

**PROPOSAL FOR**

**A STUDY OF THE NATURE AND EXTENT OF THE  
MEDICAL PROFESSION'S UNCOMPENSATED ACTIVITIES**

**Prepared by**

**THE CENTER FOR APPLIED SOCIAL RESEARCH**

**New York University**

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## INTRODUCTION

Recent discussions concerning legislation to provide medical care within the framework of Social Security for people over 65 years of age have raised once again certain frequently recurring questions about the uncompensated activities of members of the medical profession. These questions inevitably arise in all discussions of the cost of medical care, of health insurance, of "socialized medicine". Valid information about the nature and the extent of the uncompensated services rendered by members of the medical profession would seem to be of considerable usefulness to the profession itself, of critical importance in legislative discussions, and of wide interest to the general public. It is, perhaps, not surprising that such information is nowhere available, for it presents a severe challenge to techniques of data collection. Physicians are not the most accessible people in our population, except to their patients, and available records are not very revealing. Moreover, the matter is considerably complicated by variations in the concept of "uncompensated" held by different members of the profession, and in their attitudes toward such services. Nevertheless, we believe, that the research program outlined below can provide significant information, highly useful to a number of groups in the population and of considerable interest to the public at large.

## PART I

### PILOT STUDY

#### A. Objectives

1. To ascertain the range of meanings given by physicians to the terms "compensated" and "uncompensated" services.
2. To ascertain the range of physicians' attitudes toward "uncompensated" services.
3. To ascertain the limits of information, particularly the degree of detail, obtainable in interviews with physicians.
4. To provide information for the development of an interview guide for use in a national survey.

#### B. Method of Study

1. The PILOT STUDY will consist of focused interviews of a selected sample of 30 physicians in the Metropolitan New York Region, stratified by residence (e.g., Metropolitan New York, urban in New Jersey, suburban, rural) and by discipline (e.g., general practice, surgery, geriatrics, ophthalmology).
2. The content of the interviews will be focused on the general question of what kinds of activities occupy how much of the physician's professional time. Emphasis will be placed upon activities perceived as uncompensated. It is planned to probe for:
  - a. Amount of time spent in such activities as: service in hospital clinics, treating indigent ~~private~~ patients without compensation, completing insurance forms and keeping insurance records, keeping up case history records, serving on community health boards or committees, advice or prescription over telephone, time consumed by travel to and from house calls, consultation with families of patients, broken appointments.

- b. Variability in concepts of compensation:  
e.g., monetary, experience and learning,  
professional prestige, access to hospitals,  
access to potential patients, satisfaction  
in community service.
- c. Attitudes toward uncompensated services:  
an unwarranted imposition, unnecessary but  
demanded by social pressure, of importance  
for professional reasons, justifiably  
necessary, enjoyable as a social service.

### C. Staff

The interviews will be conducted by members of the research staff, with at least a Master's Degree in Psychology or Social Work and experience in depth interviewing. Cooperation of local medical societies will be sought in selecting the sample and arranging interviews.

### D. Time-Table for Study

Construction of interview instrument)	
Selection of sample	) two weeks
Briefing of interviewers	)
Conduct of interviews --	three weeks
Analysis of data --	one week
Total:	six weeks

E. Cost of study: \$2990

## PART II

### NATIONAL SURVEY

#### A. Objectives

1. To ascertain the nature and the extent of uncompensated activities carried on by the medical profession.
2. To estimate the attitudes of physicians toward "uncompensated" activities, and their suggestions for a solution to the problem, if they perceive it as one.

#### B. Method of Study

1. Upon the basis of the data provided by the PILOT STUDY, an interview guide of realistic length will be prepared and pre-tested. Experienced interviewers will be trained in the use of this instrument, and then proceed to conduct focused interviews with a nationwide, selected sample of physicians.
2. The required sample is tentatively estimated as 1,000 interviews, stratified in terms of geographic residence (north, south, midwest, far west), demographic residence (metropolitan, urban, suburban, rural), and discipline (general practice, surgery, geriatrics, pediatrics, ophthalmology).
3. If special interest is expressed in services to people over 65, it may be necessary to oversample in the proportion of practitioners caring for the aged, or in terms of the geographic age distribution in the population.
4. If the data of the PILOT STUDY should indicate medical insurance to be a significant influence upon the extent of uncompensated service, the sampling may have to take into consideration variations in the national distribution of medical insurance.

**C. Analysis of Data**

1. Details of the analysis of data cannot be presented until the data of the PILOT STUDY have indicated the content of the interview instrument. The primary function of the analysis will be to present the facts of the nature and extent of their uncompensated activities as they are reported by the sample of physicians interviewed. Special geographical breakdowns of data can be provided. If desired, special analysis will be made of the services rendered to the "over-65" age group.
  
2. Secondary analysis, consisting of theoretical and interpretative reports, may be provided by the Center, depending upon the wishes of the client and agreement in the final contract.

**D. Time-table: 12 months**

**E. Cost: This cannot be accurately estimated until the PILOT STUDY is completed. Indications are that the final costs of the project would fall somewhere between sixty and seventy-five thousand dollars.**

## STAFF

The members of the staff of the Center for Applied Social Research who would be principally concerned with the design and direction of this study would be:

Alfred de Grazia, Ph.D., Director of the Center, who is also Professor of Social Theory in Government at New York University, author of various treatises on government, editor of Grass Roots Private Welfare, and first president of the Foundation for Voluntary Welfare.

Carleton F. Scofield, Ph.D., Associate Director of the Center, who has spent twenty years in teaching and research in physiological psychology, in close association with members of the medical profession, and four years as director of a large research program in intercultural communication.

Gerhart Saenger, Ph.D., Program Director of the Center, who has conducted research in the field of mental health and public opinion during the last 15 years, and has also conducted studies on the utilization of time in the field of medicine as well as social work, one of them while Director of Research at the Institute of Motivational Research, and the other as a consultant to the Community Service Society of New York City.

Donald Gerard, M.D., Senior Research Scientist and Consultant in Psychiatry to the Center, who is engaged in the private practice of psychotherapy and psychoanalysis and serves as consultant and participant in research in medical-social problems with both the Research Center for Human Relations and the Center for Applied Social Research at New York University.

Miss Renee Wile, M.A., Associate Research Scientist with the Center, who has had ten years of social work experience in association with hospital medical staffs, five years of motivational interviewing, and considerable experience in the construction of questionnaires for social science follow-up studies.