MGMA PROVIDER COMPENSATION SAMPLE SPECIALTY 2022 REPORT BASED ON 2021 DATA

Sample Specialty Compensation - All Practices

Tanana a paramay									
	Groups	Providers	roviders Mean		25 %tile	25 %tile Median 7		90 %tile	
Total									
Compensation	2,245	31,257	\$462,357	\$236,671	\$306,112	\$415,465	\$571,775	\$747,864	
Signing Bonus	268	867	\$31,149	\$26,285	\$15,000	\$25,000	\$36,000	\$55,000	
Guaranteed									
Compensation	763	3,374	\$302,297	\$187,465	\$192,480	\$282,000	\$383,427	\$514,994	

Sample Specialty Compensation - Geographic Section

		Groups	Providers	Mean	Std Dev	25 %tile	Median	75 %tile	90 %tile
Eastern	Total Compensation	808	7,830	\$403,165	\$207,993	\$273,497	\$368,704	\$500,000	\$633,841
Midwest	Total Compensation	414	8,241	\$484,829	\$245,117	\$314,655	\$433,510	\$613,145	\$789,295
Southern	Total Compensation	714	8,177	\$502,803	\$263,500	\$319,650	\$450,005	\$627,245	\$833,272
Western	Total Compensation	309	7,009	\$454,876	\$208,251	\$319,497	\$417,142	\$551 <i>,</i> 817	\$701 <i>,</i> 331
Eastern	Signing Bonus	144	319	\$33,998	\$33,709	\$10,000	\$25,000	\$40,000	\$75,000
Midwest	Signing Bonus	60	168	\$38,679	\$27,274	\$25,000	\$30,000	\$50,000	\$66,000
Southern	Signing Bonus	35	231	\$24,569	\$15,267	\$10,000	\$25,000	\$30,000	\$50,000
Western	Signing Bonus	33	149	\$26,759	\$15,191	\$20,000	\$25,000	\$30,000	\$50,000
	Guaranteed	204	0.40	4270.050	4444.005	4406 440	4275 000	4250.000	4450.040
Eastern	Compensation	301	943	\$278,850	\$141,026	\$186,442	\$275,000	\$350,000	\$459,040
Midwest	Guaranteed Compensation	167	1,048	\$275,884	\$157,727	\$160,000	\$255,120	\$370,000	\$500,000
	Guaranteed								
Southern	Compensation	203	860	\$361,996	\$258,186	\$238,259	\$311,634	\$419,495	\$625,900
	Guaranteed								
Western	Compensation	99	523	\$299,337	\$152,729	\$196,195	\$280,000	\$400,000	\$523,321

Sample Specialty Compensation-Organization Ownership

		Groups	Providers	Mean	Std Dev	25 %tile	Median	75 %tile	90 %tile
Physician Owned	Total Compensation	183	5,794	\$491,427	\$252,224	\$333,896	\$434,906	\$575,783	\$818,278
Hospital/IDS									
Owned	Total Compensation	1,935	21,923	\$458,153	\$240,773	\$297,797	\$407,361	\$572,954	\$753,083
Other Ownership	Total Compensation	127	3,540	\$440,817	\$171,774	\$318,845	\$417,747	\$558,768	\$660,754
Physician Owned	Signing Bonus	26	54	\$29,888	\$17,208	\$20,000	\$25,000	\$38,500	\$50,000
Hospital/IDS									
Owned	Signing Bonus	217	717	\$31,957	\$27,690	\$15,000	\$25,000	\$35,000	\$60,000
Other Ownership	Signing Bonus	27	96	\$25,823	\$17 <i>,</i> 882	\$10,000	\$25,000	\$38,750	\$50,000
	Guaranteed								
Physician Owned	Compensation	62	225	\$278,349	\$139,112	\$193,097	\$250,000	\$370,000	\$486,000
Hospital/IDS	Guaranteed								
Owned	Compensation	589	2,459	\$317,301	\$200,860	\$204,256	\$297,000	\$400,000	\$535,000
	Guaranteed								
Other Ownership	Compensation	116	690	\$256,638	\$136,909	\$165,000	\$232,238	\$325,000	\$438,829

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Sample Specialty Productivity - All Practices

	Groups	Providers	Mean	Std Dev	25 %tile	Median	75 %tile	90 %tile
Collections 0% TC	390	5,497	\$506,223	\$328,715	\$276,474	\$421,945	\$659,765	\$931,452
Work RVUs	1,786	22,029	7,057	4,142	4,150	6,236	9,090	12,388

Sample Specialty Productivity - Geographic Section

		Groups	Providers	Mean	Std Dev	25 %tile	Median	75 %tile	90 %tile
Eastern	Collections 0% TC	63	1,375	\$507,589	\$338,517	\$279,350	\$404,136	\$652,139	\$927,565
Midwest	Collections 0% TC	43	1,069	\$572,084	\$390,893	\$294,370	\$472,145	\$739,807	\$1,109,026
Southern	Collections 0% TC	247	2,721	\$482,812	\$294,928	\$265,901	\$417,989	\$640,936	\$875,682
Western	Collections 0% TC	37	332	\$480,379	\$302,458	\$282,147	\$433,371	\$624,163	\$815,186
Eastern	Work RVUs	614	6,344	6,422	3,514	3,910	5,834	8,323	10,965
Midwest	Work RVUs	383	6,235	6,766	3,948	3,973	5,985	8,766	11,780
Southern	Work RVUs	561	6,076	8,114	4,793	4,709	7,194	10,557	14,515
Western	Work RVUs	228	3,374	6,882	3,962	4,211	6,098	8,726	11,811

Sample Specialty Productivity - Organization Ownership

		Groups	Providers	Mean	Std Dev	25 %tile	Median	75 %tile	90 %tile
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Physician Owned	Collections 0% TC	40	732	\$665,959	\$422,944	\$344,495	\$606,880	\$882,856	\$1,180,148
Hospital/IDS									
Owned	Collections 0% TC	343	3,992	\$498,931	\$311,716	\$281,798	\$422,477	\$640,927	\$900,841
Other Ownership	Collections 0% TC	7	773	\$392,618	\$245,271	\$222,802	\$326,597	\$509,684	\$746,991
Physician Owned	Work RVUs	140	2,956	7,848	4,161	4,981	7,030	10,036	13,204
Hospital/IDS									
Owned	Work RVUs	1,557	17,566	6,934	4,151	4,045	6,097	8,910	12,235
-									
Other Ownership	Work RVUs	89	1,507	6,931	3,820	4,175	6,283	9,271	12,031

GLOSSARY

Collections 0% Technical Component (TC)

The actual dollars collected that can be attributed to a physician for all professional services.

Included:

- · Fee-for-service collections:
- · Allocated capitation payments;
- · Personally performed administration of chemotherapy drugs; and
- · Personally performed administration of immunizations.

Not included:

- · Collections on drug charges, including vaccinations, allergy injections, and immunizations, as well as chemotherapy and antinauseant drugs;
- · The technical component (TC) associated with any laboratory, radiology, medical diagnostic or surgical procedure collections;
- · Collections attributed to the advanced practice providers;
- · Infusion-related collections;
- · Facility fees;
- · Supplies; or
- · Revenue associated with the sale of hearing aids, eyeglasses, contact lenses, etc.

Guaranteed Compensation

The first-year guaranteed contract dollar amount.

Not included:

- · The dollar value of a signing bonus and other dollar amounts received through a bonus system such as production-based bonuses; or
- The dollar value of expense reimbursements, fringe benefits paid by the medical practice such as retirement plan contributions, life and health insurance or automobile allowances or any employer contributions to a 401(k), 403(b) or Keogh Plan.

Organization Ownership

Hospital/IDS Owned:

Hospital: A hospital is an inpatient facility that admits patients for overnight stays, incurs nursing care costs, and generates bed-day revenues.

Integrated Health System or Integrated Delivery System (IDS): A network of organizations that provide or coordinate and arrange for the provision of a continuum of health care services to consumers and is willing to be held clinically and fiscally responsible for the outcomes and the health status of the populations served. Generally consisting of hospitals, physician groups, health plans, home health agencies, hospices, skilled nursing facilities, or other provider entities, these networks may be built through "virtual" integration processes encompassing contractual arrangements and strategic alliances as well as through direct ownership.

Management Services Organization (MSO): An entity organized to provide various forms of practice management and administrative support services to health care providers. These services may include centralized billing and collections services, management information services, and other components of the managed care infrastructure. MSOs do not actually deliver health care services. MSOs may be jointly or solely owned and sponsored by physicians, hospitals, or other parties. Some MSOs also purchase assets of affiliated physicians and enter into long-term management service arrangements with a provider network. Some expand their ownership base by involving outside investors to help capitalize the development of such practice

Physician Practice Management Company (PPMC): Publicly held or entrepreneurial directed enterprises that acquire total or partial ownership interests in physician organizations. PPMCs are a type of MSO, however their motivations, goals, strategies, and structures arising from their unequivocal ownership character – development of growth and profits for their investors, not for participating providers – differentiate them from other MSO **Physician Owned:**

Advanced Practice Providers: Any advanced practice provider (e.g. nurse practitioners, physical therapists, etc.) duly licensed and qualified under the law of jurisdiction in which treatment is received.

Physicians: Any Doctor of Medicine (MD) or Doctor of Osteopathy (DO) who is duly licensed and qualified under the law of jurisdiction in which treatment is received.

Other Majority Owner:

Insurance Company or Health Maintenance Organization (HMO): An insurance company that accepts responsibility for providing and delivering a predetermined set of comprehensive health maintenance and treatment services to a voluntarily enrolled population for a negotiated and fixed periodic premium. An organization that indemnifies an insured party against a specified loss in report for premiums and paid as **Government:** A governmental organization at the federal, state, or local level. Government funding is not enough criterion. Government ownership is the key factor. An example would be a medical clinic at a federal, state, or county correctional facility.

Private Investor(s): A company or individual that takes their own money and uses it to fund another organization. Some investors have the option to invest passively, which means they give their funding and play no further role, while others have a more significant role in the organization.

University or Medical School: An institution of higher learning with teaching and research facilities comprising undergraduate, graduate and professional schools. A medical school is an institution that trains physicians and awards medical and osteopathic degrees.

Signing Bonus

The dollar value that the provider received as a signing bonus in his or her contract.

Not Included:

· The dollar value of stipends, student loan repayments or relocation expenses.

Total Compensation

The amount reported as direct compensation on a W2, 1099, or K1 (for partnerships) plus all voluntarysalary reductions such as 401(k), 403(b), Section 125 Tax Savings Plan, and Medical Savings Plan. The amount includes salary, bonus and/or incentive payments, research stipends, honoraria, and distribution of profits. However, it does not include the dollar value of expense reimbursements; fringe benefits paid by the medical practice such as retirement plan contributions; life and health insurance; automobile allowances; or any employer For C corporations (under United States federal income tax law, this refers to any corporation that is taxed separately from its owners), the dollar amount reported as direct compensation in Box 5 (Medicare wages and Included:

- · Total Medicare wages this includes On-Call compensation;
- On-Call compensation included in total Medicare wages;
- · Employee contributions: 401K/retirement, health insurance, life insurance, and other pre-taxed deductions.

Not included:

- · Expense reimbursements;
- · Fringe benefits paid by the medical practice;
- · Flex spending accounts (FSA);
- · Employer contributions: 401k/retirement, health insurance, life insurance, or other employer contributions.

For partnerships (or LLCs that file as a partnership) the dollar amount reported as direct compensation in Box 1 plus Box 4 minus Box 12 minus Box 13 from the provider's K-1 form 1065.

Included:

· In box 13: Codes A through W (this includes 401K)

For S corporations (or LLCs that file as an S corporation) the dollar amount reported as direct compensation in Box 5 (Medicare wages and tips) from the provider's W-2 PLUS Box1 minus Box 11 minus Box 12 from the provider's K-1 form 1120S (combine amounts from both forms)

Included:

· In box 12: Codes A through S (this includes 401K)

Work Relative Value Units (RVUs)

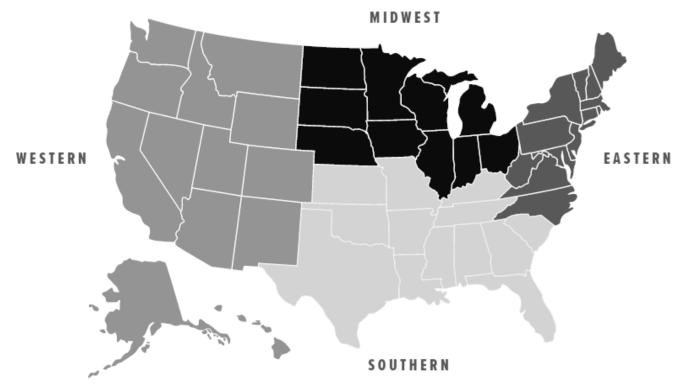
The relative value units (RVUs), as measured by the Resource Based Relative Value Scale (RBRVS), not weighted by a conversion factor, attributed to all professional services. An RVU is a nonmonetary standard unit of measure that indicates the value of services provided by physicians, advanced practice providers, and other health care professionals. The RVU system is explained in detail in the December 28,2020 Federal Register, pages 84472-85377. The Physician Fee Schedule Relative Value Files present tables of RVUs by CPT code. Please note the RVUs published in the December 28, 2020 Federal Register, effective for the most recent calendar year (2021), are used. The work RVUs reported in the data set will only reflect those performed by the physician or advanced **Included:**

- · RVUs for the "physician work RVUs" only, including any adjustments made because of modifier usage;
- · Physician work RVUs for all professional medical and surgical services performed by providers;
- · Physician work RVUs for the professional component of laboratory, radiology, medical diagnostic, and surgical
- · Physician work RVUs for all procedures performed by the medical practice. For procedures with either no listed CPT code or with an RVU value of zero, RVUs can be estimated by dividing the total gross charges for the unlisted or unvalued procedures by the practice's known average charge per RVU for all procedures that are listed and
- · Physician work RVUs for procedures for both fee-for-service and capitation patients;
- · Physician work RVUs for all payers, not just Medicare;
- · Physician work RVUs for purchased procedures from external providers on behalf of the practice's fee-for-service patients;
- · Anesthesia practices should provide the physician work component of the RVU for flat fee procedures only such as lines, blocks, critical care visits, intubations, and post-operative management care; and
- · All RVUs associated with professional charges, including both medically necessary and cosmetic RVUs.

Not included:

- · RVUs for "malpractice RVUs" or "practice expense RVUs";
- · RVUs attributed to advanced practice providers or any other external provider within the
- · physician RVU data;
- · RVUs for other scales such as McGraw-Hill or California;
- · RVUs for purchased procedures from external providers on behalf of the practice's
- · capitation patients;
- · RVUs that have been weighted by a conversion factor. Do not weigh the RVUs by a
- · conversion factor;
- · RVUs where the Geographic Practice Cost Index (GPCI) equals any value other than one.
- · The GPCI must be set to 1.000 (neutral); or
- · Anesthesiology departments. These departments reported ASA units.

Geographic Section



Western Section
Alaska
Arizona
California
Colorado
Hawaii
Idaho
Montana
Nevada
New Mexico
Oregon
Utah
Washington

Wyoming

Midwest Section Illinois Indiana Iowa Michigan Minnesota Nebraska North Dakota Ohio South Dakota Wisconsin

Eastern Section Connecticut Delaware District of Columbia Florida Maine Maryland Massachusetts New Hampshire New Jersey New York North Carolina Pennsylvania Rhode Island Vermont Virginia West Virginia

Southern Section Alabama Arkansas Florida Georgia Kansas Kentucky Louisiana Mississippi Missouri Oklahoma South Carolina Tennessee Texas

MGMA Specialties and Roll Ups

Allergy/Immunology includes only Allergy/Immunology.

Anesthesiology and Pain Management includes Anesthesiology, Anesthesiology: Cardiology, Anesthesiology: Pain Management, Pain Management: Nonanesthesia, and Pediatrics: Anesthesiology.

Cardiology includes Cardiology: Electrophysiology, Cardiology: Invasive, Cardiology: Invasive-Interventional, and Cardiology: Noninvasive.

Dermatology includes Dermatology, Dermatology: Dermatology, Dermatology: Mohs Surgery, and Pediatrics: Dermatology.

Emergency Medicine includes Emergency Medicine and Pediatrics: Emergency Medicine.

Endocrinology/Metabolism includes Endocrinology/Metabolism and Pediatrics: Endocrinology.

Family Medicine includes Family Medicine (with OB), Family Medicine (without OB), Family Medicine:

Ambulatory Only (No Inpatient Work), Family Medicine: Sports Medicine, Family Medicine: Urgent Care, and **Gastroenterology** includes Gastroenterology and Gastroenterology: Hepatology.

Hematology/Oncology includes Hematology/Oncology and Hematology/Oncology: Oncology (Only).

Infectious Disease includes Infectious Disease and Pediatrics: Infectious Disease.

Internal Medicine includes Bariatrics (Nonsurgical)/Obesity Medicine, Critical Care: Intensivist, Genetics, Geriatrics, Hospice/Palliative Care, Hospitalist: Internal Medicine, Hospitalist: Nocturnist, , Hyperbaric Medicine/Wound Care, Internal Medicine: General, Internal Medicine: Ambulatory Only (No Inpatient Work),

Nephrology includes Nephrology, Nephrology: Transplant, and Pediatrics: Nephrology.

Neurology includes Neurology, Neurology: Epilepsy/EEG, Neurology: Neurocritical Care, Neurology:

Neuromuscular Medicine, Neurology: Stroke Medicine, and Pediatrics: Neurology.

Obstetrics/Gynecology includes Hospitalist: OB/GYN, Obstetrics/Gynecology: General, OB/GYN: Gynecology (Only), OB/GYN: Gynecological Oncology, OB/GYN: Maternal and Fetal Medicine, OB/GYN: Minimally Invasive Gynecologic Surgery, OB/GYN: Reproductive Endocrinology, and OB/GYN: Urogynecology.

Occupational and Physical Medicine Rehab includes Occupational Medicine, Orthopedic (Nonsurgical), and Physiatry (Physical Medicine and Rehabilitation).

Ophthalmology includes Ophthalmology, Ophthalmology: Corneal and Refractive Surgery, Ophthalmology: Glaucoma, Ophthalmology: Neurology, Ophthalmology: Oculoplastic and Reconstructive Surgery, Ophthalmology: Retina, and Pediatrics: Ophthalmology.

Orthopedic Surgery Joints and Spine includes Orthopedic Surgery: Foot and Ankle, Orthopedic Surgery: Hand, Orthopedic Surgery: Hip and Joint, Orthopedic Surgery: Shoulder/Elbow, Orthopedic Surgery: Spine, and Orthopedic Surgery: Sports Medicine.

Orthopedic Surgery: General includes Orthopedic Surgery: General, Orthopedic Surgery: Oncology, Orthopedic Surgery: Trauma, and Pediatrics: Orthopedic Surgery.

Otorhinolaryngology includes Otorhinolaryngology and Pediatrics: Otorhinolaryngology.

Pathology includes Pathology: Anatomic and Clinical, Pathology: Anatomic, Pathology: Anatomic-Autopsy, Pathology: Anatomic-Cytopathology, Pathology: Anatomic-Neuropathology, Pathology: Clinical, Pathology: Clinical-Hematopathology, Pathology: Clinical-Transfusion Medicine, and Pathology: Surgical.

Pediatrics includes Pediatrics: General, Pediatrics: Adolescent Medicine, Pediatrics: Allergy/Immunology, Pediatrics: Bone Marrow Transplant, Pediatrics: Cardiology, Pediatrics: Child Development, Pediatrics: Critical Care/Intensivist, Pediatrics: Gastroenterology, Pediatrics: Genetics, Pediatrics: Hematology/Oncology, Pediatrics: Hospitalist, Pediatrics: Hospitalist-Internal Medicine, Pediatrics: Internal Medicine, Pediatrics: Neonatal Medicine, Pediatrics: Pulmonology, Pediatrics: Rheumatology, Pediatrics: Sports Medicine, and Pediatrics: Podiatry includes Podiatry: General and Podiatry: Surgery-Foot and Ankle.

Psychiatry includes Psychiatry: General, Psychiatry: Addiction Medicine, Psychiatry: Behavioral Medicine, Psychiatry: Child and Adolescent, and Psychiatry: Forensic.

Pulmonary Medicine includes Pulmonary Medicine: General, Pulmonary Medicine: Critical Care, and Pulmonary Medicine: General and Critical Care.

Radiation Oncology includes only Radiation Oncology.

Radiology includes Pediatrics: Radiology, Radiology: Interventional, Radiology: Diagnostic, Radiology:

Neurological, and Radiology: Nuclear Medicine.

Rheumatology includes only Rheumatology.

Surgery General includes Pediatrics: Surgery, Surgery: General, Surgery: Bariatric, Surgery: Breast, Surgery: Colon and Rectal, Surgery: Endocrine, Surgery: Endovascular (Primary), Surgery: Oncology, Surgery: Oral, Surgery: Transplant, Surgery: Transplant-Heart, Surgery: Transplant-Kidney, Surgery: Transplant-Liver, Surgery: Trauma, Surgery: Trauma-Burn, and Surgery: Vascular (Primary).

Surgery: Cardiothoracic includes Pediatrics: Cardiovascular Surgery, Surgery: Cardiovascular, and Surgery: Thoracic (Primary).

Surgery: Neurological includes Pediatrics: Neurosurgery and Surgery: Neurological.

Surgery: Plastic and Reconstruction includes Pediatrics: Plastic and Reconstruction Surgery, Surgery: Plastic and Reconstruction, and Surgery: Plastic and Reconstruction-Hand.

Urology includes Pediatrics: Urology and Urology.