The following is a list of suggested reports to complete the survey questions. Questions with an * denote required questions.

**INCOME STATEMENT**

The following data can be pulled from your practice’s income statement, P&L and/or General Ledger:

### CHARGES
- Gross fee-for-service charges
- Bad debts due to fee-for-service activity
- Total gross charges
- Telehealth gross charges

### REVENUE
- *Total net fee-for-service collections/revenue
- Gross capitation revenue
- Purchased services for capitation patients
- Net capitation revenue
- Incentive-based revenue
- Other medical revenue (research contract revenue, honoraria, teaching income)
- Revenue from hospital (include hospital subsidies)
- Revenue from the sale of medical goods and services
- Gross revenue from other medical activities
- Cost of sales and/or cost of other medical activities
- Net other medical revenue
- *Total medical revenue
- Nonmedical revenue (investment and rental revenue)
- Extraordinary nonmedical revenue
- Financial support from parent organization (subsidies)
- Goodwill amortization
- Nonmedical cost (income taxes)
- Extraordinary nonmedical cost
- Net nonmedical income or loss
- Overall telehealth revenue

### EXPENSES
- Information technology
- Drug supply
- Medical and surgical supply
- Building and occupancy
- Building depreciation
- Furniture and equipment
- Furniture and equipment depreciation
- Administrative supplies and services
- Professional liability insurance premiums
- Other insurance premiums
- Legal fees
- Consulting fees
- Outside professional fees
- Promotion and marketing
- Clinical laboratory
- Radiology and imaging
- Other ancillary services
- Billing and collections purchased services
- Management fees paid to an MSO or PPMC
- Miscellaneous operating cost
- Cost allocated to medical practice from parent organization
- *Total general operating cost
- *Total operating cost
- Overall cost of telehealth-based technology

### NET INCOME
- *Total medical revenue after operating cost
- *Net practice income or loss
PAYROLL

The following data can be pulled from your practice’s income statement and/or payroll systems:

**STAFF INFORMATION**

- General administrative FTE and cost
- Patient accounting FTE and cost
- General accounting FTE and cost
- Managed care administrative FTE and cost
- Information technology FTE and cost
- Housekeeping, maintenance, security FTE and cost
- *Total business operations support staff FTE and cost
- Medical receptionists FTE and cost
- Medical secretaries, transcribers FTE and cost
- Medical records FTE and cost
- Other administrative support FTE and cost
- *Total front office support staff FTE and cost
- Registered nurses FTE and cost
- Licensed practical nurses FTE and cost
- Medical assistants, nurse’s aides FTE and cost
- *Total clinical support staff FTE and cost
- Clinical laboratory FTE and cost
- Radiology and imaging FTE and cost
- Other medical support services FTE and cost
- *Total ancillary support staff FTE and cost
- *Total employed support staff FTE and cost
- *Total employed support staff benefit cost
- Total contracted support staff (temporary) FTE and cost
- *Total support staff FTE and cost

**PROVIDER INFORMATION**

- Advanced practice provider compensation
- Advanced practice provider benefit cost
- *Total advanced practice providers FTE and cost
- Primary care physicians FTE
- Nonsurgical specialty physicians FTE
- Surgical specialty physicians FTE
- Total physician compensation
- Total physician benefit cost
- *Total physicians FTE and cost
- *Total providers FTE and cost
PATIENT ACCOUNTING

The following data can be pulled from your practice management system’s patient accounting report:

CHARGES
• Adjustments to fee-for-service charges
• Adjusted fee-for-service charges
• Gross charges for patients covered by capitation contracts
• Adjustments to telehealth gross charges
• Adjusted telehealth charges

PERFORMANCE
• Current to 30 days in A/R
• 31 to 60 days in A/R
• 61 to 90 days in A/R
• 91 to 120 days in A/R
• Over 120 days in A/R
• Total accounts receivable

• Did your practice re-age accounts receivable when a balance was transferred to a secondary carrier on the patient’s private account?
• Medicare percent of gross charges
• Medicaid percent of gross charges
• Commercial percent of gross charges
• Workers’ compensation percent of gross charges
• Charity care percent of gross charges
• Self-pay percent of gross charges
• Other federal government payers percent of gross charges
• Total payer mix gross charges
• Payer Mix: percent of total gross charges for telehealth services only

OPERATIONS

The following data can be pulled from your practice’s operations, performance and/or production reports:

PRACTICE DEMOGRAPHIC INFORMATION
• *Practice NPI number
• *Fiscal year
• Legal organization
• Is your practice a Federally Qualified Health Center (FQHC)?
• Is your practice a Rural Health Clinic (RHC)?
• How did the practice store information for the majority of patients served?
• How many years has your EHR been fully implemented?
• How many branch/satellite clinics did your practice have, not counting the primary location?
• Gross square footage of all practice facilities
• Number of exam/treatment rooms?
• Does your practice rent or own its space?

PERFORMANCE
• Number of level 1, 2, and 3 trauma centers serviced (ANESTHESIOLOGY ONLY)
• Number of hospital, same-day surgery center, surgeon offices and other facilities staffed (ANESTHESIOLOGY ONLY)
• Number of hospital, same-day surgery center, surgeon offices and other anesthetizing locations (ANESTHESIOLOGY ONLY)
• Total stipend amount for top 3 entities (ANESTHESIOLOGY ONLY)
• Number of beds for top 3 entities (ANESTHESIOLOGY ONLY)
OPERATIONS CONT.

The following data can be pulled from your practice’s operations, performance and/or production reports:

**PRODUCTION**
- Medical procedures conducted inside the practice’s facilities: number of procedures and gross charges
- Medical procedures conducted outside the practice’s facilities: number of procedures and gross charges
- Surgery and anesthesia procedures conducted inside the practice’s facilities: number of procedures and gross charges
- Surgery and anesthesia procedures conducted outside the practice’s facilities: number of procedures and gross charges
- Clinical laboratory and pathology procedures: number of procedures and gross charges
- Diagnostic radiology and imaging procedures: number of procedures and gross charges
- Total procedures and procedural gross charges
- Nonprocedural gross charges
- Total gross charges
- *Work RVUs
- *Total RVUs
- *Total ASA units (ANESTHESIOLOGY ONLY)
- *Number of individual patients
- Number of patient encounters
- Number of telehealth encounters
- Practice panel size for the past 18 months (CARDIOLOGY AND PRIMARY CARE ONLY)
- Surgical anesthesia: *physician base units, *physician minutes, charge per ASA unit, *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Labor epidurals: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- C-Sections: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Epidurals: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Follow-up visits: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Nerve blocks for post op pain: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Critical care services: *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Other (lines, intubations, etc.): *number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- *Total for anesthesiology procedures: number of cases, gross charges, total medical revenue (ANESTHESIOLOGY ONLY)
- Claims processed per biller (ANESTHESIOLOGY ONLY)