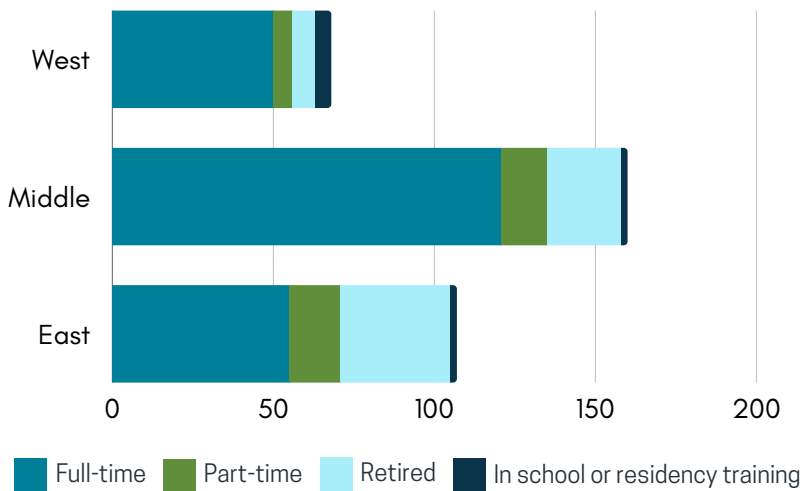


Survey Summary:

In November 2023, the Tennessee Medical Association (TMA) deployed a 10-question survey to its members to gauge policy positions on legislative issues expected to arise in the 2024 session. The purpose of the survey was to ensure TMA’s government affairs staff is effectively leveraging its internal resources to be responsive to the needs of its membership as a whole. Specifically, the survey was designed to answer five primary questions →

Overview of Survey Sample:

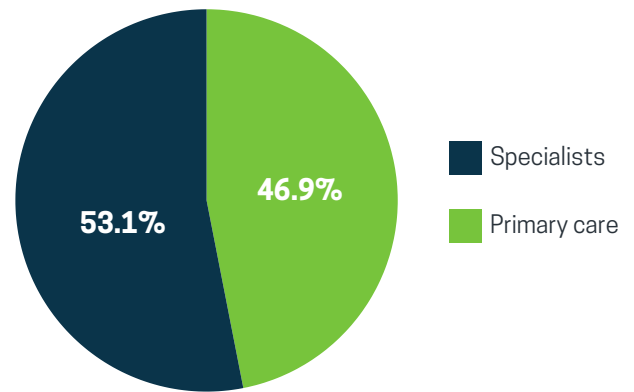
Of 8,519 recipients, a total of 341 respondents completed the survey. A breakdown of the survey sample is represented in the charts below.



Almost half of all survey respondents (47.6%) practice in Middle Tennessee. East Tennessee physicians represented 32.1% of the sample and West Tennessee physicians represented 20.2% of the sample.

A majority of the survey sample (66.8%) were physicians practicing full-time. The second largest group of respondents were retired physicians (19.4%), followed by part-time (11.2%), then students and residents (2.7%).

- RESEARCH QUESTION #1**
 What policy position should TMA take as it relates to Certificate of Need (CON) laws?
- RESEARCH QUESTION #2**
 What policy position should TMA take as it relates to Corporate Practice of Medicine (CPOM) laws?
- RESEARCH QUESTION #3**
 What factors have the greatest impact on physician career fatigue?
- RESEARCH QUESTION #4**
 How important is TMA’s scope of practice advocacy relative to other healthcare policy priorities?
- RESEARCH QUESTION #5**
 Should TMA continue to offer insurance advocacy services to its members?



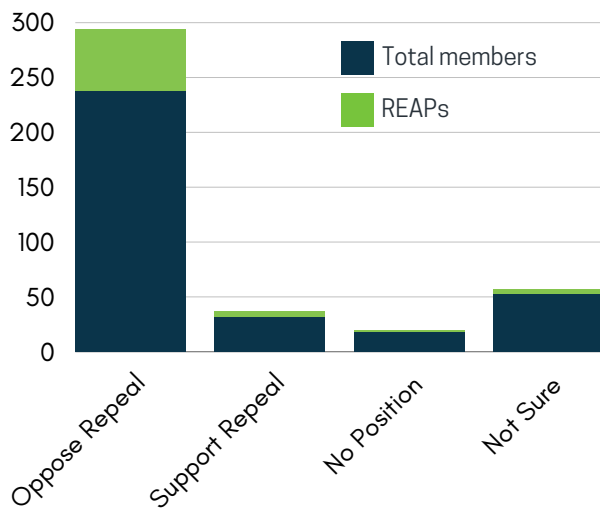
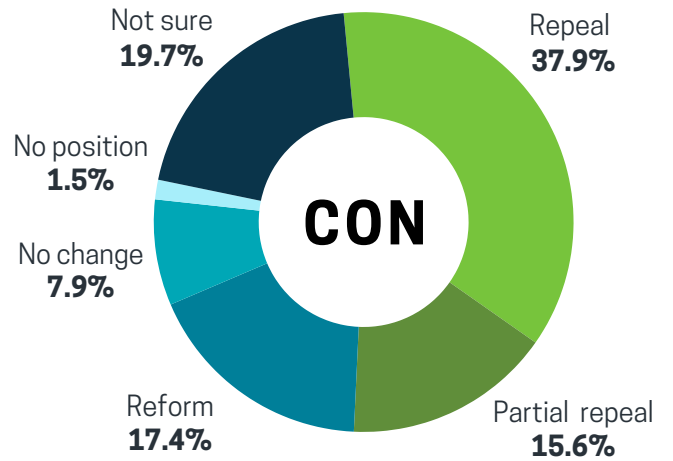
One-hundred and sixty (160) survey respondents practice in primary care (includes internal medicine, family medicine, obstetrics/gynecology, and pediatrics). One-hundred and eighty-one (181) respondents were specialists.

Survey Results:

RQ1: What policy position should TMA take as it relates to Certificate of Need (CON) laws?

Overview: Of 340 total responses, a majority (60.4%) of members felt CON laws do not achieve their primary goal of containing healthcare costs. However, no clear majority was reached as it relates to what policy position TMA should take - repeal, partial repeal, reform, no change, or no position. While total repeal was the most commonly selected answer at 37.9% of total votes, the second most selected answer was “not sure,” with 19.7% of votes.

Conclusion: TMA will take no policy position on CON laws.



Note: REAPs is a commonly accepted acronym for radiology, emergency medicine, anesthesiology, and pathology.

RQ2: What policy position should TMA take as it relates to Corporate Practice of Medicine (CPOM) Laws?

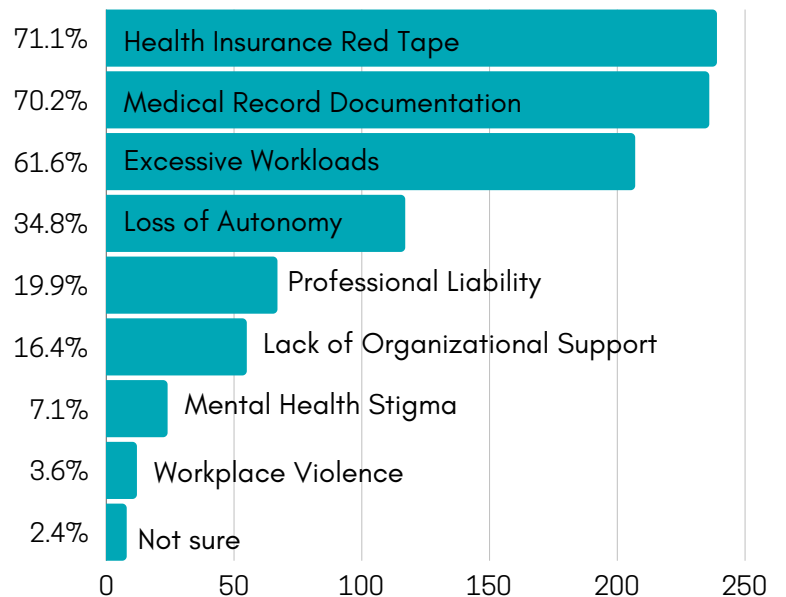
Overview: Of 341 responses, a majority (69.8%) of members indicated that CPOM laws are necessary to prioritize the physician-patient relationship and therefore TMA should oppose repeal. Because CPOM laws directly affect four specialties: anesthesiology, emergency medicine, pathology, and radiology, TMA weighted these responses to answer RQ2. While these four specialties only accounted for 19.6% of the total data set, their answers clearly indicate a strong opposition to the repeal of CPOM laws (83.5%).

Conclusion: TMA will oppose the repeal of CPOM laws.

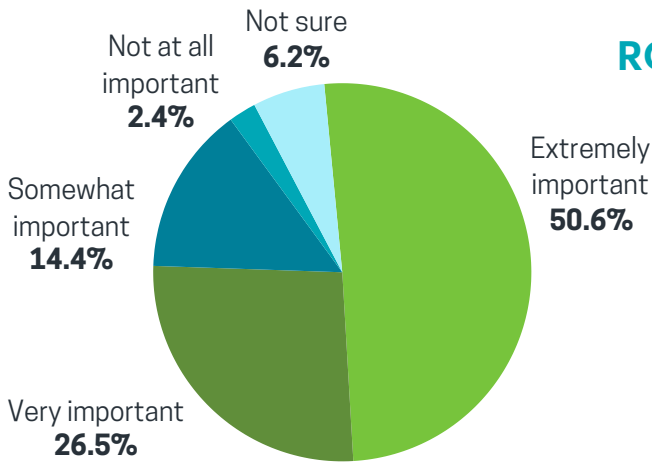
RQ3: What factors have the greatest impact on physician career fatigue?

Overview: In RQ3, participants were asked to select three answers. Of 336 responses, the top three were **1)** health insurance red tape, **2)** medical record documentation and coding, and **3)** excessive workloads, inadequate staffing and/or long hours. Full ranked results are shown in the chart to the right.

Conclusion: Based on responses, TMA will focus its advocacy efforts on improving the system-level inefficiencies that contribute to physician burnout by collaborating with health plans and hospital systems.



RQ4: How important is scope of practice advocacy relative to other healthcare priorities?



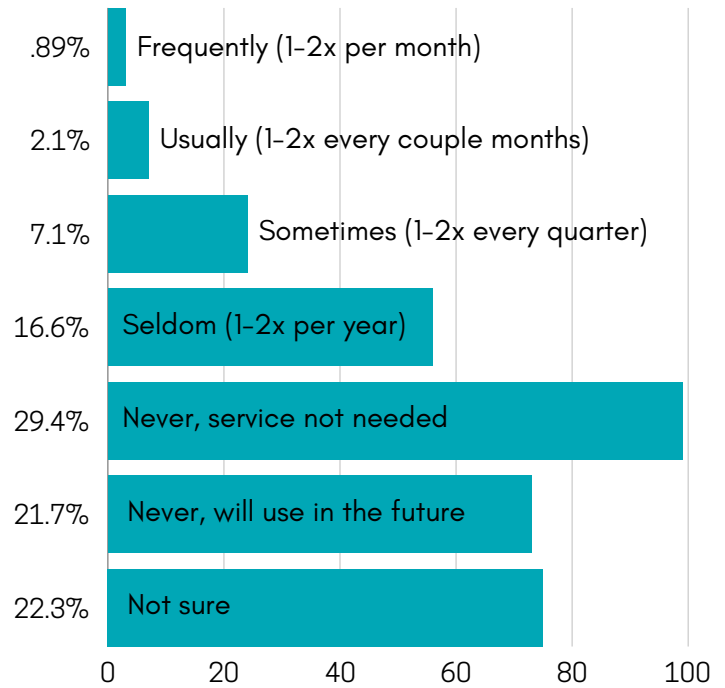
Overview: Of 340 total responses, a majority of members (77.1%) ranked scope of practice as “extremely important” (50.6%) or “very important” (26.5%). Less than 3% of membership ranked it as “not at all important.”

Conclusion: TMA will take an active approach to preserving the physician-led, team-based care model in Tennessee.

RQ5: Should TMA continue to offer Insurance Advocacy services to its members?

Overview: Based on 337 responses, the most commonly selected answer was “never, our practice does not need this service” (29.4%); however, the second most selected answer was “not sure” (22.3%). While it remains unclear the level to which membership currently utilizes this service, what is clear from the data is that only a small percentage utilizes it frequently (<1%). Notably, the third largest answer response was “never, I did not know TMA offered this service and will use it in the future” (21.7%).

Conclusion: Given that over 70% of members cited health insurance red tape as a dominant contributor to physician burnout in RQ3, TMA will continue to advocate with health plans on behalf of its members for fair and timely reimbursements and reductions in hassles.



Additional Findings:

In addition to the five primary research questions, the survey included an open-ended question to allow members to provide feedback on additional policy issues they would like to see TMA advocate for in the future. One-hundred and twenty-one (121) respondents provided suggestions on a range of policy topics. Of this subgroup, the most common recommendation was abortion and/or family planning. Other top issues selected are shown in the chart to the left. **Note: only recommendations that received more than one vote are included in this chart.**

