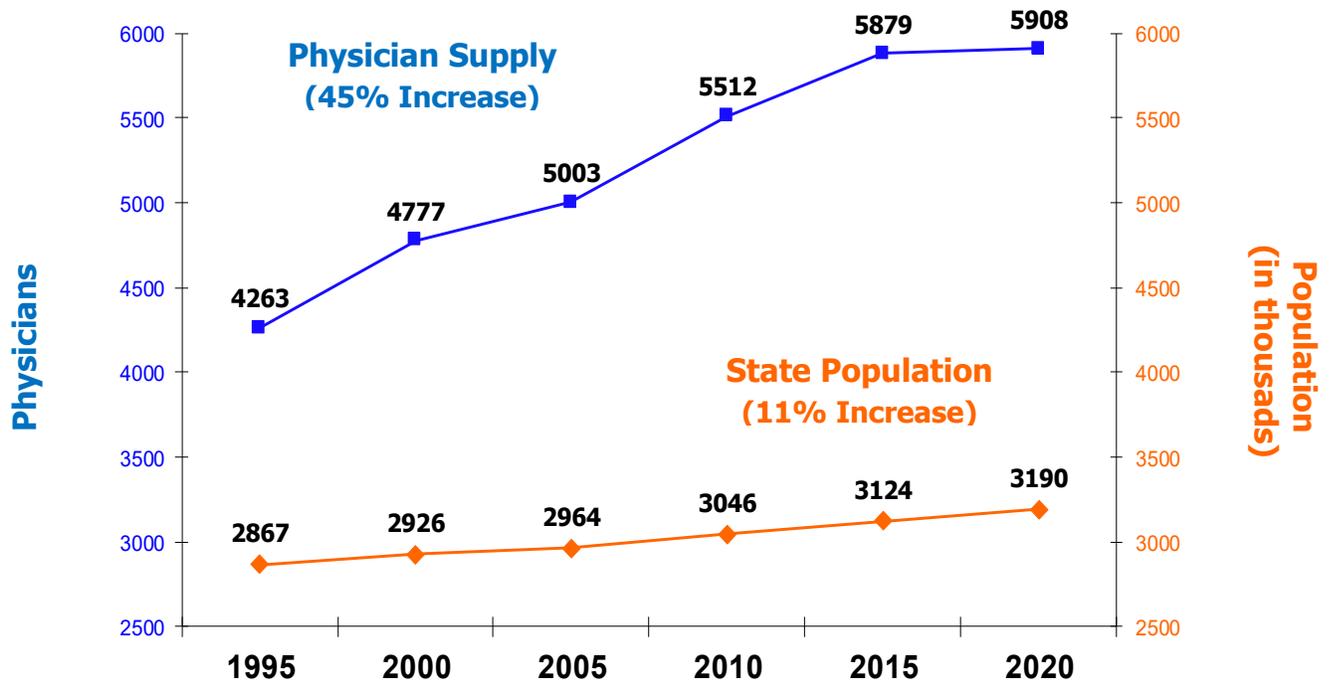


IOWA HEALTH PROFESSIONS TRACKING CENTER

Annual Report on the Supply of Iowa Physicians
January – December 2020

IOWA PHYSICIAN SUPPLY vs. POPULATION



Office of Statewide Clinical Education Programs
Carver College of Medicine
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Preface

The Iowa Health Professions Tracking Center in the Office of Statewide Clinical Education Programs has continuously inventoried the supply of Iowa physicians for the past 43 years. A computer-based tracking system — the Iowa Health Professions Inventory — is used for this purpose. Workforce analysts benchmark key data points annually. This is a report of key physician supply benchmarks for 2020.

Total Physician Supply

On January 1, 2020, Iowa had a supply (i.e., inventory) of 5,943 professionally active physicians. The continuous inventory of physicians includes both allopathic and osteopathic physicians; physicians in all medical and surgical specialties; and physicians in all professional activities (e.g., private practice, teaching/research, community health, student health, administration, etc.). The inventory does not include residents and fellows.

The difference between the January 2020 figure (5,943) and the year-end figure (5,908) is -35, which is a net loss in Iowa’s physician supply for 2020.

New Practices vs. Practices Closings

This net loss in gross inventory is cross-checked against the difference between the number of new physicians entering practice and the number closing practices during the year. In 2020, 261 physicians entered Iowa practices while 296 left their Iowa practice, most relocating to other states. The same annual net loss of physicians -35 is obtained by subtracting the 261 who left practice from the 296 who started new practices. This cross-check is an important part of the data validation process.

The 2020 net loss is significantly less than the annual average gain for the most recent 10-year period. During the past, prior 10 years, an annual average of 421 physicians started new practices and 368 closed their practices for an average net gain of +53 physicians (Table 1). The new practitioner group for 2020 is less than the 10-year average and the departing practitioner group in 2020 is also significantly less than their corresponding 10-year average.

Table 1 — New Practices vs. Practice Closings

	<u>2020</u>	<u>Prior Ten-Year Average</u>
• Physicians Entering	261	421
• Physicians Leaving*	<u>-296</u>	<u>-368</u>
Net Gain	-35	+53

*Due to relocation, retirement, health, retraining, etc.

Allopathic (MD) vs. Osteopathic (DO)

Of the 261 “new” physicians in 2020, 207 were MDs (79%). In the group of 296 physicians who closed Iowa practices in 2020, the MD count was 244 (82%). That combination resulted in a loss of 37 MDs (207 minus 244).

The corresponding figures for osteopathic physicians were 54 entering practice and 52 leaving practice for a net gain of 2. Thus, the overall net loss of 35 comprised loss of 37 allopathic physicians and a gain of 2 osteopathic physicians.

The complement of allopathic physicians -37 in the state’s annual net loss was substantially larger than the corresponding prior 10-year average gain of +22. The osteopathic physician complement of a gain of +2 in the annual net loss was substantially less than the prior 10-year average gain (+2 vs. +31) (Table 2).

Table 2 — MDs vs. DOs

	<u>Entered</u>		<u>Left</u>		<u>Net Gain</u>		<u>Prior 10-Year Average Net Gain</u>
• MD	207 (79%)		244 (82%)		-37 (106%)		22 (42%)
• DO	54 (21%)		52 (18%)		2 (-6%)		31 (58%)
Total	261 (100%)		296 (100%)		-35 (100%)		53 (100%)

Primary Care vs. Non-Primary Care

Primary care physicians (PCPs) are defined here as family physicians*, general internists and general pediatricians. All other specialties will be referred to as non-primary care physicians (non-PCPs). Of the 261 physicians entering Iowa practices in 2020, 85 (33%) were PCPs and 176 (67%) were non-PCPs. In the attrition group (physicians closing practices), 116 (40%) were PCPs and 180 (60%) were non-PCPs. The 2020 net loss in PCPs was -31 while non-PCPs decreased by -4, together accounting for the overall net loss of 35 in Iowa’s physician base (Table 3).

Table 3 — PCPs vs. Non-PCPs

	<u>Entered Practice</u>		<u>Left Practice</u>		<u>Net Gain</u>	
• PCPs	85	(33%)	116	(39%)	-31	(89%)
• Non-PCPs	176	(67%)	180	(61%)	-4	(11%)
Total	261	(100%)	296	(100%)	-35	(100%)

*Includes those in emergency medicine with family medicine residency.

Primary Care Specialties

42 family physicians (FPs*) entered practice last year while 81 FPs left their Iowa practice, resulting in a net loss of -39. The loss was substantially greater than the 10-year average gain (+6).

General internal medicine gained 8 for 2020 from the combination of 31 new practitioners and 23 general internists leaving practice. This gain is very near the 10-year average gain (+7).

General pediatricians remained the same, as 12 opened new practices and 12 relocated, retired, or left practice for some other reason.

Table 4 compares net gains/losses for 2020 with the 10-year average for each primary care specialty. The loss of -39 FPs resulted from net of -26 MD/FPs and -13 DO/FPs (Table 5).

Table 4 — Gain in Primary Care Physicians by Specialty

	<u>Entered</u>	<u>Left</u>	<u>Net Gain</u>	<u>Prior 10-Year Average Net Gain</u>
• Family Medicine*	42	81	- 39	6
• General Internal Medicine	31	23	8	7
• General Pediatrics	<u>12</u>	<u>12</u>	<u>0</u>	<u>6</u>
Total	85	116	-31	19

*FM (000-006) including those in emergency medicine with a family.

Table 5 — Gain in Family Physicians* MD vs. DO

	<u>Entered Practice</u>		<u>Left Practice</u>		<u>Net Gain/Loss</u>
• MD	26	(62%)	52	(64%)	-26
• DO	<u>16</u>	<u>(38%)</u>	<u>29</u>	<u>(36%)</u>	<u>-13</u>
Total	42	(100%)	81	(100%)	-39

International Medical Graduates

International Medical Graduates (IMGs), comprise a steady 20% of Iowa's supply of physicians, but are over-represented in both the new physician group and the departing physician group. IMGs comprised 29% of the new physicians (75 of 261) and 25% of those exiting practice (75 of 296).

Women in Medicine

Women now constitute 33% of the total population of Iowa physicians. Iowa's base of female physicians is growing at a faster pace than the state's total physician population. In 2020, the net gain in female physicians was +9, while the male component had a net loss of -44.

Specialty Categories

Individual medical specialties vary from year to year with respect to their contribution to the overall net gain/loss in Iowa physicians. In fact, a specialty might even experience a net loss despite having a number of new physicians in that specialty enter Iowa practices.

Medical specialties are listed in Table 6 with their 2020 record of new physicians, physicians leaving practice, and the resulting net gains or losses.

Table 6 — Specialties Net Gain (Loss)

Specialty	ADD	DEL	Net
Family Medicine ¹	40	72	-32
IM Subspecialties ²	34	37	-3
General Pediatrics	12	12	0
General Internists	31	23	8
Surgery ³	12	15	-3
Ped Subspecialties ⁴	21	5	16
Ob Gyn ⁵	7	20	-13
Psychiatry ⁶	10	16	-6
Radiology ⁷	7	7	0
General Surgery	10	10	0
Emergency Medicine	15	14	1
Anesthesiology ⁸	9	11	-2
Orthopedic Surgery ⁹	9	10	-1
Ophthalmology	10	7	3
Neurology ¹⁰	5	8	-3
Urology ¹¹	4	5	-1
Physical Medicine ¹²	3	0	3
Otolaryngology	6	5	1
Pathology ¹³	8	9	-1
Occupational Medicine	1	4	-3
Allergy / Immunology	2	1	1
Dermatology	4	5	-1
Nuclear Medicine	1	0	1
Total	261	296	-35

- ¹ Family Medicine, Family Practice Geriatrics, Family Medicine – Hospice & Palliative Medicine
- ² IM Subspecialties, Cardiovascular Disease, Endocrinology Diabetes Metabolism, Gastroenterology, Hematology, Hematology - Oncology, Internal Medicine - Hospice & Palliative Medicine, Infectious Disease, Medical Oncology, Nephrology, Pulmonary Disease, Rheumatology, Sleep Medicine, Transplant Hepatology, Clinical Cardiac Electrophysiology, Interventional Cardiology
- ³ Surgery Subspecialties, Critical Care Surgery, Colon & Rectal Surgery, Neurological Surgery, Plastic Surgery, Pediatric Surgery, Thoracic Surgery, Vascular Surgery, Complex General Surgical Oncology
- ⁴ Pediatric Subspecialties, Neonatal - Perinatal Medicine, Pediatric Medical Genetics, Pediatric Cardiology, Pediatric Endocrinology, Pediatric Hematology – Oncology, Pediatric Nephrology, Pediatric Critical Care Medicine, Pediatric Emergency Medicine, Pediatric Gastroenterology
- ⁵ OB Subspecialties, Obstetrics & Gynecology, Maternal & Fetal Medicine, Reproductive Endocrinology
- ⁶ Psychiatry, Child & Adolescent Psychiatry, Psychiatry/Family Medicine, Addiction Psychiatry
- ⁷ Diagnostic Radiology, Radiation Oncology, Neuroradiology
- ⁸ Anesthesiology, Pain Medicine Anesthesiology
- ⁹ Orthopedic Surgery & Orthopedic Sports Medicine
- ¹⁰ Neurology, Neurophysiology, Neuromuscular Medicine, Neurology - Sleep Medicine, Vascular Neurology
- ¹¹ Urology, Pediatric Urology, Female Pelvic Medicine & Rehabilitation
- ¹² Physical Medicine & Rehab, Pediatric Rehabilitation Medicine
- ¹³ Pathology, Clinical Pathology, Forensic Pathology, Hematology Pathology, Cytopathology

Attrition

The two main components of physician attrition are relocation and retirement. For 2020 relocation was 125 (42%) and retirement was 103 (35%). Over the past ten years relocation has decreased as a percentage of attrition, from 57% to 42%, while retirement has increased from 23% to 35%.

Conclusion

Iowa experienced a net loss of -35 physicians during 2020, which was far less than the annual average gain of +53 for the prior 10 years.

Certain trends in the Iowa physician population continued to be evident in 2020. Relocation to other states was the principal reason for physician losses; female physicians increased as a percent of the physician workforce; international medical graduates accounted for a disproportionate share of physicians entering and leaving Iowa practices; and individual specialties varied in terms of their contributions to net gains (or net losses).