Physician Supply and Requirements in California through 2015

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Overview of Presentation

- 1. Project goals
- 2. State demographics
- 3. Physician workforce
- 4. Forecasting methodology and assumptions
- 5. Findings



Project Goals

- 1. To create a demographic profile of California's population in 2002 and 2015
- 2. To compile a current profile of physicians practicing in California
- 3. To identify factors affecting the California's physician supply in the coming decade



Project Goals (cont.)

- 4. To identify factors affecting requirements for physician services in California through 2015
- 5. To forecast and compare future physician workforce supply and requirements (under multiple scenarios) in California through 2015
- 6. To advise the University of California on policy options to better ensure an adequate supply of physicians in California through 2015





California Demographics



California Population

- 34.7 million (as of 2000)
- About 12% of Americans
- California population increased by 16% between 1990 and 2000 (compared to 13% for US).
- The population of California is projected to increase by 7.5 million (22%) between 2000 and 2015.



Projected Population Growth in California, 2000-2015



Source: California Department of Finance



Projected Population Growth by Region, 2000-2015

<u>Region</u>	2000 Population	2015 Population	<u>% Change</u>
Bay Area	7,199,291	8,308,080	15%
Central Coast	1,874,448	2,370,148	26%
Central Valley/Sierra	1,149,033	1,591,237	39%
Inland Empire	3,298,337	4,859,820	47%
Los Angeles	8,838,861	10,978,502	12%
North Valley/Sierra	2,085,706	2,736,248	31%
Northern California	904,963	1,149,853	27%
Orange County	2,833,190	3,277,959	16%
San Diego	3,097,190	3,900,304	26%
South Valley/Sierra	2,372,133	3,198,748	35%
Total	34,653,395	42,370,899	22%

Source: California Department of Finance



Projected Population Change by Age Group, 2000-2015

Age Group	Population Change	<u>% Change</u>
Under 5 Years	653,131	24%
5 to 17 Years	1,040,259	15%
18 to 24 Years	1,394,232	44%
25 to 44 Years	- 117,247	- 1%
45 to 64 Years	3,188,320	44%
65 to 74 Years	1,144,704	59%
75 to 84 Years	195,247	15%
85 Years and Over	218,858	49%
Total	7,717,504	22%

Source: California Department of Finance



Racial/Ethnic Composition of California: 1990, 2000, and 2015

	<u>1990</u>	<u>2000</u>	<u>2015</u>
White (non-Hispanic)	57%	50%	42%
African American/Black (non Hispanic)	7%	7%	6%
Asian/Pacific Islander (non Hispanic)	9%	12%	14%
Native American/Alaskan Native (non-Hispanic)	0.6%	0.6%	0.6%
Hispanic/Latino	26%	31%	37%

Source: California Department of Finance





California Physician Workforce



Number of Physicians in California by Activity, 2002



Source: AMA Physician Masterfile, 12/2002



Gender of Active Patient Care Physicians in California by Age, 2002



Source: AMA Physician Masterfile, 12/2002



Race/Ethnicity of Active Patient Care Physicians in California Compared to California Population, 2002



Sources: AMA Physician Masterfile, 12/2002; California Department of Finance



Location of Medical Education of Active Patient Care Physicians in California, 2002





California Physician Supply and Requirements Forecasting



California Physician Supply and Requirements Forecasting: General Approach

- Develop simple forecasting model for physician supply
- Use existing forecasting model for physician demand
- Use historical data to inform forecasting models
- Develop alternative scenarios to supplement baseline forecasts
- Assumes supply equals requirements in base year



California Physician <u>Supply</u> Forecasting Model Details

Physician Supply Model Components

- Current active physicians
- New entrants
 - Graduate year 1 residents
 - In-flow from other states
- Separations
 - Retirements
 - Deaths



California Physician <u>Supply</u> Forecasting Model Details (cont.)

Physician Supply Model Equation:

Current year's active physician supply

Prior year's active physician supply

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New Entrants and Net Migration

Retirements and Deaths



California Physician <u>Supply</u> Forecasting Model Details (cont.)

Assumptions

- *Entrants*: 1,900 graduate year 1 physicians annually (based on actual average annual graduate year 1 physicians in CA between 1996 and 2002)
- *Migration*: 900 other physicians initiating practice in CA annually (based upon historical estimates of non graduate year 1 physicians initiating practice in CA between 1996 and 2002)



California Physician <u>Supply</u> Forecasting Model Details (cont.)

Assumptions (cont.)

- *Retirements*: CA physicians will retire at the same rate as physicians retired nationally in the past (estimated retirement rate grows from 0.87% to 1.22% between 2002 and 2015 due to aging of physician workforce)
- *Deaths*: Physician death rates in CA will mirror national physician death rates (estimated death rate grows from 0.37% to 0.45% between 2002 and 2015)



California Physician <u>Supply</u> Forecasting Scenarios

Supply ScenarioAssumptions1. BaselineHistorical trends remain constant over period2. Lifestyle Changes10% reduction in work hours phased in over
period3. Productivity
Increases5% increase in physician productivity phased in
over period4. Lifestyle/Productivity10% reduction in work hours and 5% increase

Hybrid

le/Productivity 10% reduction in work hours and 5% increase in physician productivity phased in over period



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California Physician <u>Requirements</u> Forecasting Details

- Application of the HRSA Physician Demand Model (PDM)
- Forecasts consider:
 - Population distribution (CA Dept of Finance)
 - Trends in population demographics (CA Dept of Finance)
 - Insurance coverage (US Census; Baumgarten 2002; California Health Interview Survey 2001)
 - Utilization rates (by Gender/Age/Specialty) (PDM)
 - Contribution of non-physician clinicians (PDM)



California Physician <u>Requirements</u> Forecasting Details

Assumptions

- Use rates remain constant over time (baseline data derived from national data 2003 update of the PDM) by age, gender, insurance status, and setting.
- Physician productivity (time spent with a patient) remains constant over time (baseline data from national 2003 update of physician requirements – PARM)
- Physician requirements equal supply in 2002



California Physician <u>Requirements</u> Forecasting Insurance Environments

- Physician requirements were forecast in two distinct insurance environments:
 - *1. Constant Insurance Environment*: current levels of health insurance remain over forecast period
 - 2. *Expanded Insurance Environment*: universal health insurance/other barriers to care removed; historically uninsured use physician services similarly as historically insured



California Physician <u>Requirements</u> Forecasting Scenarios

<u>Requirements Scenario</u>	<u>Assumptions</u>
1. Baseline	Historical trends remain constant over period
2. Economic Expansion	1% annual increase in the per capita GSP in CA; requirements increase 0.75% for every 1% increase in per capita GSP
<i>3. Changing Physician Utilization Rates</i>	Age-specific physician utilization rates in CA will change between 2002 and 2015 similarly to those observed nationally between 1990 and 2000
<i>4. Elimination of Unnecessary/Marginally Beneficial Services</i>	5% of physician services in CA eliminated over forecast period



California Physician <u>Requirements</u> Forecasting Scenarios (cont.)

Requirements Scenario

Assumptions

5. Economic Expansion/Unnecessary Services Reduction Hybrid

Combines assumptions in Scenarios 2 and 4

6. Changing Physician Use Rates & Unnecessary Services Reduction Hybrid

Combines assumptions in Scenarios 3 and 4





California Physician Supply and Requirements Forecasting: Findings



California Physician <u>Supply</u>: 2002-2015 Total Physicians per 100,000 Population

	<u>2002</u>	<u>2015</u>	<u>% Change</u>
1. Baseline	252.7	253.6	0.4%
2. Lifestyle Changes	252.7	238.4	- 5.7%
<i>3. Productivity Increases</i>	252.7	266.7	5.6%
4. Lifestyle- Productivity Hybrid	252.7	249.9	- 1.1%



California Physician <u>Requirements</u>: 2002-2015 (Constant Insurance Environment) Total Physicians per 100,000 Population

	<u>2002</u>	<u>2015</u>	<u>% Change</u>
1. Baseline	252.7	258.3	2.2%
2. Economic Expansion	252.7	282.8	11.9%
<i>3. Changing Physician Use Rates</i>	252.7	278.6	10.3%
4. Eliminate Unnecessary – Marginally Beneficial Services	251.8	245.4	- 2.5%
<i>5. Econ Expans & Unnecessary Services Reduction Hybrid</i>	251.8	268.7	6.7%
6. Changing MD Use Rates & Unnecessary Services	251.8	264.7	5.1%
Reduction Hybrid			

California Physician <u>Requirements</u>: 2002-2015 (Expanded Insurance Environment) Total Physicians per 100,000 Population

	<u>2002</u>	<u>2015</u>	<u>% Change</u>
1. Baseline	252.7	282.9	11.9%
2. Economic Expansion	252.7	309.6	22.5%
3. Changing Physician Use Rates	252.7	298.9	18.3%
4. Eliminate Unnecessary – Marginally Beneficial Services	251.8	268.7	6.7%
<i>5. Econ Expans & Unnecessary</i> <i>Services Reduction Hybrid</i>	251.8	294.2	16.8%
<i>6. Changing MD Use Rates & Unnecessary Services Reduction Hybrid</i>	251.8	283.9	12.8%

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Physician Supply and Requirements in California, 2015: Supply Scenario 1 Baseline





Physician Supply and Requirements in California, 2015: Supply Scenario 2 Lifestyle Changes





Physician Supply and Requirements in California, 2015: Supply Scenario 3 Productivity Increases



Physician Supply and Requirements in California, 2015: Supply Scenario 4 Lifestyle Changes/Productivity Increases Hybrid

Physician Supply and Requirements in California, 2015: Supply Scenario 1 Baseline

Physician Supply and Requirements in California, 2015: Supply Scenario 2 Lifestyle Changes

Physician Supply and Requirements in California, 2015: Supply Scenario 3 Productivity Increases

Physician Supply and Requirements in California, 2015: Supply Scenario 4 Lifestyle Changes/Productivity Increases Hybrid

Mean Difference between Physician Requirements and Supply Growth, 2002-2015

Supply Scenarios

Mean Difference	1	2	3	4
Percent Difference	10%	16%	5%	11%
Absolute Difference	10,514	16,965	4,961	12,074

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Conclusions

- California is likely to face a shortage of physicians in the next decade
- Even if these shortages are moderate statewide, they are likely to be severe in some communities and in some specialties
- There are a number of steps the state can take to increase the supply of physicians and to address the geographic mal-distribution of physicians
- Assessing physician supply and requirements combined with tools to address likely gaps are critical if California is to assure access to care for its citizens in the coming decades

