

Hospital-Based Physician Compensation and Work Effort Survey Report

Survey data effective January 1, 2019



2019

HOSPITAL-BASED PHYSICIAN COMPENSATION AND WORK EFFORT SURVEY REPORT

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SECTION I: INTRODUCTION



INTRODUCTION

SullivanCotter, Inc. (SullivanCotter) is pleased to present the 2019 *Hospital-Based Physician Compensation and Work Effort Survey Report.* Survey participants submitted data from January 2019 to April 2019 for the 2018 calendar year or the most recent fiscal year. Data were reported by 51 health care organizations across the United States. The survey participants are listed in appendix A.

SullivanCotter ensures that all organization-specific data remain strictly confidential. While individual organization names appear in the survey participant list, no correlation to an organization's data is provided.

The data are effective as of January 1, 2019.

This report is organized into four sections:

Section I presents general information regarding this survey report.

Section II presents general survey participant characteristics.

Section III presents compensation practices for all specialties, including work standards, paid time off (PTO) practices, compensation approaches and incentive compensation and shift pay practices.

Section IV presents compensation and work effort practices by specialty.

The following guidelines are used in this report:

- Data that are insufficient to include in the report are noted in tables as isd. Conditions for insufficient data include the following:
 - When fewer than five organizations provided data.
 - When one organization represented more than 25% of the sample.
- All compensation data reflect a 1.0 full-time equivalent (FTE).
- In sections III and IV, reported productivity for anesthesiology and pediatrics anesthesiology reflects American Society of Anesthesiologists (ASA) units.
- Sections III and IV include both reported and equated data for standard hourly rates, shift-based rates and annual base salaries. SullivanCotter used the following methodology to calculate equated data sets:
 - Equated standard hourly rates reflect annual base salaries divided by the number of required minimum annual hours.
 - Equated shift-based rates reflect reported and equated standard hourly rates multiplied by 10 hours.

INTRODUCTION

- Equated annual base salaries reflect standard hourly rates multiplied by the number of required minimum annual hours.
- Participant counts (n) listed are based on the number of organizations that responded to each corresponding question unless otherwise noted.

Questions and comments about this survey report should be directed to the following individuals:

SECTION II:

CHARACTERISTICS OF SURVEY PARTICIPANTS



CHARACTERISTICS OF SURVEY PARTICIPANTS

ORGANIZATION CLASSIFICATION

TABLE 2.1 – Organization Type

Organization Type							
Туре	Independent or Affiliated (n = 30)	Owned (n = 21)	All Organizations (n = 51)				
Health System	67%	48%	59%				
Hospital	23%	33%	27%				
Academic Medical Center	13%	19%	16%				
Independent Medical Group	3%	29%	14%				
Practice Management Company	0%	0%	0%				
Note: Percentages will not add to 100% due to multiple response categories.							

OWNERSHIP

TABLE 2.2 – Number of Entities for Which the Parent Organization Reported

Number of Entities for Which the Parent Organization Reported ⁽¹⁾						
Mean Median						
3	2					
n = 16 (1) Reported data only include organizations that are health systems.						

TABLE 2.3 – Number of Locations Under Management

Number of Locations Under Management ⁽¹⁾						
Mean Median						
isd isd						
n = 0 (1) Reported data only include organizations that are practice management companies.						

SERVICES PROVIDED

TABLE 2.4 – Services Provided to One or More Trauma Centers

Services Provided to One or More Trauma Centers					
Status Percentage					
Provide	69%				
Do Not Provide	31%				
n = 49					

CHARACTERISTICS OF SURVEY PARTICIPANTS

SERVICES PROVIDED continued

TABLE 2.5 - Trauma Center Levels

Trauma Center Levels ⁽¹⁾					
Level	Percentage				
Level I					
Level II					
Level III					
Level IV					
n = 34					
(1)Reported data only include organizations that provide services to one or more trauma centers. Note: Percentages will not add to 100% due to multiple response categories.					

TABLE 2.6 – Services Provided to Rural Access Clinics

Services Provided to Rural Access Clinics					
Status Percentage					
Provide					
Do Not Provide					
n = 47					

SECTION III:

COMPENSATION PRACTICES



COMPENSATION PRACTICES

WORK STANDARDS

TABLE 3.1 – PTO Hours Included in Minimum Annual Required Clinical Hours for 1.0 FTE Clinical Status

PTO Hours Included in Minimum Annual Required Clinical Hours for 1.0 FTE Clinical Status					
Status Percentage					
Include PTO Hours					
Do Not Include PTO Hours					
Varies by Specialty					
n = 41					

TABLE 3.2 - Holiday Hours Included in Minimum Annual Required Clinical Hours for 1.0 FTE Clinical Status

Holiday Hours Included in Minimum Annual Required Clinical Hours for 1.0 FTE Clinical Status					
Status Percentage					
Include Holiday Hours					
Do Not Include Holiday Hours					
Varies by Specialty					
n = 41					

TABLE 3.3 – Minimum Annual Required Clinical Hours for 1.0 Clinical FTE Status

Minimum Annual Required Clinical Hours for 1.0 Clinical FTE Status ⁽¹⁾							
Code	Specialty	n	25th Percentile	Mean	Median	75th Percentile	
2000	Anesthesiology	10					
1060	Critical Care Medicine	20					
2030	Emergency Medicine	21					
1185	Hospitalist	26					
1196	Hospitalist – Combined ⁽²⁾	26					
1260	Hospitalist – Nocturnist	14					
2051	Hospitalist – Surgicalist	1	isd	isd	isd	isd	
1195	Neurology – Neurocritical Care	2	isd	isd	isd	isd	
1245	Obstetrics/Gynecology – Laborist	10					
4100	Pathology – Anatomic and Clinical	8					
4005	Pediatrics – Anesthesiology	1	isd	isd	isd	isd	
1422	Pediatrics – Combined ⁽³⁾	18					
1384	Pediatrics – Critical Care Medicine	8					
2035	Pediatrics – Emergency Medicine	6					
1187	Pediatrics – Hospitalist	14					
1240	Pediatrics – Neonatal-Perinatal Medicine	11					
1417	Pediatrics – Urgent Care	4	isd	isd	isd	isd	
4040	Radiology – Diagnostic	10					
4030	Radiology – Interventional	6					
4020	Radiology – Neurointerventional	2	isd	isd	isd	isd	
2295	Trauma Surgery	7					
1490	Urgent Care	11					

⁽¹⁾Reported data reflect computed base hours; any PTO or holiday hours were excluded.

⁽²⁾ Hospitalist – combined includes hospitalist, hospitalist – nocturnist, hospitalist – surgicalist and obstetrics/gynecology – laborist.

⁽³⁾ Pediatrics – combined includes pediatrics – anesthesiology, pediatrics – critical care medicine, pediatrics – emergency medicine, pediatrics – hospitalist, pediatrics – neonatal-perinatal medicine and pediatrics – urgent care.

SECTION IV:

COMPENSATION AND WORK EFFORT PRACTICES BY SPECIALTY



ANESTHESIOLOGY



ANESTHESIOLOGY

TABLE 4.1 – Minimum Annual Required Clinical Hours for 1.0 Clinical FTE Status

Minimum Annual Required Clinical Hours for 1.0 Clinical FTE Status								
Category	n	25th Percentile	Mean	Median	75th Percentile			
Base Hours ⁽¹⁾	10							
Excluding PTO and Holiday Hours	6							
Excluding PTO Hours	6							
Excluding Holiday Hours	7							
Including PTO Hours	3	isd	isd	isd	isd			
Including Holiday Hours	2	isd	isd	isd	isd			
Including PTO and Holiday Hours	2	isd	isd	isd	isd			
⁽¹⁾ Reported data reflect computed base hours; any PTO or holiday hours were excluded.								

TABLE 4.2 – Actual Annual Clinical Hours Worked per Typical 1.0 FTE Physician

Actual Annual Clinical Hours Worked per Typical 1.0 FTE Physician							
Category	n	25th Percentile	Mean	Median	75th Percentile		
Base Hours	13						
Excluding PTO and Holiday Hours	7						
Excluding PTO Hours	7						
Excluding Holiday Hours	8						
Including PTO Hours	1	isd	isd	isd	isd		
Including Holiday Hours	0	isd	isd	isd	isd		
Including PTO and Holiday Hours	0	isd	isd	isd	isd		

TABLE 4.3 – Require Minimum Annual Number of Shifts for 1.0 Clinical FTE Status

Require Minimum Annual Number of Shifts for 1.0 Clinical FTE Status	
Status	Percentage
Require	
Do Not Require	
n = 10	

TABLE 4.4 – Minimum Annual Required Shifts for 1.0 Clinical FTE Status

	Minimum Annual Required Shi	fts for 1.0 Clinical FTE Status ⁽¹⁾	
25th Percentile	Mean	Median	75th Percentile
isd	isd	isd	isd
n = 3 (1)Reported data only include organizations that require a minimum number of shifts for 1.0 clinical FTE status.			

TABLE 4.5 – Number of Clinical Hours Worked per Shift

		Number of Clinical Ho	ours Worked per Shift		
Shift	n	25th Percentile	Mean	Median	75th Percentile
Weekday	8				
Weeknight	5				
Weekend	4	isd	isd	isd	isd

APPENDIX A: SURVEY PARTICIPANTS



SURVEY PARTICIPANTS

ORGANIZATION	CITY	STATE
Allina Health System	Minneapolis	MN
Altru Health System	Grand Forks	ND
Ann & Robert H. Lurie Children's Hospital of Chicago	Chicago	IL
Aurora Health Care	Milwaukee	WI
BayCare Health System	Clearwater	FL
Baystate Health	Springfield	MA
Billings Clinic	Billings	MT
Cambridge Health Alliance Physicians Organization	Medford	MA
Cambridge Medical Center	Cambridge	MN
Carle Physician Group	Urbana	IL
CentraCare Clinic	St. Cloud	MN
Centura Health	Centennial	CO
Cincinnati Children's Hospital Medical Center	Cincinnati	ОН
Core Physicians	Exeter	NH
Dartmouth-Hitchcock Clinic	Lebanon	NH
Emergency Physicians of the Rockies	Fort Collins	CO
Essentia Health	Duluth	MN
Fairview Health Services	Minneapolis	MN
Geisinger Clinic	Danville	PA
Gundersen Health System	La Crosse	WI
Hennepin Healthcare System	Minneapolis	MN
Hospital for Special Surgery	New York	NY
Intermountain Medical Group	Salt Lake City	UT
Lahey Health	Burlington	MA
Lexington Medical Center	West Columbia	SC
Marshfield Clinic	Marshfield	WI
McLeod Regional Medical Center Florence	Florence	SC
Memorial Sloan Kettering Cancer Center	New York	NY
Mercy Hospital	Coon Rapids	MN
Mercy Medical Group	Sacramento	CA
Methodist Health System	Dallas	TX
Northern Colorado Anesthesia Professionals	Fort Collins	CO
North Memorial Health Care	Robbinsdale	MN
Norton Medical Group	Louisville	KY
Orlando Health	Orlando	FL

Note: This list does not include two organizations that wished to remain anonymous.

SURVEY PARTICIPANTS

ORGANIZATION	CITY	STATE
Rochester Regional Health System	Rochester	NY
Sanford Health	Sioux Falls	SD
Scripps Health	San Diego	CA
Sentara Medical Group	Norfolk	VA
Signature Healthcare	Brockton	MA
Southcoast Health System	New Bedford	MA
Southern Illinois Healthcare	Carbondale	IL
The Queen's Health Systems	Honolulu	HI
United Health Services	Binghamton	NY
United Hospital	St. Paul	MN
University Physicians	Columbia	MO
Vidant Health	Greenville	NC
WakeMed Health & Hospitals	Raleigh	NC
Wentworth-Douglass Hospital	Dover	NH

Note: This list does not include two organizations that wished to remain anonymous.

APPENDIX B:

SPECIALTY LIST AND SUMMARIES



SPECIALTY LIST AND SUMMARIES

HOSPITAL BASED

2000	Anesthesiology
1060	Critical Care Medicine
2030	Emergency Medicine
1185	Hospitalist
1196	Hospitalist – Combined
1260	Hospitalist – Nocturnist
2051	Hospitalist – Surgicalist
1195	Neurology – Neurocritical Care
1245	Obstetrics/Gynecology – Laborist
4100	Pathology – Anatomic and Clinical
4005	Pediatrics – Anesthesiology
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1417	Pediatrics – Urgent Care
4040	Radiology – Diagnostic
4030	Radiology – Interventional
4020	Radiology – Neurointerventional
2295	Trauma Surgery
1490	Urgent Care

APPENDIX C:

TERMS AND DEFINITIONS



APPENDIX D:

ABOUT SULLIVANCOTTER



ABOUT SULLIVANCOTTER

SullivanCotter partners with health care and other not-for-profit organizations to drive performance and improve outcomes through the development and implementation of integrated workforce strategies. Using our time-tested methodologies and industry-leading research and information, we provide data-driven insights and expertise to help organizations align business strategy and performance objectives – enabling our clients to deliver on their mission, vision and values.

For more information, visit www.sullivancotter.com or call 888.739.7039.

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