

# 2024 HEALTH POLICY SURVEY RESULTS

Western Section American  
Urological Association



Eugene Y. Rhee, M.D., MBA  
Chair, Health Policy Committee

An educational supplement to the WSAUA Health Policy Forum,  
October 27, 2024 – Grand Hyatt Hotel, Kauai, Hawaii



## 2024 Health Policy Committee

*Chair:* Eugene Rhee, MD, MBA

| <u>Name</u>          | <u>HP District</u> | <u>Territory</u>   |
|----------------------|--------------------|--|
| Greg Lund, MD        | 1                  | Alaska   |
| Ken Berger, MD       | 2                  | Washington   |
| Brian Duty, MD       | 3                  | Oregon   |
| Peter Bretan, MD     | 4                  | N. Cal +Alameda & Contra Costa Counties                                |
| Joseph R. Kuntze MD  | 5                  | San Francisco, San Mateo & Santa Clara Counties and Central California |
| John Lam, MD         | 6                  | Los Angeles +Ventura County  |
| Roger Sur, MD        | 7                  | San Diego  |
| Karen Stern, MD      | 8                  | Arizona  |
| Lisa Bland, MD       | 9                  | Idaho, Montana, Wyoming  |
| Seth Cohen, MD       | 10                 | Orange County  |
| Forrest Jellison, MD | 11                 | Inland Empire  |
| Joseph Candela, MD   | 12                 | Nevada   |
| Lane Childs, MD      | 13                 | Utah   |

Revised 7-11-24

### **Advisors:**

- Imm. Past-Chair: Jeffrey M. Frankel, MD
- Advocacy/Practice Mgmt: Jason Jameson, MD
- Young Urologist Rep: Juan Andino, MD\*
- Consultant: Amani Abou Zam-zam, MBA

2024

## OVERALL RESPONSE RATE

Total Possible = 1,882

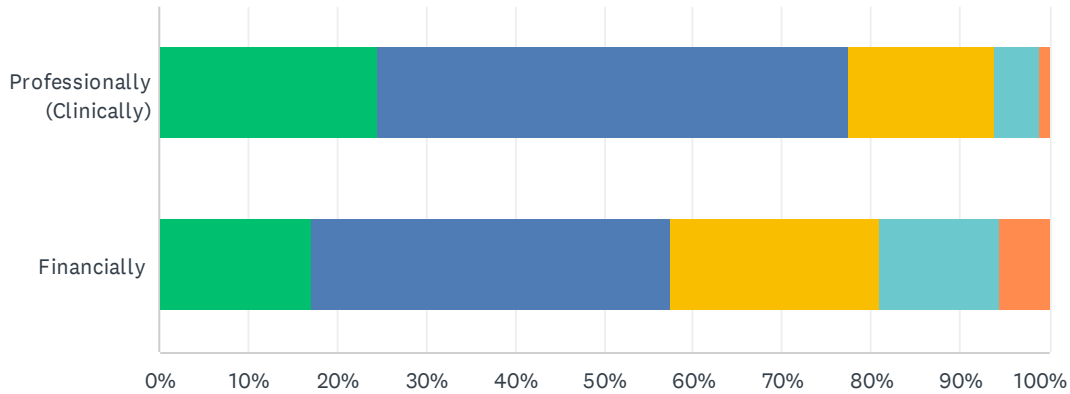
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Total Responding = 381

20.24%

# Q1 Are you satisfied with your urologic practice? (please select one choice for each row)

Answered: 381 Skipped: 0

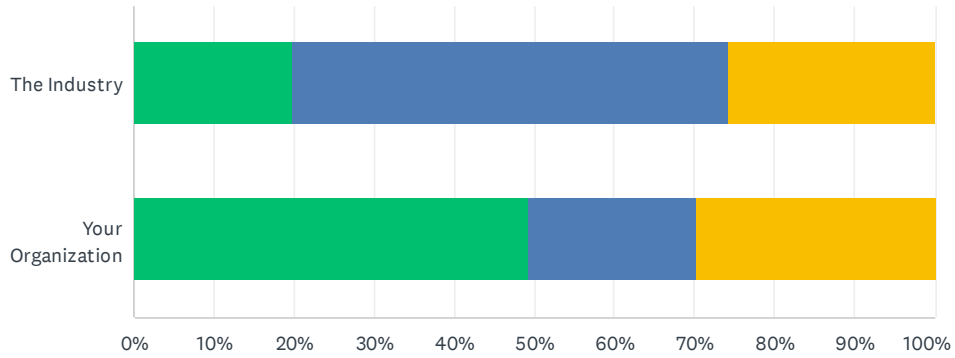


■ Yes, totally ... 
 ■ Mostly sati... 
 ■ Right in the... 
 ■ Mostly diss... 
 ■ Not at all s...

|                             | YES, TOTALLY SATISFIED | MOSTLY SATISFIED | RIGHT IN THE MIDDLE | MOSTLY DISSATISFIED | NOT AT ALL SATISFIED | TOTAL |
|-----------------------------|------------------------|------------------|---------------------|---------------------|----------------------|-------|
| Professionally (Clinically) | 24.60%<br>93           | 52.91%<br>200    | 16.40%<br>62        | 5.03%<br>19         | 1.06%<br>4           | 378   |
| Financially                 | 17.20%<br>65           | 40.21%<br>152    | 23.54%<br>89        | 13.49%<br>51        | 5.56%<br>21          | 378   |

## Q2 Overall, how do you assess the current state of the healthcare industry and that of your own organization?

Answered: 381 Skipped: 0

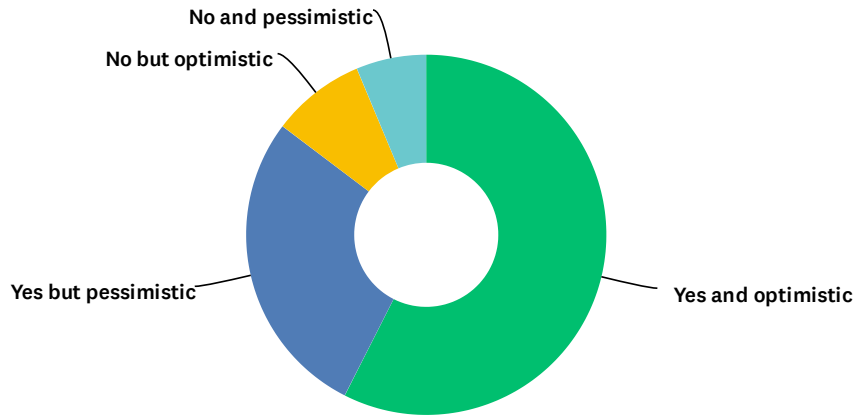


■ Right Track
 ■ Wrong Track
 ■ Undecided

|                   | RIGHT TRACK   | WRONG TRACK   | UNDECIDED     | TOTAL |
|-------------------|---------------|---------------|---------------|-------|
| The Industry      | 19.79%<br>75  | 54.35%<br>206 | 25.86%<br>98  | 379   |
| Your Organization | 49.21%<br>186 | 21.16%<br>80  | 29.63%<br>112 | 378   |

### Q3 Do you feel that your current practice is viable and will remain so for the next 3-5 years?

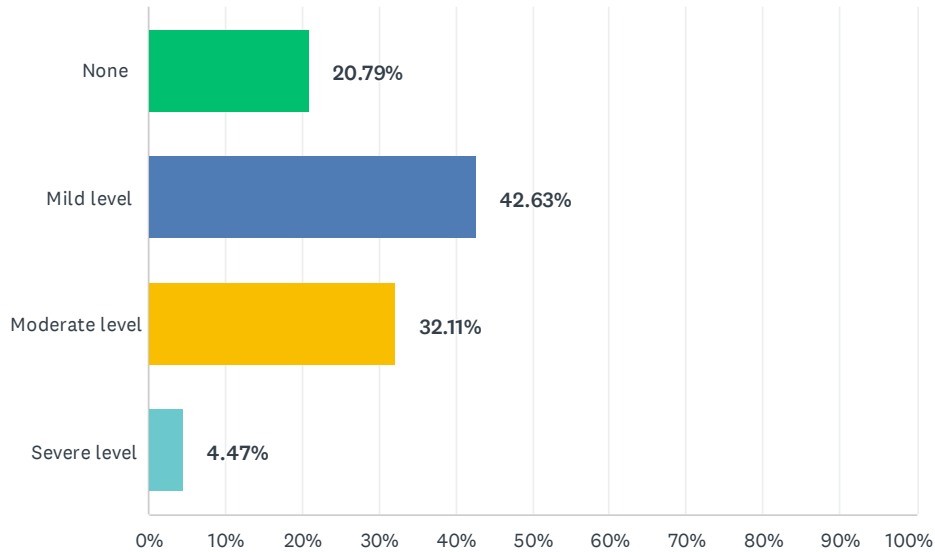
Answered: 381 Skipped: 0



| ANSWER CHOICES      | RESPONSES |     |
|---------------------|-----------|-----|
| Yes and optimistic  | 57.48%    | 219 |
| Yes but pessimistic | 27.82%    | 106 |
| No but optimistic   | 8.40%     | 32  |
| No and pessimistic  | 6.30%     | 24  |
| TOTAL               |           | 381 |

Q4 Using the following definition of burnout, how would you define your current level of burnout? (If you're experiencing chronic exhaustion, cynicism, detachment from your job or personal life, a sense of ineffectiveness, and a decline in performance, or physical symptoms, you might be moving toward burnout.)

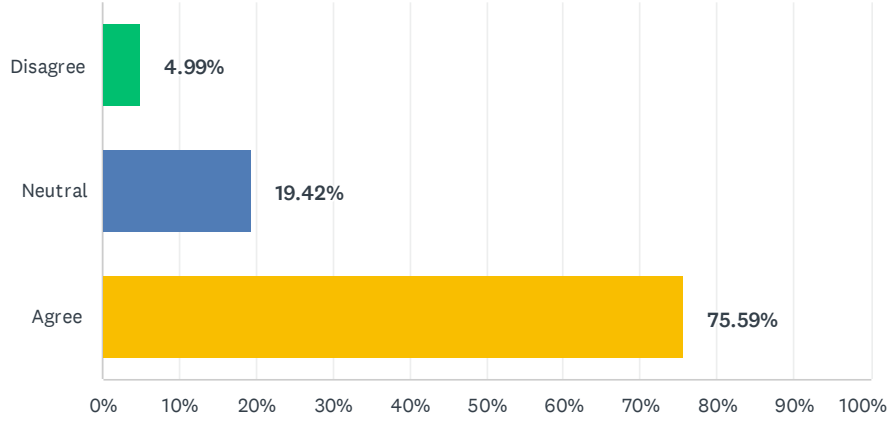
Answered: 380 Skipped: 1



| ANSWER CHOICES | RESPONSES |            |
|----------------|-----------|------------|
| None           | 20.79%    | 79         |
| Mild level     | 42.63%    | 162        |
| Moderate level | 32.11%    | 122        |
| Severe level   | 4.47%     | 17         |
| <b>TOTAL</b>   |           | <b>380</b> |

### Q5 Taking urology call (on-call work) significantly adds stress to my life

Answered: 381 Skipped: 0

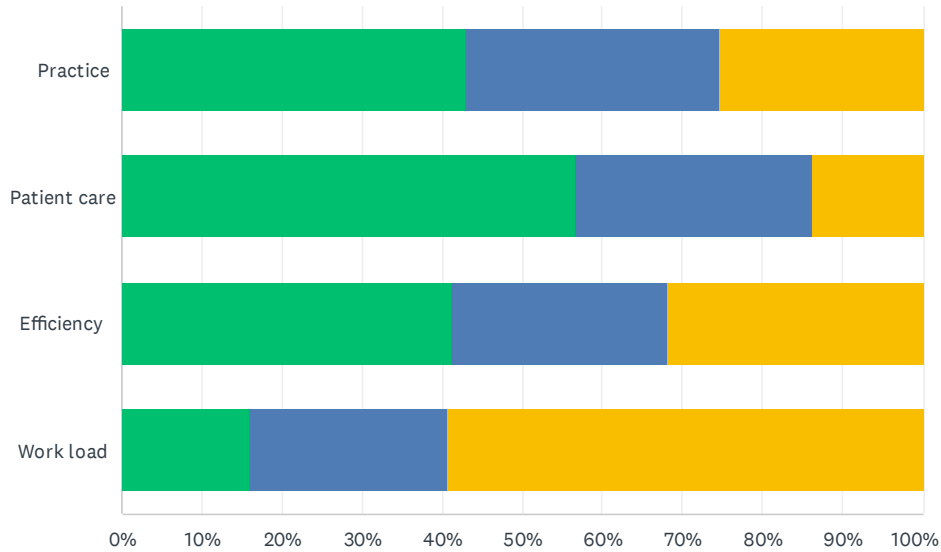


| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Disagree       | 4.99%     | 19  |
| Neutral        | 19.42%    | 74  |
| Agree          | 75.59%    | 288 |
| TOTAL          |           | 381 |



### Q6 Which of the following best describe the overall impact of an EHR on you and your practice?

Answered: 381 Skipped: 0

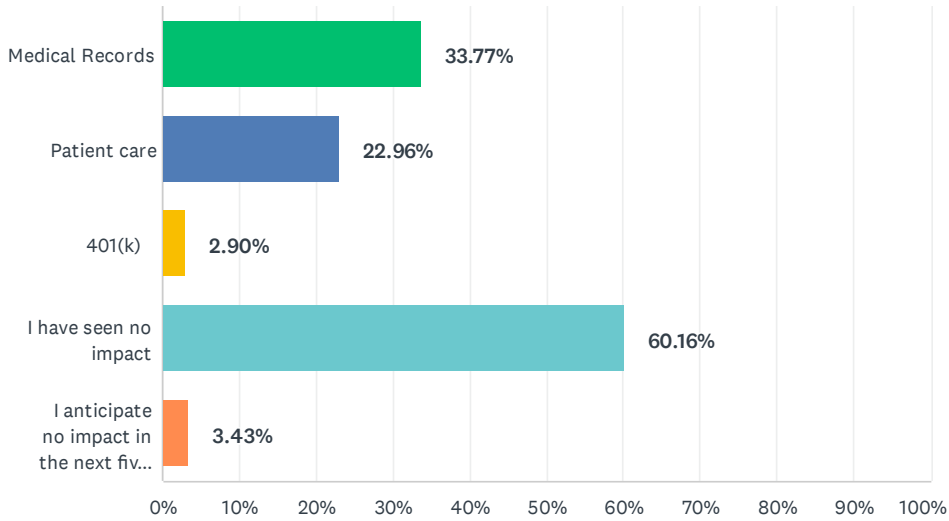


■ Positive im... 
 ■ Neutral im... 
 ■ Negative i...

|              | POSITIVE IMPACT | NEUTRAL IMPACT | NEGATIVE IMPACT | TOTAL |
|--------------|-----------------|----------------|-----------------|-------|
| Practice     | 42.89%<br>163   | 31.84%<br>121  | 25.26%<br>96    | 380   |
| Patient care | 56.73%<br>215   | 29.55%<br>112  | 13.72%<br>52    | 379   |
| Efficiency   | 41.05%<br>156   | 27.11%<br>103  | 31.84%<br>121   | 380   |
| Work load    | 16.05%<br>61    | 24.74%<br>94   | 59.21%<br>225   | 380   |

### Q7 Artificial Intelligence (A.I.) has become the magic word for the future of medicine. Have you seen any impact at this point and where would you see it impact ideally?

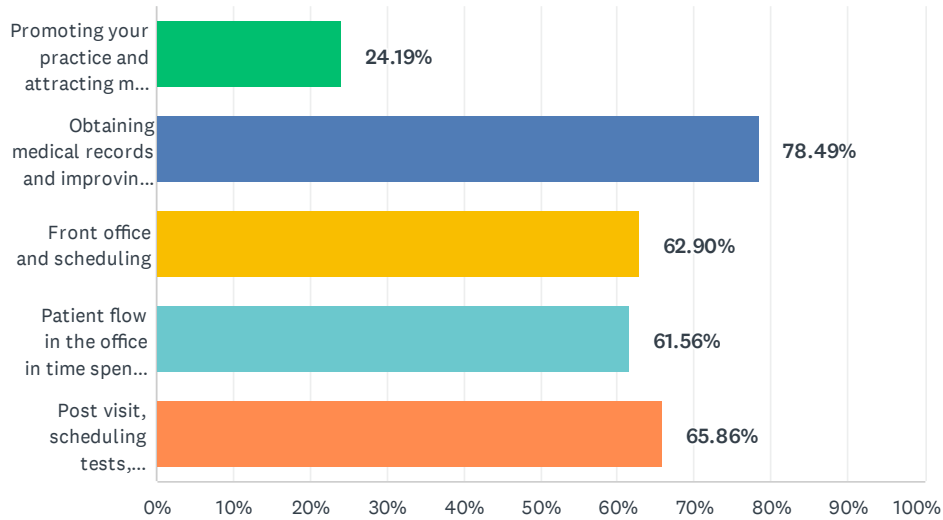
Answered: 379 Skipped: 2



| ANSWER CHOICES                                | RESPONSES |     |
|---|-----------|-----|
| Medical Records                               | 33.77%    | 128 |
| Patient care                                  | 22.96%    | 87  |
| 401(k)  | 2.90%     | 11  |
| I have seen no impact                         | 60.16%    | 228 |
| I anticipate no impact in the next five years | 3.43%     | 13  |
| Total Respondents: 379                        |           |     |

### Q8 Where would you like to see the future of technology/A.I./other advancements to help better proportion your time and create efficiency.

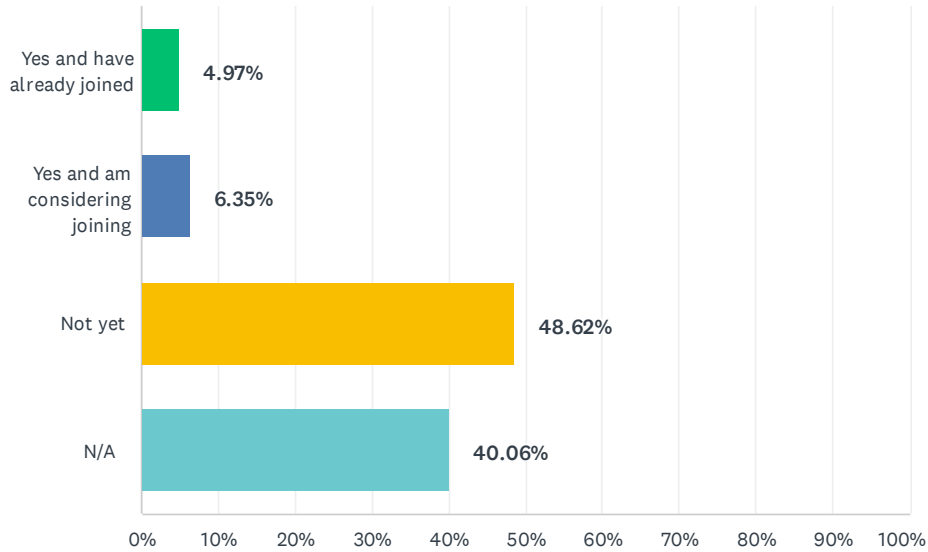
Answered: 372 Skipped: 9



| ANSWER CHOICES  | RESPONSES |     |
|---|-----------|-----|
| Promoting your practice and attracting more patients to the practice              | 24.19%    | 90  |
| Obtaining medical records and improving the flow of information                   | 78.49%    | 292 |
| Front office and scheduling   | 62.90%    | 234 |
| Patient flow in the office in time spent with a patient disseminating information | 61.56%    | 229 |
| Post visit, scheduling tests, surgeries, follow ups                               | 65.86%    | 245 |
| Total Respondents: 372  |           |     |

### Q9 Have you been impacted/approached by private equity group? If yes, are you considering joining private equity or have you joined a private equity group?

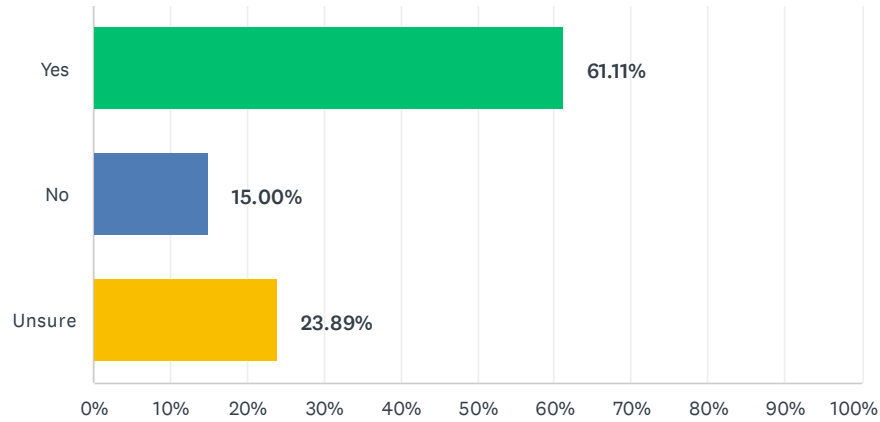
Answered: 362 Skipped: 19



| ANSWER CHOICES                 | RESPONSES |            |
|--------------------------------|-----------|------------|
| Yes and have already joined    | 4.97%     | 18         |
| Yes and am considering joining | 6.35%     | 23         |
| Not yet                        | 48.62%    | 176        |
| N/A                            | 40.06%    | 145        |
| <b>TOTAL</b>                   |           | <b>362</b> |

### Q10 Do you think men's health clinics, which focus on male reproductive and urinary health, pose a public health threat due to their promotion of unproven treatments?

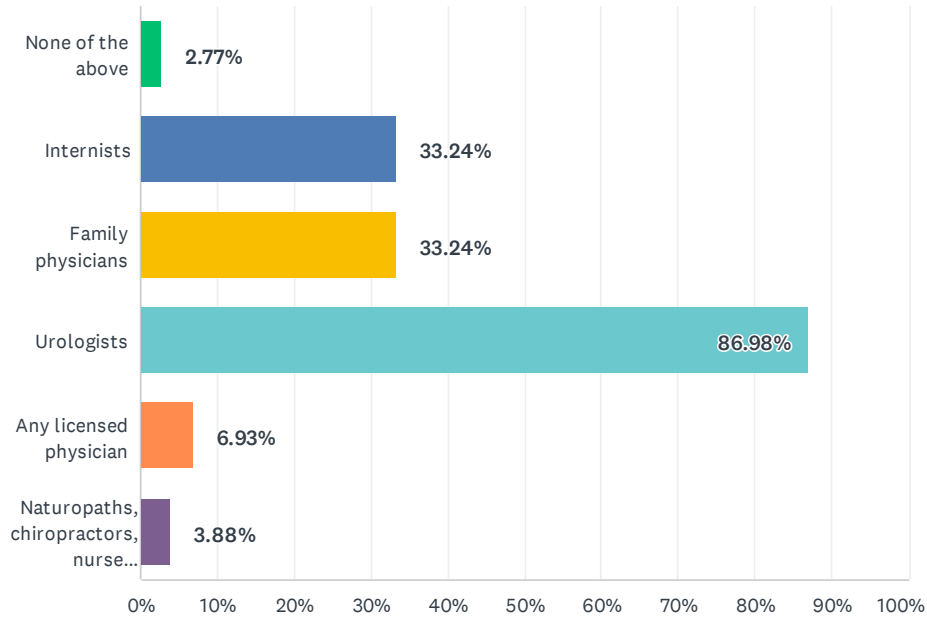
Answered: 360 Skipped: 21



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Yes            | 61.11%    | 220 |
| No             | 15.00%    | 54  |
| Unsure         | 23.89%    | 86  |
| TOTAL          |           | 360 |

### Q11 The primary providers for men's health clinics should be? (may choose more than one)

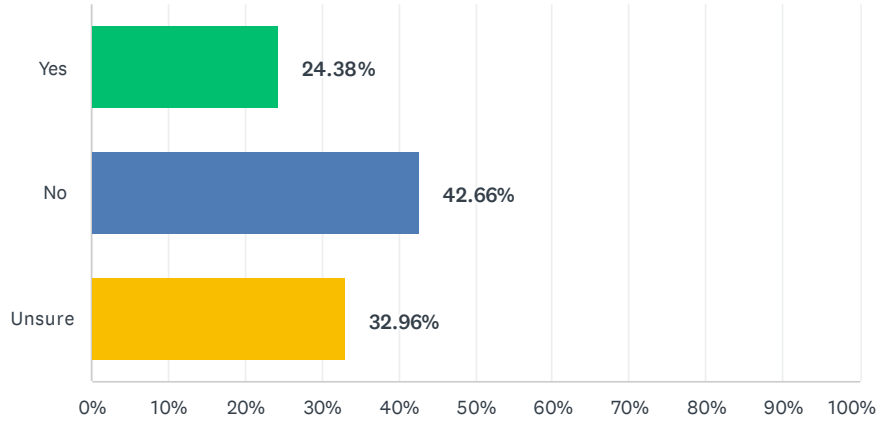
Answered: 361 Skipped: 20



| ANSWER CHOICES   | RESPONSES |     |
|--|-----------|-----|
| None of the above  | 2.77%     | 10  |
| Internists   | 33.24%    | 120 |
| Family physicians  | 33.24%    | 120 |
| Urologists   | 86.98%    | 314 |
| Any licensed physician   | 6.93%     | 25  |
| Naturopaths, chiropractors, nurse practitioners, or physician assistants | 3.88%     | 14  |
| Total Respondents: 361   |           |     |

### Q12 Do you have any payer contracts that provide quality incentives?

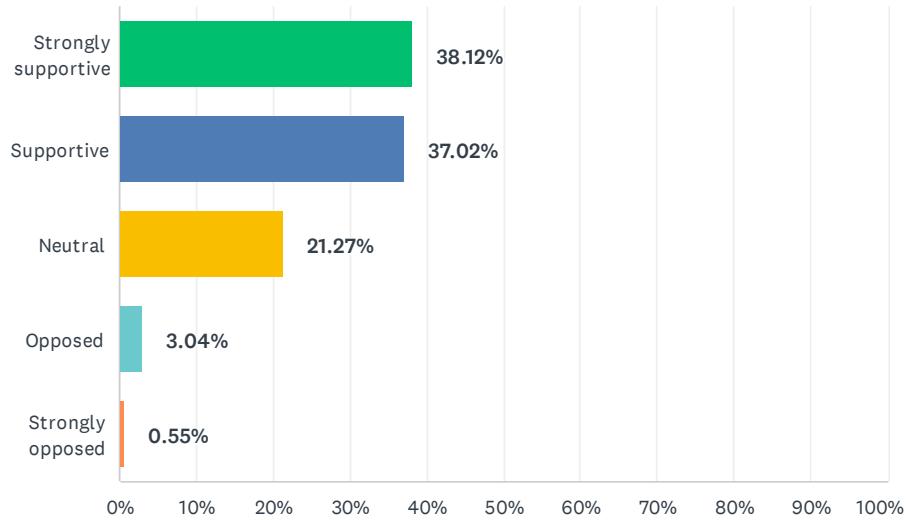
Answered: 361 Skipped: 20



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Yes            | 24.38%    | 88  |
| No             | 42.66%    | 154 |
| Unsure         | 32.96%    | 119 |
| TOTAL          |           | 361 |

### Q13 How do you feel about Advance Practice Providers (APP's) in the urology workforce?

Answered: 362 Skipped: 19

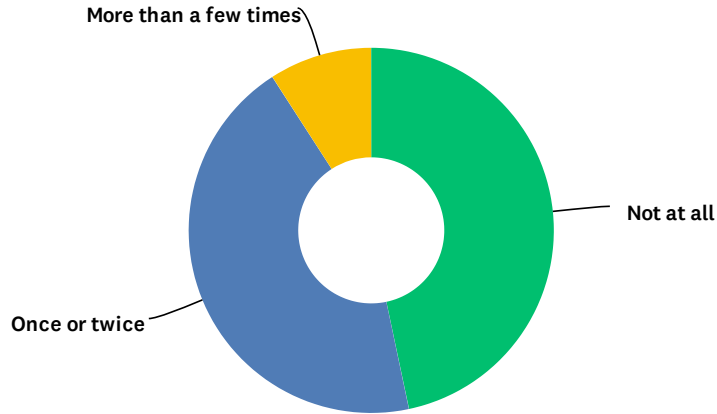


| ANSWER CHOICES      | RESPONSES |            |
|---------------------|-----------|------------|
| Strongly supportive | 38.12%    | 138        |
| Supportive          | 37.02%    | 134        |
| Neutral             | 21.27%    | 77         |
| Opposed             | 3.04%     | 11         |
| Strongly opposed    | 0.55%     | 2          |
| <b>TOTAL</b>        |           | <b>362</b> |



Q14 Over the last 4 years, have you (or your staff) been in fear for your personal safety while in the performance of your patient care giving?

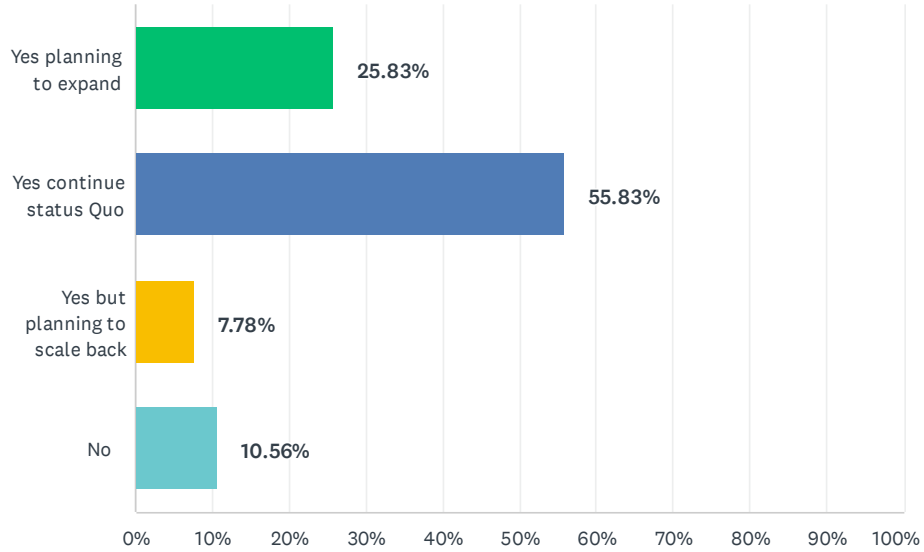
Answered: 362 Skipped: 19



|          | NOT AT ALL    | ONCE OR TWICE | MORE THAN A FEW TIMES | TOTAL | WEIGHTED AVERAGE |
|----------|---------------|---------------|-----------------------|-------|------------------|
| Response | 46.69%<br>169 | 44.20%<br>160 | 9.12%<br>33           | 362   | 1.62             |

### Q15 Are you planning to continue offering Telehealth to your patients?

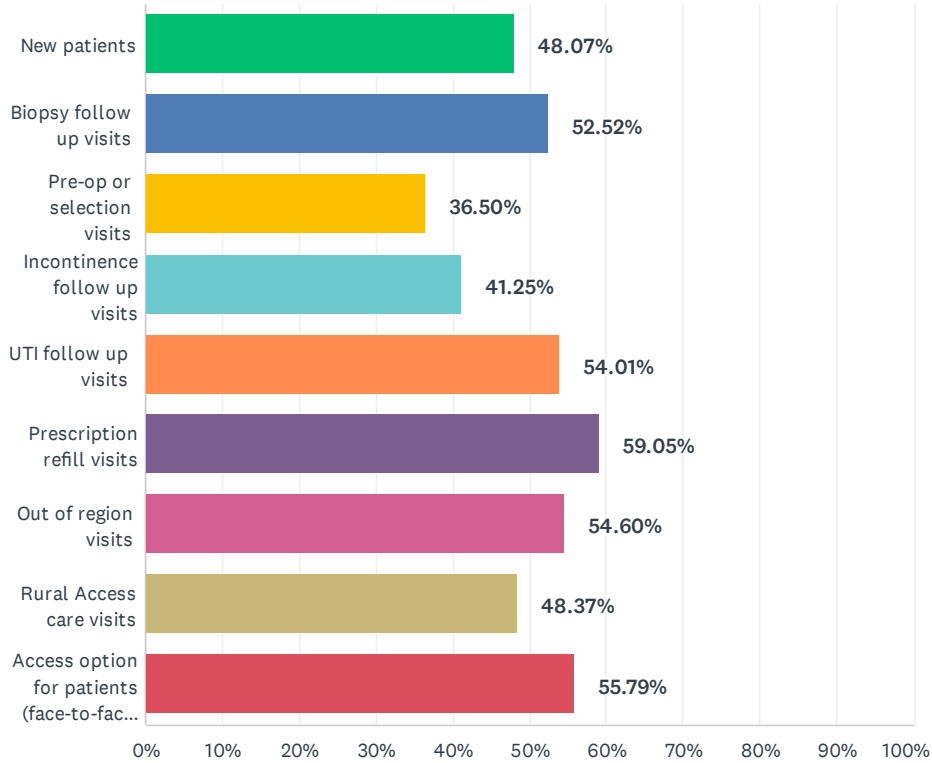
Answered: 360 Skipped: 21



| ANSWER CHOICES                 | RESPONSES |            |
|--------------------------------|-----------|------------|
| Yes planning to expand         | 25.83%    | 93         |
| Yes continue status Quo        | 55.83%    | 201        |
| Yes but planning to scale back | 7.78%     | 28         |
| No                             | 10.56%    | 38         |
| <b>TOTAL</b>                   |           | <b>360</b> |

### Q16 For what type of visits are you using billable Telehealth or telephone visits? (check all that apply)

Answered: 337 Skipped: 44



| ANSWER CHOICES   | RESPONSES |     |
|--|-----------|-----|
| New patients   | 48.07%    | 162 |
| Biopsy follow up visits  | 52.52%    | 177 |
| Pre-op or selection visits                                       | 36.50%    | 123 |
| Incontinence follow up visits                                    | 41.25%    | 139 |
| UTI follow up visits   | 54.01%    | 182 |
| Prescription refill visits                                       | 59.05%    | 199 |
| Out of region visits   | 54.60%    | 184 |
| Rural Access care visits   | 48.37%    | 163 |
| Access option for patients (face-to-face, video visits or phone) | 55.79%    | 188 |
| Total Respondents: 337   |           |     |

## Q17 Please describe any other billing or health policy issues that have been raised in your state or area that are important to you?

Answered: 105 Skipped: 276

| #  | RESPONSES   | DATE               |
|----|---|--------------------|
| 1  | We're not paid enough and they keep trying to pay us less   | 8/31/2024 6:26 PM  |
| 2  | Working for a hospital allows them to dictate your practice pattern, and if you don't like it they can halt the flow of new patients in their organization to you which is exactly what happened to me. So I retired as do not have a viable practice anymore | 8/29/2024 8:23 PM  |
| 3  | Concerned that there is no recognition that Medicare advantage plans will likely end our ability to be financially viable in the future   | 8/29/2024 11:41 AM |
| 4  | Not sure  | 8/28/2024 6:54 PM  |
| 5  | none that I am aware of   | 8/28/2024 7:06 AM  |
| 6  | What is the average wrvu reimbursement rate per state   | 8/27/2024 9:24 PM  |
| 7  | Not aware.  | 8/26/2024 11:50 AM |
| 8  | The Blues are the sheriff in my area  | 8/25/2024 6:48 PM  |
| 9  | Prior auths Inappropriate downcoding and claims denials   | 8/25/2024 6:20 PM  |
| 10 | low medicare and medicaid reimbursements  | 8/25/2024 11:21 AM |
| 11 | Medicare reimbursement going down   | 8/23/2024 4:23 PM  |
| 12 | HoLEP is far under -reimbursed compared to other BPH surgeries that are less efficacious. I think the RVUs should be commensurate to the quality , difficulty, and durability of this superior operation  | 8/22/2024 9:49 AM  |
| 13 | NA  | 8/20/2024 11:28 PM |
| 14 | prior authorization   | 8/20/2024 11:40 AM |
| 15 | testosterone coverage   | 8/20/2024 7:12 AM  |
| 16 | medicare sequestration  | 8/19/2024 1:26 PM  |
| 17 | I have established patients who are out of state and need to drive in-state to do telehealth appointments with me.  | 8/19/2024 12:39 PM |
| 18 | More concerned with federal imp   | 8/19/2024 11:32 AM |
| 19 | Prior authorization for prescriptions is extremely burdensome   | 8/19/2024 10:31 AM |
| 20 | Coding changes  | 8/19/2024 5:15 AM  |
| 21 | Standardization of reimbursement for Telehealth visits.   | 8/18/2024 3:50 PM  |
| 22 | Robotic billing codes not up to date.   | 8/18/2024 3:05 PM  |
| 23 | coverage for new technology like hifu that is fda approved and paid for by medicare but not by blue cross blue shield   | 8/17/2024 5:41 PM  |
| 24 | I strongly support continued telehealth services with recommendation to allow for across state lines  | 8/17/2024 1:00 PM  |
| 25 | We must support the continuation of payment for Telehealth from CMS and private payers. We must be able to provide Telehealth services across state lines.  | 8/17/2024 10:54 AM |
| 26 | None  | 8/17/2024 9:23 AM  |

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|    |  |                    |
|----|--|--------------------|
| 27 | None   | 8/17/2024 7:42 AM  |
| 28 | Not applicable   | 8/16/2024 10:14 PM |
| 29 | None that I can think of   | 8/16/2024 9:39 PM  |
| 30 | None   | 8/16/2024 2:54 PM  |
| 31 | GET in Hawaii  | 8/16/2024 2:14 PM  |
| 32 | decreased reimbursement  | 8/16/2024 1:31 PM  |
| 33 | Aquablation-> pain!  | 8/16/2024 1:19 PM  |
| 34 | prior auth requirement   | 8/16/2024 12:54 PM |
| 35 | None   | 8/16/2024 12:49 PM |
| 36 | The Blues own CA. They are , and have been, obstructive by nature toward physicians.   | 8/16/2024 12:40 PM |
| 37 | failures of insurance to keep up with inflation  | 8/16/2024 12:31 PM |
| 38 | Oregon value added tax is absurd and hurts us badly  | 8/16/2024 11:26 AM |
| 39 | Urologist shortages and ER coverage are a big problem in most of our state (Arizona)   | 8/16/2024 11:13 AM |
| 40 | None   | 8/16/2024 11:04 AM |
| 41 | Decreased compensation   | 8/16/2024 10:49 AM |
| 42 | Surgery for transgender individuals  | 8/16/2024 10:47 AM |
| 43 | n/a  | 8/16/2024 10:39 AM |
| 44 | None   | 8/16/2024 10:37 AM |
| 45 | None   | 8/16/2024 10:35 AM |
| 46 | insurance reimbursement has NOT changed even though overhead is much higher and staff want more money hourly.                          | 8/16/2024 10:27 AM |
| 47 | Insurance coverage and contract issues   | 8/16/2024 10:26 AM |
| 48 | insurance barriers to advances in cancer diagnostics and testing   | 8/16/2024 10:22 AM |
| 49 | covid gag rules -  | 8/14/2024 6:31 PM  |
| 50 | I would love to end California Fluoroscopy licensing.  | 8/14/2024 4:40 PM  |
| 51 | insurance companies continuing to deny things that we know are payable!  | 8/14/2024 2:17 PM  |
| 52 | Prior authorization induced delays in clinical care  | 8/12/2024 3:43 AM  |
| 53 | Negative direction for tort reform   | 8/4/2024 3:45 PM   |
| 54 | Urology health personnel shortage.   | 8/4/2024 11:09 AM  |
| 55 | Ach or beta 3 coverage   | 8/3/2024 4:10 PM   |
| 56 | ER closures  | 8/2/2024 10:11 AM  |
| 57 | The ability to provide virtual visits in close neighboring states.   | 8/2/2024 9:34 AM   |
| 58 | Medicare Physician Assistant/associate reimbursement at 80%  | 8/2/2024 4:33 AM   |
| 59 | Inability to add Microscope code to varicocelelectomy  | 8/1/2024 7:50 PM   |
| 60 | Na   | 8/1/2024 5:03 PM   |
| 61 | N/A  | 8/1/2024 4:54 PM   |
| 62 | N/A  | 8/1/2024 4:48 PM   |
| 63 | Naturopaths performing vasectomies, independent chaperones for GU examinations, completing consent forms for GU examinations and DRES. | 7/31/2024 4:43 PM  |

## Western Section AUA 2024 Health Policy Survey

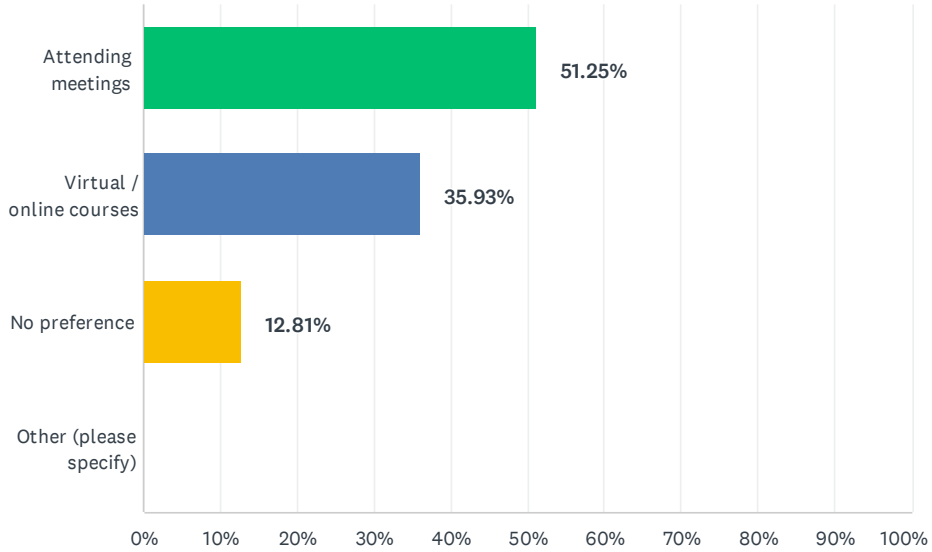
|    |  |                    |
|----|--|--------------------|
| 64 | Access to care for uninsured   | 7/30/2024 10:16 AM |
| 65 | Authorization is cumbersome, P2P inefficient   | 7/29/2024 9:13 PM  |
| 66 | NA   | 7/29/2024 7:30 PM  |
| 67 | Telehealth visits not recognized by CMS as equivalent to face to face visits   | 7/29/2024 5:08 PM  |
| 68 | Vasectomies done by naturopathic providers   | 7/29/2024 10:18 AM |
| 69 | NA   | 7/29/2024 10:18 AM |
| 70 | nation wide ehr. how many of these patients care about the secrecy of their health info?? none. they care more about doctors having the most current info available to help them. remember, even the best ehr systems get hacked. thats life.  | 7/29/2024 8:59 AM  |
| 71 | Denials for surg scheduling overnight stay after surgery by ins companies dictating full inpt stays or deny entire procedure   | 7/29/2024 7:29 AM  |
| 72 | None   | 7/29/2024 6:41 AM  |
| 73 | none   | 7/29/2024 6:40 AM  |
| 74 | Main issue is CA and insurance strangle hold on reimbursement levels. Companies are to reach by phone, etc. to discuss issues.   | 7/29/2024 6:34 AM  |
| 75 | medicare rates   | 7/29/2024 6:08 AM  |
| 76 | Drug prices  | 7/28/2024 11:48 PM |
| 77 | DEI is a cancer that is infiltrating medical schools and residency programs. If I were a patient, I would question the academic credentials of any minority Physician - not because I am racist, but because of the prioritization of social criteria for medical school and residency selection. Academic achievement should be the primary criteria. | 7/28/2024 10:50 PM |
| 78 | Billing reimbursement in the hospital setting vs in the hospital clinic setting  | 7/28/2024 9:44 PM  |
| 79 | Prior auth, better Medicare and medi-cal reimbursement   | 7/28/2024 9:22 PM  |
| 80 | Limitations of reproductive health access for women is a huge health policy issue.   | 7/28/2024 9:05 PM  |
| 81 | UCSF and Stanford not caring for post op complication Refuses to transfer pt to their hospital   | 7/28/2024 8:52 PM  |
| 82 | MA's prohibited from placing or removing foleys  | 7/28/2024 7:40 PM  |
| 83 | Payment in a timely manner   | 7/28/2024 7:39 PM  |
| 84 | None   | 7/28/2024 7:30 PM  |
| 85 | Rural health clinics   | 7/28/2024 7:00 PM  |
| 86 | Testosterone insurance coverage  | 7/28/2024 6:36 PM  |
| 87 | Health care employee increased minimum wage.   | 7/28/2024 6:31 PM  |
| 88 | None   | 7/28/2024 6:25 PM  |
| 89 | Remote supervision of rad onc  | 7/28/2024 5:54 PM  |
| 90 | Modifier 25 payment Minimum pay for health care workers Continued meaninglessness of MIPS/CMS garbage in garbage out "quality" program   | 7/28/2024 5:47 PM  |
| 91 | N/a  | 7/28/2024 5:43 PM  |
| 92 | There has been a rise in the number of hostile visits. While I do not feel endangered personally, my staff often describe these difficult patients. We could use more advice for urologists and staff about how to manage this frustrating rise against civility.  | 7/28/2024 5:37 PM  |
| 93 | N/A  | 7/28/2024 5:27 PM  |
| 94 | N/A  | 7/28/2024 5:15 PM  |
| 95 | Scope of practice (ex. naturopaths trying to get involved in Men's Health...prescribing psychiatric medications, vasectomy, etc..)   | 7/28/2024 5:08 PM  |

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|     |  |                   |
|-----|--|-------------------|
| 96  | None   | 7/28/2024 4:58 PM |
| 97  | Washington reportedly had a bill to bring Medicaid reimbursement up to Medicare levels but this apparently died in committee so we have been forced to try to limit how many Medicaid patients we see as a practice as reimbursement for these patients unfortunately is not reasonable. Insurance denials or peer to peer requirements for patients with clear indication for procedures or medications are infuriating and continue to interfere with patient care | 7/28/2024 4:57 PM |
| 98  | In my area, academic facilities are getting significantly higher reimbursement for possibly lower quality of care from several PPO's. Also, there are facility fee payments. I find this absurd as academic facilities also generally get larger funding from state. This is unfair and should be addressed by AUA and AMA.  | 7/28/2024 4:56 PM |
| 99  | Continued decrease in payments   | 7/28/2024 4:53 PM |
| 100 | Declining reimbursement overall Unpaid call On call burden Burnout Workplace safety Emr bloat Administrative bloat and rising cost of care while public perception is putting pressure on physician salaries   | 7/28/2024 4:48 PM |
| 101 | As you know, prior authorizations and denials are onerous, time consuming, non-productive, detrimental to patient care and should be abolished.  | 7/28/2024 4:45 PM |
| 102 | reimbursement related to uncommon procedures and bundling of multiple procedures   | 7/28/2024 4:42 PM |
| 103 | none   | 7/28/2024 4:40 PM |
| 104 | Need unity and a concerted voice   | 7/28/2024 4:39 PM |
| 105 | Prior authorizations and step therapy continue to create roadblocks and delays   | 7/28/2024 4:34 PM |

### Q18 For your CME needs, which do you generally prefer?

Answered: 359 Skipped: 22

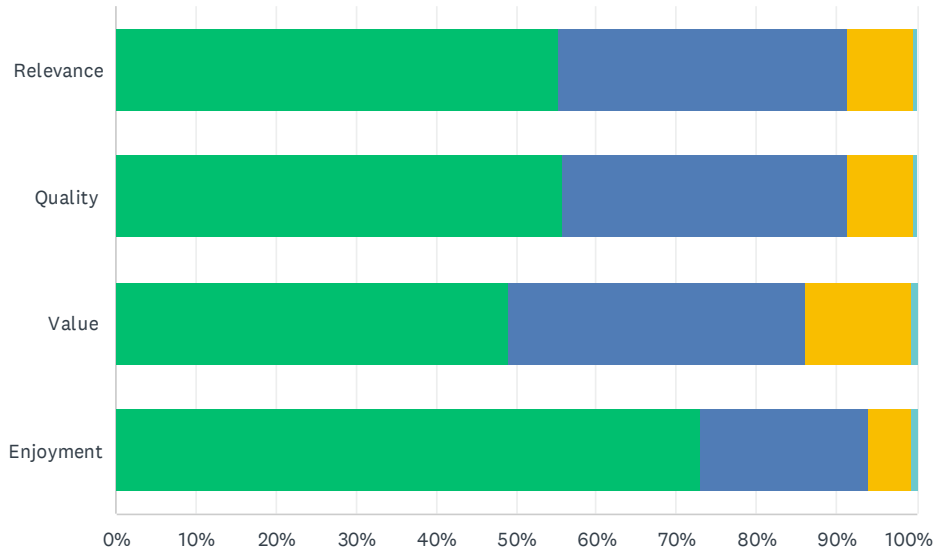


| ANSWER CHOICES           | RESPONSES |            |
|--------------------------|-----------|------------|
| Attending meetings       | 51.25%    | 184        |
| Virtual / online courses | 35.93%    | 129        |
| No preference            | 12.81%    | 46         |
| Other (please specify)   | 0.00%     | 0          |
| <b>TOTAL</b>             |           | <b>359</b> |



### Q19 If attended in the last 10 years, how would you rate the Western Section annual meetings?

Answered: 304 Skipped: 77



■ Excellent   
 ■ Good   
 ■ Average   
 ■ Poor

|           | EXCELLENT     | GOOD          | AVERAGE      | POOR       | TOTAL | WEIGHTED AVERAGE |
|-----------|---------------|---------------|--------------|------------|-------|------------------|
| Relevance | 55.12%<br>167 | 36.30%<br>110 | 8.25%<br>25  | 0.33%<br>1 | 303   | 1.54             |
| Quality   | 55.78%<br>169 | 35.64%<br>108 | 8.25%<br>25  | 0.33%<br>1 | 303   | 1.53             |
| Value     | 49.17%<br>149 | 36.96%<br>112 | 13.20%<br>40 | 0.66%<br>2 | 303   | 1.65             |
| Enjoyment | 72.94%<br>221 | 21.12%<br>64  | 5.28%<br>16  | 0.66%<br>2 | 303   | 1.34             |

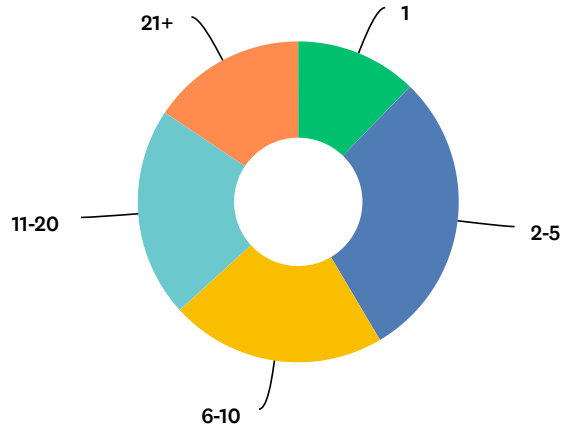
## Q20 Please indicate your type of practice? (please check all that apply)

Answered: 359 Skipped: 22

| ANSWER CHOICES  | RESPONSES |    |
|---|-----------|----|
| Private practice, urology solo  | 10.31%    | 37 |
| Private practice, urology group or network                                | 18.66%    | 67 |
| Private practice, multi-specialty group                                   | 10.03%    | 36 |
| Employee of an integrated health delivery system (e.g. Kaiser Permanente) | 17.27%    | 62 |
| Government / military employee  | 6.69%     | 24 |
| Employee of teaching hospital / Academic center                           | 24.23%    | 87 |
| Employee of a hospital system   | 15.04%    | 54 |
| Administrative  | 0.56%     | 2  |
| Retired   | 1.67%     | 6  |
| Other (please specify)  | 3.06%     | 11 |
| Total Respondents: 359  |           |    |

## Q21 How many urologists are in your practice / group?

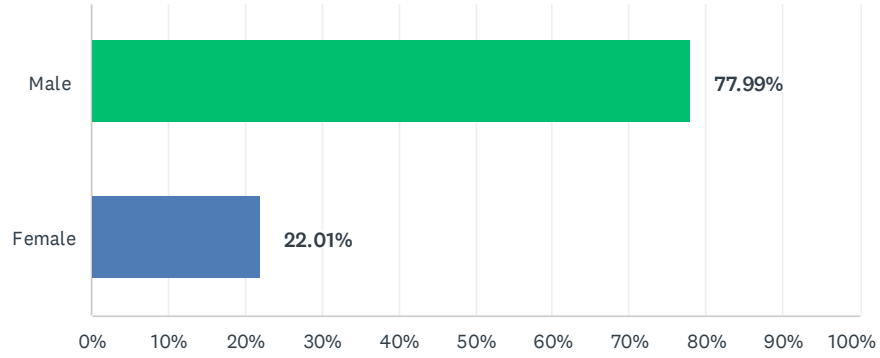
Answered: 359 Skipped: 22



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| 1              | 12.26%    | 44  |
| 2-5            | 29.25%    | 105 |
| 6-10           | 21.73%    | 78  |
| 11-20          | 21.17%    | 76  |
| 21+            | 15.60%    | 56  |
| TOTAL          |           | 359 |

## Q22 Your Gender

Answered: 359 Skipped: 22



| ANSWER CHOICES | RESPONSES |     |
|----------------|-----------|-----|
| Male           | 77.99%    | 280 |
| Female         | 22.01%    | 79  |
| TOTAL          |           | 359 |

