



2017 Physician Workforce Annual Report

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Rick Scott
Governor

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Key Definitions

Medical specialist: Physicians indicating that they practice a specialized or subspecialized branch of medicine, such as gastroenterologists, nephrologists and oncologists.

Non-practicing physicians: Physicians holding a valid Florida medical license in clear active status but not actively practicing medicine in Florida.

Physician Workforce Survey: The survey completed by all medical doctors biennially during the Florida medical license renewal process.

Practicing physicians: Physicians who are actively practicing medicine in Florida, have a valid practice address in a Florida county, possess a valid license in clear active status and are not classified as a current medical resident, intern or fellow.

Primary care physicians: Physicians indicating that they practice internal medicine, family medicine or pediatrics as a primary practice specialty, as defined by the American Academy of Family Physicians.

Primary specialty: The primary practice specialty as reported by the physician.

Executive Summary

The 2017 Physician Workforce Annual Report presents a summary analysis of the 2016 and 2017 Physician Workforce Surveys. Physicians are required to complete the survey every two years when they renew their license to practice; two years of survey responses represent the majority of physicians in the state of Florida.¹ This report helps policymakers make informed decisions and policies about Florida's current and future physician workforce and access to care.

There are 82,939 physicians with active licenses in Florida. A total of 66,988 physicians renewed their medical license during 2016 and 2017, and responded to the workforce survey. Of the physicians renewing their medical license, 45,995 (68.7%) were active and practicing in Florida, and key survey results presented in this report are based on this group.

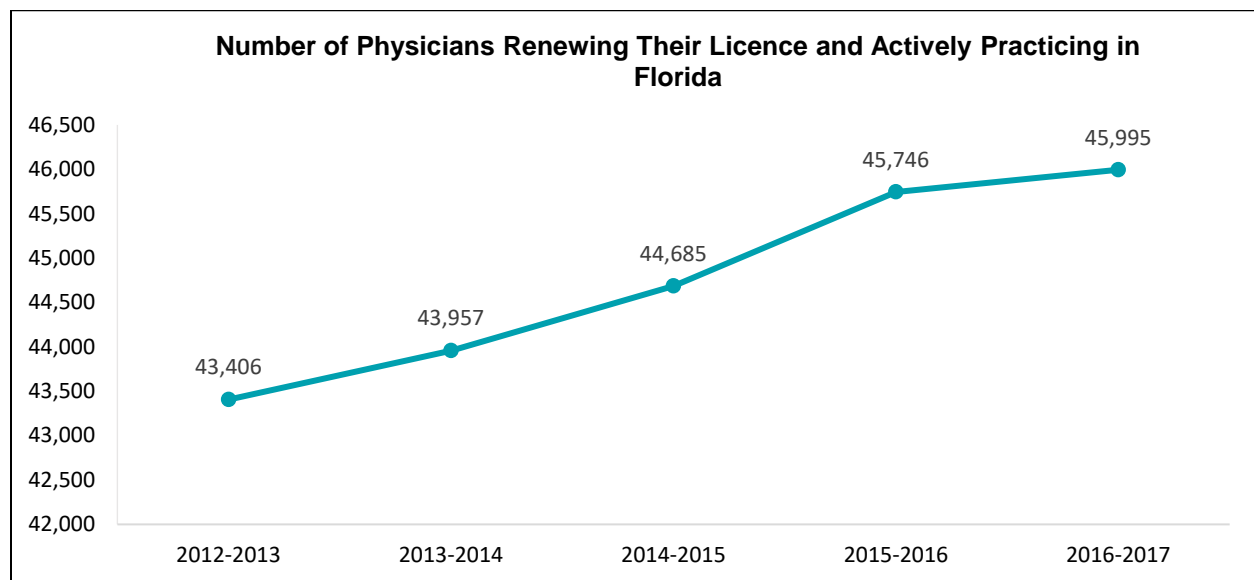
- Nearly two-thirds (61.9% or 28,454) of physicians are age 50 and older (page 6).
- Of the 14 specialty categories, all but one specialty (emergency medicine) has more than 25% of physicians age 60 and older (page 9).
- A total of 15.1% (6,973) physicians plan to retire in the next five years (page 15).
- Primary care physicians account for 37.2% of the physician workforce (page 8).
- The top three specialty groups for physicians in Florida are internal medicine (15.6% or 6,965), medical specialist (15.1% or 6,733), and family medicine (13.7% or 6,116). Along with physicians in the "Other" specialty group, these top specialty groups comprise just over half (52.6% or 23,425) of the physician workforce (page 8).
- More than half (59.9% or 27,560) of physicians work in an office practice setting, and 26.9% (12,351) practice at a hospital (page 10).
- More physicians are accepting new Medicare patients (81.5%) than new Medicaid patients (62.2%) (page 13).
- There are generally more physicians per capita in areas with large population centers (Appendix A).

¹ Physicians who are not renewing an existing license do not complete a survey.

2017 Florida Physician Workforce Annual Report

Introduction

The 2017 Physician Workforce Annual Report is based on responses to the Florida Physician Workforce Survey. The survey is part of the licensure renewal process for physicians and administered by the Florida Department of Health's (Department's) Division of Medical Quality Assurance. Physicians must renew their license every other year. Slightly less than half (45.4%) of Florida's licensed physicians renew during odd years and slightly more than half (54.6%) during even years; these survey responses from these two cohorts represents the aggregate set of Florida physician workforce data. Newly licensed physicians are not included in the analysis because the survey is only administered upon licensure renewal. Physicians may maintain a license but be inactive, have restrictions or conditions imposed on their license or practice, or have a suspended license. Of the 79,033 physicians with a clear and active license status, 45,995 are actively practicing medicine in Florida. Unless otherwise noted, this report and associated data presented in charts, graphs, and maps focuses on this group of physicians. During the period from 2012–2013 to 2016–2017, the number of active and practicing physicians increased 5.9%, from 43,406 to 45,995.² During this same time, the population of Florida increased 5.7%, from 19.3 million to 20.4 million.³



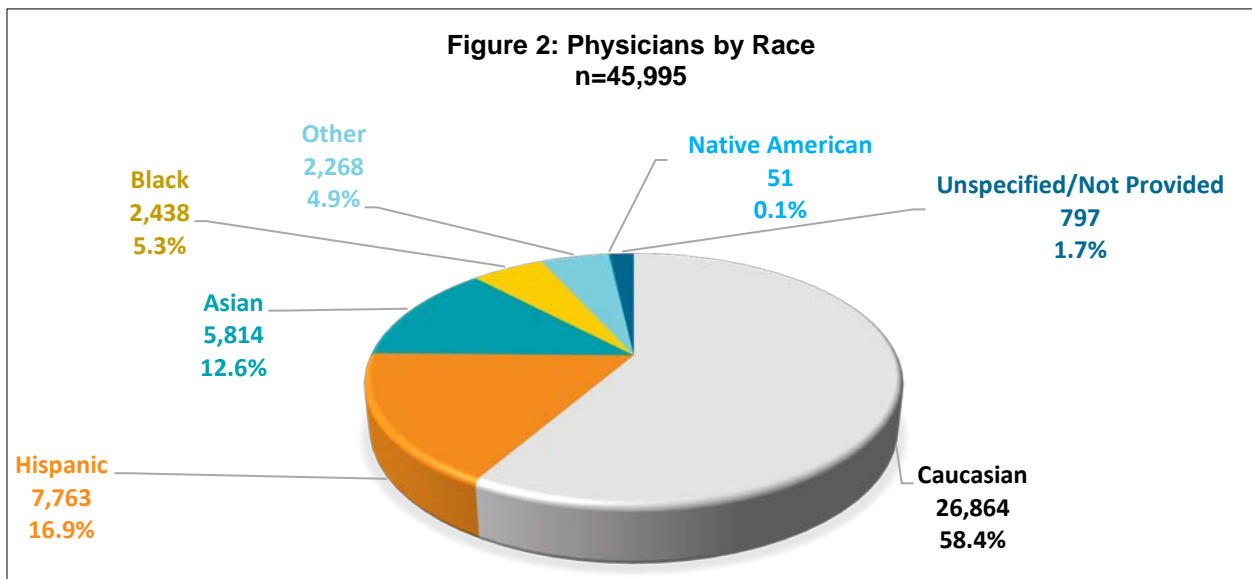
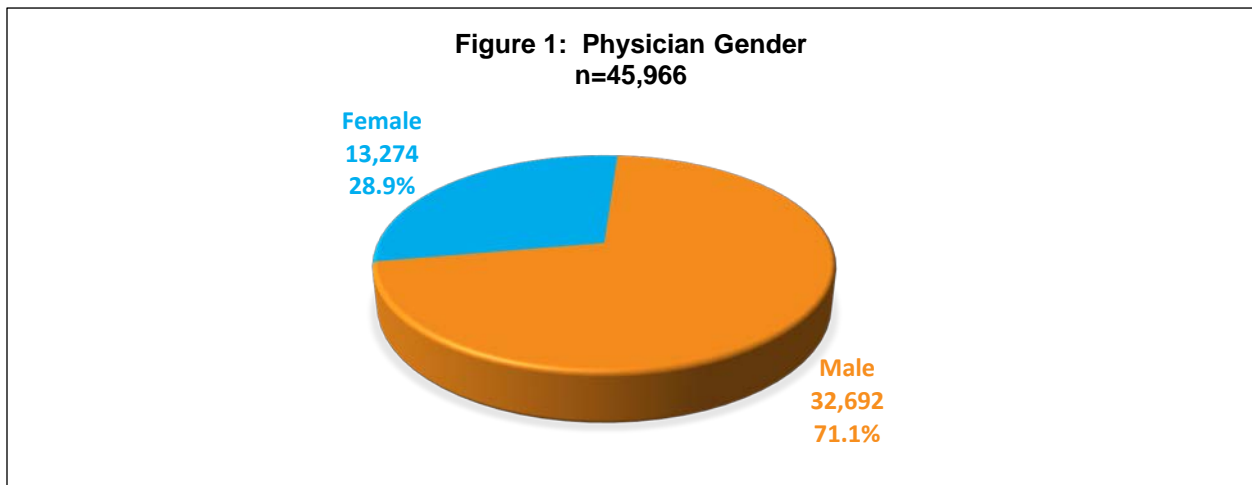
² In addition, five counties—Franklin, Hamilton, Liberty, Madison, and Washington—have experienced at least a 35% decrease in the number of practicing physicians. See Appendix B

³ Florida Legislature, Office of Economic and Demographic Research (www.edr.state.fl.us/Content/population-demographics/index.cfm)

Physician Workforce Demographics and Practice Characteristics

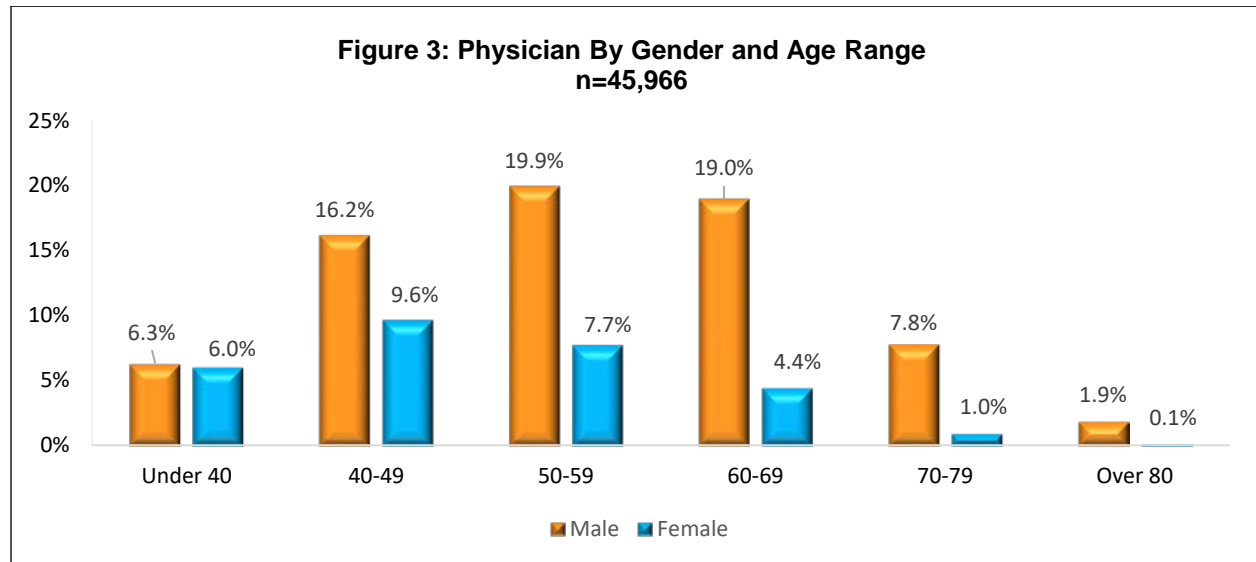
Demographics

As shown in Figure 1, based on the 2016–2017 survey cohort, 28.8% of Florida’s active, and practicing physicians are female, compared to 25.8% in 2012–2013. See Appendix C for comparisons by gender from 2012–2013 to 2016–2017. Racial and ethnic minorities also increased during this time from 39.2% to 39.9%. As shown in Figure 2, 58.4% of Florida’s physician workforce is Caucasian, 16.9% is Hispanic, and 12.6% is Asian. See Appendix D for comparisons by race from 2012–2013 to 2016–2017.

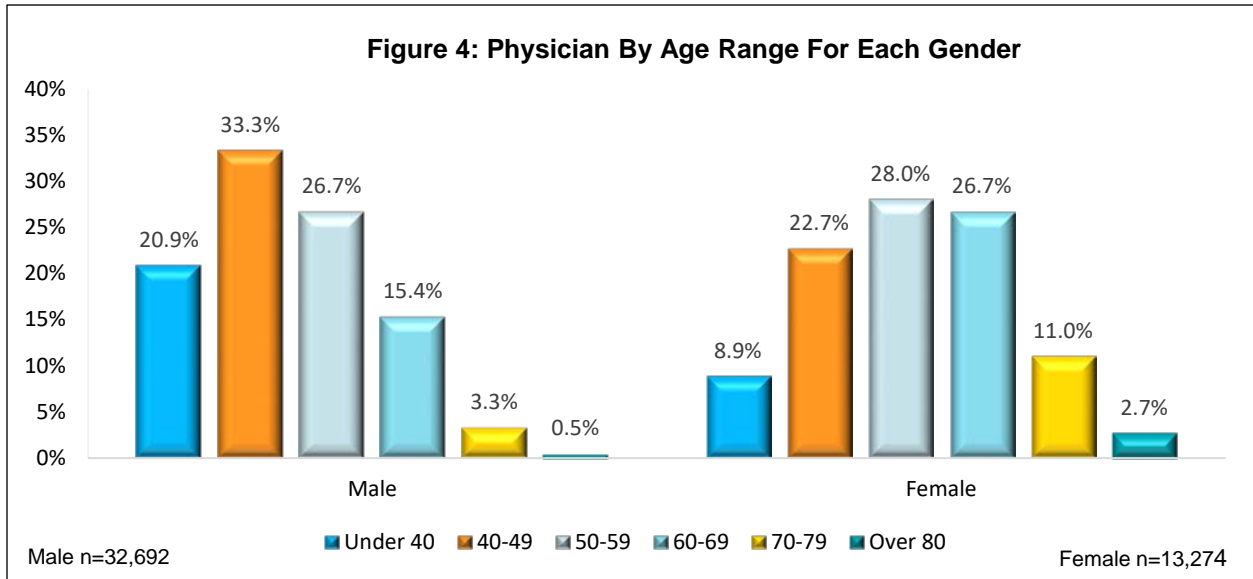


Florida’s physician workforce is aging. The youngest physician renewing a license was 28 years old and the oldest was 98.⁴ The average age of practicing physicians is 54, and the percentage of physicians working past typical retirement age (over 65) is 18.2%. In addition, just over one-third (15,737) are age 60 and older, and 27.7% (12,717) are between age 50 and 59.

Almost half (48.6% or 22,360) of all physicians are males age 50 and older. As females enter the physician workforce, age distributions shift by gender. Of physicians between age 40 and 49, 62.7% are male and 37.3% are female, which is a 1% increase for females from the 2015–2016 cohort. Of the physicians under age 40, males and females are almost equal, with males being 51.2% of the age group and females being 48.9% of the age group, which is a 0.7% increase in females from the 2015–2016 cohort. As shown in Figure 3, for the largest age group by gender, 19.9% of the total workforce, are males ages 50 to 59 while 9.6% of the total workforce are females ages 40 to 49 (see Figure 3). Figure 4 shows age distribution by gender.



⁴ There were 51 physicians ages 90 to 98 who renewed their license.



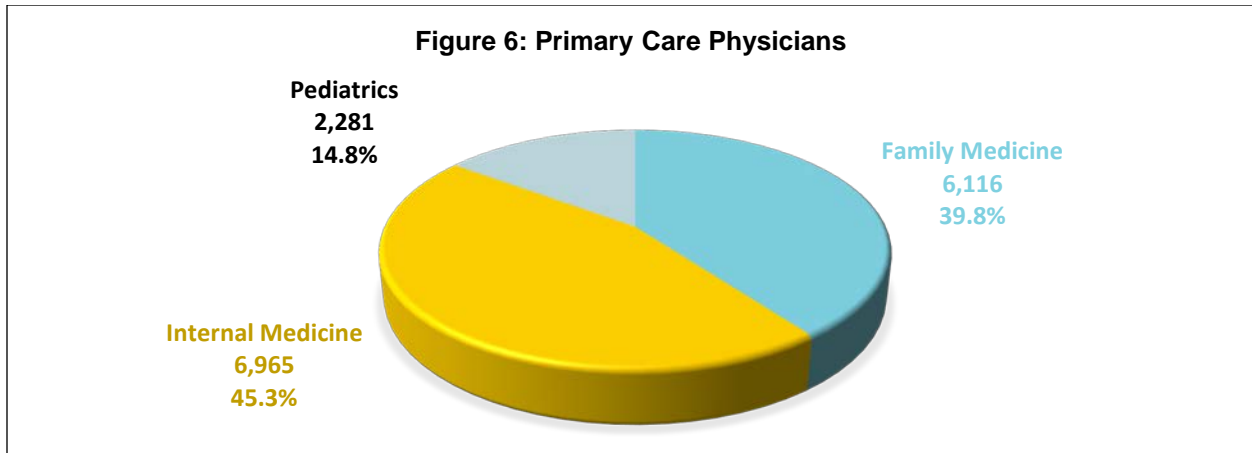
Physician Specialty

Figure 5 shows the break out of physicians by specialty group. The top three specialty groups—internal medicine, medical specialist, and family medicine—comprise just over 40% of the total physician workforce. The top four specialty groups in Figure 5 comprise just over half (50.9% or 23,425) of the total physician workforce. See Appendix E for information regarding physician specialty groups by county. For information regarding physician counts per specialty from 2012–2013 to 2016–2017, see Appendix F.

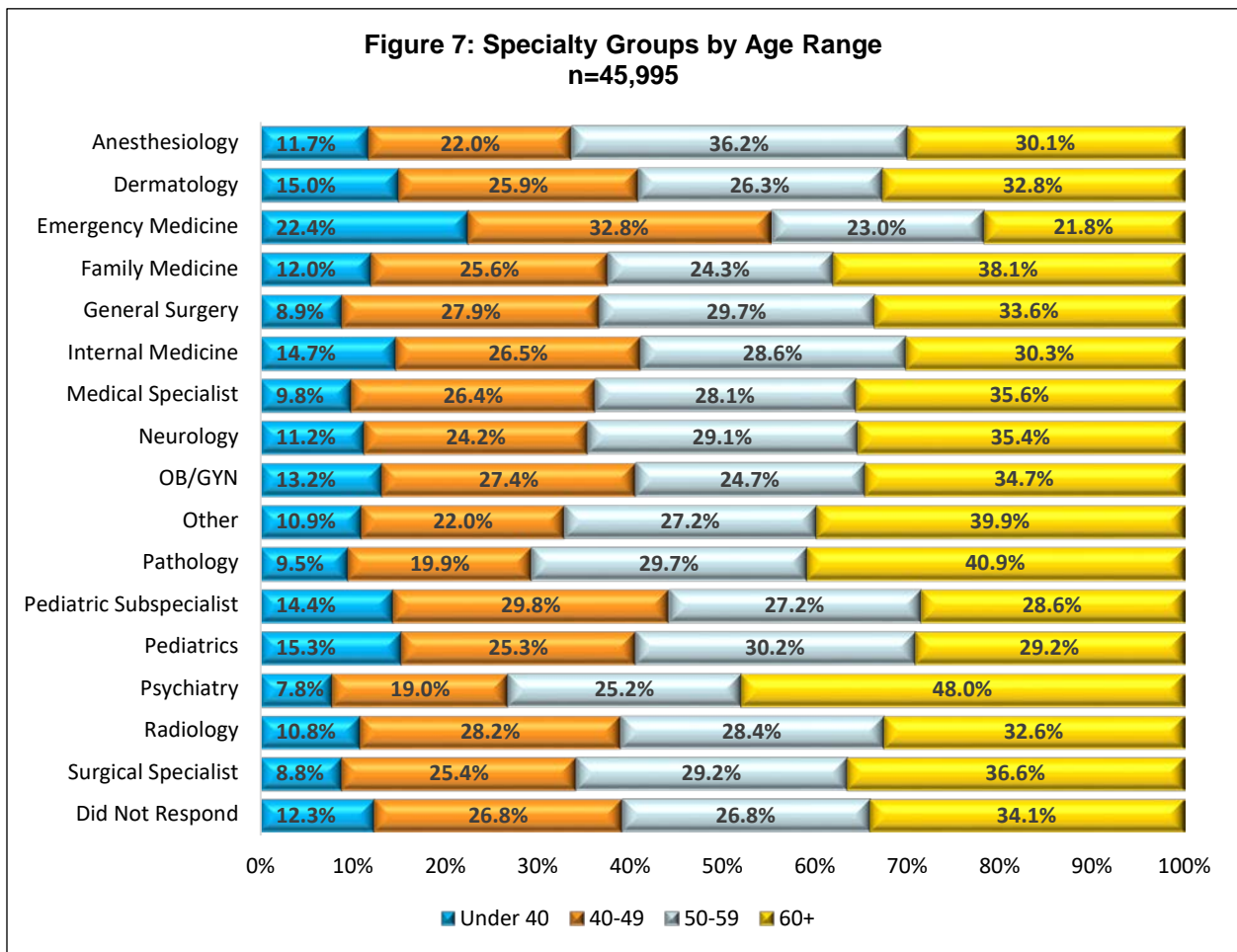
Figure 5: Physician Specialty Group Counts		
Specialty Group	# of Physicians	% of Physicians
Internal Medicine	6,965	15.6%
Medical Specialist	6,733	15.1%
Family Medicine	6,116	13.7%
Other	3,611	8.1%
Surgical Specialist	3,132	7.0%
Emergency Medicine	2,452	5.5%
Anesthesiology	2,285	5.1%
Pediatrics	2,281	5.1%
Radiology	1,957	4.4%
OB/GYN	1,815	4.1%
Psychiatry	1,783	4.0%
Pediatric Subspecialist	1,622	3.6%
General Surgery	1,005	2.3%
Neurology	962	2.2%
Dermatology	961	2.2%
Pathology	831	1.9%
TOTAL	44,511*	100%

*This table does not include the 1,484 physicians who did not answer this question

Primary care physicians are defined as those practicing in the areas of internal medicine, family medicine, and pediatrics. Primary care physicians make up one-third of the active physician workforce (37.2% or 15,362). As shown in Figure 6, about 45% of primary care physicians specialize in Internal Medicine.

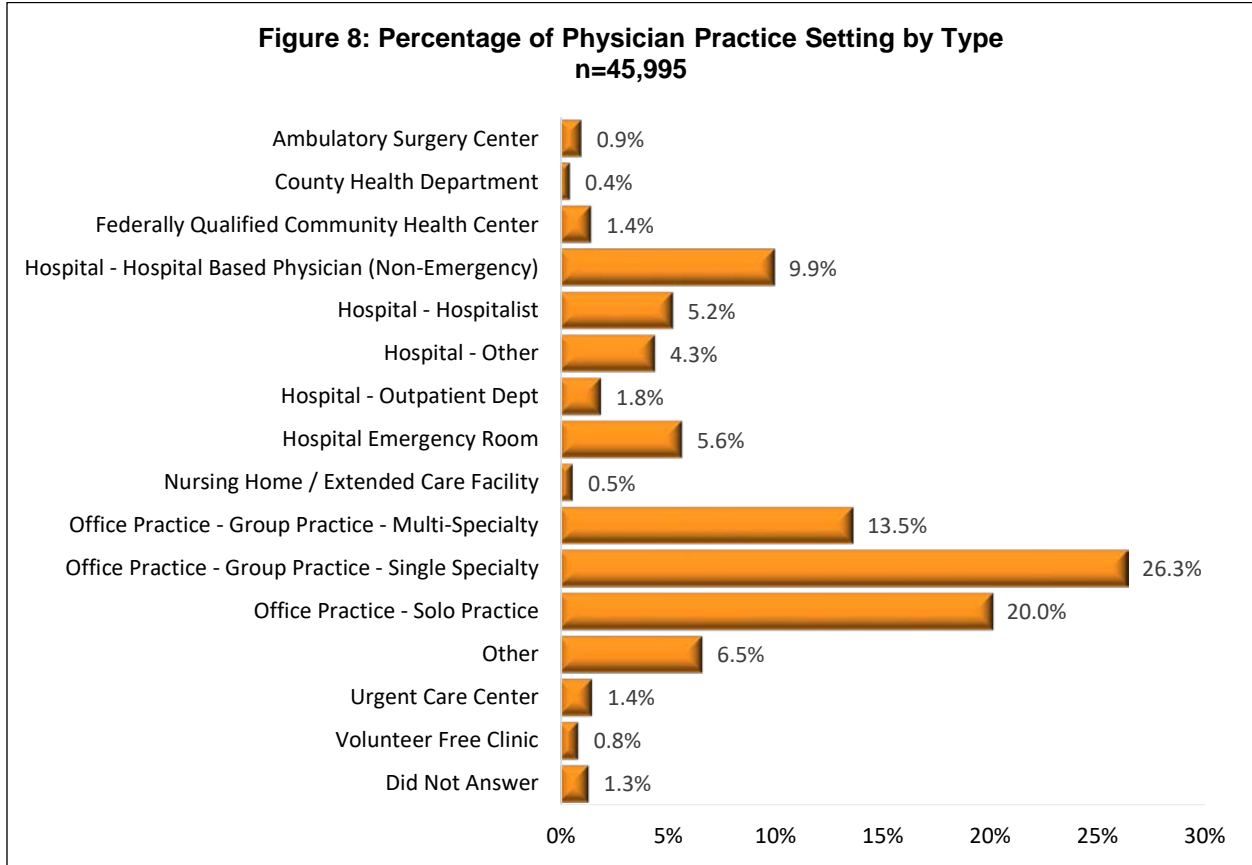


As shown in Figure 7, almost two thirds (60.3%) of primary care physicians are age 50 and older, which is similar to the age distribution for the total physician workforce, where almost two thirds (61.9%) are age 50 and older. The age distribution for emergency medicine physicians shows that these physicians are younger. The percentage of primary care physicians is generally higher in rural areas compared to urban areas (See Appendix G).



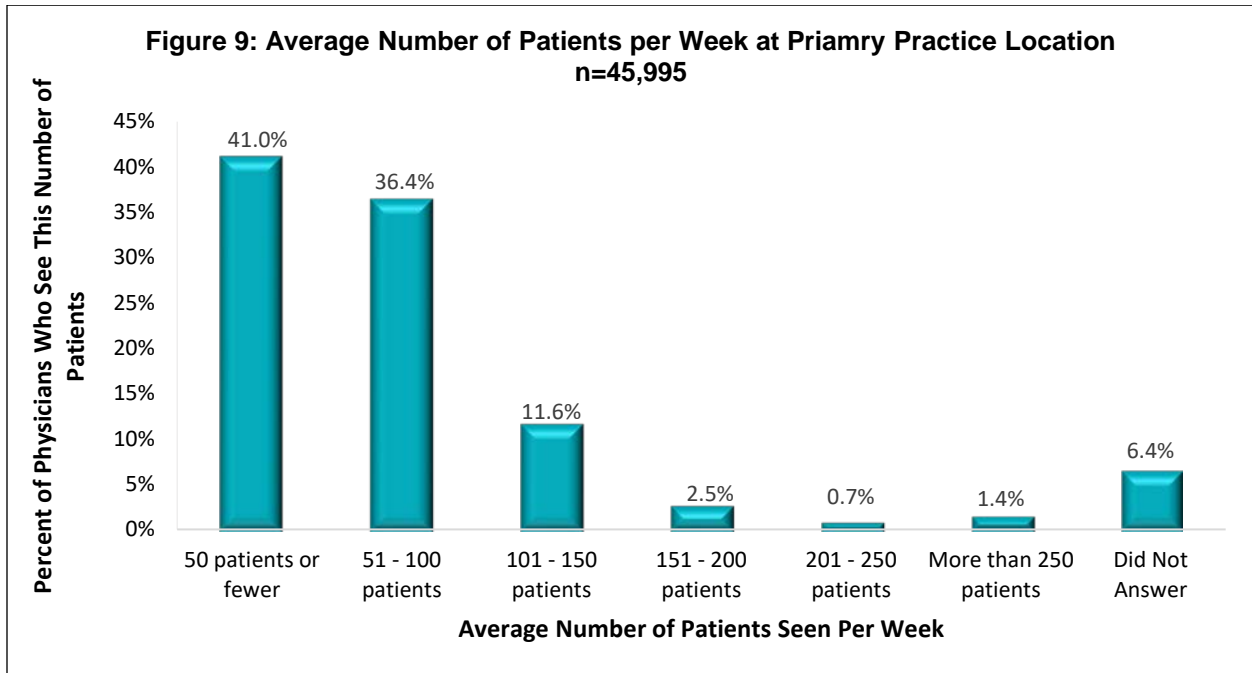
Practice Setting

As shown in Figure 8, the majority of physicians practice in an office practice setting or at a hospital. Of those working in an office practice, two thirds are working in a group practice setting (66.6%), compared to 33.4% in a solo practice setting.

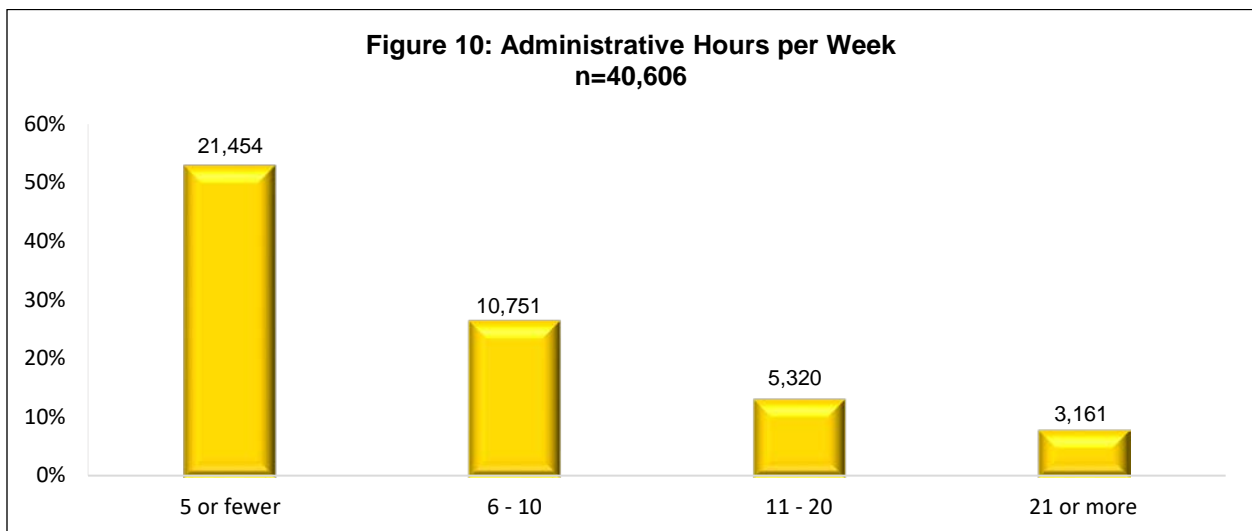


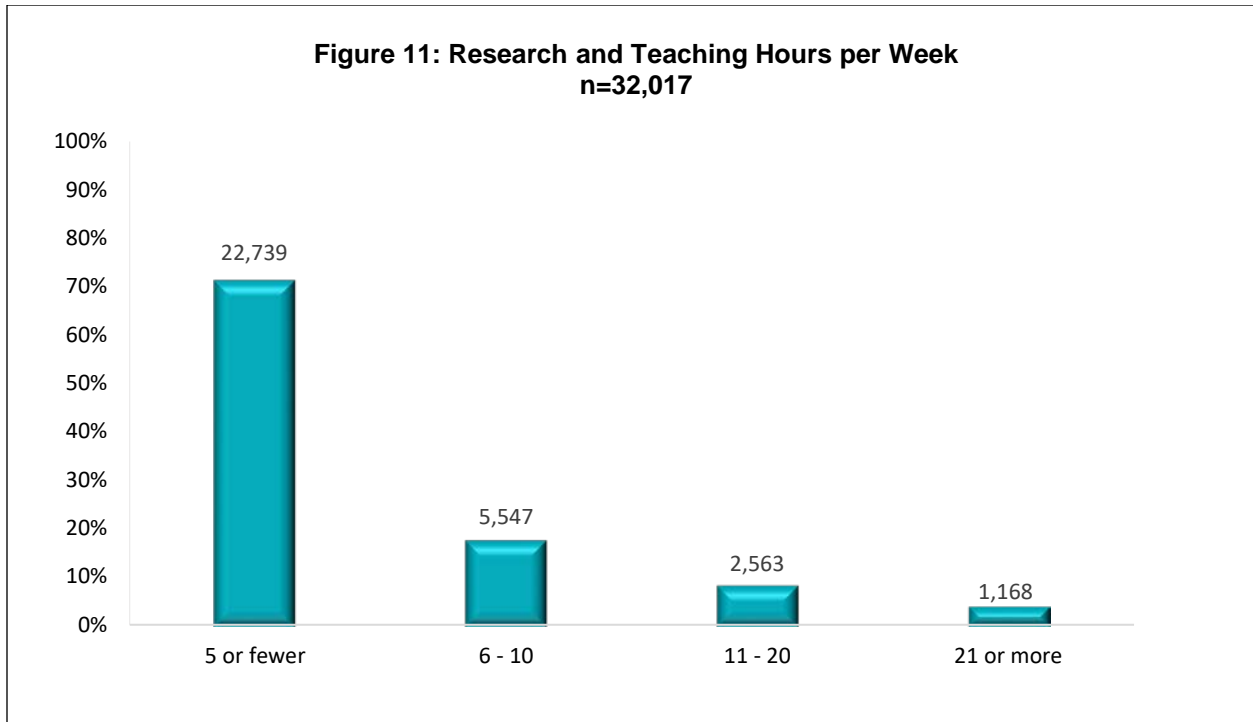
Practice Hours

The workforce survey asked physicians to report the average number of patients they see per week. As shown in Figure 9, just over 40% of physicians report seeing between 1 and 50 patients per week, and just over 35% report seeing between 51 and 100 patients. This results in an average of physicians seeing 72 patients per week.

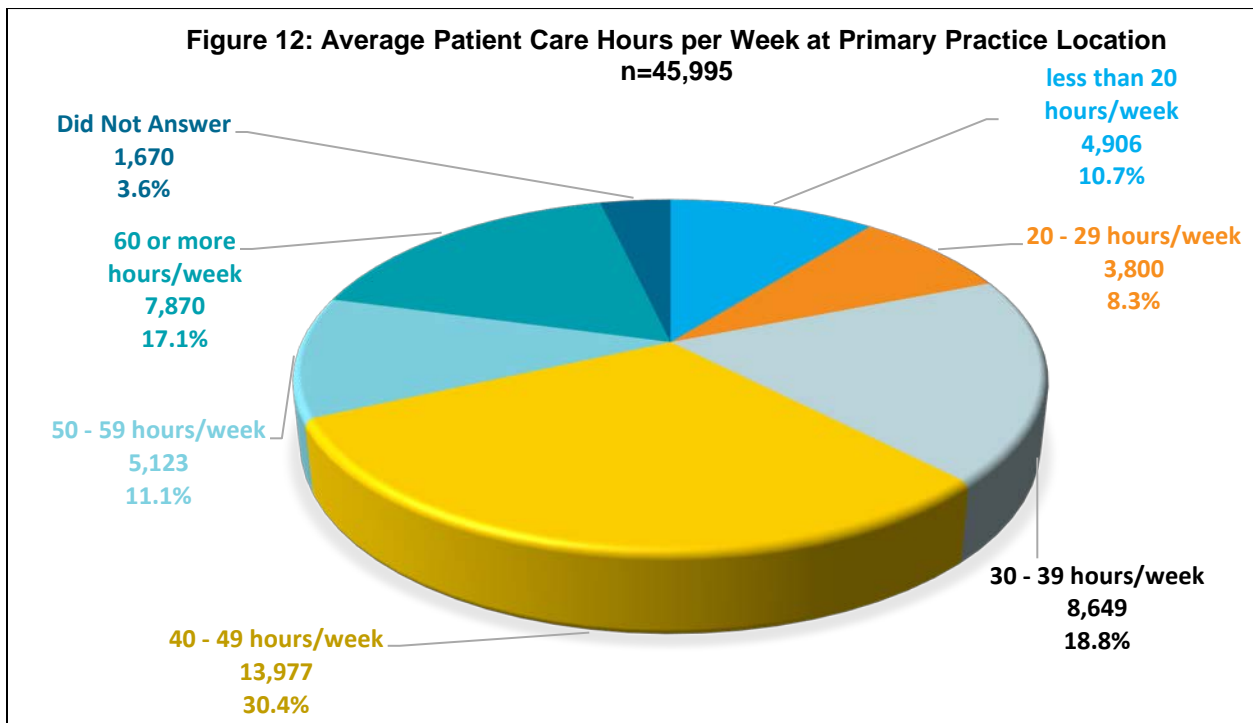


As shown in Figures 10 and 11, physicians spend considerably more time with patients than working on administrative matters, research, or teaching. Almost 80% of physicians report spending less than 11 hours on administrative work and 88% spend less than 11 hours on research and teaching.



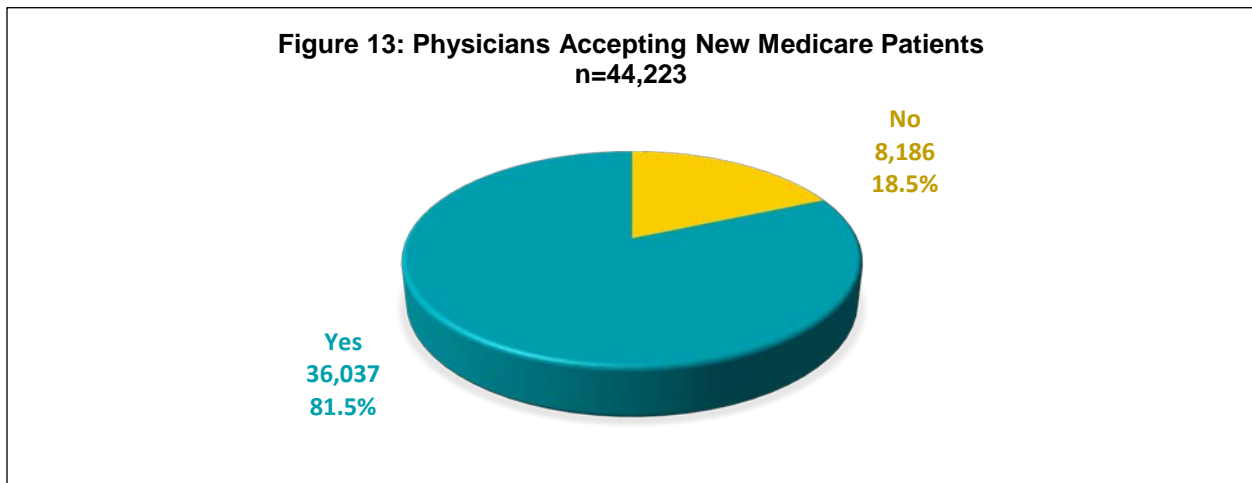


As shown in Figure 12, most physicians spend between 40 and 49 hours per week on patient care (30.4% or 13,977). On average, physicians spend 40.25 hours per week on patient care.

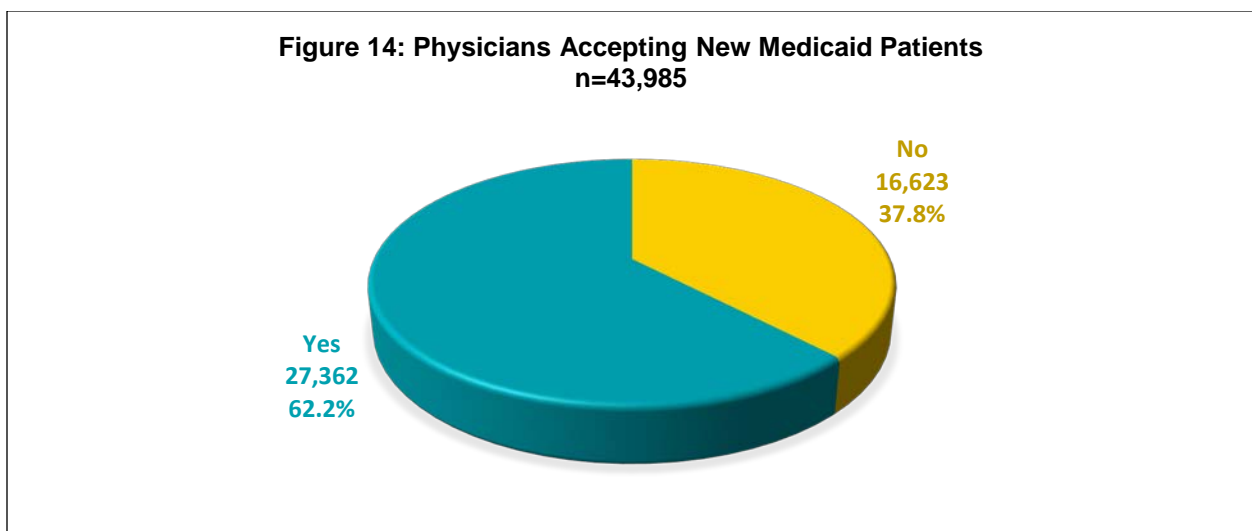


Physicians Accepting New Medicare and Medicaid Patients

In 2009, the Centers for Medicare and Medicaid Services reported that three million Floridians were enrolled in Medicare Part A or B. By 2012, this increased almost 10% to 3.6 million.⁵ The percentage of Florida physicians accepting new Medicare patients rose from 79.9% in 2013 to 81.5% in 2017. Just over 80% of physicians responded that they are accepting new Medicare patients (see Figure 13).

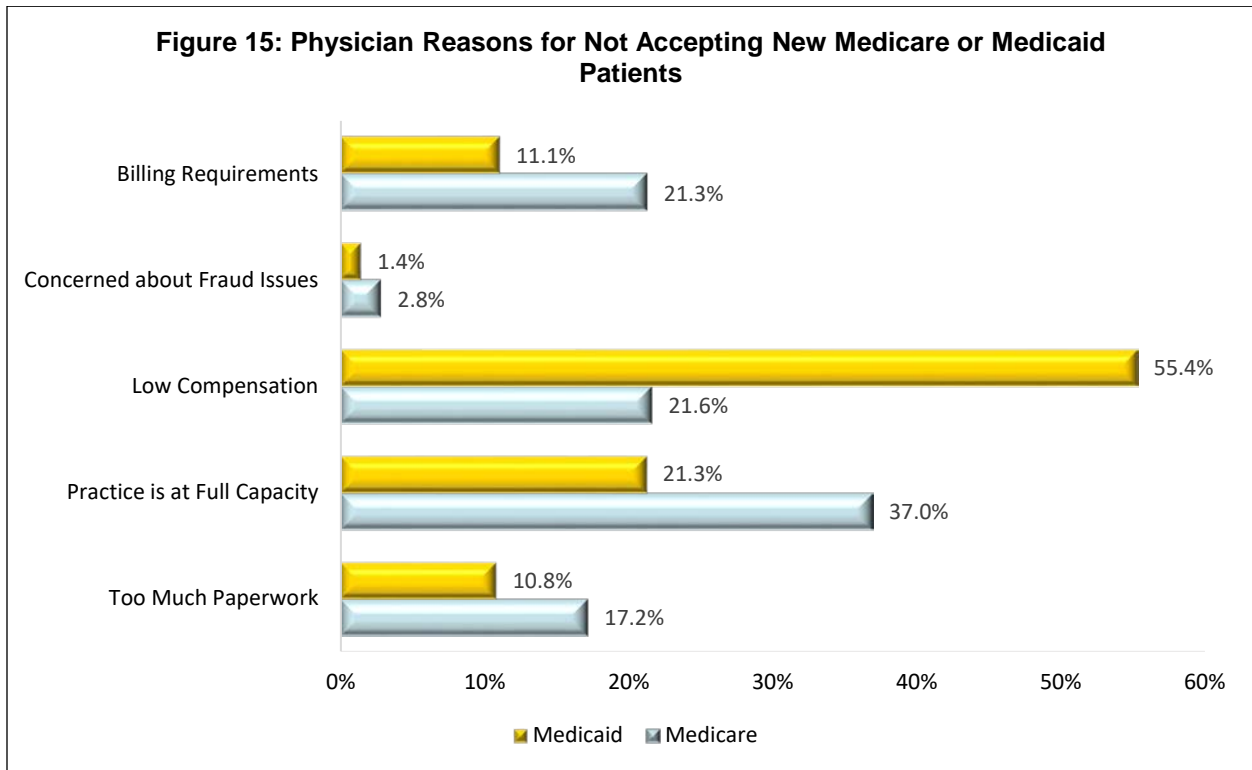


The U.S. Centers for Medicare and Medicaid Services reported in 2008 that there were 1.3 million Floridians who received Medicaid physician services. By 2011, that number increased to 1.8 million, an increase of about 36% during the three-year period. The percentage of Florida physicians who reported accepting new Medicaid patients rose from 57.9% in 2013 to 62.2% in 2017 (Figure 14).



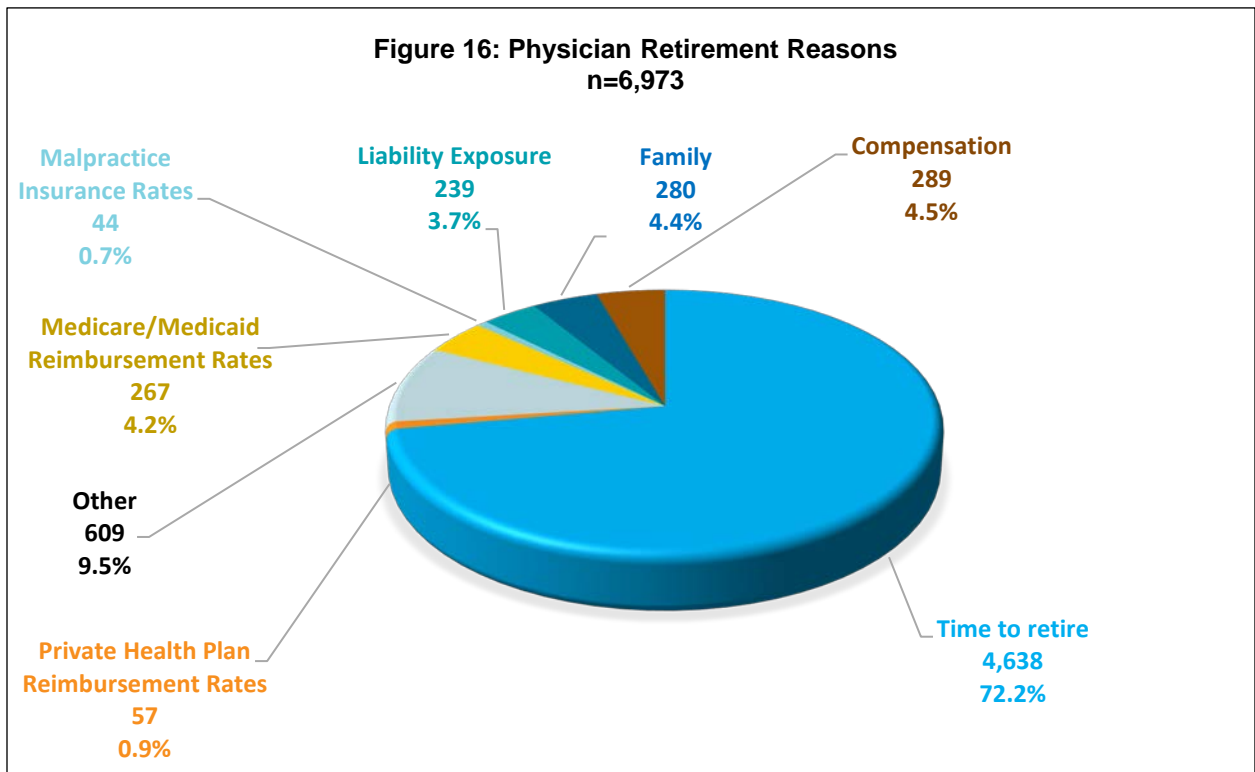
⁵ www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMSProgramStatistics/

The most common response for not accepting new Medicare patients was that the practice is at full capacity (37.0%), while the most common response for not accepting Medicaid patients was that the practice is at full capacity (55.4%), as shown in Figure 15.



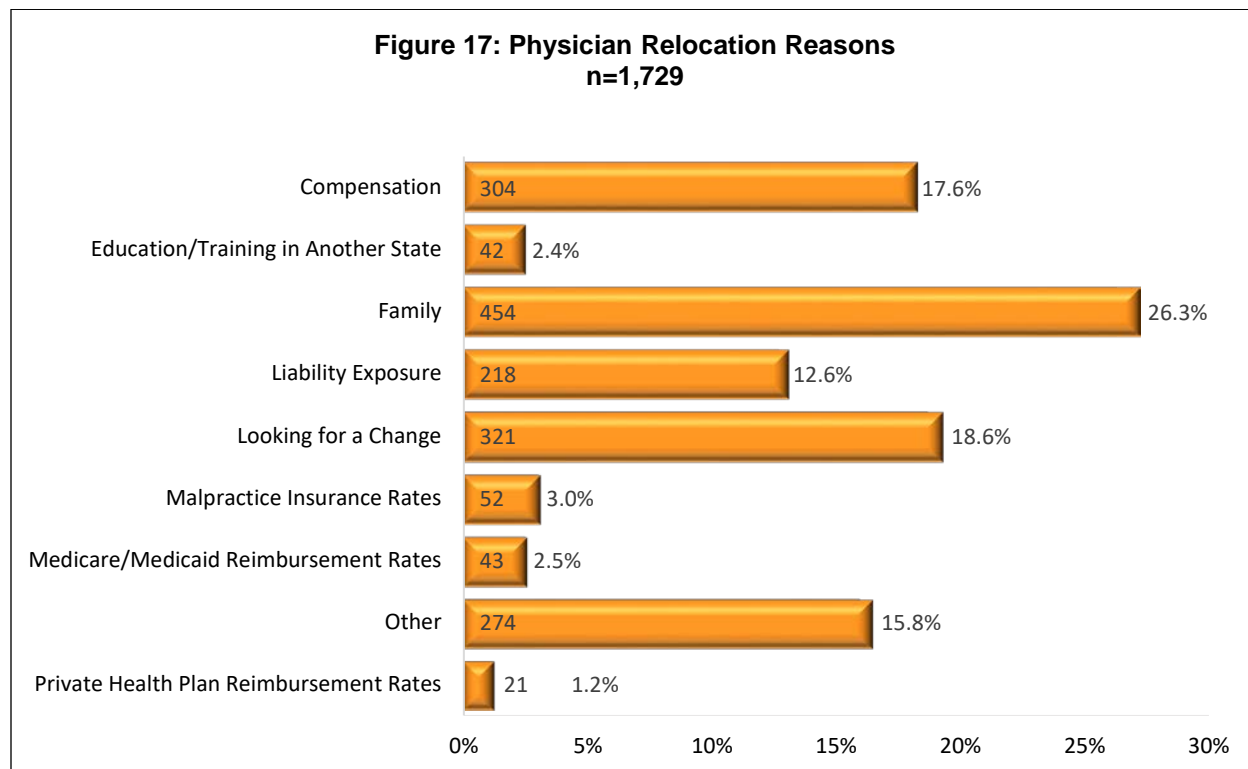
Retirement

The 2016-2017 survey responses revealed that 15.1% of practicing physicians are planning to retire within the next five years. The average age of physicians planning to retire is 66. Over two-thirds of the physicians planning on retiring reported that it was time to retire as the reason. In 2013, 2,955 physicians reported that they planned on retiring within the next five years. Of these, 62.1% renewed their license in 2017 and responded that they had practiced medicine in Florida within the last year. Figure 16 shows the reasons for retirement. Appendix H shows the counties in which these physicians are currently located.



Relocation

In this survey cycle, 1,969 physicians (4.28%) responded that they plan to relocate out of Florida in the next five years.⁶ As shown in Figure 17, the physicians who said that they were relocating selected “Family” as the most popular reason (26.3%). The second and third most popular reasons were “Looking for a Change” (18.6%) and “Compensation” (17.6%). Combining responses for compensation with the three responses related to rates represents 36.9% of the responses.



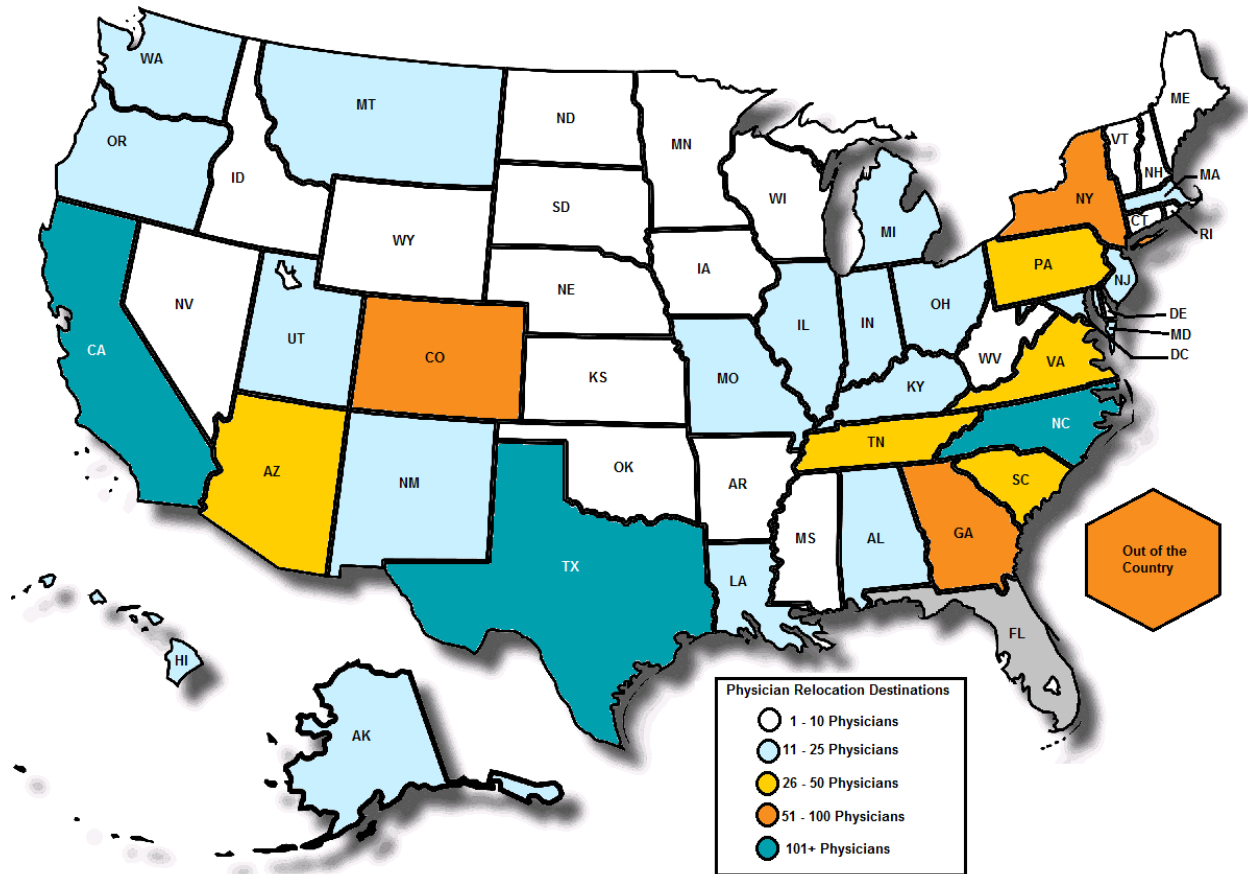
Of the 1,969 physicians who responded that they plan to move to practice in another state within the next five years, 87.8% specified a planned destination. As shown in Figure 18, the top five locations to which physicians plan to relocate are Texas (13.8%), California (10.9%), North Carolina (8.3%), Georgia (7.0%), and Out of the Country (5.3%).⁷ Of the physicians who gave a reason for relocating and a destination, the most frequent destination of physicians “Looking for a Change” was California (16.4%).

⁶ An additional 350 physicians selected a reason as to why they are relocating but did not indicate they were planning on moving to work outside of Florida in the prior question; these responses are excluded.

⁷ Physicians stating they are moving out of the country could not clarify their response as the survey does not ask any further destination.

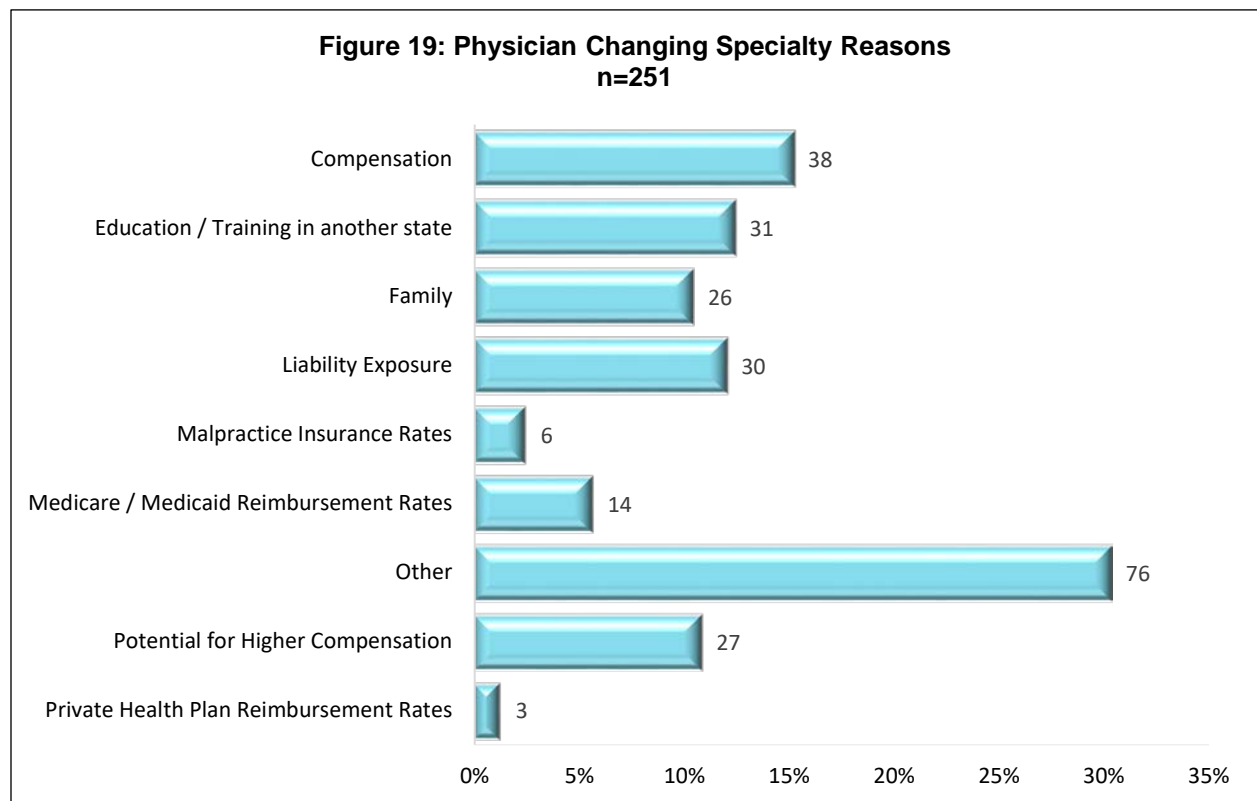
In 2013, 835 physicians reported that they would be relocating within the next five years. Of these, 56.8% (474) renewed their license in 2017 and responded that they had practiced medicine in Florida within the last year.

Figure 18: Destinations Where Physicians Are Planning to Relocate in the Next Five Years
2016-2017



Changing Specialty

There were 299 (0.7%) physicians who responded that they plan to change their specialty.⁸ There were 251 physicians who gave a reason as to why they were changing their specialty, and the most common reason was “Other” (30.3%), as illustrated in Figure 19. Of the 299 physicians who said they were going to change specialties, 277 physicians specified what their new specialty would be. The four most selected new specialties were: family medicine (11.3% or 31), preventive medicine (8.4% or 23), emergency medicine (8.4% or 23), and dermatology (4.0% or 11).



⁸ An additional 101 physicians provided a reason for changing specialty without providing an affirmative response to the question about planning to change specialty.

Obstetrics and Gynecology Specialty Questions

There are 1,815 active and practicing obstetrical and gynecological (OB/GYN) physicians in Florida. The survey included eight optional questions for OB/GYN physicians to answer.

OB/GYN specialty questions include “Do you deliver babies?” and “Are you planning to discontinue obstetric care in the next two years?” The results indicate that more OB/GYN physicians are performing deliveries than in the past. As shown in Figure 20, almost two-thirds (63.0%) report delivering babies as part of their practice, compared to 68.8% in 2013. Only 12.5% plan to discontinue obstetrical care in the next two years (See Figure 21).

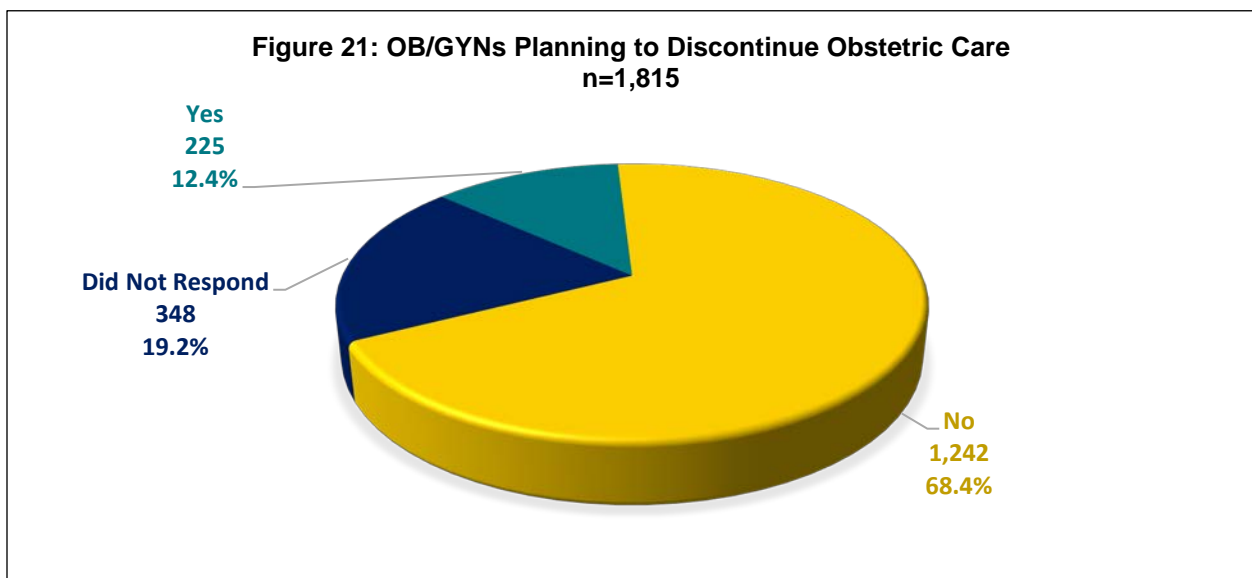
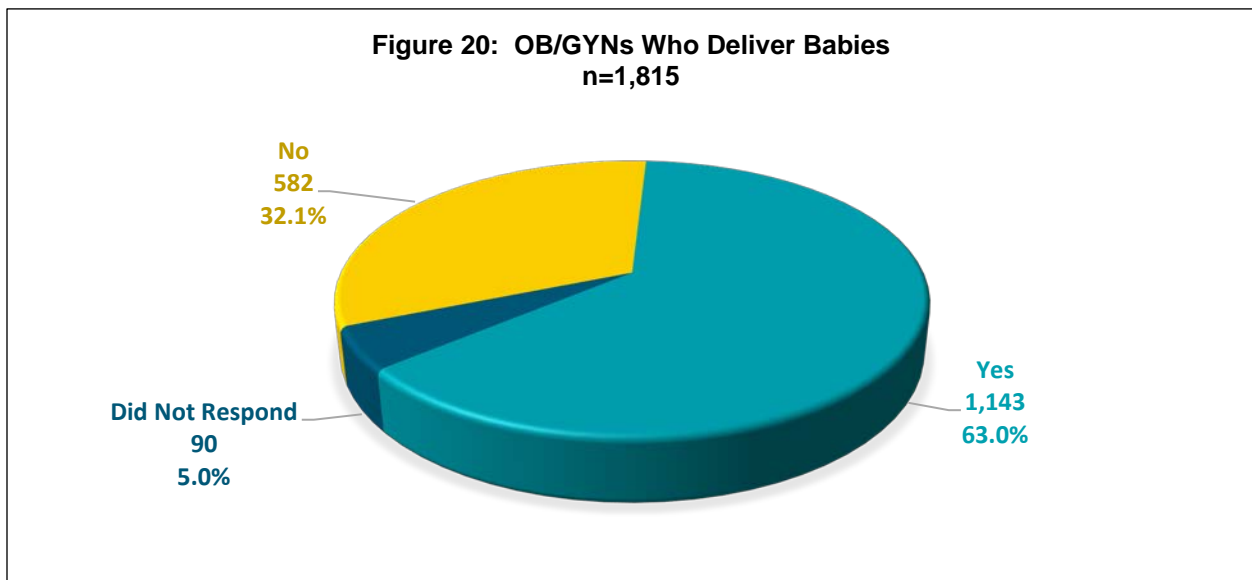


Figure 22 provides all applicable reasons for physicians who reported that they would be discontinuing obstetric care within the next two years. The most cited reason was “Other” (22.6%); the next highest category selected was “Liability Exposure” followed by “Retired.”

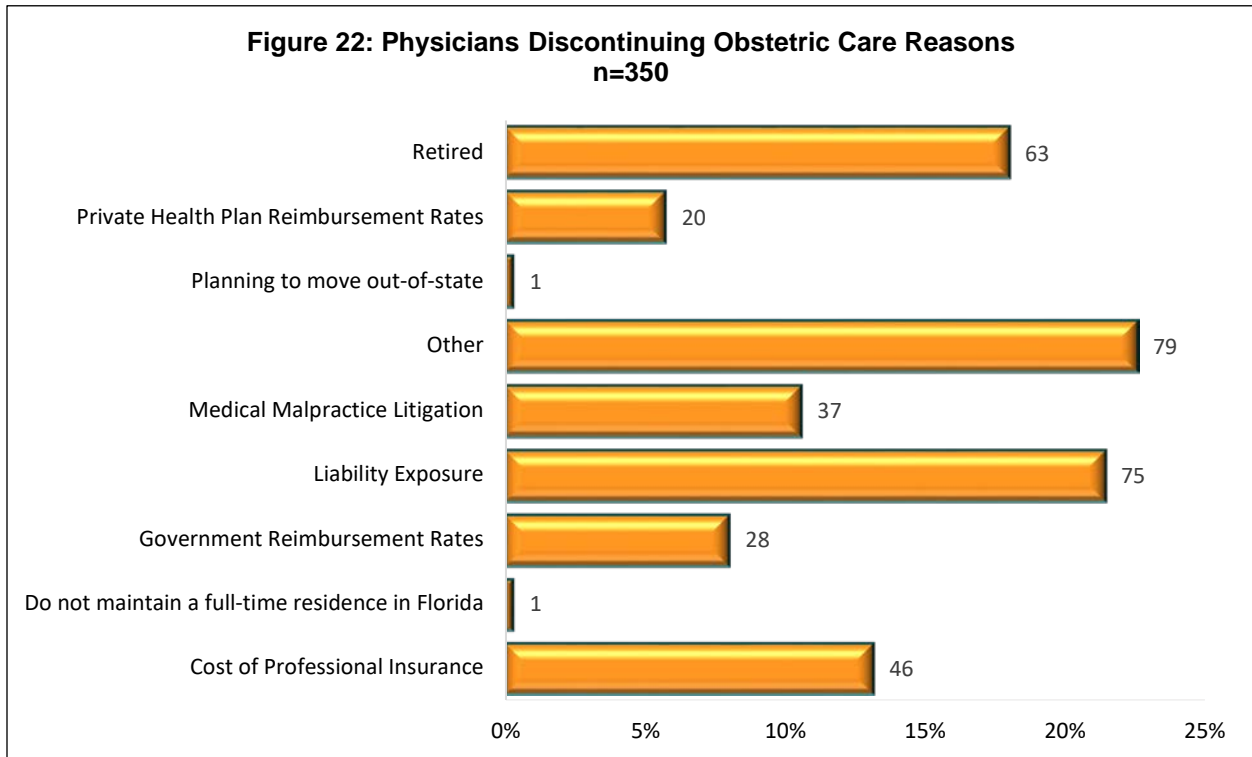
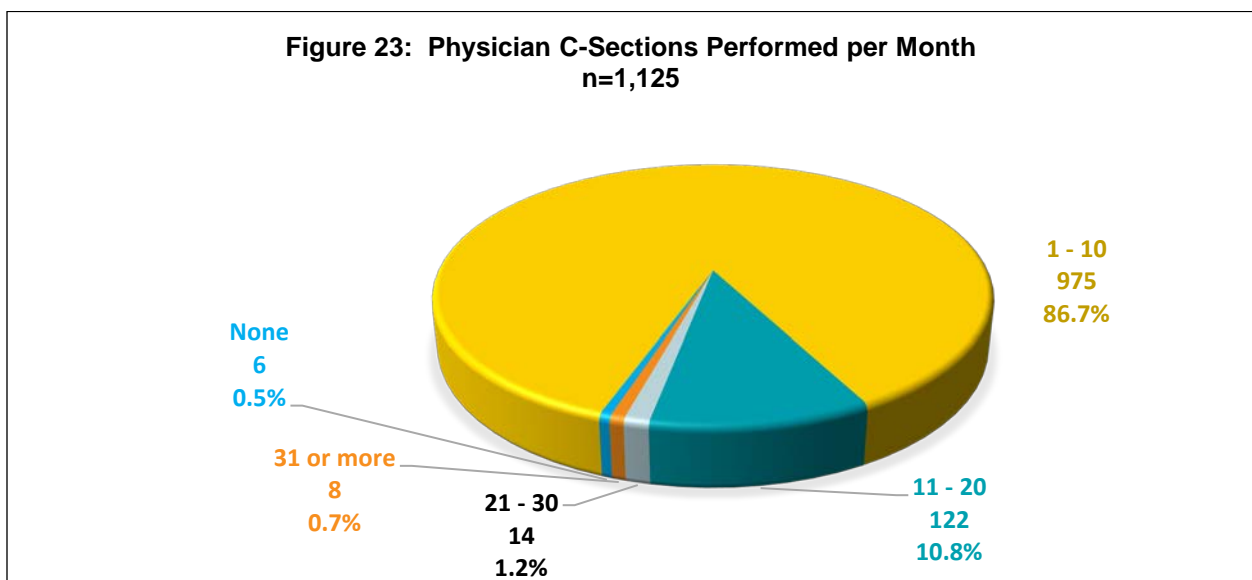


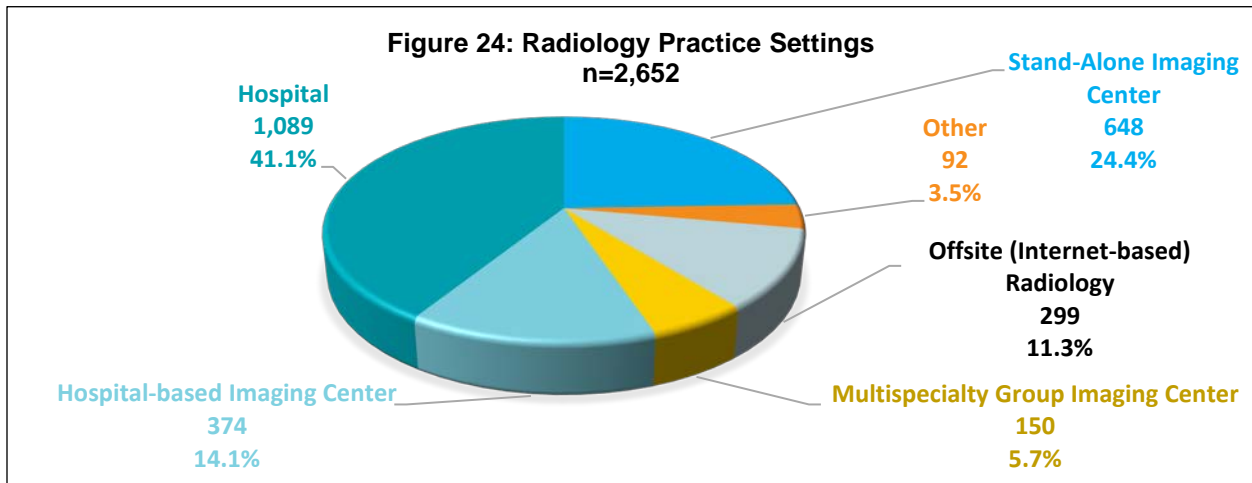
Figure 23 shows the number of obstetricians in Florida who perform cesarean sections (C-sections) within each specified range. Of the 1,125 responses, 86.7% (975) responded that they perform on average between 1-10 cesarean sections per month.



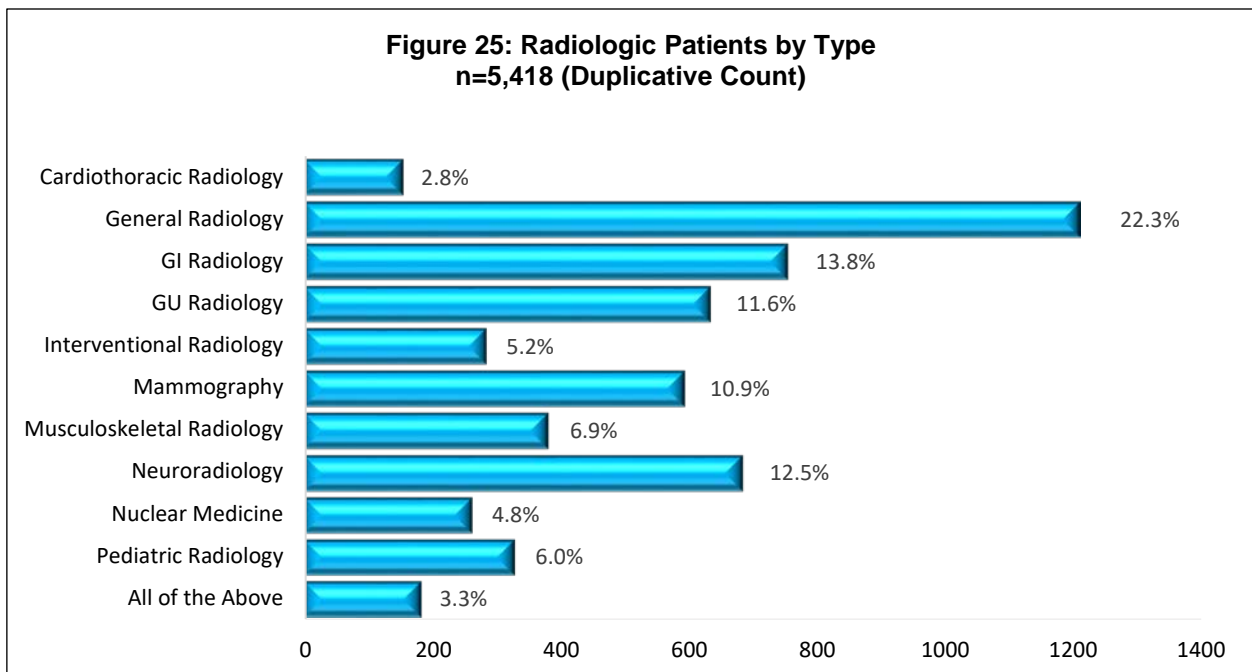
Radiology Specialty Questions

There are 1,957 active and practicing radiologists in Florida. The survey included five optional questions for radiologists to answer.

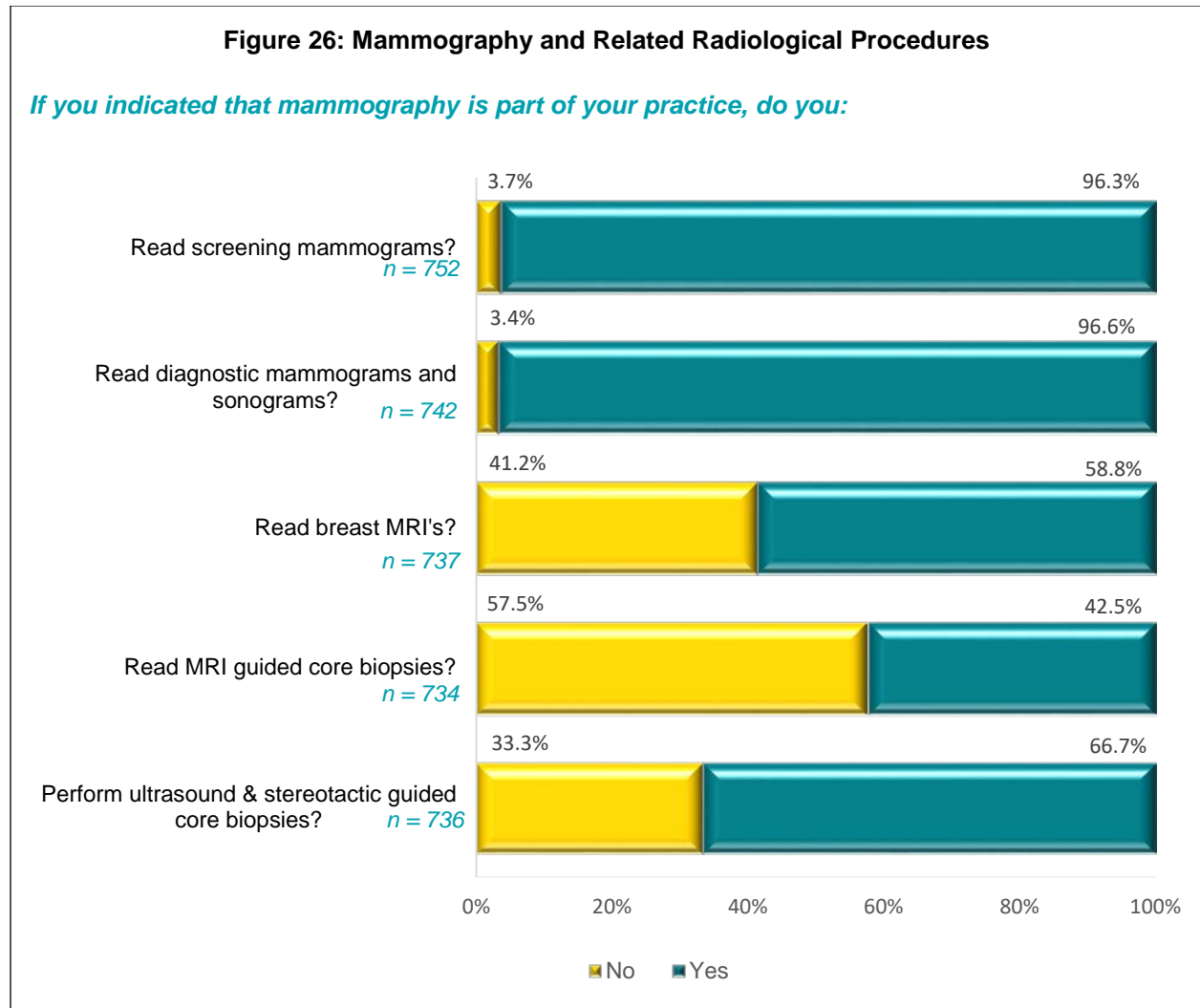
While approximately 85% of radiologists answered the question on practice setting, respondents could select more than one setting. As shown in Figure 24, just over 40% indicate practicing in a hospital and just under a quarter (24.4%) indicate practicing at a stand-alone imaging center.



Almost 90% of radiologists answered the question on radiology patient type; respondents could also select multiple responses for this question. As shown in Figure 25, radiologists responded that 22.3% of their patients were general radiology patients and 13.8% were gastrointestinal radiology patients.

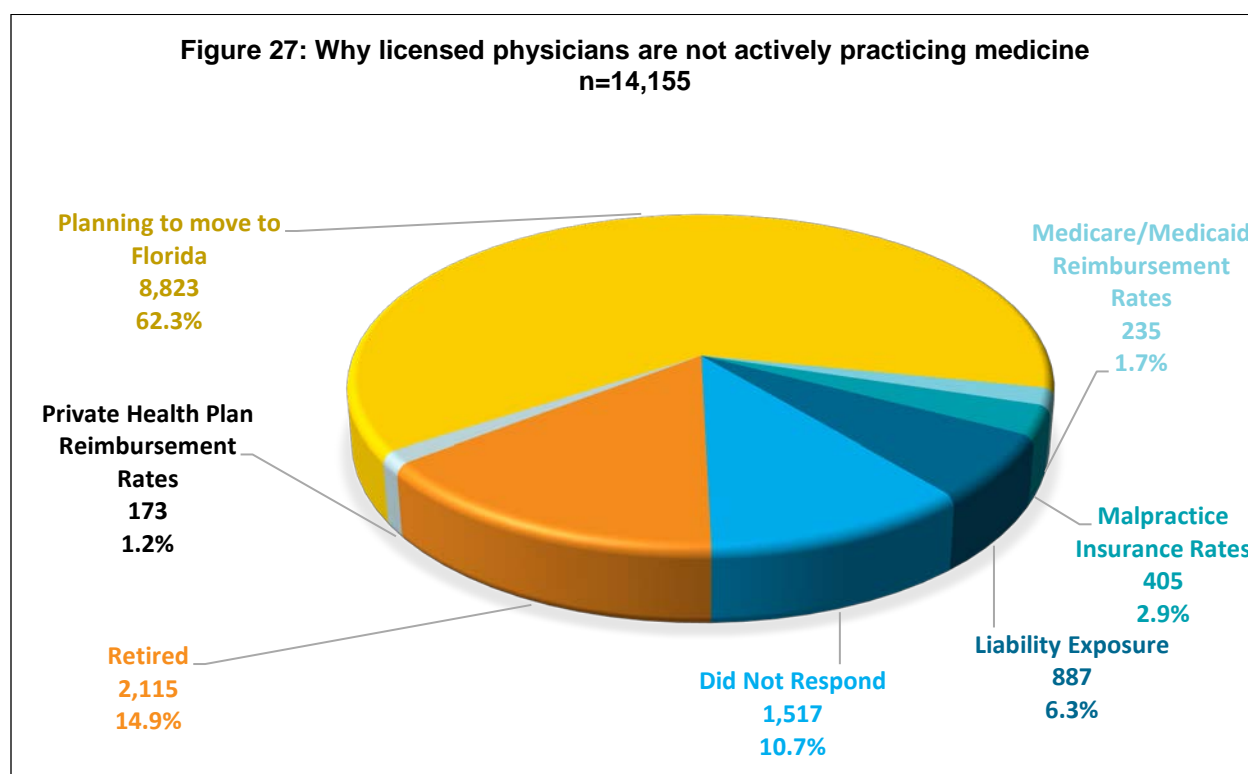


Physicians who indicate mammography as part of their practice were asked a series of related “yes” or “no” questions. The total number of radiologists who saw mammography patients was 767. As shown in the bar charts in Figure 26, 96.3% of the physicians who answered the questions read screening mammograms, 96.6% read diagnostic mammograms and sonograms, and 58.8% read breast MRIs.



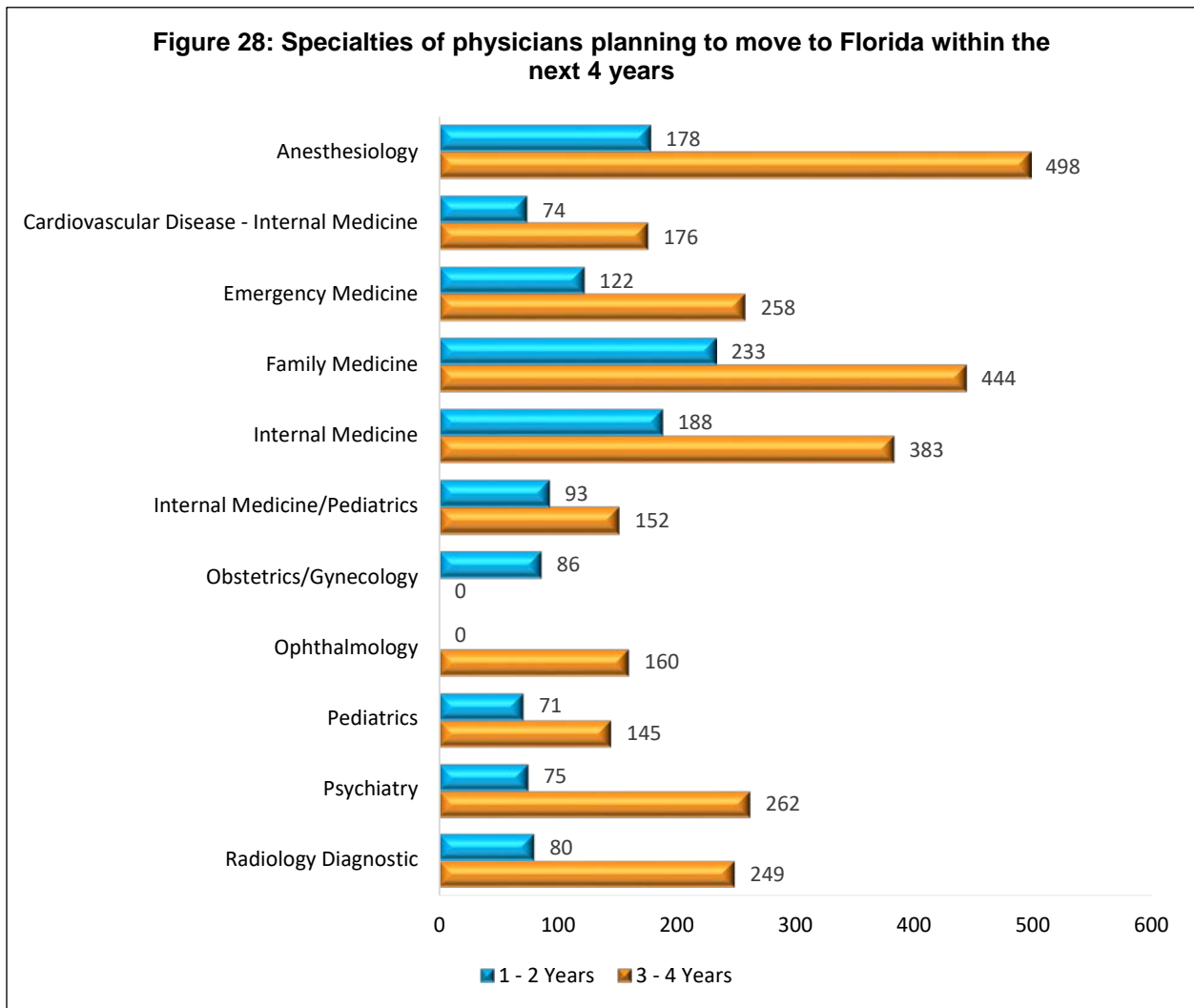
Florida’s Non-Practicing Physicians

A total of 14,155 physicians are licensed but not actively practicing in Florida, representing 21% of the physicians who renewed their licenses in the 2016–2017 cohort. Physicians can maintain a license but not actively practice for several reasons. Understanding the reasons is useful when considering physician attraction and retention initiatives. As shown in Figure 27, 62.3% of physicians responded to the question “The main reason you have a Florida license and don’t practice medicine is (choose only one):” that they are “Planning to move to Florida”; and 14.9% responded that they had retired. The survey does not have an “other” reason choice; 10.7% of physicians who stated they were not actively practicing did not answer the question.

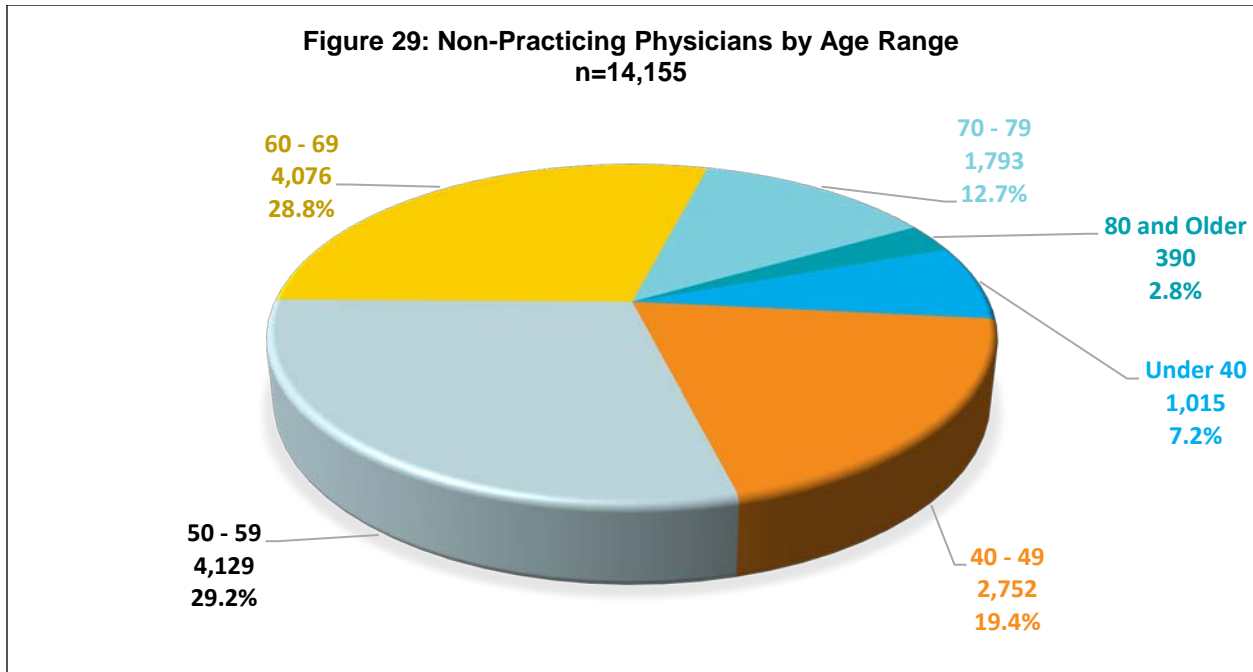


Of the 8,823 non-practicing physicians who plan to relocate to Florida, over three quarters (84.8% or 7,483) plan to relocate to Florida within four years.

Figure 28 shows the top ten specialties of the physicians who said they were planning to move to Florida within the next 1–2 years and the next 3–4 years. Physicians who practice obstetrics/gynecology are in the top ten to move within the next two years, but that specialty is replaced by ophthalmologists in the extended three- to four-year period.



As shown in Figure 29, 58% of non-practicing physicians are between the ages of 50 and 69. In addition, two-thirds of non-practicing physicians are Caucasian, and 75% of non-practicing physicians are male.



When comparing the gender of non-practicing physicians to their practicing counterparts, a higher percentage of non-practicing male physicians are older, with the largest percentage between the ages of 60 and 69 (30.4%). Like their female practicing counterparts, the highest percentage of female non-practicing physicians are between the ages of 50 and 59 (31.8%). There is a higher percentage of female physicians under 50 who are non-practicing (38.0%) versus practicing (31.6%).

Conclusion

The Florida Department of Health renews its commitment to review and assess current and future physician workforce needs in Florida. Physician workforce assessment and planning in this state has resulted in new information for policymakers on clinical practice, geographic location, and scope of practice for Florida physicians. The continuing refinement, evaluation, and reporting of this information will assist in the state's effort to meet current and future physician workforce needs.

Key information from this report for policy consideration includes:

- During the last five-year period, the number of active and practicing physicians rose from 43,406 as reported in 2012–2013 to 45,995 in 2016–2017, an increase of 5.9%.
- Physicians are generally concentrated in populous counties and within large, urban population centers. Physicians working in rural areas are more likely to be primary care providers. Survey results indicated that 97.7% of physicians work in urban counties while 2.3% work in Florida's 30 rural counties.
- Gender and racial diversity of Florida's physician workforce has increased since 2013. The percentage of female physicians has increased from 25.8% in 2013 to 28.9% today, and the percentage of Hispanic, Asian, Black and Native American physicians has increased.
- Physicians continue to specialize, with more physicians practicing in specialties than in primary care. The percentage of primary care physicians in 2016–2017 (33.4%) remains the same as it was in 2012–2013.
- Each year more physicians report that they are planning to retire. The percentage of physicians who reported that they are planning to retire within the next five years has increased from 13.2% in 2012–2013 to 15.2% in 2016–2017.

Physician Workforce Advisory Council

The Physician Workforce Advisory Council (the Council) is established in Section 381.4018, Florida Statutes, and is charged with advising the State Surgeon General and the Department about the current and future physician workforce needs in the state. As shown in the table below, the Council is composed of medical and academic stakeholders and serves as a coordinating and strategic planning body to assess the state's physician workforce needs.

Physician Workforce Advisory Council Membership

Council Member	Name
State Surgeon General & Secretary – Council Chair	Celeste Philip, MD, MPH
An individual recommended by the Florida Alliance for Health Professions Diversity – Council Vice Chair	Alma Littles, MD
A designee from the department who is a physician licensed under chapter 458 or chapter 459 and recommended by the State Surgeon General.	Kevin Sherin, MD, MPH, MBA
An individual who is affiliated with the Science Students Together Reaching Instructional Diversity and Excellence program and recommended by the area health education center network.	Thesla Berne-Anderson, MS
An individual recommended by the Council of Florida Medical School Deans representing a college of allopathic medicine	James O'Leary, MD, FACS
An individual recommended by the Council of Florida Medical School Deans representing a college of osteopathic medicine	James T. Howell, MD, MPH
One individual recommended by the Florida Hospital Association, representing a hospital that is licensed under chapter 395, has an accredited graduate medical education program and is not a statutory teaching hospital.	Vacant
One individual representing a statutory teaching hospital as defined in s. 408.07 and recommended by the Safety Net Hospital Alliance.	Edward Jimenez, MBA
An individual recommended by the Florida Medical Association representing a primary care specialty.	Sergio Seoane, MD
An individual recommended by the Florida Medical Association representing a nonprimary care specialty.	Ralph Nobo, MD
An individual recommended by the Florida Osteopathic Medical Association representing a primary care specialty.	Linda Delo, DO
An individual recommended by the Florida Osteopathic Medical Association representing a nonprimary care specialty.	Paul Seltzer, DO
An individual who is a program director of an accredited graduate medical education program, representing a program accredited by the Accreditation Council for Graduate Medical Education.	Gary Goforth, MD
An Individual who is a program director of an accredited graduate medical education program representing a program that is accredited by the American Osteopathic Association.	Mark Gabay, DO
An individual recommended by the Florida Association of Community Health Centers representing a federally qualified health center located in a rural area as defined in s. 381.0406(2)(a).	Michael Gervasi, DO

Council Member	Name
An individual recommended by the Florida Academy of Family Physicians.	Dennis Saver, MD
The Chancellor of the State University System or his or her designee.	Emily Sikes
A layperson member as determined by the State Surgeon General.	Michael Curtis, MBA

During 2016 and 2017, the Council established workgroups to revise the Physician Licensure Survey, assess graduate medical education, and address physician attraction and retention. The workgroups compiled and reported assessment findings to the full Council to establish future recommendations.

Physician Licensure Survey

The Physician Licensure Survey supplies data for the Physician Workforce Annual Report. The survey workgroup recommended revisions to the survey to capture information that will enhance the Council's ability to assess future workforce needs and identify gaps and trends. The Council approved revisions and recommended that the Department initiate the rule revision process to update the survey.

Graduate medical education and residency programs are an important component of Florida's physician workforce. In 2013, the Florida Legislature created the Statewide Medicaid Residency Program and appropriated \$80 million in recurring state and matching federal funds to the program. In 2015, the Legislature also created the Graduate Medical Education Startup Bonus Program to provide resources for educating and training physicians in specialties which are in a statewide supply-and-demand deficit and appropriated \$100 million to the program. The 2017 Legislature appropriated a total of \$197.3 million to these programs. To develop strategies and policy that support a strong graduate medical education system, the Council recommends that the Department collaborate with the Council of Florida Medical School Deans to develop and maintain a comprehensive database of current GME residency positions in Florida.

Physician Attraction, Retention and Retraining

To support activities that recruit and retain physicians the Council reviewed the capacities of the University of Florida's Comprehensive Assessment and Remedial Education Services Program (Florida CARES) and similar programs around the country. These programs prepare physicians who have not practiced for more than two years to reenter the workforce. In addition, the Council reviewed the state's current primary care shortage areas and discussed the benefits of the federal Health Professional Shortage Area (HPSAs) designations and the National Health

Service Corps (NHSC) loan repayment and scholarship program. The Council also implemented a survey to identify activities and initiatives administered by Florida's nine colleges of medicine for middle and high school and postsecondary students (referred to as pipeline programs). The activities and initiatives are intended to foster a diverse medical college applicant pool and physician workforce. The information provides best practices that will benefit efforts to expand and diversify Florida's medical student population.

Department Programs to Support Physician Workforce Development

The Department administers three programs that support physician workforce in Florida: The State Primary Care Office, the Office of Rural Health, and the Office of Volunteer Health Services.

The State Primary Care Office

The goals of the State Primary Care Office are to attract and retain physicians to work in HPSAs. Florida has 277 HPSAs: 124 are primary care, 48 are mental health, and 105 are dental. As of September 1, 2017, there are 103 physicians who participate in the NHSC loan repayment program in medically underserved areas in Florida, and there are 20 physicians who are NHSC Scholars. Since the inception of the State Conrad 30 Waiver Program in 1994, more than 70%, or nearly 450 physicians, continue to practice in Florida. In addition, approximately 125 National Interest Waiver foreign physicians practice in Florida; these physicians are required to practice in underserved areas for five years.

The Council recommends that the State Primary Care Office promote the NHSC Loan Repayment Program through partnerships with the Florida Association of Community Health Centers, rural hospital outpatient practices, federally qualified health centers, community health centers, and the colleges of medicine.

The Council further recommends that the State Primary Care Office establish and maintain a database of all physicians practicing under the visa waiver programs in the state and monitor the long-term licensure status and practice locations of these physicians to determine the retention of these physicians in the state's health professional shortage areas.

Finally, the Council recommends that the State Primary Care Office seek technical assistance from HRSA to determine action steps that will enhance applicants' success in being awarded loan repayment status as part of the National Health Service Corps (NHSC) Loan Repayment Program.

The Office of Rural Health

The Department's Office of Rural Health provides statewide assistance on rural health issues and assists in developing and sustaining systems of care in rural communities. The office operates the National Rural Recruitment and Retention Network (3RNet) for the state of Florida. 3RNet is a national, federally supported web-based program that assists states in matching health professionals with available practice or job opportunities in both urban and rural HPSAs. Facilities that utilize 3RNet include county health departments, federally qualified health centers, rural hospitals, behavioral health centers, and rural health clinics.

The Volunteer Health Care Provider Program

The Volunteer Health Care Provider Program improves access to medical care for uninsured and underserved low-income residents by allowing licensed health care professionals to become agents of the state. In exchange for the professional services they donate to financially eligible clients referred by the Department's agents and employees, participating medical professionals are protected by state sovereign immunity. There are currently 13,538 health care professionals serving in the Volunteer Health Care Provider Program.

The council recommends that the Program identify Volunteer Health Service Program clinics that could serve as rotation sites for medical students and primary care residents, which can provide valuable experience working with underserved populations and supplement the physician workforce in key areas of the state.

Summary of Recommendations

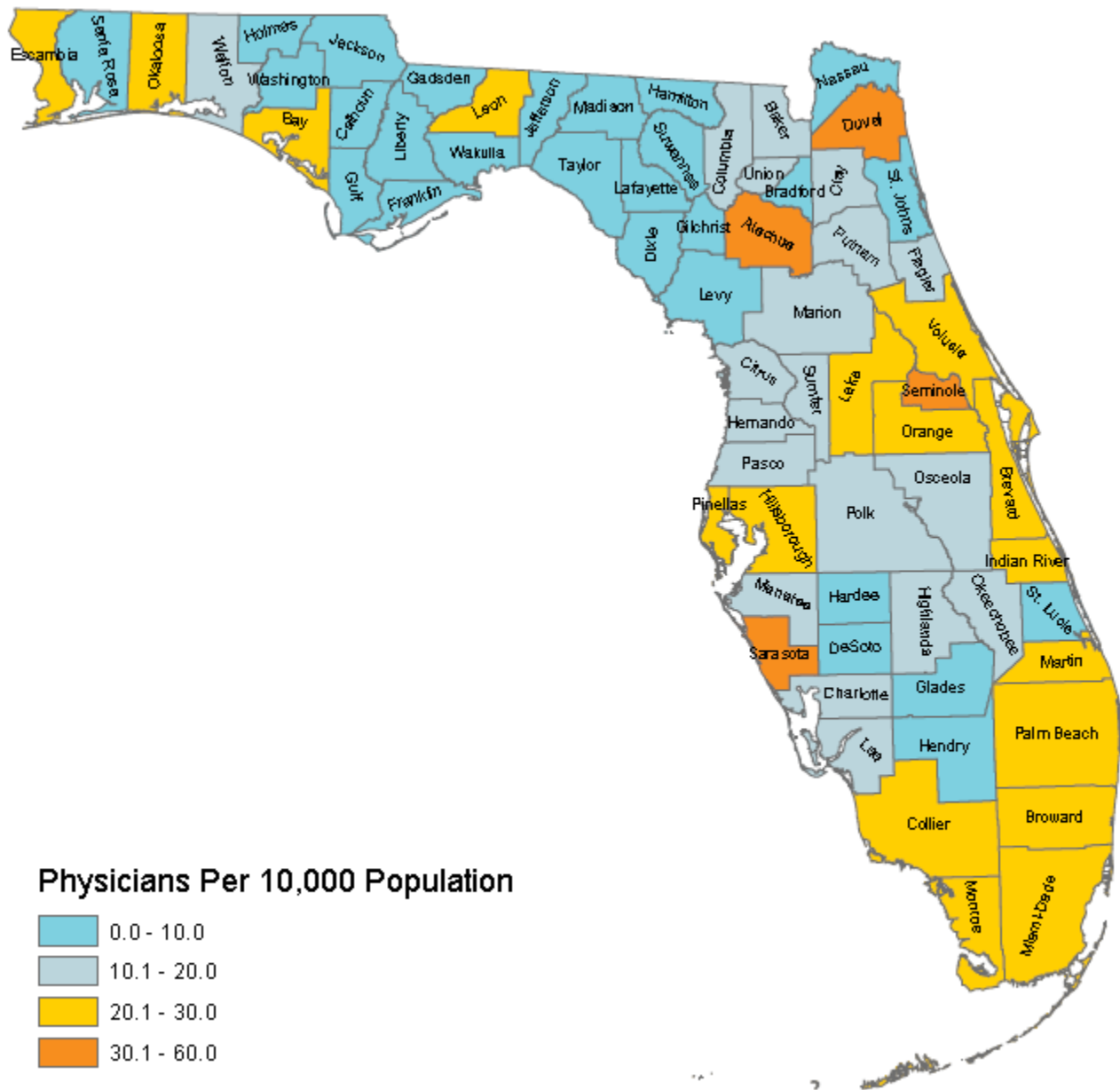
The Council recommends that the Florida Department of Health:

1. Implement the changes to the Physician Licensure Survey as proposed by the Physician Workforce Advisory Council in 2017.
2. Enhance collaboration with the Health Resources and Services Administration (HRSA) through continued promotion of the National Health Service Corps (NHSC) Loan Repayment Program via partnerships with the Florida Association of Community Health Centers, rural hospital outpatient practices, federally qualified health centers, community health centers, and the colleges of medicine.
3. Seek technical assistance from HRSA to determine action steps that will enhance applicants' success in being awarded loan repayment status as part of the NHSC Loan Repayment Program.

4. Establish and maintain a database of all physicians practicing under the visa waiver programs in the state and monitor the long-term licensure status and practice locations of these physicians to determine the retention of these physicians in the state's health professional shortage areas.
5. Identify Volunteer Health Service Program clinics that could serve as rotation sites for medical students and primary care residents to provide experience working with underserved populations and supplement the physician workforce in key areas of the state.
6. Develop student diversity pipeline best practices, based on successful measures in practice throughout the state and nation, for use as a resource by Florida medical schools when implementing, improving, or measuring the impact of their pipeline programs.
7. Collaborate with the Council of Florida Medical School Deans to develop and maintain a comprehensive database of current GME residency positions in Florida with the goal of describing the current and projected areas of need that can be addressed by creating or expanding Graduate Medical Education programs.
8. Share the Florida Telehealth Advisory Council 2017 Report with state licensing and regulatory boards, the Council of Florida Medical School Deans, as well as other relevant stakeholders.

Appendix A: Physician Workforce per Capita by County 2016–2017

This map illustrates a per capita distribution of practicing physicians at the county level. Miami-Dade, Broward and Palm Beach Counties combined have almost one-third (32.5%) of all practicing physicians in Florida. Miami-Dade County alone has 14.6% of all practicing physicians. Even though these are the three most populous counties, when looking at the per capita distribution of physicians, Alachua, Duval, Sarasota and Seminole counties have the highest per capita rate.



Appendix B: Change in Practicing Physicians by County
Figure 1: Percent Change by County
 2012–2013 vs. 2016–2017

County	2012-2013	2016-2017	% of Change
Alachua	1,324	1,429	7.9%
Baker	43	39	-9.3%
Bay	349	400	14.6%
Bradford	26	25	-3.8%
Brevard	1,230	1,254	2.0%
Broward	4,214	4,342	3.0%
Calhoun	9	8	-11.1%
Charlotte	367	332	-9.5%
Citrus	253	225	-11.1%
Clay	262	322	22.9%
Collier	808	835	3.3%
Columbia	152	137	-9.9%
Desoto	29	25	-13.8%
Dixie	8	15	87.5%
Duval	2,648	2,851	7.7%
Escambia	836	881	5.4%
Flagler	123	139	13.0%
Franklin	13	8	-38.5%
Gadsden	37	35	-5.4%
Gilchrist	7	7	0.0%
Glades	6	8	33.3%
Gulf	14	13	-7.1%
Hamilton	10	4	-60.0%
Hardee	16	12	-25.0%
Hendry	26	25	-3.8%
Hernando	298	324	8.7%
Highlands	178	189	6.2%
Hillsborough	3,363	3,696	9.9%
Holmes	15	11	-26.7%
Indian River	360	370	2.8%
Jackson	61	47	-23.0%
Jefferson	8	6	-25.0%
Lafayette	3	2	-33.3%
Lake	593	671	13.2%

County	2012-2013	2016-2017	% of Change
Lee	1,232	1,332	8.1%
Leon	660	667	1.1%
Levy	19	15	-21.1%
Liberty	2	1	-50.0%
Madison	13	8	-38.5%
Manatee	565	631	11.7%
Marion	588	598	1.7%
Martin	345	398	15.4%
Miami-Dade	6,477	6,726	3.8%
Monroe	172	181	5.2%
Nassau	85	76	-10.6%
Okaloosa	406	430	5.9%
Okeechobee	52	58	11.5%
Orange	2,707	3,079	13.7%
Osceola	434	530	22.1%
Palm Beach	3,654	3,901	6.8%
Pasco	803	835	4.0%
Pinellas	2,536	2,613	3.0%
Polk	971	1,001	3.1%
Putnam	97	88	-9.3%
Santa Rosa	159	171	7.5%
Sarasota	1,066	1,126	5.6%
Seminole	661	712	7.7%
St.Johns	324	338	4.3%
St.Lucie	410	410	0.0%
Sumter	108	161	49.1%
Suwannee	27	28	3.7%
Taylor	18	22	22.2%
Union	28	25	-10.7%
Volusia	1,002	1,040	3.8%
Wakulla	7	8	14.3%
Walton	68	89	30.9%
Washington	21	10	-52.4%
State Totals	43,406	45,995	6.0%

Figure 2: Counties with the largest percent decrease of physicians:

County	2012-2013	2016-2017	% of Change
Hamilton	10	4	-60.0%
Washington	21	10	-52.4%
Liberty	2	1	-50.0%
Madison	13	8	-38.5%
Franklin	13	8	-38.5%

Figure 3: Counties with the largest percent increase of physicians:

County	2012-2013	2016-2017	% of Change
Dixie	8	15	87.5%
Sumter	108	161	49.1%
Glades	6	8	33.3%
Walton	68	89	30.9%
Clay	262	322	22.9%

Figure 4: Change in Number of Practicing Physicians by County
2012–2013 vs. 2016–2017

County	2012-2013	2016-2017	# of Change
Alachua	1,324	1,429	105
Baker	43	39	-4
Bay	349	400	51
Bradford	26	25	-1
Brevard	1,230	1,254	24
Broward	4,214	4,342	128
Calhoun	9	8	-1
Charlotte	367	332	-35
Citrus	253	225	-28
Clay	262	322	60
Collier	808	835	27
Columbia	152	137	-15
Desoto	29	25	-4
Dixie	8	15	7
Duval	2,648	2,851	203
Escambia	836	881	45
Flagler	123	139	16
Franklin	13	8	-5
Gadsden	37	35	-2
Gilchrist	7	7	0
Glades	6	8	2
Gulf	14	13	-1
Hamilton	10	4	-6
Hardee	16	12	-4
Hendry	26	25	-1
Hernando	298	324	26
Highlands	178	189	11
Hillsborough	3,363	3,696	333
Holmes	15	11	-4
Indian River	360	370	10
Jackson	61	47	-14
Jefferson	8	6	-2
Lafayette	3	2	-1
Lake	593	671	78

County	2012-2013	2016-2017	# of Change
Lee	1,232	1,332	100
Leon	660	667	7
Levy	19	15	-4
Liberty	2	1	-1
Madison	13	8	-5
Manatee	565	631	66
Marion	588	598	10
Martin	345	398	53
Miami-Dade	6,477	6,726	249
Monroe	172	181	9
Nassau	85	76	-9
Okaloosa	406	430	24
Okeechobee	52	58	6
Orange	2,707	3,079	372
Osceola	434	530	96
Palm Beach	3,654	3,901	247
Pasco	803	835	32
Pinellas	2,536	2,613	77
Polk	971	1,001	30
Putnam	97	88	-9
Santa Rosa	159	171	12
Sarasota	1,066	1,126	60
Seminole	661	712	51
St. Johns	324	338	14
St. Lucie	410	410	0
Sumter	108	161	53
Suwannee	27	28	1
Taylor	18	22	4
Union	28	25	-3
Volusia	1,002	1,040	38
Wakulla	7	8	1
Walton	68	89	21
Washington	21	10	-11
State Totals	43,406	45,995	2,589

Figure 5: Counties with the largest decrease of physicians:

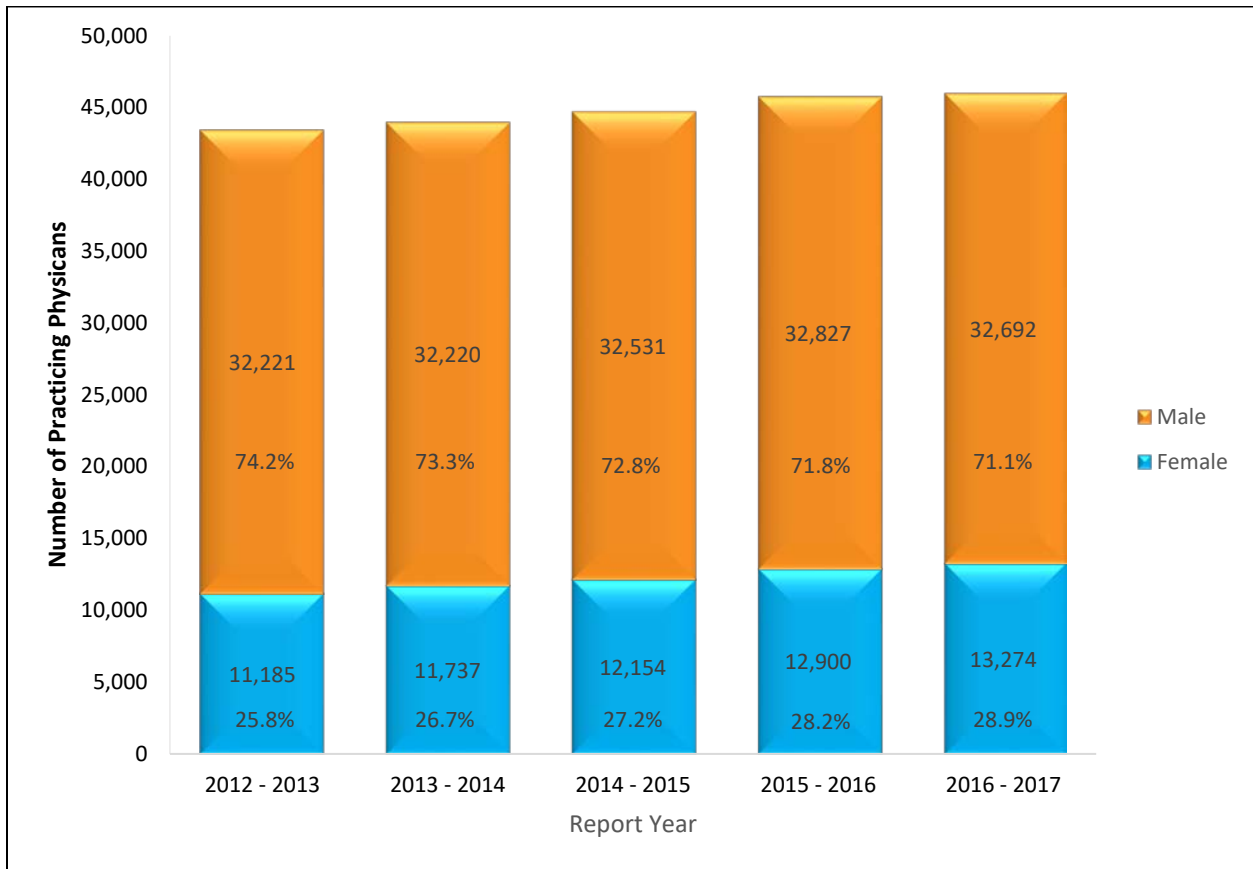
County	2012-2013	2016-2017	# of Change
Charlotte	367	332	-35
Citrus	253	225	-28
Columbia	152	137	-15
Jackson	61	47	-14
Washington	21	10	-11

Figure 6: Counties with the largest increase of physicians:

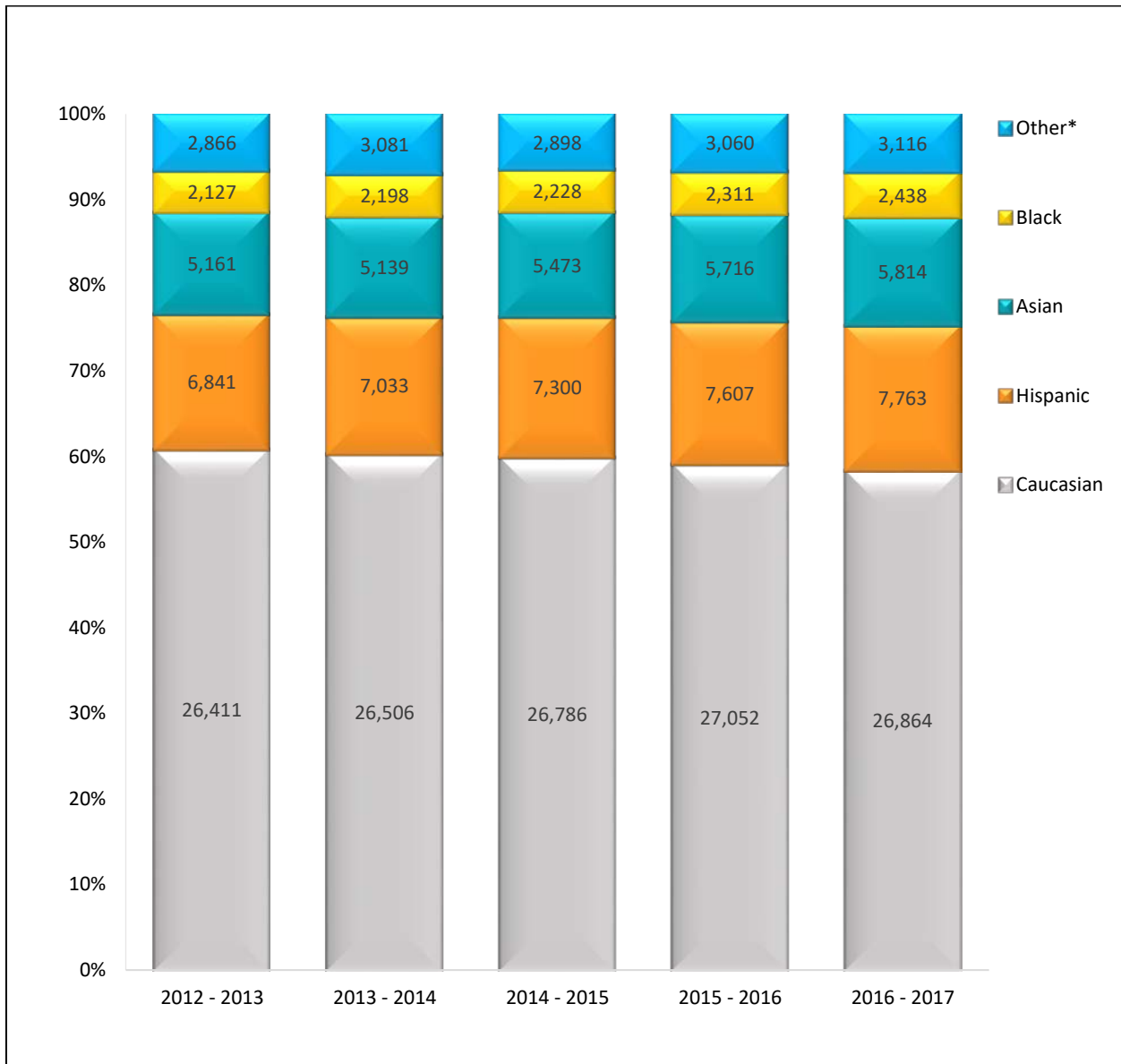
County	2012-2013	2016-2017	# of Change
Orange	2,707	3,079	372
Hillsborough	3,363	3,696	333
Dade	6,477	6,726	249
Palm Beach	3,654	3,901	247
Duval	2,648	2,851	203

Washington County is not only in the top five counties with the largest number of physicians lost, it is also in the top five for largest percentage of physicians lost, as shown in Figures 2 and 5.

Appendix C: Physicians by Gender from 2012–2013 to 2016–2017



Appendix D: Physicians by Race from 2012–2013 to 2016–2017



* The "Other" category here includes the response of "Native American," "Other," and "Unspecified/Not Provided," as shown in the table below.

Figure 1: Responses for "Other"

Race	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Native American	40	40	48	52	51
Other	1,977	2,022	2,047	2,188	2,268
Unspecified/Not Provided	849	1,019	803	820	797

Appendix E: Specialty Group Counts by County
2016–2017

County	Anesthe- siology	Derma- tology	Emergency Medicine	Family Medicine	Internal Medicine	Medical Specialist	OB/GYN	Pediatrics ¹	Psychiatry	Radiology	Surgeons ²	Others ³	County Total
Alachua	84	18	64	144	180	236	33	151	85	85	113	236	1,429
Baker	0	0	3	10	7	4	0	1	11	1	1	1	39
Bay	16	6	32	54	52	51	17	25	19	20	51	57	400
Bradford	0	0	4	8	2	3	1	1	1	0	2	3	25
Brevard	65	28	72	173	200	186	44	82	46	58	97	203	1,254
Broward	247	114	219	465	660	685	202	387	143	179	410	631	4,342
Calhoun	0	0	1	4	2	0	0	0	0	1	0	0	8
Charlotte	15	7	22	31	48	52	6	14	18	17	42	60	332
Citrus	15	4	13	42	27	42	7	4	6	9	21	35	225
Clay	14	5	18	64	31	57	13	32	5	2	27	54	322
Collier	30	27	47	103	143	110	35	64	27	24	70	155	835
Columbia	7	1	17	19	21	19	5	7	7	4	9	21	137
Desoto	1	0	6	2	6	0	3	3	2	0	0	2	25
Dixie	0	0	1	5	1	1	0	2	0	1	0	4	15
Duval	162	43	181	385	363	483	103	277	72	109	235	438	2,851
Escambia	51	13	56	110	103	130	41	84	35	35	89	134	881
Flagler	9	1	10	34	16	24	5	3	0	4	12	21	139
Franklin	1	0	1	4	1	1	0	0	0	0	0	0	8
Gadsden	0	0	5	12	6	0	0	0	10	0	0	2	35
Gilchrist	0	0	0	4	0	0	0	2	0	0	0	1	7
Glades	1	0	0	5	0	0	0	1	0	1	0	0	8
Gulf	1	0	3	3	1	0	0	2	0	1	1	1	13
Hamilton	0	0	1	1	2	0	0	0	0	0	0	0	4
Hardee	0	0	3	3	3	0	0	1	0	0	1	1	12
Hendry	1	0	4	4	7	0	1	4	1	0	2	1	25
Hernando	9	7	23	49	69	51	8	17	12	12	25	42	324
Highlands	11	2	20	25	26	39	5	11	2	10	17	21	189
Hillsborough	211	66	170	367	576	509	150	335	160	171	371	610	3,696
Holmes	0	0	0	9	0	0	0	0	0	0	2	0	11
Indian River	20	6	21	40	57	56	11	23	12	20	38	66	370
Jackson	0	1	7	10	7	7	1	2	1	3	3	5	47
Jefferson	0	1	0	2	2	0	0	0	0	0	1	0	6
Lafayette	0	0	0	0	1	0	0	0	0	0	0	1	2
Lake	24	14	33	97	118	123	27	31	21	26	49	108	671
Lee	67	32	67	178	210	192	45	101	51	56	130	203	1,332
Leon	35	16	39	136	84	71	25	46	35	27	51	102	667

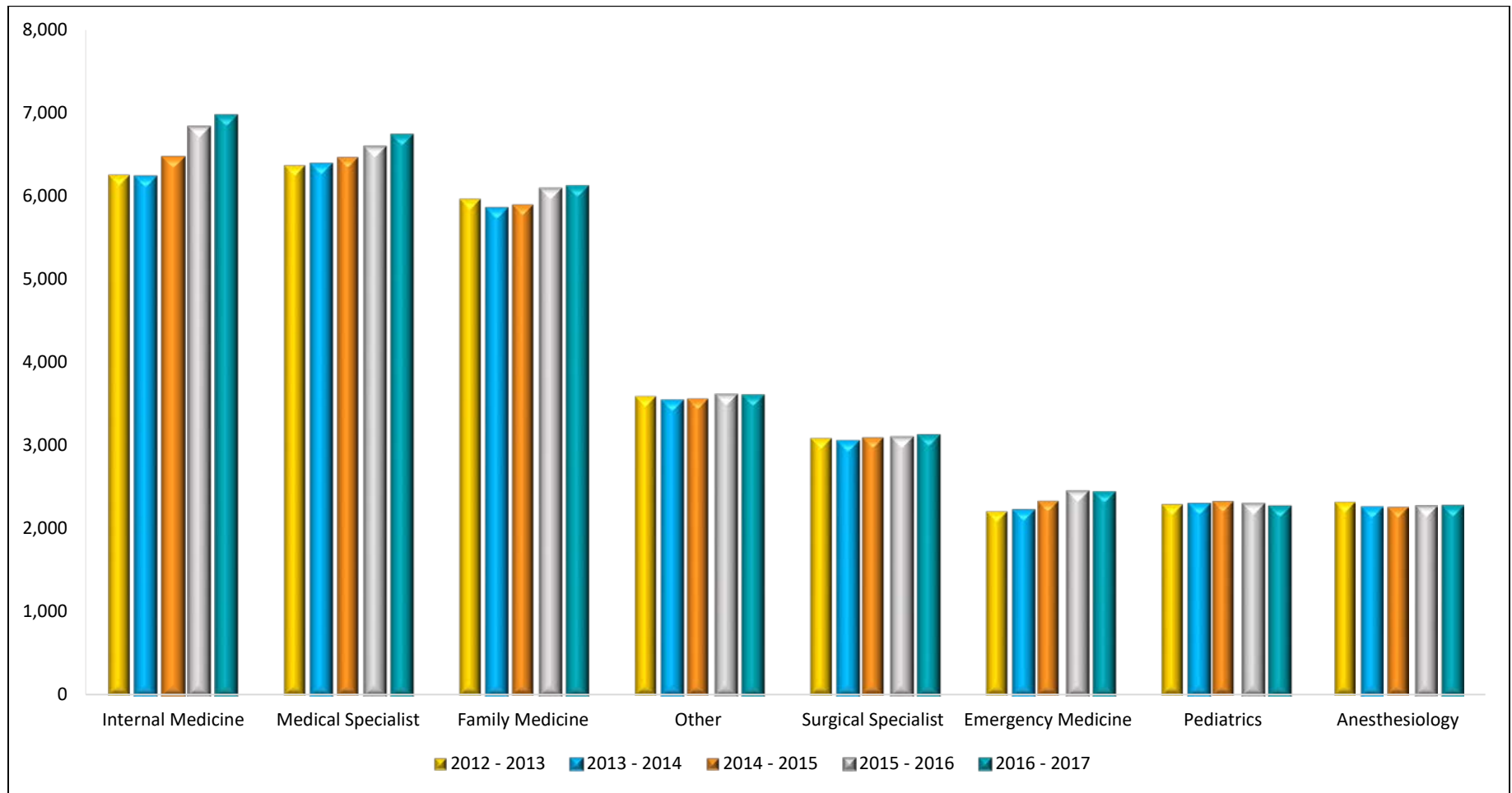
County	Anesthe- siology	Derma- tology	Emergency Medicine	Family Medicine	Internal Medicine	Medical Specialist	OB/GYN	Pediatrics ¹	Psychiatry	Radiology	Surgeons ²	Others ³	County Total
Levy	0	0	1	7	3	0	0	4	0	0	0	0	15
Liberty	0	0	0	1	0	0	0	0	0	0	0	0	1
Madison	0	0	1	4	0	0	0	0	0	1	0	2	8
Manatee	29	17	34	97	86	109	29	47	19	24	46	94	631
Marion	22	12	34	89	107	110	17	25	18	32	45	87	598
Martin	20	16	29	51	60	55	19	12	9	20	42	65	398
Miami-Dade	341	125	255	834	1,062	963	264	726	314	286	608	948	6,726
Monroe	8	5	22	29	31	19	6	6	10	7	19	19	181
Nassau	3	1	6	16	15	9	3	2	5	1	4	11	76
Okaloosa	27	8	30	71	50	39	17	28	15	28	56	61	430
Okeechobee	4	0	2	11	11	6	2	4	2	2	5	9	58
Orange	158	41	138	413	427	395	156	406	116	155	273	401	3,079
Osceola	22	8	51	85	84	82	27	38	16	13	42	62	530
Palm Beach	197	132	158	341	656	623	177	288	166	187	346	630	3,901
Pasco	29	14	45	141	150	142	28	44	38	23	66	115	835
Pinellas	120	55	140	377	404	376	91	218	84	110	223	415	2,613
Polk	41	21	74	120	174	132	43	81	30	47	80	158	1,001
Putnam	4	0	7	14	18	8	3	9	1	5	7	12	88
Santa Rosa	9	2	10	51	22	12	6	21	4	2	22	10	171
Sarasota	53	33	49	156	177	172	38	39	49	44	131	185	1,126
Seminole	20	17	48	158	86	86	32	69	21	16	63	96	712
St. Johns	14	8	20	75	43	48	10	28	13	8	32	39	338
St. Lucie	16	6	28	62	64	46	19	33	18	13	47	58	410
Sumter	2	4	7	45	33	19	3	1	5	10	5	27	161
Suwannee	0	0	7	10	2	2	0	0	3	0	1	3	28
Taylor	1	0	2	9	4	0	0	2	0	0	3	1	22
Union	0	0	2	12	0	2	0	1	6	0	0	2	25
Volusia	43	21	75	200	148	138	34	54	36	47	96	148	1,040
Wakulla	0	0	0	5	2	0	0	0	0	0	0	1	8
Walton	5	3	12	24	14	7	3	4	2	0	5	10	89
Washington	0	0	2	6	0	1	0	0	1	0	0	0	10
State Totals	2,285	961	2,452	6,116	6,959	6,733	1,815	3,903	1,783	1,957	4,137	6,888	45,995

¹ The column "Pediatrics" includes those physicians whose specialties are pediatrics and pediatric subspecialist.

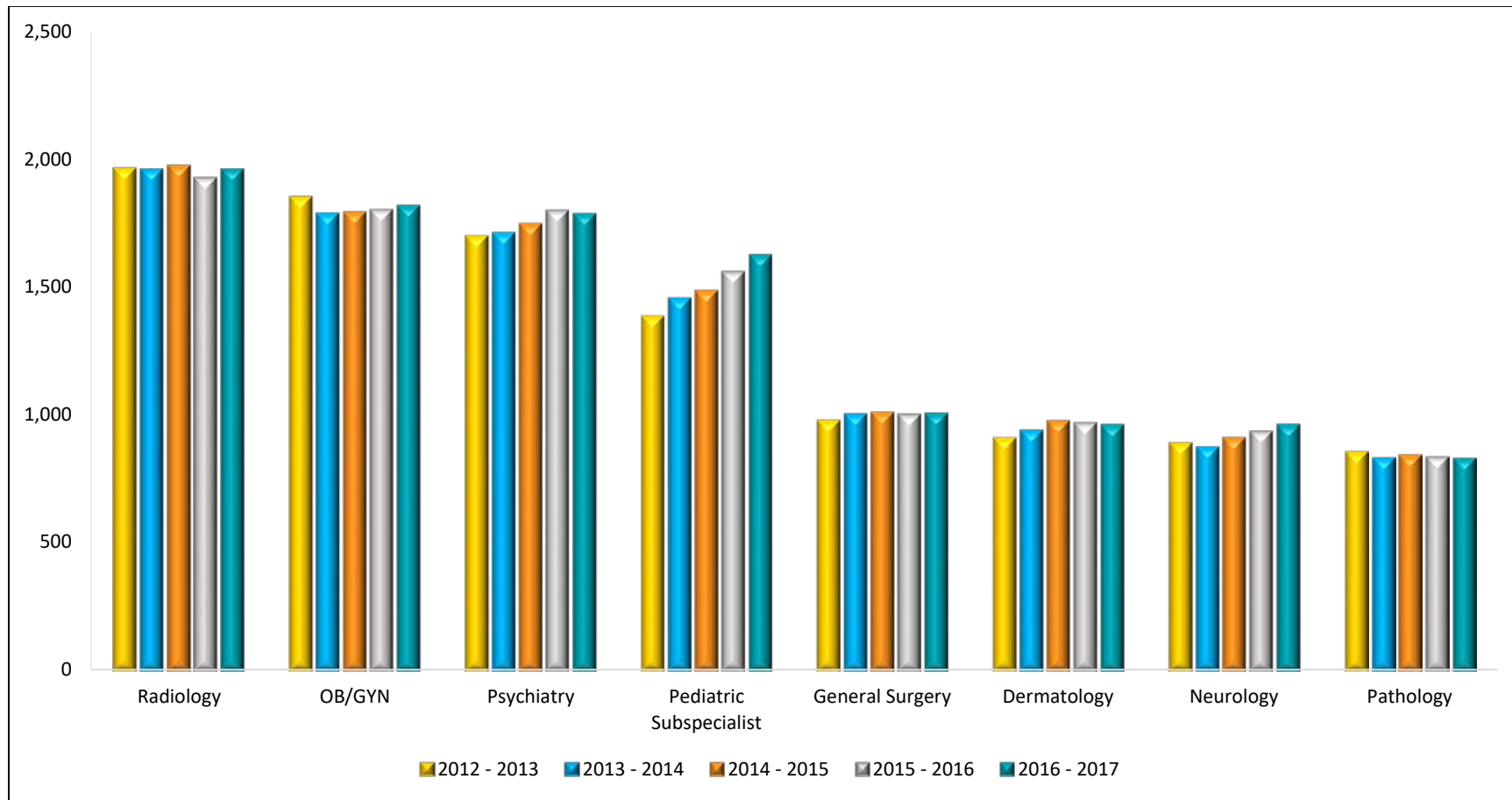
² The column "Surgeons" includes those physicians whose specialties are general surgery and surgical specialist.

³ The column "Others" includes neurologists, pathologists, those who selected Other as a specialty, and all of those who did not select a specialty.

Appendix F: Number of Practicing Physicians by Specialty by Survey Cycle
 2012–2013 to 2016–2017

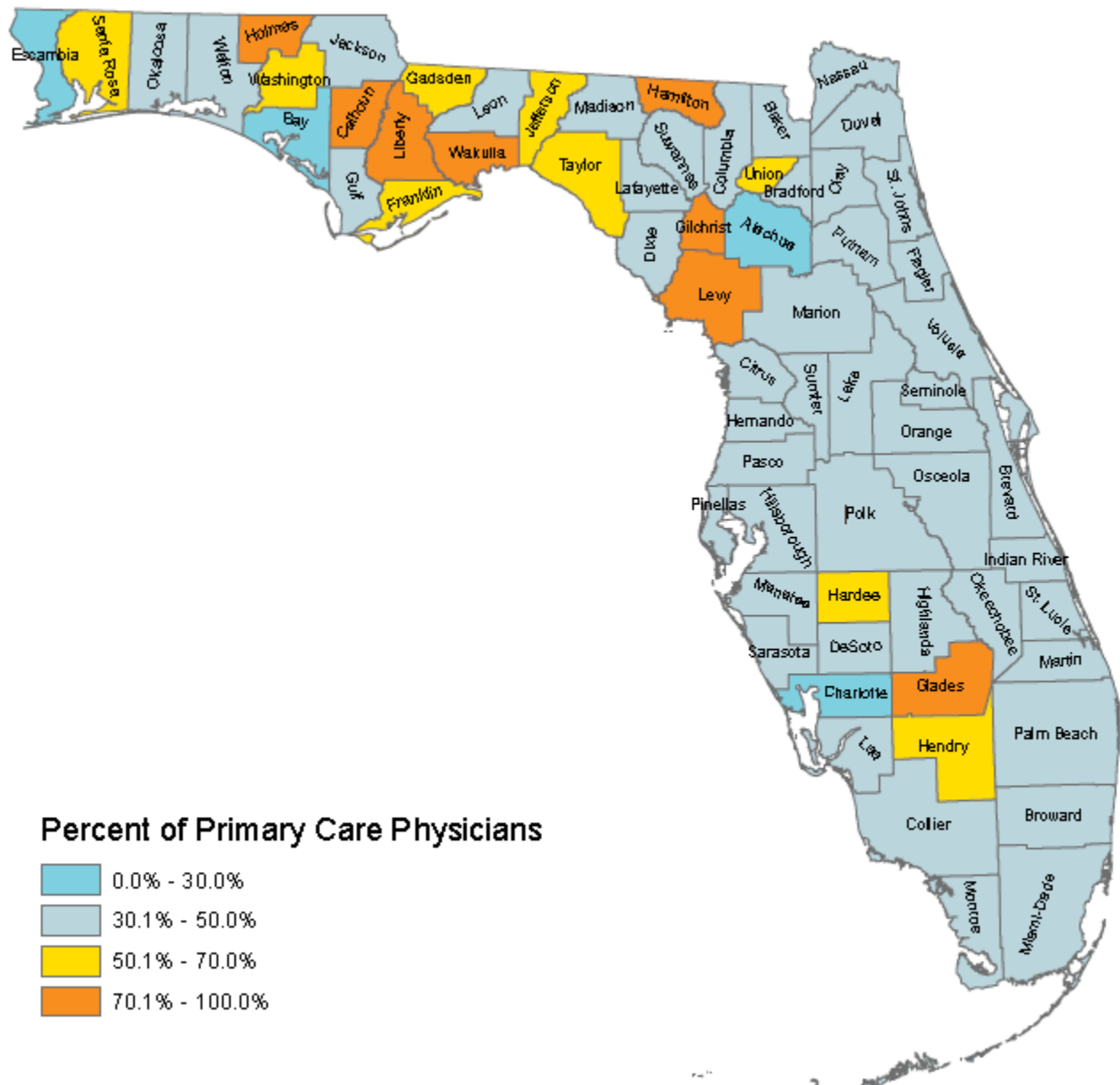


Appendix F: Number of Practicing Physicians by Specialty by Survey Cycle (Continued)
2012–2013 to 2016–2017



Appendix G: Primary Care Physicians by County 2016–2017

Of the 45,995 practicing physicians who participated in the 2016–2017 survey cycle, 15,362 (37.2%) practice in a primary care specialty. Those specialties include family medicine, internal medicine and pediatrics. This map illustrates a distribution of primary care physicians at the county level.



Appendix H: Physicians Planning to Retire in the Next Five Years 2016–2017

Of the 45,995 practicing physicians, 15.1% (6,973) said that they were planning on retiring in the next five years. This map illustrates the percentage of practicing physicians in each county who reported that they are planning on retiring.

