Residency Training Outcomes in New York, 2005 A Summary of Responses to the 2005 NYS Resident Exit Survey The Center for Health Workforce Studies – University at Albany

BACKGROUND

In order to provide the medical education community with useful information on the demand for physicians and on outcomes of training in New York, the Center for Health Workforce Studies conducts a biennial survey of all physicians completing a residency or fellowship training program in the state (the Resident Exit Survey). The survey instrument was developed by the Center in consultation with the teaching hospitals throughout New York.

In the spring, the Center distributes the surveys to GME administrators at teaching hospitals in the state. Through the excellent collaboration of teaching hospitals, in 2005, a total of 2,590 of the estimated 4,907 physicians finishing a training program completed the Resident Exit Survey for a 53% response rate. The year 2005 marked the seventh year the survey has been conducted. *In those seven years, nearly 20,800 of the estimated 32,200 graduates have completed the survey (65% response rate)*.

A general report is prepared each year summarizing the statewide results and is available at the Center's Web site: http://chws.albany.edu.

Many questions on the Resident Exit Survey are designed to assess demand for physicians in general and by specialty. The Resident Exit Survey provides a snapshot of the marketplace at a specific point in time. By conducting the survey every two years, trends may be observed which are useful in projecting future supply and demand.

KEY FINDINGS

Overall, the job market for new physicians in the state continues to be good. Despite the rich physician supply in New York, based on the responses to several questions used to measure demand, the opportunities for New York graduates in 2005 were fairly strong overall.

- In 2005, less than 6% of respondents who had actively searched for a practice position had not received any job offers at the time they completed the survey.
- While approximately one fourth (26%) of respondents reported some difficulty finding a satisfactory practice position, only 12% of these attributed their difficulty to an overall lack of jobs. Forty-nine percent attributed their difficulty to a lack of jobs in desired locations.
- The median starting income of graduates was up 6.8% from 2003 to 2005, recovering from the 0.5% decrease from 2002 to 2003. The average change over the last four years of the survey was +4.5%.
- Graduates' views of both the regional and national job markets were positive and optimistic for each of the last four years of the survey.

Demand for primary care physicians (generalists) continues to be weaker than for non-primary care physicians (specialists), albeit the gap has decreased in recent years. In 2005, demand for generalists was significantly weaker than for specialists. In 2005, after adjusting for citizenship status:

Generalists were more likely than specialists to report difficulty finding a satisfactory practice position (34% versus 23%) and to have to change plans due to limited practice opportunities (17% versus 13%).

- Generalists received fewer job offers (mean of 2.96 versus 3.61) and were less optimistic in their view of the regional job market (average Likert Score of 0.83 versus 1.05 on scale of +2 indicating "Many Jobs" to -2 indicating "No Jobs") but more optimistic in their view of the national job market (1.65 versus 1.61).
- In 2005, the trends for most of the demand indicators were less positive for generalists than for specialists. The following examples illustrate this point:
 - ✓ The average annual increase in median starting income from 2001 to 2005 (excluding 2004) was 2.5% for generalists as compared to 2.9% for specialists (for all specialties, this average was 2.7%).
 - ✓ The percent of generalists who had to change plans due to limited job opportunities was stable from 2001 to 2005 (excluding 2004) (24%, 22%, 23%, 17%). By contrast, fewer specialists found they had to change their plans over this period (14%, 14%, 15%, 13%).
 - ✓ The mean number of job offers received by generalists has been flat from 2001 to 2005 (excluding 2004) (2.8, 2.7, 2.6, 2.9), which was also the case for specialists until the last two years (4.2, 4.3, 3.9, 3.6).

There were significant differences in the job market experiences and assessments for different specialties. By assessing responses in a particular specialty in relation to all specialties, it is possible to identify specialties for which demand is weak or strong in relation to all others.

- Based on a variety of indicators, the demand for urology, cardiology, anesthesiology–general, dermatology, gastroenterology, child and adolescent psychiatry, and pulmonary disease appeared to be very strong.
- Physical medicine and rehabilitation, pathology, ophthalmology, pediatrics-general, geriatrics, and pediatric subspecialties experienced weak demand.

International medical school graduates (IMGs) with temporary visas (J-1, J-2, H-1, H-2, or H-3) had a significantly more difficult time in the job market than either U.S. medical graduates (USMGs) or IMGs with permanent citizenship status. With few exceptions, physicians on temporary visas can remain in the U.S. only if they practice in a Health Professionals Shortage Area or continue training. Since these individuals struggled to find employment, they were more likely to subspecialize than either USMGs or IMGs with permanent citizenship status.

Forty-eight percent of the graduates with confirmed practice plans were staying in New York to begin practice, although there were substantial differences by specialty. The in-state retention rate has been relatively flat over the last four years of the survey. For graduates in 2005 who were subspecializing, 49% were planning to do so in New York, down from 54% in 2003.

More than one-third (37%) of respondents were sub-specializing. However, there were sharp differences in subspecialization rates for IMGs on temporary visas as compared with respondents with permanent citizenship.

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