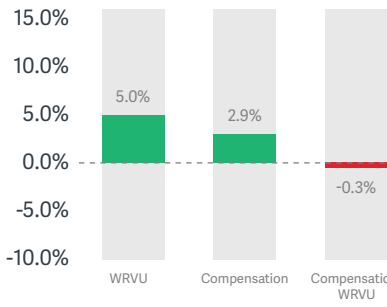


COMPENSATION and PRODUCTION TRENDS

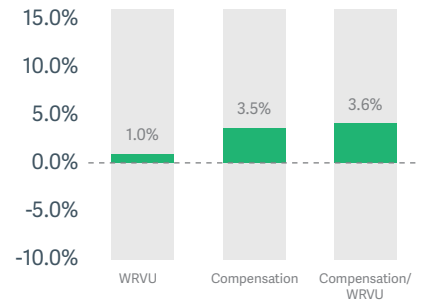
COMPENSATION DID NOT MAINTAIN PACE

with production for primary care physicians while subspecialists realized an increase in compensation on stable production.

PRIMARY CARE PHYSICIANS*



SUBSPECIALTY PHYSICIANS*



*% CHANGE 2021 SURVEY TO 2022 SURVEY

*WRVU comparisons calculated using the 2021 MPFS for both 2021 and 2022 benchmarks.

APP COMPENSATION % CHANGE 2021 SURVEY TO 2022 SURVEY



WRVU-ADJUSTED BENCHMARKS

To account for the impact of Medicare Physician Fee Schedule (MPFS) changes on survey benchmarks, ECG has published 2022 benchmarks using the 2021 and 2020 MPFS.

PERCENT CHANGE COMPENSATION PER WRVU 2022 SURVEY VS. 2021 SURVEY

SPECIALTY CATEGORY	2022 VS. 2021 BENCHMARKS	CHANGE FROM 2021 TO 2022 USING 2021 MPFS
Primary Care	-15.4%	-0.3%
Hospital Based	2.4%	3.8%
Medicine	-7.4%	3.0%
Surgery	-1.2%	3.8%
APPs	-9.2%	4.6%

KEY COMPENSATION PLAN COMPONENTS

PERCENTAGE OF ORGANIZATIONS



24%

of organizations reported using additional value-based metrics in their physician incentive plans beyond quality, patient satisfaction, and access.

PHYSICIAN AND APP QUALITY AND PATIENT SATISFACTION COMPENSATION COMBINED

	% of Total Compensation	Median \$
Hospital Based	4.8%	\$18,753
Medicine	4.4%	\$17,300
Primary Care	7.0%	\$20,000
Surgery	3.9%	\$20,000
APPs	5.0%	\$7,600

11%

of organizations report incorporating key patient access metrics to determine physician compensation.

PHYSICIAN BENEFITS STABILIZING

The employer portion of benefit costs for physicians decreased to \$49,767 per physician FTE in 2022 while APP benefit costs increased to \$28,475.

The cost of benefits varies across specialty categories, with primary care physicians having the lowest cost, and surgical physicians having the highest.



BENEFIT \$'S PER FTE PHYSICIAN

HOSPITAL BASED	\$49,248
MEDICINE	\$49,065
PRIMARY CARE	\$42,699
SURGERY	\$57,601