General Information

- Report data effective as of **January 1, 2014**.
- The completed survey questionnaire is due by **April 11, 2014**.
- Data for issuance of final report: July 15, 2014.
- Survey period: calendar year 2013 or most recently completed fiscal year.
- For questions regarding the survey, contact the following individual:
  
  Sara J. Loos, CCP  
  Team Lead, Physician Compensation Association Surveys  
  Sullivan, Cotter and Associates, Inc.  
  612.294.3648  
  saraloos@sullivancotter.com

Overall Instructions

1. Please use the specialty code listing found in this document.

2. **Do not** gross up partial FTE or salaries, productivity, patient visits and consultations or work RVUs to annualized figures. This will be done by SullivanCotter.

3. Please fill out as much of the survey as possible in order to have the highest quality of information possible. We realize that there may be portions you may not be able to answer.

4. All returned surveys will be retained in a confidential file by **SullivanCotter**. Only summarized information from the aggregate database will be reported.
Description

This survey questionnaire is divided into five sections.

I. Individual Physician Compensation and Productivity Data for provider data from January through December 2013 or your medical group’s most recent fiscal year.

II. Starting Provider Salaries for positions filled from January through December 2013.

III. Administrative and Physician Leadership Data for selected administrative positions as of December 2013 or your medical group’s most recent fiscal year-end.

IV. Physician Compensation Profile relates to your compensation plan, revenue mix and general information about your medical group.

V. Financial Profile relates to your financial and staffing data. This section has four parts: financial operations profile, financial profile by specialty, organizational profit or loss statement and administrative operations profile.

As a survey participant, you will receive a complimentary hard copy survey report. The hard copy survey report contains national and regional summary tables of clinical compensation, gross productivity, work RVUs and productivity ratios for physician specialties and advanced practice clinicians. It also contains national summary tables of net collections, patient visits and fringe benefits for physician specialties. Additionally, the hard copy survey report contains new hire base compensation data and base, bonus and total compensation for administrative positions.

Sullivan, Cotter and Associates, Inc. (SullivanCotter) gathers data pursuant to this questionnaire for purposes described on the SullivanCotter website. SullivanCotter keeps the information provided in this questionnaire confidential, as described herein. The data you provide are reported in SullivanCotter’s surveys in the form of aggregated summary statistics. No organization’s data are listed or reported in any identifiable way. The survey report is based on data, provided by survey participants, that are more than three months old, and each disseminated statistic is based on data from at least five organizations. Furthermore, the information is sufficiently aggregated so that no organization’s data can be identified in the survey report.

In addition, data gathered for the survey report described above may also be used by SullivanCotter for research purposes, including, but not limited to, publication of national reports, customized reports and to supplement other SullivanCotter surveys and reports. In such a case, individual data may be used or disclosed in a non-summary form; however, in such instances, the data will be purged of any identifying information and no non-aggregated data will be reported. For proper attribution, your organization will be included as a listed participant in any survey or report in which your data are included.
**Section I: Individual Compensation and Productivity Data**

<table>
<thead>
<tr>
<th>Column 1</th>
<th>Physician ID.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This code is used to identify each physician from year to year. Please provide a code that identifies the physician to your organization only. <strong>Do not use the physician’s full Social Security number.</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Column 2</th>
<th>Specialty Code.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This is the specialty code for each physician related to the area of medicine the physician practices. Refer to the specialty code listing that follows these instructions. <strong>Please remember to review these physician assignments to ensure an accurate submission.</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Column 3</th>
<th>Position Level.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Indicate the position level of the provider.</td>
</tr>
<tr>
<td></td>
<td>• <strong>Staff.</strong> Staff members provide medical care to patients the majority of the time. Staff members may engage in teaching and research and may have responsibilities for residents. Typically, staff members devote at least 75% of work time to direct or indirect patient care.</td>
</tr>
<tr>
<td></td>
<td>• <strong>Department Chair.</strong> A department chair is a provider who is considered the chair of the department for each specialty. Within large departments, there may be more than one identified department chair. Department chairs are responsible for the financial and operating results achieved by the department. This is not a section head position or any other position that has broader-level responsibilities and that may oversee an entire set of departments or a set of specialties. Section head can be reported in the administrative compensation Section III Position 5185.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Column 4</th>
<th>Clinical FTE.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Clinical FTE is the full-time equivalent percentage of the individual physician’s time spent in clinical work. Full-time clinical (1.0 FTE) is defined as a physician fulfilling your organization’s minimum requirements for classification as a full-time patient care employee (e.g., 36 hours of patient care activities per week). Many physicians work above this minimum level, but the reported FTE will not exceed 1.0. Other adjustments to this FTE status will not be common, but include the following:</td>
</tr>
<tr>
<td></td>
<td>• Physicians receiving more than four weeks of short-term disability, maternity, sabbatical, military level, etc. Vacation, holidays, allowed sick days and other normal benefits for time off will not affect the FTE status.</td>
</tr>
<tr>
<td></td>
<td>• A physician working in an operational administrative role that affects the clinical FTE status to be below 1.0 FTEs. This adjustment is intended for physician administrators with organizational or possibly section-wide administrative responsibilities, and who typically have a separate salary identified. No adjustments are to be made for department chairs or for physicians serving on committees that do not materially affect clinical expectations. For example, a physician administrator who is 50% clinical and 50% administrative would be 0.5 clinical FTE.</td>
</tr>
<tr>
<td></td>
<td>• Physicians performing specific research activities, funded separately by the medical practice, that affect the clinical FTE status to be below 1.0. These physicians have clear, separate material research responsibilities outside of their clinical expectations.</td>
</tr>
<tr>
<td></td>
<td>• A physician performing specific administrative teaching activities, such as tutoring or lecturing, which are not performed during patient care activities, and that affect the clinical FTE status to be below 1.0. These activities are funded separately by the medical practice. These adjustments are not for <strong>typical</strong> supervision and resident training while performing patient care activities (rounding, office visits, etc).</td>
</tr>
</tbody>
</table>

Keep in mind there are many organizations that inherently have less intensive administrative committee work, research or teaching responsibilities blended in with their physician’s role and salary, while still expecting 1.0 clinical performance. Our intent is not to try to break out such fine detail, but to capture the clear, material instances for certain individual physicians.
**Column 5 Total FTE.**
Record the total full-time equivalent status of the provider that corresponds with time spent performing all duties. Only report providers with a 0.5 FTE or greater. For example, if the provider works full-time, record 1.0; if the provider works 75% of the time, record 0.75. Please note that in some cases if the provider is performing all clinically related duties expected of a 1.0 clinical FTE and has another separate role in the organization, the FTE listed in this column could add up to more than a 1.0 total FTE.

*Note of purpose for Columns 6 through 10: Interest in breaking out various compensation components came from several participating organizations. It is important that all clinics report data in Column 11 as they have in the past. Columns 6 through 10 are optional, and the data will be reviewed once results are analyzed.*

**Column 6 Call Pay (Optional).**
If your organization compensates for call as a separate component, provide the amount paid here. This would include any call duties, standard or abnormal (additional call outside of typical expectations.) This compensation is not separate from the clinical FTE as reported in Column 4 and is included in the Column 11 clinical compensation amount. Column 6 is optional and the data will be reviewed once results are analyzed.

**Column 7 Medical Directorship Pay (Optional).**
Medical directorship pay is all compensation paid for medical directorship duties. Medical directorship duties would include performing clinical related responsibilities for other areas such as ASCs, home care services, hospice, hospital service lines (labs, imaging centers, etc.) and long-term care facilities. This compensation is not separate from the clinical FTE as reported in Column 4 and is included in the Column 11 Clinical Compensation amount. Medical directorship duties could include the following: attending meetings, clinical peer reviews, monitoring quality, technical and supervisory oversight, strategic development and clinical patient complaints. Column 7 is optional and the data will be reviewed once results are analyzed.

**Column 8 APC Supervision Pay (Optional).**
If your organization compensates for APC supervisory duties as a separate component, provide the amount paid here. This amount could include flat stipends, a portion of APC productivity or production net of cost methods. This compensation is not separate from the clinical FTE as reported in Column 4 and is included in the Column 11 clinical compensation amount. Column 8 is optional and the data will be reviewed once results are analyzed.

**Column 9 Quality Payment (Optional).**
If your organization provides payments to providers based on quality service our outcome measures as a separate component, provide the amount paid here. This compensation could be related to patient satisfaction, outcomes, HEIDIS measures, access, diabetes management, etc. This compensation is not separate from the clinical FTE as reported in Column 4 and is included in the Column 11 clinical compensation amount. Column 9 is optional and the data will be reviewed once results are analyzed.

**Column 10 Other Non-CPT Code Patient Care Compensation (Optional).**
Report any other amounts that your organization pays for non-billable patient care services. The following are examples of non-billable patient care services: stipends for travel, contract compensation for occupational health services, etc. This amount should be included in the Column 11 clinical compensation amount. Most organizations with a salary-based system will not be able to break out the data for this column.
Clinical Compensation.

Clinical compensation is the total annual clinical compensation of the individual physician, including base and variable compensation plus all voluntary salary reductions. Examples of clinical compensation would include, but are not limited to, compensation paid as salary- or production-based compensation plans, any type of additional bonuses or incentives, clinically related medical directorships, call coverage or ancillary or APC supervision stipends.

Exclude any fringe benefits and employer payments to any type of retirement, pension, SERP or tax-deferred profit-sharing plan.

Although the reported compensation should be all-inclusive for most physicians, participants should also exclude specific instances of the following:

- Specific compensation for administrative physicians whose clinical FTE status was adjusted, as defined in Column 4. The excluded amount should relate to the amount of the clinical FTE adjustment.

- Specific compensation for research physicians whose clinical FTE status was adjusted, as defined in Column 4. The excluded amount should relate to the amount of the clinical FTE adjustment.

- Specific compensation for teaching physicians whose clinical FTE status was adjusted, as defined in Column 4. The excluded amount should relate to the amount of the clinical FTE adjustment.

- Do not include any signing bonuses recognized from a prior year hire.

- A specific instance where the physician performs “moonlighting.” Moonlighting duties include duties not related to the physician’s specialty or department, duties performed outside of normal clinical hours and duties for which the physician is compensation outside of the medical group’s compensation plan. For example, a family practitioner works nights or weekends in the urgent care at a hospital for an hourly rate and production is not captured. There should be no FTE adjustment because this is done outside of the family practitioner’s practice. Please feel free to call SullivanCotter with any questions.

Do not annualize any staff physician or department chair reported as greater than or less than 1.0 clinical FTE. It is our expectation that participants report the clinical compensation in the same manner as prior years.

Column 12 Administrative Pay (Optional).

Report the actual annual salary or stipend paid to each provider for time spent performing administrative duties. Examples of administrative duties would be the duties of physician administrators, the group’s overall medical director, possible extensive committees requiring significant time, etc. Do not include compensation for clinic-expected meetings that may have some monetary awards for attendance, but does not materially change clinical FTE expectations, as this is included in the clinical compensation Column 11.

Column 13 Research and Teaching Pay (Optional).

Report the actual annual salary or stipend paid to each provider for time spent performing research or teaching duties.
**Column 14  Total Compensation.**

Total compensation is the total annual compensation of the individual provider, including base, variable and administrative compensation plus all voluntary salary reductions. Examples of total compensation would include, but are not limited to, the following: compensation paid as salary- or production-based compensation plans, any type of additional bonuses or incentives, clinically related medical directorships, administrative stipends, research or teaching stipends, call coverage, ancillary or APC supervision stipends, moonlighting stipends and other unidentified compensation. The compensation reported in this column should equal reported W2 wages. Exclude any fringe benefits and employer payments to any type of retirement, pension, SERP or tax-deferred profit-sharing plan. Do not FTE annualize any physician data.

**Column 15  Fringe Benefits.**

Fringe benefits include the employer’s share of FICA, payroll and unemployment taxes; health, disability, life and workers’ compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; and employer payment to defined benefits and contribution, 401(k), 403(b) and unqualified retirement plans. Malpractice liability insurance should be excluded.

**Column 16  Gross Charges.**

Gross charges are the total charges reported for services produced by the physician before such charges are reduced by courtesy allowances, employee discounts or non-collected accounts. Total charges are defined as the full dollar value, at the medical group’s established non-discounted rates, for services provided for all patients. Gross productivity should include the medical group’s full, non-discounted charges. Medicare charges should also be grossed up and not reported at the allowable charge. These charges are for professional activities only, and thus should exclude retail income (e.g., optical, pharmacy), drugs, vaccines, etc. Productivity by various categories of physician extenders, such as nurse practitioners, nurse midwives, CRNAs, etc., should also be excluded from the data. Charges should not include credits for the technical component of ancillary services. Technical procedures supervised, but not performed, by the physician should be excluded. Charges for codes with modifiers should be adjusted to reflect the modified amount. Report physicians with at least a 0.5 clinical FTE at their actual production amount. Guidelines for specific specialties are included below:

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Production Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergy</td>
<td>Do not include antigen billings for the following CPT codes: 95144, 95145, 95146, 95147, 95148, 95149, 95165 and 95170.</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>Do not include CRNA-only performed activity. Production from cases performed as a team should be reported as 50% credit to the physician and the other 50% to the CRNA.</td>
</tr>
<tr>
<td>Audiology</td>
<td>Do not include hearing aid sales.</td>
</tr>
<tr>
<td>Cardiology</td>
<td>Do not include technical component fees or technical components of global fees for EKGs, GXTs, echos, etc.</td>
</tr>
<tr>
<td>GI Medicine</td>
<td>Do not include technical component fees.</td>
</tr>
<tr>
<td>Medical Oncology</td>
<td>Do not include billings for drugs.</td>
</tr>
<tr>
<td>Neurology</td>
<td>Do not include technical component fees or technical components of global fees for EEGs, EMGs or sleep studies.</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>Do not include technical component fees or technical components of global fees for ultrasound tests.</td>
</tr>
<tr>
<td>Optometry and Ophthalmology</td>
<td>Do not include eyewear or contact sales.</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>Do not include production related to audiology services.</td>
</tr>
<tr>
<td>Pathology</td>
<td>Do not include technical component fees or technical components of global fees for pathology exams.</td>
</tr>
<tr>
<td>Pulmonary Disease</td>
<td>Do not include technical component fees or technical components of global fees for pulmonary tests.</td>
</tr>
<tr>
<td>Radiology</td>
<td>Do not include technical component fees or technical components of global fees for radiological exams.</td>
</tr>
<tr>
<td>Radiation Oncology</td>
<td>Do not include technical component fees or technical components of global fees for oncology services.</td>
</tr>
</tbody>
</table>
Column 17  **Net Collections**

Indicate the actual dollar amount collected of gross productivity. This will be the net of contractual arrangements, discounts and bad debts. See the Production Guideline Table under “Column 16” as it applies to Net Collections.

Column 18  **Patient Visits.**

Patient visits are the total number of patient visits during the calendar or most recent fiscal year. Patient visits are recorded as a face-to-face patient encounter. For surgical and anesthesia procedures, record the case as one visit and not the number of procedures performed. For global codes, such as deliveries, a visit should be recorded for each patient encounter in the global code. In the event that a patient visits two or more separate departments during the day and sees a physician in each department, this is recorded as a patient visit at each department. If a patient has only an ancillary service, as ordered by a physician, but has no personal physician contact, this should not be recorded as a physician patient visit (examples would be lab tests, EKGs, EEGs, injections, etc.). If the patient was seen only by a non-physician provider or technician, no visit should be recorded. Multiple visits by a single patient to a single physician during the same day are counted as only one visit. If your organization cannot exclude these types of visits, then please exclude all visit information. Report physicians with at least a 0.5 FTE at their actual visit or consultation amount.

Column 19  **Work RVUs.**

Report calculated work relative value units (RVUs) as measured by the work resource based relative value scale (RBRVS), not weighted by a conversion factor attributed to ambulatory care, inpatient care or other professional services performed by each physician in the medical group, using the 2013 Centers for Medicare & Medicaid Services (CMS) scale. A work relative value unit is a non-monetary unit of measure that indicates the professional value of services provided by a physician or allied health care professional. Report FTE physicians with at least a 0.5 clinical FTE at their actual RVU amount. See the Production Guideline Table under “Column 16” as it applies to work RVUs. In order to make your work RVUs more compatible, all code frequencies with the modifiers described below should be adjusted by the indicated percentage. For example, a modifier of 80 (99210-80) indicates that the procedure was recorded as a surgery assist and therefore the department only received approximately 16.0% of the original RVU value. For occupational health physicians performing corporate or contracted services, either report RVU production for these services or indicate that they cannot be reported. If multiple modifiers are used, report work RVUs calculated using multiple modifiers.
Note for anesthesiologists: please report ASA values in this column as opposed to RVUs. The ASA values should include base units and time components. Do not include CRNA-only performed activity. ASAs from cases performed as a team should be reported as 50% credit to the physician.

Note regarding modifier 50: SullivanCotter requests that participants adjust volume of CPT codes based on any modifiers attached to the individual codes. There is a special circumstance with modifier 50. Medicare reimburses the code with the modifier at 150%. Many other payers reimburse by a two-code combination: one code without the modifier at 100%, another code with the modifier at 50%. When reporting bilateral data, please adjust the Medicare volume appropriately to reflect proper volume (e.g., multiplying Medicare volume by three).

<table>
<thead>
<tr>
<th>Modifier</th>
<th>Brief Description</th>
<th>Percentage Adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Unusual Procedural Services</td>
<td>125.0%</td>
</tr>
<tr>
<td>50</td>
<td>Bilateral</td>
<td>50.0% 100.0%</td>
</tr>
<tr>
<td>51</td>
<td>Multiple</td>
<td>50.0%</td>
</tr>
<tr>
<td>52</td>
<td>Reduced Values</td>
<td>50.0%</td>
</tr>
<tr>
<td>53</td>
<td>Discontinued Procedure</td>
<td>50.0%</td>
</tr>
<tr>
<td>54</td>
<td>Surgical Care Only</td>
<td>70.0%</td>
</tr>
<tr>
<td>55</td>
<td>Postoperative Only</td>
<td>20.0%</td>
</tr>
<tr>
<td>56</td>
<td>Preoperative Only</td>
<td>10.0%</td>
</tr>
<tr>
<td>62</td>
<td>Two Surgeons</td>
<td>62.5%</td>
</tr>
<tr>
<td>63</td>
<td>Procedure performed on Infants</td>
<td>125.0%</td>
</tr>
<tr>
<td>74</td>
<td>Discontinued ASC Procedure</td>
<td>50.0%</td>
</tr>
<tr>
<td>76</td>
<td>Repeat Procedure</td>
<td>70.0%</td>
</tr>
<tr>
<td>78</td>
<td>Return to OR During Postoperative</td>
<td>70.0%</td>
</tr>
<tr>
<td>80</td>
<td>Assistant Surgeon</td>
<td>16.0%</td>
</tr>
<tr>
<td>81</td>
<td>Minimum Surgery Assist</td>
<td>16.0%</td>
</tr>
<tr>
<td>82</td>
<td>Assistant Surgeon – No Resident Available</td>
<td>16.0%</td>
</tr>
<tr>
<td>AS</td>
<td>Surgery Assist</td>
<td>16.0%</td>
</tr>
<tr>
<td>TC</td>
<td>Technical Component</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Column 20 Total RVUs.

This column is the work RVU (defined above) with the addition of the values assigned for malpractice expense (MP) and practice expense (PE) as stipulated in last year’s Centers for Medicare & Medicaid Services (CMS) scale. Report total RVUs for the professional medical and surgical procedures performed by the provider, excluding the TC and ancillary values. Report either the facility or non-facility rates that were determined for each procedure in your system.

Column 21 Primary Care Panel Size (Optional).

This column is for the collection of panel size for primary care providers only: family medicine, family medicine – branch, internal medicine, internal medicine – branch, internal medicine – office only, pediatrics and adolescent – general and pediatrics – branch. If you cannot provide this data, please leave blank. Panel size is the number of patients served by a physician or physician group. A provider’s panel is a provider’s population of living patients, based on a count of unique patients seen within the last 18 months. Patients are assigned to a provider by the following:

- Patients who have seen only one provider for all visits, verified within the last three years, are assigned to that provider.
- If a patient does not have a personal provider identified, the patient is assigned to a provider based on whom the patient saw the most often.
- If the patient has seen multiple doctors the same number of times, the patient is assigned to the provider seen most recently.
The following weights should be applied to the panel sizes reported.

<table>
<thead>
<tr>
<th>Age</th>
<th>Relative Weight</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-1</td>
<td>5.02</td>
<td>4.66</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>3.28</td>
<td>2.99</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2.05</td>
<td>1.97</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>1.72</td>
<td>1.62</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>1.47</td>
<td>1.46</td>
<td></td>
</tr>
<tr>
<td>5-9</td>
<td>0.98</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>10-14</td>
<td>0.74</td>
<td>0.79</td>
<td></td>
</tr>
<tr>
<td>15-19</td>
<td>0.54</td>
<td>0.72</td>
<td></td>
</tr>
<tr>
<td>20-24</td>
<td>0.47</td>
<td>0.70</td>
<td></td>
</tr>
<tr>
<td>25-29</td>
<td>0.60</td>
<td>0.82</td>
<td></td>
</tr>
<tr>
<td>30-34</td>
<td>0.63</td>
<td>0.84</td>
<td></td>
</tr>
<tr>
<td>35-39</td>
<td>0.66</td>
<td>0.86</td>
<td></td>
</tr>
<tr>
<td>40-44</td>
<td>0.69</td>
<td>0.89</td>
<td></td>
</tr>
<tr>
<td>45-49</td>
<td>0.76</td>
<td>0.98</td>
<td></td>
</tr>
<tr>
<td>50-54</td>
<td>0.87</td>
<td>1.10</td>
<td></td>
</tr>
<tr>
<td>55-59</td>
<td>1.00</td>
<td>1.20</td>
<td></td>
</tr>
<tr>
<td>60-64</td>
<td>1.17</td>
<td>1.31</td>
<td></td>
</tr>
<tr>
<td>65-69</td>
<td>1.36</td>
<td>1.46</td>
<td></td>
</tr>
<tr>
<td>70-74</td>
<td>1.55</td>
<td>1.60</td>
<td></td>
</tr>
<tr>
<td>75-79</td>
<td>1.68</td>
<td>1.70</td>
<td></td>
</tr>
<tr>
<td>80-84</td>
<td>1.70</td>
<td>1.66</td>
<td></td>
</tr>
<tr>
<td>85+</td>
<td>1.57</td>
<td>1.39</td>
<td></td>
</tr>
</tbody>
</table>

Column 22 **Physician’s Years Since Residency/Fellowship.**

The total number of years the physician has been working in that particular specialty since completing their residency or fellowship program (i.e. for a cardiologist, it would be years since completing the cardiology fellowship; for a general surgeon, it would be years since completing their general surgery residency). This column is used when calculating the Years of Experience data in your All Clinic report.

Column 23 **Date of Hire.**

The date of hire for the physician.

Column 24 **Provider’s Age.**

The age of the physician.
### Section II: New Hire Starting Salaries

Indicate the starting salaries for physicians and staff members hired between January and December 2013 or your medical group’s most recent fiscal year end. New residents who have completed their residency are considered new hires. Experienced physicians are physicians who are currently employed at your facility and who have worked in the medical field at another facility. Report only those physicians who are board certified or board eligible.

<table>
<thead>
<tr>
<th>Column</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Column 1** | Specialty Code.  
This code is the specialty code for each physician related to the area of medicine the physician practices. **Please remember to review these physician assignments to ensure an accurate submission.** A specialty listing can also be found in the electronic data submission file. |
| **Column 2** | Experienced Starting Salary.  
Indicate the starting salary for the experienced physician hire. Experienced hires will have worked in the medical field at another facility and are now recently employed by your facility. |
| **Column 3** | New Resident/Fellow Starting Salary.  
Indicate the starting salary for the new resident hire. New residents or fellows will just have completed their residency or a fellowship program. |
| **Column 4** | Retention or Signing Bonus.  
Report the total amount of the bonuses each new hire was awarded. If the physician received a signing bonus, indicate the full amount here. A signing bonus or sign-on bonus is a one-time sum paid upfront to a new employee as an incentive to join the organization. If the physician received a retention bonus, indicate the full amount here. A retention bonus is an incentive paid to an employee to retain the employee through a stated length of time or business cycle. |
## Section III: Administrative and Physician Leadership Compensation

The 2013 salary and bonus data for administrative staff will be reported here. A listing of the positions included in this survey can be found in the survey tool and after the patient care specialty definitions. This data should be an annualized salary for 2013 or the most recent fiscal year.

### Column 1 Position Number.

Enter the position number associated with the survey position you are reporting. If you are reporting more than one of these positions, please insert a row and include the position number and title. Refer to the Specialty List for the positions being surveyed.

### Column 2 Position Title.

This column is the position title that corresponds to the position number listed in Column 1. If you are reporting more than one of these positions, please insert a row and include the position number and title.

### Column 3 Incumbent ID.

This code is used to identify each incumbent from year to year. Please provide a code that identifies the incumbent to your organization only. **Do not use the incumbent's full Social Security number.**

### Column 4 Base Salary.

Enter the annual base compensation for the incumbent, including any base salary deferred through election. Please exclude anticipated cash distributions or deferred compensation based on prior year performance, rewards or incentives. (Base pay does not include payments made under the normal retirement, benefits, pension or profit-sharing plans.) Use rates in effect on January 1, 2013, and report data in annual, whole dollars (e.g., $25,568).

### Column 5 Total Salary.

This column is the total combined salary of Column 4 plus Column 7.

### Column 6 Annual Short-Term Bonus Eligible (Y or N).

Is this position short-term (one year or less) bonus eligible? Indicate Y or N.

### Column 7 Annual Short-Term Incentive and Bonus Amount.

Identify the bonus amount received in the most recently completed fiscal or calendar year.

### Column 8 If Bonus Eligible, What are the Non-Productivity Measures Tied to Bonus Pay.

This column is for a position that is bonus eligible and there are non-productivity measures tied to the position (e.g., patient satisfaction, access, quality or clinical outcomes).

### Column 9 Long-Term Incentive Eligible (Y or N).

Is this position long-term (greater than one year) bonus eligible? Indicate Y or N.

### Column 10 Long-Term Target Maximum as a Percentage of Base.

Enter the maximum long-term incentive payout the incumbent is eligible to receive as a percentage of base salary.

### Column 11 Long-Term Payout as a Percentage of Base.

Enter the incumbent’s actual percentage payout for long-term incentives as a percentage of base salary.
**Column 12**  **Fringe Benefit Percentage.**

Report the approximate percentage value of fringe benefits to salary. Fringe benefits include the employer’s share of FICA; payroll and unemployment taxes; health, disability, life and worker’s compensation insurance; and all employer contributions to retirement plans, including defined benefits and contribution plans, 401(k), 403(b) and any nonqualified retirement plans.

**Column 13**  **Number of FTEs this Position Oversees.**

Enter the total number of FTEs (physician or non-physician) this position oversees or the number that reports up to this position.

**Column 14**  **Is this Incumbent an MD (Y or N).**

Indicate if the incumbent is a board certified physician with a Y or N.

**Column 15**  **If Yes, What is the Physician’s Specialty?**

If Column 14 contains a Y, then indicate the physician’s specialty code here. The specialty code of the physician is related to the area of medicine the physician practices.

**Column 16**  **If Physician: Clinical FTE.**

For those MDs listed who still have clinical responsibilities, please indicate the clinical FTE.

**Column 17**  **If Physician: Administrative FTE.**

Indicate the administrative FTE attributed to this position.

**Column 18**  **If Physician: Other FTE:**

If there are additional responsibilities for this position (e.g., research or teaching), please indicate that FTE here.

**Column 19**  **Indicate if this position is at the clinic or health system level (C = Clinic Level, H = Health System Level)**

If you are a health system with both clinical- and health system-level administrative positions, please report the top positions at both the health system and the clinic. Indicate an H for a health system-level position or a C for a clinic-level position.
Section V: Part A – Financial Operations Profile

This section contains questions to assist with benchmarking the financial aspects of your organization. Below are further clarifications of certain questions, indicated by question number.

**Question 1  Inclusion of Off-Site Information.**

If you need to include off-site information, be sure that the clinics have the ability to (a) separate physician and APC FTEs and CPT codes into individual specialties and (b) separate revenue and personnel expenses into individual specialty financial statements.

**Question 4  Allocation of Discounts to Specialties.**

Please only answer this question if your discounts to charges are currently allocated to various specialties within your practice; otherwise, leave it blank.

**Question 6  Net Patient Care Revenue Groupings.**

The aggregate of these percentages must add to 100%.

- **Medicare.** Medicare is a U.S. health insurance program for people ages 65 and over, disabled persons and others. Include all noncapitated programs under Medicare.
- **Medicare – Capitated.** Include all capitated programs under Medicare.
- **Medicaid.** Medicaid is a federally aided, state-operated and administered program that provides medical benefits for certain indigent or low-income persons in need of health and medical care. The benefits, program eligibility, rates of payment for providers and methods of administering the program are determined by the state, subject to federal guidelines. Include all noncapitated programs under Medicaid, such as PMAP.
- **Medicaid – Capitated.** Include all capitated programs under Medicaid.
- **Other Government Insurance.** Other government insurance is all other health insurance that is federally funded (e.g., CHAMPUS).
- **Non-Capitated Contracted Plans.** Non-capitated contracted plans are managed care plans under which health services that are covered are paid for on a variable reimbursement schedule. This is for HMO- and PPO-type plans.
- **Commercial Capitated Plans.** Commercial capitated plans are nongovernment-funded managed care plans under which health services are paid for by a fixed rate per eligible member without regard to the actual number or nature of services provided to each enrollee; typically paid per member per month.
- **Non-Contracted Plans (Indemnity).** Non-contracted plans are a standard type of health insurance where benefits are paid in a predetermined amount in the event of a covered loss. These plans are specifically not HMO- or PPO-type plans.
- **Self-pay.** The responsibility for paying the entire cost of services is assumed by the patient or guarantor of the account.
- **Worker’s Compensation.** Worker’s compensation is a benefit provided by employers to cover health care expenses for job-related illnesses and injuries.
Section V: Part B – Financial Profile by Specialty

Column 1  Specialty Code.

The specialty code for each area of medicine. (See the Specialty Listing section of these instructions for a complete list of specialty codes.)

Column 2  Gross Professional Patient Care Revenue.

Professional services provided by all providers, including physicians, allied health care providers and extenders such as nurses and medical assistants. All Medicare and commercial contract charges should be based on the clinic's undiscounted fee schedule, and adjustments should be reported in Column 4 (Discounts and Adjustments). All capitated patient care charges should be based on the clinic's undiscounted fee schedule, and the adjustments should also be reported in Column 4. This line should not include ancillary revenue, which is listed in Column 3 (Gross Lab, Radiology, Imaging and Other Ancillary Revenue).

Column 3  Gross Lab, Radiology, Imaging and Other Ancillary Revenue.

This revenue is ancillary revenue from all radiology, laboratory, X-ray, injections, immunizations, and chemotherapy services and other ancillaries from the respective specialty. If your group is a health system and is unable to provide these dollars as they are collected in the hospital's system, please leave blank.

Column 4  Discounts and Adjustments.

Record the difference between gross revenue and the amount actually collected from patients or third-party payers. Such discounts would include Medicare and Medicaid discounts, contractual adjustments, charity care, capitation contract adjustments, etc.

- **Full-Time Equivalent (FTE).** FTE is the full-time equivalent percentage based upon the workweek requirements for the clinic. These columns should be the aggregate FTEs for each position type:
  - Physician.
  - Advanced practice clinician (non-physician providers, including NP, PA, Midwife, CSW, Audiology, etc.).
  - Nursing (RNs, LPNs).
  - Technician. This position type includes all FTE expenses related to positions providing ancillary tests (lab or radiology should be excluded unless the specialty is diagnostic radiology or pathology) such as physical therapy, optical shop, oncology and FTEs performing technical support for services such as EEGs, EKGs, sonograms, etc.
  - Other Direct Patient Care Support. Anyone with direct patient care contact regularly in the front office directly assigned to that department including: nurse aides, medical assistants, medical receptionists, medical secretaries, department managers, and care managers. This should not include back office support (e.g., finance, administration, billings and collections, human resources or information services). These positions are collected in Section V Part D.

- **Salaries.** Salaries shall mean the annual compensation of the staff members, including base and variable compensation, stipends, profit-sharing and voluntary salary reductions (401[k], 403[b], MSPs, dental, etc.). Compensation should exclude any benefits and employer payments under retirement and pension plans.

- **Benefits.** This includes the employer's share of FICA, payroll and unemployment taxes; health, disability, life and workers' compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; and employer payment to defined benefit and contribution, 401(k), 403(b) and nonqualified retirement plans. Exclude malpractice liability insurance.
Column 20  Medical Supplies and Drugs.

This column refers to medical supplies, drugs, linens, uniforms and laundry and minor equipment and tools used to provide medical and surgical services to patients.

Column 21  Professional and Liability Insurance.

Record general liability and total malpractice insurance expense specific to the specialty being reported.

Column 22  Other Direct Costs.

Other direct costs are other direct expenses not classified above related to building and occupancy, purchased services, allocated administrative supplies, depreciation, maintenance, etc.
Section V: Part C – Organization Profit or Loss Statement

- **Gross Professional Patient Care Revenue.** Gross professional patient care revenue is revenue associated with patient care activities, based on the practice’s undiscounted fee schedule. **If you have a separate fee schedule for Medicare services, please gross up the fees for all Medicare services to your clinic’s undiscounted fee schedule.**

1. **Gross Professional Medical and Surgical Charges.** Professional services provided by all providers, including physicians, allied health care providers and extenders such as nurses and medical assistants. All Medicare and commercial contract charges should be based on the clinic’s undiscounted fee schedule, and adjustments should be reported in Line C (Discounts and Adjustments). All capitated patient care charges should be based on the clinic’s undiscounted fee schedule, and the adjustments should also be reported in Line C. This line should not include ancillary revenue, which is listed in Line B (Gross Lab, Radiology, Imaging and Other Ancillary Revenue).

2. **Gross Lab, Radiology, Imaging and Other Ancillary Charges.** These charges are the gross charges for radiology, laboratory, X-ray, injections, immunizations, and chemotherapy services and other drug charges. If your group is a health system and is unable to provide these dollars as they are collected in the hospital’s system, please leave blank and refer to Line F.

3. **Discounts and Adjustments.** Record the difference between gross revenue and the amount actually expected to be collected from patients or third-party payers. Such discounts include Medicare and Medicaid discounts, contractual adjustments, charity care, capitation contract adjustments, etc. There are subcategories for discounts and adjustments.

4. **Net Medical Revenue.** The total of Line A plus Line B, minus Line C.

5. **Other Medical Revenue.** This revenue is other revenue related to physician or medical activities such as teaching, directorships and honorariums from outside facilities, quality payments, sale of non-ancillary goods, etc.

6. **Health System Funding.** If you indicated that you are hospital owned or part of a health system, provide any additional funding from the hospital or health system here.

7. **Non-Medical Revenue.** These revenues are revenues that are not related to patient care services (e.g., rental, interest and investments, capital gains).

- **Salaries.** Salaries shall mean the annual compensation of the staff members, including base and variable compensation, stipends, profit-sharing, and voluntary salary reductions (401[k], 403[b], MSPs, dental, etc). Compensation should **exclude any benefits and employer payments under retirement and pension plans.**
<table>
<thead>
<tr>
<th>Position</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8-10 Physician</td>
<td></td>
</tr>
<tr>
<td>11-12 Advanced Practice Clinicians</td>
<td>Non-physician providers, including PA, Midwife, CSW, Audiology, etc.</td>
</tr>
<tr>
<td>13 Nursing</td>
<td>RNs, LPNs</td>
</tr>
<tr>
<td>14 Medical Assistants, Nurse’s Aides</td>
<td></td>
</tr>
<tr>
<td>15 Clinical Lab</td>
<td>All FTE expenses related to the lab (e.g., technicians, secretaries, nurses)</td>
</tr>
<tr>
<td>16 Radiology and Imaging</td>
<td>All FTE expenses related to radiology and imaging (e.g., technicians, secretaries, nurses)</td>
</tr>
<tr>
<td>17 Technician</td>
<td>All FTE expenses related to positions providing ancillary tests not related to lab or radiology (e.g., physical therapy, optical shop, oncology) and FTEs performing technical support for services such as EEGs, EKGs, sonograms, etc.</td>
</tr>
<tr>
<td>18 Other Direct Patient Care Support</td>
<td>Anyone with direct patient care contact regularly in the front office directly assigned to that department including: medical receptionists, medical secretaries, department managers and case managers. This should not include back office support (e.g., finance, administration, billings and collections, human resources, information services). These positions are collected on lines S-AA.</td>
</tr>
<tr>
<td>19 Head Leadership Administration</td>
<td>All FTEs in head leadership functions not detailed in this table (e.g., CEO, CFO, CMO). Positions categorized as head leadership in Section III.</td>
</tr>
<tr>
<td>20 Operational Director</td>
<td>All FTEs in leadership functions not detailed in this table (e.g., business office manager, finance director, human resources director). Positions categorized as operational directors in Section III.</td>
</tr>
<tr>
<td>21 Managed Care Administration</td>
<td>Q-and-A, compliance, medical education managers, contract managers, etc.</td>
</tr>
<tr>
<td>22 Patient Accounting</td>
<td>Billings and collections (patient financial data collection, financial counseling, charge data entry, claims submission, billing, third-party payer follow-up, monthly statements, collections, calls, letters and payment posting), postings, etc.</td>
</tr>
<tr>
<td>23 General Accounting</td>
<td>Salaries related to your general accounting office staff, including AR, AP, general ledger, payroll, bookkeeping and other positions in charge of cash flow statements or balance sheets.</td>
</tr>
<tr>
<td>24 Information Systems</td>
<td>Salaries related to your information services department or system support.</td>
</tr>
<tr>
<td>25 Building Management</td>
<td>Building maintenance, housekeeping, security, parking.</td>
</tr>
<tr>
<td>26 Medical Records and Support</td>
<td>Medical records, medical secretaries, transcribers, receptionists.</td>
</tr>
<tr>
<td>27 Other Employed Support Staff</td>
<td></td>
</tr>
<tr>
<td>28 Total Contracted and Outsourced Support</td>
<td>Services that are provided to the clinic and do not have FTEs associated with the expense should be included here.</td>
</tr>
</tbody>
</table>

- **9, 12 and 29. Benefits Expense.** This includes the employer’s share of FICA, payroll and unemployment taxes; health, disability, life and workers’ compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; employer payment to defined benefit and contribution, 401(k), 403(b) and nonqualified retirement plans. Malpractice liability insurance is excluded.

- **10. Physician Retirement Plans Expense.** This includes employer payments to defined benefit plans and nonqualified retirement plans.
30. **Medical and Surgical Supplies and Drug Expense** This includes medical supplies, drugs, linens, uniforms and laundry and minor equipment and tools used to provide medical and surgical services to patients. Do not include chemotherapy, laboratory, radiology or other ancillary services supplies, as these are included in individual expense lines below.

31. **Diagnostic Radiology Expense.** This includes medical supply costs and equipment costs related to generating radiology income. Include depreciation, rent, repairs and maintenance (including maintenance contracts) on specialized biomed equipment used by radiology.

32. **Laboratory Expense.** This includes medical supply costs and equipment costs related to generating laboratory income. Include depreciation, rent, repairs, and maintenance (including maintenance contracts) on specialized biomed equipment used by laboratory.

33. **Other Ancillary Expense.** This includes medical supply costs of the other ancillary services and depreciation, rent, repairs and maintenance (including maintenance contracts) on clinical equipment used by other ancillary service departments other than clinic laboratory and radiology equipment.

34. **Building and Occupancy Expense.** This includes building depreciation, rent, building repairs, maintenance including monthly fees and contract costs, security (excluding salaries), biohazard waste removal, utilities, amortization, leasehold improvements and other occupancy expenses not recorded elsewhere.

35. **Professional and Liability Insurance.** This includes general liability and malpractice insurance.

36. **Other Insurance Expense.** All other insurance expenses not part of professional insurance.

37. **Information Services Expense.** This includes telephone, answering services, computer depreciation and amortization, computer supplies, software and electronic data processing. Do not include specialized biomed equipment used by laboratory, radiology and other ancillary service departments.

38. **Furniture and Equipment Expense.** This includes depreciation, rent, repairs and maintenance of furniture, fixtures and other office equipment. Do not include specialized biomed equipment used by laboratory, radiology and other ancillary service departments.

39. **Administrative Supplies.** This includes office supplies, medical forms, printing, postage, books, subscriptions, delivery and courier services, copying, medical records, purchased administrative services (transcription, payroll, collection) and other administrative expenses.

40. **Marketing Expense.** This includes marketing, advertising, brochures, community programs and patient education not charged to the patient, etc.

41. **Professional Fees.** This includes all charges due to outsourced responsibilities, temporary or contracted personnel, consulting, legal, etc., such as the use of billing, transcription or housekeeping companies. These should not be legal department employees of the clinic.

42. **Interest Expense.** This includes payments made for the use of borrowed funds (e.g., loan and mortgage interest, points and fees).

43. **Bad Debt Expense.** This includes receivables or charges that are written off as uncollectible or assigned to a collection agency.

44. **Other Expense.** Any expense not elsewhere classified.

45. **Non-Medical Expense.** All expenses related to the Non-Medical Revenue line, taxes, etc.
Section V: Part D – Administrative Operations Profile

Please note that this table is divided into specific departments; other departments need not be reported.

- **Staff FTEs.** Staff FTEs are the number of staff associated with the department.

- **Managers and Supervisors FTEs.** Include any personnel who are responsible for supervising or managing staff-level personnel. Do not include personnel who delegate tasks to administrative people only.

- **Salaries.** This is the annual compensation based on the current compensation rate plus any deferred compensation, tax-deferred annuities and any anticipated cash distributions during the next 12 months based on prior-year performance, but excluding any payments under the normal retirement, pension or profit-sharing plans.

- **Benefits.** Benefits include payroll taxes; health, dental, disability and life insurance; retirement, pension or profit-sharing contributions; dues, licenses, education and subscriptions; meetings; travel; vehicle; parking; cell phones and pagers; and meals and entertainment paid to or for staff.

- **Claims Submitted.** This is the total number of claims submitted to all payers in your most recently completed fiscal year.

<table>
<thead>
<tr>
<th>Department</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Accounting</td>
<td>Salaries and FTEs related to your general accounting office staff, including AR, AP, general ledger, payroll, bookkeeping and other positions in charge of cash flow statements or balance sheets.</td>
</tr>
<tr>
<td>Information Systems</td>
<td>Salaries and FTEs related to your information services department or system support for computer, telephone and data processing technical support.</td>
</tr>
<tr>
<td>Managed Care Administration</td>
<td>Q-and-A, compliance, medical education managers, contract managers, etc.</td>
</tr>
<tr>
<td>Nursing</td>
<td>Total FTEs of RNs and LPNs in your organization.</td>
</tr>
<tr>
<td>Medical Assistants and Nurse’s Aides</td>
<td>Total FTEs in your organization.</td>
</tr>
<tr>
<td>Patient Accounting</td>
<td>Billings and collections (patient financial data collection, financial counseling, charge data entry, claims submission, billing, third-party payer follow-up, monthly statements, collections, calls, letters and payment posting), postings, etc.</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Salaries and FTEs in your human resources department. Included would be staff responsible for general human resources responsibilities, including responsibilities of job description, performance review, compensation, benefits, grievances, policy development, personnel files and safety. Exclude legal counsel and recruiting.</td>
</tr>
<tr>
<td>Building Management</td>
<td>Building maintenance, housekeeping, security, parking.</td>
</tr>
<tr>
<td>Materials Management</td>
<td>Salaries and FTEs for your material management department. Include purchasing, receiving, inspection, inventory and distribution of supplies and drugs.</td>
</tr>
<tr>
<td>Medical Records and Support</td>
<td>Medical records, medial secretaries, transcribers, receptionists.</td>
</tr>
<tr>
<td>Medical Specialties</td>
<td>2014 AMGA Specialty Listing and Definitions</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>1005</td>
<td>Addictive Medicine</td>
</tr>
<tr>
<td>1000</td>
<td>Allergy/Immunology</td>
</tr>
<tr>
<td>1016</td>
<td>Advanced Heart Failure and Transplant Cardiology</td>
</tr>
<tr>
<td>1010</td>
<td>Cardiology – Cath Lab (Invasive Intervventional)</td>
</tr>
<tr>
<td>1020</td>
<td>Cardiology – Echo Lab and Nuclear</td>
</tr>
<tr>
<td>1030</td>
<td>Cardiology – Electrophysiology Pacemaker</td>
</tr>
<tr>
<td>*1040</td>
<td>Cardiology – General</td>
</tr>
<tr>
<td>1050</td>
<td>Cardiology – General – Branch</td>
</tr>
<tr>
<td>1007</td>
<td>Clinical Nutrition and Bariatric Medicine</td>
</tr>
<tr>
<td>1443</td>
<td>Consult Liaison Psychiatrist</td>
</tr>
<tr>
<td>1060</td>
<td>Critical Care/Intensivist</td>
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<tr>
<td>1070</td>
<td>Dermatology</td>
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<td>1080</td>
<td>Dermatology – Branch</td>
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<tr>
<td>1090</td>
<td>Dermatology – Mohs</td>
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<td>1110</td>
<td>Family Medicine</td>
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<td>1120</td>
<td>Family Medicine – Branch</td>
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<tr>
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<td>Family Medicine With Obstetrics</td>
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<td>Family Medicine With Obstetrics – Branch</td>
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<td>Gastroenterology</td>
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<td>Gastroenterology – Branch</td>
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<td>1465</td>
<td>Genetics</td>
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<td>Geriatrics</td>
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<td>Hematology and Medical Oncology</td>
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<td>Hepatology</td>
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<td>1186</td>
<td>Hospitalist – Family Medicine</td>
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<tr>
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<td>Hospitalist – Internal Medicine</td>
</tr>
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<td>1245</td>
<td>Hospitalist – Laborist</td>
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<td>Hospitalist – Nocumrium</td>
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<tr>
<td>1187</td>
<td>Hospitalist – Pediatrics</td>
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<tr>
<td>1190</td>
<td>Hypertension and Nephrology</td>
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<td>1200</td>
<td>Infectious Disease</td>
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<tr>
<td>1210</td>
<td>Internal Medicine</td>
</tr>
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<td>1220</td>
<td>Internal Medicine – Branch</td>
</tr>
<tr>
<td>1223</td>
<td>Internal Medicine – Medical Home</td>
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<td>1215</td>
<td>Internal Medicine – Office Only</td>
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<td>1181</td>
<td>Medical Oncology</td>
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<td>1191</td>
<td>Nephrology Only</td>
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<td>1253</td>
<td>Neurology – EMG Lab</td>
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<td>Neurology – Epilepsy/EEG Lab</td>
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<td>1255</td>
<td>Neurology – Stroke</td>
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<td>1188</td>
<td>Neurology – Branch</td>
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<td>Neuro-Interventionalist*</td>
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<td>Occupational/Environmental Medicine</td>
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</tr>
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<td>Ophthalmology – Medical Retinal</td>
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<td>1310</td>
<td>Orthopedic – Medical</td>
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<tr>
<td>1437</td>
<td>Pain Management – Non-Anesthesiology</td>
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<tr>
<td>1317</td>
<td>Palliative Care</td>
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<td>1320</td>
<td>Pediatrics and Adolescent – General</td>
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<td>1325</td>
<td>Pediatrics and Adolescent – Adolescent Medicine</td>
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<td>Pediatrics and Adolescent – Allergy</td>
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<td>Pediatrics and Adolescent – Cardiology</td>
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<td>Pediatrics and Adolescent – Dermatology</td>
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<td>Pediatrics and Adolescent – Developmental/Behavioral</td>
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<td>Pediatrics and Adolescent – Endocrinology</td>
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<td>Pediatrics and Adolescent – Hematology and Oncology</td>
</tr>
<tr>
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<td>Pediatrics and Adolescent – Infectious Disease</td>
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<td>Pediatrics and Adolescent – Intensive Care</td>
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<td>Pediatrics and Adolescent – Developmental/Behavioral</td>
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<tr>
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<td>Pediatrics and Adolescent – Neurology</td>
</tr>
<tr>
<td>1410</td>
<td>Pediatrics and Adolescent – Rheumatology</td>
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<td>Physical Medicine and Rehabilitation</td>
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*Indicates new specialty in 2014.
Branch Specialties

These specialties have the same basic definition as the main specialty. These physicians are located in small satellite offices, acute care clinics, critical access sites or branch offices. These offices operate primarily as a critical access site and may have different compensation or performance expectations. There would not be teaching responsibilities at these locations.

Primary Care and Medical Specialties

1000  Allergy/Immunology.

These physicians are certified by the American Board of Allergy and Immunology. These physicians are trained in evaluation, physical and laboratory diagnosis and management of disorders involving the immune system.

1005  Addictive Medicine.

These physicians are certified by the American Society of Addiction Medicine. These physicians specialize in the treatment of addiction, focus on addictive diseases and have had special training focusing on the prevention and treatment of such diseases.

1016  Advanced Heart Failure and Transplant Cardiology

These physicians are certified by the American Board of Internal Medicine with special certifications in cardiology and advanced heart failure. These physicians specialize in Heart Failure and Transplant Cardiology with the special knowledge and skills required of cardiologists for evaluating and optimally managing patients with heart failure, particularly those with advanced heart failure, those with devices, including ventricular assist devices, and those who have undergone or are awaiting transplantation.

1007  Clinical Nutrition and Bariatric Medicine.

These physicians are certified by the American Board of Bariatric Medicine. Bariatric medicine, or bariatrics, refers to the branch of medicine that is concerned with the treatment of obesity and associated conditions, as well as its causes and preventive techniques.

1010  Cardiology – Cath Lab (Invasive Interventional).

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in cardiovascular disease and a certificate of added qualification in interventional cardiology. At least 70% of the physician's time is spent in this specialized field of cardiology.

1020  Cardiology – Echo Lab and Nuclear.

These physicians are certified by the American Board of Internal Medicine and the American Board of Nuclear Medicine with a certificate of special qualification in cardiovascular disease and specifically echocardiography. Echocardiography is used in the diagnosis, management, and follow-up of patients with any suspected or known heart diseases. At least 70% of the physician's time is spent in this specialized field of cardiology.

1030  Cardiology – Electrophysiology Pacemaker.

These physicians are certified by the American Board of Internal Medicine with a certificate of added qualification in cardiac electrophysiology. Cardiology – electrophysiology pacemaker is a field of special interest within the subspecialty of cardiovascular disease, which involves intricate technical procedures to evaluate heart rhythms and determine appropriate treatment for them. At least 70% of the physician's time is spent in this specialized field of cardiology.
1040  **Cardiology – General.**

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in cardiovascular disease. These physicians are internists who specialize in diseases of the heart, lungs and blood vessels and manage complex cardiac conditions such as heart attacks and life-threatening, abnormal heartbeat rhythms. This specialty should capture the remaining cardiologists not defined in the cardiology subspecialties.

1060  **Critical Care/Intensivist.**

These physicians are certified by either the American Board of Internal Medicine or the American Board of Anesthesiology with a certificate of special qualification in critical care medicine. These physicians diagnose, treat and support patients with multiple organ dysfunction. These physicians may facilitate and coordinate patient care among the primary physician, the critical care staff and other specialists.

1070  **Dermatology.**

These physicians are certified by the American Board of Dermatology. These physicians are trained to diagnose and treat pediatric and adult patients with benign and malignant disorders of the skin, mouth, external genitalia, hair and nails, as well as a number of sexually transmitted diseases. These physicians have had additional training and experience in the diagnosis and treatment of skin cancers, melanomas, moles and other tumors of the skin; management of contact dermatitis; other allergic and non-allergic skin disorders; and in the recognition of the skin manifestation of systemic and infectious diseases. These physicians have special training in dermatopathology and in the surgical techniques used in dermatology. These physicians also have expertise in the management of cosmetic disorders of the skin such as hair loss and scars and the skin changes associated with aging.

1090  **Dermatology – Mohs.**

These physicians are certified by the American Board of Dermatology. These physicians specialize in performing surgery used for the treatment of skin cancers, especially basal cell or squamous cell carcinomas of the skin. These physicians have the expertise to diagnose and monitor diseases of the skin, including infectious, immunological, degenerative and neoplastic diseases. This entails the examination and interpretation of specially prepared tissue sections, cellular scrapings and smears of skin lesions by means of routine and special (electron and fluorescent) microscopes.

1100  **Endocrinology.**

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in endocrinology, diabetes and metabolism. These physicians concentrate on disorders of the internal (endocrine) glands such as the thyroid and adrenal glands. These physicians also deal with disorders such as diabetes, metabolic and nutritional disorders, pituitary diseases and menstrual and sexual problems.

1110  **Family Medicine.**

These physicians are certified by the American Board of Family Practice. These physicians are trained to diagnose and treat a wide variety of ailments in patients of all ages. These physicians receive a broad range of training that includes internal medicine, pediatrics, obstetrics and gynecology, psychiatry and geriatrics. In family medicine, special emphasis is placed on prevention and the primary care of entire families, utilizing consultations and community resources when appropriate.

1115  **Family Medicine With Obstetrics.**

These physicians are certified by the American Board of Family Practice with additional training or experience in obstetrics.
Primary Care and Medical Specialties
Continued

1130 Gastroenterology.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in Gastroenterology. These physicians specialize in the diagnosis and treatment of diseases of the digestive organs, including the stomach, bowels, liver and gallbladder. This specialist treats conditions such as abdominal pain, ulcers, diarrhea, cancer and jaundice and performs complex diagnostic and therapeutic procedures using endoscopes to see internal organs.

1465 Genetics.

These physicians are certified by the American Board of Medical Genetics. These physicians are specialists trained in diagnostic and therapeutic procedures for patients with genetically linked diseases. These specialists use modern cytogenetic, radiological and biochemical testing to assist in specialized genetic counseling; implement necessary therapeutic interventions; and provide prevention through prenatal diagnosis. Physicians who are medical geneticists plan and coordinate large scale screening programs for inborn errors of metabolism, hemoglobinopathies, chromosome abnormalities and neural tube defects.

1150 Geriatrics.

These physicians are certified by either the American Board of Family Practice or the American Board of Internal Medicine with a certificate of added qualification in geriatric medicine. These physicians have special knowledge of the aging process and special skills in the diagnostic, therapeutic, preventative and rehabilitative aspects of illness in the elderly. These physicians also care for geriatric patients in the patient’s home, the office, long-term care settings, such as nursing homes, and the hospital.

1180 Hematology and Medical Oncology.

These physicians are certified by the American Board of Internal Medicine with certificates of special qualification in hematology and medical oncology. Physicians in the field of hematology are internists with additional training who specialize in diseases of the blood, spleen and lymph glands. These specialists treat conditions such as anemia, clotting disorders, sickle cell disease, hemophilia, leukemia and lymphoma. Physicians in the field of medical oncology are internists who specialize in the diagnosis and treatment of all types of cancer and other tumors, both benign and malignant. These specialists decide on and administer chemotherapy for malignancy and consult with surgeons and radiotherapists on other treatments for cancer.

1183 Hepatology.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in gastroenterology. These physicians are specialists who focus on diagnosing and treating liver disease.

1185 Hospitalist – Internal Medicine.

These physicians are certified by the American Board of Internal Medicine. At least 70% of the physician’s time is spent in the hospital. These physicians are internal medicine physicians practicing as hospitalists.

1186 Hospitalist – Family Medicine.

These physicians are certified by the American Board of Family Practice. At least 70% of the physician’s time is spent in the hospital. These physicians are family medicine physicians practicing as hospitalists.
Hospitalist – Laborist.

These surgeons are certified by the American Board of Obstetrics and Gynecology. These surgeons are obstetricians or gynecologists who work full time in a hospital, only delivering babies. A laborist does not see patients in an office setting, as a traditional obstetrician or gynecologist does.

Hospitalist – Pediatrics.

These physicians are certified by the American Board of Pediatrics. At least 70% of the physician’s time is spent in the hospital. These physicians are pediatricians practicing as hospitalists.

Hospitalist – Nocturnist.

These physicians are hospital-based physicians who only work overnight. Nocturnists are usually trained in internal medicine and have experience in hospital medicine. However, there are nocturnists trained in other specialties such as psychiatry or family medicine.

Hypertension and Nephrology.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in nephrology. These physicians are internists who treat disorders of the kidney, high blood pressure, fluid and mineral balance and dialysis of body wastes when the kidneys do not function. These specialists consult with surgeons about kidney transplantation.

Infectious Disease.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in infectious diseases. These physicians deal with infectious diseases of all types and in all organs, including conditions requiring selective use of antibiotics. These specialists diagnose and treat AIDS patients and patients with fevers that have not been explained. These physicians may also have expertise in preventive medicine and conditions associated with travel.

Internal Medicine.

These physicians are certified by the American Board of Internal Medicine. An internal medicine physician is one who provides long-term, comprehensive care in the office and the hospital, managing both common and complex illnesses of adolescents, adults and the elderly. These physicians are trained in the diagnosis and treatment of cancer, infections and diseases affecting the heart, blood, kidneys, joints and digestive, respiratory and vascular systems. These physicians are also trained in the essentials of primary care internal medicine, which incorporates an understanding of disease prevention, wellness, substance abuse, mental health and effective treatment of common problems of the eyes, ears, skin, nervous system and reproductive organs.

Internal Medicine – Medical Home.

Internal medicine – medical home is similar to internal medicine (1210), but these physicians only practice in a medical home setting.

Internal Medicine – Office Only.

Internal medicine – office only is similar to internal medicine (1210), but these physicians only practice in an office setting. These physicians do not practice in the hospital.
1181 Medical Oncology.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in medical oncology. These physicians are internists who specialize in the diagnosis and treatment of all types of cancer and other tumors, both benign and malignant. These specialists decide on and administer chemotherapy for malignancy and consult with surgeons and radiotherapists on other treatments for cancer.

1191 Nephrology Only.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in nephrology. These physicians are internists who treat disorders of the kidney, regulate blood pressure, fluid and mineral balance and dialysis of body wastes when the kidneys do not function.

1250 Neurology.

These physicians are certified by the American Board of Psychiatry and Neurology. A neurologist specializes in the diagnosis and treatment of all types of disease or impaired function of the brain, spinal cord, peripheral nerves, muscles and autonomic nervous system, as well as the blood vessels that relate to these structures.

1252 Neurology – Epilepsy/EEG Lab.

These physicians are certified by the American Board of Psychiatry and Neurology. These physicians are neurologists or child neurologists who focus on the evaluation and treatment of adults and children with recurrent seizure activity and seizure disorders. Specialists in epilepsy (epileptologists) possess specialized knowledge in the science, clinical evaluation and management of these disorders.

1253 Neurology – EMG Lab.

These physicians are certified by the American Board of Psychiatry and Neurology. A neurologist works primarily in a specialty laboratory dedicated to the investigation of diseases of nerves and muscles, the electromyography (EMG) laboratory. These physicians are doctors who specialize in the diagnosis and testing of diseases of the peripheral nervous system.

1255 Neurology – Stroke.

These physicians are certified by the American Board of Psychiatry and Neurology, with a certificate of added qualification in stroke neurology. These physicians specialize in the diagnosis and treatment of all types of diseases or impaired functions of the brain, spinal cord, peripheral nerves, muscles and autonomic nervous system, as well as the blood vessels that relate to these structures.

1256 Neuro-Interventionalist.

These physicians are certified by the American Board of Radiology. Neuro-interventionists are neurologists with additional training in minimally invasive neuro-endovascular procedures. They perform catheter-based procedures that can break up or remove stroke-causing blood clots, repair aneurysms in the brain, stent narrowed arteries in the neck and brain, and treat blood vessel malformations.
1188 **Neuro-Oncology.**

These physicians are trained to diagnose and treat patients with brain tumors and other types of tumors of the nervous system. A neuro-oncologist may be one of a number of types of physicians: A neurologist (a physician trained in the diagnosis and treatment of diseases of the nervous system), an oncologist (cancer specialist), a neurosurgeon (a physician trained in surgery of the nervous system). Other types of physicians may function as neuro-oncologists, because oncology (the study of cancer) is a very large field with a considerable diversity of neural tumors and various ways of diagnosing and treating them. At least 50% of the physician’s time is spent in this specialized field.

1448 **Neuropsychiatry.**

These physicians are certified by the American Board of Psychiatry and Neurology. These physicians specialize in the psychiatric care of persons with disorders of brain function to include diagnostic skills, neurological and mental status examinations, cognitive testing, electrophysiological testing, neuro-imaging, differential diagnosis, crisis intervention, application of time-limited psychotherapy and referral for rehabilitative therapies.

1280 **Occupational/Environmental Medicine.**

These physicians are certified by the American Board of Preventive Medicine. At least 70% of the physician’s time is spent on the control of environmental factors that may adversely affect health or the control and prevention of occupational factors that may adversely affect health safety. This specialist works with large population groups and individual patients to promote health and understanding of the risks of disease, injury, disability and death, seeking to modify and eliminate these risks.

1315 **Ophthalmology – Medical.**

These physicians are ophthalmologists who work 70% of the time with the diagnoses and non-surgical treatment of ocular and visual disorders.

1230 **Ophthalmology – Medical Retinal.**

These physicians are certified by the American Board of Ophthalmology. At least 70% of the physician’s time is spent in the diagnosis and non-surgical treatment of retinal disorders.

1310 **Orthopedic – Medical.**

These physicians are certified by the American Board of Orthopaedic Surgery. At least 70% of the physician’s time in the practice involves the non-surgical treatment of musculoskeletal disorders.

1437 **Pain Management – Non-Anesthesiology.**

These physicians are doctors who have a special certificate in pain management. These physicians provide a high level of care, either as a primary physician or consultant, for patients experiencing problems with acute, chronic or cancer pain in both hospital and ambulatory settings. Patient care needs may also be coordinated with other specialists. At least 70% of the physician’s time is spent in pain management – non-anesthesiology.

1317 **Palliative Care.**

These physicians are certified by the American Board of Hospice and Palliative Medicine. Palliative care programs provide one to two years of specialty training following a primary residency. Palliative Care reduces the severity of a disease or slows its progress, rather than providing a cure. For incurable diseases, in cases where the cure is not recommended due to other health concerns, and when the patient does not wish to pursue a cure, palliative care becomes the focus of treatment. It may occasionally be used in conjunction with curative therapy.
1320 Pediatrics and Adolescent – General.

These physicians are certified by the American Board of Pediatrics. A pediatrician is concerned with the physical, emotional and social health of children from birth to young adulthood. Care encompasses a broad spectrum of health services ranging from preventive health care to the diagnosis and treatment of acute and chronic diseases. A pediatrician deals with biological, social and environmental influences on the developing child, and with the impact of disease and dysfunction on development. A pediatrician who specializes in adolescent medicine is a multidisciplinary health care specialist trained in the unique physical, psychological and social characteristics of adolescents, their health care problems and needs.

*Note for pediatric subspecialties: report physicians who spend at least 70% of their time in the respective sub-specialized area.*

1325 Pediatrics and Adolescent – Adolescent Medicine.

These physicians are certified by the American Board of Pediatrics with a certificate of added qualification in adolescent medicine. A pediatrician who specializes only in adolescent medicine is a multidisciplinary health care specialist trained in the unique physical, psychological and social characteristics of adolescents, their health care problems and needs.

1330 Pediatrics and Adolescent – Allergy.

These physicians are certified by the American Board of Pediatrics with a certificate of added qualification in clinical and laboratory immunology. These physicians are trained in evaluation, physical and laboratory diagnosis and management of disorders involving the immune system.

1350 Pediatrics and Adolescent – Cardiology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric cardiology. A pediatric cardiologist provides comprehensive care to patients with cardiovascular problems. This specialist is skilled in the clinical evaluation of cardiovascular disease and in selecting, performing and evaluating the structural and functional assessment of the heart and blood vessels.

1085 Pediatrics and Adolescent – Dermatology.

These physicians are certified by the American Board of Dermatology. Through additional special training, these physicians have developed expertise in the treatment of specific skin disease categories with an emphasis on those diseases that are predominate in infants, children and adolescents.

1355 Pediatrics and Adolescent – Developmental-Behavioral.

These physicians are certified by the American Board of Pediatrics. These physicians are pediatricians, with special training and experience, who aim to foster understanding and the promotion of optimal development of children and families through research, education, clinical care and advocacy efforts. These physicians assist in the prevention, diagnosis and management of developmental difficulties and problematic behaviors in children and in the family dysfunctions that compromise children’s development.

1360 Pediatrics and Adolescent – Endocrinology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric endocrinology. These physicians are pediatricians who provide expert care to infants, children and adolescents who have diseases that result from an abnormality in the endocrine glands (glands which secrete hormones). These diseases include diabetes mellitus, growth failure, unusual size for age, early or late pubertal development, birth defects, the genital region and disorders of the thyroid, the adrenal and pituitary glands.
1370 Pediatrics and Adolescent – Gastroenterology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric gastroenterology. These physicians are pediatricians who specialize in the diagnoses and treatment of diseases of the digestive systems of infants, children and adolescents. These specialists treat conditions such as abdominal pain, ulcers, diarrhea, cancer and jaundice and perform complex diagnostic and therapeutic procedures using lighted scopes to see internal organs.

1375 Pediatrics and Adolescent – Genetics.

These physicians are certified by the American Board of Medical Genetics with a certificate of special qualification in pediatric genetics. At least 70% of the physician’s time is spent with pediatric patients.

1380 Pediatrics and Adolescent – Hematology and Oncology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric hematology and oncology. These physicians are pediatricians trained in the combination of pediatrics, hematology and oncology to recognize and manage pediatric blood disorders and cancerous diseases.

1382 Pediatrics and Adolescent – Infectious Disease.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric infectious disease. These physicians are pediatricians trained to care for children in the diagnosis, treatment and prevention of infectious diseases. These specialists can apply specific knowledge to affect a better outcome for pediatric infections with complicated courses, underlying diseases that predispose to unusual or severe infections, unclear diagnoses, uncommon diseases and complex or investigational treatments.


These physicians are certified by the American Board of Internal Medicine with special certification in critical care. At least 70% of the physician’s of time is spent with pediatric and adolescent patients in a hospital intensive care unit.

1386 Pediatrics and Adolescent – Internal Medicine.

These physicians are certified by the American Board of Internal Medicine or the American Board of Family Practice with a certificate of added qualification in adolescent medicine. These physicians are multidisciplinary health care specialists trained in the unique physical, psychological and social characteristics of adolescents and their health care problems and needs.

1240 Pediatrics and Adolescent – Neonatology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in neonatal-perinatal medicine. These physicians are pediatricians whose principle care is for sick newborn infants. Clinical expertise is used by physicians for direct patient care and for consulting with obstetrical colleagues to plan for the care of mothers who have high-risk pregnancies.

1390 Pediatrics and Adolescent – Nephrology.

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric nephrology. These physicians are pediatricians who deal with the normal and abnormal development and maturation of the kidney and urinary tract, the mechanisms by which the kidney can be damaged, the evaluation and treatment of renal diseases, fluid and electrolyte abnormalities, hypertension and renal replacement therapy.
1400  **Pediatrics and Adolescent – Neurology.**

These physicians are certified by the American Board of Psychiatry and Neurology with special qualifications in child neurology. A neurologist specializes in the diagnosis and treatment of all types of disease or impaired function of the brain, spinal cord, peripheral nerves, muscles and autonomic nervous system, as well as the blood vessels that relate to these structures. A child neurologist has special skills in the diagnosis and management of neurologic disorders of the neonatal period, infancy, early childhood and adolescence.

4108  **Pediatrics and Adolescent – Physical Medicine and Rehabilitation.**

Physical medicine and rehabilitation physicians spend at least 70% of their time with pediatric patients.

1410  **Pediatrics and Adolescent – Pulmonary.**

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric pulmonology. These physicians are pediatricians dedicated to the prevention and treatment of all respiratory diseases affecting infants, children and young adults. This specialist is knowledgeable about the growth and development of the lung, assessment of respiratory function in infants and children and experienced in a variety of invasive and noninvasive diagnostic techniques.

1415  **Pediatrics and Adolescent – Rheumatology.**

These physicians are certified by the American Board of Pediatrics with a certificate of special qualification in pediatric rheumatology. These physicians are pediatricians who treat diseases of joints, muscle, bones and tendons. A pediatric rheumatologist diagnoses and treats arthritis, back pain, muscle strains, common athletic injuries and collagen diseases.

1417  **Pediatrics and Adolescent – Urgent Care.**

These physicians are certified by the American Board of Pediatrics. At least 70% of the physician’s of time is spent in the urgent care setting treating pediatric patients, including satellite clinics.

1430  **Physical Medicine and Rehabilitation.**

These physicians are certified by the American Board of Physical Medicine and Rehabilitation. Physical medicine and rehabilitation, also referred to as physiatry, is the medical specialty concerned with diagnosing, evaluating and treating patients with physical disabilities. These disabilities may arise from conditions affecting the musculoskeletal system such as neck and back pain, sport injuries or other painful conditions affecting the limbs (e.g., carpal tunnel syndrome). Alternatively, the disabilities may result from neurological trauma or disease such as spinal cord injury, head injury or stroke. For diagnosis and evaluation, a physiatrist may include the techniques of electromyography to supplement the standard history, physical, X-ray and laboratory examinations. The physiatrist has expertise in the appropriate use of therapeutic exercise, prosthetics (artificial limbs), orthotics and mechanical and electrical devices.

1440  **Psychiatry – General.**

These physicians are certified by the American Board of Psychiatry and Neurology. A psychiatrist specializes in the prevention, diagnosis and treatment of mental, addictive and emotional disorders such as schizophrenia and other psychotic disorders, mood disorders, anxiety disorders, substance-related disorders, sexual and gender identity disorders and adjustment disorders. The psychiatrist is able to understand the biological, psychological and social components of illness, and therefore is uniquely prepared to treat the whole person. The main form of treatment used by a psychiatrist is psychopharmacology. A psychiatrist is qualified to order diagnostic laboratory tests and to prescribe medications, evaluate and treat psychological and interpersonal problems and to intervene with families who are coping with stress, crises and other problems in living. Use this definition if the physician spends equal time in an inpatient and outpatient setting.
Primary Care and Medical Specialties
Continued

1441 Psychiatry – Inpatient.
Using the above definition for psychiatry – general, inpatient psychiatry treatment is more ongoing. At least 70% of the physician’s time is spent within an inpatient setting.

1442 Psychiatry – Outpatient.
Using the above definition for psychiatry – general, outpatient psychiatry treatment occurs in a more temporary setting. At least 70% of the physician’s time is spent within an outpatient setting.

1445 Psychiatry – Child.
These physicians are certified by the American Board of Psychiatry and Neurology with a certificate of special qualification in child and adolescent psychiatry. These physicians are psychiatrists with additional training in the diagnosis and treatment of developmental, behavioral, emotional and mental disorders of childhood and adolescence.

1446 Psychiatry – Geriatric.
These physicians are certified by the American Board of Psychiatry and Neurology. These physicians are psychiatrists with expertise in the prevention, evaluation, diagnosis and treatment of mental and emotional disorders in the elderly. The geriatric psychiatrist seeks to improve the psychiatric care of the elderly, both in health and in disease.

1443 Consult Liaison Psychiatrist.
These physicians are certified by the American Board of Psychiatry and Neurology with fellowship training in psychosomatic medicine. These physicians work in areas such as psycho-oncology or psychocardiology. These physicians consult with medical and surgical colleagues on patients with mental and emotional disorders such as delirium, dementia, depression and psychosis, as these can often be secondary or exacerbating the medical or surgical illness. Physicians within this specialty consult and are liaisons on the medical and surgical floors, rather than in a closed unit.

1450 Pulmonary Disease (Without Critical Care).
These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in pulmonary diseases. These physicians treat diseases of the lungs and airways and diagnose and treat cancer, pneumonia, pleurisy, asthma, occupational diseases, bronchitis, sleep disorders, emphysema and other complex disorders of the lungs.

1451 Pulmonary Disease (With Critical Care).
These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in pulmonary and critical care medicine. These physicians treat diseases of the lungs and airways and diagnose and treat cancer, pneumonia, pleurisy, asthma, occupational diseases, bronchitis, sleep disorders, emphysema and other complex disorders of the lungs.

1460 Reproductive Endocrinology.
These physicians are certified by the American Board of Obstetrics and Gynecology with a certificate of special qualification in reproductive endocrinology.
Rheumatologic Disease.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualification in rheumatology. These physicians are internists who treat diseases of joints, muscle, bones, and tendons. These specialists diagnose and treat arthritis, back pain, muscle strains, common athletic injuries, and collagen diseases.

Skilled Nursing Facility Physician.

A primary care provider sometimes referred to as a SNFologist, is a full-time physician practicing in a skilled nursing facility. These physicians are certified by either the American Board of Family Medicine or Internal Medicine. The physician is readily available to patients, particularly older ones, with multiple comorbidities at risk for readmission. These physicians tend to elderly patients nearly exclusively in the skilled nursing setting.

Sleep Lab.

These physicians are internists with demonstrated expertise in the diagnosis and management of clinical conditions that occur during sleep, that disturb sleep or that are affected by disturbances in the wake-sleep cycle. These specialists are skilled in the analysis and interpretation of comprehensive polysomnography and are well-versed in emerging research and management of a sleep laboratory. This subspecialty includes the clinical assessment, polysomnographic evaluation and treatment of sleep disorders, including insomnias, disorders of excessive sleepiness (e.g., narcolepsy), sleep-related breathing disorders (e.g., obstructive sleep apnea), parasomnias, circadian rhythm disorders, sleep-related movement disorders and other conditions pertaining to the sleep-wake cycle. At least 70% of the physician's time is spent in the treatment of sleep disorders.

Sports Medicine.

These physicians are certified by either the American Board of Emergency Medicine or the American Board of Family Practice or the American Board of Internal Medicine or the American Board of Pediatrics, with a certificate of added qualification in sports medicine. These physicians are responsible for continuous care in the field of sports medicine, not only for the enhancement of health and fitness, but also for the prevention and management of injury and illness. These physicians have knowledge and experience in the promotion of wellness and the role of exercise in promoting a healthy lifestyle. Knowledge of exercise physiology, biomechanics, nutrition, psychology, physical rehabilitation, and epidemiology is essential to the practice of sports medicine. At least 70% of the physician's time is spent in nonsurgical orthopedic procedures.

Transplant Nephrology.

These physicians are certified by the American Board of Internal Medicine with a certificate of special qualifications in nephrology. These physicians are nephrologists who specialize in the treatment of kidney and pancreas transplant recipients.

Urgent Care.

These physicians are certified by the American Board of Internal Medicine. At least 70% of the physician's time is spent in the urgent care setting, including satellite clinics.

Wound Care/Hyperbaric.

These physicians have specialized training in the evaluation, treatment and healing of chronic wounds. A chronic, non-healing wound is one that does not heal in six to eight weeks with traditional wound care. Some treatment options a wound care specialist may provide include the following: Doppler evaluation, wound debridement, wound dressings, negative pressure therapy, orthopedic, vascular, and plastic surgery, nutrition counseling, or diabetes counseling. At least 70% of the physician's time is spent in performing wound care.
Surgical Specialties

2005 Bariatric Surgery.

These surgeons are certified by the American Board of Surgery. These surgeons specialize in performing gastric bypass surgery, generally a treatment for obesity. The surgeon provides preoperative, operative and postoperative care to surgical patients. At least 50% of the surgeon’s time is spent in the bariatric practice.

2007 Breast Surgery.

These surgeons are especially skilled in operating on the breast. These surgeons may biopsy a tumor in the breast and, if it is malignant, remove the tumor. A breast surgeon may also do breast reconstruction following a mastectomy for breast cancer. The surgeons who carry out this type of breast reconstruction may be breast oncology surgeons or plastic surgeons. (Surgeons trained in both these specialties are known as oncoplastic surgeons.)

2008 Burn Surgery.

These surgeons are certified by the American Board of Surgery with an additional burn fellowship. These surgeons are especially skilled in operating on and treating burn victims. At least 70% of the surgeon’s time is spent performing burn-related surgeries.

2010 Cardiac/Thoracic Surgery.

These surgeons are certified by the American Board of Thoracic Surgery. Procedures such as cardiac catheterization, angiography, electrocardiography, echocardiography, imaging techniques, endoscopy, tissue biopsy and biologic and biochemical tests appropriate to thoracic diseases and procedures involving evolving techniques such as laser therapy, endovascular procedures, electrophysiologic procedures and devices and thoracoscopy and thoracoscopic surgery are performed by these surgeons. The scope of thoracic surgery encompasses knowledge of normal and pathologic conditions of both cardiovascular and general thoracic structures. This includes congenital and acquired lesions (including infections, trauma, tumors and metabolic disorders) of both the heart and blood vessels in the thorax, as well as diseases involving the lungs, pleura, chest wall, mediastinum, esophagus and diaphragm. In addition, the ability to establish a precise diagnosis, an essential step toward proper therapy, requires familiarity with diagnostic procedures such as cardiac catheterization, angiography, electrocardiography, echocardiography, imaging techniques, endoscopy, tissue biopsy and biologic and biochemical tests appropriate to thoracic diseases. It is essential that the thoracic surgeon be knowledgeable and experienced in evolving techniques, such as laser therapy, endovascular procedures, electrophysiologic procedures and devices and thoracoscopy and thoracoscopic surgery.

2241 Cardiac/Thoracic Surgery – Pediatrics.

These surgeons are certified by the American Board of Thoracic Surgery with additional fellowship training in pediatric cardiac and thoracic Surgery. These surgeons treat infants, children and adolescents with congenital or acquired heart or thoracic diseases. Treatment includes consultation and surgical intervention for a broad range of cardiothoracic conditions, from general thoracic and esophageal problems to complex cardiac procedures for repair of birth abnormalities. Procedures for these surgeons include the following: general thoracic surgery, diagnosis and treatment of congenital heart defects in children, tumor removal, lung biopsies, esophageal surgery and treatment of aortic and mitral valve disease. At least 70% of time is spent performing pediatric cardiac and thoracic surgeries.
2015  **Cardiovascular Surgery.**

These surgeons are certified by the American Board of Surgery with a cardiac surgery fellowship combined with vascular surgery. A cardiovascular surgeon performs operations on the heart and blood vessels of the body. This may include replacement of heart valves or bypasses of blocked coronary arteries. Training in the specialization of cardiovascular surgery involves the completion of a general surgery residency program followed by two or three more years of specialized training in all aspects of heart, blood vessel and chest surgery. Some surgeries for these surgeons include the following: permanent transvenous pacemaker insertion, cardiac surgery of the coronary artery (bypass), treatment of valvular heart disease, artery problems, carotid artery problems or microvascular surgery for diabetic leg ulcers.

2017  **Cataract Surgery.**

These surgeons are certified by the American Board of Ophthalmology. These surgeons are ophthalmologists who specialize in cataract surgery and perform a high volume of cataract surgeries per year.

2020  **Colon and Rectal Surgery.**

These surgeons are certified by the American Board of Colon and Rectal Surgery. These surgeons are trained to diagnose and treat various diseases of the intestinal tract, colon, rectum, anal canal and perianal area by medical and surgery means. These surgeons also deal with other organs and tissues (such as the liver, urinary and female reproductive system) involved with primary intestinal disease. These surgeons have the expertise to diagnose and manage anorectal conditions in an office setting. These surgeons also treat problems of the intestine and colon and perform endoscopic procedures to evaluate and treat problems such as cancer, polyps and inflammatory conditions.

2030  **Emergency Medicine.**

These surgeons are certified by the American Board of Emergency Medicine. These surgeons focus on the immediate decision-making and action necessary to prevent death or any further disability both in the pre-hospital setting by directing emergency medical technicians and in the emergency department. These surgeons provide immediate recognition, evaluation, care, stabilization and disposition of a generally diversified population of adult and pediatric patients in response to acute illness and injury.

2035  **Emergency Medicine – Pediatrics.**

These surgeons are certified by the American Board of Emergency Medicine or the American Board of Pediatrics, with a certificate of added qualification in pediatric emergency medicine. These surgeons are emergency physicians who have special qualifications to manage emergencies in infants and children.

2027  **Endovascular Surgery.**

These surgeons perform minimally invasive surgery designed to access many regions of the body via major blood vessels. These physicians may use intravascular balloons, stents and coils, and perform coronary artery bypass surgery (CABG), carotid endarterectomy and aneurysm clipping. Endovascular surgery may be performed by certified radiologists, neurologists, neurosurgeons, cardiologists and vascular surgeons with an additional fellowship in endovascular training.
2050 General Surgery.

These surgeons are certified by the American Board of Surgery. These surgeons manage a broad spectrum of surgical conditions affecting almost any area of the body. These surgeons establish the diagnosis and provide the preoperative, operative and postoperative care to surgical patients and are usually responsible for the comprehensive management of the trauma victim and the critically ill surgical patient. These surgeons use a variety of diagnostic techniques, including endoscopy, for observing internal structures and may use specialized instruments during operative procedures. A general surgeon is expected to be familiar with the salient features of other surgical specialties in order to recognize problems in those areas and to know when to refer a patient to another specialist.

2090 Neurological Surgery.

These surgeons are certified by the American Board of Neurological Surgery. These surgeons provide the operative and non-operative management (i.e., prevention, diagnosis, evaluation, treatment, critical care and rehabilitation) of disorders of the central peripheral and autonomic nervous systems, including their supporting structures and vascular supply; the evaluation and treatment of pathological processes, which modify function or activity of the nervous system; and the operative and non-operative management of pain. These surgeons treat patients with disorders of the nervous system; disorders of the brain, meninges, skull and their blood supply, including the extracranial carotid and vertebral arteries; disorders of the pituitary gland; disorders of the spinal cord, meninges and vertebral column, including those that may require treatment by spinal fusion or instrumentation; and disorders of the cranial and spinal nerves throughout their distribution.

2095 Neurological Surgery – Pediatrics.

These surgeons are neurological surgeons who spend at least 70% of their time with pediatric patients.

2070 OB/GYN – General.

These physicians are certified by the American Board of Obstetrics and Gynecology. An obstetrician or gynecologist possesses special knowledge, skills and professional capability in the medical and surgical care of the female reproductive system in the pregnant and non-pregnant state and associated disorders. This physician serves as a consultant to other physicians and as a primary physician for women.

2072 OB/GYN – Clinic Only.

These physicians are certified by the American Board of Obstetrics and Gynecology. Obstetricians or gynecologists possesses special knowledge, skills and professional capability in the medical care of the female reproductive system and associated disorders. They do office work only, no obstetrical or gynecologic hospital coverage or gynecology surgical practice, as a traditional obstetrician or gynecologist does. This physician serves as a consultant to other physicians and as a primary physician for women.
Surgical Specialties
Continued

1160 OB/GYN – Gynecological Oncology.
These surgeons are certified by the American Board of Obstetrics and Gynecology with a certificate of special qualification in gynecologic oncology. These surgeons are obstetricians or gynecologists who provide consultation and comprehensive management of patients with gynecologic cancer.

1170 OB/GYN – Gynecology Only.
These physicians are certified by the American Board of Obstetrics and Gynecology. An obstetrician or gynecologist possesses special knowledge, skills and professional capability in the medical and surgical care of the female reproductive system in the non-pregnant state and associated disorders. This physician serves as a consultant to other physicians and as a primary physician for women.

1420 OB/GYN – Maternal Fetal Medicine/Perinatology.
These surgeons are certified by the American Board of Obstetrics and Gynecology. These surgeons are obstetricians or gynecologists who care for, or provide consultation on, patients with complications of pregnancy. These specialists have advanced knowledge of the obstetrical, medical and surgical complications of pregnancy, and their effect on both the mother and the fetus. This surgeon also possesses expertise in the most current diagnostic and treatment modalities used in the care of patients with complicated pregnancies.

1270 OB/GYN – Obstetrics.
These physicians are certified by the American Board of Obstetrics and Gynecology. An obstetrician or gynecologist possesses special knowledge, skills and professional capability in the medical and surgical care of the female reproductive system in the pregnant state and associated disorders. This physician serves as a consultant to other physicians and as a primary physician for women.

2075 OB/GYN – Urgynecology.
These surgeons are certified by the American Board of Obstetrics and Gynecology. These doctors become specialists with additional training and experience in the evaluation and treatment of conditions that affect the female pelvic organs and the muscles and connective tissue that support the organs. They specialized in the care of women with pelvic floor dysfunction. The pelvic floor is the muscles, ligaments, connective tissue and nerves that help support and control the rectum, uterus, vagina and bladder.

2097 Oculo – Facial/Oculoplastic.
These surgeons are certified by the American Board of Plastic Surgery or the American Board of Ophthalmology with training in ocular facial. Plastic and reconstructive surgery involves the periorbital and facial tissues, including eyelids and eyebrows, cheeks, orbit and lacrimal (tear) system. Eye plastic surgeons are ophthalmologists who have completed extensive post-residency training in this unique subspecialty. This is a highly specialized area of plastic surgery that focuses on the area around the eyes, forehead and midface. This area of plastic surgery includes surgeries for drooping eyelids (ptosis), eyelid malposition (entropion, ectropion) and eyelash abnormalities. These surgeons treat tumors of the eyelids and orbit, trauma, congenital abnormalities, thyroid eye disease, tearing problems and blinking difficulties (blepharospasm, hemifacial spasm).
Oncology – Surgical.

Oncology – surgical is the branch of surgery that focuses on the surgical management of malignant neoplasms (cancer). There are currently 14 surgical oncology fellowship training programs in the United States that have been approved by the Society of Surgical Oncology. While many general surgeons are actively involved in treating patients with malignant neoplasms, the designation of surgical oncologist is generally reserved for those surgeons who have completed one of the approved fellowship programs.

Ophthalmology.

These surgeons are certified by the American Board of Ophthalmology. An ophthalmologist has the knowledge and professional skills needed to provide comprehensive eye and vision care. Ophthalmologists are medically trained to diagnose, monitor and medically or surgically treat all ocular and visual disorders. This includes problems affecting the eye and its component structures, the eyelids, the orbit and the visual pathways.

Ophthalmology – Orbital.

These surgeons are certified by the American Board of Ophthalmology with a practice that is limited to the diagnosis, treatment and surgical treatment of the eye sockets and the ocular area. These surgeons do not perform surgeries such as cataract surgery and refractive surgery or perform traditional medical treatments such as vision, contact lenses, etc.


These surgeons are certified by the American Board of Ophthalmology. An ophthalmologist has the knowledge and professional skills needed to provide comprehensive eye and vision care. Ophthalmologists are medically trained to diagnose, monitor and medically or surgically treat all ocular and visual disorders. This includes problems affecting the eye and its component structures, the eyelids, the orbit and the visual pathways. An ophthalmologist also prescribes vision services, including glasses and contact lenses. At least 70% of the surgeon’s time is spent with pediatric patients.

Ophthalmology – Refractive.

These surgeons are certified by the American Board of Ophthalmology. At least 70% of the surgeon’s time is spent in refractive surgery, including laser correction surgery.


These surgeons are certified by the American Board of Ophthalmology. At least 70% of the surgeon’s time is spent in retinal surgery.

Oral-Maxillofacial Surgery.

These surgeons are certified by the American Boards of Dentistry with additional fellowship in oral-maxillofacial surgery. These surgeons are skilled in a wide spectrum of diseases, injuries and defects in the head, neck, face, jaws and the hard and soft tissues of the oral and maxillofacial region. These surgeons treat the entire craniomaxillofacial complex: anatomical area of the mouth, jaws, face, skull and associated structures.

Orthopedic Oncology.

An orthopedic oncologist specializes in the diagnosis and treatment of primary benign and malignant (cancerous) bone and soft-tissue tumors. Following an orthopedic surgical residency, a fellowship in orthopedic oncology lasting one to two years is to be completed. During this time, the physician will learn in depth about the pathology and treatment of various forms of primary malignant neoplasm affecting the boney structures of the human body.
Orthopedic Sports Medicine.

These surgeons are certified by the American Board of Orthopaedic Surgery with an additional fellowship in sports medicine. An orthopedic surgeon is trained in the preservation, investigation and restoration of the form and function of the extremities, spine and associated structures by medical and physical means. At least 70% of the surgeon’s time is spent on sports-related injuries.

Orthopedic Surgery.

These surgeons are certified by the American Board of Orthopaedic Surgery. An orthopedic surgeon is trained in the preservation, investigation and restoration of the form and function of the extremities, spine and associated structures by medical, surgical and physical means. An orthopedic surgeon is involved with the care of patients whose musculoskeletal problems include congenital deformities, trauma, infections, tumors, metabolic disturbances of the musculoskeletal system, deformities, injuries and degenerative diseases of the spine, hands, feet, knee, hip, shoulder and elbow in children and adults. An orthopedic surgeon is also concerned with primary and secondary muscular problems and the effects of central or peripheral nervous system lesions of the musculoskeletal system.

Orthopedic Surgery – Foot and Ankle.

These surgeons are certified by the American Board of Orthopaedic Surgery with an additional fellowship in foot and ankle. These surgeons are orthopedic surgeons who spend at least 70% of their time on foot and ankle cases.

Orthopedic Surgery – Hand.

These surgeons are certified by the American Board of Orthopaedic Surgery with a certificate of added qualification in hand surgery. These surgeons are specialists trained in the investigation, preservation and restoration, by medical, surgical and rehabilitative means, of all structures of the upper extremity directly affecting the form and function of the hand and wrist.

Orthopedic Surgery – Joint Replacement.

These surgeons are certified by the American Board of Orthopaedic Surgery with an additional fellowship in joint replacement. At least 70% of the surgeon’s time is spent in the surgical treatment of degenerative diseases of the knee or hip.


These surgeons are certified by the American Board of Orthopaedic Surgery. At least 70% of the surgeon’s time is spent with pediatric patients.

Orthopedic Surgery – Shoulder.

These surgeons are certified by the American Board of Orthopaedic Surgery with an additional fellowship in shoulder surgery. At least 70% of the surgeon’s time is spent performing surgeries specific to the shoulder and elbow.

Orthopedic Surgery – Spine.

These surgeons are certified by the American Board of Orthopaedic Surgery with an additional fellowship in spine. At least 70% of the surgeon’s time is spent in the surgical treatment of diseases of the spine.

Orthopedic Surgery – Trauma.

These surgeons are certified by the American Board of Orthopaedic Surgery. At least 70% of the surgeon’s time is spent on the treatment of trauma injuries. These surgeons are likely located in an emergency unit.
2210 Otolaryngology.

These surgeons are certified by the American Board of Otolaryngology. An provides comprehensive medical and surgical care for patients with diseases and disorders that affect the ears, nose, throat, respiratory and upper alimentary systems and the related structures of the head and neck. An otolaryngologist diagnoses and provides medical and surgical therapy or prevention of diseases, allergies, neoplasms, deformities, disorders and injuries of the ears, nose, sinuses, throat, respiratory and upper alimentary systems, face, jaws and the other head and neck systems. Head and neck oncology, facial plastic and reconstructive surgery and the treatment of disorders of hearing and voice are fundamental areas of expertise for this specialty.

2215 Otolaryngology – Head and Neck Surgery.

These surgeons are otolaryngologists with additional training in plastic and reconstructive procedures within the head, face, neck and associated structures, including cutaneous head and neck oncology and reconstruction, management of maxillofacial trauma, soft tissue repair and neural surgery. The field is diverse and involves a wide age range of patients, from the newborn to the aged. While both cosmetic and reconstructive surgery is practiced, many additional procedures interface with them.

2205 Otolaryngology – Pediatrics.

These surgeons are certified by the American Board of Otolaryngology with a certificate of special qualification in pediatric otolaryngology. Pediatric otolaryngologists provide comprehensive medical and surgical care for pediatric patients with diseases and disorders that affect the ears, nose, throat, the respiratory and upper alimentary systems and related structures of the head and neck.

2240 Pediatric Surgery.

These surgeons are certified by the American Board of Surgery with a certificate of special qualification in pediatric surgery. These surgeons have expertise in the management of surgical conditions in premature and newborn infants, children and adolescents.

2260 Plastic and Reconstruction.

These surgeons are certified by the American Board of Plastic Surgery. A plastic surgeon deals with the repair, reconstruction or replacement of physical defects of form or function involving the skin, musculoskeletal system, craniomaxillo facial structures, hand, extremities, breast and trunk and external genitalia. A plastic surgeon uses aesthetic surgical principles not only to improve undesirable qualities of normal structures but also in all reconstructive procedures. A plastic surgeon possesses special knowledge and skill in the design and surgery of grafts, flaps, free tissue transfer and replantation. Competence in the management of complex wounds, the use of implantable materials and in tumor surgery is required for this specialty.


These surgeons are plastic surgeons who spend at least 70% of their time with pediatric patients.

2099 Thoracic Oncological Surgery.

Thoracic oncological surgery is the branch of surgery that focuses on the surgical management of malignant neoplasms (cancer). These surgeons are surgical oncologists who specialize in the treatment of lung cancer, mesothelioma, esophageal cancer, sarcoma and cancer that has metastasized to the chest.
Surgical Specialties
Continued

2275  Thoracic Surgery.

These surgeons are certified by the American Board of Thoracic Surgery. A thoracic surgeon provides the operative, perioperative and critical care of patients with pathologic conditions within the chest. Included in this specialty is the surgical care of coronary artery disease, cancers of the lung, esophagus and chest wall, abnormalities of the trachea, abnormalities of the great vessels and heart valves, congenital anomalies, tumors of the mediastinum and diseases of the diaphragm. The management of the airway and injuries of the chest is within the scope of the specialty. Thoracic surgeons have the knowledge, experience and technical skills to accurately diagnose, safely operate upon and effectively manage patients with thoracic diseases of the chest. This requires substantial knowledge of cardiorespiratory physiology and oncology, as well as capability in the use of heart assist devices, management of abnormal heart rhythms and drainage of the chest cavity, respiratory support systems, endoscopy and invasive and noninvasive diagnostic techniques. The management of the airway and injuries of the chest is within the scope of the specialty. At least 90% of the surgeon’s time is spent performing thoracic-related procedures. Use the cardiac and thoracic surgery specialty (2010) for physicians performing both areas.

2300  Transplant Surgery – Kidney.

These surgeons are certified by the American Board of Surgery with special certification in transplant surgery. This physician’s practice is predominantly related to kidney procedures.

2310  Transplant Surgery – Liver.

These surgeons are certified by the American Board of Surgery with special certification in transplant surgery. This physician’s practice is predominantly related to liver procedures.

2292  Transplant Surgery – Medical.

These surgeons are certified by the American Board of Surgery with special certification in transplant surgery. Transplant surgeons will have experience with histocompatibility and immunology, infectious disease and the preoperative and postoperative management of patients who require transplantation, as well as experience in performance and interpretation of special diagnostic techniques necessary for the management of rejection and other problems in transplant recipients.

2290  Transplant Surgery – Thoracic.

These surgeons are certified by the American Board of Surgery with special certification in transplant surgery. This physician’s practice is predominantly related to cardiac procedures.

2295  Trauma Surgery.

These surgeons are certified by the American Board of Surgery with special certification in trauma surgery. Trauma surgeons have expertise in the management of the critically ill and postoperative patient, particularly the trauma victim, and specialize in critical care medicine diagnoses, treating and supporting patients with multiple organ dysfunction. This specialist may have administrative responsibilities for intensive care units and may also facilitate and coordinate patient care among the primary physician, the critical care staff, and other specialists.

3001  Urological Oncology.

These surgeons are certified by the American Board of Urology. These surgeons are urologists who specialize in the treatment of malignant genitourinary diseases. These surgeons may use minimally invasive techniques to manage urologic cancers.
2320 Urology.

These surgeons are certified by the American Board of Urology. These surgeons are urologists who manage benign and malignant medical and surgical disorders of the genitourinary system and the adrenal glands. This specialist has comprehensive knowledge of, and skills in, endoscopic, percutaneous and open surgery of congenital and acquired conditions of the urinary and reproductive systems and their contiguous structures.

2335 Urology – Pediatrics.

These surgeons are certified by the American Board of Urology with a certificate of special qualification in pediatric urology. These surgeons are pediatricians who manage benign and malignant medical and surgical disorders of the genitourinary system and the adrenal glands. These specialists have comprehensive knowledge of, and skills in, endoscopic, percutaneous and open surgery of congenital and acquired conditions of the urinary and reproductive systems and their contiguous structures.

2340 Vascular Surgery.

These surgeons are certified by the American Board of Surgery with a certificate of added qualification in general vascular surgery. A vascular surgeon has expertise in the management of surgical disorders of the blood vessels, excluding the intercranial vessels of the heart. A vascular surgeon has expertise in the diagnosis and care of patients with diseases and disorders affecting the arteries, veins and lymphatic systems, excluding vessels of the brain and heart. Common procedures performed by vascular surgeons include the opening of artery blockages to prevent stroke, correction of artery blockages in the legs and abdominal organs, repair of veins to improve circulation, treatment of aneurysms (bulges) in the aorta and care of patients suffering vascular trauma. Vascular surgeons perform open surgery as well as endovascular (minimally invasive) procedures using balloon angioplasty and stents and are also trained in the treatment of vascular disease by medical (non-surgical) means. Vascular surgeons also perform non-invasive diagnostic testing to detect vascular problems.

Anesthesiology, Pathology and Radiology

2000 Anesthesiology.

These physicians are certified by the American Board of Anesthesiology. These physicians are trained to provide pain relief and maintenance or restoration of a stable condition during and immediately following an operation, an obstetric or diagnostic procedure. These physicians also provide medical management and consultation in pain management and critical care medicine. Anesthesiologists diagnose and treat acute, longstanding and cancer pain problems; diagnose and treat patients with critical illnesses or severe injuries; perform direct resuscitation in the care of patients with cardiac or respiratory emergencies, including the need for artificial ventilation; and supervise post anesthesia recovery.

2230 Anesthesiology – Pain Clinic.

These physicians are certified by the American Board of Anesthesiology with a certificate of added qualification in pain management. These physicians are anesthesiologists who provide a high level of care, either as a primary physician or consultant, for patients experiencing problems with acute, chronic or cancer pain in both hospital and ambulatory settings.

4005 Anesthesiology – Pediatrics.

These physicians are certified by the American Board of Anesthesiology. An anesthesiologist who specializes in pediatric anesthesiology provides anesthesia for neonates, infants, children and adolescents undergoing surgical, diagnostic or therapeutic procedures as well as appropriate preoperative and postoperative care, advanced life support and acute pain management.
Cardiovascular Anesthesiology.

These surgeons are certified by the American Board of Anesthesiology with advanced training in cardiothoracic anesthesia via a one year fellowship. This subspecialty is devoted to the preoperative, intraoperative and postoperative care of adult patients undergoing cardiothoracic surgery and related invasive procedures. It deals with the anesthesia aspects of care related to surgical cases such as open heart surgery, lung surgery and other operations of the human chest. These aspects include perioperative care with expert manipulation of patient cardiopulmonary physiology through precise and advanced application of pharmacology, resuscitative techniques, critical care medicine and invasive procedures. This also includes management of the cardiopulmonary bypass (heart-lung) machine, which most cardiac procedures require intraoperatively while the heart undergoes surgical correction.

Dermatopathology.

These physicians are certified by the American Board of Pathology or the American Board of Dermatology with a certificate of added qualification in dermapathology. A dermapathologist has the expertise to diagnose and monitor diseases of the skin including infectious, immunologic, degenerative and neoplastic diseases. This entails the examination and interpretation of specially prepared issue sections, cellular scrapings and smears of skin lesions by means of routine and special (electron and florescent) microscopes.

Diagnostic Radiology (MD Interventional).

These physicians are certified by the American Board of Radiology with a certificate of added qualification in vascular and interventional radiology. These physicians are radiologists who diagnose and treat diseases by various radiologic imaging modalities. These include fluoroscopy, digital radiography, computed tomography, sonography and magnetic resonance imaging.

Diagnostic Radiology (MD Neuro-Interventional).

These physicians are radiologists who diagnose and treat diseases utilizing imaging procedures as they relate to the brain, spine and spinal cord, head, neck and organs of special sense in adults and children.

Diagnostic Radiology (MD Non-Interventional).

These physicians are certified by the American Board of Radiology. These physicians are radiologists who utilize X-ray, radionuclides, ultrasound and electromagnetic radiation to diagnose disease.

Diagnostic Radiology – Pediatrics.

These physicians are certified by the American Board of Radiology. These physicians are specialists in pediatric radiology who utilize imaging and interventional procedures related to the diagnosis, care and management of congenital abnormalities (those present at birth) and diseases particular to infants and children. Two additional years – one year of a fellowship and one year of practice or additional approved training – are required.

Laboratory Hematology.

Certified by the American Board of Pathology with a certificate of special qualification in Blood Banking/Transfusion Medicine. A pathologist who acquires, prepares, stores and handles blood products for adult, pediatric and neonatal transfusion.

Mammography.

These physicians are certified by the American Board of Radiology with special certification in mammography. Mammographers are radiologists with greater than 70% of their practice in mammography.
4070 Microbiology (MD Only).

These physicians are certified by the American Board of Pathology with a certificate of special qualification in medical microbiology. These physicians are expert in the isolation and identification of microbial agents that cause infectious disease. Viruses, bacteria and fungi, as well as parasites, are identified and, where possible, tested for susceptibility to appropriate antimicrobial agents.

4080 Nuclear Medicine (MD Only).

These physicians are certified by the American Board of Nuclear Medicine. A nuclear medicine specialist employs the properties of radioactive atoms and molecules in the diagnosis and treatment of disease and in research. The nuclear medicine specialist has special knowledge in the biological effects of radiation exposure, the fundamentals of the physical sciences and the principles and operation of radiation detection and imaging instrumentation systems.

4100 Pathology – Combined (MD Only).

These physicians are certified by the American Board of Pathology for combined anatomic and clinical pathology. A pathologist deals with the causes and nature of disease and contributes to diagnosis, prognosis and treatment through knowledge gained by the laboratory application of the biological, chemical and physical sciences. A pathologist uses information gathered from the microscopic examination of tissue specimens, cells and body fluids and from clinical laboratory tests on body fluids and secretions for the diagnosis, exclusion and monitoring of disease.

2270 Pathology – Anatomic (MD Only).

These physicians are certified by the American Board of Pathology in anatomic pathology. These physicians perform surgical procedures in the diagnosis and identification of diseases and deal with the morphologic changes in the tissues, gross and microscopic and pathological anatomy.

4103 Pathology – Clinical (MD Only).

These physicians are certified by the American Board of Pathology for clinical pathology and deals with the study of disease and disease processes by means of chemical, microscopic and serologic examinations.

4105 Pathology – Pediatrics (MD Only).

These physicians are certified by the American Board of Pathology. A pediatric pathologist is expert in the laboratory diagnosis of diseases that occur during fetal growth, infancy and child development. The practice requires a strong foundation in general pathology and substantial understanding of normal growth and development, along with extensive knowledge of pediatric medicine.

4107 Pathology – Surgical (MD Only).

These physicians are certified by the American Board of Pathology in anatomic pathology with a surgical pathology fellowship. A surgical pathologist examines gross and microscopic surgical specimens, as well as biopsies submitted by non-surgeons such as general internists, medical subspecialists, dermatologists and interventional radiologists. The practice of surgical pathology allows for definitive diagnosis of disease (or lack thereof) in any case where tissue is surgically removed from a patient. The pathologist may perform evaluations of molecular properties of tissue by immunohistochemistry or other laboratory tests.
Anesthesiology, Pathology and Radiology
Continued

4130 Radiation Therapy (MD Only).

A radiation oncologist physician certified by the American Board of either Pathology or Radiology. A specialist physician who uses ionizing radiation (such as megavoltage X-rays or radionuclides) in the treatment of cancer.

PhD Only Positions

3020 PhD Only – Biochemistry.

Biochemists study such things as the structures and physical properties of biological molecules, including proteins, carbohydrates, lipids and nucleic acids; the mechanisms of enzyme action; the chemical regulation of metabolism; the chemistry of nutrition; the molecular basis of genetics; the chemistry of vitamins; energy utilization in the cell; and the chemistry of the immune response.

3050 PhD Only – Diagnostic Radiology.

This is a subspecialty concerned with or aiding in diagnosis using radiology. Diagnostic radiologists use ionizing and nonionizing radiation for the diagnosis and treatment of disease.

3055 PhD Only – Imaging (Physicist).

This specialty provides clinical medical imaging physics services using radiological imaging equipment. Clinical medical physicists are board certified (American Board of Radiology, American Board of Medical Physics or the American Board of Science in Nuclear Medicine) and maintain clinical credentials in independent specialties of medical imaging physics. Imaging physicists perform independent research in digital X-ray imaging, magnetic resonance imaging (MRI), X-ray computed tomography (CT), nuclear medicine physics (imaging and therapy) and optical imaging.

3060 PhD Only – Immunology.

This specialty involves clinical treatments and ongoing research programs in molecular aspects of lymphocyte differentiation and function, including MHC expression and peptide interactions; class I MHC structure and function; germinal center biology; HIV pathogenesis; immune responses to gene therapy; inflammation and allergy; signal transduction; and V(D)J recombination.

3070 PhD Only – Microbiology.

These individuals are medical providers who are experts in the isolation and identification of microbial agents that cause infectious disease.

3075 PhD Only – Neuropsychology.

These individuals are psychologists who have completed special training in the neurobiological causes of brain disorders and who specialize in diagnosing and treating these illnesses using a predominantly medical (as opposed to psychoanalytical) approach.
3100 PhD Only – Nuclear Medicine.

This branch of medicine is concerned with the use of radioisotopes in the diagnosis, management and treatment of disease. Nuclear medicine uses small amounts of radioactive materials or radiopharmaceuticals, substances that are attracted to specific organs, bones or tissues.

3140 PhD Only – Other Laboratory.

These individuals are laboratory physicians who are not classified elsewhere.

3150 PhD Only – Pathology.

These individuals are specialists in pathology; they evaluate or supervise diagnostic tests, using materials removed from living or dead patients, function as laboratory consultants to clinicians or conduct experiments or other investigations to determine the causes or nature of disease changes.

3210 PhD Only – Psychology.

These individuals are professionals specializing in diagnosing and treating diseases of the brain, emotional disturbances and behavior problems. Psychologists use psychotherapy as the primary form of treatment. In addition to their PhD and board certification, these individuals may have additional training in a specialized type of therapy.

3211 PhD Only – Psychology – Child.

These individuals are professionals specializing in diagnosing and treating diseases of the brain, emotional disturbances, developmental problems and behavior problems in children. Psychologists use play and other psychotherapy as treatment and their practice is limited to children. In addition to their psychology PhD, these individuals may also have other qualifications, including additional training in child psychology.

3220 PhD Only – Radiation Therapy.

Radiation therapists specialize in the use of high-energy rays to damage cancer cells, stopping them from growing and dividing. Radiation therapists use radiation therapy to locally treat cancer cells only in the affected area. These individuals have a PhD in physics, medical physics or a physical science and are also board certified by the American Board of Radiology in therapeutic radiologic physics or by the American Board of Medical Physics in radiation oncology physics.

Other Health Care Providers

3000 Audiology.

These individuals are health care professionals who are trained to evaluate hearing loss and related disorders, including balance disorders and tinnitus (ringing in the ears), and to rehabilitate individuals with hearing loss and related disorders. An audiologist uses a variety of tests and procedures to assess hearing and balance function. Audiologists fit and dispense hearing aids and other assistive devices for hearing.

3025 Certified Nurse Specialist.

All clinical nurse specialists are registered nurses (RNs) who hold a master’s degree in nursing with a focus on a specific specialty. These nursing professionals usually work in a hospital setting delivering direct patient care, teaching staff and patients, consulting with other professionals and providing leadership and supervision in the workplace.
Certified Registered Nurse Anesthetist.

Certified registered nurse anesthetists (CRNAs) are RNs with critical care experience and graduate training in the delivery of anesthesia. CRNAs, usually under a doctor’s supervision, administer intravenous, spinal and other anesthetics as needed for surgical operations, deliveries and other medical and dental procedures. They control the flow of gases or injected fluids to maintain the needed anesthetic state of the patient.

Chiropractor.

This specialty requires a minimum two years of college and four years in a chiropractic school. The chiropractic specialty is defined as a system of diagnosis and treatment that is based upon the concept that the nervous system coordinates all of the body’s functions; holds that disease results from a lack of normal nerve function; and employs manipulation and specific adjustment of body structures. Chiropractors work to manipulate the spine with their hands to realign the vertebrae and relieve pressure on the nerves.

Dentistry.

Dentistry involves the evaluation, diagnosis, prevention and treatment (non-surgical, surgical or related procedures) of diseases, disorders and conditions of the oral cavity, maxillofacial area and the adjacent and associated structures and their impact on the human body.

Dentistry – Pediatrics.

Licensed by the state board of dentistry, a pediatric dentist specializes in both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.

Epidemiology.

Epidemiology specialists focus on aspects of determining the occurrences and risk factors of disease and practice the prevention and treatment of disease. This can include surveillance and monitoring, screening, establishing and administering intervention programs for prevention or treatment of diseases, designing studies for determining risk factors of effectiveness of prevention approaches and analyzing data. These specialists have a master’s degree in epidemiology.

Midwife.

Midwives are trained to assist a woman during childbirth. Midwives also provide prenatal care for pregnant women, birth education for women and their partners and care for mothers and newborn babies after the birth.

Nuclear Medicine – Non-Radiologist (Dosimetrist).

This branch of medicine concerned with the use of radioisotopes in the diagnosis, management and treatment of disease. Nuclear medicine uses small amounts of radioactive materials or radiopharmaceuticals, substances that are attracted to specific organs, bones or tissues.

Nurse Practitioner – Geriatric.

A geriatric nurse practitioner (NP) is a state-licensed nurse and specializes in the branch of medicine concerned with the diagnosis, treatment and prevention of disease in older people and the problems specific to aging. An NP may function as a primary direct provider of health care and prescribe medications.
313  Nurse Practitioner – Medical Specialty.

Nurse practitioners – medical specialty are state-licensed nurses and their primary function involves any specialty found in the Medical Specialties section of this document with the exception of the following: family practice, internal medicine, pediatrics, geriatrics and any of the respective subspecialties. The NP specializes in providing the patient with a broad spectrum of care, both preventive and curative, over a period of time and in coordinating all of the care the patient receives. An NP may function as a primary direct provider of health care and prescribe medications or as a support position for physicians.

315  Nurse Practitioner – Primary Care.

Nurse practitioners – primary care are state-licensed nurses and their primary function involves the specialties of family practice, internal medicine, pediatrics and any of the respective subspecialties. The NP specializes in providing the patient with a broad spectrum of care, both preventive and curative, over a period of time and in coordinating all of the care the patient receives. A primary care NP often functions as a primary direct provider of health care and prescribes medications.

317  Nurse Practitioner – Surgical Specialty.

Nurse practitioners – surgical specialty are state-licensed nurses and their primary function involves any specialty found in the Surgical Specialties section of this document. The NP specializes in providing the patient with a broad spectrum of care and helps coordinate the care the patient receives. A surgical NP functions as a support position for physicians.

318  Nutritionist (Non-MD).

In a hospital or nursing home a nutritionist is a person who plans or formulates special meals for patients. Nutritionist can also be simply a euphemism for a cook who works in a medical facility, but who does not have extensive training in special nutritional needs. In clinical practices, a nutritionist is a specialist in nutrition. Nutritionists can help patients with special needs, allergies, health problems or a desire for increased energy or weight change devise healthy diets. Some nutritionists in private practice are well-trained, hold a degree and are licensed. Training requirements vary by state.

320  Occupational Therapist.

An occupational therapist is a licensed health professional who is trained to evaluate patients with joint conditions, such as arthritis, to determine the impact the disease on their daily living activities. Occupational therapists can design and prescribe assistive devices that can improve the quality of the daily living activities of daily living for patients with arthritis and other conditions of the muscles and joints.

330  Optometrist.

An optometrist is a doctor of optometry, an OD. This individual is a health care professional who is licensed to provide primary eye care services. Optometrists examine and diagnose eye diseases such as glaucoma, cataracts and retinal diseases, diagnose related systemic (body-wide) conditions such as hypertension and diabetes that may affect the eyes, examine, diagnose and treat visual conditions such as nearsightedness, farsightedness, astigmatism and presbyopia and prescribe glasses, contact lenses, low vision rehabilitation and medications. Optometrists also perform minor surgical procedures such as the removal of foreign bodies.

3042  Orthodontics.

Orthodontics involves the diagnosis, prevention, interception and treatment of all forms of malocclusion of the teeth and associated alterations in their surrounding structures; the design, application and control of functional and corrective appliances; and the guidance of the dentition and its supporting structures to attain and maintain optimum occlusal relations in physiological and esthetic harmony among facial and cranial structures.
3155  **Perfusionist.**
A perfusionist is a specialized health professional who operates the heart-lung machine during cardiac surgery and other surgeries that require cardiopulmonary bypass. The perfusionist's main responsibility is to support the physiological and metabolic needs of the cardiac surgical patient so that the cardiac surgeon may operate. The perfusionist is solely responsible for the circulatory and respiratory functions of the heart-lung machine. Perfusionists can be involved in procurement of cardiothoracic donor organs for transplant.

3160  **Pharmacist.**
A pharmacist is a professional who fills prescriptions. Pharmacists are familiar with medication ingredients, interactions, cautions and hints. Pharmacists prepare and distribute medicines and give information about them.

3170  **Physical Therapist.**
Physician therapists are trained and certified by a state or accrediting body to design and implement physical therapy programs. Physical therapists use specially designed exercises and equipment to help patients regain or improve their physical abilities. Physical therapists work with many types of patients, from infants born with musculoskeletal birth defects to adults suffering from sciatica or the aftereffects of injury, to elderly post-stroke patients.

3180  **Physician Assistant – Medical.**
Physician assistant – medical training (PA) programs are accredited by the National Commission on Certification of Physician Assistants. They work under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). A PA can perform histories and physical examinations that do not go beyond a particular level. A PA can order any test that the PA is competent to interpret and provide the appropriate treatment. PAs follow patients through their hospital course or their course of treatment in a clinic setting.

3182  **Physician Assistant – Primary Care.**
PA training programs are accredited by the National Commission on Certification of Physician Assistants. They work under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). A PA can perform histories and physical examinations that do not go beyond a particular level. A PA can order any test that the PA is competent to interpret and provide the appropriate treatment. PAs follow patients through their hospital course or their course of treatment in a clinic setting.

3185  **Physician Assistant – Surgical.**
PA training programs are accredited by the National Commission on Certification of Physician Assistants. A PA is a surgical practitioner who works under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). PAs can practice in virtually all surgical specialties, provided they are properly trained and supervised. PAs can be second and third assists in surgical procedures and can perform simple surgical procedures such as laceration repairs.

3195  **Podiatry – Medical.**
A podiatrist is a provider who specializes in the evaluation and treatment of diseases of the foot and specializes in health and conditions affecting the lower extremities.

3190  **Podiatry – Surgical.**
A podiatrist is a provider that specializes in the evaluation and treatment of diseases of the foot. They perform surgical procedures on the foot.
3212  Psychology (Master's Level).

This professional specializes in diagnosing and treating diseases of the brain, emotional disturbances and behavior problems. Psychology practitioners use psychotherapy as treatment. These providers have a certified master's degree in psychology.

3230  Social Worker.

A social worker helps individuals deal with a variety of mental health and daily living problems to improve overall functioning. A social worker usually has a master’s degree in social work and has studied sociology, growth and development, mental health theory and practice, human behavior or social environment, psychology and research methods.

3235  Speech Pathology.

This specialist evaluates and treats communication disorders and swallowing problems. Speech pathologists usually have an MA or doctorate in their specialty, as well as a certificate of clinical competence (CCC) earned by working under supervision.

*Most definitions are from the American Board of Medical Specialties’ website [www.certificationmatters.org](http://www.certificationmatters.org).*
Administrative and Physician Leadership Positions

Head Leadership Positions

5170 Chief Compliance Officer (CCO).

The CCO is responsible for maintaining contracts and processes such that adherence to federal and state regulations are maintained.

5000 Chief Financial Officer (CFO).

This position is responsible for the organization’s financial management, financial planning, fiscal policies and administration of accounting practices. The CFO directs and coordinates business office activity (insurance claims, filing, billing, collections and accounts receivable).

5010 Chief Information Officer (CIO).

The CIO manages systems and computer activities, hardware, software, programming, networks, systems design and implementation. The CIO designs and implements processes to automate or streamline operations. This is a vice president level position.

5015 Chief Medical Officer (CMO) – MD.

The CMO develops and implements strategic goals related to the quality improvement and management programs followed by medical and nursing staff. The CMO develops policies, practices and systems to monitor and implement quality control standards and measurements while ensuring compliance with regulatory agency’s standards and requirements.

5017 Chief Medical Informatics Officer (CMIO) – MD.

The CMIO develops and manages the organization’s capabilities in information systems and tools that are applied to medical information. The CMIO coordinates analytical support for medical management, including profiling, health economics and business analytics or performance metrics. The CMIO works with the information systems department to prioritize medical management needs. This position typically reports to the CMO or the CIO.

5025 Chief Nursing Officer (CNO).

The CNO exercises leadership responsibility over the practice of nursing as a member of the executive team. The CNO is responsible for evaluating, developing, recommending and implementing policies and procedures related to the delivery of safe and efficient high quality nursing care. The CNO directs and coordinates the activities of a staff of managerial, professional or technical and auxiliary nursing personnel.

5035 Chief of Medical Staff.

This position is elected by the medical staff and acts as a liaison between the medical staff and administration. The chief of medical staff is required to ensure that the projects and policies get completed in a timely manner. The principle duty of the chief of medical staff is to ensure that the executive decisions are carried out and oversee that staff members follow these guidelines. Generally the chief of medical staff practices medicine for at least 50% of the chief of medical staff’s work time. This is typically a one- to two-year term. This position requires a licensed physician.

5140 Chief Operating Officer (COO).

This position may be considered the vice president of operations and is responsible for the daily operations of the medical practice or any other affiliated organizations. The COO assists the CEO with planning and leadership of patient and non-patient care activities. This position reports to the CEO or president.
Dean, School of Medicine.

An academic dean is a senior administrator at a college or university who has authority over the school of medicine. They report to a provost or chancellor. The academic dean is responsible for approving faculty hiring, overseeing the budget, fundraising, setting academic rules and policies, developing academic programs and performing other administrative functions within the school of medicine. The academic dean must have the ability to improve school programs and monitor policies, while making sure all accreditations, including state and federal criterion, concerning academics are strictly followed.

Hospital Administrator.

The hospital administrator directs and coordinates all hospital operations. This is the top management position within the hospital reporting to the hospital board or corporate or system executive.

Medical Director.

The medical director’s primary function is to manage and coordinate all medical and related services of the clinic, with the exception of nursing services, under the direction of the governing board. This position interacts with the physician administrator and acts as a liaison and representative for the physician teams.

Associate Medical Director.

The associate medical director is responsible for providing physician leadership and support for clinical process analysis and improvement in the ambulatory setting, including creating goals and plans aimed at improving patient, staff and clinician satisfaction, practice efficiency, care outcomes and financial performance. The associate medical director provides physician leadership to the planning and implementation of electronic health record applications. The associate medical director reports to the medical director.

Non-Physician Administrator (CEO and CAO).

The non-physician administrator is a non-physician who plans, directs and coordinates the administrative activity of the organization, participates with governing board in planning and determining the strategic goals and is responsible for all operating and financial performance. This is the top non-physician management position.

Physician Administrator (CEO).

A physician administrator is a physician who plans, directs and coordinates the administrative activity of the organization, participates with governing board in planning and determining the strategic goals and is responsible for all operating and financial performance. This is the top physician management position and reports directly to the governing board.

President/Chancellor.

The chancellor is the chief executive officer of a university or college campus. Chancellors guide the financial direction and academic operations. This position reports to the institution’s board of trustees. The president or chancellor is responsible for planning the college’s budget and overseeing the attainment and appropriation of the institution’s funds. The president or chancellor must also develop a long-term strategic plan for the college’s future, which includes developing and implementing programs and services and bringing new technologies to the college.
Operational Directors

5150 **Business Office Manager.**

This position is responsible for implementing the credit and collection policies and collection activities. The business office manager may also be responsible for patient accounts, insurance, billings, cashiering, coding, third-party contracting, fee setting and reimbursements.

5130 **Clinical Research Director.**

The clinical research director is responsible for all research activities, grants and drug studies. The clinical research director is also responsible for monitoring and complying with all state and federal government rules and regulations that are applicable to research activities. The clinical research director directs all public relations activities concerning research and development.

5110 **Contracting Director.**

The contracting director is responsible for the overseeing, negotiations and maintenance of the organization’s medical revenue contracts. The contracts include commercial and governmental, capitated and non-capitated.

5085 **Director of Development.**

The director of development directs and coordinates fundraising programs for the organization such as the annual fund, planned (deferred) giving, foundation and corporate fundraising, direct mail and phone solicitations, grant proposals, donor research, donor recordkeeping, donor recognition, special fundraising events, etc.

5180 **Division Operations Director.**

The division operations director oversees a group of diverse clinic or hospital departments, but not all clinic or hospital departments. The division operations director reports to COO or CAO.

5185 **Division or Section Chair.**

The division or section chair oversees a set of specialties or a set of departments. This position has broader-level responsibilities than a department chair.

5190 **Finance Director.**

The finance director is responsible for preparing financial statements, supervising the financial departments and overseeing the internal accounting systems. Controller would be a similar title. The finance director reports to the CFO.

5030 **Head of Facilities.**

The head of facilities is responsible for major building projects and facilities expansions, space planning, remodeling of current facilities and maintenance of equipment and facilities. The head of facilities is responsible for the operation and maintenance of facility.

5055 **Head of Faculty Practice Plan.**

The head of faculty practice plan is responsible for the management of a coordinated physician workforce through clinical program operational and financial integration. This position is responsible for cost-effective and patient-sensitive ambulatory care management, multidisciplinary program formation and market diversification.
Operational Directors

Continued

5068  **Head of Graduate Medical Education.**

The head of graduate medical education is responsible for the distribution of pertinent information to departments with residents such as resident training application forms, postgraduate training programs, hiring processes for acceptance of residents and monitoring resident credentials. This position records training assignments for Medicare reimbursement for training postgraduate physicians and monitors continuing medical education credits. This position prepares the yearly budget allocated for postgraduate training and monitors it throughout the fiscal year.

5050  **Health Plan Director.**

The health plan director is in charge of all basic non-medical operations (i.e., plan operations, membership enrollment, plan marketing, claims processing or reporting and health plan quality assurance data collection or reporting).

5040  **Human Resources Director.**

This position is responsible for human resources or personnel administration, including employee or labor relations, employment, wage and benefit administration, staff development, policy design and employee safety. The human resources director reports to the CEO.

5160  **In-House Legal Counsel.**

This position may be considered the vice president of legal. The in-house legal counsel is responsible for legal matters related to malpractice, corporate, human resources, contracts, etc.

5064  **Medical Director – Accountable Care Organization.**

The medical director – accountable care organization is responsible for overseeing the range of services related to becoming or performing as an accountable care organization. The medical director – accountable care organization directs the planning, implementation and marketing of ACO services to meet the organization’s objectives. This position requires a licensed physician.

5071  **Medical Director – Behavioral Health.**

The medical director – behavioral health is responsible for overseeing the range of services related to behavioral medicine. The medical director – behavioral health directs the planning, implementation and marketing of services to meet the organization’s objectives. This position requires a licensed physician.

5072  **Medical Director – Cancer Center.**

The medical director – cancer center is responsible for managing and directing activities of a cancer center. The medical director – cancer center administers cancer center programs and policies. The medical director – cancer center is responsible for ensuring the cancer center meets quality, financial and operating objectives. This position requires a licensed physician.

5073  **Medical Director – Cardiology.**

The medical director – cardiology is responsible for overseeing the range of services related to cardiology. The medical director – cardiology directs the planning, implementation and marketing of services to meet the organization’s objectives. This position requires a licensed physician.

5074  **Medical Director – Hospice.**

The medical director – hospice is responsible for managing and directing the medical activities of the organization’s hospice program. The medical director – hospice is responsible for ensuring the hospice program is in compliance with medical quality standards. This position requires a licensed physician.
Medical Director – Long-Term Care.

The medical director – long-term care is responsible for managing and directing the medical activities of the organization’s long-term care program. The medical director – long-term care is responsible for ensuring the long-term care program is in compliance with medical quality standards. This position requires a licensed physician.

Medical Director – Multispecialty Group.

The medical director – multispecialty group is responsible for managing and directing the activities of a multispecialty group (generally three or more specialties) and administering the group’s programs and policies. The medical director – multispecialty group ensures clinic operations meet financial, quality and productivity goals. This position requires a licensed physician.

Medical Director – Primary Care Group.

The medical director – primary care group is responsible for managing and directing the activities of a primary care group (family practice, internal medicine, pediatrics and possibly obstetrics and gynecology) and administering the group’s programs and policies. The medical director – primary care group ensures clinic operations meet financial, quality and productivity goals. This position requires a licensed physician.

Medical Director – Surgery.

The medical director – surgery is responsible for overseeing the range of services within the department of surgery. The medical director – surgery directs the planning, implementation and marketing of services to meet the organization’s objectives. This position requires a licensed physician.

Medical Director – Utilization Review.

The medical director – utilization review is responsible for managing and directing the organization’s utilization review program designed to oversee the appropriateness and necessity of medical care provided. This position requires a licensed physician.

Medical Education Director.

The medical education director is responsible for the administration of education activities, including medical school, residency programs, allied health programs and extramural funding.

Medical Records Director.

The medical records director oversees all medical records personnel and budget, typically holds a professional license in medical records management and reports to the COO.

Medical Staff Services/Physician Services Director.

The medical staff services or physician services director is a senior level management position responsible for the physician recruitment functions in addition to other services, which may include credentialing, contracting, retention, physician practice management or physician relations. The medical staff services or physician services director supervises and directs personnel assigned to these functions, attends senior management meetings and makes decisions dealing with staffing, budget, strategic planning, credentialing, contracts or more.
5020  **Nursing Director.**

This position is responsible for planning and directing the activities of nursing staff and ancillary nursing personnel. Additionally, the nursing director is responsible for annual operational and financial planning. The nursing director reviews and evaluates nursing service to ensure the quality of patient care and effective use of resources. The nursing director develops and interprets policies and procedures relating to nursing activities. Nursing units would have a reporting relationship to this individual.

5105  **Office Manager.**

This position is responsible for the non-medical activities of a practice. This position is responsible for the daily operations of the organization. This individual may oversee some financial activities such as billing and collections. A health system may have several office managers.

5210  **Physician Recruiter – Manager.**

The physician recruiter – manager is responsible for the recruitment function of the organization. Duties may include recruitment sourcing strategies, managing and directing recruitment personnel, budget, staffing, physician relations and contracting.

5215  **Physician Recruiter – Senior.**

The physician recruiter – senior recruits physicians and providers to meet the organization’s needs. Duties include sourcing, site visits, physician relations and closing contracts. Four to 10 years of physician recruiting experience is required for this position.

5220  **Physician Recruiter – Staff Level.**

The physician recruiter – staff level recruits physicians and providers to meet the organization’s needs. Duties include sourcing, site visits, physician relations and closing contracts. One to three years of physician recruiting experience is required for this position.

5120  **Public Affairs/Marketing Director.**

The public affairs and marketing director is responsible for planning, designing and implementing marketing, public relations and media activities.

5221  **Quality Improvement Director.**

The quality improvement director’s primary function is to provide leadership and direction for quality improvement activities at the organization. This position is responsible for the development and maintenance of processes and procedures that monitor and improve quality.