Access to Physicians in California

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January 17, 2018
Overview

- California’s physician workforce
  - Current supply
  - Geographic distribution
  - Medical education

- Contributions of nurse practitioners and physician assistants to primary care

- Strategies for meeting physician workforce needs
California’s Physician Workforce
Major Findings – Current Physician Workforce

• Only 51% of physicians with California licenses provide patient care in California.

• One third are primary care physicians and two thirds are specialists.

• The geographic distribution of physicians across California is highly uneven.

• California’s physicians do not reflect the diversity of the state’s population.

• Many physicians are likely to retire within the next decade, particularly in rural areas.
Estimating the Number of Physicians in California, 2015

- Active License: 139,222
- Located in California: 113,034
- Renewed License in the Past Two Years: 93,023
- Completed Residency: 87,111
- Responded to Mandatory Survey: 81,003
- Provide Any Patient Care: 71,348
- Provide Patient Care 20+ Hours per Week: 61,196

Source: Analysis of Medical Board of California data by the Philip R. Lee Institute for Health Policy Studies at UCSF
Ratios of Active Patient Care Physicians per 100,000 Population by Region, California, 2015

Source: Analysis of Medical Board of California data by the Philip R. Lee Institute for Health Policy Studies at UCSF
The data displayed in this map were created by the California Office of Statewide Health Planning and Development’s (OSHPD) Healthcare Workforce Development Division (HWDD). To obtain more information about the federal designations shown on the map, see http://www.oshpd.ca.gov/HWDD/HPSA.html.
Mental Health
Health Professional Shortage Areas (HPSA)

The federal HPSA designation is given to areas that demonstrate a shortage of healthcare providers, on the basis of availability of mental health providers. This designation is based on the MSSA boundary, its population to (selected type of) practitioner ratio, and available access.

- Mental Health - HPSA, Population Designation (34)
- Mental Health - HPSA, Geographic Designation (133)
- County

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September 2011
Diversity of California’s Primary Care Clinicians Compared to its Population, 2015

**Sources:** American Community Survey, Public Use Microdata Sample, 2015, private tabulation. Medical Board of California, Survey of Licensees, May 2015; private tabulation.
Age Distribution of Active Patient Care Physicians in California, 2015

- 27% of active patient care physicians in California are age 60 years or older.
- In some regions the percentage age 60 years or older is even higher.
  - Northern and Sierra – 37%
  - Central Coast – 32%
  - Los Angeles and the San Joaquin Valley – 30%
- Rural counties have the oldest physicians.

Source: Analysis of Medical Board of California data by the Philip R. Lee Institute for Health Policy Studies at UCSF
Major Findings – Medical Education

- 1,571 persons graduated from California medical schools in 2016.
  - 1,121 from 9 allopathic (MD) schools
  - 450 from 2 osteopathic (DO) schools

- 2,554 first-year medical residents began training in California in 2017.
  - 1,025 in non-primary care specialties
  - 1,529 in primary care specialties
    - Half likely to go on to sub-specialize

Sources: AAMC, AACOM, NRMP
Contributions of Nurse Practitioners and Physician Assistants
Major Findings

• NPs and PAs are a major source of primary care in rural California.

• The numbers of nurse practitioners (NPs) and physician assistants (PAs) in California are much smaller than the number of physicians.

• The numbers of primary care NPs and PAs are expected to increase between now and 2030 but growth may not be sufficient to offset a projected decrease in the number of primary care physicians.
Numbers of MDs, DOs, NPs, and PAs in California, 2016

Strategies for Meeting Physician Workforce Needs
Typology of Strategies for Expanding Primary Care Capacity

Enhance the Education Pipeline
- Expand Training (medical school and residency)
- Recruit persons likely to practice in underserved populations
- Prepare to care for underserved populations

Recruit and Retain Clinicians
- Loan Repayment
- Other Incentive Programs
- Practice Support

Maximize the Existing Workforce
- Delivery Reform
- State Practice Regulation
- Technology
- Payment Reform

Leverage Data
- Data Collection
- Analysis and Planning
Tradeoffs Among Investment Strategies

• Expanding training capacity and recruiting people who want to practice in underserved areas and reflect the state’s racial/ethnic diversity are critical to address structural deficits in California’s physician workforce.

• But these are not quick fixes due to the length of training
  • 4 years of medical school
  • At least 3 years of residency

• Need to augment with strategies that
  • Incentivize new graduates to practice in underserved areas
  • Support retention of physicians in underserved areas
  • Encourage team-based practice
Conclusion
Conclusion

• Some rural and inner city areas of California have shortages of physicians.

• These shortages are likely to get worse unless the state takes action.

• NPs and PAs help but are not a panacea.

• Need a comprehensive strategic plan that engages multiple stakeholders.
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