



2019 MGMA COMPENSATION AND PRODUCTION SURVEY

(*Asterisks denote required questions)

[Click here to view full participation benefits details.](#)

Use the checklist below to help you compile answers in preparation for survey participation.

PRACTICE PROFILE INFO

<input type="checkbox"/>	*Practice Name
<input type="checkbox"/>	Practice Address
<input type="checkbox"/>	Practice City
<input type="checkbox"/>	*Practice State
<input type="checkbox"/>	*Practice Zip
<input type="checkbox"/>	*What type of organization do you work for?
<input type="checkbox"/>	*Report Recipient Email
<input type="checkbox"/>	*Who is your practice's majority owner?
<input type="checkbox"/>	*What is your practice's practice or specialty type?

PRACTICE DEMOGRAPHICS

<input type="checkbox"/>	*Practice NPI number
<input type="checkbox"/>	*For the purpose of reporting the information in this questionnaire, what fiscal year was used?
<input type="checkbox"/>	*Total physician FTE in practice
<input type="checkbox"/>	*Total nonphysician provider FTE in practice
<input type="checkbox"/>	*Total support staff FTE in practice
<input type="checkbox"/>	*What was the total medical revenue (collections) for your practice or department?

PROVIDER DEMOGRAPHICS

<input type="checkbox"/>	*Provider Name
<input type="checkbox"/>	*Employment Status
<input type="checkbox"/>	*Provider NPI
<input type="checkbox"/>	*Physician or Nonphysician Provider Specialty
<input type="checkbox"/>	*Provider Rank



FTE DEMOGRAPHICS

<input type="checkbox"/>	*Full-Time Equivalent
<input type="checkbox"/>	*% Billable Clinical
<input type="checkbox"/>	*% Administrative
<input type="checkbox"/>	*% Teaching
<input type="checkbox"/>	*% Research
<input type="checkbox"/>	*% Other

PROVIDER COMPENSATION

<input type="checkbox"/>	*Total Compensation
<input type="checkbox"/>	*First Year Guaranteed Compensation NEW HIRES ONLY
<input type="checkbox"/>	*% of Total Compensation based on Straight/Base Salary
<input type="checkbox"/>	*% of Total Compensation based on Productivity
<input type="checkbox"/>	*% of Total Compensation based on Quality and Patient Experience Metrics
<input type="checkbox"/>	*% of Total Compensation based on On-Call Compensation
<input type="checkbox"/>	*% of Total Compensation based on Other Metrics

PROVIDER PRODUCTION

<input type="checkbox"/>	*Are External Providers Included in Productivity? PHYSICIANS ONLY
<input type="checkbox"/>	*Can Nonphysician Provider Bill Under Them Self? NONPHYSICIAN PROVIDERS ONLY
<input type="checkbox"/>	*Total RVUs
<input type="checkbox"/>	*Work RVUs
<input type="checkbox"/>	Collections for Professional Charges
<input type="checkbox"/>	Professional Gross Charges
<input type="checkbox"/>	*% of TC Included in Collections and Charges

PLACEMENT INFORMATION (NEW HIRES ONLY)

<input type="checkbox"/>	*Which State did the Provider Relocate from?
<input type="checkbox"/>	*Hired Out of Residency or Fellowship PHYSICIANS ONLY