Supplementary Online Content

Dossa F, Simpson AN, Sutradhar R, et al. Sex-based disparities in the hourly earnings of surgeons in the fee-for-service system in Ontario, Canada. *JAMA Surg.* Published online October 2, 2019. doi:10.1001/jamasurg.2019.3769

eTable 1. Differences in remuneration for similar gynecologic and urologic procedures based on the OHIP Schedule of Benefits. Monetary values are in Canadian dollars. **eTable 2.** Data sources

eTable 3. Demonstration of overdispersion and underestimation of standard errors in the Poisson model for the primary outcome of the association between surgeon sex and hourly earnings. The Lagrange Multiplier Test was used to assess for overdispersion (p<0.0001).

eTable 4. Multivariable analysis of the association between surgeon gender and earnings per hour of operating time with surgical specialty included as a covariate **eTable 5.** Multivariable analysis of the association between the proportion of female patients and earnings per hour. A surgery-level model was constructed using the 25 most commonly performed procedures among each specialty.

eTable 6. Multivariable analysis of the association between surgeon sex and procedure duration. Separate models were fit for each specialty to model the number of 15-minute time units billed for the 25 most common procedures performed by each specialty. **eFigure 1.** Diagram of cohort creation.

eFigure 2. Histograms demonstrating distribution of propensity scores between male and female surgeons a) prior to propensity score matching; b) after propensity score matching. Similar distributions in propensity scores among male and female surgeons after matching confirmed appropriately balanced matched groups.

This supplementary material has been provided by the authors to give readers additional information about their work.

Sex	Procedure	OHIP Code	Fee	Difference (female – male)
Male	Biopsy of penis	Z702	23.55	27 25
Female	Biopsy of vulva	Z475	50.90	21.55
Male	Excision, penile condylomata	Z767	78.60	
Female	Excision of vulvar condylomata	Z769	115.10	- 36.50
				1
Male	Biopsy prostate	Z712	85.45	-51.40
Female	Biopsy endometrium	Z770	34.05	-51.40
Male	Hypospadius one stage repair (with meatus but not into glans)	S578	287.75	-163.80
Female	Excision congenital vaginal septum	S702	123.70	
		2 44 0		
Male	Resection of scrotum	S618	215.80	- 41.25
Female	Simple vulvectomy	\$703	257.05	
Mala	Drain prostate abaaaa	7712	02.10	
Famala	Drain prostate abscess	Z/15 7729	92.10	- 0.20
remaie	Diam vaginar abscess	L120	92.30	
Male	Excision hydrocele	\$611/\$630	205.35	
Female	Excision bartholins gland	\$706	112.00	-93.35
Male	Excision of sperm cord lesion	S630/S631	205.35	02.25
Female	Excision of Bartholins	S706	112.00	93.35
Male	Penile amputation, partial	S574	170.65	86.40
Female	Simple vulvectomy	S703	257.05	
Male	Orchidectomy	S589	170.65	136.20

eTable 1. Differences in remuneration for similar gynecologic and urologic procedures based on the OHIP Schedule of Benefits. Monetary values are in Canadian dollars.

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MaleRadical orchidectomy for malignancy\$598235.3571.50FemaleOophorectomy\$745306.8571.50MaleEpididymectomy\$602170.65136.20FemaleSalpingectomy\$738306.85136.20MaleVasectomy\$626107.4048.30FemaleTubal occlusion\$741155.7048.30MaleRetroperitoneal LN dissection for testicular tumor\$590\$834.25-36.80FemaleRadical resection pelvic and para-aortic nodes for cancer\$750797.45-36.80MaleReduce testis torsion\$600235.35-103.90FemaleReduce ovarian torsion (diagnostic laparoscopy)\$764552.30-103.90MaleRemove penis and LN\$576\$52.30-120.85FemaleRadical vulvectomy\$704431.45-103.90MaleVasovasostomy\$623215.80-120.85FemaleSalpingostomy\$736359.55143.75MaleTURP\$655450.60-66.70MaleTURP\$655450.60-66.70MaleSuprapubic/retropubic prostatectomy\$764383.90-66.70MaleRadical retropubic prostatectomy\$6511008.35-137.75FemaleRadical retropubic prostatectomy\$6511008.35-114.80FemaleRadical retropubic prostatectomy\$763893.55-114.80 </th <th>Female</th> <th>Oophorectomy</th> <th>S745</th> <th>306.85</th> <th></th>	Female	Oophorectomy	S745	306.85	
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myomectomyImage: Constraint of the second secon	Female	Hysteroscopic	S764	383.90	-66.70
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	remale	Kadical	5/63	893.55	
		hysterectomy/TAH			

Male	Perineal approach	S645	574.60	
	prostatectomy			111.60
Female	Simple vaginal	S816	463.00	-111.00
	hysterectomy			
Male	Perineal	S646	875.00	
	prostactectomy with			
	vesiculectomy			18.55
Female	Radical vaginal	S763	893.55	
	hysterectomy			

eTable 2. Data Sources

Database	Description	Data elements extracted
Ontario Health Insurance Plan	Claims submitted for	Date of procedure
database	services rendered by	Procedure type
	physicians	Anesthesia time units billed
		Reimbursement to surgeon
		Patient age at the time of
		surgery
		Patient sex
		Patient comorbidities
		(American Society of
		Anesthesiologists category)
Canadian Institute of Health	In-patient hospitalization	Procedure dates
Information Discharge	records. Reporting by all	Patient comorbidities
Abstract Database	hospitals is mandatory.	
	Patient demographics,	
	clinical information, and	
	administrative variables	
	are included in the	
	database, including	
	diagnosis and procedure	
	codes.	
Same Day Surgery database	Records of patients who	Procedure dates
	underwent same-day	Patient comorbidities
	procedures	
Corporate Provider Database	Demographics and	Surgeon demographics (age,
	practice-related data for	sex, years in practice)
	surgeons	Surgeon specialty
Registered Persons Database	Vital statistics registry	Patient age at time of surgery

Patient comorbidities were captured through the Canadian Institute of Health Information Discharge Abstract Database, the Same Day Surgery database, and the Ontario Health Insurance Plan database **eTable 3.** Demonstration of overdispersion and underestimation of standard errors in the Poisson model for the primary outcome of the association between surgeon sex and hourly earnings. The Lagrange Multiplier Test was used to assess for overdispersion (p<0.0001).

Covariate	Point Estimate	Lower Confidence Limit	Upper Confidence Limit	p-value	
Surgeon sex					
Poisson	0.7607	0.7605	0.7609	< 0.0001	
Negative Binomial	0.7626	0.7366	0.7895	< 0.0001	
Surgeon years in practice	2				
Poisson	0.9982	0.9982	0.9982	< 0.0001	
Negative Binomial	0.9996	0.9983	1.0009	0.5274	
Hospital type					
Poisson	1.0096	1.0094	1.0097	< 0.0001	
Negative Binomial	1.0125	0.9831	1.0427	0.4095	
Average patient age					
Poisson	1.0037	1.0037	1.0037	< 0.0001	
Negative Binomial	1.0092	1.0076	1.0108	< 0.0001	
High ADGs					
Poisson	1.6693	1.6674	1.6712	< 0.0001	
Negative Binomial	1.0039	0.8907	1.1316	0.9486	
High ASA					
Poisson	1.5021	1.5012	1.5029	< 0.0001	
Negative Binomial	1.5283	1.4220	1.6424	< 0.0001	
Obesity					
Poisson	1.1810	1.1798	1.1823	< 0.0001	
Negative Binomial	0.8724	0.7120	1.0689	0.1674	
Marginalization					
Poisson	0.8797	0.8794	0.8801	< 0.0001	
Negative Binomial	0.9573	0.9078	1.0095	0.1069	

eTable 4. Multivariable analysis of the association between surgeon gender and earnings per hour of operating time with surgical specialty included as a covariate

	Adjusted RR	95% Confidence Interval	p-value
Surgeon gender			
Male	Reference	-	-
Female	0.86	0.83 - 0.89	< 0.0001
Surgeon years in practice	1.00	1.00 - 1.00	0.33
Specialty			
General surgery	Reference	-	-
Neurosurgery	1.90	1.75 - 2.08	< 0.0001
Orthopedic surgery	1.25	1.21 – 1.30	< 0.0001
Plastic surgery	1.08	1.02 - 1.14	0.01
Cardiothoracic surgery	1.27	1.18 – 1.37	< 0.0001
Gynecology	0.84	0.80 - 0.87	< 0.0001
Ophthalmology	1.84	1.74 - 1.95	< 0.0001
Otolaryngology	1.22	1.16 – 1.29	< 0.0001
Urology	0.98	0.93 - 1.04	0.52
Hospital type			
Teaching	Reference	-	-
Non-teaching	1.08	1.05 - 1.10	< 0.0001
Patient age [†]	1.00	1.00 - 1.00	0.23
Proportion of patients with ADG ≥ 10	0.87	0.79 - 0.97	0.01
Proportion of patients with ASA ≥III	1.68	1.54 - 1.83	< 0.0001
Proportion of patients with BMI >40	1.36	1.11 – 1.65	0.002
Marginalization [†]	0.97	0.92 - 1.01	0.14

ADG = aggregated diagnosis group; BMI = body mass index; ASA = American Society of Anesthesiologists [†]Modelled as average values for each surgeon based on all operations performed across the study period

eTable 5. Multivariable analysis of the association between the proportion of female patients and earnings per hour. A surgery-level model was constructed using the 25 most commonly performed procedures among each specialty.

	Adjusted RR (95%CI)	p-value
Proportion of female patients	1.06 (0.87-1.29)	0.58
Average patient age	1.01 (1.00-1.02)	0.003
Proportion of patients with ADG	0.44 (0.23-0.82)	0.01
≥10		
Proportion of patients with ASA	1.27 (0.96-1.68)	0.10
≥III		
Proportion of patients with BMI	1.49 (0.73-3.02)	0.27
>40		
Average marginalization	1.75 (0.91-3.37)	0.09
Proportion of procedures performed	2.30 (1.80-2.93)	< 0.0001
at teaching hospitals		
Average surgeon years in practice	0.99 (0.98-1.01)	0.24

RR = rate ratio; CI = confidence interval; ADG = aggregated diagnosis group; BMI = body mass index (kg/m²); ASA = American Society of Anesthesiologists

eTable 6. Multivariable analysis of the association between surgeon sex and procedure duration. Separate models were fit for each specialty to model the number of 15-minute time units billed for the 25 most common procedures performed by each specialty.

Specialty	Duration of procedure, RR (95% CI)	p-value
General surgery	1.02 (0.96-1.07)	0.55
Neurosurgery	0.93 (0.79-1.08)	0.32
Orthopedic surgery	1.04 (0.97-1.11)	0.30
Plastic surgery	1.07 (1.02-1.13)	0.008
Cardiothoracic surgery	0.98 (0.91-1.05)	0.53
Gynecology	1.03 (0.98-1.07)	0.30
Ophthalmology	1.08 (0.97-1.21)	0.15
Otolaryngology	0.99 (0.92-1.06)	0.70
Urology	0.90 (0.80-1.00)	0.06

RR: rate ratio; CI: confidence interval

All models adjusted for hospital type (teaching vs. non-teaching), surgeon age, patient age, patient sex, obesity (BMI >40), ADG (\geq 10), ASA category (\geq III), and marginalization score; clustering by procedure performed





eFigure 2. Histograms demonstrating distribution of propensity scores between male and female surgeons a) prior to propensity score matching; b) after propensity score matching. Similar distributions in propensity scores among male and female surgeons after matching confirmed appropriately balanced matched groups.

a) Prior to matching



b) After matching