



Covid-19 Impact Survey

California Society of Anesthesiologists

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Background Data: Gender Breakouts

Gender	% Responses	Total Responses
Male	66.9%	228
Female	32.6%	111
Did not answer	0.6%	2

Gender	30-40	40-50	50-60	60+
Male	55.6%	58.8%	65.1%	84.0%
Female	44.4%	41.1%	34.9%	16.0%

Gender	Private Practice	Academic Practice
Male	74.4%	48.4%
Female	25.6%	51.5%

- Follow up to initial analysis of economic hardship among CSA Physicians
 - First analysis (included in Appendix) focused on overall economic hardship, income loss and furloughs/involuntary Vacations
 - Was broken out by gender, age and practice type
- Deeper look into finding that female physicians were put on furlough at a higher rate than male counterparts
 - Initial finding showed 41.4% of female physicians furloughed compared to 25.9% of male physicians



Furloughs/Involuntary Vacation

Gender	All Physicians		Private Practice		Academic Practice	
	% Responses	% of Furloughs	% Responses	% of Furloughs	% Responses	% of Furloughs
Male	66.9%	59.8%	74.4%	60.8%	48.4%	53.8%
Female	32.6%	40.2%	25.6%	46.2%	51.5%	46.2%

- The difference in furloughs among male and female physicians is most pronounced within private practice
 - Women make up 25.6% of all respondents in private practice, however they make up 46.2% physicians who have been furloughed within private practice
 - This is a difference of 20.6% between the proportion of female physicians in private practice and the proportion who have been furloughed
- In academic practice there is a roughly equal split between male and female physicians with female physicians being furloughed at a slightly lower rate compared to overall representation



Background Data

- Analyzing additional economic questions by practice type including:
 - Actions taken by practices during pandemic
 - Use of CARES Act by medical practices
 - Accepting advanced payments from Medicare



Background Data: Economic Questions

What actions has your practice had to take as a result of the COVID-19 crisis? (check all that apply)

- Laid off staff and/or physicians
- Furloughed staff and/or physicians
- Implemented salary reductions for staff and/or physicians
- Reduced staff and/or physician hours
- Used personal savings to keep practice open
- Took out personal or business loans
- Reduced the types of services offered
- Delayed purchase of equipment, supplies, medications, technology
- Closed my practice permanently
- Closed my practice temporarily
- Other: _____



Background Data: Economic Questions

Have you or your group applied for a loan created by the CARES Act from the Small Business Administration or a private lender?

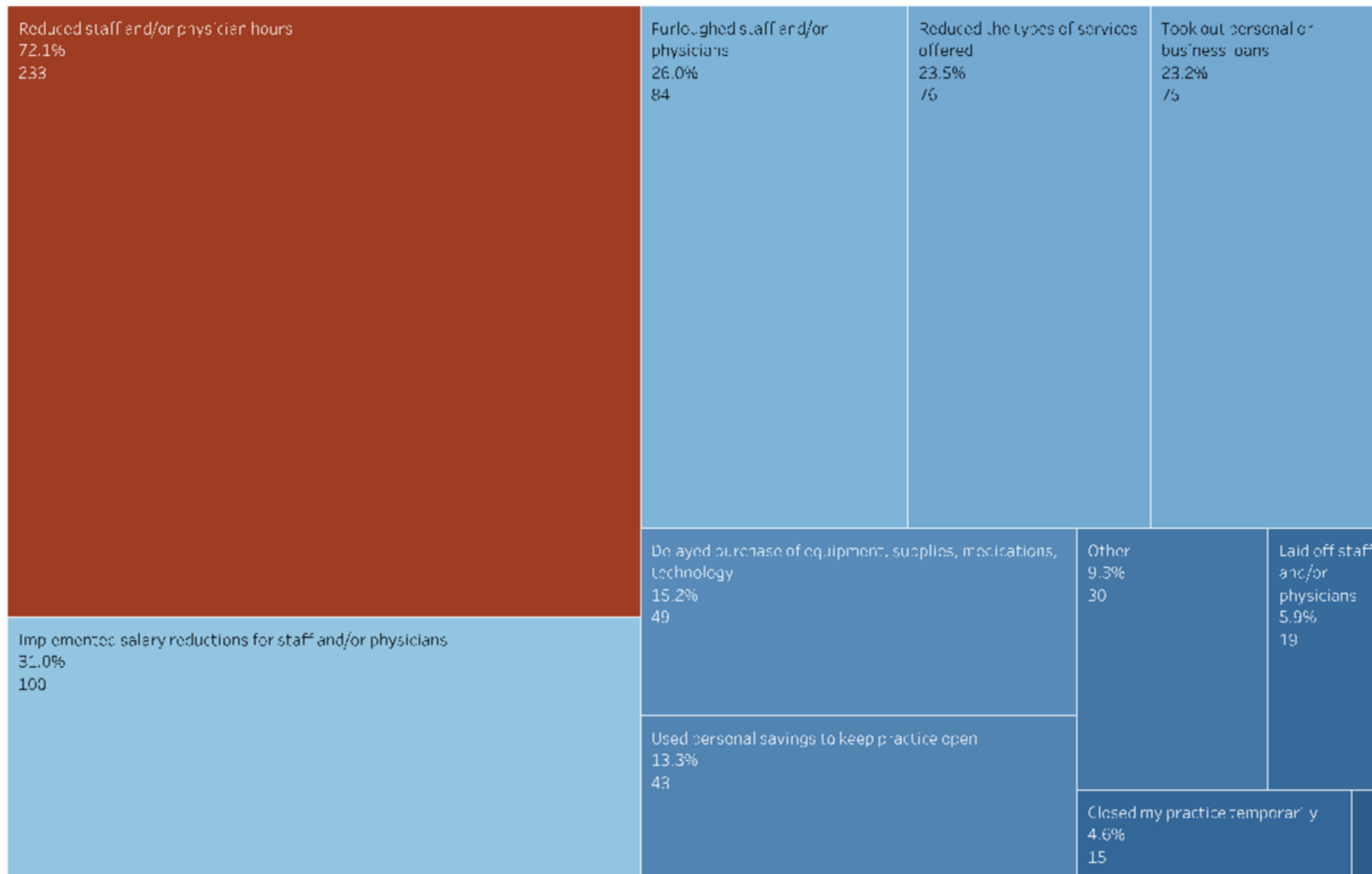
- Yes
- No
- Other_____

Have you or do you plan to request an advanced payment from Medicare?

- Yes
- No
- I didn't know this was an option



Actions Taken: Overall



- The top actions taken by practices in response to Covid-19 have been:
 - Reducing staff/physician hours (72.1%)
 - Salary reductions for staff/physicians (31.0%)
 - Furloughs of staff/physicians (26.0%)
 - Reduction in services (23.5%)
 - Taking business loans (23.2%)



Actions Taken: Academic vs Private

Action taken	Academic	Private
Reduced staff and/or physician hours	72.6%	72.5%
Implemented salary reductions for staff and/or physicians	25.0%	33.9%
Furloughed staff and/or physicians	16.7%	29.2%
Reduced the types of services offered	29.8%	20.6%
Took out personal or business loans	2.4%	31.3%
Delayed purchase of equipment, supplies, medications, technology	16.7%	14.2%
Used personal savings to keep practice open	1.2%	17.6%
Other	14.3%	7.3%
Laid off staff and/or physicians	0%	8.2%
Closed my practice temporarily	1.2%	5.6%
Closed my practice permanently	0%	0.9%

- Private and academic practices have reduced physician hours at the same rate
- Private practices have taken several actions at a >5.0% higher rate than academic:
 - Salary reductions: +8.9%
 - Furloughs: +12.5%
 - Loans: +28.9%
 - Personal Savings: +16.4%
 - Lay offs: +8.2%
- Academic practices have taken only one specific action at a >5.0% higher rate than private practices:
 - Reduction in services: +9.2%



CARES Act Usage

Used CARES Act	% of Responses				Response Count			
	Academic	Private Large	Private Medium	Private Small/Solo	Academic	Private Large	Private Medium	Private Small/Solo
Yes	5.4%	51.5%	62.2%	44.6%	5	34	69	29
No	90.2%	39.4%	34.2%	44.6%	83	26	38	29
Other	4.3%	9.1%	3.6%	10.8%	4	6	4	7

- Large and Medium Private Practices have used the CARES Act at the highest rates
 - Large Practices: 51.5%
 - Medium Practices: 62.2%
- Academic Practices have used the CARES Act at the lowest rate (5.4%)
- Small/Solo Practices are evenly split between using and not using the CARES Act



Medicare Advanced Payments

Advanced Payment	% of Responses				Response Count			
	Academic	Private Large	Private Medium	Private Small/Solo	Academic	Private Large	Private Medium	Private Small/Solo
Yes	7.7%	12.7%	29.4%	12.3%	7	8	32	8
No	65.9%	39.7%	34.9%	53.8%	60	25	38	35
Didn't Know	26.4%	47.6%	35.8%	33.8%	24	30	39	22

- Physicians from Medium Sized Private Practice report the highest rate of Medicare Advanced Payments
- Academic practices use Medicare Advanced Payments at the lowest rate
- >25.0% of respondents from all practice types were not aware of this option including 47.6% of respondents from large practices



Appendix

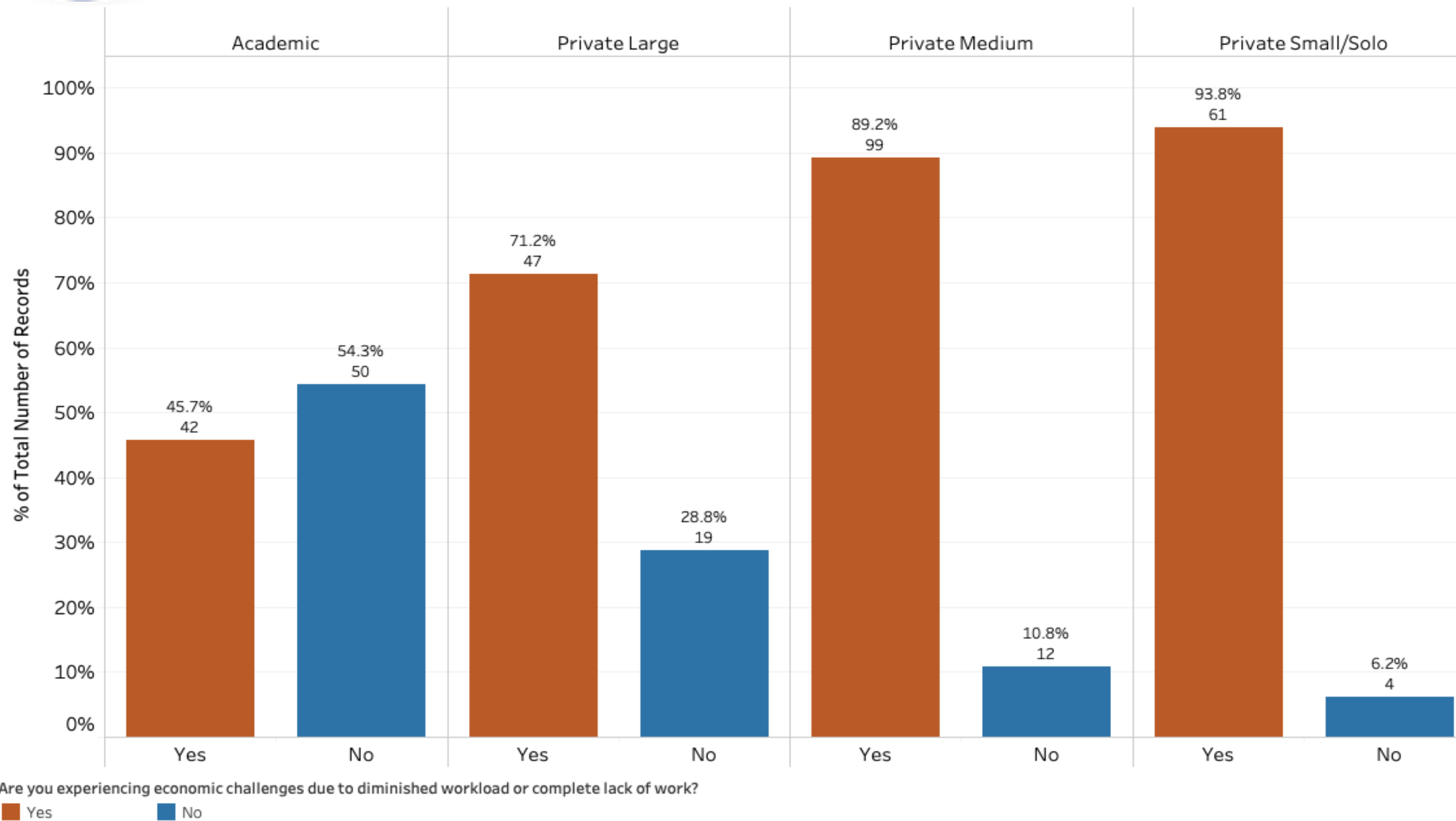


Background Data

- Survey sent to assess economic impact of Covid-19 on CSA members
- 344 responses collected
 - 4 empty responses removed from data
 - Several answers were incomplete but still considered
- Trainees and residents were not analyzed due to an insufficient number of responses



Economic Hardship by Practice Type



- 74.4% of all Physicians surveyed reported experiencing economic hardship due to Covid-19
- Medium and Small Private Practices have been hardest hit:
 - Medium: 89.2% experiencing hardship
 - Small: 93.8 % experiencing hardship
- Physicians in academic practice have fared better with only 45.7% experiencing hardship



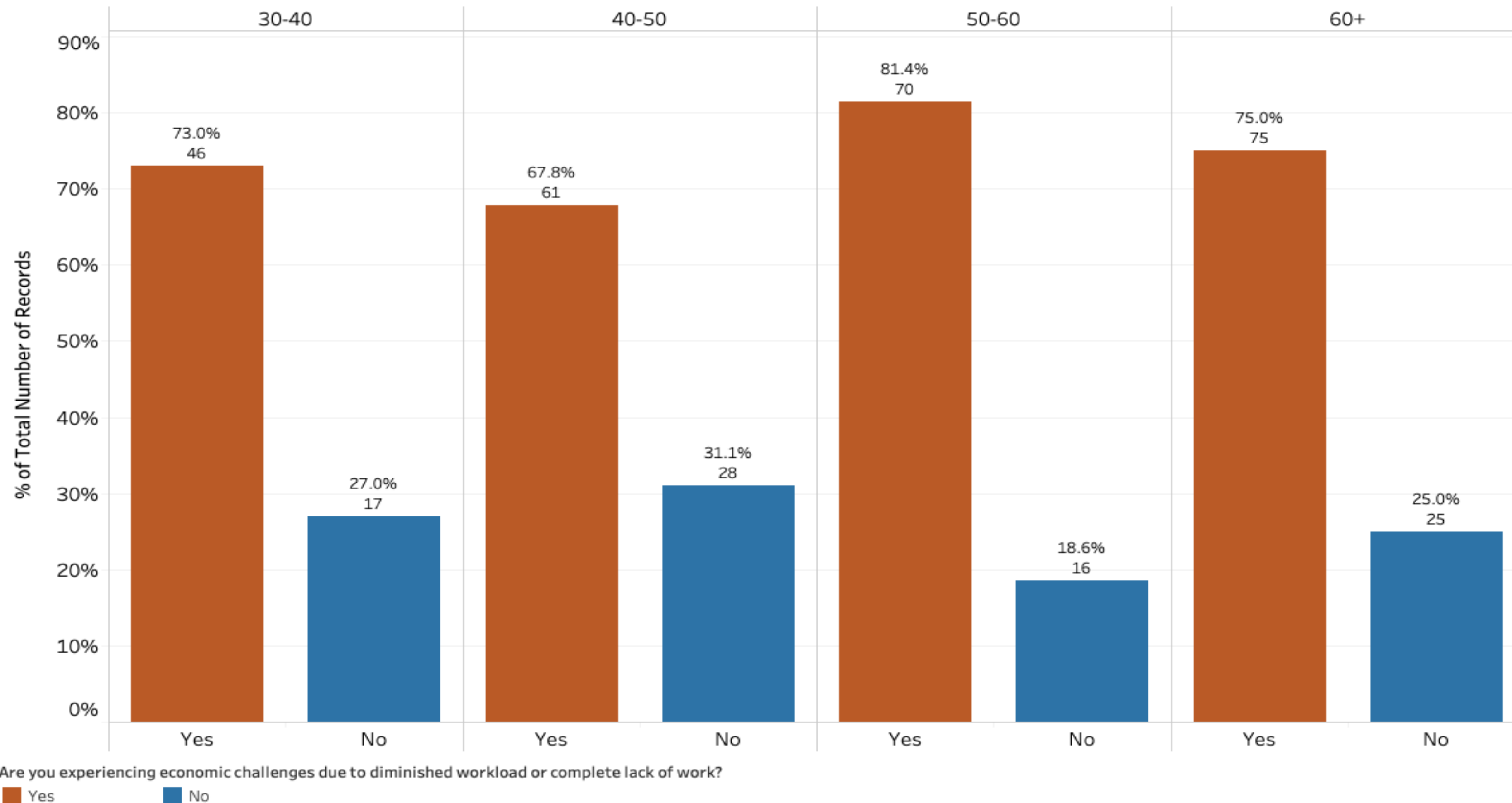
Economic Hardship by Practice Type

Practice Type	% of Responses		Total Responses	
	Yes	No	Yes	No
Academic	45.7%	54.3%	42	50
Private Large	71.2%	28.8%	47	19
Private Medium	89.2%	10.8%	99	12
Private Small/Solo	93.8%	6.2%	61	4
Grand Total	74.4%	25.3%	253	86

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Economic Hardship by Age



- Physicians in all age groups are experiencing hardship
- The 50-60 age group has been hardest hit:
 - 81.9% report experiencing hardship
- Physicians age 40-50 experience hardship at the lowest rate
 - 67.8% experience hardship



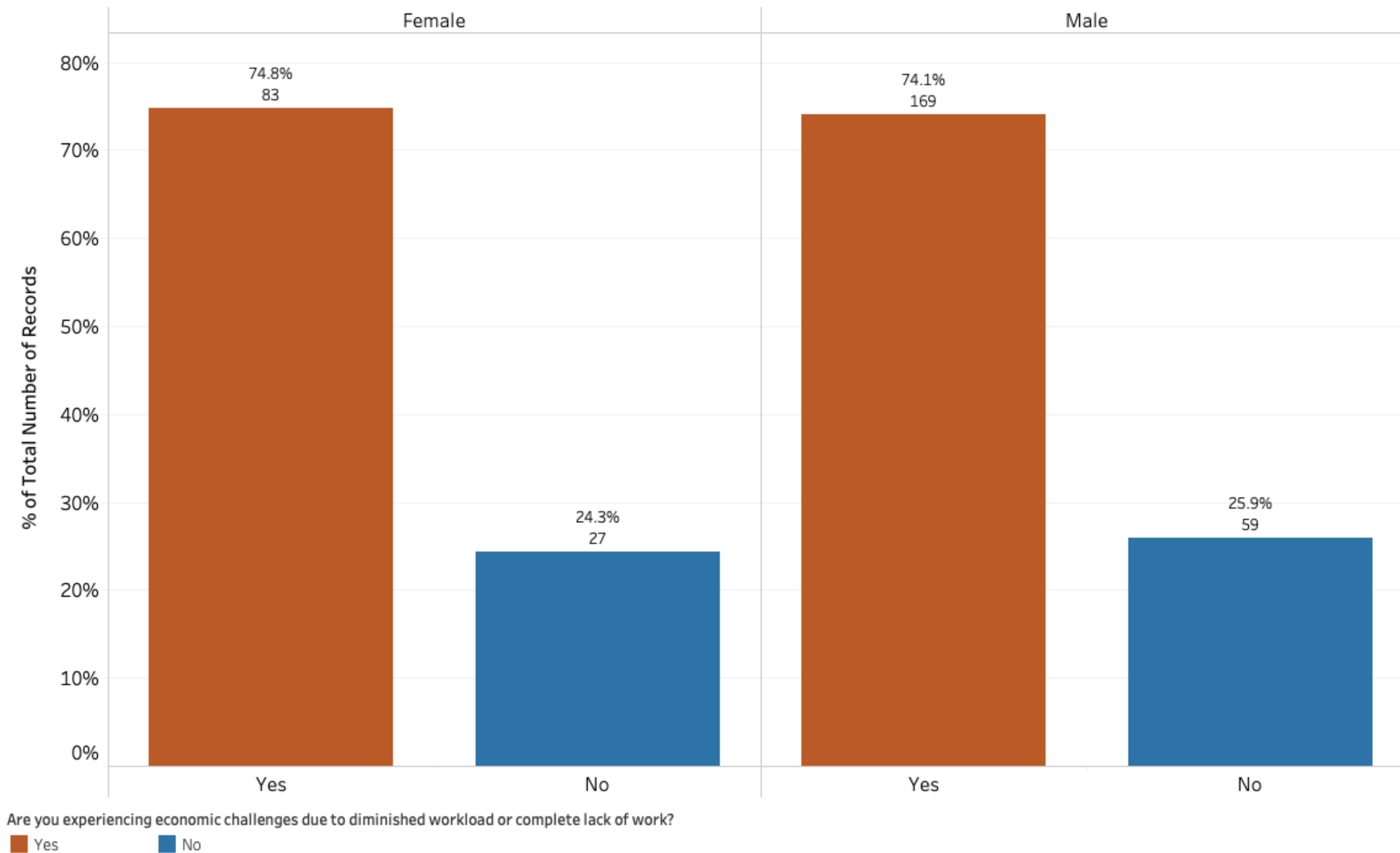
Economic Hardship by Age

Age Range	% of Responses		Total Responses	
	Yes	No	Yes	No
30-40	73.0%	27.0%	46	17
40-50	68.9%	31.1%	61	28
50-60	81.4%	18.6%	70	26
60+	75.0%	25.0%	75	25
Grand Total	74.4%	25.3%	253	86

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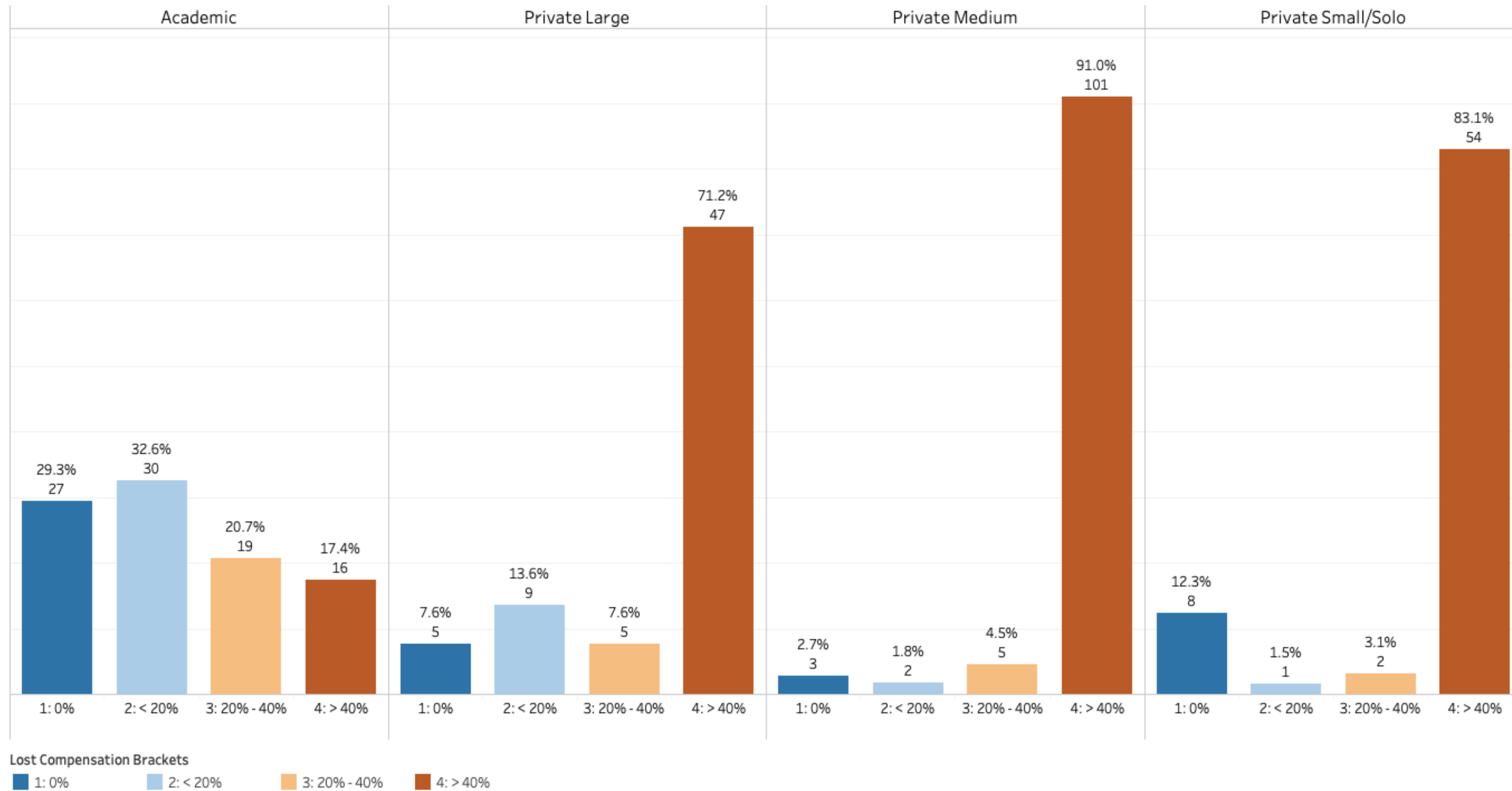
Economic Hardship by Gender



- Male and female physicians experience hardship at the same rate:
 - Female 74.8%
 - Male 74.1%



Income Loss by Practice Type



- 64.7% of all physicians have lost more than 40% of their income
- Private practice physicians are losing more than 40% of their income at a higher rate:
 - Large Practice: 71.2%
 - Medium Practice: 91%
 - Small/Solo Practice 81.1%
- Only 17.4% of academic practice physicians report losing more than 40% of income



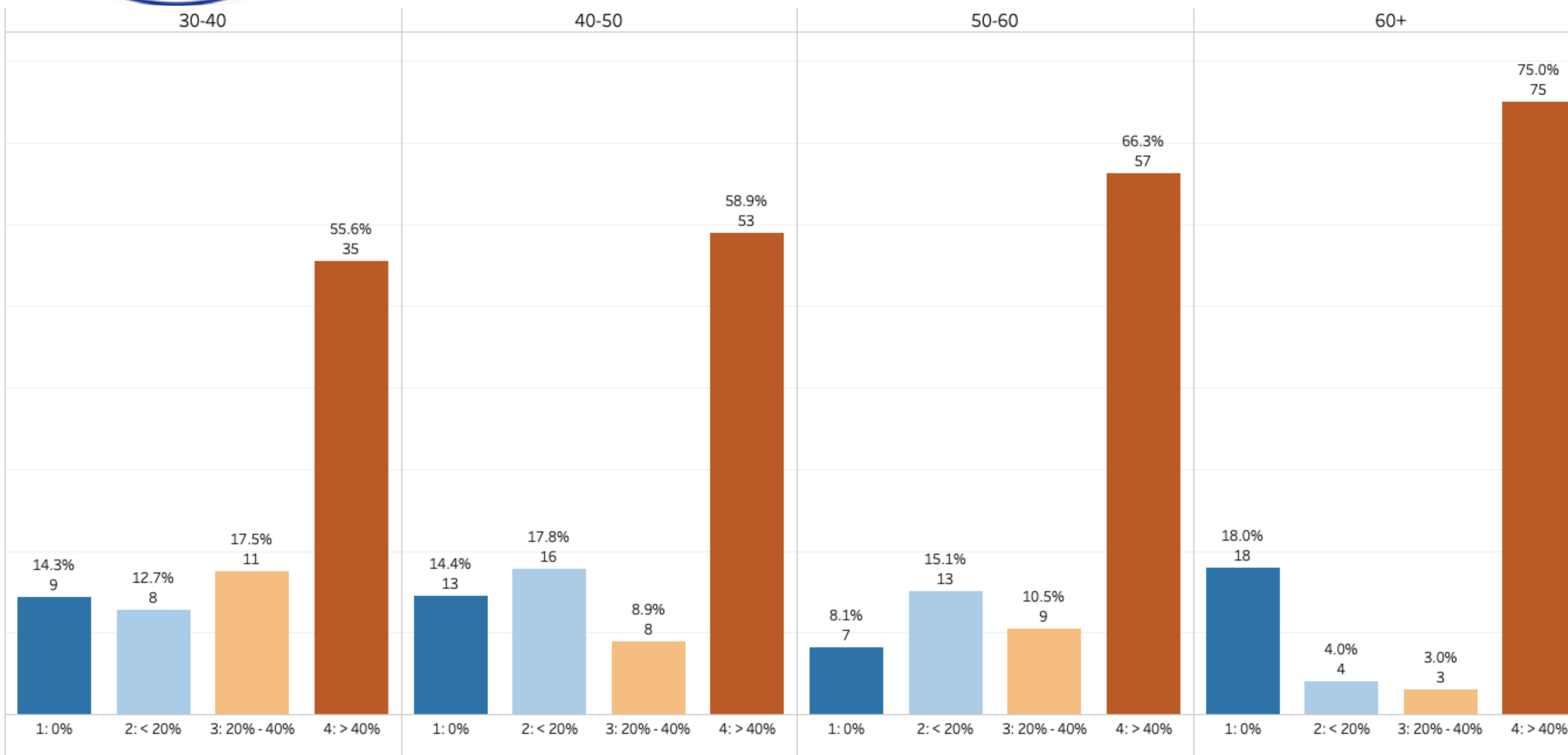
Income Loss by Practice Type

Practice Type	% of Responses				Total Responses			
	0%	<20%	20-40%	>40%	0%	<20%	20-40%	>40%
Academic	29.3%	32.6%	20.7%	17.4%	27	30	16	16
Private Large	7.6%	13.6%	7.7%	71.2%	5	9	5	47
Private Medium	2.7%	1.8%	4.5%	91.0%	3	2	5	101
Private Small/Solo	12.3%	1.5%	3.1%	83.1%	8	1	2	54
Grand Total	13.8%	12.4%	9.1%	64.7%	47	42	31	220

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 - Small/Solo Practice 81.1%
- Only 17.4% of academic practice physicians report losing more than 40% of income



Income Loss by Age



- The rate at which physicians lose more than 40% of income appears to increase with age:
 - 30-40: 55.6%
 - 40-50: 58.9%
 - 50-60: 66.3%
 - 60+: 75%
- Physicians aged 60+ also lose no income more often than younger physicians



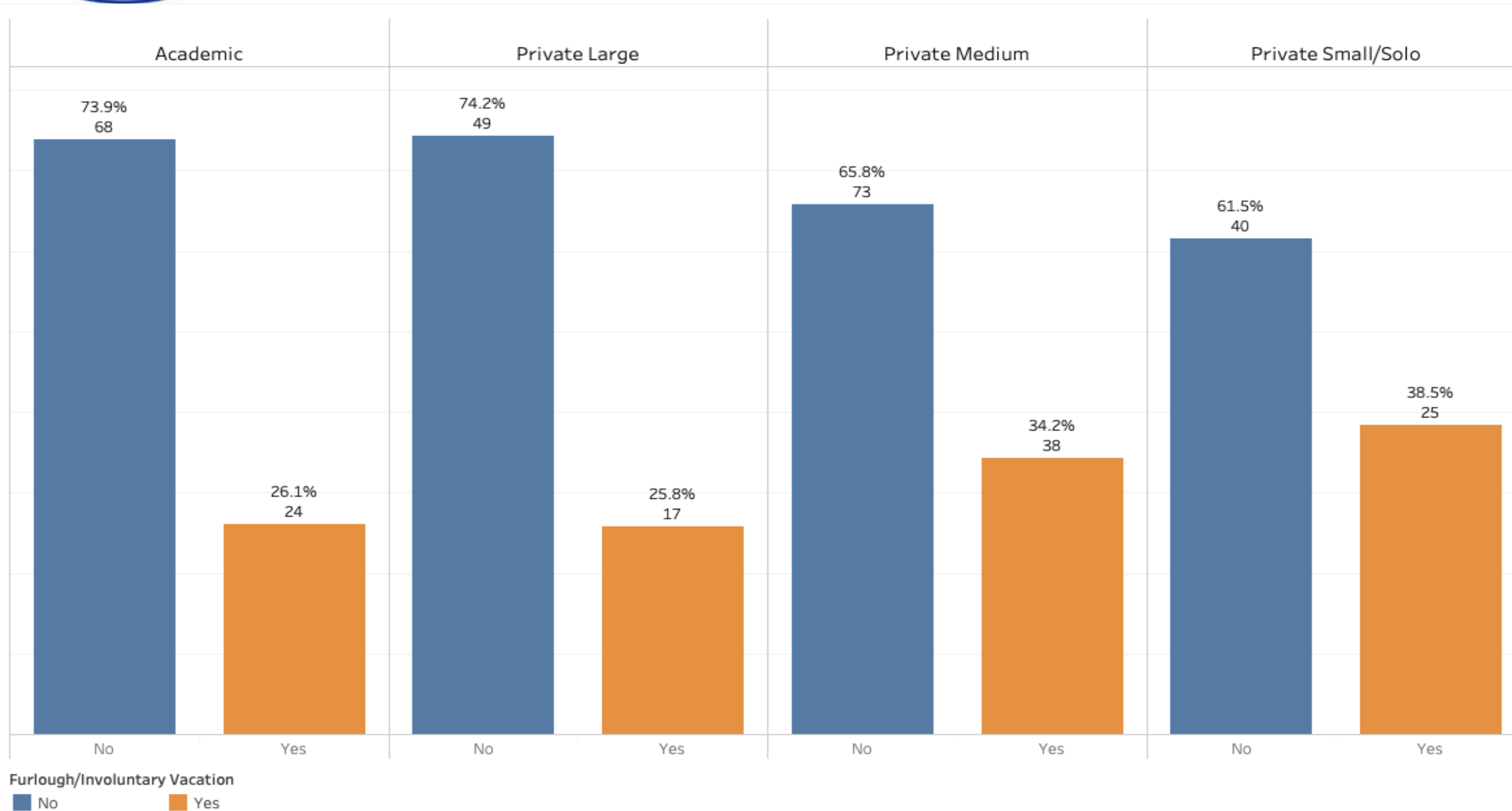
Income Loss by Age

Practice Type	% of Responses				Total Responses			
	0%	<20%	20-40%	>40%	0%	<20%	20-40%	>40%
30-40	14.3%	12.7%	17.5%	55.6%	9	8	22	35
40-50	14.4%	27.8%	8.9%	58.9%	13	26	8	53
50-60	8.1%	15.2%	10.5%	66.3%	7	13	9	57
60+	18.0%	4.0%	3.0%	75.0%	18	4	3	75
Grand Total	13.8%	12.4%	9.1%	64.7%	47	42	31	220

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 - 50-60: 66.3%
 - 60+: 75%
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Furlough/Involuntary Vacation by Practice



- 30.9% of Physicians are being furloughed or taking involuntary vacation
- Physicians in Medium and Small practices are furloughed at higher rates:
 - Medium Practice: 34.2%
 - Small practice: 38.5%



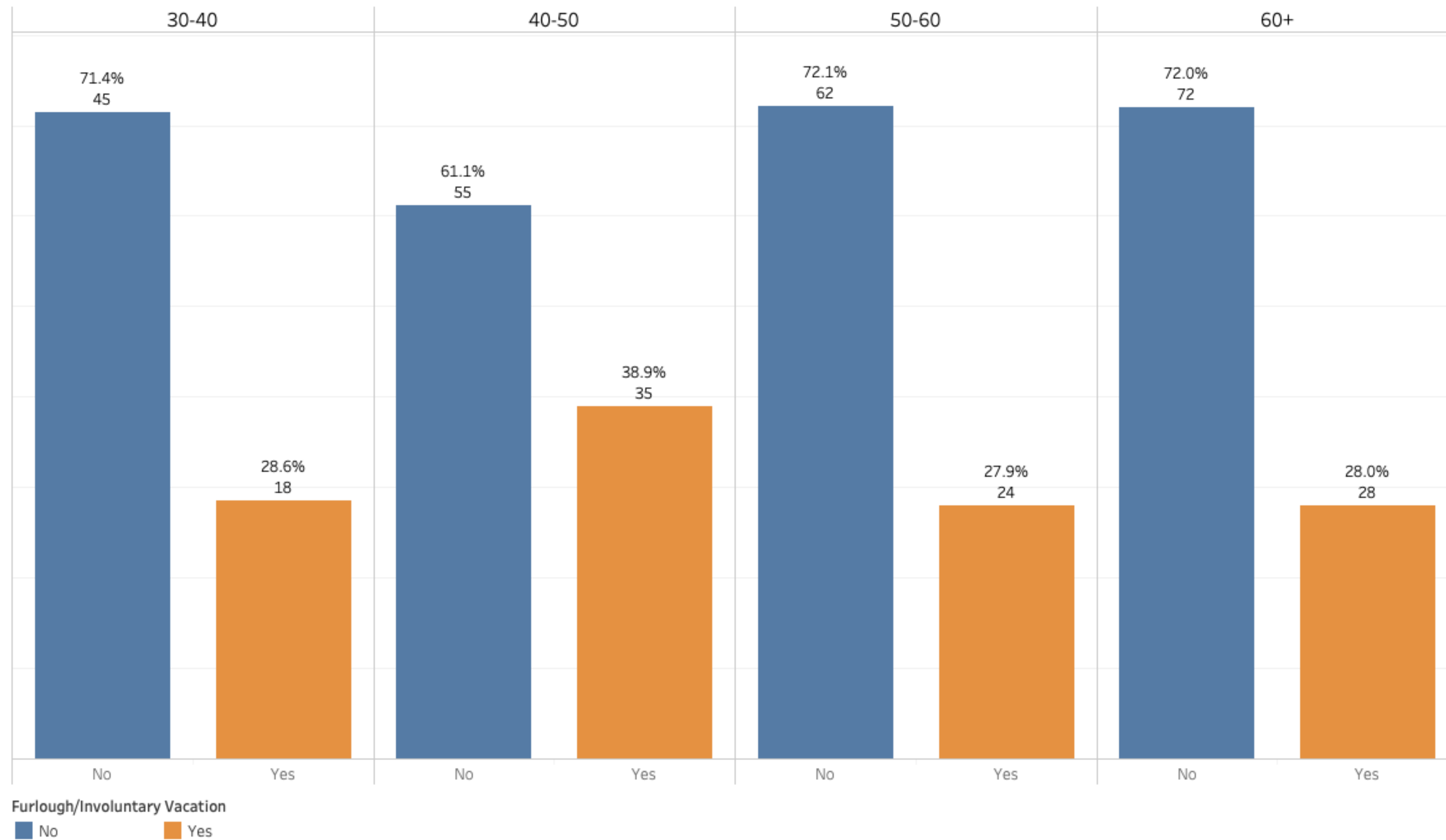
Furlough/Involuntary Vacation by Practice

Practice Type	% of Responses		Total Responses	
	Yes	No	Yes	No
Academic	26.1%	73.9%	24	68
Private Large	25.8%	74.2%	17	49
Private Medium	34.2%	65.8%	38	73
Private Small/Solo	38.5%	61.5%	25	40
Grand Total	30.9%	69.1%	105	235

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Furlough/Involuntary Vacation by Age



- Physicians in the 40-50 age group are being furloughed at a rate of 38.9%, which is lower than other groups



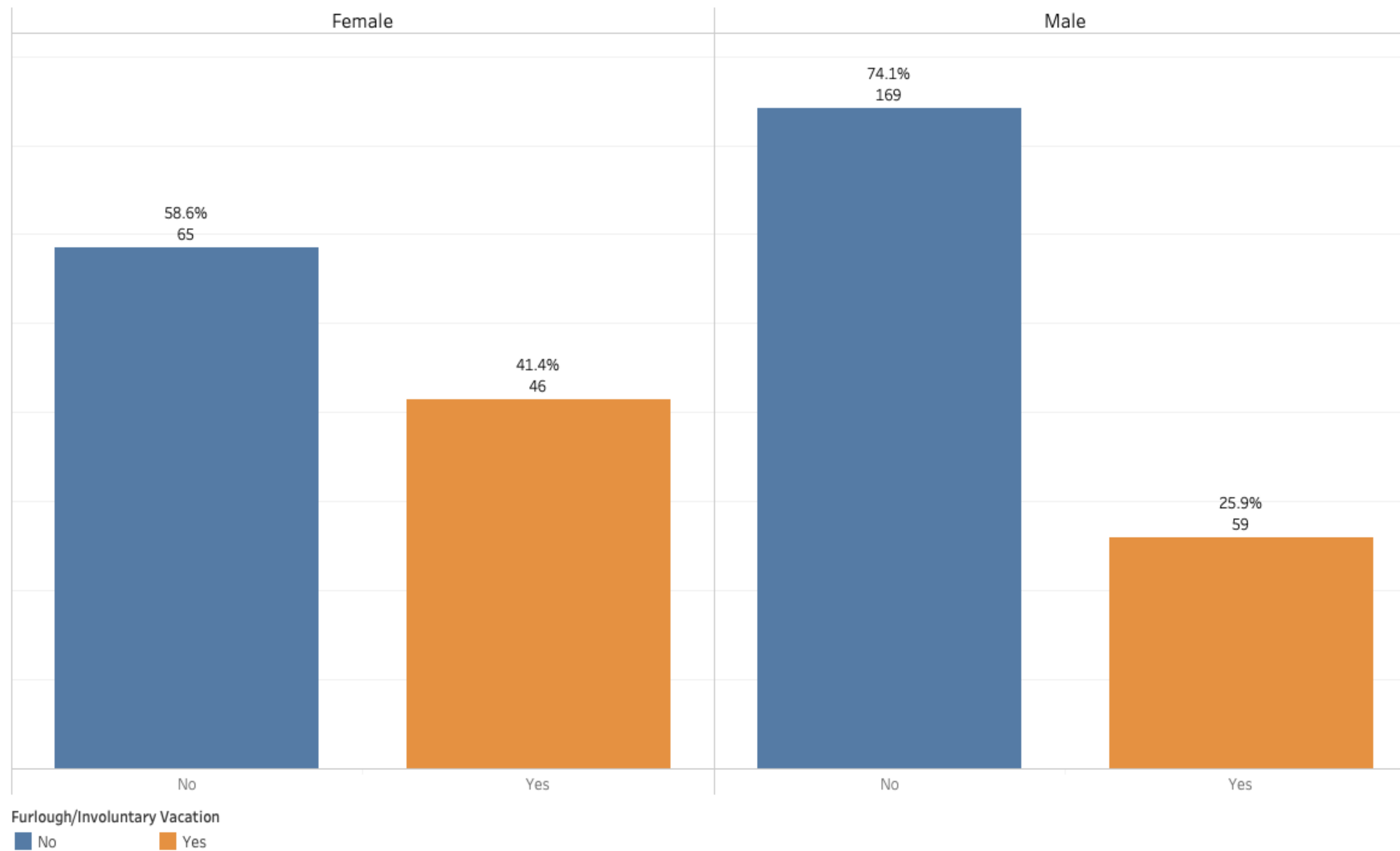
Furlough/Involuntary Vacation by Age

Age Range	% of Responses		Total Responses	
	Yes	No	Yes	No
30-40	28.6%	71.4%	18	45
40-50	38.9%	61.1%	35	55
50-60	27.9%	72.1%	24	62
60+	28.0%	72.0%	28	72
Grand Total	30.9%	69.1%	105	235

- Physicians in the 40-50 age group are being furloughed at a rate of 38.9%, which is lower than other groups



Furlough/Involuntary Vacation by Gender



- Female physicians experience a furlough or involuntary vacation more often than male physicians:
 - Female: 41.4%
 - Male: 25.9%
- They are furloughed at a 58.6% higher rate compared to their male counterparts



Furlough/Involuntary Vacation Gender

Gender	% of Responses		Total Responses	
	Yes	No	Yes	No
Female	41.4%	58.6%	46	65
Male	25.9%	74.1%	59	169
Grand Total	30.9%	69.1%	105	235

- Female physicians experience a furlough or involuntary vacation more often than male physicians:
 - Female: 41.4%
 - Male: 25.9%
- They are furloughed at a 58.6% higher rate compared to their male counterparts