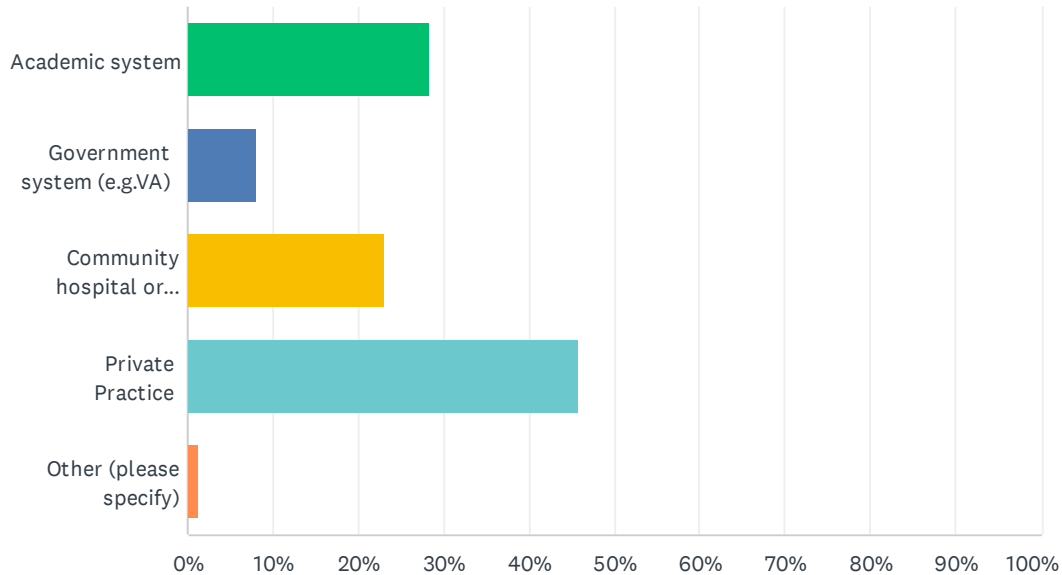


## Q1 Please describe in which system or setting you predominantly practice. Select all that apply

Answered: 74 Skipped: 0

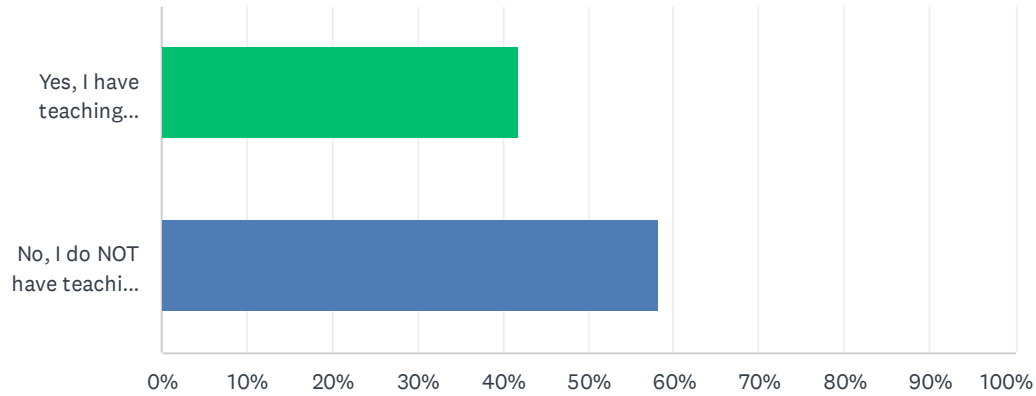


ANSWER CHOICES		RESPONSES	
Academic system		28.38%	21
Government system (e.g.VA)		8.11%	6
Community hospital or hospital system as employed practitioner		22.97%	17
Private Practice		45.95%	34
Other (please specify)		1.35%	1
Total Respondents: 74			

#	OTHER (PLEASE SPECIFY)	DATE
1	Employed in multispecialty group	9/27/2023 5:32 PM

## Q2 Do you have teaching responsibilities for residents and/or fellows in thyroid procedures (thyroid FNA and/or thyroid ultrasound)?

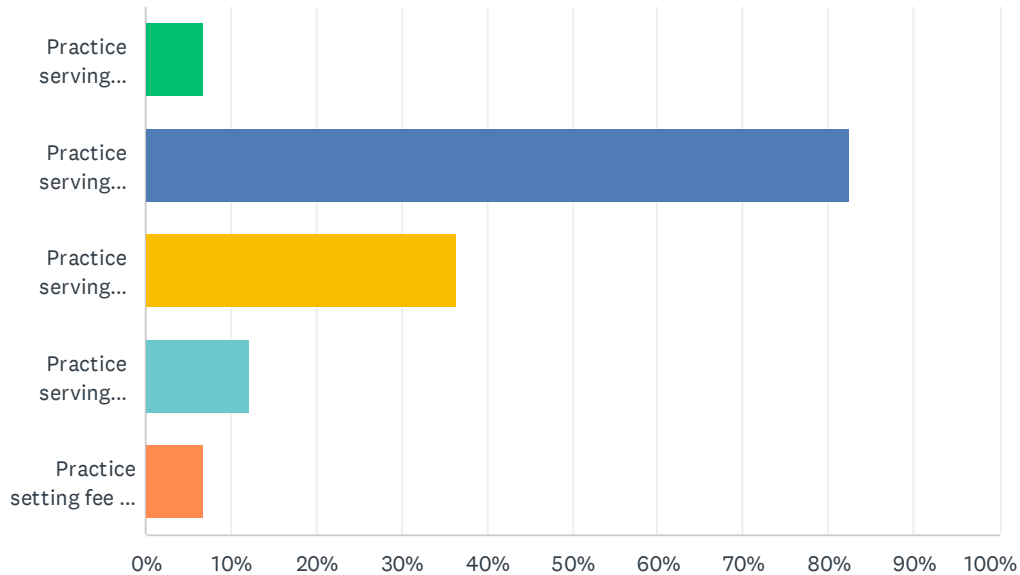
Answered: 74 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes, I have teaching responsibilities	41.89%	31
No, I do NOT have teaching responsibilities	58.11%	43
TOTAL		74

### Q3 Please describe in which setting you predominantly practice. Select all that apply

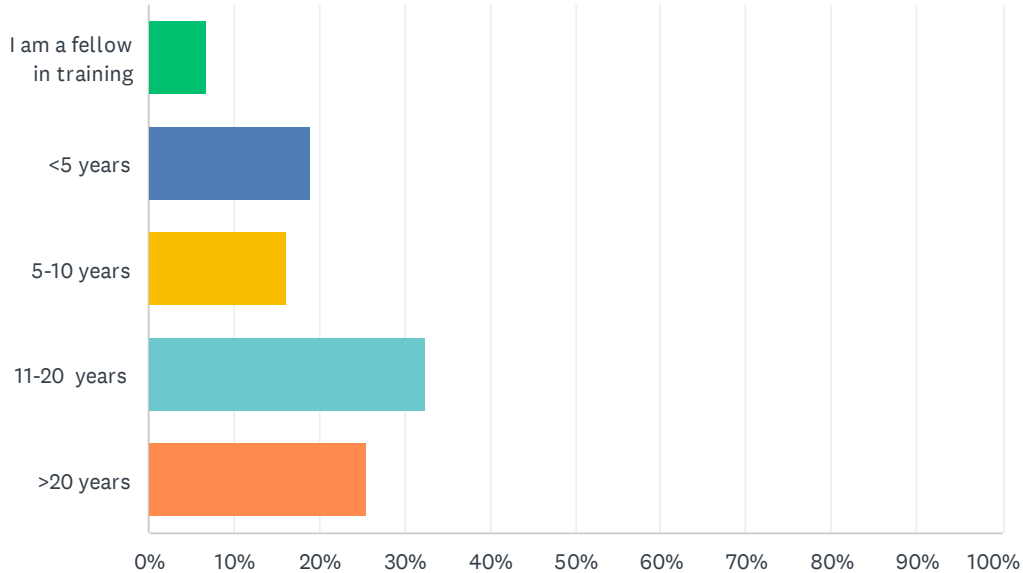
Answered: 74 Skipped: 0



ANSWER CHOICES	RESPONSES	
Practice serving predominantly rural population	6.76%	5
Practice serving predominantly urban and/or suburban population	82.43%	61
Practice serving predominantly affluent, insured population	36.49%	27
Practice serving predominantly disadvantaged or uninsured population	12.16%	9
Practice setting fee for service/ Out of Network/cash based	6.76%	5
Total Respondents: 74		

## Q4 How many years have you been in practice since completion of fellowship training?

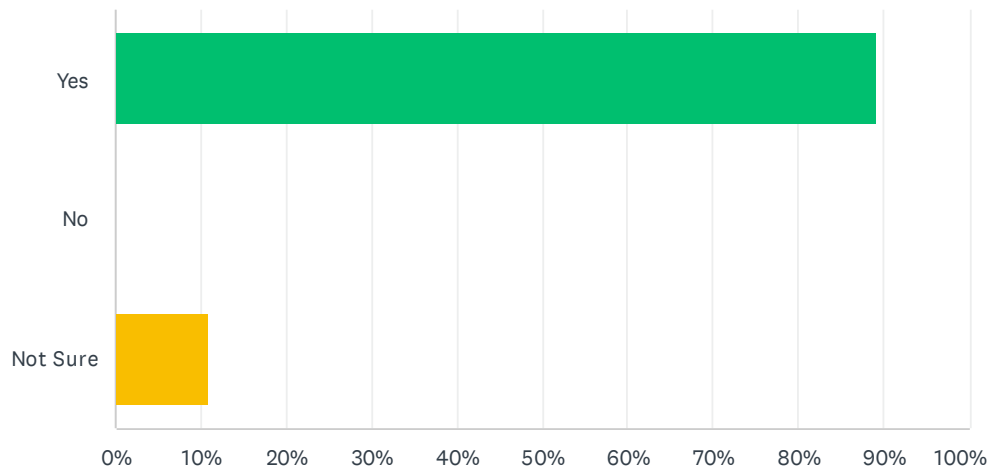
Answered: 74 Skipped: 0



ANSWER CHOICES	RESPONSES	
I am a fellow in training	6.76%	5
<5 years	18.92%	14
5-10 years	16.22%	12
11-20 years	32.43%	24
>20 years	25.68%	19
TOTAL		74

**Q5 Do you think that the American Medical Association/Specialty Society Relative Value Scale Update Committee (RUC) should revalue CPT codes 10005 and 10006? (codes for thyroid FNA with ultrasound guidance)**

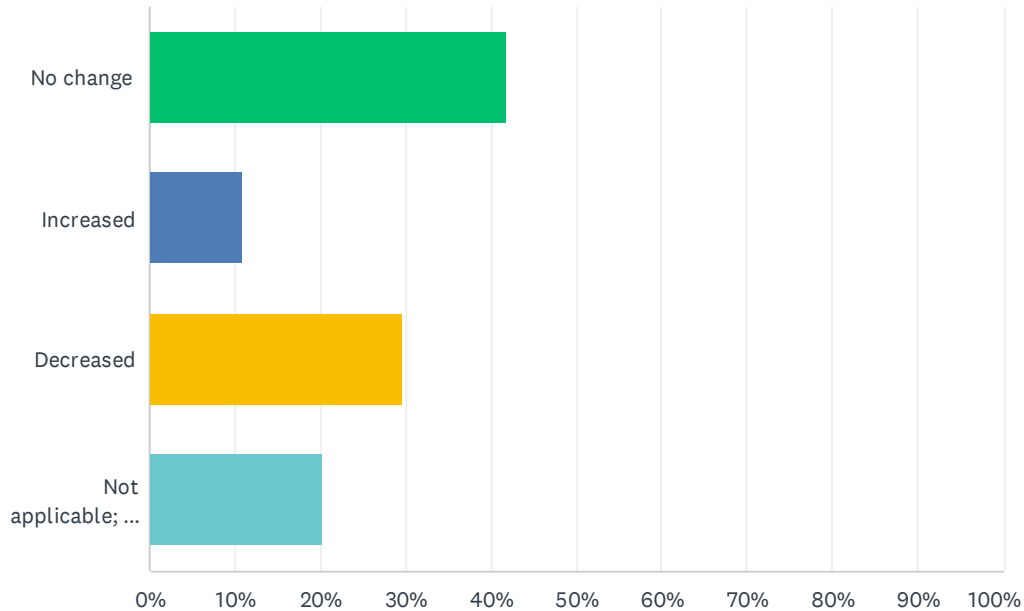
Answered: 74 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	89.19%	66
No	0.00%	0
Not Sure	10.81%	8
TOTAL		74

## Q6 Has the number of FNA procedures you perform in practice changed since the decrease in valuation of FNA by CMS in 2019?

Answered: 74 Skipped: 0



ANSWER CHOICES	RESPONSES	
No change	41.89%	31
Increased	10.81%	8
Decreased	29.73%	22
Not applicable; I did not practice prior to 2019	20.27%	15
Total Respondents: 74		

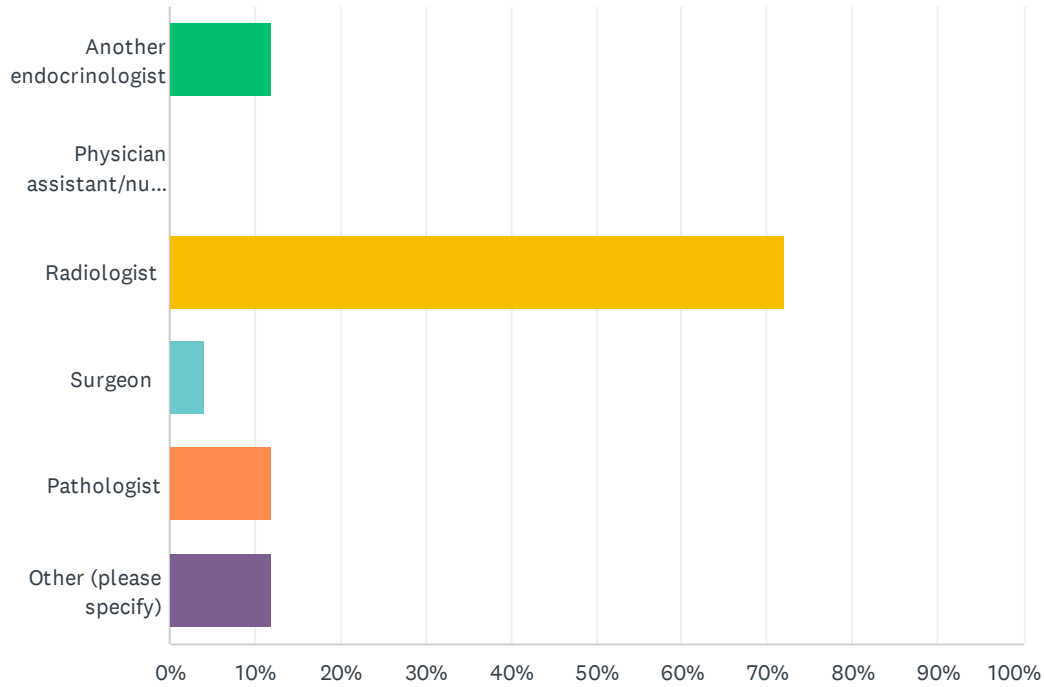
#	IF THE NUMBER HAS INCREASED OR DECREASED, ESTIMATE THE % CHANGED	DATE
1	Down 20% - due to unrelated practice changes	10/4/2023 8:08 PM
2	2%	10/4/2023 9:27 AM
3	20%	10/3/2023 2:41 PM
4	30	10/3/2023 7:27 AM
5	50% down	10/3/2023 12:21 AM
6	30%	10/2/2023 2:44 PM
7	10	10/2/2023 2:31 PM
8	20	9/29/2023 6:29 AM
9	33%	9/28/2023 10:13 PM
10	50-75%	9/28/2023 4:31 PM

## FNA Reimbursement Survey

11	30%	9/28/2023 2:58 AM
12	10	9/27/2023 9:08 PM
13	50	9/27/2023 7:03 PM
14	50	9/27/2023 4:06 PM
15	30	9/27/2023 11:48 AM
16	I no longer perform FNA because of reimbursement starting 2023	9/27/2023 10:22 AM
17	10%	9/27/2023 9:45 AM
18	50-75%	9/21/2023 4:00 PM
19	50%	9/21/2023 10:58 AM

## Q7 If you DO NOT perform FNAs, please describe to whom you refer FNAs. Select all that apply

Answered: 25   Skipped: 49



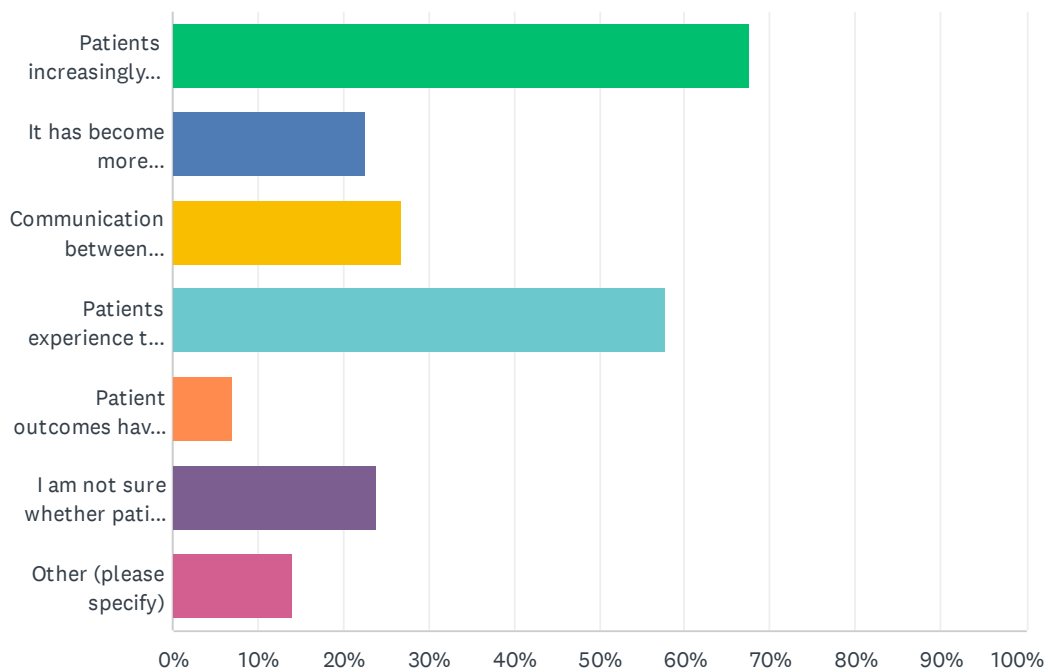
ANSWER CHOICES	RESPONSES	
Another endocrinologist	12.00%	3
Physician assistant/nurse practitioner	0.00%	0
Radiologist	72.00%	18
Surgeon	4.00%	1
Pathologist	12.00%	3
Other (please specify)	12.00%	3
Total Respondents: 25		

#	OTHER (PLEASE SPECIFY)	DATE
1	Na	10/1/2023 7:44 AM
2	n/a	9/27/2023 5:32 PM
3	radiology at hospital which is usually a PA with minimal experience	9/21/2023 4:00 PM



## Q8 Please indicate how you think patient outcomes may have been affected by the change in FNA valuation by CMS in 2019. Select all that apply

Answered: 71 Skipped: 3



ANSWER CHOICES		RESPONSES	
Patients increasingly need to make additional appointments with outside providers or facilities which leads to inconvenience and/or expense		67.61%	48
It has become more challenging to find these services for my patient		22.54%	16
Communication between treating physician and patient is reduced		26.76%	19
Patients experience the inconvenience of having a procedure with different staff or location of service		57.75%	41
Patient outcomes have not been affected		7.04%	5
I am not sure whether patient outcomes have been affected, negatively or positively		23.94%	17
Other (please specify)		14.08%	10
Total Respondents: 71			

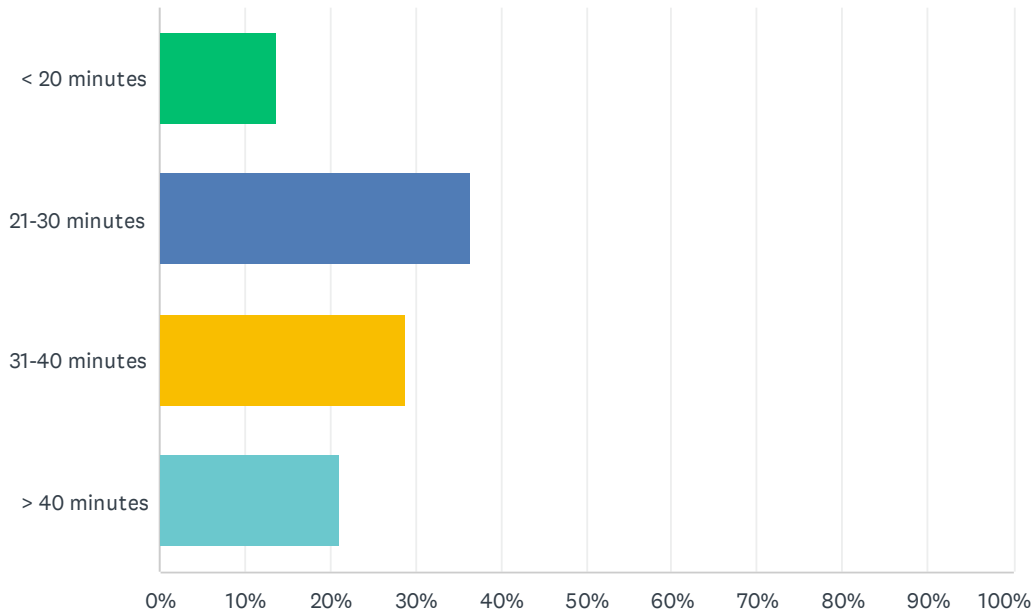
#	OTHER (PLEASE SPECIFY)	DATE
1	Patients sometimes need to have 2 procedures as the centers performing them are not keeping up with the evidence based care or do not have that opportunity.	10/12/2023 12:01 AM
2	I was not aware of the change. Perhaps ask radiology. Our practice refers to radiology because our institution decided this, as the fee is higher in the radiology/hospital setting. It works well for us, though.	10/6/2023 3:39 PM

## FNA Reimbursement Survey

3	Physician well-being has been impacted, and the valuation is ridiculously low.	10/6/2023 12:03 AM
4	I do FNAs but will only do 1/2 day per month as a 1/2 day of FNA give me far fewer RVUs that a 1/2 day of clinic. Beyond the # I can do in that clinic I refer to other providers.	10/2/2023 2:31 PM
5	Main issue is insurances (some) not covering ultrasound and fna on same day.	9/28/2023 2:40 AM
6	It takes much longer for patients to get FNA done due to scheduling	9/27/2023 9:08 PM
7	multiple appointments for office visit and procedure, patient inconvenience and difficulty with scheduling	9/27/2023 5:32 PM
8	Eventually this will cost everyone more because as i can't afford to do this anymore, pts needs multiple appts, 1 with me then IR or radiologist. the IR or Radiologists are more costly. then follow up with me if biopsy is abnormal. i used to perform all consults and biopsy's same day to make is more convenient for the patient but now i don't ever do that as i need to move to another patient faster and faster each year to just stay afloat	9/27/2023 11:48 AM
9	i am just doing the FNAs regardless of the reimbursement so patient care is not affected	9/27/2023 11:34 AM
10	Radiologist do not understand the usage of molecular studies which lead to unnecessary surgeries or repeated FNA. The cost is more for patients.	9/27/2023 10:22 AM

Q9 If you DO perform FNAs, please describe the time you typically spend with a patient (i.e., discussion of procedure, consent, preparation for procedure, patient positioning, ultrasound guidance, procedure, post-procedure patient monitoring and clean-up).

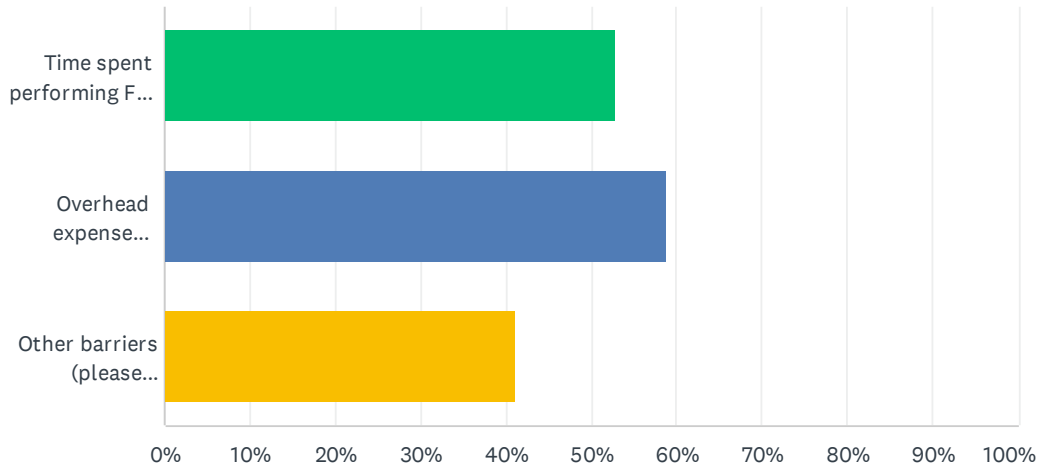
Answered: 66 Skipped: 8



ANSWER CHOICES	RESPONSES	
< 20 minutes	13.64%	9
21-30 minutes	36.36%	24
31-40 minutes	28.79%	19
> 40 minutes	21.21%	14
TOTAL		66

## Q10 If you DO NOT perform FNAs, please SELECT factors that led to this decision. Select all the apply

Answered: 17   Skipped: 57



ANSWER CHOICES	RESPONSES	
Time spent performing FNA is not as well reimbursed as seeing a patient in consultation or follow-up (less value than E/M code for visits seen in similar time)	52.94%	9
Overhead expense (sonographer, ultrasound equipment, room charges, prior authorization cost)	58.82%	10
Other barriers (please specify)	41.18%	7
Total Respondents: 17		

#	OTHER BARRIERS (PLEASE SPECIFY)	DATE
1	Hospital can charge higher fee/hospital fee.	10/6/2023 3:39 PM
2	Not routine belt done by physician	10/4/2023 9:27 AM
3	I didn't like any intervention.	9/29/2023 3:54 AM
4	I don't like doing them	9/27/2023 10:36 PM
5	Not extremely interested in doing FNAs/don't feel I have enough experience to expertly perform them.	9/27/2023 8:10 PM
6	Not interested in performing procedures	9/27/2023 7:12 PM
7	Not covered by some plans if done in office	9/27/2023 7:03 PM