



Highlights

- Demand for newly-trained primary care physicians is increasing and has surpassed demand for specialists.
- The in-state retention of newly-trained primary care physicians is declining.
- Most of the general internal medicine physicians who remain in New York to practice are not working in community-based settings.

Background

The health care delivery system in New York is undergoing rapid transformation, driven in part by the state's Medicaid Redesign Plan and by the anticipated implementation of federal health reform initiatives. As more people have access to health insurance, demand for primary care services and, by association, community-based primary care physicians is expected to increase dramatically. It is critical to understand current practice trends among newly-trained primary care physicians in order to anticipate future needs in this rapidly changing environment.

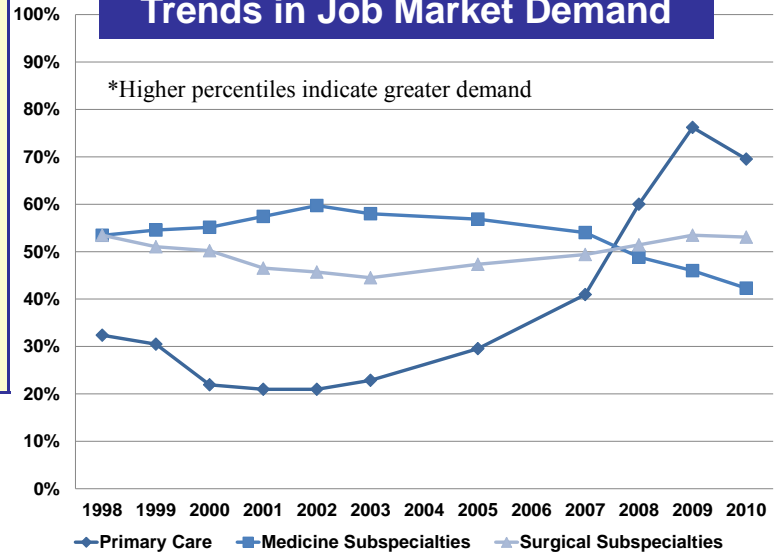
Since 1998, the Center for Health Workforce Studies, with support from New York State Department of Health and in cooperation with graduate medical education program administrators at teaching hospitals in New York, conducts an annual survey of all physicians completing a residency or fellowship training program in the state. This research brief examines practice trends for newly-trained primary care physicians who completed training in New York.

Key Findings

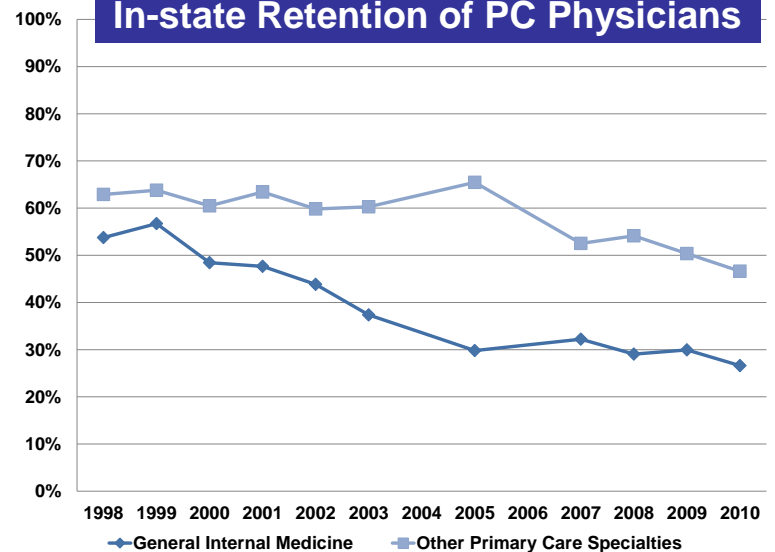
Overall demand for newly-trained primary care physicians has increased and, at the same time, the in-state retention of these physicians has declined.

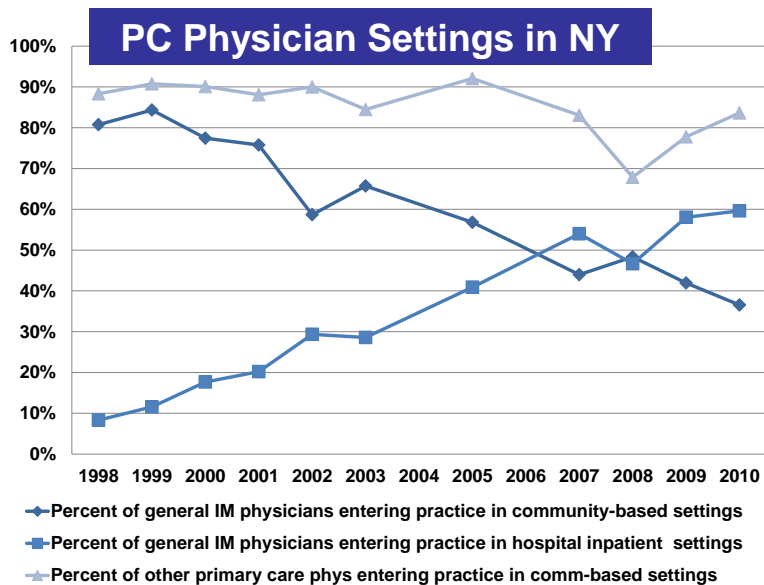
Since 2008, demand for newly-trained primary care physicians has surpassed demand for specialists, while the in-state retention of these physicians has declined, particularly for general internal medicine physicians (27% decline since 1998).

Trends in Job Market Demand



In-state Retention of PC Physicians





The majority of general internal medicine physicians staying in New York do not plan to practice in community-based settings.

The percent of general internal medicine physicians reporting plans to enter community-based practices has declined by 44% since 1998. Unlike other newly-trained primary care physicians staying in New York, general internal medicine physicians are increasingly planning to work in hospital inpatient settings. In 2010, only 37% of general internal medicine physicians staying in New York planned to practice in community-based settings, compared to 84% of all other primary care physicians staying in New York.

General internists planning to practice in community-based settings expect to remain at their principal practice longer than those planning to practice in hospital inpatient settings.

Forty-eight percent of newly-trained general internal medicine physicians planning to work in community-based settings in New York expect to remain at their principal practice for more than 5 years, while only 19% of those planning to work in hospital inpatient settings expect to stay at their principal practice longer than 5 years.

Discussion

While the demand for primary care physicians has increased in recent years, the in-state retention of primary care physicians in New York has declined. This is especially the case for general internal medicine physicians. Also, fewer general internal medicine physicians report plans to practice in community-based practice settings in New York. Instead, over the last decade, general internal medicine physicians increasingly report plans to practice in hospital inpatient settings. Given the anticipated increase in demand for primary care services due to health care system reforms, it is important to understand current practice trends among primary care physicians in order to inform programs and policies designed to attract these physicians to community-based primary care positions.

Characteristics of General IM Physicians Staying in NY, 2007-2010

	Community-based	Hospital Inpatient
Female	57%	40%
Underrepresented minority	15%	14%
Foreign international medical graduate	41%	42%
Expected to remain at principal practice for 5+ years	48%	19%
Expected weekly patient care hours	44	43
Expected total weekly hours	60	64
Average annual starting income	\$139,654	\$150,180

Note 1: Community-based practice settings refer to ambulatory care settings that are accessible to the general public (e.g., not hospital inpatient).

Note 2: The Center's resident exit survey was not administered in 2004 and 2006. Thus, no data points for those years are shown on the graphs.

Note 3: Demand was measured using a composite score consisting of multiple indicators that was then converted to a percentile rank. For a complete description of the demand measure, see the report *Trends in Demand for New Physicians, 2005-2010* located on the Center's Web site: <http://chws.albany.edu>

Note 4: Primary care includes: family medicine, general internal medicine, and general pediatrics. Other primary care includes: family medicine and general pediatrics. Medicine subspecialties include: cardiology, critical care medicine, endocrinology and metabolism, gastroenterology, geriatrics, hematology/oncology, infectious disease, nephrology, pulmonary disease, and rheumatology. Surgical subspecialties include: neurosurgery, ophthalmology, orthopedic surgery, otolaryngology, plastic surgery, cardiothoracic surgery, and urology.

Center for Health Workforce Studies

This brief was prepared by the Center for Health Workforce Studies at the School of Public Health, University at Albany, State University of New York. Center staff who worked on the report included David Armstrong, Gaetano Forte, and Jean Moore. Funding for this analysis was provided by the New York State Department of Health. Web site: <http://www.chws.albany.edu>