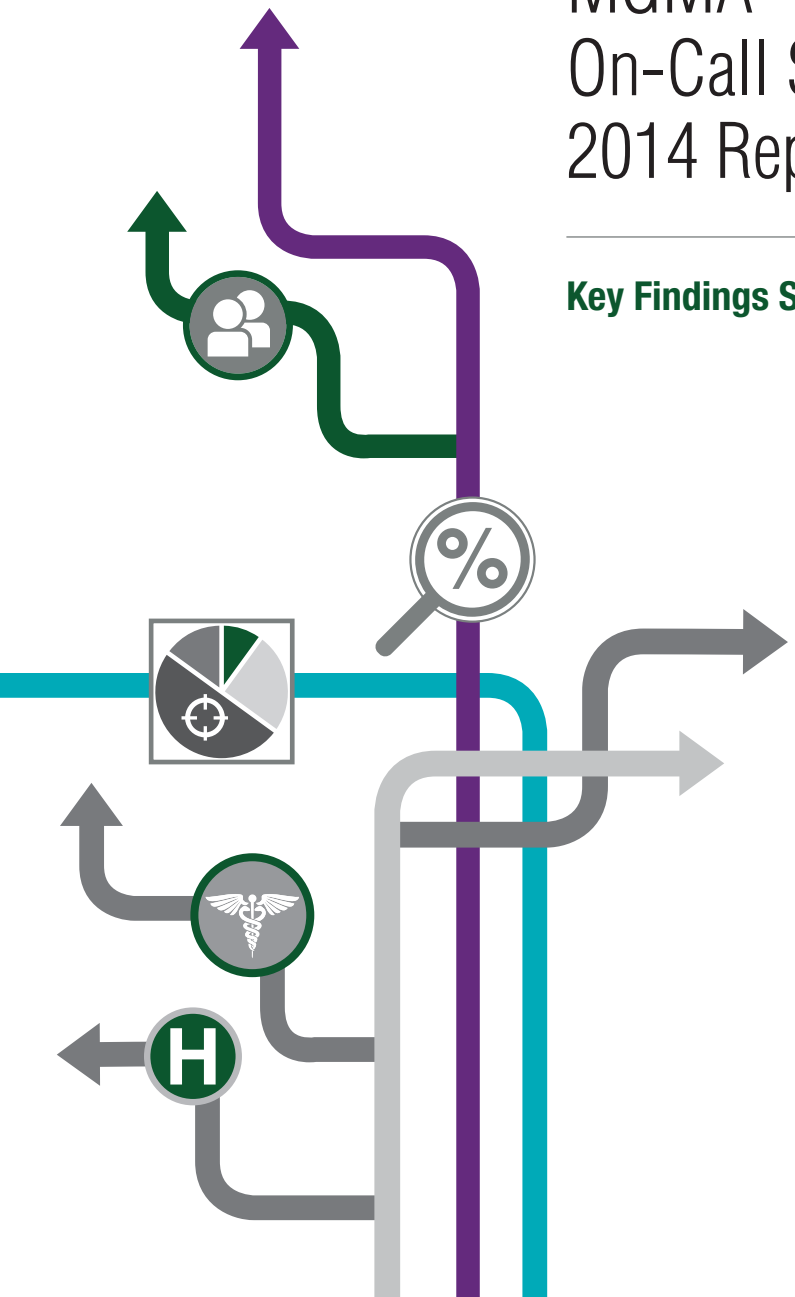
MGMA On-Call Survey: 2014 Report Based on 2013 Data

Key Findings Summary Report



Medical Group Management Association

MGMA On-Call Survey: 2014 Report Based on 2013 Data

Each year, MGMA surveys its members and nonmembers to obtain the most recent on-call data. This year's survey remains a significant benchmarking tool, representing

252 groups and
2,513 providers.

The Data Solutions analysts reached the following results and conclusions by current-year trend analyses. These analyses provide a description on factors that influence current compensation. The median is used in the analysis, and the report reflects data submitted for the 2013 fiscal year.

On-Call Compensation Rates Vary across Geographic Sections

Primary Care and **Nonsurgical Specialists** report their highest daily rates for taking call in the western geographic section ($1,103 and $750, respectively). **Surgical Specialists** report their highest daily rate in the southern section at $838. **Primary Care, Nonsurgical Specialists**, and **Surgical Specialists** all report their lowest daily rate for taking call in the midwest ($219, $200, and $350, respectively).

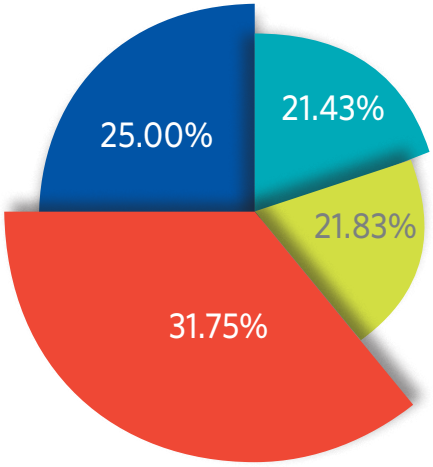
Surgical Specialists and Nonsurgical Specialists Report Opposite Compensation Trends with Practice Size

Surgical Specialists report the greatest amount of on-call compensation in practices with 76 or more FTE physicians and the lowest amount of compensation in practices with 25 or fewer FTE physicians ($657 and $500 per day, respectively). **Nonsurgical Specialists** report the opposite trend with the greatest on-call compensation in practices with 25 or fewer FTE physicians at $600 per day and $438 per day in practices with 76 or more FTE physicians. **Primary Care** physicians report the same amount for both practice sizes at $250 per day.

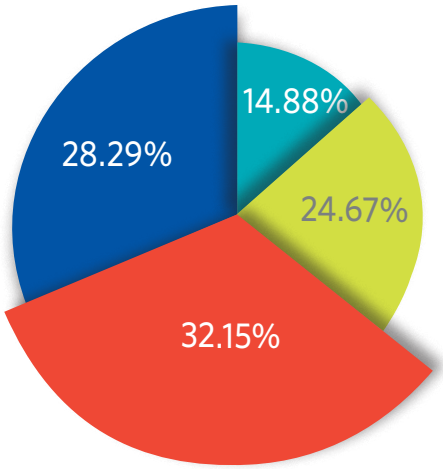
Providers Covering Call for Multiple Organizations Do Not Necessarily Receive More Compensation

Primary Care and **Surgical Specialists** receive more compensation covering call across multiple organizations ($425 and $750 per day for covering multiple organizations vs. $250 and $558 for not covering multiple organizations). **Nonsurgical Specialists** report the inverse effect with providers receiving more compensation for not covering call across multiple locations ($500 and $450, respectively).

Survey Participation by Geographic Section



Groups

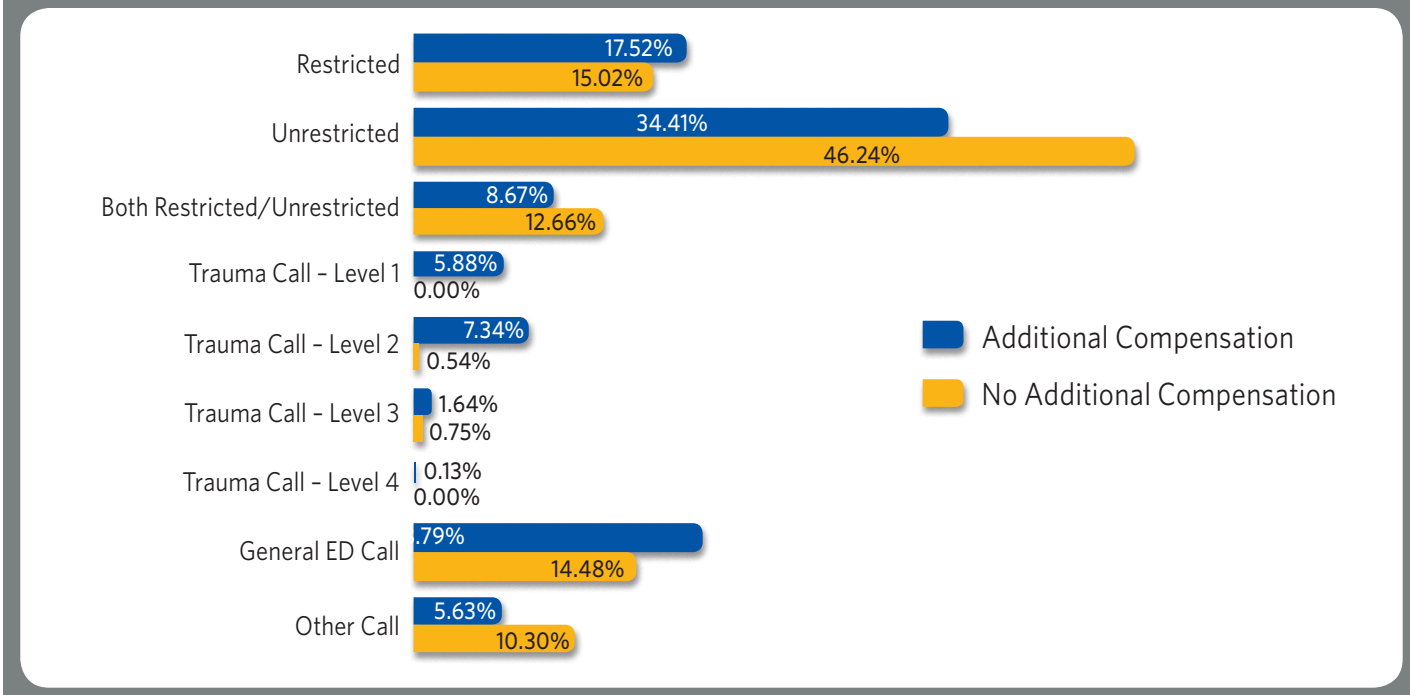


Providers

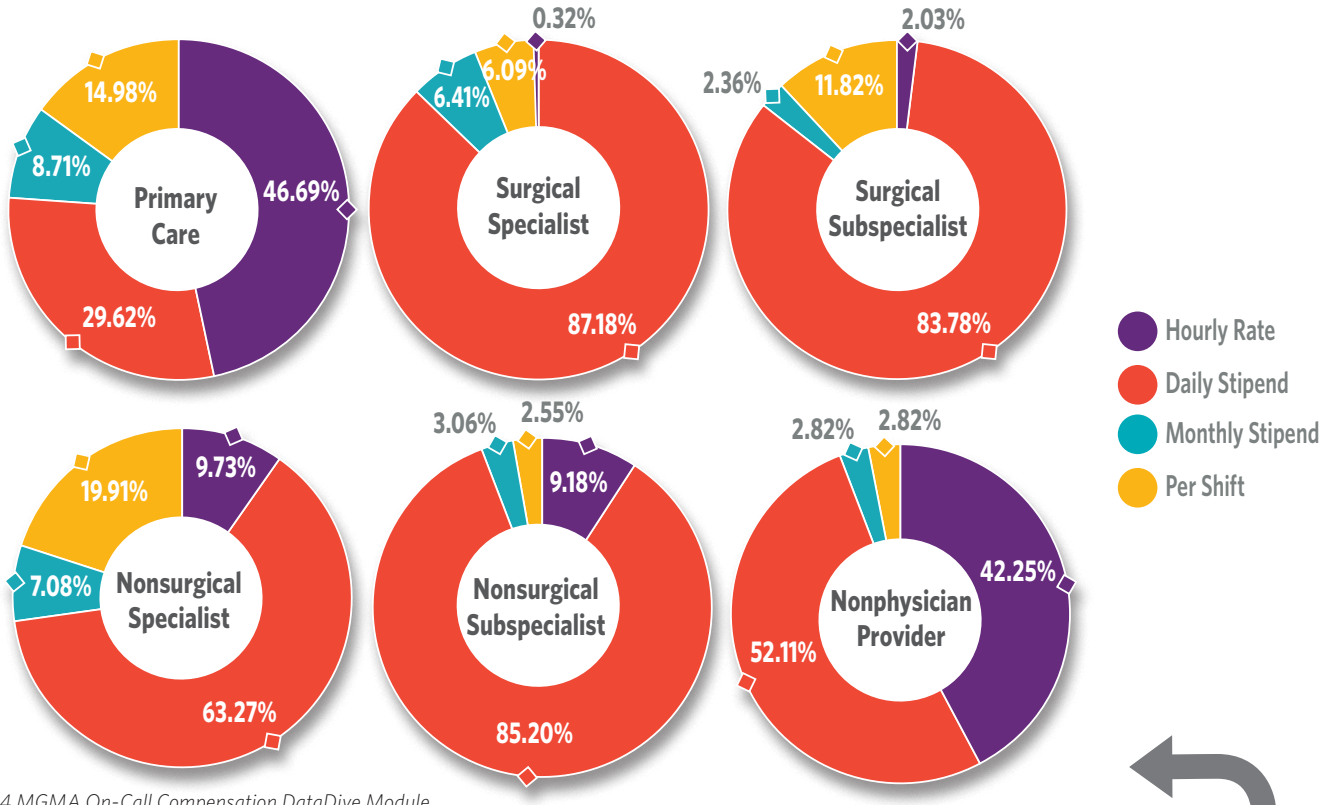
- Eastern
- Midwest
- Southern
- Western

©MGMA. All rights reserved.

On-Call Provider Percentage
by Type of Coverage Provided



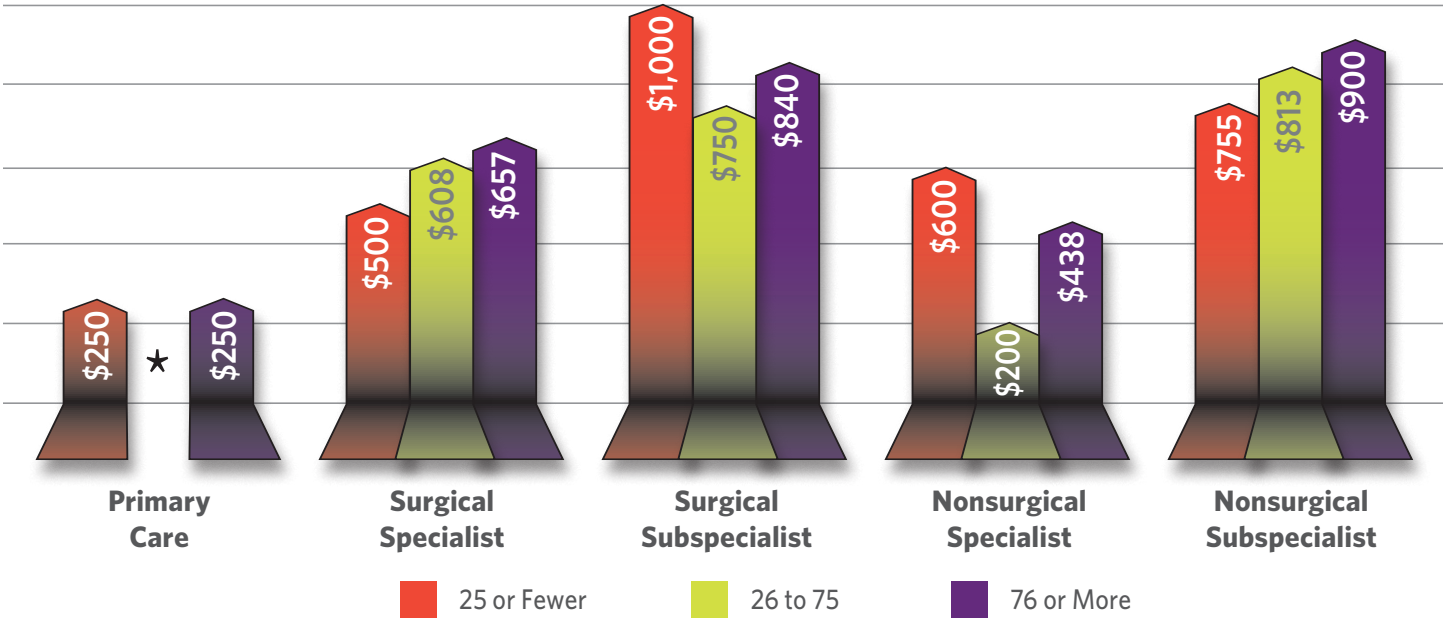
On-Call Provider Compensation Method
by Specialty Classification



**From 2014 MGMA On-Call Compensation DataDive Module*

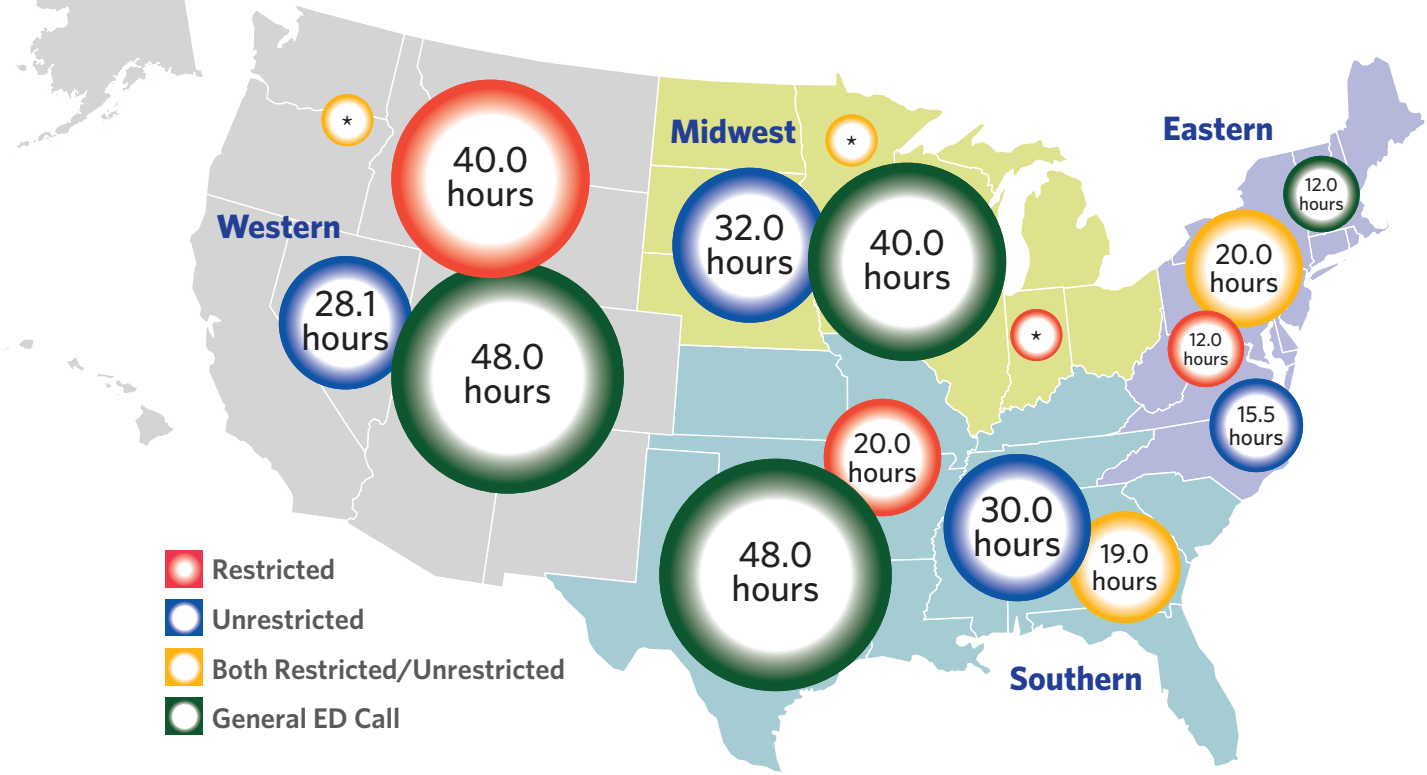
©MGMA. All rights reserved.

On-Call Provider Compensation Daily Rate
by Number of FTE Physicians



* *Insufficient participation data*

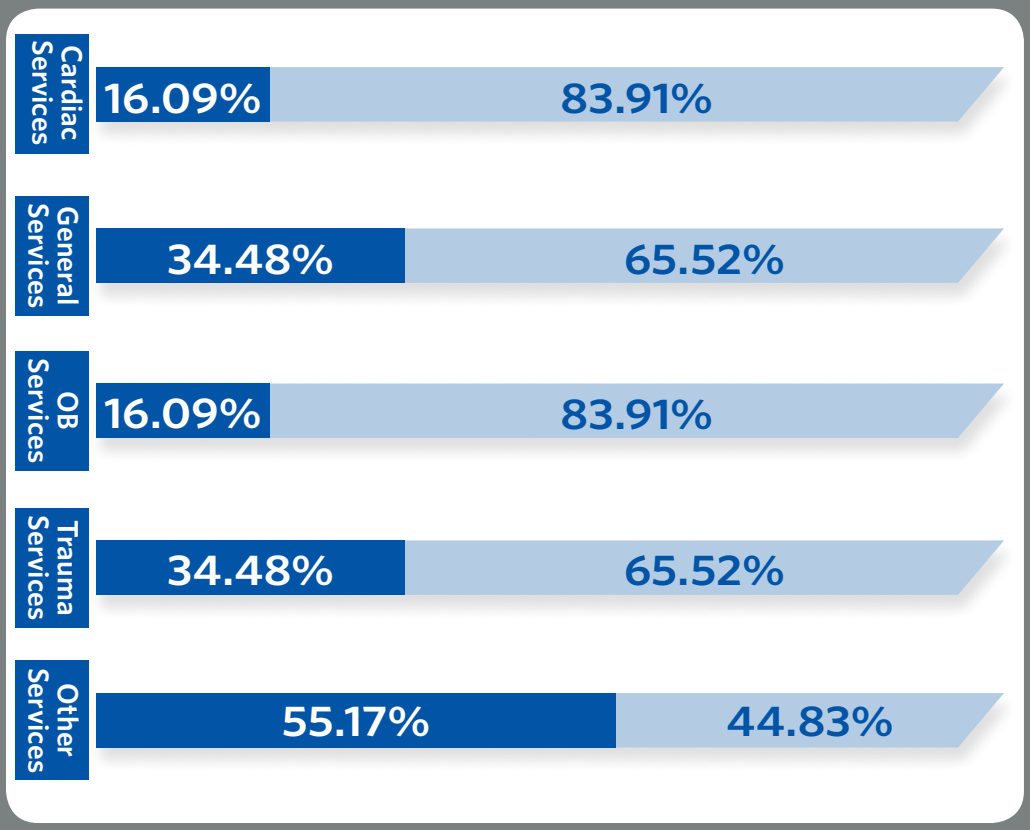
On-Call Hours by Type of Coverage for Unpaid Call — *by Geographic Section*



* *Insufficient participation data*

©MGMA. All rights reserved.

Group Paid On-Call Compensation
by Services Provided



Service Provided **Service Not Provided**

Key Findings

- **Surgical Subspecialists** report the highest on-call daily rate at **4 times the amount Primary Care** physicians receive
- Median holiday rates for taking call vary by specialty. **Surgical Subspecialists** and **Nonsurgical Subspecialists report the highest rates** ($1,200 and $1,100, respectively)
- **Nonphysician Providers earn more per hour** for taking call than **Primary Care** physicians
- More than **60 percent** of providers receive a **daily stipend** for taking call. Median daily stipend for **Primary Care** physicians is $250 and for **Nonphysician Providers** is $500
- Providers not receiving additional compensation for taking call **spend the most time** taking **unrestricted call** and the **least amount of time taking restricted call** (30 hours per week vs. 20)
- About **one third** of providers not receiving additional compensation for taking call **receive additional time off**

©MGMA. All rights reserved.