

Appendix 1

Electronic Survey

In addition to being a key component of annual funding, billing is an important practice management activity, and falls under the Leader role of the CanMEDS framework. The Kingston-Thousand Islands (KTI) site of the Queen's Family Health Team is one of few academic teaching units across the province that incorporates education on billing into the residency curriculum and allows residents to bill. However, the impact of these practices on residents' confidence with billing has not been formally examined. Similarly, the perspectives and self-reported confidence of attending family physicians on billing is unknown.

We are surveying resident and attending family physicians of the KTI site to gather their perspectives on billing education currently provided within the Department of Family Medicine (DFM) and to assess their confidence with billing core clinical activities.

Demographics

1. I am a [resident/faculty/locum] physician. (Dropdown)
2. If resident, what year are you in? (dropdown)
(PGY1 or PGY2)
3. If resident, what cohort are you in?
(Cohort A or Cohort B)
4. If resident, do you plan on having a focused practice (e.g., Emergency Medicine, Anesthesia, Palliative Care)? (dropdown)
(Yes/No)
5. If yes, in what area? (dropdown)

Addiction Medicine
Family Practice Anesthesia
Cancer Care
Child and Adolescent Health
Chronic Pain
Dermatology
Developmental Disabilities
Emergency Medicine
Enhanced Skills Surgery
Global Health
Health Care of the Elderly
Hospital Medicine
Maternity and Newborn Care
Mental Health

Occupational Medicine
Palliative Care
Prison Health
Respiratory Medicine
Sport and Exercise Medicine
Other

Prior Experience

6. How many months or years of experience do you have with billing in a family medicine setting?

(free text, restricted to numerical values) + (months/years)

Pre-Education

7. Thinking back to when you first started working at the QFHT clinic, what were some of your initial questions about billing?

(free text)

8. Thinking back to when you first started working at the QFHT clinic, did you see any ways that you could have been introduced to billing that would have been better?

(free text)

Post-Education

9. What are some of the strengths of the billing education offered within the DFM?

(free text)

10. What areas related to billing are still unclear?

(free text)

11. What other ideas do you have for improving billing education?

(free text)

12. What resources do you access when you have a billing question?

(free text)

Other Opportunities

13. What changes, if any, would you make to the billing interface?

(free text)

Perceptions & Confidence

Please answer the following using the five-point Likert scale below.

Strongly Disagree

Disagree
Neutral
Agree
Strongly Agree

14. I believe it is important for residents to learn to bill.
15. I am confident in my ability to bill appropriately.
16. I am confident that I could teach others how to bill appropriately.
17. I am confident that I am able to identify common billing errors.
18. I am confident that my resident is able to identify common billing errors.
19. I am confident that my preceptor has the answers to my billing questions.
20. I am confident that I can find the answers to my billing questions.