



MGMA Regulatory Burden Survey

August 2017

Total respondents: The survey includes responses from 750 group practices with the largest representation in independent medical practices and in groups with 6 to 20 physicians.

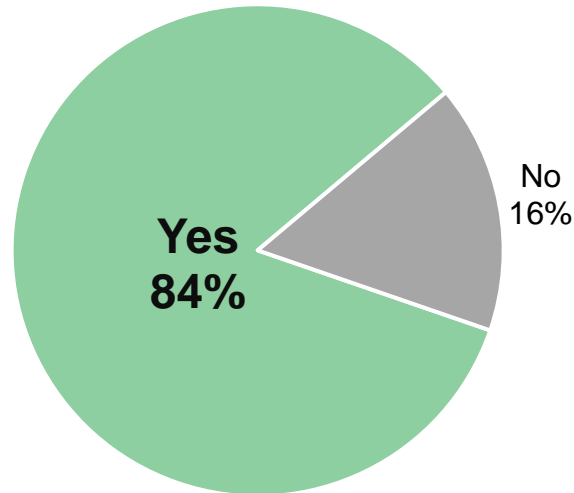
1. Rate your level of agreement with the following statement: A reduction in Medicare’s regulatory complexity would allow our practice to reallocate resources toward patient care.				
Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
12%	1%	4%	20%	64%

2. Approximately how much did you spend, directly and indirectly, per full-time equivalent (FTE) physician last year to comply with new and existing federal regulations? (e.g., loss of physician productivity, staff training regarding regulations, IT implementation and upgrade costs, consulting and attorney fees, etc.)				
Less than \$10,000	\$10,001 - \$40,000	\$40,001 - \$70,000	\$70,001 - \$100,000	More than \$100,000
13%	38%	22%	13%	14%

3. How burdensome would you rate each of the following applicable regulatory issues?

	Not burdensome	Slightly burdensome	Moderately burdensome	Very Burdensome	Extremely Burdensome	Very + Extremely
Medicare Quality Payment Program	1%	3%	15%	32%	49%	82%
Lack of electronic attachments for claims and prior authorization	3%	7%	16%	25%	50%	74%
Payer audits and appeals	1%	9%	21%	29%	40%	69%
Lack of EHR interoperability	4%	8%	20%	29%	40%	68%
Payer use of virtual credit cards	8%	17%	17%	19%	40%	59%
Accessing information via Medicare web portals	5%	15%	27%	24%	29%	53%
Translation and interpretation services	9%	18%	21%	21%	32%	53%
Payer fees for electronic payments	7%	19%	27%	23%	25%	48%
Medicare credentialing	6%	24%	29%	24%	17%	41%
Fraud and abuse issues	13%	23%	34%	17%	13%	30%

4. Is your practice participating in the Merit-Based Incentive Payment System (MIPS) in 2017?



5. At what “pace” do you plan to participate in MIPS in 2017?

Report the minimum information to avoid a penalty in 2019	20%
Report some data to aim for a modest payment adjustment in 2019	31%
Report the full set of MIPS data to aim for a positive payment adjustment and qualification for an exceptional performance bonus in 2019	41%
Not sure	8%

6. For the following issues, please rate your degree of concern regarding your practice's ability to successfully participate in MIPS.

	Not at all concerned	Slightly concerned	Moderately concerned	Very Concerned	Extremely Concerned	Very + Extremely
Clinical relevance to patient care	2%	6%	13%	29%	51%	80%
Relevance to specialty care	4%	6%	12%	23%	54%	78%
Overall implementation costs	1%	8%	20%	32%	39%	71%
Unclear program guidance	2%	9%	20%	32%	36%	69%
Timely feedback	3%	9%	21%	34%	33%	67%
Conflicting program requirements	4%	14%	23%	29%	30%	59%
Unattainable program requirements	5%	13%	25%	31%	25%	56%
Inadequate time for our practice to prepare	5%	15%	30%	29%	22%	50%
Vendor readiness	11%	20%	29%	24%	16%	40%

7. How would you rate the complexity of the MIPS scoring system?

Not complex	Slightly complex	Moderately complex	Very Complex	Extremely Complex
1%	5%	22%	38%	35%

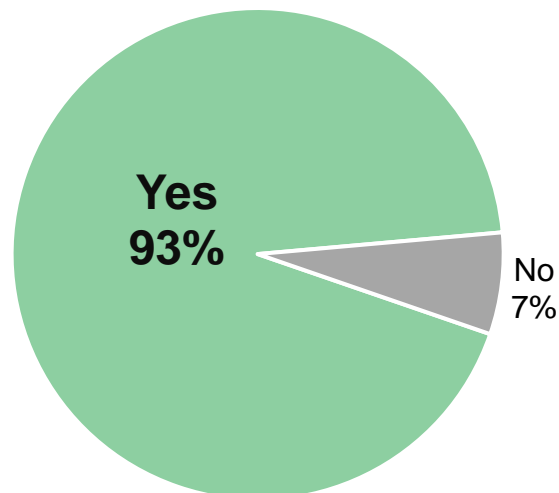
8. Is your practice planning to participate in an Advanced APM in 2017?

Yes, we are participating in an MSSP Track 2 or 3 ACO	6%
Yes, we are participating in a Next Gen ACO	4%
Yes, we are participating in an ESRD model	2%
Yes, we are participating in Comprehensive Primary Care Plus (CPC+)	13%
Yes, we are participating in an Oncology Care model	0.0%
Yes, we are collaborating with a hospital in the Comprehensive Care for Joint Replacement model	0.0%
Not Sure	40%
Other	36%

9. How do you view the Medicare MIPS program as implemented to date?

As a government program that supports our practice's clinical quality priorities	9%
As a government program that does not support our practice's clinical quality priorities	73%
No opinion	13%
N/A	5%

10. Do you support a single credentialing source for Medicare, Medicaid, and commercial payers in the United States?



11. Please rate your degree of concern with federally-mandated EHR certification requirements.

Not concerned	Slightly concerned	Moderately concerned	Very Concerned	Extremely Concerned
7%	10%	29%	27%	27%

Survey Demographics

How many full-time-equivalent (FTE) physicians are in your organization?	
1-5	30%
6-20	37%
21-50	15%
51-100	7%
100+	10%
N/A	1%
Which of the following best describes your organization?	
Independent medical practice	79%
Hospital or integrated delivery system (IDS), or medical practice owned by hospital or IDS	10%
Medical school faculty practice plan or academic clinical science department	4%
Managed services organization (MSO)	1%
Physician practice management company (PPMC)	1%
Independent practice association (IPA)	1%
Other	5%
Which of the following best describes your organization's specialty focus of care?	
Multispecialty with primary and specialty care	19%
Multispecialty with specialty care only	7%
Family practice	12%
OB/GYN	6%
Orthopedic surgery	7%
Internal medicine	5%
Cardiology	4%
Radiology	2%
Ophthalmology	2%
Other	37%