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**The Salary Surveys:
 What's Available and What Should You Use as Your Goal
 Standard for Negotiating With Your Health-System:
 The AAMC Survey**

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Conflict of Interest & Why am I Qualified to do This?

- I have no conflicts except:
 - I have a long standing interest in the economics of academic anesthesia practice dating back to collaborations which began with Amr Abouleish and other in the late 1990's.
 - We continue to perform collaborative research utilizing national databases.
- At UTSW we have recently undergone over \$2 billion of health care construction on Harry Hines Blv., in Dallas, Texas. Our hours of operation/sites of service have increased by almost 50% in the last year. Case volume in 2015 was greater than 150,000 Anesthetics.

General Survey Information

- The data from this survey are used to help Deans assess their compensation to assist individuals at medical schools and other organizations who need to set or evaluate compensation for Deans or comparable positions.

Instructions and Definitions

Includes:

- Only 12-month salaries for full-time paid faculty, chairs, and chiefs by department or division.
- Full salary of faculty on sabbatical leave.
- All full-time research faculty regardless of tenure status.
- Employee retirement contributions as part of the salary reduction program.

Excludes:

- Full salary for vacant positions.
- Employer retirement contributions as part of a salary reduction program.

Rank

- For purposes of this survey, a Chief is defined as the head of the unit, just smaller than the department, while a Chair is defined as the head of the department . If a person is both a Chair and a Professor, please indicate Chair. If a person is both a Chief and a Professor, please indicate Chief.

Compensation

- The compensation reported should reflect the total amount before deductions are made for taxes and retirement set-asides. No benefits or services provided by the institution should be considered in determining compensation. All source of income (for example, income from the medical school and affiliated institutions) should be included.

Compensation Component Definitions

- Fixed / Contractual Salary: Compensation, exclusive of fringe of benefits, that was fixed at the beginning of the fiscal year and contractually obligated to the faculty member for that year assuming satisfactory performance.

Compensation Component Definitions

Medical Practice Supplement:

- Income that was not fixed at the beginning of the fiscal year but was directly tied to the amount of medical practice earnings during the year derived from the institutionally controlled or affiliated source.

Compensation Component Definitions

Bonus/Incentive Pay:

- Income earned by the faculty member as a result of the achievement of specific performance goals by the individual or the department or institution. Examples of bonus/incentive pay are:
 - Year-end bonus from a faculty practice plan.
 - Incentive earnings according to the practice plan.
 - Outside earnings where limited or controlled by the institution.

Compensation Component Definitions

Uncontrolled Outside Earnings:

- Known but unregulated outside professional income related to the health professions (e.g., patient services income, royalties, and consulting fees). Do not report income from affiliated institutions in uncontrolled Outside Earnings; report income from affiliated institutions in Fixed Salary, Medical Practice Supplement, and/or Bonus Pay, as appropriate.

At UTSW 2 of our 5 affiliated institutions utilize the AAMC survey for contracting anesthesiology services. They do this in distinctly different ways.

SAAA 2015 Compensation Total Compensation Including Income Plus Pension Contributions

Compensation Includes Income Plus Pension Contribution	25%	Median	75%
Instructor	256,059	280,000	312,910
Assistant Professor	308,560	336,400	367,289
Associate Professor	333,880	372,909	403,753
Professor	349,318	391,707	428,370
Chair	520,000	568,560	632,575

AAMC Compensation Data (No Pension Contributions)

Department	Rank	P25	P50	P75
Total Anesthesiology	Chair	526	589	663
Total Anesthesiology	Chief	362	416	468
Total Anesthesiology	Professor	336	386	437
Total Anesthesiology	Associate Professor	323	370	420
Total Anesthesiology	Assistant Professor	298	341	385
Total Anesthesiology	Instructor	231	282	340

AAMC Compensation Data (No Pension Contributions)

Department	Rank	P25	P50	P75
Anesthesiology: General	Chair	524	588	661
Anesthesiology: General	Chief	366	414	475
Anesthesiology: General	Professor	336	386	434
Anesthesiology: General	Associate Professor	325	367	416
Anesthesiology: General	Assistant Professor	297	341	385
Anesthesiology: General	Instructor	232	287	342

AAMC Compensation Data (No Pension Contributions)

Department	Rank	P25	P50	P75
Anesthesiology: Pain Management	Chair			
Anesthesiology: Pain Management	Chief	407	441	464
Anesthesiology: Pain Management	Professor	320	350	405
Anesthesiology: Pain Management	Associate Professor	301	330	381
Anesthesiology: Pain Management	Assistant Professor	289	323	388
Anesthesiology: Pain Management	Instructor	215	255	326

AAMC Compensation Data (No Pension Contributions)

Department	Rank	P25	P50	P75
Anesthesiology: Pediatric	Chair			
Anesthesiology: Pediatric	Chief	407	386	418
Anesthesiology: Pediatric	Professor	352	411	466
Anesthesiology: Pediatric	Associate Professor	342	407	441
Anesthesiology: Pediatric	Assistant Professor	309	351	385
Anesthesiology: Pediatric	Instructor	232	257	319

Hospital A

- Works with us and other clinical departments in the divisional guarantee model to calculate the cost of coverage.
- They utilize 50% compensation for the Associate Professor level (Hospital A is still utilizing 2013 data).
- We collectively work with Hospital A to determine the number of FTE's necessary to provide the sites of service and hours of operation to cover their facility.
- This methodology potentially provides return on investment.

Hospital B

Utilizes AAMC data as they provide support to the department based on 50% data for each faculty assigned at specific academic rank assigned to that facility. This covers your actual cost. This model provides no margin.

