

Statement on Compensation Equity Among Anesthesiologists

Committee of Origin: Ad Hoc Committee on Women in Anesthesia

(Approved by the ASA House of Delegates on October 23, 2019)

To eliminate any lack of parity in compensation among anesthesiologists, ASA supports and recommends the following:

1. Identification of existing policies, procedures, leadership and culture that promote compensation equity in medicine. ASA recommends further research on the magnitude of and reasons for any gender pay inequity and barriers to career advancement as well as on the best practices to close these gaps across practice settings.
2. Equitable physician compensation (including pay, benefits, clinical and administrative support, clinical schedules, institutional responsibilities, and, where appropriate, laboratory space and support for researchers) based on comparable work. At each stage of physicians' professional careers, compensation should be determined according to objective assessment and established criteria for advancement and should not be based on characteristics of personal identity, including gender.
3. Transparency and routine assessment of the equity of physician compensation arrangements by all organizations that employ physicians. Departments, groups, and institutions should establish locally specific policies that promote transparency in defining the criteria for initial and subsequent physician salaries. Performance-review criteria, specific to local and institutional norms, should be standardized for anesthesiologists, no matter what the practice setting, to ensure ongoing fair compensation based upon transparent and pre-determined metrics.
4. The provision of periodic implicit bias training¹ for all who make compensation decisions (e.g. department chairs, deans, search committees, human resources personnel, partners in practice, etc.) within any entity that either employs or compensates anesthesiologists. This would increase awareness of how subtle differences in the evaluation of physicians' characteristics of personal identity, including gender, may impede compensation and career advancement. Such training should also be available to individual physician employees. ASA recommends that organizational policies and procedures be implemented that address implicit bias.
5. The establishment and provision of programs in negotiation, career and leadership development for all anesthesiologists, and physicians-in-training in anesthesiology. ASA encourages the specific establishment of programs targeted to anesthesiologists of diverse backgrounds.

¹ https://www.aamc.org/members/leadership/catalog/178420/unconscious_bias.html