

AAOE

American **Alliance**
of Orthopaedic Executives

AAOE Benchmarking Survey

DATA ENTRY GUIDE



CONTENTS

<u>Selecting Question Subjects</u>	3
<u>Practice Profile</u>	4
<u>Physician Productivity and Compensation</u>	5
<u>PA-NP Productivity and Compensation</u>	9
<u>Therapy and Trainer Compensation</u>	12
<u>Practice Administrator Compensation</u>	13
<u>Employees</u>	15
<u>Non Staff Expenses</u>	18
<u>Income Statement</u>	21
<u>Payer Mix</u>	23
<u>Accounts Receivable</u>	24
<u>Square Footage</u>	24
<u>Ancillary Services</u>	25
<u>Recruitment</u>	27
<u>Administrative Physicians/End of Career</u>	28
<u>Call Data</u>	29
<u>Databases and Information Systems Used</u>	30
<u>Government Affairs Data</u>	31

► SELECTING QUESTION SUBJECTS

Participants have the option of customizing the survey based on the data they will be providing. When you first click your link to open the survey, you'll notice a pop-up window with a list of topics (see Figure 1).

Tier Structure: The survey consists of three tiers that allow you to customize your survey experience. To complete the entire survey, leave all three tier options selected.

Tier 1: Basic level of survey participation that collects data needed for the core reports identified by the AAOE Data Analytics and Benchmarking Council. This tier includes the Practice Profile, Physician Productivity and Compensation, PA-NP Productivity and Compensation, Practice Administrator Compensation, Payer Mix, A/R Aging, and Income Statement sections.

Tier 2: Adds employee and non-employee expense details and square footage to the data collected in Tier 1. Select Tiers 1 and 2 to input data needed for reports that provide more detailed results relevant to staffing levels and expense categories.

Tier 3: Includes the remaining survey sections and captures data on Ambulatory Surgery, Recruitment, Administrative Physicians, End of Career, Call Data, Database & Information Systems, and Government Affairs Data. Select Tiers 1, 2, and 3 to complete all sections of the benchmarking survey.

If you are planning on completing the survey incrementally rather than in one sitting, the survey will remember your selections so you can pick up where you left off at a later date.

Lines of Service

Select the ancillary services for which you will be reporting data. If you are uncertain, leave all options selected and you can preview the questions included in the Benchmarking Survey. The selections made here can be updated at any time by relaunching the Benchmarking Survey (e.g., refresh your browser or select Ctrl + Shift + R on your keyboard while in the survey).

- | | |
|---|---|
| <input checked="" type="checkbox"/> DME | <input checked="" type="checkbox"/> MRI |
| <input checked="" type="checkbox"/> Other Ancillary | <input checked="" type="checkbox"/> PT/OT |
| <input checked="" type="checkbox"/> X-Ray | |

Tiers

To complete the entire AAOE Benchmarking Survey and maximize the data available in the Benchmarking Results, leave all of the checkboxes marked (i.e., leave Tier 1, Tier 2, and Tier 3 selected) and click Select to continue. Please visit aaoe.net/benchmarkingsurvey to review the sections included in the survey.

You can also choose the Survey Tier(s) that you plan to complete. The selections made here can be updated at any time by relaunching the Benchmarking Survey (e.g., refresh your browser or select Ctrl + Shift + R on your keyboard while in the survey).

- Tier 1 (physician/provider productivity and compensation, practice administrator compensation, revenue, total expenses, payer mix, and accounts receivable aging)

OR

- Tier 1 and Tier 2 (all of the sections listed in Tier 1 plus employee salaries and FTEs, non-staff expenses, square footage, and ancillary services)

OR

- Tier 1, Tier 2, and Tier 3 (all of the sections listed in Tier 1 and Tier 2 plus the call data, recruitment data, end of career, administrative physicians, databases and information systems used, and government affairs data)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Tier 1 | <input checked="" type="checkbox"/> Tier 2 |
| <input checked="" type="checkbox"/> Tier 3 | |

Figure 1

► PRACTICE PROFILE

■ Purpose

This section collects important contact information for the practice and data that allows for benchmarking results to be customized based on geographical location and identified practice characteristics.

Related Dashboards: Profile of Participation, filters in all benchmarking dashboards

■ Fields

Name of Practice – Enter the legal name of the practice.

Mailing Address – Street address of the practice’s primary office location.

City, State, ZIP – City, state, and ZIP+4 of your primary office location.

Practice TIN – Please enter your practice’s Tax Identification Number.

Name of CEO/Practice Administrator – Name of the practice’s chief executive officer (CEO) or most senior practice executive, regardless of title.

Managing Physician Name – Name of the practice’s managing physician.

Primary Contact for Benchmarking Survey (Name, Position, Email, Phone) – Provide the name and contact information of the person responsible for completing the survey. This person will be contacted with any questions about the survey and about the availability of benchmarking results.

Practice Setting – Select the option that best describes the practice.

■ Section Overview

General Information – This section collects practice contact information.

Practice Information – The fields in this section capture practice characteristics that can be used to generate comparison groups and customized results.

Survey Submission Process – Select ‘AAOE Online Survey’ from the option list if you are entering data directly into this survey. The remaining options are for use by AAOE when Excel survey data is imported or entered for a practice.

Number of Office Locations – Number of locations at which the practice operates. Enter a value between 1 and 100.

Population Designation of Primary Location – The size of the metropolitan area in which the practice is located.

Hospital Ownership - Select an option from the list provided to indicate whether your practice is fully or partially owned by a hospital.

Lines of Service – Please indicate which of the following lines of service are offered by your practice. Check these regardless of whether you will be reporting data on them in this survey.

Additional Services Provided by Practice – Please indicate which of the services, if any, are currently provided by your practice.

➤ PHYSICIAN PRODUCTIVITY AND COMPENSATION

■ Purpose

The fields included in this section capture detailed information on physicians and surgeons within the orthopedic practice.

Related Dashboards: Revenue by FTE Physician, Office Visits per FTE Physician, Patient Visits and Cases; Surgical Cases per FTE Physician, Surgeries per New Patient Visit, Work RVUs per FTE Physician, Revenue per Worked RVU, Annual Gross Charges, Net Receipts, and Work RVUs, Overhead per FTE Physician, Compensation per FTE Physician, Provider Compensation by Specialty, and FTE Employees by 1,000 Visits

■ Section Overview

General Information – Collects basic information, including practice specialty and FTE status, about the physician that is used to customize benchmarking reports.

Patient Visits and Cases – Captures information on the number of visits and cases completed by the physician within the reporting year. Data are used for productivity calculations.

Work RVUs – Requests work relative value units for the physician during the reporting year

Collections – Specifies the gross and net collections generated by the physician during the reporting year. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.

Compensation – Collects data on several sources of compensation for the physician.

■ Fields

Physician NPI Number – Enter the provider's 10-digit NPI Number, or other identifying information. This identifying information will assist with trending survey data year after year.

Physician Practice Specialty – The primary specialty of the physician; used as a filter to customize benchmarking results.

Provider Initials – Enter the provider's initials or other identifying information to help you review your data entry. This information is for your reference only.

Physician Age – Specify the provider's age as of the end of the reporting year.

Years in Practice – Select the option that best represents the number of years that the physician has been practicing medicine.

Owner/Employed/Fellow – Select the option from the dropdown list (e.g., Owner, Employed, or Fellow) to indicate the employment status of the physician.

Fellowship Trained – Is the physician fellowship trained? Select yes or no.

FTE Status – Identifies whether the physician worked full time (i.e., 1.0 FTEs) during the reporting year or less than full time. FTE (Full-Time Equivalent) is calculated for all individuals employed by the practice on a full or part-time basis. A full-time employee who works 40 hours per week would be reflected as 1.0 FTE.

➤ PHYSICIAN PRODUCTIVITY AND COMPENSATION

Fields

To calculate the FTE of a part-time employee, divide the number of hours worked in an average week by the normal work week of the practice and multiply by the number of months worked per year divided by 12 total months per year.

$$\text{FTE} = \left(\frac{\# \text{ hours worked in average week}}{\text{hours in normal work week}} \right) \times \left(\frac{\# \text{ months worked}}{12 \text{ months}} \right)$$

Annual Total # Days Worked – Based on actual days worked greater than or equal to half day, using schedule information or number of billable days or service days in which the physician had charges.

Annual Total # New Patient Visits – Number of new patient visits conducted by the physician during the reporting year. Include New Patient codes 99201 – 99205 here. Do not include ‘incident to’ patients here. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Annual Total # Patient Visits – Total number of new and returning patient visits conducted by the physician during the reporting year. Include New Patients (99201 – 99205), Established Patients (99211 – 99215) and Post-Operative visits (99024) here. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Annual Total # IMEs – Number of IMEs completed by the physician during the reporting period. Include codes 99450-99456 here. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned. number of patients, not a count of CPT codes.

Annual Total # Inpatient Surgical Cases – Indicates the number of surgical cases handled in an inpatient setting. Report number of patients, not a count of CPT codes.

Annual Total # Outpatient Surgical Cases – Indicates the number of surgical cases handled in an outpatient setting. Report the number of patients, not a count of CPT codes.

Annual Total # Surgical Cases – FORMULA: Sum of Annual Total # Inpatient Surgical Cases and Annual Total # Outpatient Surgical Cases

Annual Total # ASC Surgical Cases – Indicates the number of surgical cases performed in an ASC. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Annual Total # Pain Cases - Indicates the number of pain cases handled by the physician. Include injections in the 60000 CPT Code series. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

Annual Total # Injections – Include Visco and non-Visco injections as well as in-office and non-office injections to represent all injections made by the provider.

➤ PHYSICIAN PRODUCTIVITY AND COMPENSATION

■ Fields

Does your practice use Work RVU data?

– Select Yes or No to indicate whether your practice collects and uses Work RVU data.

Physician Work RVUs – Physician Work Relative Value Units attributed to the physician. Include:

- Physician work RVUs only
- Work RVUs for all professional medical and surgical services performed by the physician
- Work RVUs for the professional component of laboratory, radiology, medical diagnosis, and surgical procedures
- Work RVUs for all procedures performed by the medical practice

Work RVUs for procedures for both fee-for-service and capitation patients

- Work RVUs for all payers, no just Medicare
- Work RVUs for purchased procedures
- National work RVU (do not include the geographical adjustment or GPCI); GPCI must be set to 1.000

Annual Gross Charges – Gross charges generated by the physician during the reporting period. Do not include incident to or designated health services (e.g., MRI) charges here. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data. If this does not apply, please enter a '0' in the box provided to ensure the correct calculations are returned.

Annual Net Collections – Net receipts collected for the physician during the reporting year. Do not include incident to or designated health services (e.g., MRI) charges here. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data. If this does not apply, please enter a '0' in the box provided to ensure the correct calculations are returned.

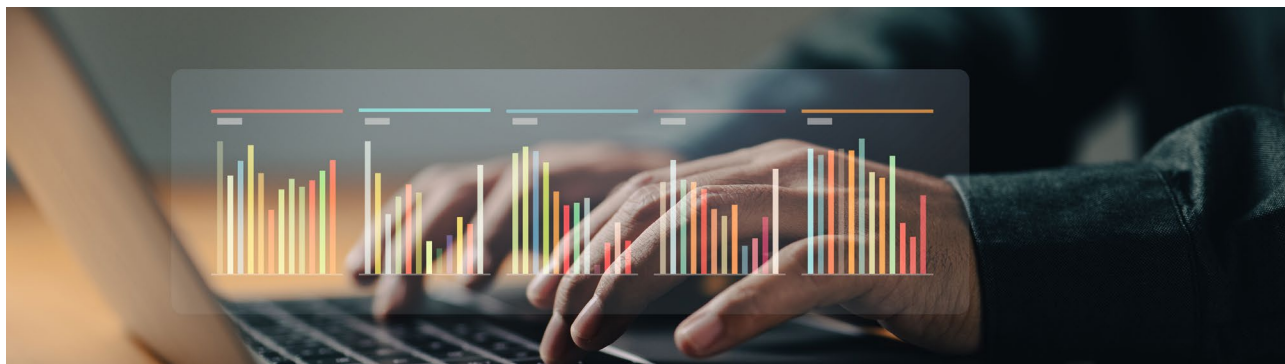
Annual Retirement Plan Contributions

– Enter the contribution made to the physician's retirement plan, including the physician deferral and practice match.

Annual Provider Compensation – Enter the amount of compensation paid to the physician by the practice. Provider compensation can be found in the following IRS Tax Forms, as appropriate for the individual physician and practice: W-2 Form, Schedule E (Form 1040) for Partnerships and S Corporations, Schedule K-1 (Form 1120S) for Shareholders in a Corporation, Schedule C (Form 1040) for Sole Proprietorships. Do not include in-office ancillary compensation here. If this does not apply, please enter a '0' in the box provided to ensure the correct calculations are returned.

Annual In-Office Ancillary Compensation – Annual In-Office Ancillary Compensation to include the following: W-2 compensation and K-1 distributions related to in-office ancillaries (MRI, PT/OT, DME, etc.). If you report compensation here, deduct that amount from Annual Provider Compensation. If this does not apply, please enter a '0' in the box provided to ensure the correct calculations are returned.

► PHYSICIAN PRODUCTIVITY AND COMPENSATION



■ Fields

Other Compensation – Enter any other compensation for the physician, including signing bonuses not on the physician’s W-2, witness fees, interrogatory fees, forms, malpractice panels, research and consulting fees, etc. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

ASC Earnings Received? - Indicate whether the physician had earnings from an ASC and whether the amount of those earnings will be entered in the column to the right (Select ‘Yes - Amount Provided’ if the amount will be entered). Select ‘Yes - Amount Unknown’ if the amount of earnings is not available. Select ‘No’ only if the physician does not receive earnings from an ASC.

ASC Earnings Amount – Enter the amount of earnings the physician received from an ASC. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Real Estate Earnings Amount – Enter the amount of earnings the physician received from real estate. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Real Estate Earnings Received? - Indicate whether the physician had earnings from real estate and whether the amount of those earnings will be entered below (Select ‘Yes - Amount Provided’ if the amount will be entered). Select ‘Yes - Amount Unknown’ if the amount of earnings is not available. Select ‘No’ only if the physician does not receive earnings from real estate.

Hospital Earnings Received? - Indicate whether the physician received earnings from a hospital and whether the amount of those earnings will be entered below (Select ‘Yes - Amount Provided’ if the amount will be entered). Select ‘Yes - Amount Unknown’ if the amount of earnings is not available. Select ‘No’ only if the physician does not receive earnings from a hospital.

Hospital Earnings Amount – Enter the amount of earnings the physician received from a hospital. If this does not apply, please enter a ‘0’ in the box provided to ensure the correct calculations are returned.

Total Annual Compensation – FORMULA:
Sum of annual provider compensation, ASC earnings amount, real estate earnings amount, hospital earnings amount, and other compensation.

► PA-NP PRODUCTIVITY AND COMPENSATION

■ Purpose

The fields included in this section capture detailed information on physician assistants and nurse practitioners within the orthopedic practice.

Related Dashboards: Revenue and Expenses by FTE Provider, Patient Visits and Cases, Surgeries per New Patient Visit, Revenue per Worked RVU, Annual Gross Charges, Net Receipts, and Work RVUs, Provider Compensation, Provider Compensation by Specialty, PA/NP Compensation Overview, FTE Employees by 1,000 Visits

■ Section Overview

General Information – Collects basic information, including practice specialty and FTE status, about physician assistants and nurse practitioners that is used to customize benchmarking reports.

Patient Visits and Cases – Captures information on the number of visits and cases completed by physician assistants and nurse practitioners within the reporting year. Data are used for productivity calculations.

Work RVUs – Requests work relative value units for physician assistants and nurse practitioners during the reporting year.

Collections – Specifies the gross and net collections generated by physician assistants and nurse practitioners during the reporting year. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.

Compensation – Collects base and bonus compensation paid to physician assistants and nurse practitioners during the reporting year.

■ Fields

PA/NP Name or Identification Number – Enter the provider’s NPI number or other identifying information for the physician assistant or nurse practitioner; used to assist practices in reporting data year after year and to facilitate the development of benchmarking trends.

Physician Assistant or Nurse Practitioner – Identifies whether the individual is a physician assistant or nurse practitioner.

Provider Initials – Enter the provider’s initials or other identifying information for the provider to help you review your data entry. This information is for your reference only.

Practice Specialty – The primary specialty of the physician assistant or nurse practitioner; used as a filter to customize benchmarking results.

Years of Experience – Select the option that best represents the number of years of experience the provider has in healthcare.

FTE Status – Identifies whether the provider worked full time (i.e., 1.0 FTEs) during the reporting year or less than full time. FTE (Full-Time Equivalent) is calculated for all individuals employed by the practice on a full or part-time basis. A full-time employee who works 40 hours per week would be reflected as 1.0 FTE.

► PA-NP PRODUCTIVITY AND COMPENSATION

Fields

To calculate the FTE of a part-time employee, divide the number of hours worked in an average week by the normal work week of the practice and multiply by the number of months worked per year divided by 12 total months per year.

$$\text{FTE} = \left(\frac{\# \text{ hours worked in average week}}{\text{hours in normal work week}} \right) \times \left(\frac{\# \text{ months worked}}{12 \text{ months}} \right)$$

Is the Provider Office and/or Surgical Based? – Select an option to indicate whether the provider is Office Based Only, Surgical Only, or works in both settings.

Annual Total # New Patient Visits – Number of new patient visits conducted by the physician assistant or nurse practitioner during the reporting year. Include New Patient codes 99201 – 99205 here. Do not include “incident to” patients here.

Annual Total # Patient Visits – Total number of new and returning patient visits conducted by the physician assistant or nurse practitioner during the reporting year. Include New Patients (99201 – 99205), Established Patients (99211 – 99215), Post-Operative visits (99024), and incident to patients here. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Annual Total # IMEs – Number of IMEs completed by the physician assistant or nurse practitioner during the reporting period. Include codes 99450-99456 here. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Annual Total # Inpatient Surgical Cases – Indicates the number of surgical cases handled in an inpatient setting. Report the number of patients, not a count of CPT codes. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Annual Total # Outpatient Surgical Cases – Indicates the number of surgical cases handled in an outpatient setting. Report the number of patients, not a count of CPT codes. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Annual Total # Surgical Cases – FORMULA:
Sum of Annual Total # Inpatient Surgical Cases and Annual Total # Outpatient Surgical Cases

Annual Total # ASC Surgical Cases – Indicates the number of surgical cases, performed or assisted, in an ASC. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Annual Total # Pain Cases - Indicates the number of pain cases handled by the provider. Include injections in the 60000 CPT Code series. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

Annual Total # Injections – Include Visco and non-Visco injections as well as in-office and non-office injections to represent all injections made by the provider. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Does your practice use Work RVU data?
– Select Yes or No to indicate whether your practice collects and uses Work RVU data.

► PA-NP PRODUCTIVITY AND COMPENSATION

■ Fields

Work RVUs – Include:

- Provider work RVUs only
- Work RVUs for all professional medical and surgical services performed by the provider
- Work RVUs for the professional component of laboratory, radiology, medical diagnosis, and surgical procedures
- Work RVUs for all procedures performed by the medical practice

Work RVUs for procedures for both fee-for-service and capitation patients

- Work RVUs for all payers, no just Medicare
- Work RVUs for purchased procedures
- National work RVU (do not include the geographical adjustment or GPCI); GPCI must be set to 1.000

Annual Gross Charges – Gross charges generated by the physician assistant or nurse practitioner during the reporting period. Include incident to charges here. Do not include in-office ancillary charges here. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.

Annual Net Collections – Net receipts collected for the physician assistant or nurse practitioner during the reporting year. Include incident to collections here. Do not include in-office ancillaries here. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.



Annual Retirement Plan Contribution – Enter the contribution made to the physician assistant or nurse practitioner’s retirement plan, including the provider deferral and practice match.

Base Compensation – Enter the amount of compensation paid to the provider by the practice in the fields below. Provider compensation can be found on the individual’s W-2 Form.

Bonus Compensation – Amount of any bonuses paid to the physician assistant or nurse practitioner during the reporting year. If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Other Compensation – Enter Compensation paid to the employee that is not considered part of their base salary or bonus compensation (e.g., signing bonus, cell phone allowance, mileage allowance). If this does not apply, please enter a ‘0’ to ensure the correct calculations are returned.

Total Annual Compensation – FORMULA:
Sum of Base Compensation and Bonus Compensation

► THERAPIST AND TRAINER COMPENSATION

■ Purpose

This section is designed to collect detailed compensation data for physical and occupational therapy staff and athletic trainers working in orthopedic practices.

■ Section Overview

Compensation – Captures base and bonus compensation data for physical therapists, occupational therapists, physical therapy assistants, occupational therapy assistants, billable technicians, and athletic trainers.



■ Fields

Name or Identification Number –

Identifying information for the provider; used to assist practices in reporting data year after year and to facilitate the development of benchmarking trends.

Line of Service – Select the Line of Service in which the employee primarily works from the list provided.

Provider Type – Select an option from the list to indicate the employee's provider type (e.g., PT, OT, PTA, COTA, ATC).

Years of Experience - Select the option that best represents the number of years of experience the provider has in healthcare.

FTE Status – Enter the Provider's FTE Status.

Base Compensation – Base compensation paid to the employee during the reporting year.

Bonus Compensation – Bonus compensation paid to the employee during the reporting period.

Other Compensation – Enter compensation paid to the employee that is not considered part of their base salary (e.g., signing bonus, cell phone allowance, mileage reimbursement).

► PRACTICE ADMINISTRATOR COMPENSATION

■ Purpose

This section is designed to collect compensation and benefit data on the most senior executives within the orthopedic practice.

Related Dashboards: Practice Administrator Compensation, Practice Administrator Dashboard

■ Fields

Practice Administrator Position – Select the position titles that most accurately reflect members of your practice’s executive management team.

- CEO/Practice Administrator - Executive/management staff who reports directly to the Board of Directors
- COO/Operations Director - Executive/management staff who is responsible for overseeing practice operations
- CFO/Finance Director - Executive/management staff who is responsible for the practice’s finances and accounting operations
- CIO/IT Director - Executive/management staff who is responsible for the practice’s information technology
- Human Resources Senior Staff - Executive/most senior management staff responsible for human resources
- Marketing Senior Staff - Executive/most senior management staff responsible for marketing

■ Section Overview

Compensation – Captures base and bonus compensation data for the identified individuals.

Benefits – Specifies the benefits given to practice administrators during the reporting year.

FTE Status – Identifies whether the individual worked full time (i.e., 1.0 FTEs) during the reporting year or less than full time. FTE (Full-Time Equivalent) is calculated for all individuals employed by the practice on a full or part-time basis. A full-time employee who works 40 hours per week would be reflected as 1.0 FTE.

To calculate the FTE of a part-time employee, divide the number of hours worked in an average week by the normal work week of the practice and multiply by the number of months worked per year divided by 12 total months per year.

FTE - (# hours worked in average week/hours in normal work week) X (# months worked/12 months)

How many years have you been working as the practice administrator? – Please include experience as the senior practice management professional, regardless of title.

► PRACTICE ADMINISTRATOR COMPENSATION

■ Fields

Please list your highest level of education – Select the appropriate option from the list.

Professional Certifications – Please list the professional certifications you currently hold, separated by a comma (,).

Sex/Gender – Please select an option from the list provided.

Base Salary – The amount of base compensation (e.g., annual salary) paid to the individual during the reporting year. If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Bonus Compensation – Amount of any bonuses paid to the administrator during the reporting year. If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Other Compensation – Enter any compensation paid to the administrator that is not typically considered a part of an administrator's compensation package (e.g., ownership in a MRI). If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Total Compensation + Bonus – FORMULA: Sum of Base Compensation and Bonus Compensation

Pension – Amount paid by the practice for the individual's pension, including contributions made to the employee's retirement plan (e.g., 401-K). Include amount received from profit sharing agreements here. Please enter \$0.00 in this field if no pension is provided.

Health Insurance – Amount contributed by the practice for the individual's health insurance. Do not include dental/vision insurance if not included in the health insurance policy. If this does not apply, please enter \$0.00 in the box below to ensure the correct calculations are returned.

Disability Insurance – Amount contributed by the practice for disability insurance. Please enter \$0.00 in this field if disability insurance is not provided.

Life Insurance – Amount contributed by the practice for life insurance. Please enter \$0.00 in this field if life insurance is not provided.

Professional Development – Include association membership fees, continuing education, and other professional development activities. If professional development is paid as a fixed annual amount, enter that fixed amount here. If professional development is paid based on a specified number of conferences or educational opportunities, enter the actual amount paid here. If no professional development is provided, enter \$0.00 in this field.

Total Benefits – FORMULA: Sum of Pension, Health Insurance, Disability Insurance, Life Insurance, Car Allowance, and Continuing Education

Total Compensation + Benefits – FORMULA: Sum of Total Compensation + Bonus and Total Benefits

How does this employee pay for AAOE membership dues? – Select from the option list.

How does this employee pay for the AAOE Annual Conference? – Select from the option list.

► EMPLOYEES

■ Purpose

The Employees section collects data on the number and salaries of employees within orthopedic practices. Please note that taxes and benefits are reported separately in a later section and should not be included here.

Related Dashboards: Overhead per FTE Physician, Percentage of Overhead, Percentage of Overhead by Net Collections, FTE Staff per FTE Physician, FTE Data, FTE Employees by 1,000 Visits, and Square Footage

■ Important Notes

Allocating Across Ancillary Services: For benchmarking purposes, it is important to allocate employee expenses across any ancillary services provided by the practice. If you do not have MRI, PT/OT, DME, or any Other Ancillaries, all of your data will be entered under Orthopedics and X-Ray.

Employees with Multiple Responsibilities: Employees may perform job functions that extend across more than one of the job titles listed (e.g., a medical receptionist may also serve as the medical secretary and medical records staff for the practice). You can divide the employee's time across more than one job title, but do not report less than 0.25 FTE for any one title. Instead, identify the job function(s) that make up the most of the employee's time and report their full salary and FTE information there.

For example, if an employee spends 0.50 FTE working as a medical receptionist, 0.40 working in medical records, and 0.10 working as a medical secretary, add the 0.10 FTE spent working as a medical secretary into either medical receptionist or into medical records.

FTE Definition: FTE (Full-Time Equivalent) is calculated for all individuals employed by the practice on a full or part-time basis. A full-time employee who works 40 hours per week would be reflected as 1.0 FTE.

To calculate the FTE of a part-time employee, divide the number of hours worked in an average week by the normal work week of the practice and multiply by the number of months worked per year divided by 12 total months per year.

$$\text{FTE} = (\# \text{ hours worked in average week} / \text{hours in normal work week}) \times (\# \text{ months worked} / 12 \text{ months})$$

■ Revenue Generating Staff

Includes all employees who generate revenue for the practice, excluding physicians.

Data are collected for the following lines of service in this section:

- Orthopedics
- PT/OT
- DME
- Other Ancillary

Physician Assistants & Nurse Practitioners – Salaries and FTE status for Physician Assistants and Nurse Practitioners entered in the PA-NP Productivity and Compensation Section are displayed here (no data entry required).

Physical and Occupational Therapy – Salaries and FTE Status for PT/OT employees who are able to bill for their services, including physical therapists, occupational therapists, physical therapy technicians, and occupational therapy technicians.

Other Revenue Generating Staff - Any other employees who independently generate revenue for the practice. Data collected for Orthopedics, PT/OT, DME, and Other Ancillary.

➤ EMPLOYEES

■ Clinical Support Staff

Employees who provide assistance to physicians and/or nurses in a medical setting and who do not independently generate revenue.

Data are collected for the following lines of service in this section:

- Orthopedics
- X-Ray
- MRI
- PT/OT
- DME
- Other Ancillary

Registered Nurses – Include all RNs employed by the practice who provide clinical support to physicians, PAs, and/or NPs. Data collected for Orthopedics.

Licensed Practical Nurses – Include all LPNs employed by the practice who provide clinical support to physicians, PAs, NPs, and/or RNs. Data collected for Orthopedics.

Medical Assistants/Nurses Aides – Include all medical assistants and nurses aides who provide clinical support for the practices. Include triage here. Medical assistants serving as case managers will be reported here. Data collected for Orthopedics.

Athletic Trainers – Do not include any athletic trainers working specifically to support the PT/OT services of the practice. Do include athletic trainers working as medical assistants, cast technicians, and/or in other related capacities. Data collected for Orthopedics, PT/OT, and DME.

X-Ray Technicians – X-Ray technicians employed by the practice. Data collected for X-Ray.

Cast Technicians – Cast Technicians employed by the practice. Data collected for Orthopedics and DME.

MRI Technicians – MRI technicians employed by the practice. Data collected for MRI.

Physical and Occupational Therapy – Total Salaries and FTEs for PT/OT technicians and assistants who are not able to bill for their services, including physical therapy assistants, occupational therapy assistants, physical therapy technicians, and occupational therapy technicians.

Certified Athletic Trainer – Include certified athletic trainers who are part of the physical therapy service within the practice and who are not able to bill for their services. Data collected for Orthopedics, PT/OT, DME, and Other Ancillary

Other Clinical Support Staff – Enter data for any other clinical support staff here. Data collected for Orthopedics, PT/OT, DME, and Other Ancillary.

■ Patient Care Support Staff

Employees who maintain medical records and/or are responsible for scheduling appointments, checking patients in and out, etc.

Data are collected for the following lines of service in this section:

- Orthopedics
- PT/OT
- MRI
- Other Ancillary

Medical Receptionists – Include employees responsible for patient check-in and check-out here. Also include dedicated appointment schedulers here. Include employees responsible for patient communications. Data collected for Orthopedics, PT/OT, MRI, and Other Ancillary.

➤ EMPLOYEES

■ Patient Care Support Staff

Medical Secretaries/Transcribers – Include employees who perform secretarial functions for the practice and employees who complete medical transcriptions. Data collected for Orthopedics.

Medical Records – Include employees responsible for maintaining and retrieving patient files regardless of patient appointment. Data collected for Orthopedics.

Authorization/Credentialing Staff – Include employees who complete authorization and credentialing functions for the practice. Data collected for Orthopedics, PT/OT, MRI, and Other Ancillary.

Other Patient Care Support Staff – Enter data for any other patient care support staff here. Data collected for Orthopedics, PT/OT, MRI, and Other Ancillary.

■ Employment Taxes and Benefits

Employment Taxes – Enter the amount of employment taxes paid for employees working in orthopedics and each of the ancillary services listed. Include all Federal and state employment taxes here.

Employee Health Related Benefits – Enter the amount of the benefits paid to employees working in orthopedics and each of the ancillary services listed. Include health insurance, disability insurance, life insurance, and other benefits here.

Employee Retirement Plan Contributions – Include contributions made by the practice to the employee's 401-K, profit sharing, money purchase, and other related plans.

■ Business Operations Staff

Employees who perform administrative functions for the practice, including accounting, technology, marketing, etc.

Data are only collected for Orthopedics in this section.

General Administrative – Include employees who provide general office support to the practice. Include the CEO/practice administrator, COO/ director of operations, CFO/finance director, and senior human resources staff here.

Patient Accounting/Billing – Employees responsible for billing, accounts receivable, accounts payable, claims processing, and/or collections for the practice.

General Accounting – Include employees working in the finance and/or accounting departments that are not directly involved with patient accounting. Include staff accountants, controllers, and other related employees here.

Technology – Employees responsible for managing and maintaining the computer networks, computer hardware and software, electronic medical records, patient management systems, telephones, etc. for the practice. Include the CIO or IT director here.

Marketing – Include employees involved in the practice's marketing activities, including websites, printed and electronic communications, and social media. Include the marketing director/manager here.

Other Business Operations Staff – Enter data for any other patient care support staff here.

➤ NON STAFF EXPENSES

■ Purpose

This section includes expenses commonly incurred by orthopedic practices, not including expenses entered in the 'Employees' section.

Related Dashboards: Financial Data, Revenue and Expense Details, Revenue and Expenses by Net Collections, Revenue and Expenses by FTE Provider

■ Facility Expenses

All expenses related to the ownership and/or leasing of the practice's facility(ies). This section includes rent, utilities, and maintenance expenses.

Facility – All expenses related to the ownership and/or leasing of the practice's facility(ies).

Utilities – Include electricity, water, and other utilities.

Maintenance – All fees and expenses related to maintaining the practice's facilities; include common area maintenance (CAM) expenses, housekeeping, and repairs

Other – Any expenses related to the facilities owned and/or operated by the practice that are not specifically identified above.

■ Medical Expenses

This section includes medical equipment, medical supplies, and drugs.

Medical Supplies – The cost of medical supplies used by the practice. Include syringes and other supplies used for injections here. Include casting supplies here.

Medical Equipment – Enter expenses related to owning, leasing, and/or maintaining the equipment used for medical purposes within the practice; includes X-Ray and MRI machines and durable medical equipment. Include surgical instruments here.

Drugs – Expenses related to any drugs maintained and/or administered by the practice. Include both oral and injectable medications here.

Other – Any medical expenses incurred by the practice that are not specifically identified above.

■ Insurance and Officer Compensation Expenses

This section collects data on the malpractice insurance owned by the practice and physician officer/medical director compensation.

Malpractice Insurance – The annual cost of the malpractice insurance purchased by the practice.

Physician Officer/Medical Director Compensation – Total amount paid to the practice's physician officer/medical director; does not include compensation amounts reported on the Physician Productivity and Comp section.

➤ NON STAFF EXPENSES

■ Technology Expenses

Expenses associated with the practice's information technology system, including both hardware and software, are collected in this section.

Computer Hardware – Expenses directly related to the computers, servers, and other information technology equipment used by the practice

Software – Software expenses incurred by the practice; include costs associated with the practice's electronic medical record, practice management system, accounting software, etc. here. Also include expenses related to software licensing, software maintenance, software support, etc.

Telephone – Expenses related to the practice's telephone system.

Broadband – Expenses related to the practice's broadband, internet connection.

Outsourced IT/Technology Services – Amount paid for any outsourced IT functions or technology services. Include fees charged to a hospital owned clinic by the hospital for IT/Technology services.

Other – Any technology expenses incurred by the practice that are not specifically identified above.

■ Office Expenses

Expenses related to the daily operation of the practice are collected in this section. Office expenses include office supplies, postage and shipping, furniture, professional service fees, and personal property tax.

Supplies – All non-medical supplies owned by the practice.

Mailing/Delivery – All expenses related to mailing, delivering, and shipping materials to and from the practice; include postage and courier expenses.

Furniture & Equipment – Expenses related to the practice's office furniture and non-medical equipment.

General Insurance – The annual cost of the insurance owned by the practice, not including malpractice insurance.

Personal Property Tax – All taxes paid on the property owned by the practice.

Other – Any office-related expenses not specifically identified above.

■ Marketing Expenses

This section collects all expenses related to marketing for the practice.

Marketing – Expenses associated with marketing activities performed internally. Include expenses related to website maintenance, electronic and printed communications, and social media

Outsourced Marketing Services - Enter the cost of any marketing functions that are outsourced by the practice. Include expenses related to marketing consultants here. Also include fees charged to a hospital owned clinic by the hospital for marketing services.

➤ NON STAFF EXPENSES

■ Professional/Outsourced Services Expenses

Expenses related to all contracted and professional services used by the practice. Any individuals who perform work for the practice and who do not receive a W-2 will be included here.

Billing – Expenses related to outsourced billing services. Include fees charged to a hospital owned clinic by a hospital to complete billing functions. Include billing service and HMO/PPO expense. Includes revenue cycle management staff.

Accounting – Expenses related to outsourced accounting services. Include fees charged to a hospital owned clinic by a hospital to complete accounting functions.

Transcription/Scribes – Expenses related to outsourced transcription or scribe services or contracted transcribers or scribes.

Collections – Expenses related to outsourced collection services.

Legal – Expenses related to outsourced legal services.

Other – Any professional/outsourced services not specified in this section, except for outsourced IT/technology and marketing services. Includes management fees assessed by a hospital. Specify the expenses included here in Row 58 below.

■ Other Expenses

Any expenses that are not appropriate for entry into the previous sections of the page are reported in this section.

Interest – Any interest paid by the practice during the reporting year.

Depreciation - Expenses included in the practice's accounting to represent depreciation of equipment, facilities, furniture, and other related assets owned by the practice.

Charitable Contributions – Total amount of charitable contributions made by the practice.

Corporate Income Tax – State & Federal – Total amount of state and Federal corporate income tax paid by the practice.

Other – Any other expenses incurred by the practice not specifically identified above.



► INCOME STATEMENT

■ Purpose

This section collects data on revenue and physician expenses. Data entered in the Employees and Expenses sections will be combined with data entered in the Income Statement to calculate Total Revenue, Total Operating Expenses before Physician Expenses, Total Expenses, and Net Income.

Related Dashboards: Revenue by FTE Physician, Financial Data, Revenue and Expense Details, Revenue and Expenses by Net Collections, Revenue and Expenses by FTE Provider, Staff Cost as a Percent of Revenue, Square Footage Cost as a Percentage of Revenue.

■ Section Overview

Revenue – This section specifies the amount of revenue generated by the practice for orthopedic services and each of the ancillaries available in the practice.

Physician Expenses – This section assigns physician compensation and other direct physician expenses to orthopedics and any other ancillary services provided.

Non-Employee Expenses Summary – Provides a summary of non-employee expenses by line of service.

Salaries and Wages Summary – Provides a summary of salaries and wages by employee category (e.g., revenue generating, clinical support staff, patient care support) across all lines of service.

Employee Salary, Taxes and Benefits Summary – Provides a summary of employee salaries, taxes, and benefits by line of service.

Income Statement Overall Summary – Presents an overall statement of income, including revenue, operating expenses before physician expenses, physician expenses, and net income.

■ Fields

Patient Related Revenue – Amount of revenue, including global, technical, and professional revenue. Include patient refunds, bad debt recovery (e.g., collected from a collection agency), injections revenue, Remicaid revenue, hospital emergency room/call coverage payments, specialty stipends, capitation collections, independent medical examinations, and deposition fees here. Revenue should be reported for orthopedics and each ancillary service available in the practice.

Other Revenue – Other revenue generated by the practice. Includes interest income, industrial revenue (e.g., functional capacity evaluations (FCE), work conditioning evaluations, work hardening programs), payroll protection and HHS revenue, rental income, consulting income, management/professional services agreements, and gain/(loss) on sale of assets.

Total Revenue – FORMULA: Sum of Net Patient Revenue and Other Revenue

Physician Compensation and Bonuses – Total practice compensation and bonuses paid to the physicians.

Physician Employment Taxes – All taxes paid by the practice for the physician, including payroll tax, federal unemployment tax, and state unemployment tax.

► INCOME STATEMENT

■ Fields

Physician Health Related Benefits – Enter the amount of benefits paid to the physician. Include health insurance, dental insurance, vision insurance, disability insurance, life insurance, and other benefits here.

Physician Retirement Plan Contributions – Include contributions made by the practice to the physician's 401-K, profit sharing, money purchase, and other related plans.

Physician Benefit Expenses – Include continuing education, dues and licenses, uniforms, travel, and other related expenses here.

Other Physician Direct Expenses – Direct expenses paid to the physician not considered part of the physician compensation and bonuses, taxes, health benefits, retirement plan contributions, or benefit expenses. Include meals, car allowances, pagers, cell phones, and other related expenses here.

Total Physician Expenses – FORMULA: Sum of Physician Compensation and Bonuses, Employment Taxes, Health Related Benefits, Retirement Plan Contributions, Benefit Expenses, and Other Physician Direct Expenses

Total Operating Expense before Physician Expense – FORMULA: Sum of Total Employees Expenses and Total Non Employee Expenses.

Net Income – FORMULA: Total Revenue minus the sum of Total Physician Expenses and Total Operating Expense before Physician Expense



► PAYER MIX

■ Purpose

This section collects detailed data on gross charges, contractual adjustments, net charges, and net collections by payer.

Payers included in this section are:

- Commercial
- Bundled Payments
- Legal/IME
- Medicare
- Medicaid
- Other
- Other Government Programs (e.g., Tricare, charity care)
- Workers Compensation
- Self Pay (include cash based programs)

Related Dashboards: Payer Mix Percentage (Gross Charges; Net Charges), Payer Mix, Net Collections

■ Fields

Gross Charges – Full amount charged to patients for services. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.

Contractual Adjustments – Portion of the charged amount that is written off because of contractual agreements. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned

Other Adjustments – Any non-contractual adjustments made, including write-offs and discounts. This field is used to help balance data reported here with your records. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

Net Charges – FORMULA: Gross charges minus contractual adjustments.

Net Collections – Payments received for services provided to patients, less refunds. Base all gross and net collection reporting on either service date or post date consistently across all data elements requesting collections data.

Average Reimbursement for IMEs – Please enter the average reimbursement received for Independent Medical Examinations during the reporting period. Average = Total IME Collections / Number of IMEs completed.

Average Deposition Fees – Please enter the average fee received for dispositions during the reporting period. Average = Total Deposition Fees / Number of Depositions completed.

Bad Debt Expenses – Include write-offs, write-downs, uncollectible accounts, and non-sufficient funds (NSF) not recouped here.

Percentage of Bad Debt Collections – FORMULA: Bad Debt Expenses / Total Collections

➤ ACCOUNTS RECEIVABLE

■ Purpose

This section collects data on accounts receivable aging.

Related Dashboards: Accounts Receivable, Percentage of Total A/R

The Accounts Receivable categories used in the survey are:

- 0 to 30 Days
- 31 to 60 Days
- 61 to 90 Days
- 91 to 120 Days
- Greater than 120 Days

■ Fields

Insurance Balance – Amount of charges due from insurance and other payers.

Patient Balance – Amount of charges owed by patients.

Percent A/R by Category – FORMULA: Amount of money in each accounts receivable category divided by the total amount currently in accounts receivable

Total Balance – FORMULA: Sum of insurance balance and patient balance.

Average Monthly Charges Outstanding in A/R – Total balance currently in accounts receivable divided by the average monthly gross charges (i.e., total gross charges/12 months)

Average Number of Days Outstanding in A/R – Total balance currently in accounts receivable divided by the average daily gross charges (i.e., total gross charges/365 days).

➤ SQUARE FOOTAGE

■ Purpose

This section collects data on the number of office locations and square footage of facilities operated by the practice.

Related Dashboards: Square Footage per FTE Physician, Square Footage Cost as a Percentage of Revenue, Square Footage

■ Fields

All Facilities Square Footage – The total square footage of all facilities operated by the practice.

Square Footage – Square footage of the facility type specified; Enter square footage of the general orthopedic practice (include X-Ray and DME square footage here). Data collected separately for PT/OT, MRI, and CT.

All Facilities Square Footage – The total square footage of all facilities operated by the practice.

of Locations – Specifies the number of locations operated by the practice for each of the services specified. Data collected for Orthopedics (including X-Ray and DME), PT/OT, MRI, and CT.

▶ ANCILLARY SERVICES

■ Purpose

This section collects data on key metrics for the identified ancillary services.

X-Ray, MRI, and CT data are entered in the 'Imaging Services' table.

Physical/Occupational Therapy and DME are entered in the 'Non-Imaging Services' table.

Related Dashboards: Number of X-Ray Exams per FTE X-Ray Technician, X-Ray Data, MRI Key Metrics, Physical Therapy Key Metrics, Other Ancillary Services

■ Section Overview

Ancillary Services – Collects data on key metrics for the identified ancillary services

Ambulatory Surgery Centers – Collects information about Ambulatory Surgery Centers associated with the practice.

■ Ancillary Service Types

▶ Imaging Services

X-Ray – Services provided utilizing analog, computed radiography, and direct radiography machines.

MRI – Magnetic resonance imaging machines used for neuro-and musculoskeletal imaging. Data is requested for the following MRI machine types: Closed, Open, and Extremity

CT – Computed tomography machines used for detailed internal images of the body.

DXA – Dual-energy X-Ray absorptiometry scans for the diagnosis of osteoporosis.

▶ Non-Imaging Services

Physical Therapy – Examination and manual manipulation of musculoskeletal patients for the treatment of musculoskeletal injuries

Occupational Therapy – Examination and therapy focused on improving a person's ability to perform the tasks that they need to do in their everyday life.

DME – DME for this survey means walkers, canes, and wheelchairs.

Off-the-Shelf Orthotics – Orthotics that require minimal self-adjustment. Identified by codes L0120, L0160, L0172, L0174, L0450, L0455, L0457, L0467, L0469, L0621, L0623, L0625, and L0628.

Other Orthotics – Orthotics that require fitting by a person with specialized education or knowledge, orthotics that are custom fabricated for the patient, or orthotics that are not identified by CMS as "off-the-shelf". Identified by all other orthotic HCPCS L codes.

Prosthetics – Device that replaces all or part of an internal body organ or replaces all or part of the function of a permanently inoperative or malfunctioning body organ.

▶ ANCILLARY SERVICES

■ Fields

Service Type – Select an option from the list provided.

of Patients – Indicate the number of patients receiving the listed service at your practice.

Machines – Indicate the number of closed, open, and mobile machines used for performing the identified service at your practice.

of Visits - Indicate the total number of visits related to the identified service including E/M visits, fittings, etc.

Volume – Captures the relevant unit of volume for each of the specified ancillary services:

- X-Ray: Number of X-Rays taken; studies not images
- MRI: Number of MRI Scans
- CT: Number of CT Scans
- PT/OT: Number of Visits
- DME: Number of Units Sold

■ Ambulatory Surgery Centers

Does your practice have an ASC? – Please select Yes or No to indicate whether your practice has an ASC. If you select No, you will be able to proceed to the next section.

Wholly Owned by Practice Owners – Please specify the number of ASC facilities for which the practice has majority ownership.

Partially Owned with Other Physicians – Please specify the number of ASC facilities partially owned with other physicians.

Partially Owned with Hospital – Specify the number of ASC facilities partially owned with a hospital.

Partially Owned with Management Company – Specify the number of ASC facilities partially owned with a management company.

Partially Owned with Other Physicians and Hospital – Please specify the number of ASC facilities partially owned with other physicians and a hospital.

Partially Owned with Other Physicians and Management Company – Please specify the number of ASC facilities partially owned with other physicians and a management company.

Ability to Make Purchasing Decisions – Select Yes or No to indicate whether the practice makes purchasing decisions for the ASC.

Does the ASC perform total joint replacements? – Select Yes or No to indicate whether the ASC performs total joint replacements.

of Total Joint Replacements done in an ASC – Specify the number of total number of joint replacements physicians in your practice performed in an ASC.

of Total Joint Replacements in ASC on patients over 65 – Indicate the number of total joint replacements performed by physicians in your practice on patients age 65 and older in an ASC.

➤ RECRUITMENT

■ Purpose

This section collects data on the starting salaries, signing bonuses, and other types of assistance provided to new physicians hired by the practice.

Related Dashboards: Recruitment Salary, Bonuses, and Other Assistance and Recruitment Additional Data

■ Fields

Recruiting Specialty – Select the primary specialty of each physician recruited during the reporting year from the list provided.

Starting Salary – Starting salary of physicians hired during the reporting period. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

■ Fields

Signing Bonus – Amount paid to new physicians as a signing bonus. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

Moving Expenses – Amount provided to new physicians to cover moving expenses. If this does not apply, please enter a “0” in the box below to ensure the correct calculations are returned.

Hospital Assistance (Yes/No) – Indicate whether a hospital provides assistance to new employees as part of recruitment efforts.

Ownership Timeline – Specify the number of years an employee must work for the practice before being eligible for ownership benefits

Did you lose candidates to a hospital – Enter Yes or No using the list provided.



➤ ADMINISTRATIVE PHYSICIANS / END OF CAREER

■ Purpose

Collects information on administrative physicians and the practice's plan for transition out of the orthopedic practice at the end of a physician's career.

■ Section Overview

Administrative Physicians – Collects information on a practice's administrative physicians including compensation.

End of Career – Collects information on how orthopedic physicians retire.

■ Administrative Physicians

Compensation amount for the Physician President/Chair of Board of Directors – Enter the amount of compensation provided to a physician who has administrative responsibilities associated with serving as the president or chair of the practice's board of directors.

Do other administrative physicians receive compensation? – Using the list provided, indicate whether other administrative physicians (i.e., not including the physician president/chair of the board of directors) receive compensation for their administrative responsibilities.

Compensation amount for the Physician President/Chair of Board of Directors – Enter the amount of compensation provided to a physician who has administrative responsibilities associated with serving as the president or chair of the practice's board of directors.

What is their title? – Specify the title(s) of the physician(s) who are performing other administrative functions for the practice and/or the practice's board of directors. Please separate each response by a comma.

■ End of Career

At what age must a physician notify the practice of anticipated retirement? – Numeric values only. Leave blank if no age is defined by the practice.

How much advance notice does the practice require retiring physicians to give? – Please enter only values indicating a length of time (i.e. 1 year, 18 months) for a physician to give a notice of intent to retire. Leave blank if no age defined by the practice.

Do you have a retiring physician slow down/transition plan? – Select Yes or No from the list provided.

Does your practice allow partners to be bought out and become employees for transition planning? – Select Yes or No from the list provided.

At what age may a physician elect off emergency department call? – Leave blank if no age defined by the practice.

At what age may a physician elect off of group call? – Leave blank if no age defined by the practice.

Are clinicians required to undergo a cognitive and physical exam to assess skills at a defined age? - Select Yes or No from the list provided.

What is that age? – Please enter numeric values only (e.g., 65).

➤ CALL DATA

■ Purpose

This section collects data on the annual, weekday, and weekend payments to the practice for providing on-call surgeons and physicians to an affiliated hospital.

■ Fields

Call Type – Select the type of call from the list provided.

- Levels are determined by the facility in which the service is provided.
- Emergency Room
 - Select Level 1 if the ER is located in a Level I Trauma Facility
 - Select Level 2 if the ER is located in a Level II Trauma Facility
 - Select Level 3 if the ER is located in a Level III Trauma Facility
- Trauma and Hand Call
 - Select Level 1 if the service was provided in a Level I Trauma Facility
 - Select Level 2 if the service was provided in a Level II Trauma Facility
 - Select Level 3 if the service was provided in a Level III Trauma Facility

Call Specialty – Select the specialty of the physician.

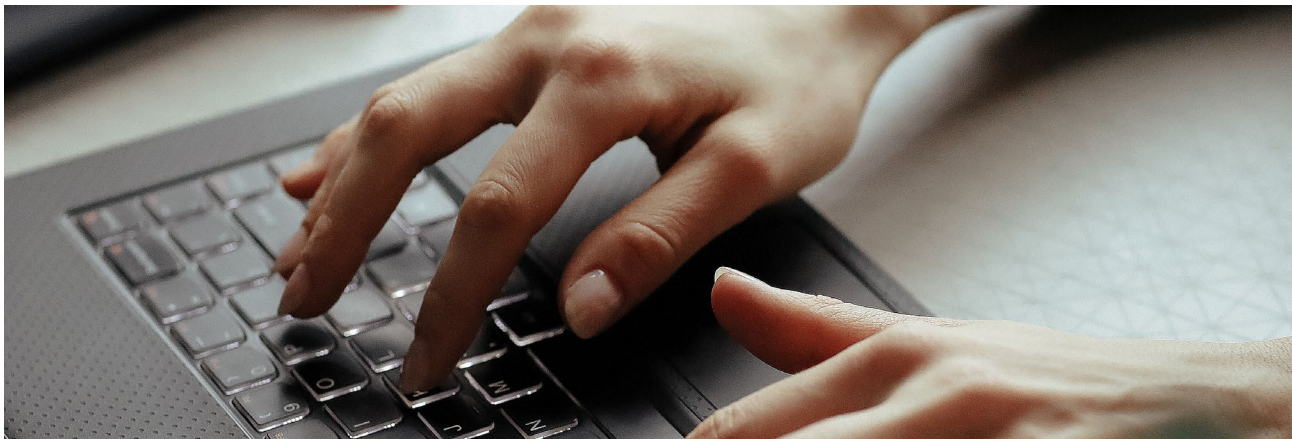
Annual Call Payments – Enter the amount paid annually for the Call Type selected. If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Weekday Call Payments – Enter the amount paid per weekday for the Call Type selected. If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Weekend Day Payment – Enter the amount paid per weekend day for the Call Type selected. If this does not apply, please enter a '0' to ensure the correct calculations are returned.

Payment unit used for on call coverage payments – Select the payment unit used for On Call Coverage from the list provided. If another payment unit is used, please convert to hours, days, or per night for benchmarking purposes.

Amount group receives for on call coverage – Enter the amount the group receives per unit for on call coverage.



➤ DATABASES AND INFORMATION SYSTEMS USED

■ Purpose

This section includes questions on a variety of topics of interest to orthopedic practices. Data related to the specific data systems used by AAOE members informs future enhancements to the data analytics and benchmarking resources available to members. Additionally, the data requested related to participation in quality initiatives are important to AAOE's ongoing advocacy and government affairs initiatives.

■ Fields

Practice Management System – Specify the practice management system used by the practice from the list provided.

Electronic Medical Record – Specify the EMR used by the practice from the list provided.

Accounting Software – Specify the accounting software used by the practice from the list provided.

Data Analytics – Specify the data analytics tool used by the practice from the list provided.

Payroll Vendor – Specify the payroll vendor used by the practice from the list provided

Picture Archiving and Communication System (PACS) – Specify the PACS used by the practice from the list provided.

Outsourced Services – Please indicate the service(s) that you have outsourced (i.e., use an external vendor) at your practice.

➤ GOVERNMENT AFFAIRS DATA

■ Purpose

This section asks about topics that are currently a part of the AAOE policy agenda. Your responses to these questions will help us better understand how certain public policies affect your practice and allow AAOE to better represent you in Washington, DC.

■ Section Overview

Malpractice Insurance – Collects information on coverage limits, deductibles, and the type of malpractice insurance maintained by practices.

Electronic Health Records – Collects information about the EHR used in your practice.

Quality Initiatives – Captures information on the type and level of participation in MIPS, BPCI-A, CJR and other quality initiatives (e.g., Accountable Care Organizations).

Additional Questions – Collects information on the practice's participation in co-management agreements, real estate ownership, and use of tele-medicine.

■ Malpractice Insurance

Malpractice Insurance: Coverage Limit – Specify the coverage limit that physicians in your practice are required to maintain.

Malpractice Insurance Type – Select the type of malpractice insurance maintained by physicians in the practice.

Malpractice Insurance Deductibles – Specify the deductibles that are included in the malpractice insurance coverage maintained by physicians in the practice.

■ Electronic Health Records

EHR Certification Year – Select your EHR certification year from the list provided.

Does your EHR/EMR connect to other EHRs? – Select Yes or No from the list provided.

■ Quality Initiatives

MIPS Reporting Option – Please select the reporting option that your practice intends to use for the current MIPS performance year.

MIPS Participation Option – Please select the option(s) from the list to indicate whether your providers will participate in MIPS as individuals, as a group, virtual group, subgroup, and/or APM entity during the current performance year.

Other Quality Programs – Select the Quality Programs that your practice participated in during the reporting year.

■ Additional Questions

Practice Management Models - Using the options provided, please indicate whether your practice currently operates under any of the following arrangements (select all that apply).

Does Your Practice Own Its Real Estate – Select Yes or No from the list provided to indicate whether the practice owns its real estate.

Tele-medicine – Select Yes or No to indicate whether your practice provides tele-medicine services.

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