

Description of AMA Physician Masterfile data for AMA Physician Profiles



For more than 60 years, the AMA has made the AMA Physician Masterfile available to the health care community to serve the public good and the medical industry. The Masterfile includes significant education, training and professional certification information on virtually all Doctors of Medicine (MD) educated in the United States. The Masterfile also includes information on Doctors of Osteopathic Medicine (DO) and international medical graduates who practice in the United States.

The AMA Physician Profile reports the following primary source information from the data maintained on the Masterfile. Each Masterfile record includes the physician's name, medical school and year of graduation, gender, birthplace, and birthdate. Additional data (i.e., residency training, state licensure, board certification, geographical location and address, type of practice, present employment, and practice specialty) are added from primary data sources or from surveying the physicians directly as their professional careers develop.

Profile data elements 1 – 6 can be supplied by the physician.

1. Name

At the time that a record is created, the name given by the reporting entity is used to establish a physician or student record on the AMA Masterfile. Name changes can be submitted to the AMA from data providers and from the physician personally. However, all name changes require legal supporting documentation before any update can be made to the physician's data. Acceptable supporting documents include marriage/divorce certificate, citizenship document, passport and birth certificate.

2. Address

A physician's professional mailing address appears on the AMA Physician Profile. This address is typically assigned by the physician and can be either a home or office address. Sources of address changes can also include: AMA mailings and publications, physician correspondence and correspondence from hospitals, government agencies, medical societies, specialty boards, and licensing agencies. To ensure quality, all addresses are run through the PostalSoft address validation software prior to application to the Masterfile. A primary office address appears when it has been reported to AMA.

3. Telephone number

The Masterfile maintains physician office and fax telephone numbers. These numbers are routinely screened to ensure valid area code and three-digit exchange.

4. Birthdate and birthplace

A physician's date of birth and place of birth are collected by the AMA through a variety of sources, including information received directly from the physician, medical and training institutions, state/federal agencies, and the Education Commission on Foreign Medical Graduates (ECFMG). Supporting documents such as passport and birth certificate are required for changes to physician data.

5. Major professional activity

Major professional activity (MPA) classifications are determined by the combination of type of practice and present employment as reported by physicians on the *Annual Census of Physicians* or through other channels of communication with the AMA. MPA categories maintained on the Masterfile include:



Patient Care Activities: Office-based practice, Hospital-based full-time physician staff, Hospital-based resident and Locum Tenens.

Non-Patient Care Activities: Administration, Medical teaching, Research, other activities (such as physicians employed by insurance carriers, pharmaceutical companies, corporations, voluntary organizations, medical societies, associations, grants, foreign countries, etc.) and Inactive.

Physicians who have not provided information on their type of practice and present employment are “Not Classified.”

6. Self-designated practice specialty

Physicians report their self-designated practice specialties (SDPS) on the *Annual Census of Physicians*. The AMA currently has a primary SDPS on over 99.8% of physicians who have completed their post-graduate training and 97% of all active physicians. Self-designated practice specialties listed on the AMA Physician Masterfile do not imply recognition or endorsement of any field of medical practice by the Association, nor does it imply, certification by a member medical specialty board of the American Board of Medical Specialties, or that the physician has been trained or has special competence to practice the SDPS.

Profile data elements 7 – 16 are verified with the primary source (cannot be supplied by the physician)

7. Medical schools attended, degree awarded/not awarded indicator, year of graduation

Medical school information includes all schools attended. The category “Degree Awarded” verifies whether or not the school awarded a medical degree or whether the individual is currently enrolled. The projected or actual year of graduation, as reported by the medical school, is also shown. For those physicians that completed their education via the Fifth Pathway program, the international medical school attended as well as the US medical school in which the physician completed the Fifth Pathway will be listed under the category of “Certificate Awarded.”

8. Current and/or prior post graduate medical training, including “incomplete” indicator

The Profile lists only training programs that have been accredited by the Accreditation Council for Graduate Medical Education (ACGME).

The *sponsoring institution* is reflected in the graduate medical education (GME) segment, not the actual physical location of that training. For example, a resident may train at Grady Hospital in Atlanta, but the sponsor of that program is Emory University. The GME segment would reflect Emory University.

A *sponsoring institution* is defined as the institution (e.g., a university, medical school, hospital, school of public health, health department, public health agency, organized health care delivery system, medical examiner’s office, consortium, or educational foundation) that assumes the ultimate responsibility for a GME program. ACGME-accredited GME programs must operate under the authority and control of a sponsoring institution, which must be appropriately organized for the conduct of GME in a scholarly environment and committed to excellence in both medical education and patient care. A sponsoring institution must be in substantial compliance with the ACGME Institutional Requirements and must ensure that its ACGME-accredited programs are in substantial compliance with the Institutional, Common, and specialty-specific Program Requirements.

The majority of training programs are on a July to June cycle. **The “verified” flag appears on the GME segment because the AMA is required to re-verify the training information each year a resident is actively training at a program until their training has been completed.** Re-verification activities

include a postgraduate medical training survey made available to GME program directors in July of each year. The vast majority of programs (80%) respond to the online survey by the end of October, the final survey response rate is typically 97%.

The verification status for GME data may display any of the following:

- *Verified*: The training dates have been confirmed by the primary source as of the preceding August 1. Programs reporting a future completion date should be interpreted as in progress.

- *Being Re-verified*: The reported training dates are being reconfirmed. Since future dates are reported for GME data, the dates must be reconfirmed on an annual basis until such a time that the segment becomes a historical segment. This segment has been previously confirmed, and it is only the future dates and status that are being rechecked. Segments with past training dates that continue to reflect the “being re-verified” status indicate one of two things:
 1. A non-response to the National GME Census, the method by which GME data is collected.
 2. If a Profile customer reports a discrepancy on the Profile, the AMA’s Data Verification area will add a “being re-verified” flag to the Profile and contact the program (primary source) to re-verify the residency segment in question. Once the information is verified, the Profile will be updated, if appropriate, the flag will be changed to “verified” and the Profile customer will receive an updated Profile.

- *Being Verified or Not Yet Verified*: The reported training dates have not been previously confirmed but have been provided to the primary source for verification. The majority of these segments are obtained either from the annual resident matching program or from self-reported segments.

If the training program in a specialty at a particular institution was not completed, then an “incomplete” flag will be displayed next to the appropriate training segment.

The specialty field may reflect two specialties for the combined training programs. The second specialty occurrence is immediately below the first specialty. Historically, only the month and date were maintained on residents. As a result, the training days are rounded as follows: beginning dates are defaulted to the beginning of the month; the ending date is rounded to the end of the month.

9. National Board of Medical Examiners certification year

Certification by the National Board of Medical Examiners (NBME) can be used as an avenue to licensure in the U.S. for those certified as Diplomates prior to implementation of the United States Medical Licensing Examination (USMLE) and for examinees taking a combination of NBME and/or USMLE examinations who have passed at least one Part or Step prior to December 31, 1994. The last regular administration of the NBME Part I occurred in 1991, Part II in April 1992, and Part III in May, 1994.

10. License(s)

Licensure data is obtained at a minimum every 180 days. The vast majority of states provide information on a more frequent basis (monthly, quarterly). Current and historical licensure data is on the Profile.

Degree (MD/DO) indicates that either a MD or DO license was issued. A physician may have more than one license in a given state.

The “*date granted*” on the Profile is the date the license was initially granted by the licensing authority.

Expiration or renewal dates are listed as reported by the licensing authority. The majority of the licensing authorities require that practicing physicians renew their state registration each year or every two years; a few states have longer registration intervals. Over 99.8% of all active licenses on the AMA Physician Masterfile have an *expiration or renewal date*.

Dates where the specific month and day are unknown will have the default of “01” as the default value. For example, a record with a date of 01/01/1978 uses the default value since the true month and day are not known. Not all boards maintain or provide full date values.

License status types include: *Active, Inactive, Denied and Pending*. If a state has not provided current information, the status is changed to “Unknown.”

If a physician has decided not to reregister a state license, the license status will be reported as “*inactive*” by the state. A license will also be reported as *inactive* if the license has been suspended or revoked by the state board. In some states *inactive* licenses are issued to physicians who want to maintain licensure in that state although they are currently practicing in another state.

Types of licenses include: *Unlimited, Limited, Resident and Temporary*.

Each state has varying requirements prior to issuing a physician an *unlimited* (full and unrestricted) license. For the most part, an unlimited license allows the physician to practice medicine as defined by the State’s Medical Practice Act.

Nearly all boards issue educational licenses, permits, certificates, or registration to resident/fellow physicians in graduate medical education programs. For many of these boards, residents/fellows must obtain a new permit or license when changing residency/fellowship programs within a state.

Most boards issue non-educational temporary permits, limited and temporary licenses for the practice of medicine. Awarding of these licenses may be contingent on certain requirements, depending on the given jurisdiction. The terms for the issuance of such licenses can vary, but in general they must be renewed once a year with stipulated maximum number of renewals allowed.

The “*Last Reported*” date reflects the last time that data pertaining to that record was provided to the AMA from the individual licensing board. (The “*Last Reported*” date will not appear if the status is unknown.)

11. Licensure disciplinary actions

Disciplinary actions (current and historical) by a State Licensing Board are indicated under the Action Notifications header of the Physician Profile. The type of action taken varies. Action details, including information regarding type of action taken, must be obtained directly from the licensing jurisdiction.

12. Educational Commission for Foreign Medical Graduates certification (ECFMG)

ECFMG certification provides assurance to directors of ACGME-accredited residency and fellowship programs and to the people of the United States that graduates of foreign medical schools have met minimum standards of eligibility required to enter such programs. ECFMG certification is also a prerequisite for licensure to practice medicine in most states and is one of the eligibility requirements to take Step 3 of the United States Medical Licensing Examination.

The ECFMG applicant identification number that appears on the Profile does not imply current ECFMG certification status. The ECFMG Certification Verification Service is available [online](#).

13. Federal Drug Enforcement Administration

Federal Drug Enforcement Administration (DEA) Registration is updated monthly. Last reported date, expiration date, and corresponding schedule(s) are provided for all active Federal DEA registration.

As noted on the Profile, many states require their own controlled substances registration/license, and the AMA does not maintain this information. “None Reported” could mean that the DEA has not provided this information yet.

14. American Board of Medical Specialties (ABMS®) specialty board certification

A Profile will reflect all unexpired primary board segments reported by the American Board of Medical Specialties (ABMS®) with effective date, expiration date and last reported date. For those boards participating in Maintenance of Certification (MOC), the certificate type is displayed as “MOC+” and includes a corresponding re-verification date. There may be one initial certificate for each primary board, but multiple recertification segments for each primary board.

A Profile will reflect all sub-specialty certificate segments reported by ABMS®. There may be one initial certificate for each sub-specialty certificate but multiple recertification segments of each certificate. There are a significant number of ABMS® Boards that do not provide board certification expiration dates. If data is not provided to the AMA, the expiration field will contain the words, “None Reported to Date.”

Dates where the specific month and day are unknown will have the default of “01” as the default value. For example, a record with a date of 01/01/1978 uses the default value since the true month and day are not known. Not all boards maintain or provide full date values.

15. Physician’s Recognition Award(s)

The AMA Physician’s Recognition Award (PRA) certificate recognizes physicians who complete at least fifty hours of continuing medical education annually.

16. Medicare/Medicaid sanction(s)

If the Department of Health and Human Services (DHHS) in relation to Medicare and Medicaid regulations has taken action (current or historically), the Physician Profile will direct users to the DHHS Office of Inspector General Web site for information (<http://oig.hhs.gov/>).

17. National Provider Identifier (NPI)

A physician’s NPI is a unique 10-digit number issued by the Centers for Medicare and Medicaid Services (CMS) in the United States. The AMA receives NPI data from the National Plan & Provider Enumeration System (NPPES) on a monthly basis. AMA Profiles will present the physician’s NPI, as well as the enumeration date (the date the NPI was assigned) and any relevant deactivation, reactivation, or replacement number information that pertains to the physician. If any NPI information is not received from NPPES, the affected field will contain an abbreviation of the words “Not Reported”.