

Comparing the Background Characteristics and Job Market Experiences of USMGs, USIMGs, and Foreign IMGs

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ABSTRACT

Purpose of Study: There is a growing consensus that the supply of physicians will soon be inadequate to provide health care services to the population. With domestic production of physicians unable to keep up with growing demand for new physicians, the US relies upon a rather large influx of international medical graduates (IMGs) to fill graduate medical training positions every year. Among these IMGs is a growing group of US citizens (USIMGs) returning to this country for their graduate training. This study explores the demographic characteristics, practice characteristics, and job market experiences of US medical graduates (USMGs), USIMGs, and foreign IMGs and attempts to answer several important questions including "Are the job market experiences of USIMGs more similar to USMGs or IMGs?"

Methods: The primary data source for the study was the New York Resident Exit Survey. This annual survey of physicians completing residency or fellowship training in New York has been conducted in collaboration with teaching hospitals in the state since 1998 (61% response rate). The survey collects extensive information on new physicians' demographic and educational backgrounds, post-training plans, and job market experiences. For the analysis three years of data were pooled together (2014-2016) and IMGs on temporary visas were excluded from the job market analysis due to practice restrictions.

Key Findings: Almost 50% of all physicians trained in New York are either USIMGs or foreign IMGs. There was some variation in the demographic characteristics of USIMGs compared to other physicians completing residency training. USIMGs were more likely to be male and an underrepresented minority (e.g., Black/African American, Hispanic/Latino, and American Indian) compared to USMGs physicians. They were also more likely to be primary care physicians compared to USMGs. In regard to the job market, however, USIMGs experiences were much more similar to USMGs than foreign IMGs. A similar percentage of USIMGs reported difficulty finding a job compared to USMGs. USIMGs were similar to USMGs on a variety of other job market measures as well, including the percent reporting to change plans due to limited practice opportunities.

Implications: Given the impending shortage of physicians and quests for innovative ways to train future physicians to meet the ever-increasing demand for physician services, the growing group of USIMGs offers the potential to partially mitigate this issue. Hence, it is important to understand their job market experiences so that we can better gauge their impact on the future health care delivery system.

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INTRODUCTION

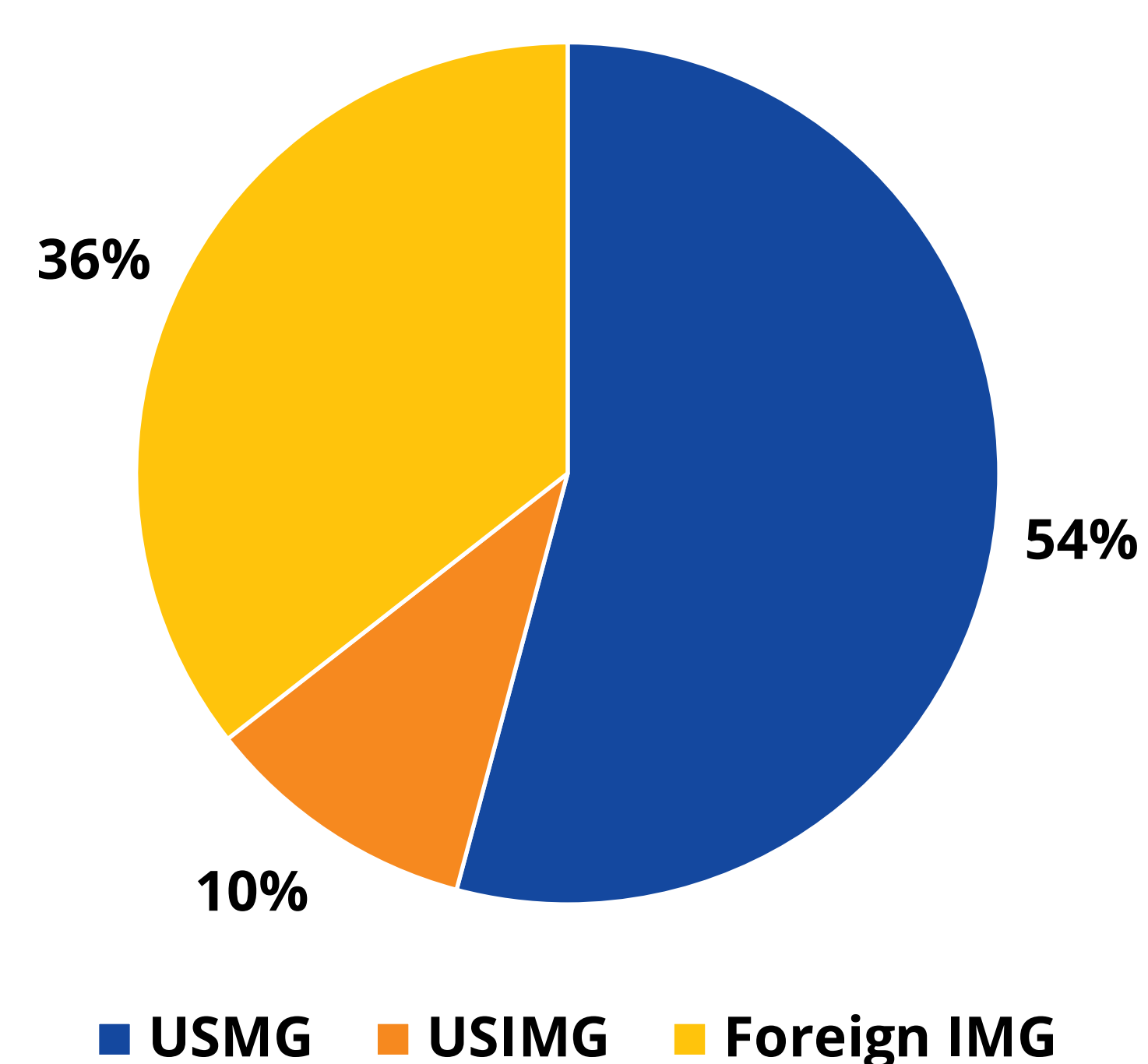
There is a growing consensus that the supply of physicians will soon be inadequate to provide health care services to the population. With domestic production of physicians unable to keep up with growing demand for new physicians, the US relies upon a rather large influx of international medical graduates (IMGs) to fill graduate medical training positions every year. Among these IMGs is a growing group of US citizens (USIMGs) returning to this country for their graduate training. This study explores the demographic characteristics, practice characteristics, and job market experiences of US medical graduates (USMGs), USIMGs, and foreign IMGs and attempts to answer several important questions including "Are the job market experiences of USIMGs more similar to USMGs or IMGs?"

METHODS

The primary data source for the study was the New York Resident Exit Survey. This annual survey of physicians completing residency or fellowship training in New York has been conducted in collaboration with teaching hospitals in the state since 1998 (61% response rate). The survey collects extensive information on new physicians' demographic and educational backgrounds, post-training plans, and job market experiences.

- Three years of data were pooled together (2014-2016) for the analysis. The total sample size was 8,640. Fifty-four percent of the sample were USMGs, 36% were Foreign IMGs, and 10% were USIMGs.
- Underrepresented minorities included: Black/African American, Hispanic/Latino, and American Indian.
- Community-based settings included: solo practice, partnership, group practice, hospital-based ambulatory care, and free-standing health centers or clinics.
- IMGs on temporary visas were excluded from the job market analysis due to practice restrictions.

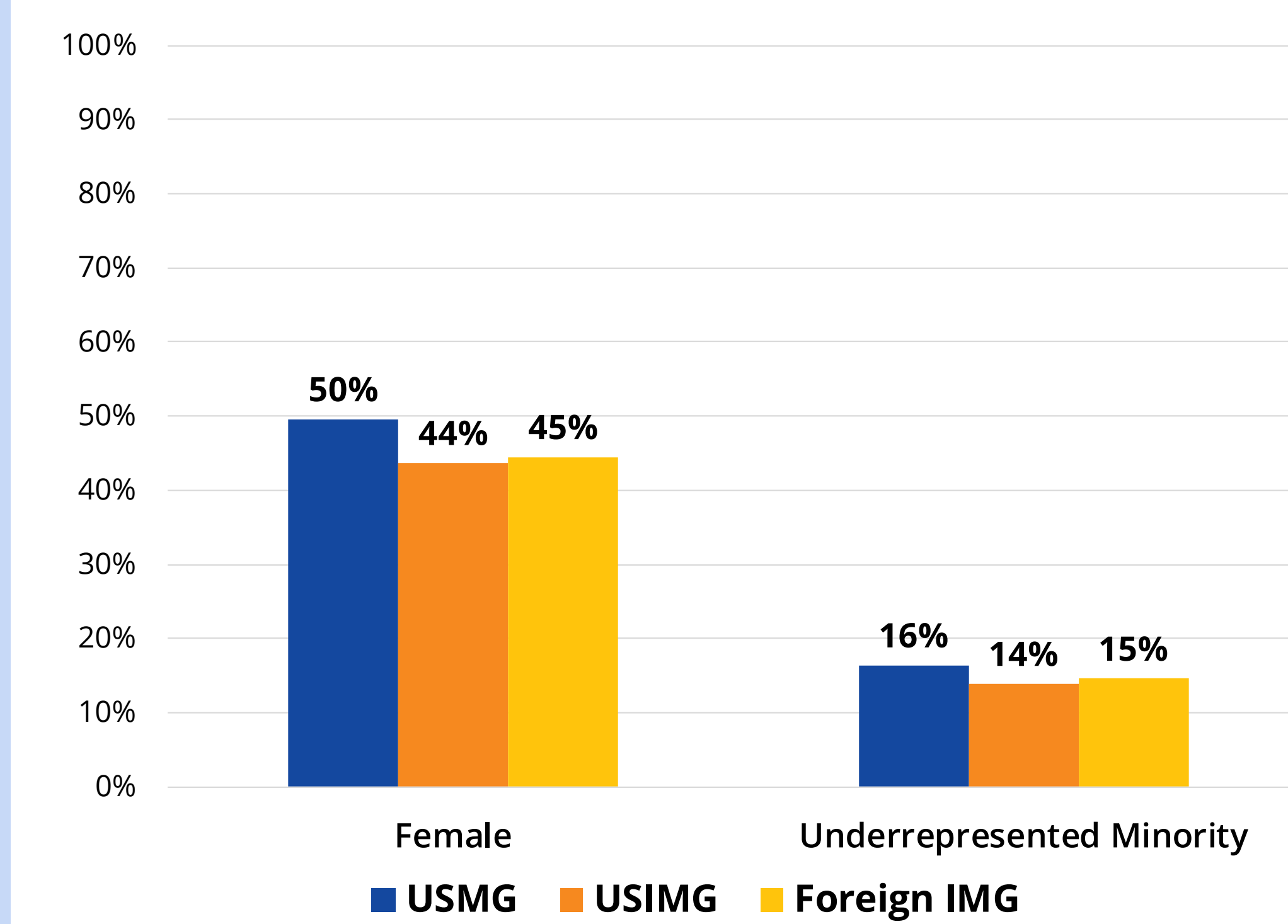
Figure 1. Medical School Location and Citizenship, 2014-2016



RESULTS

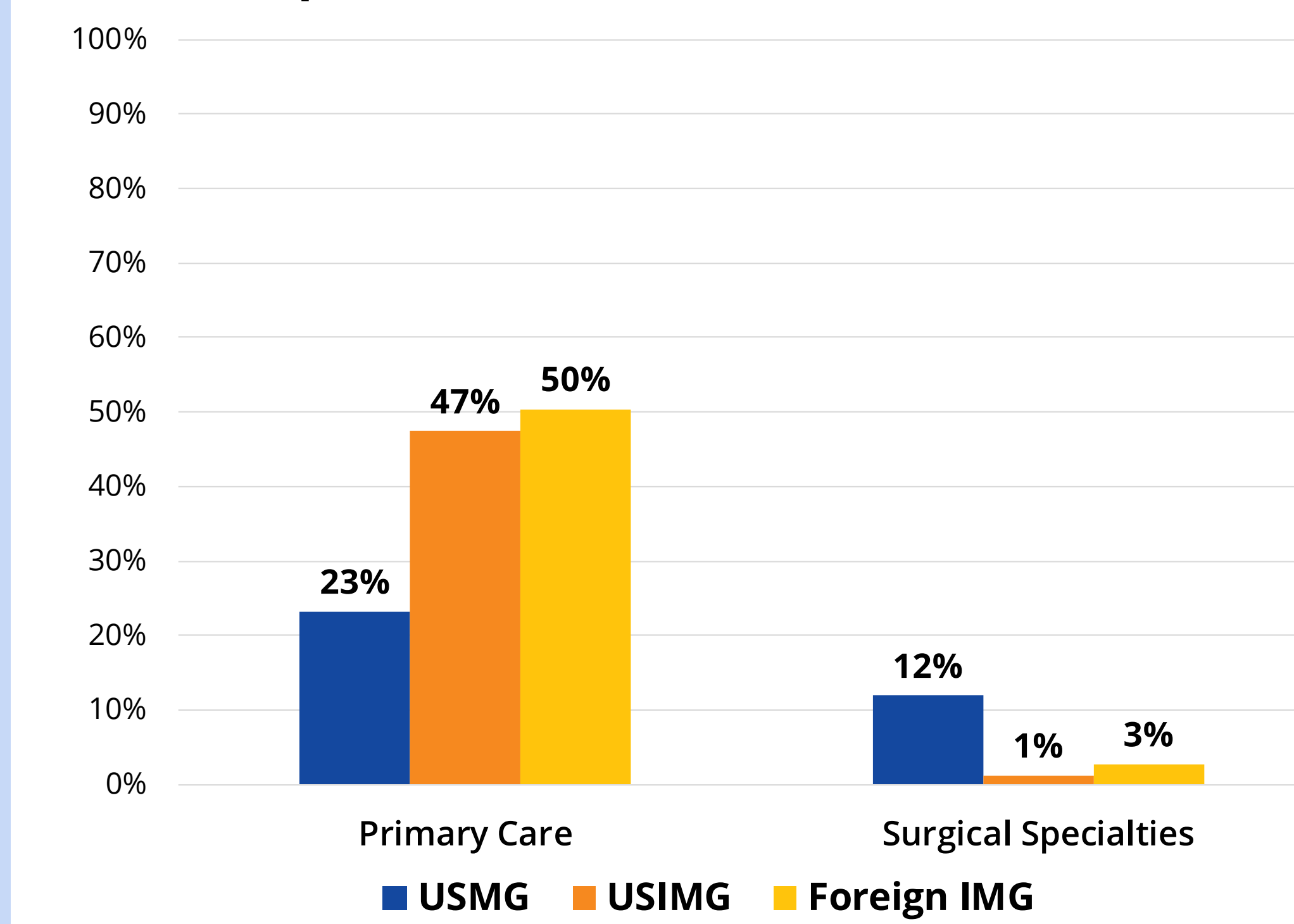
- USIMGs were less likely to be female than USMGs.

Figure 2. Demographics by Medical School Location and Citizenship, 2014-2016



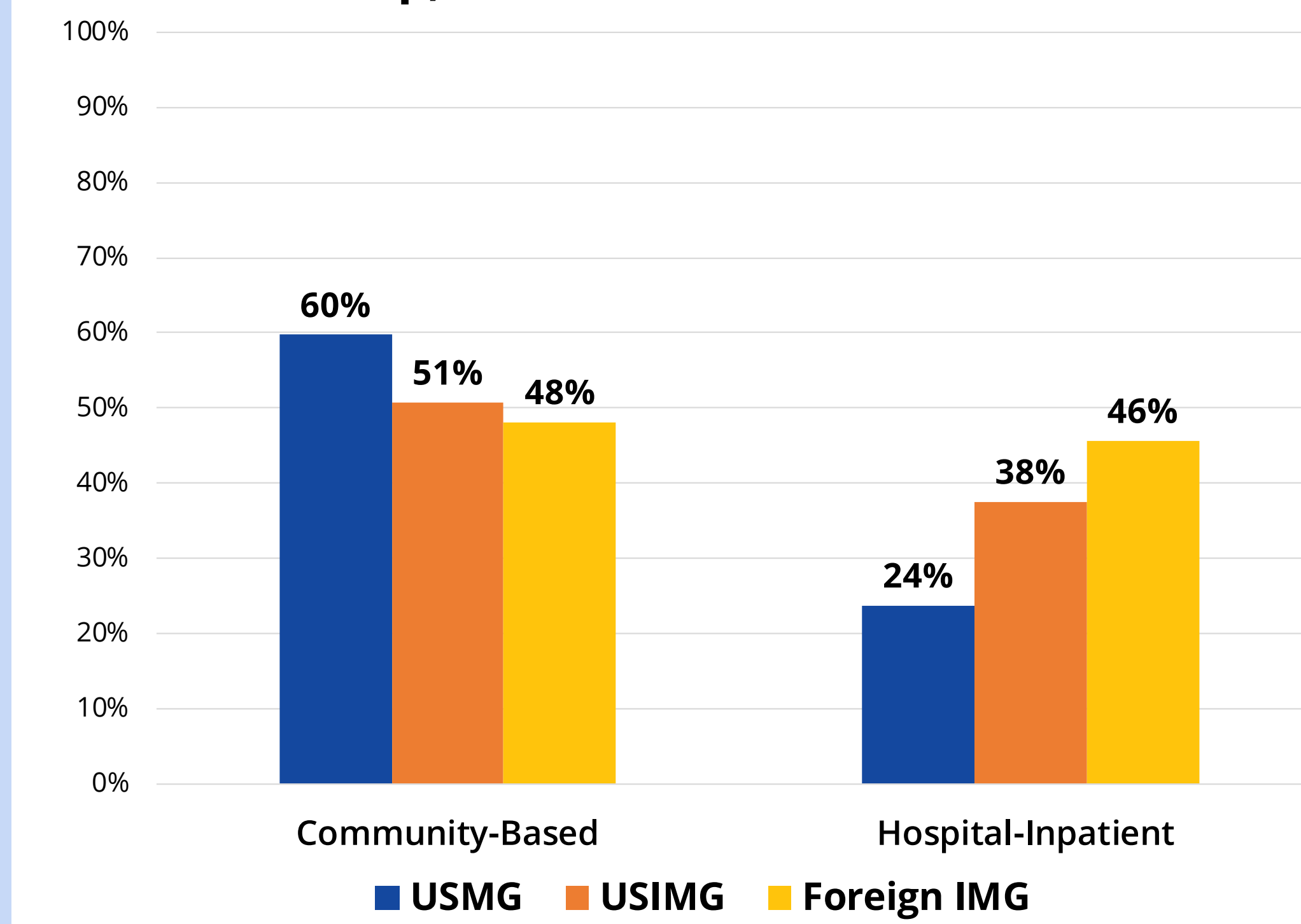
- USIMGs were more likely to be primary care physicians than USMGs.

Figure 3. Specialty by Medical School Location and Citizenship, 2014-2016



- USIMGs were more likely to practice in hospital-inpatient settings than USMGs.

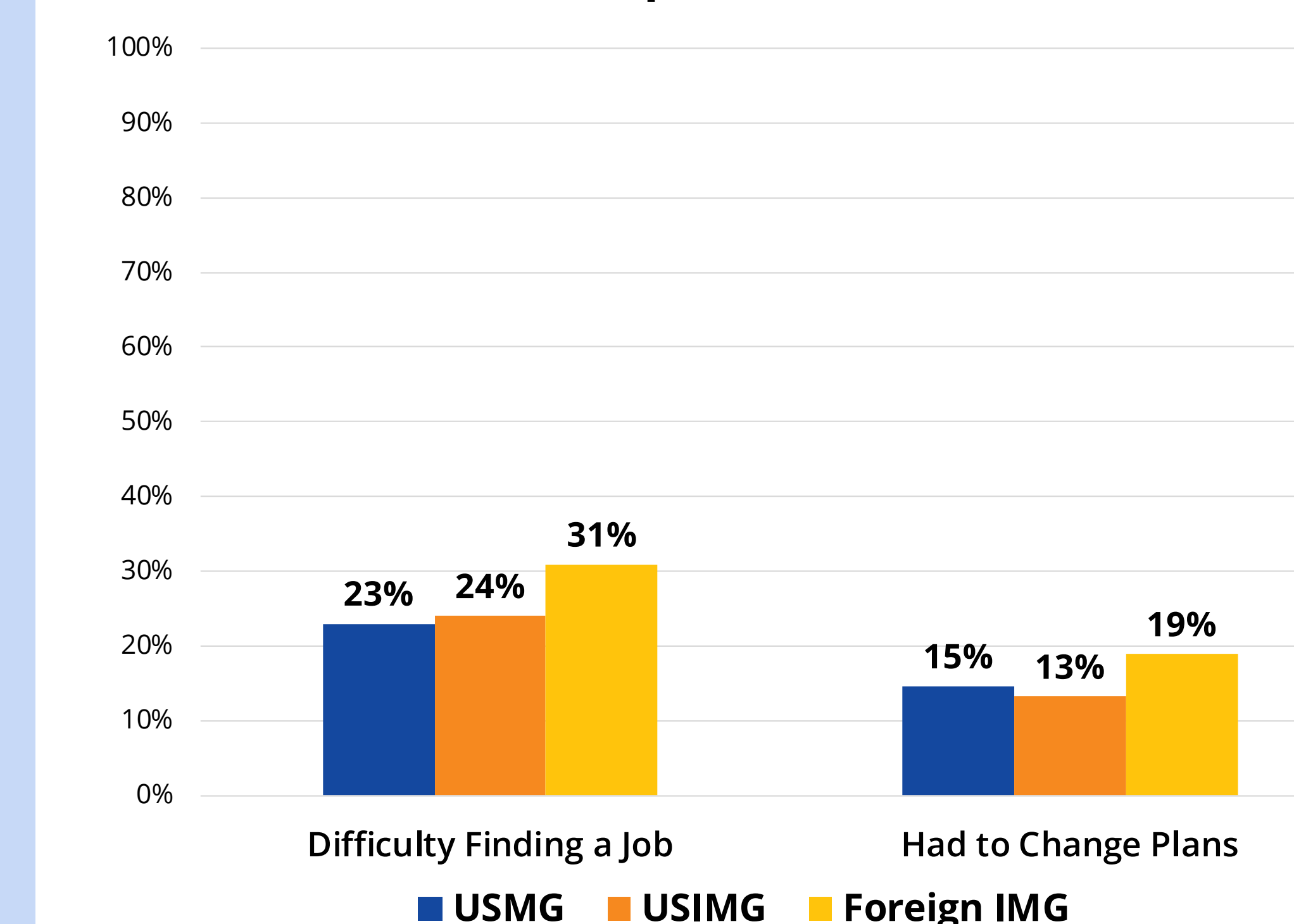
Figure 4. Practice Setting by Medical School Location and Citizenship, 2014-2016



RESULTS (cont.)

- USIMGs' job market experience was comparable to USMGs and better than foreign IMGs.

Figure 4. Job Market Experience by Medical School Location and Citizenship, 2014-2016



KEY FINDINGS

There was some variation in the demographic characteristics of USIMGs compared to other physicians completing residency training.

- Almost 50% of all physicians trained in New York are either USIMGs or foreign IMGs.
- USIMGs were more likely to be male and an underrepresented minority compared to USMG physicians.
- USIMGs were also more likely to be primary care physicians compared to USMGs.
- USIMGs were more likely to practice in hospital-inpatient settings than USMGs and less likely to practice in community-based settings.
- In regard to the job market, however, USIMGs experiences were much more similar to USMGs than foreign IMGs. A similar percentage of USIMGs reported difficulty finding a job compared to USMGs and having to change plans due to limited practice opportunities.

IMPLICATIONS

Given the impending shortage of physicians and quests for innovative ways to train future physicians to meet the ever-increasing demand for physician services, the growing group of USIMGs offers the potential to partially mitigate this issue. Hence, it is important to understand their job market experiences so that we can better gauge their impact on the future health care delivery system.