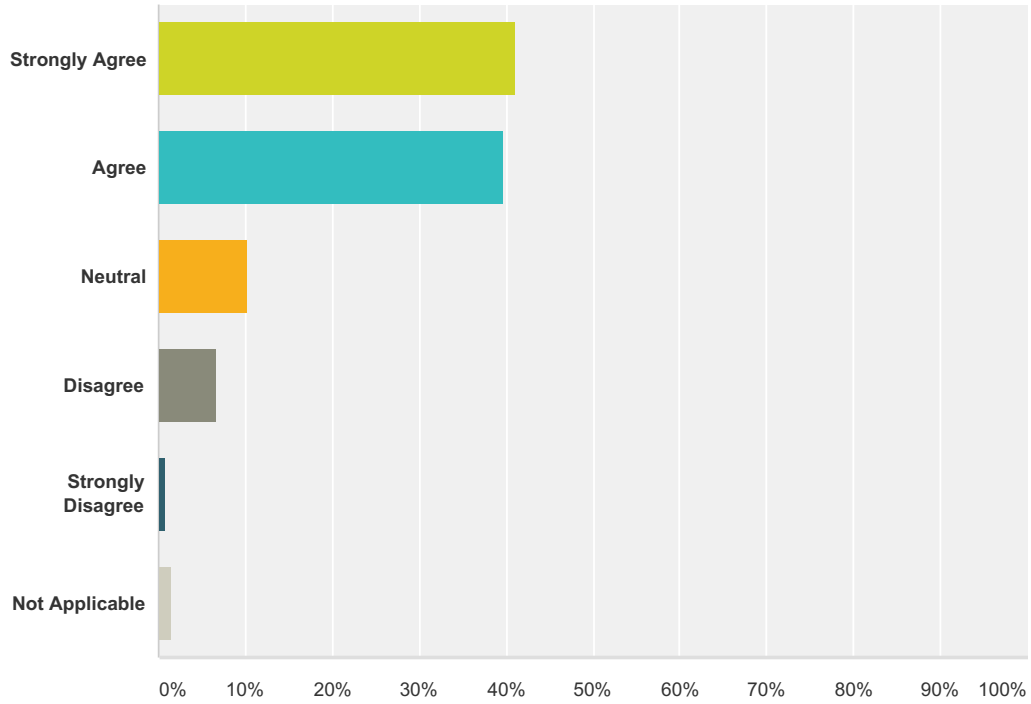


**Q1 Documentation and administrative issues interfere with my ability to serve patients well.**

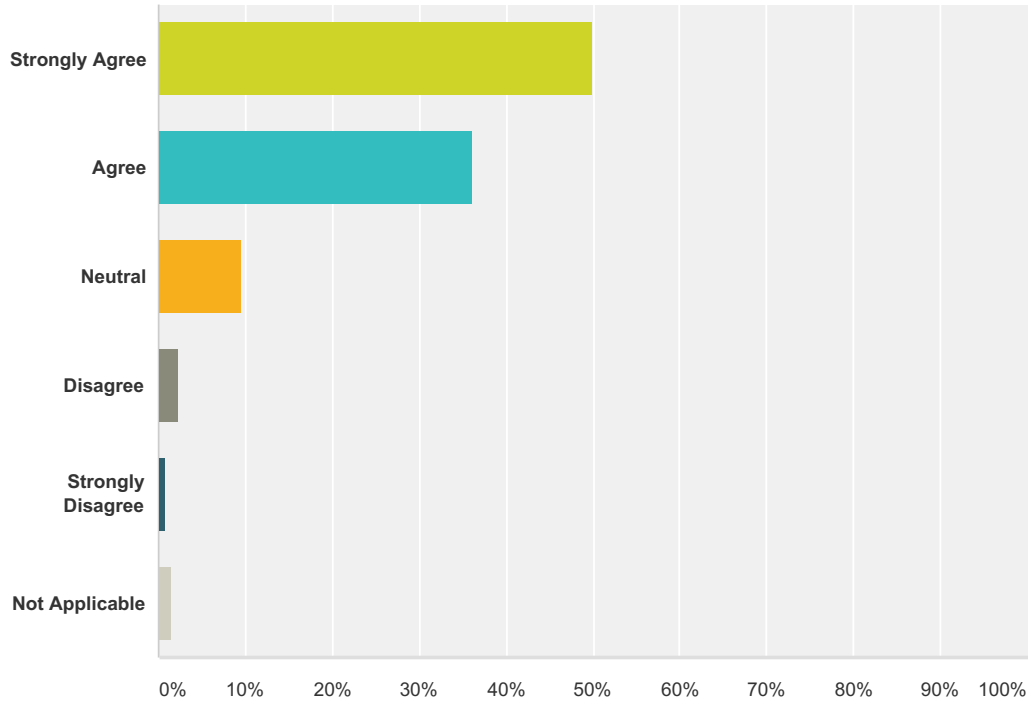
Answered: 136 Skipped: 1



Answer Choices	Responses	Count
Strongly Agree	41.18%	56
Agree	39.71%	54
Neutral	10.29%	14
Disagree	6.62%	9
Strongly Disagree	0.74%	1
Not Applicable	1.47%	2
<b>Total</b>		<b>136</b>

**Q2 Putting aside documentation and administrative issues, I find the practice of medicine deeply satisfying.**

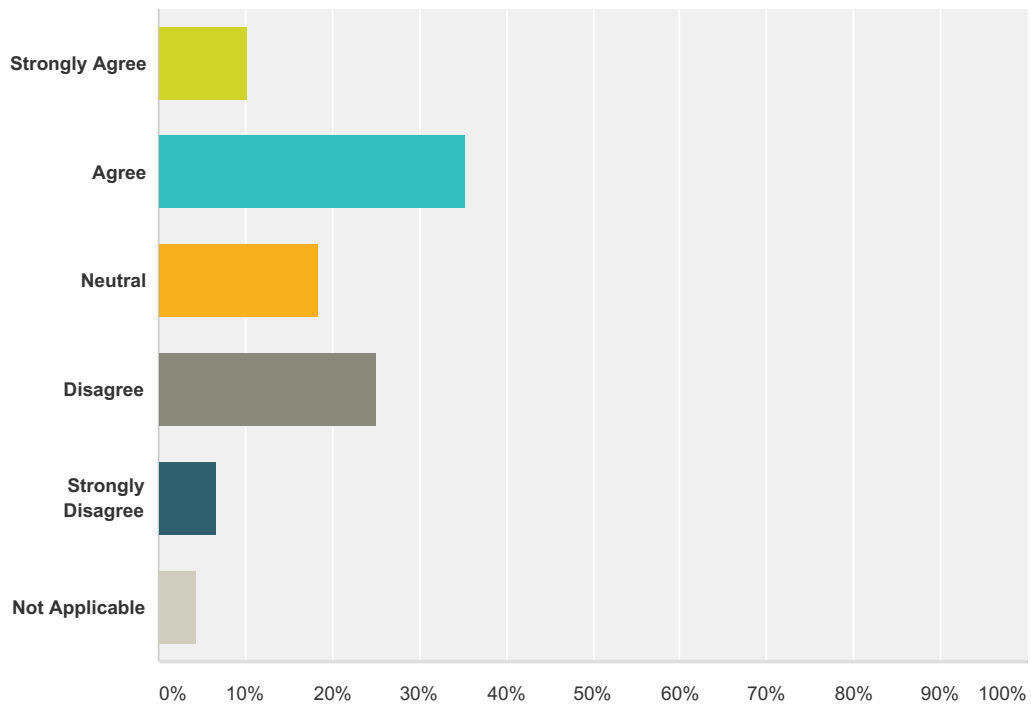
Answered: 136 Skipped: 1



Answer Choices	Responses	Count
Strongly Agree	50.00%	68
Agree	36.03%	49
Neutral	9.56%	13
Disagree	2.21%	3
Strongly Disagree	0.74%	1
Not Applicable	1.47%	2
<b>Total</b>		<b>136</b>

### Q3 I have adequate time to spend with my patients during their visits

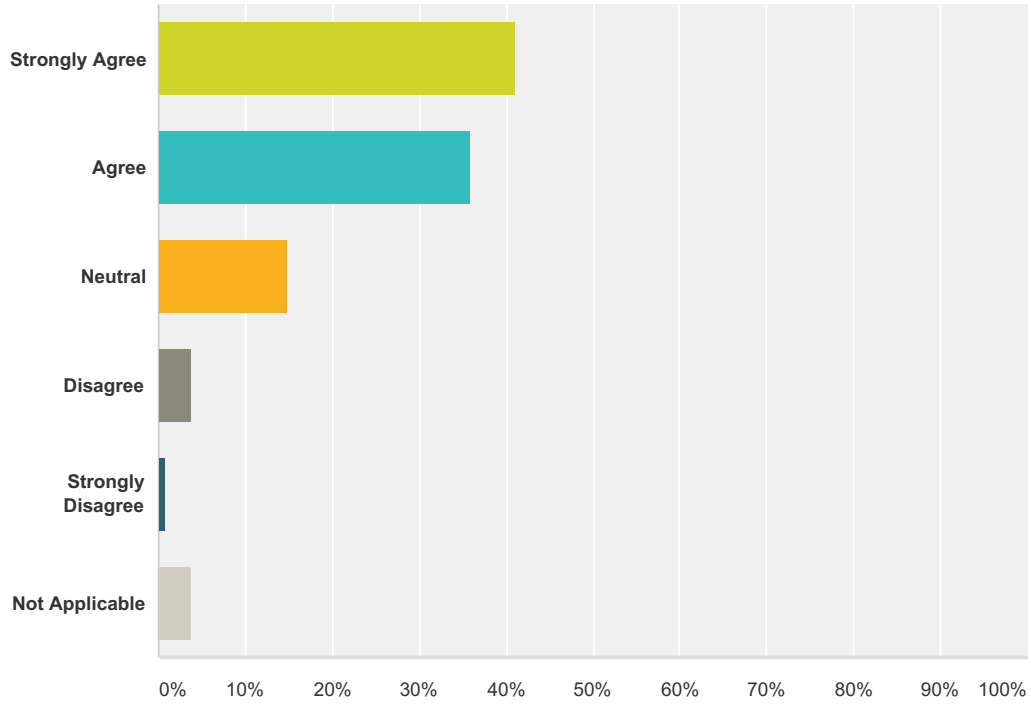
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	10.29%	14
Agree	35.29%	48
Neutral	18.38%	25
Disagree	25.00%	34
Strongly Disagree	6.62%	9
Not Applicable	4.41%	6
<b>Total</b>		<b>136</b>

**Q4 Insurance companies should use a single statewide drug formulary and be required to follow national coding standards.**

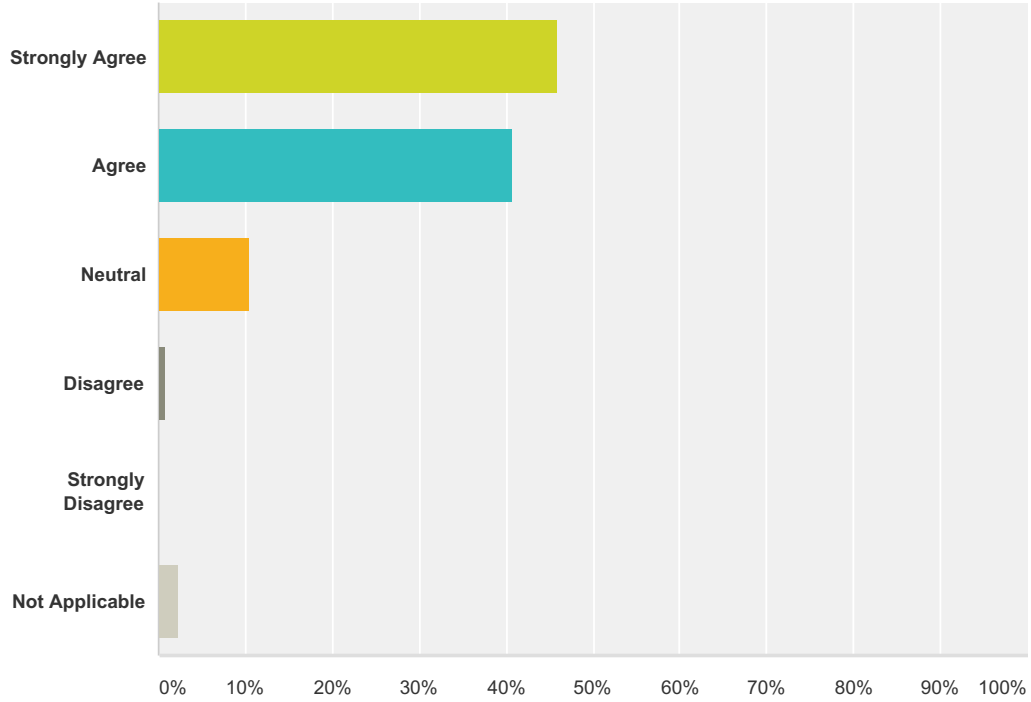
Answered: 134 Skipped: 3



Answer Choices	Responses	Count
Strongly Agree	41.04%	55
Agree	35.82%	48
Neutral	14.93%	20
Disagree	3.73%	5
Strongly Disagree	0.75%	1
Not Applicable	3.73%	5
<b>Total</b>		<b>134</b>

**Q5 More physicians will seek to be employed by hospitals or FQHCs due to increased administrative burdens.**

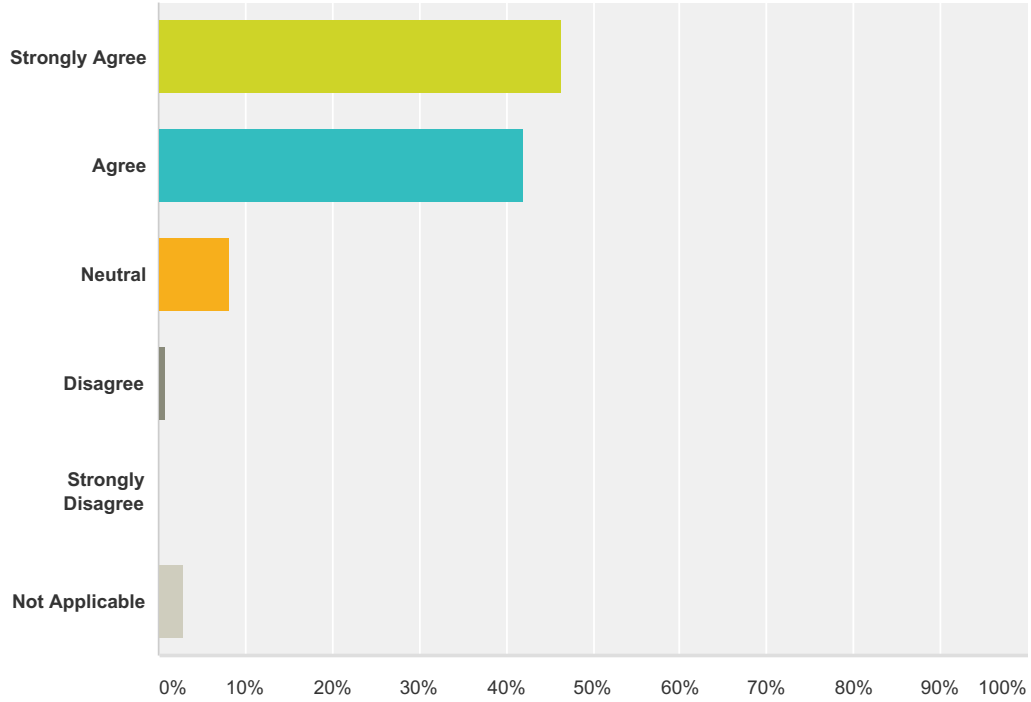
Answered: 135 Skipped: 2



Answer Choices	Responses	Count
Strongly Agree	45.93%	62
Agree	40.74%	55
Neutral	10.37%	14
Disagree	0.74%	1
Strongly Disagree	0.00%	0
Not Applicable	2.22%	3
<b>Total</b>		<b>135</b>

**Q6 As the role of hospitalists expands, there is a greater need to improve the transitions of care.**

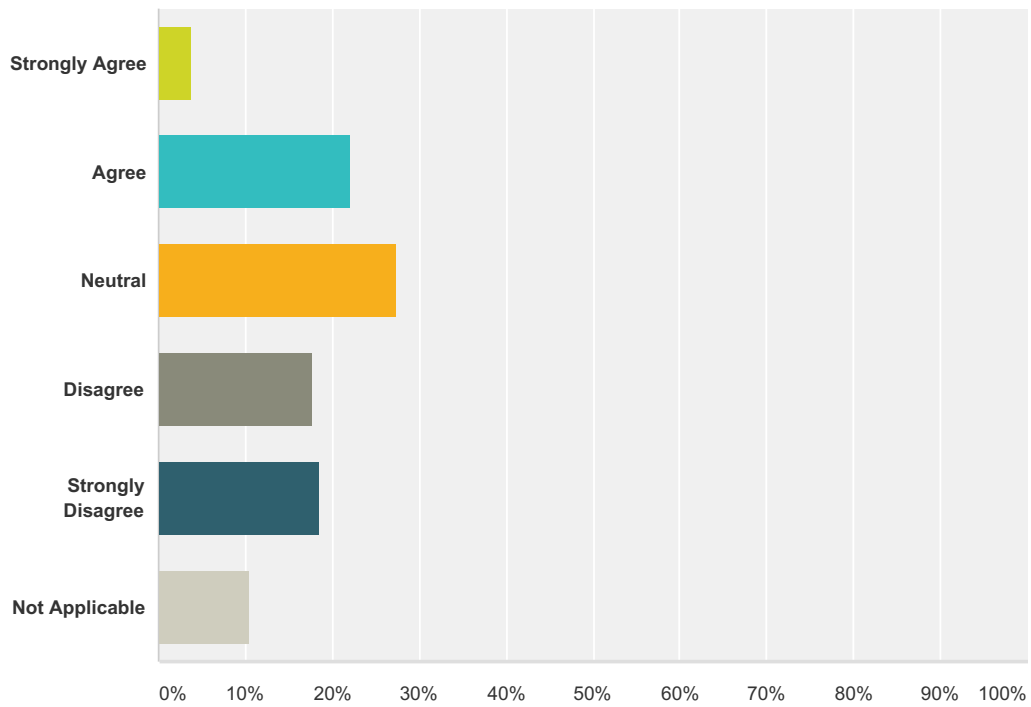
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	46.32%	63
Agree	41.91%	57
Neutral	8.09%	11
Disagree	0.74%	1
Strongly Disagree	0.00%	0
Not Applicable	2.94%	4
<b>Total</b>		<b>136</b>

**Q7 My practice is prepared to use the ICD-10 code set, beginning on 10/1/14.**

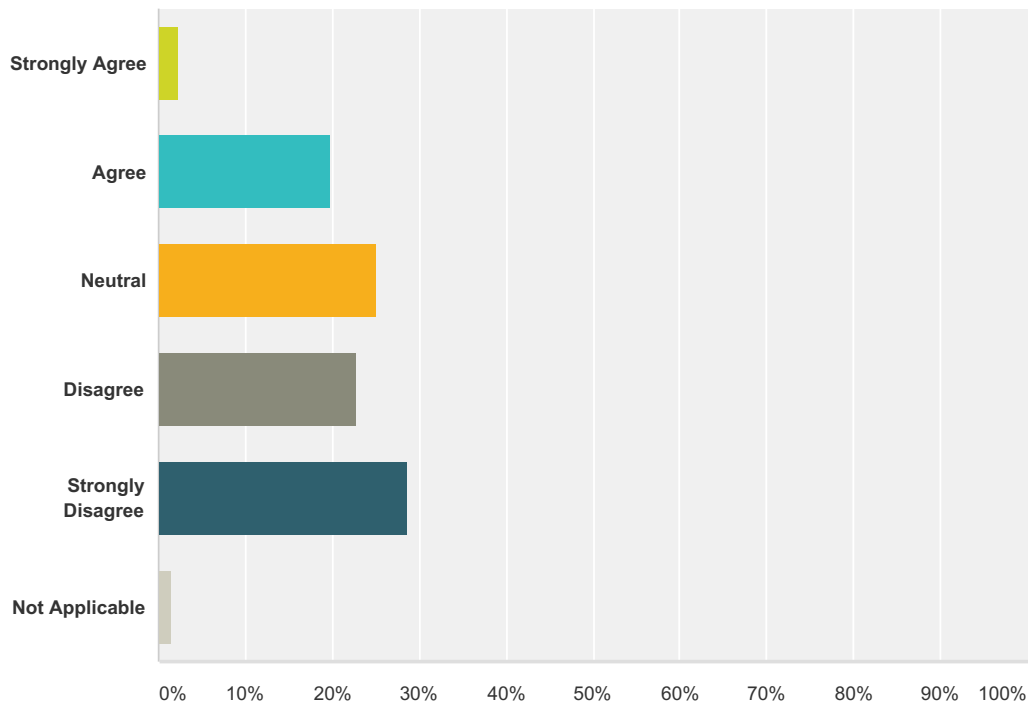
Answered: 135 Skipped: 2



Answer Choices	Responses
Strongly Agree	3.70% 5
Agree	22.22% 30
Neutral	27.41% 37
Disagree	17.78% 24
Strongly Disagree	18.52% 25
Not Applicable	10.37% 14
<b>Total</b>	<b>135</b>

### Q8 Electronic health records have improved the quality of care.

Answered: 136 Skipped: 1

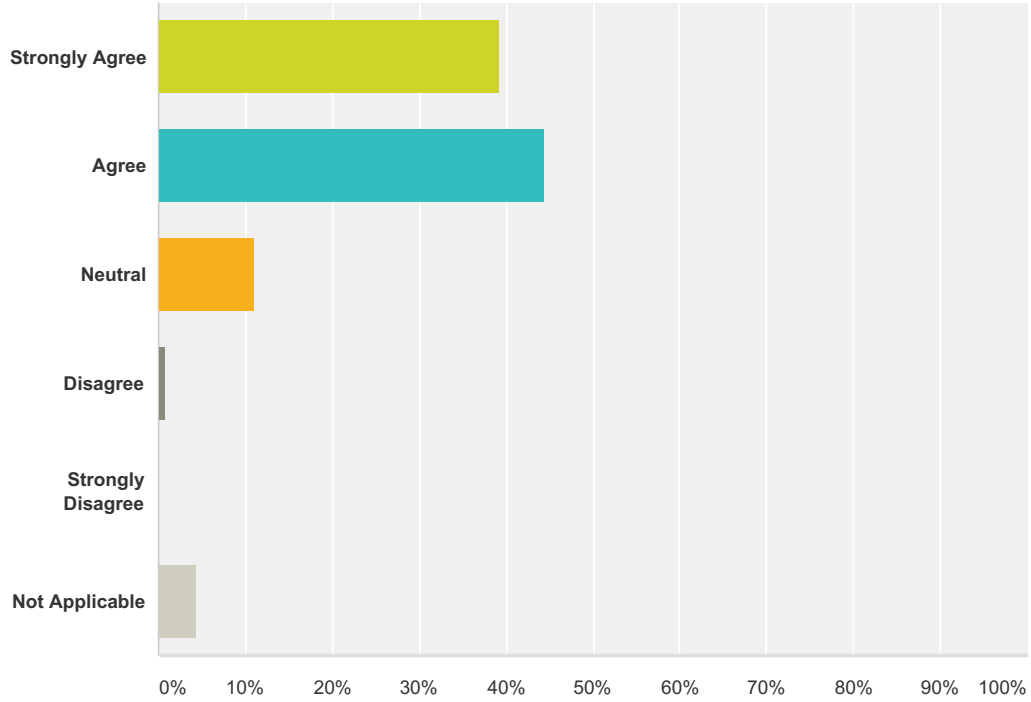


Answer Choices	Responses	
Strongly Agree	2.21%	3
Agree	19.85%	27
Neutral	25.00%	34
Disagree	22.79%	31
Strongly Disagree	28.68%	39
Not Applicable	1.47%	2
<b>Total</b>		<b>136</b>



**Q9 The Medical Practice Board should develop clear standards for conduction investigations.**

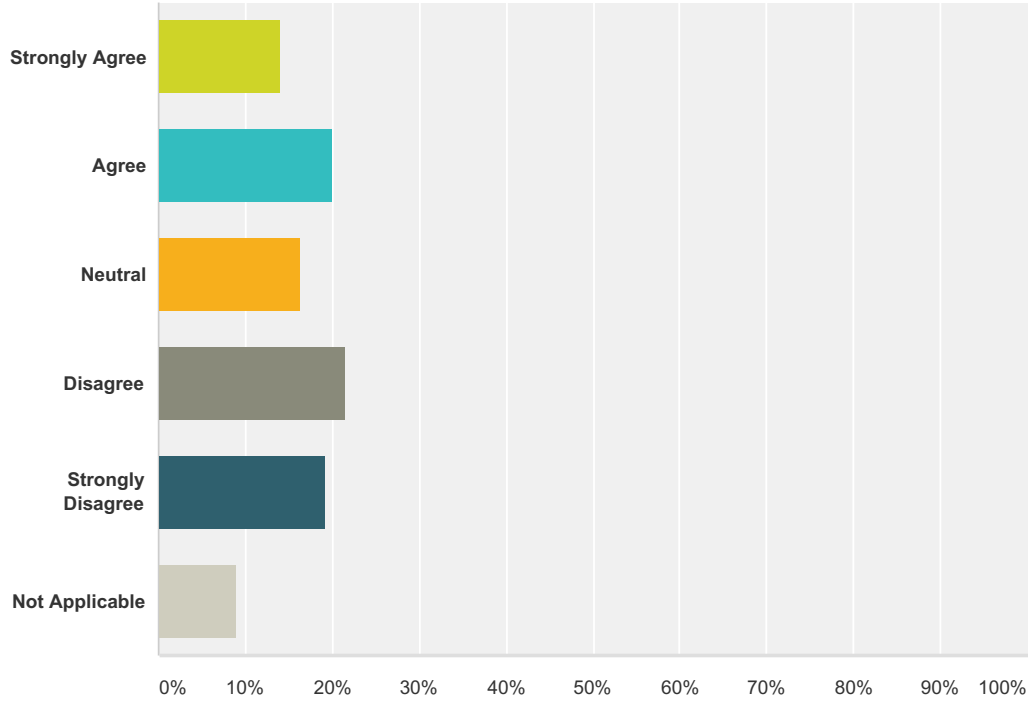
Answered: 135 Skipped: 2



Answer Choices	Responses	
Strongly Agree	39.26%	53
Agree	44.44%	60
Neutral	11.11%	15
Disagree	0.74%	1
Strongly Disagree	0.00%	0
Not Applicable	4.44%	6
<b>Total</b>		<b>135</b>

**Q10 I am contemplating earlier retirement, due to my dissatisfaction with the current practice environment.**

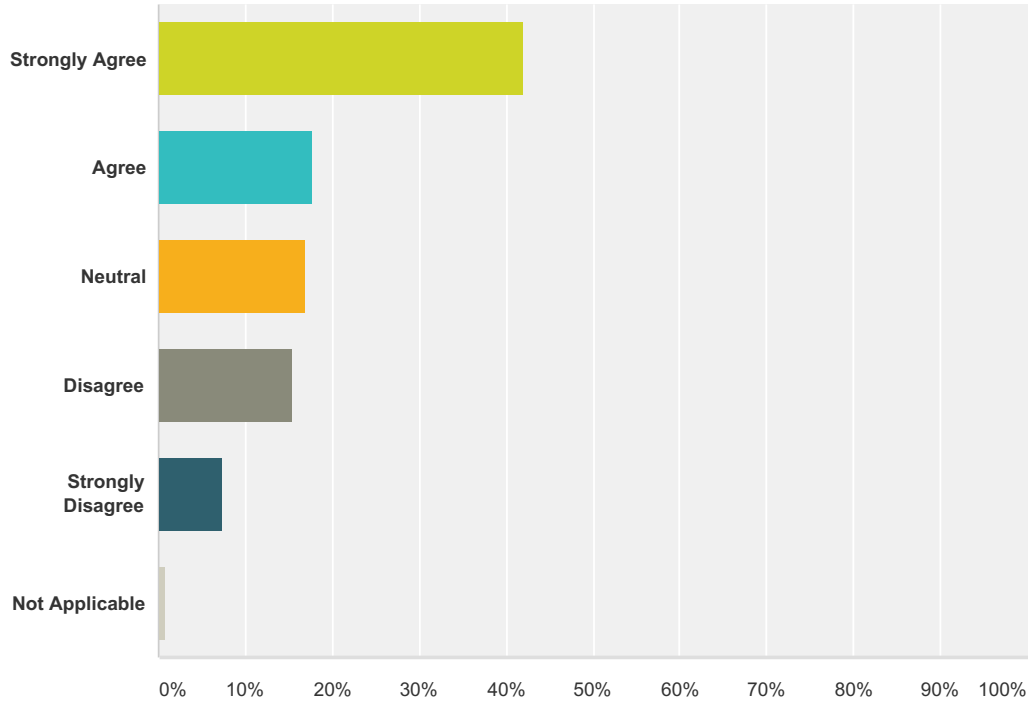
Answered: 135 Skipped: 2



Answer Choices	Responses	
Strongly Agree	14.07%	19
Agree	20.00%	27
Neutral	16.30%	22
Disagree	21.48%	29
Strongly Disagree	19.26%	26
Not Applicable	8.89%	12
<b>Total</b>		<b>135</b>

**Q11 I am concerned that Vermont's health care reform law will make it more difficult to attract new physicians or cause physicians to leave.**

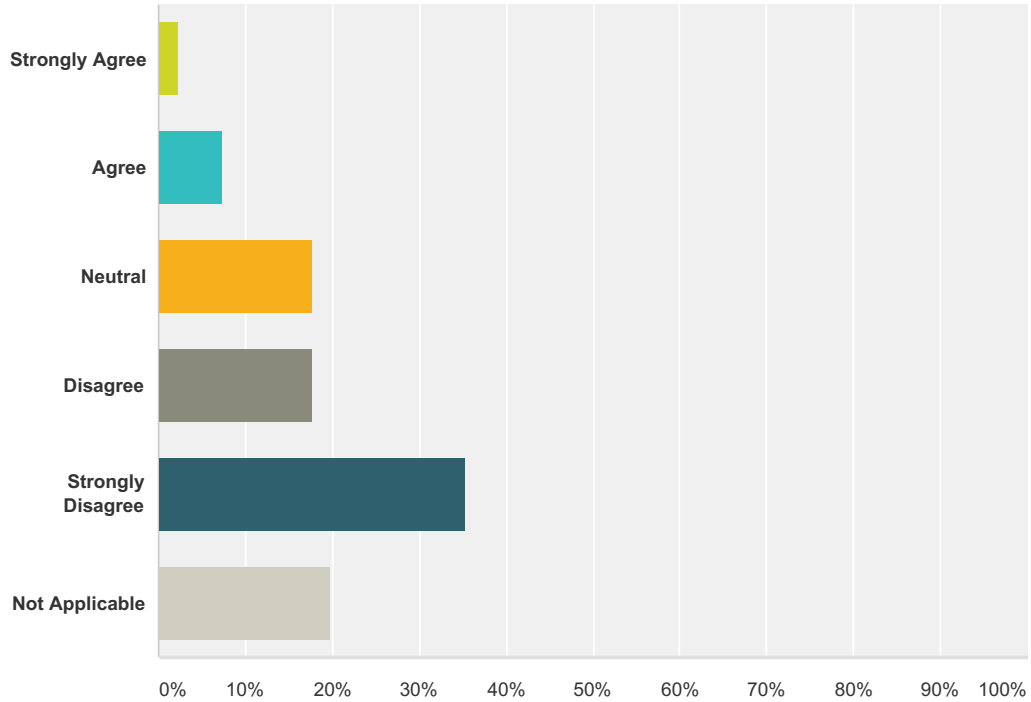
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	41.91%	57
Agree	17.65%	24
Neutral	16.91%	23
Disagree	15.44%	21
Strongly Disagree	7.35%	10
Not Applicable	0.74%	1
<b>Total</b>		<b>136</b>

**Q12 I plan on participating in the new "Death with Dignity" program allowing me to write lethal prescription for my patients under certain conditions.**

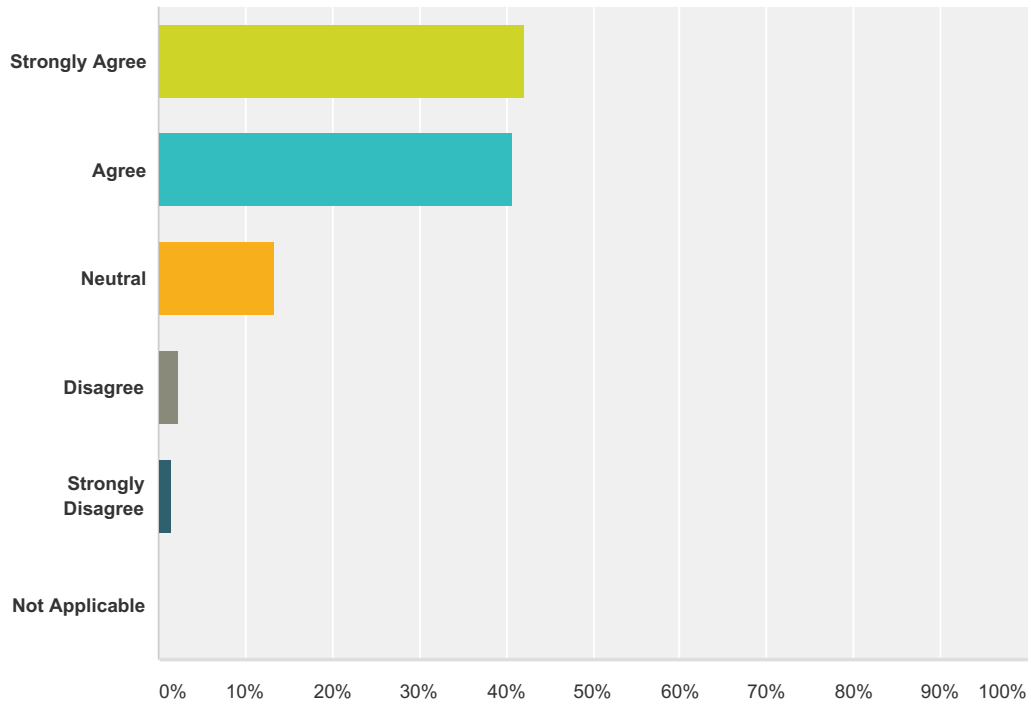
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	2.21%	3
Agree	7.35%	10
Neutral	17.65%	24
Disagree	17.65%	24
Strongly Disagree	35.29%	48
Not Applicable	19.85%	27
<b>Total</b>		<b>136</b>

**Q13 There should be a consistent set of quality measures used by all payers.**

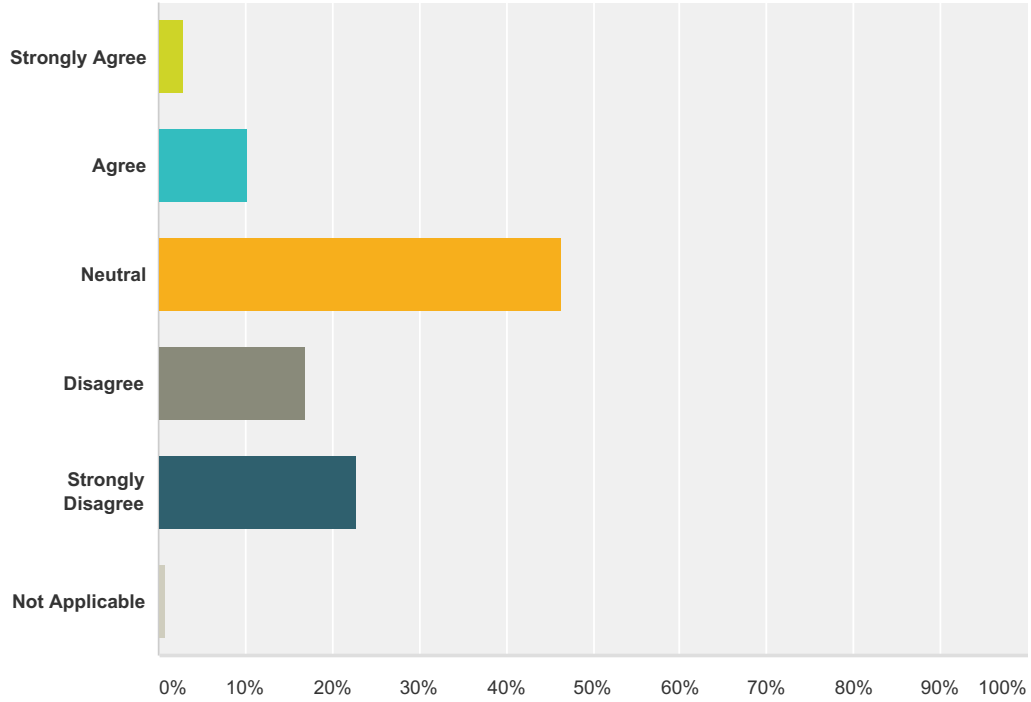
Answered: 135 Skipped: 2



Answer Choices	Responses	
Strongly Agree	42.22%	57
Agree	40.74%	55
Neutral	13.33%	18
Disagree	2.22%	3
Strongly Disagree	1.48%	2
Not Applicable	0.00%	0
<b>Total</b>		<b>135</b>

**Q14 Accountable Care Organizations (ACOs) will help physicians in providing high quality and cost efficient care.**

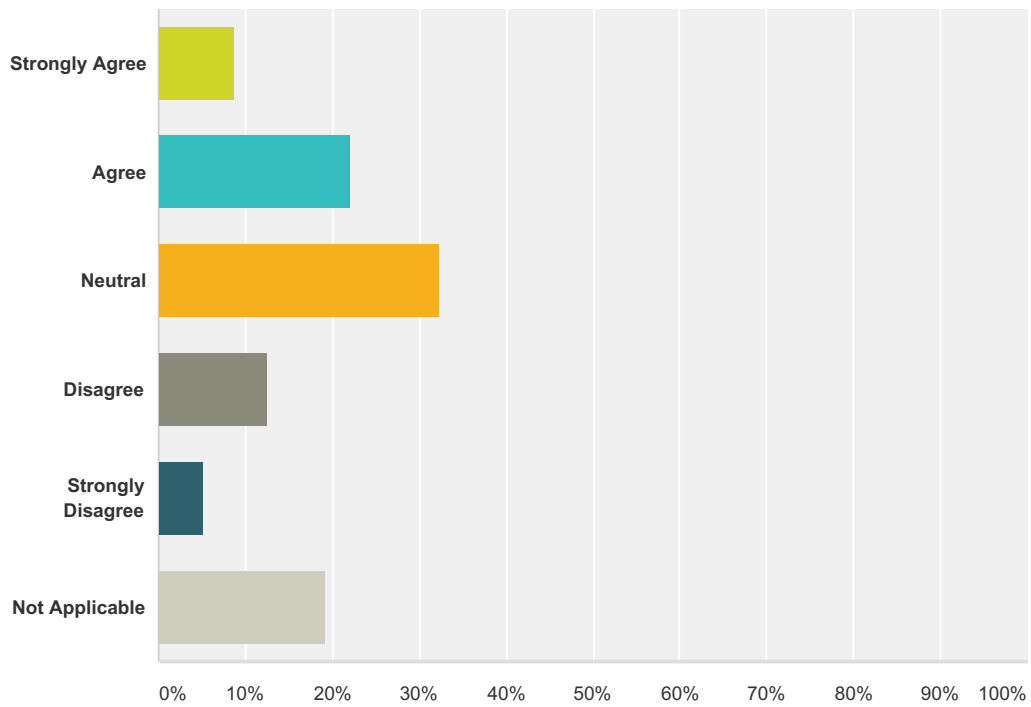
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	2.94%	4
Agree	10.29%	14
Neutral	46.32%	63
Disagree	16.91%	23
Strongly Disagree	22.79%	31
Not Applicable	0.74%	1
<b>Total</b>		<b>136</b>

### Q15 My patients benefit from the Blueprint's community care teams.

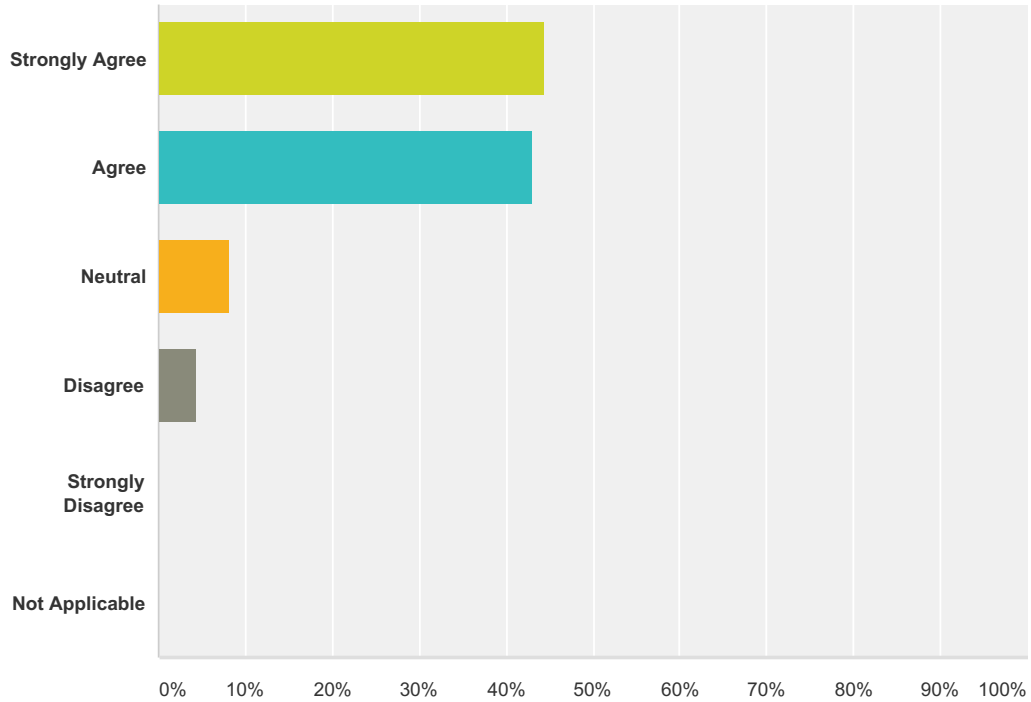
Answered: 136 Skipped: 1



Answer Choices	Responses	
Strongly Agree	8.82%	12
Agree	22.06%	30
Neutral	32.35%	44
Disagree	12.50%	17
Strongly Disagree	5.15%	7
Not Applicable	19.12%	26
<b>Total</b>		<b>136</b>

**Q16 Greater personal responsibility for lifestyle choices should be an integral part of health care reform.**

Answered: 135 Skipped: 2

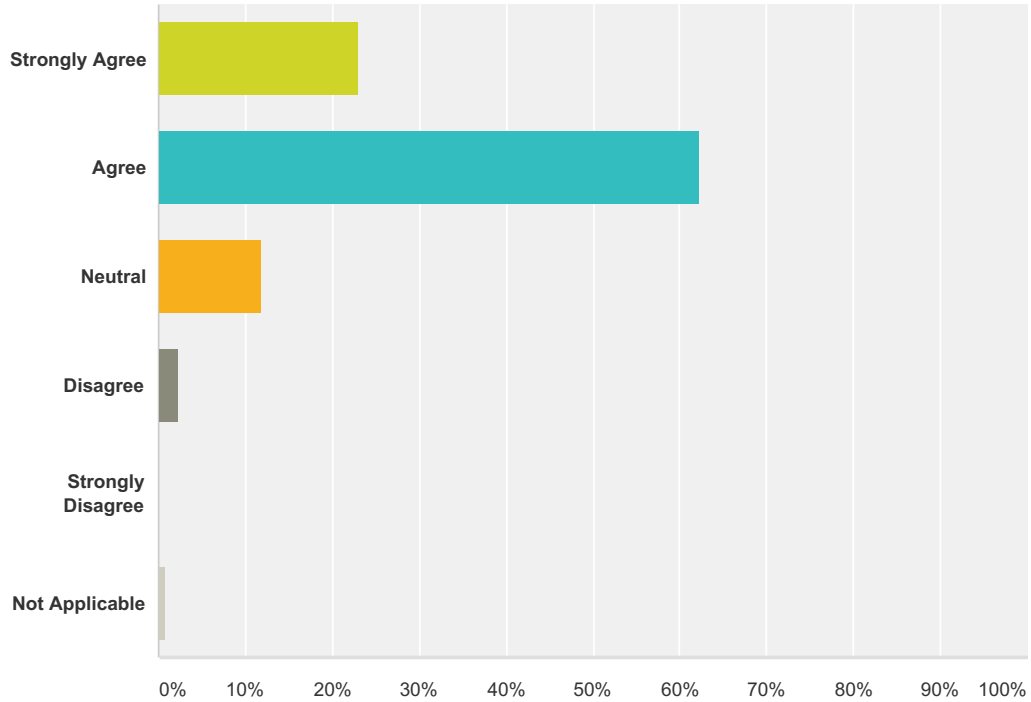


Answer Choices	Responses	Count
Strongly Agree	44.44%	60
Agree	42.96%	58
Neutral	8.15%	11
Disagree	4.44%	6
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
<b>Total</b>		<b>135</b>



**Q17 The cost-effectiveness of a medical procedure as determined by physician-endorsed research should be a part of clinical decision making.**

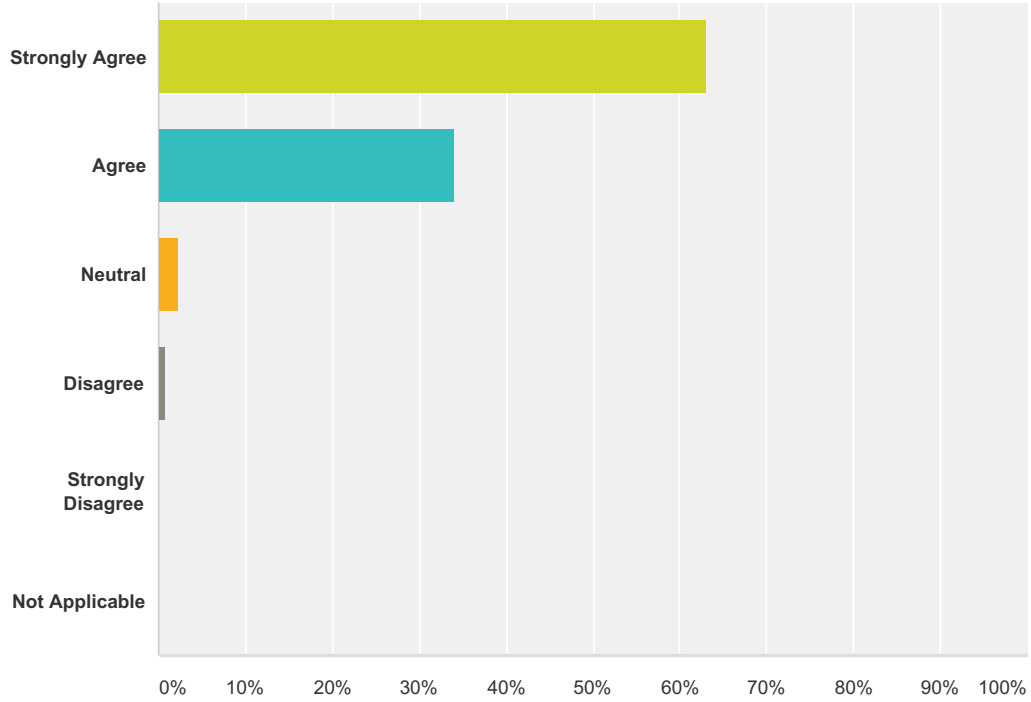
Answered: 135 Skipped: 2



Answer Choices	Responses	Count
Strongly Agree	22.96%	31
Agree	62.22%	84
Neutral	11.85%	16
Disagree	2.22%	3
Strongly Disagree	0.00%	0
Not Applicable	0.74%	1
<b>Total</b>		<b>135</b>

**Q18 Physician leadership in the design of the state's health care system will be a critical component in its success.**

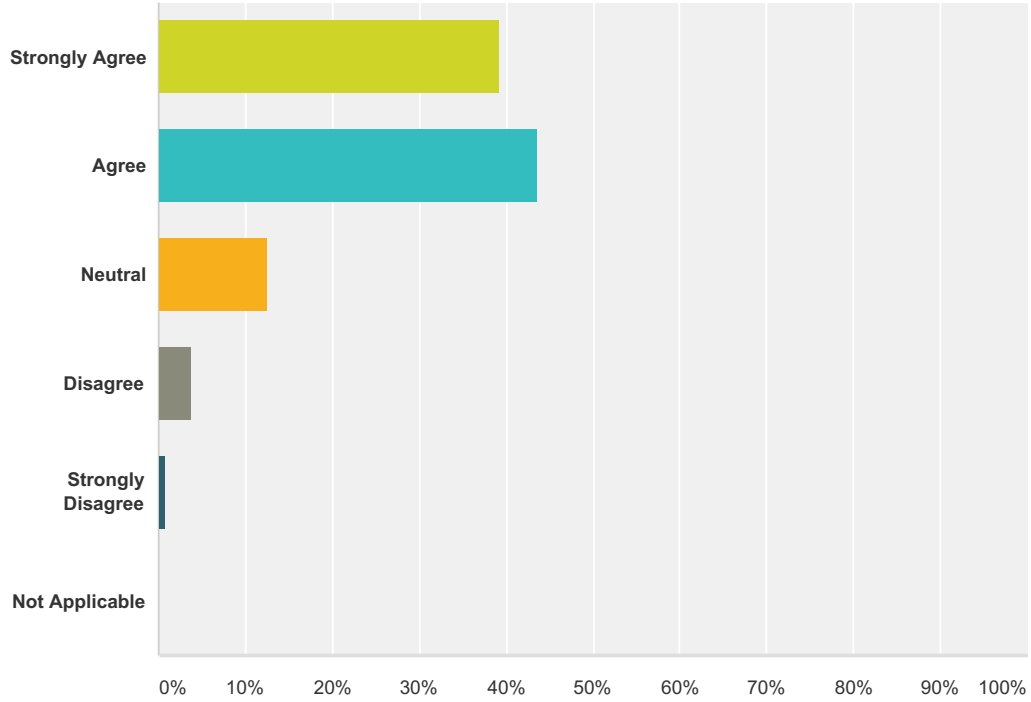
Answered: 135 Skipped: 2



Answer Choices	Responses	Count
Strongly Agree	62.96%	85
Agree	34.07%	46
Neutral	2.22%	3
Disagree	0.74%	1
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
<b>Total</b>		<b>135</b>

**Q19 Due to a shortage of physicians, I am concerned that newly covered patients will not have adequate access to services.**

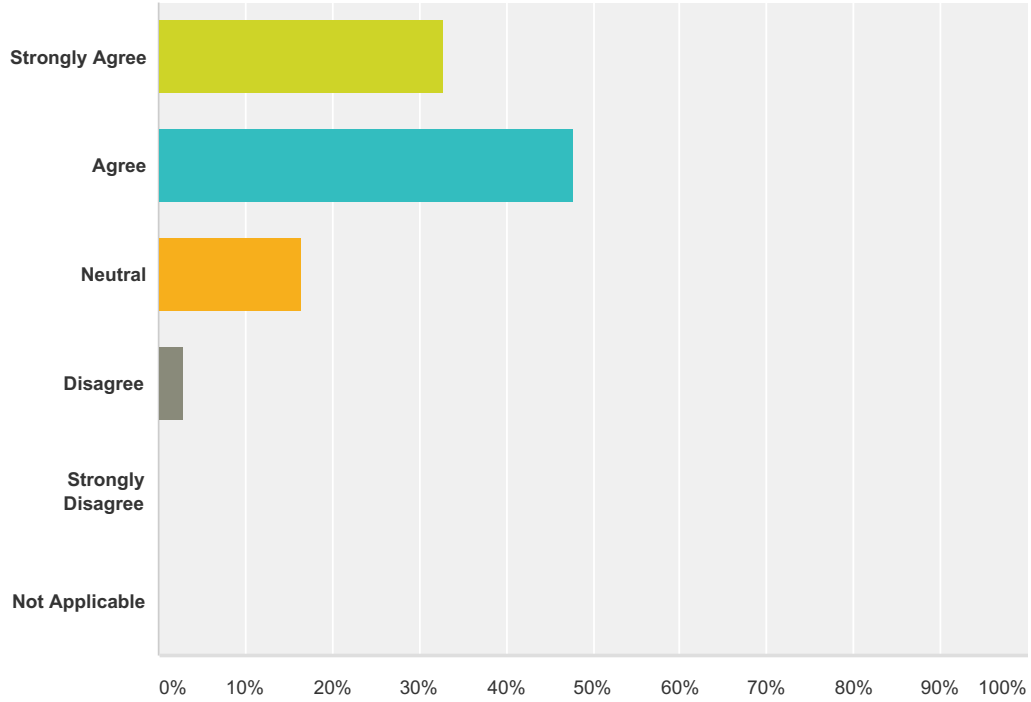
Answered: 135 Skipped: 2



Answer Choices	Responses	Count
Strongly Agree	39.26%	53
Agree	43.70%	59
Neutral	12.59%	17
Disagree	3.70%	5
Strongly Disagree	0.74%	1
Not Applicable	0.00%	0
<b>Total</b>		<b>135</b>

### Q20 Health care reform will require greater collaboration between physicians and other health care professionals

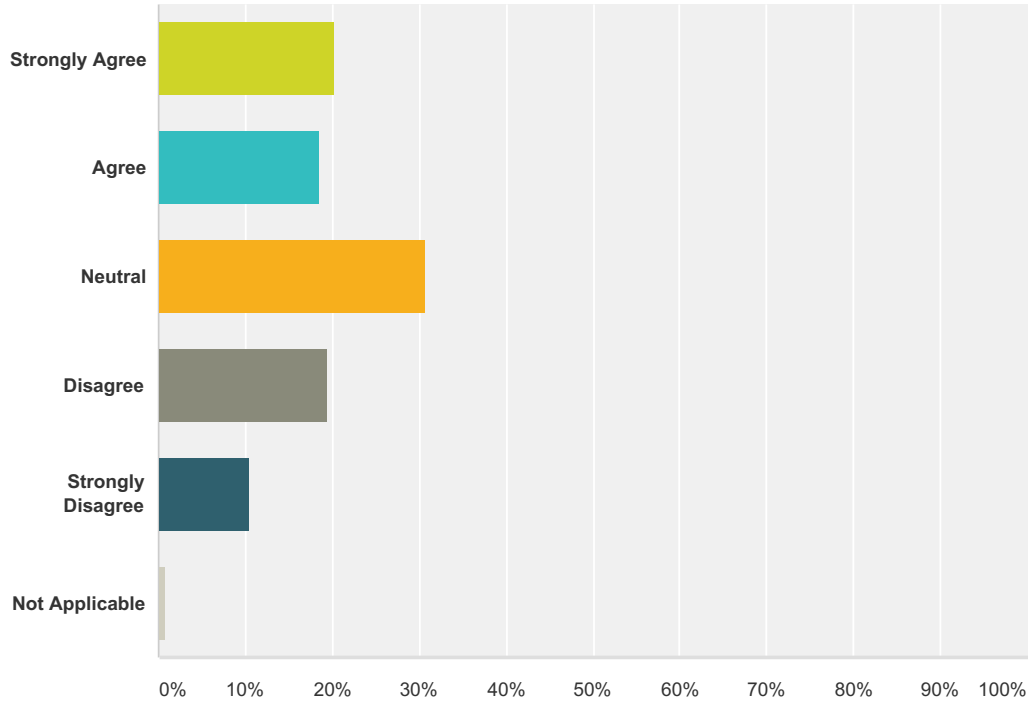
Answered: 134 Skipped: 3



Answer Choices	Responses	Count
Strongly Agree	32.84%	44
Agree	47.76%	64
Neutral	16.42%	22
Disagree	2.99%	4
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
<b>Total</b>		<b>134</b>

**Q21 Independent practice APRNs and prescribing ability of Naturopaths will cause a decline in primary care physicians in Vermont.**

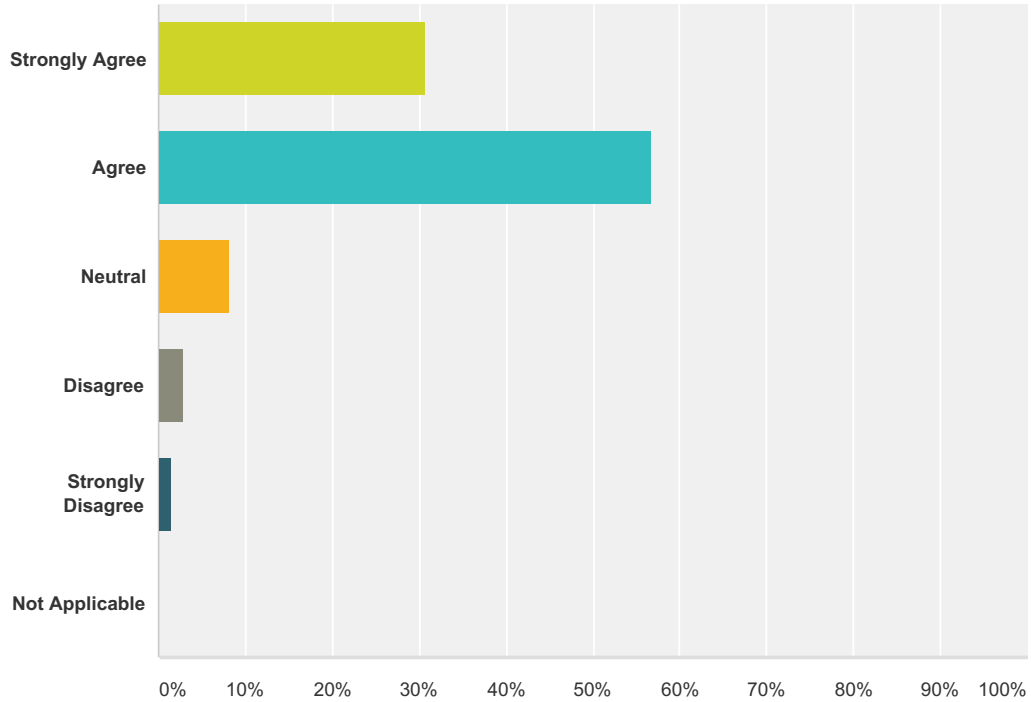
Answered: 134 Skipped: 3



Answer Choices	Responses	
Strongly Agree	20.15%	27
Agree	18.66%	25
Neutral	30.60%	41
Disagree	19.40%	26
Strongly Disagree	10.45%	14
Not Applicable	0.75%	1
<b>Total</b>		<b>134</b>

**Q22 The VMS should work with other organizations in conducting independent evaluations of the state's health care reform efforts.**

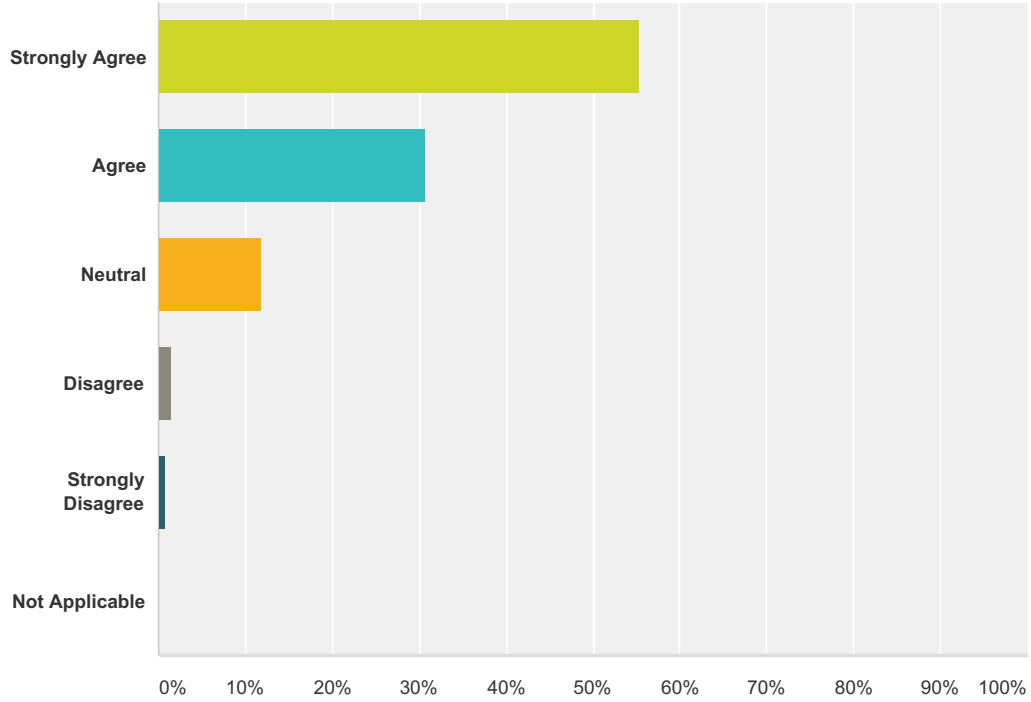
Answered: 134 Skipped: 3



Answer Choices	Responses	
Strongly Agree	30.60%	41
Agree	56.72%	76
Neutral	8.21%	11
Disagree	2.99%	4
Strongly Disagree	1.49%	2
Not Applicable	0.00%	0
<b>Total</b>		<b>134</b>

**Q23 Medical liability reform is necessary in order to reduce costs associated with defensive medicine.**

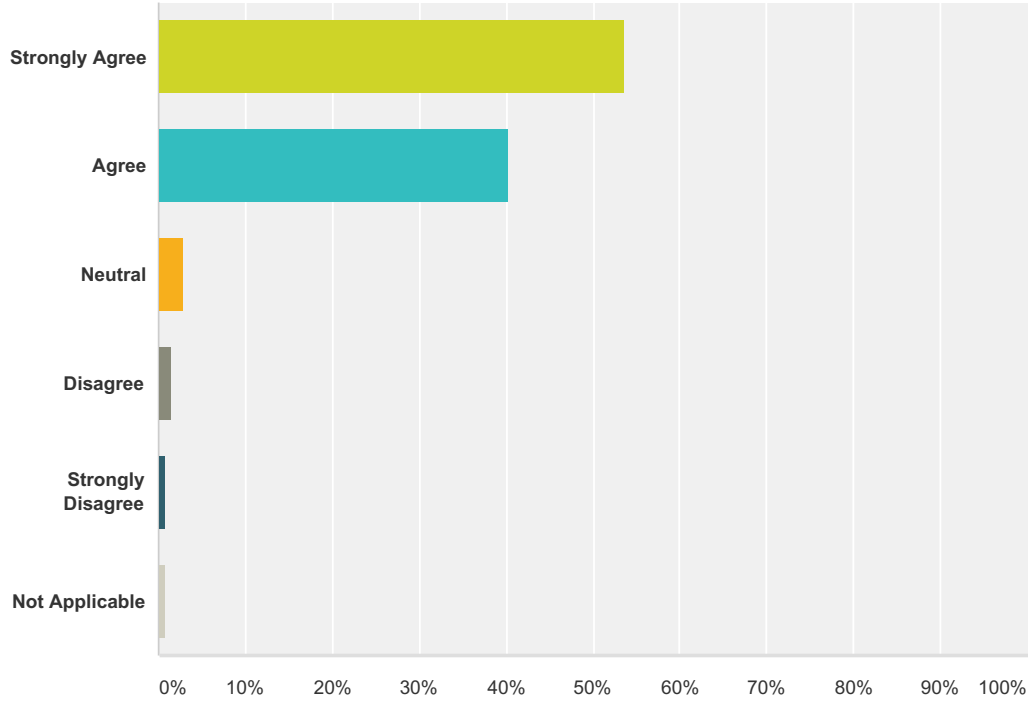
Answered: 134 Skipped: 3



Answer Choices	Responses	Count
Strongly Agree	55.22%	74
Agree	30.60%	41
Neutral	11.94%	16
Disagree	1.49%	2
Strongly Disagree	0.75%	1
Not Applicable	0.00%	0
<b>Total</b>		<b>134</b>

**Q24 Physicians should be paid for non face-to-face services, such as phone or online services, and prior authorization.**

Answered: 134 Skipped: 3

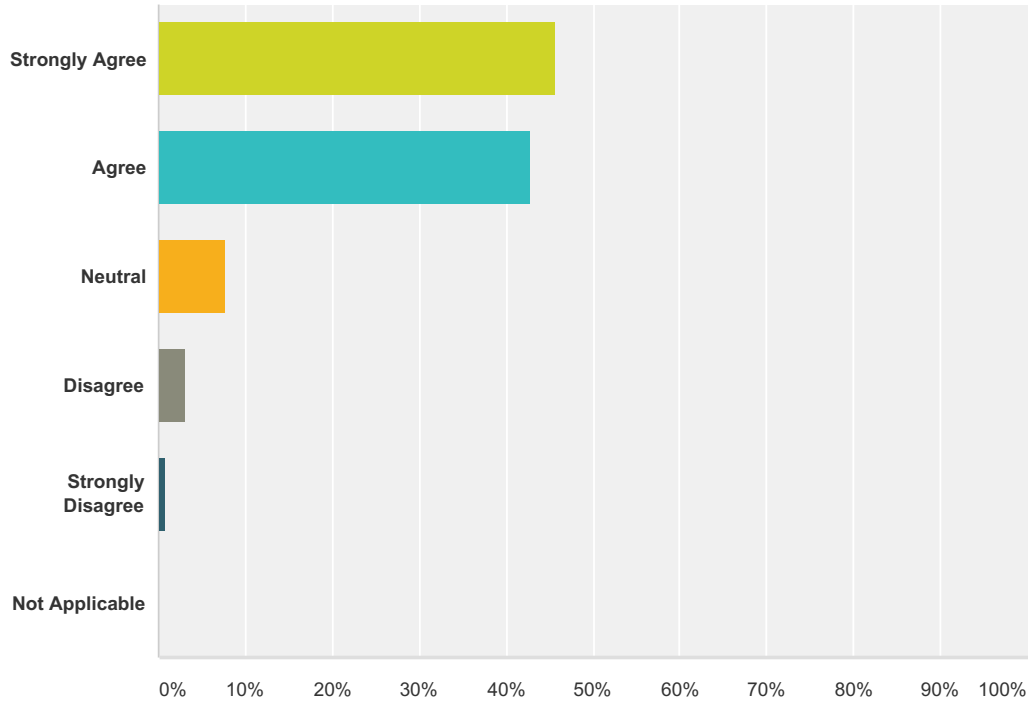


Answer Choices	Responses	
Strongly Agree	53.73%	72
Agree	40.30%	54
Neutral	2.99%	4
Disagree	1.49%	2
Strongly Disagree	0.75%	1
Not Applicable	0.75%	1
<b>Total</b>		<b>134</b>



**Q25 High medical students debt should be alleviated through tuition assistance, loan deferment and loan forgiveness programs.**

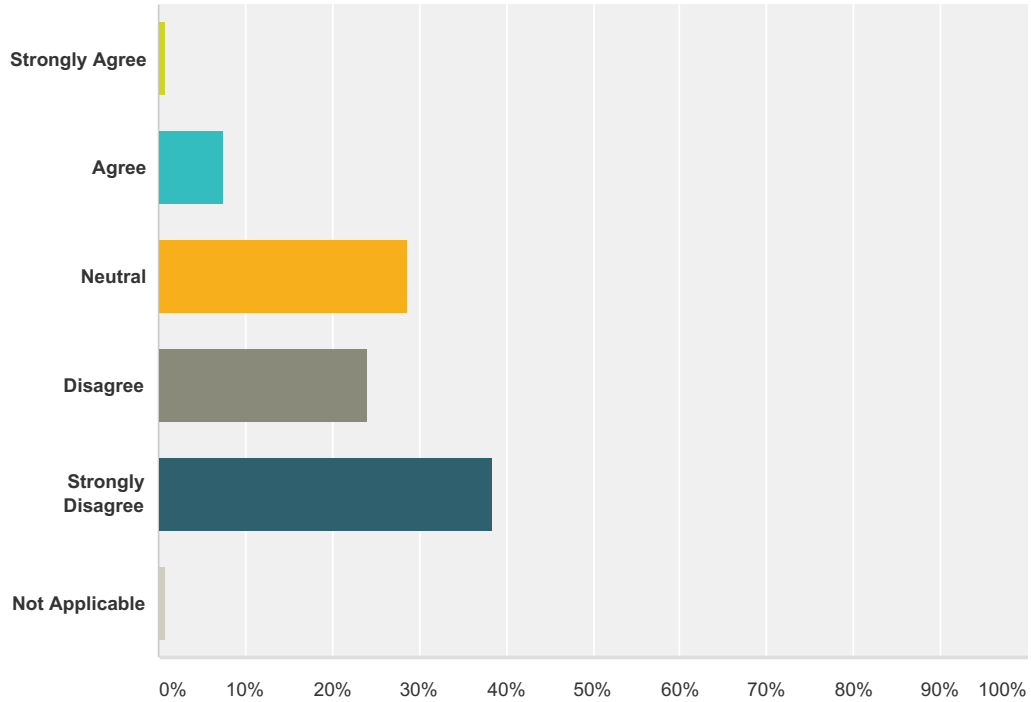
Answered: 131 Skipped: 6



Answer Choices	Responses	Count
Strongly Agree	45.80%	60
Agree	42.75%	56
Neutral	7.63%	10
Disagree	3.05%	4
Strongly Disagree	0.76%	1
Not Applicable	0.00%	0
<b>Total</b>		<b>131</b>

**Q26 I am confident that reimbursement under the proposed single-payer plan at 105% of Medicare will be sufficient to attract and retain physicians.**

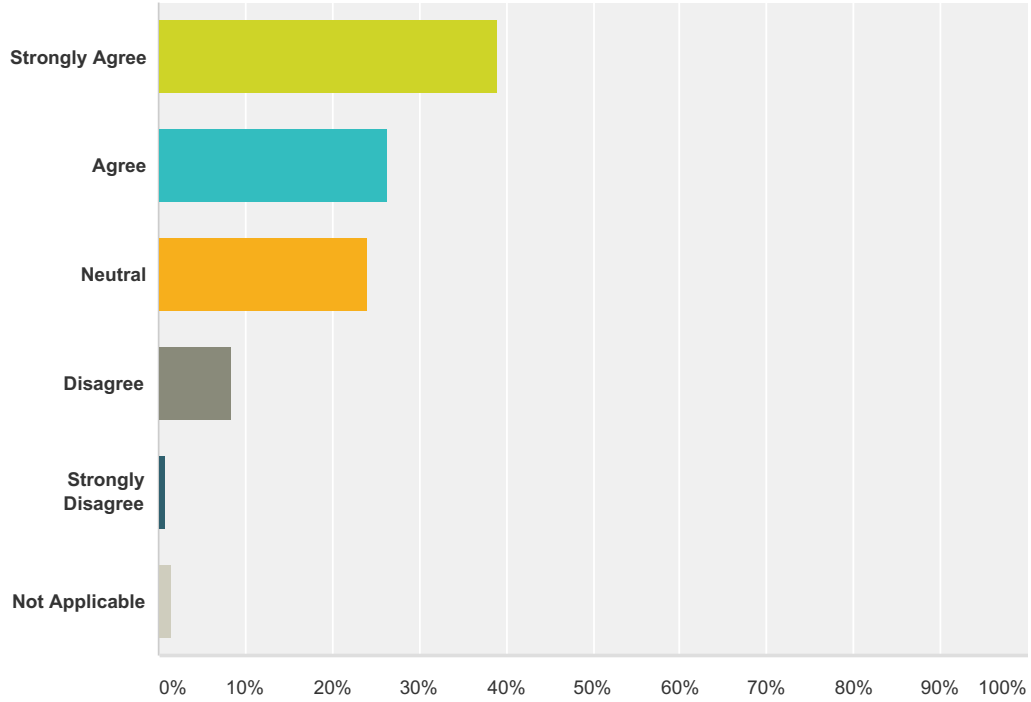
Answered: 133 Skipped: 4



Answer Choices	Responses	
Strongly Agree	0.75%	1
Agree	7.52%	10
Neutral	28.57%	38
Disagree	24.06%	32
Strongly Disagree	38.35%	51
Not Applicable	0.75%	1
<b>Total</b>		<b>133</b>

**Q27 The state should not apply for a single-payer federal waiver until it has approved the public financing for the plan.**

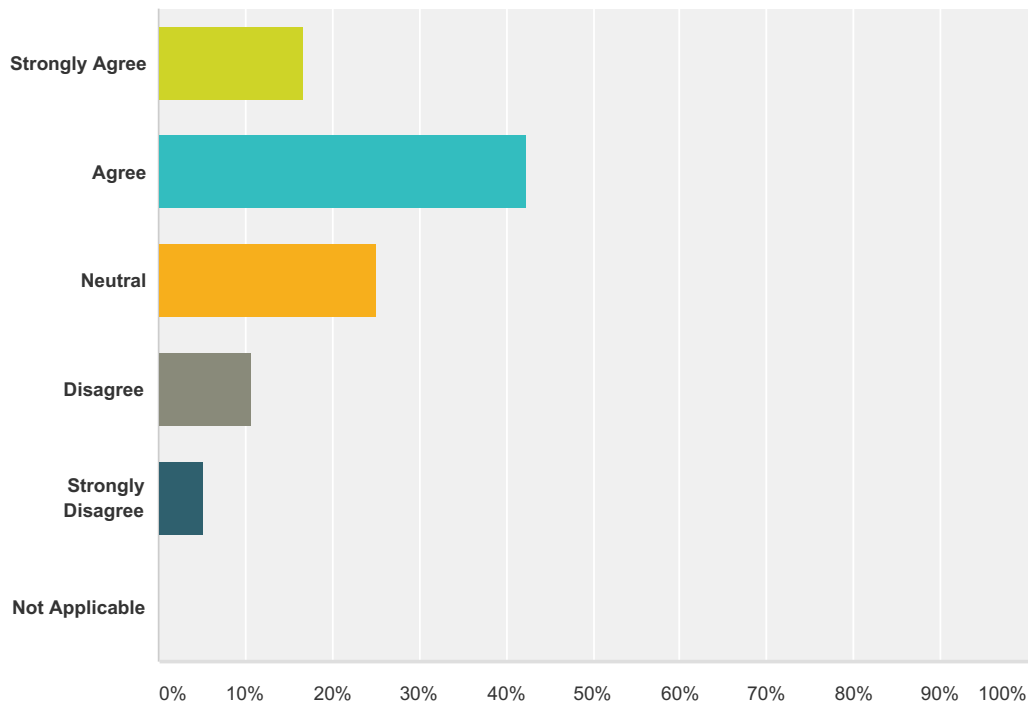
Answered: 133 Skipped: 4



Answer Choices	Responses	
Strongly Agree	39.10%	52
Agree	26.32%	35
Neutral	24.06%	32
Disagree	8.27%	11
Strongly Disagree	0.75%	1
Not Applicable	1.50%	2
<b>Total</b>		<b>133</b>

**Q28 The primary focus of health care reform should be universal coverage.**

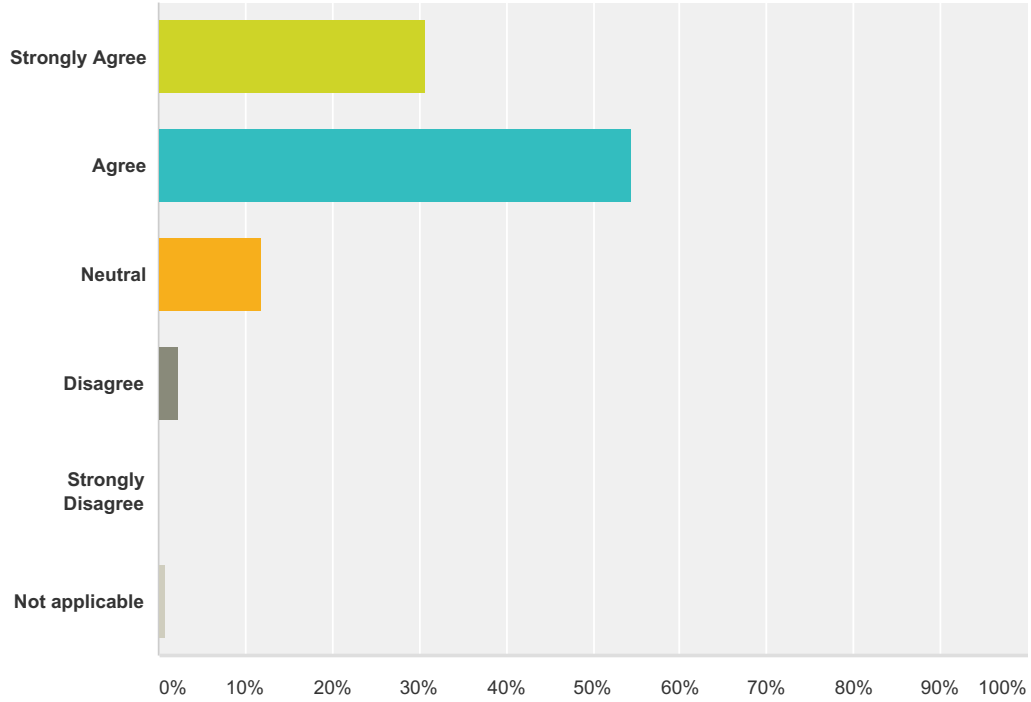
Answered: 132 Skipped: 5



Answer Choices	Responses	
Strongly Agree	16.67%	22
Agree	42.42%	56
Neutral	25.00%	33
Disagree	10.61%	14
Strongly Disagree	5.30%	7
Not Applicable	0.00%	0
<b>Total</b>		<b>132</b>

**Q29 I feel the VMS does a good job in keeping me informed regarding Vermont's health care reform efforts.**

Answered: 134 Skipped: 3



Answer Choices	Responses	
Strongly Agree	30.60%	41
Agree	54.48%	73
Neutral	11.94%	16
Disagree	2.24%	3
Strongly Disagree	0.00%	0
Not applicable	0.75%	1
<b>Total</b>		<b>134</b>

Vermont Medical Society 2013 Physician Survey

**Q30 Thank you for your participation in this survey. Please add any additional comments.**

Answered: 34 Skipped: 103

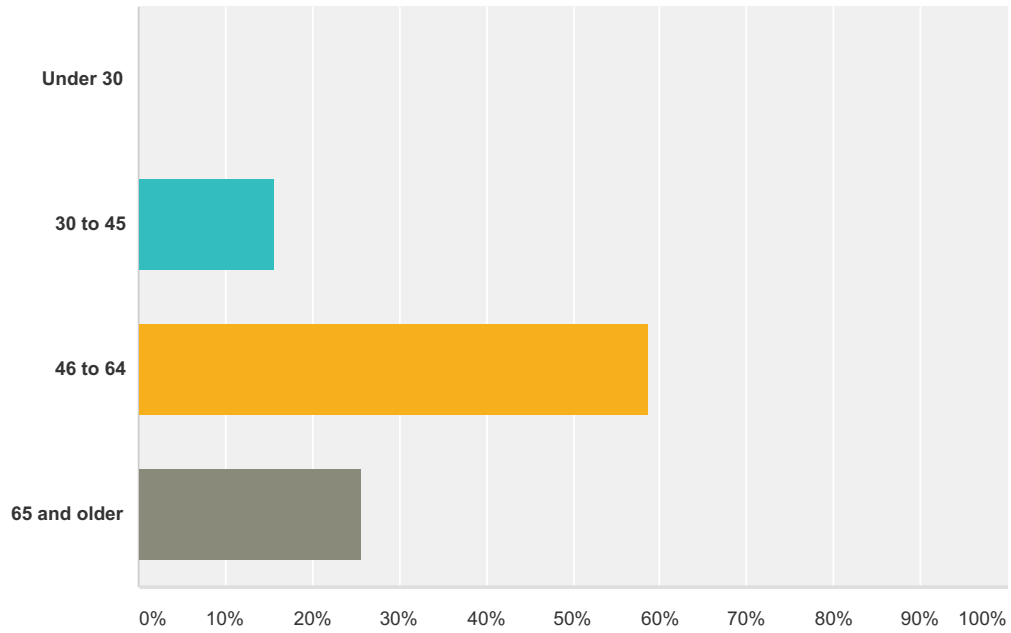
#	Responses	Date
1	Doubling the state's tax burden will destroy the relatively weak state economy and drive businesses & professionals away.	7/31/2013 2:26 PM
2	I am a Direct Care PCP.	7/31/2013 10:50 AM
3	Naturopaths should not be primary care providers & certainly not prescribers of meds.	7/31/2013 10:45 AM
4	Your excellent efforts are greatly appreciated, Thank You	7/31/2013 10:16 AM
5	Question #9 is oddly phrased. My main concern about naturopaths prescribing is that they lack the training to do so. I feel NPs have the clinical background and training to do this however and welcome their participation on the healthcare team.	7/17/2013 6:17 PM
6	The future of care will be sadly diminished due to the low reimbursement and the difficulty in having private practice not be over-run by hospitals	7/12/2013 8:49 AM
7	APRN's can be excellent primary care providers. Naturopath's absolutely CANNOT, especially for children, for reasons that are manifestly obvious. So it is curious that you would include them in the same question, which will make the data circumspect. Are we--VMS--so afraid of APRN's that we consider them alternative care? Joe Hagan	7/10/2013 9:42 PM
8	the state is proposing a 10000 life time limit on bariatric surgery coverage - this will cover nothing and those most in need of bariatric surgery will be discriminated against and left out in the cold again	7/9/2013 9:31 PM
9	Thank you With Patient Choice at the end of life now the law of the Land the VMS has the opportunity to reverse it's former position and embrace the law.	7/9/2013 8:45 PM
10	This state is anti-physician. The VMS is not a good voice for practicing physicians. I plan on returning to N.Y.S.	7/9/2013 10:45 AM
11	You are Welcome! Thank you-	7/9/2013 10:23 AM
12	I wanted to make a comment about the question you have on "lifestyle choices" and their impact on health and illness. I strongly agree that what I call the "tools of health" are critical in both decreasing medical costs and more importantly, enhancing our overall well being. I think the word "choice" is a tricky one, because whether people are choosing poorly or simply unable to afford the right choices, our goal as a health care system should be to make the good choices the easy ones. I envision a health care system that includes medical care and access to health, under one umbrella called "health care". A single payer system can allow such a system, since it is government that determines policy and infrastructure (such as taxes on junk food, or constructing sidewalks and bike paths) that could have a meaningful impact on even the poorest Vermonters' ability to lead healthy lives.	7/8/2013 11:20 PM
13	Please add an additional button under practice- " other" or ,"administrative".	6/29/2013 11:36 AM
14	Question 8 Comments about Electronic health records; Causing long delays in time with patients & great distraction from personally assessing the patient!	6/26/2013 10:01 AM
15	The Basin Harbor Club is not easy to get to. I will never go again if you have meetings there.	6/26/2013 9:35 AM
16	The State reform effort is already disruptive of my ability to recruit specialists. The focus on primary care is without proven benefit. Quality indicators are burdensome and require physicians to check off boxes rather than providing care. With Federal Reform legislation in place, it is unclear why the State of VT feels the need to go beyond this. We have a very high quality system in place in VT, and we are at substantial risk of alienating all of our specialists.	6/25/2013 7:34 AM
17	Physician shortage will raise cost!	6/19/2013 11:59 AM
18	The proposed single-payer plan of 105% medicare will put me out of business (I'm a primary care internist). It's that simple!	6/19/2013 11:44 AM

## Vermont Medical Society 2013 Physician Survey

19	<p>13. loan forgiveness fo rmedical students should be based on specialty.. currently we should not be forgiving loans of very highly reimbursed providers, and providers for which there is an oversupply in some regions (for example: peds and OB/GYN in Chittenden co). 14: single payer reimbursement should not be based on MEDICARE as the AMA's RUC is heavily specialty and procedurally dominated, causing severe flaws in the Medicare fee schedule. If there is to be a single fee schedule it needs to be recreated with an impartial panel of experts who use value to assign fees. Moreover, primary care needs a new set of fees...AND management fees for non face to face care will need to be substantial. 9. A detailed definition of what is required to be a primary care physician in Vermont's health system is needed. we do not need more partialist primary care docs</p>	6/17/2013 6:09 PM
20	<p>The infrastructure upon which the above propositions are predicated needs serious attention from physicians, e.g. security of EHR's, interoperability or uniformity of EHR's, the ability to conduct clinical research using every day practice data residing within EHR's (including the impact of that upon presumed "quality" measures), and, not least, societal mechanisms for financing this transformation.</p>	6/17/2013 4:24 PM
21	<p>Health care reform is why I retired early. Drs. no longer have patients, they have objects with an ICD code that bounce through the system till they die.</p>	6/17/2013 3:09 PM
22	<p>Wording of some questions isn't getting at the most important aspects of the issues. For instance, it's one thing to ask whether we think more practices will be bought up by hospitals; it's another to ask whether or not we think this is a good development. Please ask that next year. It's one thing to ask whether we think the VMS should work with other organizations to evaluate health care reform; it's another to ask whether it should do so on its own (I disagree with the former, agree with the latter, because our interests as physicians are not identical with those of any other organization, and I believe Vermont needs to hear what OUR feedback is). Please ask that latter version next year.</p>	6/16/2013 2:37 PM
23	<p>All I see are efforts toward single payor and greater insurance coverage. All of these plans will be "dead in the water" if Primary Care is not strenuously rehabilitated. Who are all of these new patients going to see? Where is the cost control? Single payor or not, punitive reporting and prior-approvals, etc are what's behind "the hassle factor". Meanwhile, specialists make 2 to 4 times as much as PCPs. And this plus the hassle factor have led students to not choose primary care and others, such as myself, to have left the field. A 5% increase in reimbursement is laughable.</p>	6/16/2013 7:31 AM
24	<p>health care reform should have an out,so an unhappy subscriber could go private,as in Britain.</p>	6/15/2013 7:09 PM
25	<p>Please discuss what requirements and penalties will be informed on the patients when physicians are paid for "performance".</p>	6/14/2013 12:23 PM
26	<p>I think you have a challenging job in the current political climate. Many progressives don't really trust physicians and feel fairly comfortable with their gut feelings on many healthcare related matters. I think that for many in the progressive community, healthcare is more about doing something which makes them feel virtuous rather than doing something effective or realistic.</p>	6/14/2013 4:36 AM
27	<p>VMS should more strongly and publicly support legislative efforts like sugar sweetened beverage tax and higher tobacco tax as examples of legislation that will help with behavior change, and raise funds that can help poor people get coverage.</p>	6/13/2013 11:08 PM
28	<p>I'll get behind quality measures when they actually measure quality</p>	6/13/2013 9:24 PM
29	<p>Do to the present reimbursement structure - public and private - for anesthesiologists, private individual or group practice is no longer a viable option in Vermont. All practices are now either wholly owed or subsidized by local facilities. I presently cross over to Northern NY and practice @ CVPHMC as a per diem active staff anesthesiologist.</p>	6/13/2013 6:46 PM
30	<p>VMS has been a tireless advocate for the physicians in the state of Vermont. I am very glad to be part of this organization.</p>	6/13/2013 4:52 PM
31	<p>In follow-up of question 4 ("Greater personal responsibility for lifestyle choices should be an integral part of health care reform"), I think that incentives reform should be based on effectiveness research. In follow-up of question 9 ("Independent practice APRNs and prescribing ability of Naturopaths will cause a decline in primary care physicians in Vermont"), I'm not worried about primary care physicians or about the patients of APRNs. I am worried, however, about the harm that may come to patients at the hands of naturopaths.</p>	6/13/2013 4:47 PM
32	<p>Private practice primary care will not survive the relentless mandates and administrative burdens being piled on us.</p>	6/13/2013 4:06 PM
33	<p>The administrative burdens associated with recent and coming changes is making practice more costly, less efficient and does not improve patient care. The "quality measures" are arbitrary, invasive, time consuming, do not reflect any particular quality of care. They have never been shown to improve any aspect of care and are clearly increasing costs. The reimbursement rates are causing centralization of care, limiting access and driving prices up for specialty care and diagnostic procedures. The changes are being driven by lawyers and politicians (including AMA, AARP) and bureaucrats who are the only ones benefiting from the changes in the long run. Patients' needs and independent physicians are being driven into the ground.</p>	6/13/2013 3:39 PM
34	<p>I will be retired as of July 1, 2013. I think we are going to see chaos in health care in the next few months.WJG</p>	6/13/2013 2:51 PM

### Q31 What is your age?

Answered: 128 Skipped: 9

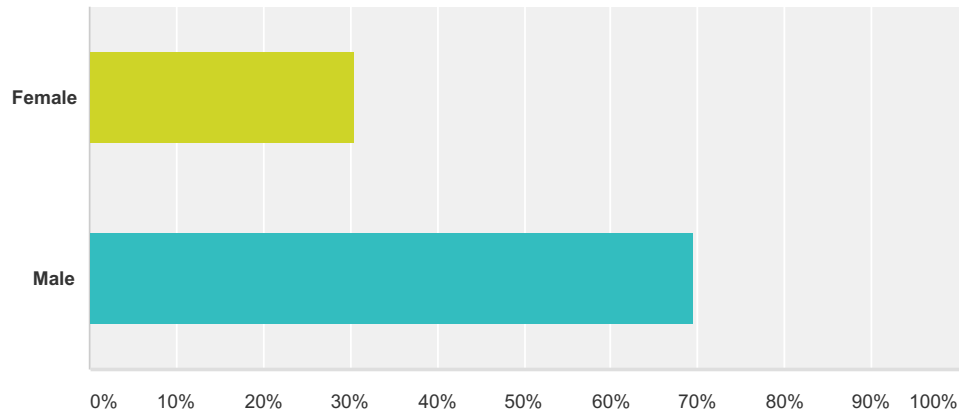


Answer Choices	Responses
Under 30	0.00% 0
30 to 45	15.63% 20
46 to 64	58.59% 75
65 and older	25.78% 33
<b>Total</b>	<b>128</b>



### Q32 What is your gender?

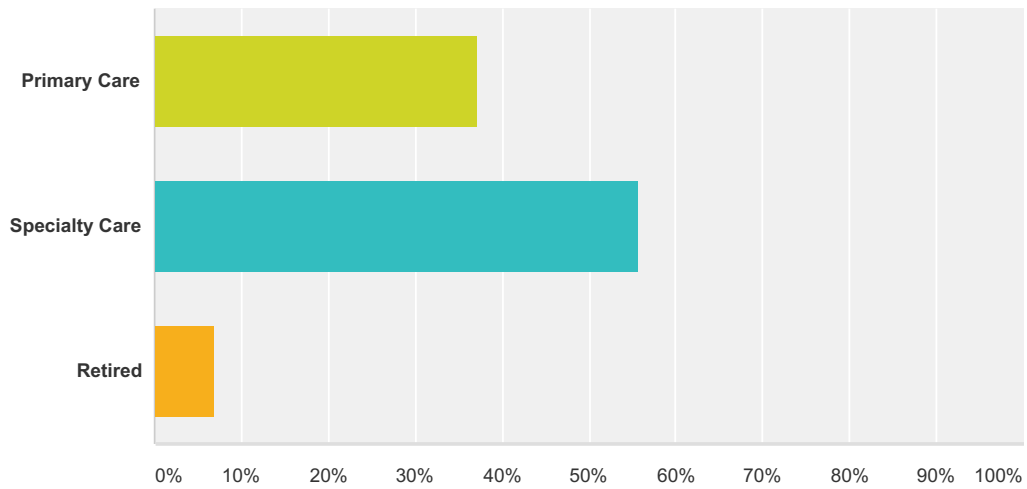
Answered: 128 Skipped: 9



Answer Choices	Responses
Female	30.47% 39
Male	69.53% 89
<b>Total</b>	<b>128</b>

### Q33 Which of the following best describes your practice?

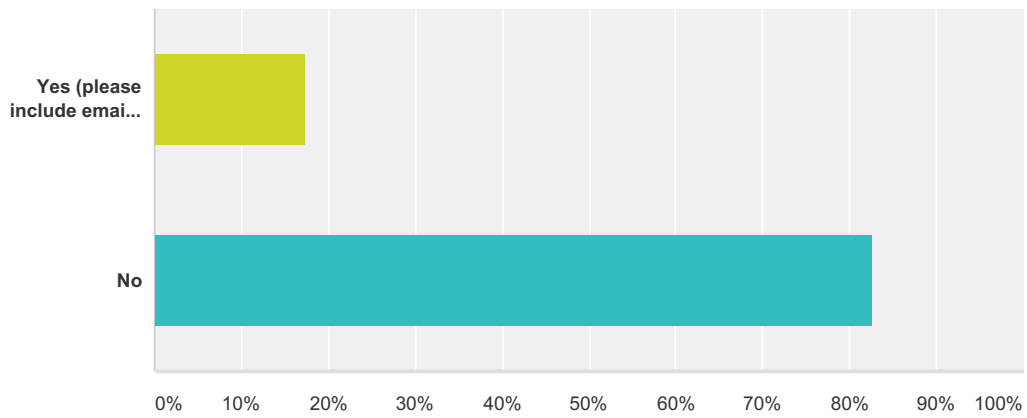
Answered: 129 Skipped: 8



Answer Choices	Responses	
Primary Care	37.21%	48
Specialty Care	55.81%	72
Retired	6.98%	9
<b>Total</b>		<b>129</b>

**Q34 If you are not a member of VMS, would like to receive information about joining?**

Answered: 29 Skipped: 108



Answer Choices	Responses	
Yes (please include email address below)	17.24%	5
No	82.76%	24
<b>Total</b>		<b>29</b>

Vermont Medical Society 2013 Physician Survey

**Q35 Name and address (optional):**

Answered: 20 Skipped: 117

#	Responses	Date
1	Roshan Siva, MD RRMC	7/31/2013 2:39 PM
2	David Charnock, M.D. Rutland	7/31/2013 2:31 PM
3	Did not give address so we could mail VMS Information.	7/31/2013 2:22 PM
4	Howard Weaver 711 Wilmouth Hill Rd. Shrewsbury, VT 05738	7/31/2013 10:46 AM
5	Michael J Kenosh, MD 160 Allen Street Rutland, VT 05701	7/31/2013 10:17 AM
6	Joe Hagan jhagan@aap.org	7/10/2013 9:43 PM
7	p forgione md	7/9/2013 9:31 PM
8	David Sischy, M.D. Suite 300 149 Hospital Drive Bennington, VT 05201	7/9/2013 10:45 AM
9	Dr. Butsch	7/9/2013 10:25 AM
10	Rebecca Jones M138 Elliot St Suite One Brattleboro VT 05301 (ps sorry this is late)	7/8/2013 11:21 PM
11	Joel Silverstein Morrisville	6/28/2013 10:02 AM
12	Mark Price 97 Sherman Drive St. Johnsbury, VT 05819	6/26/2013 10:42 AM
13	Kris Jensen Berlin Family Health	6/26/2013 10:10 AM
14	John A Malcolm III 116 Porter Drive Middlebury, VT 05753	6/26/2013 9:48 AM
15	Don Weinberg, MD 367 Southfield Dr Williston, VT 05495 s/p 20yrs of primary care, now a hospitalist.	6/16/2013 7:32 AM
16	Howard Weaver, M.D. Rutland Regional Medical Center	6/15/2013 7:11 PM
17	Hugh Hermann, MD Woodstock	6/14/2013 7:50 AM
18	Charles Egbert 171 Stoney Fields Road Manchester Center, VT 05255	6/14/2013 4:36 AM
19	John Bookwalter MD 20 Roberts Farm Lane Putney Vt 05346	6/13/2013 4:28 PM
20	Walter J Griffiths 81 Westminster Terrace Bellows Falls, VT 05101	6/13/2013 2:51 PM