# 2004 Oregon Physician Workforce Survey Report of Results

#### Presented to

Oregon Department of Human Services, Health Services, Office of Medical Assistance Programs Oregon Medical Association Office for Oregon Health Policy and Research

March 7, 2005

# Presented by

# OMPRO

A Healthcare Quality Resource

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# **Executive Summary**

Patient access to medical care in Oregon has been studied by multiple organizations in the past several years. To assist in the discussion, the Oregon Department of Human Services, Health Services, Office of Medical Assistance Programs (OMAP); the Oregon Medical Association (OMA); and the Office for Oregon Health Policy and Research (OHPR) joined forces to field a comprehensive physician workforce survey to gather valuable information on the current and future capacity of physicians in Oregon. This report is intended to present the data gathered from the 2004 Oregon Physician Workforce Survey and is one part of a large, ongoing effort to study and understand patient access to the physician workforce in the state. The focus of this report is to present data on physicians'

- changes to their practice
- acceptance of insurance payer types
- availability, especially of specialty care providers
- concerns about professional medical liability insurance

Data collection for the survey began in early September and continued through mid-October. Returned surveys were obtained from 3,508 physicians—a response rate of 34 percent.

The highlights of results from the report are grouped by topic and listed below.

#### Practice issues

- Surgical specialty physicians (33 percent) reported more often that they planed to retire in the next five years than did other specialty physicians.
- Overhead costs, Medicare reimbursement, the cost and availability of liability insurance, and Medicaid/OHP reimbursement were most frequently cited by respondents as very important issues.
- The most frequently cited changes to practice within next two years were increasing referral of complex cases, reducing patient care hours, increasing diagnostic procedures, stopping providing certain services, and stopping providing certain services to specific groups of patients.
- More physicians have been very satisfied with their medical career overall (50 percent) than have been satisfied within the last 12 months (34 percent).

#### Limiting acceptance of insurance payers

- Of respondents, 73 percent accepted Medicare payers. Comparatively, 58 percent accepted all Medicaid/OHP managed care and 59 percent Medicaid/OHP fee-for-service payers. Medicaid payers were the most restricted; that is, physicians limited acceptance or did not accept any patients with Medicaid/OHP insurance with the greatest frequency.
- The top reasons cited for limiting or not accepting any Medicare or Medicaid/OHP patients were: reimbursement, overhead costs, administrative requirements, and maintaining a balanced payer mix.

#### Specialty care

- Of those who reported ever practicing maternity care, 42 percent (226) were delivering babies at the time of the survey.
- Of those who were currently delivering, 23 (10 percent) were planning to stop deliveries in the next year; 14 planned to stop all deliveries, 9 planned to stop Medicaid deliveries.
- Of the maternity care physicians who stopped deliveries, 76 percent stopped more than two years ago. The top factors that influenced their decision to stop deliveries were medical liability premiums and time demands.
- Of the 22 neurosurgeons responding to the survey, 15 were currently perform brain and spine surgery, and 3 performed only spine surgery; 4 perform neither brain nor spine surgery.

#### Liability insurance

- Physicians in surgical specialties reported higher premiums (\$30,000 median annual premium) than other specialties (\$10,000 median annual premiums for primary care and medical specialty physicians).
- Obstetrics/gynecology physicians reported a median annual premium amount of \$38,000 and neurosurgeons \$54,000.
- Physicians reported most frequently that they have increased referrals (11 percent) or definitely planned to increase (12 percent) referrals of complex cases due to their concerns about liability insurance. Nine percent had already stopped providing certain services and four percent definitely anticipated doing so.

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## Introduction

# **Background**

The 2004 Oregon Physician Workforce Survey was administered through the joint efforts of the Oregon Department of Human Services, Health Services, Office of Medical Assistance Programs (OMAP); the Oregon Medical Association (OMA); and the Office for Oregon Health Policy and Research (OHPR). These organizations came together in the interest of collaboration and efficiency in fielding one comprehensive survey to the Oregon physician community. OMAP was interested in surveying physicians about their practice behaviors with regard to Oregon Health Plan (OHP) enrollees; OMA had planned to field a follow-up survey to its 2003 Physician Workforce Assessment survey; OHPR joined the collaboration to gather data about healthcare providers in Oregon. Joining forces has resulted in valuable information on the current and future capacity of physicians in light of the challenges of providing medical care in Oregon.

Many healthcare organizations have asserted that access to medical services in Oregon is an increasing problem.<sup>1,2,3,4</sup> Medicare and Medicaid patients are having difficulty finding access to medical care. Physicians are leaving their practices and stopping the provision of certain services. These trends have been explained by many factors. Escalating costs of medical liability premiums have been linked to the exit from the state of specialty physicians who perform high-risk procedures and the cessation of certain high-risk procedures by these physicians.<sup>5,6</sup> Unfavorable fiscal conditions, coupled with the inability of physicians to subsidize their public care with higher-paying private patients, have left publicly insured clients vulnerable. Additionally, physicians are increasingly limited in their ability to absorb losses due to higher practice overhead costs from increasing malpractice premiums and other cost drivers, such as reimbursement rates and administrative requirements.<sup>7</sup>

The results from the OMA 2003 Physician Workforce Assessment showed that about one-half of physicians limited acceptance of Medicare patients and more than 50 percent limited acceptance of Medicaid patients. The most frequently cited reasons for limiting access to Medicare and Medicaid patients were the cost or availability of liability insurance and the cost of doing business. According to a national survey of physicians conducted in 2002, the percentage of physicians accepting new fee-for-service Medicare patients fell significantly, by more than 6 percentage points, from 1999 to

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<sup>&</sup>lt;sup>1</sup>Physician workforce in Oregon 2004: a snapshot. [Oregon Health & Science University Center for Rural Health Web site]. Available at www.ohsu.edu/oregonruralhealth/workforcedata.htm. Accessed January 12, 2005.

<sup>&</sup>lt;sup>2</sup>Campaign to bring medical insurance reform back to Oregon gaining momentum. ["Monday News Now" Web site of the Oregon Association of Hospitals and Health Systems]. August 9, 2004. Available at www.oahhs.org/publications/mondaynews/mn080904.htm#oahhs. Accessed January 12, 2005.

<sup>&</sup>lt;sup>3</sup>Smits AK, Clark EC, Nichols M, Saultz, JW. Factors influencing cessation of pregnancy care in Oregon. *Fam Med* 2004;36(7):490–5.

<sup>&</sup>lt;sup>4</sup>Oregon Medical Association. Preliminary report of the 2003 physician workforce assessment. Paper presented to the Oregon Medical Association House of Delegates, 129th Annual Meeting, April 26–27, 2003; Gleneden Beach, Oregon. <sup>5</sup>Smits AK, Clark EC, Nichols M, Saultz, JW. *Fam Med* 2004;36(7):490–5.

<sup>&</sup>lt;sup>6</sup>Oregon Medical Association. Preliminary report of the 2003 physician workforce assessment. Gleneden Beach, Oregon. 
<sup>7</sup>Cunningham PJ. Mounting pressures: physicians serving Medicaid patients and the uninsured, 
1997–2001. Tracking Report—Results from the Community Tracking Study No. 6. [Center for Studying Health System]

Change Web site]. December 2002. Available at www.hschange.com/CONTENT/505/505.pdf. Accessed January 12, 2005.

<sup>&</sup>lt;sup>8</sup>Oregon Medical Association. Preliminary report of the 2003 physician workforce assessment. Gleneden Beach, Oregon.

2002. The number of physicians who accept either new fee-for-service or new managed care Medicaid patients during the same period declined by almost 9 percentage points.<sup>9</sup>

Although low reimbursement rates have been found to be the most significant barrier to physician participation in Medicare and Medicaid, higher reimbursement rates are no longer sufficient to maintain participation in Medicaid. Some of the other barriers include the higher economic costs of providing care to Medicaid patients than to other patients, the social complexity of Medicaid patients compared with other patients, the difficulty of coordinating specialty care and tests for Medicaid patients, the relatively higher medical complexity of Medicaid patients compared with other patients, and the cumbersome administrative processes associated with Medicaid compared with other insurance payers.

The medical community has asserted that physicians are retiring, leaving the state to practice elsewhere, and ceasing to offer high-risk procedures and specialties. <sup>10,11</sup> The specialties most often mentioned as in danger of losing physicians include obstetrics/gynecology and neurosurgery. A recent Oregon Health & Science University (OHSU) study on obstetrics care in Oregon found that more than one-half of physicians and midwives performing deliveries in the state have either stopped or plan to stop this care. Patients in rural areas and those insured by Medicaid are disproportionately affected by this trend. <sup>12</sup> The major reasons cited for stopping the delivery of babies were high professional medical liability premiums and low reimbursement rates.

Neurology is another specialty often cited as on the decline. The 2003 OMA Physician Workforce Assessment showed that 4 percent of neurosurgeons had stopped providing all care whereas 30 percent indicated that they had stopped providing certain services. The OMA has attributed the exit of neurosurgeons and cessation of specific services to mounting liability premiums.

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<sup>&</sup>lt;sup>9</sup>Schoenman JA, Feldman JJ. 2002 survey of physicians about the Medicare program: results of the Medicare Payment Advisory Commission's 2002 survey of physicians. March 2003: No. 03-01. [Medicare Payment Advisory Commission (MedPAC) Web site]. Available at: www.medpac.gov/publications/contractor\_reports/Mar03\_02PhysSurvRpt2.pdf. Accessed January 12, 2005.

<sup>&</sup>lt;sup>10</sup>High-risk specialties have higher rates of lawsuits than other specialties. Grover S. Medical malpractice damage caps: impacts of limiting noneconomic damages. July 29, 2004. [Oregon Medical Association Web site]. Available at: www.theoma.org/Files/ECON\_NW\_MEDMAL\_REPORT.pdf. Accessed January 14, 2005.

<sup>&</sup>lt;sup>11</sup>Oregon Medical Association. Preliminary report of the 2003 physician workforce assessment. Paper presented to the Oregon Medical Association House of Delegates, 129th Annual Meeting, April 26–27, 2003; Gleneden Beach, Oregon.
<sup>12</sup>Smits AK, Clark EC, Nichols M, Saultz, JW. Fam Med 2004;36(7):490–5.

## Objectives and scope

The objectives of this report are to synthesize data from the 2004 Oregon Physician Workforce Survey into findings that will

- provide reliable data on the current capacity of Oregon's medical community to deliver health care to Oregon healthcare consumers as well as forecast the future capacity of the state's physicians
- identify barriers to physician participation in OHP, in addition to reimbursement
- assess the effects of professional liability insurance costs on access to care

The data identify the characteristics of physicians who do and do not participate in

- o OHP/Medicaid
- Medicare
- o other lines of insurance
- o treating the uninsured

This report is intended to present the data gathered from the 2004 Oregon Physician Workforce Survey. These findings are one part of a joint effort to study and understand patient access to the physician workforce in the state. Project stakeholders will formulate conclusions and recommendations for healthcare policies and programs in Oregon.

# Methodology

## Study design

This survey used a cross-sectional study design to assess the current capacity of Oregon's medical community. Cross-sectional surveys are used to gather information on a population at a single point in time. Data obtained from descriptive cross-sectional studies are useful for planning and resource allocation. The 2004 Oregon Physician Workforce Survey data were collected using a questionnaire that utilizes both qualitative (e.g., open-ended) and quantitative (e.g., forced-choice) questions.

One of the goals of the survey is to provide a comprehensive picture of the current landscape of the Oregon medical community. Therefore, the survey was administered to all physicians who provide direct patient care in Oregon and to those who have administrative roles. The source of the sampling frame was the May 2004 version of the OMA census database, which is based in part on the Oregon Board of Medical Examiners (BME) census database and includes both OMA members and nonmembers. To meet the eligibility criteria, physicians were to have an active license in Oregon and either reside in, or have a practice listed in, Oregon.<sup>13</sup> It is estimated that about 1,000 physicians hold Oregon practice licenses but practice elsewhere, including in the neighboring states of Washington, Idaho, and California. The survey allowed these physicians to identify themselves. Physicians deemed ineligible include medical students, retired, inactive, or deceased physicians. For the purposes of the survey, 10,354 physicians meet these criteria.

#### Survey development and administration

The OMA 2003 Physician Workforce Assessment survey was used as basis for the 2004 Oregon Physician Workforce Survey. The survey was developed by the OMA, OMAP, and OHPR and finalized after one round of cognitive testing. The cognitive testing involved a group of nine physicians, including specialists and rural practitioners. All physicians who agreed to participate in the cognitive testing provided their feedback during telephone interviews. Pretest subjects were asked to evaluate question content and questions with the potential for misinterpretation. In addition to the cognitive testing, internal pretesting with staff physicians was completed to identify questionnaire problems. The internal quality control process was completed with a focus on skip patterns and formatting issues.

The survey was administered as a paper survey delivered by mail. The mail component involved a four-wave protocol, which consisted of a prenotification postcard, an initial questionnaire with cover letter and reply envelope, a reminder postcard, and a second questionnaire, cover letter and reply envelope to nonrespondents. All pieces were sent by first-class mail. An initial postcard was sent on August 15, 2004, to all physicians notifying them of the upcoming survey. On August 20, 2004, the first round of surveys was sent to 10,354 eligible physicians. Responses were tracked with a printed unique identifier on the reply envelope, to maintain respondents' anonymity. Approximately 150 surveys were returned for invalid addresses. These were tracked and addresses were updated as available to target for the second round of mailing. A reminder postcard was mailed to all physicians on September 1, 2004. The second round of surveys was sent to 8,560 nonrespondents on September 10, 2004. Approximately 73 percent of the 3,508 returned surveys were received from the first mailing.

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<sup>&</sup>lt;sup>13</sup>An active license is one that is listed as unrestricted, limited, public order on file, or prior action.

Returned surveys were processed and tracked in a database by the unique identifiers printed on the back of each reply envelope. Surveys not returned in the provided reply envelope were inspected individually by the OMPRO project manager for inclusion. If a duplicate survey was returned, it was not entered. Once the surveys were tracked and entered into a database, they were sent to data entry. The data entry person hand-entered the responses into a response database that was created with rigorous validation codes for logic and skip patterns. Initially, the lead analyst and project manager monitored data entry on a daily basis to check for entry errors and monitored the validation log for entries that failed the validation. Survey responses were entered until October 13, 2004.

In order to ensure the integrity of the data used for analysis of the survey, several steps were taken to check the accuracy and completeness of the data that were entered. The validation process had two parts:

- ensure that data were entered accurately by data entry staff
- ensure that entered data were complete and valid

Validation rules were created in the data entry database to check the validity of entered data. These validation checks determined whether data elements were missing (i.e., not entered) or fell within valid parameters. Most of the validation occurred at the time of data entry.

#### **Data analysis**

Descriptive and inferential statistics were used to analyze survey data, employing the Statistical Program for the Social Sciences (SPSS) software version 10.0. Frequencies and chi-square tests for n-independent samples were used to evaluate statistically significant differences among subgroups. Statistically significant variation was detected in physician response to certain survey questions. Discussion is provided in the Results section for noteworthy differences. For Sections 1–5, crosstabulations are provided in Appendix B with Pearson chi-square test statistics and p-values.

Variables that are consistently used in the report are coded as follows:

**Physician specialties**, self-designated by respondents, were grouped into five categories as defined by OMA:

- primary care
- medical specialties
- surgical specialties
- hospital-based
- other<sup>14</sup>

**Practice locations** were categorized into seven geographical regions based on the ZIP codes provided by respondents:

- Portland metropolitan area
- mid-Willamette valley
- northwestern Oregon
- southern Oregon

<sup>&</sup>lt;sup>14</sup>Responses that fell into the "other" physician specialty category included primarily psychiatry and occupational medicine.

- eastern Oregon
- southwestern Oregon
- central Oregon

Each region is made up of two or more Oregon counties. See Appendix A, Table A-2 for the distribution of counties within each region.

**Maternity care** is defined as the delivery of babies, for the purposes of this analysis. Physicians were deemed maternity care providers if

- they indicated that they currently perform deliveries
- they indicated that they do not currently perform deliveries, but they also indicated when they stopped delivering babies<sup>15</sup>

#### **Data limitations**

Self-reported data may be subject to error for several reasons. Retrospective self-reported responses are vulnerable to memory bias; that is, events that occurred a long time ago or the frequency of certain behaviors may be difficult to recall by respondents. Also, respondents may not have complete information to provide accurate responses. For instance, this survey asked physicians to respond to questions related to their medical practice's acceptance of patient groups by payer types. Physicians employed by a healthcare system may not be aware whether the system restricts access to specific groups of patients (e.g., Medicaid patients).

Several factors affect the response rate achieved by a given survey, including the length and timing of the field period, the mode of interviewing, the interest of the survey content to respondents, incentives, and the total level of resources available to follow up with difficult-to-reach respondents. Despite the number of attempts to contact physicians, a substantial percentage of the surveys (66 percent) were not returned. Survey nonresponse often biases survey results because it makes the results less generalizable to the population.

Gender, region, and age distributions in the survey sample were compared to census data of the Oregon physician population recorded by the Oregon Board of Medical Examiners (BME) for 2003. The comparison did not reveal any large differences between survey respondents and Oregon physicians in the BME census data. Appendix A, Table A-1 shows the comparison of demographic characteristics for the Oregon Board of Medical Examiners 2003 census data and the 2004 Oregon Physician Workforce Survey sample.

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<sup>&</sup>lt;sup>15</sup>Four obstetrics/gynecology physicians indicated that they do not currently deliver babies but did not answer the corresponding skip pattern questions about cessation of deliveries. They were included as maternity care providers.

# **Results**

# Section 1. Respondent demographics

Of the 10,354 Oregon physicians who received the survey, 34 percent (3,508) returned a complete or partially completed survey. Of the returned surveys, 666 were completed by physicians who indicated that they do not provide any patient care or have an administrative role in Oregon; 320 were incomplete or unusable. Surveys were considered complete if more than 60 percent of the "core" questions applicable to all respondents were answered. The final analytic file included 2,522 usable surveys. See Figure 1-1 for a flow chart accounting for all surveys mailed.

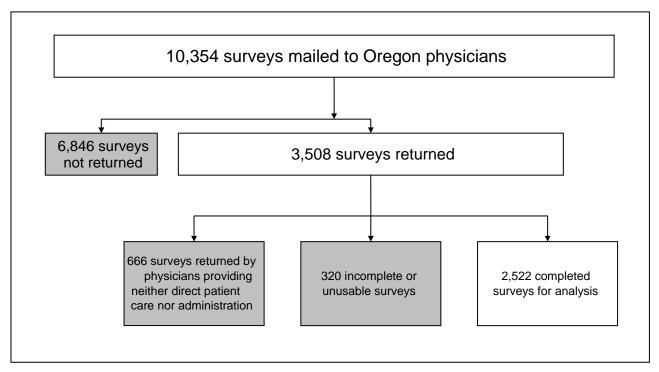


Figure 1-1. Flow chart of 2004 Oregon Physician Workforce Survey mailing and returned surveys

The respondents were largely representative of all physicians in the state according to their age distribution, gender, and practice location, with the exception of physicians in the Portland metropolitan region who were slightly underrepresented by survey respondents. Respondents were

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<sup>&</sup>lt;sup>16</sup>Physicians indicated their ineligibility in one of two ways: by checking a box in the instructions section of the survey that his or her professional time does not involve any direct patient care or administration, or by responding in survey question 8 that he or she is fully retired, or not practicing or not employed in a medical field.

<sup>&</sup>lt;sup>17</sup>Surveys were deemed unusable if they were returned with illegible identifiers, missing pages, or no responses (completely blank surveys).

<sup>&</sup>lt;sup>18</sup>Core questions include 12–15, 17–18, 20–21, 24, 27, 29–36, 39–40, 45–47, 50. Questions intended for specialty physicians only and questions that are part of skip patterns are not included in the core set.

<sup>&</sup>lt;sup>19</sup>To maximize the number of complete surveys in the final analytic file, the 60 percent "rule" for completeness was used. Of the potentially usable surveys, 90 percent of respondents (2,535) completed 60 percent of the survey.

predominantly white males between the ages of 40 and 59 and practiced in urban areas, either in the Portland metropolitan region or in the mid-Willamette valley.<sup>20</sup>

#### Age and gender

Figure 1-2 shows the distribution of ages of survey respondents.<sup>21</sup>

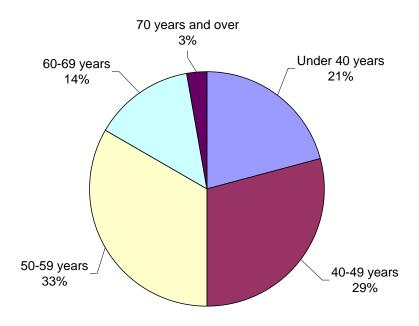


Figure 1-2. Age distribution of survey respondents

Of the 2,522 surveys used for analysis, 72 percent were completed by males; 28 percent by females.<sup>22</sup>

#### Race and ethnicity

Physicians reported that they belong to at least one of six race categories. Table 1-1 on the next page shows the distribution of responses.

Office of Medical Assistance Programs

<sup>&</sup>lt;sup>20</sup>For more information on the classification of regions as urban, see Section 2, Hours spent on administrative tasks, page 25.

<sup>&</sup>lt;sup>21</sup>The age distribution of physicians responding to the 2004 Physician Workforce Survey was similar to the overall age distribution of physicians in Oregon, according to the 2003 physician census kept by the Oregon Board of Medical Examiners (BME).

<sup>&</sup>lt;sup>22</sup>The gender distribution of physicians responding to the 2004 Physician Workforce Survey was similar to the overall gender distribution of physicians in Oregon, according to the 2003 physician census kept by the Oregon BME.

Table 1-1. Racial distribution of survey respondents

Race <sup>a</sup>	Percent
White	90
Asian	6
Other	2
American Indian or Alaskan Native	1
Black or African American	1
Native Hawaiian or Pacific Islander	0

<sup>&</sup>lt;sup>a</sup>Categories are not mutually exclusive.

Two percent of the respondents (52 physicians) reported their ethnicity as Hispanic or Latino.

#### Language proficiency

Respondents reported on the languages in addition to English in which they could communicate effectively for most clinical purposes. Spanish was the language most often named; 17 percent reported that they communicate effectively in this language. Russian, Vietnamese, and other languages were reported by 11 percent of the respondents. Fifteen physicians reported that they can communicate for clinical purposes in Russian; four mentioned using Vietnamese to communicate, and 261 named French, German, or other languages.

#### **Practice location**

Nearly three-quarters (72 percent) of physicians reported the ZIP code in which their primary practice is located. Practice locations were categorized into seven geographical regions. Each region is made up of two or more Oregon counties. Figure 1-3 shows the distribution of respondents' practices by region.<sup>23</sup> For the list of regions and counties within each region, see Appendix A, Table A-2.

<sup>.</sup> 

<sup>&</sup>lt;sup>23</sup>The regional distribution of physicians responding to the 2004 Physician Workforce Survey was similar to the overall regional distribution of physicians in Oregon, according to the 2003 physician census figures of the Oregon BME.

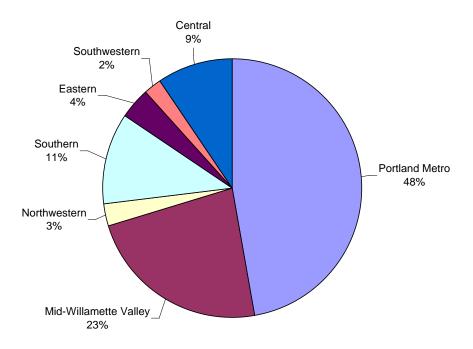


Figure 1-3. Regional distribution of respondents' practice locations

See Appendix B, Tables B-1 and B-2 for a crosstabulation of practice location by age of respondent and physician specialty.

## Section 2. Practice environment

Respondents provided information on their practice environment, including the physician specialty, retirement plans, employment role, ownership status, length of licensure, practice size, lead times for patient appointments, workload, important issues, anticipated changes, and satisfaction with their career.

#### Physician specialty

Nearly all of the respondents that completed the survey reported their specialty (2,506). The responses were combined into five specialty categories used by OMA in the 2003 Physician Workforce Assessment. A brief description of the category and major specialty types follows:

- **Primary care** includes internal medicine, family practice, pediatrics, and obstetrics/gynecology.
- Medical specialties include internal medicine specialties, ophthalmology, and urology.
- **Surgical specialties** include general surgery and surgical specialties, such as orthopedics and neurosurgery.
- **Hospital-based specialties** include anesthesiology, emergency medicine, pathology, and radiology.
- Other specialties include psychiatry and occupational medicine.

Figure 2-1 shows the distribution of the five major specialty categories among survey respondents.

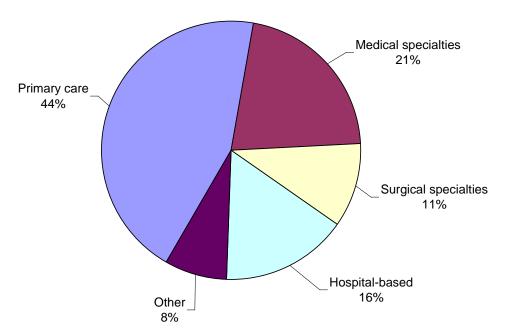


Figure 2-1. Specialty distribution of respondents

For a full list of the 60 reported physician specialties and the number and percent of respondents reporting each specialty, see Appendix B, Table B-3.

A small percentage of respondents reported having a pediatric focus within their specialty: 5 percent of respondents in medical specialties and 3 percent of those in surgical specialties said that their practice included pediatrics.<sup>24</sup> Among the respondents that reported hospital-based specialties, 36 percent are emergency medicine physicians.

#### **Practice setting**

The majority of physicians reported that their primary practice setting is in a private, for-profit clinic or a hospital.<sup>25</sup> Table 2-1 shows the distribution of practice settings reported by respondents.

Table 2-1. Primary practice settings reported by respondents

Practice setting <sup>a</sup>	Percent
Clinic, private, for-profit	54
Hospital	43
Clinic, private, not-for-profit	12
Clinic, public	5
Other	4

<sup>&</sup>lt;sup>a</sup>Categories are not mutually exclusive.

See Appendix B, Tables B-4 through B-6 for a crosstabulation of practice setting by respondents' practice location, physician specialty, and length of licensure.

#### Retirement plans

More than three-quarters of the respondents (78 percent) reported that they plan to retire more than five years from now; 22 percent said they plan to retire some time in the next five years.

There is statistically significant variation by age in reported retirement plans. As expected, older physicians reported plans to retire sooner than younger physicians. The majority of physicians 60 to 69 years old (74 percent) plan to retire in the next five years, as do 73 percent of physicians 70 years and older. There also appears to be significant difference by specialty, with a higher percentage of physicians in surgical specialties reporting plans to retire in the next five years (33 percent) than those in other specialties. For a crosstabulation of retirement plans by physician specialty, age, and practice location, see Appendix B, Tables B-7 through B-9.

#### **Employment role**

All of the respondents who practice or have administrative roles reported that they have one or more employment roles. Physicians who were fully retired—neither practicing clinically nor

<sup>&</sup>lt;sup>24</sup>The survey did not specifically ask physicians to state whether their specialty included pediatrics. The number of respondents who did not mention pediatrics, but do, in fact, see children in their practice, is unknown.

<sup>&</sup>lt;sup>25</sup>The survey instructs respondents to consider the location at which they spend the greatest amount of time in direct patient care as the primary practice location.

employed in an administrative role—did not complete the survey. Table 2-2 shows the distribution of employment roles among respondents.

Table 2-2. Employment role distribution among respondents

Employment role <sup>a</sup>	Percent
Clinical practice	96
Teaching	19
Administration	12
Research	9
Resident/fellow	2
Semi-retired	$0_p$

<sup>&</sup>lt;sup>a</sup>Categories are not mutually exclusive.

#### Length of licensure

The majority of physicians who responded to the survey (89 percent) reported that they have had a medical license in any state, including Oregon, for six or more years. Table 2-3 shows the distribution of respondents' length of licensure.

Table 2-3. Length of licensure reported by respondents

Length of licensure	Percent
Less than 2 years	2
2–5 years	9
6–10 years	15
11–20 years	29
More than 20 years	45

See Appendix B, Table B-10 for a crosstabulation of physician specialties by length of licensure.

#### Ownership or employment status

Physicians reported on their ownership or employment status at their primary practice site. Table 2-4 on the next page shows the distribution of responses.

<sup>&</sup>lt;sup>b</sup>Semi-retired physicians that completed the survey were less than 1 percent of all respondents (9 respondents).

Table 2-4. Ownership or employment status of respondents

Ownership or employment status	Percent <sup>a</sup>
Full or part owner of practice	55
Employee of practice or health system	35
Independent contractor	7
Other	2
Volunteer	1

<sup>&</sup>lt;sup>a</sup>Percents do not add to 100 percent due to rounding.

For respondent ownership or employment status by practice location, physician specialty, and the length of licensure, see Appendix B, Tables B-11 through B-13.

#### **Practice size**

Roughly one-third of respondents (35 percent) reported that they practice in a large group practice (10 or more physicians). Table 2-5 shows that physicians who work in solo, small, and medium group practices are approximately evenly distributed.

Table 2-5. Practice size distribution of respondents

Practice size	Percent
Large group practice (10 or more physicians)	35
Solo practice (1 physician)	24
Small group practice (2-4 physicians)	22
Medium group practice (5–9 physicians)	20

There is significant variation in respondents' primary practice size by practice location, physician specialty, and length of licensure. Medium-sized practices have higher percentages of physicians licensed for less than 10 years than other practice size categories. More than one-half of solo practice physicians have been licensed for more than 20 years. The majority of large group practices report a Portland metropolitan or Mid-Willamette Valley practice location (83 percent). Surgical specialty physicians comprise 18 percent of solo practices, which is proportionally greater than their representation in other practice sizes (X<sup>2</sup>=243.582, p<0.0001). Appendix B, Tables B-14 through B-16 show the crosstabulations of practice size by length of licensure, practice location, and physician specialty.

#### Lead time for scheduling a non-urgent appointment

Respondents reported a wide range for the number of days required for new patients to schedule a non-urgent appointment. Reported lead times for appointments were combined into four roughly equivalent categories. Although the average lead time for a new patient appointment is 17 days,

Table 2-6 shows that nearly one-half (45 percent) see new patients within 7 days.<sup>26</sup> The majority of respondents reported seeing established patients within 7 days (66 percent); the average lead time for an appointment for established patients is 9 days.<sup>27</sup>

Table 2-6. Lead time to schedule non-urgent appointment reported by respondents

Days to schedule a non-urgent appointment by patient type	Percent <sup>a</sup>
New patients	
0–7 days	45
8–14 days	22
15–30 days	21
More than 30 days	12
Established patients	
0–7 days	66
8–14 days	19
15–30 days	13
More than 30 days	3

<sup>&</sup>lt;sup>a</sup>Percents do not add to 100 percent due to rounding.

Primary care physicians reported seeing new patient within 7 days more frequently than specialty physicians. More than one-half of primary care physicians (54 percent) reported that, on average, new patients were seen within seven days of making an appointment. New-patient appointments within seven days of scheduling were reported by 31 percent of medical specialty physicians and 43 percent of surgical specialty physicians. For established patients, 76 percent of primary care physicians reported an average lead time within seven days, compared with 48 percent of medical specialty physicians and 59 percent of surgical specialty physicians. For a crosstabulation of lead times for appointments for new and established patients by physician specialty and practice location, see Appendix B, Tables B-17 through B-20.

#### Caseload

Total caseload categories were determined by examining the distribution of reported numbers of new and established patients seen in a typical week. Caseload levels were rolled up into five categories and a sixth category of zero patients for respondents who do not routinely have a fixed panel of patients.<sup>28</sup> See Table 2-7 for the distribution of the number of patients seen in a typical week.

<sup>&</sup>lt;sup>26</sup>A total of 1,806 respondents reported lead time for an appointment for new patients: the minimum reported lead time for an appointment for new patients was 0 days; maximum, 365; the standard deviation is 24 days.

<sup>&</sup>lt;sup>27</sup>A total of 1,791 respondents reported lead time for an appointment for established patients: the minimum reported lead time for an appointment for established patients is 0 days; maximum, 365; the standard deviation is 16 days.

<sup>28</sup>A total of 2,522 respondents reported the number of new and established patients seen in a typical week. The minimum reported number of patients was 0 patients; maximum, 800; the standard deviation is 47 days.

Table 2-7. Number of patients seen in a typical week

Number of patients seen in a week	Percent <sup>a</sup>
0 patients	15
1–25 patients	17
26–50 patients	19
51–75 patients	19
76–100 patients	19
More than 100 patients	12

<sup>&</sup>lt;sup>a</sup>Percents do not add to 100 percent due to rounding.

Differences in caseload were detected by practice location, specialty, and length of licensure. Physicians with practices outside the Portland metropolitan region reported seeing more than 100 patients in a typical week more often than physicians in the Portland metropolitan region. As might be expected, primary care physicians reported heavier patient caseloads than physicians in other specialties. Primary care physicians more often reported seeing 76 or more patients in a typical week (47 percent). See Appendix B, Tables B-21 through B-23 for crosstabulations of patient caseload by length of licensure, practice location, and physician specialty.

#### Number of hours worked

The number of hours a respondent worked was determined by adding the number of hours per week in direct patient care across primary and secondary practice locations.<sup>29</sup> If a respondent reported specialties in addition to a primary specialty, these hours were included. Respondents reported a wide range for the number of hours worked each week; the average number of hours worked in a typical week was 44.<sup>30</sup> Most respondents work full time or more than full time in a typical week. Table 2-8 shows that two-thirds (66 percent) of respondents work 40 or more hours each week.

Table 2-8. Number of hours worked in a typical week

Number of hours worked each week	Percent
Less than 20 hours per week	11
20-39 hours per week	23
40-60 hours per week	41
More than 60 hours per week	25

<sup>&</sup>lt;sup>29</sup>Work hours were defined to include time spent on patient record keeping, patient-related office work, and travel time connected with seeing patients. Training, teaching, research time, hours on call when not actually working, and travel between home and work were not included.

<sup>&</sup>lt;sup>30</sup>A total of 2,520 respondents reported number of hours per week. The minimum reported average number of hours worked per week was 0; maximum, 160; the standard deviation is 21. Two physicians reported working more than 168 hours in a week, which exceeds the possible number of hours in a week.

Significant differences were found in the number of hours worked in a typical week by gender, location of practice, physician specialty, and age. Female physicians (45 percent) reported working fewer than 40 hours a week more often than male physicians (30 percent). Physicians practicing outside of urban areas reported work weeks of greater than 60 hours more frequently than physicians practicing within urban areas.<sup>31</sup> Physicians in surgical specialties reported working more than 60 hours a week (46 percent) more often than physicians in other specialties. Physicians older than 60 years of age reported working fewer hours each week than their younger counterparts.

See Appendix B, Tables B-24 through B-27 for a crosstabulation of hours worked each week by gender, age, practice location, and physician specialty.

#### Hours spent on administrative tasks

Physicians reported on the number of weekly hours spent on administrative tasks related to direct inpatient and outpatient care: for example, charting, phone calls, referrals, and paperwork. Physicians spent, on average, 10 hours a week on administrative tasks. Table 2-9 shows the distribution of responses.

Table 2-9. Hours spent on administrative tasks each week

Hours spent on administrative tasks each week	Percent
Less than 5 hours	20
5–9 hours	29
10-14 hours	28
15–19 hours	10
20 or more hours	13

Significant differences were found in the amount of time spent in administrative tasks by location of practice, physician specialty, and length of licensure. Physicians in southern Oregon more often reported spending more than 20 hours a week on administrative tasks (21 percent) than physicians in other areas of the state. Likewise, physicians likely to have a fixed patient panel—e.g., those in primary care, medical specialties, and surgical specialties—reported spending more hours performing administrative tasks than physicians in hospital-based and other specialties. Appendix B, Tables B-28 through B-31, show the number of hours spent on administrative tasks by practice location, physician specialty, length of licensure, and gender.

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<sup>&</sup>lt;sup>31</sup>This analysis uses the definition of urban and rural areas created by the Office of Rural Health at Oregon Health & Sciences University: rural areas are "all geographic areas 10 or more miles from the centroid of a population center of 30,000 or more." More information is available at the Office of Rural Health Web site: www.ohsu.edu/oregonruralhealth/urbanruralcheck.pdf.

<sup>&</sup>lt;sup>32</sup>A total of 2,456 respondents reported the number of hours per week they spend on administrative tasks. The minimum reported average number of hours worked was 0; maximum, 80; the standard deviation is 7 hours. Seven physicians reported spending more than 40 hours a week on administrative tasks.

#### **On-call hours**

Physicians reported on the number of hours they spend on call in a typical week. Table 2-10 shows that almost one-quarter of physicians report more than 30 hours of on-call time each week.

Table 2-10. Number of on-call hours each week

Hours each week respondent is on call	Percent <sup>a</sup>
Never on call	19
1–10 hours	12
11–20 hours	14
21–30 hours	18
More than 30 hours	24
Always on call	12

<sup>&</sup>lt;sup>a</sup>Percents do not add to 100 percent due to rounding.

The number of on-call hours reported varies by physician specialty, length of licensure, and practice location. For example, 50 percent of physicians in rural areas of the state reported being on call more than 30 hours a week compared with 33 percent of physicians in urban areas reporting being on call for more than 30 hours each week. Physicians in surgical specialties reported spending more than 30 hours a week on call more often than physicians in other specialties. Appendix B, Tables B-32 through B-35 show crosstabulations of on-call hours by length of licensure, practice location, physician specialty, and urban/rural region designation.

#### Issues important to respondents

Physicians rated the importance of 21 current issues in health care. Financial issues such as overhead cost, Medicare reimbursement, the cost or availability of liability insurance, and Medicaid reimbursement were the top issues rated as "very important" by roughly two-thirds of respondents or more. Figure 2-2 shows all issues ranked by importance.

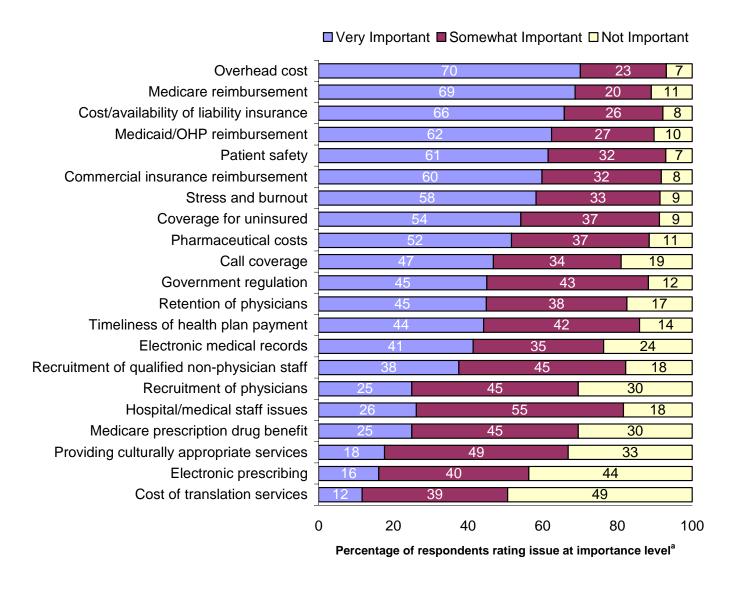


Figure 2-2. Issues ranked by importance level

<sup>&</sup>lt;sup>a</sup>Bar percentages may not add to 100 percent due to rounding.

For crosstabulations of physicians' importance ratings on current healthcare issues by practice location and physician specialty, see Appendix B, Tables B-36 and B-37.

#### Anticipated changes to practice in the next two years

Physicians reported on the changes they anticipate making to their practice in the next two years with regard to providing services, accepting patients, and planning for their business in the upcoming two years. Figure 2-3 shows the changes that respondents have considered making within the next two years. Increasing referral of complex cases is the change that respondents most often reported they are likely to make; 12 percent of respondents reported they "definitely will" make this change.

For crosstabulations of anticipated changes to practice by specialty and practice location, see Appendix B, Tables B-38 and B-39.

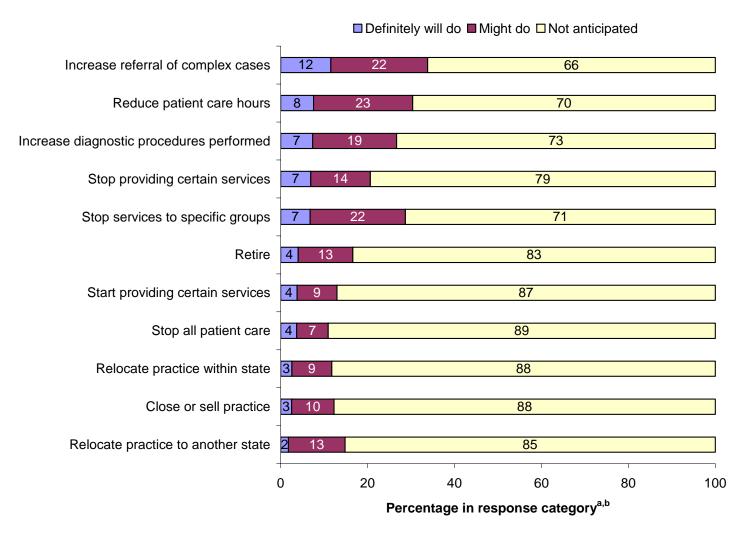


Figure 2-3. Anticipated changes to practice in the next two years<sup>a</sup>

<sup>&</sup>lt;sup>a</sup>This analysis excludes physicians who responded that the question was "not applicable" to their practice.

<sup>&</sup>lt;sup>b</sup>Percents do not add to 100 percent due to rounding.

# Changes to hospital admitting privileges

Most physicians reported that they had not made any changes to their hospital admitting privileges within the last 12 months (85 percent). Of the physicians who reported making changes, the most frequently cited reasons for the change in hospital privileges included a change in practice and increased demand for call coverage.

#### Satisfaction

More physicians have been very satisfied with their medical career overall (50 percent) than have been very satisfied with their career within the past 12 months (34 percent). Figure 2-4 shows percentages of reported satisfaction at all levels for respondents' careers overall and careers in the past 12 months.

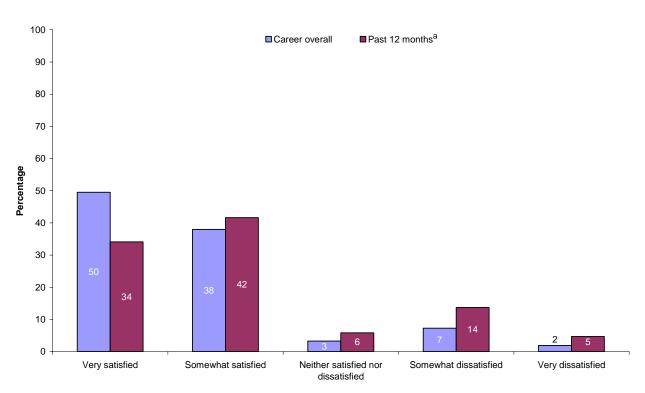


Figure 2-4. Respondents' satisfaction with career overall and with career in past 12 months

For crosstabulations of respondents' satisfaction ratings (for both career overall and past 12 months) by specialty, length of licensure, size of primary practice, and other characteristics, see Appendix B, Tables B-40 through B-53.

<sup>&</sup>lt;sup>a</sup>Percents do not add to 100 percent due to rounding.

More than one-half of the respondents identified their patient relationships as their greatest source of satisfaction; 25 percent mentioned the intellectual challenge as their greatest source of satisfaction. Table 2-11 shows respondents' reported sources of satisfaction.

Table 2-11. Greatest source of professional satisfaction

Source of satisfaction	Percent
Patient relationships	52
Intellectual challenge	25
Practice environment	14
Income	6
Other	3

Physicians' reports of the greatest source of their satisfaction varied by specialty, length of licensure, and size of primary practice. Appendix B, Tables B-54 through B-60 show the crosstabulations of sources of satisfaction by physician specialty, practice location and size, length of licensure, region (urban or rural), practice setting, and employment role.

# **Section 3: Acceptance of payers**

Respondents were asked to indicate the payer types their practice accepted or limited as well as the major factors contributing to the decision to limit acceptance of patients by payer.

#### Acceptance level of insurance payer types

Physicians reported whether their office accepts or limits each insurance payer and uninsured patients. Table 3-1 shows the level of acceptance by payer type. Respondents reported accepting Medicaid payers (both fee-for-service and managed care) at the lowest percentages.

Table 3-1. Acceptance of payer types

	Payer acceptance <sup>b</sup>				
Payer type <sup>a</sup>	Accept all	Limit acceptance	Accept none		
Commercial	82	16	2		
Medicare	73	18	9		
Medicaid fee-for-service	59	27	14		
Medicaid managed care	58	26	17		
TRICARE/CHAMPUS <sup>c</sup>	70	14	16		
Workers' Compensation	65	18	16		
Uninsured	66	28	5		

<sup>&</sup>lt;sup>a</sup>Categories are not mutually exclusive.

Within each payer category, there are significant differences in acceptance across practice locations and specialties. Physicians in the Portland metropolitan region reported the lowest percentages of acceptance in all payer categories (with the exception of Workers' Compensation). Primary care physicians reported accepting Medicaid (both fee-for-service and managed care) and Medicare payers less often than physicians in other specialties.

<sup>&</sup>lt;sup>b</sup>Row percentages may not add to 100 percent due to rounding.

<sup>&</sup>lt;sup>c</sup>TRICARE/CHAMPUS insurance programs are offered by the U.S. Department of Defense and the Veteran's Administration, respectively.

#### Comparative restriction of payer types

Table 3-2 compares respondents' restrictions of each payer type with restrictions on all other payer types to determine whether payers are restricted to the same degree. The "payer type restricted" column indicates the payer under consideration. The count indicates the number of respondents who reported that their practice restricts the payer type under consideration. The "percentage restricting additional payer type" columns represent the additional payer types. For example, of the 375 respondents that restrict commercial insurance, 66 percent also restrict Medicare, 82 percent restrict Medicaid managed care, 80 percent restrict Medicaid fee-for-service, and so on.

Practices that restrict Medicare restrict both Medicaid managed care and fee-for-service payers at high levels (88 percent and 90 percent, respectively). Physicians who reported restricting either Medicaid managed care or fee-for-service payers most often also restrict the other Medicaid payment form. Practices that restrict commercial insurance also report high percentages of restriction of other payer types and the uninsured.

Table 3-2. Comparison of restriction by payer type

		Percentage restricting additional payer type <sup>a</sup>						
Payer type restricted	Count	Commercial	Medicare	Medicaid managed care	Medicaid fee-for-service	TRICARE/ CHAMPUS	Workers' Compensation	Uninsured
Commercial	375	_	66	82	80	77	75	70
Medicare	582	42	_	88	90	71	68	65
Medicaid managed care	876	34	60	_	91	60	58	61
Medicaid fee-for-service	859	34	58	94	_	61	58	62
TRICARE/CHAMPUS	608	45	64	84	83	_	70	65
Workers' Compensation	697	39	54	71	70	61	_	60
Uninsured	702	37	53	78	76	60	63	_

a— indicates the payer type under consideration.

<sup>&</sup>lt;sup>33</sup>If the practice "limits acceptance" or "accepts none" (does not accept patients with this payer type), the practice is considered to restrict the payer type.

# Factors in decision to limit patient acceptance by payer

Physicians whose practices limited or restricted patient payer types were asked to rate the importance of 12 factors in the decision to limit or restrict the payer type.<sup>34</sup> The 12 factors were grouped into three major categories: financial, administrative, or patient-related characteristics. Figures 3-1 through 3-3 show the percentages of physicians who rated each factor as very important in their decision to restrict business for the payer type.

Figure 3-1 shows that reimbursement and overhead costs are pronounced factors in physicians' restrictions of all payer types, especially Medicare and Medicaid patients.

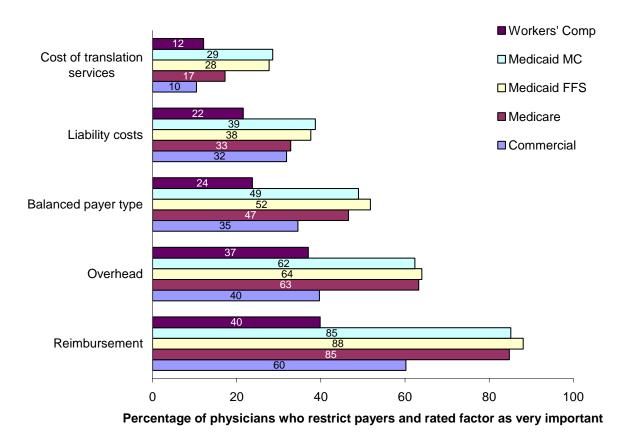


Figure 3-1. Financial factors rated as very important in decision to limit or restrict patient payers

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<sup>&</sup>lt;sup>34</sup>Survey question 16 prompts respondents "For each of the lines of business in which you limit or DO NOT accept patients, please indicate the importance of each factor on your decision to restrict or close your practice."

Figure 3-2 shows that administrative requirements are very important factors in the decision to restrict patients for

- roughly half of physicians restricting Medicare and Medicaid payers
- nearly three-quarters of physicians who restrict Workers' Compensation as a payer (72 percent)

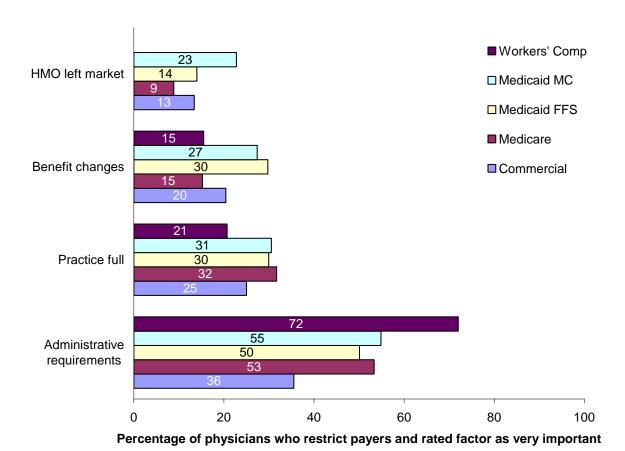


Figure 3-2. Administrative factors rated as very important in decision to limit or restrict patient payers

Physicians restricting Medicaid patients cited patient-related factors as very important in the decision to restrict patients with these insurance payers. Figure 3-3 shows that patient social needs and noncompliance were considered very important factors more often by physicians whose practices limit Medicaid managed care or Medicaid fee-for-service patient payers.

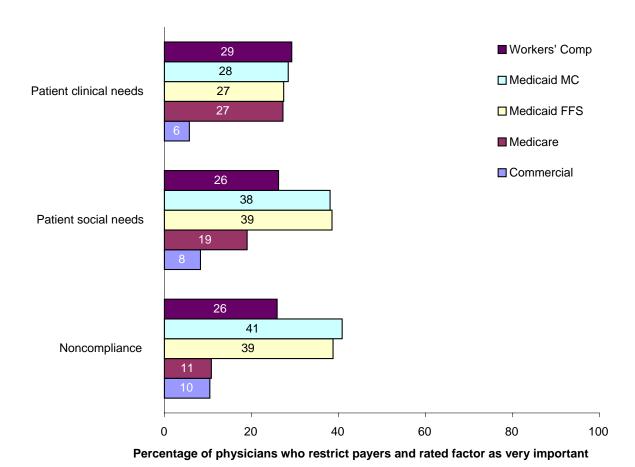


Figure 3-3. Patient-related factors rated as very important in decision to limit or restrict patient payers

For crosstabulations of patient payer acceptance by physician specialty and practice location, see Appendix B, Tables B-61 and B-62.

# Section 4. Specialty care

The 2004 Oregon Physicians Workforce Survey focused on two primary areas of specialty care: maternity care and neurosurgery.

#### **Maternity care**

Physicians indicated whether they ever have or currently practice maternity care.<sup>35</sup> Physicians currently practicing maternity care indicated the procedures they perform. Physicians who had practiced maternity care and reported they had ceased delivering babies ranked the factors contributing to their decision to stop delivering babies.

# Physicians currently delivering babies

Of those who reported ever having delivered babies, 42 percent, or 226 physicians, currently deliver babies. More than one-half of those currently delivering are obstetrics/gynecology (ob/gyn) physicians; the remainder are mostly family practice physicians. The gender distribution of current maternity care physicians is relatively even—48 percent females and 52 percent males. Almost one-half of respondents who currently deliver babies have practices in the Portland metropolitan region (46 percent) and more than one-half have been licensed for more than 10 years (56 percent).

Physicians who currently deliver babies indicated the types of procedures their maternity practice includes. Nearly all respondents indicated that they deliver babies of Medicaid patients. Table 4-1 shows the number and percentage of physicians performing each procedure, as well as the total number of respondents for each procedure.

Table 4-1. Maternity care procedures performed by physicians practicing maternity care

	Physicians practicing procedure		Total respondents	
Maternity care procedure	#	%	#	
Medicaid deliveries	192	95	203	
Assist cesarean	182	90	202	
High-risk pregnancies or deliveries	158	74	213	
Perform cesarean	128	65	197	
Vaginal birth after cesarean (VBAC)	108	52	207	

Appendix B, Table B-63 shows the distribution of physicians who deliver babies by gender, length of licensure, practice setting and location, and ob/gyn and specialty licenses. Tables B-64 through

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<sup>&</sup>lt;sup>35</sup>For the purposes of maternity care analyses, the practice of maternity care is defined as delivery of babies.

<sup>&</sup>lt;sup>36</sup>In order for a physician to be included as a maternity care provider, he/she had to report performing deliveries currently or had to indicate if he/she is not currently delivering, and the length of time elapsed since stopping deliveries.

B-67 in Appendix B show crosstabulations of maternity care procedures by practice location, gender, length of licensure, and ob/gyn licensure.

#### Physicians no longer delivering babies

Of the 226 physicians currently delivering babies, 23 (10 percent) indicated that they plan to stop delivering babies in the next year. Fourteen physicians reported that they will stop all deliveries; nine physicians reported that they plan to stop Medicaid deliveries.

Approximately three-quarters of the physicians who no longer deliver babies stopped deliveries more than two years ago (76 percent), and roughly one-half of all who stopped delivering had held medical licenses for more than 20 years (53 percent). The majority of physicians who reported stopping deliveries are non-ob/gyn physicians (87 percent). Appendix B, Table B-68, shows the characteristics of physicians no longer delivering babies; Table B-69 shows a crosstabulation of the time elapsed since the provider stopped delivering babies by ob/gyn licensure status.

Table 4-2 on the next page shows that both ob/gyns and non-ob/gyns who stopped deliveries cited medical liability premiums most frequently as a very important factor in their decision to stop deliveries (74 and 66 percent, respectively). Time demands/personal life were also rated as very important factors by more than one-half of ob/gyn (53 percent) and non-ob/gyn physicians (58 percent) who have stopped deliveries.

Table 4-2. Very important factors in decision to stop delivering babies, by ob/gyn and non-ob/gyn physician specialties

Very important factor in decision _	Ob/g	yn physicians	<b>;</b>	Non-ob	/gyn physicia	ns
to stop delivering babies	#	%	Total	#	%	Total
Lack of backup for cesarean sections	1	5	20	36	26	136
Time demands	19	53	36	116	58	201
Medical liability premiums	26	74	35	133	66	202
Experience with lawsuits	11	38	29	24	23	103
Lack of demand	1	6	17	17	12	142
Low reimbursement	7	23	31	19	11	173
Lack of interest	6	24	25	20	13	159
Hospital privilege issues	1	7	14	15	10	144

Appendix B, Table B-70 shows ob/gyn and non-ob/gyn respondents' ratings of all factors in the decision to stop delivering babies.

# **Neurosurgery**

Neurosurgeon respondents indicated whether they perform brain or spine surgery.

# Type of neurosurgery performed

Of the 22 neurosurgeons responding to the survey, 15 currently perform brain surgery and spine surgery, 3 perform only spine surgery; 4 perform neither brain nor spine surgery. Table 4-3 shows the distribution of neurosurgeons who responded to the survey.

Table 4-3. Characteristics of neurosurgeon respondents

Characteristics <sup>a</sup>	#	%
Length of licensure (N=22)		
Less than 2 years	0	0
2–5 years	3	14
6–10 years	3	14
11–20 years	5	23
More than 20 years	11	50
Region (N=17)		
Portland Metro	11	65
Mid-Willamette Valley	3	18
Northwestern	0	0
Southern	3	18
Eastern	0	0
Southwestern	0	0
Central	0	0

<sup>&</sup>lt;sup>a</sup>The N varies slightly for the total number of respondents that answered both the neurosurgery and the demographic series of questions.

# Section 5. Liability insurance

Respondents indicated the source, form, and amount of liability insurance coverage, the annual premium amount, whether they had changed liability insurance sources in the past three years, and whether they had made any changes to their practice due to concerns about either the cost or availability of liability insurance coverage.

## Source, form, and amount of liability insurance coverage

Nearly three-quarters of the responding physicians named commercial insurance companies as their source for professional liability insurance (74 percent). Table 5-1 on the next page shows that almost half of the respondents reported that they held claims-made policies as their form of coverage; 40 percent reported carrying a \$1-million-per-claim, \$3-million-aggregate coverage plan. <sup>37,38</sup>

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<sup>&</sup>lt;sup>37</sup>The Medical Liability Mutual Insurance Company (MLMIC) defines claims-made policies as policies that protect policyholders for alleged acts of malpractice which both occur and are reported to the insurance company while the claims-made policy is in continuous force. MLMIC defines occurrence policies as policies that protect policyholders for alleged acts of malpractice which occur while the policy is in force, no matter when a claim against the doctor is reported to the insurance company. Available at www.mlmic.com/indexPol.htm. Accessed January 10, 2005.

<sup>&</sup>lt;sup>38</sup>Under the Federal Tort Claims Act (FTCA), the staff of Federally Supported Health Centers (FSHCs) are considered federal employees and covered for the purposes of medical malpractice. Bree MJ, Federal Tort Claims Act and Risk Management [U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Primary Health Care Web site]. Available at bphc.hrsa.gov/quality/FTCASHOWnew.PPT. Accessed January 12, 2005.

Table 5-1. Source, form, and amount of liability coverage

Liability coverage characteristics	Percent
Source of liability insurance	
Commercial	74
Self-insured	10
State or federal Tort Claims Act	7
Other	4
Do not know	4
Form of liability coverage	
Claims-made coverage	48
Occurrence coverage	22
State or federal Tort Claims Act	7
Do not know	23
Amount of coverage	
Not applicable, state or federal Tort Claims Act	5
\$1 million per claim; \$3 million aggregate	40
\$2 million per claim; \$4 million aggregate	14
\$3 million per claim; \$3 million aggregate	5
\$5 million per claim; \$5 million aggregate	13
Other	5
Do not know	19

Physicians reported the annual premium amount they currently pay for professional liability insurance.<sup>39</sup> Self-reported premium amounts varied across specialties. Roughly three-quarters of physicians in surgical specialties reported premium amounts greater than \$20,000 per year (76 percent). Table 5-2 shows that the median premium amount paid by a physician in a high-risk specialty—defined as general surgery, neurosurgery, obstetrics/gynecology, and orthopedic surgery—was \$32,000 per year.<sup>40</sup> Comparatively, the median premium amount for the 17 neurosurgeons who reported liability information was \$54,000. The median premium amount for ob/gyn physicians is higher than the premium amount for non-ob/gyn physicians.

<sup>&</sup>lt;sup>39</sup>If the respondent reported an annual premium amount of less than \$100, the response was excluded from the analysis.

<sup>&</sup>lt;sup>40</sup>The minimum reported annual premium amount paid is \$2,000; maximum, \$250,000.

Table 5-2. Liability premium levels by specialty categories

	Premium amount in dollars			
Specialty category <sup>a</sup>	Median	Minimum	Maximum	
Physician specialty				
Primary care	10,000	500	250,000	
Medical specialties	10,000	450	80,000	
Surgical specialties	30,000	2,000	147,000	
Hospital-based	14,000	2,000	135,000	
Other	4,500	1,000	60,000	
Type of specialty care				
Ob/gyn	38,000	3,000	250,000	
Non-ob/gyn <sup>b</sup>	10,000	1,000	145,000	
Neurosurgeon	54,000	15,000	147,000	
Specialty degree of risk				
High-risk specialty	32,000	2,000	250,000	
Not high-risk specialty	10,000	450	176,704	

<sup>&</sup>lt;sup>a</sup>Categories are not mutually exclusive.

Appendix B, Tables B-71 through B-76 show the liability premium categories by ob/gyn licensure, physician specialty, hospital status, neurosurgery licensure, pediatric specialty licensure, and high-risk specialty licensure.

#### Changes made or anticipated regarding liability insurance

#### Changes to liability insurance source

Three-quarters of responding physicians have not changed professional liability insurance sources in the past three years. Those who have changed sources most commonly cited changes in practice setting or employment (37 percent) or an increase in premium rates (32 percent) as principal reasons for making the change.

# Practice changes made due to concerns about liability insurance cost or availability Physicians reported on practice changes that they have made or anticipate making due to concerns regarding the cost or availability of liability insurance coverage. Figure 5-3 shows that the most frequently cited changes that physicians have already made or definitely will make are increasing referral of complex cases, stopping the provision of certain services, and increasing diagnostic procedures performed.

<sup>&</sup>lt;sup>b</sup>Respondent indicated that he or she provides maternity care.

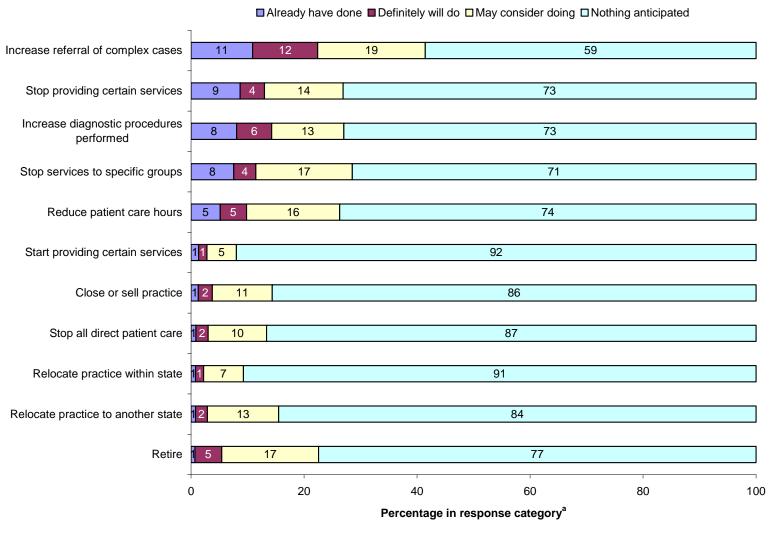


Figure 5-3. Possible practice changes regarding cost or availability of liability insurance coverage

See Appendix B, Table B-77 for the distribution of actions regarding concerns about the cost or availability of liability insurance coverage.

<sup>&</sup>lt;sup>a</sup>Bar percentages may not add to 100 percent due to rounding.

Physicians' responses regarding nearly all possible practice changes vary by practice location, length of licensure, or physician specialty. Appendix B, Tables B-78 through B-80 show the possible changes and responses by physician specialty, practice location, and length of licensure.

# **Further Research**

This 2004 Oregon Physician Workforce Survey Report is one part of a larger, ongoing effort to study and understand patient access to the physician workforce in the state. Individual stakeholders will act as separate entities to conduct further analyses, discuss findings, and formulate conclusions and recommendations for healthcare policies and programs in Oregon.

The steering committee that guided the preparation of the survey and report included one representative from each organization:

Scott Gallant Director of Government Affairs Oregon Medical Association

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# Appendix A.

Data comparison and categorization tables

Table A-1. Demographic characteristics for comparison between 2004 Oregon Physician Workforce Survey sample and Oregon Board of Medical Examiners 2004 census data

	Percentage			
		BME 2004		
Demographic characteristics	Survey sample	census data		
Gender				
Male	73	73		
Female	27	27		
Region				
Portland metropolitan	45	50		
Northwestern	6	5		
Mid-Willamette valley	23	21		
Southwestern	15	14		
Central	7	7		
Eastern	4	3		
Age				
Under 40	20	24		
40–49	28	28		
50–59	33	29		
60–69	16	13		
70 and older	4	6		

Table A-2. Oregon regions and counties within each region

Region	Counties
Portland metropolitan	Washington, Multnomah, Clackamas, Yamhill
Mid-Willamette valley	Linn, Benton, Marion, Polk, Lane
Northwestern	Clatsop, Tillamook, Columbia, Lincoln
Southern	Jackson, Douglas, Josephine
Eastern	Baker, Umatilla, Morrow, Grant, Wallowa, Union, Malheur, Harney
Southwestern	Coos, Curry
Central	Jefferson, Crook, Deschutes, Lake, Klamath, Hood River, Wasco,
	Sherman, Gilliam, Wheeler

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Adolescent medicine	Primary care
Behavioral pediatrics	Primary care
Clinical & laboratory immunology	Primary care
Developmental behavioral pediatrics	Primary care
Family practice	Primary care
Portland metropolitan	Primary care
General practice	Primary care
Mid-Willamette valley	Primary care
Southwestern	Primary care
Hospice	Primary care
House calls	Primary care
Internal medicine	Primary care
Lactation	Primary care
Obstetrics	Primary care
Obstetrics-gynecology	Primary care
Pediatric sports medicine	Primary care
Pediatrics	Primary care
Preventive medicine	Primary care
Primary care	Primary care
Urgent care	Primary care
Allergy & immunology	Medical specialty
Bone densitometry	Medical specialty
Broncho-esophagology	Medical specialty
Cardiac electrophysiology	Medical specialty
Cardiology	Medical specialty
Cardiovascular disease	Medical specialty
Cerebrovascular disease	Medical specialty
Child neurology	Medical specialty
Chronic wound care	Medical specialty
Clinical hypertension	Medical specialty
Clinical neurophysiology	Medical specialty
Conservative care of the spine	Medical specialty
Cornea & external disease	Medical specialty
Critical care medicine	Medical specialty
Cystic fibrosis	Medical specialty
Dermatological immunology	Medical specialty
Dermatology	Medical specialty
Dermatopathology	Medical specialty
Diabetes	Medical specialty
Diabetic foot care	Medical specialty
Electrodiagnosis neuro	Medical specialty
Electrophysiology neuro	Medical specialty
Endocardiography	Medical specialty
Endocrinology & metabolism	Medical specialty
Epilepsy neuro	Medical specialty
Gastroenterology	Medical specialty
Glaucoma	Medical specialty
Gynecologic oncology	Medical specialty

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Hematology	Medical specialty
Hematology-oncology	Medical specialty
Hepatitis C	Medical specialty
Immunohistocompatibility	Medical specialty
Infectious disease	Medical specialty
Infertility	Medical specialty
Interventional cardiology	Medical specialty
Laryngology	Medical specialty
Lipid metabolism	Medical specialty
Maternal fetal medicine	Medical specialty
Medical oncology	Medical specialty
Medicine	Medical specialty
Movement disorders	Medical specialty
Multiple sclerosis	Medical specialty
Neonatal-perinatal medicine	Medical specialty
Neoplastic disease	Medical specialty
Nephrology	Medical specialty
Neuro muscular	Medical specialty
Neurodevelopmental disabilities	Medical specialty
Neuroimmunology	Medical specialty
Neurology	Medical specialty
Neurology oncology	Medical specialty
Neuromuscular disease	Medical specialty
Non-invasive cardiology	Medical specialty
Nuclear cardiology	Medical specialty
Nuclear medicine	Medical specialty
Nutrition	Medical specialty
Oncology	Medical specialty
Ophthalmolic oncology	Medical specialty
Ophthalmology	Medical specialty
Orthopaedic oncology	Medical specialty
Osteopathic manipulative medicine	Medical specialty
Osteoporosis	Medical specialty
Otolaryngology	Medical specialty
Otology-neurotology	Medical specialty
Pain management	Medical specialty
Palliative medicine	Medical specialty
Pediatric allergy	Medical specialty
Pediatric cardiology	Medical specialty
Pediatric endocrinology	Medical specialty
Pediatric gastroenterology	Medical specialty
Pediatric hematology-oncology	Medical specialty
Pediatric infectious disease	Medical specialty
Pediatric internal medicine	Medical specialty
Pediatric nephrology	Medical specialty
Pediatric neurology	Medical specialty
Pediatric oncology	Medical specialty
Pediatric pulmonology	Medical specialty
Pediatric rheumatology	Medical specialty
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Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Phlebology-vein care	Medical specialty
Physical medicine & rehabiliation	Medical specialty
Preventative cardiology	Medical specialty
Pulmonary	Medical specialty
Pulmonary critical care	Medical specialty
Pulmonary disease	Medical specialty
Pulmonology	Medical specialty
Reproductive endocrinology	Medical specialty
Respiratory disease	Medical specialty
Retina	Medical specialty
Rheumatology	Medical specialty
Skin cancer	Medical specialty
Sleep medicine	Medical specialty
Somnology	Medical specialty
Spinal cord injury medicine	Medical specialty
Sports medicine	Medical specialty
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Critical care surgery	Surgical specialty
Dermatologic surgery	Surgical specialty
Electrosurgeon	Surgical specialty
Endoscopy	Surgical specialty
Foot & ankle orthopedics	Surgical specialty
Forensic otolaryngology	Surgical specialty
General surgery	Surgical specialty
Hand surgery	Surgical specialty
Head & neck surgery	Surgical specialty
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Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty         Major specialty group           Hip & knee replacement         Surgical specialty           Joint replacement         Surgical specialty           Knee         Surgical specialty           Laparoscopic surgery         Surgical specialty           Lower extremity reconstructure         Surgical specialty           Maxillofacial surgery         Surgical specialty           Neuro ophthalmology         Surgical specialty           Neurological surgery         Surgical specialty           Oculoplastics         Surgical specialty           Oral & maxillofacial surgery         Surgical specialty           Oral surgery         Surgical specialty           Orthopedic surgery         Surgical specialty           Orthopedic surgery         Surgical specialty           Pediatric cardiothoracic surgery         Surgical specialty           Pediatric maxillofacial surgery         Surgical specialty           Pediatric orthopedics         Surgical spe		
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Vitreoretinal surgery Anatomical pathology Anesthesiology  Surgical specialty Hospital-based Hospital-based		• .
Anatomical pathology Hospital-based Anesthesiology Hospital-based	<b>5</b> ,	
Anesthesiology Hospital-based	- ·	
Body imaging Hospital-based	<b>5</b> ,	·
	Body imaging	Hospital-based

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Breast imaging	Hospital-based
Cardiac anesthesia	Hospital-based
Chemical pathology	Hospital-based
Clinical pathology	Hospital-based
Cytopathology	Hospital-based
Diagnostic radiology	Hospital-based
Emergency medicine	Hospital-based
Forensic pathology	Hospital-based
Hematopathology	Hospital-based
Hospitalist	Hospital-based
Immunopathology	Hospital-based
Intensive care	Hospital-based
Interventional radiology	Hospital-based
Mammography	Hospital-based
Maxillofacial radiology	Hospital-based
MRI	Hospital-based
Musculoskeletal radiology	Hospital-based
Neuroanesthesia	Hospital-based
Neurointerventional radiology	Hospital-based
Neuropathology	Hospital-based
Neuroradiology	Hospital-based
Nuclear radiology	Hospital-based
OB anesthesia	Hospital-based
OBGYN pathology	Hospital-based
Pathologic anatomy	Hospital-based
Pathology	Hospital-based
Pediatric anesthesiology	Hospital-based
Pediatric critical care	Hospital-based
Pediatric emergency medicine	Hospital-based
Pediatric pathology	Hospital-based
Pediatric radiology	Hospital-based
Radiation anesthesiology	Hospital-based
Radiation oncology	Hospital-based
Radioisotopic pathology	Hospital-based
Radiological physics	Hospital-based
Radiology	Hospital-based
Radiology diagnostic	Hospital-based
Radiology oncology	Hospital-based
Renal pathology	Hospital-based
Surgical pathology	Hospital-based
Therapeutic radiology	Hospital-based
Underseas medicine	Hospital-based
Vascular & interventional radiology	Hospital-based
Women's imaging	Hospital-based
Acupuncture	Other
Addiction medicine	Other
Addiction psychiatry	Other
ADHD	Other
Administrative medicine	Other
	J

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Adolescent psychiatry	Other
Aerospace medicine	Other
Alternative	Other
Anxiety disorders	Other
Aviation medicine	Other
Blood banking-transfusion medicine	Other
Child & adolescent psychiatry	Other
Child abuse	Other
Child psychiatry	Other
Chiropractic	Other
Clinical biochemical genetics	Other
Clinical biochemical-molecular	
genetics	Other
Clinical cytogenics genetics	Other
Clinical genetics	Other
Clinical molecular genetics	Other
Community psychiatry	Other
Consulting pyschiatry	Other
Correctional medicine	Other
Dialysis access	Other
Disability determination	Other
DNA	Other
Epidemiology	Other
Feeding disorders	Other
Forensic psychiatry	Other
Geriatric psychiatry	Other
Histopath	Other
Holistic medicine	Other
Independent medical evaluations	Other
Industrial medicine	Other
Integrative medicine	Other
Legal medicine	Other
Manipulation	Other
Medical ethics	Other
Medical genetics	Other
Medical informatics	Other
Medical microbiology	Other
Medical research	Other
Medical toxicology	Other
Neuropsychiatry	Other
Occupational medicine	Other
Other	Other
Pharmacology	Other
Psychiatry	Other
Psychiatry-adult	Other
Psychoanalysis	Other
Psychoanalysis-adult	Other
Psychoanalysis-child	Other
Psychoanalytic therapy	Other

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Psychopharmacology	Other
Psychosomatic medicine	Other
Psychotherapy	Other
Public health	Other
Quality improvement	Other
Stress management	Other
Transfusion medicine	Other
Tropical/travel medicine	Other

Appendix B. Crosstabulations of survey data

# A guide to the data tables in Appendix B

Each appendix table shows the crosstabulations of multivariate responses (such as practice location by physician specialty shown in Table B-2). The tables show the count, or number of responses, for each table cell, the total responses for each row, and the percentage of responses. An annotated explanation of an example from Table B-2 appears in the shaded areas.

Table B-2. Practice location by physician specialty

33b. Setting and ownership32. What is your primary specialty?

← Relevant question groups from the 2004 Oregon Physician Workforce Survey appear below the table title. The full survey questionnaire appears in Appendix C.

		<u>Primary</u>	<u>Medical</u>	<u>Surgical</u>	Hospital-		
Practice location		<u>care</u>	<u>specialties</u>	<u>specialties</u>	<u>based</u>	<u>Other</u>	<u>Total</u>
Portland Metro	#	364	214	92	116	81	867
		indicate the in the region	umbers, or counumber of responsive services of the contract of	pondents in ea , 364 primary	ach physician care physicia	specialty ns with a	
	%	42	25	11	13	9	100
		of responde	percentages unts. For examp nd make up 42	ole, the 364 pr	imary care pl	nysicians res	sponding
Mid-Willamette Valley	# %	207 49	89 21	44 10	52 12	34 8	426 100
Northwestern	# %	28 56	3 6	6 12	10 20	3 6	50 100
Southern	#	101	41	25	26	14	207
	%	49	20	12	13	7	100
Eastern	#	43	6	11	11	3	74
	%	58	8	15	15	4	100
Southwestern	#	21	9	5	5	3	43
	%	49	21	12	12	7	100
Central	#	84	33	19	24	10	170
	%	49	19	11	14	6	100
Chi-square value = 33.5	33 F	o<0.093					

← The total column indicates the total number of respondents within the region. For example, 867 physicians with a practice in the Portland metropolitan region responded to the survey.

<sup>↑</sup> The chi-square test statistic is used to check for a statistically significant association between two variables. If the p value is less than 0.05, then the chi-square test statistic provides strong evidence that there is association between two variables. The p value for the chi-square test of variables in Table B-2 indicates that there is no association between practice location and physician specialty.

Section 1. Respondent demographics

2004 Oregon Physician Workforce Survey

Appendix B

Table B-1. Practice location by age of respondent

33b. Setting and ownership

2. What is your age group?

				<u>Age</u>			
		Under 40	40-49	50-59	60-69	70 years	
Practice location		<u>years</u>	<u>years</u>	<u>years</u>	<u>years</u>	and over	<u>Total</u>
Portland Metro	#	176	254	297	117	23	867
	%	20	29	34	13	3	100
Mid Millomotto vallov	ш	00	400	450	<b>5</b> 0	0	400
Mid-Willamette valley	#	90	122	153	53	8	426
	%	21	29	36	12	2	100
		_					
Northwestern	#	8	11	21	10	_	50
	%	16	22	42	20	_	100
Southern	#	40	61	67	33	6	207
Southern							
	%	19	29	32	16	3	100
Eastern	#	16	20	28	6	4	74
	%	22	27	38	8	5	100
	70	22	21	00	Ü	J	100
Southwestern	#	12	15	10	6	_	43
	%	28	35	23	14	_	100
Central	#	38	51	63	18	2	172
	%	22	30	37	10	1	100

Chi-square value = 19.789 p<0.709

Note: — indicates no responses in the category.

2004 Oregon Physician Workforce Survey

Appendix B

Table B-2. Practice location by physician specialty

33b. Setting and ownership

32. What is your primary specialty?

# Physician specialty

Practice location		Primary care	Medical specialties	Surgical specialties	Hospital- based	<u>Other</u>	<u>Total</u>
Portland	#	364	214	92	116	81	867
	%	42	25	11	13	9	100
Mid-Willamette valley	#	207	89	44	52	34	426
	%	49	21	10	12	8	100
Northwestern	#	28	3	6	10	3	50
	%	56	6	12	20	6	100
Southern	#	101	41	25	26	14	207
	%	49	20	12	13	7	100
Eastern	#	43	6	11	11	3	74
	%	58	8	15	15	4	100
Southwestern	#	21	9	5	5	3	43
	%	49	21	12	12	7	100
Central	#	84	33	19	24	10	170
	%	49	19	11	14	6	100

Chi-square value = 33.533 p<0.093

# **Section 2. Practice environment**

Table B-3. Distribution of physician specialties

32. What is your primary specialty?

, , , , ,		
Physician specialty	<u>#</u>	<u>%</u>
Family practice	453	18
Internal medicine	314	12
Pediatrics	188	7
Obstetrics/gynecology	173	7
Emergency medicine	140	6
Anesthesiology	125	5
Psychiatry	120	5
Orthopedics	107	4
Ophthalmology	84	3
General surgery	80	3
Radiology	73	3
Neurology	50	2
Cardiology	47	2
Otolaryngology	42	2
Urology	36	1
Surgery	34	1
Dermatology	33	1
Oncology	33	1
General practice	32	1
Gastroenterology	31	1
Pathology	30	1
Child and adolescent psychiatry	27	1
Physical medicine and rehab	24	1
Neurosurgery	22	1
Plastic surgery	21	1
Unknown*	19	1
Nephrology	18	1
Pulmonary medicine	18	1
Occupational medicine	15	1
Endocrinology	13	1
Allergy	12	Less than 1%
Neonatal medicine	11	Less than 1%
Rheumatology	11	Less than 1%
Hospital medicine	10	Less than 1%
Hematology	8	Less than 1%
Urgent care	8	Less than 1%
Infectious disease	7	Less than 1%
Pain medicine	6	Less than 1%

Table B-3. Distribution of physician specialties

## 32. What is your primary specialty?

Nuclear medicine	5	Less than 1%
Colon and rectal surgery	4	Less than 1%
Critical care medicine	4	Less than 1%
Osteopathic medicine	4	Less than 1%
Addiction medicine	3	Less than 1%
Geriatrics	3	Less than 1%
Medical acupuncture	3	Less than 1%
Preventive medicine	3	Less than 1%
Reproductive endocrinology	3	Less than 1%
Medical genetics	2	Less than 1%
Psychology	2	Less than 1%
Administrative medicine	1	Less than 1%
Biochemical genetics	1	Less than 1%
Eating disorders	1	Less than 1%
Functional medicine	1	Less than 1%
Manual medicine	1	Less than 1%
Medical resident	1	Less than 1%
Otology	1	Less than 1%
Respiratory disease	1	Less than 1%
Sleep medicine	1	Less than 1%
Sports medicine	1	Less than 1%
Surgical pathology	1	Less than 1%

Note: percents do not add to exactly 100% due to rounding.

<sup>\*</sup> The 19 physicians with unknown specialties (handwriting illegible or response was not readily categorizable into an initial set of 500 medical specialties) were retained because the respondents had completed at least 60 percent of the core survey questions.

Table B-4. Practice setting by practice location

33b. Setting and ownership 33b. Setting and ownership

#### Practice location

			Mid-						
		Portland Portland	Willamette	North-			South-		
Practice setting		<u>Metro</u>	<u>Valley</u>	western	Southern	<u>Eastern</u>	western	<u>Central</u>	<u>Total</u>
Hospital	#	348	192	26	84	36	21	79	786
	%	44	24	3	11	5	3	10	100
Clinic, private, for-profit	#	499	247	21	146	46	35	108	1102
	%	45	22	2	13	4	3	10	100
Clinic, private, not-for-profit	#	99	66	5	14	8	1	11	204
	%	49	32	2	7	4	0	5	100
Clinic, public	#	36	13	7	7	3	11	77	_
	%	47	17	9	9	4	14	100	_
Other	#	26	14	2	6	2	7	57	_
	%	46	25	4	11	4	12	100	_

Table B-5. Practice setting by physician specialty

33b. Setting and ownership

32. What is your primary specialty?

	Physician specialty									
			<u>Medical</u>	Surgical	Hospital-					
Practice setting		Primary care	specialties	specialties	<u>based</u>	<u>Other</u>	<u>Total</u>			
Hospital	#	374	194	123	326	27	1044			
	%	36	19	12	31	3	100			
Clinic, private, for-profit	#	646	357	180	44	99	1326			
	%	49	27	14	3	7	100			
Clinic, private, not-for-profit	#	164	45	22	12	33	276			
	%	59	16	8	4	12	100			
Clinic, public	#	73	12	6	2	23	116			
	%	63	10	5	2	20	100			
Other	#	39	10	7	6	15	77			
	%	51	13	9	8	19	100			

Table B-6. Practice setting by length of licensure

33b. Setting and ownership

6. How long have you had a medical license in any state, including Oregon?

		Length of licensure						
		Less than			11-20	More than		
Practice setting		2 years	2-5 years	6-10 years	<u>years</u>	20 years	<u>Total</u>	
Hospital	#	21	108	180	329	408	1046	
	%	2	10	17	31	39	100	
Clinic, private, for-profit	#	13	93	212	387	622	1327	
	%	1	7	16	29	47	100	
Clinic, private, not-for-profit	#	3	29	39	84	121	276	
	%	1	11	14	30	44	100	
Clinic, public	#	1	16	12	33	54	116	
	%	1	14	10	28	47	100	
Other	#	4	6	21	46	77	_	
	%	5	8	27	60	100	_	

Table B-7. Retirement plan by physician specialty

32. What is your primary specialty?

7. When do you plan to retire?

		Within the	Retirement plant the next	ans More than 5	
Physician specialty		next 2 years	2-5 years	years from now	Total
Primary care	#	46	169	893	1108
•	%	4	15	81	100
Medical specialties	#	37	92	398	527
·	%	7	17	76	100
Surgical specialties	#	19	70	179	268
	%	7	26	67	100
Hospital-based	#	16	53	321	390
·	%	4	14	82	100
Other	#	9	30	154	193
	%	5	16	80	100

Chi-square value = 33.593 p<0.0001

Table B-8. Age by plans to retire

2. What is your age group?

7. When do you plan to retire?

		<u>!</u>	Retirement pla	ans_	
		Within the	In the next	More than 5	
<u>Age</u>		next 2 years	2-5 years	years from now	<u>Total</u>
Under 40 years	#	_	6	519	525
	%	_	1	99	100
40-49 years	#	10	24	697	731
,	%	1	3	95	100
50–59 years	#	29	175	630	834
,	%	3	21	76	100
60-69 years	#	72	184	90	346
oo oo youro	%	21	53	26	100
70 years and over	#	18	26	16	60
70 years and over	# %	30	43	27	100

Chi-square value = 952.586 p<0.0001

Table B-9. Retirement plan by practice location

33b. Setting and ownership

7. When do you plan to retire?

	Retirement plans								
Practice location Portland Metro	#	Within the next 2 years 39 5	In the next 2–5 years 135 16	More than 5 years from now 690 80	<u>Total</u> 864 100				
Mid-Willamette Valley	#	25	80	321	426				
	%	6	19	75	100				
Northwestern	#	4	12	34	50				
	%	8	24	68	100				
Southern	#	11	42	151	204				
	%	5	21	74	100				
Eastern	#	4	10	59	73				
	%	5	14	81	100				
Southwestern	#	3	6	34	43				
	%	7	14	79	100				
Central	#	7	36	128	171				
	%	4	21	75	100				

Chi-square value = 11.234 p<0.509

Table B-10. Physician speciality by length of licensure

6. How long have you had a medical license in any state, including Oregon?

32. What is your primary specialty?

#### Physician specialty

Length of licensure Less than 2 years	# %	Primary care 27 55	Medical specialties 9 18	Surgical specialties 2 4	Hospital- based 8 16	Other 3 6	<u>Total</u> 49 100
2–5 years	#	138	32	12	33	14	229
	%	60	14	5	14	6	100
6–10 years	#	195	71	29	57	14	366
	%	53	19	8	16	4	100
11–20 years	#	289	163	80	138	57	727
	%	40	22	11	19	8	100
More than 20 years	#	463	256	144	157	108	1128
	%	41	23	13	14	10	100

Chi-square value = 66.973 p<0.0001

Table B-11. Ownership or employment status by practice location

34c. Employment

33b. Setting and ownership

#### Practice location

			Mid-						
		Portland	Willamette	North-			South-		
<u>Ownership</u>		<u>Metro</u>	<u>Valley</u>	western	Southern	<u>Eastern</u>	western	Central	<u>Total</u>
Full or part owner of practice	#	421	216	17	131	44	29	86	944
	%	45	23	2	14	5	3	9	100
Employee of practice or health system	#	238	120	21	41	17	4	36	477
	%	50	25	4	9	4	1	8	100
Independent contractor	#	35	19	5	7	3	2	16	87
	%	40	22	6	8	3	2	18	100
Volunteer	#	_	2	_	_	_	1	_	3
	%	_	67	_	_	_	33	_	100
Other	#	10	5	_	1	1	_	2	19
	%	53	26	_	5	5	_	11	100

Chi-square value = 58.501 p<0.0001

Table B-12. Ownership or employment status by physician specialty

34c. Employment

32. What is your primary specialty?

## Physician specialty

Ownership Full or part owner of practice	#	Primary care 474 41	Medical specialties 293 26	Surgical specialties 158 14	Hospital- based 143 12	<u>Other</u> 78 7	<u>Total</u> 1146 100
Employee of practice or health system	#	378	107	47	101	60	693
	%	55	15	7	15	9	100
Independent contractor	#	31	20	9	53	16	129
	%	24	16	7	41	12	100
Volunteer	# %	2 40	1 20	1 20	_	1 20	5 100
Other	#	15	6	1	5	3	30
	%	50	20	3	17	10	100

Chi-square value = 147.388 p<0.0001

Table B-13. Ownership or employment status by length of licensure

34c. Employment

6. How long have you had a medical license in any state, including Oregon?

	Length of licensure						
		Less than			<u>11–20</u>	More than	
<u>Ownership</u>		2 years	2-5 years	6-10 years	<u>years</u>	20 years	Total
Full or part owner of practice	#	4	53	177	353	558	1145
	%	0	5	15	31	49	100
Employee of practice or health system	#	18	94	94	204	283	693
	%	3	14	14	29	41	100
Independent contractor	#	1	10	14	37	69	131
·	%	1	8	11	28	53	100
Volunteer	#	_	_	1	_	4	5
	%	_	_	20	_	80	100
Other	#	_	3	2	6	19	30
	%	_	10	- 7	20	63	100

Chi-square value = 80.282 p<0.0001

### Table B-14. Practice size by length of licensure

29. What is the size of your primary practice, that is, the practice in which you spend the most time?

6. How long have you had a medical license in any state, including Oregon?

		<u>Length of licensure</u>								
		Less than			<u>11–20</u>	More than				
Size of practice		2 years	2-5 years	6-10 years	<u>years</u>	20 years	<u>Total</u>			
Solo practice	#	3	30	60	162	319	574			
	%	1	5	10	28	56	100			
Small group practice (2–4 physicians)	#	7	46	72	170	229	524			
	%	1	9	14	32	44	100			
Medium group practice (5–9 physicians)	#	7	58	86	122	196	469			
, , , , ,	%	1	12	18	26	42	100			
Large group practice (10 or more physicians)	#	11	67	136	256	341	811			
	%	1	8	17	32	42	100			

Chi-square value = 53.678 p<0.0001

Table B-15. Practice size by practice location

29. What is the size of your primary practice, that is, the practice in which you spend the most time? 33b. Setting and ownership

			Practice location							
			Mid-							
		Portland	Willamette	North-			South-			
Size of practice		<u>Metro</u>	<u>Valley</u>	western western	Southern	<u>Eastern</u>	western	<u>Central</u>	<u>Total</u>	
Solo practice	#	221	88	11	64	26	11	46	467	
	%	47	19	2	14	6	2	10	100	
Small group practice (2–4 physicians)	#	160	81	22	54	38	4	39	398	
	%	40	20	6	14	10	1	10	100	
Medium group practice (5–9 physicians)	#	133	95	12	51	7	12	43	353	
	%	38	27	3	14	2	3	12	100	
Large group practice (10 or more physicians)	#	311	152	3	34	2	16	37	555	
	%	56	27	1	6	0	3	7	100	

Chi-square value = 140.379 p<0.0001

## Table B-16. Practice size by physician specialty

29. What is the size of your primary practice, that is, the practice in which you spend the most time?

32. What is your primary specialty?

#### Physician specialty

		<b>Primary</b>	Medical	Surgical	Hospital-		
Size of primary practice		<u>care</u>	specialties	specialties	based	<u>Other</u>	<u>Total</u>
Solo practice	#	231	129	100	26	87	573
	%	40	23	17	5	15	100
Small group practice (2–4 physicians)	#	236	136	61	48	40	521
	%	45	26	12	9	8	100
Medium group practice (5–9 physicians)	#	240	92	48	76	13	469
	%	51	20	10	16	3	100
Large group practice (10 or more physicians)	#	352	153	51	216	40	812
	%	43	19	6	27	5	100

Chi-square value = 243.582 p<0.0001

Table B-17. Physician specialty by lead time to appointment for new patients

32. What is your primary specialty?

35. In a typical week, how many new patients do you see?

		<u>Lead time</u>							
					More than 30	)			
Physician specialty Primary care	# %	0–7 days 483 54	8–14 days 177 20	15–30 days 163 18	<u>days</u> 75 8	<u>Total</u> 898 100			
Medical specialties	# %	143 31	125 27	126 27	72 15	466 100			
Surgical specialties	# %	97 43	57 25	44 19	30 13	228 100			
Hospital-based	# %	45 80	5 9	_	6 11	56 100			
Other	# %	43 29	38 26	41 28	25 17	147 100			

Chi-square value = 118.822 p<0.0001

Table B-18. Lead time to appointment for established patients by physician specialty

32. What is your primary specialty?

35. In a typical week, how many established patients do you see?

#### Lead time

					More than 30	
Physician specialty		<u>0-7 days</u>	8-14 days	15-30 days	<u>days</u>	Total
Primary care	#	691	126	78	20	915
	%	76	14	9	2	100
Medical specialties	#	218	113	89	30	450
·	%	48	25	20	7	100
Surgical specialties	#	129	55	30	6	220
0 1	%	59	25	14	3	100
Hospital-based	#	40	4	3	_	47
	%	85	9	6	_	100
Other	#	92	31	24	_	147
0.1.0.	%	63	21	16	_	100

Chi-square value = 128.516 p<0.0001

Table B-19. Lead time to appointment for new patients by practice location

33b. Setting and ownership

35. In a typical week, how many new patients do you see?

Lead time

			<del></del>			
					More	
					than 30	•
Practice location		<u>0–7 days</u>	<u>8–14 days</u>	15-30 days	<u>days</u>	Total
Portland Metro	#	296	154	135	72	657
	%	45	23	21	11	100
Mid-Willamette Valley	#	146	62	65	36	309
•	%	47	20	21	12	100
Northwestern	#	19	7	6	3	35
	%	54	20	17	9	100
Southern	#	69	25	41	27	162
	%	43	15	25	17	100
Eastern	#	31	11	14	6	62
	%	50	18	23	10	100
Southwestern	#	11	13	8	4	36
	%	31	36	22	11	100
Central	#	61	29	21	16	127
	%	48	23	17	13	100

Chi-square value = 18.924 p<0.397

Table B-20. Lead time to appointment for established patients by practice location

33b. Setting and ownership

35. In a typical week, how many established patients do you see?

Lead time

					More than 30	
Practice Location		0-7 days	8–14 days	15-30 days	days	Total
Portland Metro	#	412	140	78	20	650
	%	63	22	12	3	100
Mid-Willamette Valley	#	210	63	32	7	312
	%	67	20	10	2	100
Northwestern	#	24	8	3	_	35
	%	69	23	9	_	100
Southern	#	102	24	32	4	162
	%	63	15	20	2	100
Eastern	#	42	10	8	2	62
	%	68	16	13	3	100
Southwestern	#	22	7	3	3	35
	%	63	20	9	9	100
Central	#	91	13	16	7	127
	%	72	10	13	6	100

Chi-square value = 28.046 p<0.061

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Table B-21. Patient caseload by length of licensure

6. How long have you had a medical license in any state, including Oregon? 35. In a typical week, how many new and established patients do you see?

		Number of patients seen per week									
				<u>26–50</u>	<u>51–75                                   </u>	<u>76–100</u>	More than				
		0 total	1-25 total	<u>total</u>	<u>total</u>	total	100 total				
Length of licensure		<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>Total</u>			
Less than 2 years	#	11	6	2	5	3	3	30			
	%	37	20	7	17	10	10	100			
2–5 years	#	37	18	31	51	50	16	203			
	%	18	9	15	25	25	8	100			
6–10 years	#	43	46	74	68	94	34	359			
•	%	12	13	21	19	26	9	100			
11–20 years	#	122	101	151	129	132	83	718			
	%	17	14	21	18	18	12	100			
More than 20 years	#	144	196	211	210	185	157	1103			
	%	13	18	19	19	17	14	100			

Chi-square value = 66.973 p<0.0001

Appendix B

Table B-22. Patient caseload by practice location

33b. Setting and ownership

35. In a typical week, how many new and established patients do you see?

			Number of patients seen per week									
				<u>26–50</u>	<u>51–75                                   </u>	<u>76–100</u>	More than					
		0 total	1-25 total	total	<u>total</u>	total	<u>100 total</u>					
Practice location		<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>Total</u>				
Portland Metro	#	99	130	176	182	158	91	836				
	%	12	16	21	22	19	11	100				
Mid Willamotta Valley	#	48	53	67	88	106	61	422				
Mid-Willamette Valley								423				
	%	11	13	16	21	25	14	100				
Northwestern	#	7	3	13	9	13	4	49				
	%	14	6	27	18	27	8	100				
0 "				4.0								
Southern	#	28	26	40	47	35	29	205				
	%	14	13	20	23	17	14	100				
Eastern	#	6	9	16	16	14	12	73				
Lastom	%	8	12	22	22	19	16	100				
	70	J	12	22	22	10	10	100				
Southwestern	#	4	5	7	1	12	14	43				
	%	9	12	16	2	28	33	100				
Control	#	20	20	20	24	40	26	166				
Central		20	20	29	31	40	26	166				
	%	12	12	17	19	24	16	100				

Chi-square value = 49.269 p<0.015

Table B-23. Patient caseload by physician specialty

32. What is your primary specialty?

35. In a typical week, how many new and established patients do you see?

			Number of patients seen per week									
				<u>26–50</u>	<u>51–75                                   </u>	<u>76–100</u>	More than					
		0 total	1-25 total	<u>total</u>	<u>total</u>	<u>total</u>	<u>100 total</u>					
Physician specialty		<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>patients</u>	<u>Total</u>				
Primary care	#	57	129	155	228	315	183	1067				
	%	5	12	15	21	30	17	100				
Medical specialties	#	26	71	145	124	74	75	515				
	%	5	14	28	24	14	15	100				
Surgical specialties	#	10	49	71	69	44	18	261				
	%	4	19	27	26	17	7	100				
Hospital-based	#	247	49	26	18	22	13	375				
	%	66	13	7	5	6	3	100				
Other	#	7	71	72	23	8	4	185				
	%	4	38	39	12	4	2	100				

Chi-square value = 1248.321 p<0.0001

Table B-24. Hours worked per week by gender

1. What is your gender?

33a. Number of hours per week in direct patient care

			<u>Hours</u>	worked per	week	
		Less than	<u>20–39                                    </u>	<u>40–60                                   </u>	More than	
		20 hours	hours per	hours per	60 hours	
<u>Gender</u>		per week	<u>week</u>	<u>week</u>	per week	<u>Total</u>
Female	#	82	228	256	130	696
	%	12	33	37	19	100
Male	#	187	359	762	507	1815
	%	10	20	42	28	100

Chi-square value = 57.625 p<0.0001

Table B-25. Hours worked per week by age

2. What is your age group?

33a. Number of hours per week in direct patient care

		Hours worked per week									
		Less than	20-39	<u>40–60</u>	More than						
		20 hours	hours per	hours per	60 hours						
<u>Age</u>		per week	<u>week</u>	<u>week</u>	per week	<u>Total</u>					
Under 40 years	#	38	128	204	157	527					
	%	7	24	39	30	100					
40-49 years	#	72	154	308	200	734					
	%	10	21	42	27	100					
50–59 years	#	75	187	359	218	839					
	%	9	22	43	26	100					
60–69 years	#	60	93	132	65	350					
	%	17	27	38	19	100					
70 years and over	#	24	25	16	2	67					
	%	36	37	24	3	100					

Chi-square value = 103.463 p<0.0001

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Table B-26. Hours worked per week by practice location

33b. Setting and ownership

33a. Number of hours per week in direct patient care

		Hours worked per week										
		Less than	<u>20–39                                    </u>	40-60	More than							
		20 hours	hours per	hours per	60 hours							
Practice location		per week	<u>week</u>	<u>week</u>	per week	<u>Total</u>						
Portland Metro	#	81	192	383	213	869						
	%	9	22	44	25	100						
Mid-Willamette Valley	#	33	86	206	102	427						
	%	8	20	48	24	100						
Northwestern	#	5	12	24	9	50						
	%	10	24	48	18	100						
Southern	#	12	39	81	76	208						
	%	6	19	39	37	100						
Eastern	#	2	16	25	31	74						
	%	3	22	34	42	100						
Southwestern	#	4	8	14	17	43						
	%	9	19	33	40	100						
Central	#	19	38	65	50	172						
	%	11	22	38	29	100						

Chi-square value = 37.246 p<0.005

Table B-27. Hours worked per week by physician speciality

32. What is your primary specialty?

33a. Number of hours per week in direct patient care

		Hours worked per week										
		Less than	20-39	40-60	More than							
		20 hours	hours per	hours per	60 hours							
Physician specialty		per week	<u>week</u>	<u>week</u>	per week	<u>Total</u>						
Primary care	#	120	267	455	272	1114						
	%	11	24	41	24	100						
Medical Specialities	#	46	121	227	140	534						
то атоат оростаниос	%	9	23	43	26	100						
Consider and sighting	ш	25	00	0.4	101	200						
Surgical specialties	#	25	26	94	124	269						
	%	9	10	35	46	100						
Hospital-based	#	32	98	180	83	393						
•	%	8	25	46	21	100						
Other	#	39	73	61	23	196						
Other												
	%	20	37	31	12	100						

Chi-square value = 131.579 p<0.0001

Table B-28. Hours spent on administrative tasks by practice location

33b. Setting and ownership

36. In a typical week, how many hours do you spend doing administrative tasks related to direct inpatient and outpatient care?

Hours spent on administrative tasks

				,		<u>20 or</u>	
		Less than	_	<u>10–14 </u>	<u>15–19                                   </u>	more	
Practice location		5 hours	<u>5–9 hours</u>	<u>hours</u>	<u>hours</u>	<u>hours</u>	<u>Total</u>
Portland Metro	#	163	251	243	81	112	850
	%	19	30	29	10	13	100
Mid-Willamette valley	#	73	126	118	54	51	422
	%	17	30	28	13	12	100
Northwestern	#	7	11	16	9	7	50
	%	14	22	32	18	14	100
Southern	#	25	63	55	19	44	206
	%	12	31	27	9	21	100
Eastern	#	14	17	21	10	12	74
	%	19	23	28	14	16	100
Southwestern	#	9	12	19	2	1	43
	%	21	28	44	5	2	100
Central	#	35	41	53	22	19	170
	%	21	24	31	13	11	100

Chi-square value = 37.531 p<0.039

Table B-29. Hours spent on administrative tasks by physician specialty

32. What is your primary specialty?

36. In a typical week, how many hours do you spend doing administrative tasks related to direct inpatient and outpatient care?

Hours spent on administrative tasks

				10 11	45.40	20 or	
		Less than	_	<u>10–14                                   </u>	<u>15–19                                   </u>	more	
Physician specialty		5 hours	5–9 hours	<u>hours</u>	<u>hours</u>	<u>hours</u>	<u>Total</u>
Primary care	#	162	316	340	128	150	1096
	%	15	29	31	12	14	100
Medical specialties	#	80	158	151	61	71	521
	%	15	30	29	12	14	100
Surgical specialties	#	50	65	75	28	42	260
ou. g.ou. opoolulioo	%	19	25	29	11	16	100
Hospital-based	#	134	105	80	19	40	378
ricopital bacca	%	35	28	21	5	11	100
Othor	ш	<b>5</b> 0	60	40	17	10	102
Other	#	58	60	40	17	18	193
	%	30	31	21	9	9	100

Chi-square value = 112.102 p<0.0001

Table B-30. Hours spent on administrative tasks by length of licensure

6. How long have you had a medical license in any state, including Oregon?

36. In a typical week, how many hours do you spend doing administrative tasks related to direct inpatient and outpatient care?

Hours spent on administrative tasks

						<u>20 or</u>	
		Less than	_	<u>10–14                                   </u>	<u>15–19                                   </u>	more	
Length of licensure		5 hours	5-9 hours	<u>hours</u>	<u>hours</u>	<u>hours</u>	<u>Total</u>
Less than 2 years	#	5	14	15	3	9	46
	%	11	30	33	7	20	100
2–5 years	#	31	60	82	25	27	225
•	%	14	27	36	11	12	100
6–10 years	#	57	92	103	47	62	361
•	%	16	25	29	13	17	100
11–20 years	#	125	200	203	82	104	714
,	%	18	28	28	11	15	100
More than 20 years	#	261	341	284	96	121	1103
More than 20 years	<del>"</del>	24	31	26	9	11	100

Chi-square value = 49.255 p<0.0001

Table B-31. Hours spent on administrative tasks by gender

Hours spent on administrative tasks

		Tours open, on authorizative tuente										
						<u>20 or</u>						
		Less than	_	<u>10–14 </u>	<u>15–19                                   </u>	more						
<u>Gender</u>		5 hours	<u>5–9 hours</u>	<u>hours</u>	<u>hours</u>	<u>hours</u>	Total					
Female	#	127	207	192	71	83	680					
	%	19	30	28	10	12	100					
Male	#	356	497	492	181	239	1765					
	%	20	28	28	10	14	100					

Chi-square value = 2.146 p < 0.709

<sup>1.</sup> What is your gender?

<sup>36.</sup> In a typical week, how many hours do you spend doing administrative tasks related to direct inpatient and outpatient care?

Table B-32. Hours on call by length of licensure

6. How long have you had a medical license in any state, including Oregon?

30. In a typical week, how many hours do you spend on call?

## Number of hours on call

				More than					
		No on-call	<u>1–10                                   </u>	<u>11–20</u>	21-30	<u>30</u>	Always on		
Length of licensure		<u>hours</u>	hours/week	hours/week	hours/week	hours/week	<u>call</u>	<u>Total</u>	
Less than 2 years	#	5	5	9	6	3	_	28	
	%	18	18	32	21	11	_	100	
2–5 years	#	40	26	27	48	38	21	200	
	%	20	13	14	24	19	11	100	
6–10 years	#	43	55	62	71	86	35	352	
	%	12	16	18	20	24	10	100	
11–20 years	#	107	92	95	132	183	90	699	
	%	15	13	14	19	26	13	100	
More than 20 years	#	229	120	137	176	277	147	1086	
	%	21	11	13	16	26	14	100	

Chi-square value = 52.412 p<0.001

Table B-33. Hours on call by practice location

33b. Setting and ownership

30. In a typical week, how many hours do you spend on call?

Number of hours on call More than No on-call 1-10 11-20 21-30 <u>30</u> Always on hours/week hours/week hours/week <u>Total</u> Practice location hours call Portland Metro # % Mid-Willamette Valley # % Northwestern # % Southern # % Eastern # % Southwestern # % Central # 

Chi-square value = 96.028 p<0.0001

%

#### Table B-34. Hours on call by physician specialty

32. What is your primary specialty?

30. In a typical week, how many hours do you spend on call?

#### Number of hours on call

					More than		
	No on-call	<u>1–10</u>	<u>11–20                                   </u>	21-30	<u>30</u>	Always on	
Physician specialty	<u>hours</u>	hours/week	hours/week	hours/week	hours/week	<u>call</u>	<u>Total</u>
Primary care #	139	151	166	240	255	106	1057
%	13	14	16	23	24	10	100
Medical specialties #	64	73	73	84	129	77	500
%	13	15	15	17	26	15	100
Surgical specialties #	20	10	21	51	116	38	256
%	8	4	8	20	45	15	100
Hospital-based #	144	44	61	50	59	9	367
%	39	12	17	14	16	2	100
Other #	60	20	8	8	24	62	182
%	33	11	4	4	13	34	100

Chi-square value = 401.377 p<0.0001

## Table B-35. Hours on call by urban or rural setting

33b. Setting and ownership

30. In a typical week, how many hours do you spend on call?

#### Number of hours on call

						More than		
		No on-call	<u>1–10                                   </u>	<u>11–20</u>	<u>21–30</u>	<u>30</u>	Always on	
Urban or rural region		<u>hours</u>	hours/week	hours/week	hours/week	hours/week	<u>call</u>	<u>Total</u>
Urban	#	242	201	220	259	298	156	1376
	%	18	15	16	19	22	11	100
Rural	#	84	31	35	113	185	79	527
	%	16	6	7	21	35	15	100

Chi-square value = 81.849 p<0.0001

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

Electronic medical records								Medicare reimbursement					
		Very	Somewhat	Not	<u>Not</u>			<u>Very</u> <u>Somewhat</u> <u>Not</u>			<u>Not</u>		
Practice location		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	Practice location		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>
Portland Metro	#	345	268	213	2	828	Portland Metro	#	534	177	110	3	824
	%	42	32	26	0	100		%	65	21	13	0	100
Mid-Willamette valley	#	175	156	86	_	417	Mid-Willamette valley	#	278	89	44	_	411
	%	42	37	21	_	100		%	68	22	11	-	100
Northwestern	#	19	21	9	_	49	Northwestern	#	36	6	7	_	49
	%	39	43	18	_	100		%	73	12	14	-	100
Southern	#	52	93	58	_	203	Southern	#	156	32	15	_	203
	%	26	46	29	_	100		%	77	16	7	_	100
Eastern	#	24	24	22	_	70	Eastern	#	56	12	4	_	72
	%	34	34	31	_	100		%	78	17	6	-	100
Southwestern	#	10	20	12	_	42	Southwestern	#	33	6	3	_	42
	%	24	48	29	_	100		%	79	14	7	-	100
Central	#	62	62	42	_	166	Central	#	127	31	7	_	165
	%	37	37	25	_	100		%	77	19	4	_	100

Chi-square value = 37.726 p<0.010

Note: — indicates no responses in the category.

Chi-square value = 33.120 p<0.016

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

Overhead cost									Pharmaceutical costs				
		Very	Somewhat	Not	Not				Very	<u>Very Somewhat Not Not</u>			
		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>			<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>
Portland Metro	#	588	177	56	2	823	Portland Metro	#	409	322	90	2	823
	%	71	22	7	0	100		%	50	39	11	0	100
Mid-Willamette Valley	#	296	102	21	_	419	Mid-Willamette Valley	#	207	163	44	_	414
	%	71	24	5	_	100		%	50	39	11	_	100
Northwestern	#	33	11	5	_	49	Northwestern	#	25	21	3	_	49
	%	67	22	10	_	100		%	51	43	6	_	100
Southern	#	155	39	8	_	202	Southern	#	106	71	24	_	201
	%	77	19	4	_	100		%	53	35	12	_	100
Eastern	#	54	13	3	_	70	Eastern	#	37	27	6	_	70
	%	77	19	4	_	100		%	53	39	9	_	100
Southwestern	#	32	8	2	_	42	Southwestern	#	16	18	8	_	42
	%	76	19	5	_	100		%	38	43	19	_	100
Central	#	128	35	3	_	166	Central	#	94	57	15	_	166
	%	77	21	2	_	100		%	57	34	9	_	100

Chi-square value = 16.310 p<0.571

Note: — indicates no responses in the category.

Chi-square value = 11.798 p<0.857

Appendix B 2004 Oregon Physician Workforce Survey

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

Stress and burnout								Cost/availability of liability insurance					
		Very	Somewhat	Not	Not				Very	Somewhat	Not	Not	
		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>			important	<u>important</u>	<u>important</u>	applicable	<u>Total</u>
Portland Metro	#	468	290	60	3	821	Portland Metro	#	539	223	60	2	824
	%	57	35	7	0	100		%	65	27	7	0	100
Mid-Willamette Valley	#	246	129	40	_	415	Mid-Willamette Valley	#	282	113	23	_	418
	%	59	31	10	_	100		%	67	27	6	_	100
Northwestern	#	27	20	2	_	49	Northwestern	#	36	7	6	_	49
	%	55	41	4	_	100		%	73	<u>14</u>	12	_	100
Southern	#	128	57	18	_	203	Southern	#	136	58	8	_	202
	%	63	28	9	_	100		%	67	29	4	_	100
Eastern	#	41	23	6	_	70	Eastern	#	54	13	4	_	
	%	59	33	9	_	100		%	76	18	6	_	71
Southwestern	#	22	15	6		43	Southwestern	#	27	13	2		100
Southwestern	<del>"</del>	51	35	14	_	100	Southwestern	<del>"</del> %		31	5	_	42
	70	31	33	14	_	100		70	04	31	3	_	100
Central	#	94	58	11	_	163	Central	#	119	40	7	_	
	%	58	36	7	_	100		%	72	24	4	_	166
Chi-square value = 14.	519	p<0.695					Chi-square value = 17.7	746	p<0.472				

Note: — indicates no responses in the category.

Note: — indicates no responses in the category.

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Office of Medical Assistance Programs B-40

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

	<u>Call coverage</u>								Cost of translation services					
		Very	Somewhat	Not	Not				Very	Somewhat	<u>Not</u>	Not		
		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>			<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	
Portland Metro	#	376	294	150	2	822	Portland Metro	#	127	353	337	2	819	
	%	46	36	18	0	100		%	16	43	41	0	100	
Mid-Willamette Valley	#	198	147	69	_	414	Mid-Willamette Valley	#	44	167	201	1	413	
	%	48	36	17	_	100		%	11	40	49	0	100	
Northwestern	#	22	17	10	_	49	Northwestern	#	4	17	27	_	48	
	%	45	35	20	_	100		%	8	35	56	_	100	
Southern	#	107	62	32	_	201	Southern	#	3	53	144	_	200	
	%	53	31	16	_	100		%	2	27	72	_	100	
Eastern	#	44	20	7	_	71	Eastern	#	8	20	43	_	71	
	%	62	28	10	_	100		%	11	28	61	_	100	
Southwestern	#	18	13	11	_	42	Southwestern	#	3	9	29	_	41	
	%	43	31	26	_	100		%	7	22	71	_	100	
Central	#	70	67	28	_	165	Central	#	9	54	101	_	164	
	%	42	41	17	_	100		%	5	33	62	_	100	

Chi-square value = 17.461 p<0.492

Note: — indicates no responses in the category.

Chi-square value = 97.985 p<0.0001

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

	Coverage for uninsured								Medicaid/OHP reimbursement					
		Very	Somewhat	Not	Not				Very	Somewhat	Not	Not		
		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>			<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	
Portland Metro	#	445	311	67	2	825	Portland Metro	#	468	246	108	2	824	
	%	54	38	8	0	100		%	57	30	13	0	100	
Mid-Willamette Valley	#	225	155	35	_	415	Mid-Willamette Valley	#	273	115	28	_	416	
	%	54	37	8	_	100		%	66	28	7	_	100	
Northwestern	#	28	14	6	_	48	Northwestern	#	33	10	6	_	49	
	%	58	29	13	_	100		%	67	20	12	_	100	
Southern	#	91	90	20	_	201	Southern	#	130	53	17	_	200	
	%	45	45	10	_	100		%	65	27	9	_	100	
Eastern	#	37	29	4	_	70	Eastern	#	57	13	1	_	71	
	%	53	41	6	_	100		%	80	18	1	_	100	
Southwestern	#	18	20	3	_	41	Southwestern	#	23	15	4	_	42	
	%	44	49	7	_	100		%	55	36	10	_	100	
Central	#	91	65	10	_	166	Central	#	116	40	10	_	166	
	%	55	39	6	_	100		%	70	24	6	_	100	

Chi-square value = 13.861 p<0.738

Note: — indicates no responses in the category.

Chi-square value = 40.743 p<0.002

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

		<u>C</u>	ommercial in	surance reir	<u>mbursement</u>				Recruitment of qualified non-physician staff				<u>aff</u>
		Very	Somewhat	Not	Not				Very	Somewhat	Not	Not	
		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>			<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>
Portland Metro	#	490	260	73	1	824	Portland Metro	#	310	368	144	1	823
	%	59	32	9	0	100		%	38	45	17	0	100
Mid-Willamette Valley	#	257	131	26	_	414	Mid-Willamette Valley	#	154	206	55	1	416
	%	62	32	6	_	100		%	37	50	13	0	100
Northwestern	#	29	14	6	_	49	Northwestern	#	18	21	10	_	49
	%	59	29	12	_	100		%	37	43	20	_	100
Southern	#	122	65	14	_	201	Southern	#	65	88	46	_	199
	%	61	32	7	_	100		%	33	44	23	_	100
Eastern	#	44	26	1	_	71	Eastern	#	26	29	16	_	71
	%	62	37	1	_	100		%	37	41	23	_	100
Southwestern	#	26	14	3	_	43	Southwestern	#	19	16	7	_	42
	%	60	33	7	_	100		%	45	38	17	_	100
Central	#	111	51	4	_	166	Central	#	57	83	24	_	164
	%	67	31	2	_	100		%	35	51	15	_	100

Chi-square value = 17.323 p<0.501

Note: — indicates no responses in the category.

Chi-square value = 16.751 p<0.540

Note: — indicates no responses in the category.

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

		<u>Pr</u>	oviding cultur	rally appropi	riate services				Recruitment of physicians				
		Very	Somewhat	Not	Not				Very	Somewhat	Not	Not	
Portland Metro		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	Portland Metro		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>
	#	155	429	239	1	824		#	258	309	256	1	824
	%	19	52	29	0	100		%	31	38	31	0	100
Mid-Willamette Valley							Mid-Willamette Valley						
	#	62	214	139	1	416		#	161	178	75	1	415
	%	15	51	33	0	100		%	39	43	18	0	100
Northwestern							Northwestern						
	#	9	22	18	_	49		#	20	20	9	_	49
	%	18	45	37	_	100		%	41	41	18	_	100
Southern							Southern						
	#	12	89	101	_	202		#	84	75	43	_	202
	%	6	44	50	_	100		%	42	37	21	_	100
Eastern							Eastern						
	#	8	30	33	_	71		#	28	30	11	_	69
	%	11	42	46	_	100		%	41	43	16	_	100
Southwestern							Southwestern						
	#	2	20	21	_	43		#	18	16	8	_	42
	%	5	47	49	_	100		%	43	38	19	_	100
Central							Central						
	#	22	82	61	_	165		#	72	51	43	_	166
	%	13	50	37	_	100		%	43	31	26	_	100

Chi-square value = 54.919 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 42.842 p<0.001

Note: — indicates no responses in the category.

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

			Timeliness o	f health plar	n payment			Medicare prescription drug benefit					
		Very	Somewhat	Not	Not				Very	Somewhat	Not	Not	
Portland Metro		important	important	important	applicable	<u>Total</u>	Portland Metro		important	important	important	applicable	<u>Total</u>
	#	358	338	128	1	825		#	189	377	250	1	817
	%	43	41	16	0	100		%	23	46	31	0	100
Mid-Willamette Valley							Mid-Willamette Valley						
	#	183	185	50	_	418	-	#	91	192	127	_	410
	%	44	44	12	_	100		%	22	47	31	_	100
Northwestern							Northwestern						
	#	22	17	10	_	49		#	17	22	10	_	49
	%	45	35	20	_	100		%	35	45	20	_	100
Southern							Southern						
	#	93	90	19	_	202		#	54	86	62	_	202
	%	46	45	9	_	100		%	27	43	31	_	100
Eastern							Eastern						
	#	33	36	2	_	71		#	12	40	19	_	71
	%	46	51	3	_	100		%	17	56	27	_	100
Southwestern							Southwestern						
	#	16	18	8	_	42		#	10	19	13	_	42
	%	38	43	19	_	100		%	24	45	31	_	100
Central							Central						
	#	88	61	17	_	166		#	49	76	39	_	164
	%	53	37	10	_	100		%	30	46	24	_	100

Chi-square value = 24.635 p<0.135

Note: — indicates no responses in the category.

Chi-square value = 15.081 p<0.656

Note: — indicates no responses in the category.

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

		Patient safety									
		Very	Somewhat	<u>Not</u>							
Portland Metro		important	<u>important</u>	<u>important</u>	<u>Total</u>						
	#	514	257	53	824						
	%	62	31	6	100						
Mid-Willamette Valley											
	#	253	132	31	416						
	%	61	32	7	100						
Northwestern											
	#	34	12	2	48						
	%	71	25	4	100						
Southern											
	#	121	61	19	201						
	%	60	30	9	100						
Eastern											
	#	43	23	5	71						
	%	61	32	7	100						
Southwestern											
	#	21	17	4	42						
	%	50	40	10	100						
Central											
	#	89	61	15	165						
	%	54	37	9	100						

Chi-square value = 10.335 p<0.587

	Electronic prescribing										
		Very	Somewhat	Not	Not						
Portland Metro		important	important	important	applicable	Total					
	#	141	290	387	1	819					
	%	17	35	47	0	100					
Mid-Willamette Valley											
,	#	78	183	154	1	416					
	%	19	44	37	0	100					
Northwestern											
	#	9	24	14	_	47					
	%	19	51	30	_	100					
Southern											
	#	21	83	99	_	203					
	%	10	41	49	_	100					
Eastern											
	#	8	32	31	_	71					
	%	11	45	44	_	100					
Southwestern	,,		.0	• •							
	#	7	17	18	_	42					
	%	17	40	43	_	100					
Central	,,		.0								
	#	15	75	76	_	166					
	%	9	45	46	_	100					

Chi-square value = 33.331 p<0.015

Note: — indicates no responses in the category.

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

			Gove	rnment regu	<u>ılation</u>				Hospital/medical staff issues					
	<u>Very</u> <u>Somewhat</u> <u>Not</u> <u>Not</u>								Very	Somewhat	Not	Not		
Portland Metro		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	Portland Metro		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	
	#	365	366	95	1	827		#	197	457	166	1	821	
	%	44	44	11	0	100		%	24	56	20	0	100	
Mid-Willamette Valley							Mid-Willamette Valley							
	#	193	182	38	1	414		#	114	227	72	1	414	
	%	47	44	9	0	100		%	28	55	17	0	100	
Northwestern							Northwestern							
	#	22	23	4	_	49		#	13	25	11	_	49	
	%	45	47	8	_	100		%	27	51	22	_	100	
Southern							Southern							
	#	96	75	30	_	201		#	62	102	36	_	200	
	%	48	37	15	_	100		%	31	51	18	_	100	
Eastern							Eastern							
	#	39	25	7	_	71		#	23	37	12	_	72	
	%	55	35	10	_	100		%	32	51	17	_	100	
Southwestern														
	#	24	11	7	_	42	Southwestern	#	7	28	7	_	42	
	%	57	26	17	_	100		%	17	67	17	_	100	
Central														
	#	76	74	15	_	165	Central	#	39	103	24	_	166	
	%	46	45	9	_	100		%	23	62	14	_	100	

Chi-square value = 16.754 p<0.540

Note: — indicates no responses in the category.

Chi-square value = 14.649 p<0.686

Table B-36. Importance of issues by practice location

33b. Setting and ownership

39. Rate the importance of each of the following issues to you.

		Retention of physicians									
		Very	Somewhat	Not	Not						
Portland Metro		important	<u>important</u>	<u>important</u>	applicable	<u>Total</u>					
	#	344	293	184	1	822					
	%	42	36	22	0	100					
Mid-Willamette Valley											
	#	192	170	51	1	414					
	%	46	41	12	0	100					
Northwestern											
	#	25	16	8	_	49					
	%	51	33	16	_	100					
Southern											
	#	104	72	25	_	201					
	%	52	36	12	_	100					
Eastern											
	#	39	25	6	_	70					
	%	56	36	9	_	100					
Southwestern											
	#	23	14	5	_	42					
	%	55	33	12	_	100					
Central											
	#	71	70	25	_	166					
	%	43	42	15	_	100					

Chi-square value = 37.610 p<0.004

Note: — indicates no responses in the category.

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

			Electro	Medicare reimbursement									
		<u>Very</u>	Somewhat	Not	<u>Not</u>				<u>Very</u>	Somewhat	<u>Not</u>	<u>Not</u>	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>
Primary care	#	457	360	238	_	1055	Primary care	#	682	230	134	_	1046
	%	43	34	23	_	100		%	65	22	13	_	100
Medical specialties	#	202	177	128	_	507	Medical specialties	#	396	85	28	1	510
	%	40	35	а	_	100		%	78	17	5	0	100
Surgical specialties	#	74	108	71	_	253	Surgical specialties	#	199	40	13	_	252
	%		43	28	_	100	ourgreen ep commer	%	79	16	5	_	100
Hospital-based	#	180	135	58	_	373	Hospital-based	#	290	70	13	_	373
	%	48	36	16	_	100		%	78	19	3	_	100
Other	#	57	53	71	2	183	Other	#	60	51	66	2	179
	%	31	29	39	1	100		%	34	28	37	1	100

Chi-square value =80.594 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 234.264 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

			<u>Overhe</u>	ad cost				Pharmaceutical costs					
		<u>Very</u>	Somewhat	Not	<u>Not</u>				<u>Very</u>	Somewhat	Not	Not	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>
Primary care	#	777	215	64	_	1056	Primary care	#	660	340	53	_	1053
	%	74	20	6	_	100		%	63	32	5	_	100
Medical specialties	#	393	85	26	1	505	Medical specialties	#	259	203	39	1	502
	%	78	17	5	0	100		%	52	40	8	0	100
Surgical specialties	#	210	34	8	_	252	Surgical specialties	#	69	138	44	_	251
	%	83	13	3	_	100		%	27	55	18	_	100
Hospital-based	#	196	147	29	_	372	Hospital-based	#	114	146	112	_	372
	%	53	40	8	_	100		%	31	39	30	_	100
Other	#	97	59	24	_	181	Other	#	103	58	19	1	181
	%	54	33	13	_	100		%	57	32	10	1	100

Chi-square value = 135.362 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 291.573 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

Stress and burnout										Cost/availability of liability insurance				
		<u>Very</u>	Somewhat	Not	<u>Not</u>				<u>Very</u>	Somewhat	Not	<u>Not</u>		
Physician specialty		important	<u>important</u>	important	<u>applicable</u>	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	
Primary care	#	615	366	74	_	1055	Primary care	#	655	306	91	_	1052	
	%	58	35	7	_	100		%	62	29	9	_	100	
Medical specialties	#	283	162	60	1	506	Medical specialties	#	322	150	35	1	508	
	%	56	32	12	0	100		%	63	30	7	0	100	
Surgical specialties	#	152	73	24	_	249	Surgical specialties	#	216	29	12	_	257	
	%	61	29	10	_	100		%	84	11	5	_	100	
Hospital-based	#	229	119	25	_	373	Hospital-based	#	285	76	13	_	374	
	%	61	32	7	_	100		%	76	20	3	_	100	
Other	#	98	62	19	2	181	Other	#	87	67	28	1	183	
	%	54	34	10	1	100		%	48	37	15	1	100	

Chi-square value = 32.259 p<0.001

Note: — indicates no responses in the category.

Chi-square value = 104.648 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

			Call co	<u>verage</u>				Cost of translation services					
		<u>Very</u>	Somewhat	<u>Not</u>	<u>Not</u>				<u>Very</u>	Somewhat	<u>Not</u>	<u>Not</u>	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>
Primary care	#	502	400	148	_	1050	Primary care	#	119	423	502	_	1044
	%	48	38	14	_	100		%	11	41	48	_	100
<b>8.4</b> P. 1 2 P.	,,	200	101	0.5		507	A.A. P. J. 1997	,,	70	000	40.4	4	500
Medical specialties	#	230	181	95	1	507	Medical specialties	#	78	233	194	1	506
	%	45	36	19	0	100		%	15	46	38	0	100
0 ' 1 ' ''	.,	404	70	00		054	0	,,	00	400	400		0.40
Surgical specialties	#	161	70	20	_	251	Surgical specialties	#	36	103	109	_	248
	%	64	28	8	_	100		%	15	42	44	_	100
Hospital-based	#	164	104	103	_	371	Hospital-based	#	28	113	228	_	369
i iospitai-baseu							i iospitai-baseu						
	%	44	28	28	_	100		%	8	31	62	_	100
Other	#	50	60	71	1	182	Other	#	12	41	126	2	181
0.1.0.	%		33	39	1	100	0.1101	%	7	23	70	1	100
	70	21	33	39	1	100		70	1	23	70	1	100

Chi-square value = 134.967 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 100.413 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

			Cove		Medicaid/OHP reimbursement								
		<u>Very</u>	Somewhat	Not	<u>Not</u>				<u>Very</u>	Somewhat	Not	<u>Not</u>	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	important	<u>applicable</u>	<u>Total</u>
Primary care	#	575	401	77	_	1053	Primary care	#	688	274	89	_	1051
	%	55	38	7	_	100		%	65	26	8	_	100
Medical specialties	#	274	190	41	_	505	Medical specialties	#	318	148	41	_	507
	%	54	38	8	_	100		%	63	29	8	_	100
Surgical specialties	#	128	96	26	_	250	Surgical specialties	#	152	75	25	_	252
	%	51	38	10	_	100	,	%	60	30	10	_	100
Hospital-based	#	211	131	27	_	369	Hospital-based	#	248	103	22	_	373
·	%	57	36	7	_	100	·	%	66	28	6	_	100
Other	#	86	65	30	2	183	Other	#	71	50	58	2	181
	%	47	36	16	1	100		%	39	28	32	1	100

Chi-square value = 44.204 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 143.349 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

	Commercial insurance reimbursement								Recruitment of qualified non-physician staff				<u>f</u>
		<u>Very</u>	Somewhat	Not	Not				Very	Somewhat	Not	<u>Not</u>	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>
Primary care	#	596	362	94	_	1052	Primary care	#	416	470	165	_	1051
	%	57	34	9	_	100		%	40	45	16	_	100
Medical specialties	#	334	144	27	_	505	Medical specialties	#	212	228	61	1	502
	%	66	29	5	_	100		%	42	45	12	0	100
Surgical specialties	#	170	69	12	_	251	Surgical specialties	#	74	131	46	_	251
ourgiour opeoidities	%		27	5	_	100	odrgiodi opedialiles	%		52	18	_	100
Hospital-based	#	229	120	22	_	371	Hospital-based	#	137	162	74		373
i iospitai-baseu	<del>"</del> %		32	6	_	100	i iospitai-baseu	<del>"</del> %		43	20	_	100
	/0	02	32	O	_	100		/0	31	40	20	_	100
Other	#	94	55	30	1	180	Other	#	53	65	64	1	183
	%	52	31	17	1	100		%	29	36	35	1	100

Chi-square value = 55.421 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 69.203 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

	Providing culturally appropriate services									Recruitment of physicians				
		<u>Very</u>	Somewhat	Not	<u>Not</u>				<u>Very</u>	Somewhat	<u>Not</u>	<u>Not</u>		
Physician specialty		<u>important</u>	<u>important</u>	important	applicable	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	
Primary care	#	215	518	317	_	1050	Primary care	#	349	424	279	_	1052	
	%	20	49	30	_	100		%	33	40	27	_	100	
Medical specialties	#	75	274	157	1	507	Medical specialties	#	212	203	88	1	504	
	%	15	54	31	0	100		%	42	40	17	0	100	
Surgical specialties	#	15	128	111	_	254	Surgical specialties	#	99	92	61	_	252	
	%	6	50	44	_	100		%	39	37	24	_	100	
Hospital-based	#	56	171	144	_	371	Hospital-based	#	174	145	53	_	372	
·	%	15	46	39	_	100	·	%	47	39	14	_	100	
Other	#	43	81	57	1	182	Other	#	49	55	77	1	182	
	%	24	45	31	1	100		%	27	30	42	1	100	

Chi-square value = 59.137 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 71.836 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

Timeliness of health plan payment								Medicare prescription drug benefit					
		Very	Somewhat	Not	<u>Not</u>				Very	Somewhat	Not	<u>Not</u>	
Physician specialty		important	<u>important</u>	important	<u>applicable</u>	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	important	<u>applicable</u>	<u>Total</u>
Primary care	#	428	459	169	_	1056	Primary care	#	307	466	267	_	1040
	%	41	43	16	_	100		%	30	45	26	_	100
Medical specialties	#	263	201	43	_	507	Medical specialties	#	133	257	113	_	503
·	%	52	40	8	_	100	·	%	26	51	22	_	100
Surgical specialties	#	138	91	23	_	252	Surgical specialties	#	36	115	101	_	252
	%	55	36	9	_	100		%	14	46	40	_	100
Hospital-based	#	161	167	45	_	373	Hospital-based	#	55	155	160	_	370
·	%	43	45	12	_	100	•	%	15	42	43	_	100
Other	#	67	70	43	1	181	Other	#	44	61	72	1	178
	%	37	39	24	1	100		%	25	34	40	1	100

Chi-square value =67.044 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 109.620 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

			<u>Patient</u>	safety	
		Very	Somewhat	Not	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>Total</u>
Primary care	#	619	357	74	1050
•	%	59	34	7	100
Medical specialties	#	322	150	34	506
	%	64	30	7	100
Surgical specialties	#	146	83	23	252
ou.g.ou. opooluliioo	%	58	33	9	100
Hospital-based	#	248	103	22	373
Troopital bacca	%	66	28	6	100
Other	#	119	53	11	183
Other	<del>"</del>	65	29	6	100
	/0	65	29	O	100

Chi-square value = 11.437 p<0.178

		Electronic prescribing								
		<u>Very</u>	Somewhat	Not	<u>Not</u>					
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>				
Primary care	#	214	438	398	_	1050				
	%	20	42	38	_	100				
Medical specialties	#	75	233	196	1	505				
	%	15	46	39	0	100				
Surgical specialties	#	16	107	130	_	253				
0 1	%	6	42	51	_	100				
Hospital-based	#	36	130	204	_	370				
	%	10	35	55	_	100				
Other	#	35	43	101	1	180				
Otrici	<del>"</del> %	19	24	56	1	100				

Chi-square value = 96.465 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

Government regulation										Hospital/medical staff issues				
		<u>Very</u>	Somewhat	Not	Not				<u>Very</u>	Somewhat	Not	Not		
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	applicable	<u>Total</u>	Physician specialty		<u>important</u>	<u>important</u>	important	applicable	<u>Total</u>	
Primary care	#	448	478	120	_	1046	Primary care	#	235	630	187	_	1,052	
	%	43	46	11	_	100		%	22	60	18	_	100	
Medical specialties	#	247	201	56	1	505	Medical specialties	#	118	290	94	1	503	
	%	49	40	11	0	100		%	23	58	19	0	100	
Surgical specialties	#	144	88	24	_	256	Surgical specialties	#	84	148	22	_	254	
	%	56	34	9	_	100		%	33	58	9	_	100	
Hospital-based	#	166	162	46	_	374	Hospital-based	#	148	191	34	_	373	
	%	44	43	12	_	100		%	40	51	9	_	100	
Other	#	70	89	21	1	181	Other	#	40	55	86	1	182	
	%	39	49	12	1	100		%	22	30	47	1	100	

Chi-square value = 28.466 p<0.005

Note: — indicates no responses in the category.

Chi-square value = 188.140 p<0.0001

Table B-37. Importance of issues by physician specialty

32. What is your primary specialty?

39. Rate the importance of each of the following issues to you.

Retention of physicians

		<u>Very</u>	Somewhat	Not	<u>Not</u>	
Physician specialty		<u>important</u>	<u>important</u>	<u>important</u>	<u>applicable</u>	<u>Total</u>
Primary care	#	463	402	183	_	1048
	%	44	38	17	_	100
Medical specialties	#	212	203	88	1	504
	%	42	40	17	0	100
Surgical specialties	#	126	92	35	_	253
	%	50	36	14	_	100
Hospital-based	#	215	123	36	_	374
	%	57	33	10	_	100
Other	#	59	57	63	1	180
	%	33	32	35	1	100

Chi-square value = 80.320 p<0.0001

Note: — indicates no responses in the category.

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

		Stop all patient care							
		<u>Definitely</u>		<u>Not</u>					
Physician specialty		will do	Might do	anticipated	Total				
Primary care	#	27	67	846	940				
	%	3	7	90	100				
Medical specialties	#	18	26	407	451				
	%	4	6	90	100				
Surgical specialties	#	13	24	185	222				
	%	6	11	83	100				
Hospital-based	#	8	13	235	256				
	%	3	5	92	100				
Other	#	9	17	137	163				
	%	6	10	84	100				

Chi-square value = 17.225 p<0.028

		<u>Sto</u>	o services to	o specific grou	<u>ps</u>
		Definitely		Not	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	65	211	646	922
	%	7	23	70	100
Medical specialties	#	22	105	321	448
	%	5	23	72	100
Surgical specialties	#	30	68	131	229
	%	13	30	57	100
Hospital-based	#	6	27	218	251
	%	2	11	87	100
Other	#	12	26	104	142
	%	8	18	73	100

Chi-square value = 61.079 p<0.0001

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

Stop providing certain services

		Definitely	-	<u>Not</u>	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	57	128	707	892
	%	6	14	79	100
Medical specialties	#	25	57	348	430
	%	6	13	81	100
Surgical specialties	#	33	49	136	218
	%	15	22	62	100
Hospital-based	#	11	23	215	249
	%	4	9	86	100
Other	#	8	7	125	140
	%	6	5	89	100

Chi-square value = 60.138 p<0.0001

Start providing certain services

		<u>Definitely</u>		<u>Not</u>	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	28	80	730	838
	%	3	10	87	100
Medical specialties	#	14	40	353	407
	%	3	10	87	100
Surgical specialties	#	9	19	169	197
	%	5	10	86	100
Hospital-based	#	10	19	211	240
	%	4	8	88	100
Other	#	8	9	121	138
	%	6	7	88	100

Chi-square value = 14.351 p<0.824

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

Reduce i	patient	care	hours
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		Definitely	•	Not	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	49	216	694	959
•	%	5	23	72	100
Medical specialties	#	33	105	318	456
	%	7	23	70	100
Surgical specialties	#	31	55	148	234
	%	13	24	63	100
Hospital-based	#	28	55	195	278
	%	10	20	70	100
Other	#	17	45	98	160
	%	11	28	61	100

Chi-square value = 29.188 p<0.0001

Increases referral of complex cases

		Definitely		Not	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	106	239	609	954
	%	11	25	64	100
Medical specialties	#	40	89	313	442
	%	9	20	71	100
Surgical specialties	#	58	61	112	231
	%	25	26	48	100
Hospital-based	#	23	39	205	267
	%	9	15	77	100
Other	#	9	27	112	148
	%	6	18	76	100

Chi-square value = 78.929 p<0.0001

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

Relocate practice within state

		Definitely	•	<u>Not</u>	<del></del>
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	24	91	823	938
	%	3	10	88	100
Medical specialties	#	9	36	389	434
	%	2	8	90	100
Surgical specialties	#	10	18	197	225
	%	4	8	88	100
Hospital-based	#	7	30	251	288
	%	2	10	87	100
Other	#	3	12	142	157
	%	2	8	90	100

Chi-square value = 5.873 p<0.661

Relocate practice to another state

		Definitely		Not	
Physician specialty		will do	Might do	anticipated	<u>Total</u>
Primary care	#	16	114	810	940
	%	2	12	86	100
Medical specialties	#	7	43	393	443
	%	2	10	89	100
Surgical specialties	#	4	47	175	226
	%	2	21	77	100
Hospital-based	#	8	48	233	289
	%	3	17	81	100
Other	#	2	16	143	161
	%	1	10	89	100

Chi-square value = 24.108 p<0.002

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

			Close or s	ell practice	
		Definitely		<u>Not</u>	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	22	78	805	905
	%	2	9	89	100
Medical specialties	#	14	42	384	440
	%	3	10	87	100
Surgical specialties	#	7	40	176	223
	%	3	18	79	100
Hospital-based	#	6	12	244	262
	%	2	5	93	100
Other	#	1	21	127	149
	%	1	14	85	100

Chi-square value = 32.909 p<0.0001

			Re	<u>etire</u>	
		<u>Definitely</u>		<u>Not</u>	
Physician specialty		will do	Might do	anticipated	Total
Primary care	#	28	108	840	976
	%	3	11	86	100
Medical specialties	#	25	55	386	466
	%	5	12	83	100
Surgical specialties	#	14	49	178	241
	%	6	20	74	100
Hospital-based	#	15	40	252	307
	%	5	13	82	100
Other	#	5	19	140	164
	%	3	12	85	100

Chi-square value = 25.463 p<0.001

Table B-38. Anticipated changes in upcoming two years by physician specialty

32. What is your primary specialty?

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

	•	•	•	•	•
		Increase	diagnostic	orocedures pe	rformed
		<b>Definitely</b>		Not	
Physician specialty		will do	Might do	anticipated	<u>Total</u>
Primary care	#	55	187	711	953
	%	6	20	75	100
Medical specialties	#	32	98	324	454
•	%	7	22	71	100
Surgical specialties	#	27	49	151	227
<b>9</b>	%	12	22	67	100
Hospital-based	#	35	49	192	276
	%	13	18	70	100
011	.,	•		400	
Other	#	2	14	128	144
	%	1	10	89	100

Chi-square value = 43.536 p<0.0001

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

			Stop all p	atient care				Sto	p services to	o specific group	<u>os</u>
		<u>Definitely</u>		<u>Not</u>				<u>Definitely</u>		<u>Not</u>	
Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>	Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	21	53	634	708	Portland Metro	#	55	154	490	699
	%	3	7	90	100		%	8	22	70	100
Mid-Willamette Valley	#	12	24	324	360	Mid-Willamette Valley	#	19	67	266	352
	%	3	7	90	100		%	5	19	76	100
Northwestern	#	3	2	35	40	Northwestern	#	4	7	27	38
	%	8	5	88	100		%	11	18	71	100
Southern	#	8	10	160	178	Southern	#	10	50	114	174
	%	4	6	90	100		%	6	29	66	100
Eastern	#	2	5	54	61	Eastern	#	3	12	46	61
	%	3	8	89	100		%	5	20	75	100
Southwestern	#	3	2	33	38	Southwestern	#	2	5	29	36
	%	8	5	87	100		%	6	14	81	100
Central	#	4	15	119	138	Central	#	17	32	91	140
	%	3	11	86	100		%	12	23	65	100

Chi-square value = 9.342 p<0.673

Chi-square value = 17.969 p<0.117

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

		St	op providing	certain service	<u>s</u>			Sta	art providing	certain service	<u>s</u>
		<b>Definitely</b>		<u>Not</u>			<u>Definitely</u> <u>Not</u>				
Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>	Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	40	82	555	677	Portland Metro	#	31	54	556	641
	%	6	12	82	100		%	5	8	87	100
Mid-Willamette Valley	#	31	50	259	340	Mid-Willamette Valley	#	10	29	280	319
	%	9	15	76	100		%	3	9	88	100
Northwestern	#	1	6	27	34	Northwestern	#	2	3	29	34
	%	3	18	79	100		%	6	9	85	100
Southern	#	11	25	128	164	Southern	#	6	16	135	157
	%	7	15	78	100		%	4	10	86	100
Eastern	#	2	13	44	59	Eastern	#	3	7	48	58
	%	3	22	75	100		%	5	12	83	100
Southwestern	#	5	4	27	36	Southwestern	#	1	3	31	35
	%	14	11	75	100		%	3	9	89	100
Central	#	15	26	100	141	Central	#	7	12	107	126
	%	11	18	71	100		%	6	10	85	100

Chi-square value = 19.520 p<0.077

Chi-square value = 3.738 p<0.988

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

		<u>.</u>	Reduce patie	ent care hours			Increases referral of complex ca				ses
		<u>Definitely</u>		<u>Not</u>				<u>Definitely</u>		<u>Not</u>	
Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>	Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	54	173	511	738	Portland Metro	#	78	144	506	728
	%	7	23	69	100		%	11	20	70	100
Mid-Willamette Valley	#	32	64	274	370	Mid-Willamette Valley	#	46	90	228	364
	%	9	17	74	100		%	13	25	63	100
Northwestern	#	5	8	27	40	Northwestern	#	7	13	20	40
	%	13	20	68	100		%	18	33	50	100
Southern	#	13	52	117	182	Southern	#	28	43	108	179
	%	7	29	64	100		%	16	24	60	100
						Eastern	#	13	24	29	66
Eastern	#	3	16	46	65		%	20	36	44	100
	%	5	25	71	100						
						Southwestern	#	5	6	24	35
Southwestern	#	3	11	23	37		%	14	17	69	100
	%	8	30	62	100						
						Central	#	13	42	84	139
Central	#	15	34	95	144		%	9	30	60	100
	%	10	24	66	100						

Chi-square value = 31.593 p<0.002

Chi-square value = 15.002 p<0.241

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

		<u>R</u>		Relocate practice to another state				ate			
		<u>Definitely</u>		<u>Not</u>				<u>Definitely</u>		<u>Not</u>	
Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>	Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	18	68	635	721	Portland Metro	#	9	74	640	723
	%	2	9	88	100		%	1	10	89	100
Mid-Willamette Valley	#	7	32	323	362	Mid-Willamette Valley	#	3	38	320	361
	%	2	9	89	100		%	1	11	89	100
Northwestern	#	_	5	32	37	Northwestern	#	_	10	27	37
	%	_	14	86	100		%	_	27	73	100
Southern	#	6	15	153	174	Southern	#	6	24	146	176
	%	3	9	88	100		%	3	14	83	100
Eastern	#	1	13	50	64	Eastern	#	_	15	48	63
	%	2	20	78	100		%	_	24	76	100
Southwestern	#	_	2	34	36	Southwestern	#	_	8	28	36
	%	_	6	94	100		%	_	22	78	100
Central	#	4	15	124	143	Central	#	5	25	117	147
	%	3	10	87	100		%	3	17	80	100

Chi-square value = 13.412 p<0.340

Note: — indicates no responses in the category.

Chi-square value = 36.702 p<0.0001

Note: — indicates no responses in the category.

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

			Close or s	sell practice				<u>Retire</u>			
		<u>Definitely</u>		<u>Not</u>				<u>Definitely</u>		<u>Not</u>	
Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>	Practice location		will do	Might do	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	18	68	620	706	Portland Metro	#	31	97	626	754
	%	3	10	88	100		%	4	13	83	100
Mid-Willamette Valley	#	7	27	317	351	Mid-Willamette Valley	#	17	42	325	384
	%	2	8	90	100		%	4	11	85	100
Northwestern	#	2	6	28	36	Northwestern	#	4	6	32	42
	%	6	17	78	100		%	10	14	76	100
Southern	#	4	17	150	171	Southern	#	6	24	152	182
	%	2	10	88	100		%	3	13	84	100
Eastern	#	2	14	46	62	Eastern	#	2	11	52	65
	%	3	23	74	100		%	3	17	80	100
Southwestern	#	1	8	25	34	Southwestern	#	3	4	32	39
	%	3	24	74	100		%	8	10	82	100
Central	#	5	19	113	137	Central	#	4	20	120	144
	%	4	14	82	100		%	3	14	83	100

Chi-square value = 25.340 p<0.013

Chi-square value = 8.081 p<0.779

Table B-39. Anticipated changes in upcoming two years by practice location

33b. Setting and ownership

17. Please indicate whether you anticipate taking the following actions in your practice in the next two years.

		Increase diagnostic procedures performed								
		<u>Definitely</u>		<u>Not</u>						
Practice location		<u>will do</u>	Might do	<u>anticipated</u>	<u>Total</u>					
Portland Metro	#	58	129	532	719					
	%	8	18	74	100					
Mid-Willamette Valley	#	22	72	274	368					
	%	6	20	74	100					
Northwestern	#	1	9	27	37					
	%	3	24	73	100					
Southern	#	20	34	126	180					
	%	11	19	70	100					
Eastern	#	7	11	45	63					
	%	11	17	71	100					
Southwestern	#	_	5	32	37					
	%	_	14	86	100					
Central	#	10	37	96	143					
	%	7	26	67	100					

Chi-square value = 16.640 p<0.164

Note: — indicates no responses in the category.

Table B-40. Satisfaction with medical career in past 12 months by physician specialty

32. What is your primary specialty?

# Satisfaction in past 12 months

	<u>Neither</u>							
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>		
Physician specialty		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>	
Primary care	#	340	475	46	156	49	1066	
	%	32	45	4	15	5	100	
Medical specialties	#	189	205	34	66	19	513	
	%	37	40	7	13	4	100	
Surgical specialties	#	67	100	17	56	21	261	
•	%	26	38	7	21	8	100	
Hospital-based	#	147	138	33	37	19	374	
	%	39	37	9	10	5	100	
Other	#	73	74	8	23	6	184	
•	%	40	40	4	13	3	100	

Chi-square value = 53.578 p<0.0001

<sup>9.</sup> How satisfied have you been with your medical career in the last 12 months?

Table B-41. Satisfaction with medical career in past 12 months by length of licensure

6. How long have you had a medical license in any state, including Oregon?

9. How satisfied have you been with your medical career in the last 12 months?

### Satisfaction in past 12 months

	<u>Neither</u>								
		Very	Somewhat	satisfied nor	Somewhat	Very			
Length of licensure		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	Total		
Less than 2 years	#	14	11	2	2	1	30		
•	%	47	37	7	7	3	100		
2-5 years	#	69	96	13	16	7	201		
	%	34	48	6	8	3	100		
6-10 years	#	112	158	16	54	19	359		
	%	31	44	4	15	5	100		
11-20 years	#	220	332	41	93	30	716		
·	%	31	46	6	13	4	100		
More than 20 years	#	404	401	66	175	57	1103		
,	%	37	36	6	16	5	100		

Chi-square value = 33.627 p<0.006

Table B-42. Satisfaction with medical career in past 12 months by practice size

29. What is the size of your primary practice, that is, the practice in which you spend the most time?

9. How satisfied have you been with your medical career in the last 12 months?

### Satisfaction in past 12 months

				<u>Neither</u>			
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>	
Practice size		<u>satisfied</u>	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>
Solo practice	#	185	216	28	107	37	573
	%	32	38	5	19	6	100
Small group practice (2-4 physicians)	#	144	243	33	84	19	523
	%	28	46	6	16	4	100
Medium group practice (5-9 physicians)	#	166	202	30	52	21	471
	%	35	43	6	11	4	100
Large group practice (10 or more physicians)	#	316	327	45	92	32	812
	%	39	40	6	11	4	100

Chi-square value = 43.558 p<0.0001

Table B-43. Satisfaction with medical career in past 12 months by rural/urban

33b. Setting and ownership

9. How satisfied have you been with your medical career in the last 12 months?

## Satisfaction in past 12 months

	<u>Neither</u>							
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>		
Region		satisfied	<u>satisfied</u>	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>	
Rural	#	150	219	39	90	38	536	
	%	28	41	7	17	7	100	
Urban	#	495	583	77	182	56	1393	
	%	36	42	6	13	4	100	

Chi-square value = 19.952 p<0.001

Table B-44. Satisfaction with medical career in past 12 months by practice location

33b. Setting and ownership

9. How satisfied have you been with your medical career in the last 12 months?

Satisfaction in past 12 months

	<u>Neither</u>							
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>		
Practice location		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>	
Portland Metro	#	276	355	50	115	39	835	
	%	33	43	6	14	5	100	
Mid-Willamette Valley	#	142	181	19	64	16	422	
	%	34	43	5	15	4	100	
Northwestern	#	12	19	5	10	3	49	
	%	24	39	10	20	6	100	
Southern	#	72	80	14	29	10	205	
	%	35	39	7	14	5	100	
Eastern	#	15	34	4	12	8	73	
	%	21	47	5	16	11	100	
Southwestern	#	13	19	3	5	3	43	
	%	30	44	7	12	7	100	
Central	#	55	58	13	28	11	165	
	%	33	35	8	17	7	100	

Chi-square value = 22.776 p<0.533

Table B-45. Satisfaction with medical career in past 12 months by practice setting

33b. Setting and ownership

9. How satisfied have you been with your medical career in the last 12 months?

### Satisfaction in past 12 months

	<u>Neither</u>							
		Very	Somewhat	satisfied nor	Somewhat	Very		
Practice setting		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>	
Hospital	#	362	427	62	142	53	1046	
	%	35	41	6	14	5	100	
Clinic, private, for profit	#	413	553	81	219	62	1328	
	%	31	42	6	16	5	100	
Clinic, private, not for profit	#	96	118	12	42	8	276	
	%	35	43	4	15	3	100	
Clinic, public	#	39	50	5	16	6	116	
	%	34	43	4	14	5	100	
Other	#	29	30	3	8	7	77	
	%	38	39	4	10	9	100	

Table B-46. Satisfaction with medical career in past 12 months by ownership or employment status

33c. Employment

9. How satisfied have you been with your medical career in the last 12 months?

## Satisfaction in past 12 months

				<u>Neither</u>			
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>	
<u>Ownership</u>		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>
Full or part owner of practice	#	360	477	73	182	62	1154
	%	31	41	6	16	5	100
Employee of practice or health system	#	268	311	39	86	29	733
	%	37	42	5	12	4	100
Independent contractor	#	41	70	7	18	10	146
	%	28	48	5	12	7	100
Volunteer	#	7	1	2	1	_	11
	%	64	9	18	9	_	100
Other	#	16	17	1	4	3	41
	%	39	41	2	10	7	100

Chi-square value = 27.722 p<0.034

Table B-47. Satisfaction with medical career overall by physician specialty

32. What is your primary specialty?

## Satisfaction with medical career overall

Neither Somewhat satisfied nor Somewhat Very Very Physican specialty dissatisfied dissatisfied satisfied satisfied <u>Total</u> Primary care # % # Medical specialties % Surgical specialties # % Hospital-based # % Other # % 

Chi-square value = 28.552 p<0.027

<sup>9.</sup> How satisfied have you been with your medical career overall?

#### Table B-48. Satisfaction with medical career overall by length of licensure

- 6. How long have you had a medical license in any state, including Oregon?
- 9. How satisfied have you been with your medical career overall?

#### Satisfaction with medical career overall

				Neither			
		Very	Somewhat	satisfied nor	Somewhat	<u>Very</u>	
Length of licensure		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>
Less than 2 years	#	18	8	1	3	_	30
	%	60	27	3	10	_	100
2–5 years	#	93	80	13	11	3	200
•	%	47	40	7	6	2	100
6–10 years	#	133	165	14	36	10	358
•	%	37	46	4	10	3	100
11–20 years	#	290	316	31	65	14	716
•	%	41	44	4	9	2	100
More than 20 years	#	658	338	22	63	20	1101
-	%	60	31	2	6	2	100

Chi-square value = 105.243 p<0.0001

Note: — indicates no responses in the category.

Appendix B

#### Table B-49. Satisfaction with medical career overall by practice size

29. What is the size of your primary practice, that is, the practice in which you spend the most time?

9. How satisfied have you been with your medical career overall?

#### Satisfaction with medical career overall

	<u>Neither</u>								
		Very	Somewhat	satisfied nor	Somewhat	Very			
Practice size		satisfied	satisfied	dissatisfied	dissatisfied	dissatisfied	<u>Total</u>		
Solo practice	#	289	206	14	50	15	574		
	%	50	36	2	9	3	100		
Small group practice (2–4 physicians)	#	219	223	17	52	10	521		
	%	42	43	3	10	2	100		
Medium group practice (5–9 physicians)	#	233	179	18	33	7	470		
	%	50	38	4	7	1	100		
Large group practice (10 or more physicians)	#	442	286	29	39	14	810		
	%	55	35	4	5	2	100		

Chi-square value = 32.865 p<0.001

Table B-50. Satisfaction with medical career overall by practice location

33b. Setting and ownership

9. How satisfied have you been with your medical career overall?

## Satisfaction with medical career overall

Neither Somewhat satisfied nor Somewhat Very Very Practice location dissatisfied dissatisfied satisfied satisfied <u>Total</u> Portland Metro # % # Mid-Willamette Valley % # Northwestern Southern # % # Eastern % # Southwestern % # Central 

Chi-square value = 27.875 p<0.265

Note: — indicates no responses in the category.

### Table B-51. Satisfaction with medical career overall by urban/rural

33b. Setting and ownership

9. How satisfied have you been with your medical career overall?

#### Satisfaction with medical career overall

				Neither			
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>	
<u>Region</u>		<u>satisfied</u>	satisfied	dissatisfied	dissatisfied	<u>dissatisfied</u>	<u>Total</u>
Rural	#	230	226	16	51	11	534
	%	43	42	3	10	2	100
Urban	#	722	514	43	90	24	1393
	%	52	37	3	6	2	100

Chi-square value = 14.240 p<0.007

Table B-52. Satisfaction within medical career overall by practice setting

33b. Setting and ownership

9. How satisfied have you been with your medical career overall?

#### Satisfaction with medical career overall

				Neither			
		<u>Very</u>	Somewhat	satisfied nor	Somewhat	<u>Very</u>	
Practice setting		<u>satisfied</u>	<u>satisfied</u>	<u>dissatisfied</u>	dissatisfied	dissatisfied	<u>Total</u>
Hospital	#	508	403	34	78	20	1043
	%	49	39	3	7	2	100
Clinic, private, for profit	#	647	508	39	110	22	1326
	%	49	38	3	8	2	100
Clinic, private, not for profit	#	128	115	9	15	7	274
	%	47	42	3	5	3	100
Clinic, public	#	58	38	7	11	2	116
	%	50	33	6	9	2	100
Primary practice settingother	#	42	23	2	7	2	76
	%	55	30	3	9	3	100

Table B-53. Satisfaction with medical career overall by ownership or employment status

33c. Employment

9. How satisfied have you been with your medical career overall?

#### Satisfaction with medical career overall

Neither Somewhat satisfied nor Somewhat Very Very Employment role satisfied satisfied dissatisfied dissatisfied <u>Total</u> Full or part owner of practice % # Employee of practice or health system % # Independent contractor % # Volunteer % # Other 

Chi-square value = 23.518 p<0.101

Note: — indicates no responses in the category.

TableB-54. Greatest source of professional satisfaction by physician specialty

32. What is your primary specialty?

11. What is the greatest source of your professional satisfaction?

	Greatest source of professional satisfaction										
			Intellectual	<u>Patient</u>	<u>Practice</u>						
Physician specialty		<u>Income</u>	<u>challenge</u>	<u>relationships</u>	environment	<u>Other</u>	<u>Total</u>				
Primary care	#	40	199	660	107	24	1030				
	%	4	19	64	10	2	100				
Medical specialties	#	31	139	253	56	21	500				
	%	6	28	51	11	4	100				
Surgical specialties	#	12	58	136	31	13	250				
	%	5	23	54	12	5	100				
Hospital-based	#	50	129	68	99	14	360				
	%	14	36	19	28	4	100				
Other	#	10	47	93	24	6	180				
	%	6	26	52	13	3	100				

Chi-square value = 250.027 p<0.0001

Table B-55. Greatest source of professional satisfaction by practice location

33b. Setting and ownership

11. What is the greatest source of your professional satisfaction?

	Greatest source of professional satisfaction										
			Intellectual	<u>Patient</u>	<u>Practice</u>						
Practice location		Income	<u>challenge</u>	<u>relationships</u>	environment	<u>Other</u>	<u>Total</u>				
Portland Metro	#	45	208	429	102	20	804				
	%	6	26	53	13	2	100				
Mid-Willamette Valley	#	27	77	227	59	22	412				
	%	7	19	55	14	5	100				
Northwestern	#	7	8	27	5	1	48				
	%	15	17	56	10	2	100				
Southern	#	14	52	102	27	7	202				
	%	7	26	50	13	3	100				
Eastern	#	2	17	39	8	3	69				
	%	3	25	57	12	4	100				
Southwestern	#	1	7	25	8	1	42				
	%	2	17	60	19	2	100				
Central	#	5	42	83	25	7	162				
	%	3	26	51	15	4	100				

Chi-square value = 30.662 p<0.164

Table B-56. Greatest source of professional satisfaction by length of licensure

6. How long have you had a medical license in any state, including Oregon?

11. What is the greatest source of your professional satisfaction?

	Greatest source of professional satisfaction Intellectual Patient Practice										
Length of licensure Less than 2 years	#	Income 1	challenge 4	relationships 15	environment 5	Other 1	<u>Total</u> 26				
	%	4	15	58	19	4	100				
2–5 years	#	17	44	100	31	4	196				
	%	9	22	51	16	2	100				
6–10 years	# %	32 9	77 22	170 49	58 17	10 3	347 100				
	70	9	22	49	17	3	100				
11–20 years	# %	48 7	173 25	346 49	111	21 3	699 100				
	70	1	25	49	16	3	100				
More than 20 years	#	46	275	585	115	42	1063				
	%	4	26	55	11	4	100				

Chi-square value = 35.141 p<0.004

#### Table B-57. Greatest source of prfessional satisfaction by practice size

29. What is the size of your primary practice, that is, the practice in which you spend the most time?

11. What is the greatest source of your professional satisfaction?

	Greatest source of professional satisfaction								
			Intellectual	<u>Patient</u>	<u>Practice</u>				
Practice size		<u>Income</u>	<u>challenge</u>	relationships	environment	<u>Other</u>	<u>Total</u>		
Solo practice	#	36	115	330	58	22	561		
·	%	6	20	59	10	4	100		
Small group practice (2–4 physicians)	#	31	113	287	59	17	507		
	%	6	22	57	12	3	100		
Medium group practice (5–9 physicians)	#	27	118	231	67	7	450		
	%	6	26	51	15	2	100		
Large group practice (10 or more physicians)	#	49	220	359	126	31	785		
	%	6	28	46	16	4	100		

Chi-square value = 37.7770 p<0.0001

#### Table B-58. Greatest source of professional satisfaction by urban/rural

33b. Setting and ownership

11. What is the greatest source of your professional satisfaction?

			Greatest sour	ce of profession	nal satisfaction		
			Intellectual	Patient	Practice		
<u>Urban/rural region</u>		<u>Income</u>	<u>challenge</u>	relationships	environment	<u>Other</u>	<u>Total</u>
Rural	#	27	98	298	80	21	524
	%	5	19	57	15	4	100
Urban	#	78	376	682	169	45	1350
	%	6	28	51	13	3	100

Chi-square value = 18.303 p<0.001

Table B-59. Greatest source of professional satisfaction by practice setting

33b. Setting and ownership

11. What is the greatest source of your professional satisfaction?

	Greatest source of professional satisfaction									
			<u>Intellectual</u>	<u>Patient</u>	<u>Practice</u>					
Practice setting		<u>Income</u>	<u>challenge</u>	<u>relationships</u>	environment	<u>Other</u>	<u>Total</u>			
Hospital	#	65	300	436	165	37	1003			
	%	6	30	43	16	4	100			
Clinic, private, for profit		63	272	768	151	34	1288			
	%	5	21	60	12	3	100			
Clinic, private, not for profit	#	12	65	152	27	12	268			
	%	4	24	57	10	4	100			
Clinic, public	#	3	40	47	13	9	112			
	%	3	36	42	12	8	100			
Other	#	6	7	35	15	10	73			
	%	8	10	48	21	14	100			

Chi-square value = 000.00 p < 0.000

Table B-60. Greatest source of professional satisfaction by ownership of employment status

33c. Employment

11. What is the greatest source of your professional satisfaction?

		Greatest source of professional satisfaction								
			<u>Intellectual</u>	<u>Patient</u>	<u>Practice</u>					
Employment role		<u>Income</u>	<u>challenge</u>	<u>relationships</u>	environment	<u>Other</u>	<u>Total</u>			
Full or part owner of practice	#	65	250	616	159	27	1117			
	%	6	22	55	14	2	100			
Employee of practice or health system	#	35	188	337	91	22	673			
	%	5	28	50	14	3	100			
Independent contractor	#	14	35	43	25	9	126			
	%	11	28	34	20	7	100			
Volunteer	#	_	1	3	1	_	5			
	%	_	20	60	20	_	100			
Other	#	_	8	14	3	5	30			
	%		27	47	10	17	100			

Chi-square value = 000.00 p<0.000

Note: — indicates no responses in the category.

**Section 3. Acceptance of payers** 

Table B-61. Acceptance of payer type by physician specialty

<sup>15.</sup> For each of the payers listed below, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

	<u>Commercial</u>							<u>Medicare</u>					
			<u>Limit</u>						<u>Limit</u>				
Physician specialty		Accept all	<u>acceptance</u>	Accept none	<u>Total</u>	Physician specialty		Accept all	<u>acceptance</u>	Accept none	<u>Total</u>		
Primary care	#	764	186	29	979	Primary care	#	518	282	126	926		
	%	78	19	3	100		%	56	30	14	100		
Medical specialties	#	418	50	4	472	Medical specialties	#	418	36	8	462		
	%	89	11	1	100		%	90	8	2	100		
Curried energialties	ш	204	25	4	040	Curried an acialtica	ш	245	10	7	044		
Surgical specialties	#	204	35	4	243	Surgical specialties	#	215	19	7	241		
	%	84	14	2	100		%	89	8	3	100		
Hospital-based	#	311	10	1	322	Hospital-based	#	308	11	1	320		
	%	97	3	0	100		%	96	3	0	100		
Other	#	87	69	11	167	Other	#	61	38	53	152		
	%	52	41	7	100		%	40	25	35	100		

Chi-square value = 223.374 p<0.0001

Chi-square value = 463.178 p<0.0001

<sup>32.</sup> What is your primary specialty?

Table B-61. Acceptance of payer type by physician specialty

<sup>15.</sup> For each of the payers listed below, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

				aid FFS						anaged care	
Physician specialty		Accept all	<u>Limit</u> acceptance	Accept none	<u>Total</u>	Physician specialty		Accept all	<u>Limit</u> acceptance	Accept none	<u>Total</u>
Primary care	#	395	380	162	937	Primary care	#	381	356	193	930
	%	42	41	17	100		%	41	38	21	100
Medical specialties	#	333	89	35	457	Medical specialties	#	320	94	41	455
	%	73	19	8	100		%	70	21	9	100
Surgical specialties	#	160	53	22	235	Surgical specialties	#	153	46	33	232
	%	68	23	9	100	• .	%	66	20	14	100
Hospital-based	#	306	9	4	319	Hospital-based	#	303	8	6	317
·	%	96	3	1	100	·	%	96	3	2	100
Other	#	42	32	76	150	Other	#	48	33	73	154
	%	28	21	51	100		%	31	21	47	100
Chi-square value = 50	p<0.0001				Chi-square value = 44	16 008	p<0.0001				

<sup>32.</sup> What is your primary specialty?

Table B-61. Acceptance of payer type by physician specialty

<sup>15.</sup> For each of the payers listed below, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

			TRICARE/ Limit	CHAMPUS			<u>Worke</u> Limit	ers' comp			
Physician specialty		Accept all	acceptance	Accept none	Total	Physician specialty Accept		Accept none	Total		
Primary care	#	547	188	173	908	Primary care # 466	225	188	879		
	%	60	21	19	100	% 53	26	21	100		
Medical specialties	#	364	44	33	441	Medical specialties # 29 <sup>2</sup>		61	428		
	%	83	10	7	100	% 69	17	14	100		
Surgical specialties	#	168	22	40	230	Surgical specialties # 200	32	10	242		
	%	73	10	17	100	% 83	13	4	100		
Hospital-based	#	308	3	5	316	Hospital-based # 313	2	5	320		
	%	97	1	2	100	% 98	1	2	100		
Other	#	49	31	67	147	Other # 49	40	62	151		
	%	33	21	46	100	% 32	26	41	100		
Chi-square value =31	5.812	p<0.0001				Chi-square value = 335.461 p<0.00	01		879 100 428 100 242 100 320 100		

<sup>32.</sup> What is your primary specialty?

Table B-61. Acceptance of payer type by physician specialty

32. What is your primary specialty?

15. For each of the payers listed below, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

		<u>Uninsured</u>									
Physician specialty Primary care	# %	Accept all 551 58	Limit acceptance 341 36	Accept none 50 5	<u>Total</u> 942 100						
Medical specialties	#	341	98	14	453						
	%	75	22	3	100						
Surgical specialties	#	155	75	8	238						
	%	65	32	3	100						
Hospital-based	#	298	15	5	318						
	%	94	5	2	100						
Other	#	58 38	73 47	23 15	154 100						

Chi-square value = 19.789 p<0.345

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Table B-62. Acceptance of patients for each payer type by practice location

33b. Setting and ownership

15. For each of the payers listed beow, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

					Med	<u>licare</u>						
			<u>Limit</u>					266 79 32 377				
Practice location		Accept all	acceptance	Accept none	<u>Total</u>	Practice location		Accept all	<u>acceptance</u>	Accept none	<u>Total</u>	
Portland Metro	#	572	165	27	764	Portland Metro	#	497	148	93	738	
	%	75	22	4	100		%	67	20	13	100	
Mid-Willamette Valley	#	331	63	5	399	Mid-Willamette Valley	#	266	79	32	377	
	%	83	16	1	100		%	71	21	8	100	
Northwestern	#	40	5	1	46	Northwestern	#	38	5	3	46	
	%	87	11	2	100		%	83	11	7	100	
Southern	#	163	21	4	188	Southern	#	132	37	21	190	
	%	87	11	2	100		%	69	19	11	100	
Eastern	#	67	3	1	71	Eastern	#	57	8	5	70	
	%	94	4	1	100		%	81	11	7	100	
Southwestern	#	32	9	_	41	Southwestern	#	34	6	_	40	
	%	78	22	_	100		%	85	15	_	100	
Central	#	136	18	4	158	Central	#	113	28	10	151	
	%	86	11	3	100		%	75	19	7	100	

Chi-square value = 38.854 p<0.0001

Note:— indicates no responses in the category.

Chi-square value = 22.583 p<0.031

Note: — indicates no responses in the category.

Table B-62. Acceptance of patients for each payer type by practice location

33b. Setting and ownership

15. For each of the payers listed beow, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

			<u>Medica</u> Limit	aid FFS					Medicaid m Limit	anaged care	
Practice location		Accept all	acceptance	Accept none	<u>Total</u>	Practice location		Accept all	acceptance	Accept none	<u>Total</u>
Portland Metro	#	335	234	165	734	Portland Metro	#	332	219	178	729
	%	46	32	22	100		%	46	30	24	100
Mid-Willamette Valley	#	260	89	28	377	Mid-Willamette Valley	#	259	101	28	388
·	%	69	24	7	100	·	%	67	26	7	100
Northwestern	#	33	10	3	46	Northwestern	#	24	5	12	41
	%	72	22	7	100		%	59	12	29	100
Southern	#	97	62	26	185	Southern	#	99	52	32	183
	%	52	34	14	100		%	54	28	17	100
Eastern	#	55	11	4	70	Eastern	#	44	15	7	66
	%	79	16	6	100		%	67	23	11	100
Southwestern	#	27	8	3	38	Southwestern	#	27	4	7	38
	%	71	21	8	100		%	71	11	18	100
Central	#	97	36	20	153	Central	#	97	36	18	151
	%	63	24	13	100		%	64	24	12	100
Chi-square value = 99.	Chi-square value = 99.396 p<0.0001						821	p<0.0001			

Table B-62. Acceptance of patients for each payer type by practice location

33b. Setting and ownership

15. For each of the payers listed beow, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

			TRICARE/0	CHAMPUS					<u>Workers</u> Limit	s' comp	
Practice location		Accept all		Accept none	<u>Total</u>	Practice location		Accept all		Accept none	<u>Total</u>
Portland Metro	#	429	108	162	699	Portland Metro	#	409	143	141	693
	%	61	15	23	100		%	59	21	20	100
Mid-Willamette Valley	#	267	58	48	373	Mid-Willamette Valley	#	246	69	52	367
·	%	72	16	13	100	·	%	67	19	14	100
Northwestern	#	35	7	3	45	Northwestern	#	33	7	6	46
	%	78	16	7	100		%	72	15	13	100
Southern	#	128	30	25	183	Southern	#	104	44	33	181
	%	70	16	14	100		%	57	24	18	100
Eastern	#	55	8	5	68	Eastern	#	52	9	10	71
	%	81	12	7	100		%	73	13	14	100
Southwestern	#	30	9	2	41	Southwestern	#	26	8	5	39
	%	73	22	5	100		%	67	21	13	100
Central	#	123	17	14	154	Central	#	113	18	17	148
<del></del>	%	80	11	9	100	2 2	%	76	12	11	100
Chi square value = 51.9	015	n<0.0001				Chi eguaro valuo = 29	810	20,004			

Chi-square value = 51.815 p<0.0001

Chi-square value = 28.610 p < 0.004

Table B-62. Acceptance of patients for each payer type by practice location

33b. Setting and ownership

15. For each of the payers listed beow, please indicate whether your office accepts all, limits acceptance, or accepts none of the following payers.

			<u>Unins</u>	<u>sured</u>	
			<u>Limit</u>		
Practice location		Accept all	<u>acceptance</u>	Accept none	<u>Total</u>
Portland Metro	#	427	248	51	726
	%	59	34	7	100
Mid-Willamette Valley	#	273	102	11	386
•	%	71	26	3	100
Northwestern	#	34	12	_	46
	%	74	26	_	100
Southern	#	125	51	9	185
	%	68	28	5	100
Eastern	#	57	12	1	70
	%	81	17	1	100
Southwestern	#	29	12	_	41
	%	71	29	_	100
Central	#	120	31	5	156
	%	77	20	3	100

Chi-square value = 45.858 p<0.0001

Note: — indicates no responses in the category.

# Section 4. Specialty care

#### Table B-63. Distribution of physicians who currently deliver babies (N=226)

- 38. If you have practiced, or currently practice maternity care, are you currently delivering babies?
- 1. What is your gender?
- 33b. Setting and ownership
- 32. What is your primary specialty?
- 6. How long have you had a medical license in any state, including Oregon?

#	%
121	54
105	46
109	48
117	52
83	46
37	20
5	3
14	8
14	8
7	4
22	12
4	2
100	44
121	54
1	0
10	4
40	18
49	22
65	29
62	27
	121 105 109 117 83 37 5 14 14 7 22 4 100 121 1

Table B-64. Maternity care procedures performed by practice location

33b. Setting and ownership

38b. Does your maternity care practice include the following procedures?

			regnancies veries Do not		<u>VB</u>	AC Do not			ries for d women Do not	
Practice location		Perform	perform	<u>Total</u>	Perform	perform	Total	Perform	perform	Total
Portland Metro	#	52	24	76	53	20	73	63	5	68
. Grading Mode	%	68	32	100	73	27	100	93	7	100
Mid-Willamette Valley	#	29	7	36	18	15	33	34	_	34
•	%	81	19	100	55	45	100	100	_	100
Northwestern	#	1	3	4	1	3	4	2	1	3
	%	25	75	100	25	75	100	67	33	100
Southern	#	11		11	4	8	12	12	_	12
	%	100		100	33	67	100	100		100
Eastern	#	11	1	12	2	11	13	12	_	12
	%	92	8	100	15	85	100	100	_	100
Southwestern	#	5	2	7	4	3	7	6	1	7
	%	71	29	100	57	43	100	86	14	100
Central	# %	18 78	5 22	23 100	4 18	18 82	22 100	23 100	_	23 100

Note: – indicates no responses in the category.

Chi-square value = 13.354 p<0.038

Chi-square value = 32.494 p<1.312 Chi-square value = 12.727 p<0.048

Table B-64. Maternity care procedures performed by practice location

33b. Setting and ownership

38b. Does your maternity care practice include the following procedures?

					Perform cesarean			
		<u>Assi</u>	st in_		section	ns as		
		cesarean	sections		primary surgeon			
			Do not			Do not		
Practice location		<u>Perform</u>	<u>perform</u>	<u>Total</u>	<u>Perform</u>	<u>perform</u>	<u>Total</u>	
Portland Metro	#	61	6	67	43	24	67	
	%	91	9	100	64	36	100	
Mid-Willamette Valley	#	35	_	35	26	9	35	
	%	100	_	100	74	26	100	
Northwestern	#	1	2	3	1	2	3	
	%	33	67	100	33	67	100	
Southern	#	11	1	12	9	3	12	
	%	92	8	100	75	25	100	
Eastern	#	13	_	13	9	_	9	
	%	100	_	100	100	_	100	
Southwestern	#	6	1	7	6	1	7	
	%	86	14	100	86	14	100	
Central	#	23	_	23	12	10	22	
	%	100	_	100	55	45	100	

Note: – indicates no responses in the category.

Chi-square value = 25.119 p<0.001

Chi-square value = 10.142 p<0.119

Table B-65. Maternity care procedures performed by gender

1. What is your gender?

38b. Does your maternity care practice include the following procedures?

		High-risk pr	egnancies				<u>Deliveries for</u>				
		or deliv	<u>veries</u>		<u>VBAC</u> <u>Medicaid women</u>				women		
			Do not			Do not			Do not		
<u>Gender</u>		Perform	<u>perform</u>	<u>Total</u>	Perform	perform	<u>Total</u>	<u>Perform</u>	<u>perform</u>	<u>Total</u>	
Female	#	76	23	99	56	43	99	98	2	100	
	%	77	23	100	57	43	100	98	2	100	
Male	#	82	32	114	52	56	108	94	9	103	
	%	72	28	100	48	52	100	91	9	100	

Chi-square value = 0.647 p<0.421

Chi-square value = 1.467 p<0.226

Chi-square value = 4.495 p<0.034

		Assis	st in_		Perform cesarean				
			Do not		Do not				
<u>Gender</u>		<u>Perform</u>	<u>perform</u>	<u>Total</u>	Perform	<u>perform</u>	<u>Total</u>		
Female	#	93	6	99	59	38	97		
	%	94	6	100	61	39	100		
Male	#	89	14	103	69	31	100		
	%	86	14	100	69	31	100		

Chi-square value = 3.220 p<0.073

Chi-square value = 1.446 p<0.229

Table B-66. Maternity care procedures performed by length of licensure

6. How long have you had a medical license in any state, including Oregon?38b. Does your maternity care practice include the following procedures?

		High-risk p	regnancies		<u>Deliveries for</u>						
		or del	<u>iveries</u>		VB	<u>AC</u>		Medicaio	<u>women</u>		
			Do not			Do not		<u>Do not</u>			
Length of licensure		<u>Perform</u>	perform	<u>Total</u>	<u>Perform</u>	perform	Total	<u>Perform</u>	<u>perform</u>	<u>Total</u>	
Less than											
2 years	#	6	4	10	5	5	10	10		10	
	%	60	40	100	50	50	100	100	_	100	
2–5 years	#	25	12	37	14	23	37	35	2	37	
•	%	68	32	100	38	62	100	95	5	100	
6–10 years	#	34	9	43	24	20	44	42	1	43	
	%	79	21	100	55	45	100	98	2	100	
11–20 years	#	49	13	62	32	27	59	56	3	59	
	%	79	21	100	54	46	100	95	5	100	
More than 20 years	#	44	17	61	33	24	57	49	5	54	
	%	72	28	100	58	42	100	91	9	100	
Note: – indicates no respo											
Chi-square value = 3.327	p<0.50	5			Chi-square v	/alue = 4.014	p<0.404	Chi-square value = 2.943 p<0.567			

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Table B-66. Maternity care procedures performed by length of licensure

6. How long have you had a medical license in any state, including Oregon?38b. Does your maternity care practice include the following procedures?

		<u>Assi</u>	<u>ist in</u>		Perform cesarean				
			Do not		<u>Do not</u>				
Length of licensure		<u>Perform</u>	<u>perform</u>	<u>Total</u>	<u>Perform</u>	<u>perform</u>	<u>Total</u>		
Less than									
2 years	#	9	_	9	4	6	10		
	%	100	_	100	40	60	100		
2–5 years	#	34	3	37	15	21	36		
	%	92	8	100	42	58	100		
6–10 years	#	39	4	43	29	13	42		
	%	91	9	100	69	31	100		
11–20 years	#	53	6	59	41	17	58		
	%	90	10	100	71	29	100		
More than 20 years	#	47	7	54	39	12	51		
·	%	87	13	100	76	24	100		

Note: – indicates no responses in the category.

Chi-square value = 1.712 p<0.789

Chi-square value = 15.435 p<0.004

#### Table B-67. Maternity care procedures performed by ob/gyn licensure

- 38. If you have practiced, or currently practice maternity care, are you currently delivering babies?
- 32. What is your primary specialty?
- 38b. Does your maternity care practice include the following procedures?

		High-risk n	regnancies			Deliveries for					
			iveries		VB	AC			d women		
		01 001	Do not		<u></u>	Do not		<u> </u>	Do not		
Ob/gyn licensure		Perform	perform	Total	Perform	perform	Total	Perform	perform	Total	
Not ob/gyn	#	54	43	97	32	64	96	94	4	98	
	%	56	44	100	33	67	100	96	4	100	
Ob/gyn	#	103	10	113	76	32	108	97	5	102	
3,	%	91	9	100	70	30	100	95	5	100	
Chi-square value = 34.823 p<0.0001					Chi-square va	lue = 27.984	p<0.0001	Chi-square va	lue = .078 p<	0.780	
		Ass	ist in		Perform	<u>cesarean</u>					
			Do not			Do not					
Ob/gyn licensure		Perform	<u>perform</u>	<u>Total</u>	<u>Perform</u>	<u>perform</u>	<u>Total</u>				
Not ob/gyn	#	88	11	99	28	66	94				
	%	89	11	100	30	70	100				
Ob/gyn	#	93	7	100	99	1	100				
<del></del>	%	93	7	100	99	1	100				

Chi-square value = 102.665 p<0.0001

Chi-square value = 1.022 p<0.312

#### Table B-68. Distribution of physicians who are not currently delivering babies

38. If you have practiced, or currently practice maternity care, are you currently delivering babies?

- 32. What is your primary specialty?
- 38d. How long ago did you stop delivering babies?

Length of licensure (N=306)	#	%
Less than 2 years	2	1
2-5 years	20	7
6–10 years	43	14
11–20 years	78	25
More than 20 years	163	53
Region (N=234)		
Portland Metro	78	33
Mid-Willamette Valley	66	28
Northwestern	9	4
Southern	30	13
Eastern	14	6
Southwestern	7	3
Central	30	13
Gender (N=306)		
Female	89	29
Male	217	71

#### Table B-69. Time since stopping delivery of babies by ob/gyn licensure (N=303\*)

38. If you have practiced, or currently practice maternity care, are you currently delivering babies?

- 32. What is your primary specialty?
- 38d. How long ago did you stop delivering babies?

360. How long ago did y	/ou รเอ	p delivering b	ables?	
		Within the	1 to 2	More than 2
Ob/gyn licensure		last year	years ago	years ago
Licensed ob/gyn	#	3	8	28
	%	1	3	9
Not a licensed ob/gyn	#	21	39	204
	%	7	13	67

<sup>\*</sup>Does not include four ob/gyns who indicated that they do <u>not</u> currently deliver babies but did not specify when they stopped. Responses of the four ob/gyns are included in other anlyses of maternity care questions because the four respondents are trained maternity care providers.

## Table B-70. Reasons for stopping delivery of babies by ob/gyn licensure

- 38. If you have practiced, or currently practice maternity care, are you currently delivering babies?
- 32. What is your primary specialty?
- 38e. Please rate the importance of each of the following factors in your decision to stop delivering babies.

		Lack o	of backup cove		Time demands/personal life						
Ob/gyn		<u>Very</u> <u>important</u>	Somewhat important	Not important	<u>Total</u>	Ob/gyn		<u>Very</u> important	Somewhat important	<u>Not</u> important	<u>Total</u>
ob/gym	#	1	6	13	20	00/9/11	#	19	12	5	36
	%	5	30	65	100		%	53	33	14	100
Non-ob/gyn	#	36	27	73	136	Non-ob/gyn	#	116	56	29	201
11011 05/9/11	%	26	20	54	100	11011 02/9711	%	58	28	14	100
			Medical liabil	ity premiums					Experience w	vith lawsuits	
		<u>Very</u>	Somewhat	<u>Not</u>				<u>Very</u>	Somewhat	<u>Not</u>	
		<u>important</u>	<u>important</u>	<u>important</u>	<u>Total</u>			<u>important</u>	<u>important</u>	important	<u>Total</u>
Ob/gyn	#	26	5	4	35	Ob/gyn	#	11	8	10	29
	%	74	14	11	100		%	38	28	34	100
Non-ob/gyn	#	133	50	19	202	Non-ob/gyn	#	24	24	55	103
	%	66	25	9	100		%	23	23	53	100

## Table B-70. Reasons for stopping delivery of babies by ob/gyn licensure

- 38. If you have practiced, or currently practice maternity care, are you currently delivering babies?
- 32. What is your primary specialty?
- 38e. Please rate the importance of each of the following factors in your decision to stop delivering babies.

		·	Lack of	, ,		Low level of reimbursement					
		<u>Very</u> important	Somewhat important	Not important	<u>Total</u>			<u>Very</u> important	Somewhat important	Not important	<u>Total</u>
Ob/gyn	# %	1		16 94	17 100	Ob/gyn	# %	7 23	14 45	10 32	31 100
Non-ob/gyn	# %	17 12	35 25	90 63	142 100	Non-ob/gyn	# %	19 11	56 32	98 57	173 100
			Lack of	<u>interest</u>				Hospital privilege issues			
		<u>Very</u> <u>important</u>	Somewhat important	Not important	<u>Total</u>			<u>Very</u> important	Somewhat important	Not important	<u>Total</u>
Ob/gyn	# %	6 24	5 20	14 56	25 100	Ob/gyn	# %	1 7	1 7	12 86	14 100
Non-ob/gyn	# %	20 13	32 20	107 67	159 100	Non-ob/gyn	# %	15 10	25 17	104 72	144 100

# Section 5. Liability insurance

## Table B-71. Liability premium amount paid by ob/gyn licensure

- 38. If you have practiced, or currently practice maternity care, are you currently delivering babies?
- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

#### Liability premium amount

		Less than	\$5,000-	\$10,000-	More than				
Ob/gyn status		\$5,000	\$10,000	\$20,000	\$20,000	<u>Total</u>	<u>Median</u>	<u>Minimum</u>	<u>Maximum</u>
Ob/gyn	#	1	8	11	89	109	38,000	3,000	250,000
	%	1	7	10	82	100			
Not ob/gyn	#	27	55	48	23	153	10,000	1,000	145,000
	%	18	36	31	15	100			

#### Table B-72. Liability premium amount paid by physician specialty

- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

			Liab	ility premium	<u>amount</u>				
		Less than	<u>\$5,000–</u>	<u>\$10,000</u>	More than				
Physician specialty		\$5,000	\$10,000	\$20,000	\$20,000	<u>Total</u>	<u>Median</u>	<u>Minimum</u>	<u>Maximum</u>
Primary care	#	68	177	109	116	470	10,000	500	250,000
	%	14	38	23	25	100			
Medical specialties	#	58	97	81	35	271	10,000	450	80,000
	%	21	36	30	13	100			
Surgical specialties	#	11	9	25	146	191	30,000	2,000	147,000
	%	6	5	13	76	100			
Hospital-based	#	9	36	93	30	168	14,000	2,000	135,000
	%	5	21	55	18	100			
Other	#	64	36	5	2	107	4,500	1,000	60,000
	%	60	34	5	2	100			

Table B-73. Liability premium amount paid by hospital status

- 33b. Setting and ownership
- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

			<u>Liab</u>	ility premium	<u>amount</u>				
		Less than	<u>\$5,000</u> –	\$10,000 <u></u>	More than				
Hospital status		\$5,000	\$10,000	\$20,000	\$20,000	<u>Total</u>	Median	<u>Minimum</u>	<u>Maximum</u>
Hospital-based,									
emergency medicine	#	3	4	24	12	43	16,000	2,000	40,000
	%	7	9	56	28	100	•	•	·
Hospital-based,									
not emergency medicine	#	6	32	69	18	125	12,500	2,000	135,000
	%	5	26	55	14	100			
Not hospital-based	#	201	319	220	299	1,039	10,000	450	250,000
	%	19	31	21	29	100			

#### Table B-74. Liability premium amount paid by neurosurgery licensure

- 37. If you are a neurosurgeon, are you currently performing brain surgery and are you currently performing spine surgery?
- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

<u>Liability premium amount</u>										
		Less than	\$5,000-	\$10,000-	More than					
Neurosurgery licensure		\$5,00 <u>0</u>	\$10,000	\$20,000	\$20,000	<u>Total</u>	<u>Median</u>	<u>Minimum</u>	<u>Maximum</u>	
Neurosurgeon	#			1	16	17	54,000	15,000	147,000	
	%			6	94	100				
Not neurosurgeon	# %	210 18	355 30	312 26	313 26	1,190 100				
	/0	10	30	20	20	100				

### Table B-75. Liability premium amount paid by pediatric specialty licensure

- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

			<u>Liab</u>	ility premium	<u>amount</u>				
		Less than	\$5,000-	\$10,000-	More than				
Pediatric specialty licensure		\$5,000	\$10,000	\$20,000	\$20,000	<u>Total</u>	Median	<u>Minimum</u>	<u>Maximum</u>
Pediatric	#	33	33	23	6	95	7,320	1,000	176,704
	%	35	35	24	6	100			
Chi-square value = 19.789									
p<0.345	#	177	322	290	323	1,112	12,000	450	250,000
	%	16	29	26	29	100			

#### Table B-76. Liability premium amount paid by high-risk specialty licensure

- 32. What is your primary specialty?
- 44. What is the annual premium amount for professional liability insurance that you are paying today?

<u>Liability premium amount</u>									
		Less than	\$5,000-	\$10,000-	More than				
High-risk specialty licensure		\$5,000	\$10,000	\$20,000	\$20,000	<u>Total</u>	<u>Median</u>	<u>Minimum</u>	<u>Maximum</u>
High-risk specialty	#	6	15	31	207	259	32,000	2,000	250,000
	%	2	6	12	80	100			
Not high-risk specialty	#	203	340	282	122	947	10,000	450	176,704
	%	21	36	30	13	100			

Table B-77. Actions regarding concerns about the cost or availability of liability insurance coverage

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

#### Percentage taking or anticipating action

				<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	Nothing	
<u>Action</u>		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Stop all direct patient care	#	21	53	253	2,122	2,449
	%	1	2	10	87	100
Stop services to specific groups	#	180	93	406	1,701	2,380
	%	8	4	17	71	100
Stop providing certain services	#	209	103	335	1,757	2,404
	%	9	4	14	73	100
Start providing certain services	#	31	34	121	2,133	2,319
	%	1	1	5	92	100
Reduce patient care hours	#	126	113	401	1,794	2,434
	%	5	5	16	74	100
Increase referral of complex cases	#	267	282	466	1,434	2,449
	%	11	12	19	59	100
Relocate practice within state	#	19	35	172	2,213	2,439
	%	1	1	7	91	100
Close or sell practice	#	31	61	259	2,093	2,444
	%	1	2	11	86	100
Retire	#	17	117	422	1,908	2,464
	%	1	5	17	77	100
Increase diagnostic procedures performed	#	197	151	311	1,779	2,438
	%	8	6	13	73	100

Table B-78. Actions regarding liability by physician specialty

32. What is your primary specialty?

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following

		<u>S</u>	top all dire	ct patient ca	<u>are</u>				Stop s	services to s	specific grou	ups	
				<u>May</u>							May		
		Already	<b>Definitely</b>	consider	Nothing				Already	<b>Definitely</b>	consider	<u>Nothing</u>	
Physician specialty		have done	will do	doing	anticipated	<u>Total</u>	Physician specialty		have done	will do	doing	anticipated	<u>Total</u>
Primary care	#	11	19	109	943	1,082	Primary care	#	98	39	179	740	1,056
	%	1	2	10	87	100		%	9	4	17	70	100
Medical specialties	#	3	9	48	458	518	Medical specialties	#	23	15	108	355	501
	%	1	2	9	88	100		%	5	3	22	71	100
Surgical specialties	#	2	11	39	203	255	Surgical specialties	#	32	24	63	130	249
	%	1	4	15	80	100		%	13	10	25	52	100
Hospital-based	#	2	8	41	335	386	Hospital-based	#	6	4	41	317	368
	%	1	2	11	87	100		%	2	1	11	86	100
Other	#	3	6	15	168	192	Other	#	20	11	14	145	190
	%	2	3	8	88	100		%	11	6	7	76	100

Chi-square value = 19.514 p<0.077

Chi-square value = 128.293 p<0.0001

		Sto	p providing	certain ser	vices				Start	providing ce	ertain servio May	<u>ces</u>	
		<u>Already</u>	Definitely	consider	Nothing				Already	Definitely	consider	Nothing	
Physician specialty		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Physician specialty		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Primary care	#	111	46	141	754	1,052	Primary care	#	15	16	58	928	1,017
	%	11	4	13	72	100		%	1	2	6	91	100
Medical specialties	#	27	16	65	405	513	Medical specialties	#	5	6	29	463	503
·	%	5	3	13	79	100		%	1	1	6	92	100
Surgical specialties	#	40	24	56	131	251	Surgical specialties	#	4	4	12	212	232
	%	16	10	22	52	100		%	2	2	5	91	100
Hospital-based	#	17	9	56	298	380	Hospital-based	#	3	4	16	341	364
·	%	4	2	15	78	100	·	%	1	1	4	94	100
Other	#	12	8	14	158	192	Other	#	4	3	6	174	187
	%	6	4	7	82	100		%	2	2	3	93	100
Obi a management of		750 0004						0 000	0 044				

Chi-square value = 97.675 p<0.0001

Chi-square value = 6.096 p<0.911

Table B-78. Actions regarding liability by physician specialty

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following

		<u> </u>	Reduce patie	ent care hou	<u>ırs</u>				Increas	e referral of	complex ca	ases	
				<u>May</u>							<u>May</u>		
		<u>Already</u>	<b>Definitely</b>	consider	<u>Nothing</u>				<u>Already</u>	<b>Definitely</b>	consider	<u>Nothing</u>	
Physician specialty		have done	will do	doing	anticipated	<u>Total</u>	Physician specialty		have done	will do	doing	anticipated	<u>Total</u>
Primary care	#	47	45	172	807	1,071	Primary care	#	132	141	234	575	1,082
	%	4	4	16	75	100		%	12	13	22	53	100
Medical specialties	#	26	16	78	398	518	Medical specialties	#	42	40	93	343	518
	%	5	3	15	77	100		%	8	8	18	66	100
Surgical specialties	#	22	23	56	152	253	Surgical specialties	#	51	61	48	99	259
	%	9	9	22	60	100		%	20	24	19	38	100
Hospital-based	#	13	21	64	284	382	Hospital-based	#	28	26	61	269	384
	%	3	5	17	74	100		%	7	7	16	70	100
Other	#	17	8	28	141	194	Other	#	13	12	26	139	190
	%	9	4	14	73	100		%	7	6	14	73	100

Chi-square value = 42.742 p<0.0001

Chi-square value = 137.838 p<0.0001

		Re	locate prac	tice within s	<u>tate</u>				Reloca	te practice t	o another s	<u>tate</u>	
				<u>May</u>							<u>May</u>		
		Already	<b>Definitely</b>	consider	Nothing				Already	<b>Definitely</b>	consider	Nothing	
Physician specialty		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Physician specialty		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Primary care	#	8	8	74	989	1,079	Primary care	#	5	21	119	937	1,082
	%	1	1	7	92	100		%	0	2	11	87	100
Medical specialties	#	3	9	31	473	516	Medical specialties	#	4	7	56	452	519
	%	1	2	6	92	100		%	1	1	11	87	100
Surgical specialties	#	4	9	18	226	257	Surgical specialties	<b>#</b>	3	10	56	186	255
	%	2	4	7	88	100		%	1	4	22	73	100
Hospital-based	#	3	6	33	338	380	Hospital-based	#	3	10	57	315	385
	%	1	2	9	89	100		%	1	3	15	82	100
Other	#	1	3	15	172	191	Other	#	4	3	19	168	194
	%	1	2	8	90	100		%	2	2	10	87	100

Chi-square value = 17.009 p<0.149

Chi-square value = 41.714 p<0.0001

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<sup>32.</sup> What is your primary specialty?

Table B-78. Actions regarding liability by physician specialty

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following

Chi-square value = 1	9.78	i(	Close or s	ell practice						Retir	<u>e</u>		
				<u>May</u>							<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>				<u>Already</u>	<u>Definitely</u>	consider	Nothing	
		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Physician specialty		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Primary care	#	12	25	114	930	1,081	Primary care	#	4	39	175	870	1,088
	%	1	2	11	86	100		%	0	4	16	80	100
Medical specialties	#	7	10	50	450	517	Medical specialties	#	7	23	81	411	522
	%	1	2	10	87	100		%	1	4	16	79	100
Surgical specialties	#	7	11	49	188	255	Surgical specialties	#	4	27	71	159	261
	%	3	4	19	74	100		%	2	10	27	61	100
Hospital-based	#	4	9	28	343	384	Hospital-based	#	_	17	66	301	384
	%	1	2	7	89	100		%	_	4	17	78	100
Other	#	1	5	17	168	191	Other	#	2	9	27	155	193
	%	1	3	9	88	100		%	1	5	14	80	100

Chi-square value = 37.641 p<0.0001

Chi-square value = 59.673 p<0.0001

		Increase	diagnostic		performed	
				<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>	
Physician specialty		have done	will do	doing	anticipated	<u>Total</u>
Primary care	#	83	73	156	765	1,077
	%	8	7	14	71	100
Medical specialties	#	33	28	61	396	518
Medical specialities	<del>"</del>	6	5	12	76	100
	/0	O	3	12	70	100
Surgical specialties	#	39	20	41	155	255
	%	15	8	16	61	100
Hospital-based	#	33	23	41	285	382
i iospitai-baseu	<del>"</del> %				75	
	70	9	6	11	75	100
Other	#	6	6	10	168	190

3

5

88

100

Chi-square value = 57.257 p<0.0001

<sup>32.</sup> What is your primary specialty?

Table B-79. Actions regarding liability by physician licensure

32. What is your primary specialty?

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

		<u>s</u>	Stop all direc	•	<u>re</u>				Stop s	ervices to sp		<u>os</u>	
		Already	Definitely	May consider	Nothing				Already	Definitely	May consider	Nothing	
Length of licensure		have done	will do	doing	anticipated	<u>Total</u>	Length of licensure		have done	will do	doing	<u>anticipated</u>	Total
Less than 2 years	#	_	-	2	44	46	Less than 2 years	#	2	1	5	37	45
	%	-	-	4	96	100		%	4	2	11	82	100
2–5 years	#	_	2	15	207	224	2–5 years	#	13	4	46	158	221
	%	-	1	7	92	100		%	6	2	21	71	100
6–10 years	#	2	4	39	320	365	6–10 years	#	26	18	64	246	354
0—10 years	<del>"</del>	_	1	11	88	100	0=10 years	# %	7	5	18	69	100
	70		•		00	100		70	,	J	10	00	100
11–20 years	#	4	10	76	622	712	11–20 years	#	51	32	133	480	696
	%	1	1	11	87	100		%	7	5	19	69	100
More than 20 years	#	14	37	120	924	1,095	More than 20 years	#	87	38	157	777	1,059
, ,	%	1	3	11	84	100		%	8	4	15	73	100

Note: — indicates no responses in the category.

Chi-square value = 26.884 p<0.008

Chi-square value = 17.121 p<0.145

		Sto	p providing	certain serv	rices				Start p	providing cer	tain service	<u>s</u>	
				<u>May</u>							May		
		<u>Already</u>	<u>Definitely</u>	<u>consider</u>	<u>Nothing</u>				<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>	
Length of licensure		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Length of licensure		have done	will do	<u>doing</u>	<u>anticipated</u>	Total
Less than 2 years	#	1	3	3	39	46	Less than 2 years	#	_	2	2	42	46
	%	2	7	7	85	100		%	-	4	4	91	100
2–5 years	#	12	10	37	160	219	2-5 years	#	2	3	15	192	212
	%	5	5	17	73	100		%	1	1	7	91	100
6–10 years	#	31	17	60	248	356	6-10 years	#	4	7	20	308	339
•	%	9	5	17	70	100	•	%	1	2	6	91	100
11–20 years	#	46	28	110	518	702	11–20 years	#	8	12	40	617	677
,	%	7	4	16	74	100	,	%	1	2	6	91	100
More than 20 years	#	118	45	124	788	1,075	More than 20 years	#	17	10	43	968	1,038
	%		4	12	73	100	7	%	2	1	4	93	100

Chi-square value = 28.793 p<0.004

Note: — indicates no responses in the category. Chi-square value = 12.428 p<0.412

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#### Table B-79. Actions regarding liability by physician licensure

32. What is your primary specialty?

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

		<u> </u>	Reduce patie	nt care hou	<u>rs</u>				Increase	e referral of o	complex cas	es	
				<u>May</u>							<u>May</u>		
		Already	Definitely	consider	Nothing				Already	Definitely	consider	Nothing	
Length of licensure		have done	will do	doing	anticipated	<u>Total</u>	Length of licensure		have done	will do	doing	anticipated	<b>Total</b>
Less than 2 years	#	_	1	7	38	46	Less than 2 years	#	_	6	5	35	46
	%	_	2	15	83	100		%	_	13	11	76	100
2–5 years	#	3	8	35	179	225	2–5 years	#	17	24	57	128	226
	%	1	4	16	80	100		%	8	11	25	57	100
6–10 years	#	9	13	59	282	363	6-10 years	#	40	38	78	205	361
	%	2	4	16	78	100		%	11	11	22	57	100
11–20 years	#	30	26	126	526	708	11–20 years	#	71	69	143	432	715
	%	4	4	18	74	100		%	10	10	20	60	100
More than 20 years	#	83	65	172	765	1,085	More than 20 years	#	139	144	182	629	1,094
•	%	8	6	16	71	100	•	%	13	13	17	57	100

Note: — indicates no responses in the category. Chi-square value = 40.819 p<0.0001

Note: — indicates no responses in the category. Chi-square value = 30.989 p<0.002

		Re	elocate pract		<u>ate</u>				Relocat	e practice to		ate_	
Length of licensure Less than 2 years	#	Already have done –	Definitely will do 1	May consider doing 4	Nothing anticipated 41	<u>Total</u> 46	<u>Length of licensure</u> Less than 2 years	#	Already have done –	Definitely will do 1	May consider doing 3	Nothing anticipated 42	<u>Total</u> 46
	%	-	2	9	89	100		%	-	2	7	91	100
2–5 years	# %	3 1	9 4	22 10	192 85	226 100	2–5 years	# %	2 1	9 4	41 18	175 77	227 100
6–10 years	# %	2 1	6 2	33 9	322 89	363 100	6–10 years	# %	3 1	13 4	59 16	290 79	365 100
11–20 years	# %	6 1	6 1	61 9	637 90	710 100	11–20 years	# %	7 1	9 1	121 17	577 81	714 100
Chi-square value = 19.789 p<0.345	# %	8 1	13 1	52 5	1,014 93	1,087 100	More than 20 years	# %	7 1	20 2	84 8	981 90	1,092 100

Note: — indicates no responses in the category. Chi-square value = 30.930 p<0.002

Note: — indicates no responses in the category. Chi-square value = 60.772 p<0.0001

#### Table B-79. Actions regarding liability by physician licensure

32. What is your primary specialty?

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

			Close or se	ell practice						Retire			
				<u>May</u>							May		
		Already	Definitely	consider	Nothing				Already	Definitely	consider	Nothing	
Length of licensure		have done	will do	doing	<u>anticipated</u>	<u>Total</u>	Length of licensure		have done	will do	doing	<u>anticipated</u>	Total
Less than 2 years	#	_	1	1	44	46	Less than 2 years	#	_	_	1	45	46
	%	_	2	2	96	100		%	_	-	2	98	100
2–5 years	#	2	4	16	201	223	2-5 years	#	_	3	11	212	226
	%	1	2	7	90	100		%	-	1	5	94	100
6–10 years	#	_	9	33	322	364	6–10 years	#	_	4	30	328	362
	%	-	2	9	88	100		%	-	1	8	91	100
	#												
11–20 years	#	7	9	84	614	714	11–20 years	#	2	14	97	601	714
	%	1	1	12	86	100		%	0	2	14	84	100
More than 20 years	#	22	38	124	906	1,090	More than 20 years	#	15	96	280	718	1,109
	%	2	3	11	83	100		%	1	9	25	65	100

Note: — indicates no responses in the category. Chi-square value = 29.917 p<0.003

Increase diagnostic procedures performed

				May		
		Already	Definitely	consider	Nothing	
Length of licensure		have done	will do	doing	<u>anticipated</u>	Total
Less than 2 years	#	2	4	7	33	46
	%	4	9	15	72	100
2–5 years	#	17	11	34	162	224
	%	8	5	15	72	100
6–10 years	#	34	24	53	249	360
	%	9	7	15	69	100
11–20 years	#	54	47	103	508	712
	%	8	7	14	71	100
More than 20 years	#	89	65	113	822	1,089
,	%	8	6	10	75	100

Chi-square value = 14.129 p<0.293

Note: — indicates no responses in the category. Chi-square value = 214.471 p<0.0001

Table B-80. Actions regarding liability by practice location

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

		<u>s</u>	Stop all direc	ct patient ca	<u>re</u>				Stop	services to s	pecific grou	<u>ıps</u>	
Practice location Portland Metro	#	Already have done 6 1	Definitely will do 20 2	consider doing 83 10	Nothing anticipated 740 87	<u>Total</u> 849 100	Practice location Portland Metro	#	Already have done 71 9	Definitely will do 36 4	consider doing 140 17	Nothing anticipated 578	<u>Total</u> 825 100
Mid-Willamette Valley	# %	1 0	12 3	41 10	363 87	417 100	Mid-Willamette Valley	# %	17 4	12 3	68 17	301 76	398 100
Northwestern	# %	_ _	2 4	9 20	35 76	46 100	Northwestern	# %	5 11	5 11	7 15	30 64	47 100
Southern	# %	2 1	4 2	23 11	174 86	203 100	Southern	# %	16 8	10 5	37 19	135 68	198 100
Eastern	# %	<u> </u>	2 3	9 12	62 85	73 100	Eastern	# %	8 11	6 8	13 18	45 63	72 100
Southwestern	# %	<u> </u>	<u>-</u>	5 13	35 88	40 100	Southwestern	# %	4 10	2 5	9 22	26 63	41 100
Central	# %	2 1	3 2	19 11	142 86	166 100	Central	# %	12 7	8 5	38 23	107 65	165 100

Note: — indicates no responses in the category.

Chi-square value = 11.512 p<0.871

Chi-square value = 24.636 p<0.135

<sup>32.</sup> What is your primary specialty?

Table B-80. Actions regarding liability by practice location

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

	Sto	p providing	certain serv	ices_		Start providing certain services							
				<u>May</u>							<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	Nothing				<u>Already</u>	<b>Definitely</b>	consider	<u>Nothing</u>	
Practice location		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Practice location		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	63	40	111	616	830	Portland Metro	#	14	14	46	728	802
	%	8	5	13	74	100		%	2	2	6	91	100
Mid-Willamette Valley	#	42	16	60	288	406	Mid-Willamette Valley	#	5	5	17	373	400
	%	10	4	15	71	100		%	1	1	4	93	100
Northwestern	#	7	2	5	32	46	Northwestern	#	1	2	3	37	43
	%	15	4	11	70	100		%	2	5	7	86	100
Southern	#	28	8	28	137	201	Southern	#	4	3	6	179	192
	%	14	4	14	68	100		%	2	2	3	93	100
Eastern	#	8	3	18	44	73	Eastern	#	_	1	7	63	71
	%	11	4	25	60	100		%	-	1	10	89	100
Southwestern	#	5	5	6	26	42	Southwestern	#	_	_	1	39	40
	%	12	12	14	62	100		%	_	-	3	98	100
Central	#	14	15	25	111	165	Central	#	1	2	8	144	155
	%	8	9	15	67	100		%	1	1	5	93	100

Chi-square value = 30.735 p<0.031

Note: — indicates no responses in the category. Chi-square value = 14.469 p<0.698

<sup>32.</sup> What is your primary specialty?

Table B-80. Actions regarding liability by practice location

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

		<u>F</u>	Reduce patie	nt care hou	<u>'S</u>	Increase referral of complex cases							
				<u>May</u>							<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>				<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>	
Practice location		have done	<u>will do</u>	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Practice location		<u>have done</u>	<u>will do</u>	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	47	40	133	624	844	Portland Metro	#	81	100	148	515	844
	%	6	5	16	74	100		%	10	12	18	61	100
Mid-Willamette Valley	#	18	17	64	314	413	Mid-Willamette Valley	#	52	52	96	219	419
	%	4	4	15	76	100		%	12	12	23	52	100
Northwestern	#	4	2	10	30	46	Northwestern	#	10	9	9	19	47
	%	9	4	22	65	100		%	21	19	19	40	100
Southern	#	12	15	48	126	201	Southern	#	24	34	37	108	203
	%	6	7	24	63	100		%	12	17	18	53	100
Eastern	#	5	3	13	52	73	Eastern	#	13	10	21	30	74
	%	7	4	18	71	100		%	18	14	28	41	100
Southwestern	#	2	3	6	32	43	Southwestern	#	9	2	8	24	43
	%	5	7	14	74	100		%	21	5	19	56	100
Central	#	11	12	27	115	165	Central	#	15	28	40	85	168
	%	7	7	16	70	100		%	9	17	24	51	100
Chi-square value = 19.	789	p<0.345					Chi-square value = 42.	000	p<0.001				

<sup>32.</sup> What is your primary specialty?

Table B-80. Actions regarding liability by practice location

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

		Re	elocate pract		<u>ate</u>		Relocate practice to another state						
Practice location Portland Metro	#	Already have done 6 1	Definitely will do 8	May consider doing 52 6	Nothing anticipated 776 92	<u>Total</u> 842 100	Practice location Portland Metro	#	Already have done 4 0	Definitely will do 13 2	May consider doing 85 10	Nothing anticipated 743 88	<u>Total</u> 845 100
Mid-Willamette Valley	# %	3 1	5 1	25 6	382 92	415 100	Mid-Willamette Valley	# %	2	8 2	47 11	362 86	419 100
Northwestern	# %	2 4	2 4	4 9	39 83	47 100	Northwestern	# %	1 2	3 6	11 23	33 69	48 100
Southern	# %	<u> </u>	5 2	19 9	181 88	205 100	Southern	# %	1 0	3 1	30 15	170 83	204 100
Eastern	# %	- -	1 1	15 20	58 78	74 100	Eastern	# %	- -	1 1	20 27	52 71	73 100
Southwestern	# %	_ _	_ _	4 9	39 91	43 100	Southwestern	# %	- -	1 2	8 19	34 79	43 100
Central	# %	1 1	1 1	14 8	150 90	166 100	Central	# %	3 2	6 4	23 14	136 81	168 100

Note: — indicates no responses in the category.

Chi-square value = 41.514 p<0.001

Note: — indicates no responses in the category.

Chi-square value = 43.324 p<0.001

<sup>32.</sup> What is your primary specialty?

Table B-80. Actions regarding liability by practice location

<sup>46.</sup> Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

			Close or se	ell practice						Retir	<u>e</u>		
				<u>May</u>							<u>May</u>		
		<u>Already</u>	<u>Definitely</u>	consider	<u>Nothing</u>				Already	<u>Definitely</u>	consider	Nothing	
Practice location		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>	Practice location		have done	will do	<u>doing</u>	<u>anticipated</u>	<u>Total</u>
Portland Metro	#	16	14	81	734	845	Portland Metro	#	6	37	146	659	848
	%	2	2	10	87	100		%	1	4	17	78	100
Mid-Willamette Valley	#	1	8	45	361	415	Mid-Willamette Valley	#	3	26	68	325	422
	%	0	2	11	87	100		%	1	6	16	77	100
Northwestern	#	_	4	8	36	48	Northwestern	#	_	7	8	34	49
	%	_	8	17	75	100		%	_	14	16	69	100
Southern	#	3	3	26	171	203	Southern	#	2	10	38	155	205
	%	1	1	13	84	100		%	1	5	19	76	100
Eastern	#	_	4	16	53	73	Eastern	#	_	4	12	55	71
	%	-	5	22	73	100		%	-	6	17	77	100
Southwestern	#	_	2	8	33	43	Southwestern	#	_	2	7	34	43
	%	-	5	19	77	100		%	_	5	16	79	100
Central	#	2	11	21	134	168	Central	#	2	12	34	121	169
	%	1	7	13	80	100		%	1	7	20	72	100

Note: — indicates no responses in the category.

Chi-square value = 49.161 p<0.0001

Note: — indicates no responses in the category.

Chi-square value = 14.646 p<0.686

<sup>32.</sup> What is your primary specialty?

Table B-80. Actions regarding liability by practice location

32. What is your primary specialty?

46. Considering your concerns regarding liability—including the cost or availability of insurance coverage—please indicate whether you have taken or anticipate taking the following actions.

Increase diagnostic procedures performed May Already Definitely consider Nothing will do doing anticipated <u>Total</u> Practice location have done Portland Metro % Mid-Willamette Valley # % Northwestern # Southern # Eastern # % Southwestern # 

Chi-square value = 18.669 p<0.412

Central

#

## Appendix A.

Data comparison and categorization tables

Table A-1. Demographic characteristics for comparison between 2004 Oregon Physician Workforce Survey sample and Oregon Board of Medical Examiners 2004 census data

	Percer	ntage
		BME 2004
Demographic characteristics	Survey sample	census data
Gender		
Male	73	73
Female	27	27
Region		
Portland metropolitan	45	50
Northwestern	6	5
Mid-Willamette valley	23	21
Southwestern	15	14
Central	7	7
Eastern	4	3
Age		
Under 40	20	24
40–49	28	28
50–59	33	29
60–69	16	13
70 and older	4	6

Table A-2. Oregon regions and counties within each region

Region	Counties
Portland metropolitan	Washington, Multnomah, Clackamas, Yamhill
Mid-Willamette valley	Linn, Benton, Marion, Polk, Lane
Northwestern	Clatsop, Tillamook, Columbia, Lincoln
Southern	Jackson, Douglas, Josephine
Eastern	Baker, Umatilla, Morrow, Grant, Wallowa, Union, Malheur, Harney
Southwestern	Coos, Curry
Central	Jefferson, Crook, Deschutes, Lake, Klamath, Hood River, Wasco,
	Sherman, Gilliam, Wheeler

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Adolescent medicine	Primary care
Behavioral pediatrics	Primary care
Clinical & laboratory immunology	Primary care
Developmental behavioral pediatrics	Primary care
Family practice	Primary care
Portland metropolitan	Primary care
General practice	Primary care
Mid-Willamette valley	Primary care
Southwestern	Primary care
Hospice	Primary care
House calls	Primary care
Internal medicine	Primary care
Lactation	Primary care
Obstetrics	Primary care
Obstetrics-gynecology	Primary care
Pediatric sports medicine	Primary care
Pediatrics	Primary care
Preventive medicine	Primary care
Primary care	Primary care
Urgent care	Primary care
Allergy & immunology	Medical specialty
Bone densitometry	Medical specialty
Broncho-esophagology	Medical specialty
Cardiac electrophysiology	Medical specialty
Cardiology	Medical specialty
Cardiovascular disease	Medical specialty
Cerebrovascular disease	Medical specialty
Child neurology	Medical specialty
Chronic wound care	Medical specialty
Clinical hypertension	Medical specialty
Clinical neurophysiology	Medical specialty
Conservative care of the spine	Medical specialty
Cornea & external disease	Medical specialty
Critical care medicine	Medical specialty
Cystic fibrosis	Medical specialty
Dermatological immunology	Medical specialty
Dermatology	Medical specialty
Dermatopathology	Medical specialty
Diabetes	Medical specialty
Diabetic foot care	Medical specialty
Electrodiagnosis neuro	Medical specialty
Electrophysiology neuro	Medical specialty
Endocardiography	Medical specialty
Endocrinology & metabolism	Medical specialty
Epilepsy neuro	Medical specialty
Gastroenterology	Medical specialty
Glaucoma	Medical specialty
Gynecologic oncology	Medical specialty

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Hematology	Medical specialty
Hematology-oncology	Medical specialty
Hepatitis C	Medical specialty
Immunohistocompatibility	Medical specialty
Infectious disease	Medical specialty
Infertility	Medical specialty
Interventional cardiology	Medical specialty
Laryngology	Medical specialty
Lipid metabolism	Medical specialty
Maternal fetal medicine	Medical specialty
Medical oncology	Medical specialty
Medicine	Medical specialty
Movement disorders	Medical specialty
Multiple sclerosis	Medical specialty
Neonatal-perinatal medicine	Medical specialty
Neoplastic disease	Medical specialty
Nephrology	Medical specialty
Neuro muscular	Medical specialty
Neurodevelopmental disabilities	Medical specialty
Neuroimmunology	Medical specialty
Neurology	Medical specialty
Neurology oncology	Medical specialty
Neuromuscular disease	Medical specialty
Non-invasive cardiology	Medical specialty
Nuclear cardiology	Medical specialty
Nuclear medicine	Medical specialty
Nutrition	Medical specialty
Oncology	Medical specialty
Ophthalmolic oncology	Medical specialty
Ophthalmology	Medical specialty
Orthopaedic oncology	Medical specialty
Osteopathic manipulative medicine	Medical specialty
Osteoporosis	Medical specialty
Otolaryngology	Medical specialty
Otology-neurotology	Medical specialty
Pain management	Medical specialty
Palliative medicine	Medical specialty
Pediatric allergy	Medical specialty
Pediatric cardiology	Medical specialty
Pediatric endocrinology	Medical specialty
Pediatric gastroenterology	Medical specialty
Pediatric hematology-oncology	Medical specialty
Pediatric infectious disease	Medical specialty
Pediatric internal medicine	Medical specialty
Pediatric nephrology	Medical specialty
Pediatric neurology	Medical specialty
Pediatric oncology	Medical specialty
Pediatric oncology  Pediatric pulmonology	Medical specialty
Pediatric rheumatology	Medical specialty
. Salatile Medifiatology	Modical opocialty

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Phlebology-vein care	Medical specialty
Physical medicine & rehabiliation	Medical specialty
Preventative cardiology	Medical specialty
Pulmonary	Medical specialty
Pulmonary critical care	Medical specialty
Pulmonary disease	Medical specialty
Pulmonology	Medical specialty
Reproductive endocrinology	Medical specialty
Respiratory disease	Medical specialty
Retina	Medical specialty
Rheumatology	Medical specialty
Skin cancer	Medical specialty
Sleep medicine	Medical specialty
Somnology	Medical specialty
Spinal cord injury medicine	Medical specialty
Sports medicine	Medical specialty
Stroke	Medical specialty
Thoracic oncology	Medical specialty
Urinary incontinence	Medical specialty
Urogynecology	Medical specialty
Urologic oncology	Medical specialty
Urology	Medical specialty
Vascular medicine	Medical specialty
Vitreoretinal disease	Medical specialty
Weight control	Medical specialty
Abdominal surgery	Surgical specialty
Adult reconstructive orthopedics	Surgical specialty
Arthroscopy	Surgical specialty
Bariatric surgery	Surgical specialty
Breast surgery	Surgical specialty
Burn surgery	Surgical specialty
Cancer surgery	Surgical specialty
Cardiothoracic surgery	Surgical specialty
Cardiovascular surgery	Surgical specialty
Cataract	Surgical specialty
Cataract	Surgical specialty
Colon & rectal surgery-proctology	Surgical specialty
Cornea & refractive surgery	Surgical specialty
Cosmetic medicine	Surgical specialty
Craniofacial surgery	Surgical specialty
Critical care surgery	Surgical specialty
Dermatologic surgery	Surgical specialty
Electrosurgeon	Surgical specialty
Endoscopy	Surgical specialty
Foot & ankle orthopedics	Surgical specialty
Forensic otolaryngology	Surgical specialty
General surgery	Surgical specialty
Hand surgery	Surgical specialty
Head & neck surgery	Surgical specialty
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Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Hip & knee replacement	Surgical specialty
Joint replacement	Surgical specialty
Knee	Surgical specialty
Laparoscopic surgery	Surgical specialty
Lower extremity reconstructure	Surgical specialty
Maxillofacial surgery	Surgical specialty
Micrographic surgery	Surgical specialty
Neuro ophthalmology	Surgical specialty
Neurological surgery	Surgical specialty
Oculoplastics	Surgical specialty
Oral & maxillofacial surgery	Surgical specialty
Oral surgery	Surgical specialty
Orbital	Surgical specialty
Orthopedic surgery	Surgical specialty
Orthopedic trauma	Surgical specialty
Pediatric cardiothoracic surgery	Surgical specialty
Pediatric maxillofacial surgery	Surgical specialty
Pediatric neurosurgery	Surgical specialty
Pediatric ophthalmology	Surgical specialty
Pediatric orthopedics	Surgical specialty
Pediatric otolaryngology	Surgical specialty
Pediatric surgery	Surgical specialty
Pediatric urology	Surgical specialty
Pelvic floor reconstruction	Surgical specialty
Peripheral vascular	Surgical specialty
Plastic surgery	Surgical specialty
Plastic surgery-facial	Surgical specialty
Pulmonary surgery	Surgical specialty
Reconstructive surgery	Surgical specialty
Refractive surgery	Surgical specialty
Renal transplant	Surgical specialty
Rhinology	Surgical specialty
Shoulder & knee	Surgical specialty
Shoulder/elbow	Surgical specialty
Shoulders, hip & knee	Surgical specialty
Spine deformity	Surgical specialty
Spine surgery	Surgical specialty
Strabismus	Surgical specialty
Surgical assisting	Surgical specialty
Surgical critical care	Surgical specialty
Surgical oncology	Surgical specialty
Thoracic surgery	Surgical specialty
Transplant surgery	Surgical specialty
Trauma surgery	Surgical specialty
Vascular surgery	Surgical specialty
Vitreoretinal surgery	Surgical specialty
Anatomical pathology	Hospital-based
Anesthesiology	Hospital-based
Body imaging	Hospital-based

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Breast imaging	Hospital-based
Cardiac anesthesia	Hospital-based
Chemical pathology	Hospital-based
Clinical pathology	Hospital-based
Cytopathology	Hospital-based
Diagnostic radiology	Hospital-based
Emergency medicine	Hospital-based
Forensic pathology	Hospital-based
Hematopathology	Hospital-based
Hospitalist	Hospital-based
Immunopathology	Hospital-based
Intensive care	Hospital-based
Interventional radiology	Hospital-based
Mammography	Hospital-based
Maxillofacial radiology	Hospital-based
MRI	Hospital-based
Musculoskeletal radiology	Hospital-based
Neuroanesthesia	Hospital-based
Neurointerventional radiology	Hospital-based
Neuropathology	Hospital-based
Neuroradiology	Hospital-based
Nuclear radiology	Hospital-based
OB anesthesia	Hospital-based
OBGYN pathology	Hospital-based
Pathologic anatomy	Hospital-based
Pathology	Hospital-based
Pediatric anesthesiology	Hospital-based
Pediatric critical care	Hospital-based
Pediatric emergency medicine	Hospital-based
Pediatric pathology	Hospital-based
Pediatric radiology	Hospital-based
Radiation anesthesiology	Hospital-based
Radiation oncology	Hospital-based
Radioisotopic pathology	Hospital-based
Radiological physics	Hospital-based
Radiology	Hospital-based
Radiology diagnostic	Hospital-based
Radiology oncology	Hospital-based
Renal pathology	Hospital-based
Surgical pathology	Hospital-based
Therapeutic radiology	Hospital-based
Underseas medicine	Hospital-based
Vascular & interventional radiology	Hospital-based
Women's imaging	Hospital-based
Acupuncture	Other
Addiction medicine	Other
Addiction psychiatry	Other
ADHD	Other
Administrative medicine	Other
	- · · <del>- ·</del>

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Adolescent psychiatry	Other
Aerospace medicine	Other
Alternative	Other
Anxiety disorders	Other
Aviation medicine	Other
Blood banking-transfusion medicine	Other
Child & adolescent psychiatry	Other
Child abuse	Other
Child psychiatry	Other
Chiropractic	Other
Clinical biochemical genetics	Other
Clinical biochemical-molecular	
genetics	Other
Clinical cytogenics genetics	Other
Clinical genetics	Other
Clinical molecular genetics	Other
Community psychiatry	Other
Consulting pyschiatry	Other
Correctional medicine	Other
Dialysis access	Other
Disability determination	Other
DNA	Other
Epidemiology	Other
Feeding disorders	Other
Forensic psychiatry	Other
Geriatric psychiatry	Other
Histopath	Other
Holistic medicine	Other
Independent medical evaluations	Other
Industrial medicine	Other
Integrative medicine	Other
Legal medicine	Other
Manipulation	Other
Medical ethics	Other
Medical genetics	Other
Medical informatics	Other
Medical microbiology	Other
Medical research	Other
Medical toxicology	Other
Neuropsychiatry	Other
Occupational medicine	Other
Other	Other
Pharmacology	Other
Psychiatry	Other
Psychiatry-adult	Other
Psychoanalysis	Other
Psychoanalysis-adult	Other
Psychoanalysis-child	Other
Psychoanalytic therapy	Other

Table A-3. Unique physician specialties assigned to major specialty groups

Unique physician specialty	Major specialty group
Psychopharmacology	Other
Psychosomatic medicine	Other
Psychotherapy	Other
Public health	Other
Quality improvement	Other
Stress management	Other
Transfusion medicine	Other
Tropical/travel medicine	Other

## Appendix C.

**2004 Oregon Physician Workforce Survey instrument** 

# 2004 Oregon Physician Workforce Survey

IMPORTANT—Please return by September 10, 2004.

### **SURVEY INSTRUCTIONS**

	Check here if your professional time DOES NO Oregon and do NOT complete the survey. Plea envelope addressed to Oregon Physician Work	ase retur	- · · · · · · · · · · · · · · · · · · ·
	<ul> <li>Please mark your answers with an "X." You may skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions, you will see an arrow with a note in the skip questions.</li> <li>Yes → GO TO QUESTION #3</li> <li>We recognize that you may not practice exclusive regard to your professional duties in Oregon only.</li> </ul>	indicatir ly in Or	ng which question to answer next, like this:
	ABOUT YOU		
<ol> <li>2.</li> <li>3.</li> <li>4.</li> </ol>	What is your gender?  I Female 2 Male  What is your age group?  Under 40 years 40-49 years 50-59 years 60-69 years 70 years and over  Are you Hispanic or Latino?  Yes 2 No  What is your race? Select all that apply.  White Black or African American Asian		What is your practice or employment status in Oregon?  Select all that apply.  Clinical practice Teaching Research Administration, not related to direct patient care Resident/Fellow Retired Not practicing or not employed in medical field Other (specify) How satisfied have you been with your medical career in the last 12 months? Select only one.  Very satisfied Somewhat satisfied Neither satisfied nor dissatisfied Somewhat dissatisfied
5.	Native Hawaiian or Pacific Islander  American Indian or Alaskan Native  Other (specify)  In addition to English, in which languages can you communicate effectively for most clinical purposes?  Select all that apply.  Russian Spanish Vietnamese		Very dissatisfied  How satisfied are you with your medical career overall?  Select only one.  Very satisfied  Somewhat satisfied  Neither satisfied nor dissatisfied  Somewhat dissatisfied  Very dissatisfied  What is the greatest source of your professional
6.	How long have you had a medical license in <b>any state</b> , including Oregon? <i>Select only one</i> .  Less than 2 years 2 2–5 years 3 6–10 years 4 11–20 years 5 More than 20 years	11.	satisfaction? Select only one.  Income Intellectual challenge Patient relationships Practice environment Other (specify)
7.	When do you plan to retire? <i>Select only one</i> .  Within the next 2 years  In the next 2 to 5 years		

3 More than 5 years from now

### **ABOUT YOUR PRACTICE**

The following questions are related to practice administration and payer mix. Your clinic or office administrator may provide assistance with questions #12–23.

**12.** Estimate the percentage of patients in your practice by lines of business **in the last 12 months**. The *total should equal 100%*.

Commercial insurance	%
Medicare	%
Medicaid/Oregon Health Plan (OHP) fee-for-service	%
Medicaid/Oregon Health Plan (OHP) managed care	%
TRICARE/CHAMPUS	%
Workers' Compensation	%
Uninsured	%
TOTAL (should equal 100%)	100 %

Does your practice have a discounted fee schedule?
1 Yes
2 No 3 Don't know
How many calendar days are normally required to schedule a non-urgent appointment for both new and established patients?
Days for new patients
Days for established patients
Not applicable
Don't know

**15.** For each of the payers listed below, please indicate whether your office accepts all, limits acceptance, or accepts none of the following:

	Accept all	Limit acceptance	Year limited acceptance	Accept none	Year stopped acceptance
Commercial insurance	1	2		3	
Medicare	1	2		3	
Medicaid/OHP fee-for-service	1	2		3	
Medicaid/OHP managed care	1	2	<del></del>	3	
TRICARE/CHAMPUS	1	2		3	
Workers' Compensation	1	2		3	
Uninsured	1	2		3	

**16.** If you accept all lines of business → *GO TO QUESTION #17*. For each of the lines of business in which you limit or **DO NOT** accept patients, please indicate the importance of each factor on your decision to restrict or close your practice. Please answer using a scale of 1 to 3, in which 1=Not important, 2=Somewhat important, 3=Very important, or NA= Not applicable.

NA= Not applicable.  Rank: 1=Not important, 2=Somewhat important, 3=Very important, or NA= Not applicable						
	Commercial insurance	Medicare	Medicaid/OHP fee-for-service	Medicaid/OHP managed care	Workers' Compensation	
Example:						
Practice is full	2	1	3	2	NA	
Balanced payer source						
Cost of translation services						
Increasing overhead costs						
Cost or availability of professional liability insurance						
Practice is full						
Non-compliant patients						
Complex clinical needs of patients						
Complex social needs of patients						
Administrative requirements						
Reimbursement rates						
HMO left market					NA	
Changes in health benefit packages						

**17.** Please indicate whether you anticipate taking the following actions in your practice in the **next two years**? *Select one in each row.* 

	Definitely will do	Might do	Not anticipated	Not applicable
Stop providing all direct patient care	1	2	3	4
Stop providing services to specific groups of patients (specify)	1	2	3	4
Stop providing certain services (specify services)	1	2	3	4
Start providing certain services (specify services)	1	2	3	4
Reduce patient care hours	1	2	3	4
Increase referral of complex cases	1	2	3	4
Relocate practice within state	1	2	3	4
Relocate practice to another state	1	2	3	4
Close or sell practice	1	2	3	4
Retire from practice	1	2	3	4
Increase diagnostic procedures performed	1	2	3	4

18.	What percentage of your patients do you or your office staff help to enroll in pharmaceutical assistance programs? <i>Select only one.</i>	24.	Are you aware of the Oregon Tobacco Quit Line?  1 Yes 2 No → GO TO QUESTION #27
	Zero (specify why) → GO TO QUESTION #20	25.	Have you ever referred patients to the Oregon Tobacco Quit Line?
	2 Up to 10% 3 11-25% 4 26-50% 5 51-75% 6 76-100% 7 Don't know	26.	Yes No  To the best of your knowledge does the Oregon Health Plan cover smoking cessation treatments?
19.	For those patients whom your practice helps enroll, how much time do you or your staff spend per patient? <i>Select only one.</i>		1 Yes 2 No 3 Don't know
	1 15 minutes or less 2 16 to 30 minutes 3 31 to 60 minutes 4 More than 60 minutes 5 Don't know	27.	Do you have concerns regarding providing care to Medicaid/OHP patients?  Yes No → GO TO QUESTION #29
20.	Did your practice ask Medicaid/OHP patients to make their co-payments prior to July 1, 2004?	28.	What is your greatest concern about providing care to Medicaid/OHP patients?
	<ul> <li>Not applicable</li> <li>Yes</li> <li>Sometimes</li> <li>No</li> <li>Don't know</li> </ul>	29.	What is the size of your primary practice, that is, the
21.	Is your office staff aware of the OHP Provider Services line, a telephonic resource for general Medicaid and billing/claims questions?  Yes No → GO TO QUESTION #24 Don't know → GO TO QUESTION #24		practice in which you spend the most time?  Select only one.  Solo practice  Small group practice (2–4 physicians)  Medium group practice (5–9 physicians)  Large group practice (10 or more physicians)  Specify number of physicians
22.	Has your office staff used the OHP Provider Services line?  1 Yes	30.	In a <b>typical week</b> , how many hours do you spend on call? <i>Select only one.</i>
23.	No → GO TO QUESTION #24  Don't know → GO TO QUESTION #24  How satisfied was your office staff with its last interaction with the OHP Provider Services line?  Very satisfied		No on-call hours  1–10 hours/week  11–20 hours/week  4 21–30 hours/week  More than 30 hours/week  Always on call
	<ul> <li>Somewhat satisfied</li> <li>Neither satisfied nor dissatisfied</li> <li>Somewhat dissatisfied</li> <li>Very dissatisfied</li> <li>Don't know</li> </ul>	31.	In the <b>last 12 months</b> , have you changed your hospital privileges for any of the following reasons?  Select all that apply.  Haven't changed Required procedures beyond the scope of practice
	ly the physician should answer the remainder of questions in this survey.		<ul> <li>Increased demand for call coverage</li> <li>Change in practice</li> <li>Change in hospital bylaws</li> <li>Increased uncompensated care</li> </ul>
			1 Other reason (specify)

32.	What is your primary specialty? If ap	plicable, what are your of	ther specialties? List all that apply.				
	Primary specialty						
	Other specialties						
33.	33. For your <i>primary</i> practice location (the location at which you spend the greatest amount of time in direct patient care), please complete the following:						
33a	. Number of <b>hours per week</b> in direc	t patient care, by specialty	y.				
con			ecord keeping, patient-related office work, and travel time research time, hours on call when not actually working, and trav	el			
Prir	mary specialty hours/v	veek	Other specialties hours/week				
33b	. Setting and ownership Select all the	at apply.	33c. Employment Select only one.				
1 1	Hospital   ZIP Code     1   A full or part owner of the practice   2   An employee of the practice or health system   Clinic/Office – Private, not for profit   ZIP Code   3   An independent contractor   A volunteer—no ownership/employment						
34.	For your <i>secondary</i> <b>practice location</b> following:  1 Does not apply. No secondary practice location following:	•	you spend the second greatest amount of time), please complete to QUESTION #35	he			
34a	. Number of hours per week in direc	t patient care, by specialty	y.				
con			ecord keeping, patient-related office work, and travel time research time, hours on call when not actually working, and trav	el			
Prir	mary specialty hours/v	veek	Other specialties hours/week				
34b	. Setting and ownership Select all that	at apply.	<b>34c</b> . Employment <i>Select only one</i> .				
1	Hospital Clinic/Office – Private, for profit Clinic/Office – Private, not for profit Clinic/Office – Public Other (specify)		A full or part owner of the practice An employee of the practice or health system An independent contractor A volunteer—no ownership/employment Other (specify)				
35.	<ul> <li>35. In a typical week, how many new and established patients do you see? <i>Please provide your best estimate</i>.</li> <li>37. If you are a neurosurgeon, please answer 37a and 37b. All others → GO TO QUESTION #38</li> </ul>						
	New patients seen in a ty		37a. Are you currently performing brain surgery?  Yes				
	Established patients seen	in a typical week	2 No				
36.	Not applicable  In a <b>typical week</b> , how many hours dadministrative tasks related to direct is outpatient care (e.g., charting, phone paperwork, etc.)? <i>Please provide you</i>	inpatient and calls, referrals,	37b. Are you currently performing spine surgery?  Yes No				
	Hours in a typical week administrative tasks	doing					

•	u have practiced, or currently practice, <b>maternity care</b> , Are you currently delivering babies?	please answe	r # <b>38a</b> . All oth	$ers \rightarrow Go To$	QUESTION #39.
-	1 Yes 2 No → GO TO QUESTION #38d				
38b.	Does your maternity care practice include the following indicate how many you have performed in the last 12				
		Do perfor	rm	er in last 12 onths	Do not perform
	High-risk pregnancies and/or deliveries	1	_		2
	VBAC	1	_		2
	Deliveries for Medicaid women	1	_		2
	Assisting in cesarean sections	1	_		2
	Performing cesarean sections as the primary surgeon	1			2
	Number of all deliveries in the las	t 12 months			-
38c. 38d.	In the <b>next year</b> , do you plan to stop delivering?  All babies?  1 Yes → GO TO QUESTION #39 2 No  Babies for Medicaid patients?  1 Yes → GO TO QUESTION #39 2 No → GO TO QUESTION #39  How long ago did you stop delivering babies? Select of the selection with the last year 2 1 to 2 years ago 3 More than 2 years ago  Please rate the importance of each of the following face		decision to sto	p delivering	babies.
	Select only one in each row.	Very	Somewhat	Not	Not
	Factors	important	important	importar	
	Lack of backup coverage for cesarean sections	1	2	3	4
	Time demands/personal life	1	2	3	4
	Medical liability premiums	1	2	3	4
	Experience with lawsuit(s)	1	2	3	4
	Lack of demand	1	2	3	4
	Low level of reimbursement	1	2	3	4
	Lack of interest	1	2	3	4
	Hospital privilege issues	1	2	3	4
	Other (specify)	1	2	3	4

## **ABOUT YOUR PROFESSION**

**39.** Rate the importance of each of the following issues to you. *Select only one in each row.* 

	Very Important	Somewhat Important	Not Important
Electronic medical records	1	2	3
Medicare reimbursement	1	2	3
Cost of doing business/overhead	1	2	3
Pharmaceutical costs	1	2	3
Stress and burnout	1	2	3
Cost/availability of professional liability insurance	1	2	3
Call coverage	1	2	3
Cost of translation services	1	2	3
Coverage for the uninsured	1	2	3
Medicaid/OHP reimbursement	1	2	3
Commercial insurance reimbursement	1	2	3
Recruitment of qualified non-physician staff	1	2	3
Providing culturally and linguistically appropriate services	1	2	3
Recruitment of physicians	1	2	3
Health plan timeliness of payment	1	2	3
Medicare prescription drug benefit	1	2	3
Patient safety	1	2	3
Electronic prescribing	1	2	3
Government regulation and oversight	1	2	3
Hospital/medical staff issues	1	2	3
Retention of physicians	1	2	3

	Government regulation and oversight		1	2	3	
	Hospital/medical staff issues		1	2	3	
	Retention of physicians		1	2	3	
40.	Are you currently covered by professional medical liability insurance?  1 Yes 2 No (specify why not)	43.	liability cove 1 Not appl 2 \$1,000,0	erage? Select only on	eral Tort Claims Act 0,000 aggregate	
41.	— → Go To QUESTION #45  What is the source of your professional liability coverage?  Select all that apply.  Commercial insurance company  Self-insured	44	4 \$3,000,0 5 \$5,000,0 6 Other (sp. \$	00 per claim; \$3,000 00 per claim; \$5,000 pecify)per claim; \$	),000 aggregate	ate
	1 State or Federal Tort Claims Act 1 Other (specify) 1 Don't know		liability insu	rance that you are pa		
42.	What is the form of your professional liability coverage?  Select all that apply.  Occurrence coverage Claims-made coverage State or Federal Tort Claims Act Don't know	45.	Don't kn  If you chang within the late for your change and a change and Insurance Insurance and Insu	ed sources for profes st three years, what nge? Select only one. licable, have not cha	nged mployment w from market renew coverage	
	7					

46.	Considering your concerns regarding liability—including the cost or availability of insurance coverage—	-please indicate whether
	you have taken or anticipate taking the following actions.	

	Already have done	Definitely will do	May consider doing	Nothing anticipated
Stop providing all direct patient care	1	2	3	4
Stop providing services to specific groups of patients (specify)	1	2	3	4
Stop providing certain services (specify services)	1	2	3	4
Start providing certain services (specify services)	1	2	3	4
Reduce patient care hours	1	2	3	4
Increase referral of complex cases	1	2	3	4
Relocate practice within state	1	2	3	4
Relocate practice to another state	1	2	3	4
Close or sell practice	1	2	3	4
Retire from practice	1	2	3	4
Increase diagnostic procedures performed	1	2	3	4

Reduce patient care hours		1	2	3	4
Increase referral of complex cases		1	2	3	4
Relocate practice with	in state	1	2	3	4
Relocate practice to a	nother state	1	2	3	4
Close or sell practice		1	2	3	4
Retire from practice		1	2	3	4
Increase diagnostic pr	ocedures performed	1	2	3	4
Modernization As increase for physical Did you change you have you have you have you have you made as a result. Limited acception Decided not to the property of the property	escription Drug, Improvement, and et of 2003 appropriated a 1.5 percent cian reimbursements in 2004 and 2005. our practice as a result of this provision?  **QUESTION #49** edicare patients \(\rightarrow\) GO TO QUESTION #50**  **Dowing describes the changes in practice ult of this legislation? **Select only one.**  **Otance of new Medicare patients**  **Do accept new Medicare patients**  **Medicare patients**	Please prov	greatest challen two years?  ride any other co	omments you wis	sh to make
in 2006, which of Select only one.    Will accept a Will limit accept a Will not acc	the following actions will you take?  I new Medicare patients eptance of new Medicare patients pt new Medicare patients  Medicare patients  Medicare patients				

Thank you for your participation. Please place the survey in the business reply envelope addressed to Oregon Physician Workforce Survey Research Group.

IMPORTANT—Please return the completed survey by September 10, 2004.

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