# 2009 Colorado Rural Physician Workforce Survey

*Codebook and Variable Frequencies Report – Public Use File*

Informing Policy. Advancing Health.

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# ACKNOWLEDGMENTS

# INTRODUCTION

The Colorado Health Institute (CHI) serves as an independent, nonpartisan source of health information and policy analysis. With funding from The Colorado Trust, CHI is building a comprehensive health professions database for the purpose of informing health workforce policy in Colorado.

A series of profession-specific workforce databases is being constructed to complement existing health professions workforce data. From these data, CHI is developing a set of indicators that will document changes in health care workforce supply and demand as well as practice patterns that exist in Colorado communities over time. A database download function has been developed to enable visitors to the CHI Web site to download health professions data and customize reports by profession and geographic location.

## 2009 COLORADO RURAL PHYSICIAN WORKFORCE SURVEY

### Methods
The survey was administered in four waves by mail beginning on May 22, 2009. The first wave was a postcard alerting the 1,362 rural physicians that a survey was coming. On May 29, 2009, the second mailing, which included a cover letter with Commonly Asked Questions, a questionnaire, a self-addressed stamped envelope and a $2 token, went out to the actively licensed physicians living in a rural Colorado area according to the Rural/Urban Commuting Area (RUCA) codes[1]. The survey forms were mailed to the contact address in each licensee's file at the Colorado Department of Regulatory Agencies (DORA). This address may have been the physician's home or practice location.

On June 8, 2009, a postcard was mailed either reminding the physicians to fill out the survey or thanking them if they already sent it back. The fourth mailing, sent on June 22, 2009, consisted of a cover letter, a second questionnaire and a self-addressed stamped envelope [See Appendix C for cover letters and postcards].

### Response rate
CHI received survey responses from 523 physicians during the first mailing of questionnaires which ended on June 25, 2009. The second questionnaire mailing yielded an additional 188 completed surveys. In total, CHI received survey responses from 711 or 56 percent of those who were mailed a survey form. The following table shows the final survey disposition of surveys by response category.

| Final Disposition | Number |
|---|---|
| Surveys mailed to Colorado rural physician population | 1,362 |
| Non-rural | 26 |
| Out of state | 17 |
| Actual population with accurate ZIP Codes | 1,319 |
| Unable to forward | 30 |
| Non-responses | 17 |
| Eligible sample | 1,272 |
| Returned completed questionnaires (2nd wave) | 523 |
| Returned completed questionnaires (4th wave) | 188 |
| Total returned completed questionnaires | 711 |
| Response rate | 55.9% |

Data from the questionnaires returned to CHI were entered into an electronic database (N=711). CHI randomly selected 30 forms for data entry reliability analysis. Data entry was 99+ percent accurate across all

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[1] Rural-urban commuting area (RUCA) codes are a sub-county measure of urban/rural status based on 2000 Census data and 2004 ZIP Codes; they are more specific than county-based definitions of rural and therefore more accurately classify intra-county rural and urban areas. For more information on RUCA codes, refer to http://depts.washington.edu/uwruca/index.html.

survey variables entered. Data verification and cleaning were conducted with a series of quality checks to ensure data completeness and adherence to formatting protocols [See Appendix A for Data Cleaning Business Rules].

## Weighting up to the population

This survey was conducted to yield information about physicians holding an active license and practicing in rural Colorado as of May 2009. A survey form was mailed to all licensed Colorado physicians with a contact address in rural Colorado (N=1,362). The data file includes variable counts for valid respondents only (N=711).

Strata based on gender and age were used to develop the survey weight variable and adjust for non-response bias. The weight variable must be applied to all descriptive and inferential statistics calculated from the rural physician survey data in order to correctly apportion the sample population to the overall rural physician population in Colorado. [See Appendix B for strata information].

## PUBLIC USE DATA FILE

This codebook specifies the variables contained in the 2009 CHI Colorado Rural Physician Workforce Survey public use file (PUF). The file contains 711 records, one for each respondent, and includes a weight variable. The PUF contains 134 variables. [See the list of variables on p.13-16 for the variables contained in the PUF].

The PUF is available for anyone to analyze. To minimize any risk of indirect identification and ensure confidentiality of survey respondents, sub-state geographic identifiers such as county, city and ZIP Code, and other sensitive variables such as graduation year, are removed or rolled up into categorical variables. Users of the PUF must fill out a registration form.

All users of the data must include the following citation in any public release of the data or its subsequent analysis: "Source: The 2009 Rural Physician Workforce Survey, Colorado Health Institute."

In addition, CHI requests that interested individuals and organizations using the database share their analysis and findings with CHI by contacting Christine Demont-Heinrich at 720.382.7093, or by e-mail at demont-heinrichc@coloradohealthinstitute.org.

## Technical information

The PUF is released as SAS, comma-delimited, Excel and SPSS files. In addition, a response summary by strata is provided in Appendix B.

## Codebook structure

The codebook lists variable labels in the order in which they appear on the questionnaire. Each variable includes a name, description and any appropriate technical notes. The last 6 variables in the codebook were created from survey questions and re-coded to protect the confidentiality of survey respondents.

For each variable, an unweighted and weighted frequency is provided. The unweighted sum for each variable totals 711, that is, the number of survey respondents. The weighted sum is 1,319, the number of actively licensed physicians living or practicing in rural Colorado [Because of rounding, totals in the weighted frequency tables do not always equal 1,319].

Four different values are used to indicate the type of missing value. A -6 indicates an invalid answer such as marking more than one item when only one was supposed to be marked or a value that is not possible (e.g., working more than 168 hours per week). A value of -7 indicates that a respondent answered a question when they weren't supposed to (as part of a skip pattern). A value of -8 indicates a blank value that is supposed to be blank (respondent successfully followed instructions regarding a skip pattern). Finally, a value of -9 indicates a blank value when information should have been provided. A value of -6 is usually retained if it is within a skip pattern so that it takes precedence over a -7.

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# 2009 RURAL PHYSICIAN SURVEY

**Survey #** __ __ __ __

**To complete form online…**Open your Internet browser and type: http://www.coloradohealthinstitute.org/MD2009.html→
Complete the questionnaire online→ Click "submit" button when you are finished so your name will be taken off the mailing list.

The Colorado Health Institute is conducting this survey on behalf of the Rural Health Track of the University of Colorado Denver School of Medicine Rural Track, the Colorado Medical Society, the Colorado Rural Health Center, COPIC Companies, Colorado Area Health Education Centers and the HRSA Denver Region 8 Office. This survey is voluntary. Your answers are confidential. Please complete the form online or return the completed questionnaire in the envelope provided. Thank you for your assistance in this important survey about rural physicians. If you have any questions, please contact Michael Boyson, MHA, at 303.831.4200 x 207 or by e-mail at boysonm@coloradohealthinstitute.org.

## YOUR OPINION

1. **How important do you think the following policy options would be to improving access to health care in Colorado?** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE N/A IF YOU BELIEVE IT DOES NOT APPLY.]

| | Very Important | | | | Not Important | |
|---|---|---|---|---|---|---|
| Increase Medicaid reimbursement | 1 | 2 | 3 | 4 | 5 | N/A |
| Cover more uninsured by expanding Medicaid eligibility for adults and children | 1 | 2 | 3 | 4 | 5 | N/A |
| Establish a single-payer system for all Colorado residents | 1 | 2 | 3 | 4 | 5 | N/A |
| Waive liability insurance for physicians who volunteer in "safety net" clinics serving the uninsured or Medicaid patients | 1 | 2 | 3 | 4 | 5 | N/A |
| Provide loan forgiveness for primary care physicians practicing in an underserved area | 1 | 2 | 3 | 4 | 5 | N/A |

## ABOUT YOU

2. **Which of the following best describes your current professional status?** [MARK ONE BOX ONLY]
   ☐ Full-time physician actively seeing patients or having patient care consultations (30 hours or more per week working in clinical medicine)
   ☐ Part-time physician actively seeing patients or having patient care consultations (fewer than 30 hours per week working in clinical medicine)
   ☐ Volunteer physician seeing patients but not billing for services
   ☐ Active in medicine-related activities (e.g., teaching, public health, administration, research, etc.) but not seeing patients → STOP HERE AND RETURN YOUR QUESTIONNAIRE
   ☐ Retired, not seeing patients → STOP HERE AND RETURN YOUR QUESTIONNAIRE
   ☐ Practicing in another state → STOP HERE AND RETURN YOUR QUESTIONNAIRE
   ☐ Working outside of medicine → STOP HERE AND RETURN YOUR QUESTIONNAIRE
   ☐ Other (please specify) _____

3. **Which medical degree have you completed?**
   ☐ DO
   ☐ MD

**4. What is your primary specialty?** [MARK ONE BOX]

- ☐ Anesthesia
- ☐ Dermatology
- ☐ Emergency Medicine
- ☐ Family Medicine
- ☐ Gastroenterology
- ☐ General Pediatrics
- ☐ Gynecology

- ☐ Internal Medicine
- ☐ Obstetrics and Gynecology
- ☐ Ophthalmology
- ☐ Otolaryngology
- ☐ Pathology
- ☐ Physical/Rehabilitation Medicine
- ☐ Psychiatry

- ☐ Pulmonary Disease
- ☐ Radiology
- ☐ Surgery: General
- ☐ Surgery: Orthopedic
- ☐ Surgery: Plastic/Cosmetic
- ☐ Urology
- ☐ Other

(specify)_____

**5. How many continuing medical education (CME) hours did you earn in 2008?**
___ ___ hours

**6. Thinking about your personal and professional life as a rural physician, how satisfied are you with the following aspects of living and working in rural Colorado?** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE N/A IF IT DOES NOT APPLY.]

|  | Very Satisfied |  |  |  | Not at all Satisfied |  |
|---|---|---|---|---|---|---|
| The balance between personal and professional responsibilities | 1 | 2 | 3 | 4 | 5 | N/A |
| The number of hours worked per week | 1 | 2 | 3 | 4 | 5 | N/A |
| The malpractice environment in rural Colorado | 1 | 2 | 3 | 4 | 5 | N/A |
| The community in which you have chosen to live and practice | 1 | 2 | 3 | 4 | 5 | N/A |
| Your ability to provide quality care | 1 | 2 | 3 | 4 | 5 | N/A |
| Your ability to obtain referrals for your patients | 1 | 2 | 3 | 4 | 5 | N/A |
| The administrative tasks associated with managing a practice | 1 | 2 | 3 | 4 | 5 | N/A |
| The overhead (costs) of maintaining a rural practice | 1 | 2 | 3 | 4 | 5 | N/A |
| Your net income as a physician | 1 | 2 | 3 | 4 | 5 | N/A |
| The balance between clinical and administrative hours worked | 1 | 2 | 3 | 4 | 5 | N/A |

**7. What is your gender?**
- ☐ Male
- ☐ Female

**8. In what year were you born?** 19___ ___

**9. Which of the following best describes the area in which you grew up?** [MARK ONE BOX]
- ☐ Rural
- ☐ Suburban
- ☐ Urban

**10. What is your race/ethnicity?** [PLEASE MARK ONE BOX THAT MOST CLOSELY REPRESENTS YOUR ETHNIC/RACIAL BACKGROUND]

☐ Mixed Heritage
☐ African American
☐ White Hispanic
☐ Non-White Hispanic
☐ White
☐ Native American
☐ Asian/Pacific Islander
☐ Alaskan Native

**11. Which of the following factors were important in your choice to practice rural medicine?** [MARK ONE BOX FOR EACH FACTOR]

| Very Important | Somewhat Important | Not Important | Factor |
|---|---|---|---|
| ☐ | ☐ | ☐ | Grew up in a rural area |
| ☐ | ☐ | ☐ | Cost of living |
| ☐ | ☐ | ☐ | Recreational/leisure activities |
| ☐ | ☐ | ☐ | Opportunity to serve a particular population |
| ☐ | ☐ | ☐ | Recruited by colleagues |
| ☐ | ☐ | ☐ | Able to find job for spouse/partner |
| ☐ | ☐ | ☐ | Earnings potential |
| ☐ | ☐ | ☐ | Recruitment incentives |
| ☐ | ☐ | ☐ | Opportunity for professional independence |
| ☐ | ☐ | ☐ | Work environment/work hours per week |
| ☐ | ☐ | ☐ | Bought practice/became partner |
| ☐ | ☐ | ☐ | Spouse/partner came from rural area |
| ☐ | ☐ | ☐ | Rural location of internship, fellowship or residency |
| ☐ | ☐ | ☐ | Served in the National Services Corp |
| ☐ | ☐ | ☐ | Was granted a J-1 Visa Waiver |
| ☐ | ☐ | ☐ | Good place to raise children |
| ☐ | ☐ | ☐ | Want to retire in rural Colorado |
| ☐ | ☐ | ☐ | Other (specify)_____ |

## PRACTICE CHARACTERISTICS

**12. What is the ZIP Code of your medical practice location?** ___ ___ ___ ___ ___ ZIP Code

**13. How long have you practiced at your current location?** [MONTHS = 0 TO 11, YEAR=1 OR MORE]
___ ___ months and ___ ___ years

**14. What incentives, if any, were offered to recruit you to your current practice location?** [MARK YES OR NO FOR EACH INCENTIVE]

**Incentive**

| | | |
|---|---|---|
| ☐ Yes | ☐ No | Loan repayment |
| ☐ Yes | ☐ No | Income guarantee |
| ☐ Yes | ☐ No | Production-based salary |
| ☐ Yes | ☐ No | Signing bonus |
| ☐ Yes | ☐ No | Benefit package including retirement |
| ☐ Yes | ☐ No | Partnership or shareholder opportunity |
| ☐ Yes | ☐ No | Flex schedule |
| ☐ Yes | ☐ No | Limited on-call expectation |
| ☐ Yes | ☐ No | Regular locum tenens support |
| ☐ Yes | ☐ No | Finding spouse/partner employment |
| ☐ Yes | ☐ No | Paying for site visit |
| ☐ Yes | ☐ No | Relocation benefits (e.g. moving expenses, mortgage payment assistance) |
| ☐ Yes | ☐ No | Other (specify)_____ |

**15. What is your employment status at your current practice?** [MARK ONE BOX]

☐ Full owner (or sole proprietor)  ☐ Independent contractor
☐ Part owner (or shareholder)  ☐ Locum tenens
☐ Employee  ☐ Other (specify) _____

**16. Which of the following best describes your current practice location?** [MARK ONE BOX]

☐ Community health clinic  ☐ Military/VA health system or clinic
☐ Federally Qualified Health Center (FQHC)  ☐ Nursing facility/home health agency
☐ Hospital emergency department  ☐ Private clinic or office
☐ Hospital outpatient/satellite clinic  ☐ Public Health Agency
☐ Hospital specialty care (hospitalist/radiology/pathology)  ☐ Rural Health Clinic (RHC)
☐ Indian Health Services (IHS) Clinic
☐ Other (specify)_____

**17. What is the staffing model of your current practice?** [MARK ONE BOX]

☐ Solo practice  ☐ Solo practice with non-physician provider(s)
☐ Partnership (2 physicians)  ☐ Partnership (2 physicians) with non-physician provider(s)
☐ Group practice (3+ physicians)  ☐ Group practice (3+ physicians) with non-physician provider(s)

**18. In 2008, approximately how many patient visits occurred at your current medical practice?**
[PLEASE ENTER YOUR BEST ESTIMATE, THIS SHOULD INCLUDE OFFICE-BASED AND OTHER PATIENT ENCOUNTERS ]

_____ patient visits  ☐ N/A

**19. In a typical week, how much professional time do you spend at your current medical practice?**
(INCLUDE DIRECT PATIENT CARE, TEACHING, ADMINISTRATION AND OTHER PROFESSIONAL ACTIVITIES)

**Average number of total professional hours**  ___ ___ hours per week

**Average number of hours spent in direct patient care**  ___ ___ hours per week

**20. In a typical <u>month</u>, how many calendar days are you normally on call?** [MARK 0 IF NONE]
____ ____ days

**21. Do you face any of the following obstacles in securing specialist visits for your patients?** [MARK <u>YES</u> OR <u>NO</u> FOR EACH OBSTACLE]

| | | **Obstacle** |
|---|---|---|
| ☐ Yes | ☐ No | Insufficient reimbursement |
| ☐ Yes | ☐ No | Patient compliance |
| ☐ Yes | ☐ No | Malpractice |
| ☐ Yes | ☐ No | Insurance benefit restrictions |
| ☐ Yes | ☐ No | Inadequate supply of specialists |

**22. What type of specialist is the most difficult to refer patients to in your community?**
(specify)_____

**23. Which of the following describes the current level of patient access to your medical practice?** [MARK <u>YES</u> OR <u>NO</u> FOR EACH OPTION]

| | | |
|---|---|---|
| ☐ Yes | ☐ No | Practice is open to all new patients |
| ☐ Yes | ☐ No | Practice accepts only family members of current patient |
| ☐ Yes | ☐ No | Practice accepts a limited number of patients on a sliding-fee scale |
| ☐ Yes | ☐ No | Practice accepts a limited number of charity care patients |
| ☐ Yes | ☐ No | Practice is closed to Medicaid adults |
| ☐ Yes | ☐ No | Practice is closed to Medicaid children |
| ☐ Yes | ☐ No | Practice is closed to CHP+ children and pregnant women |
| ☐ Yes | ☐ No | Practice is closed to Medicare patients |
| ☐ Yes | ☐ No | Practice is closed to some private insurers |
| ☐ Yes | ☐ No | Practice is closed to all new patients |

**24. Select the one statement that best describes your opinion of the number of patient visits in your medical practice.** [MARK ONE BOX]

☐ I am satisfied with the number of patient visits in my practice
☐ I have too many patient visits in my practice
☐ I have too few patient visits in my practice
☐ N/A

**25. If you do <u>NOT</u> accept Medicaid reimbursement, please rate the level of importance of the following factors in your decision not to accept Medicaid, otherwise skip to the next question.** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE <u>N/A</u> IF IT DOES NOT APPLY.]

| | Very Important | | | | Not Important | |
|---|---|---|---|---|---|---|
| Reimbursement rates are too low | 1 | 2 | 3 | 4 | 5 | N/A |
| Fear of audits | 1 | 2 | 3 | 4 | 5 | N/A |
| Paperwork is too difficult/time consuming | 1 | 2 | 3 | 4 | 5 | N/A |
| Too many "no-shows" | 1 | 2 | 3 | 4 | 5 | N/A |
| Other (specify) _____ | 1 | 2 | 3 | 4 | 5 | N/A |

**26. Estimate the approximate dollar amount of charity care you, individually, provided in 2008 in your medical practice.** (Charity care can be visits that are uncompensated, free medical services provided in alternative setting or non-monetary payments. Do not include bad debt) [MARK ONE BOX.]

☐ None                    ☐ $5,001to $10,000        ☐ $35,001 to $50,000
☐ $2,500 or less          ☐ $10,001 to $25,000      ☐ More than $50,000
☐ $2,501 to $5,000        ☐ $25,001 to $35,000      ☐ Do not know
                                                     ☐ N/A

**27. Please estimate the current payer mix in your medical practice.** [PERCENTS SHOULD ADD UP TO 100%]

_____% Commercial insurance
_____% Medicare
_____% Medicaid
_____% CHP+
_____% TriCare/CHAMPUS/VA
_____% Worker's Compensation
_____% Self-pay and sliding fee schedule
_____% Other (specify) _____
100% TOTAL PATIENTS

**28. What category most closely approximates your total personal income before taxes in 2008 generated from your medical practice?** [MARK ONE BOX]

☐ $75,000 or less         ☐ $125,001 to $150,000    ☐ $200,001 to $250,000
☐ $75,001 to $100,000     ☐ $150,001 to $175,000    ☐ More than $250,000
☐ $100,001 to $125,000    ☐ $175,001 to $200,000

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**THIS SET OF QUESTIONS IS ABOUT YOUR MEDICAL SCHOOL AND RESIDENCY EXPERIENCE**

**29. When you started medical school, how interested were you in the following?** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE N/A IF IT DOES NOT APPLY.]

|  | Very Interested | | | | Not Interested | |
|---|---|---|---|---|---|---|
| Choosing a primary care specialty (family medicine, internal medicine or pediatrics) | 1 | 2 | 3 | 4 | 5 | N/A |
| A rural medical practice | 1 | 2 | 3 | 4 | 5 | N/A |
| A medical practice in an underserved area | 1 | 2 | 3 | 4 | 5 | N/A |
| A medical practice for an underserved population | 1 | 2 | 3 | 4 | 5 | N/A |
| Living in a rural community | 1 | 2 | 3 | 4 | 5 | N/A |

**30. How many months during medical school did you spend training in rural area?** [MARK 0 FOR NONE]
____ ____ month(s)

**31. In what year did you graduate from medical school?** [YYYY] ____ ____ ____ ____

**32. In what state did you graduate from medical school?** [ENTER TWO-LETTER STATE CODE OR "XX" FOR INTERNATIONAL MEDICAL GRADUATE]
____ ____ State abbreviation

**33. Please rate the adequacy of the <u>CLASSROOM</u> instruction you received during medical school in preparing you to provide primary care to special populations.** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE N/A IF IT DOES NOT APPLY.]

| | Most Adequate | | | Inadequate | | |
|---|---|---|---|---|---|---|
| Maternity care including prenatal, delivery and postnatal care | 1 | 2 | 3 | 4 | 5 | N/A |
| Orthopedics and sports medicine, including basic fracture care | 1 | 2 | 3 | 4 | 5 | N/A |
| Surgery including pre- and post-operative care and procedural skills including ultrasound and endoscopy | 1 | 2 | 3 | 4 | 5 | N/A |
| Trauma and other emergency care (including training in ACLS, ATLS, NRP, PALS and ALSO) | 1 | 2 | 3 | 4 | 5 | N/A |
| Critical care | 1 | 2 | 3 | 4 | 5 | N/A |
| Occupational health and safety including injuries resulting from recreation, agriculture, mining or forestry-related accidents | 1 | 2 | 3 | 4 | 5 | N/A |
| Behavioral health (treating mental illness and substance abuse) | 1 | 2 | 3 | 4 | 5 | N/A |
| Working with patients who have physical and cognitive impairments | 1 | 2 | 3 | 4 | 5 | N/A |
| Telemedicine and the use of health information technology such as electronic medical records and practice management systems | 1 | 2 | 3 | 4 | 5 | N/A |
| Working in practice teams with physician assistants, nurse midwives and other advanced practice nurses such as nurse practitioners | 1 | 2 | 3 | 4 | 5 | N/A |
| Geriatric care | 1 | 2 | 3 | 4 | 5 | N/A |

**34. Please rate the adequacy of your <u>RESIDENCY</u> experiences in preparing you to provide primary care to special populations.** [ON A SCALE OF 1-5, CIRCLE THE RELATIVE IMPORTANCE OF EACH FACTOR. CIRCLE <u>N/A</u> IF IT DOES NOT APPLY.]

| | Most Adequate | | | Inadequate | | |
|---|---|---|---|---|---|---|
| Maternity care including prenatal, delivery and postnatal care | 1 | 2 | 3 | 4 | 5 | N/A |
| Orthopedics and sports medicine, including basic fracture care | 1 | 2 | 3 | 4 | 5 | N/A |
| Surgery including pre- and post-operative care and procedural skills including ultrasound and endoscopy | 1 | 2 | 3 | 4 | 5 | N/A |
| Trauma and other emergency care (including training in ACLS, ATLS, NRP, PALS and ALSO) | 1 | 2 | 3 | 4 | 5 | N/A |
| Critical care | 1 | 2 | 3 | 4 | 5 | N/A |
| Occupational health and safety including injuries resulting from recreation, agriculture, mining or forestry-related accidents | 1 | 2 | 3 | 4 | 5 | N/A |
| Behavioral health (treating mental illness and substance abuse) | 1 | 2 | 3 | 4 | 5 | N/A |
| Working with patients who have physical and cognitive impairments | 1 | 2 | 3 | 4 | 5 | N/A |
| Telemedicine and the use of health information technology such as electronic medical records and practice management systems | 1 | 2 | 3 | 4 | 5 | N/A |
| Working in practice teams with physician assistants, nurse midwives and other advanced practice nurses such as nurse practitioners | 1 | 2 | 3 | 4 | 5 | N/A |
| Geriatric care | 1 | 2 | 3 | 4 | 5 | N/A |

**35. How prepared were you to practice rural medicine after your residency?** [ON A SCALE OF 1-5, CIRCLE APPROPRIATE NUMBER. CIRCLE <u>N/A</u> IF IT DOES NOT APPLY.]

| Fully Prepared | | | | Not Prepared | |
|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | N/A |

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### ABOUT MEDICAL CARE ACCESS IN YOUR COMMUNITY

**36. Are you planning to leave your current primary medical practice in the next 12 months?**
☐ Yes      ☐ No → **Skip to Question 38**

**37. If <u>YES</u>, how important are the following factors in your decision to leave your current primary medical practice in the next <u>12 months</u>?** [MARK ONE BOX FOR EACH FACTOR]

| Very Important | Somewhat Important | Not Important | Factor |
|---|---|---|---|
| ☐ | ☐ | ☐ | Retirement |
| ☐ | ☐ | ☐ | Relocation to a different practice location in Colorado |
| ☐ | ☐ | ☐ | Relocation to a different practice location out of state |
| ☐ | ☐ | ☐ | Insufficient patient load to continue to run my practice |
| ☐ | ☐ | ☐ | Professional isolation |
| ☐ | ☐ | ☐ | Cultural isolation |
| ☐ | ☐ | ☐ | Spousal dissatisfaction (e.g., education, work, general) |
| ☐ | ☐ | ☐ | Lack of acceptance by community |
| ☐ | ☐ | ☐ | Practice management too burdensome |
| ☐ | ☐ | ☐ | Over-worked |
| ☐ | ☐ | ☐ | Too many Medicaid patients to make practice sustainable |
| ☐ | ☐ | ☐ | Family responsibilities interfere with my ability to practice |
| ☐ | ☐ | ☐ | Poor health does not permit me to continue my practice |
| ☐ | ☐ | ☐ | Other (specify)_____ |

**38. If proposed physician Medicare cuts are implemented in 2009, which of the following actions, if any, will you take?** [MARK YES OR NO FOR EACH ACTION]

| | | | |
|---|---|---|---|
| Yes | No | N/A | Accept new Medicare patients |
| Yes | No | N/A | Impose limitations on the number of new Medicare patients accepted |
| Yes | No | N/A | Close practice to new Medicare patients |
| Yes | No | N/A | Undecided |
| Yes | No | N/A | My practice does not see Medicare patients |

**39. What is the greatest professional challenge you anticipate facing in the next 12 months?**
_____
_____

Please complete the form online or return the questionnaire in the enclosed self-addressed, stamped envelope. Your responses will help to inform Colorado policymakers about the practice of rural medicine in our state. If you have any questions, please contact Michael Boyson, MHA, at 303.831.4200 x 207 or by e-mail at boysonm@coloradohealthinstitute.org.

**THANK YOU!**

# LIST OF VARIABLES

| QUESTION NUMBER | VARIABLE NAME | DESCRIPTION |
|---|---|---|
| 1 | INCR_MDCD_REIB_GRP | Increase Medicaid reimbursement, important |
| 1 | COVEXP_MDCD_ELG_GRP | Expand Medicaid eligibility for adults and children, important |
| 1 | SING_PYR_CO_GRP | Establish a single-payer system for all Colorado Residents, important |
| 1 | WV_LIAB_VOL_GRP | Waive liability insurance for those that volunteer w/ safety net clinics, important |
| 1 | LOAN_FORGIVE_GRP | Provide loan forgiveness for primary care physicians practicing in an underserved area, important |
| 2 | PROF_STAT_GRP | Current Professional Status grouping |
| 3 | DEGREE | Medical degree completed |
| 4 | SPECIALTY_GRP | Specialty grouping |
| 5 | CNT_MEDED_HRS_GRP | Continuing medical education hours grouping |
| 6 | SATISLF_PERSVSWORK_GRP | Satisfaction:  With balance between personal and professional responsibilities |
| 6 | SATISLF_NUMHRS_GRP | Satisfaction:  The number of hours |
| 6 | SATISF_MALPRAC_GRP | Satisfaction:  Malpractice environment in Colorado |
| 6 | SATISF_QUALCARE_GRP | Satisfaction:  Ability to provide quality care |
| 6 | SATISF_REFERRALS_GRP | Satisfaction:  Ability to obtain referrals for your patients |
| 6 | SATISF_ADMIN_GRP | Satisfaction:  Administrative tasks associated with managing a practice |
| 6 | SATISF_OVRHD_GRP | Satisfaction:  Overhead costs of maintaining a rural practice |
| 6 | SATISF_INCOME_GRP | Satisfaction:  Net income as a physician |
| 6 | SATISF_CLINVSADMIN_GRP | Satisfaction:  Balance between clinical and administrative hours worked |
| 7 | GENDER | Gender |
| 8 | BIRTH_YR_GRP | Birth year group |
| 9 | GREWUP_LOCATION | Location where grew up |
| 10 | RACE_GRP | Race grouping, white vs. non-white |
| 11 | FAC_PRAC_GREWUPRUR | Chose rural medicine:  Grew up in a rural area |
| 11 | FAC_PRAC_COSTLV | Chose rural medicine:  Cost of living |
| 11 | FAC_PRAC_RECR | Chose rural medicine:  Recreational/leisure activities |
| 11 | FAC_PRAC_SRVPOP | Chose rural medicine:  Opportunity to serve a particular population |
| 11 | FAC_PRAC_RECRCOL | Chose rural medicine:  Recruited by colleagues |
| 11 | FAC_PRAC_JOBSPOUSE | Chose rural medicine:  Able to find job for spouse/partner |
| 11 | FAC_PRAC_EARNPOT | Chose rural medicine:  Earnings potential |
| 11 | FAC_PRAC_RCRTINC | Chose rural medicine:  Recruitment incentives |
| 11 | FAC_PRAC_INDEP | Chose rural medicine:  Opportunity for professional independence |
| 11 | FAC_PRAC_WKENV | Chose rural medicine:  Work environment/work hours per week |
| 11 | FAC_PRAC_BOUGHT | Chose rural medicine:  Bought practice/became partner |
| 11 | FAC_PRAC_SP_RUR | Chose rural medicine:  Spouse/partner came from rural area |
| 11 | FAC_PRAC_LOCINT | Chose rural medicine:  Rural location of internship, fellowship or residency |

| QUESTION NUMBER | VARIABLE NAME | DESCRIPTION |
|---|---|---|
| 11 | FAC_PRAC_SVNATCORE | Chose rural medicine: Served in the National Services Corp |
| 11 | FAC_PRAC_RAISECHL | Chose rural medicine: Good place to raise children |
| 11 | FAC_PRAC_RET_RURCO | Chose rural medicine: Want to retire in rural Colorado |
| 13 | PRAC_YR_GRP | Number years practicing at current location grouping |
| 14 | INCOFF_LOANREPAY | Incentives: Loan repayment |
| 14 | INCOFF_INCGUAR | Incentives: Income guarantee |
| 14 | INCOFF_PRB_SAL | Incentives: Production-based salary |
| 14 | INCOFF_SIGNBON | Incentives: Signing bonus |
| 14 | INCOFF_BENRET | Incentives: Benefit package including retirement |
| 14 | INCOFF_PART_SHAR | Incentives: Partnership or shareholder opportunity |
| 14 | INCOFF_FLEX | Incentives: Flex schedule |
| 14 | INCOFF_LIMONCALL | Incentives: Limited on-call expectation |
| 14 | INCOFF_LOCTEN | Incentives: Regular locum tenens support |
| 14 | INCOFF_SPOUSE | Incentives: Finding spouse/partner employment |
| 14 | INCOFF_PAYST | Incentives: Paying for site visit |
| 14 | INCOFF_RELOC | Incentives: Relocation benefits (e.g. moving expenses, mortgage payment assistance) |
| 14 | INCOFF_OTH | Incentives: Other |
| 15 | EMPLSTAT_GRP | Employment Status grouping |
| 16 | PRACLOC_GRP | Practice location grouping |
| 17 | STAFFMODEL_GRP | Staffing model of current practice, grouping |
| 18 | VISITS_2008_GRP | Patient visits at current medical practice grouping |
| 18 | VISITS_NA | Number of patient visits non applicable |
| 19 | HOURS_PROFCR_WK_GRP | Number of total professional hours grouping |
| 19 | HOURS_DIRCARE_WK_GRP | Number of direct patient care hours grouping |
| 20 | MO_DAYSONCALL_GRP | Calendar days on call per month, grouping |
| 21 | OBS_SPEC_REIMB | Specialist Obstacles: Insufficient reimbursement |
| 21 | OBS_SPEC_PATCOMPL | Specialist Obstacles: Patient compliance |
| 21 | OBS_SPEC_MALPRAC | Specialist Obstacles: Malpractice |
| 21 | OBS_SPEC_INSBENREST | Specialist Obstacles: Insurance benefit restrictions |
| 21 | OBS_SPEC_SUPSPEC | Specialist Obstacles: Inadequate supply of specialists |
| 22 | MOSTDIF_SPEC_GRP | Most difficult specialty to refer, grouping |
| 23 | PTACCESS_ALLNEW | Patient access to medical practice: Open to all new patients |
| 23 | PTACCESS_FAMONLY | Patient access to medical practice: Accepts only family members of current practice |
| 23 | PTACCESS_SFS | Patient access to medical practice: Accepts a limited number of pts on SFS |
| 23 | PTACCESS_CHARCR | Patient access to medical practice: Accepts limited number of charity care patients |
| 23 | PTACCESS_CLOSEADMDCD | Patient access to medical practice: Closed to Medicaid adults |
| 23 | PTACCESS_CLOSECHLMDCD | Patient access to medical practice: Closed to Medicaid children |

| QUESTION NUMBER | VARIABLE NAME | DESCRIPTION |
|---|---|---|
| 23 | PTACCESS_CLOSECHP | Patient access to medical practice:  Closed to CHP+ children and pregnant women |
| 23 | PTACCESS_CLOSE_MDCR | Patient access to medical practice:  Closed to Medicare patients |
| 23 | PTACCESS_CLOSE_PRIV | Patient access to medical practice:  Closed to some private insurers |
| 24 | SATISF_NUMPTS | Quantity satisfaction of patient visits |
| 25 | MDCDRSN_AUDITS_GRP | Do not accept Medicaid reason:  Fear of audits, grouping |
| 25 | MDCDRSN_DOCTIME_GRP | Do not accept Medicaid reason:  Paperwork is too difficult/time consuming, grouping |
| 25 | MDCDRSN_NOSHOW_GRP | Do not accept Medicaid reason:  Too many "no-shows", grouping |
| 26 | CHARCARE | Charity care provided in 2008, dollar amount |
| 27 | PAYMIX_COMMINS_GRP | Current payer mix grouping:  Commercial insurance |
| 27 | PAYMIX_MDCR_GRP | Current payer mix grouping:  Medicare |
| 27 | PAYMIX_MDCD_GRP | Current payer mix grouping:  Medicaid |
| 27 | PAYMIX_CHP_GRP | Current payer mix grouping:  CHP+ |
| 27 | PAYMIX_TRI_GRP | Current payer mix grouping:  TriCare/CHAMPUS/VA |
| 27 | PAYMIX_WORKCOMP_GRP | Current payer mix grouping:  Worker's Compensation |
| 27 | PAYMIX_SP_SFS_GRP | Current payer mix grouping:  Self-pay and sliding fee schedule |
| 27 | PAYMIX_OTHER_GRP | Current payer mix grouping:  Other |
| 28 | INCOME | Total personal income before taxes |
| 29 | STRTMS_PRIMSPEC_GRP | Medical school interests (beginning):  Choosing a primary care specialty |
| 29 | STRTMS_RURPRAC_GRP | Medical school interests (beginning):  A rural medical practice |
| 29 | STRTMS_UNDRSVAREA_GRP | Medical school interests (beginning):  A medical practice in an underserved area |
| 29 | STRTMS_UNDRSVPOP_GRP | Medical school interests (beginning):  A medical practice in an underserved population |
| 29 | STRTMS_LIVRURCOM_GRP | Medical school interests (beginning):  Living in a rural community |
| 30 | MDSCHL_MOTRAIN_GRP | Months spent training in rural area in medical school, grouping |
| 31 | GRAD_YEAR_GRP | Year graduated from medical school, grouping |
| 32 | GRAD_STATE_GRP | State graduated from medical school, CO vs. non-CO |
| 33 | CLASS_MATCARE_GRP | Classroom instruction adequacy:  Maternity care |
| 33 | CLASS_ORTHO_SP_GRP | Classroom instruction adequacy:  Orthopedics |
| 33 | CLASS_PREPOSTOP_GRP | Classroom instruction adequacy:  Surgery |
| 33 | CLASS_TRAUMA_GRP | Classroom instruction adequacy:  Trauma and other emergency care |
| 33 | CLASS_CRITCARE_GRP | Classroom instruction adequacy:  Critical care |
| 33 | CLASS_OCCHLTH_GRP | Classroom instruction adequacy:  Occupational Health |
| 33 | CLASS_BEHV_GRP | Classroom instruction adequacy:  Behavioral health |
| 33 | CLASS_PHYCOG_IMP_GRP | Classroom instruction adequacy:  Physical/cognitive impaired patients |
| 33 | CLASS_TELE_ELEC_GRP | Classroom instruction adequacy:  Telemedicine |
| 33 | CLASS_PRACTEAMS_GRP | Classroom instruction adequacy:  Working in practice teams |
| 33 | CLASS_GERIA_CR_GRP | Classroom instruction adequacy:  Geriatric care |
| 34 | RESID_MATCARE_GRP | Residency experience adequacy:  Maternity care |

| QUESTION NUMBER | VARIABLE NAME | DESCRIPTION |
|---|---|---|
| 34 | RESID_ORTHO_GRP | Residency experience adequacy:  Orthopedics |
| 34 | RESID_PREPOSTOP_GRP | Residency experience adequacy:  Surgery |
| 34 | RESID_TRAUMA_GRP | Residency experience adequacy:  Trauma |
| 34 | RESID_CRITCARE_GRP | Residency experience adequacy:  Critical care |
| 34 | RESID_OCCHLTH_GRP | Residency experience adequacy:  Occupational Health |
| 34 | RESID_BEHV_GRP | Residency experience adequacy:  Behavioral health |
| 34 | RESID_PHYCOG_IMP_GRP | Residency experience adequacy:  Physical/cognitive impaired patients |
| 34 | RESID_TELE_ELEC_GRP | Residency experience adequacy:  Telemedicine |
| 34 | RESID_PRACTEAMS_GRP | Residency experience adequacy:  Working in practice teams |
| 34 | RESID_GERIA_CR_GRP | Residency experience adequacy:  Geriatric care |
| 35 | PREPARE_RES_RURMDCN_GRP | Prepared to practice rural medicine after your residency (grouping) |
| 36 | LEAVE_12MO | Planning to leave your current primary medical practice in next 12 months? |
| 38 | CUTS_ACCPT_MDCR | Medicare cuts:  Accept new Medicare patients |
| 38 | CUTS_LIMIT_MDCR | Medicare cuts:  Impose limitations on the number of new Medicare patients |
| 38 | CUTS_CLOSE_MDCR | Medicare cuts:  Close practice to new Medicare patients |
| 38 | CUTS_UNDEC_MDCR | Medicare cuts:  Undecided |
| 38 | CUTS_MDCR_SERVE | Medicare cuts:  Practice does not serve Medicare patients |
| CREATED VARIABLE | PRIMARY_STATE_FROM_ZIP | State from ZIP Code |
| CREATED VARIABLE | RUCA_CLASS_FROM_ZIP | Rural levels based on RUCA codes from ZIP Code |
| CREATED VARIABLE | PRIMARY_URBAN_FROM_ZIP | Rural-Urban from ZIP Code |
| CREATED VARIABLE | AGE_GRP | Age grouping |
| CREATED VARIABLE | GRAD_NUMYRS_GRP | Number of years since graduation grouping |
| CREATED VARIABLE | GRAD_AGE_GRP | Age upon graduation from medical school grouping |

# CODEBOOK AND FREQUENCIES

**QUESTION NUMBER**
1

**VARIABLE NAME**
INCR_MDCD_REIB_GRP

**DESCRIPTION**
Increase Medicaid reimbursement, Important

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 33 | 60 |
| 0 | Indifferent or not important (3,4,5) | 112 | 211 |
| 1 | Important or very important (1,2) | 560 | 1038 |
| 2 | N/A | 6 | 11 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
1

**VARIABLE NAME**
COVEXP_MDCD_ELG_GRP

**DESCRIPTION**
Expand Medicaid eligibility for adults and children, Important

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 38 | 68 |
| -6 | Invalid Answer/Out of Range | 1 | 1 |
| 0 | Indifferent or not important (3,4,5) | 263 | 493 |
| 1 | Important or very important (1,2) | 403 | 746 |
| 2 | N/A | 6 | 10 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**
1

**VARIABLE NAME**
SING_PYR_CO_GRP

**DESCRIPTION**
Establish a single-payer system for all Colorado residents, Important

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|------:|-------------|---------------------:|-------------------:|
| -9 | Missing | 35 | 64 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or not important (3,4,5) | 358 | 677 |
| 1 | Important or very important (1,2) | 292 | 531 |
| 2 | N/A | 25 | 46 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
1

**VARIABLE NAME**
WV_LIAB_VOL_GRP

**DESCRIPTION**
Waive liability insurance for those that volunteer w/ safety net clinics, Important

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|------:|-------------|---------------------:|-------------------:|
| -9 | Missing | 24 | 43 |
| 0 | Indifferent or not important (3,4,5) | 201 | 380 |
| 1 | Important or very important (1,2) | 472 | 870 |
| 2 | N/A | 14 | 26 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
1

**VARIABLE NAME**
LOAN_FORGIVE_GRP

**DESCRIPTION**
Provide loan forgiveness for primary care physicians practicing in an underserved area, Important

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 46 |
| 0 | Indifferent or not important (3,4,5) | 166 | 309 |
| 1 | Important or very important (1,2) | 508 | 944 |
| 2 | N/A | 11 | 19 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**
2

**VARIABLE NAME**
PROF_STAT_GRP

**DESCRIPTION**
Current professional status grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 3 | 6 |
| -6 | Invalid Answer/Out of Range | 9 | 15 |
| 1 | Full-time, actively seeing patients | 426 | 840 |
| 2 | Part-time, actively seeing patients | 120 | 210 |
| 3 | Retired, not seeing patients | 80 | 124 |
| 4 | Other | 73 | 124 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 3

**VARIABLE NAME** DEGREE

**DESCRIPTION** Medical degree completed

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|-------------|----------------------|--------------------|
| -9 | Missing | 17 | 30 |
| -8 | Not Applicable | 101 | 164 |
| -7 | Skip Pattern Violation | 32 | 52 |
| 0 | MD | 502 | 958 |
| 1 | DO | 59 | 114 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER** 4

**VARIABLE NAME** SPECIALTY_GRP

**DESCRIPTION** Primary specialty grouping

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|-------------|----------------------|--------------------|
| -9 | Missing | 7 | 12 |
| -8 | Not Applicable | 122 | 199 |
| -7 | Skip Pattern Violation | 11 | 17 |
| -6 | Invalid Answer/Out of Range | 3 | 6 |
| 1 | Anesthesia | 31 | 63 |
| 2 | Emergency Medicine | 56 | 110 |
| 3 | Family Medicine | 195 | 379 |
| 4 | Internal Medicine | 48 | 91 |
| 5 | Obstetrics and Gynecology | 26 | 49 |
| 6 | General Surgery | 27 | 53 |
| 7 | Other specialty | 185 | 341 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
5

**VARIABLE NAME**
CNT_MEDED_HRS_GRP

**DESCRIPTION**
Continuing medical education hours grouping

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 43 | 81 |
| -8 | Not Applicable | 124 | 202 |
| -7 | Skip Pattern Violation | 9 | 14 |
| 1 | 0-30 hours | 163 | 307 |
| 2 | 31-50 hours | 170 | 325 |
| 3 | 51-70 hours | 77 | 147 |
| 4 | 71 hours or more | 125 | 243 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
6

**VARIABLE NAME**
SATISLF_PERSVSWORK_GRP

**DESCRIPTION**
Satisfaction: With balance between personal and professional responsibilities

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 16 | 28 |
| -8 | Not Applicable | 126 | 205 |
| -7 | Skip Pattern Violation | 7 | 11 |
| 0 | Not satisfied or indifferent (3/4/5) | 223 | 426 |
| 1 | Satisfied (1/2) | 335 | 644 |
| 2 | N/A | 4 | 6 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 6

**VARIABLE NAME** SATISLF_NUMHRS_GRP

**DESCRIPTION** Satisfaction: The number of hours

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 17 | 29 |
| -8 | Not Applicable | 126 | 205 |
| -7 | Skip Pattern Violation | 7 | 11 |
| 0 | Not satisfied or indifferent (3/4/5) | 258 | 496 |
| 1 | Satisfied (1/2) | 300 | 573 |
| 2 | N/A | 3 | 4 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER** 6

**VARIABLE NAME** SATISF_MALPRAC_GRP

**DESCRIPTION** Satisfaction: Malpractice environment in Colorado

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 17 | 30 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 0 | Not satisfied or indifferent (3/4/5) | 275 | 525 |
| 1 | Satisfied (1/2) | 276 | 531 |
| 2 | N/A | 10 | 16 |
| TOTAL | | 711 | 1318 |

**NUMBER**    **VARIABLE NAME**      **DESCRIPTION**
6      SATISF_QUALCARE_GRP      Satisfaction:  Ability to provide quality care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 12 | 20 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Not satisfied or indifferent (3/4/5) | 95 | 178 |
| 1 | Satisfied (1/2) | 468 | 900 |
| 2 | N/A | 2 | 3 |
| TOTAL | | 711 | 1319 |

**QUESTION**

**NUMBER**    **VARIABLE NAME**      **DESCRIPTION**
6      SATISF_REFERRALS_GRP      Satisfaction:  Ability to obtain referrals for your patients

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 13 | 22 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| -6 | Invalid Answer/Out of Range | 1 | 1 |
| 0 | Not satisfied or indifferent (3/4/5) | 241 | 458 |
| 1 | Satisfied (1/2) | 309 | 595 |
| 2 | N/A | 14 | 26 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**  
6

**VARIABLE NAME**  
SATISF_ADMIN_GRP

**DESCRIPTION**  
Satisfaction: Administrative tasks associated with managing a practice

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 11 | 19 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 0 | Not satisfied or indifferent (3/4/5) | 407 | 783 |
| 1 | Satisfied (1/2) | 108 | 207 |
| 2 | N/A | 52 | 94 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**  
6

**VARIABLE NAME**  
SATISF_OVRHD_GRP

**DESCRIPTION**  
Satisfaction: Overhead costs of maintaining a rural practice

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 14 | 25 |
| -8 | Not Applicable | 126 | 205 |
| -7 | Skip Pattern Violation | 7 | 11 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Not satisfied or indifferent (3/4/5) | 393 | 754 |
| 1 | Satisfied (1/2) | 70 | 136 |
| 2 | N/A | 100 | 185 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER** 6  
**VARIABLE NAME** SATISF_INCOME_GRP  
**DESCRIPTION** Satisfaction: Net income as a physician

| TYPE | LENGTH | FORMAT |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 13 | 23 |
| -8 | Not Applicable | 126 | 205 |
| -7 | Skip Pattern Violation | 7 | 11 |
| -6 | Invalid Answer/Out of Range | 1 | 1 |
| 0 | Not satisfied or indifferent (3/4/5) | 356 | 679 |
| 1 | Satisfied (1/2) | 203 | 391 |
| 2 | N/A | 5 | 9 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 6  
**VARIABLE NAME** SATISF_CLINVSADMIN_GRP  
**DESCRIPTION** Satisfaction: Balance between clinical and administrative hours worked

| TYPE | LENGTH | FORMAT |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 16 | 28 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 0 | Not satisfied or indifferent (3/4/5) | 353 | 673 |
| 1 | Satisfied (1/2) | 178 | 348 |
| 2 | N/A | 31 | 53 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**
7

**VARIABLE NAME**
GENDER

**DESCRIPTION**
Gender

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 9 | 16 |
| -8 | Not Applicable | 123 | 201 |
| -7 | Skip Pattern Violation | 10 | 16 |
| 0 | Female | 177 | 320 |
| 1 | Male | 392 | 767 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
8

**VARIABLE NAME**
BIRTH_YR_GRP

**DESCRIPTION**
Birth year group

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 18 | 33 |
| -8 | Not Applicable | 124 | 203 |
| -7 | Skip Pattern Violation | 9 | 14 |
| 1 | 1954 or before | 220 | 371 |
| 2 | 1955 -1964 | 165 | 341 |
| 3 | 1965 or after | 175 | 357 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
9

**VARIABLE NAME**
GREWUP_LOCATION

**DESCRIPTION**
Location where grew up

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 12 | 21 |
| -8 | Not Applicable | 124 | 202 |
| -7 | Skip Pattern Violation | 9 | 14 |
| -6 | Invalid Answer/Out of Range | 7 | 13 |
| 1 | Rural | 221 | 422 |
| 2 | Suburban | 232 | 453 |
| 3 | Urban | 106 | 194 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
10

**VARIABLE NAME**
RACE_GRP

**DESCRIPTION**
Race grouping, white vs. non-white

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 14 | 25 |
| -8 | Not Applicable | 124 | 203 |
| -7 | Skip Pattern Violation | 9 | 14 |
| 0 | Other race | 64 | 124 |
| 1 | White | 500 | 953 |
| TOTAL | | 711 | 1319 |

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 18 | 31 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 102 | 197 |
| 2 | Somewhat Important | 124 | 237 |
| 3 | Not Important | 334 | 637 |
| TOTAL | | 711 | 1318 |

**QUESTION**
**NUMBER**   **VARIABLE NAME**                **DESCRIPTION**
11           FAC_PRAC_COSTLV                 Chose rural medicine:  Cost of living

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 21 | 37 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 38 | 74 |
| 2 | Somewhat Important | 216 | 414 |
| 3 | Not Important | 303 | 577 |
| TOTAL | | 711 | 1318 |

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 14 | 23 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 394 | 759 |
| 2 | Somewhat Important | 133 | 253 |
| 3 | Not Important | 37 | 68 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER**  **VARIABLE NAME**  **DESCRIPTION**
11  FAC_PRAC_SRVPOP  Chose rural medicine:  Opportunity to serve a particular population

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 20 | 34 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 147 | 285 |
| 2 | Somewhat Important | 237 | 451 |
| 3 | Not Important | 174 | 333 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER** 11

**VARIABLE NAME**
FAC_PRAC_RECRCOL

**DESCRIPTION**
Chose rural medicine: Recruited by colleagues

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 22 | 38 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 98 | 188 |
| 2 | Somewhat Important | 129 | 252 |
| 3 | Not Important | 329 | 624 |
| TOTAL | | 711 | 1318 |

**QUESTION
NUMBER** 11

**VARIABLE NAME**
FAC_PRAC_JOBSPOUSE

**DESCRIPTION**
Chose rural medicine: Able to find job for spouse/partner

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 21 | 36 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 90 | 173 |
| 2 | Somewhat Important | 133 | 260 |
| 3 | Not Important | 334 | 634 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
11

**VARIABLE NAME**
FAC_PRAC_EARNPOT

**DESCRIPTION**
Chose rural medicine:  Earnings potential

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 17 | 28 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 71 | 144 |
| 2 | Somewhat Important | 285 | 545 |
| 3 | Not Important | 205 | 385 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**
11

**VARIABLE NAME**
FAC_PRAC_RCRTINC

**DESCRIPTION**
Chose rural medicine:  Recruitment incentives

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 22 | 38 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 44 | 85 |
| 2 | Somewhat Important | 105 | 209 |
| 3 | Not Important | 407 | 771 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
11

**VARIABLE NAME**
FAC_PRAC_INDEP

**DESCRIPTION**
Chose rural medicine: Opportunity for professional independence

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 20 | 36 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | Very Important | 241 | 465 |
| 2 | Somewhat Important | 209 | 398 |
| 3 | Not Important | 107 | 202 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
11

**VARIABLE NAME**
FAC_PRAC_WKENV

**DESCRIPTION**
Chose rural medicine: Work environment/work hours per week

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 18 | 31 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| -6 | Invalid Answer/Out of Range | 2 | 4 |
| 1 | Very Important | 219 | 417 |
| 2 | Somewhat Important | 272 | 527 |
| 3 | Not Important | 67 | 123 |
| TOTAL | | 711 | 1318 |

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 35 | 63 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 1 | Very Important | 72 | 142 |
| 2 | Somewhat Important | 101 | 194 |
| 3 | Not Important | 370 | 703 |
| TOTAL | | 711 | 1318 |

QUESTION
NUMBER          VARIABLE NAME                    DESCRIPTION
11              FAC_PRAC_SP_RUR                  Chose rural medicine:  Spouse/partner came from rural area

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 1 | Very Important | 34 | 64 |
| 2 | Somewhat Important | 79 | 151 |
| 3 | Not Important | 439 | 841 |
| TOTAL | | 711 | 1318 |

**VARIABLE NAME**

FAC_PRAC_LOCINT

**DESCRIPTION**

Chose rural medicine:  Rural location of internship, fellowship or residency

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|-------------|----------------------|---------------------|
| -9 | Missing | 29 | 52 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 1 | Very Important | 24 | 45 |
| 2 | Somewhat Important | 48 | 96 |
| 3 | Not Important | 477 | 910 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**

11

**VARIABLE NAME**

FAC_PRAC_SVNATCORE

**DESCRIPTION**

Chose rural medicine:  Served in the National Services Corp

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|-------------|----------------------|---------------------|
| -9 | Missing | 43 | 77 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 1 | Very Important | 27 | 53 |
| 2 | Somewhat Important | 24 | 46 |
| 3 | Not Important | 484 | 926 |
| TOTAL | | 711 | 1318 |

**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**
11      FAC_PRAC_RAISECHL      Chose rural medicine:  Good place to raise children

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 20 | 35 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 5 | 8 |
| 1 | Very Important | 304 | 591 |
| 2 | Somewhat Important | 121 | 233 |
| 3 | Not Important | 133 | 243 |
| TOTAL | | 711 | 1318 |

**QUESTION**
**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**
11      FAC_PRAC_RET_RURCO      Chose rural medicine:  Want to retire in rural Colorado

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 22 | 39 |
| -8 | Not Applicable | 127 | 207 |
| -7 | Skip Pattern Violation | 6 | 9 |
| 1 | Very Important | 229 | 429 |
| 2 | Somewhat Important | 156 | 302 |
| 3 | Not Important | 171 | 332 |
| TOTAL | | 711 | 1318 |

**VARIABLE NAME**
PRAC_YR_GRP

**DESCRIPTION**
Number of years practiced at current location grouping

| | | | |
|---|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** | |
| Numeric | 8 | Ordinal | |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 41 | 76 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 4 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | 0-3 years | 152 | 291 |
| 2 | 4-7 years | 110 | 216 |
| 3 | 8-13 years | 120 | 236 |
| 4 | 14-22 years | 77 | 146 |
| 5 | 23 years or more | 77 | 135 |
| TOTAL | | 711 | 1318 |

**QUESTION
NUMBER**
14

**VARIABLE NAME**
INCOFF_LOANREPAY

**DESCRIPTION**
Incentives:  Loan repayment

| | | | |
|---|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** | |
| Numeric | 8 | Nominal | |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 28 | 49 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 482 | 917 |
| 1 | Yes | 68 | 136 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
14

**VARIABLE NAME**
INCOFF_INCGUAR

**DESCRIPTION**
Incentives:  Income guarantee

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 24 | 42 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 278 | 524 |
| 1 | Yes | 275 | 535 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
14

**VARIABLE NAME**
INCOFF_PRB_SAL

**DESCRIPTION**
Incentives:  Production-based salary

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 24 | 41 |
| -8 | Not Applicable | 131 | 213 |
| -7 | Skip Pattern Violation | 2 | 3 |
| 0 | No | 393 | 749 |
| 1 | Yes | 161 | 312 |
| TOTAL | | 711 | 1318 |

**QUESTION**
**NUMBER**     **VARIABLE NAME**          **DESCRIPTION**
14             INCOFF_SIGNBON             Incentives:  Signing bonus

**TYPE**                 **LENGTH**              **FORMAT**
Numeric                  8                       Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 45 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 469 | 892 |
| 1 | Yes | 83 | 166 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**     **VARIABLE NAME**          **DESCRIPTION**
14             INCOFF_BENRET              Incentives:  Benefit package including retirement

**TYPE**                 **LENGTH**              **FORMAT**
Numeric                  8                       Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 401 | 761 |
| 1 | Yes | 151 | 297 |
| TOTAL | | 711 | 1321 |

**QUESTION NUMBER** 14

**VARIABLE NAME** INCOFF_PART_SHAR

**DESCRIPTION** Incentives: Partnership or shareholder opportunity

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 25 | 43 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 391 | 746 |
| 1 | Yes | 162 | 314 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 14

**VARIABLE NAME** INCOFF_FLEX

**DESCRIPTION** Incentives: Flex schedule

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 27 | 48 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 378 | 727 |
| 1 | Yes | 173 | 327 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**          **VARIABLE NAME**                    **DESCRIPTION**
14                  INCOFF_LIMONCALL                     Incentives:  Limited on-call expectation

**TYPE**                              **LENGTH**                            **FORMAT**
Numeric                               8                                     Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 27 | 48 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 423 | 817 |
| 1 | Yes | 128 | 238 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**          **VARIABLE NAME**                    **DESCRIPTION**
14                  INCOFF_LOCTEN                        Incentives:  Regular locum tenens support

**TYPE**                              **LENGTH**                            **FORMAT**
Numeric                               8                                     Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 27 | 48 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 515 | 985 |
| 1 | Yes | 36 | 70 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**      **VARIABLE NAME**          **DESCRIPTION**
14              INCOFF_SPOUSE           Incentives:  Finding spouse/partner employment

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 492 | 941 |
| 1 | Yes | 60 | 116 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**      **VARIABLE NAME**          **DESCRIPTION**
14              INCOFF_PAYST           Incentives:  Paying for site visit

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 25 | 44 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 422 | 804 |
| 1 | Yes | 130 | 253 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 14

**VARIABLE NAME** INCOFF_RELOC

**DESCRIPTION** Incentives:  Relocation benefits (e.g. moving expenses, mortgage payment assistance)

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 25 | 43 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 362 | 684 |
| 1 | Yes | 191 | 376 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 14

**VARIABLE NAME** INCOFF_OTH

**DESCRIPTION** Incentives:  Other

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 416 | 792 |
| -8 | Not Applicable | 131 | 213 |
| -7 | Skip Pattern Violation | 2 | 3 |
| 0 | No | 124 | 237 |
| 1 | Yes | 38 | 74 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
15 | EMPLSTAT_GRP | Employment status grouping

**TYPE** | **LENGTH** | **FORMAT**
Numeric | 8 | Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 10 | 16 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 7 | 13 |
| 1 | Full owner | 140 | 269 |
| 2 | Part owner | 126 | 250 |
| 3 | Employee | 188 | 364 |
| 4 | Independent contractor | 79 | 144 |
| 5 | Other/Locum tenens | 29 | 48 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
16 | PRACLOC_GRP | Practice location grouping

**TYPE** | **LENGTH** | **FORMAT**
Numeric | 8 | Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 11 | 19 |
| -8 | Not Applicable | 128 | 208 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 17 | 33 |
| 1 | Community health clinic | 39 | 73 |
| 2 | Hospital emergency department | 53 | 105 |
| 3 | Hospital outpatient/satellite clinic | 55 | 104 |
| 4 | Private clinic or office | 262 | 499 |
| 5 | All other practice locations | 143 | 273 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
STAFFMODEL_GRP

**DESCRIPTION**
Staffing model of current practice, grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 27 | 45 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | Solo practice | 135 | 254 |
| 2 | Solo practice with non-physician provider(s) | 42 | 78 |
| 3 | Partnership (2 physicians) w or w/o non-physician provider | 61 | 117 |
| 4 | Group practice (3+ physicians) | 177 | 347 |
| 5 | Group practice (3+ physicians) with non-physician provider | 135 | 259 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER**
18

**VARIABLE NAME**
VISITS_2008_GRP

**DESCRIPTION**
Patient visits at current medical practice grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 157 | 289 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | 0-1000 visits | 80 | 148 |
| 2 | 1001-3000 visits | 103 | 201 |
| 3 | 3001-5000 visits | 76 | 147 |
| 4 | 5001-11000 visits | 77 | 152 |
| 5 | More than 11000 visits | 84 | 164 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 18

**VARIABLE NAME** VISITS_NA

**DESCRIPTION** Number of patient visits non applicable

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 104 | 195 |
| -8 | Not Applicable | 131 | 213 |
| -7 | Skip Pattern Violation | 2 | 3 |
| 0 | No | 420 | 811 |
| 1 | Yes | 54 | 97 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 19

**VARIABLE NAME** HOURS_PROFCR_WK_GRP

**DESCRIPTION** Number of total professional hours grouping

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 22 | 37 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 36 | 69 |
| 1 | 0-20 hours | 62 | 106 |
| 2 | 21-31 hours | 58 | 109 |
| 3 | 32-39 hours | 39 | 72 |
| 4 | 40-49 hours | 112 | 215 |
| 5 | 50 hours or more | 249 | 494 |
| TOTAL | | 711 | 1318 |

**QUESTION NUMBER**
19

**VARIABLE NAME**
HOURS_DIRCARE_WK_GRP

**DESCRIPTION**
Number of direct patient care hours grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 35 | 62 |
| -8 | Not Applicable | 131 | 213 |
| -7 | Skip Pattern Violation | 2 | 3 |
| -6 | Invalid Answer/Out of Range | 36 | 69 |
| 1 | 0-20 hours | 100 | 177 |
| 2 | 21-31 hours | 107 | 205 |
| 3 | 32-39 hours | 73 | 141 |
| 4 | 40-49 hours | 122 | 240 |
| 5 | 50 hours or more | 105 | 209 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
20

**VARIABLE NAME**
MO_DAYSONCALL_GRP

**DESCRIPTION**
Calendar days on call per month, grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 24 | 42 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 8 | 16 |
| 1 | No days | 129 | 238 |
| 2 | 1-7 days | 145 | 277 |
| 3 | 8-14 days | 142 | 281 |
| 4 | 15-21 days | 55 | 107 |
| 5 | 22 days or more | 75 | 142 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
OBS_SPEC_REIMB

**DESCRIPTION**
Specialist obstacles:  Insufficient reimbursement

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 44 | 83 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 244 | 462 |
| 1 | Yes | 290 | 559 |
| TOTAL | | 711 | 1320 |

**QUESTION
NUMBER**
21

**VARIABLE NAME**
OBS_SPEC_PATCOMPL

**DESCRIPTION**
Specialist obstacles:  Patient compliance

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 41 | 76 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 265 | 501 |
| 1 | Yes | 271 | 524 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER**     **VARIABLE NAME**         **DESCRIPTION**
21            OBS_SPEC_MALPRAC         Specialist obstacles:  Malpractice

**TYPE**                     **LENGTH**                    **FORMAT**
Numeric                 8                           Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 56 | 106 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | No | 444 | 844 |
| 1 | Yes | 78 | 153 |
| TOTAL | | 711 | 1320 |

**QUESTION
NUMBER**     **VARIABLE NAME**         **DESCRIPTION**
21            OBS_SPEC_INSBENREST     Specialist obstacles:  Insurance benefit restrictions

**TYPE**                     **LENGTH**                    **FORMAT**
Numeric                 8                           Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 44 | 82 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 198 | 378 |
| 1 | Yes | 335 | 641 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
OBS_SPEC_SUPSPEC

**DESCRIPTION**
Specialist obstacles:  Inadequate supply of specialists

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 41 | 76 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 203 | 385 |
| 1 | Yes | 334 | 642 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
MOSTDIF_SPEC_GRP

**DESCRIPTION**
Most difficult specialty to refer, grouping

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Character | 50 | Text |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 115 | 213 |
| -8 | Not Applicable | 132 | 215 |
| -7 | Skip Pattern Violation | 1 | 2 |
| NEUROLOGY | NEUROLOGY | 117 | 226 |
| OTHER | OTHER | 295 | 564 |
| PSYCHIATRY | PSYCHIATRY | 51 | 100 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_ALLNEW

**DESCRIPTION**
Patient access to medical practice:  Open to all new patients

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 32 | 55 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 111 | 214 |
| 1 | Yes | 435 | 834 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_FAMONLY

**DESCRIPTION**
Patient access to medical practice:  Accepts only family members of current practice

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 81 | 147 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 446 | 856 |
| 1 | Yes | 51 | 100 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_SFS

**DESCRIPTION**
Patient access to medical practice:  Accepts a limited number of pts on SFS

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 83 | 150 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 387 | 744 |
| 1 | Yes | 108 | 209 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_CHARCR

**DESCRIPTION**
Patient access to medical practice:  Accepts limited number of charity care patients

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 87 | 159 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 325 | 630 |
| 1 | Yes | 166 | 314 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**    **VARIABLE NAME**            **DESCRIPTION**
23          PTACCESS_CLOSEADMDCD       Patient access to medical practice:  Closed to Medicaid adults

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 79 | 143 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 379 | 730 |
| 1 | Yes | 119 | 228 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**    **VARIABLE NAME**            **DESCRIPTION**
23          PTACCESS_CLOSECHLMDCD      Patient access to medical practice:  Closed to Medicaid children

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 91 | 166 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | No | 383 | 739 |
| 1 | Yes | 103 | 196 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_CLOSECHP

**DESCRIPTION**
Patient access to medical practice:  Closed to CHP+ children and pregnant women

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 93 | 171 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 396 | 766 |
| 1 | Yes | 89 | 166 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
23

**VARIABLE NAME**
PTACCESS_CLOSE_MDCR

**DESCRIPTION**
Patient access to medical practice:  Closed to Medicare patients

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 81 | 146 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 441 | 851 |
| 1 | Yes | 56 | 105 |
| TOTAL | | 711 | 1318 |

**VARIABLE NAME**
PTACCESS_CLOSE_PRIV

**DESCRIPTION**
Patient access to medical practice:  Closed to some private insurers

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 79 | 144 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 419 | 807 |
| 1 | Yes | 80 | 152 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER**
24

**VARIABLE NAME**
SATISF_NUMPTS

**DESCRIPTION**
Quantity satisfaction of patient visits

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 13 | 22 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 2 | 4 |
| 1 | I am satisfied with the number of patient visits in my practice | 371 | 712 |
| 2 | I have too many patient visits in my practice | 60 | 116 |
| 3 | I have too few patient visits in my practice | 104 | 200 |
| 4 | N/A | 28 | 50 |
| TOTAL | | 711 | 1321 |

**VARIABLE NAME**
MDCDRSN_AUDITS_GRP

**DESCRIPTION**
Do not accept Medicaid reason:  Fear of audits, grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 404 | 769 |
| -8 | Not Applicable | 132 | 215 |
| -7 | Skip Pattern Violation | 1 | 2 |
| 0 | Indifferent or not important (3,4,5) | 84 | 161 |
| 1 | Important or very important (1,2) | 40 | 77 |
| 2 | N/A | 50 | 95 |
| TOTAL | | 711 | 1319 |

**QUESTION
NUMBER**
25

**VARIABLE NAME**
MDCDRSN_DOCTIME_GRP

**DESCRIPTION**
Do not accept Medicaid reason:  Paperwork is too difficult/time consuming, grouping

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 404 | 769 |
| -8 | Not Applicable | 132 | 215 |
| -7 | Skip Pattern Violation | 1 | 2 |
| 0 | Indifferent or not important (3,4,5) | 36 | 69 |
| 1 | Important or very important (1,2) | 90 | 173 |
| 2 | N/A | 48 | 91 |
| TOTAL | | 711 | 1319 |

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 406 | 773 |
| -8 | Not Applicable | 132 | 215 |
| -7 | Skip Pattern Violation | 1 | 2 |
| 0 | Indifferent or not important (3,4,5) | 55 | 106 |
| 1 | Important or very important (1,2) | 60 | 115 |
| 2 | N/A | 57 | 109 |
| TOTAL | | 711 | 1320 |

QUESTION
NUMBER          VARIABLE NAME                    DESCRIPTION
26              CHARCARE                         Charity care provided in 2008, dollar amount

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 30 | 56 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 4 | 7 |
| 1 | None | 27 | 50 |
| 2 | $2,500 or less | 54 | 97 |
| 3 | $2,501 to $5,000 | 46 | 86 |
| 4 | $5,001 to $10,000 | 51 | 99 |
| 5 | $10,001 to $25,000 | 51 | 101 |
| 6 | $25,001 to $35,000 | 38 | 75 |
| 7 | $35,001 to $50,000 | 38 | 74 |
| 8 | More than $50,000 | 88 | 174 |
| 9 | Do not know | 119 | 226 |
| 10 | N/A | 32 | 59 |
| TOTAL | | 711 | 1321 |

**NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
27 | PAYMIX_COMMINS_GRP | Current payer mix:  Commercial insurance

**TYPE** | **LENGTH** | **FORMAT**
Numeric | 8 | Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0-10 percent | 54 | 100 |
| 2 | 11-20 percent | 55 | 106 |
| 3 | 21-30 percent | 73 | 141 |
| 4 | 31-40 percent | 61 | 120 |
| 5 | 41-50 percent | 48 | 92 |
| 6 | 51-60 percent | 32 | 64 |
| 7 | 61 or more percent | 52 | 97 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
27 | PAYMIX_MDCR_GRP | Current payer mix:  Medicare

**TYPE** | **LENGTH** | **FORMAT**
Numeric | 8 | Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 56 | 102 |
| 2 | 1-10 percent | 68 | 130 |
| 3 | 11-20 percent | 81 | 161 |
| 4 | 21-30 percent | 65 | 126 |
| 5 | 31-40 percent | 52 | 102 |
| 6 | 41 percent or more | 53 | 100 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 27

**VARIABLE NAME** PAYMIX_MDCD_GRP

**DESCRIPTION** Current payer mix: Medicaid

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 71 | 132 |
| 2 | 1-10 percent | 150 | 292 |
| 3 | 11-20 percent | 84 | 165 |
| 4 | 21 percent or more | 70 | 131 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 27

**VARIABLE NAME** PAYMIX_CHP_GRP

**DESCRIPTION** Current payer mix: CHP+

| | TYPE | LENGTH | FORMAT |
|---|---|---|---|
| | Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 195 | 372 |
| 2 | 1-5 percent | 122 | 237 |
| 3 | 6 percent or more | 58 | 111 |
| TOTAL | | 711 | 1319 |

**NUMBER**     **VARIABLE NAME**            **DESCRIPTION**
27                PAYMIX_TRI_GRP            Current payer mix:  TriCare/CHAMPUS/VA

**TYPE**                   **LENGTH**                    **FORMAT**
Numeric               8                        Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 205 | 391 |
| 2 | 1 percent or more | 170 | 329 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**     **VARIABLE NAME**            **DESCRIPTION**
27                PAYMIX_WORKCOMP_GRP            Current payer mix:  Worker's Compensation

**TYPE**                   **LENGTH**                    **FORMAT**
Numeric               8                        Ordinal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 166 | 312 |
| 2 | 1-10 percent | 167 | 324 |
| 3 | 11 percent or more | 42 | 84 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 27

**VARIABLE NAME** PAYMIX_SP_SFS_GRP

**DESCRIPTION** Current payer mix: Self-pay and sliding fee schedule

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|------:|-------------|---------------------:|-------------------:|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 37 | 69 |
| 2 | 1-10 percent | 194 | 374 |
| 3 | 11-20 percent | 91 | 176 |
| 4 | 21 percent or more | 53 | 100 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 27

**VARIABLE NAME** PAYMIX_OTHER_GRP

**DESCRIPTION** Current payer mix: Other

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|------:|-------------|---------------------:|-------------------:|
| -9 | Missing | 117 | 221 |
| -8 | Not Applicable | 133 | 216 |
| -6 | Invalid Answer/Out of Range | 86 | 162 |
| 1 | 0 percent | 337 | 646 |
| 2 | 1 percent or more | 38 | 74 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
INCOME

**DESCRIPTION**
Total personal income before taxes

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 35 | 64 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | $75,000 or less | 75 | 131 |
| 2 | $75,001 to $100,000 | 39 | 68 |
| 3 | $100,001 to $125,000 | 62 | 118 |
| 4 | $125,001 to $150,000 | 84 | 161 |
| 5 | $150,001 to $175,000 | 63 | 124 |
| 6 | $175,001 to $200,000 | 61 | 119 |
| 7 | $200,001 to $250,000 | 71 | 142 |
| 8 | More than $250,000 | 87 | 174 |
| TOTAL | | 711 | 1320 |

**QUESTION
NUMBER**
29

**VARIABLE NAME**
STRTMS_PRIMSPEC_GRP

**DESCRIPTION**
Medical school interests (beginning):  Choosing a primary care specialty

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 16 | 27 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Not interested or indifferent (3/4/5) | 249 | 477 |
| 1 | Very interested, levels 1/2 | 308 | 590 |
| 2 | N/A | 5 | 9 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 29

**VARIABLE NAME** STRTMS_RURPRAC_GRP

**DESCRIPTION** Medical school interests (beginning):  A rural medical practice

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 15 | 25 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Not interested or indifferent (3/4/5) | 312 | 594 |
| 1 | Very interested, levels 1/2 | 241 | 466 |
| 2 | N/A | 10 | 18 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER** 29

**VARIABLE NAME** STRTMS_UNDRSVAREA_GRP

**DESCRIPTION** Medical school interests (beginning):  A medical practice in an underserved area

**TYPE** Numeric

**LENGTH** 8

**FORMAT** Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 14 | 24 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Not interested or indifferent (3/4/5) | 380 | 728 |
| 1 | Very interested, levels 1/2 | 174 | 333 |
| 2 | N/A | 10 | 18 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
29

**VARIABLE NAME**
STRTMS_UNDRSVPOP_GRP

**DESCRIPTION**
Medical school interests (beginning):  A medical practice in an underserved population

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 16 | 28 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Not interested or indifferent (3/4/5) | 385 | 739 |
| 1 | Very interested, levels 1/2 | 167 | 318 |
| 2 | N/A | 10 | 18 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
29

**VARIABLE NAME**
STRTMS_LIVRURCOM_GRP

**DESCRIPTION**
Medical school interests (beginning):  Living in a rural community

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 16 | 27 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Not interested or indifferent (3/4/5) | 292 | 555 |
| 1 | Very interested, levels 1/2 | 262 | 506 |
| 2 | N/A | 8 | 15 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**
30      MDSCHL_MOTRAIN_GRP      Months spent training in rural area in medical school, grouping

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 16 | 28 |
| -8 | Not Applicable | 129 | 210 |
| -6 | Skip Pattern Violation | 4 | 7 |
| 0 | 0 months | 226 | 420 |
| 1 | 1 month | 52 | 101 |
| 2 | 2 months | 71 | 136 |
| 3 | 3 months | 64 | 128 |
| 4 | 4 or more months | 149 | 290 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**
31      GRAD_YEAR_GRP      Year graduated from medical school, grouping

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 13 | 23 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 1 | 1973 or before | 101 | 161 |
| 2 | 1974-1983 | 124 | 231 |
| 3 | 1984-1993 | 161 | 326 |
| 4 | 1994 to present | 178 | 361 |
| TOTAL | | 711 | 1321 |

**VARIABLE NAME**
GRAD_STATE_GRP

**DESCRIPTION**
State graduated from medical school, CO vs. non-CO

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 13 | 22 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 3 | 6 |
| 0 | Did not graduate in CO | 460 | 876 |
| 1 | Did graduate in CO | 102 | 198 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
CLASS_MATCARE_GRP

**DESCRIPTION**
Classroom instruction adequacy:  Maternity care

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 19 | 34 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 2 | 4 |
| 0 | Indifferent or inadequate (3/4/5) | 245 | 474 |
| 1 | Adequate (1/2) | 271 | 513 |
| 2 | N/A | 41 | 77 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER**
33

**VARIABLE NAME**
CLASS_ORTHO_SP_GRP

**DESCRIPTION**
Classroom instruction adequacy:  Orthopedics

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 20 | 36 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 358 | 686 |
| I | Adequate (1/2) | 168 | 323 |
| 2 | N/A | 32 | 58 |
| TOTAL | | 711 | 1320 |

**QUESTION NUMBER**
33

**VARIABLE NAME**
CLASS_PREPOSTOP_GRP

**DESCRIPTION**
Classroom instruction adequacy:  Surgery

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 23 | 42 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | I | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 318 | 607 |
| I | Adequate (1/2) | 200 | 386 |
| 2 | N/A | 36 | 66 |
| TOTAL | | 711 | 1319 |

**NUMBER** **VARIABLE NAME** **DESCRIPTION**
33 CLASS_TRAUMA_GRP Classroom instruction adequacy:  Trauma and other emergency care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 23 | 42 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 303 | 578 |
| 1 | Adequate (1/2) | 213 | 415 |
| 2 | N/A | 38 | 67 |
| TOTAL | | 711 | 1321 |

**QUESTION**
**NUMBER** **VARIABLE NAME** **DESCRIPTION**
33 CLASS_CRITCARE_GRP Classroom instruction adequacy:  Critical care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 38 | 71 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 2 | 3 |
| 0 | Indifferent or inadequate (3/4/5) | 290 | 552 |
| 1 | Adequate (1/2) | 222 | 431 |
| 2 | N/A | 26 | 45 |
| TOTAL | | 711 | 1319 |

**NUMBER**         **VARIABLE NAME**              **DESCRIPTION**
33                 CLASS_OCCHLTH_GRP             Classroom instruction adequacy:  Occupational Health

**TYPE**                        **LENGTH**                      **FORMAT**
Numeric                         8                               Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 20 | 36 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 449 | 861 |
| 1 | Adequate (1/2) | 68 | 132 |
| 2 | N/A | 41 | 74 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**         **VARIABLE NAME**              **DESCRIPTION**
33                 CLASS_BEHV_GRP               Classroom instruction adequacy:  Behavioral health

**TYPE**                        **LENGTH**                      **FORMAT**
Numeric                         8                               Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 21 | 38 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 378 | 720 |
| 1 | Adequate (1/2) | 153 | 298 |
| 2 | N/A | 26 | 47 |
| TOTAL | | 711 | 1320 |

**NUMBER** **VARIABLE NAME** **DESCRIPTION**
33 CLASS_PHYCOG_IMP_GRP Classroom instruction adequacy: Physical/cognitive impaired patients

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 23 | 42 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 439 | 838 |
| 1 | Adequate (1/2) | 91 | 177 |
| 2 | N/A | 24 | 43 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER** **VARIABLE NAME** **DESCRIPTION**
33 CLASS_TELE_ELEC_GRP Classroom instruction adequacy: Telemedicine

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 22 | 40 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 5 | 9 |
| 0 | Indifferent or inadequate (3/4/5) | 365 | 710 |
| 1 | Adequate (1/2) | 37 | 73 |
| 2 | N/A | 149 | 271 |
| TOTAL | | 711 | 1320 |

**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**

33      CLASS_PRACTEAMS_GRP      Classroom instruction adequacy: Working in practice teams

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 25 | 45 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 369 | 715 |
| 1 | Adequate (1/2) | 94 | 183 |
| 2 | N/A | 90 | 160 |
| TOTAL | | 711 | 1320 |

**QUESTION**

**NUMBER**      **VARIABLE NAME**      **DESCRIPTION**

33      CLASS_GERIA_CR_GRP      Classroom instruction adequacy: Geriatric care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 24 | 43 |
| -8 | Not Applicable | 130 | 211 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | Indifferent or inadequate (3/4/5) | 377 | 723 |
| 1 | Adequate (1/2) | 141 | 273 |
| 2 | N/A | 36 | 64 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
RESID_MATCARE_GRP

**DESCRIPTION**
Residency experience adequacy:  Maternity care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 96 | 187 |
| 1 | Adequate (1/2) | 287 | 554 |
| 2 | N/A | 169 | 316 |
| TOTAL | | 711 | 1320 |

**QUESTION
NUMBER**
34

**VARIABLE NAME**
RESID_ORTHO_GRP

**DESCRIPTION**
Residency experience adequacy:  Orthopedics

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 28 | 51 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 153 | 289 |
| 1 | Adequate (1/2) | 282 | 554 |
| 2 | N/A | 115 | 209 |
| TOTAL | | 711 | 1320 |

**NUMBER**     **VARIABLE NAME**          **DESCRIPTION**
34            RESID_PREPOSTOP_GRP       Residency experience adequacy:  Surgery

| | | |
|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** |
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 25 | 44 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 153 | 294 |
| 1 | Adequate (1/2) | 302 | 586 |
| 2 | N/A | 98 | 179 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**     **VARIABLE NAME**          **DESCRIPTION**
34            RESID_TRAUMA_GRP         Residency experience adequacy:  Trauma

| | | |
|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** |
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 126 | 237 |
| 1 | Adequate (1/2) | 352 | 689 |
| 2 | N/A | 73 | 128 |
| TOTAL | | 711 | 1319 |

QUESTION
NUMBER     VARIABLE NAME     DESCRIPTION
34     RESID_CRITCARE_GRP     Residency experience adequacy:  Critical care

**QUESTION**
**NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
34 | RESID_CRITCARE_GRP | Residency experience adequacy:  Critical care

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|------------|----------------------|--------------------|
| -9 | Missing | 33 | 60 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 2 | 3 |
| 0 | Indifferent or inadequate (3/4/5) | 119 | 226 |
| 1 | Adequate (1/2) | 363 | 705 |
| 2 | N/A | 61 | 109 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER** | **VARIABLE NAME** | **DESCRIPTION**
34 | RESID_OCCHLTH_GRP | Residency experience adequacy:  Occupational Health

| TYPE | LENGTH | FORMAT |
|------|--------|--------|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|-------|------------|----------------------|--------------------|
| -9 | Missing | 25 | 44 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 325 | 626 |
| 1 | Adequate (1/2) | 120 | 238 |
| 2 | N/A | 107 | 192 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**   **VARIABLE NAME**   **DESCRIPTION**
34           RESID_BEHV_GRP      Residency experience adequacy:  Behavioral health

**TYPE**      **LENGTH**     **FORMAT**
Numeric       8              Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 25 | 45 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 278 | 536 |
| 1 | Adequate (1/2) | 174 | 338 |
| 2 | N/A | 100 | 182 |
| TOTAL | | 711 | 1320 |

**QUESTION**
**NUMBER**   **VARIABLE NAME**        **DESCRIPTION**
34           RESID_PHYCOG_IMP_GRP     Residency experience adequacy:  Physical/cognitive impaired patients

**TYPE**      **LENGTH**     **FORMAT**
Numeric       8              Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 26 | 46 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 325 | 629 |
| 1 | Adequate (1/2) | 152 | 295 |
| 2 | N/A | 75 | 133 |
| TOTAL | | 711 | 1320 |

**NUMBER**    **VARIABLE NAME**          **DESCRIPTION**
34        RESID_TELE_ELEC_GRP          Residency experience adequacy:  Telemedicine

**TYPE**          **LENGTH**          **FORMAT**
Numeric        8          Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 24 | 42 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 2 |
| 0 | Indifferent or inadequate (3/4/5) | 311 | 606 |
| 1 | Adequate (1/2) | 82 | 165 |
| 2 | N/A | 160 | 287 |
| TOTAL | | 711 | 1319 |

**QUESTION**
**NUMBER**    **VARIABLE NAME**          **DESCRIPTION**
34        RESID_PRACTEAMS_GRP          Residency experience adequacy:  Working in practice teams

**TYPE**          **LENGTH**          **FORMAT**
Numeric        8          Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---:|---|---:|---:|
| -9 | Missing | 29 | 51 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 268 | 515 |
| 1 | Adequate (1/2) | 188 | 371 |
| 2 | N/A | 93 | 165 |
| TOTAL | | 711 | 1319 |

**VARIABLE NAME**
RESID_GERIA_CR_GRP

**DESCRIPTION**
Residency experience adequacy:  Geriatric care

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 27 | 48 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| 0 | Indifferent or inadequate (3/4/5) | 220 | 421 |
| 1 | Adequate (1/2) | 251 | 491 |
| 2 | N/A | 80 | 143 |
| TOTAL | | 711 | 1320 |

QUESTION
NUMBER
35

**VARIABLE NAME**
PREPARE_RES_RURMDCN_GRP

**DESCRIPTION**
Prepared to practice rural medicine after your residency (grouping)

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 25 | 44 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 1 | 1 |
| 0 | Not prepared or indifferent (3/4/5) | 199 | 375 |
| 1 | Prepared, (1/2) | 333 | 649 |
| 2 | N/A | 20 | 34 |
| TOTAL | | 711 | 1320 |

**VARIABLE NAME**
LEAVE_12MO

**DESCRIPTION**
Planning to leave your current primary medical practice in next 12 months?

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 28 | 49 |
| -8 | Not Applicable | 129 | 210 |
| -7 | Skip Pattern Violation | 4 | 7 |
| -6 | Invalid Answer/Out of Range | 2 | 4 |
| 0 | No | 468 | 903 |
| 1 | Yes | 80 | 147 |
| TOTAL | | 711 | 1320 |

**QUESTION
NUMBER**
38

**VARIABLE NAME**
CUTS_ACCPT_MDCR

**DESCRIPTION**
Medicare cuts:  Accept new Medicare patients

**TYPE**
Numeric

**LENGTH**
8

**FORMAT**
Nominal

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 110 | 208 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 131 | 258 |
| 1 | Yes | 209 | 401 |
| 2 | N/A | 128 | 235 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 38

**VARIABLE NAME** CUTS_LIMIT_MDCR

**DESCRIPTION** Medicare cuts: Impose limitations on the number of new Medicare patients

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 99 | 186 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 162 | 308 |
| 1 | Yes | 180 | 356 |
| 2 | N/A | 137 | 252 |
| TOTAL | | 711 | 1319 |

**QUESTION NUMBER** 38

**VARIABLE NAME** CUTS_CLOSE_MDCR

**DESCRIPTION** Medicare cuts: Close practice to new Medicare patients

| | **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|---|
| | Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 105 | 198 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| 0 | No | 229 | 440 |
| 1 | Yes | 113 | 223 |
| 2 | N/A | 131 | 242 |
| TOTAL | | 711 | 1320 |

**NUMBER** 38     **VARIABLE NAME** CUTS_UNDEC_MDCR     **DESCRIPTION** Medicare cuts: Undecided

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 149 | 282 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 3 | 5 |
| 0 | No | 83 | 160 |
| 1 | Yes | 106 | 208 |
| 2 | N/A | 237 | 447 |
| TOTAL | | 711 | 1319 |

**QUESTION**

**NUMBER** 38     **VARIABLE NAME** CUTS_MDCR_SERVE     **DESCRIPTION** Medicare cuts: Practice does not serve Medicare patients

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 176 | 338 |
| -8 | Not Applicable | 130 | 212 |
| -7 | Skip Pattern Violation | 3 | 5 |
| -6 | Invalid Answer/Out of Range | 3 | 6 |
| 0 | No | 95 | 183 |
| 1 | Yes | 34 | 63 |
| 2 | N/A | 270 | 514 |
| TOTAL | | 711 | 1321 |

# Created variables

**CREATED VARIABLE**

| | | |
|---|---|---|
| **VARIABLE NAME**<br>PRIMARY_STATE_FROM_ZIP | **DESCRIPTION**<br>State from ZIP Code | |

| **TYPE**<br>Character | **LENGTH**<br>2 | **FORMAT**<br>Nominal |
|---|---|---|

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 156 | 255 |
| CO | Colorado | 555 | 1064 |
| TOTAL | | 711 | 1319 |

**CREATED VARIABLE**

| | | |
|---|---|---|
| **VARIABLE NAME**<br>RUCA_CLASS_FROM_ZIP | **DESCRIPTION**<br>Rural levels based on RUCA codes from ZIP Code | |

| **TYPE**<br>Numeric | **LENGTH**<br>8 | **FORMAT**<br>Nominal |
|---|---|---|

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 156 | 255 |
| 1 | Isolated | 83 | 163 |
| 2 | Rural Small | 247 | 468 |
| 3 | Rural Large | 225 | 433 |
| TOTAL | | 711 | 1319 |

**CREATED VARIABLE**

| | |
|---|---|
| **VARIABLE NAME** | **DESCRIPTION** |
| PRIMARY_URBAN_FROM_ZIP | Rural-Urban from ZIP Code |

| | | |
|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** |
| Numeric | 8 | Nominal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 156 | 255 |
| 0 | Rural | 555 | 1064 |
| TOTAL | | 711 | 1319 |

**CREATED VARIABLE**

| | |
|---|---|
| **VARIABLE NAME** | **DESCRIPTION** |
| AGE_GRP | Age grouping |

| | | |
|---|---|---|
| **TYPE** | **LENGTH** | **FORMAT** |
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 151 | 250 |
| 1 | 0-44 | 175 | 357 |
| 2 | 45-54 | 165 | 341 |
| 3 | 55 and older | 220 | 371 |
| TOTAL | | 711 | 1319 |

**CREATED**
**VARIABLE**

| | | |
|---|---|---|
| **VARIABLE NAME** | | **DESCRIPTION** |
| GRAD_NUMYRS_GRP | | Number of years since graduation grouping |

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 147 | 241 |
| 1 | 0-15 years | 178 | 361 |
| 2 | 16-25 years | 161 | 326 |
| 3 | 26-35 years | 124 | 231 |
| 4 | 36 or more | 101 | 161 |
| TOTAL | | 711 | 1320 |

**CREATED**
**VARIABLE**

| | | |
|---|---|---|
| **VARIABLE NAME** | | **DESCRIPTION** |
| GRAD_AGE_GRP | | Age upon graduation from medical school grouping |

| **TYPE** | **LENGTH** | **FORMAT** |
|---|---|---|
| Numeric | 8 | Ordinal |

| VALUE | VALUE LABEL | UNWEIGHTED FREQUENCY | WEIGHTED FREQUENCY |
|---|---|---|---|
| -9 | Missing | 158 | 262 |
| 1 | 0-25 years old | 68 | 123 |
| 2 | 26-35 years old | 451 | 871 |
| 3 | 36 and older | 34 | 63 |
| TOTAL | | 711 | 1319 |

The Colorado Health Institute (CHI) used the following business rules to edit data obtained from the 2009 Colorado Rural Physician Workforce Survey.

For more information, contact Glenn Goodrich at 720.382.7095 or goodrichg@ColoradoHealthInstitute.org.

General Rules:

1. Terminology- Unless otherwise stated, "-6" refers to an Invalid Answer/Out of Range; "-7" refers to the respondent answering a question that should have been skipped; "-8" means the question is missing due to a skip pattern; and "-9" means the respondent did not answer the question.
2. Case exclusions- If the medical practice location ZIP Code (Q12) was out of state (non-Colorado), the case was excluded. If the medical practice location ZIP Code was located in an urban area according to the RUCA codes, the case was also excluded.
3. Calculated variables- When the value was missing, regardless of the reason, all created variables were set to -9 (includes missing due to blank responses as well as invalid or inconsistent responses). This rule applied to such variables as age, graduation age and number of years since graduation.
4. Contradictory answers within an item- If more than one item was marked for items with strictly one option, the variable was coded as -6; if nothing was marked, the resulting variable was coded as -9. This rule applied to Q2, Q3, Q4, Q7, Q9, Q10, Q11, Q15, Q16, Q17, Q24, Q26, Q28,Q36, and Q37.
5. For items with a series of yes/no questions- if respondent marked both "yes" and "no" on any sub-portion, the particular portion where this occurred was recoded as -6.  This rule applied to Q14, Q21 and Q23.

Question-Specific Rules:
1. (Q2) If out of state was listed in the description, the other item as well as the description was removed and the item was re-coded to the 6th option (practicing in another state).
2. (Q2) If more than one item was marked, then the answer was coded to a -6. If options 4, 5, 6 or 7 were marked, then any subsequent questions answered were coded to -7. Subsequent questions not answered were coded to -8 as well. If "Other" was not checked but a description was given, the answer was reset to -9.
3. (Q4) If specialty has a description, but none of the boxes were checked, then the other box is coded in the data.  If any (one) box is checked in Q4, but not the other box, then the description field has a code of -8.
4. (Q11) If the other item on Q11 has a description, but no indication of importance, the field with the importance indication is coded as -9.  If the indication on the other item is present (Q11), but no description is available, then the description field has a code of -9.
5.  (Q13) If the month portion was blank and the year portion was valid, the month portion was assumed to be 0 and coded as 0.  If the number of months was larger than 11, then the number of months is divided by 12 and the integer portion is added to number of years and the remainder portion is the value for number of months.
6. (Q13 and Q31) If the graduation year plus number of years practicing is larger than 2010, then both items are coded as -6.
7. (Q14) If a description is provided by the respondent on Q14, but the indicator was not checked, the indicator is forced to have a value of yes.  If the respondent did not provide a description and explicitly said no to the indicator portion of the question, then the description field was coded with a value of -8.
8. (Q15 and Q16)  If the respondent marked one option from the first set as well as "Other," the first response was used and the text description was blanked out and coded -6. A note was added in the internal_notes field of the file for documentation purposes (not included in PUF).  This applied to 5 cases for Q15 and 13 cases for Q16.  Further, if one of the main options (but not other) was selected and the description field was blank (as it should be), then the description field was coded as -8.
9. (Q18) If number of visits is 217,500 or more then the item is coded as -6.

10. (Q19) If the total number of hours in direct patient care is larger than the total number of professional hours then both direct patient care hours and professional hours are coded as -6.
11. (Q20) If the respondent indicated more than 31 days on call, then the item is coded as -6.
12. (Q25) If N/A is indicated by the respondent, then the other description field is coded with a -8. The exception to this is if the respondent did place a description for this item where N/A was indicated on the question, in which case the description field was coded as a -7.
13. (Q27) If the sum of percentages did not add to 100, then all percentage values were set at -6. If the percentages added to 100 but some of the individual items were missing, the missing values were recoded to 0.
14. (Q32) If the state marked was not valid or XX for "foreign country" was listed, the value was set to -6. If the answer was blank, the value was set to -9.
15. (Q36 and Q37) If the respondent indicated no to Q36, then all of the Q37 items were coded as -8 if they were blank (as was supposed to be the case). If any portions of Q37 were filled out with a no response to Q36, then the filled out portions were coded as -7 on Q37.

## APPENDIX B
## RESPONSE SUMMARY BY STRATA

| STRATA | NUMBER RESPONDING | ELIGIBLE[2] | POPULATION | RESPONSE RATE |
|---|---|---|---|---|
| Female, 34 years and younger | 16 | 25 | 25 | 64.0% |
| Female, 35-44 years | 68 | 122 | 131 | 55.7% |
| Female, 45-54 years | 63 | 114 | 121 | 55.3% |
| Female, 55-64 years | 44 | 65 | 66 | 67.7% |
| Female, 65 and older | 7 | 10 | 11 | 70.0% |
| Male, 34 years and younger | 8 | 18 | 18 | 44.4% |
| Male, 35-44 years | 94 | 200 | 205 | 47.0% |
| Male, 45-54 years | 112 | 231 | 241 | 48.5% |
| Male, 55-64 years | 148 | 272 | 282 | 54.4% |
| Male, 65 and older | 151 | 215 | 219 | 70.2% |
| TOTAL | 711 | 1272 | 1319 | 55.9% |

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[2] Eligible sample includes the number of active licensed physicians with a contact address in rural Colorado minus non-rural, out of state, unable to forward and non-responses.

Colorado Health Institute
1576 Sherman Street, Ste. 300
Denver, CO 80203-1728

Dear Physician Colleague,

Within a week you will receive in the mail a request to fill out a physician questionnaire for an important study being conducted by the Colorado Health Institute (CHI), in partnership with Colorado Rural Health Center, University of Colorado Denver School of Medicine Rural Tract, Colorado Area Health Education Centers, Colorado Medical Society, COPIC and HRSA Region 8 Office.

The purpose of the questionnaire is to better understand the practice of medicine in rural Colorado.

I am writing you in advance because we have found many people like to know ahead of time that they will be contacted. Thank you in advance for your time and consideration in helping make our survey effort successful.

Sincerely,

Pamela P. Hanes, PhD
President and CEO
Colorado Health Institute

May 29, 2009                                                                Survey # XXXX

XXXXX
XXXXXXX
XXXXXXX
XXXXX, CO XXXXXX

Dear Dr. XXXXX:

*We need your help.* The Colorado Health Institute (CHI), in partnership with Colorado Rural Health Center, University of Colorado Denver School of Medicine Rural Tract, Area Health Education Centers, Colorado Medical Society, COPIC and HRSA Region 8, has developed the enclosed rural physician workforce survey to better understand the practice of medicine in rural Colorado.

Many Coloradans living in rural areas of the state have difficulty getting access to needed health care services because of an overall shortage of licensed medical providers. Colorado policymakers at both the state and local level will benefit greatly from the data being collecting in this survey. To provide policymakers with timely, policy relevant and reliable physician workforce data, your participation is critical.

The responses you provide are **confidential** and will only be reported in the aggregate. Once we receive your completed survey, your contact information will be destroyed.

CHI was created five years ago by three Colorado health foundations to serve as an independent and impartial source of reliable and objective health and health care data to inform sound policy decisionmaking. CHI has been working closely with the above named organizations to develop the enclosed survey questionnaire.

We value your participation in this effort. The survey should take approximately 20 minutes to complete. A high response rate will ensure the reliability of the findings and provide the most accurate picture of the practice of medicine in rural Colorado.

*Commonly Asked Questions* about the survey are included on the back of this letter. If you have any additional questions about the survey or about the Colorado Health Institute, please contact Michael Boyson at 303.831.4200 x 207.

Enclosed is a small $2 token of our appreciation for filling out the survey. Thank you for your participation.

Warm regards,

Pamela P. Hanes, PhD
President and CEO

You can also complete the survey form online at: http://www.ColoradoHealthInstitute.org/MD2009.html. Type the number shown at the top of your survey form **(XXXX)** → Complete the questionnaire and click the "submit" button when you finish.

**Who are the Colorado <u>policymakers</u> who will see the summary results?**
CHI will share a report of the rural physician survey findings with interested individuals and groups including:
- Legislators in the Colorado General Assembly
- Governor's Job Cabinet
- Colorado foundations such as The Colorado Trust, Caring for Colorado, Rose Community Foundation and The Colorado Health Foundation
- University of Colorado (CU) Denver School of Medicine Rural Track
- Colorado Rural Health Center
- Area Health Education Centers
- Colorado Medical Society
- COPIC Companies
- HRSA Region 8 Office
- Health researchers

**Why is this survey important?**
The CU Denver School of Medicine will use the information to improve its Rural Track Program for medical students. The Colorado Rural Health Center will identify successful strategies for attracting physicians to rural communities. The Colorado Area Health Education Centers will identify opportunities to increase high school students' interests in health careers. The Colorado Health Institute will inform legislators about training and practice issues related to rural medicine to inform their workforce deliberations.

**How was I selected to be in the sample?**
Using the home or work address contained in the Colorado Department of Regulatory Agency's physician licensure file, CHI matched ZIP Codes with the definition of rural developed by the U.S. Department of Agriculture (Rural Urban Commuting Areas/RUCAs). RUCA codes are a sub-county measure of rural status based on 2000 U.S. Census data and 2006 ZIP Codes. For more information on RUCA codes, refer to http://depts.washington.edu/uwruca/index.html.

**If I am retired or not practicing medicine, do I need to fill out the questionnaire?**
Yes, but only the first two questions. Please answer these two questions by returning the enclosed questionnaire in the self-addressed stamped envelope. Your name will then be taken off the CHI mailing list for any further contact.

**Who sees my answers?**
CHI staff members working on the survey have signed a confidentiality agreement to protect the confidentiality of the data collected. Before the public sees the summary results or a research data file, CHI staff will ensure that survey responses are re-coded when necessary to protect the confidentiality of all survey respondents.

**How much time does the questionnaire take?**
There are 39 questions. Based on a pre-test of the survey instrument, we estimate the questionnaire will take approximately 20 minutes to complete.

**What happens if I do not respond?**
This is a voluntary survey. However, if you do not respond, the survey will be less representative of the population of Colorado physicians that practice in rural areas of the state.

**Can I see a report from the survey?**
If you would like a copy of the final report based on this survey, please contact Rebecca Crepin, CHI research assistant, at 303.831.4200 x 216 or crepinr@coloradohealthinstitute.org.

Colorado Health Institute
1576 Sherman Street, Ste. 300
Denver, CO 80203-1728

Dear Colleague,

Last week you received a letter inviting you to participate in a Rural Physician Workforce Survey. Your name was drawn from a list of currently licensed physicians living or working in rural Colorado based on the U.S. Department of Agriculture's definition of "rural."

If you have already completed the survey online or returned the form to us, please accept our sincere thanks. If not, we ask that you please do so at your earliest convenience. It is only through rural physicians like you completing the questionnaire that Colorado policymakers will fully understand the workforce issues that you and your colleagues face in providing health care in rural areas of the state.

If you did not receive a questionnaire, or if it was misplaced, please call Rebecca Crepin at 303.831.4200 x 216 and we will get another one in the mail to you today.

Warm regards,

Pamela P. Hanes, PhD
President and CEO

June 22, 2009                                                              Survey # XXXX

XXXXX
XXXXXXX
XXXXXXX
XXXXX, CO XXXXXX

Dear Dr. XXXXX:

About three weeks ago the Colorado Health Institute mailed you a Rural Physician questionnaire that asked about your experience as a physician practicing in rural Colorado. To date, we have not received your completed questionnaire.

Physicians who have already returned their questionnaire reveal both good and bad experiences. We believe the results of this survey will be highly useful to state policymakers and others working to recruit physicians to rural Colorado.

The preliminary results from the rural physician survey show that rural physicians are already being impacted by the current economy and seeing an increase in the uninsured.

We are writing to you because your participation is so important to this effort. As we stated in the first letter, your responses to the questions will be confidential and only reported in the aggregate.

A few people have called to say that they are retired or not seeing patients. If that is the case with you, we ask you to simply complete the first two questions and then return the survey to CHI.

I have enclosed another copy of the questionnaire and hope that you will take 20 minutes or so to fill it out and return it today. If you have any questions, please contact Michael Boyson at 303.831.4200 x 207.  Thank you very much for your participation in this important survey effort.

Sincerely,

Pamela P. Hanes, PhD
President and CEO

You may also complete the survey form on line at: http://www.ColoradoHealthInstitute.org/MD2009.html.  Type the number shown at the top of your survey form **(XXXX)** → Complete the questionnaire and click the "submit" button when you finish.

**How many people have responded?**
So far, we have received 484 surveys: 462 paper forms and 22 filled out online representing a 37 percent response rate. We are aiming for a much higher response rate.

**Who are the Colorado <u>policymakers</u> who will see the summary results?**
CHI will share a report of the rural physician survey findings with interested individuals and groups including:
- Legislators in the Colorado General Assembly
- Governor's Job Cabinet
- Colorado foundations such as The Colorado Trust, Caring for Colorado, Rose Community Foundation and The Colorado Health Foundation
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