

# Annual Address on the State of the Physician Workforce

Michael J. Dill

Director, Workforce Studies

November 9, 2019

Convention Center North: 222, 10:30-11:45 am

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DEMO-  
GRAPHICS



CHANGE

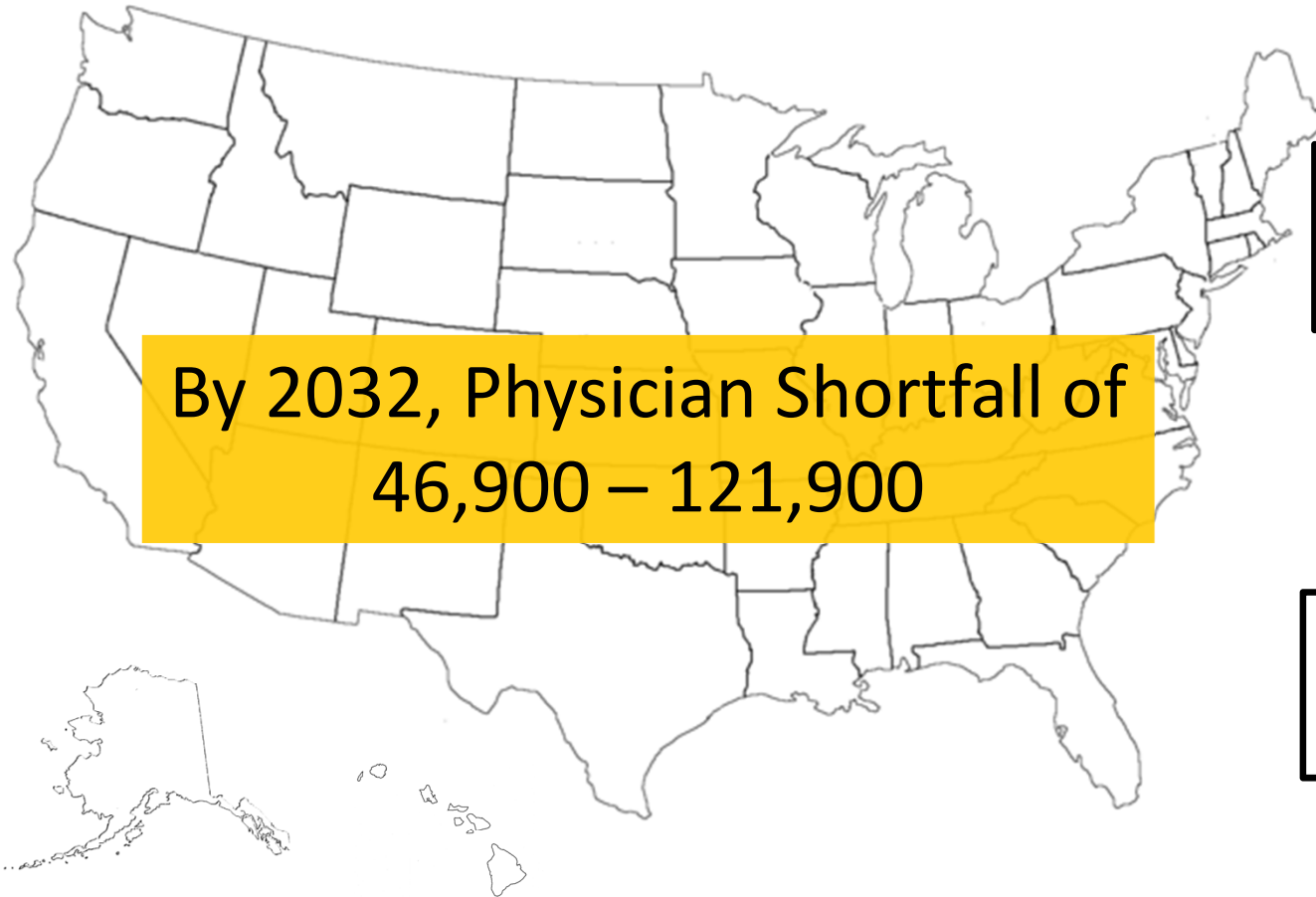


STRESS



# The State of the Physician Workforce

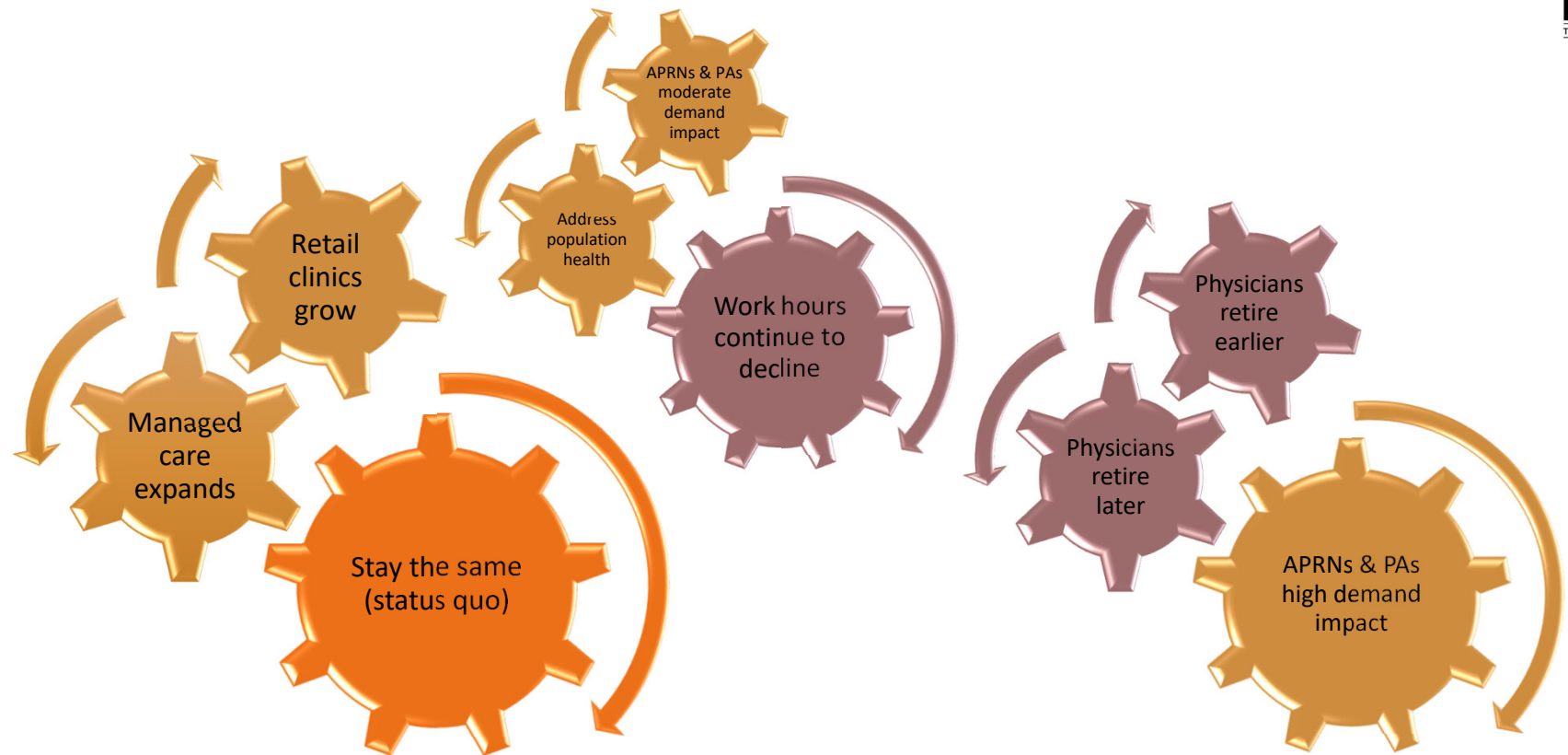




**Primary Care  
Shortfall**  
**21,100 – 55,200**

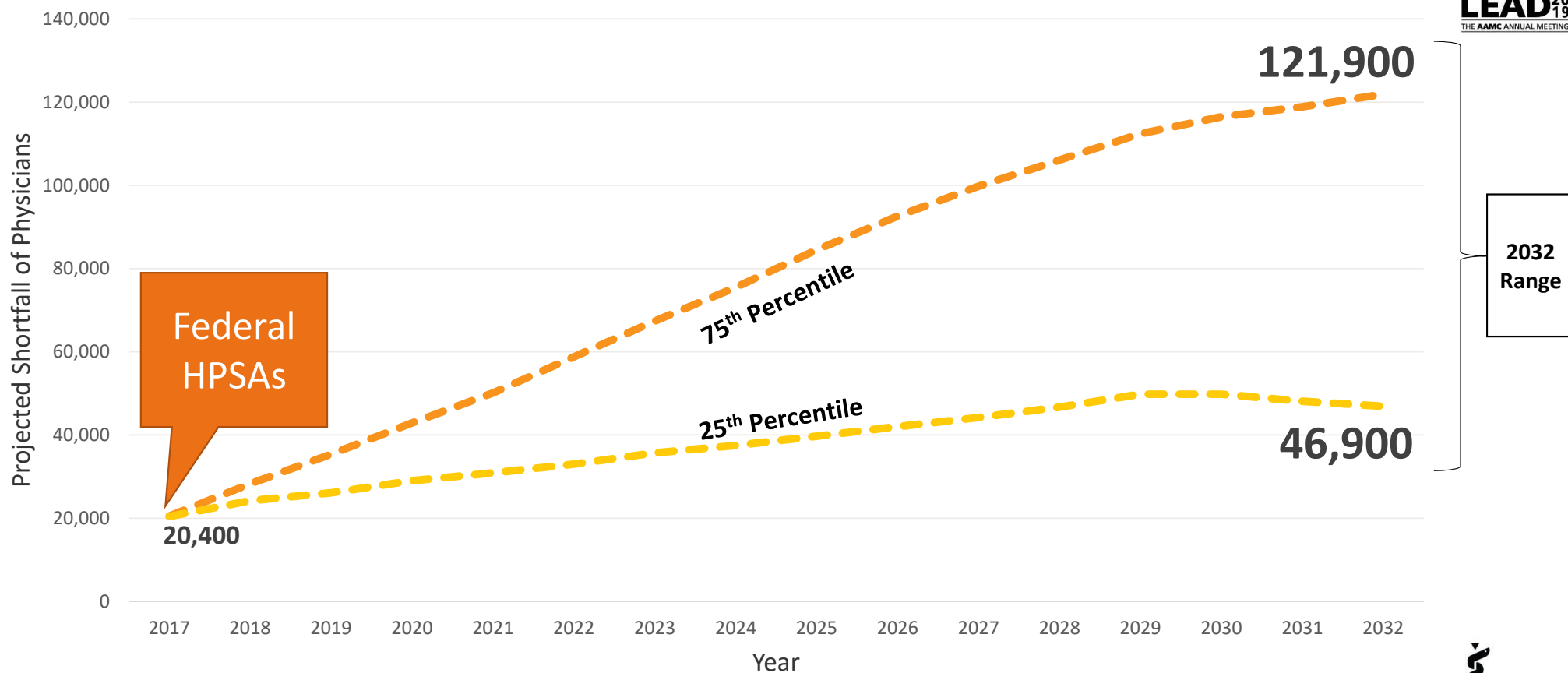
**Specialty Care  
Shortfall**  
**24,800 – 65,800**

# We evaluate numerous scenarios



Source: AAMC, 2019 Update: Complexities of Physician Supply and Demand: Projections from 2017 to 2032.

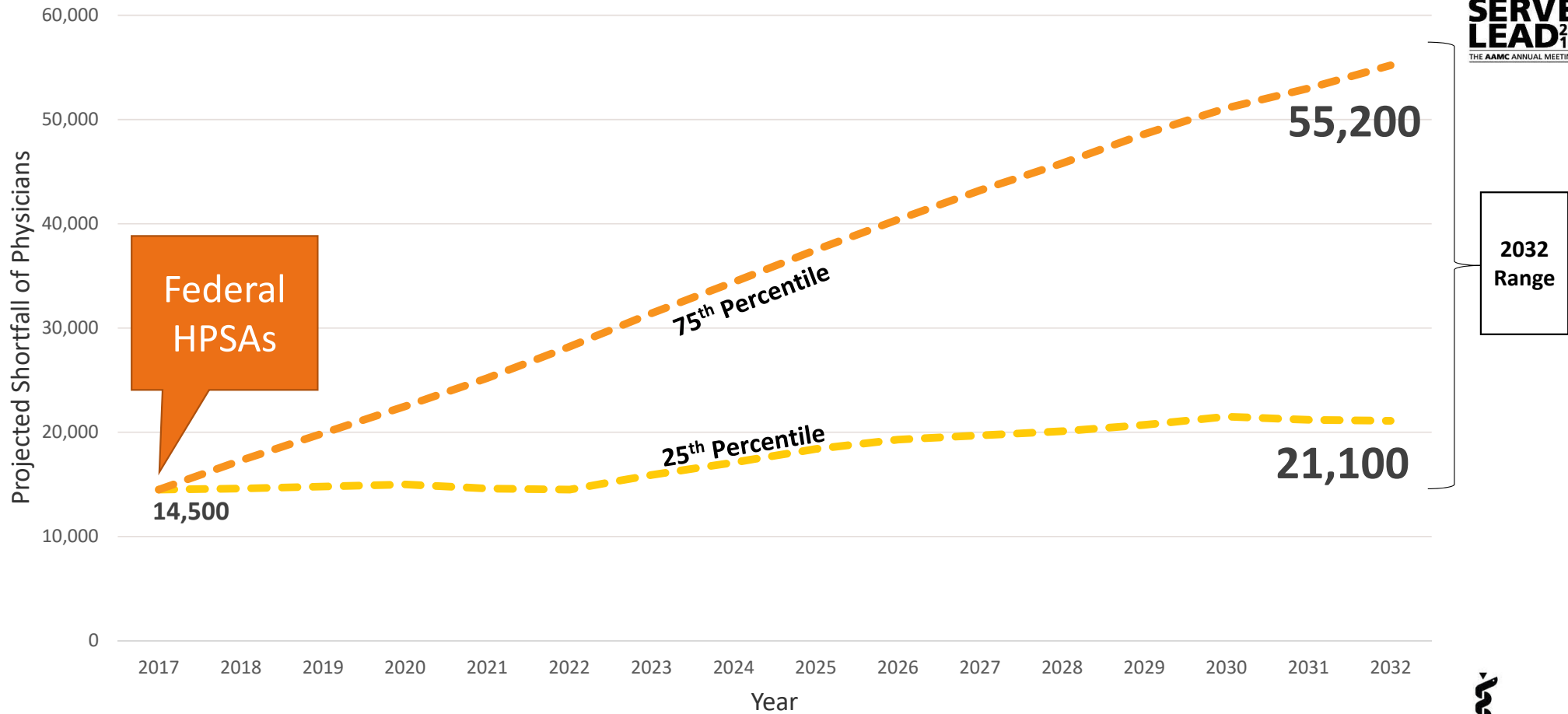
# Total Projected Shortfall Range, 2017-2032



Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.



# Primary Care Projected Shortfall Range, 2017-2032

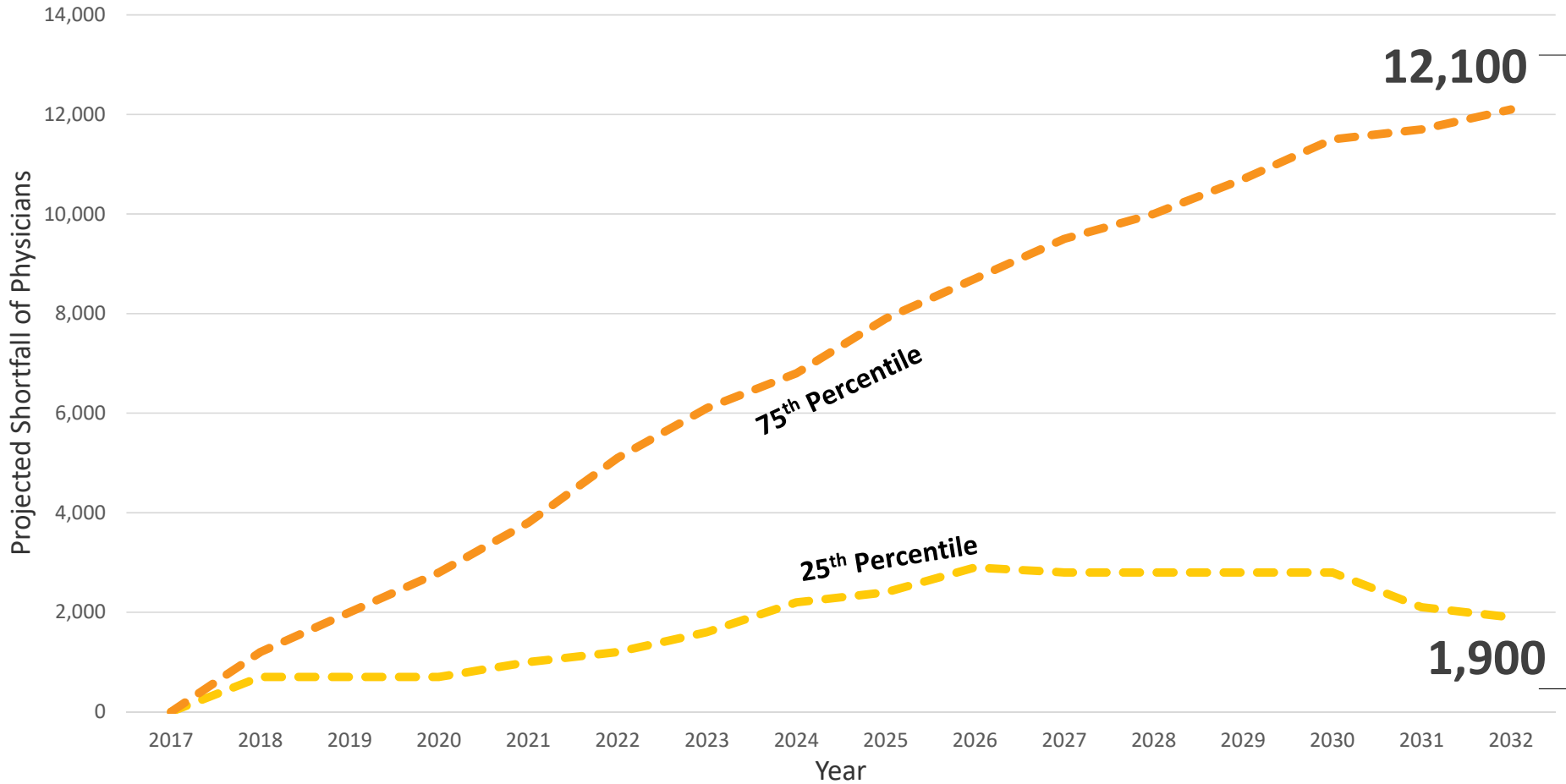


Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.





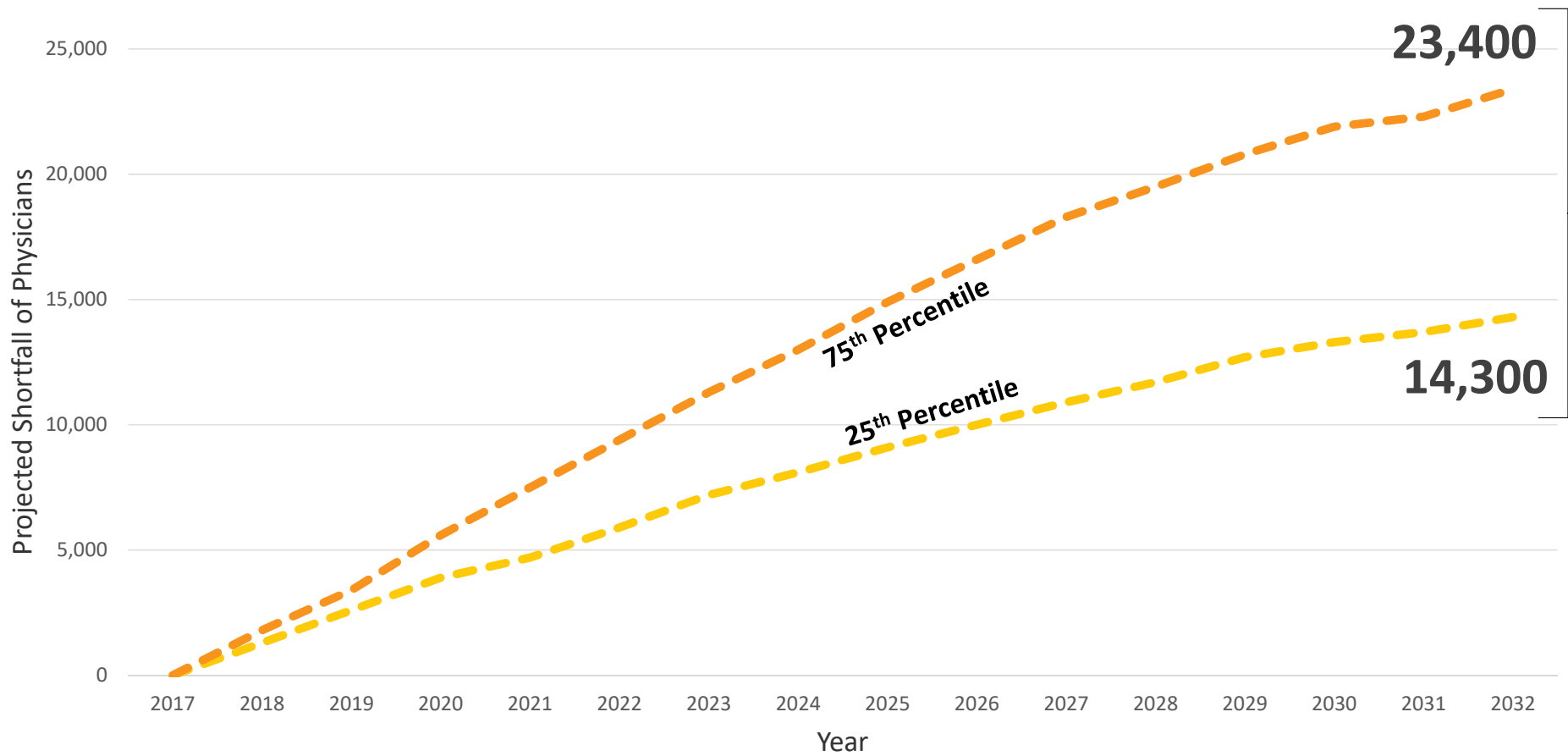
# Medical Specialist Projected Shortfall Range, 2017-2032



Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.



# Surgical Specialist Projected Shortfall Range, 2017-2032

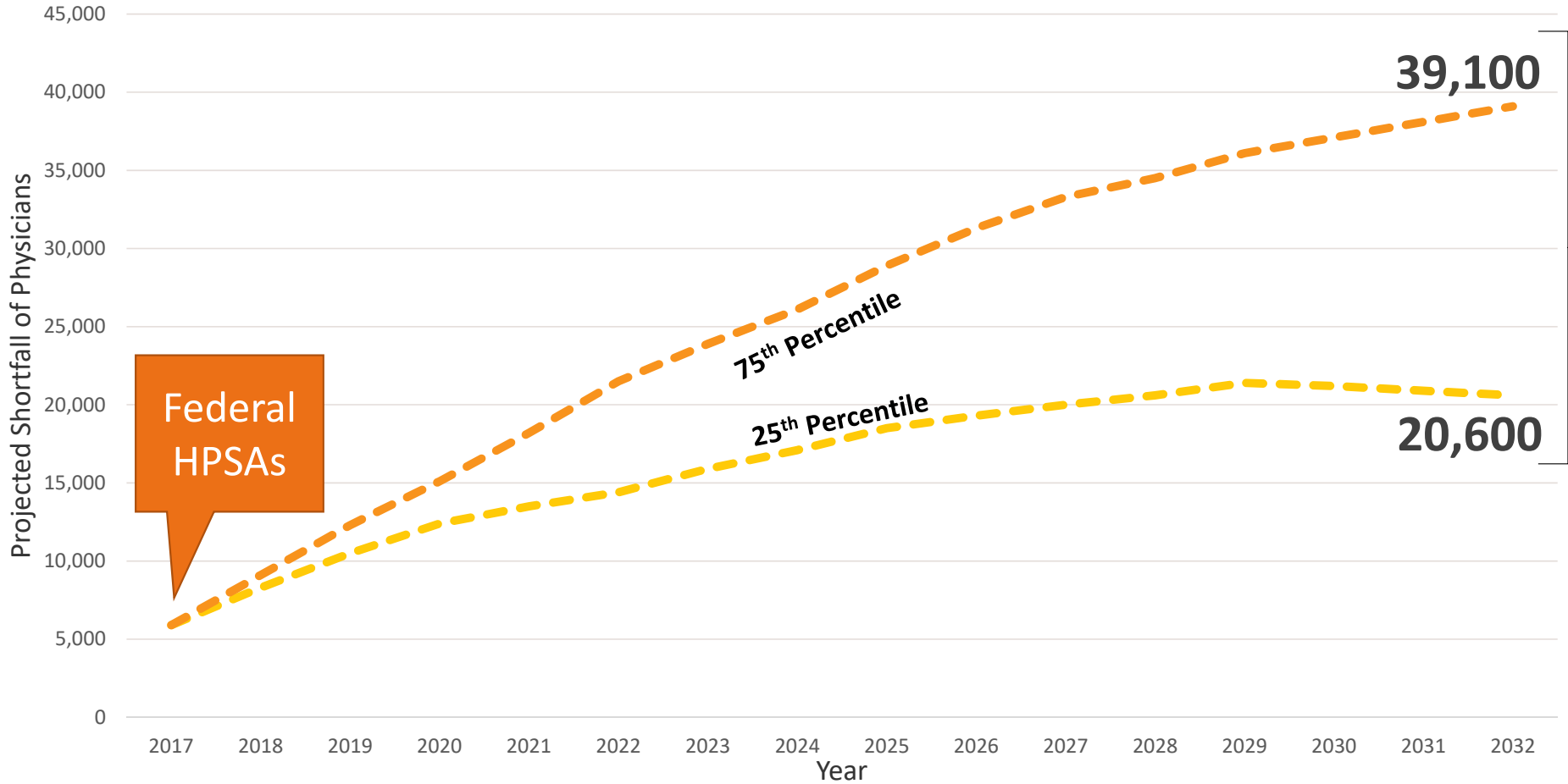


2032  
Range

Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.



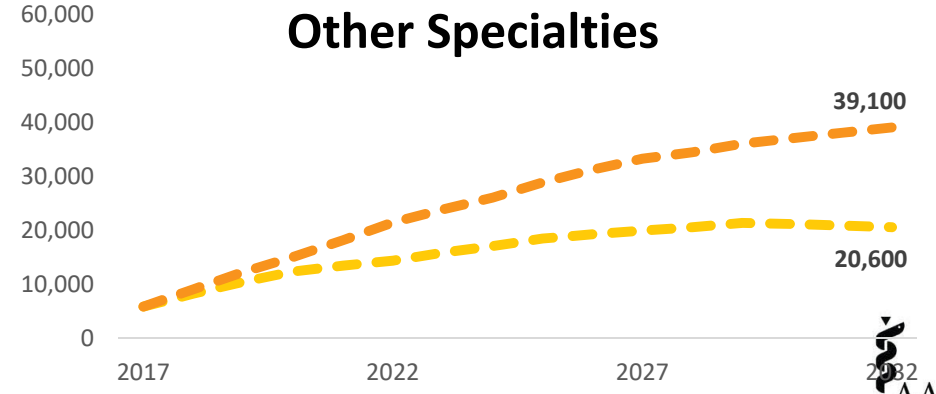
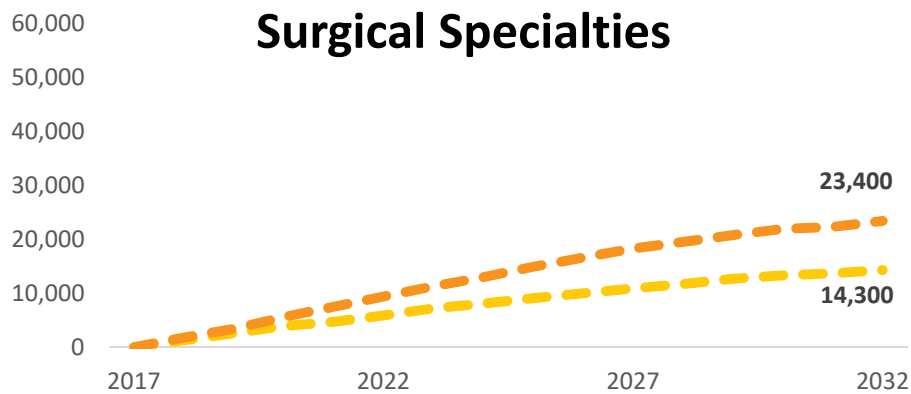
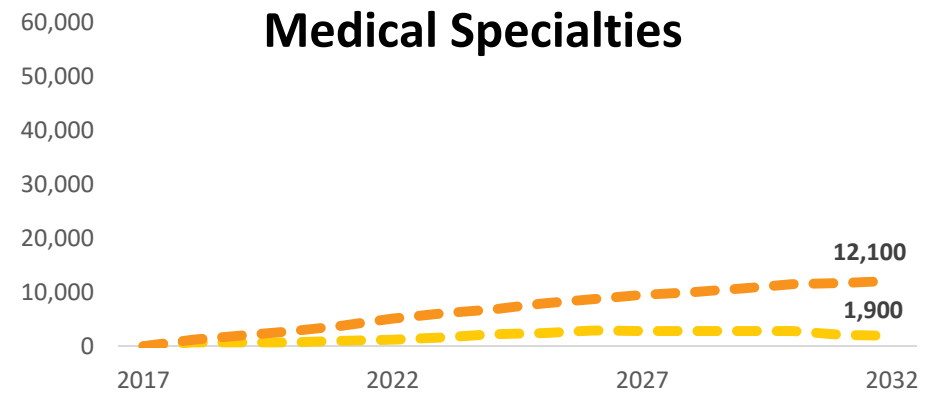
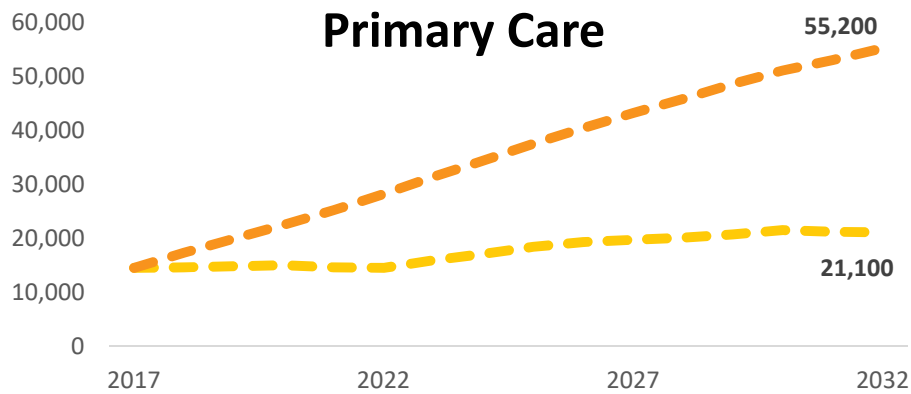
# Other Specialist Projected Shortfall Range, 2017-2032



Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.



# Size & range of projected physician shortages varies by specialty group



Source: The Complexities of Physician Supply and Demand 2019 Update: Projections from 2017 to 2032.



# The false dichotomies



Urban



Rural

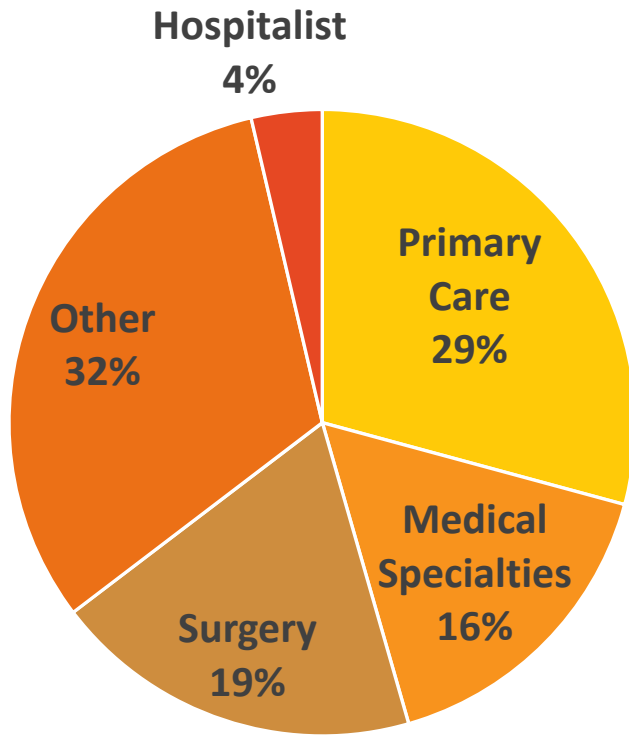


Shortage

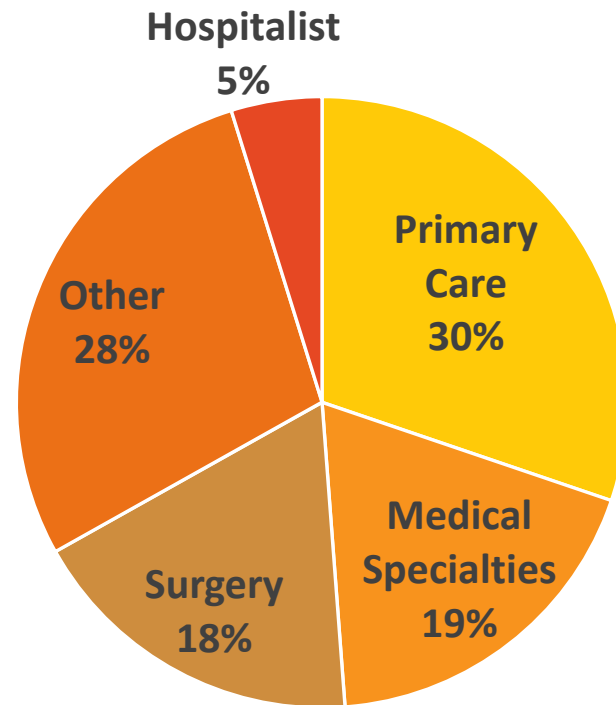


Distribution

# Physician demand by metro/non-metro location, 2017



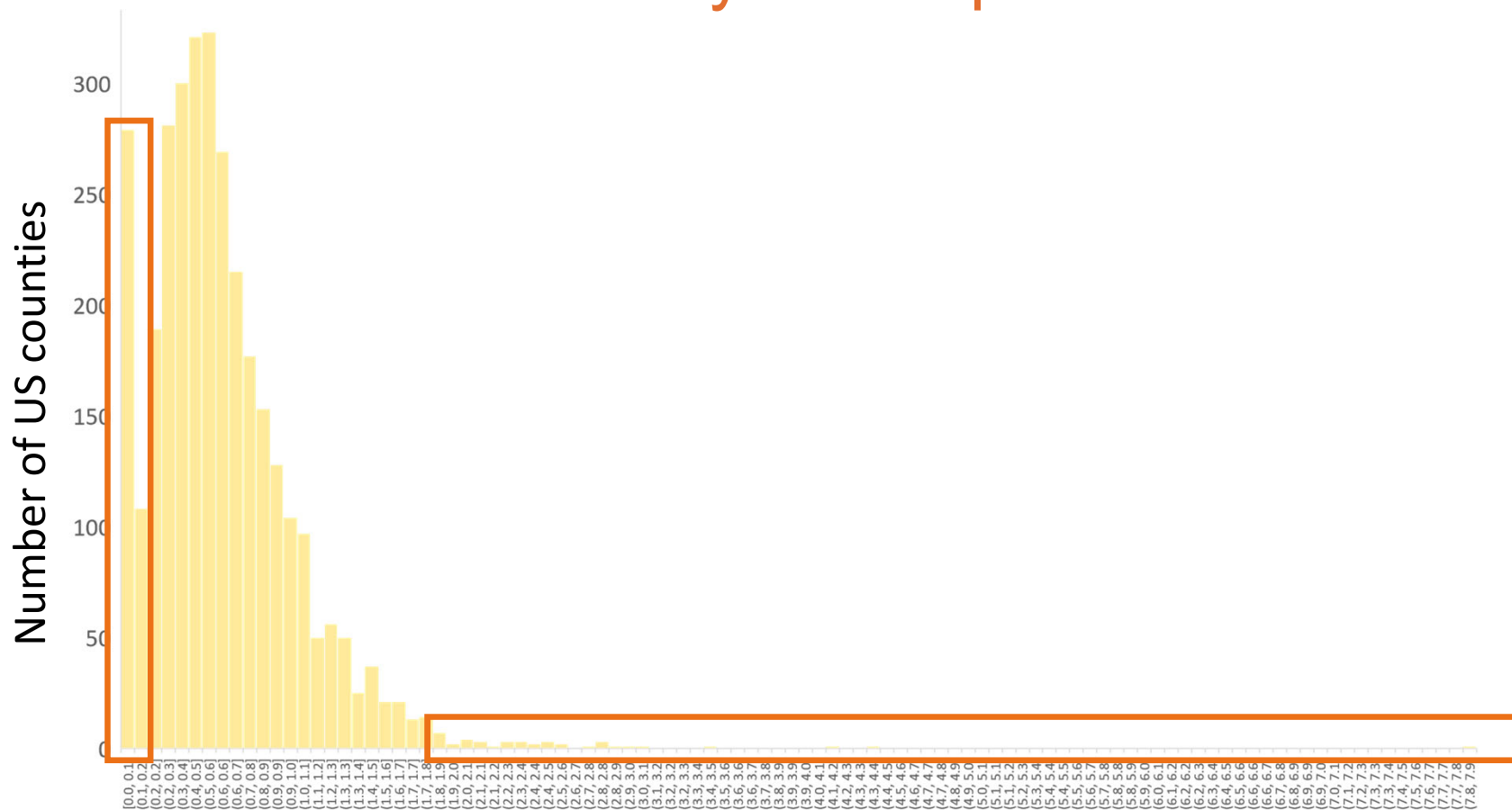
Metropolitan



Non-Metropolitan



# The real distribution story is complex – and inclusive



Primary care physicians/1,000 population (2018)

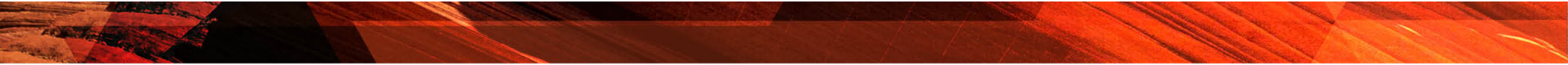
Source: HRSA Area Health Resources File, 2018-2019.



# Understanding distribution requires context







Context  
is often  
complex

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Local context = insight



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# Distribution is a multidimensional issue



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## Take-aways

**Shortage is already here**

**Shortage is growing**

**“And” not “Against”**



## Legislation to Address the Physician Shortage

Addressing the doctor shortage requires a multi-pronged approach, including increasing federal support for GME, which has remained effectively frozen since 1997. The AAMC supports the Resident Physician Shortage Reduction Act of 2019 (S. 348, H.R. 1763), which would add 15,000 residency slots over five years.

**DOWNLOAD THE SENATE VERSION (PDF) ▶**

**DOWNLOAD THE HOUSE VERSION (PDF) ▶**

The Opioid Workforce Act of 2019 (H.R. 3414) would provide Medicare support for an additional 1,000 GME positions over the next five years in hospitals that have, or are in the process of establishing, accredited residency programs in specialties needed to respond to the opioid epidemic.

**DOWNLOAD THE OPIOID WORKFORCE ACT (PDF) ▶**

<https://www.aamc.org/advocacy-policy>



**BY PREVENTING**

*a significant, impending doctor shortage*



**BY PRESERVING**

*patient care and doctor training*



**BY INCREASING**

*federal funding for medical research*

## Preventing a significant doctor shortage

By 2032, there will be up to 121,900 FEWER physicians than needed.

You've done your part by dedicating your life to helping others. Medical schools are expanding enrollment to meet these needs.

Now elected officials in Washington need to step up.

**Learn more about how AAMC Action is fighting to protect graduate medical education (GME) funding.**



<https://www.aamcaction.org/>

# The State of the Physician Workforce



A stylized, high-contrast illustration of a hospital room. The scene is dominated by medical equipment, including a patient bed in the foreground, a large monitor on a stand to the right, and various medical devices and carts in the background. The color palette is muted, featuring shades of brown, tan, and grey, with some highlights in white and blue. The overall style is graphic and somewhat abstract, resembling a digital painting or a high-contrast photograph.

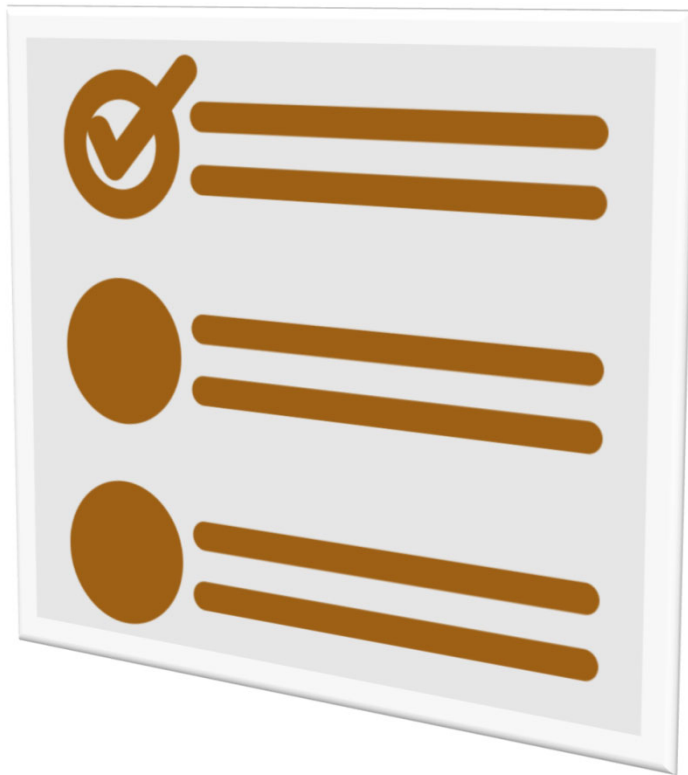
## A Day in the Life

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### AAMC National Sample Survey of Physicians, 2019

Music & lyrics: Lennon & McCartney.

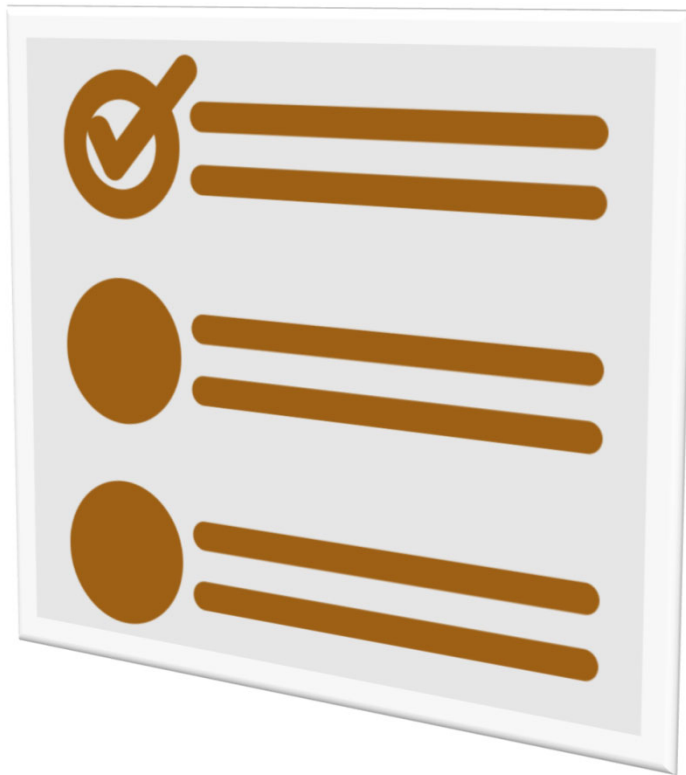




## Data collection

- Collected in 2019
- Nationally representative sample (n=6,000)
- Sample stratified by age, sex and specialty group

# Survey Content



- Demographics
- Academic affiliations and CME
- Work time
- Retirement plans
- Practice characteristics
- Well-being
- Medical education debt



**“I read the  
news today,  
oh boy”**

# Physicians are aging – just like the population



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# Most physicians are from the 'burbs



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# The rising diversity in the physician workforce (is not that diverse)

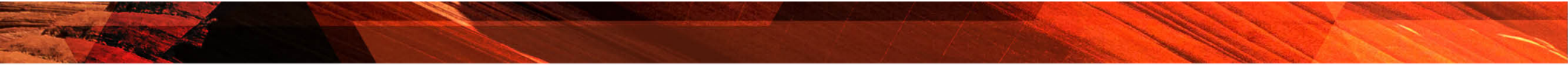


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**So much that we are learning!**



# The context in which physicians work is varied

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# Younger physicians work in different types of places



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# Physicians are mostly in the same specialty groups



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# The physician workforce & AAMC

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publication options.**



**“And though  
the news was  
rather sad”**

Physicians  
are burning  
out, and it  
affects  
their  
empathy.

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publication options.**

Most physicians feel burnt out once a month or less



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# Satisfaction varies across topics



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If you could do it all over again, how likely is it you would still want to become a doctor?



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## Well-Being in Academic Medicine: Resources for Faculty

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Well-being in academic medicine has emerged as a critical issue facing faculty, researchers, residents, and students. The AAMC has issued a [statement on clinician well-being \(PDF\)](#), and participates in the National Academy of Medicine's [Action Collaborative on Clinician Well-Being and Resilience](#), a network of 150 (and growing) organizations dedicated to promoting clinician well-being across all career stages and specialties. The following resources help explain and address the challenges.

**Please let us know** if you have any suggested books, articles, or other resources to share with your colleagues and we will consider including on these pages.

### The Latest in Well-Being

- [Clinician Well-Being Knowledge Hub Case Studies](#) - National Academy of Medicine
- [Moral injury and burnout in medicine: a year of lessons learned](#) - STAT
- [Physician burnout: Why legal and regulatory systems may need to step in](#) - *The Conversation*
- [What's Doctor Burnout Costing America?](#) - NPR

<https://www.aamc.org/news-insights/wellbeing/faculty>

# Loans seen as investment



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# Feelings about loans vary by age



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**“A crowd of  
people turned  
away”**

# Physicians suffer sexual harassment from coworkers



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# Physicians suffer sexual harassment from patients



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# Physicians are subject to sexist remarks



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Almost half of female physicians, and almost a quarter of male physicians, report experiencing sexual harassment in some form



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## Sexual and Gender Harassment Resources

Eliminating sexual and gender harassment in academic medicine will require a multipronged approach that includes a firm commitment by leaders to end gender inequities, effective institutional policies that support reporting and thorough investigations, and the training of staff, leaders, and learners to prevent harassment and intervene when appropriate. Below are a few resources shared with member institutions during the [2019 Leadership Forum](#).

The following AAMC resources contain key terms, findings, recommendations, and general information from the National Academies of Science, Engineering, and Medicine (NASEM) report *Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine*. The full report is available on the NASEM website along with related resources such as:

- Infographic on [Preventing Sexual Harassment in Academia](#) 
- Handout on [Interventions for Preventing Sexual Harassment](#) 
- Iceberg of [Sexual Harassment infographic](#) 
- Iceberg of [Sexual Harassment poster](#) 

<https://www.aamc.org/what-we-do/mission-areas/diversity-inclusion>



**“Found my  
way  
downstairs  
and drank a  
cup”**

# Physicians work a lot



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Quite a bit of patient care is not *direct*  
patient care



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# Use of telehealth

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future publication options.**

# Effect of telehealth

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Openness  
to  
telehealth

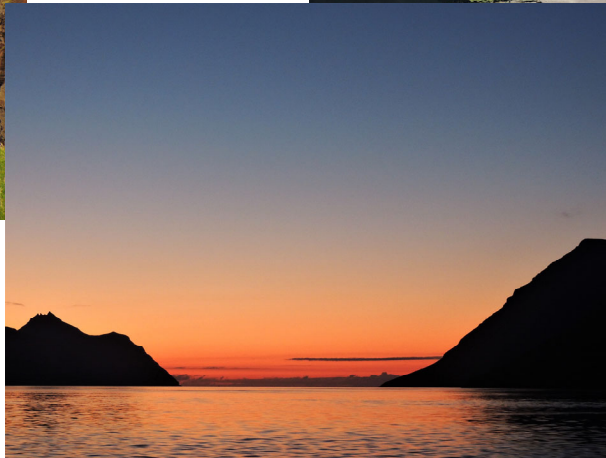
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**“And  
everybody  
spoke and I  
went into a  
dream”**



# What does retirement look like?



# Many paths to retirement

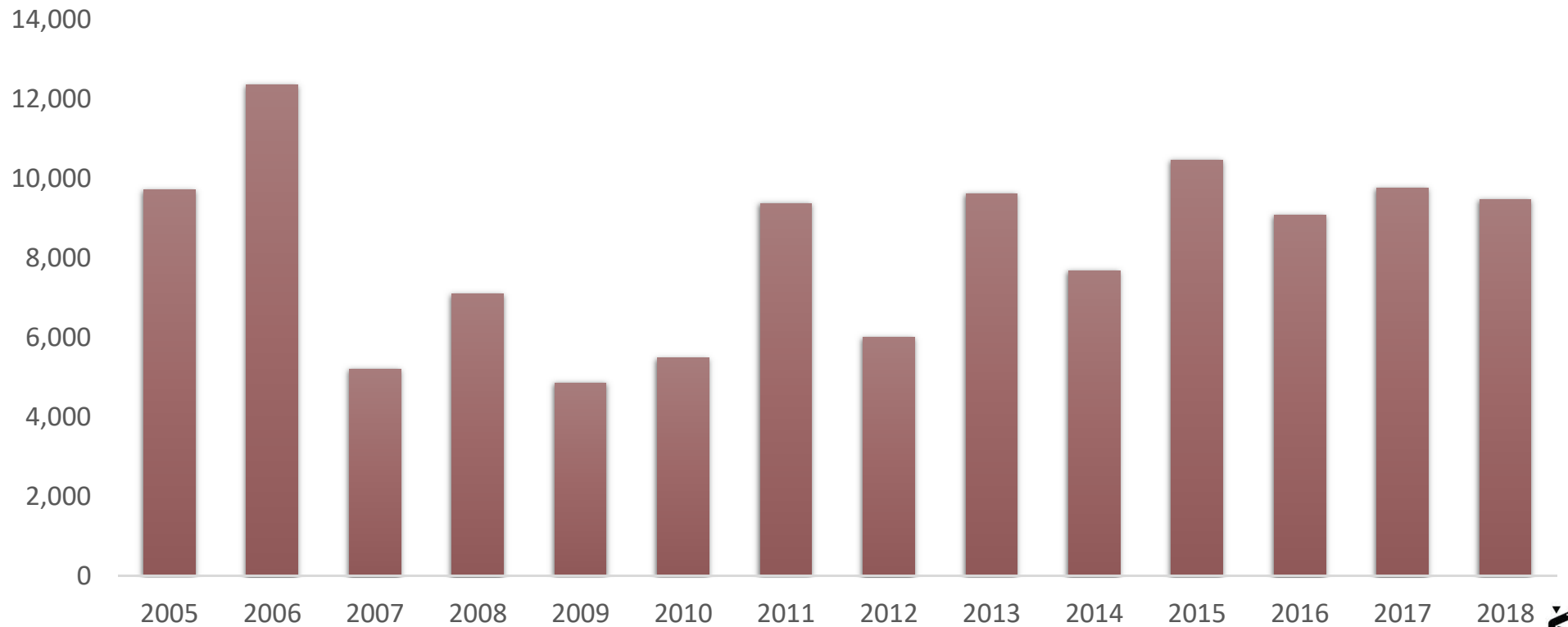


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# Physician retirements are rising

Physicians retiring



Source: AMA Masterfile year end 2005-year end 2018. Notes: Figures are three-year rolling averages. Only counts those who move to fully retired TOP='071'.

# Physician retirements will affect workforce diversity



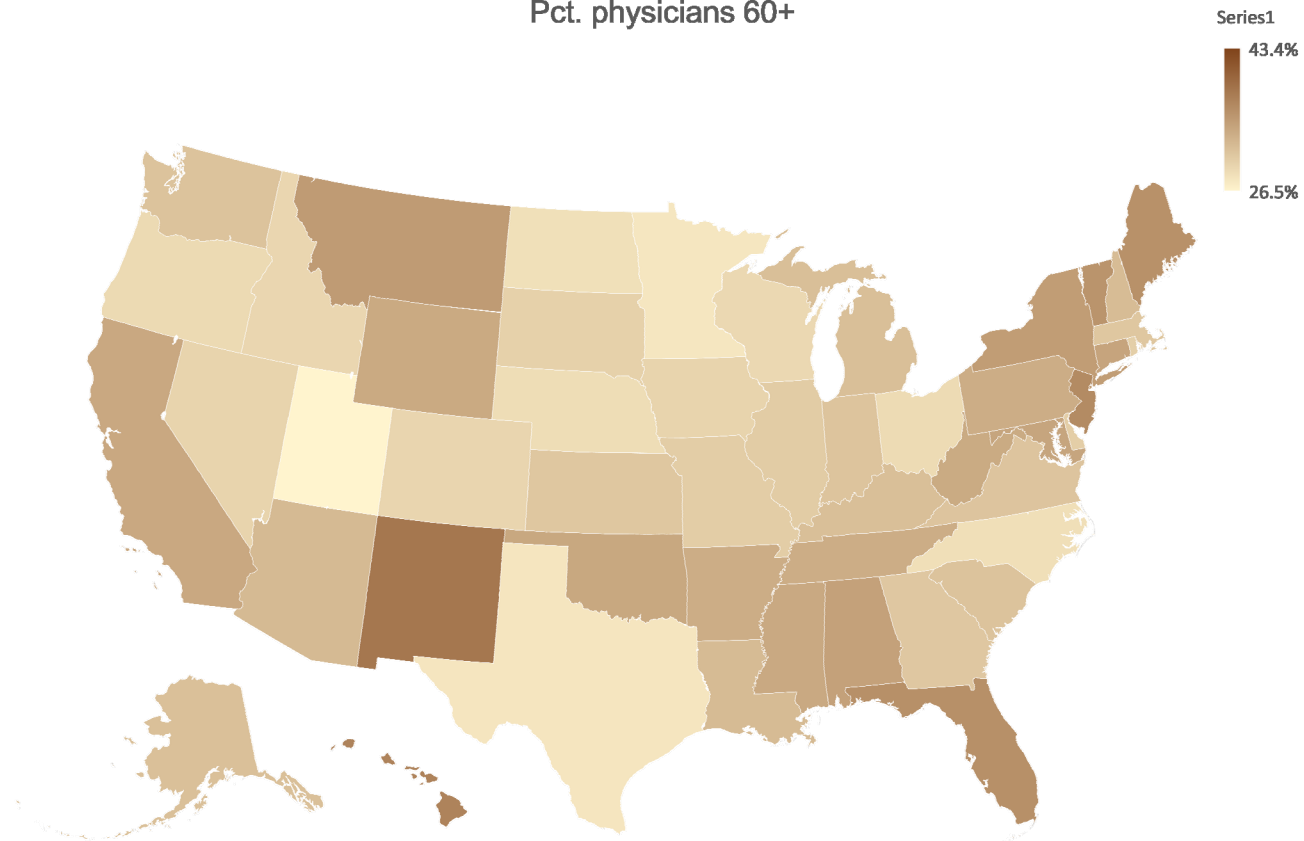
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# Physician retirements will affect distribution



Pct. physicians 60+

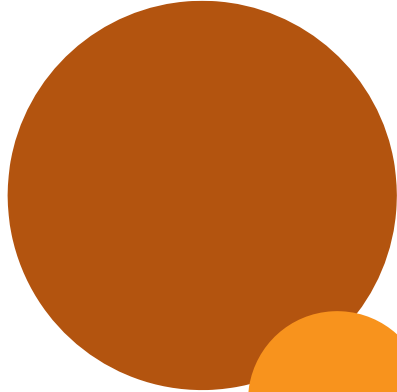
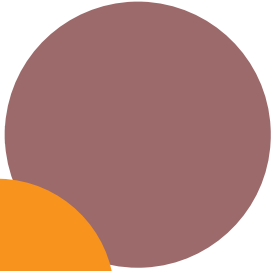
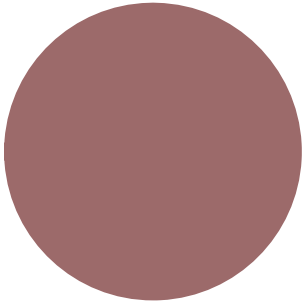
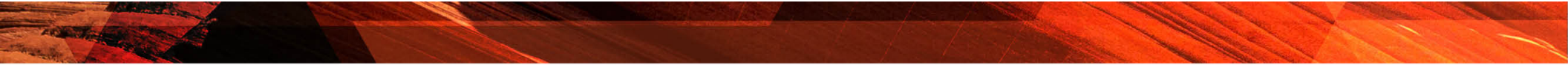


Source: AAMC State Physician Data Report, 2019.



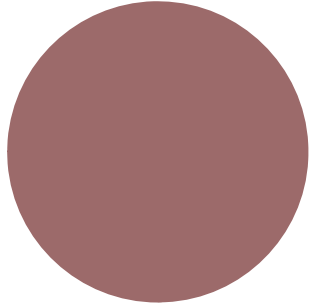
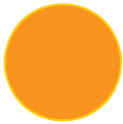
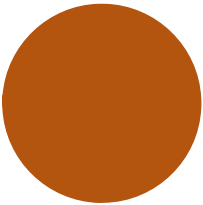


**“Now they  
know how  
many holes it  
takes to fill  
the Albert  
Hall”**

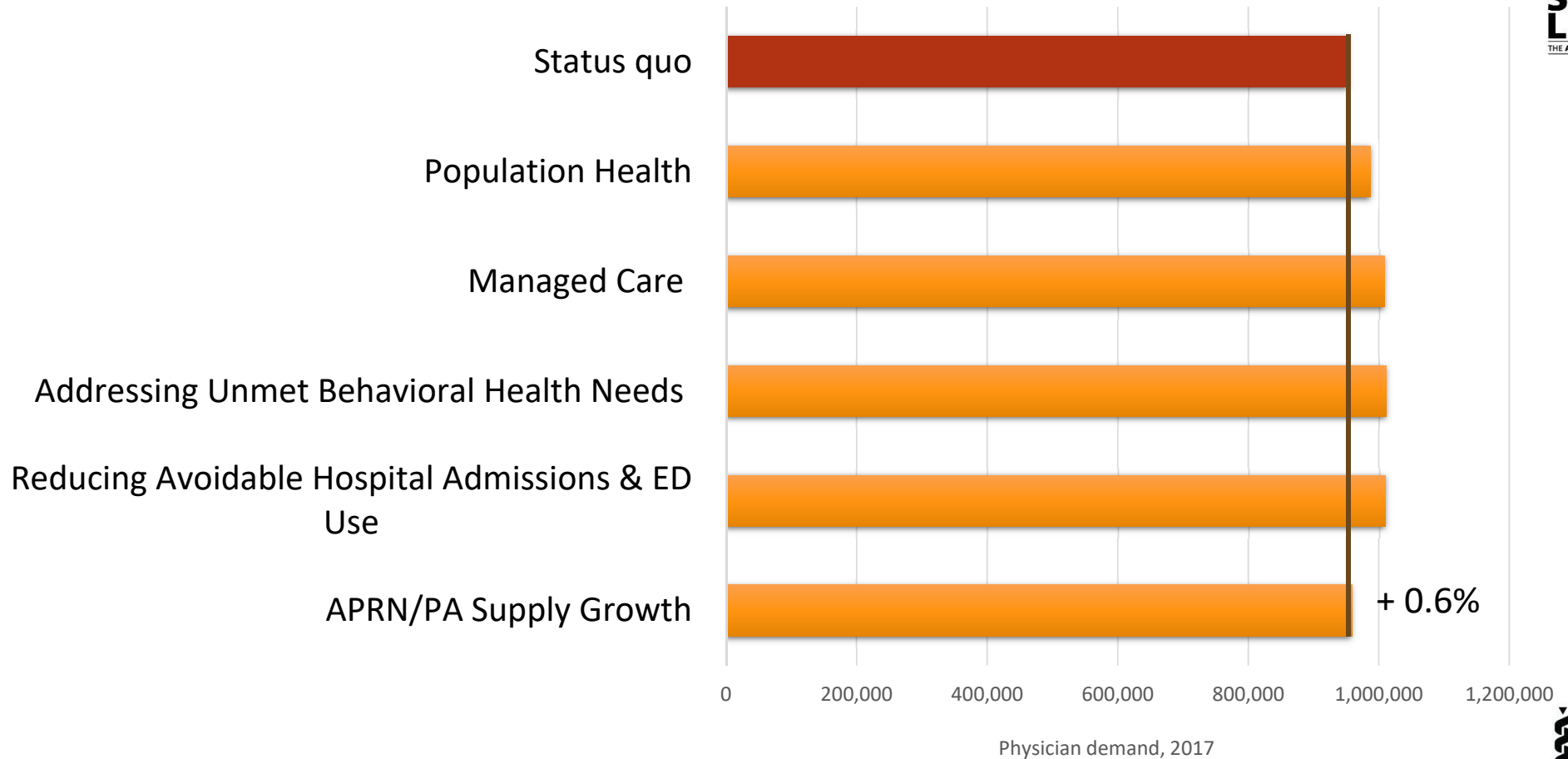


**Misguided  
paradigms**

**Lack of  
evidence  
base**



# An evolving health care system has many moving parts



Source: AAMC, 2019 Update: Complexities of Physician Supply and Demand: Projections from 2017 to 2032.



# Location decisions based on more than where physicians grew up, trained



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Projections of local area physician supply reveal a need to look outside the (old) box



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How good an investment those loans were is NOT related to specialty choice



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## Take-aways

**Most physicians do not report being burnt out or sexually harassed, but many do**

**Much of physicians' time is not in direct in-person care**

**Physicians are retiring, with multi-dimensional effects**

# The State of the Physician Workforce

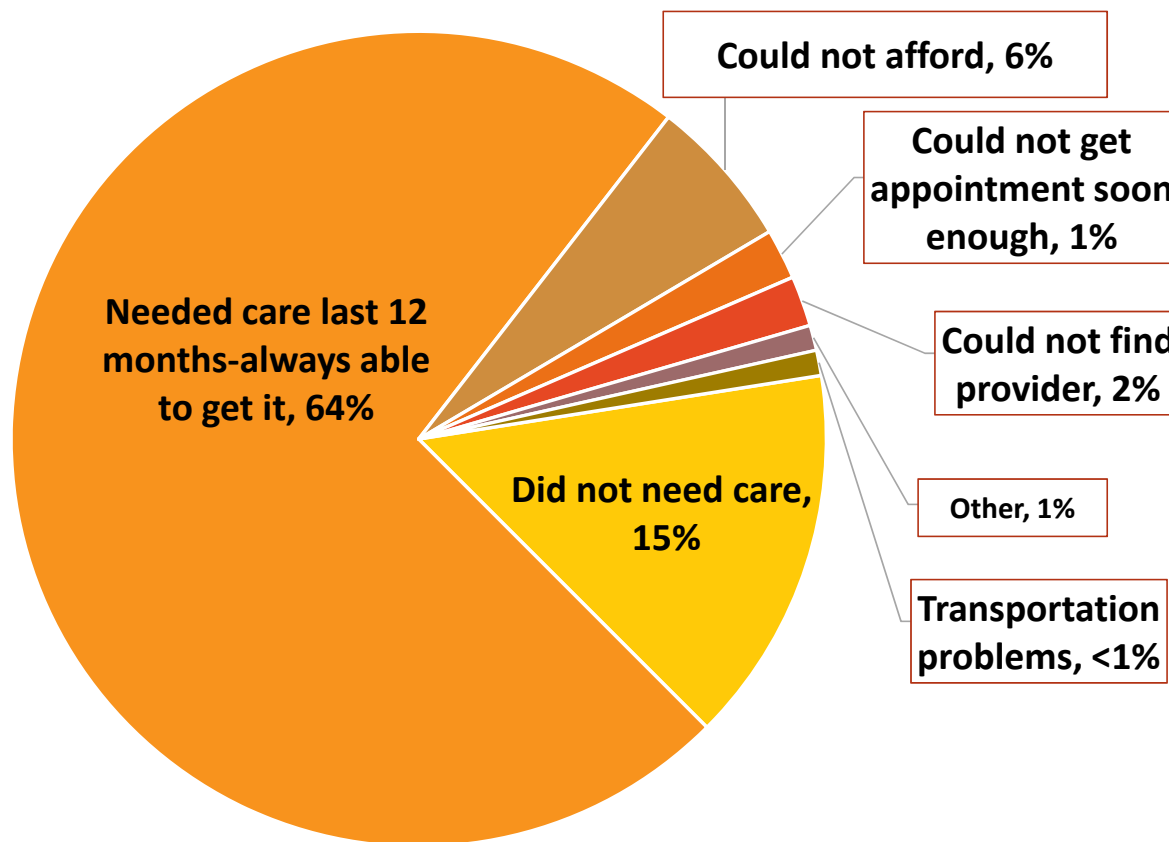




People who need care  
are not getting it

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# Millions of Americans cannot always get care when they need it



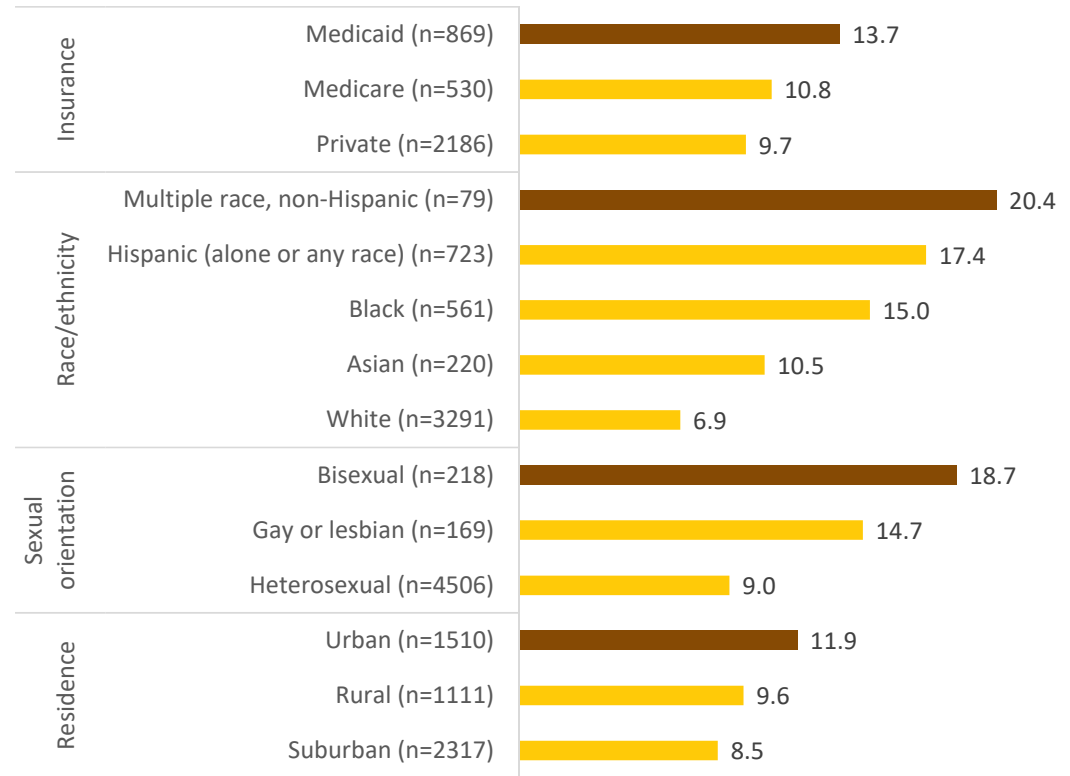
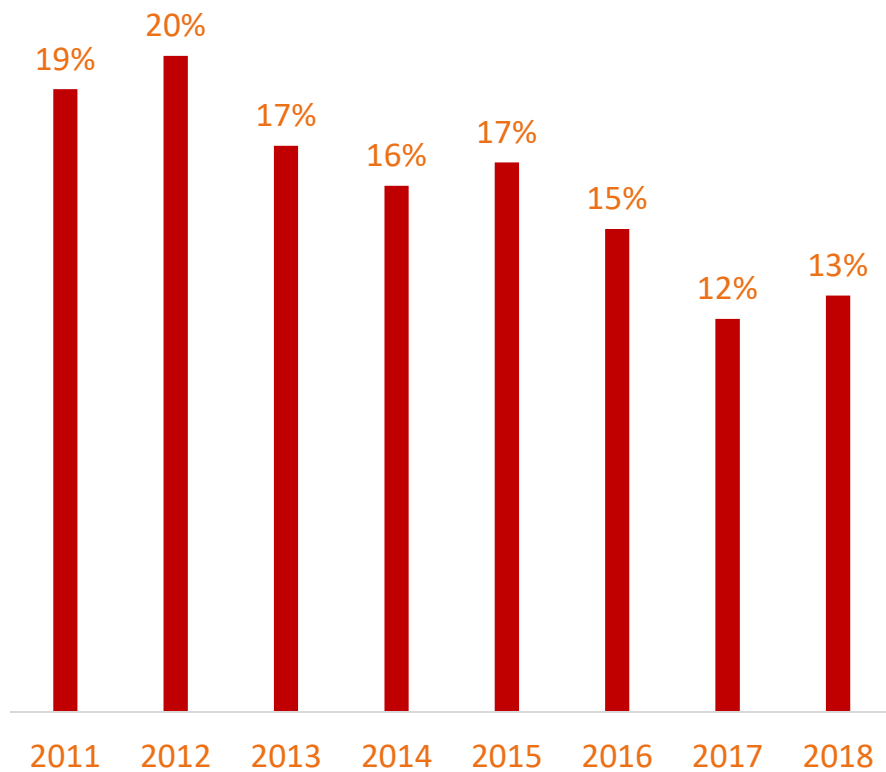
12% of U.S. adults (>30 million people) could not always get care



Source: AAMC Consumer Survey of Health Care Access Wave 18, June 2019

# Access has improved, but it is not the same for everyone

## PERCENT NOT ALWAYS ABLE TO GET CARE

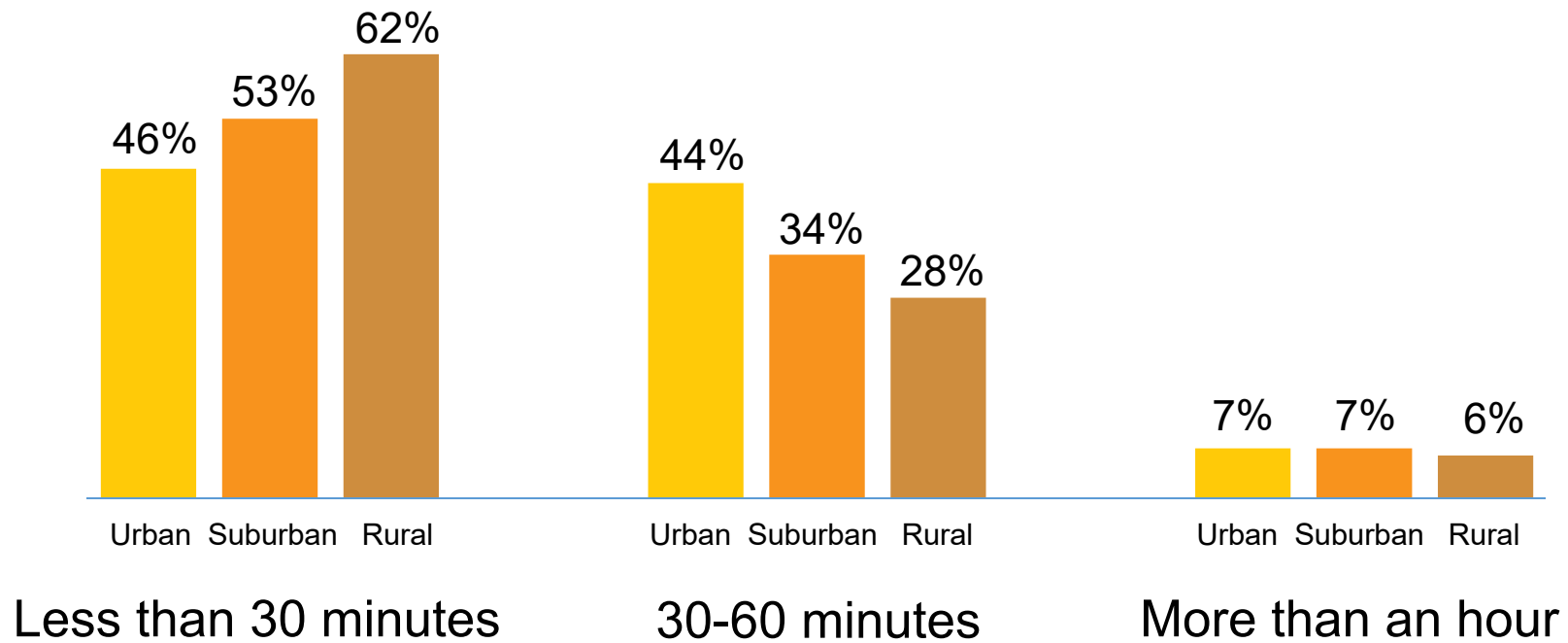




# Urban respondents who accessed behavioral or mental health care reported longer travel time to their provider.

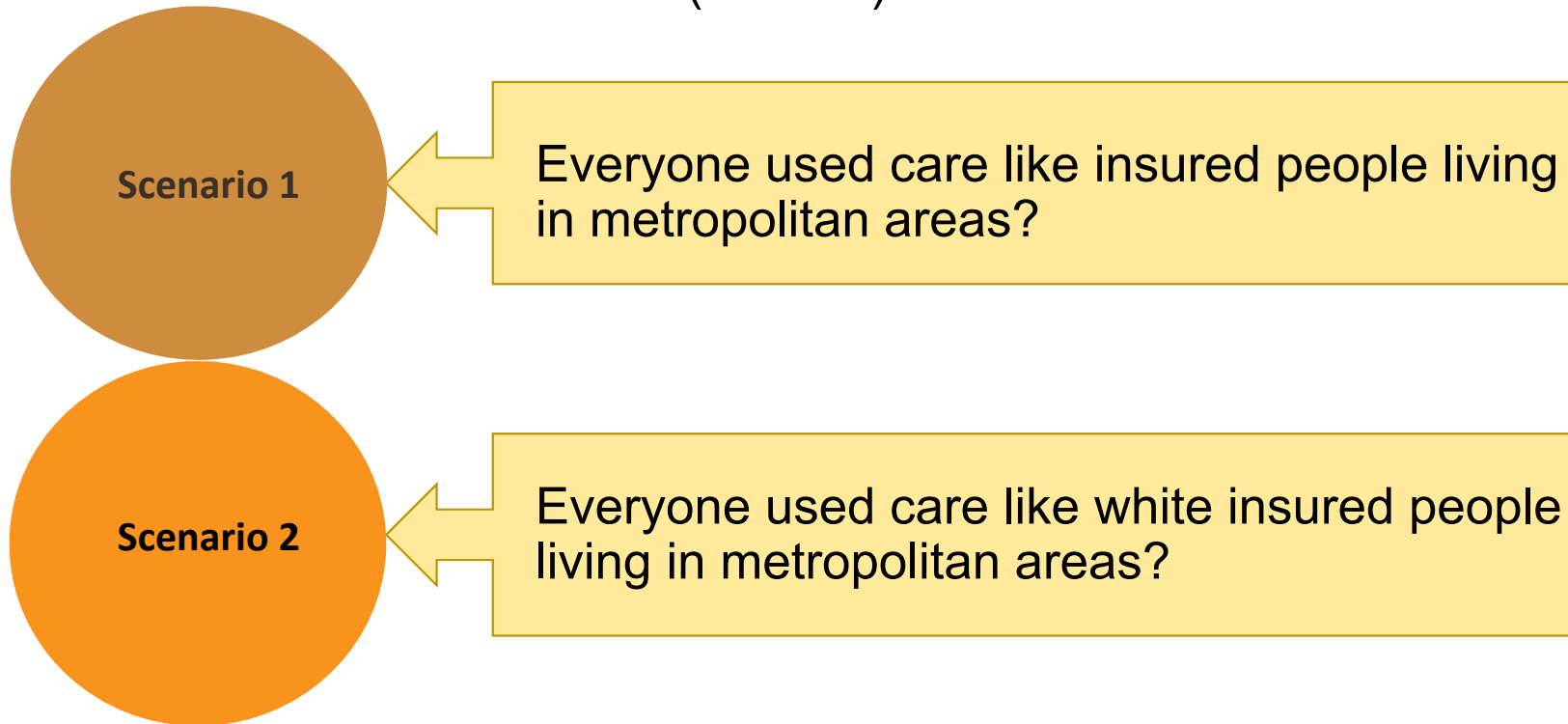


Among respondents who accessed behavioral or mental health care, time spent traveling to provider:

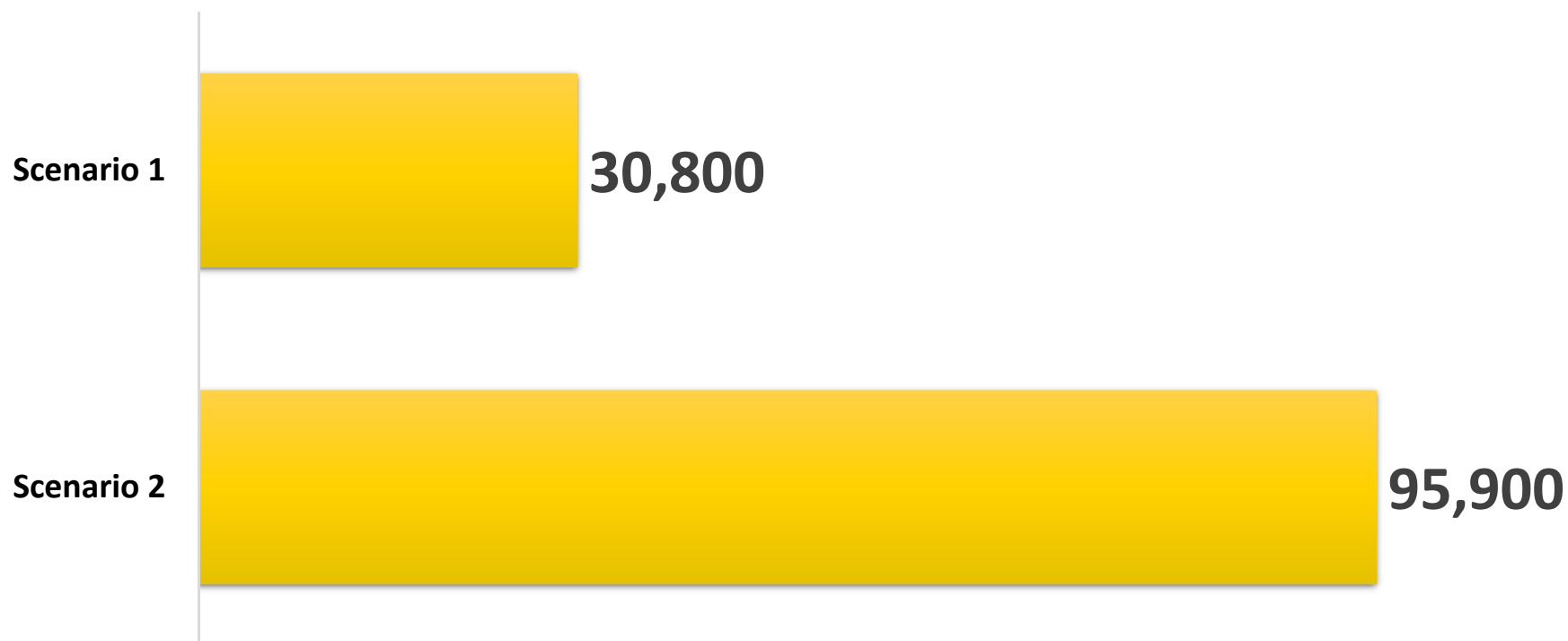


# The magnitude of unmet need

What if barriers disappeared? How much more utilization (in 2017) if...



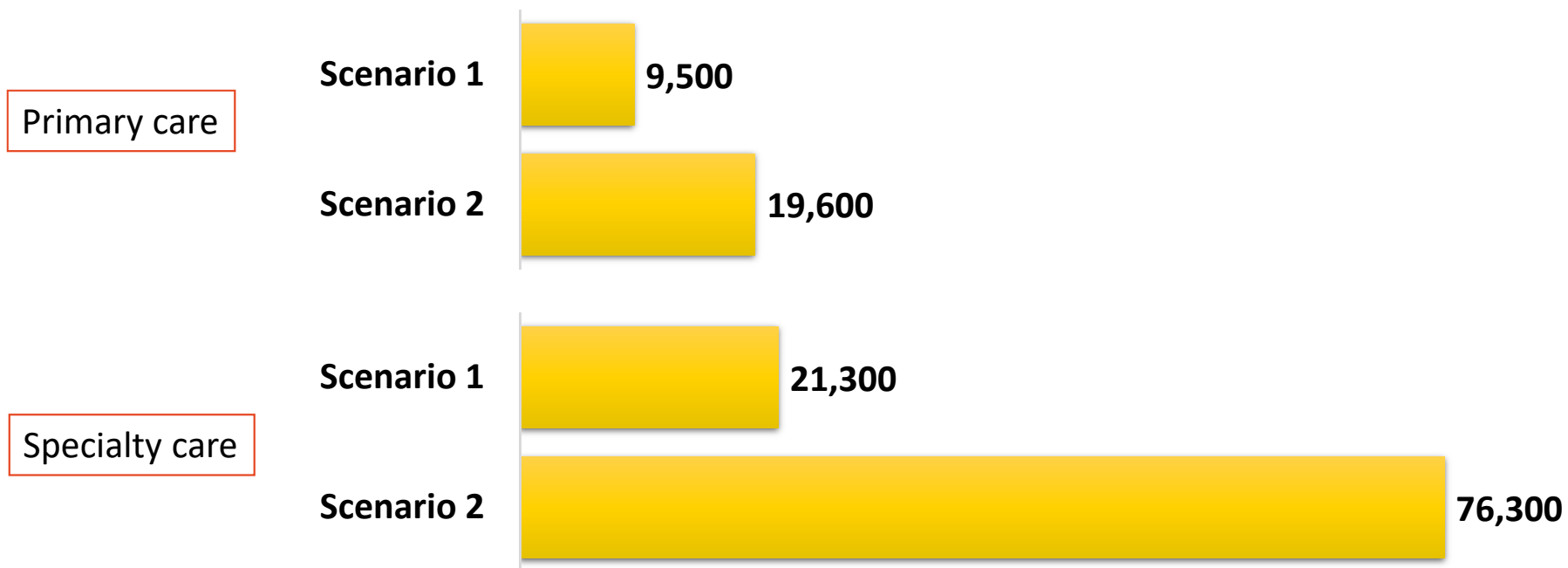
# Physicians needed to achieve health care utilization equity, 2017



Source: AAMC, 2019 Update: Complexities of Physician Supply and Demand: Projections from 2017 to 2032.



# Physicians needed to achieve health care utilization equity, 2017



Source: AAMC, 2019 Update: Complexities of Physician Supply and Demand: Projections from 2017 to 2032.



## Take-aways

**People who need care are not getting it**

**Access has improved, but it is not the same for everyone**

**Addressing inequities in access could require a large number of physicians**



## Workforce Resources

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### AAMC Consumer Survey of Health Care Access

Twice each year, the AAMC fields a Consumer Survey of Health Care Access to assess access to health care services in the United States. Emphasizing a consumer perspective, the AAMC Consumer Survey complements our ongoing research on the physician workforce. Significantly, the AAMC Consumer Survey takes an inclusive approach to defining access, beginning with whether care is received, and examining the roles of health insurance coverage, having a usual source of care, the timeliness and location of care, and the quality of patient-provider communications on access to care.

[DOWNLOAD THE DATA HIGHLIGHTS](#) ▶

For more information about the data that are available for analyses, please refer to the AAMC Consumer Survey of Health Care Access below:

- [AAMC Consumer Survey of Health Care Access Topic Areas \(PDF\)](#)
- [AAMC Consumer Survey of Health Care Access Data Dictionary \(PDF\)](#)

[aamc.org/workforce](https://aamc.org/workforce)

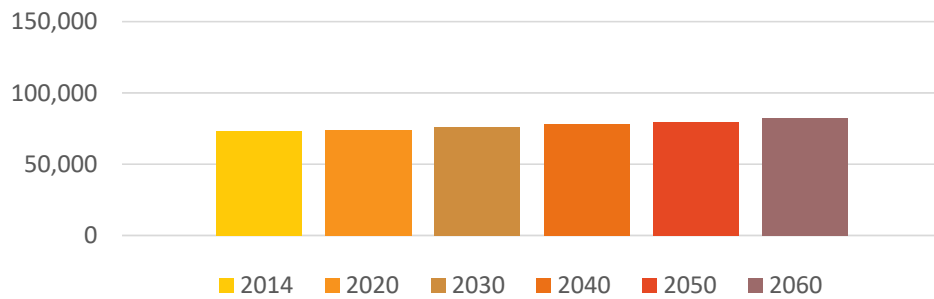


# The State of the Physician Workforce

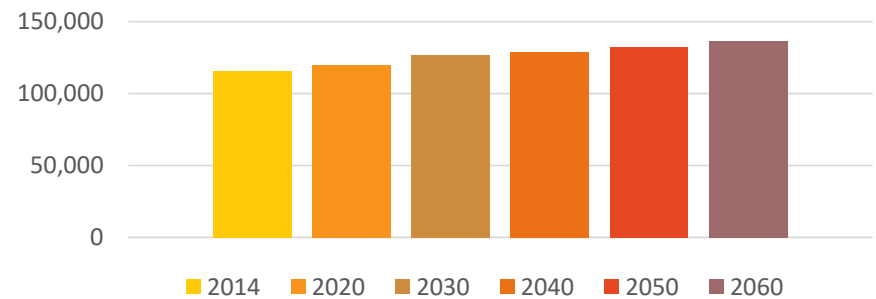


# The population is growing – and aging

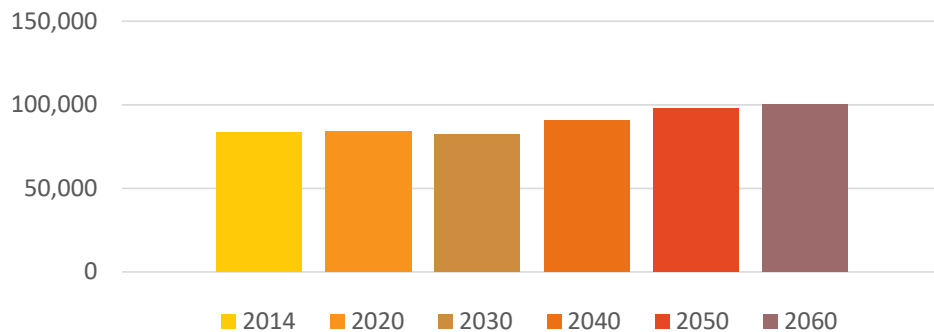
Under 18 yrs



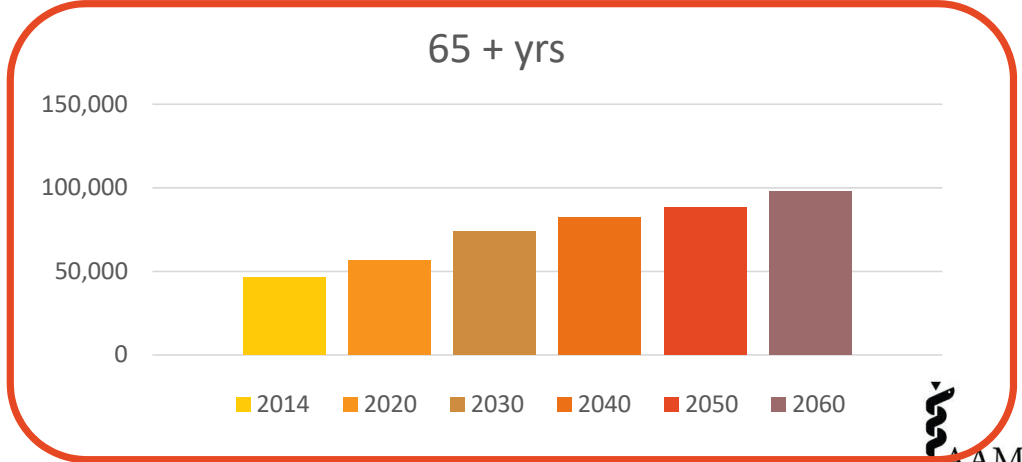
18-44 yrs



45-64 yrs

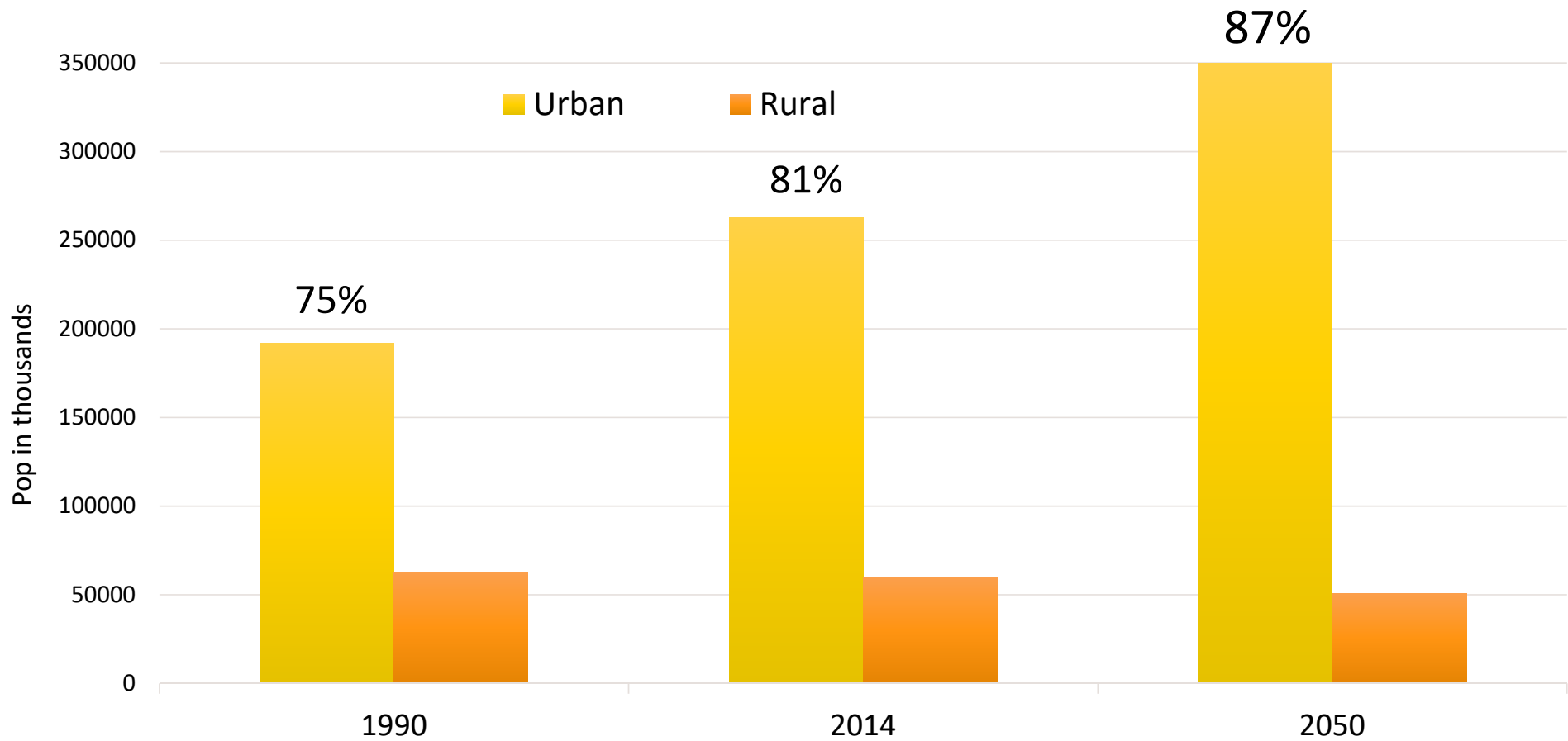


65 + yrs





# The nation's population is urbanizing rapidly



# Majority minority

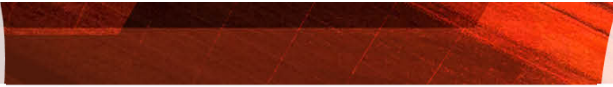
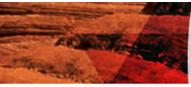
By 2050, U.S. will be majority non-white

Already majority minority in five states (HI, NM, TX, CA, NV)

Under-18 population will be majority non-white by next year

In less than a decade, the population under 30 will be majority non-white.

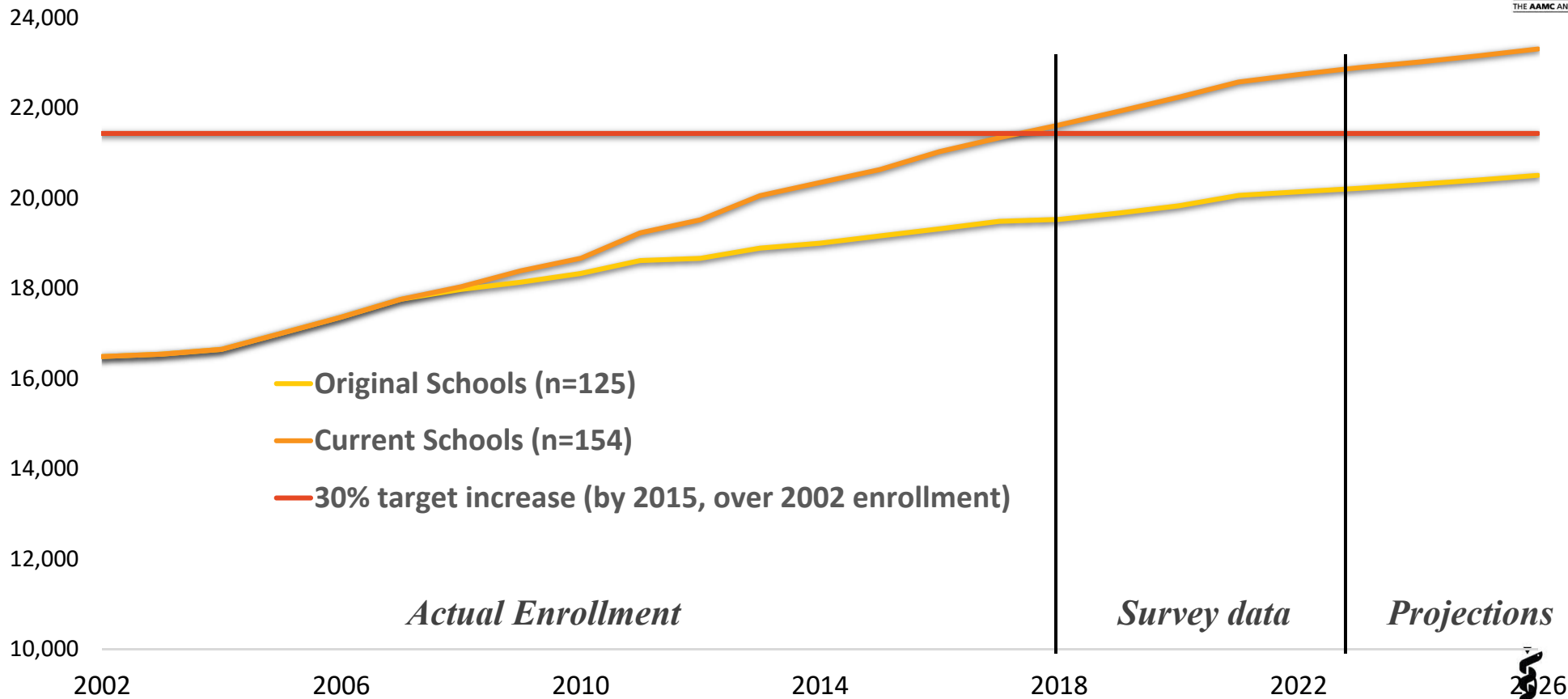




# Growing physician supply



# US MD enrollment has exceeded the called for 30% increase



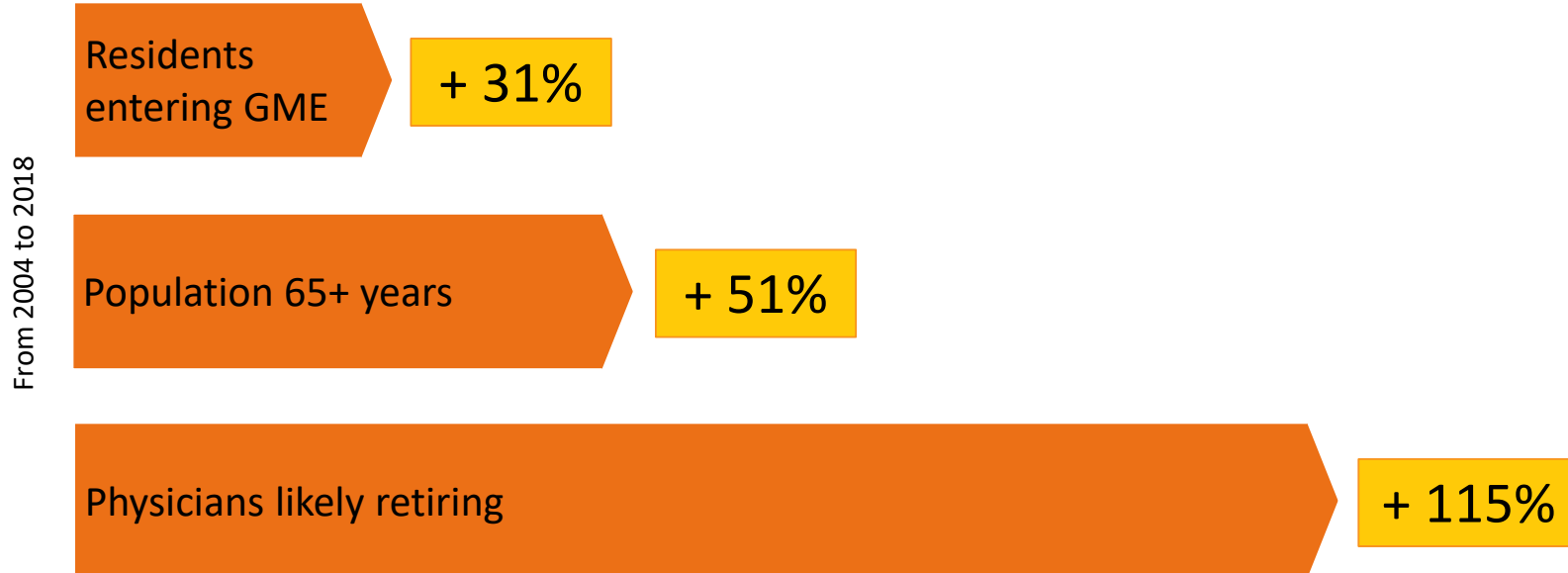
# Medical schools' concern about clinical training opportunities for their students continues to grow



- Not enough training sites: 85 %
- Not enough PC preceptors: 89%
- Not enough SC preceptors: 67%



# Production of new physicians not keeping pace with aging workforce and population



Sources: National Population by Characteristics: 2010-2018 from the U.S. Census. Physicians turning 65: AMA Masterfile as of years-end 2004-2018; Residents entering GME: ACGME Data Resource Books, academic years 2003-2004 through 2017-2018.



## Take-aways

**US is becoming less rural & more urban**

**US is becoming a majority minority  
nation**

**MD enrollment up 31% - clerkship and  
GME capacity growth needed**



The screenshot shows the AAMC website's 'DATA & REPORTS' section. At the top right, there are links for 'STORE', 'HELP', and 'CONTACT US'. The main header features the AAMC logo and the text 'DATA & REPORTS'. Below the header, a navigation menu includes 'SEARCH', 'STUDENTS & RESIDENTS', 'NEWS & INSIGHTS', 'DATA & REPORTS', 'ADVOCACY & POLICY', 'PROFESSIONAL DEVELOPMENT', 'SERVICES', 'WHO WE ARE', and 'WHAT WE DO'. The main content area displays a large image of healthcare professionals in a hallway, with a dark blue overlay on the right containing the text 'WORKFORCE Physician Workforce Projections GME'. At the bottom, there are three small thumbnail images: a group of people, a line graph, and a person looking at a computer screen.

<https://www.aamc.org/data-reports>





# The State of the Physician Workforce

Shortages

New data

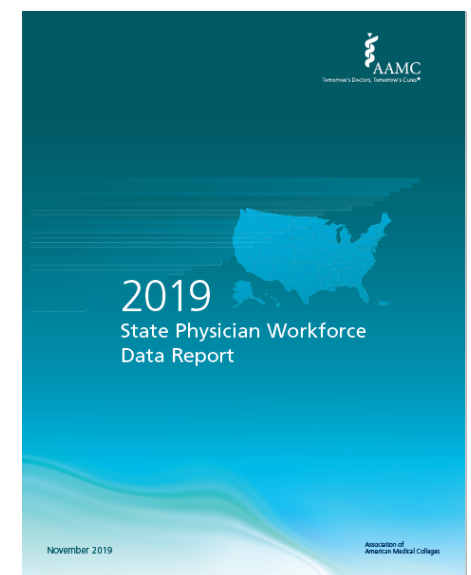
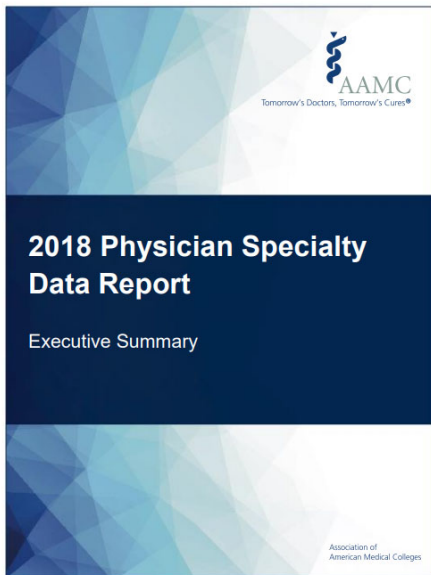
Getting care

Changes

Reports & resources



# Workforce Studies reports



# Defining Rural

## The Predictive Value of Medical School Applicants' Rural Characteristics on Intent to Practice in a Rural Community

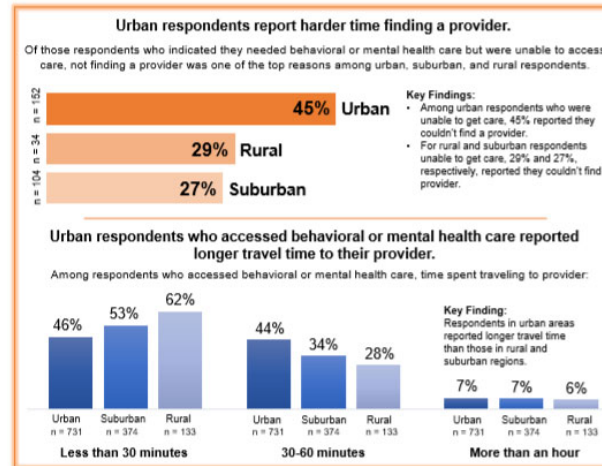
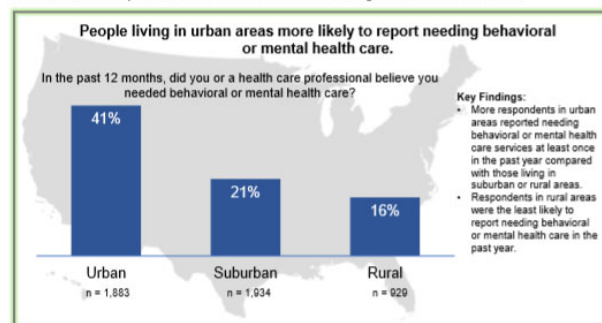
Wendling, Andrea L. MD; Shipman, Scott A. MD, MPH; Jones, Karen M ApStat; Kovar-Gough, Iris MA, MLIS; Phillips, Julie MD, MPH

## Current Demographic Status of Cardiologists in the United States

Laxmi S. Mehta, MD<sup>1</sup>; Kara Fisher, MPH<sup>2</sup>; Anne K Rzeszut, MA<sup>3</sup>; et al



March 2019  
**Behavioral and Mental Health Care Among Urban, Suburban, and Rural Respondents: Differences in Reported Need, Reasons for Not Getting Care, and Travel Time**



Source: AAMC Consumer Survey of Health Care Access. Learn more at [aamc.org/workforce](http://aamc.org/workforce).  
 Authors: Sarah King, program specialist, and Kara Fisher, research analyst, AAMC



# What will we be working on next?

Dual physician  
marriages

Practice  
location choice

Burnout in  
academic  
medicine

Physician work  
hours

Telehealth

Medical student  
debt

Physician  
language usage

Physicians with  
disabilities

Harassment and  
discrimination

# 16<sup>th</sup> Annual AAMC Health Workforce Research Conference

Bethesda, MD  
May 6-8, 2020



[www.aamc.org/workforce](http://www.aamc.org/workforce)



# Annual Address on the State of the Physician Workforce

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