

HPC DATAPOINTS

Changes in the Massachusetts Physician Market: Data from the Massachusetts Registration of Provider Organizations (MA-RPO) Program

How physicians are organized and affiliated can impact health care spending, utilization, and care delivery, but a lack of publicly available data has hindered efforts to study physician affiliations to date. In this issue of DataPoints, the HPC uses data from the [Massachusetts Registration of Provider Organizations \(MA-RPO\) program](#), a first-in-the-nation statutory reporting requirement designed to collect public, standardized information on the structures and relationships of large Massachusetts providers,ⁱ to examine physician affiliations and changes in the physician market.

The dataset includes a physician roster file that contains key information about nearly all practicing physicians in Massachusettsⁱⁱ and allows users to track physician affiliation changes over time.

This is a printable version of DataPoints. The online version features interactive graphics that show additional information, and is available on the HPC's website at www.mass.gov/service-details/hpc-datapoints-series.

METHODOLOGY

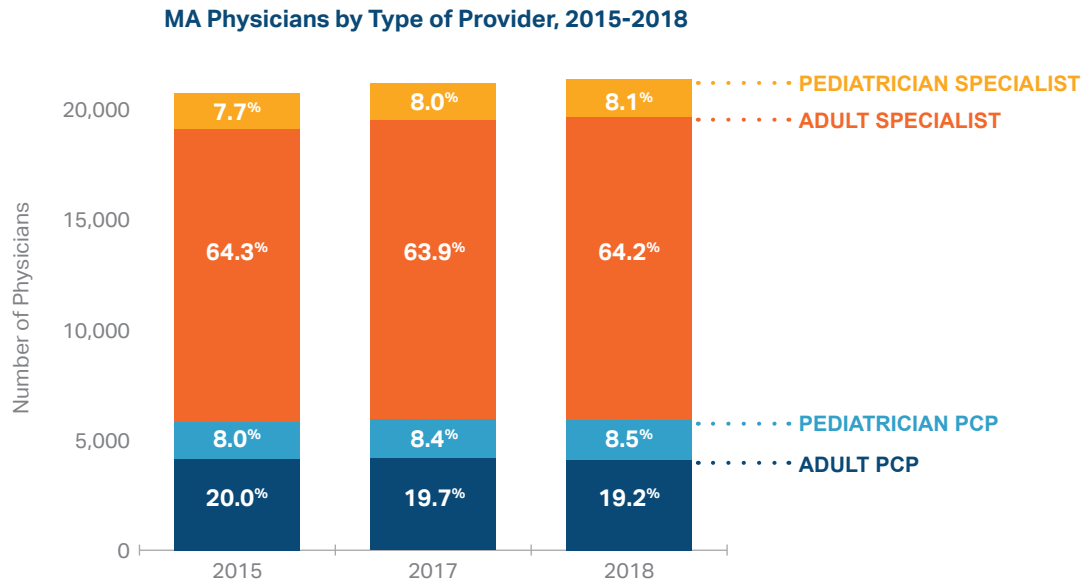
The HPC used data from the 2015, 2017, and 2018 MA-RPO physician roster files. The physician roster contains names, National Provider Identifiers (NPIs), license numbers, specialties, employment status, practice sites, and medical group affiliations for all physicians that are part of a provider organization's contracting network. It also identifies whether physicians are primary care providers (PCPs), specialists, or both, and whether physicians are pediatricians (physicians either holding themselves out as pediatricians or who spend a significant amount of their clinical time seeing pediatric patients).

OVERVIEW OF THE MASSACHUSETTS PHYSICIAN MARKET

There were 21,358 physicians in the 2018 MA-RPO physician roster. Of these, 5,908 (27.7%) were PCPs and 15,450 (72.3%) were specialists. Since 2015, the number of physicians in the MA-RPO roster increased 3.0% (from 20,732).ⁱⁱⁱ The number of specialists increased more than the number of PCPs (3.4% compared to 2.0%) between 2015 and 2018.

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- i Providers with at least \$25 million in commercial net patient service revenue are required to report to the MA-RPO program annually, including information about corporate and contracting affiliates. The MA-RPO data is a free, publicly available resource. All files except for the physician roster are available on the HPC website at <https://www.mass.gov/service-details/ma-rpo-data>. To request copies of the physician roster files, please email HPC-RPO@mass.gov.
 - ii Registering provider organizations are required to report data regarding all physicians that are part of that organization's contracting network, including employed physicians as well as affiliated physicians that have at least one payer contract negotiated by the provider organization. An HPC analysis found that the 2015 MA-RPO physician roster contains approximately 92% and 105% of the physicians in similar commercial datasets.
 - iii The increase in the number of physicians reported between 2015 and 2018 could represent an increase in the number of physicians practicing in MA, an increase in the percentage of physicians in MA affiliated with an organization required to report to the MA-RPO program (e.g., through the acquisition of a smaller practice), or both.

Of the 21,358 physicians in the 2018 MA-RPO physician roster, 3,535 (16.6%) were pediatricians, an increase of 9.0% from the 3,255 reported in 2015.

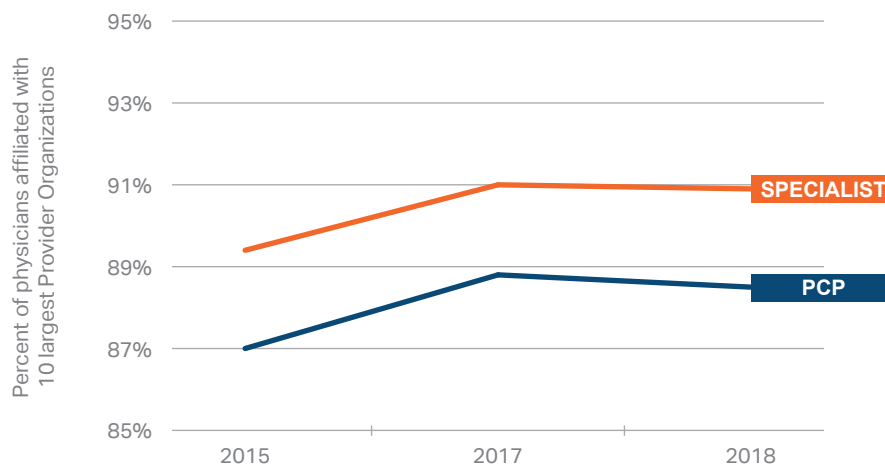


PHYSICIANS AFFILIATED WITH THE TEN LARGEST MA PROVIDER ORGANIZATIONS

The share of physicians in the 10 largest provider organizations in Massachusetts increased slightly between 2015 and 2018: 18,398 physicians (88.7%) in 2015 and 19,282 (90.3%) in 2018.^{iv} The trend is similar for PCPs and specialists. In 2015, 87.0% of PCPs and 89.4% of specialists, and in 2018, 88.5% of PCPs and 90.9% of specialists were affiliated with the 10 largest provider organizations.

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Share of physicians affiliated with 10 largest Provider Organizations

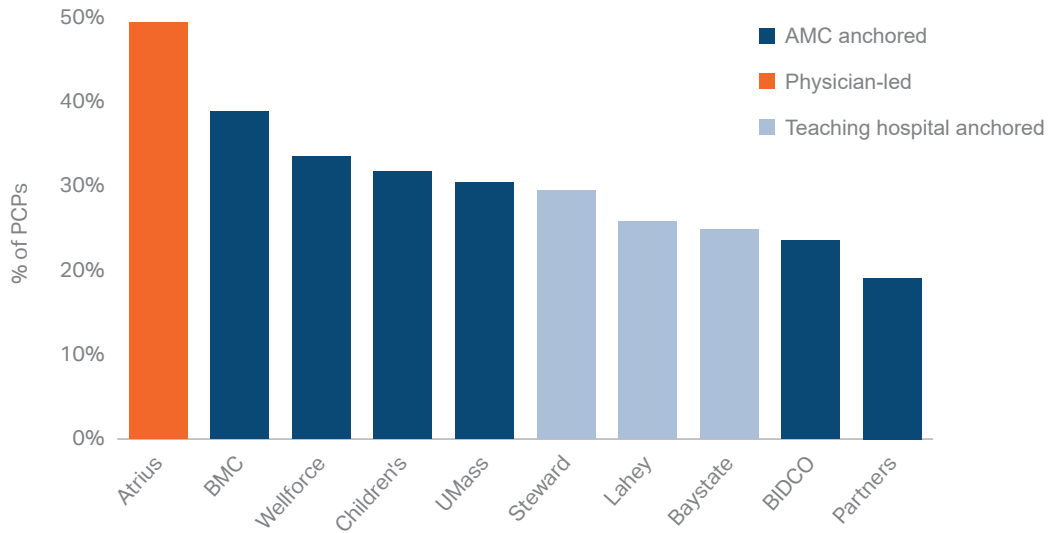


^{iv} This share may be an overestimate because, as discussed above, smaller Massachusetts provider organizations are not required to report to the MA-RPO program and because, when a physician is affiliated with both one of the 10 largest provider organizations and an organization that is not one of the 10 largest provider organizations, the HPC assigns that physician only to the largest provider organization.

Primary Care Physicians

Consistent with the differences among the 10 largest provider organizations, the proportion of physicians that are PCPs in these organizations varied, from a high of 49.4% (Atrius, a physician-led provider organization) to a low of 19.1% (Partners, an AMC-anchored provider organization) in 2018 as shown in the graphic below.

Share of physicians that are PCPs at 10 largest Provider Organizations, 2018



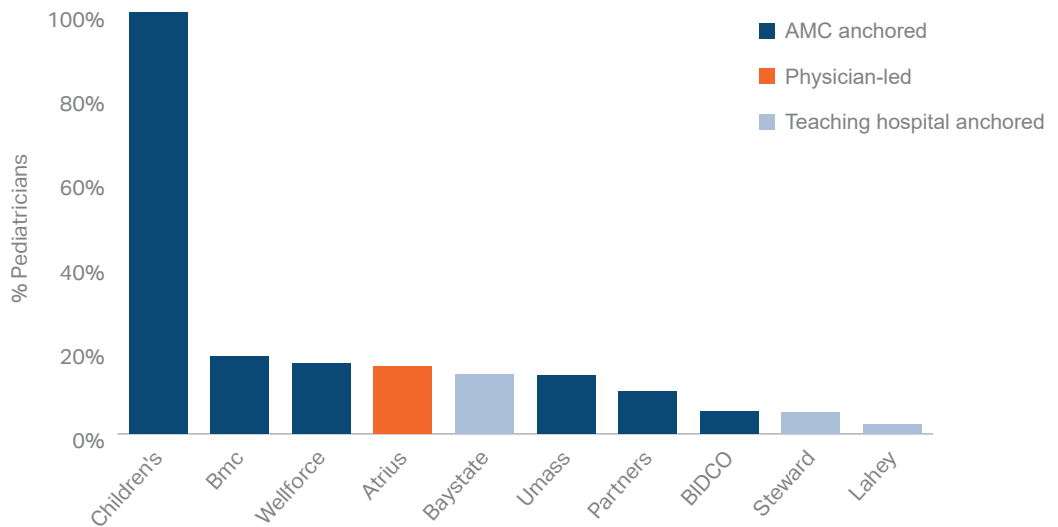
The proportion of physicians that are PCPs in the 10 largest provider organizations varied, from a high of 49.4% to a low of 19.1% in 2018.

Pediatricians

The majority of pediatricians in the MA-RPO dataset were affiliated with one of the 10 largest provider organizations (93.7% in 2018, up from 93.2% in 2015).

However, within the 10 largest provider organizations, the share of physicians that are pediatricians varied substantially (ranging from 100% of the physicians at Children's in 2018 to 2.3% of the physicians at Lahey).

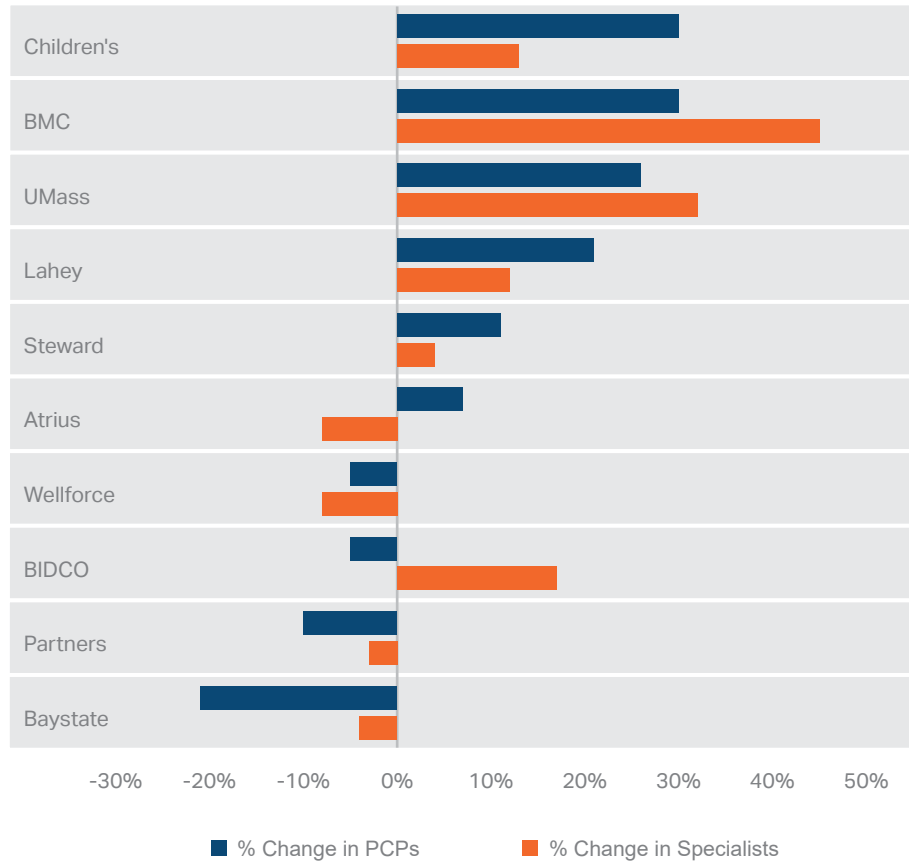
Share of physicians that are pediatricians at 10 largest Provider Organizations, 2018



Changes in PCP, Specialist, and Total Physician Counts

Some of the 10 largest provider organizations experienced growth in the number of PCPs, specialists, and total physicians while others saw declines between 2015 and 2018, as shown below.^v

Percent Change in Physician Volume by Provider Type, 2015-2018



Some of the 10 largest provider organizations experienced **growth** in the number of **PCPs, specialists, and total physicians** while others saw **declines** between 2015 and 2018.

MOVEMENT OF PHYSICIANS BETWEEN PROVIDER ORGANIZATIONS

Between 2015 and 2018, some physicians joined organizations that report to the MA-RPO program and other physicians left (18.4% of the physicians reported in 2018 were newly reported since 2015, and 15.4% of the physicians reported in 2015 were no longer reported in 2018).

In the large provider organizations, the degree to which physicians remained with the same provider organization between 2015 and 2018 varied. For the 10 largest provider organizations, for each physician in the 2015 MA-RPO physician roster, the HPC identified whether that physician was still in the same provider organization's contracting network in 2018, whether the physician was part of a different provider organization's contracting network (either one of the 10 largest provider organizations in Massachusetts or a smaller provider organization), or whether that physician was no longer

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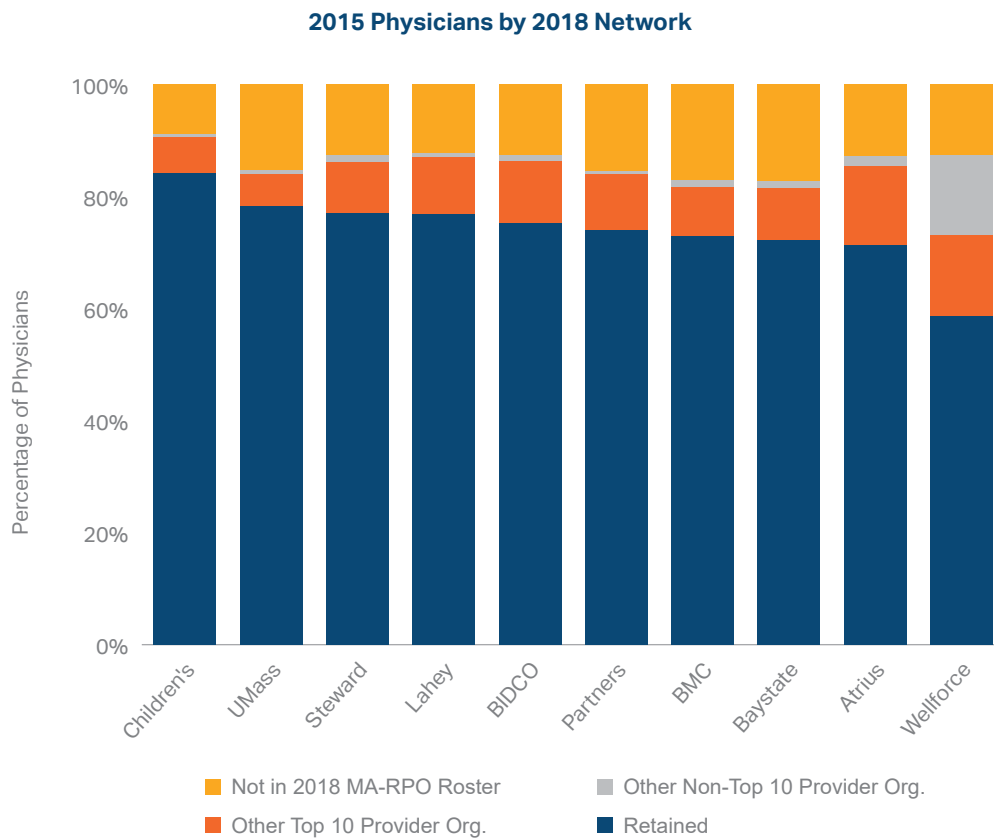
^v Data represent both employed and affiliated physicians. Growth in PCP and specialist volume may represent new contracting relationships for a specific insurance product (e.g., affiliated physician groups participating in a Medicare ACO through a new contracting entity) or growth in individual PCPs and specialists employed or affiliated with a given organization.

The Massachusetts Health Policy Commission (HPC) is an independent state agency that develops policy to reduce health care cost growth and improve the quality of patient care. The HPC's mission is to advance a more transparent, accountable, and innovative health care system through its independent policy leadership and investment programs.

HPC DataPoints is a series of online briefs that spotlight new research and data findings relevant to the HPC's mission to drive down the cost of health care. It showcases brief overviews and interactive graphics on relevant health policy topics. The analysis underlying these briefs is conducted by HPC staff. To view all HPC DataPoints, visit our [website](#).

listed in the roster in 2018 (which could indicate, for example, that the physician left the state, retired, or was now affiliated with an organization with commercial net patient service revenue below the MA-RPO reporting threshold). *Note, the graphic below does not show physicians added to these provider organizations between 2015 and 2018.*

The physician roster changes identified reflect both changes in individual physician employment and organizational changes (e.g., corporate or contracting affiliation changes). For instance, most of the physicians that left the Wellforce network between 2015 and 2018 were the result of Southcoast Health Network ending its contracting relationship with Wellforce.



CONCLUSION

The Massachusetts physician market is dynamic and the MA-RPO dataset is a powerful tool for tracking changes in the physician market over time. More work is needed to understand and contextualize the factors that contribute to changes in the physician affiliations and the implications of those changes on health care cost, quality and access for Massachusetts residents.