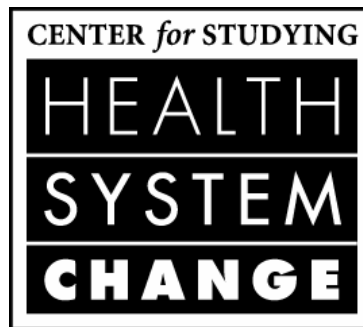


Community Tracking Study

2004-05 Physician Survey Public Use File: Codebook

(Release 1)



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CTS Physician Survey Public Use File

2004/2005 Data

Introduction

This codebook describes the Community Tracking Study Round four Physician Survey Restricted Use File, CTSR4PP1.TXT. The file, which is distributed in ASCII format, contains 137 variables and 6,628 physician-level records. The unique record identifier and sort key is the variable PHYSIDX. In addition to this introduction, the codebook consists of three parts, an alphabetical listing of the variables, a positional listing of the variables, and the main portion of the codebook containing counts, percentages, and descriptive information on a variable-by-variable basis.

Codebook Sections

The variables included on the file are grouped and ordered based on the questions appearing in the various sections of the survey instrument, with two additional sections for non-questionnaire related variables. Imputation flags follow the corresponding imputed variable while constructed variables are inserted next to, or in some cases, in place of the applicable survey questionnaire variable.

	Survey Administration Variables
Section A:	Introduction
Section B:	Utilization of Time
Section C:	Type and Size of Practice
Section D:	Medical Care Management
Section F:	Physician-Patient Interactions
Section G:	Practice Revenue
Section H:	Physician Compensation Methods & Income Level
	Weights and Sampling Variables

Variable Listings

The codebook contains lists of the variables on the file in alphabetical and positional order. Each list includes the variable name, start and end column position, and a brief description or label for the variable. This description is prefaced by the following indicators: "PH" indicates the Physician Survey, and "4" indicates the round of data collection. The questionnaire item number, "CV" (to denote a constructed variable), or "AMA/AOA" (to denote a variable from the external AMA or AOA files) follows these indicators. The same descriptions are also provided in the LABEL statement section of the SAS user file provided with the public use file.

Main Codebook

The main portion of the codebook follows the alphabetical and positional listings. Unweighted counts, cumulative counts, percentages, and cumulative percentages for each variable are displayed. The counts and percentages for each variable are arranged such that valid, non-missing data appears first, followed by missing data ("-9 Not Ascertained"), and concluding with inapplicable ("-1") responses which were not asked due to skip pattern logic. If a variable is a continuous or semi continuous variable (like a year or a percentage), then the values are detailed as a range of values (for example, for the variable PMC, 1-25% means that the actual data values are between 1 and 25). In addition, a number of informational fields about each variable are included to assist the user in working with the data. These include:

Variable Name: Alphanumeric name for the variable, limited to 8 characters in length.

Variable Type: Numeric or character variable.

Length: Variable length and number of decimal places.

Start/End: Start and end columns in the ASCII data file.

Question: Questionnaire item number and text. For variables corresponding directly to a questionnaire item, the question number and text of the related questionnaire item is provided in the Question field. For constructed, survey administration, and weight and sampling variables, the Question field has a value of "N/A" to denote a non-questionnaire-related item.

Description: Brief description of the variable, primarily used with constructed or non-questionnaire variables. In addition, this field describes the set of individuals eligible to be asked a question, regardless of whether they responded. Persons not included in the universe for a particular variable were assigned a value of "-1 Inapplicable".

Additional information on variable construction and editing, as well as specific information on selected variables is included in Chapter 5 of the User Guide. To obtain site-specific or national estimates using this file, users should refer to the information on sample design and estimation included in Chapter 3 of the User Guide. In addition, Chapter 4 of the User Guide provides information on deriving appropriate variance estimates.

CTS Physician Survey Public Use File
2004-2005 Data
Alphabetical Listing of Variables

Variable	Start	End	Description
ASIAPTX	53	54	PH4:CV:Pct of patients that are Asian/PI
AWRGUID	114	115	PH4:D4A1:Aware of formal written guidels
BDCTANY	21	22	PH4:CV:Bd Certified (Any Spectly)
BDCTPS	23	24	PH4:CV:Bd Certified in Prim Sub/Spectly
BIRTHX	11	12	PH4:AMA/AOA year of birth
BLCKPTX	55	56	PH4:CV:Pct of patients that are Black
BONUSR	244	245	PH4:H4:Eligible for bonuses now flag
CARSAT	25	26	PH4:A19:Overall Career satisfaction
CHRNPT	48	52	PH4:B12:Pct of patients w chronic med cond
CMPEXPC	127	128	PH4:D8:Appropriateness w/o ref, PCP
COMPETE	280	281	PH4:CZ:Competitive situation of prac
CPOEHSP	118	119	PH4:D6a:Does hosp have computerized systems?
DIAGCST	174	175	PH4:F8dB:How often consider oop costs to pat for tests
EFGUIDE	112	113	PH4:D4A:Effect of formal writtn guidelin
EFINCNT	276	277	PH4:CY:Effect of financial incentives
ELINCENT	248	249	PH4:CV: Eligible for bonuses
EPRESC	100	104	PH4:D2aa:Pct of prescips written electronically
ERRREPT	120	121	PH4:D6b:Does hosp have sys to report med errors?
FININCPT	278	279	PH4:CV:Effect of fin incentvs on pt care
FORMLRY	105	109	PH4:D3:Pct pats w prescrip cov-formulary
FOSP	69	70	PH4:CV:Full owner of a solo practice
GENDER	9	10	PH4:AMA/AOA:Sex,1-Male,2-Female
GENERIC	172	173	PH4:F8dA:How often do you prescribe a generic
GRADYRX	13	14	PH4:AMA/AOA year of graduation
GRTYPEX	73	74	PH4:CV:Type of group physician
HISPPTX	57	58	PH4:CV:Pct of patients that are Hispanic
HOSPVX	40	41	HP4:CV:Num patient visits on hosp rds
HRFREEEX	42	43	PH4:B6:Hours previous month charity care
HRSMEDX	29	30	PH4:CV:Hrs prev wk medically-related act
HRSPATX	31	32	PH4:CV:Hrs prev wk direct patient care
HSPHPR	162	163	PH4:F8cBb:Importance of Adms:HPnetw/Adm barriers
HSPINSR	164	165	PH4:F8cBc:Importance of Adms:Pt has inadqte insrc
HSPLST	122	126	PH4:D7:Pct of hosplzd patients had hospitalist
HSPPRVR	160	161	PH4:F8cBa:Importance of Adms:Can't get qual provs
IMGUSPR	7	8	PH4:CV:Foreign Medical School Graduate

CTS Physician Survey Public Use File
2004-2005 Data
Alphabetical Listing of Variables

Variable	Start	End	Description
IMPPROD	260	261	PH4:H7aA:Imp for your comp: Productivity
IMPPROF	266	267	PH4:H7aD:Imp for your comp:Profiling results
IMPPSAT	262	263	PH4:H7aB:Imp for your comp:Satisfaction surveys
IMPQUAL	264	265	PH4:H7aC:Imp for your comp:Quality measures
IMPRPRF	268	269	PH4:H7aE:Imp for your comp:Practice performance
INCENT	272	273	PH4:CX:Overall financial incentives
INCOMEX	270	271	PH4:H10:Net income in 1999
IOPTCST	176	177	PH4:F8dC:How often consider oop costs for in/outp care
IT_FORM	84	85	PH4:D1B:Uses IT to obtain info on formls
IT_TRT	82	83	PH4:D1A:IT used get info on guid, tx alt
ITCLIN	92	93	PH4:D1F:IT used exch clin dt/img oth doc
ITCOMM	96	97	PH4:D1G:Uses IT to comm w/p clin issues
ITDRUG	98	99	PH4:D1H:Uses IT for info on pat drug interactns
ITHOSP	94	95	PH4:D1F1:IT used exch clin dt/img hosps/labs
ITNOTES	88	89	PH4:D1D:Uses IT to access patient notes
ITPRESC	90	91	PH4:D1E:Uses IT to write prescriptions
ITRMNDR	86	87	PH4:D1C:IT used to gnrate reminds prev s
LANGPTX	59	60	HP4:CV:Pct pats speak different language
LOCFREE	44	45	PH4:B6a:Where provide charity care?
MDBILL	204	205	PH4:F12A:No accept Medicaid:billing reqs/paperw
MDDELAY	206	207	PH4:F12B:No accept Medicaid:delayed reimbursment
MDNUFPT	210	211	PH4:F12D:No accept Medicaid:have enough pats
MDPTBUR	212	213	PH4:F12E:No accept Medicaid:Mcd pats high clin burdn
MDREIMB	208	209	PH4:F12C:No accept Medicaid:inadequate reimb
MHHPR	168	169	PH4:F8cCb:Imp of Outp/Mnt Svcs:HPnetw/Adm barriers
MHINSR	170	171	PH4:F8cCc:Imp of Outp/Mnt Svcs::Pt has inadqte ins
MHPROVR	166	167	PH4:F8cCa:Imp of Outp/Mnt Svcs:Can't get qual prov
MRAUDIT	196	197	PH4:F11B:No accept Medicare:concern about audit
MRBILL	194	195	PH4:F11A:No accept Medicare:billing reqs/paperw
MRNUFPT	200	201	PH4:F11D:No accept Medicare:have enough pats
MRPTBUR	202	203	PH4:F11E:No accept Medicare:Mcr pats high clin burdn
MRREIMB	198	199	PH4:F11C:No accept Medicare:inadequate reimb
NMCCONX	229	230	PH4:CV:Num of managed care contracts
NOTHOSP	148	149	PH4:F8bC:Unable to get Non-emrg hosp adms
NOTIMAG	150	151	PH4:F8bD:Unable to get High qual diag imaginng

CTS Physician Survey Public Use File
2004-2005 Data
Alphabetical Listing of Variables

Variable	Start	End	Description
NOTOUTP	152	153	PH4:F8bE:Unable to get High qual outpatient mentl hlth care
NOTREFS	146	147	PH4:F8bA:Unable to get referrals to qual specs
NPHYSX	75	77	PH4:C7:Number of physicians at practice
NURSHMVX	38	39	HP4:CV:Num patient visits in nurs home
NURSLEV	78	79	PH4:C8a:Level of nursing support
NWMCAID	182	183	PH4:F9B:Accept new Medicaid patients
NWMCARE	178	179	PH4:F9A:Accept new Medicare patients
NWNPAY	190	191	PH4:F9G:Accept new uninsured patients-can't pay
NWPRIV	186	187	PH4:F9C:Accept new privately insured
OFFICEVX	33	35	HP4:CV:Num patient visits in office
OUTPTVX	36	37	HP4:CV:Num patient visits in outpatient clinic
OWNPR	61	62	PH4:C1:Ownership status(Full/Part/No Own)
PCAPREV	224	226	PH4:CV:% practice revenue prepaid, capitated
PCPFLAG	17	18	PH4:CV:Primary care physician flag
PCTGATE	131	133	PH4:D10:Pct patients for whom gatekeeper
PHYSIDX	1	6	PH4:Physician id number, masked
PMC	231	235	PH4:CV:% practice revenue from managed care
PMCAID	219	221	PH4:G1B:Pct payments from Medicaid
PMCARE	214	216	PH4:G1A:Pct payments from Medicare
PRCTYPE	71	72	PH4:CV:Practice type (Categorical)
QERRHSP	296	297	PH4:H20H:Problem:Medical errors in hospitals
QINSREJ	288	289	PH4:H20C:Problem:Insurance company rejects care decisions
QLANG	294	295	PH4:H20F:Problem:Language or cultural barriers
QNOREPT	292	293	PH4:H20E:Problem:Not getting timely reports
QNOSPEC	290	291	PH4:H20D:Problem:Lack of qualified specialists in area
QNOTIME	284	285	PH4:H20A:Problem:Inadequate time with patients
QPRBPAY	286	287	PH4:H20B:Problem:Patient unable to pay
RACEX	282	283	PH4:H12:Race
RADQTIME	136	137	PH4:CV:Adequacy of time, all physicians
RCLNFREE	138	139	PH4:F1C:Freedom for clinical decisions
REFHPR	156	157	PH4:F8cAb:Importance of Referrals:HPnetw/Adm barriers
REFINSR	158	159	PH4:F8cAc:Importance of Referrals:Patient has inadequate insurance
REFPRVR	154	155	PH4:F8cAa:Importance of Referrals:Can't get quality providers
RHIGHCAR	140	141	PH4:F1D:Possibility of high quality care
RNEGINCEN	142	143	PH4:F1E:Decision without negative financial incentive

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Alphabetical Listing of Variables

Variable	Start	End	Description
RPATREL	144	145	PH4:F1H:Continuing patient rtinshps
SALADJ	242	243	PH4:H3:Salary adjustments
SALPAID	238	239	PH4:H1:Salaried Physician flag
SALTIME	240	241	PH4:H2:Compensate per work time period
SPECUSE	129	130	PH4:D9:Chng-num of refrls to speclsts
SPECX	19	20	HP4:CV:Primary specialty category
SPERF	258	259	PH4:CV:Finan perf of practice affects comp
SPROD	250	251	PH4:CV:Own Productivity affects comp
SPROF	256	257	PH4:CV:Profiling results affect comp
SQUAL	254	255	PH4:CV:Quality measures affect comp
SSAT	252	253	PH4:CV:Patient satisfactn affects comp
SUPLPAY	246	247	PH4:H4a:Eligible for end of yr adjs, paymts
TOPEMPX	67	68	PH4:CV:Employer type (all employees)
TOPOWNX	65	66	PH4:CV:Practice type (all owners)
WHYNRSL	80	81	PH4:C8aa:Why is nursing support worse?
WKSWRKX	27	28	PH4:B1:Weeks practicing medicine in 1999
WTPHY4	298	307	PH4:CV:National estimates, full sample
YRBGNX	15	16	PH4:A6:Year began practicing medicine
_AWRGUID	116	117	PH4:Imputation flag for AWRGUID
_FORMLRY	110	111	PH4:Imputation flag for FORMLRY
_INCENT	274	275	PH4:Imputation flag for INCENT
_LOCFREE	46	47	PH4:Imputation flag for LOCFREE
_NWMCAID	184	185	PH4:Imputation flag for NWMCAID
_NWMCARE	180	181	PH4:Imputation flag for NWMCARE
_NWNPAY	192	193	PH4:Imputation flag for NWMPAY
_NWPRIV	188	189	PH4:Imputation flag for NWPRIV
_OWNPR	63	64	PH4:Imputation flag for OWNPR
_PCAPREV	227	228	PH4:Imputation flag for PCAPREV
_PCTGATE	134	135	PH4:Imputation flag for PCTGATE
_PMC	236	237	PH4:Imputation flag for PMC
_PMCAID	222	223	PH4:Imputation flag for PMCAID
_PMCARE	217	218	PH4:Imputation flag for PMCARE

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Positional Listing of Variables

Variable	Start	End	Description
PHYSIDX	1	6	PH4:Physician id number, masked
IMGUSPR	7	8	PH4:CV:Foreign Medical School Graduate
GENDER	9	10	PH4:AMA/AOA:Sex,1-Male,2-Female
BIRTHX	11	12	PH4:AMA/AOA year of birth
GRADYRX	13	14	PH4:AMA/AOA year of graduation
YRBGNX	15	16	PH4:A6:Year began practicing medicine
PCPFLAG	17	18	PH4:CV:Primary care physician flag
SPECX	19	20	HP4:CV:Primary specialty category
BDCTANY	21	22	PH4:CV:Bd Certified (Any Specly)
BDCTPS	23	24	PH4:CV:Bd Certified in Prim Sub/Specly
CARSAT	25	26	PH4:A19:Overall Career satisfaction
WKSWRKX	27	28	PH4:B1:Weeks practicing medicine in 1999
HRSMEDX	29	30	PH4:CV:Hrs prev wk medically-related act
HRSPATX	31	32	PH4:CV:Hrs prev wk direct patient care
OFFICEVX	33	35	HP4:CV:Num patient visits in office
OUTPTVX	36	37	HP4:CV:Num patient visits in outpt clinic
NURSHMVX	38	39	HP4:CV:Num patient visits in nurs home
HOSPVX	40	41	HP4:CV:Num patient visits on hosp rds
HRFREEX	42	43	PH4:B6:Hours previous month charity care
LOCFREE	44	45	PH4:B6a:Where provide charity care?
_LOCFREE	46	47	PH4:Imputation flag for LOCFREE
CHRNPT	48	52	PH4:B12:Pct of patients w chronic med cond
ASIAPTX	53	54	PH4:CV:Pct of patients that are Asian/PI
BLCKPTX	55	56	PH4:CV:Pct of patients that are Black
HISPPTX	57	58	PH4:CV:Pct of patients that are Hispanic
LANGPTX	59	60	HP4:CV:Pct pats speak different language
OWNPR	61	62	PH4:C1:Ownershpr status(Full/Part/No Own)
_OWNPR	63	64	PH4:Imputation flag for OWNPR
TOPOWNX	65	66	PH4:CV:Practice type (all owners)
TOPEMPX	67	68	PH4:CV:Employer type (all employees)
FOSP	69	70	PH4:CV:Full owner of a solo practice
PRCTYPE	71	72	PH4:CV:Practice type (Categorical)
GRYPEX	73	74	PH4:CV:Type of group physician
NPHYSX	75	77	PH4:C7:Number of physicians at practice
NURSLEV	78	79	PH4:C8a:Level of nursing support

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2004-2005 Data
Positional Listing of Variables

Variable	Start	End	Description
WHYNRSL	80	81	PH4:C8aa:Why is nursing support worse?
IT_TRT	82	83	PH4:D1A:IT used get info on guid, tx alt
IT_FORM	84	85	PH4:D1B:Uses IT to obtain info on formls
ITRMNDR	86	87	PH4:D1C:IT used to gnrate reminds prev s
ITNOTES	88	89	PH4:D1D:Uses IT to access patient notes
ITPRESC	90	91	PH4:D1E:Uses IT to write prescriptions
ITCLIN	92	93	PH4:D1F:IT used exch clin dt/img oth doc
ITHOSP	94	95	PH4:D1F1:IT used exch clin dt/img hosps/labs
ITCOMM	96	97	PH4:D1G:Uses IT to comm w/p clin issues
ITDRUG	98	99	PH4:D1H:Uses IT for info on pat drug interactns
EPRESC	100	104	PH4:D2aa:Pct of prescips written electronically
FORMLRY	105	109	PH4:D3:Pct pats w prescrip cov-formulary
_FORMLRY	110	111	PH4:Imputation flag for FORMLRY
EFGUIDE	112	113	PH4:D4A:Effect of formal writtn guidelin
AWRGUID	114	115	PH4:D4A1:Aware of formal written guidels
_AWRGUID	116	117	PH4:Imputation flag for AWRGUID
CPOEHSP	118	119	PH4:D6a:Does hosp have computerized systems?
ERRREPT	120	121	PH4:D6b:Does hosp have sys to report med errors?
HSPLST	122	126	PH4:D7:Pct of hosplzd patients had hospitalist
CMPEXPC	127	128	PH4:D8:Appropriateness w/o ref, PCP
SPECUSE	129	130	PH4:D9:Chng-num of refrls to speclsts
PCTGATE	131	133	PH4:D10:Pct patients for whom gatekeeper
_PCTGATE	134	135	PH4:Imputation flag for PCTGATE
RADQTIME	136	137	PH4:CV:Adequacy of time, all phys
RCLNFREE	138	139	PH4:F1C:Freedom for clncal decisions
RHIGHCAR	140	141	PH4:F1D:Possblty of high qual care
RNEGINCN	142	143	PH4:F1E:Decsn w/o neg finan incentv
RPATREL	144	145	PH4:F1H:Continuing patient rltinshps
NOTREFS	146	147	PH4:F8bA:Unable to get refrls to qual specs
NOTHOSP	148	149	PH4:F8bC:Unable to get Non-emrg hosp adms
NOTIMAG	150	151	PH4:F8bD:Unable to get High qual diag imagng
NOTOUTP	152	153	PH4:F8bE:Unable to get High qual outpatientl hlth care
REFPRVR	154	155	PH4:F8cAa:Importance of Refs: Can't get qual provs
REFHPR	156	157	PH4:F8cAb:Importance of Refs:HPnetw/Adm barriers
REFINSR	158	159	PH4:F8cAc:Importance of Refs:Pt has inadqte insrc

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Positional Listing of Variables

Variable	Start	End	Description
HSPPRVR	160	161	PH4:F8cBa:Importance of Adms:Can't get qual provs
HSPHPR	162	163	PH4:F8cBb:Importance of Adms:HPnetw/Adm barriers
HSPINSR	164	165	PH4:F8cBc:Importance of Adms:Pt has inadqte insrc
MHPROVR	166	167	PH4:F8cCa:Imp of Outp/Mnt Svcs:Can't get qual prov
MHHPR	168	169	PH4:F8cCb:Imp of Outp/Mnt Svcs:HPnetw/Adm barriers
MHINSR	170	171	PH4:F8cCc:Imp of Outp/Mnt Svcs::Pt has inadqte ins
GENERIC	172	173	PH4:F8dA:How often do you prescribe a generic
DIAGCST	174	175	PH4:F8dB:How often consider oop costs to pat for tests
IOPTCST	176	177	PH4:F8dC:How often consider oop costs for in/outp care
NWMCARE	178	179	PH4:F9A:Accept new Medicare patients
_NWMCARE	180	181	PH4:Imputation flag for NWMCARE
NWMCAID	182	183	PH4:F9B:Accept new Medicaid patients
_NWMCAID	184	185	PH4:Imputation flag for NWMCAID
NWPRIV	186	187	PH4:F9C:Accept new privately insured
_NWPRIV	188	189	PH4:Imputation flag for NWPRIV
NWNPAY	190	191	PH4:F9G:Accept new unins pats-cant pay
_NWNPAY	192	193	PH4:Imputation flag for NWMPAY
MRBILL	194	195	PH4:F11A:No accept Medicare:billing reqs/paperw
MRAUDIT	196	197	PH4:F11B:No accept Medicare:concern about audit
MRREIMB	198	199	PH4:F11C:No accept Medicare:inadequate reimb
MRNUFPT	200	201	PH4:F11D:No accept Medicare:have enough pats
MRPTBUR	202	203	PH4:F11E:No accept Medicare:Mcr pats high clin burdn
MDBILL	204	205	PH4:F12A:No accept Medicaid:billing reqs/paperw
MDDELAY	206	207	PH4:F12B:No accept Medicaid:delayed reimbursment
MDREIMB	208	209	PH4:F12C:No accept Medicaid:inadequate reimb
MDNUFPT	210	211	PH4:F12D:No accept Medicaid:have enough pats
MDPTBUR	212	213	PH4:F12E:No accept Medicaid:Mcd pats high clin burdn
PMCARE	214	216	PH4:G1A:Pct payments from Medicare
_PMCARE	217	218	PH4:Imputation flag for PMCARE
PMCAID	219	221	PH4:G1B:Pct payments from Medicaid
_PMCAID	222	223	PH4:Imputation flag for PMCAID
PCAPREV	224	226	PH4:CV:% practice rev prepaid, capitated
_PCAPREV	227	228	PH4:Imputation flag for PCAPREV
NMCCONX	229	230	PH4:CV:Num of managed care contracts
PMC	231	235	PH4:CV:% practice rev from managed care

CTS Physician Survey Public Use File
2004-2005 Data
Positional Listing of Variables

Variable	Start	End	Description
_PMC	236	237	PH4:Imputation flag for PMC
SALPAID	238	239	PH4:H1:Salaried Physician flag
SALTIME	240	241	PH4:H2:Compensate per work time period
SALADJ	242	243	PH4:H3:Salary adjustments
BONUSR	244	245	PH4:H4:Eligible for bonuses now flag
SUPLPAY	246	247	PH4:H4a:Eligible for end of yr adjs, paymts
ELINCENT	248	249	PH4:CV: Eligible for bonuses
SPROD	250	251	PH4:CV:Own Productivity affects comp
SSAT	252	253	PH4:CV:Patient satisfactn affects comp
SQUAL	254	255	PH4:CV:Quality measures affect comp
SPROF	256	257	PH4:CV:Profiling results affect comp
SPERF	258	259	PH4:CV:Finan perf of practice affects comp
IMPPROD	260	261	PH4:H7aA:Imp for your comp: Productivity
IMPPTSAT	262	263	PH4:H7aB:Imp for your comp:Satisfaction surveys
IMPQUAL	264	265	PH4:H7aC:Imp for your comp:Quality measures
IMPPROF	266	267	PH4:H7aD:Imp for your comp:Profiling results
IMPRPRF	268	269	PH4:H7aE:Imp for your comp:Practice performance
INCOMEX	270	271	PH4:H10:Net income in 1999
INCENT	272	273	PH4:CX:Overall financial incentives
_INCENT	274	275	PH4:Imputation flag for INCENT
EFINCNT	276	277	PH4:CX:Effect of financial incentives
FININCPT	278	279	PH4:CV:Effect of fin incentvs on pt care
COMPETE	280	281	PH4:CZ:Competitive situation of prac
RACEX	282	283	PH4:H12:Race
QNOTIME	284	285	PH4:H20A:Problem:Inadq time with patients
QPRBPAY	286	287	PH4:H20B:Problem:Patient unable to pay
QINSREJ	288	289	PH4:H20C:Problem:Ins co rejects care decisions
QNOSPEC	290	291	PH4:H20D:Problem:Lack of qualified specs in area
QNOREPT	292	293	PH4:H20E:Problem:Not getting timely reports
QLANG	294	295	PH4:H20F:Problem:Language or cultural barriers
QERRHSP	296	297	PH4:H20H:Problem:Med errors in hospitals
WTPHY4	298	307	PH4:CV:National estimates, full sample

CTS Physician Survey Public Use File

2004/2005 Data Survey Administration Variables

Variable Name	Variable Type	Length	Start	End
PHYSIDX	Numeric	6.0	1	6

Question: N/A

Description: Unique identifier for each physician.

Value	Count	Cum	Percent	CumPct
400001-406628	6,628	6,628	100.0	100.0

Variable Name	Variable Type	Length	Start	End
IMGUSPR	Numeric	2.0	7	8

Question: N/A

Description: This flag variable has a value of 1 for foreign medical graduates (i.e., those graduating from medical schools outside the U.S. or Puerto Rico). This information was obtained from the sample frame files coming from the American Medical Association (AMA) and the American Osteopathic Association (AOA).

Value	Count	Cum	Percent	CumPct
0: U.S.,PR	5,268	5,268	79.5	79.5
1: OTHER	1,350	6,618	20.4	99.8
-9: Not Ascertained	10	6,628	0.2	100.0

Variable Name	Variable Type	Length	Start	End
GENDER	Numeric	2.0	9	10

Question: N/A

Description: Gender. This information was obtained from the sample frame files coming from the American Medical Association (AMA) and the American Osteopathic Association (AOA).

Value	Count	Cum	Percent	CumPct
1: Male	4,777	4,777	72.1	72.1
2: Female	1,851	6,628	27.9	100.0

CTS Physician Survey Public Use File

2004/2005 Data Survey Administration Variables

Variable Name	Variable Type	Length	Start	End
BIRTHX	Numeric	2.0	11	12

Question: N/A

Description: Year of birth. For confidentiality reasons, years before 1941 were bottom coded (BIRTHX=1), and years after 1970 were top coded (BIRTHX=8) . For confidentiality reasons, this is a categorical variable which groups years together into approximate 5 year intervals.

Value	Count	Cum	Percent	CumPct
1: 1940 or earlier (bottom code)	571	571	8.6	8.6
2: 1941-1945	500	1,071	7.5	16.2
3: 1946-1950	867	1,938	13.1	29.2
4: 1951-1955	1,156	3,094	17.4	46.7
5: 1956-1960	1,111	4,205	16.8	63.4
6: 1961-1965	1,060	5,265	16.0	79.4
7: 1966-1970	970	6,235	14.6	94.1
8: 1971 or later (top code)	393	6,628	5.9	100.0

GRADYRX	Numeric	2.0	13	14
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Question: N/A

Description: Year physician graduated from medical school. For confidentiality reasons, years before 1966 were bottom coded (GRADYRX=1), and years after 1995 were top coded (GRADYRX=8). For confidentiality reasons, this is a categorical variable which groups years together into approximate 5 year intervals.

Value	Count	Cum	Percent	CumPct
1: 1965 or earlier (bottom code)	485	485	7.3	7.3
2: 1966-1970	397	882	6.0	13.3
3: 1971-1975	634	1,516	9.6	22.9
4: 1976-1980	979	2,495	14.8	37.6
5: 1981-1985	1,080	3,575	16.3	53.9
6: 1986-1990	1,087	4,662	16.4	70.3
7: 1991-1995	1,050	5,712	15.8	86.2
8: 1996 or later (top code)	916	6,628	13.8	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section A - Introduction

Variable Name	Variable Type	Length	Start	End
YRBGNX	Numeric	2.0	15	16

Question: A6

In what year did you begin medical practice after completing your undergraduate and graduate medical training?

Description: Year physician started practicing medicine. Some values are logically imputed. If the graduation year was known, but the year of starting practice was not known, then YRBGN was set equal to graduation year + 3 for primary care physicians and graduation year + 5 for specialists. If the graduation year was not known, then YRBGN was set to birth year + 30 for primary care physicians and to birth year + 32 for specialists. For confidentiality reasons, years before 1971 were bottom coded (YRBGNX=1), and years after 2000 were top coded (YRBGNX=8). For confidentiality reasons, this is a categorical variable which groups years together into approximate 5 years intervals.

Value	Count	Cum	Percent	CumPct
1: 1970 or earlier (bottom code)	408	408	6.2	6.2
2: 1971-1975	412	820	6.2	12.4
3: 1976-1980	706	1,526	10.7	23.0
4: 1981-1985	945	2,471	14.3	37.3
5: 1986-1990	1,013	3,484	15.3	52.6
6: 1991-1995	1,023	4,507	15.4	68.0
7: 1996-2000	1,315	5,822	19.8	87.8
8: 2001 or later (top code)	806	6,628	12.2	100.0

PCPFLAG	Numeric	2.0	17	18
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Question: N/A

Description: A flag indicating that the physician spends most of his/her patient care time in a primary care specialty. The definition of primary care physician (PCP) is based on the response to questions A8, A9, A9a, A9b, and A10.

Value	Count	Cum	Percent	CumPct
0: Not PCP	3,337	3,337	50.3	50.3
1: PCP	3,291	6,628	49.7	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section A - Introduction

Variable Name	Variable Type	Length	Start	End
SPECX	Numeric	2.0	19	20

Question: N/A

Description: Physician's specialty based on responses to questions A8 (NWSPEC) and A10 (SUBSPC) and grouped into seven types of specialties. Ob/Gyn and Psychiatrists are separated out because these types of physicians were asked specific questions in the survey.

Value	Count	Cum	Percent	CumPct
1: Internal Medicine	1,071	1,071	16.2	16.2
2: Family/General Practice	1,427	2,498	21.5	37.7
3: Pediatrics	793	3,291	12.0	49.7
4: Medical Specialties	1,674	4,965	25.3	74.9
5: Surgical Specialties	941	5,906	14.2	89.1
6: Psychiatry	367	6,273	5.5	94.6
7: ObGyn	355	6,628	5.4	100.0

BDCTANY	Numeric	2.0	21	22
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Question: N/A

Description: A flag indicating that the physician is board-certified in any specialty. This variable was constructed from responses to questions A11 (BDCTSB), A13 (BDCTSP), A15 (BDCTPSP), and A17 (BDCTAY).

Value	Count	Cum	Percent	CumPct
0: Not board certified any spclty	594	594	9.0	9.0
1: Board certified any spclty	6,026	6,620	90.9	99.9
-9: Not Ascertained	8	6,628	0.1	100.0

BDCTPS	Numeric	2.0	23	24
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Question: N/A

Description: A flag indicating that the physician is board-certified in his/her primary specialty or subspecialty. This variable was constructed from responses to questions A11 (BDCTSB) and A15 (BDCTPSP). Does not apply to physicians who are hospitalists (NWSPEC=201 or SUBSPC=201).

Value	Count	Cum	Percent	CumPct
0: Not board certifd primary subspclty	942	942	14.2	14.2
1: Board certified primary subspclty	5,641	6,583	85.1	99.3
-9: Not Ascertained	7	6,590	0.1	99.4
-1: Inapplicable	38	6,628	0.6	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section A - Introduction

Variable Name	Variable Type	Length	Start	End
CARSAT	Numeric	2.0	25	26

Question: A19

Many of the remaining questions are about your practice and your relationships with patients. Before we begin those questions, let me ask you: Thinking very generally about your satisfaction with your overall career in medicine, would you say that you are CURRENTLY: Very satisfied, Somewhat satisfied, Somewhat dissatisfied, Very dissatisfied, Neither satisfied nor dissatisfied

Value	Count	Cum	Percent	CumPct
5: Very satisfied	2,754	2,754	41.6	41.6
4: Somewhat satisfied	2,774	5,528	41.9	83.4
3: Somewhat dissatisfied	749	6,277	11.3	94.7
2: Very dissatisfied	244	6,521	3.7	98.4
1: Neither satisfd/dissatisfd	93	6,614	1.4	99.8
-8: Don't Know	11	6,625	0.2	100.0
-7: Refused	3	6,628	0.0	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
WKSWRKX	Numeric	2.0	27	28

Question: B1

Considering all of your practices, approximately how many weeks did you practice medicine during 2003? Exclude time missed due to vacation, illness and other absences. Exclude family leave, military service, and professional conferences. If your office is closed for several weeks of the year, those weeks should NOT be counted as weeks worked.

Description: For confidentiality reasons, this variable was bottom coded at 40 weeks

Value	Count	Cum	Percent	CumPct
40 (bottom code)	443	443	6.7	6.7
41-52	6,183	6,626	93.3	100.0
-9: Not Ascertained	2	6,628	0.0	100.0

Variable Name	Variable Type	Length	Start	End
HRSMEDX	Numeric	2.0	29	30

Question: N/A

Description: Number of hours physician spent in medically related activities during last complete week of work. Constructed from response to questions B2, B3c, and B4. If the reported number of hours in the previous week spent in direct patient care was greater than the reported number of hours spent in medically related activities, then HRSMEDX was imputed. This variable was top coded at 81 hours.

Value	Count	Cum	Percent	CumPct
1-39	997	997	15.0	15.0
40-49	1,524	2,521	23.0	38.0
50-59	1,700	4,221	25.6	63.7
60-80	2,191	6,412	33.1	96.7
81 (top code)	216	6,628	3.3	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
HRSPATX	Numeric	2.0	31	32

Question: N/A

Description: Number of hours physician spent in direct patient care activities during last complete week of work. Constructed from responses to questions B3 (HRSPT_A), B3d (HRSPT_B), and B5 (HRSPT_C). This variable was top coded at 71 hours.

Value	Count	Cum	Percent	CumPct
1-29	789	789	11.9	11.9
30-39	1,302	2,091	19.6	31.5
40-49	2,032	4,123	30.7	62.2
50-59	1,347	5,470	20.3	82.5
60-70	854	6,324	12.9	95.4
71 (top code)	304	6,628	4.6	100.0

Variable Name	Variable Type	Length	Start	End
OFFICEVX	Numeric	3.0	33	35

Question: B5aA

Again, thinking of your last complete week of work, how many patient visits did you personally have in the office?

Description: Ask of physicians with one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1). This variable was top coded at 150 visits.

Value	Count	Cum	Percent	CumPct
0	711	711	10.7	10.7
1-25	125	836	1.9	12.6
26-50	322	1,158	4.9	17.5
51-75	438	1,596	6.6	24.1
76-100	759	2,355	11.5	35.5
101-149	583	2,938	8.8	44.3
150 (top code)	334	3,272	5.0	49.4
-9: Not Ascertained	1	3,273	0.0	49.4
-8: Don't Know	16	3,289	0.2	49.6
-7: Refused	2	3,291	0.0	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
OUTPTVX	Numeric	2.0	36	37

Question: B5aB

Again, thinking of your last complete week of work, how many patient visits did you personally have in the outpatient clinics?

Description: Ask of physicians with one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1). This variable was top coded at 80 visits.

Value	Count	Cum	Percent	CumPct
0	2,459	2,459	37.1	37.1
1-10	98	2,557	1.5	38.6
11-20	72	2,629	1.1	39.7
21-30	55	2,684	0.8	40.5
31-79	240	2,924	3.6	44.1
80 (top code)	355	3,279	5.4	49.5
-9: Not Ascertained	1	3,280	0.0	49.5
-8: Don't Know	10	3,290	0.2	49.6
-7: Refused	1	3,291	0.0	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

NURSHMVX	Numeric	2.0	38	39
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Question: B5aC

Again, thinking of your last complete week of work, how many patient visits did you personally have in the nursing homes and other extended care facilities?

Description: Ask of physicians with one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1). This variable was top coded at 15 visits.

Value	Count	Cum	Percent	CumPct
0	2,541	2,541	38.3	38.3
1-10	461	3,002	7.0	45.3
11-14	23	3,025	0.3	45.6
15 (top code)	252	3,277	3.8	49.4
-9: Not Ascertained	1	3,278	0.0	49.5
-8: Don't Know	10	3,288	0.2	49.6
-7: Refused	3	3,291	0.0	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
HOSPVX	Numeric	2.0	40	41

Question: B5aD

Again, thinking of your last complete week of work, how many patient visits did you personally have on hospital rounds?

Description: Ask of physicians with one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1). This variable was top coded at 35 visits.

Value	Count	Cum	Percent	CumPct
0	1,445	1,445	21.8	21.8
1-10	948	2,393	14.3	36.1
11-20	371	2,764	5.6	41.7
21-30	174	2,938	2.6	44.3
31-34	6	2,944	0.1	44.4
35 (top code)	335	3,279	5.1	49.5
-9: Not Ascertained	1	3,280	0.0	49.5
-8: Don't Know	11	3,291	0.2	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

HRFREEX	Numeric	2.0	42	43
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Question: B6

Again thinking of all your practices, during the LAST MONTH, how many hours, if any, did you spend providing CHARITY care?

Description: This variable was top coded at 41 hours.

Value	Count	Cum	Percent	CumPct
0	2,222	2,222	33.5	33.5
1-4	1,891	4,113	28.5	62.1
5-9	994	5,107	15.0	77.1
10-40	1,361	6,468	20.5	97.6
41 (top code)	160	6,628	2.4	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
LOCFREE	Numeric	2.0	44	45

Question: B6a

Where do you typically provide charity care?

Description: Applies only to physicians who provide some type of charity care B6 (HRFREE>0).

Value	Count	Cum	Percent	CumPct
1: In main practice	3,243	3,243	48.9	48.9
2: On-call hosp ER	509	3,752	7.7	56.6
3: In another practice or clinic	287	4,039	4.3	60.9
4: Somewhere else	367	4,406	5.5	66.5
-1: Inapplicable	2,222	6,628	33.5	100.0

_LOCFREE	Numeric	2.0	46	47
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Question: N/A

Description: Imputation flag for LOCFREE

Value	Count	Cum	Percent	CumPct
0: No Imputation	4,517	4,517	68.2	68.2
1: Imputation	74	4,591	1.1	69.3
-1: Inapplicable	2,037	6,628	30.7	100.0

CHRNPT	Numeric	5.1	48	52
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Question: B12

About what percentage of your patients has a chronic medical condition?

Description: The response "Less than 1%" was coded as 0.5.

Value	Count	Cum	Percent	CumPct
0	44	44	0.7	0.7
.5, Less than 1%	11	55	0.2	0.8
1-25	1,462	1,517	22.1	22.9
26-50	1,410	2,927	21.3	44.2
51-75	1,459	4,386	22.0	66.2
76-100	2,176	6,562	32.8	99.0
-8: Don't Know	57	6,619	0.9	99.9
-7: Refused	9	6,628	0.1	100.0

CTS Physician Survey Public Use File

2004/2005 Data Section B - Utilization of Time

Variable Name	Variable Type	Length	Start	End
ASIAPTX	Numeric	2.0	53	54

Question: B14C

About what percentage of your patients are Asian or Pacific Islander?

Description: This categorical variable was constructed from the continuous responses to the original survey question B14c.

Value	Count	Cum	Percent	CumPct
1: 25% or less	6,464	6,464	97.5	97.5
2: more than 25%	164	6,628	2.5	100.0

BLCKPTX	Numeric	2.0	55	56
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Question: B14A

About what percentage of your patients are African-American or Black?

Description: This categorical variable was constructed from the continuous responses to the original survey question B14a.

Value	Count	Cum	Percent	CumPct
1: 25% or less	4,879	4,879	73.6	73.6
2: more than 25%	1,749	6,628	26.4	100.0

HISPPTX	Numeric	2.0	57	58
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Question: B14B

About what percentage of your patients are Hispanic or Latino

Description: This categorical variable was constructed from the continuous responses to the original survey question B14b.

Value	Count	Cum	Percent	CumPct
1: 25% or less	5,479	5,479	82.7	82.7
2: more than 25%	1,149	6,628	17.3	100.0

LANGPTX	Numeric	2.0	59	60
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Question: B15

About what percentage of your patients do you have a hard time speaking with or understanding because you speak different languages?

Description: This categorical variable was constructed from the continuous responses to the original survey question B15.

Value	Count	Cum	Percent	CumPct
1: 25% or less	6,388	6,388	96.4	96.4
2: more than 25%	240	6,628	3.6	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
OWNPR	Numeric	2.0	61	62

Question: C1

Are you a full owner, a part owner, or not an owner of this practice?

Value	Count	Cum	Percent	CumPct
1: Full owner	1,985	1,985	29.9	29.9
2: Part owner	1,447	3,432	21.8	51.8
3: Not an owner	3,196	6,628	48.2	100.0

_OWNPR	Numeric	2.0	63	64
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Question: N/A

Description: Imputation flag for OWNPR.

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,624	6,624	99.9	99.9
1: Imputation	4	6,628	0.1	100.0

TOPOWNX	Numeric	2.0	65	66
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Question: N/A

Description: Type of practice for physicians who are full or part owners of practice (OWNPR = 1 or 2). Constructed from responses to questions C2 and C9. The category "1:Other" includes: integrated health, free-standing clinic, physician practice management, management services organization(mso), physician-hospital organization(pho), locum tenens, independent contractor, and owner physicians who don't fall into any of the other categories. For confidentiality reasons, solo and 2 physician practice types were combined into one category (6) and group model HMO and staff model HMO were combined into one category (9).

Value	Count	Cum	Percent	CumPct
1: Other	64	64	1.0	1.0
6: Solo/2 phys practice	1,878	1,942	28.3	29.3
8: Group practice with 3+ physicians	1,399	3,341	21.1	50.4
9: Group/Staff model HMO	91	3,432	1.4	51.8
-1: Inapplicable	3,196	6,628	48.2	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
TOPEMPX	Numeric	2.0	67	68

Question: C3

Description: For physicians who are not full or part owners, indicates type of employer. Constructed from responses to questions C3, C3b, C9. For confidentiality reasons, solo and 2 physician practice types were combined into one category (6) and group model HMO and staff model HMO were combined into one category (9).

Value	Count	Cum	Percent	CumPct
1: Other	796	796	12.0	12.0
6: Solo/2 phys practice	337	1,133	5.1	17.1
8: Group practice with 3+ physicians	529	1,662	8.0	25.1
9: Group/Staff model HMO	201	1,863	3.0	28.1
12: Medical school/univ	631	2,494	9.5	37.6
13: Non-govt hospital	702	3,196	10.6	48.2
-1: Inapplicable	3,432	6,628	51.8	100.0

FOSP	Numeric	2.0	69	70
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Question: N/A

Description: Full owner of solo practice. Constructed from responses to questions C1 (OWNPR=1) and C2 (TOPOWN=6).

Value	Count	Cum	Percent	CumPct
0: Not a full owner of a solo practice	5,115	5,115	77.2	77.2
1: Full owner of a solo practice	1,513	6,628	22.8	100.0

PRCTYPE	Numeric	2.0	71	72
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Question: N/A

Description: Physician's practice type is categorized into one of six classifications. Constructed from responses to questions C2, C3, C3a, C3b, C3c, C3d and C9.

Value	Count	Cum	Percent	CumPct
1: Solo/2 Physcn	2,215	2,215	33.4	33.4
2: Group >= 3 Physcn	1,928	4,143	29.1	62.5
3: HMO	292	4,435	4.4	66.9
4: Medical School	631	5,066	9.5	76.4
5: Hospital Based	806	5,872	12.2	88.6
6: Other	756	6,628	11.4	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
GRTYPEX	Numeric	2.0	73	74

Question: N/A

Description: Constructed variable which indicates the type of physicians working in the group practice or free standing clinic. Constructed from constructed variable PCPFLAG, and responses to questions C2a, C2b, C2c, C3aa, C3ab, C3ac, C3ca, C3cb, C3cc. Applies to physicians working in a group practice of 3 or more physicians.

Value	Count	Cum	Percent	CumPct
1: Single spclty	1,329	1,329	20.1	20.1
2: Multi-spclty	588	1,917	8.9	28.9
-9: Not Ascertained	11	1,928	0.2	29.1
-1: Inapplicable	4,700	6,628	70.9	100.0

NPHYSX	Numeric	3.0	75	77
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Question: C7

How many physicians, including yourself, are in the practice? Please include all locations of the practice. If asked, this includes both full- and part-time physicians.

Description: Not asked of physicians working in medical schools, universities, hospitals, state or local governments, or other situations such as an Integrated delivery system (IDS), Physician practice management company (PPM), Management services organization (MSO), Physician hospital organization (PHO), or locum tenens. This variable was top coded at 200 physicians.

Value	Count	Cum	Percent	CumPct
1	1,400	1,400	21.1	21.1
2-3	1,045	2,445	15.8	36.9
4-10	1,439	3,884	21.7	58.6
11-199	1,221	5,105	18.4	77.0
200 (top code)	356	5,461	5.4	82.4
-8: Don't Know	18	5,479	0.3	82.7
-1: Inapplicable	1,149	6,628	17.3	100.0

CTS Physician Survey Public Use File

2004/2005 Data

Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
NURSLEV	Numeric	2.0	78	79

Question: C8a

Compared with three years ago, is the overall level of nursing support in your practice much better, slightly better, about the same, slightly worse, or much worse?

Description: Asked of physicians who were interviewed in the 2000-01 survey (S1c=2) as well as other physicians who began practice before 2002 (YRBGN < 2002). Physicians practicing in a hospital (OTHSET=1 or EM2HOSP=1 or SETTING=7,8) were not asked the question.

Value	Count	Cum	Percent	CumPct
1: Much worse	246	246	3.7	3.7
2: Slightly worse	815	1,061	12.3	16.0
3: About the same	2,950	4,011	44.5	60.5
4: Slightly better	834	4,845	12.6	73.1
5: Much better	518	5,363	7.8	80.9
-9: Not Ascertained	1	5,364	0.0	80.9
-8: Don't Know	258	5,622	3.9	84.8
-7: Refused	100	5,722	1.5	86.3
-1: Inapplicable	906	6,628	13.7	100.0

WHYNRSL	Numeric	2.0	80	81
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Question: C8aa

Has the overall level of nursing support worsened mainly because you have fewer nurses, mainly because nursing quality has declined, or both about equally?

Description: Asked of physicians who responded much worse or slightly worse to question C8a (NURSLEV=1,2).

Value	Count	Cum	Percent	CumPct
1: Fewer nurses	512	512	7.7	7.7
2: Nursing quality has declined	161	673	2.4	10.2
3: Both about equally	349	1,022	5.3	15.4
-8: Don't Know	31	1,053	0.5	15.9
-7: Refused	12	1,065	0.2	16.1
-1: Inapplicable	5,563	6,628	83.9	100.0

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Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
INCENT	Numeric	2.0	272	273

Question: CX

How would you describe your overall personal financial incentives in your practice?

Value	Count	Cum	Percent	CumPct
1: Reducing serv	785	785	11.8	11.8
2: Expanding serv	1,605	2,390	24.2	36.1
3: Favor neither	4,238	6,628	63.9	100.0

_INCENT	Numeric	2.0	274	275
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Question: N/A

Description: Imputation flag for INCENT

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,337	6,337	95.6	95.6
1: Imputation	291	6,628	4.4	100.0

EFINCNT	Numeric	2.0	276	277
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Question: CY

Have these incentives reduced expanded] services a little, a moderate amount, or a lot?

Description: Asked of physicians who responded reducing services or expanding services to question CX (INCENT).

Value	Count	Cum	Percent	CumPct
1: A little	1,133	1,133	17.1	17.1
2: A moderate amount	658	1,791	9.9	27.0
3: A lot	249	2,040	3.8	30.8
4: None	207	2,247	3.1	33.9
-9: Not Ascertained	108	2,355	1.6	35.5
-8: Don't Know	25	2,380	0.4	35.9
-7: Refused	10	2,390	0.2	36.1
-1: Inapplicable	4,238	6,628	63.9	100.0

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Section C - Type and Size of Practice

Variable Name	Variable Type	Length	Start	End
FININCPT	Numeric	2.0	278	279

Question: N/A

Description: A description of the effect of personal financial incentives on the overall practice of medicine. Constructed from responses to questions CX (INCENT) and CY (EFINCNT).

Value	Count	Cum	Percent	CumPct
1: Reduce a lot	104	104	1.6	1.6
2: Reduce a moderate amt	210	314	3.2	4.7
3: Reduce a little	322	636	4.9	9.6
4: Favor reduction,but no effect	101	737	1.5	11.1
5: Favor neither	4,238	4,975	63.9	75.1
6: Favor expansion,but no effect	106	5,081	1.6	76.7
7: Expand a little	811	5,892	12.2	88.9
8: Expand a moderate amt	448	6,340	6.8	95.7
9: Expand a lot	145	6,485	2.2	97.8
-9: Not Ascertained	143	6,628	2.2	100.0

COMPETE	Numeric	2.0	280	281
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Question: CZ

Now, thinking about your practice specifically, how would you describe the competitive situation your practice faces? Would you say very competitive, somewhat competitive, or not at all competitive?

Value	Count	Cum	Percent	CumPct
3: Very competitive	1,188	1,188	17.9	17.9
2: Somewhat comp	2,930	4,118	44.2	62.1
1: Not at all comp	2,454	6,572	37.0	99.2
-8: Don't Know	42	6,614	0.6	99.8
-7: Refused	14	6,628	0.2	100.0

CTS Physician Survey Public Use File

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
IT_TRT	Numeric	2.0	82	83

Question: D1A

In your practice, are computers or other forms of information technology used to obtain information about treatment alternatives or recommended guidelines?

Value	Count	Cum	Percent	CumPct
0: No	2,271	2,271	34.3	34.3
1: Yes	4,346	6,617	65.6	99.8
-8: Don't Know	11	6,628	0.2	100.0

IT_FORM	Numeric	2.0	84	85
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Question: D1B

In your practice, are computers or other forms of information technology used to obtain information on formularies?

Value	Count	Cum	Percent	CumPct
0: No	3,584	3,584	54.1	54.1
1: Yes	3,026	6,610	45.7	99.7
-8: Don't Know	18	6,628	0.3	100.0

ITRMNDR	Numeric	2.0	86	87
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Question: D1C

In your practice, are computers or other forms of information technology used to generate reminders for you about preventive services?

Value	Count	Cum	Percent	CumPct
0: No	4,657	4,657	70.3	70.3
1: Yes	1,933	6,590	29.2	99.4
-8: Don't Know	31	6,621	0.5	99.9
-7: Refused	7	6,628	0.1	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
ITNOTES	Numeric	2.0	88	89

Question: D1D

In your practice, are computers or other forms of information technology used to access patient notes, medication lists, or problem lists?

Value	Count	Cum	Percent	CumPct
0: No	3,414	3,414	51.5	51.5
1: Yes	3,204	6,618	48.3	99.8
-8: Don't Know	8	6,626	0.1	100.0
-7: Refused	2	6,628	0.0	100.0

ITPRESC	Numeric	2.0	90	91
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Question: D1E

In your practice, are computers or other forms of information technology used to write prescriptions?

Value	Count	Cum	Percent	CumPct
0: No	5,103	5,103	77.0	77.0
1: Yes	1,521	6,624	22.9	99.9
-8: Don't Know	3	6,627	0.0	100.0
-7: Refused	1	6,628	0.0	100.0

ITCLIN	Numeric	2.0	92	93
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Question: D1F

In your practice, are computers or other forms of information technology used for clinical data and image exchanges with other physicians?

Value	Count	Cum	Percent	CumPct
0: No	3,374	3,374	50.9	50.9
1: Yes	3,237	6,611	48.8	99.7
-8: Don't Know	16	6,627	0.2	100.0
-7: Refused	1	6,628	0.0	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
ITHOSP	Numeric	2.0	94	95

Question: D1F1

In your practice, are computers or other forms of information technology used for clinical data and image exchanges WITH HOSPITALS AND LABORATORIES?

Value	Count	Cum	Percent	CumPct
0: No	2,243	2,243	33.8	33.8
1: Yes	4,371	6,614	65.9	99.8
-8: Don't Know	13	6,627	0.2	100.0
-7: Refused	1	6,628	0.0	100.0

ITCOMM	Numeric	2.0	96	97
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Question: D1G

In your practice, are computers or other forms of information technology used to communicate about clinical issues with patients by e-mail?

Value	Count	Cum	Percent	CumPct
0: No	5,036	5,036	76.0	76.0
1: Yes	1,582	6,618	23.9	99.8
-8: Don't Know	9	6,627	0.1	100.0
-7: Refused	1	6,628	0.0	100.0

ITDRUG	Numeric	2.0	98	99
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Question: D1H

In your practice, are computers or other forms of information technology used to obtain information on potential patient drug interactions with other drugs, allergies, and/or patient conditions?

Value	Count	Cum	Percent	CumPct
0: No	2,632	2,632	39.7	39.7
1: Yes	3,979	6,611	60.0	99.7
-8: Don't Know	17	6,628	0.3	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
EPRESC	Numeric	5.1	100	104

Question: D2aa

What percentage of the prescriptions that you order are written electronically?

Description: The response "Less than 1%" was coded as 0.5. This question was asked of physicians who responded "Yes" to question D1e (ITPRESC=1).

Value	Count	Cum	Percent	CumPct
0	203	203	3.1	3.1
.5,Less than 1%	8	211	0.1	3.2
1-25	270	481	4.1	7.3
26-50	132	613	2.0	9.2
51-75	72	685	1.1	10.3
76-100	827	1,512	12.5	22.8
-8: Don't Know	9	1,521	0.1	22.9
-1: Inapplicable	5,107	6,628	77.1	100.0

FORMLRY	Numeric	5.1	105	109
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Question: D3

Next, what percentage of your patients have prescription coverage that includes the use of a formulary?

Description: The response "Less than 1%" was coded as 0.5.

Value	Count	Cum	Percent	CumPct
None	112	112	1.7	1.7
.5,Less than 1%	6	118	0.1	1.8
1-25	639	757	9.6	11.4
26-50	1,576	2,333	23.8	35.2
51-75	1,777	4,110	26.8	62.0
76-100	2,518	6,628	38.0	100.0

_FORMLRY	Numeric	2.0	110	111
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Question: N/A

Description: Imputation flag for FORMLRY

Value	Count	Cum	Percent	CumPct
0: No Imputation	5,857	5,857	88.4	88.4
1: Imputation	771	6,628	11.6	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
EFGUIDE	Numeric	2.0	112	113

Question: D4A

How large an effect does your use of FORMAL, WRITTEN practice guidelines such as those generated by physician organizations, insurance companies or HMOs, or government agencies have on your practice of medicine?

Description: In this question, we are only interested in the use of formal written guidelines such as those generated by physician organizations, insurance companies or HMOs, or other such groups.

Value	Count	Cum	Percent	CumPct
5: Very large	673	673	10.2	10.2
4: Large	1,438	2,111	21.7	31.8
3: Moderate	2,131	4,242	32.2	64.0
2: Small	1,271	5,513	19.2	83.2
1: Very small	704	6,217	10.6	93.8
0: No effect	382	6,599	5.8	99.6
-8: Don't Know	27	6,626	0.4	100.0
-7: Refused	2	6,628	0.0	100.0

AWRGUID	Numeric	2.0	114	115
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Question: D4A1

Is that because you are not aware of guidelines that pertain to conditions you typically treat, or because you are aware of them, but they have no effect on conditions you treat?

Description: Asked of physicians who responded "No effect" to question D4A (EFGUIDE=0).

Value	Count	Cum	Percent	CumPct
1: Not aware	31	31	0.5	0.5
2: Aware, no effect	351	382	5.3	5.8
-1: Inapplicable	6,246	6,628	94.2	100.0

_AWRGUID	Numeric	2.0	116	117
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Question: N/A

Description: Imputation flag for AWRGUID

Value	Count	Cum	Percent	CumPct
0: No Imputation	336	336	5.1	5.1
1: Imputation	46	382	0.7	5.8
-1: Inapplicable	6,246	6,628	94.2	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
CPOEHSP	Numeric	2.0	118	119

Question: D6a

Does the hospital where most of your patients are treated have computerized systems to order tests and medications?

Description: Asked of all specialists and PCPs who said that they saw patients on hospital rounds B5ad (HOSPV =1-997).

Value	Count	Cum	Percent	CumPct
0: No	1,120	1,120	16.9	16.9
1: Yes	3,777	4,897	57.0	73.9
-9: Not Ascertained	197	5,094	3.0	76.9
-8: Don't Know	74	5,168	1.1	78.0
-7: Refused	3	5,171	0.0	78.0
-1: Inapplicable	1,457	6,628	22.0	100.0

ERRREPT	Numeric	2.0	120	121
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Question: D6b

Does the hospital where most of your patients are treated have a system for reporting medical errors, in which the person reporting the error remains anonymous?

Description: Asked of all specialists and PCPs who said that they saw patients on hospital rounds B5ad (HOSPV =1-997).

Value	Count	Cum	Percent	CumPct
0: No	712	712	10.7	10.7
1: Yes	2,862	3,574	43.2	53.9
-9: Not Ascertained	230	3,804	3.5	57.4
-8: Don't Know	1,365	5,169	20.6	78.0
-7: Refused	2	5,171	0.0	78.0
-1: Inapplicable	1,457	6,628	22.0	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
HSPLST	Numeric	5.1	122	126

Question: D7

What percentage of your patients who were hospitalized last year had a hospitalist involved in their inpatient care?

Description: Hospitalists are physicians whose primary professional focus is the general medical care of hospitalized patients. The response "Less than 1%" was coded as 0.5. The response ".A" or "-1" refers to physicians who do not admit patients to the hospital.

Value	Count	Cum	Percent	CumPct
0	2,081	2,081	31.4	31.4
.5,Less than 1%	107	2,188	1.6	33.0
1-25	1,548	3,736	23.4	56.4
26-50	656	4,392	9.9	66.3
51-75	297	4,689	4.5	70.7
76-100	1,418	6,107	21.4	92.1
-1: Inapplicable	521	6,628	7.9	100.0

Variable Name	Variable Type	Length	Start	End
CMPEXPC	Numeric	2.0	127	128

Question: D8

In general, would you say that the complexity or severity of patients' conditions for which you are currently expected to provide care without referral is (read 5-1)?

Description: Respondents limited to those in one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1).

Value	Count	Cum	Percent	CumPct
5: Much greater	143	143	2.2	2.2
4: Somewhat greater	560	703	8.4	10.6
3: About right	2,401	3,104	36.2	46.8
2: Somewhat less	123	3,227	1.9	48.7
1: Much less	18	3,245	0.3	49.0
-9: Not Ascertained	1	3,246	0.0	49.0
-8: Don't Know	36	3,282	0.5	49.5
-7: Refused	9	3,291	0.1	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
SPECUSE	Numeric	2.0	129	130

Question: D9

During the last two years, has the number of patients that you refer to specialists (read 5-1)?

Description: Extent of change over past two years in complexity or severity of patients' conditions treated without referral to specialists. Respondents limited to those in one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Geriatric Internal Medicine, Adolescent Medicine, Internal Medicine/Family Practice, or other specialist(PCP=1).

Value	Count	Cum	Percent	CumPct
5: Increased a lot	148	148	2.2	2.2
4: Increased a little	652	800	9.8	12.1
3: Stayed same	2,152	2,952	32.5	44.5
2: Decreased a little	282	3,234	4.3	48.8
1: Decreased a lot	28	3,262	0.4	49.2
-9: Not Ascertained	1	3,263	0.0	49.2
-8: Don't Know	22	3,285	0.3	49.6
-7: Refused	6	3,291	0.1	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

Variable Name	Variable Type	Length	Start	End
PCTGATE	Numeric	3.0	131	133

Question: D10

Some insurance plans or medical groups REQUIRE their enrollees to obtain permission from a primary care physician before seeing a specialist. For roughly what percent of your patients do you serve in this role?

Description: Respondents limited to those in one of the following specialties or subspecialties: Family Practice, Geriatric Medicine, General Practice, Adolescent Medicine, or other specialist who spends most of his/her time in General Internal Medicine or General Pediatrics (PCP=1).

Value	Count	Cum	Percent	CumPct
0	309	309	4.7	4.7
1% or less-25	1,061	1,370	16.0	20.7
26-50	902	2,272	13.6	34.3
51-75	469	2,741	7.1	41.4
76-100	550	3,291	8.3	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

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Section D - Medical Care Management

Variable Name	Variable Type	Length	Start	End
_PCTGATE	Numeric	2.0	134	135

Question: N/A

Description: Imputation flag for PCTGATE.

Value	Count	Cum	Percent	CumPct
0: No Imputation	3,193	3,193	48.2	48.2
1: Imputation	98	3,291	1.5	49.7
-1: Inapplicable	3,337	6,628	50.3	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
RADQTIME	Numeric	2.0	136	137

Question: N/A

Description: Strength of agreement: I have adequate time to spend with my patients during typical office/patient visits. Constructed using responses to questions F1A (ATMOFF) and F1B (ATMOTH). If a physician does not have an office (F1A=7), then the physician was asked F1B about adequate time during a patient visit.

Value	Count	Cum	Percent	CumPct
1: Disagree strongly	656	656	9.9	9.9
2: Disagree somewhat	1,381	2,037	20.8	30.7
3: Neither agree or disagree	153	2,190	2.3	33.0
4: Agree somewhat	2,494	4,684	37.6	70.7
5: Agree strongly	1,912	6,596	28.8	99.5
-9: Not Ascertained	32	6,628	0.5	100.0

Variable Name	Variable Type	Length	Start	End
RCLNFREE	Numeric	2.0	138	139

Question: F1C

I have the freedom to make clinical decisions that meet my patients' needs.

Value	Count	Cum	Percent	CumPct
1: Disagree strongly	187	187	2.8	2.8
2: Disagree somewhat	559	746	8.4	11.3
3: Neither agree or disagree	100	846	1.5	12.8
4: Agree somewhat	2,153	2,999	32.5	45.2
5: Agree strongly	3,618	6,617	54.6	99.8
-8: Don't Know	8	6,625	0.1	100.0
-7: Refused	3	6,628	0.0	100.0

CTS Physician Survey Public Use File

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
RHIGHCAR	Numeric	2.0	140	141

Question: F1D

It is possible to provide high quality care to all of my patients.

Value	Count	Cum	Percent	CumPct
1: Disagree strongly	345	345	5.2	5.2
2: Disagree somewhat	852	1,197	12.9	18.1
3: Neither agree or disagree	168	1,365	2.5	20.6
4: Agree somewhat	2,322	3,687	35.0	55.6
5: Agree strongly	2,931	6,618	44.2	99.8
-8: Don't Know	7	6,625	0.1	100.0
-7: Refused	3	6,628	0.0	100.0

RNEGINCN	Numeric	2.0	142	143
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Question: F1E

I can make clinical decisions in the best interests of my patients without the possibility of reducing my income.

Value	Count	Cum	Percent	CumPct
1: Disagree strongly	316	316	4.8	4.8
2: Disagree somewhat	634	950	9.6	14.3
3: Neither agree or disagree	231	1,181	3.5	17.8
4: Agree somewhat	1,731	2,912	26.1	43.9
5: Agree strongly	3,650	6,562	55.1	99.0
-8: Don't Know	47	6,609	0.7	99.7
-7: Refused	19	6,628	0.3	100.0

CTS Physician Survey Public Use File

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
RPATREL	Numeric	2.0	144	145

Question: F1H

It is possible to maintain the kind of continuing relationships with patients over time that promote the delivery of high quality care.

Description: Not asked of physicians who responded "Does not have office" or "Does not have continuing relationship with patient".

Value	Count	Cum	Percent	CumPct
1: Disagree strongly	340	340	5.1	5.1
2: Disagree somewhat	712	1,052	10.7	15.9
3: Neither agree or disagree	200	1,252	3.0	18.9
4: Agree somewhat	2,255	3,507	34.0	52.9
5: Agree strongly	2,712	6,219	40.9	93.8
-8: Don't Know	11	6,230	0.2	94.0
-7: Refused	5	6,235	0.1	94.1
-1: Inapplicable	393	6,628	5.9	100.0

NOTREFS	Numeric	2.0	146	147
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Question: F8bA

During the last 12 months, were you unable to obtain any of the following services for your patients when you thought they were medically necessary? How about Referrals to specialists of high quality/(Otherwise, ask:) Referrals to other specialists of high quality

Description: This question was revised from the previous rounds of question F8A (OBREFS). "Does not apply" was not included as a response category for this question. The vast majority of missings would likely have replied "does not apply" if that response had been available.

Value	Count	Cum	Percent	CumPct
0: No	4,269	4,269	64.4	64.4
1: Yes	2,296	6,565	34.6	99.0
-8: Don't Know	35	6,600	0.5	99.6
-7: Refused	28	6,628	0.4	100.0

CTS Physician Survey Public Use File

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
NOTHOSP	Numeric	2.0	148	149

Question: F8bC

During the last 12 months, were you unable to obtain any of the following services for your patients when you thought they were medically necessary? How about non-emergency hospital admissions?

Description: This question was revised from the previous rounds of question F8C (OBHOSP). "Does not apply" was not included as a response category for this question. The vast majority of missings would likely have replied "does not apply" if that response had been available.

Value	Count	Cum	Percent	CumPct
0: No	4,924	4,924	74.3	74.3
1: Yes	1,308	6,232	19.7	94.0
-8: Don't Know	261	6,493	3.9	98.0
-7: Refused	135	6,628	2.0	100.0

NOTIMAG	Numeric	2.0	150	151
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Question: F8bD

During the last 12 months, were you unable to obtain any of the following services for your patients when you thought they were medically necessary? How about high quality diagnostic imaging services?

Description: This question was revised from the previous rounds of question F8E (OBIMAG). "Does not apply" was not included as a response category for this question. The vast majority of missings would likely have replied "does not apply" if that response had been available.

Value	Count	Cum	Percent	CumPct
0: No	4,606	4,606	69.5	69.5
1: Yes	1,950	6,556	29.4	98.9
-8: Don't Know	49	6,605	0.7	99.7
-7: Refused	23	6,628	0.3	100.0

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2004/2005 Data

Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
NOTOUTP	Numeric	2.0	152	153

Question: F8bE

During the last 12 months, were you unable to obtain any of the following services for your patients when you thought they were medically necessary? How about high quality outpatient mental health services?

Description: This question was revised from the previous rounds of question F8G (OABOUTPT). "Does not apply" was not included as a response category for this question. The vast majority of missings would likely have replied "does not apply" if that response had been available. Asked of all PCPs; specialists spending most of their time in internal medicine or pediatrics; and specialists in adolescent medicine, geriatric medicine, psychiatry and obstetrics/gynecology.

Value	Count	Cum	Percent	CumPct
0: No	1,386	1,386	20.9	20.9
1: Yes	2,523	3,909	38.1	59.0
-9: Not Ascertained	2	3,911	0.0	59.0
-8: Don't Know	84	3,995	1.3	60.3
-7: Refused	38	4,033	0.6	60.8
-1: Inapplicable	2,595	6,628	39.2	100.0

Variable Name	Variable Type	Length	Start	End
REFPRVR	Numeric	2.0	154	155

Question: F8cAa

Why you might be unable to obtain various services? For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain referrals to specialists of high quality/ Referrals to other specialists of high quality. There aren't enough qualified service providers or facilities in my area.

Description: Asked of all physicians who reported they were unable to obtain medically necessary referrals in past 12 months (NOTREFS=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	745	745	11.2	11.2
2: Not very important	423	1,168	6.4	17.6
3: Moderately important	542	1,710	8.2	25.8
4: Very important	568	2,278	8.6	34.4
-8: Don't Know	12	2,290	0.2	34.6
-7: Refused	6	2,296	0.1	34.6
-1: Inapplicable	4,332	6,628	65.4	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
REFHPR	Numeric	2.0	156	157

Question: F8cAb

Why you might be unable to obtain various services? For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain referrals to specialists of high quality/ referrals to other specialists of high quality. Health plan networks and administrative barriers limit patient access.

Description: Asked of all physicians who reported they were unable to obtain medically necessary referrals in past 12 months (NOTREFS=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	170	170	2.6	2.6
2: Not very important	273	443	4.1	6.7
3: Moderately important	720	1,163	10.9	17.5
4: Very important	1,116	2,279	16.8	34.4
-8: Don't Know	15	2,294	0.2	34.6
-7: Refused	2	2,296	0.0	34.6
-1: Inapplicable	4,332	6,628	65.4	100.0

Variable Name	Variable Type	Length	Start	End
REFINSR	Numeric	2.0	158	159

Question: F8cAc

Why you might be unable to obtain various services? For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain referrals to specialists of high quality/ referrals to other specialists of high quality. Patients lack health insurance or have inadequate insurance coverage.

Description: Asked of all physicians who reported they were unable to obtain medically necessary referrals in past 12 months (NOTREFS=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	159	159	2.4	2.4
2: Not very important	241	400	3.6	6.0
3: Moderately important	678	1,078	10.2	16.3
4: Very important	1,199	2,277	18.1	34.4
-8: Don't Know	17	2,294	0.3	34.6
-7: Refused	2	2,296	0.0	34.6
-1: Inapplicable	4,332	6,628	65.4	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
HSPPRVR	Numeric	2.0	160	161

Question: F8cBa

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain non-emergency hospital admissions. There aren't enough qualified service providers or facilities in my area.

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTHOSP=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	572	572	8.6	8.6
2: Not very important	267	839	4.0	12.7
3: Moderately important	249	1,088	3.8	16.4
4: Very important	201	1,289	3.0	19.4
-8: Don't Know	15	1,304	0.2	19.7
-7: Refused	4	1,308	0.1	19.7
-1: Inapplicable	5,320	6,628	80.3	100.0

Variable Name	Variable Type	Length	Start	End
HSPHPR	Numeric	2.0	162	163

Question: F8cBb

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain non-emergency hospital admissions. Health plan networks and administrative barriers limit patient access.

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTHOSP=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	140	140	2.1	2.1
2: Not very important	171	311	2.6	4.7
3: Moderately important	400	711	6.0	10.7
4: Very important	585	1,296	8.8	19.6
-8: Don't Know	9	1,305	0.1	19.7
-7: Refused	3	1,308	0.0	19.7
-1: Inapplicable	5,320	6,628	80.3	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
HSPINSR	Numeric	2.0	164	165

Question: F8cBc

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain non-emergency hospital admissions. Patients lack health insurance or have inadequate insurance coverage.

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTHOSP=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	228	228	3.4	3.4
2: Not very important	197	425	3.0	6.4
3: Moderately important	340	765	5.1	11.5
4: Very important	533	1,298	8.0	19.6
-8: Don't Know	7	1,305	0.1	19.7
-7: Refused	3	1,308	0.0	19.7
-1: Inapplicable	5,320	6,628	80.3	100.0

Variable Name	Variable Type	Length	Start	End
MHPROVR	Numeric	2.0	166	167

Question: F8cCa

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain high quality outpatient mental health services, when you think it is medically necessary. There aren't enough qualified service providers or facilities in my area

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTOUTP=1). NOTOUTP was limited to PCPs; specialists spending most of their time in internal medicine or pediatrics; and specialists in adolescent medicine, geriatric medicine, psychiatry and obstetrics/gynecology.

Value	Count	Cum	Percent	CumPct
1: Not at all important	329	329	5.0	5.0
2: Not very important	222	551	3.3	8.3
3: Moderately important	563	1,114	8.5	16.8
4: Very important	1,393	2,507	21.0	37.8
-9: Not Ascertained	1	2,508	0.0	37.8
-8: Don't Know	11	2,519	0.2	38.0
-7: Refused	4	2,523	0.1	38.1
-1: Inapplicable	4,105	6,628	61.9	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MHHPR	Numeric	2.0	168	169

Question: F8cCb

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain high quality outpatient mental health services, when you think it is medically necessary. Health plan networks and administrative barriers limit patient access.

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTOUTP=1). NOTOUTP was limited to PCPs; specialists spending most of their time in internal medicine or pediatrics; and specialists in adolescent medicine, geriatric medicine, psychiatry and obstetrics/gynecology.

Value	Count	Cum	Percent	CumPct
1: Not at all important	152	152	2.3	2.3
2: Not very important	278	430	4.2	6.5
3: Moderately important	725	1,155	10.9	17.4
4: Very important	1,348	2,503	20.3	37.8
-9: Not Ascertained	1	2,504	0.0	37.8
-8: Don't Know	16	2,520	0.2	38.0
-7: Refused	3	2,523	0.0	38.1
-1: Inapplicable	4,105	6,628	61.9	100.0

MHINSR	Numeric	2.0	170	171
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Question: F8cCc

Why you might be unable to obtain various services. For each one, tell me whether it is a very important, moderately important, not very important, or not at all important reason for your being unable to obtain high quality outpatient mental health services, when you think it is medically necessary. Patients lack health insurance or have inadequate insurance coverage.

Description: Asked of all physicians who reported they were unable to obtain non-emergency hospital admissions for their patients in past 12 months (NOTOUTP=1). NOTOUTP was limited to PCPs; specialists spending most of their time in internal medicine or pediatrics; and specialists in adolescent medicine, geriatric medicine, psychiatry and obstetrics/gynecology.

Value	Count	Cum	Percent	CumPct
1: Not at all important	134	134	2.0	2.0
2: Not very important	228	362	3.4	5.5
3: Moderately important	688	1,050	10.4	15.8
4: Very important	1,460	2,510	22.0	37.9
-8: Don't Know	10	2,520	0.2	38.0
-7: Refused	3	2,523	0.0	38.1
-1: Inapplicable	4,105	6,628	61.9	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
GENERIC	Numeric	2.0	172	173

Question: F8dA

If a generic option is available, how often do you prescribe a generic over a brand name drug?

Description: This question describes the impact of insured patients' out-of-pocket costs for co-payments and deductibles on physicians' decision making.

Value	Count	Cum	Percent	CumPct
1: Never	61	61	0.9	0.9
2: Rarely	145	206	2.2	3.1
3: Sometimes	1,197	1,403	18.1	21.2
4: Usually	3,335	4,738	50.3	71.5
5: Always	1,806	6,544	27.2	98.7
-8: Don't Know	61	6,605	0.9	99.7
-7: Refused	23	6,628	0.3	100.0

DIAGCST	Numeric	2.0	174	175
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Question: F8dB

If there is uncertainty about a diagnosis, how often do you consider an insured patient's out-of-pocket costs in deciding the types of tests to recommend?

Description: This question describes the impact of insured patients' out-of-pocket costs for co-payments and deductibles on physicians' decision making.

Value	Count	Cum	Percent	CumPct
1: Never	858	858	12.9	12.9
2: Rarely	1,180	2,038	17.8	30.7
3: Sometimes	1,693	3,731	25.5	56.3
4: Usually	1,713	5,444	25.8	82.1
5: Always	1,010	6,454	15.2	97.4
-8: Don't Know	132	6,586	2.0	99.4
-7: Refused	42	6,628	0.6	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
IOPTCST	Numeric	2.0	176	177

Question: F8dC

If there is a choice between outpatient and inpatient care, how often do you consider an insured patient's out-of-pocket costs?

Description: This question describes the impact of insured patients' out-of-pocket costs for co-payments and deductibles on physicians' decision making.

Value	Count	Cum	Percent	CumPct
1: Never	848	848	12.8	12.8
2: Rarely	980	1,828	14.8	27.6
3: Sometimes	1,216	3,044	18.3	45.9
4: Usually	1,539	4,583	23.2	69.1
5: Always	1,588	6,171	24.0	93.1
-8: Don't Know	333	6,504	5.0	98.1
-7: Refused	124	6,628	1.9	100.0

NWMCARE	Numeric	2.0	178	179
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Question: F9A

Is the practice accepting all, most, some, or no new patients who are insured through Medicare, including Medicare managed care patients?

Value	Count	Cum	Percent	CumPct
4: All	4,482	4,482	67.6	67.6
3: Most	798	5,280	12.0	79.7
2: Some	729	6,009	11.0	90.7
1: No new patients/None	619	6,628	9.3	100.0

_NWMCARE	Numeric	2.0	180	181
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Question: N/A

Description: Imputation flag for NWMCARE.

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,020	6,020	90.8	90.8
1: Imputation	608	6,628	9.2	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
NWMCAID	Numeric	2.0	182	183

Question: F9B

Is the practice accepting all, most, some, or no new patients who are insured through Medicaid, including Medicaid managed care patients?

Value	Count	Cum	Percent	CumPct
4: All	3,286	3,286	49.6	49.6
3: Most	569	3,855	8.6	58.2
2: Some	1,226	5,081	18.5	76.7
1: No new patients/None	1,547	6,628	23.3	100.0

_NWMCAID	Numeric	2.0	184	185
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Question: N/A

Description: Imputation flag for NWMCAID.

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,400	6,400	96.6	96.6
1: Imputation	228	6,628	3.4	100.0

NWPRIV	Numeric	2.0	186	187
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Question: F9C

Is the practice accepting all, most, some, or no new patients who are insured through private or commercial insurance plans including managed care plans and HMOs with whom the practice has contracts? This includes both fee for service patients and patients enrolled in managed care plans with whom the practice has a contract. It excludes Medicaid or Medicare managed care.

Value	Count	Cum	Percent	CumPct
4: All	4,718	4,718	71.2	71.2
3: Most	967	5,685	14.6	85.8
2: Some	642	6,327	9.7	95.5
1: No new patients/None	301	6,628	4.5	100.0

_NWPRIV	Numeric	2.0	188	189
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Question: N/A

Description: Imputation flag for NWPRIV.

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,433	6,433	97.1	97.1
1: Imputation	195	6,628	2.9	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
NWNPAY	Numeric	2.0	190	191

Question: F9G

Is the practice accepting all, most, some, or no new uninsured patients who are unable to pay your fees?

Value	Count	Cum	Percent	CumPct
4: All	2,775	2,775	41.9	41.9
3: Most	618	3,393	9.3	51.2
2: Some	2,013	5,406	30.4	81.6
1: No new patients/None	1,222	6,628	18.4	100.0

_NWNPAY	Numeric	2.0	192	193
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Question: N/A

Description: Imputation flag for NWNPAY

Value	Count	Cum	Percent	CumPct
0: No Imputation	6,317	6,317	95.3	95.3
1: Imputation	311	6,628	4.7	100.0

MRBILL	Numeric	2.0	194	195
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Question: F11A

Tell me whether it is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting new Medicare patients. How about billing requirements, including paperwork, and filing of claims?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9A (NWMCARE=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	297	297	4.5	4.5
2: Not very important	162	459	2.4	6.9
3: Moderately important	235	694	3.5	10.5
4: Very important	344	1,038	5.2	15.7
-9: Not Ascertained	203	1,241	3.1	18.7
-8: Don't Know	89	1,330	1.3	20.1
-7: Refused	18	1,348	0.3	20.3
-1: Inapplicable	5,280	6,628	79.7	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MRAUDIT	Numeric	2.0	196	197

Question: F11B

Tell me whether it is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting] new Medicare patients. How about concern about a Medicare audit?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9A (NWMCARE=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	495	495	7.5	7.5
2: Not very important	246	741	3.7	11.2
3: Moderately important	153	894	2.3	13.5
4: Very important	135	1,029	2.0	15.5
-9: Not Ascertained	203	1,232	3.1	18.6
-8: Don't Know	96	1,328	1.4	20.0
-7: Refused	20	1,348	0.3	20.3
-1: Inapplicable	5,280	6,628	79.7	100.0

MRREIMB	Numeric	2.0	198	199
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Question: F11C

Tell me whether it is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting] new Medicare patients. How about inadequate reimbursement?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9A (NWMCARE=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	232	232	3.5	3.5
2: Not very important	95	327	1.4	4.9
3: Moderately important	231	558	3.5	8.4
4: Very important	478	1,036	7.2	15.6
-9: Not Ascertained	203	1,239	3.1	18.7
-8: Don't Know	92	1,331	1.4	20.1
-7: Refused	17	1,348	0.3	20.3
-1: Inapplicable	5,280	6,628	79.7	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MRNUFPT	Numeric	2.0	200	201

Question: F11D

Tell me whether it is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting] new Medicare patients. How about practice already has enough patients?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9A (NWMCARE=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	304	304	4.6	4.6
2: Not very important	148	452	2.2	6.8
3: Moderately important	239	691	3.6	10.4
4: Very important	343	1,034	5.2	15.6
-9: Not Ascertained	203	1,237	3.1	18.7
-8: Don't Know	90	1,327	1.4	20.0
-7: Refused	21	1,348	0.3	20.3
-1: Inapplicable	5,280	6,628	79.7	100.0

MRPTBUR	Numeric	2.0	202	203
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Question: F11E

Tell me whether it is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting new Medicare patients. How about Medicare patients have high clinical burden?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9A (NWMCARE=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	379	379	5.7	5.7
2: Not very important	203	582	3.1	8.8
3: Moderately important	244	826	3.7	12.5
4: Very important	203	1,029	3.1	15.5
-9: Not Ascertained	203	1,232	3.1	18.6
-8: Don't Know	95	1,327	1.4	20.0
-7: Refused	21	1,348	0.3	20.3
-1: Inapplicable	5,280	6,628	79.7	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MDBILL	Numeric	2.0	204	205

Question: F12A

I am going to read some reasons why physician practices may be limiting or not accepting new Medical/AHCCCS("Access")/Medicaid patients. Tell me whether each one is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting/ limiting new MediCal / AHCCCS ("Access") / Medicaid patients. How about billing requirements, including paperwork, and filing of claims?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9B (NWMCAID=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	409	409	6.2	6.2
2: Not very important	331	740	5.0	11.2
3: Moderately important	599	1,339	9.0	20.2
4: Very important	1,192	2,531	18.0	38.2
-9: Not Ascertained	116	2,647	1.8	39.9
-8: Don't Know	113	2,760	1.7	41.6
-7: Refused	13	2,773	0.2	41.8
-1: Inapplicable	3,855	6,628	58.2	100.0

Variable Name	Variable Type	Length	Start	End
MDEDELAY	Numeric	2.0	206	207

Question: F12B

I am going to read some reasons why physician practices may be limiting or not accepting new Medical/AHCCCS("Access")/Medicaid patients. Tell me whether each one is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting / limiting new MediCal / AHCCCS ("Access") / Medicaid] patients. How about delayed reimbursement?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9B (NWMCAID=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	451	451	6.8	6.8
2: Not very important	366	817	5.5	12.3
3: Moderately important	607	1,424	9.2	21.5
4: Very important	1,080	2,504	16.3	37.8
-9: Not Ascertained	116	2,620	1.8	39.5
-8: Don't Know	139	2,759	2.1	41.6
-7: Refused	14	2,773	0.2	41.8
-1: Inapplicable	3,855	6,628	58.2	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MDREIMB	Numeric	2.0	208	209

Question: F12C

I am going to read some reasons why physician practices may be limiting or not accepting new Medical/AHCCCS("Access")/Medicaid patients. Tell me whether each one is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting / limiting new MediCal / AHCCCS ("Access") / Medicaid] patients. How about inadequate reimbursement?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9B (NWMCAID=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	200	200	3.0	3.0
2: Not very important	131	331	2.0	5.0
3: Moderately important	428	759	6.5	11.5
4: Very important	1,795	2,554	27.1	38.5
-9: Not Ascertained	116	2,670	1.8	40.3
-8: Don't Know	95	2,765	1.4	41.7
-7: Refused	8	2,773	0.1	41.8
-1: Inapplicable	3,855	6,628	58.2	100.0

Variable Name	Variable Type	Length	Start	End
MDNUFPT	Numeric	2.0	210	211

Question: F12D

I am going to read some reasons why physician practices may be limiting or not accepting new Medical/AHCCCS("Access")/Medicaid patients. Tell me whether each one is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting / limiting new MediCal / AHCCCS ("Access") / Medicaid] patients. How about Practice already has enough patients?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9B (NWMCAID=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	819	819	12.4	12.4
2: Not very important	490	1,309	7.4	19.7
3: Moderately important	568	1,877	8.6	28.3
4: Very important	673	2,550	10.2	38.5
-9: Not Ascertained	116	2,666	1.8	40.2
-8: Don't Know	89	2,755	1.3	41.6
-7: Refused	18	2,773	0.3	41.8
-1: Inapplicable	3,855	6,628	58.2	100.0

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Section F - Physician - Patient Interactions

Variable Name	Variable Type	Length	Start	End
MDPTBUR	Numeric	2.0	212	213

Question: F12E

I am going to read some reasons why physician practices may be limiting or not accepting new Medical/AHCCCS("Access")/Medicaid patients. Tell me whether each one is a very important, moderately important, not very important, or not at all important reason why your practice is not accepting / limiting new MediCal / AHCCCS ("Access") / Medicaid patients. How about MediCal / AHCCCS ("Access") / Medicaid patients have high clinical burden?

Description: Asked of physicians who responded "Some" or "No new patients/none" to question F9B (NWMCAID=1,2).

Value	Count	Cum	Percent	CumPct
1: Not at all important	662	662	10.0	10.0
2: Not very important	564	1,226	8.5	18.5
3: Moderately important	653	1,879	9.9	28.3
4: Very important	664	2,543	10.0	38.4
-9: Not Ascertained	116	2,659	1.8	40.1
-8: Don't Know	96	2,755	1.4	41.6
-7: Refused	18	2,773	0.3	41.8
-1: Inapplicable	3,855	6,628	58.2	100.0

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2004/2005 Data Section G - Practice Revenue

Variable Name	Variable Type	Length	Start	End
PMCARE	Numeric	3.0	214	216

Question: N/A

Description: Percent of patient care practice revenue that comes from Medicare. Constructed from responses to questions G1-G1a.

Value	Count	Cum	Percent	CumPct
0%	929	929	14.0	14.0
1-25%	2,166	3,095	32.7	46.7
26-50%	2,462	5,557	37.1	83.8
51-75%	885	6,442	13.4	97.2
76-100%	186	6,628	2.8	100.0

_PMCARE	Numeric	2.0	217	218
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Question: N/A

Description: Imputation flag for PMCARE.

Value	Count	Cum	Percent	CumPct
0: No Imputation	5,500	5,500	83.0	83.0
1: Imputation	1,128	6,628	17.0	100.0

PMCAID	Numeric	3.0	219	221
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Question: N/A

Description: Percent of patient care practice revenue which comes from Medicaid. Constructed from responses to questions G1-G1a.

Value	Count	Cum	Percent	CumPct
0%	1,010	1,010	15.2	15.2
1-25%	4,254	5,264	64.2	79.4
26-50%	954	6,218	14.4	93.8
51-75%	270	6,488	4.1	97.9
76-100%	140	6,628	2.1	100.0

_PMCAID	Numeric	2.0	222	223
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Question: N/A

Description: Imputation flag for PMCAID.

Value	Count	Cum	Percent	CumPct
0: No Imputation	5,623	5,623	84.8	84.8
1: Imputation	1,005	6,628	15.2	100.0

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2004/2005 Data Section G - Practice Revenue

Variable Name	Variable Type	Length	Start	End
PCAPREV	Numeric	3.0	224	226

Question: N/A

Description: Percent of practice's patient care revenue paid on capitated or other prepaid basis. Constructed variable based on responses to questions G3, G7b, G8c, and G8g. Some edits were performed on this variable to insure that percent capitated revenue is not greater than percent managed care (PMC) after imputation.

Value	Count	Cum	Percent	CumPct
0%	3,463	3,463	52.2	52.2
1-25%	1,766	5,229	26.6	78.9
26-50%	794	6,023	12.0	90.9
51-75%	302	6,325	4.6	95.4
76-100%	303	6,628	4.6	100.0

_PCAPREV	Numeric	2.0	227	228
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Question: N/A

Description: Imputation flag for PCAPREV.

Value	Count	Cum	Percent	CumPct
0: No Imputation	5,518	5,518	83.3	83.3
1: Imputation	1,110	6,628	16.7	100.0

NMCCONX	Numeric	2.0	229	230
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Question: N/A

Description: Number of contracts that physician's practice has with managed care plans. Based on responses to questions G6-G6c. For confidentiality reasons, this variable was divided into 7 categories, instead of being a continuous variable.

Value	Count	Cum	Percent	CumPct
0: 0	725	725	10.9	10.9
1: 1	381	1,106	5.7	16.7
2: 2-5	1,425	2,531	21.5	38.2
3: 6-10	1,785	4,316	26.9	65.1
4: 11-15	875	5,191	13.2	78.3
5: 16-25	885	6,076	13.4	91.7
6: GT 25	552	6,628	8.3	100.0

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2004/2005 Data Section G - Practice Revenue

Variable Name	Variable Type	Length	Start	End
PMC	Numeric	5.1	231	235

Question: N/A

Description: Percent of practice's patient care revenue from all managed care. Constructed variable based on responses to questions G7, G7a, G8, G8b, and G8f. Constraints: If PCAPREV > PMC, then PMC was set to equal PCAPREV. This edit was performed before and after imputation. The response "Less than 1%" was coded as "0.5".

Value	Count	Cum	Percent	CumPct
0%	534	534	8.1	8.1
1-25%	1,700	2,234	25.6	33.7
26-50%	2,087	4,321	31.5	65.2
51-75%	1,298	5,619	19.6	84.8
76-100%	1,009	6,628	15.2	100.0

Variable Name	Variable Type	Length	Start	End
_PMC	Numeric	2.0	236	237

Question: N/A

Description: Imputation flag for PMC. Definition differs from that of previous rounds of the Physician Survey. Refer to the User's Guide for details.

Value	Count	Cum	Percent	CumPct
0: No Imputation	5,325	5,325	80.3	80.3
1: Imputation	1,303	6,628	19.7	100.0

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2004/2005 Data

Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
SALPAID	Numeric	2.0	238	239

Question: H1

Are you a salaried physician?

Description: Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: No	1,639	1,639	24.7	24.7
1: Yes	3,461	5,100	52.2	76.9
-8: Don't Know	11	5,111	0.2	77.1
-7: Refused	4	5,115	0.1	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

SALTIME	Numeric	2.0	240	241
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Question: H2

Are you paid in direct relation to the amount of time you work, such as by the shift or by the hour?

Description: Full owners of solo practices and salaried physicians (SALPAID=1) were not asked this question.

Value	Count	Cum	Percent	CumPct
0: No	1,268	1,268	19.1	19.1
1: Yes	376	1,644	5.7	24.8
-8: Don't Know	5	1,649	0.1	24.9
-7: Refused	5	1,654	0.1	25.0
-1: Inapplicable	4,974	6,628	75.0	100.0

SALADJ	Numeric	2.0	242	243
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Question: H3

Is your base salary a fixed amount that will not change until your salary is renegotiated or is it adjusted up or down during the present contract period depending on your performance or that of the practice?

Description: Asked of salaried physicians (SALPAID=1).

Value	Count	Cum	Percent	CumPct
1: Fixed amount	2,216	2,216	33.4	33.4
2: Adjusted up or down	1,221	3,437	18.4	51.9
-8: Don't Know	19	3,456	0.3	52.1
-7: Refused	5	3,461	0.1	52.2
-1: Inapplicable	3,167	6,628	47.8	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
BONUSR	Numeric	2.0	244	245

Question: H4

Are you also currently eligible to earn income through any type of bonus or incentive plan? Bonus can include any type of payment above the fixed, guaranteed salary.

Description: Asked only of physicians who are hourly workers (SALTIME=1), or whose salary is not adjusted (SALADJ NE 2). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Not eligible for bonus now	2,417	2,417	36.5	36.5
1: Eligible for bonus now	2,655	5,072	40.1	76.5
-8: Don't Know	31	5,103	0.5	77.0
-7: Refused	12	5,115	0.2	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

Variable Name	Variable Type	Length	Start	End
SUPLPAY	Numeric	2.0	246	247

Question: H4a

Are you eligible to receive end-of-year adjustments, returns on withholds, or any type of supplemental payments, either from this practice or from health plans?

Description: Ask of physicians who are not eligible for bonus now or "don't know" if they are eligible for bonus now (H4=No or don't know).

Value	Count	Cum	Percent	CumPct
0: No	1,956	1,956	29.5	29.5
1: Yes	465	2,421	7.0	36.5
-8: Don't Know	25	2,446	0.4	36.9
-7: Refused	2	2,448	0.0	36.9
-1: Inapplicable	4,180	6,628	63.1	100.0

Variable Name	Variable Type	Length	Start	End
ELINCENT	Numeric	2.0	248	249

Question: N/A

Description: Constructed variable based on H4 (BONUSR) and H4a (SUPLPAY). Full owners of solo practices are assumed not eligible for bonuses.

Value	Count	Cum	Percent	CumPct
0: Not eligible for bonus	3,448	3,448	52.0	52.0
1: Eligible for bonus	3,120	6,568	47.1	99.1
-9: Not Ascertained	60	6,628	0.9	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
SPROD	Numeric	2.0	250	251

Question: N/A

Description: A flag indicating that the physician's compensation is affected by own productivity. Constructed from responses to questions H5a (SPROD_A) and H7A (SPROD_B). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Productvty doesnt affect comp	1,457	1,457	22.0	22.0
1: Productvty affects comp	3,589	5,046	54.1	76.1
-9: Not Ascertained	69	5,115	1.0	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

SSAT	Numeric	2.0	252	253
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Question: N/A

Description: A flag indicating that the physician's compensation is affected by satisfaction surveys completed by physician's own patients. Constructed from responses to questions H5B (SSAT_A) and H7B (SSAT_B). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Patnt satisfctn doesnt affect comp	3,713	3,713	56.0	56.0
1: Patnt satisfctn affects comp	1,317	5,030	19.9	75.9
-9: Not Ascertained	85	5,115	1.3	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

SQUAL	Numeric	2.0	254	255
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Question: N/A

Description: A flag indicating that the physician's compensation is affected by specific measures of quality of care. Constructed from responses to questions H5C (SQUAL_A) and H7C (SQUAL_B). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Qualty measure doesnt affect comp	3,946	3,946	59.5	59.5
1: Qualty measure affects comp	1,088	5,034	16.4	76.0
-9: Not Ascertained	81	5,115	1.2	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
SPROF	Numeric	2.0	256	257

Question: N/A

Description: A flag indicating that the physician's compensation is affected by practice profiling. Constructed from responses to questions H5D (SPROF_A) and H7D (SPROF_B). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Profile not affectd comp	4,314	4,314	65.1	65.1
1: Profile affectd comp	695	5,009	10.5	75.6
-9: Not Ascertained	106	5,115	1.6	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

SPERF	Numeric	2.0	258	259
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Question: N/A

Description: A flag indicating that the physician's compensation is affected by overall financial performance of the practice. Constructed from responses to questions H5E (SPEFR_A) and H7E (SPEFR_B). Full owners of solo practices were not asked this question.

Value	Count	Cum	Percent	CumPct
0: Finan perf doesnt affect comp	1,566	1,566	23.6	23.6
1: Finan perf affects comp	3,464	5,030	52.3	75.9
-9: Not Ascertained	85	5,115	1.3	77.2
-1: Inapplicable	1,513	6,628	22.8	100.0

IMPPROD	Numeric	2.0	260	261
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Question: H7aA

For each of the factors you mentioned, tell me whether it is very important, moderately important, not very important, or not at all important in determining your compensation? How about your own productivity.

Description: Asked of physicians who responded "Yes" to H5A or H7A (SPROD_A=1 or SPROD_B=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	36	36	0.5	0.5
2: Not very important	172	208	2.6	3.1
3: Moderately important	735	943	11.1	14.2
4: Very important	2,626	3,569	39.6	53.8
-8: Don't Know	17	3,586	0.3	54.1
-7: Refused	3	3,589	0.0	54.1
-1: Inapplicable	3,039	6,628	45.9	100.0

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Variable Name	Variable Type	Length	Start	End
IMPPSAT	Numeric	2.0	262	263

Question: H7aB

For each of the factors you mentioned, tell me whether it is very important, moderately important, not very important, or not at all important in determining your compensation? How about Satisfaction surveys.

Description: Asked of physicians who responded "Yes" to H5B or H7B (SSAT_A=1 or SSAT_B=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	42	42	0.6	0.6
2: Not very important	310	352	4.7	5.3
3: Moderately important	578	930	8.7	14.0
4: Very important	374	1,304	5.6	19.7
-8: Don't Know	12	1,316	0.2	19.9
-7: Refused	1	1,317	0.0	19.9
-1: Inapplicable	5,311	6,628	80.1	100.0

IMPQUAL	Numeric	2.0	264	265
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Question: H7aC

For each of the factors you mentioned, tell me whether it is very important, moderately important, not very important, or not at all important in determining your compensation? How about Quality of care measures.

Description: Asked of physicians who responded "Yes" to H5C or H7C (SQUAL_A=1 or SQUAL_B=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	26	26	0.4	0.4
2: Not very important	161	187	2.4	2.8
3: Moderately important	416	603	6.3	9.1
4: Very important	476	1,079	7.2	16.3
-8: Don't Know	9	1,088	0.1	16.4
-1: Inapplicable	5,540	6,628	83.6	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
IMPPROF	Numeric	2.0	266	267

Question: H7aD

For each of the factors you mentioned, tell me whether it is very important, moderately important, not very important, or not at all important in determining your compensation? How about Results of practice profiling.

Description: Asked of physicians who responded "Yes" to H5D or H7D (SPROF_A=1 or SPROF_B=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	38	38	0.6	0.6
2: Not very important	165	203	2.5	3.1
3: Moderately important	310	513	4.7	7.7
4: Very important	170	683	2.6	10.3
-8: Don't Know	12	695	0.2	10.5
-1: Inapplicable	5,933	6,628	89.5	100.0

IMPRPRF	Numeric	2.0	268	269
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Question: H7aE

For each of the factors you mentioned, tell me whether it is very important, moderately important, not very important, or not at all important in determining your compensation? How about Overall practice performance.

Description: Asked of physicians who responded "Yes" to H5E or H7E (SPERF_A=1 or SPERF_B=1).

Value	Count	Cum	Percent	CumPct
1: Not at all important	98	98	1.5	1.5
2: Not very important	309	407	4.7	6.1
3: Moderately important	1,033	1,440	15.6	21.7
4: Very important	1,994	3,434	30.1	51.8
-8: Don't Know	26	3,460	0.4	52.2
-7: Refused	4	3,464	0.1	52.3
-1: Inapplicable	3,164	6,628	47.7	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
INCOMEX	Numeric	2.0	270	271

Question: N/A

During 2003, what was your own net income from the practice of medicine to the nearest \$1,000, after expenses but before taxes?

Description: Physician's 2003 net income from practice of medicine. Values are reported in \$50,000 increments. Top coded at \$300,000

Value	Count	Cum	Percent	CumPct
1: \$0-49999	484	484	7.3	7.3
2: \$50000-99999	804	1,288	12.1	19.4
3: \$100000-149999	1,660	2,948	25.0	44.5
4: \$150000-199999	1,390	4,338	21.0	65.4
5: \$200000-249999	893	5,231	13.5	78.9
6: \$250000-299999	527	5,758	8.0	86.9
7: \$300000 or more (top code)	864	6,622	13.0	99.9
-9: Not Ascertained	6	6,628	0.1	100.0

RACEX	Numeric	2.0	282	283
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Question: H19

What race do you consider yourself to be?

Description: For confidentiality reasons, African-American/Black, Native American or Alaskan Native, Asian or Pacific Islander, and Other were combined into one category called Other.

Value	Count	Cum	Percent	CumPct
1: Other	1,487	1,487	22.4	22.4
2: White/Caucasian	5,048	6,535	76.2	98.6
-8: Don't Know	25	6,560	0.4	99.0
-7: Refused	68	6,628	1.0	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
QNOTIME	Numeric	2.0	284	285

Question: H20A

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about inadequate time with patients during office visits.

Value	Count	Cum	Percent	CumPct
1: Not a problem	2,057	2,057	31.0	31.0
2: Minor problem	3,269	5,326	49.3	80.4
3: Major problem	1,198	6,524	18.1	98.4
-8: Don't Know	71	6,595	1.1	99.5
-7: Refused	33	6,628	0.5	100.0

QPRBPAY	Numeric	2.0	286	287
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Question: H20B

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about patients' inability to pay for needed care.

Value	Count	Cum	Percent	CumPct
1: Not a problem	1,852	1,852	27.9	27.9
2: Minor problem	3,155	5,007	47.6	75.5
3: Major problem	1,553	6,560	23.4	99.0
-8: Don't Know	52	6,612	0.8	99.8
-7: Refused	16	6,628	0.2	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
QINSREJ	Numeric	2.0	288	289

Question: H20C

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about rejections of care decisions by insurance companies

Value	Count	Cum	Percent	CumPct
1: Not a problem	1,480	1,480	22.3	22.3
2: Minor problem	3,467	4,947	52.3	74.6
3: Major problem	1,606	6,553	24.2	98.9
-8: Don't Know	53	6,606	0.8	99.7
-7: Refused	22	6,628	0.3	100.0

QNOSPEC	Numeric	2.0	290	291
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Question: H20D

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about lack of qualified specialists in your area.

Value	Count	Cum	Percent	CumPct
1: Not a problem	3,370	3,370	50.8	50.8
2: Minor problem	2,509	5,879	37.9	88.7
3: Major problem	727	6,606	11.0	99.7
-8: Don't Know	11	6,617	0.2	99.8
-7: Refused	11	6,628	0.2	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
QNOREPT	Numeric	2.0	292	293

Question: H20E

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about not getting timely reports from other physicians and facilities.

Value	Count	Cum	Percent	CumPct
1: Not a problem	1,747	1,747	26.4	26.4
2: Minor problem	3,933	5,680	59.3	85.7
3: Major problem	917	6,597	13.8	99.5
-8: Don't Know	14	6,611	0.2	99.7
-7: Refused	17	6,628	0.3	100.0

QLANG	Numeric	2.0	294	295
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Question: H20F

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about difficulties communicating with patients due to language or cultural barriers.

Value	Count	Cum	Percent	CumPct
1: Not a problem	3,011	3,011	45.4	45.4
2: Minor problem	3,339	6,350	50.4	95.8
3: Major problem	263	6,613	4.0	99.8
-8: Don't Know	8	6,621	0.1	99.9
-7: Refused	7	6,628	0.1	100.0

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Section H - Physician Compensation Methods & Income Level

Variable Name	Variable Type	Length	Start	End
QERRHSP	Numeric	2.0	296	297

Question: H20H

Finally, I am going to list several problems that may limit physicians' ability to provide high quality care. For each one, tell me whether it is a MAJOR PROBLEM, MINOR PROBLEM, OR NOT A PROBLEM affecting your ability to provide high quality care. How about medical errors in hospitals

Value	Count	Cum	Percent	CumPct
1: Not a problem	2,711	2,711	40.9	40.9
2: Minor problem	3,452	6,163	52.1	93.0
3: Major problem	323	6,486	4.9	97.9
-8: Don't Know	95	6,581	1.4	99.3
-7: Refused	47	6,628	0.7	100.0

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2004/2005 Data
Weights and Sampling Variables

Variable Name	Variable Type	Length	Start	End
WTPHY4	Numeric	10.6	298	307

Question: N/A

Description: Weights for making national estimates.

Value	Count	Cum	Percent	CumPct
8.67-929.69	6,628	6,628	100.0	100.0