedic Surgery	(ORS)
028	Other Specialty	(OS)
075	Sports Medicine (Orthopedic Surgery)	(OSM)
076	Orthopedic Surgery of the Spine	(OSS)
079	Otology	(OT)
197	Otology/Neurotology	(NO)
080	Otolaryngology	(OTO)
077	Orthopedic Trauma	(OTR)
082 312	Psychiatry Psychiatry/Family Practice	(P) (FPP)
313	Internal Medicine/Psychiatry	(MP)
130	Clinical Pharmacology	(PA)
147	Pulmonary Critical Care Medicine	(PCC)
110	Chemical Pathology	(PCH)
111	Cytopathology	(PCP)
088	Pediatrics	(PD)
089	Pediatric Allergy	(PDA)
306	Pediatric Anesthesiology (Pediatrics)	(PRN)
098	Pediatric Cardiology	(PDC)

100		(= ~ ~ )
198	Pediatric Cardiothoracic Surgery	(PCS)
193	Pediatric Emergency Medicine	(EMP)
090	Pediatric Endocrinology	(PDE)
145	Pediatric Infectious Diseases	
		(PDI)
081	Pediatric Otolaryngology	(PDO)
091	Pediatric Pulmonology	(PDP)
192	Pediatrics/Psychiatry/Child &	,
172		(
	Adolescent Ps	(CPP)
118	Pediatric Radiology	(PDR)
032	Pediatric Surgery	(PDS)
139	Medical Toxicology (Pediatrics)	(PDT)
	_ = -	
144	Pediatric Emergency Medicine	(PE)
017	Pediatric Emergency Medicine	
	(Pediatrics)	(PEM)
135	Forensic Psychiatry	(PFP)
092	Pediatric Gastroenterology	(PG)
093	Pediatric Hematology/Oncology	(PHO)
112	Immunopathology	(PIP)
094	Clinical & Laboratory Immunology	
0,71	(Pediatrics)	( DT T )
	,	(PLI)
143	Palliative Medicine	(PLM)
100	Physical Medicine & Rehab	(PM)
314	Internal Medicine/Physical Medicine	
	& Rehabilitation	(MPM)
200		(1.11 1.1)
200	Physical Medicine & Rehabilitation	, ,
	(Pediatrics)	(PMP)
142	Pain Medicine	(PMD)
095	Pediatric Nephrology	(PN)
146	Pediatric Opthalmology	(PO)
113	Pediatric Pathology	(PP)
096	Pediatric Rheumatology	(PPR)
102	Plastic Surgery/Cosmetic Surgery	(PS)
199	Pharmaceutical Medicine	(PHM)
307	Public Health	(PH)
097	Sports Medicine (Pediatrics)	(PSM)
114	Anatomic/Clinical Pathology	(PTH)
141	Medical Toxicology (Preventive	
	Medicine)	(PTX)
116	·	
116	Pulmonary Diseases	(PUD)
196	Internal Medicine/Preventive Medicine	(IPM)
083	Psychoanalysis	(PYA)
084	Geriatric Psychiatry	(PYG)
119	Radiology	(R)
067	Reproductive Endocrinology	(REN)
048	Rheumatology	(RHU)
115	Radioisotopic Pathology	(RIP)
120	Neuroradiology	(RNR)
<b>⊥</b> ∠∪	MEGITOTAGITOTOGY	( LINE )

123	Radiation Oncology	(RO)
121	Radiological Physics	(RP)
150	Spinal Cord Injury	(SCI)
149	Sleep Medicine	(SM)
151	Surgical Oncology	(SO)
148	Selective Pathology	(SP)
033	Trauma Surgery	(TRS)
152	Transplant Surgery	(TTS)
125	Urology	(U)
025	Undersea Medicine	(UM)
126	Pediatric Urology	(UP)
131	Unspecified	(US)
122	Vascular & Interventional Radiology (VIR)	
165	Vascular Medicine	(VM)
034	Vascular Surgery	(VS)
210	Developmental Medicine/Pediat	rics (DBP)
159	Proctology	(PRO)
124	Thoracic Surgery	(TS)
997		
	Thank and Terminate)	
998	(DK) (Thank ar	nd Terminate)
	•	
999	(Refused) (Thank and Terminate)	
		(1070 - 1072)

# (If code "2" in S1 [DO-AOA LIST])

301	Abdominal Radiology	AR	
202	AIDS/HIV Specialist	7. T	
002	Allergy and Immunology	AI	
003 004	Allergy-Diagnostic Lab Immunology	ALI IG	
004	Immunology Preventive Medicine-Aerospace Medicine	AM	
005	Anesthesiology	AN	
006	Anesthesiology	CAN	
006	Anesthesiology	IRA	
006	Anesthesiology	OBA	
006	Anesthesiology	PAN	
007	Pain Management	APM	
007	Pain Management	PMR	
007	Critical Care-Anesthesiology	CCA	
009	Cardiovascular Diseases-Cardiology	C	
009	Cardiovascular Diseases Cardiology	CVD	
009	Cardiovascular Diseases Cardiology	IC	
190	Cardiovascular Surgery	CDS	
191	Craniofacial Surgery	CFS	
010	Pediatric Psychiatry	CHP	
010	Pediatric Psychiatry	PDP	
011	Colon & Rectal Surgery	CRS	
012	Dermatology	D	
015	Emergency Medicine	EM	
014	Diagnostic Radiology	DR	
308	Internal Medicine/Emergency Medicine	DIC	MEM
015	Emergency Medicine	EMS	тшт
015	Emergency Medicine	FEM	
015	Emergency Medicine	IEM	
302	Epidemiology	EP	
016	Sports Medicine (Emergency Medicine)		ESM
017	Pediatric Emergency Medicine	PEM	цон
303	Flex Residents	FLX	
018	Forensic Pathology	FOP	
019	Family Practice	FP	
019	Family Practice	UFP	
020	Geriatrics-General or Family Practice	GFP	
020	Geriatrics-General or Family Practice	GGP	
021	Sports Medicine-Family or General Practice	SFP	
021	Sports Medicine-Family or General Practice	SGP	
022	Gastroenterology	GE	
023	General Practice	GP	

027 Critical Care-Surgery or Trauma Country On Surgery-General Surgery On Head & Neck Surgery His On Hand Surgery	CS CT S
201 Hospitalists 032 Pediatric Surgery	DS
	RS
	VS
3 1	VS
3 1	ND
037 Hematology H	EM
039 Cardiac Electrophysiology I	CE
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51	C
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	P
	ER
	IM
044 Sports Medicine (Physical Medicine &	T. // T. //
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<u>-</u>	SM
<u>-</u>	MS MS
<u>-</u>	M M
<u>-</u>	EΡ
	TR
047 Oncology Oi	
	HU
91	CG
	G
	MG
054 Pediatric or Child Neurology C	HN
054 Pediatric or Child Neurology Pi	DN
055 Clinical Neurophysiology C	N

056	Neurology	N
310	Internal Medicine/Neurology	MN
311	Neurology/Physical Medicine & Rehab	NPR
056	Neurology	NMD
056	Neurology	NP
056	Neurology	NPN
305	Neurology/Diagnostic Radiology/	
	Neuroradiology	NRN
057	Nuclear Medicine	NI
057	Nuclear Medicine	NM
057	Nuclear Medicine	NV
058	Critical Care-Neuro Surgery	NCC
059	Neurological Surgery	NS
061	Gynecological Oncology	GO
062	Gynecology	GS
062	Gynecology	GYN
063	Maternal & Fetal Medicine	MFM
304	Maxillofacial Radiology	MXR
064	Obstetrics & Gynecology	OBG
064	Obstetrics & Gynecology	OGS
065	Obstetrics	OBS
066	Critical Care-Obstetrics & Gynecology	OCC
067	Reproductive Endocrinology	RE
068	Occupational Medicine	OCM
068	Occupational Medicine	MO
069	Ophthalmology	COR
069	Ophthalmology	OAS
069	Ophthalmology	OCR
069	Ophthalmology	OGL
069	Ophthalmology	OPH
069	Ophthalmology	VRS
070	Hand Surgery-Orthopedic Surg	HSO
071	Adult Reconstructive Orthopedics	OAR
072	Musculoskeletal Oncology	OMO
073	Pediatric Orthopedics	OP
074	Orthopedic Surgery	AJI
074	Orthopedic Surgery	OR
074	Orthopedic Surgery	ORS
075	Sports Medicine-Orthopedic Surgery	OSM
076	Orthopedic Surgery-Spine	OSS
078	Facial Plastic Surgery	OPL
080	Otolaryngology or Rhinology	OTL
080	Otolaryngology or Rhinology	OTR
080	Otolaryngology or Rhinology	RHI
197	Otology/Neurotology	NO

081	Pediatric Otolaryngology	PDO
082	Psychiatry	P
312	Psychiatry/Family Practice	FPP
313	Psychiatry/Internal Medicine	MP
083	Psychoanalysis	PYA
084	Geriatric Psychiatry	PYG
085	Adolescent Medicine-Family or	
	General Practice	AFP
085	Adolescent Medicine-Family or	
	General Practice	AGP
086	Pediatric Intensive Care	PIC
087	Neonatology	NE
088	Pediatrics	PD
089	Pediatric Allergy & Immunology	PAI
306	Pediatric Anesthesiology (Pediatrics)	PAN
091	Pediatric Pulmology Medicine	PDX
198	Pediatric Cardiothoracic Surgery	PCS
092	Pediatric Gastroenterology	PG
093	Pediatric Hematology-Oncology	PHO
094	Pediatric Diag Lab Immunology	PLI
095	Pediatric Nephrology	PNP
192	Pediatrics/Psychiatry/Child & Adolescent Ps	CPP
096	Pediatric Rheumatology	PPR
097	Sports Medicine - Pediatrics	PSM
098	Pediatric Cardiology	PDC
099	Preventive Medicine, Epidemiology	
	or Public Health	EPI
099	Preventive Medicine, Epidemiology	
	or Public Health	OE
099	Preventive Medicine, Epidemiology	
	or Public Health	PH
099	Preventive Medicine, Epidemiology	
	or Public Health	PHP
199	Pharmaceutical Medicine	PHM
100	Physical Medicine & Rehabilitation	PM
100	Physical Medicine & Rehabilitation	IAR
100	Physical Medicine & Rehabilitation	PDR
314	Internal Medicine/Physical Medicine &	
	Rehabilitation	MPM
100	Physical Medicine & Rehabilitation	RM
200	Physical Medicine & Rehabilitation	
	(Pediatrics)	PMP
101	Hand Surgery-Plastic Surg	HSP
102	Plastic Surgery	OOP
102	Plastic Surgery	PLR
103	Anatomic Pathology	AP

104	Blood Banking-Transfusion Medicine	BBT
104	Blood Banking-Transfusion Medicine	LBM
105	Clinical Pathology	CLP
106	Dermatopathology	DPT
107	Hematology-Pathology	HEP
108	Medicine Microbiology	MMB
109	Neuropathology	NPT
110	Chemical Pathology	CP
111	Cytopathology	CY
112	Immunopathology	IPT
113	Pediatric Pathology	PP
114	Anatomic/Clinical Pathology	APL
114	Anatomic/Clinical Pathology	PTH
115	Radioisotopic Pathology	RIP
307	Public Health	PH
196	Internal Medicine/Preventive Medicine	IPM 
116	Pulmonary Diseases	PUD
116	Pulmonary Diseases	PUL
117	Nuclear Radiology	NR
118	Pediatric Radiology	PRD
119	Radiology	DUS
119	Radiology	R
119	Radiology	RI
119 119	Radiology	RT
120	Radiology	RTD
121	Neuroradiology Radiological Physics	NRA RP
122	Angiography & Intervent'l Radiology	ANG
122	Angiography & Intervent'l Radiology	SCL
123	Radiation Oncology	RO
123	Radiation Oncology	TR
124	Cardiovascular or Thoracic	110
	Cardiovascular Surgery	CVS
124	Cardiovascular or Thoracic	
	Cardiovascular Surgery	TS
125	Urology	U
125	Urology	URS
126	Pediatric Urology	UP
127	Addictive Diseases	ADD
128	Critical Care-Medicine	CCM
129	Legal Medicine	LM
130	Clinical Pharmacology	PA
131	Unknown Blank	
133	Adolescent Medicine	ADL
134	Orthopedic Foot & Ankle Surg	OFA
135	Forensic Psychiatry	FPS

Transitional Year  Nuclear Cardiology  Developmental & Behavioral Pediatrics  Proctology  Thoracic Surgery  Other (list) - (USE VERY SPARINGLY;  Thank and Terminate)  (Thank and Terminate)  (Refused)  TY  NC  NC  DBP  PRO  TS  TS	136 137 139 142 145 146 147 153 154 155 156 157 158 159 160	Hematology & Oncology Internal Med-Pediatri Toxicology Psychosomatic Medicir Pediatric Infectious Pediatric Ophthalmolo Pulmonary-Critical Ca MOHS Micrographic Sur Hair Transplant Osteo Manipulative Tr Osteopathic Manipulat Sports Medicine - OMM Osteo Manipulative Me Proctology Internship Retired	HEO IPD TX PYM PID PO PUC DMS HT OM1 OMM OMS OMT PRO IN RET			
997 Other (list) - (USE VERY SPARINGLY; Thank and Terminate)  998 (DK) (Thank and Terminate)  999 (Refused) (Thank and Terminate)	209 210 159	Nuclear Cardiology Developmental & Behav Proctology	vioral Pediatrics	NC DBP		
999 (Refused) (Thank and Terminate)		Other (list) - (USE	E VERY SPARINGLY;	TS		
		• •			(1070	 1072)

(If code "003", "005-007", "013-014", "018", "025", "028", "057", "099", "103-115", "117-122", "129-131", "135", "138-141", "148", "160-162", "209" or "301-307" in #A10,

In this survey, we are only interviewing physicians in certain specialties, and your specialty is not among those being interviewed. So, it appears that we do not need any further information from you at this time, but we thank you for your cooperation. - (Thank and Terminate)

#### (If code "201" in #A10, Skip to #A17)

- All. Are you board-certified in (response in #Al0)?
  - 1 Yes (Skip to #A13)
  - 2 No (Continue)
  - 8 (DK) (Continue)
  - 9 (Refused) (Continue)

(There is no #A11a) HOLD \_\_\_\_ 0 \_\_\_ (1629)

- Al2. (If code "2", "8" or "9" in #Al1, ask:) Are you board-eligible in (response in #Al0)?
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

(1630)

(1358)

A13.	Al3. Are you board-certified in <u>(response in #A8)</u> ?					
	1	Yes - (Skip to #A	19)			
	2	No - (Continue)				
	8 9	(DK) (Refused)	(Continue) (Continue)			(1631)
(There is no #A13a) HOLD 0						(1632)
		(If code "1" in #A1 Otherwise, (				
A14.	Are	you board-eligible i	n (response in #A8)	?		
	1 2 8 9	Yes No (DK) (Refused)				(1633)

(All in #A14, Skip to #A19)

A15.	Are	you	board	-certif	ied	in	(respon	nse :	in :	# <b>A8)</b> ?			
	(NOT	E TO	INTER	RVIEWER	: If	phys	sician	says	"B	oard-			
	Cert	ified	in	Inter	nal	Medi	.cine"	or	"B	oard-			
	cert	ified	in Pe	diatric	s",	code	as "1"	<u>)</u>					
	1	Yes	- (S	kip to	#A19	)							
	2	No	- (Cc	ntinue)									
	8	(DK)			(	Conti	.nue)						
	9	(Ref	used)		(	Conti	.nue)				_		(1634)
(Thei	re is	no #2	A15a)						]	HOLD	_	0	(1635)
A16.		_		eligible : <b>If p</b> h									
	in	Inter	nal	Medicir	ıe"	or	"Board	l-elig	jible	in			
	Pedia	atric	s", co	de as "	1")								
	1	Yes											
	2	No											
	8	(DK)											
	9	(Refi	used)										(1636)

# "088", "137" or "201" in #A8, Skip to #A19; Otherwise, Continue)

A17.	Are you board certified in any specialty?					
	1 Yes - (Skip to #A19)					
	2 No (Continue) 8 (DK) (Continue) 9 (Refused) (Continue)	(1078)				
	(If code "1" in #A16, Skip to #A19; Otherwise, Continue)					
A18.	(If code "2" or "8-9" in #A17, ask:) Are you board eligible in any specialty?					
	<pre>1 Yes 2 No 8 (DK) 9 (Refused)</pre>	(1079)				
A19.	Many of the remaining questions are about your practice and your relationships with patients. Before we begin those questions, let me ask you: Thinking very generally about your satisfaction with your overall career in medicine, would you say that you are CURRENTLY (read 5-1)?					
	Very satisfied Somewhat satisfied Somewhat dissatisfied Very dissatisfied, OR Neither satisfied nor dissatisfied					
	8 (DK) 9 (Refused)	(1080)				
CLOCI	K:					
		(1545 – 1548)				

# <u>SECTION B</u> UTILIZATION OF TIME

B1. (If code "2" in #A4, AND code "03-97", "DK" or "RF" in #A4a, OR code "8" or "9" in #A4, ask:)

Considering all of your practices, approximately how many weeks did you practice medicine during 1999? Exclude time missed due to vacation, illness and other absences. [(If necessary, say:) Exclude family leave, military service, and professional conferences. If your office is closed for several weeks of the year, those weeks should NOT be counted as weeks worked.] (Open ended and code actual number)

(If code "2" in #A4, AND code "02" in #A4a, ask:)
Considering both of your practices, approximately how many weeks did you practice medicine during 1999? Exclude time missed due to vacation, illness and other absences. [(If necessary, say:) Exclude family leave, military service, and professional conferences. If your office is closed for several weeks of the year, those weeks should NOT be counted as weeks worked.] (Open ended and code actual number)

(If code "1" in #A4, ask:) Approximately how many weeks did you practice medicine during 1999? Exclude time missed due to vacation, illness and other absences. [(If necessary, say:) Exclude family leave, military service, and professional conferences. If your office is closed for several weeks of the year, those weeks should NOT be counted as weeks worked.] (Open ended and code actual number)

53-

97 (BLOCK)

DK (DK)

RF (Refused)

(1081) (1082)

- B2. (If code "2" in #A4, AND code "03-97", "DK" or "RF" in #A4a, OR code "8" or "9" in #A4, ask:)

  Considering all of your practices, during your last complete week of work, approximately how many hours did you spend in all medically related activities? Please include all time spent in administrative tasks, professional activities and direct patient care. Exclude time on call when not actually working. (Open ended and code actual number)
  - (If code "2" in #A4, AND code "02" in #A4a, ask:)
    Considering both of your practices, during your last complete week of work, approximately how many hours did you spend in all medically related activities? Please include all time spent in administrative tasks, professional activities and direct patient care. Exclude time on call when not actually working. (Open ended <a href="mailto:and-code-actual-number">and-code-actual-number</a>)
  - (If code "1" in #A4, ask:) During your last complete week of work, approximately how many hours did you spend in all medically-related activities? Please include all time spent in administrative tasks, professional activities and direct patient care. Exclude time on call when not actually working. (Open ended <a href="mailto:and-code-actual-number">and-code-actual-number</a>)

169-997 (BLOCK)

DK (DK) RF (Refused)

(1083 - 1085)

- (If code "001-168" in #B2, ask:) Of these в3. (response in #B2) hours, how many did you spend in direct patient care activities? Direct care of patients includes face-to-face contact patients, as well as patient record keeping and office work, travel time connected with seeing patients, and communication with other physicians, hospitals, pharmacies, and other places on patient's behalf. [(If necessary, say:) INCLUDE time spent on patient record keeping, patientrelated office work, and travel time connected with seeing patients. EXCLUDE time spent in training, teaching, or research, any hours on-call when not actually working, and travel between home and work at the beginning and end of the work [(If appropriate, say:) INCLUDE ALL PRACTICES, not just the main practice.] (Open ended and code actual number)
  - (If code "DK" or "RF" in #B2, ask:) About how many hours did you spend in direct patient care activities? [(If necessary, say:) EXCLUDE time spent in training, teaching, or research, any hours on-call when not actually working, and travel between home and work at the beginning and end of the work day.] [(If appropriate, say:) INCLUDE ALL PRACTICES, not just the main practice.] (Open ended and code actual number)

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169-
997 (BLOCK)
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DK (DK) (Skip to #B6)
RF (Refused) (Skip to #B6)

(1086 - 1088)

### (If response in #B3 = response in #B2, Continue; If response in #B3 > response in #B2, Skip to #B4; Otherwise, Skip to #B6)

В3а.		you spent all of yo ent care activities,	_	in direct		
	1	Yes - (Skip to #B6	5)			
	2	No - (Continue)				
	8 9	(DK) (Refused)	(Skip to #B6) (Skip to #B6)			(1115
B3b.	spen	code "2" in #B3a, a t <u>(response in #B2)</u> vities and <u>(respon</u>	hours in all me	dically relate	ed	

- patient care. Which of these is incorrect?
  - 1 All medically related activities hours - (Continue)
  - 2 Direct patient care hours - (Skip to #B3d)
  - 3 (Neither are correct) - (Continue)
  - 4 (Both are correct) (Skip to #B6)
  - 8 (DK) (Skip to #B6)
  - 9 (Refused) (Skip to #B6)

B3c. (If code "1" or "3" in #B3b, ask:) Thinking of your last complete week of work, approximately how many hours did you spend in all medically related activities? Please include all time spent in administrative tasks, professional activities and direct patient care. Exclude time on call when not actually working. (Open ended and code actual number)

169-997 (BLOCK)

DK (DK)

RF (Refused)

(1117 – 1119)

#### (If code "1" in #B3b, Skip to #B6)

B3d. (If code "2" or "3" in #B3b, ask:) Thinking of your last complete week of work, about how many hours did you spend in direct patient [(If necessary, say:) INCLUDE time activities? spent on patient record-keeping, patient-related office work, and travel time connected with seeing EXCLUDE time spent in training, patients. teaching, or research, any hours on-call when not actually working, and travel between home and work at the beginning and end of the work day.] [(If appropriate, say:) INCLUDE ALL PRACTICES, not just the main practice.] (Open ended and code actual number)

169-997 (BLOCK)

DK (DK)

RF (Refused)

(1194 - 1196)

#### (All in #B3d, Skip to #B6)

В4. I may have made a recording mistake. My computer is showing that I've recorded more hours spent in than patient care in ALLmedical activities. So, during your last complete week of work, approximately how many hours did you spend ALL medically related activities? Please include all time spent in administrative tasks, professional activities and direct patient care, as well as any hours spent on call when actually working? (Open ended and code actual number)

169-997 (BLOCK) DK (DK) RF (Refused)

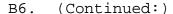
(1089 - 1091)

B5. And of those total [(response in #B4)] hours, about how many did you spend in direct patient care activities? [(If necessary, say:) INCLUDE time spent on patient record-keeping, patientrelated office work, and travel time connected seeing patients. EXCLUDE time spent training, teaching, or research, any hours on-call when not actually working, and travel between home and work at the beginning and end of the work day.] [(If appropriate, say:) INCLUDE ALL PRACTICES, not just the main practice.] (Open ended and code actual number)

169-997 (BLOCK) DK (DK) RF (Refused)

(1092 - 1094)

- B6. (If code "8" or "9" in #A4, OR code "03-97", "DK" or "RF" in #A4a, ask:) Again thinking of all your practices, during the LAST MONTH, how many hours, if any, did you spend providing CHARITY care? By this we mean, that because of the financial need of the patient you charged either no fee or a reduced fee. Please do not include time spent providing services for which you expected, but did not receive, payment. (Probe:) Your best estimate would be fine. (Open ended and code actual number)
  - (If code "02" in #A4a, ask:) Again thinking of both of your practices, during the LAST MONTH, how many hours, if any, did you spend providing CHARITY care? By this we mean, that because of the financial need of the patient you charged either no fee or a reduced fee. Please do not include time spent providing services for which you expected, but did not receive, payment. (Probe:) Your best estimate would be fine. (Open ended and code actual number)
  - (If code "1" in #A4, ask:) During the LAST MONTH, how many hours, if any, did you spend providing CHARITY care? By this we mean, that because of the financial need of the patient you charged either no fee or a reduced fee. Please do not include time spent providing services for which you expected, but did not receive, payment. (Probe:) Your best estimate would be fine. (Open ended and code actual number)



(If necessary, say:) EXCLUDE bad debt and time spent providing services under a discounted fee for service contract or seeing Medicare and

(If code "06" in "STATE", say:) MediCAL patients.

(If code "04" in "STATE", say:) AHCCCS ("Access") patients.

(If code "01-03", "05" or "07-56" in "STATE", say:) Medicaid patients.

(If necessary, say:) By the LAST MONTH, we mean the last four weeks.

DK (DK)

RF (Refused)

(2544 - 2546)

B7. During the last month, what percentage of your patients talked about medical conditions, tests, treatments, or drugs they had read or heard about from various sources other than you, such as the Internet, their friends or relatives, TV, radio, books, or magazines? [(If necessary, say:) Your best estimate is fine.] (Open ended and code actual percent)

000 None

101 Less than 1%

102 (DK)

103 (Refused)

(3207 - 3209)

(There is no #B8)

HOLD 0 (3210-3212)

- B9. During the last month, for what percentage of your patients did you order tests, procedures, or prescriptions SUGGESTED BY PATIENTS that you would not otherwise have ordered? (Open ended <a href="mailto:and-code">and code</a> actual percent)
  - 000 None
  - 101 Less than 1%
  - 102 (DK)
  - 103 (Refused)

(3256 - 3258)

### (If code "001-100" in #B7, #B8 or #B9, Continue; Otherwise, Skip to #B11)

- B10. On balance, what do you think is the effect of medical information obtained by your patients from sources other than you on your ability to provide HIGH QUALITY CARE? Would you say it is generally positive, generally negative, or neither?
  - 3 Positive
  - 2 Neither
  - 1 Negative
  - 6 (Can't choose/Unsure)
  - 8 (DK)
  - 9 (Refused)

(3215)

B11.	medi sour you	calance, what do you think is the effect of cal information obtained by your patients from ces other than you on your EFFICIENCY? Would say it is generally positive, generally tive, or neither.		
	3 2 1	Positive Neither Negative		
	6 8 9	(Can't choose/Unsure) (DK) (Refused)		_ (3216)
CLOCE	ζ:		(2184	

# SECTION C TYPE AND SIZE OF PRACTICE

CA.	PRA	CTICE: (Code only)	<u>)</u>	
	1	(If code "1" in a	<b>‡A4:)</b> Practice	
	2	(If code "2", "8	or "9" in #A4:) Main Practice	(11033
(INT	ERVI	series	I would like to ask you a of questions about the nse in #CA) in which you	
C1.	own	er of this prac	r, a part owner, or not an tice? (INTERVIEWER NOTE: A practice in which they work - Part owner")	
	1	Full owner	(Continue)	
	2	Part owner	(Continue)	
	3	Not an owner	(Skip to #C3)	
	8	(DK)	(Skip to #C3)	
	9	(Refused)	(Skip to #C3)	(1104)

- C2. (If code "1" or "2" in #C1, ask:) Which of the following best describes this practice? Is it (read 06-16, then 01)? (INTERVIEWER NOTE: A freestanding clinic includes non-hospital-based ambulatory care, surgical and emergency care centers)
  - OR, something else (list) (Skip to #C4)
  - 02-
  - 05 HOLD
  - Of A practice owned by one physician (solo practice) (Skip to "Note" before #C3)
  - 07 A two physician-owned practice (Skip to #C4)
  - 08 A group practice of three or more physicians (see AMA definition on card) (Continue)
  - 09 A group model HMO Skip to #C7)
  - 10 A staff model HMO Skip to #C7)
  - 11-
  - 15 HOLD
  - 16 A free-standing clinic (Continue)
  - 98 (DK) (Skip to #C4 99 (Refused) (Skip to #C4)

 $\overline{(1105)}$   $\overline{(1106)}$ 

C2a.	(If code "08" or "16" in #C2, ask:) Is the practice a single-specialty or multi-specialty practice?	
	<pre>1 Single-specialty - (Skip to "Note"   before #C3)</pre>	
	2 Multi-specialty - (Continue)	
	8 (DK) (Skip to "Note" before #C3) 9 (Refused) (Skip to "Note" before #C3)	(1637)
	(If code "019", "023", "042",  "088", "137" or "195" in #A10/#A8,  OR if code "2" in #A9a,  or code "3" in #A9a,  or code "2" in #A9b, or code "3" in #A9b,  Skip to #C2c;  Otherwise, Continue)	
C2b.	Are any of the physicians in the practice in primary care specialties? (Probe:) By primary care specialties, we mean general or family practice, general pediatrics, or general internal medicine.	
	1 Yes	
	2 No 8 (DK)	
	9 (Refused)	(1638)
	(All in #C2b, Skip to "Note" before #C3)	
C2c.	(If code "019", "023", "042", "088", "137" or "195" in #A10/#A8, or if code "2" in #A9a, or code "3" in #A9b, or code "3" in #A9b, ask:) Are any of the physicians in the practice in specialties other than general or family practice, general pediatrics or general internal medicine?	
	1 Yes 2 No 8 (DK) 9 (Refused)	(1639)

### (If code "1" in #C1, AND code "06" in #C2, Skip to #C7; Otherwise, Skip to #C4)

- (If code "3", "8" or "9" in #C1, ask:) Which of C3. the following best describes your current employer or employment arrangement? Are you employed by (read 06-16, then 01)? (INTERVIEWER NOTE: Stop once response is given) [(If necessary, say:) An EMPLOYER is the entity that pays you and should not be confused with where you work. For instance, your employer could be a group practice even if you work in a hospital]
  - 01 OR, something else (do NOT list here) - (Skip to #C3b)
  - 02 -
  - 05 HOLD
  - 06 A practice owned by one physician (solo practice) - (Skip to #C5)
  - 07 A two physician-owned practice -(Skip to #C4)
  - 08 A group practice of three or more physicians (see) AMA definition on card) - (Continue)
  - 09 (Skip to #C7) A group model HMO
  - A staff model HMO (Skip to #C7) 10
  - 12 A medical school or university (Skip to #C6b)
  - 13 A non-government hospital or group of hospitals (Skip to #C6b)
  - 14 City, county or state government - (Skip to #C3a)
  - 16 A free-standing clinic - (Continue)
  - 98 (Skip to #C3b) (DK)
  - (Skip to #C3b) 99 (Refused)

 $(1107)^{-}$   $\overline{(1108)}$ 

- C3aa. (If code "08 or "16" in #C3, ask:)

  practice a single-specialty or multi-specialty practice?

  Single-specialty (Skip to #C4)

  Multi-specialty (Continue)

  (Skip to #C4)

  (Refused) (Skip to #C4)

  (1640)
- C3ab. Are any of the physicians in the practice in primary care specialties? (Probe:) By primary care specialties, we mean general or family practice, general pediatrics, or general internal medicine.
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

(All in #C3ab, Skip to #C4)

(1641)

"195"	in :	#A10	/#A8,	or :	if c	ode	"2"	in	#A9a,	or
code	"3"	in	#A9a,	or	cod	le "	2"	in	#A9b,	or
code	"3"	in	#A9b	), a	sk:)	A:	re	any	of	the
physic other	th	an	gener	al	or	fa	mil	У <sup>-</sup> ]	pract	ice,
genera medic:		ped:	iatric	!s	or	gei	nera	al	inte	rnal

- 1 Yes
- 2 No
- 8 (DK)
- 9 (Refused)

\_\_\_\_(1642)

#### (All in #C3ac, Skip to #C4)

C3a. (If code "14" in #C3, ask:) Is this a hospital, clinic or some other setting?

- 1 Hospital
- 2 Clinic
- 3 Other (do NOT list)
- 8 (DK)
- 9 (Refused)

\_\_\_\_(1198)

#### (All in #C3a, Skip to "Note" before #C7)

- C3b. (If code "01", "98" or "99" in #C3, ask:) Are you employed by (read 11-21 22, 25 and 26, as appropriate, then 01)?
  - OR, something else (do NOT list here) (Continue)
  - 02-
  - 10 HOLD
  - Other HMO, insurance company or health plan (Skip to "Note" before #C7)
  - 15 An integrated health or delivery system (Skip to "Note" before #C7)
  - 17 A physician practice management company or other for-profit investment company (Skip to "Note" before #C7)
  - 18 Community health center (Skip to #C7)
  - 19 Management Services Organization (MSO) (Skip to "Note" before #C7)

  - 21 Locum tenens (Skip to "Note" before #C7)
  - 22 Foundation (Skip to #C3ca)
  - 25 Independent contractor (Skip to "Note" before #C7)
  - 26 Industry clinic (Skip to "Note" before #C7)
  - 98 (DK) (Skip to #C4)
  - 99 (Refused) (Skip to #C4)

(1199) (1200)

- C3c. What type of organization do you work for? (Open ended and code, <u>if possible; otherwise, ENTER VERBATIM RESPONSE)</u>
  - 01 Other (list) (Skip to "Note" before #C7)
  - 02-
  - 05 HOLD
  - 06 A practice owned by one physician (solo practice) (Skip to #C5)
  - 07 A two physician-owned practice (Skip to #C4)
  - 08 A group practice of three or
     more physicians (see)
     AMA definition on card) (Skip to #C3ca)
  - 09 A group model HMO (Skip to #C7)
  - 10 A staff model HMO (Skip to #C7)
  - 12 A medical school or university (Skip to #C6b)
  - 13 A non-government hospital or group of hospitals (Skip to #C6b)
  - 14 City, county or state government (Skip to #C3d)
  - 16 A free-standing clinic (Skip to #C3ca)
  - 17 HOLD
  - 18 Community health center (Skip to #C4)
  - 19-
  - 21 HOLD
  - 22 Foundation (Skip to #C3ca)
  - 25 Independent Contractor (Skip to "Note" before #C7)
  - 26 Industry Clinic (Skip to "Note" before #C7)
  - 98 (DK) (Skip to #C4)
  - 99 (Refused) (Skip to #C4)

(1643) (1644)

C3ca.	(If code "08" or "16" in #C3c, or code "22" in #C3b, ask:) Is the practice a single-specialty or multi-specialty practice?	
	1 Single-specialty - (Skip to #C4)	
	2 Multi-specialty - (Continue)	
	8 (DK) (Skip to #C4) 9 (Refused) (Skip to #C4)	(1097)
	(If code "019", "023", "042", "088", "137" or "195" in #A10/#A8, OR if code "2" or "3" in #A9a, OR code "2" or "3" in #A9b, Skip to #C3cc; Otherwise, Continue)	
C3cb.	Are any of the physicians in the practice in primary care specialties? By primary care specialties, we mean general or family practice, general pediatrics or general internal medicine.	
	1 Yes 2 No 8 (DK) 9 (Refused)	(1098)
	(All in #C3cb, Skip to #C4)	
C3cc.	(If code "019", "023", "042", "088", "137" or "195" in #A10/#A8, OR code "2" or "3" in #A9b, ask:) Are any of the physicians in the practice in specialties other than general or family practice, general pediatrics or general internal medicine?  1 Yes 2 No 8 (DK)	

9

\_\_\_\_(1099)

(Refused)

C3d.	(If code "14" in #C3c, ask:) Is this a hospital, clinic, or some other setting?	
	<pre>1 Hospital 2 Clinic 3 Other (do NOT list)</pre>	
	8 (DK) 9 (Refused)	(1662)
	(All in #C3d, Skip to "Note" before #C7)	
C4.	Do one or more of the other physicians in the practice in which you work have an ownership interest?	
	1 Yes 2 No 8 (DK) 9 (Refused)	(1109)
C5.	Do any of the following have an ownership interest in the practice in which you work? This ownership interest may include ownership of only the assets or accounts receivable. Does (read A-D) have an ownership interest in the practice? [(If necessary, say:) Do not include leased equipment.]	
	1 Yes 2 No 8 (DK) 9 (Refused)	
	A. Another physician group	(1132)
	B. A hospital or group of hospitals	(1133)
	C. An insurance company, health plan or HMO	(1134)
(1135	D. Any other organization (listed on next screen) 5)	

# (If code "1" in #C5-D, Continue; If code "2" to ALL in #C5 A-D, Skip to #C6a; Otherwise, Skip to "Note" before #C6b)

C6.	(If	code	"1"	in	#C5-D,	ask:)	What	kind	ds of
	orga	nizati	ons	are	these?	(Open	ended	and	code)
	(ENT	ER ALL	RES	PONSE	ES)				

				*	
01 02 03 04 05	Other (list) (DK) (Refused) No others HOLD	1 2 3 4 5			(1136)
06 07 08 09 10	Integrated health or delivery system Physician practice management or other for-profit investment company Management Services Organization (MSO) Physician-Hospital Organization (PHO) University/Medical school	7 8 9 0	6		
11 12 13 14 15 16	Medical Foundation or Non-profit Foundation Other Non-profit or community- based organization Other physicians in this practice Another physician group A hospital or group of hospitals An insurance company, health plan or HMO	1 2 3 4 5			(1137)
		HOLD		0	(1138-

C6a. (If code "3" in #C1, AND code "2" in #C4, AND code "2" to ALL in #C5 A-D, ask:) Who owns the practice in which you work? (Open ended)

- 01 Other (list)
- 02 (DK)
- 03 (Refused)
- 04 HOLD
- 05 HOLD

(1272)	(1273)

#### (If code "12" or "13" in #C3 or #C3c, Continue; Otherwise, Skip to "Note" before #C7)

- C6b. (If code "12" or "13" in #C3 or #C3c, ask:) In which of the following settings do you spend most of your time seeing patients in an office practice owned by the hospital or a university or medical school, on hospital staff, in the emergency room, in a hospital clinic, or somewhere else?
  - 01 Somewhere else (list)
  - 02 (DK)
  - 03 (Refused)
  - 04 HOLD
  - 05 HOLD
  - Of Office practice owned by the (hospital/university/medical school)
  - 07 On hospital staff
  - 08 In emergency room
  - 09 In a hospital clinic

(3217)  $\overline{(3218)}$ 

# Or code "06", "07", "08" or "16" in #C3, or code "06" in #C6b, Continue; Otherwise, Skip to #C10)

- C7. How many physicians, including yourself, are in the practice? Please include all locations of the practice. (Probe:) Your best estimate would be fine. (Open ended and code actual number)

  (INTERVIEWER NOTE: If asked, this includes both full- and part-time physicians)
  - 997 997+
  - DK (DK)
  - RF (Refused)

(1148 - 1150)

C8. How many physician assistants, nurse practitioners, nurse midwives, and clinical nurse specialists are employed by the practice including all locations? Include both full- and part-time employees in your answer. (Probe:) Please include only those who fit these categories. Your best estimate would be fine. (Open ended and code actual number) (INTERVIEWER NOTE: Do NOT include office staff or nursing or other personnel who do not fit these categories; examples: LPNs or RNs who are not nurse practitioners or clinical nurse specialists should not be included)

997 997+ DK (DK) RF (Refused)

(1151 – 1153)

### 

- C9. Is your practice either a group model HMO or organized exclusively to provide services to a group model HMO?
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

(1154)

- C10. In the last two years, were you part of a practice that was purchased by another practice or organization? (If necessary, say:) We are only interested in purchases over the last two years that occurred while you were part of the practice.
  - 1 Yes (Continue)

2 No (Skip to #C12) 8 (DK) (Skip to #C12) 9 (Refused) (Skip to #C12)

(1155)

- C11. (If code "1" in #C10, ask:) At the time of the purchase, were you a full owner, a part owner, or not an owner of the practice that was purchased?

  (INTERVIEWER NOTE: If multiple purchases, ask about the most recent)
  - 1 Full owner
  - 2 Part owner
  - 3 Not an owner
  - 8 (DK)
  - 9 (Refused)

(1156)

- C12. Next, I am going to list several aspects of a medical practice. Using any number from one to ten, where "1" is not important, and "10" is very important, tell me how important each one is to you. How about (read and rotate A-D)?
  - 10 Very important
  - 09
  - 80
  - 07
  - 06
  - 05 04
  - 0 7
  - 03
  - 01 Not important
  - 11 (DK)
  - 12 (Refused)

#### C12. (Continued:)

A.	Control over your working hours		
		(3219)	(3220)
В.	Control over your clinical decisions	(3221)	(3222)
C.	Your potential income	(3223)	(3224)
D.	Control over your practice's business decisions		
<b>Form 1)</b>	How would you describe your overall personal financial incentives in your practice? On	(3225)	(3226)

## (F

Н1

financial incentives in your practice? On balance, do these incentives favor reducing services to individual patients, expanding services to individual patients, or favor neither?

- 1 Reducing services to individual patients (Continue)
- 2 Expanding services to individual patients (Continue)
- Favor neither (Skip to "Section D") 3
- 8 (Skip to "Section D") (DK)
- 9 (Refused) (Skip to "Section D")

(3271)

#### (Form 1)

H10b-1. (If code "1" or "2" in #H10b, ask:) Have these incentives [(if code "1" in #H10b, say:) reduced/(if code "2" in #H10b, say:) expanded] services a little, a moderate amount, or a lot?

- 1 A little
- 2 A moderate amount
- 3 A lot
- 4 (None)
- 8 (DK)
- 9 (Refused)

(3272)

CLOCK:

(2192 - 2195)

# SECTION D MEDICAL CARE MANAGEMENT

### MANAGEMENT STRATEGIES

D1.	and hand your comp	next question is about the use of computers other forms of information technology, such as -held computers, in diagnosing or treating patients. In your (main) practice, are uters or other forms of information technology (read and rotate A-G)?	
	1	Yes	
	2 8	No (DK)	
	9	(DK) (Refused)	
	9	(Relused)	
	Α.	To obtain information about treatment alternatives or recommended guidelines	(3227)
(322	B. 8)	To obtain information on formularies	
	C.	To generate reminders for you about preventive services	
	D.	To access patient notes, medication lists, or problem lists	(3230)
	E.	To write prescriptions	(3231)
	F.	For clinical data and image exchanges with other physicians	(3232)
	G.	To communicate about clinical issues with patients by e-mail	(3233)

D2.	Do you have access to the Internet at the place where you provide most of your patient care? [(If necessary, say:)] Patient care includes face-to-face contact with patients, as well as patient record keeping and office work, travel time connected with seeing patients, and communication with other physicians, hospitals, pharmacies, and other places on a patient's behalf.]	
	1 Yes 2 No	
	8 (DK)	
	9 (Refused)	(3234)
(Ther	e are no D2a and D2b) HOLD	0(32353236)
D3.	Next, what percentage of your patients have prescription coverage that includes the use of a formulary? (NOTE TO INTERVIEWER: A formulary is a restriction on the types of prescription drugs insurance companies will cover) (Open ended and code actual percent)	
	000 None	
	101 Less than 1% 102 (DK)	
	102 (DR) 103 (Refused)	
	105 (Relubed)	
	105 (Relused)	(3237 - 3239)

(INTERVIEWER READ:) Now, I would like to ask you a series of questions about various medical care management techniques or strategies that are sometimes used to manage the care physicians provide to their patients. For each, I'll ask you how large an effect they have on your practice of medicine. The choices are: a very large effect, large, moderate, small, very small, or no effect at all. (If code "2", "8" or "9" in #A4, say:) As you answer, please think only about your practice.

- D4. At present, (read and rotate A-C)? Would you say that (it has/they have) a (read 5-0)?
  - 5 Very large
  - 4 Large
  - 3 Moderate
  - 2 Small
  - 1 Very small, OR
  - 0 No effect at all
  - 8 (DK)
  - 9 (Refused)

#### D4. (Continued:)

- How large an effect does your use of FORMAL, Α. WRITTEN practice guidelines such as those physician organizations, generated by insurance companies or HMOs, or government agencies have on your practice of medicine (INTERVIEWER NOTE: Exclude guidelines that are unique to the physician.) [(If physician says that s/he uses his/her own guidelines, In this question, we are only say:) interested in the use of formal, written quidelines such as those generated physician organizations, insurance companies or HMOs, or other such groups.]
  - A1. (If code "0" in #D4-A, ask:) Is that because you are not aware of guidelines that pertain to conditions you typically treat, or because you are aware of them, but they have no effect on conditions you treat?
    - 1 Not aware
    - 2 Aware, no effect
    - 8 (DK)
    - 9 (Refused)

(1158)

#### D4. (Continued:)

B. How large an effect do the results of practice profiles comparing your pattern of using medical resources to treat patients with that of other physicians have on your practice of medicine? [(If necessary, say:) A practice profile is a report that is usually computer generated which compares you to other physicians on things like referrals to specialists, hospitalizations, or other measures of cost-effectiveness.] (INTERVIEWER NOTE: We are not interested in informal feedback, but only specific, quantified information about the physician's practice patterns.)

(3242)

- B1. (If code "0" in #D4-B, say:) Is that because you are not aware of practice profiling, or you are aware of it, but it has no effect on your practice of medicine? (If necessary say:) A practice profile is a report that is usually computer generated, which compares you to other physicians on things like referrals to specialists, hospitalizations, or other measures of cost effectiveness.
  - 1 Not aware
  - 2 Aware, but no effect
  - 8 (DK)
  - 9 (Refused)

(3243)

## D4. (Continued:)

- C. How large an effect does feedback from patient satisfaction surveys have on your practice of medicine?
  - C1. (If code "0" in #D4-C, ask:) Is that because patient satisfaction surveys are not used in your practice, or because they are used, but they have no effect on your practice of medicine?
    - 1 Not used
    - 2 Used, but no effect
    - 8 (DK)
    - 9 (Refused)

\_\_\_\_(3245)

<mark>rota</mark> prov gene	balance, would you say the effect of <u>(read and ate A-E, as appropriate)</u> on your ability to vide efficient and high-quality care is erally positive, generally negative, or ther?	
3 2 1	Positive Neither Negative	
6 7 8 9	<pre>(Can't choose/Unsure) (Not applicable) (DK) (Refused)</pre>	
(There is	s no A) HOLD	0(3246)
В.	(If code "001-100" in D3, ask:) Prescription drug formularies	(3247)
C.	(If code "3-5" in D4a, ask:) Practice guidelines	(3248)
D. prot	(If code "3-5" in D4b, ask:) Practice (3249)	
Ε.	(If code "3-5" in D4c, ask:) Patient's satisfaction surveys	(3250)
(There is	s no D6) HOLD	0 (3251- 3255)

(If code "019-020", "023", "043",
"085", "133" or "195" in #A10/#A8, OR

If code "1", "8" or "9" in #A9, OR

If code "042", "088" or "137" in #A10, OR

If code "2" or "3" in #A9a, OR

If code "2" or "3" in #A9b, Continue;

Otherwise, Skip to "Interviewer

Read" before #D11)

- (INTERVIEWER READ:) Now, I would like to ask you a couple of questions about the range and complexity of conditions you treat without referral to specialists.
- D7. During the last two years, has the complexity or severity of patients' conditions for which you provide care without referral to specialists (read 5-1)? (INTERVIEWER NOTE: If respondent says he/she has not been practicing medicine for two years, ask about time since he/she started.)
  - 5 Increased a lot
  - 4 Increased a little
  - 3 Stayed about the same
  - 2 Decreased a little, OR
  - 1 Decreased a lot
  - 8 (DK)
  - 9 (Refused)

- (1169)
- D8. In general, would you say that the complexity or severity of patients' conditions for which you are currently expected to provide care without referral is (read 5-1)?
  - 5 Much greater than it should be
  - 4 Somewhat greater than it should be
  - 3 About right
  - 2 Somewhat less than it should be, OR
  - 1 Much less than it should be
  - 8 (DK)
  - 9 (Refused)

(1170)

- D9. During the last two years, has the number of patients that you refer to specialists (read 5-1)?
  - 5 Increased a lot
  - 4 Increased a little
  - 3 Stayed about the same
  - 2 Decreased a little, OR
  - 1 Decreased a lot
  - 8 (DK)
  - 9 (Refused)

(1171)

- D10. Some insurance plans or medical groups REQUIRE their enrollees to obtain permission from a primary care physician before seeing a specialist. For roughly what percent of your patients do you serve in this role? (Open ended <a href="mailto:and-code actual-percent">and code actual percent</a>)
  - [(If necessary, say:) The term "gatekeeper" is often used to refer to this role.]
  - [(If necessary, say:) Include only those patients for whom it is required, not for patients who choose to do so voluntarily.]

```
000 None (Skip to "Section F")
001 1% or less (Skip to "Section F")
```

002-

100 (Skip to "Section F")

DK (DK) (Continue)
RF (Refused) (Continue)

(1172 – 1174)

- D10a. (If code "DK" or "RF" in #D10, ask:) Would you say you serve in this role for (read 1-2)?
  - 1 Less than 25 percent of your
    patients, OR (Skip to #D10c)
  - 2 25 percent or more of your patients - (Continue)

D10b.	8 (DK) (Skip to "Section F") 9 (Refused) (Skip to "Section F") (If code "2" in #D10a, ask:) Would you say for (read 1-2)?	(1175)
	1 Less than 50 percent of your patients	
	OR	
	2 50 percent or more of your patients	
	8 (DK) 9 (Refused)	(1176)
	(All in #D10b, Skip to "Section F")	
D10c.	(If code "1" in #D10a, ask:) Would you say for (read 1-2)?	
	1 Less than 10 percent of your patients	
	OR	
	2 10 percent or more of your patients	
	8 (DK) 9 (Refused)	(1177)

(All in #D10c, "Skip to Section F")

- (INTERVIEWER READ:) Now, I would like to ask you a couple of questions about the range and complexity of conditions you treat.
- D11. During the last two years, has the complexity or severity of patients' conditions at the time of referral to you by primary care physicians (read 5-1)? (NOTE TO INTERVIEWER: If Emergency Department Physician is confused by the question, code as "8", NOT "9")
  - 5 Increased a lot
  - 4 Increased a little
  - 3 Stayed about the same
  - 2 Decreased a little, OR
  - 1 Decreased a lot
  - 8 (DK)
  - 9 (Refused)

\_\_\_\_(1178)

- D12. In general, would you say that the complexity or severity of patients' conditions at the time of referral to you by primary care physicians is (read 5-1)? (NOTE TO INTERVIEWER: If Emergency Department Physician is confused by the question, code as "8", NOT "9")
  - 5 Much greater than it should be
  - 4 Somewhat greater than it should be
  - 3 About right
  - 2 Somewhat less than it should be, OR
  - 1 Much less than it should be
  - 8 (DK)
  - 9 (Refused)

\_\_\_\_(1179)

D13.	During the	last two	years, ha	s the	${\tt number}$	of				
	patients re	eferred to	you b	y prin	nary c	care				
	physicians (	read 5-1)?	(NOTE TO	INTER	VIEWER:	Ιf				
	Emergency De	partment Ph	ysician i	s confus	sed by	the				
	question, cod	de as "8", N	OT "9")							
	5 Increase	ed a lot								
		ed a little								
		about the sa	ame							
	<b>-</b>	2								
		ed a lot	OIC							
	1 Decrease	ca a 10c								
	8 (DK)									
	9 (Refused	d)						(1180)		
at oat	•									
CLOCE	. •									
							(2200	_ 2204		
							•			

81

(There is no Section E)

# <u>SECTION F</u> PHYSICIAN-PATIENT INTERACTIONS

- F1. Next I am going to read you several statements. For each, I'd like you to tell me if you agree strongly, agree somewhat, disagree somewhat, disagree strongly, or if you neither agree nor disagree. [(If code "2" or "8-9" in #A4, say:) As you answer, please think only about your main practice.] (Read and rotate A-E and H, then F and G) Do you (read 5-1)? [(If necessary, say:) We'd like you to think across all patients that you see in your practice.]
  - 5 Agree strongly
  - 4 Agree somewhat
  - 3 Disagree somewhat
  - Disagree strongly, OR
  - 1 Do you neither agree nor disagree
  - 7 (Doctor does not have office) [A only]
  - 7 (Doctor does not have continuing relationship with patients) [H only]
  - 8 (DK)
  - 9 (Refused)
  - have adequate time to spend with my Α. patients during their office visits? (INTERVIEWER NOTE: Do not further differentiate the level of visit, that is, whether brief, intermediate, etc.) necessary, say:) We would like you to answer in general or on AVERAGE over all types of visits. (1308)
  - B. (If code "7" in #F1-A, ask:) I have adequate time to spend with my patients during a typical patient visit (INTERVIEWER NOTE: This does not include surgery)
  - C. I have the freedom to make clinical decisions that meet my patients' needs
  - D. It is possible to provide high quality care to all of my patients

(1351)

(1309)

(13

#### F1. (Continued:)

E. I can make clinical decisions in the best interests of my patients without the possibility of reducing my income (1311)

(13)

- (If code "019-020", "023", "043", "085" or F. "133" or "195" in #A10/#A8, OR if code "1", "8" or "9" in #A9, or if code "042", "088" or "137" in #A10, OR if code "2" or "3" in #A9a, OR If code "2" or "3" in #A9b, ask:) level of communication I have with specialists about the patients I refer to them is sufficient to ensure the delivery of high quality care (1312)
- G. (If "Blank" in F1-F, ask:) The level of communication I have with primary care physicians about the patients they refer to me is sufficient to ensure the delivery of high quality care
- H. It is possible to maintain the kind of continuing relationships with patients over time that promote the delivery of high quality care

(There are no #F2-#F7)

- F8. Now, I'm going to ask you about obtaining certain services for patients in your (response in #CA) when you think they are medically necessary. How often are you able to obtain (read and rotate A, B and E, then read and rotate C and D, then read and rotate F and G, as appropriate) when you think (they are/it is) medically necessary? Would you say (read 6-1)? [(If physician says it depends on which patients, say:) We'd like you to think across all the patients that you see in your (response in #CA) and tell us how often you are able to obtain these services when you think they are medically necessary.]
  - 6 Always
  - 5 Almost always
  - 4 Frequently
  - 3 Sometimes
  - 2 Rarely, OR
  - 1 Never
  - 7 (Does not apply)
  - 8 (DK)
  - 9 (Refused)
  - 0 (Facility/Service not available in my area)
  - A. [(If code "019", "020", "023", "043", "085", "133" or "195" in #A10/#A8, OR code "1", "8" or "9" in #A9, or if code "042", "088" or "137" in #A10, OR code "2" or "3" in #A9a, OR code "2" or "3" in #A9a, OR code "2" or "3" in #A9b, ask:) Referrals to specialists of high quality/(Otherwise, ask:) Referrals to other specialists of high quality]

(1315)

B. High quality ancillary services, such as physical therapy, home health care, nutritional counseling and so forth

(1316)

C. Non-emergency hospital admissions

(1317)

D. Adequate number of inpatient days for your hospitalized patients

(1318)

E. High quality diagnostic imaging services

(1319)

#### F8. (Continued:)

- F. (If code "010", "019", "020", "023", "043", "062", "064-065", "082-085", "127", "132", "133", "210", "312", "313", "192" or "195" in #A10/#A8, OR code "1", "8" or "9" in #A9, or code "2" or "3" in #A9a, or code "042", "088" or "137" in #A10, OR code "2" or "3" in #A9b, ask:) High quality inpatient mental healthcare (1320)
- G. (If code "010", "019", "020", "023", "043", "062", "064-065", "082-085", "127", "132", "133", "210", "312", "313", "192" or "195" in #A10/#A8, OR code "1", "8" or "9" in #A9, or code "2" or "3" in #A9a, or code "042", "088" or "137" in #A10, OR code "2" or "3" in #A9b, ask:) High quality OUTPATIENT MENTAL health services

(1321)

# (If code "0", "1" or "4-9" to ALL of #F8-A, #F8-C and #F8-G, Skip to #F9; Otherwise, Continue)

F8a. I am now going to read some reasons why you might be unable to obtain various services. Using any number from one to ten, where "1" is not important, and "10" is very important, rate each of the following reasons for your being unable to obtain (read A, C or G, as appropriate), when you think it is medically necessary. (Read and rotate a-c)

10 Very important

09

80

07

06

05

04

03

02

01 Not important

98 (DK)

99 (Refused)

#### F8a. (Continued:)

- A. (If code "2" or "3" in #F8-A, ask:) [(If code "019", "020", "023", "043", "085", "133" or "195" in #A10/#A8, OR code "1", "8" or "9" in #A9, or if code "042", "088" or "137" in #A10, OR code "2" or "3" in #A9a, OR code "2" or "3" in #A9b, ask:) Referrals to specialists of high quality/(Otherwise, ask:) Referrals to other specialists of high quality]
  - a. There aren't enough qualified service providers or facilities in my area

(2245) (2246)

b. Health plan networks and administrative barriers limit patient access

(2247) (2248)

c. Patients lack health insurance or have inadequate insurance coverage

(2249) (2250)

(There is no B)

# F8a. (Continued:)

С.		code "2" or "3" in #F8-C, ask:) Non-		
	a.	There aren't enough qualified service providers or facilities in my area		
			(2251)	(2252)
	b.	Health plan networks and administrative barriers limit patient access		
			(2253)	(2254)
	c.	Patients lack health insurance or have inadequate insurance coverage		
			(2255)	(2256)
There ar	re no	D-F)		
G.		code "2" or "3" in #F8-G, ask:) High lity OUTPATIENT MENTAL health services		
	a.	There aren't enough qualified service providers or facilities in my area		
			(2257)	(2258)
	b.	Health plan networks and administrative barriers limit patient access		
			(2259)	(2260)
	c.	Patients lack health insurance or have inadequate insurance coverage		
			(2261)	(2262)

	ad A-C and G)? (INTERVIEWER NOTE: Refers to ire practice not just to physician's own	
	ients. Medicaid and Medicare beneficiaries who	
	enrolled in managed care plans should be luded in A or B, respectively.)	
4	All	
3 2	Most Some	
2 1	No new patients/None	
_	No new patients, None	
8	(DK)	
9	(Refused)	
Α.	New patients who are insured through	
•	Medicare, including Medicare managed care	
	patients (1323)	
В.	(If code "06" in "STATE", ask:) New patients	
	who are insured through MediCAL, including MediCAL managed care patients	
	Medical managed care patrents	
	(If code "04" in "STATE", ask:) New patients	
	who are insured through AHCCCS ("Access")	
	(If code "01-03", "05" or "07-56" in "STATE",	
	<u>ask:)</u> New patients who are insured thrugh Medicaid, including Medicaid managed care	
	patients	
С.	New patients who are insured through private	
	or commercial insurance plans including	
	managed care plans and HMOs with whom the	
	practice has contracts (If necessary, say:) This includes both fee for service patients	
	and patients enrolled in managed care plans	
	with whom the practice has a contract. It	

	Is the practice accepting any new patients under Capitated contracts; under capitation, a fixed amount is paid per patient per month regardless of services provided? [(If respondent requests clarification, ask:) Is the practice accepting any new patients under existing capitated contracts?]	F10.
	1 Yes 2 No	
(3270)	<pre>(No capitated contracts in the area) (DK) (Refused)</pre>	
(2216 - 2219)	<b>(:</b>	CLOCK

# <u>SECTION G</u> PRACTICE REVENUE

G1.	Now, I'm going to ask you some questions about the
	patient care revenue received by the (response in
	#CA) in which you work. Approximately what
	percentage of the PRACTICE REVENUE FROM PATIENT
	CARE would you say comes from (read A-B)? (Open
	ended and code actual percent) (Probe:) Your best
	estimate will be fine. [(If necessary, say:) We're
	asking about the patient care revenue of the
	practice in which you work, not just the revenue
	from the patients YOU see.] (INTERVIEWER NOTE:
	"Other public insurance" includes Champus, Champva
	and Tricare)

000 None

001 1% or less

DK (DK)

RF (Refused)

A. Payments from all Medicare plans, including Medicare managed care

(1325 - 1327)

B. (If code "06" in "STATE", ask:) Payments from MediCAL or any other public insurance, including Medical managed care

(If code "04" in "STATE", ask:) Payments from AHCCCS ("Access") or any other public insurance

(If code "01-03", "05" or "07-56" in "STATE", ask:) Payments from Medicaid or any other public insurance, including Medicaid managed care

(1328 - 1330)

(There are no C and D)

## (If response in #G1-A + response in #G1-B > 100, Continue; Otherwise, Skip to "Note" before #G3)

Gla. I have recorded that the combined practice revenue from Medicare and Medicaid is greater than 100 percent, help me resolve this? can you Approximately what percentage of the practice's revenue from patient care comes from (read A-B)? (INTERVIEWER NOTE: Revenue from patients covered by both Medicare and Medicaid should be counted in MEDICARE ONLY) (Open ended and code actual (Probe:) Your best estimate will be percent) fine. [(If necessary, say:) We're asking about the patient care revenue of the practice in which you work, not just the revenue from the patients YOU see.1

000 None

001 1% or less

DK (DK)

RF (Refused)

A. Payments from all Medicare plans, including Medicare managed care

(1334 – 1336)

B. (If code "06" in "STATE", ask:) Payments from MediCAL or any other public insurance, including Medical managed care

(If code "04" in "STATE", ask:) Payments from AHCCCS ("Access") or any other public insurance

(If code "01-03", "05" or "07-56" in "STATE", ask:) Payments from Medicaid or any other public insurance, including Medicaid managed care

(1337 – 1339)

(There is no #G2)

# (If code "3" in #F10, Autocode "000" in #G3, and Skip to #G6; Otherwise, Continue)

Now, again thinking about the patient care revenue G3. from ALL sources received by the practice in which you work, what percentage is paid on a capitated or other prepaid basis? [(If necessary, say:) Under capitation, a fixed amount is paid per patient per month regardless of services provided.] (Probe:) Your best estimate would be fine. and code actual (Open ended percent) (INTERVIEWER NOTE: Includes payments made on a capitated or other prepaid basis from Medicare or Medicaid)

000 None 001 1% or less 002-100 DK (DK)

RF (Refused)

(2438 - 2440)

(There are no #G3a-#G5)

Thinking again about the practice in which you G6. work, we have a few questions about contracts with managed care plans such as HMOs, PPOs, IPAs and Point-Of-Service plans. First, roughly how many managed care contracts does the practice have? (Probe:) Your best estimate would be fine. [(If necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the Direct contracts with employers that use these mechanisms are also considered managed care.] (INTERVIEWER NOTE: Include Medicare managed care, Medicaid managed care, and other government managed care contracts but not traditional Medicare or Medicaid.) (Open ended and code actual number)

```
00 None - (Skip to #G7)
```

01-

19 (Skip to #G8)

20-

97 (Skip to #G6b)

98 98+ contracts (Skip to #G6b)

DK (DK) (Continue)
RF (Refused) (Continue)

(2458) (2459)

G6a. (If code "DK" or "RF" in #G6, ask:) Would you say less than 3 contracts, 3 to 10, or more than 10 contracts?

```
0 (None) - (Skip to #G7)
```

1	Less	than	3 (	1 or	2)	(Skip	to	#G8)
2	3 to	10				(Skip	to	#G8)
3	More	than	10	(11+)	)	(Skip	to	#G8)
8	(DK)					(Skip	to	#G8)

9 (Refused) (Skip to #G8)

(2460)

G6b. (If code "20-97" in #G6, ask:) Just to be sure, is this the number of contracts, or patients? 1 Contracts - (Skip to #G8) 2 Patients - (Continue) 8 (DK) (Skip to #G8) 9 (Refused) (Skip to #G8) (1340) G6c. (If code "2" in #G6b, ask:) In this question, we are asking about contracts. So, roughly how many managed care CONTRACTS does the practice have? (Open ended and code actual number) 00 None - (Continue) 01-97 (Skip to #G8)

(Skip to #G8)

(Skip to #G8)

(1341) (1342)

DK

RF

(DK)

(Refused)

(If code "00" in #G6, or code "0" in #G6a, or code G7. "00" in #G6c, ask:) What percentage, if any, of the patient care revenue received by the practice in which you work comes from all managed care combined? Please include ALL revenue from managed care including, but not limited to, any payments made on a capitated or prepaid basis. (Probe:) Your best estimate will be fine. [(If necessary, say:) Managed care programs include, but are not limited to those with HMOs, PPOs, IPAs, and pointof-service plans.] [(If necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

000 None

001 1% or less

DK (DK)

RF (Refused)

(1343 – 1345)

# (If code "00" in #G6,

# and #G7 is LESS THAN response in #G3, Continue; If code "00" in #G6a or #G6c,

## And #G7 is LESS THAN response in #G3, Continue; Otherwise, Skip to "Section H")

G7a. I may have recorded something incorrectly. I recorded that the percentage of practice revenue from all managed care is less than the percentage of practice revenue that is paid on a capitated or other prepaid basis. This seems inconsistent, so let me ask you again, what percent of patient care revenue received by the practice in which you work comes from all managed care combined? (Open ended and code actual percent) (SURVENT: Show response in #G7)

000 None

101 Less than 1%

DK (DK)

RF (Refused)

(2548 - 2550)

G7b. Let me also ask you again, thinking about the patient care revenue from ALL sources received by the practice in which you work, what percentage is paid on a capitated or other prepaid basis? (Open ended and code actual percent) (SURVENT: Show response in #G3)

000 None

101 Less than 1%

DK (DK)

RF (Refused)

(2551 - 2553)

(All in #G7b, Skip to "Section H")

- G8. (If code "02-97" in #G6c, or code "1-3" in #G6a, or code "02-97" in #G6, ask:) What percentage of the patient care revenue received by the practice in which you work comes from these (response in #G6c/#G6a/#G6) managed care contracts combined? [(If code "001-100", "DK" or "RF in #G3, say:) Please include ALL revenue from these contracts including, but not limited to, any payments made on a capitated or prepaid basis.] (Probe:) Your best estimate will be fine. [(If necessary, say:) Managed care contracts include, but are limited to those with HMOs, PPOs, IPAs, and pointof-service plans.] [(If necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are considered managed care.] (Open ended and code actual percent)
  - (If code "01" in #G6c or #G6, ask:) percentage of the patient care revenue received by the practice in which you work comes from this managed care contract? [(If code "001-100", "DK", or "RF", say:) Please include ALL revenue from this contract including, but not limited to, any payments made on a capitated or prepaid basis.] (Probe once lightly:) Your best estimate will be fine. [(If necessary, say:) Managed care contracts include, but are not limited to those with HMOs, IPAs, and point-of-service plans.] [(If PPOs, necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

#### G8. (Continued:)

(If code "DK" or "RF" in #G6c, or code "8" or "9" in #G6a, ask:) What percentage of the patient care revenue received by the practice in which you work comes from all of the practice's managed care contracts combined? [(If code "001-100", "DK", or "RF", say:) Please include ALL revenue from these contracts including, but not limited to, payments made on a capitated or prepaid basis.] (Probe once lightly:) Your best estimate will be fine. [(If necessary, say:) Managed care contracts include, but are not limited to those with HMOs, PPOs, IPAs, and point-of-service plans.] [(If necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

```
000 None (Continue)
001 1% or less (Continue)

002-
100 (Continue)

DK (DK) (Skip to "Section H")
RF (Refused) (Skip to "Section H")
```

(2462 - 2464)

(If response in #G8 is less than
 response in #G3, Continue;
 If response in #G3 + response
 in #G8="0", Skip to "Section H";
If response in G8 > "000", Skip to #G8d)

- G8a. (If response in #G8 is less than response in #G3, ask:) I have recorded that your revenue from all managed care contracts is less than the amount you received on a capitated or prepaid basis. We would like you to include all capitated payments in estimating managed care revenue. Would you like to change your answer of (read 1-2)?
  - 1 (Response in #G8) percent from all managed care contracts (Continue)

OR

- 2 (Response in #G3) percent received on a
   capitated or prepaid basis (Skip to
   #G8c)
- 3 (Both) (Continue)
- 4 (Neither) (Skip to "Note" before #G9)
- 8 (DK) (Skip to "Note" before #G9)
- 9 (Refused) (Skip to "Note" before #G9)

(2465)

#### G8b. (If code "1" or "3" in #G8a, ask:)

(If code "02-97" in #G6c, or code "1-3" in #G6a or code "02-97" in #G6, ask:) So, what percentage of the practice's revenue from patient care would you say comes from all of these managed care contracts combined? (Open ended and code actual percent)

(If code "01" in #G6c or #G6, ask:) So, what percentage of the practice's revenue from patient care would you say comes from this managed care contract? (Open ended and code actual percent)

000 None - (Skip to "Section H")

001 1% or less

DK (DK)

RF (Refused)

(2466 - 2468)

G8c. (If code "2" or "3" in #G8a, ask:) So what percentage of patient care revenue received by the practice in which you work is paid on a capitated or other prepaid basis? [(If necessary, say:) Under capitation, a fixed amount is paid per patient per month regardless of services provided.] (Probe:) Your best estimate would be fine. (Open ended and code actual percent)

000 None

001 1% or less

002-

100

DK (DK)

RF (Refused)

(1352 – 1354)

(1346)

- G8d. (If "specific" response in #G8b/#G8 = "specific" response in #G8c/#G3, ask:) So, all of the practice's managed care revenue is paid on a capitated, or prepaid basis, is this correct?
  - 1 Yes (Skip to "Note" before #G9)
  - 2 No (Continue)
  - 8 (DK) (Skip to "Note" before #G9)
  - 9 (Refused) (Skip to "Note" before #G9)

- G8e. (If code "2" in #G8d, ask:) I have recorded that (response in #G8b/#G8) percent of the practice revenue is from managed care and that (response in #G8c/#G3) percent of the practice revenue is paid on a capitated or prepaid basis. Which of these is incorrect?
  - 1 Revenue from managed care (Continue)
  - 2 Revenue paid on capitated or prepaid basis - (Skip to #G8g)
  - 3 Both are correct (Skip to
    "Note" before #G9)
  - 4 Neither are correct (Continue)
  - 8 (DK) (Skip to "Note" before #G9)
  - 9 (Refused) (Skip to "Note" before #G9)

\_\_\_\_(1347)

#### G8f. (If code "1" or "4" in #G8e, ask:)

(If code "02-97" in #G6c, or #G6 or code "1-3" in #G6a, ask:) What percentage of the patient care revenue received by the practice in which you work comes from these [(response in #G6c/#G6)] managed care contracts combined? (If code "001-100", "DK" or "RF in #G3, say:) Please include ALL revenue from these contracts including, but not limited to, any payments made on a capitated or prepaid basis. (Probe:) Your best estimate will be fine. [(If necessary, say:) Managed care contracts include, but are not limited to those with HMOs, PPOs, IPAs, and point-of-service plans.] [(If necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

"01" in #G6c or #G6, ask:) What (If percentage of the patient care revenue received by the practice in which you work comes from this managed care contract? Please include ALL revenue from this contract including, but not limited to, any payments made on a capitated or prepaid basis. (Probe:) Your best estimate will be fine. [(If necessary, say:) Managed care contracts include, but are not limited to those with HMOs, PPOs, IPAs, and point-of-service plans.] [(If necessary, Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

(If code "DK" or "RF" in #G6c or code "8" or "9" in #G6a, ask:) What percentage of the patient care revenue received by the practice in which you work comes from all of the practice's managed care contracts combined? Please include ALL revenue from these contracts including, but not limited to, any payments made on a capitated or prepaid (Probe:) Your best estimate will be fine. basis. [(If necessary, say:) Managed care contracts include, but are not limited to those with HMOs, PPOs, IPAs, and point-of-service plans.] necessary, say:) Managed care includes any type of group health plan using financial incentives or specific controls to encourage utilization of specific providers associated with the plan. Direct contracts with employers that use these mechanisms are also considered managed care.] (Open ended and code actual percent)

# G8f. (Continued:)

000	None	-	(Skip	to	"Section H	I")
001	1% or	les	SS		(Continu	ue)
002- 100					(Contin	ue)
DK RF	(DK) (Refus	sed	)		(Continu (Continu	-

(1348 - 1350)

	(If code "2" or "4" in #G8e, ask:) Now the about the patient care revenue from ALL so received by the practice in which you work, percentage is paid on a capitated or other probasis? [(If necessary, say:) Under capitatifixed amount is paid per patient per regardless of services provided.] (Probe:) best estimate would be fine. (Open ended and	ources what repaid on, a month Your		
		cludes		
	payments made on a capitated or other pr	repaid		
	basis from Medicare or Medicaid)			
	000 None 001 1% or less			
	002- 100			
	DK (DK) RF (Refused)			
			(1191	- 1193)
(Ther	e are no #G9-#G10)			
(Ther	e is no #G11)	HOLD	0	(2508)
(Ther	e is no #G12)			
CLOCK	:			
			(2224	- 2227)

# SECTION H PHYSICIAN COMPENSATION METHODS AND INCOME LEVEL

# (If code "1" in #C1, AND code "06" in #C2, Skip to #H9; Otherwise, Continue)

(INTERVIEWER READ:)

Now, I'm going to ask you a few questions about how the practice compensates you personally. [(If code "2" or "8-9" in #A4, say:)

Again, please answer only about the main practice in which you work.]

- H1. Are you a salaried physician?
  - 1 Yes (Skip to #H3)

2 No (Continue)
8 (DK) (Continue)
9 (Refused) (Continue)

(2510)

- H2. (If code "2", "8" or "9" in #H1, ask:)
  paid in direct relation to the amount of time you work, such as by the shift or by the hour?
  - 1 Yes (Skip to #H4)

2 No (Skip to #H7)
8 (DK) (Skip to #H7)
9 (Refused) (Skip to #H7)

9 (Refused) (Skip to #H7) (2511)

- H3. (If code "1" in #H1, ask:) Is your base salary a fixed amount that will not change until your salary is re-negotiated or is it adjusted up or down during the present contract period depending on your performance or that of the practice? [(If necessary, say:) Adjusted up or down means for example, some practices pay their physicians an amount per month that is based on their expected revenue, but this amount is adjusted periodically to reflect actual revenue produced.] (INTERVIEWER NOTE: Base salary is the fixed amount of earnings, independent of bonuses or incentive payments.)
  - 1 Fixed amount (Continue)
  - 2 Adjusted up or down (Skip to #H7)
  - 8 (DK) (Continue)
  - 9 (Refused) (Continue)
- H4. (If code "1" in #H2, OR code "1", "8" or "9" in #H3, ask:) Are you also currently eligible to earn income through any type of bonus or incentive plan? (INTERVIEWER NOTE: Bonus can include any type of payment above the fixed, guaranteed salary)
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

(2513)

(2512)

- H5. I am going to read you a short list of factors that are sometimes taken into account by medical practices when they determine the compensation paid to physicians in the practice. For each factor, please tell me whether or not it is EXPLICITLY considered
  - (If code "1" in #H1, AND code "2" or "8-9" in #H4, ask:) When your salary is determined, does the (response in #CA) consider (read A-D)?
  - (If code "1" in #H1 AND code "1" in #H4, ask:)
    When either your base salary or bonus is determined, does the (response in #CA) consider (read A-D)?
  - (If code "1" in #H2, AND code "2", "8" or "9" in #H4, ask:) When your pay rate is determined, does the (response in #CA) consider (read A-D)?
  - (If code "1" in #H2, AND code "1" in #H4, ask:)
    When either your pay rate or bonus is determined,
    does the (response in #CA) consider (read A-D)?
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)
  - A. Factors that reflect your own productivity [(If necessary, say:) Examples include the amount of revenue you generate for the practice, the number of relative value units you produce, the number of patient visits you provide, or the size of your enrollee panel]

(2514)

B. Results of satisfaction surveys COMPLETED BY YOUR OWN PATIENTS

(2515)

C. Specific measures of quality of care, such as rates of preventive care services for your patients

(2516)

#### H5. (Continued:)

D. Results of practice profiling comparing your pattern of using medical resources to treat patients with that of other physicians (INTERVIEWER NOTE: A practice profile is a report that is usually computer generated, which compares you to other physicians on things like referrals to specialists, hospitalizations and other measures of cost effectiveness.)

\_\_\_\_(2517)

# (If code "2", "8" or "9" in #H5-D, Skip to #H9; Otherwise, Continue)

- H6. (If code "1" in #H5-D, ask:) Are these profiles risk-adjusted to consider the health status of your patients or the severity of their illnesses? (INTERVIEWER NOTE: Other than by age and gender)
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

\_\_\_\_(2518)

#### (All in #H6, Skip to #H9)

- H7. (If code "2", "8" or "9" in #H2, or code "2" in #H3, ask:) I am now going to read you a short list of factors that are sometimes taken into account by medical practices when they determine the compensation paid to physicians in the practice. For each factor, please tell me whether or not it is EXPLICITLY considered when your compensation is determined. Does the (response in #CA) in which you work consider (read A-D)?
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)
  - A. Factors that reflect YOUR OWN productivity

    [(If necessary, say:)] Examples include the amount of revenue you generate for the practice, the number of relative value units you produce, the number of patient visits you provide, or the size of your enrollee panel]

(2519)

B. Results of satisfaction surveys COMPLETED BY YOUR OWN PATIENTS

(2520)

C. Specific measures of quality of care, such as rates of preventive care services for your patients

(2521)

D. Results of practice profiles comparing your pattern of using medical resources to treat patients with that of other physicians (INTERVIEWER NOTE: A practice profile is a report that is usually computer generated, which compares you to other physicians on things like referrals to specialists, hospitalizations and other measures of cost effectiveness)

(2522)

# (If code "2", "8" or "9" in #H7-D, Skip to #H9; Otherwise, Continue)

н8.	(If	code	"1"	in	#H7-	D, a	sk:)	Are	thes	e profi	les
	risk-	-adjus	sted	to	con	sider	the	e he	alth	status	of
	your	pati	ents	or	the	sever	rity	of t	cheir	illness	es?
	(INT	ERVIEV	VER N	OTE:	: Ot	her t	han	by a	ge and	d gender	· )

- 1 Yes
- 2 No
- 8 (DK)
- 9 (Refused)

(2547)

H9. Of your total income from your (response in #CA) during calendar year 1999, approximately what percent would you estimate was earned in the form of bonuses, returned withholds, or other incentive payments based on your performance? (INTERVIEWER NOTE: Do not include income based on productivity, only specific incentives or returned withholds/bonuses.) (Open ended and code actual percent)

- 000 None (Continue)
- 001 1% or less (Skip to #H10)

002-

100 (Skip to #H10)

DK (DK) (Skip to #H10)
RF (Refused) (Skip to #H10)

(2523 - 2525)

- H9a. (If code "000" in #H9, ask:) Were you eligible to earn any bonuses or other performance-based payments in 1999? (INTERVIEWER NOTE: This question is asking about eligibility to earn bonuses in 1999. Earlier question (#H4) asked about whether the physician is eligible to earn a bonus at the time of the interview.)
  - 1 Yes
  - 2 No
  - 8 (DK)
  - 9 (Refused)

\_\_\_\_(2526)

H10. During 1999, what was your own net income from the practice of medicine to the nearest \$1,000, after expenses but before taxes? Please include contributions to retirement plans made for you by the practice and any bonuses as well as fees, salaries and retainers. Exclude investment income. [(If code "2" in #A4, say:) Also, please include earnings from ALL practices, not just your main practice.] [(If necessary, say:) We investment income as income from investments in medically related enterprises independent of a physician's medical practice(s), such as medical labs or imaging centers.] [(If "Refused", say:) This information is important to a complete understanding of community health care patterns and will be used only in aggregate form to ensure your confidentiality of the information.] (Open ended and code actual number) (If response is > \$1 million, verify)

0000000-9999999 (Skip to #H10b)

DK (DK) (Continue)
RF (Refused) (Continue)

(2527 - 2533)

H10a. (If code "DK" in #H10, ask:) Would you say that it was (read 01-04)?

(If code "RF" in #H10, ask:) Would you be willing to indicate if it was (read 01-04)?

- 01 Less than \$100,000
- 02 \$100,000 to less than \$150,000
- 03 \$150,000 to less than \$250,000
- 04 \$250,000 or more
- 98 (DK)
- 99 (Refused)

(2534) (2535)

(3271)

#### (Form 2)

H10b.

How would you describe your overall personal financial incentives in your practice? On balance, do these incentives favor reducing services to individual patients, favor expanding services to individual patients, or favor neither?

1 Reducing services to

individual patients (Continue)

2 Expanding services to

individual patients (Continue)

- 3 Favor neither (Skip to #H10c)
- 8 (DK) (Skip to #H10c)
- 9 (Refused) (Skip to #H10c)

#### (Form 2)

- H10b-1. (If code "1" or "2" in #H10b, ask:) Have these incentives [(if code "1" in #H10b, say:) reduced/(if code "2" in #H10b, say:) expanded] services a little, a moderate amount, or a lot?
  - 1 A little
  - 2 A moderate amount
  - 3 A lot
  - 4 (None)
  - 8 (DK)
  - 9 (Refused)

(3272)

- H10c. The next question deals with your perception of competition physicians. among competition physicians, among we pressure to undertake various activities to attract and retain patients. Now, thinking about your practice specifically, how would you describe the competitive situation your practice faces? Would you say competitive, somewhat competitive, or not at all competitive?
  - 3 Very competitive
  - 2 Somewhat competitive
  - 1 Not at all competitive
  - 8 (DK)
  - 9 (Refused)

(3273)

н11.	Do you consider yourself to be of Hispanic origin, such as Mexican, Puerto Rican, Cuban, or other Spanish background? [(Probe for refusals with:) I understand this question may be sensitive. We are trying to understand how physicians from different ethnic and cultural backgrounds perceive some of the changes that are affecting the delivery of medical care.]		
	1 Yes 2 No		
	8 (DK) 9 (Refused)		(1659)
н12.	What race do you consider yourself to be? [(If respondent hesitates, read 06-09)] [(Probe for refusals with:) I understand this question may be sensitive. We are trying to understand how physicians from different ethnic and cultural backgrounds perceive some of the changes that are affecting the delivery of medical care.] (Open ended and code) (NOTE TO INTERVIEWER: If respondent specifies a mixed race or a race not pre-coded, code as "01 - Other")		
	01 Other (list)		
	02- 05 HOLD		
	06 White/Caucasian		
	07 African-American/Black 08 Native American (American Indian)		
	or Alaska Native		
	09 Asian or Pacific Islander		
	98 (DK) 99 (Refused)		
		(1660)	(1661)
CLOCI	[:		
		(2233	
		( 4433	4430)

## (NOTE TO SURVENT: If code "2" in S6a, Autocode "2" in I0)

IO. (If code "1" in S6a, ask:) Our records indicate that you have already received your \$25 honorarium check. Did you receive the check?	
1 Yes 2 No 8 (DK) 9 (Refused)	(3275)
SECTION I ENDING	
I1. Let me verify that your name and address are (read information from "Fone" file/S4)? (ENTER ALL THAT ARE INCORRECT)	
1 First name is incorrect 2 Last name is incorrect 3 Address is incorrect 4 City is incorrect 5 State is incorrect 6 Zip code is incorrect 7 All information correct	* (2554)
1ST NAME:	(1772 – 1780)
LAST NAME: (Display from "Fone" file)	(1781 – 1800)
ADDRESS #1: (Display from "Fone" file)	(1841 – 1879)
ADDRESS #2: (Display from "Fone" file)	(3013 – 3037)

I1. (Continued:)

CITY: (Display from "Fone" file)

(2682 - 2694)

STATE: (Display from "Fone" file)

(2707) (2708)

ZIP CODE: (Display from "Fone" file)

(2709 – 2713)

(There are no #I1a-#I2)

- I3. Is the address of the practice we have been talking about during this interview (read 1-2)?
  - 1 (Address from "Fone" file) (Skip to "Note" before #I5)
  - 2 (If code "3-6" in #I1, say:) (Address in #I1)
     (Skip to "Note" before #I5)
  - 3 No/Neither (Continue)
  - 8 (DK) (Skip to "Note" before #I5)
  - 9 (Refused) (Skip to "Note" before #I5)

14.	Will you please give me the address of the practice we have been talking about during this interview? (Open ended)		
	STREET ADDRESS #1:		
		(2732	- 2761)
	STREET ADDRESS #2:		
		(3088	- 3117)
	<u>CITY</u> :		
		(2762	- 2786)
	STATE:		
		(2787)	(2788)
	<u>ZIP</u> :		
		(2789	- 2793)

# (If code "08", "09" or "10" in #C2, #C3 or #C3c, Continue; If code "1" or "2" in #C3a, Continue; Otherwise, Skip to #J4)

I5. What is the name of the practice we have been talking about during this interview? Include the names of government clinics as eligible responses to this question. [(If necessary, say:) This information will help us to better understand the nature of physician organizations in your region.] (Open ended)

00001	Other (list)
00002	HOLD
00003	HOLD
00004	No/Yes mind giving
00005	HOLD
99998 99999	(DK) (Refused)

(2812 - 2816)

### (If code "2" in S1c, Continue; Otherwise, Skip to #J4)

- I6. Are you with the same medical practice that you were with in July, 1998, or have you changed practices since then? [(If respondent asks, say:) We will consider you as being in the same practice if your practice changed addresses, clinics, offices, or partners, BUT kept the same parent organization. OR, if your old practice changed ownership; for example, if the practice was sold to an outside organization, but you stayed on under the new ownership. A new practice would be one where you terminated your relationship and joined a different one.] [(If respondent has multiple practices and changed one but NOT all of them, say:) We are interested in whether you are with the same main medical practice that you were with in July, 1998. By main practice, we mean the practice where you spend most of your time.]
  - 1 Yes, same practice (Skip to #J4)
  - 2 No, changed practice (Continue)
  - 8 (DK) (Skip to #J4)
  - 9 (Refused) (Skip to #J4)

( )

MON.	<u>TH</u> :			
01	January			
02	February			
03	March			
04	April			
05 06	May June			
06 07	July			
07	August			
09	September September			
10	October			
11	November			
12	December			
13	(DK)			
14	(Refused)			
		(	)	(
YEA	₹:			
999	3 (DK)			
999				
	( = ===================================			
		(		
	re no #18-#19)			

## $rac{SECTION\ J}{SWEEP-UP}$

### (There are no #J1-#J3)

J4.		cludes the survey unless you have any ment you would like to add. (Open ended)			
	0001	Other (list)			
	0002- 0003	HOLD			
	0004	No/Nothing			
	9998 9999	(DK) (Refused)			
			(2555	- 2558)	
J5.	offer to Encourage www.hschaname on				
	1 Yes 2 No				
		ter's Website address so they can access themselves			(28
(282		oe placed in the Center's mailing list			
(The	re is no C	HOLD	0	(2822)	
J6.	INTERVIEW	JER COMMENTS:			
			(3118)	(3119)	
©Тне (	GALLUP ORGANIZ	AATION 123			

2000-01 PHYSICIAN SURVEY

ERVIEWER READ:)	Gallup Organization of Lincoln, Nebraska. I'd like to thank you for your time. Our mission is to "help people be heard", and your opinions are important to Gallup in		
(VA)		VT)	
	INTERVIEWER I.D.#		_ (571- 574)
<b>&lt;</b> :		(2204	
MEDICAL EDUCAT	ION: (Code from "Fone" file)	(	
PHYSICIAN NAME	: (Code from "Fone" file)	(	
GENDER: (Code	from "Fone" file)		_ ( )
PREFERRED PROFI	ESSIONAL MAILING ADDRESS: (Code from		
	(VA:  RIPTIVE NAMES ( AND NUMBER OF ( MEDICAL EDUCAT:  PHYSICIAN NAME  GENDER: (Code  PREFERRED PROF	Nebraska. I'd like to thank you for your time. Our mission is to "help people be heard", and your opinions are important to Gallup in accomplishing this.  (VALIDATE PHONE NUMBER AND THANK RESPONDEN  INTERVIEWER I.D.#  C:  RIPTIVE NAMES ONLY: NEED ACTUAL "FONE" FILE NAMES AND NUMBER OF COLUMNS!  MEDICAL EDUCATION: (Code from "Fone" file)  PHYSICIAN NAME: (Code from "Fone" file)  GENDER: (Code from "Fone" file)  PREFERRED PROFESSIONAL MAILING ADDRESS: (Code from	Nebraska. I'd like to thank you for your time. Our mission is to "help people be heard", and your opinions are important to Gallup in accomplishing this.  (VALIDATE PHONE NUMBER AND THANK RESPONDENT)  INTERVIEWER I.D.#  INTERVIEWER I.D.#  (2204  RIPTIVE NAMES ONLY: NEED ACTUAL "FONE" FILE NAMES AND NUMBER OF COLUMNS!  MEDICAL EDUCATION: (Code from "Fone" file)  PHYSICIAN NAME: (Code from "Fone" file)  GENDER: (Code from "Fone" file)  PREFERRED PROFESSIONAL MAILING ADDRESS: (Code from

			(	
BIRTH DATE: <u>(</u>	Code from "Fone" file)	-		
BIRTH PLACE:	(Code from "Fone" file	<u>.)</u>		
CITIZENSHIP AN	ID VISA: (Code from "F	one" file)	(	-
			(	_
LICENSURE DATE	: (Code from "Fone" f	ile)		
			(	_
JATIONAL BOARI	O COMPLETION DATE: (Co	ode from "Fo	<u></u>	
<u>-</u>			(	-
<del></del>				
	IONAL ACTIVITY: <u>(Co</u>	de from "Fo	ne"	
MAJOR PROFESS	IONAL ACTIVITY: <u>(Co</u>	de from "Fo	<u>ne"</u>	

SECONDARY SPECIALTY: (Code from "Fone" file)			
	(		)
PRESENT EMPLOYMENT: (Code from "Fone" file)			
AMERICAN SPECIALTY BOARD CERTIFICATION: (Code from "Fone" file)	(	-	)
CURRENT AND FORMER MEDICAL TRAINING - (INSTITUTION, SPECIALTY, TRAINING DATES): (Code from "Fone" file)	(	-	)
CURRENT AND FORMER GOVERNMENT SERVICE: (Code from "Fone" file)	(		)
ECFMG CERTIFICATE: (Code from "Fone" file)			)
TYPE OF PRACTICE: (Code from "Fone" file)	(		)
TELEPHONE NUMBER: (Code from "Fone" file)	(		)
FAX NUMBER: (Code from "Fone" file)			,
	(	-	)

#### **REVISIONS**

#### 7/17/00

Revised wording in B8, B10, B11, D4-A1, D4-B1, D4-C1 and D5

Added "Note" before B10

Revised "If" condition on D5-B, D5-C, D5-D and D5-E

#### 7/25/00

Revised "Note" before #B3a, #B3d and #G1a

Revised "Note" after #B3d

Revised "Skips" on #B3a and #B3b,

Deleted #B5a, #B5b, #B8, D2a, D2b, D5-A and D6

Revised wording in #B10, #B11, #D5 and #F8a

Revised codes in #B10, #B11 and #D5

Deleted "Skips" on #D2

Added code "7" to #D5

Added "Note' before #G3

Moved #H10b and #H10b-1 after #H10a to before #H1

Deleted #H10c

#### 7/26/00

Added #H10c back in

Added #H10b and #H10b-1 (Form 1) after #C12

Moved #H10b and #H10b-1 back to after #H10a and changed to "Form 2"

### Revisions (Continued:)

### 8/10/00

Added S6a and #I0

Added code "3", "4" and "5" to #A1

Added code "4" to #H10b-1 and #H10b-1

Added code "0" to #F8

Revised "Note" before #F8a

Revised wording in #F8a

Revised "If" condition on #F8a-A, #F8a-C and #F8a-G

#### 8/29/00

Added "Note to Interviewer" to D3

Added "If" condition to F8-F

Revised web site address in J5

#### 10/16/00

Revised codes in A8

#### 1/8/01

Added verbiage to F10

Added I6 and I7

#### Revisions (Continued:)

#### 5/3/01

Revised "Note" after C3a and C3d

Revised "Skip" on code "11", "15", "17", "19", "20", "21", "25" and "26 in C3b

Revised "Skip" on code "01", "25" and "26" in C3c

Revised "Note" before C6b and C7