



# 2022 Physician Workforce Annual Report

---

November 2022

Ron DeSantis  
Governor

Joseph A. Ladapo, MD, PhD  
State Surgeon General

## Table of Contents

Executive Summary .....	i
Introduction .....	1
Key Definitions .....	2
Physician Workforce Advisory Council .....	3
Physician Workforce Demographics.....	5
Gender .....	5
Ethnicity .....	7
Age .....	9
Physician Workforce Practice Characteristics .....	14
Primary Specialty .....	14
Primary Care .....	17
Practice Setting .....	19
Practice Hours .....	20
Practice Ownership .....	22
Practice Wait Times .....	23
Practice New Recruitment.....	24
Hospital Practice .....	25
Medicare Patients .....	29
Medicaid Patients.....	32
Physicians Planning to Retire.....	34
Physicians Planning to Relocate .....	36
Telemedicine.....	39
Critical Care Medicine Specialty Question.....	42
Emergency Medicine Specialty Question .....	43
Obstetrics and Gynecology Specialty Questions .....	44
Radiology Specialty Questions.....	47
Physicians Not Providing Direct Patient Care in Florida .....	50
Pipeline - Internship, Residency, and Fellowship Programs .....	51
Department Programs to Support Physician Workforce Development.....	53
The State Primary Care Office .....	53
The Office of Rural Health.....	55
The Volunteer Health Care Provider Program .....	55
Physician Workforce Advisory Council 2022 Recommendations .....	57
Ongoing Recommendations .....	57
New Recommendations .....	59
Conclusion .....	60
Appendix A: Physician Workforce per Capita by County, 2021–22.....	61
Appendix B: Change in Practicing Physicians by County .....	62
Appendix C: Specialty Group Counts by County, 2021–22 .....	67

## Executive Summary

The 2022 Physician Workforce Annual Report presents a summary and analysis of the 2021 and 2022 Physician Workforce Surveys.<sup>1</sup> 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 Florida.<sup>2</sup> This report helps policymakers make informed decisions and create policies about Florida's current and future physician workforce and access to care.

During the 2021–22 survey cycle, there were 91,269 physicians who possessed a license that allowed them to practice in Florida. Of these physicians, 80,629 renewed their medical license in 2021 and 2022 and responded to the workforce survey. Of the physicians renewing their medical license, 58,062 (72%) indicated they were providing direct patient care in Florida.<sup>3</sup>

Key findings based on the 2021–22 survey cycle include:

- Almost one-third (31.3%) of Florida's 67 counties have a per capita rate of less than 10 physicians per 10,000 population (Appendix A).
- Less than 2% (1,076) of physicians have a direct patient care practice in Florida's rural counties (Appendix B).
- The percentage of minority physicians has been increasing since 2012-13 from 39.2% to 45.8% (page 8).
- Almost 60% (33,814) of physicians are age 50 and older (page 9).
- Both the number and percentage of female physicians is increasing. For physicians under age 40, the percentage of female physicians is almost half (45.8%) (page 10).
- The top three specialty groups for physicians providing direct patient care in Florida are internal medicine (28% or 16,011), family medicine (14.7% or 8,386) and pediatrics (8% or 4,550) (page 14).
- Primary care physicians account for 31.5% of physicians providing direct patient care (page 17).
- Almost three-quarters (74.2% or 36,547) of physicians practice in an office setting, and 18.8% (9,249) practice in a hospital (page 19).
- Over three-quarters (75.9%) of physicians report they accept patients with Medicare (page 29).
- Just under two-thirds (64.3%) of physicians report they accept patients with Medicaid (page 32).
- A total of 9.7% (5,633) of active physicians plan to retire in the next five years (page 34).

---

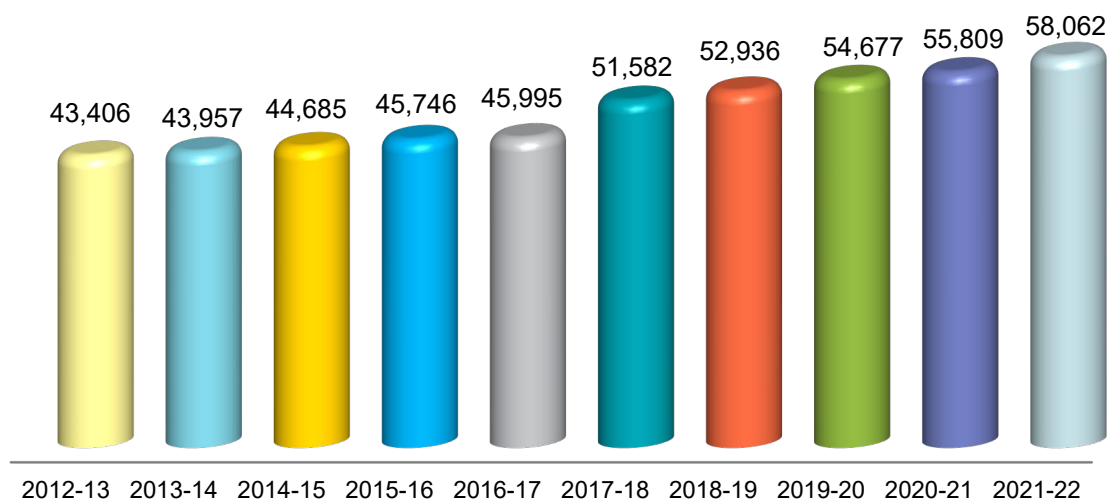
<sup>1</sup> The 2021–22 biennial survey cycle is from July 1, 2020, through June 30, 2022.

<sup>2</sup> Newly licensed physicians do not complete a survey.

<sup>3</sup> Unless otherwise specified, survey results presented in this report are based on physicians who are defined as providing direct patient care. See page 2 for definitions.

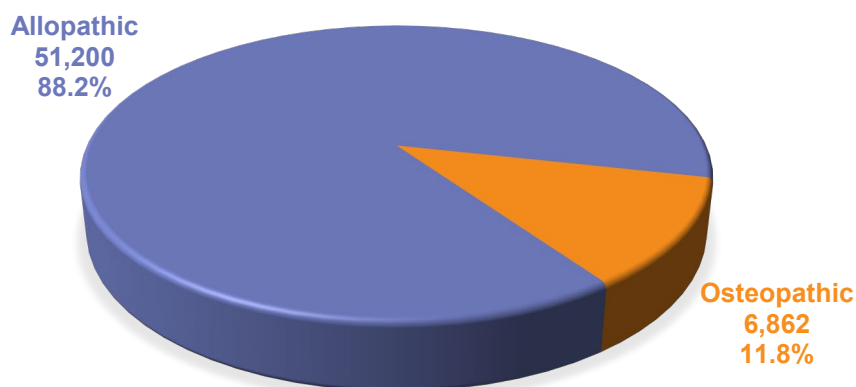
During the last ten-year period, the number of physicians providing direct patient care in Florida has increased 33.8%, as shown in the following chart.<sup>4</sup> The increase in these numbers occurred while the total population of Florida increased just 13.4%.<sup>5</sup>

### Active Physicians in Florida from 2012–13 to 2021–22



Of the 58,062 physicians providing direct patient care who renewed their medical license during 2021 and 2022 and responded to the workforce survey, 88.2% were allopathic physicians and 11.8% were osteopathic physicians.

### Active Physicians in Florida by Physician Type for 2021–22



<sup>4</sup> See Appendix B for information on changes in the number and percentages of practicing physicians by county.

<sup>5</sup> <https://worldpopulationreview.com/states/florida-population>

## 2022 Florida Physician Workforce Annual Report

### Introduction

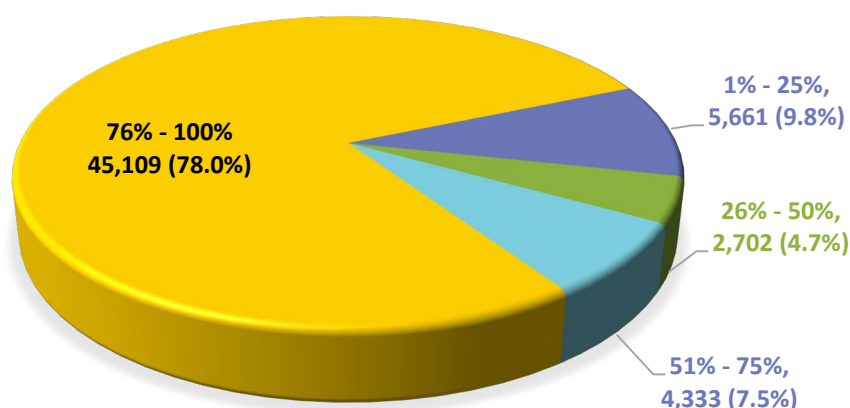
The 2022 Physician Workforce Annual Report is based on responses to the Florida Physician Workforce Survey. The survey is part of the licensure renewal process for physicians and is administered by the Florida Department of Health's Division of Medical Quality Assurance. Physicians must renew their license every other year. Newly licensed physicians are not included in the analysis because the survey is only administered upon licensure renewal.

A total of 91,269 physicians possess a license that allows them to practice in Florida. Of these physicians, 80,629 renewed their medical license during 2021 and 2022 and responded to the workforce survey. Of those surveyed, 58,062 are providing direct patient care.

From the 2012–13 survey cohort to the 2021–22 survey cohort, the number of actively practicing physicians increased 33.8%, from 43,406 to 58,062. During this same time, the population of Florida increased 13.4%, from 19.6 million to 22.2 million.<sup>6</sup>

Unless noted, this report presents survey results and analyzes physicians providing direct patient care. These physicians are those who answered that they spent at least 1% of their time in direct patient care in Florida in the last 12 months, as shown in the pie chart below.<sup>7</sup>

### Physicians Providing Direct Patient Care as a Percentage of Their Time



<sup>6</sup> The 2022 Florida estimated population number is published by *World Population Review* (<https://worldpopulationreview.com/states/florida-population>).

<sup>7</sup> There were 257 (.4%) physicians who did not answer the question about providing direct patient care, however, based on their answers to the other survey questions, they were deemed to be providing direct patient care.

## Key Definitions

These definitions explain terms used in this report.

**Physicians Providing Direct Patient Care in Florida:** Physicians holding a Florida medical license who took the survey and reported that they provided direct patient care in the last twelve months, possess a valid license in active status and are not classified as a current medical resident, intern or fellow.

**Physicians Not Providing Direct Patient Care in Florida:** Physicians holding a Florida medical license who took the survey and reported they did not provide direct patient care in the last twelve months, physicians who reported they were residents, interns or fellows, physicians with inactive licenses, physicians who did not answer enough survey questions to determine if they were practicing, physicians whose practice location is officially listed as “not practicing,” physicians whose practice location is officially listed as “confidential” unless the survey response gives a county location, and physicians whose license status as of June 30, 2022, does not authorize them to practice (administrative suspension, delinquent, emergency suspension, inactive, military active, retired, suspended, temporary military active and voluntary withdrawal).

**Physician Workforce Survey:** The survey completed by all medical doctors (allopathic and osteopathic) biennially during the Florida medical license renewal process.

**Primary Care Physicians:** Physicians indicating they practice general internal medicine (0500-0501), family medicine (0400-0405 and 0407-0408) or general pediatrics (1400-1401) as a primary practice specialty, as defined by the American Academy of Family Physicians.

**Primary Specialty:** The primary practice specialty reported by the physician.

## Physician Workforce Advisory Council

The Physician Workforce Advisory Council (Council) is established in section 381.4018, Florida Statutes, and is charged with advising the State Surgeon General and the Florida Department of Health (Department) about the current and future physician workforce needs in the state. As shown in the table below, the Council comprises 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 – Council Chair	Joseph A. Ladapo, MD, PhD
A designee from the Department who is a physician licensed under chapter 458 or chapter 459 and recommended by the State Surgeon General.	Ulyee Choe, DO
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.	Anthony Speights, MD
An individual recommended by the Council of Florida Medical School Deans representing a college of allopathic medicine.	Cuc Mai, MD
An individual recommended by the Council of Florida Medical School Deans representing a college of osteopathic medicine.	Mark Sandhouse, DO
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.	Gino Santorio, MPA
An individual recommended by the Florida Medical Association representing a primary care specialty.	Corey Howard, MD
An individual recommended by the Florida Medical Association representing a nonprimary care specialty.	Michael Patete, 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.	Brett Scotch, 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.	Nathan Falk, 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.	Peter Cohen, 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).	Debra Andree, MD
An individual recommended by the Florida Academy of Family Physicians.	Jennifer Keehbauch, MD
An individual recommended by the Florida Alliance for Health Professions Diversity.	Joedrecka Brown Speights, 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.	Steven Bennett, MA

The Council continues to monitor the status of Graduate Medical Education (GME) programs in Florida. GME programs and residency programs are an important component of Florida's physician workforce. In 2013, the Florida Legislature created the Statewide Medicaid Residency Program and in 2015 they created the GME Startup Bonus Program to provide resources for educating and training physicians in specialties that are in a statewide supply-and-demand deficit. The 2022 Legislature appropriated a total of \$291.6 million to these programs.

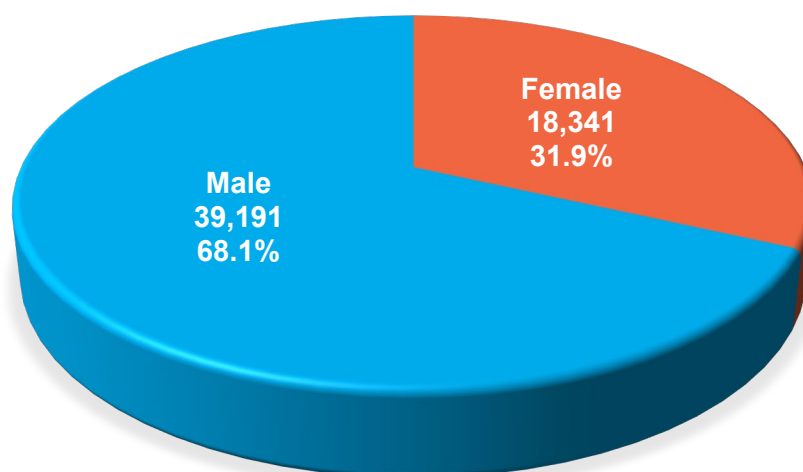


## Physician Workforce Demographics

### Gender

The percentage of *all* physicians who possess a license that allows them to practice in Florida is 69.1% male and 30.9% female. Likewise, in the 2021–22 survey cohort, 68.1% of Florida’s actively practicing physicians are male and 31.9% are female, as shown in Figure 1.

**Figure 1: 2021–22 Physician Gender**  
n = 57,532<sup>8</sup>



The gender ratio of actively practicing physicians in Florida is approaching the state population average. In the 2010 census, the U.S. Census Bureau reported Florida’s population was 51.1% female, which is slightly more than for its 2021 estimated female population, which decreased to 50.8%.<sup>9</sup> The male-to-female ratio of physicians in the 2012–13 survey cohort was 2.7:1. The ratio for the 2021–22 cohort changed to 2.1:1. The *Association of American Medical Colleges’ 2021 State Physician Workforce Data Report* states 31.7% of Florida’s active physicians are female, which ranks Florida 39<sup>th</sup> in the country. The nationwide average percentage of female physicians is 36.7%.<sup>10, 11, 12</sup>

<sup>8</sup> 530 physicians did not report their gender

<sup>9</sup> The 2021 Florida gender percentages are published on the *United States Census Bureau’s QuickFacts* webpage ([www.census.gov/quickfacts/fact/table/fl/PST045217](https://www.census.gov/quickfacts/fact/table/fl/PST045217)).

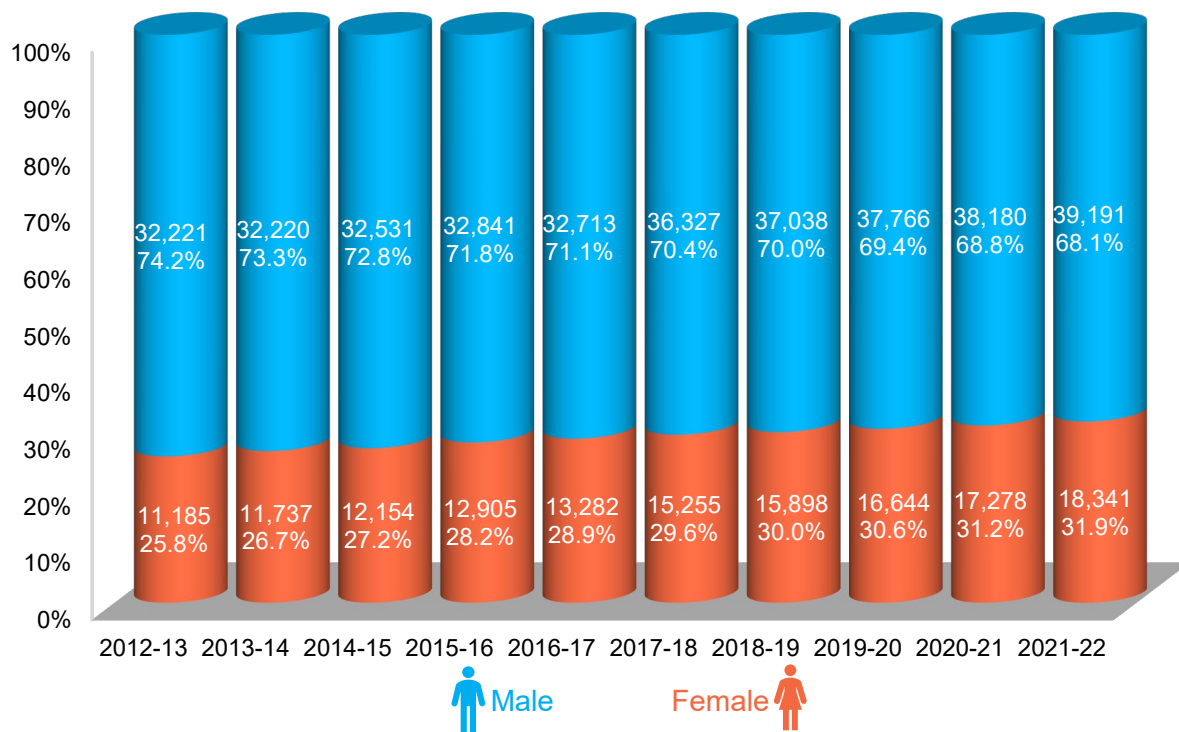
<sup>10</sup> This figure is on pages 20 and 21 of the *2021 State Physician Workforce Data Book* (<https://www.aamc.org/data-reports/workforce/report/state-physician-workforce-data-report>).

<sup>11</sup> The percentage is slightly higher than the numbers in this report because it includes all physicians, not just those renewing their licenses.

<sup>12</sup> *The Association of American Medical Colleges’ State Physician Workforce Data Report* is published biennially and the next report is expected to be published in November 2023.

The percentage of female physicians has steadily increased from 25.8% in 2012–13 to 31.9% in 2021–22 (see Figure 2). While the number of female physicians has increased 64% from 11,185 to 18,341, the number of male physicians has only increased 21.6% from 32,221 to 39,191.

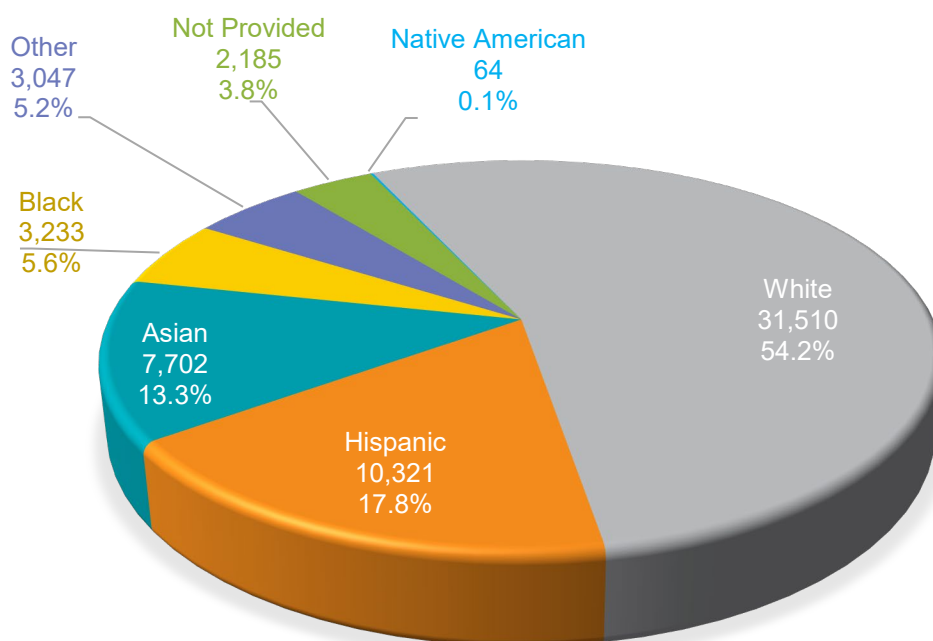
**Figure 2: Ten-Year Trend of Physicians by Gender**  
**2012–13 to 2021–22**



## Ethnicity

The percentage of *all* physicians who possess a license that allows them to practice in Florida is 55.5% White, 15% Hispanic, 13.5% Asian, 5.6% Black, 0.1% Native American and 4.9% Other (5.3% did not provide an ethnicity). Similarly, in the 2021–22 survey cohort, just over half of Florida’s actively practicing physician workforce is White (54.2%), 17.8% is Hispanic, 13.3% is Asian, and 5.6% is Black, as shown in Figure 3.

**Figure 3: 2021–22 Physicians by Ethnicity**  
n = 58,062



The ethnicity of actively practicing minority physicians in Florida exceeds the state population average. In July 2021, the U.S. Census Bureau reported Florida’s population was 42.8% minority, while the percentage of minority, actively practicing physicians was 45.8%.<sup>13</sup> The *Association of American Medical Colleges’ 2021 State Physician Workforce Data Report* states 50% of Florida’s active physicians are minorities, which ranks Florida 47<sup>th</sup> in the country, with only New Jersey, California, and Hawaii having a larger percentage of Minority physicians.<sup>14, 15</sup> The nationwide average percentage of minority physicians is 40.9%.<sup>16</sup> Additionally, Florida

<sup>13</sup> The 2021 Florida gender percentages are published on the *United States Census Bureau’s QuickFacts* webpage ([www.census.gov/quickfacts/fact/table/fl/PST045217](https://www.census.gov/quickfacts/fact/table/fl/PST045217)).

<sup>14</sup> The percentage is slightly higher than the numbers in this report because it includes all physicians, not just those renewing their licenses.

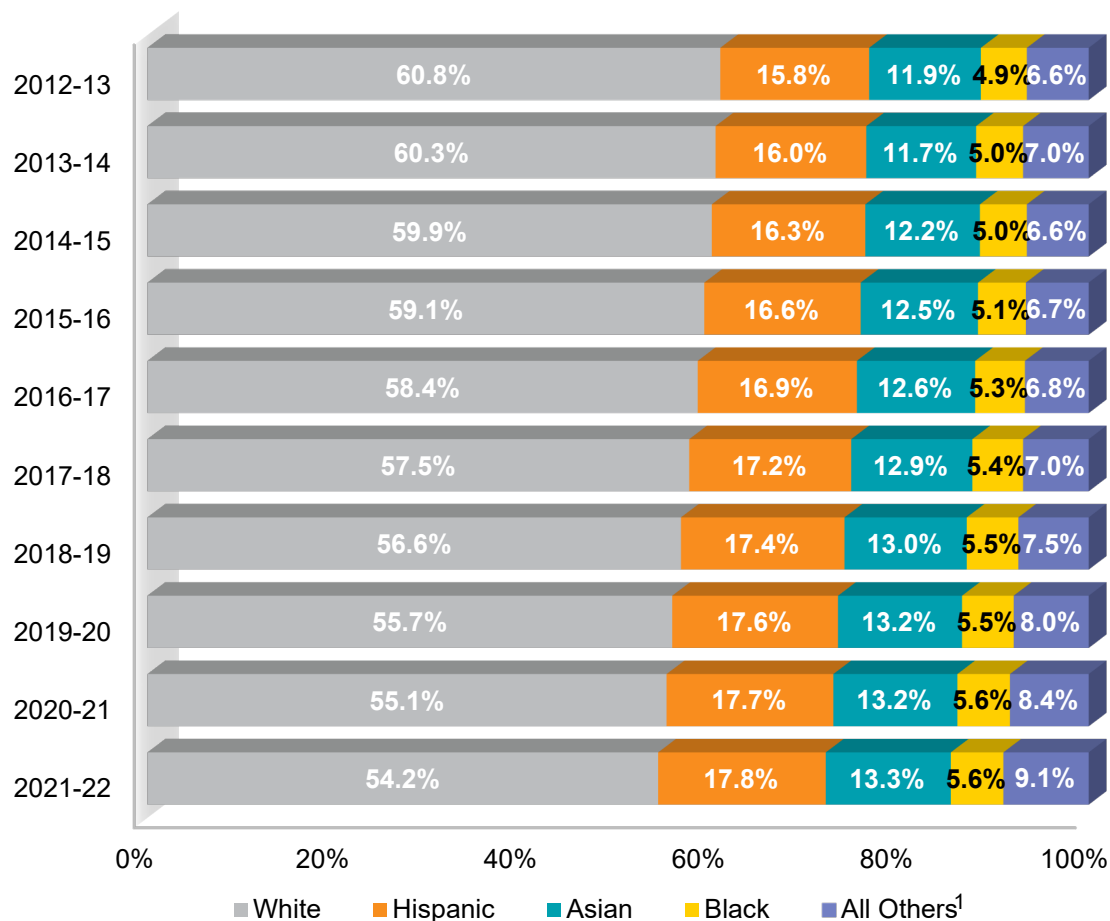
<sup>15</sup> This figure is on pages 27 through 40 of the *2021 State Physician Workforce Data Book* (<https://www.aamc.org/data-reports/workforce/report/state-physician-workforce-data-report>).

<sup>16</sup> The *Association of American Medical Colleges’ State Physician Workforce Data Report* is published biennially and the next report is expected to be published in November 2023.

ranks first in the nation for the percentage of Hispanic and Other ethnicities, and 12<sup>th</sup> in the nation for the percentage of Black physicians.

The percentage of minority physicians in Florida has been increasing since 2012–13 (see Figure 4). In the 2012–13 cohort, minority physicians comprised 39.2% of all physicians. In the 2021–22 cohort, minority physicians increased to 45.8%.

**Figure 4: Ten-Year Trend of Physicians by Ethnicity as a Percentage of Practicing 2012–13 to 2022–23**



<sup>1</sup> The category “All Others” includes those who selected Native American, Other, or did not provide an ethnicity.

Since the 2012–13 cohort, the following changes have occurred:

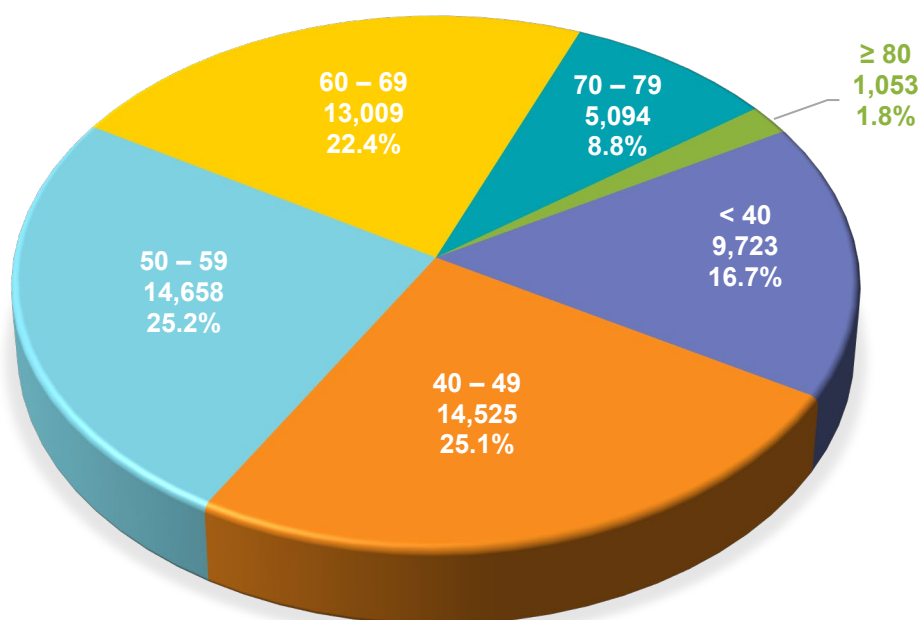
- The number of Black physicians increased 52% (from 2,127 to 3,233).
- The number of Asian physicians increased 49.1% (from 5,165 to 7,702).
- The number of Hispanic physicians increased 50.5% (from 6,858 to 10,321).
- The number of Native American physicians increased 60% (from 40 to 64).
- The number of White physicians increased 19.4% (from 26,391 to 31,510).

## Age

The average age of practicing physicians is 53 years old. The youngest physician renewing a license is 27 years old. The two oldest practicing physicians are 96 and 97 years old.<sup>17</sup> The percentage of physicians working past typical retirement age (65 or older) is 20.6%. In addition, 33% (19,156) of practicing physicians are ages 60 years and older, and 25.2% (14,658) are between ages 50 and 59. There are just under twice as many physicians ages 60 years and older than there are under age 40. Figure 5 shows the age ranges for practicing physicians.

**Figure 5: 2021–22 Physicians by Age Group**

n = 58,062



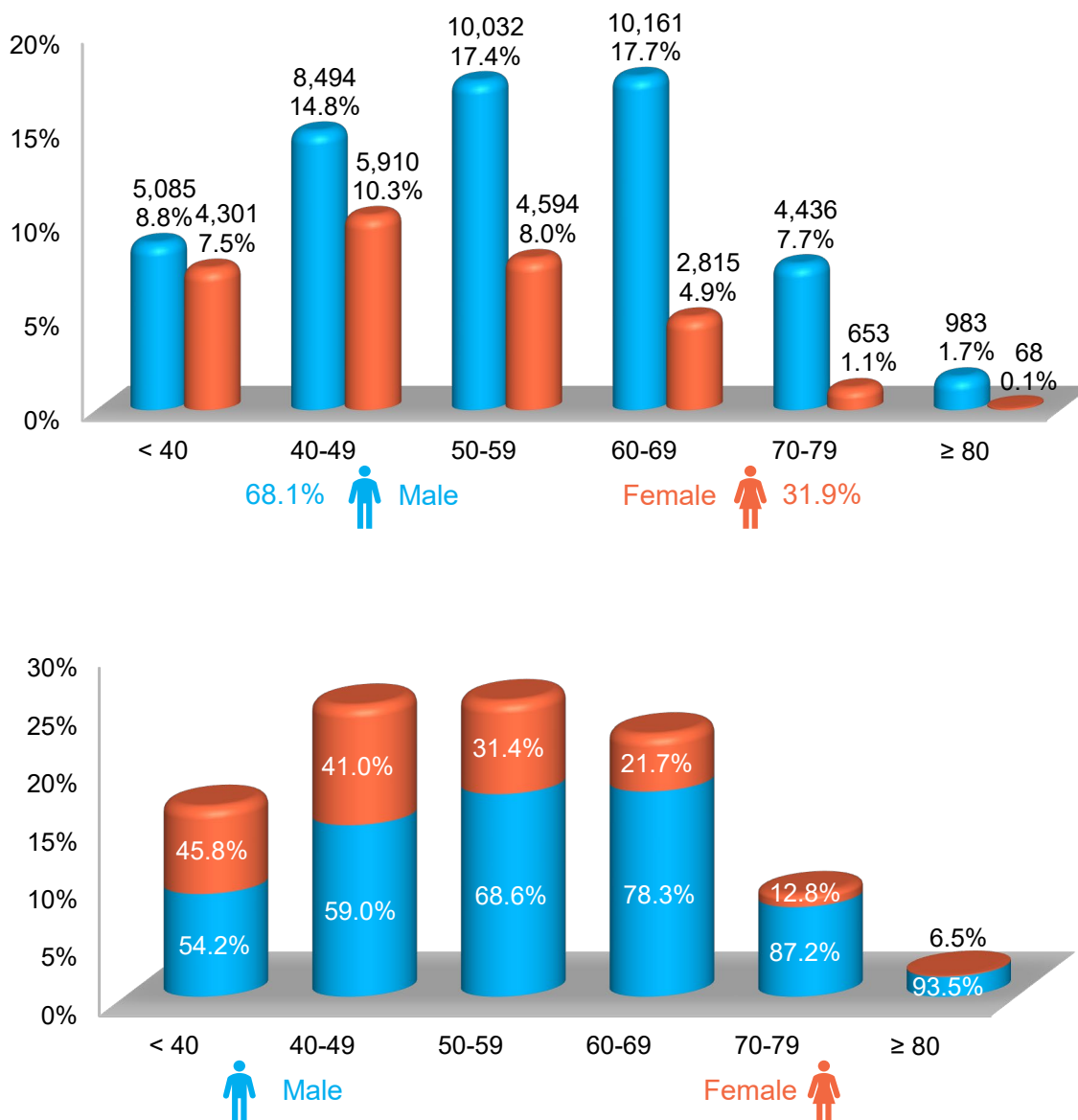
Nationally, Florida ranks sixth of states having the highest percentage of active physicians with ages 60 or older.<sup>18</sup> Florida ranks third nationally of having the highest number of active physicians ages 60 and older, only California and New York have more. Florida ranks eighth nationally of states having the lowest percentage of physicians younger than 40 years old. Florida ranks fifth nationally for having the highest number of active physicians younger than 40 years old, only California, New York and Texas have more.

<sup>17</sup> There were 57 physicians ages 90 and older who responded they were actively practicing.

<sup>18</sup> This figure is on page 26 of the *2021 State Physician Workforce Data Book* (<https://www.aamc.org/data-reports/workforce/report/state-physician-workforce-data-report>).

The number and percentage of male practicing physicians rise through age 69 and then starts to decline, as shown in Figure 6. The number and percentage of female physicians only rises through age 49 before starting to decline. For physicians under age 40, the percentage of male and female in that age group is close to even. As the physicians have gotten older, the near even split grows significantly, such that by their 60s, two-thirds of physicians providing direct patient care are male. By the time they reach 80, that percentage has increased to 93.5%.

**Figure 6: 2021–22 Physicians by Gender and Age Group**  
n = 57,532<sup>19</sup>

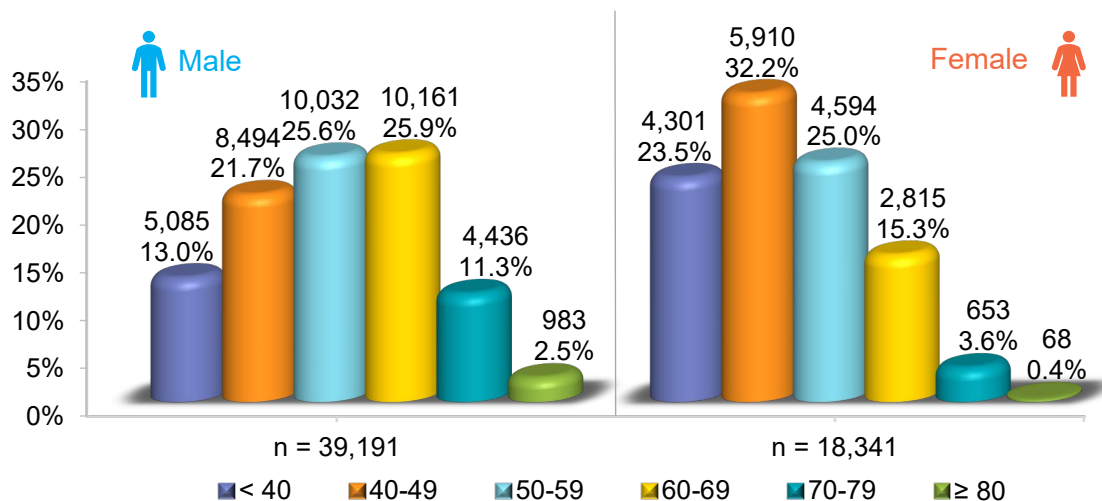


<sup>19</sup> There were 530 physicians who did not report either their gender or their date of birth.

The number of physicians under age 40 includes an almost equal number of females (4,301 or 45.8%) and males (5,085 or 54.2%). This distribution is similar to the total population of Florida. The percentages of physicians under age 40 for both genders have fluctuated slightly since 2012–13, increasing just over 1% for females and decreasing just over 1% for males.

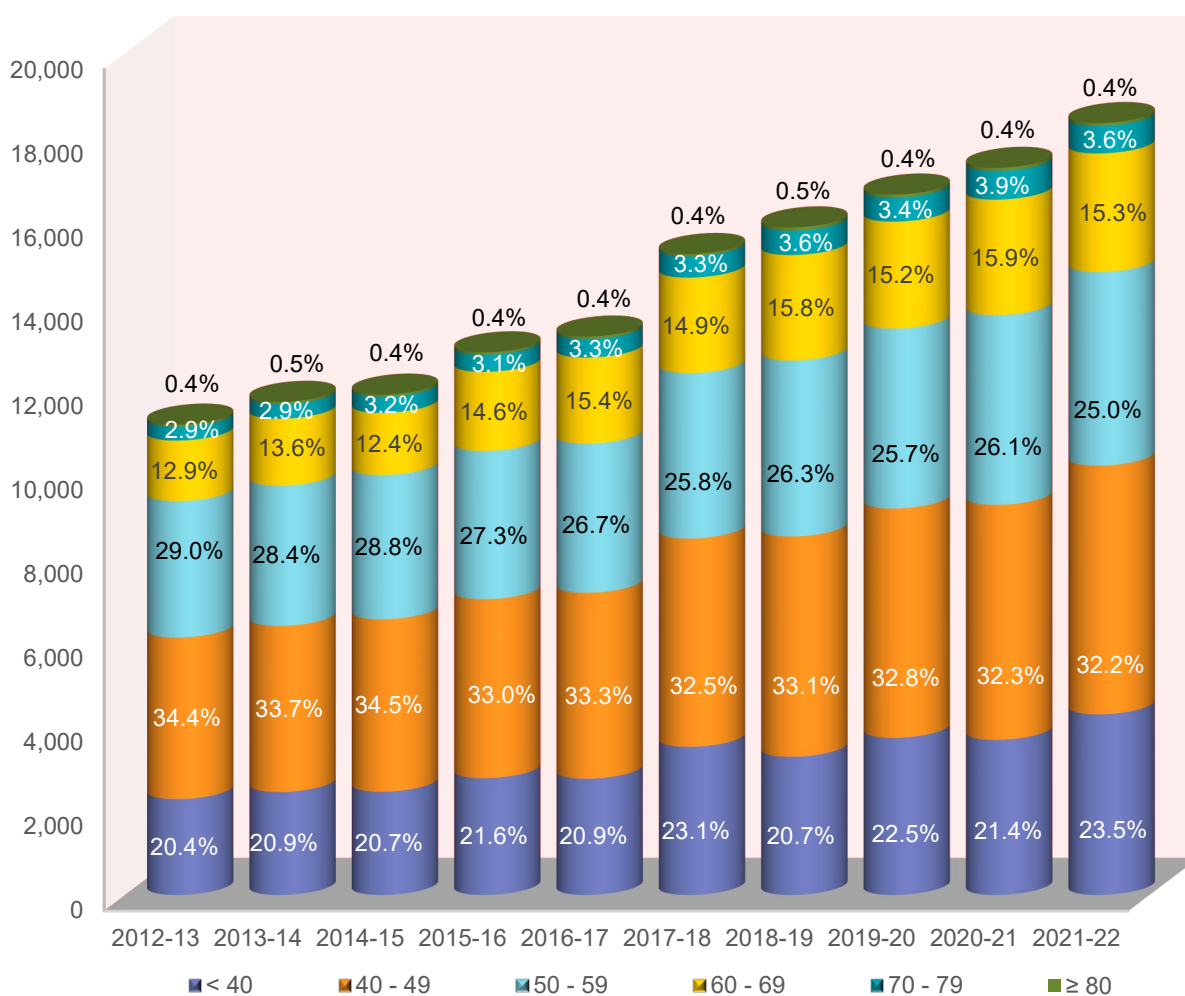
For physicians under 40 years of age, while the number of male physicians is greater than the number of female physicians, the percentages in both of their gender groups shows there is almost double the percentage of female physicians compared to male physicians (23.5% vs. 13%) as shown below in Figure 7. For physicians ages 70 years and older, there are almost 10% more male physicians actively practicing than female physicians of the same age group.

**Figure 7: 2021–22 Physicians by Gender in Each Age Group**  
n = 57,532



In the last ten years, the number of female physicians has shown a 64% increase, while the percentages within each age group have not varied more than 4% (see Figure 8). Three age groups have increased their percentage, two have decreased, and one has remained consistent. The percentage who are younger than 40 years old has increased 3.1%. The percentage with ages 40 through 49 years old has decreased 2.2%. The percentage of female physicians who are ages 50 through 59 years old has decreased 4%. The percentage who are ages 60 through 69 years old increased 3.5% from a low in 2014–15 to a high in 2020–21. The percentage who are ages 70 through 79 years old increased 1% from a low in 2012–13 to a high in 2020–21. The percentage of female physicians ages 80 and older has remained consistent in the last 10 years at either 0.4% or 0.5%.

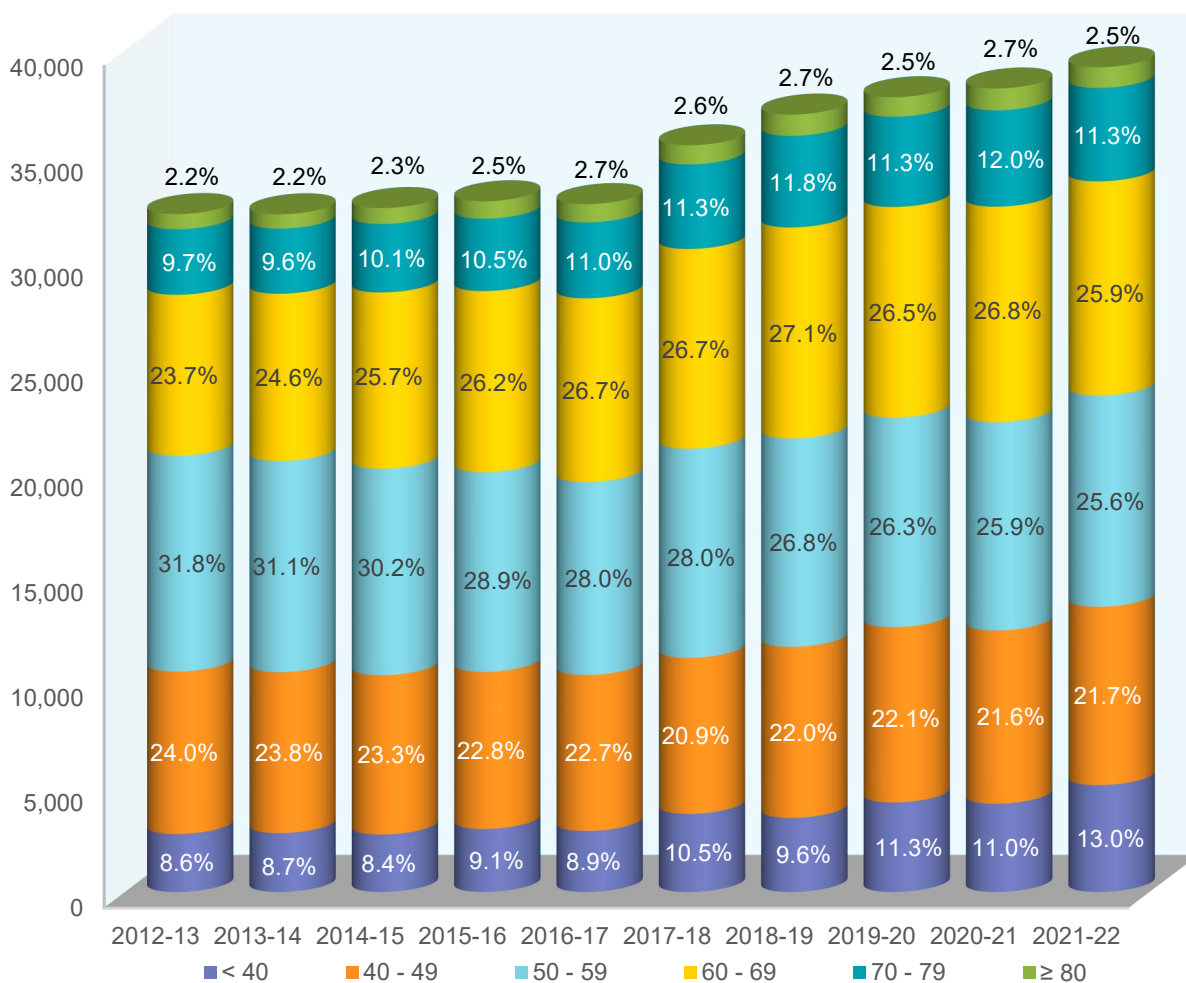
**Figure 8: Ten-Year Trend of Female Physicians by Year in Each Age Group**





In the last ten years, the number of male physicians has shown a 21.6% increase, while the percentages within each age group have not varied more than 6.2%. Three age groups have increased their percentage, two have decreased, and one has remained consistent. The percentage who are younger than 40 years old has increased 4.4%. The percentage are ages 40 through 49 years old decreased 3.1% from 2012–13 to a low in 2017–18. Since 2017–18 that percentage has been fluctuating, within a 0.5% range. The percentage of male physicians who are ages 50 through 59 years old has decreased 6.2%. The percentage who are ages 60 through 69 years old increased 3.4% from a low in 2012–13 to a high in 2018–19. The percentage who are ages 70 through 79 years old increased 2.4% from a low in 2013–14 to a high in 2020–21. The percentage of male physicians ages 80 and older has remained consistent in the last 10 years at between 2.2% to 2.7% (see Figure 9).

**Figure 9: Ten-Year Trend of Male Physicians by Year in Each Age Group**



## Physician Workforce Practice Characteristics

### Primary Specialty

The top three specialty groups—internal medicine, family medicine, and pediatrics—comprise just over half of the total physician workforce. Figure 10 shows the distribution of physicians by 21 specialties at the physician's primary office location. (See Appendix C for information regarding physician specialty by county.)

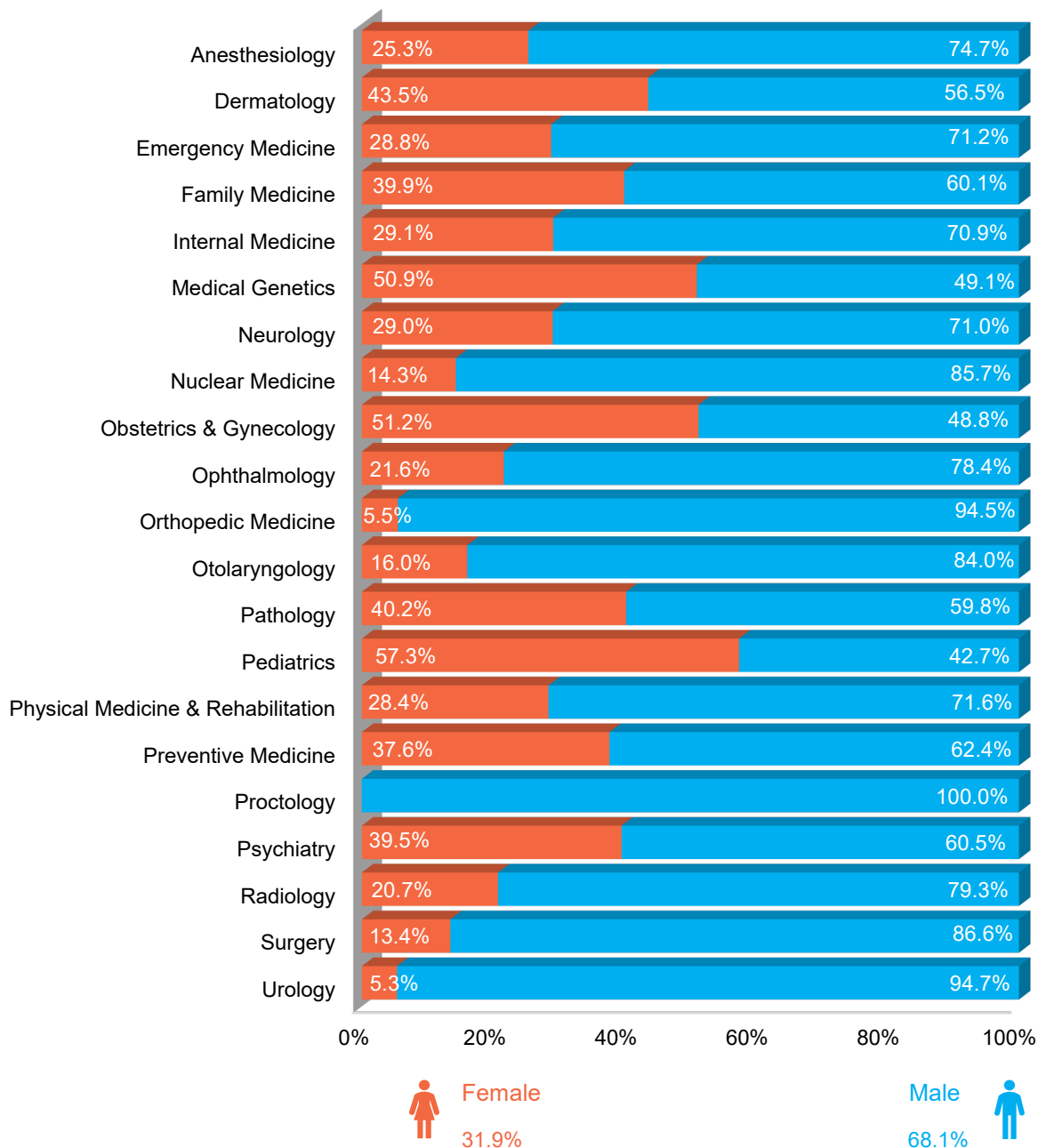
**Figure 10: 2021–22 Physicians by Primary Specialty**

Primary Specialty	Number	Percentage	Percentage Increase from 2020–21
Internal Medicine	16,011	28.0%	4.4%
Family Medicine	8,386	14.7%	5.5%
Pediatrics	4,550	8.0%	3.2%
Surgery	4,365	7.6%	5.6%
Emergency Medicine	3,524	6.2%	7.5%
Anesthesiology	3,512	6.1%	4.9%
Radiology	3,192	5.6%	6.1%
Obstetrics & Gynecology	2,611	4.6%	4.4%
Psychiatry	2,471	4.3%	6.0%
Neurology	1,437	2.5%	5.7%
Ophthalmology	1,378	2.4%	2.1%
Orthopedic Medicine	1,175	2.1%	2.3%
Dermatology	1,155	2.0%	6.6%
Pathology	958	1.7%	3.9%
Physical Medicine & Rehabilitation	756	1.3%	8.5%
Otolaryngology	733	1.3%	2.9%
Urology	529	0.9%	3.5%
Preventive Medicine	314	0.5%	6.8%
Medical Genetics	58	0.1%	13.7%
Nuclear Medicine	49	0.1%	-5.8%
Proctology	2	0.0%	-50.0%
<b>TOTAL</b>	<b>57,166<sup>1</sup></b>	<b>100%</b>	<b>4.9%</b>

<sup>1</sup> This table does not include the 896 physicians who did not answer this question.

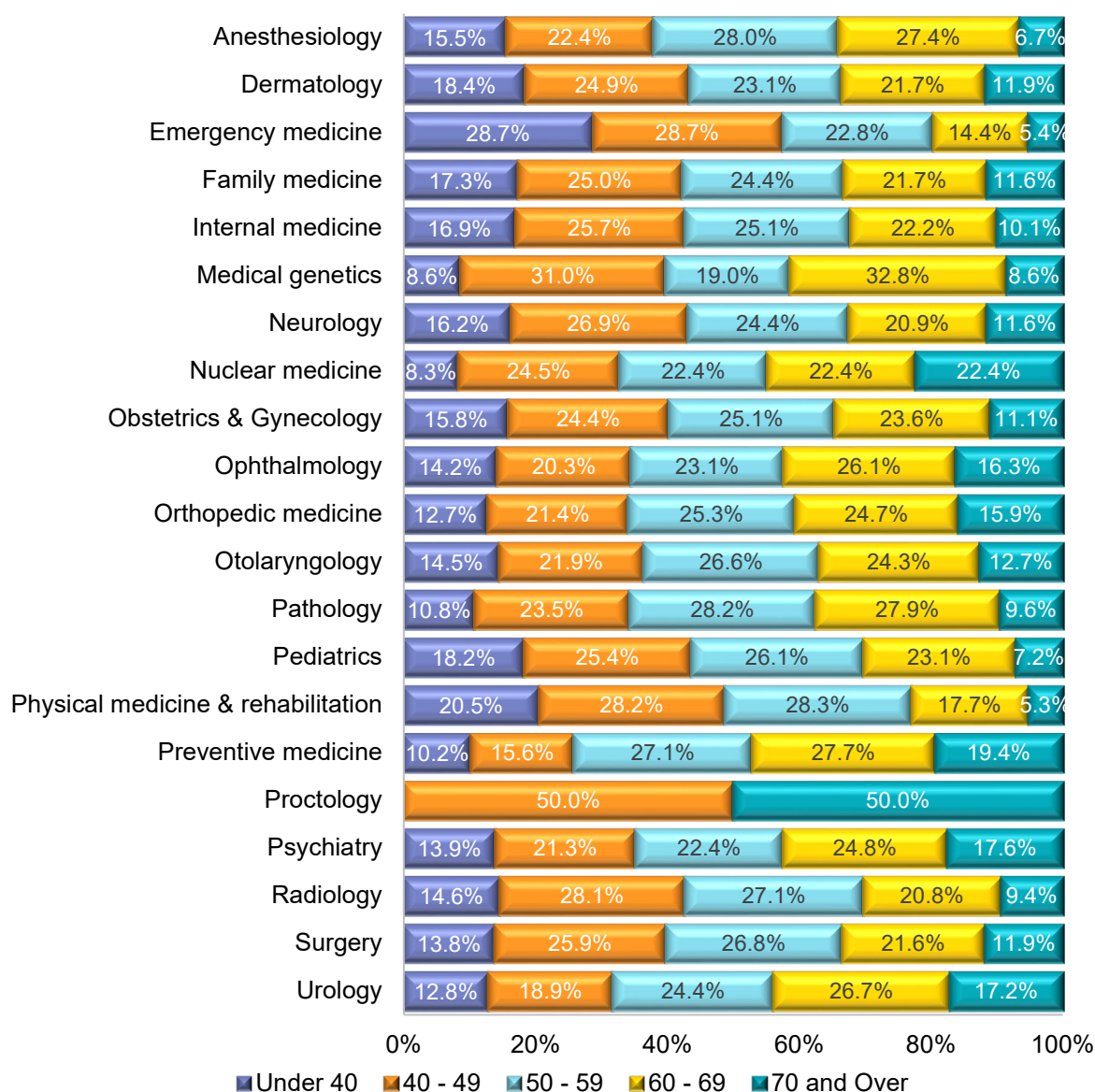
When specialties are analyzed by gender and compared to the total composition, the percentage of practicing female physicians meets or exceeds the state average (31.9%) for eight specialties (see Figure 11). More females than males practice pediatrics (57.3%), obstetrics and gynecology (51.2%), and medical genetics (50.9%). Males comprise the greatest percentage of proctologists (100%), urologists (94.7%), and orthopedic specialists (94.5%).

**Figure 11: 2021–22 Physicians by Specialty and Gender**



When specialties are analyzed by age, the specialties with the largest percentage of older physicians are clearly delineated. The specialties with the largest percentage of physicians ages 60 and older are proctologists (50%), preventive medicine (47.1%) nuclear medicine (44.9%), , urology (43.9%), ophthalmology (42.4%), and psychiatry (42.4%). The specialties with the largest percentage of physicians under age 40 are emergency medicine (28.7%), physical medicine & rehabilitation (20.5%), dermatology (18.4%), and pediatrics (18.2%), as shown in Figure 12. Nuclear medicine had the same percentage of physicians ages 50–59, 60–69, and 70 and over (22.4%).

**Figure 12: 2021–22 Physicians by Specialty and Age Range**



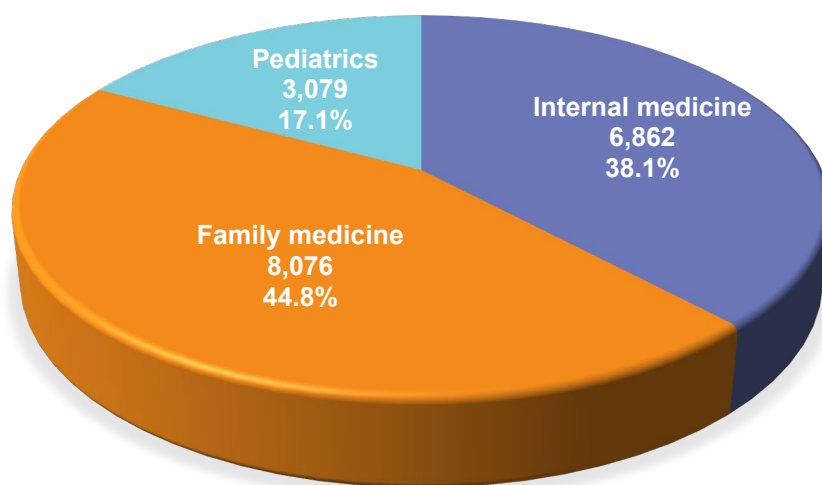
Physicians ages 70 and older predominantly practice internal medicine (49.6%), family medicine (38.1%), and psychiatry (20.1%). The five specialties the female physicians ages 70 and older practice are family medicine (22.7%), internal medicine (22.0%), psychiatry (13.6%), pediatrics (12.6%), and obstetrics and gynecology (5.4%). For male physicians ages 70 and older the most common specialties are internal medicine (27.5%), family medicine (15.4%), surgery (9.5%), psychiatry (6.4%) and radiology (5.1%).

Less than 1% of physicians reported that they were planning on changing their specialty in the next five years. The most common reasons given were Other (37.8%), Compensation (24.6%), and Family (22.4%). The primary reasons listed as other were burnout, disillusionment, quality of life and stress.

### Primary Care

Primary care physicians are defined as those practicing in the areas of general internal medicine, family medicine and general pediatrics.<sup>20</sup> Primary care physicians make up less than one-third of the active physician workforce (31.5% or 18,017). Just over half (55.2%) of primary care physicians specialize in general internal medicine or general pediatrics (see Figure 13).

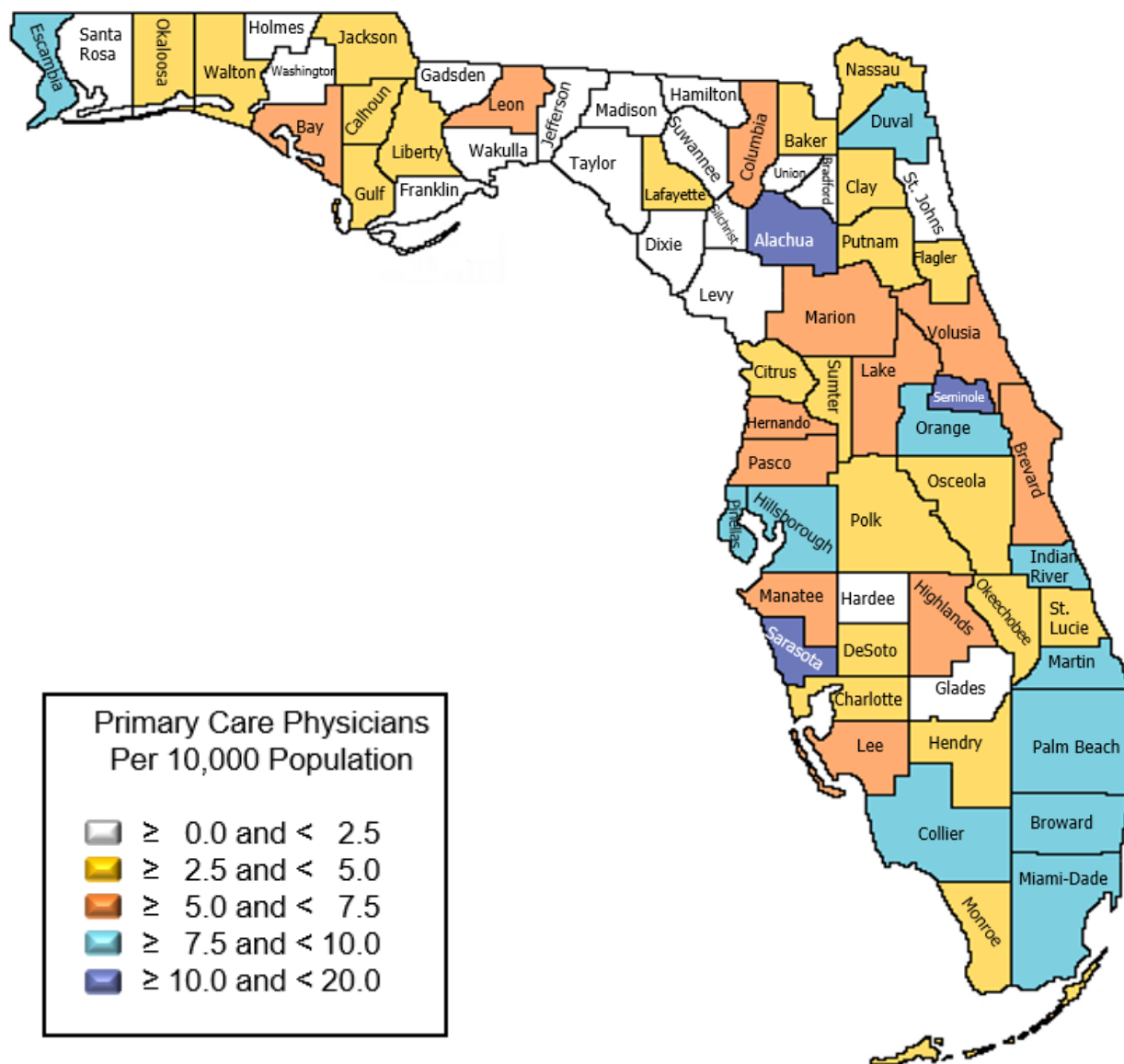
**Figure 13: 2021–22 Primary Care Physicians**  
n = 18,017



<sup>20</sup> Results for general internal medicine are based on respondents who selected 2 of the 22 internal medicine subspecialty codes (0500-0501). Family medicine includes subspecialty codes (0400–0405 and 0407–0408). Pediatrics includes subspecialty codes (1400-1401).

The counties with the largest number of primary care physicians per 10,000 population are Alachua (16.3), Seminole (13.8), and Sarasota (11.4). Figure 14 illustrates the per capita distribution of practicing primary care physicians at the county level.<sup>21,22</sup> The statewide average is 7.2 primary care physicians per 10,000 population.

**Figure 14: 2020–21 Primary Care Physicians by County**



<sup>21</sup> There were 6,698 physicians whose survey response county did not match the county of their official practice location. Survey response counties were used on the map.

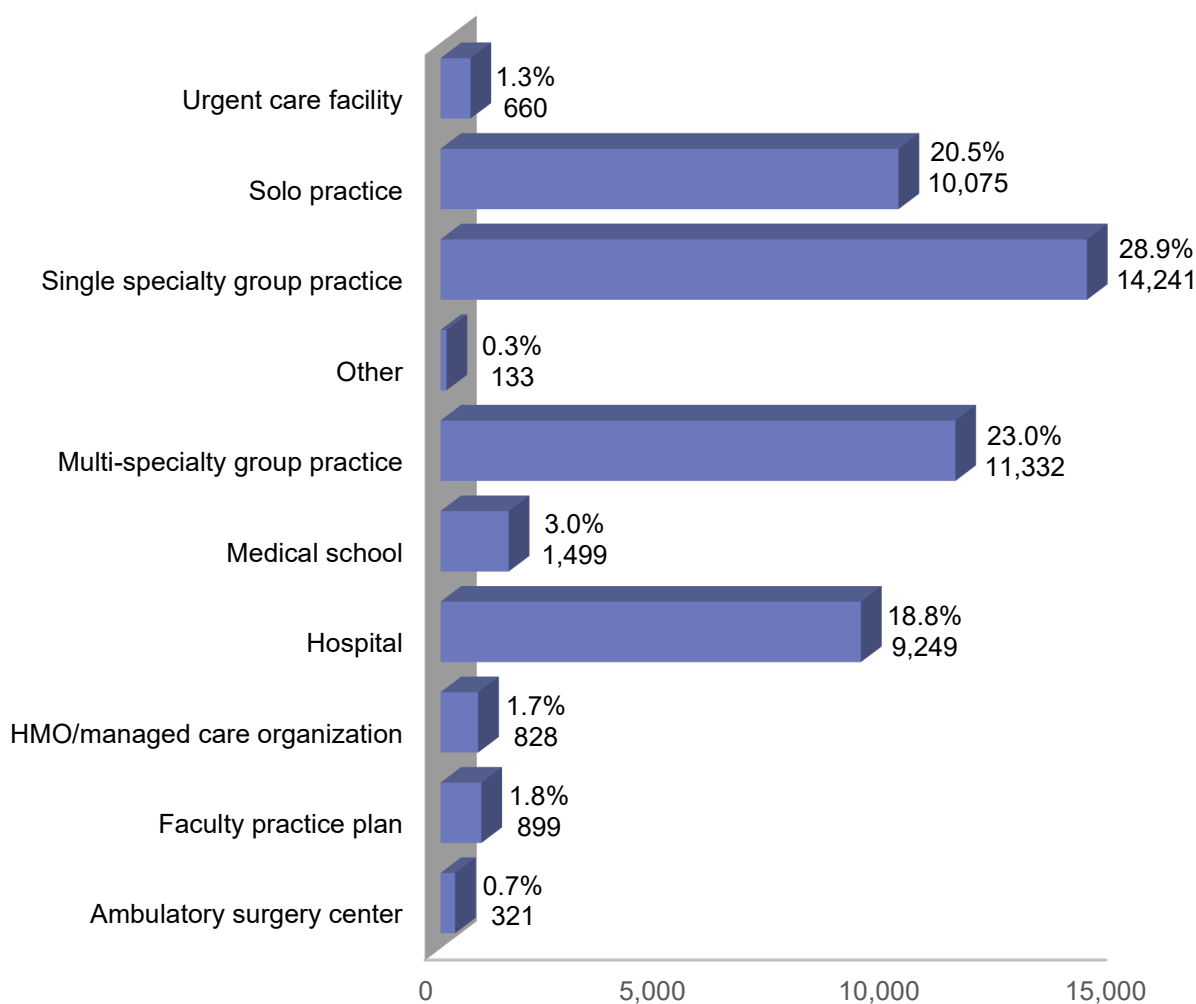
<sup>22</sup> Population data from the Office of Economic & Demographic Research, April 1, 2022 Florida County Population Estimates ([www.edr.state.fl.us/Content/population-demographics/data/index-floridaproducts.cfm](http://www.edr.state.fl.us/Content/population-demographics/data/index-floridaproducts.cfm))

## Practice Setting

The four most common practice settings for physicians are single specialty group practice, multi-specialty group practice, solo practice and hospital (see Figure 15).

**Figure 15: 2021–22 Physicians by Practice Setting**

n = 49,237



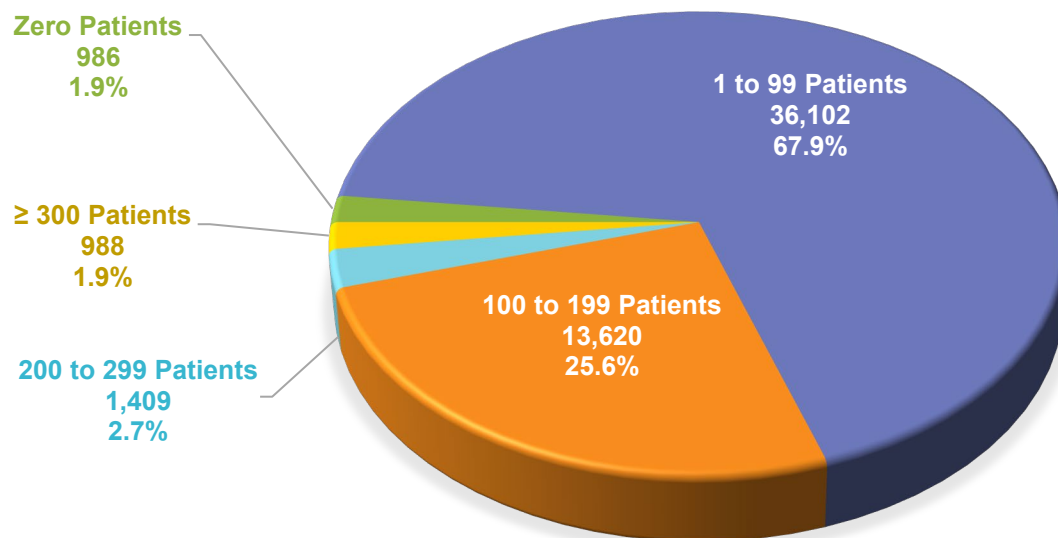
The survey asked physicians what year they started practicing at their current location. The answers ranged from 1953 to 2022. Almost 16% responding that they started practicing at their current location in either 2019 or 2020.<sup>23</sup> Just over one quarter (27.8%) of physicians providing direct patient care started at their current location in the last five years and over half (53.3%) in the last ten years.

<sup>23</sup> 4,400 physicians stated they started at their current location in 2019 and 3,461 started at their current location in 2020. Each year is comprised of almost 8%.

## Practice Hours

The survey asked physicians to report the average number of patients they see per week.<sup>24</sup> As shown in Figure 16, just over two-thirds of physicians reported seeing between 1 and 99 patients per week and just over one quarter reported seeing between 100 and 199 patients per week. For physicians who reported seeing a weekly average number of patients between 1 and 299, the average number seen was 72.

**Figure 16: 2021–22 Average Number of Patients per Week at Primary Practice Location**  
n = 53,105

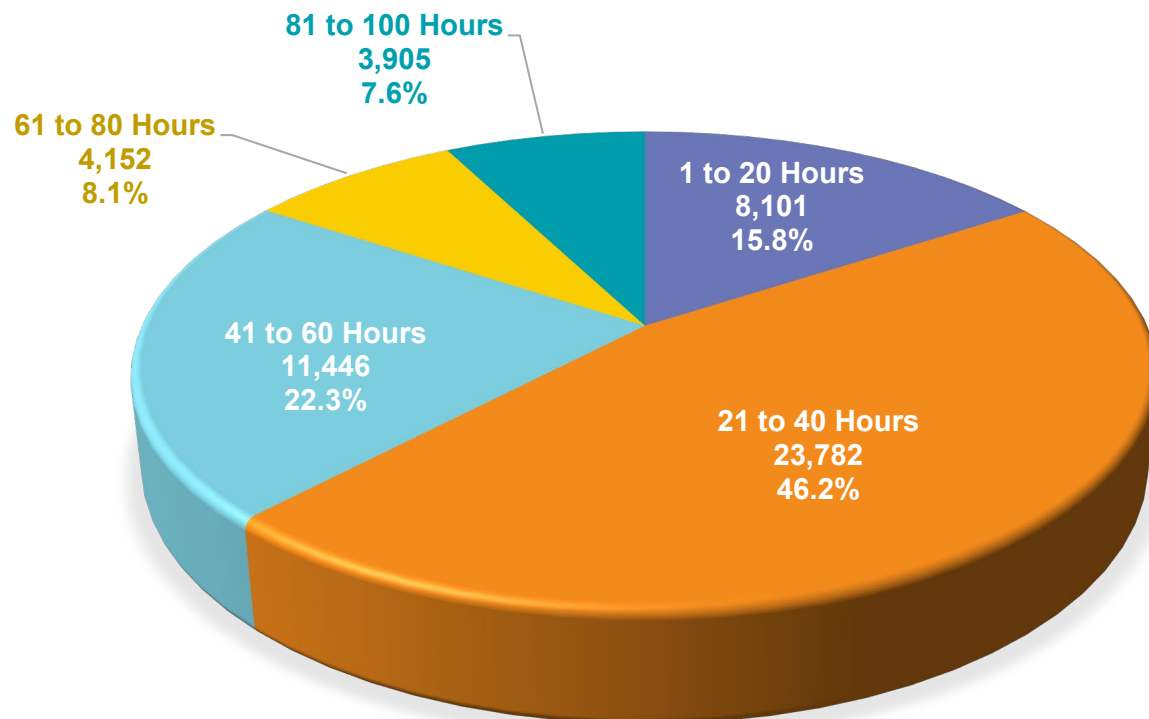


<sup>24</sup> There were 4,957 physicians who did not respond (8.5%).



Most physicians spend 60 hours or less per week on direct patient care (84.3% or 43,329) as shown in Figure 17. Physicians who reported spending between one and 100 hours per week on patient care provide an average of 43 hours of direct patient care per week.

**Figure 17: 2021–22 Practicing Physicians Weekly Hours Spent Providing Patient Care**  
n = 51,386

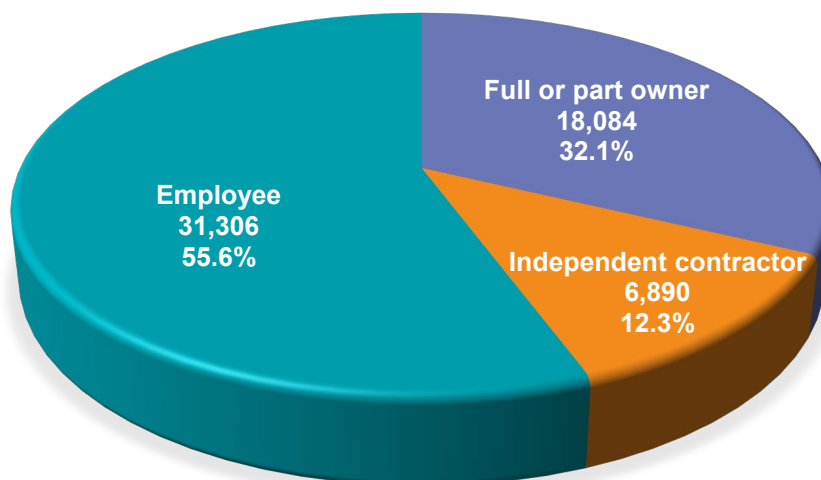


Almost 92% of physicians providing direct patient care reported spending between one and 20 hours on administrative matters, and 6.6% reported spending between 21 to 40 hours on administrative matters. Just over 93% of physicians providing direct patient care reported spending between 1 to 20 hours on research and teaching, while 5.4% reported spending between 21 to 40 hours on research and teaching.

## Practice Ownership

Physicians were asked about the ownership of the practice where they worked. Over half of the physicians reported they are employees, as shown in Figure 18.

**Figure 18: 2021–22 Physician Employment Ownership**  
n = 56,280



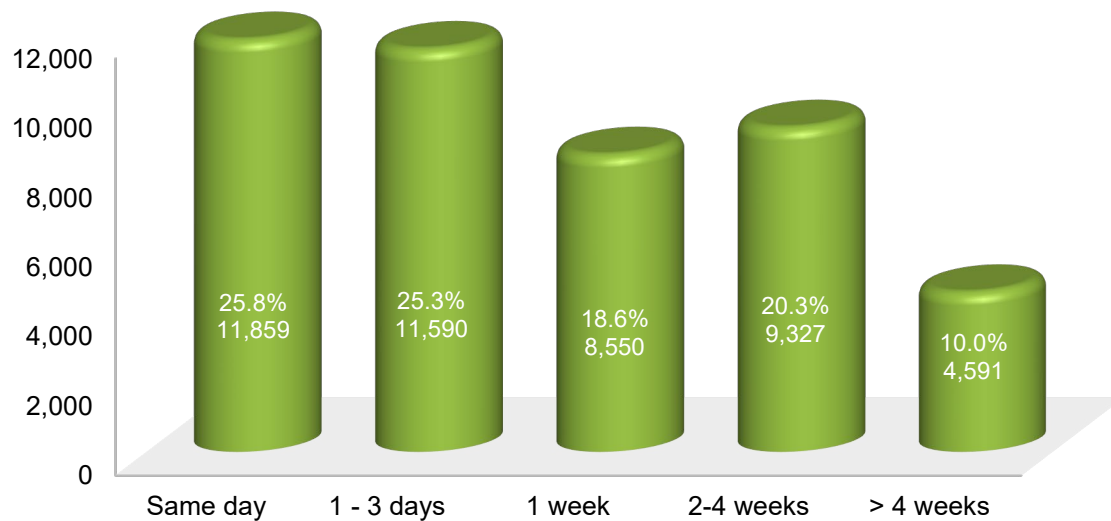
Physicians who reported being employed by a hospital were asked if they were employed directly by the hospital or if the practice was owned by a hospital. Of the 7,949 physicians who responded, over half (58.7%) of them reported they were employed directly by a hospital, 20.6% responded their practice is owned by a hospital, and 20.7% did not know. Of the 1,720 physicians who reported they were independent contractors who worked in a hospital, 39.8% contract directly with the hospital, 15.3% contract with a practice owned by the hospital, and the remaining 44.9% did not know. Almost 90% of the physicians whose practice is owned by a hospital reported they work in a group plan—47.2% in a multi-specialty group practice and 42.4% in a single specialty group practice.

Of physicians who reported working for a faculty practice plan, almost three-quarters (70.6%) work in a multi-specialty group, with the remaining 29.4% working in a single specialty practice. There were 11,126 physicians who reported they did not work for a hospital, faculty practice plan, or as a sole practitioner. Of these, 72.8% reported their practice is wholly owned by one or more physicians in the practice.

### Practice Wait Times

Physicians were asked “If you are taking new patients, what is the typical wait time for a new patient appointment?” Just over three-quarters (79.1%) responded they are taking new patients and noted the wait time for those new patient appointments (see Figure 19). Slightly under one-quarter (20.9%) either responded they are not taking new patients, or they did not respond.

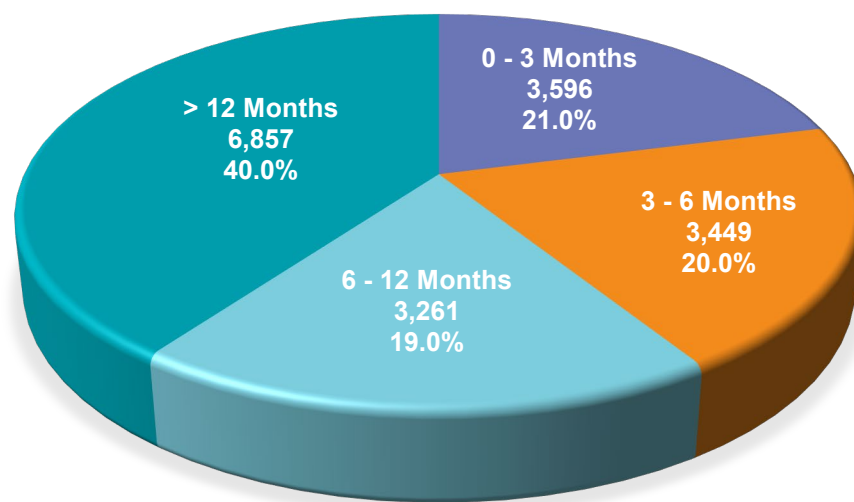
**Figure 19: 2021–22 New Patient Appointment Wait Times**  
n = 45,917



### Practice New Recruitment

One third (33.4%) of physicians reported actively recruiting for a new physician in the responding physician's specialty. As shown in Figure 20, of those recruiting, 40% reported they have been recruiting for over a year. The top three factors limiting their recruitment efforts are finding adequately qualified candidates in their specialty (34.4%), meeting salary/financial requirements for new hires (27.4%), and recruiting to their locations (17.7%).

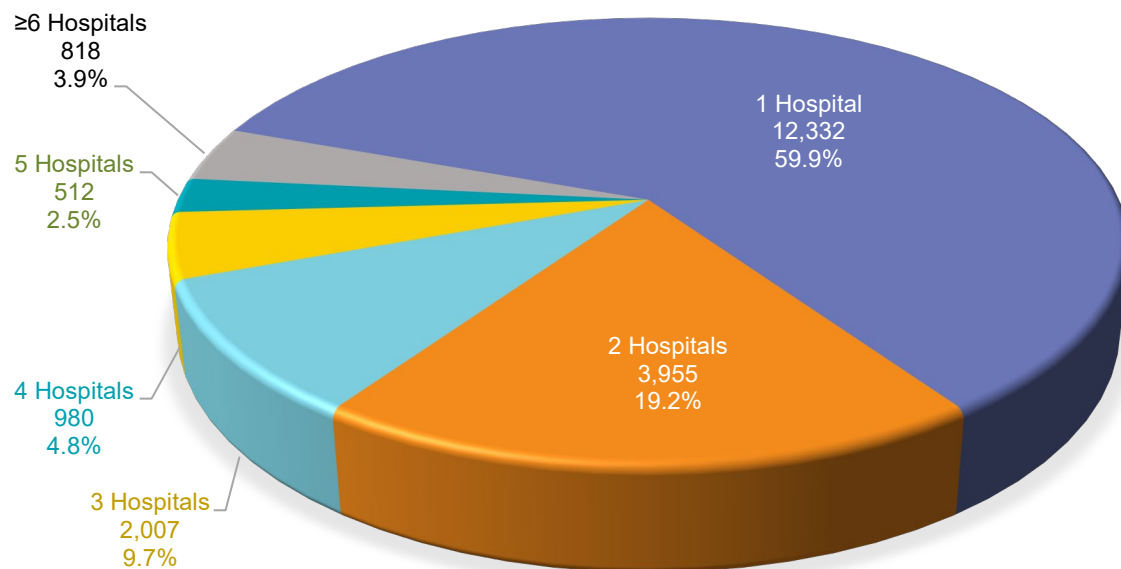
**Figure 20: 2021–22 New Physician Recruitment Time**  
n = 17,163



## Hospital Practice

Almost half (46.8%) of all physicians providing patient care stated they provided hospital services or had on-call duties. Of the 27,153 physicians who stated that they provide hospital services or on-call services, over three-quarters (20,604) responded that they provide on-call emergency room coverage.<sup>25</sup> Of these physicians, over half (59.9%) responded that they provide on-call emergency room coverage at only one hospital (see Figure 21).

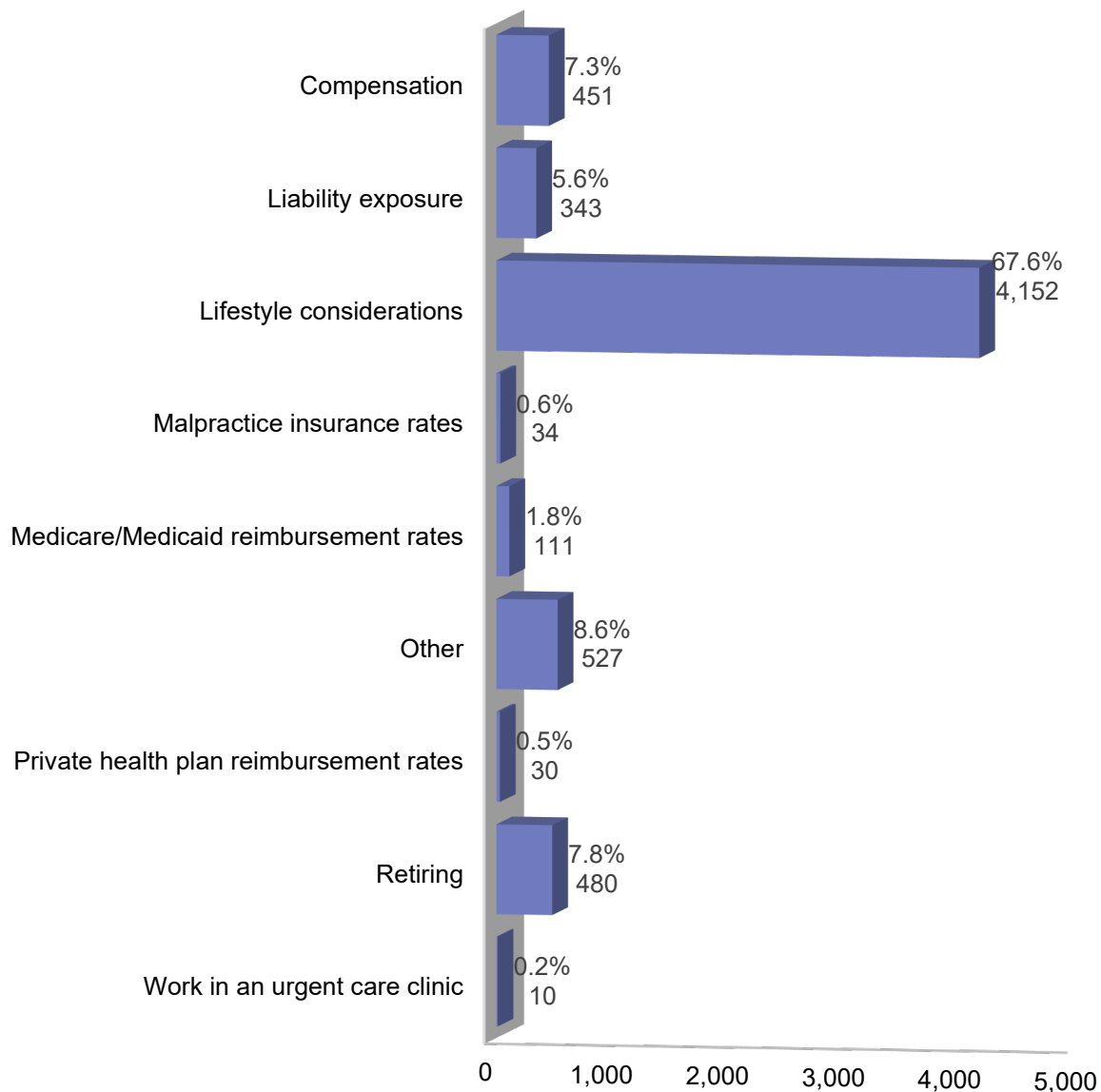
**Figure 21: 2021–22 On-Call Emergency Room Coverage**  
n = 20,604



<sup>25</sup> Of the 27,153 who stated they provide hospital and on-call services, 5,273 stated they provided on-call emergency room coverage at zero hospitals and 1,276 did not respond to this question. The response of zero hospitals was interpreted as the physician does not provide on-call emergency room coverage.

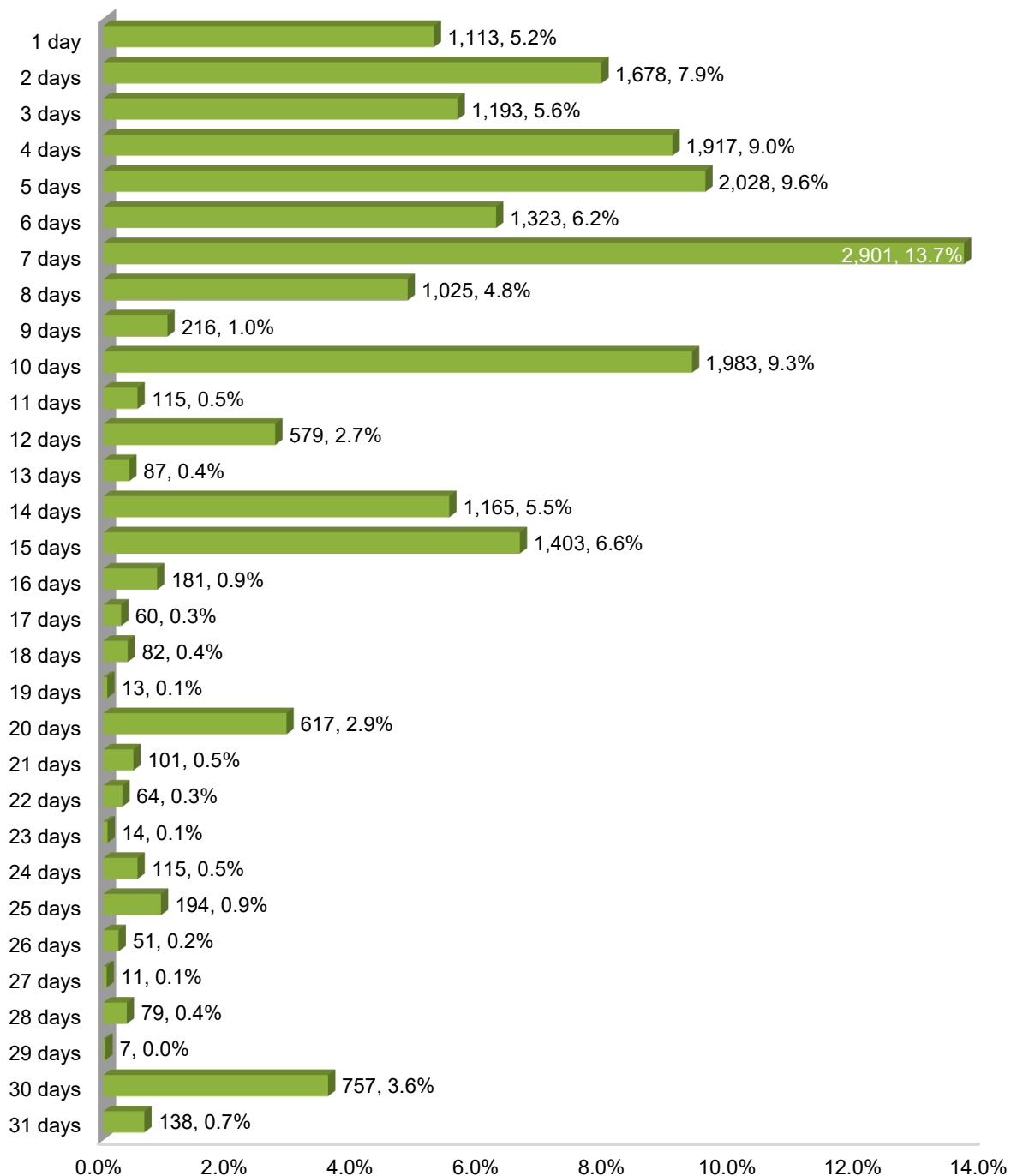
Of the physicians that provide on-call emergency room coverage, over half (53.5%) stated that they are not decreasing their on-call days. The most common reason cited for decreasing on-call emergency room coverage was lifestyle considerations (see Figure 22).

**Figure 22: 2021–22 Physicians Decreasing On-Call Emergency Room Coverage**  
n = 6,138



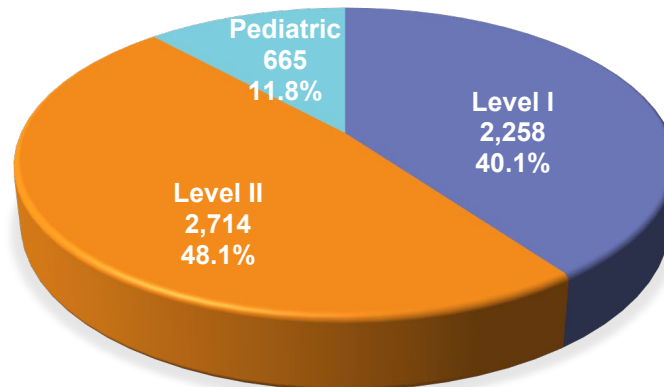
Physicians were asked “On average over the past year, how many total days per month do you take emergency calls?” The most common response was 7 days (13.7%). The next most common responses were 5 days (9.6%), 10 days (9.3%), and 4 days (9%), as shown in Figure 23.

**Figure 23: 2021–22 Days Physicians Take Emergency Calls**  
n = 21,210



Over three-quarters (78.3%) of physicians who practice at a hospital provide services at trauma centers or attend to trauma patients. Of the 5,637 who do, almost 90% work at a Level I or Level II trauma center, as shown in Figure 24.

**Figure 24: 2021–22 Physicians at Trauma Centers**  
n = 5,637



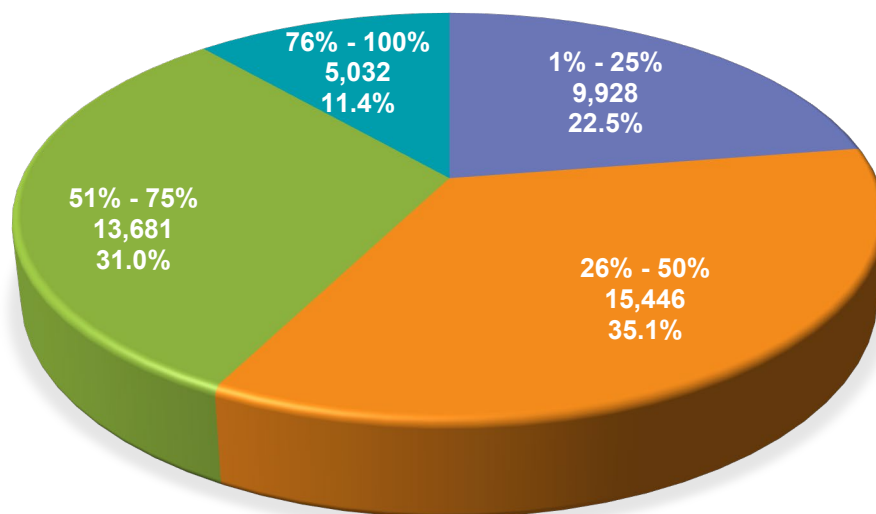


## Medicare Patients

According to the 2020 Medicare Enrollment Dashboard there were 62.8 million Medicare enrollees nationally with 4.7 million in Florida. Thus, Florida has 7.4% of the national Medicare enrollment. According to the 2020 census, Florida has 6.5% of the nation's population.<sup>26</sup> As of March 2022, Florida has almost 4.9 million Medicare enrollees, which is a 3.7% increase from 2020.

Just over three-quarters (75.9%) of practicing physicians responded that they accepted Medicare for patients in their practice. Of the 44,087 physicians who responded with a percentage of their practice's patients with Medicare, two-thirds (29,127) responded that between 26% and 75% of their practice is composed of Medicare beneficiaries (see Figure 25).

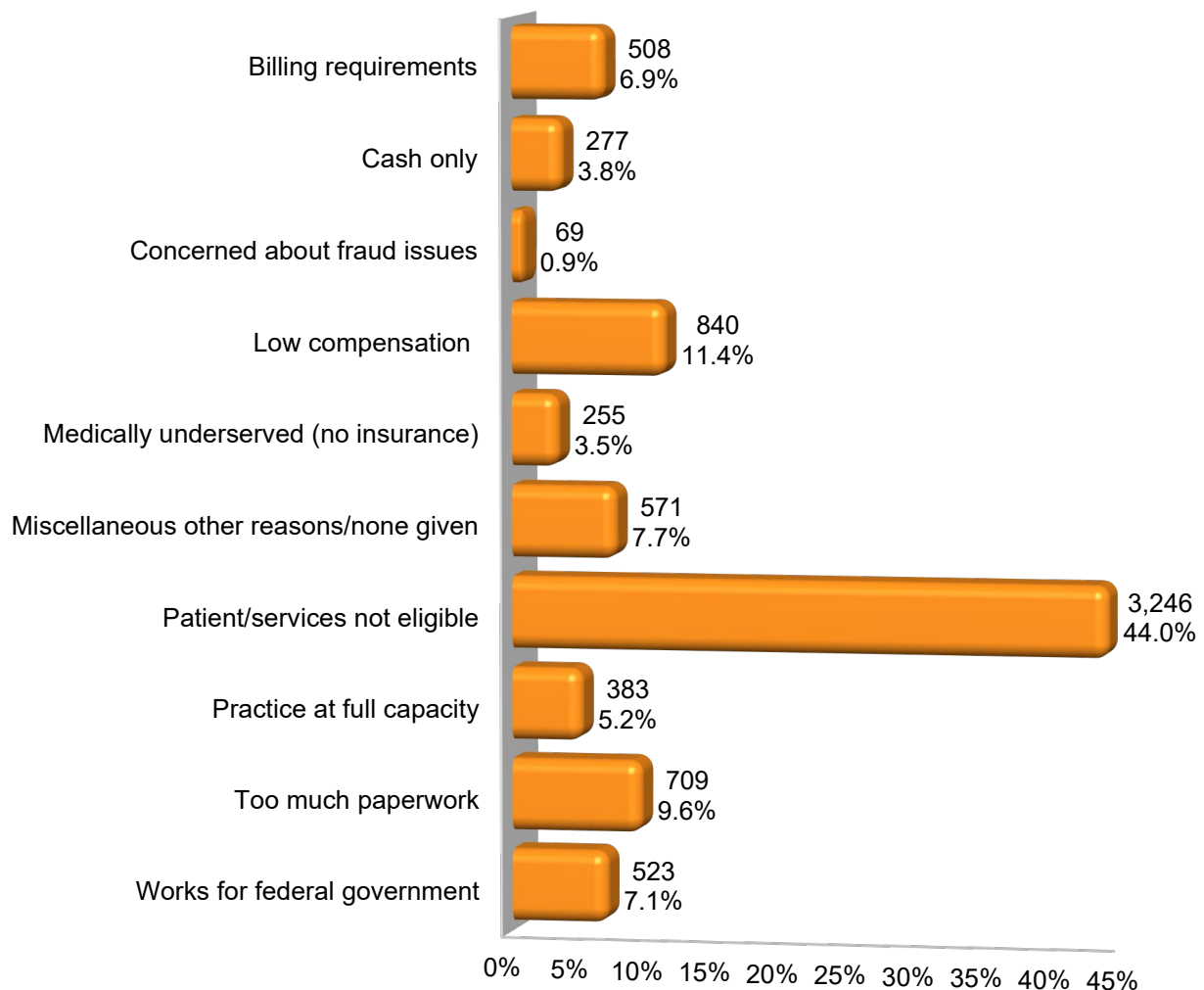
**Figure 25: 2021–22 Patients with Medicare as a Percentage of Practice**  
n = 44,087



<sup>26</sup> This information is published on the Centers for Medicare and Medicaid Services' Medicare Enrollment Dashboard on their website ([www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMSProgramStatistics/Dashboard.html](https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/CMSProgramStatistics/Dashboard.html)), (<https://data.cms.gov/summary-statistics-on-beneficiary-enrollment/medicare-and-medicare-reports/medicare-monthly-enrollment>) and the Census Bureau Quick Facts dashboard (<https://www.census.gov/quickfacts/fact/table/FL,US/PST045221>).

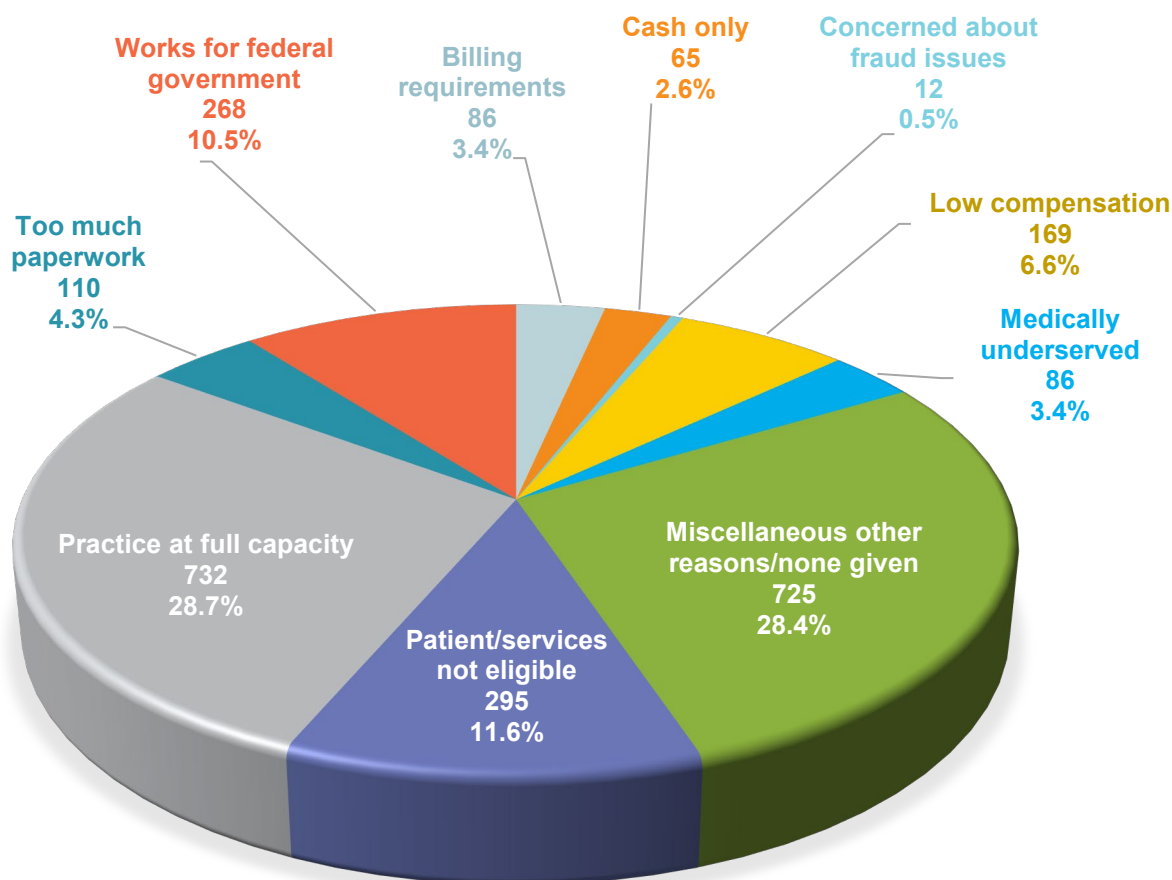
Just under 25% of physicians do not see patients with Medicare, with the most common reason being either their patients or the services they provide are not eligible for Medicare reimbursement (see Figure 26). Some services not covered by Medicare include cosmetic surgery, eye exams for glasses/contacts, and alternative medicine. Some patients not eligible for Medicare include pediatrics and military personnel.

**Figure 26: 2021–22 Reasons Why Physicians Do Not Accept Medicare**  
n = 7,381



Almost 95% (43,613) of practicing physicians reported they accept new patients with Medicare. Of the 2,548 physicians who selected a reason for why they do not accept new patients with Medicare, the most frequently selected was that their practice is at full capacity (see Figure 27).

**Figure 27: 2021–22 Why Physicians Are Not Accepting New Patients with Medicare**  
n = 2,548



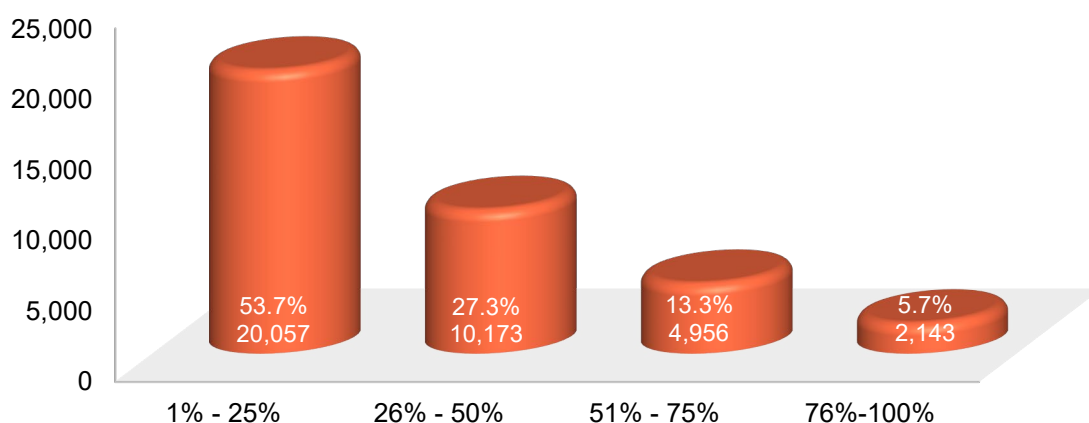
Of physicians who see patients with Medicare, when asked if they limit their practice in any way for these patients, the majority (97.3%) stated they do not. For the small percentage who reported limiting their practice, the two main reasons were: “limit number of new Medicare patients” (44.9%) and “other” (52.6%). The four most common reasons physicians chose “other” were:

- “Limited to certain Medicare Advantage/HMO plans”
- “Limited to fee-for-service Medicare”
- “Limited to patients transitioning to Medicare from private plans”
- “Limited to specific services”

## Medicaid Patients

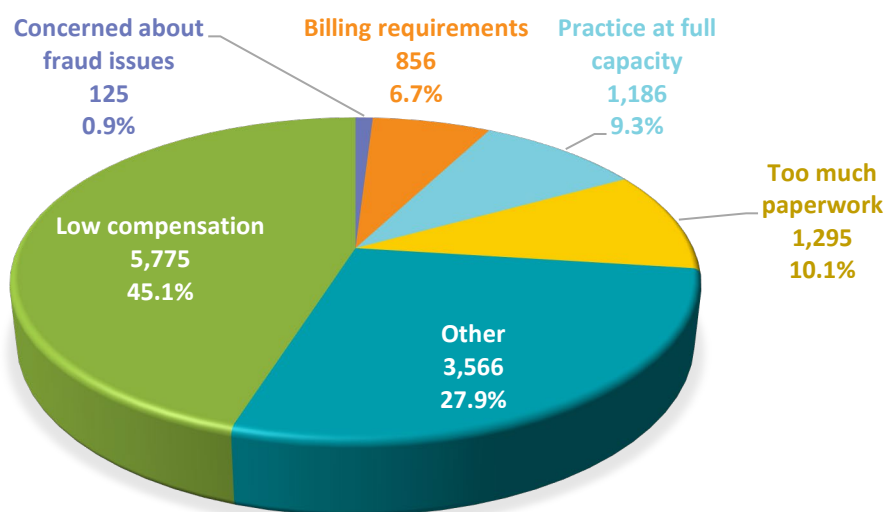
Of the physicians who responded to the question asking what percentage of their practice includes patients with Medicaid, almost two-thirds (64.3%) responded they see patients with Medicaid. Of the 37,329 physicians who have patients with Medicaid, just over half (53.7%) reported that these patients comprise less than 25% of their patient panel (see Figure 28).<sup>27</sup>

**Figure 28: 2021-22 Patients with Medicaid as a Percentage of Practice**  
n = 37,329



The reasons physicians do not take patients with Medicaid are shown in Figure 29. The most common reason selected was “low compensation” (45.1%).

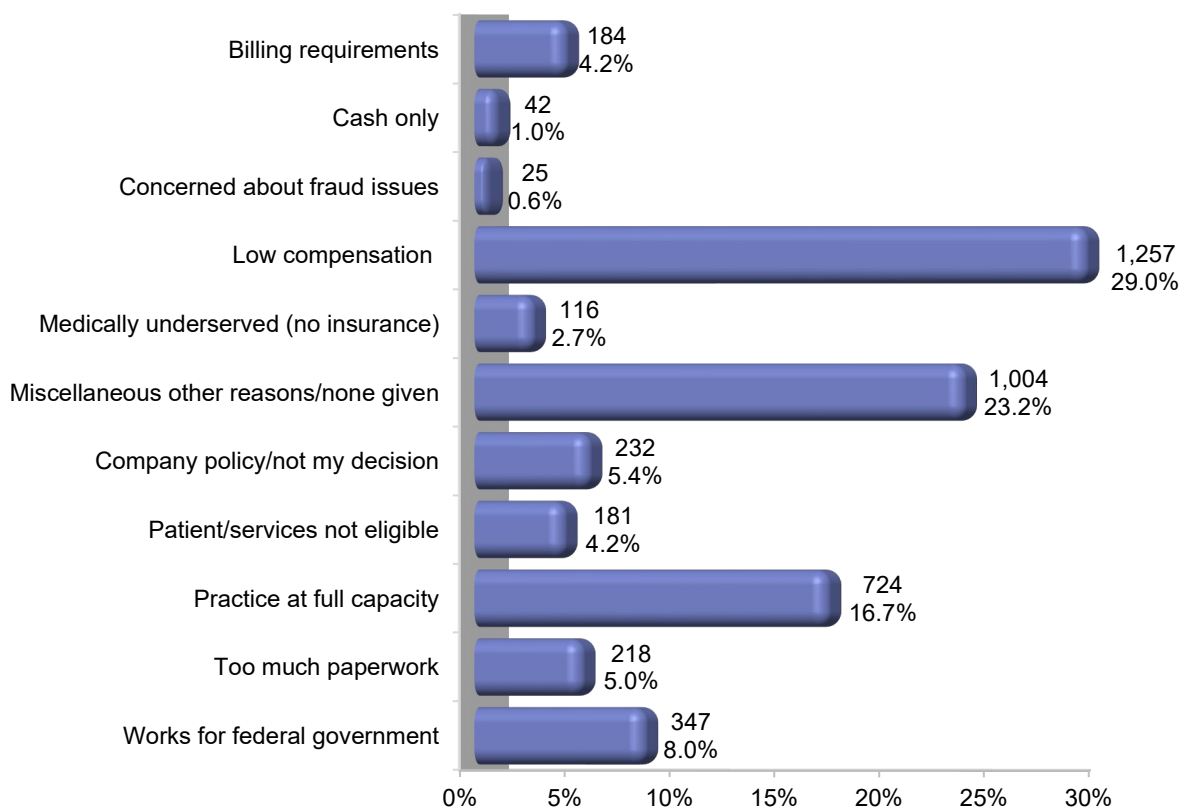
**Figure 29: 2021–22 Reasons Why Physicians Do Not Accept Medicaid**  
n = 12,803



<sup>27</sup> These percentages do not include those who chose “Other, please specify” as their response.

The percentage of Florida physicians who reported accepting new patients with Medicaid was 89.1%. The most common reason given for not accepting new patients with Medicaid was “low compensation” (29%) (see Figure 30).

**Figure 30: 2021–22 Reasons Why Physicians Who Have Patients With Medicaid Do Not Accept New Patients With Medicaid**  
n = 4,330



Of the physicians who see patients on Medicaid, when asked if they limit their practice in any way for patients on Medicaid, the majority (92.1%) stated they do not. For the small percentage who reported they limit their practice, the two main reasons were “limit number of new Medicaid patients” (52.7%) and “other” (45.4%). The five most common reasons physicians chose “other” were:

- “Limited to certain Medicaid HMO plans”
- “Limited to fee-for-service Medicaid”
- “Limited to Medicaid as secondary insurance”
- “Limited to referrals from an emergency room or other physicians”
- “Limited to specific services”

## Physicians Planning to Retire

The 2021–22 survey responses showed 9.7% (5,633) of all practicing physicians are planning to retire within the next five years, which is a 10.3% increase than in the last report cohort (9.2% or 5,107), however it is less than the 2018–19 report cohort (12.5% or 6,633). The average age of physicians planning to retire is 68. The five specialties with the most physicians indicating their intention to retire in the next five years are:

- Internal medicine (1,387 or 25.1%)
- Family medicine (797 or 14.4%)
- Anesthesiology (460 or 8.3%)
- Surgery (430 or 7.8%)
- Pediatrics (417 or 7.6%)

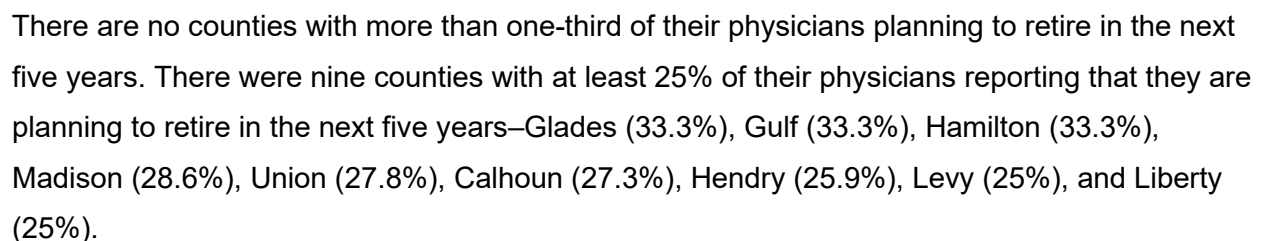
The percentage of physicians, by specialty, who are planning to retire in the next five years is shown in Figure 31.<sup>28</sup> Nuclear medicine has the highest percentage of all physicians planning to retire at 18.4% and proctology has the lowest at 0%.

**Figure 31: 2021–22 Percentage of Physicians in Each Specialty Planning to Retire in the Next Five Years**

Specialty	Number Planning on Retiring	Percentage of Only Physicians Planning on Retiring	All Physicians by Specialty	Percent of All Physicians per Specialty Planning on Retiring
Anesthesiology	460	8.3%	3,512	13.1%
Dermatology	95	1.7%	1,155	8.2%
Emergency medicine	321	5.8%	3,524	9.1%
Family medicine	797	14.4%	8,386	9.5%
Internal medicine	1,387	25.1%	16,011	8.7%
Medical genetics	6	0.1%	58	10.3%
Neurology	119	2.2%	1,437	8.3%
Nuclear medicine	9	0.2%	49	18.4%
Obstetrics & Gynecology	300	5.4%	2,611	11.5%
Ophthalmology	138	2.5%	1,378	10.0%
Orthopedic medicine	135	2.4%	1,175	11.5%
Otolaryngology	87	1.6%	733	11.9%
Pathology	122	2.2%	958	12.7%
Pediatrics	417	7.6%	4,550	9.2%
Physical medicine & rehabilitation	34	0.6%	756	4.5%
Preventive medicine	45	0.8%	314	14.3%
Proctology	0	0.0%	2	0.0%
Psychiatry	272	4.9%	2,471	11.0%
Radiology	282	5.1%	3,192	8.8%
Surgery	430	7.8%	4,365	9.9%
Urology	67	1.2%	529	12.7%
Total	5,523	100.0%	57,166	9.7%

<sup>28</sup> There were 110 physicians who plan to retire who did not list a specialty. The total percent planning on retiring by specialty adds up to 99.9% due to decimal place rounding.

### Figure 32: Physicians Planning to Retire in the Next Five Years



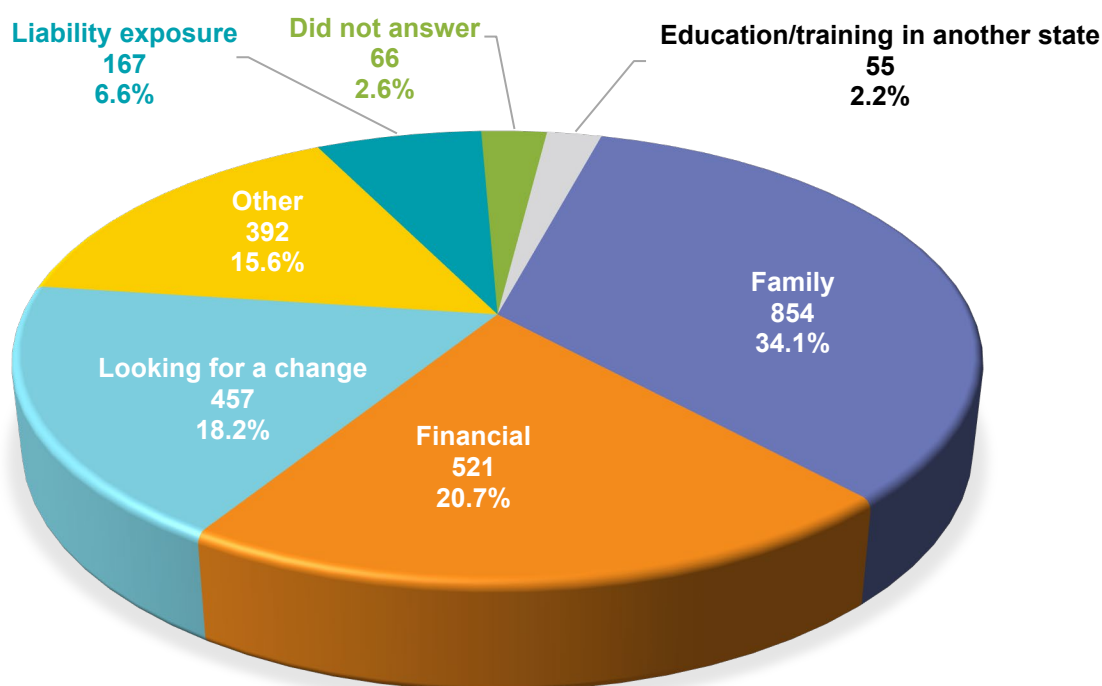
-35-

### Physicians Planning to Relocate

In the 2021–22 survey cohort, approximately 4.7% (2,512) of physicians who answered the question responded that they plan to relocate out of Florida in the next five years. As shown in Figure 33, the top three reasons for relocating are:

- “Family” (34.1%)
- “Financial” (20.7%)
- “Looking for a change” (18.2%)

**Figure 33: 2021–22 Physician Relocation Reasons**  
n = 2,512



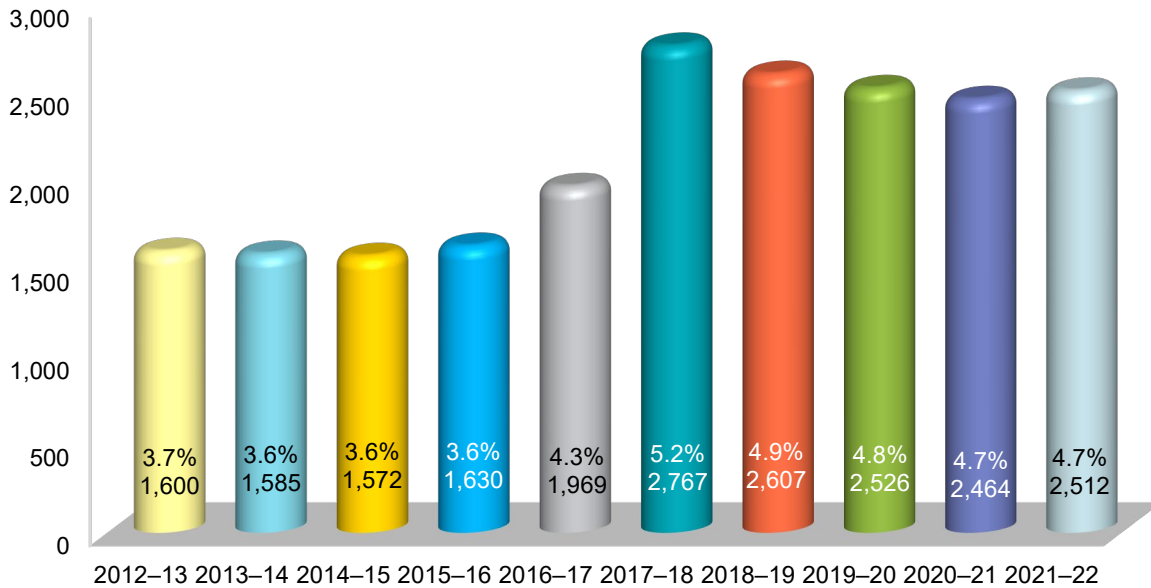
Of the 2,512 physicians indicating their intention to relocate out of state in the next five years, 2,470 also specified their specialty. The five specialties with the most physicians planning to move are:

- Internal medicine (24.3% or 601)
- Family medicine (14.5% or 358)
- Emergency medicine (11.6% or 287)
- Anesthesiology (8.3% or 204)
- Surgery (8.1% or 200)



Over the last ten years, the number of physicians planning on relocating out of Florida has increased 57% from 2012–13 to 2021–22, as shown in Figure 34. Across all ten years, family was the most common reason, with a low of 23% in 2016–17 to a high of 34% in 2021–22. The second most common reason across all years was compensation.

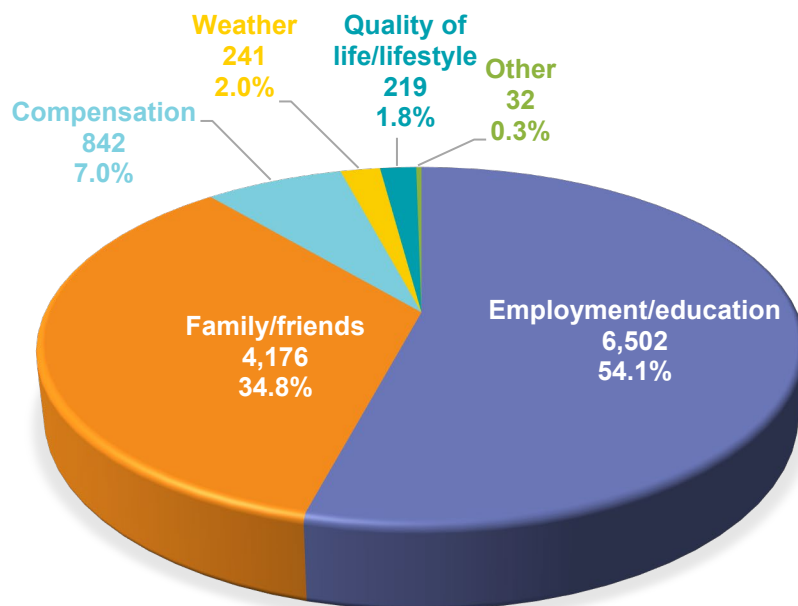
**Figure 34: Ten-Year Trend of Physicians Relocating Out of Florida**



Physicians were asked if they had relocated to Florida in the last five years and 17.4% reported they had. Of these, just over half stated it was for employment opportunities or employment after finishing their education, as shown in Figure 35.

**Figure 35: 2021–22 Reasons Physicians Relocated to Florida**

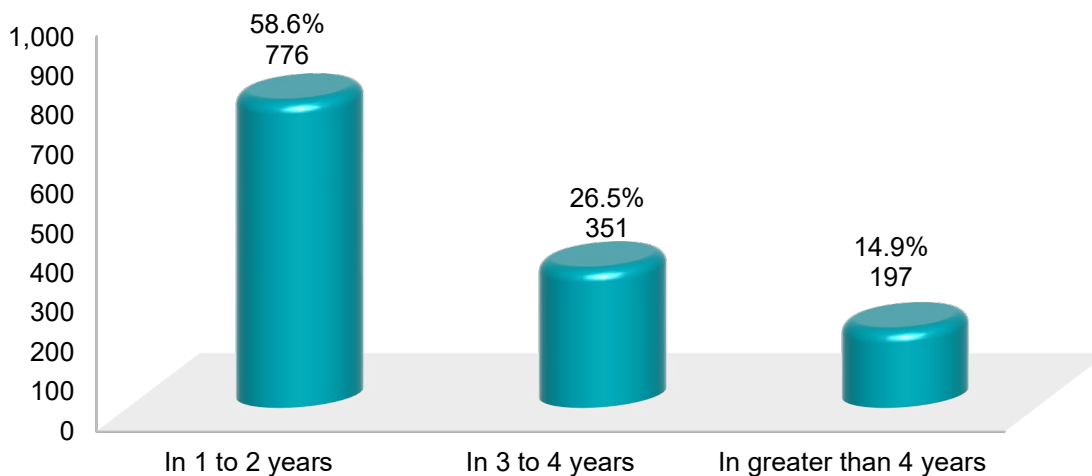
n = 12,012



There were 1,324 physicians who reported they are not providing direct patient care and do not currently reside in Florida but were planning to move to the state. The time frame in which they were planning to relocate to Florida is shown in Figure 36.

**Figure 36: 2021–22 Timeframe for When Physicians Plan to Relocate to Florida**

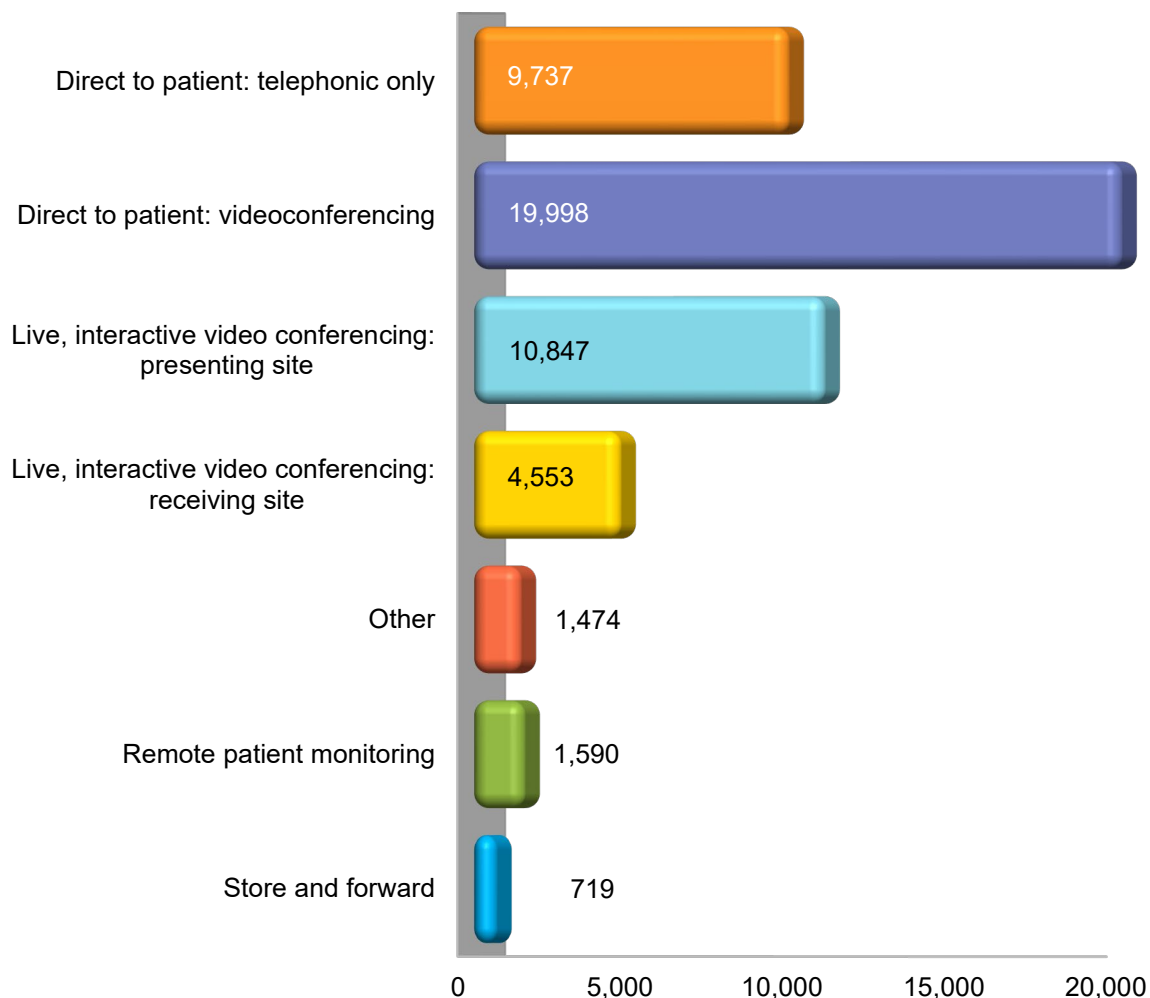
n = 1,324



## Telemedicine

Of the physicians who took the survey and answered the question, 61.8% reported using telemedicine in their practice. The percentage of physicians indicating they provide telemedicine of all physicians providing direct patient care was 55.4%. Figure 37 shows the different types of telemedicine delivery systems used, with direct video conferencing contact with patients being the most common method.<sup>30</sup>

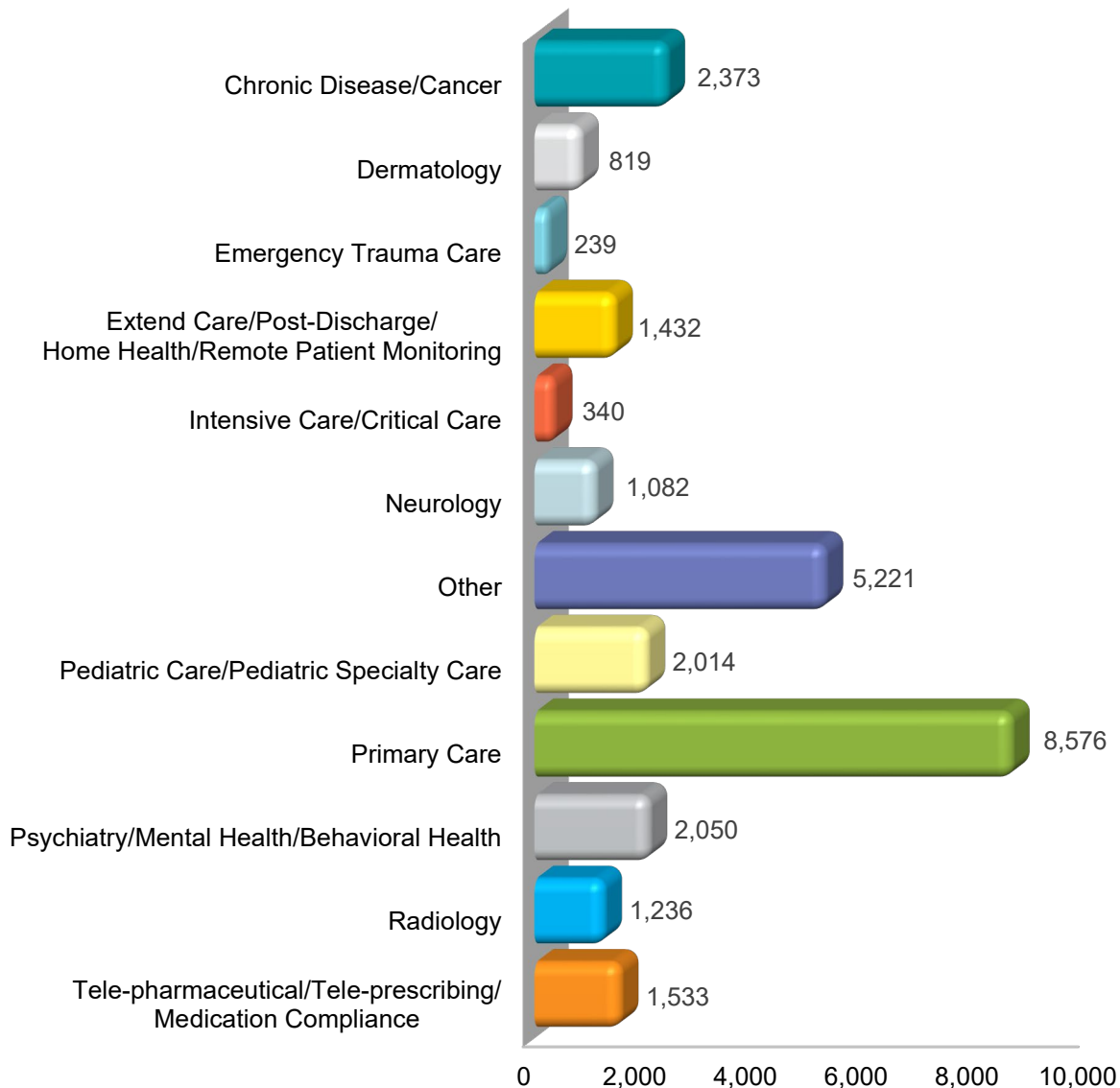
**Figure 37: 2021–22 Telemedicine Delivery Systems**  
n = 32,164



<sup>30</sup> Physicians were able to choose more than one response. There were 52,059 physicians who answered the question: 19,895 who responded “none” and the remaining 32,164 physicians’ responses are shown in Figure 37. The 32,164 physicians who did not choose “none” made 69,133 choices, which averages 2.14 choices per physician.

Physicians who use telemedicine were asked what types of patients they serve in their private practice or group practice.<sup>31</sup> As shown in Figure 38, the most common patient type was primary care (31.9%), followed by other (19.4%), chronic disease/cancer (8.8%), psychiatry/mental health/behavioral health (7.6%), and pediatric care/pediatric specialty care (7.5%).

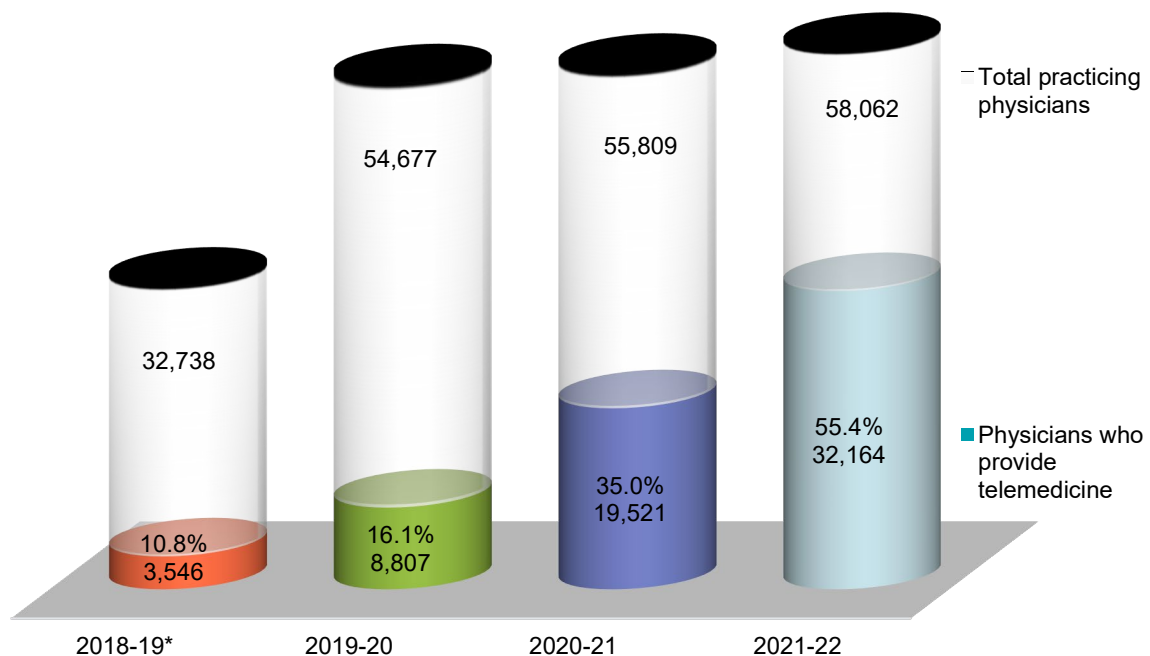
**Figure 38: 2021–22 Telemedicine Types of Patient Care**  
n = 21,881



<sup>31</sup> Physicians were able to choose more than one response: 21,881 physicians made 26,915 choices.

In 2018 the physician workforce survey was updated and questions on telemedicine were added. The 2019 report had the first data on telemedicine, which was also just before the COVID-19 outbreak. As shown in Figure 39, the percentage of physicians who provide telemedicine services has increased from 10.8% to 55.4%. From 2020 to 2022 the percentage who provide telemedicine service tripled.

**Figure 39: Four-Year Trend of Physicians Who Provide Telemedicine  
2019 to 2021–22**

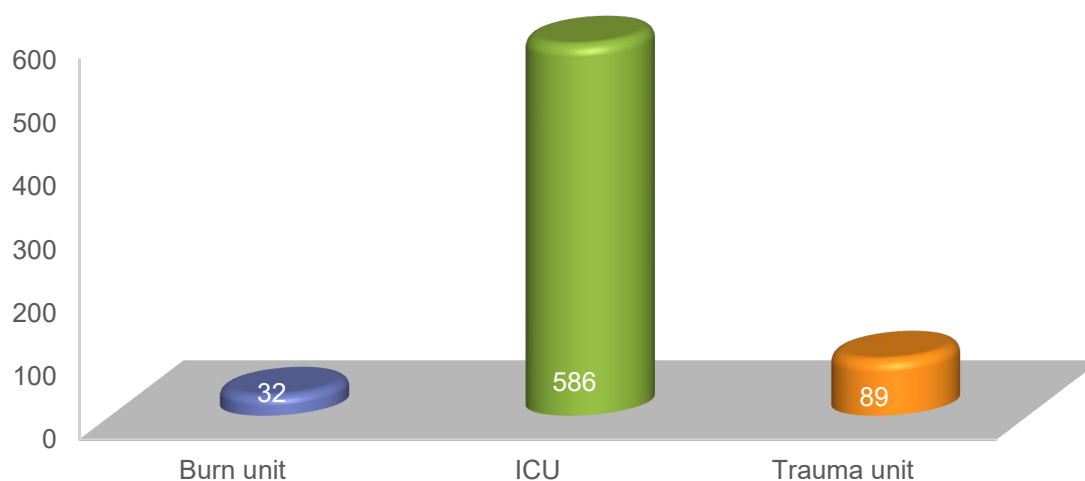


\* Telemedicine questions were added to the survey in July 2018. Only half of the physicians in the report cohort were able to respond to these questions.

### Critical Care Medicine Specialty Question

There were 742 physicians who reported their primary specialty was critical care medicine, but only 588 physicians (79.2%) responded to the specialty question. Physicians were asked to indicate the setting where they cared for patients—intensive care, trauma or burn units.<sup>32</sup> Just over 80% see patients in the intensive care unit (ICU), as shown in Figure 40.

**Figure 40: 2021–22 Critical Care Physicians by Critical Care Medicine Setting**  
n = 588



Since physicians were able to select more than one type of critical care medicine setting, the location information provided by each physician was analyzed to see where each specific physician sees patients. Of the 588 physicians who responded, 586 (99.6%) see patients in an ICU. This is either the only location where they see patients or in combination with other locations, as shown in Figure 41.

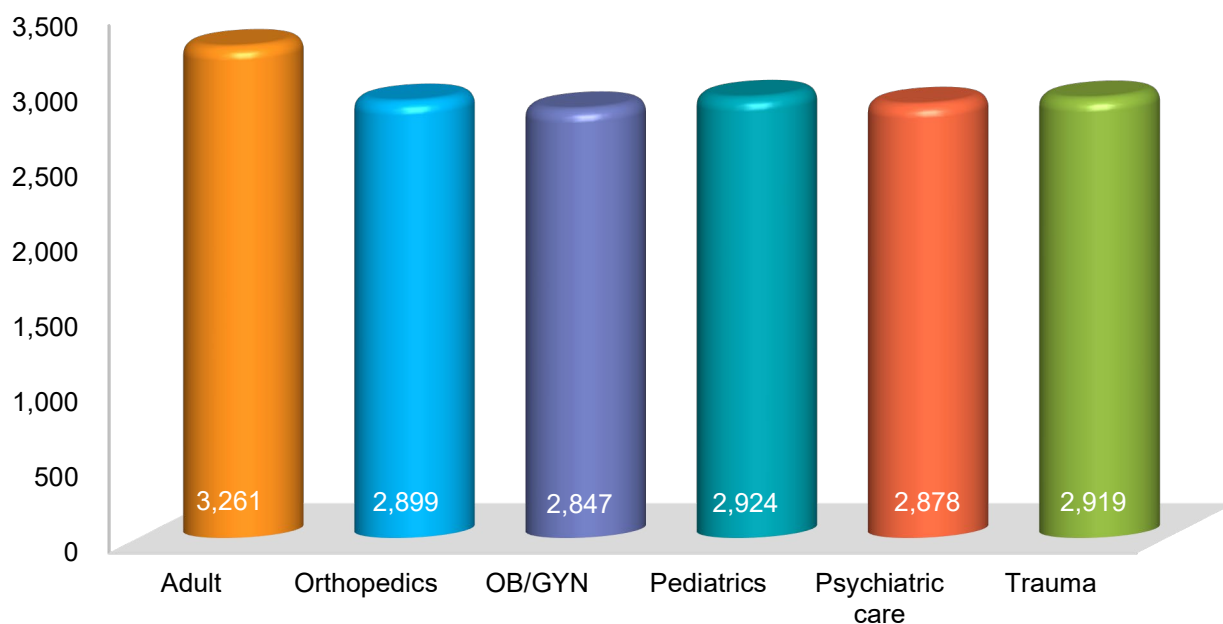
Figure 41: Category of Patients by Location Selections		
Patient Location	Number of Physicians	Percentage of Physicians
ICU only	494	83.9%
ICU & trauma unit	61	10.4%
Burn unit, ICU and trauma unit	27	4.6%
Burn unit & ICU	4	0.7%
Burn unit only	1	0.2%
Trauma unit only	1	0.2%
<b>TOTAL</b>	<b>588</b>	<b>100.0%</b>

<sup>32</sup> Physicians were able to choose more than one response.

### Emergency Medicine Specialty Question

There were 3,524 physicians who reported their primary specialty was emergency medicine; 3,386 (96.1%) responded to the specialty question. Physicians were asked to indicate all categories of patients they see.<sup>33</sup> The responses were equally distributed across six specialties (see Figure 42).

**Figure 42: 2021–22 Emergency Medicine Physicians by All Patient Types**  
n = 3,386



The patient types were analyzed by physicians to determine the distribution across the six types, and over three-quarters (84.8% or 2,871) of the physicians saw all six types of patients. The remaining quarter of the responses were separated into 42 different configurations based on physician responses. Most of these configurations represent less than 1% of the total.

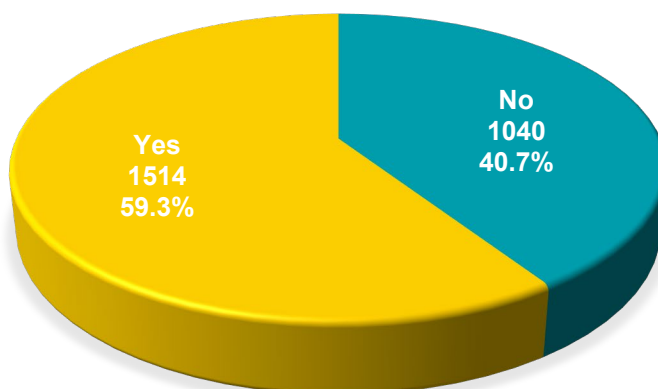
<sup>33</sup> Physicians were able to choose more than one response.

### Obstetrics and Gynecology Specialty Questions

There were 2,611 physicians who reported their primary specialty was obstetrics & gynecology (OB/GYN) and 2,554 (97.8%) responded to the specialty questions.

The first specialty question was “Do you deliver babies?” and 59.3% of those who responded reported delivering babies as part of their practice, as shown in Figure 43. Less than 5% of obstetricians report that they do not perform cesarean sections (C-sections).

**Figure 43: 2021–22 OB/GYNs Who Deliver Babies**  
n = 2,554



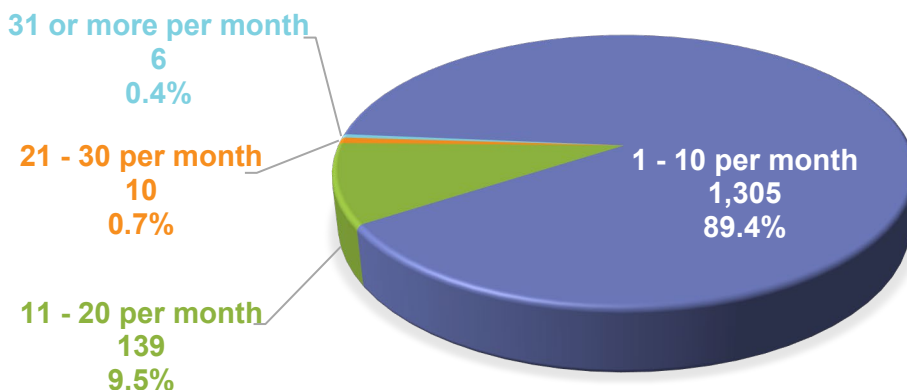
Almost 90% of obstetricians who perform C-sections report they perform between 1 and 20 routine deliveries per month. Just over 88% of obstetricians report they perform between 1 and 20 high-risk deliveries per month, with 84.7% of these obstetricians reporting between 1 and 10 high-risk deliveries per month. When asked “How many unassigned/drop-in deliveries do you perform per month for patients having minimal or no 'known' prenatal care?” almost 95% responded they saw between 0 and 10 per month. The number was split almost in half between none and 1–10 per month (48% and 52% respectively).



The number of obstetricians in Florida who report performing C-sections within each specified range is shown below in Figure 44. Of the 1,514 obstetricians who reported they deliver babies, 1,460 (96.4%) report performing C-sections, which is slightly down from last year's 97.3%. Of those 1,460 obstetricians, 89.4% (1,305) responded they perform an average of between 1 and 10 C-sections per month.

**Figure 44: 2021–22 Physician Average Number of C-Sections Performed**

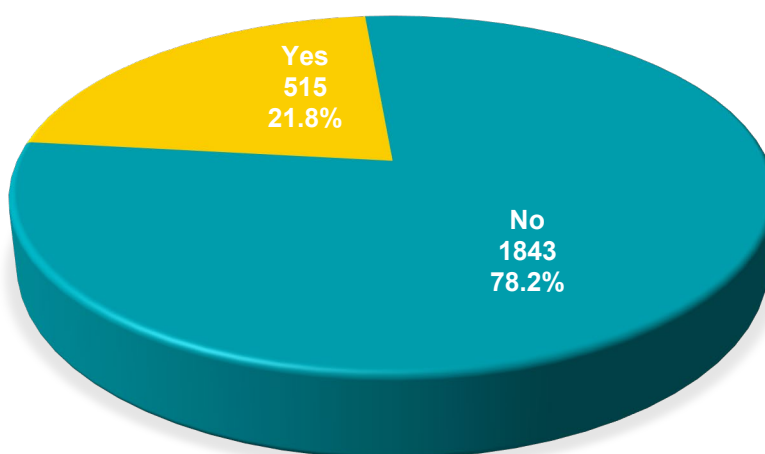
n = 1,460



Another specialty question was “Are you planning to discontinue obstetric care in the next two years?” As shown in Figure 45, just over 20% of obstetricians plan to discontinue providing obstetric care in the next two years.

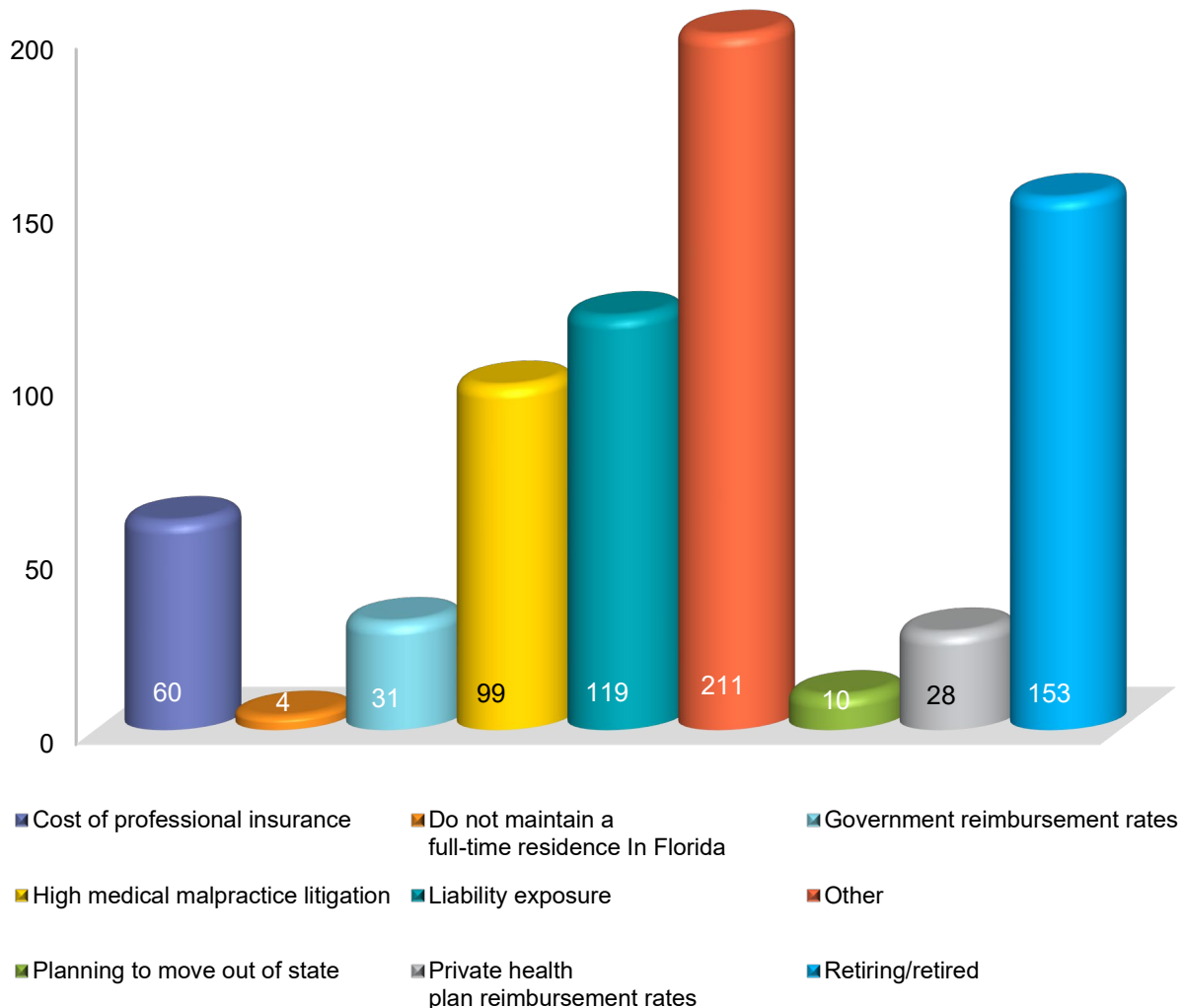
**Figure 45: 2021–22 OB/GYNs Planning to Discontinue Obstetric Care**

n = 2,358



All of the reasons given by the 491 physicians who reported they were discontinuing obstetric care are shown below in Figure 46. The most frequently selected reasons other than “Other” were Retired, Liability Exposure, and High Medical Malpractice Litigation.<sup>34</sup>

**Figure 46: 2021–22 Reasons Why Physicians are Discontinuing Obstetric Care**  
n = 491

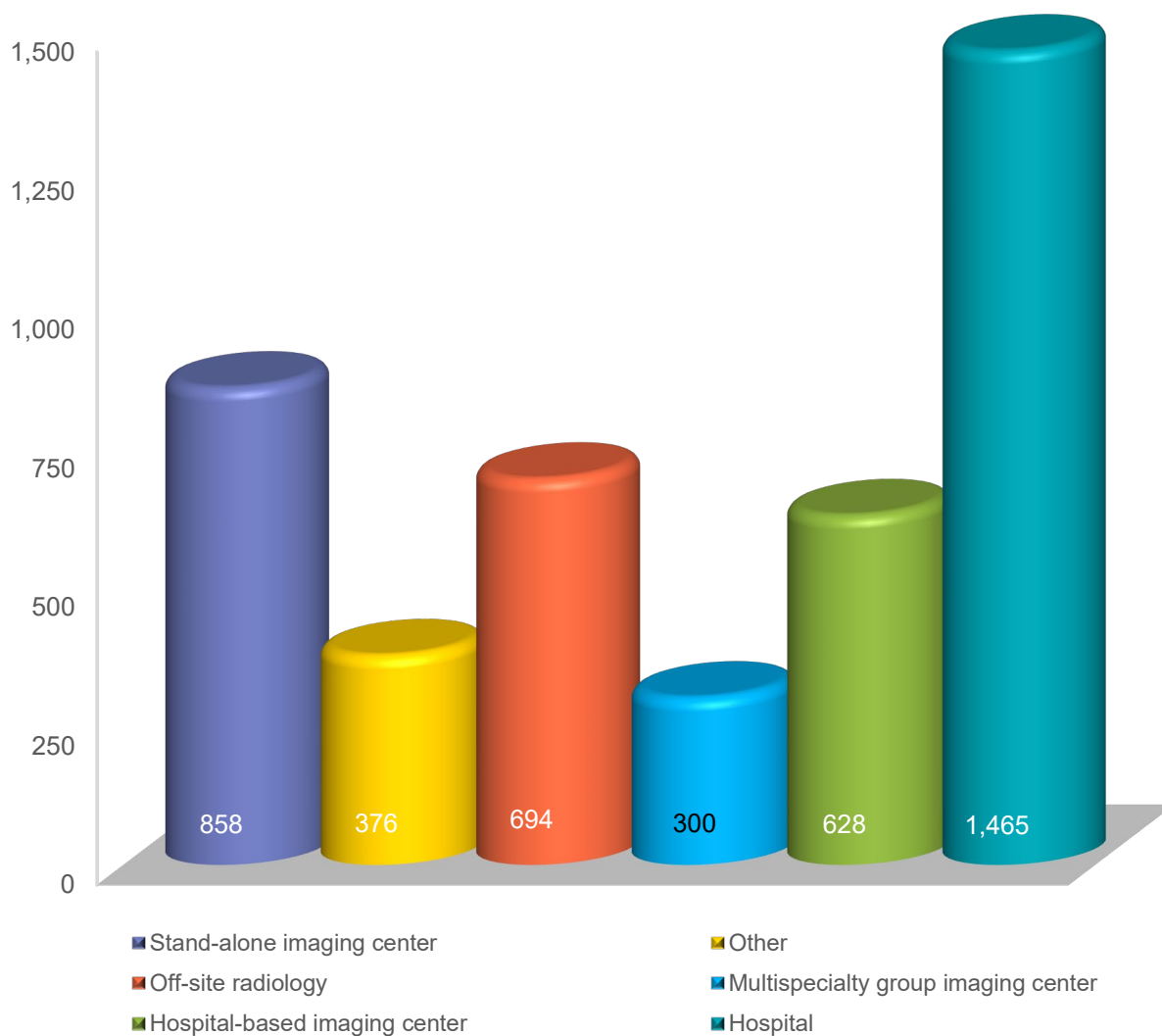


<sup>34</sup> Physicians were able to choose more than one response. The 491 physicians gave 776 answers, for an average of 1.5 responses per physician.

## Radiology Specialty Questions

There were 3,192 physicians who reported their primary specialty was radiology.<sup>35</sup> The three most selected practice settings were hospital, stand-alone imaging center, and off-site radiology center, as shown in Figure 47.

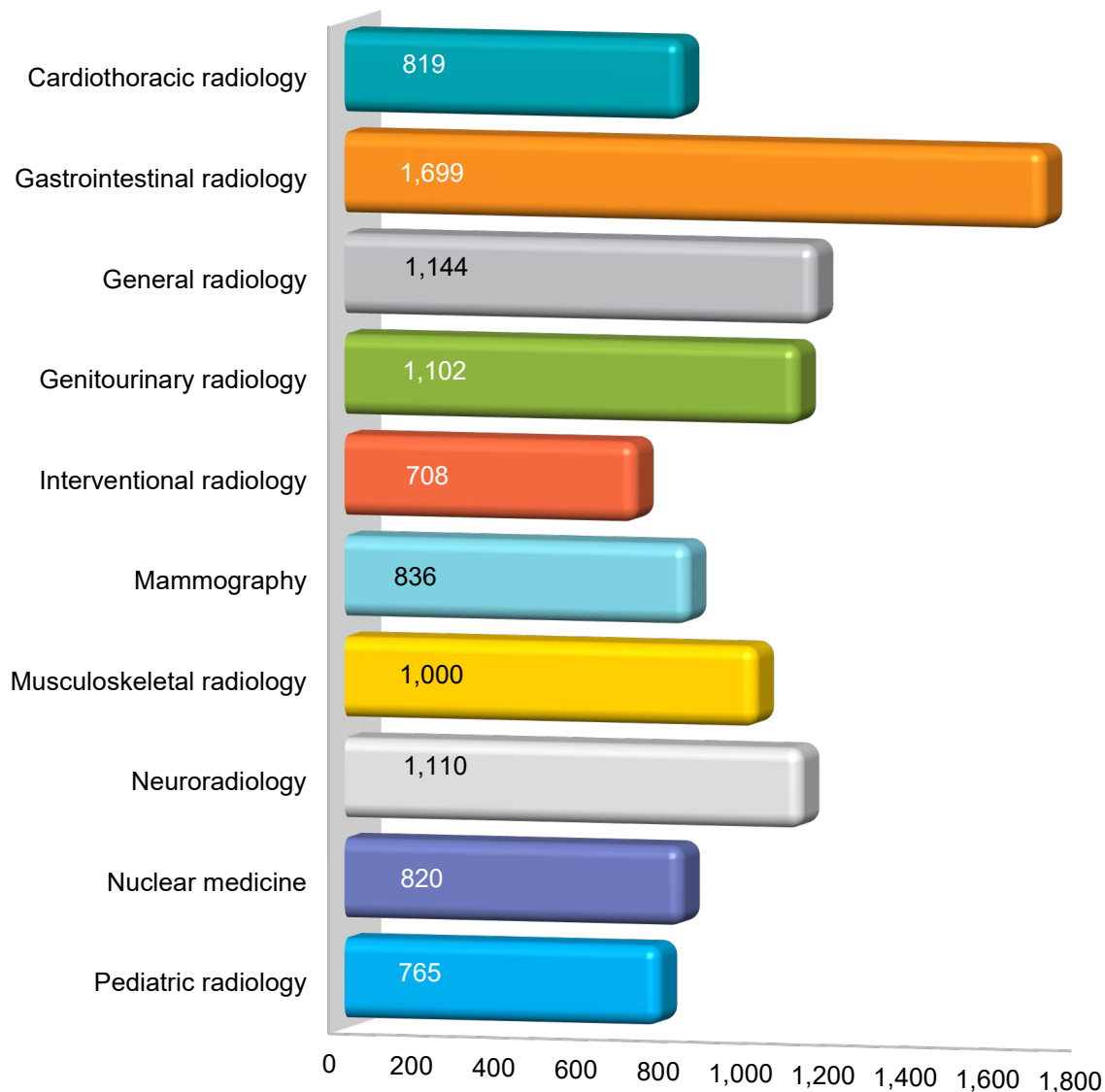
**Figure 47: 2021–22 Radiology Practice Settings**  
n = 3,192



<sup>35</sup> Physicians were able to select more than one practice setting. The 3,192 responding physicians chose 4,321 answers, with an average of 1.4 sites selected.

Radiologists selected all of the different types of patients they see. Figure 48 shows the patient types and percentages based on the 2,774 physicians who responded.<sup>36</sup> The top five patient types were gastrointestinal radiology patients, general radiology patients, neuroradiology patients, and genitourinary radiology patients.

**Figure 48: 2021–22 Radiology Patient Types**  
n = 2,774

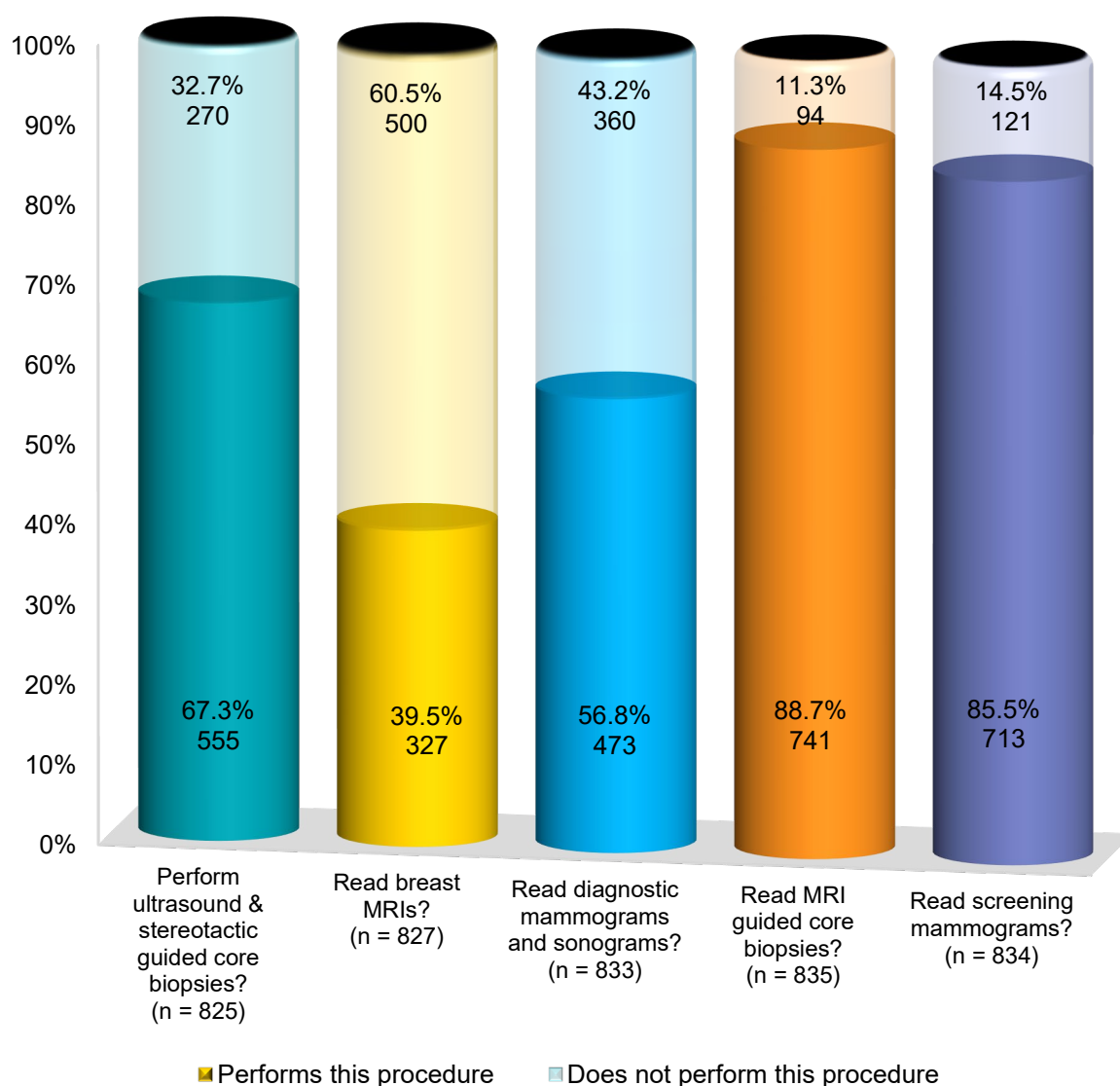


<sup>36</sup> The 2,774 radiologists chose 10,003 patient types, which averages to 3.6 patient types per radiologist.

Radiologists who reported that mammography was part of their practice were asked five additional questions about performing specified procedures. In the 2020–21 report cohort the number of radiologists who said they read diagnostic mammograms and sonograms was 89.3% and this cohort only has 56.8% reading diagnostic mammograms and sonograms (see Figure 49), which is a drop of 32.5%. Conversely, in the last report cohort only 39.3% reported that they read MRI guided core biopsies and this cohort reported that 88.7% read MRI guided core biopsies, an increase of 49.4%.

**Figure 49: 2021–22 Mammography and Related Radiological Procedures**

*If you indicated that mammography is part of your practice (n = 836), do you:*

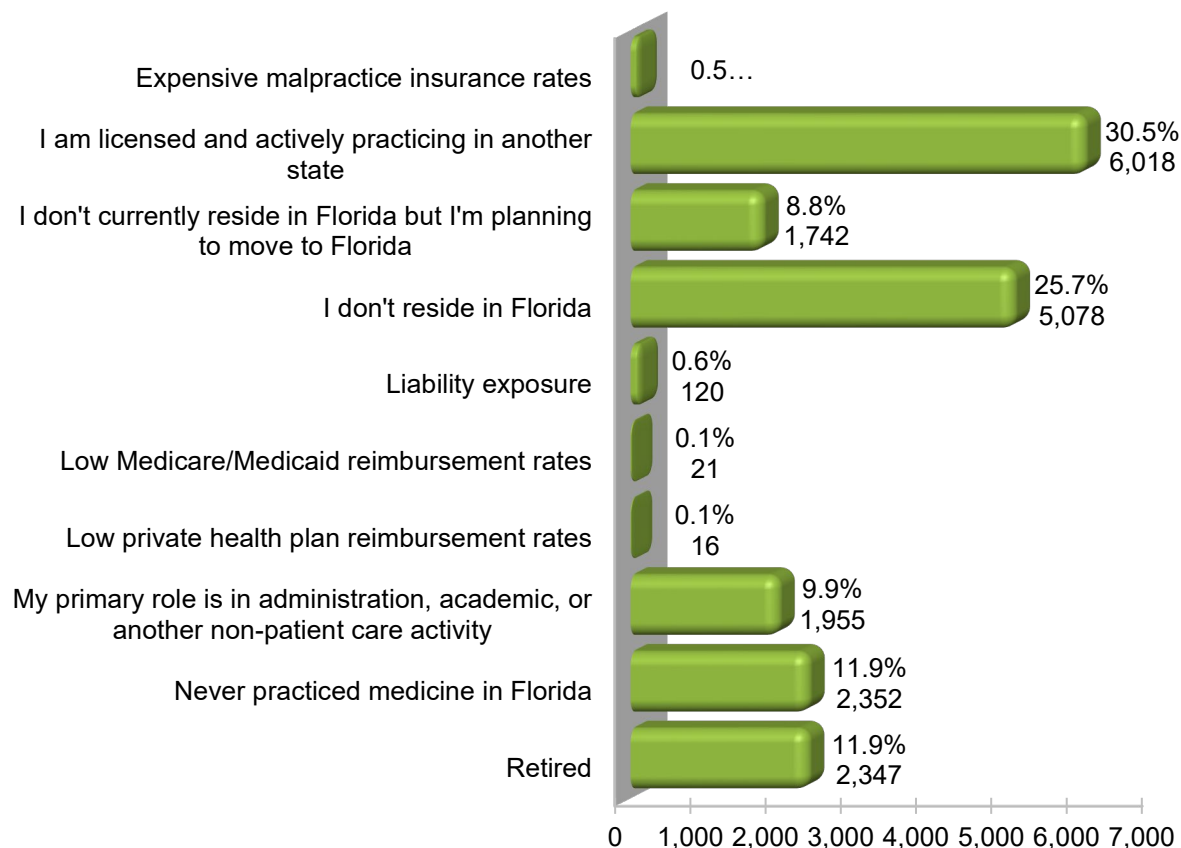


## Physicians Not Providing Direct Patient Care in Florida

A total of 22,567 physicians are licensed and responded to the survey, but they are not providing direct patient care in Florida.<sup>37</sup> This represents 28% of the physicians in the 2021–22 cohort who renewed their licenses. Understanding the reasons physicians did not provide direct patient care in Florida in the last 12 months is useful when considering physician attraction and retention initiatives. There were 1,446 (6.4%) physicians who were not included as providing direct patient care because they were enrolled in an internship, residency, or fellowship program.

Of the remaining 21,121 physicians designated as not providing direct patient care, 30.5% of them responded with “I am licensed and actively practicing in another state” as the main reason they have a Florida license, but do not practice medicine in Florida, as shown in Figure 50.<sup>38</sup>

**Figure 50: 2021–22 Why Licensed Physicians Are Not Providing Direct Patient Care**  
n = 19,751



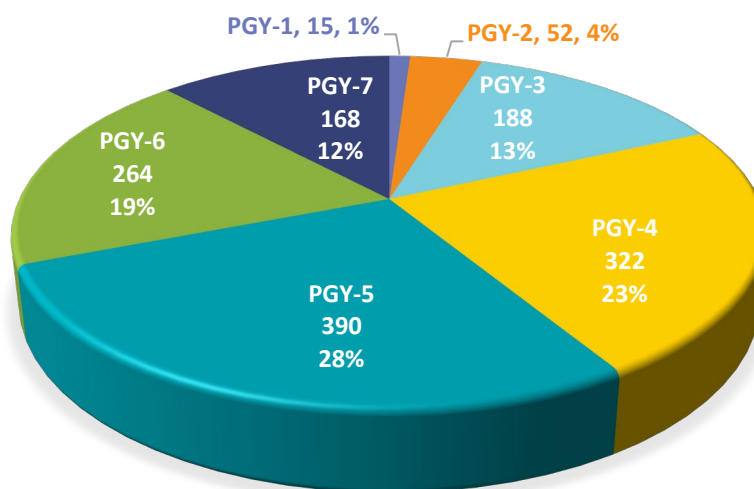
<sup>37</sup> See physician definitions on page 2.

<sup>38</sup> 1370 physicians did not have a reason listed.

### Pipeline - Internship, Residency, and Fellowship Programs

There were 1,446 physicians who renewed their license and reported they were enrolled in an internship, residency, or fellowship program. These physicians were considered as not providing direct patient care as they were in an education/training program and are supervised. Of these physicians, 96.7% responded with their post-graduate program year, as shown in Figure 51.

**Figure 51: 2021–22 Physicians Enrolled in Internship, Residency, and Fellowship Programs by Program Year**  
n = 1,399



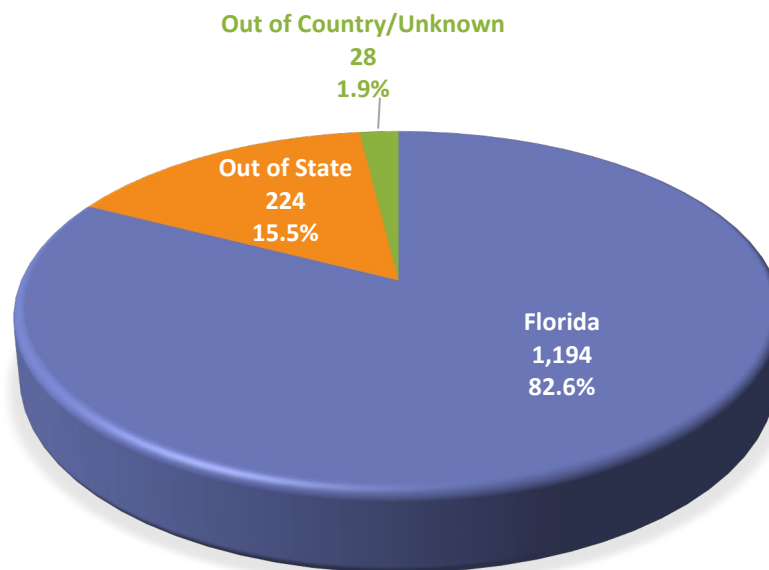
The five most common specialties of all physicians who were enrolled in an internship, residency or fellowship program were internal medicine (32.2%), pediatrics (9.7%), radiology (9.7%), family medicine (8.2%), and surgery (7.2%). All specialties except proctology had at least one physician represented.

When looking at specialties by program state, all of the specialties were represented in Florida except proctology and nuclear medicine. For physicians who were enrolled in an internship, residency or fellowship program in Florida, the five most common specialties were internal medicine (32.7%), radiology (9.5%), pediatrics (9.2%), family medicine (8.4%) and surgery (7.8%). For physicians who were enrolled in an internship, residency or fellowship program out of state or country, the five most common specialties were internal medicine (31.4%), radiology (11.6%), surgery (8.7%), pediatrics (8.3%) and family medicine (7.9%).

The location of physicians who were enrolled in an internship, residency or fellowship program is primarily in Florida (82.9%) with the remainder out of state, as shown in Figure 52. Physicians who are enrolled in an internship, residency or fellowship program outside of Florida are most often located in New York (12.5%), California (10.3%), Texas (8.5%) and Maryland (7.1%). All of the other 36 states where physicians are located have less than 5% of physicians in an internship, residency or fellowship program.

**Figure 52: 2021–22 Locations of Physicians Enrolled in Internship, Residency, and Fellowship Programs**

n = 1,446





## Department Programs to Support Physician Workforce Development

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

### The State Primary Care Office

The goal of the State Primary Care Office is to attract and retain physicians to work in Health Professional Shortage Areas (HPSAs). As of July 19, 2022, Florida has 654 designated HPSAs: 251 primary care, 209 mental health, and 194 dental. By HPSA type, there are:

- 185 population-based HPSAs
  - 97 primary care
  - 51 mental health
  - 37 dental
- 157 state correctional institutions HPSAs
  - 50 primary care
  - 54 mental health
  - 53 dental
- 156 Federally Qualified Health Center (FQHC) and FQHC Look-alike HPSAs
  - 52 primary care
  - 52 mental health
  - 52 dental
- 15 Indian Health Service, Tribal Health, and Urban Indian Health Organizations HPSAs
  - 5 primary care
  - 5 mental health
  - 5 dental
- 141 Rural Health Clinic HPSAs
  - 47 primary care
  - 47 mental health
  - 47 dental

As of August 12, 2022, there are 717 approved National Health Service Corps (NHSC) sites, with 360 of those sites having program participants. There are 810 participants in NHSC programs: 125 physicians who participate in the NHSC loan repayment program in medically underserved areas in Florida, and 18 physicians who are NHSC Scholars. Of the 143 current physician participants, 15 are currently working in a HRSA defined rural area and 13 are

working in a Florida defined rural county. There are 15 physicians practicing in a rural area, either HRSA defined or Florida defined.<sup>39</sup>

Of the 143 current physician participants:

- 80% are allopathic and 20% are osteopathic.
- 79.8% work in a Federally Qualified Health Center (FQHC), 7.6% work in a Community Outpatient Facility, 4.9% work in a Certified Rural Health Clinic (RHC), 4.2% work in a Community Mental Health Center, 1.4% work in a private practice, and 0.7% each work in a correctional facility, a mobile unit or County Health Department.
- 40.2% are family practice physicians, 31.4% are pediatricians, 12.5% are psychiatrists, 9% are obstetricians/gynecologists, and 5.6% are internal medicine practitioners.

Since the inception of the State Conrad 30 Waiver Program in 1994, more than 80%, or nearly 530 physicians, continue to practice in Florida. Approximately 65 National Interest Waiver foreign physicians practice in Florida; these physicians are required to practice in underserved areas for five years. Approximately 61 HHS Exchange Waiver foreign physicians practice in Florida; these primary care physicians are required to practice in underserved areas for three years.

The Medical Education Reimbursement and Loan Repayment Program is being implemented as the Florida Reimbursement Assistance for Medical Education (FRAME) program. The FRAME program will encourage qualified medical professionals to practice in underserved locations of the state by providing annual payments intended to offset the loans and educational expenses incurred by students for studies leading to:

- a medical degree
- a nursing degree
- medical licensure
- nursing licensure
- advanced practice registered nurse licensure
- physician assistant licensure

FRAME will be fully implemented in 2023.

---

<sup>39</sup> The HRSA defined rural areas are in the counties of Columbia, Levy, Madison, Okeechobee, Palm Beach, Taylor (2), and Washington. The Florida defined rural counties are Columbia, Gadsden, Highlands, Levy, Okeechobee, Taylor (2), Wakulla, and Washington.

### The Office of Rural Health

The Department's Office of Rural Health (Office) 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. The 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 utilizing 3RNet include county health departments, FQHCs, rural hospitals, behavioral health centers, EMS, and rural health clinics. From January 1, 2021, through June 30, 2022, there were 49 jobs added or updated, 1,073 health professionals logged in to view jobs, 2,445 health professionals referred to employers through the site, and 52,295 views of 3RNet job openings.

The Office also supports Project ECHO (Extension for Community Health Care Outcomes) in Florida. Project ECHO is a guided practice model that increases workforce capacity to provide best-practice specialty care and reduce health disparities. Project ECHO is designed around case-based learning and mentorship. Sessions are led by expert teams using interactive videoconferencing to conduct virtual clinics with community providers. With Project ECHO, primary care doctors, nurses, and other clinicians learn to provide specialty care to patients in their own communities. From July 1, 2021 through June 30, 2022, Project ECHO provided 20 virtual clinics. Topics included:

- Addiction and Mental Health Care in Community Paramedicine,
- Role of the Florida Department of Health in the Statewide Growth of Community Paramedicine/Mobile Integrated Healthcare,
- Rural Hospital Partnerships and Community outreach strategies for vaccine distribution.

Visit [www.floridaruralhealth.org/rural-ems-project-echo](http://www.floridaruralhealth.org/rural-ems-project-echo) for more information.

The Office also manages the Small Rural Hospital Improvement Program grant (SHIP grant), which provides rural hospitals with 49 or fewer beds with funds to implement quality improvement activities. The Office awarded \$12,836.00 each to 10 eligible small rural hospitals in 2022 for quality reporting, process improvements and telehealth equipment and trainings. For more information about the SHIP grant, visit [www.ruralcenter.org/ship](http://www.ruralcenter.org/ship).

### 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 to them by the Department's agents and employees, participating medical professionals are protected by state sovereign immunity. There are currently 11,425 health care professionals serving in the Volunteer Health Care Provider Program.

## Physician Workforce Advisory Council 2022 Recommendations

### Ongoing Recommendations

1. The Council recommends that the Department collaborate with the Council of Florida Medical School Deans to 1) develop student diversity pipeline best practices, based on successful measures in practices 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, 2) develop and maintain a comprehensive database of current Graduate Medical Education (GME) residency positions in Florida to aid in determining the current and projected areas of need that can be addressed by creating or expanding GME programs, and 3) develop strategies and maintain metrics to assess the impact of the new GME programs on the physician workforce.
2. The Council recommends that the Department explore strategies for the recruitment and retention of residents and fellows for Florida's training programs. These strategies should include information regarding the opportunities and benefit of training and practicing in Florida for allopathic and osteopathic medical students.

Further, the Council recommends that the Legislature direct the Agency for Health Care Administration to seek resident physician specialty board pass-rate data by program of the sponsoring institutions. These data will allow for comparisons between GME programs and exchange of best practices with the goal of having the best GME residency programs in the U.S.

3. The Council recommends that the Department enhance collaboration with the Health Resources and Services Administration (HRSA) through continued promotion of the National Health Service Corps 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.

Further, the Council recommends exploring supplemental incentive strategies to retain physicians with previously satisfied loan obligations.

4. The Council recommends that the Department explore partnerships to assist with the identification and evaluation of forecasting models to project future physician and subspecialty needs in Florida and guide policy recommendations to the Legislature. These efforts should focus on strategies to retain family medicine and internal medicine residency graduates in the state of Florida.

5. The Council recommends that the Department conduct an environmental review of partner and stakeholder strategic planning efforts to identify core planning objectives and potential opportunities for the alignment of these efforts across the organizations represented by the Council.
6. The Council recommends that the Florida Legislature expand funding of the Florida Reimbursement Assistance for Medical Education (FRAME) student loan reimbursement program to \$10 million per year to recruit and retain physicians and residents who can fill specific gaps in location and subspecialty in Florida.

Further, the Council recommends that the Legislature provide the opportunity for the FRAME program to seek partnerships and funding from federal and private sectors (e.g., HMOs, pharmaceutical companies and hospitals).

7. Physicians in practice and health care providers (including graduate and undergraduate medical educators) in Florida are encouraged to complete implicit bias training to 1) assist with culturally responsive workforce development, 2) promote a more inclusive work environment and 3) foster a high-quality health care provision environment for diverse populations to address health disparities.

Further, the Council recommends the Department explore the identification, sharing and monitoring of disparity-related data resources to identify gaps in health outcomes and access to care. This would aid in prioritizing workforce development, distribution and funding that would improve health outcomes and access to high quality care.

8. The Council encourages training programs to educate graduating residents and fellows on the business of medicine and the potential options for practice post-graduation including, but not limited to, academic medicine, solo or small group practice, large group practice and public health opportunities.
9. The Council recommends that the Department work with stakeholders to develop questions for the Physician Workforce Survey that measure how physician burnout has impacted physician practices.

Further, the Council recommends that the Legislature direct the Florida Department of Children and Families to create a 24/7 crisis hotline for all physicians who are struggling with mental health concerns.

10. Advocate for Health and Human Services' (HHS) to pursue expansion of the Conrad 30, Exchange Visitor and Southeast Crescent Regional Commission J-1 visa programs through the U.S. Legislature.

Further, the Council recommends that the Department educate potential employers about the Area of Critical Need designation in Florida and the opportunity for recruiting physicians to expanded workforce available with this designation.

### **New Recommendations**

11. The Council recommends that the Agency for Health Care Administration fully implement section 409.967(2)(a), Florida Statutes, and impose appropriate fines or other sanctions on those Medicaid managed care plans whose physician payment rates do not equal or exceed Medicare rates for similar services.
12. The Council recommends that the Department explore strategies and partnerships to address physician and health workforce wellness particularly those found in the National Academy of Medicine National Plan for Health Workforce Well-being priority areas of: positive work and learning environments and culture; measurement, assessment, strategies, and research of well-being; mental health and stigma; compliance, regulatory and policy barriers for health workers' daily work; effective technology tools (e.g., "wellness" lines); effects of COVID19 on the health workforce; and, recruitment of the next generation.

## 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 efforts to meet current and future physician workforce needs.

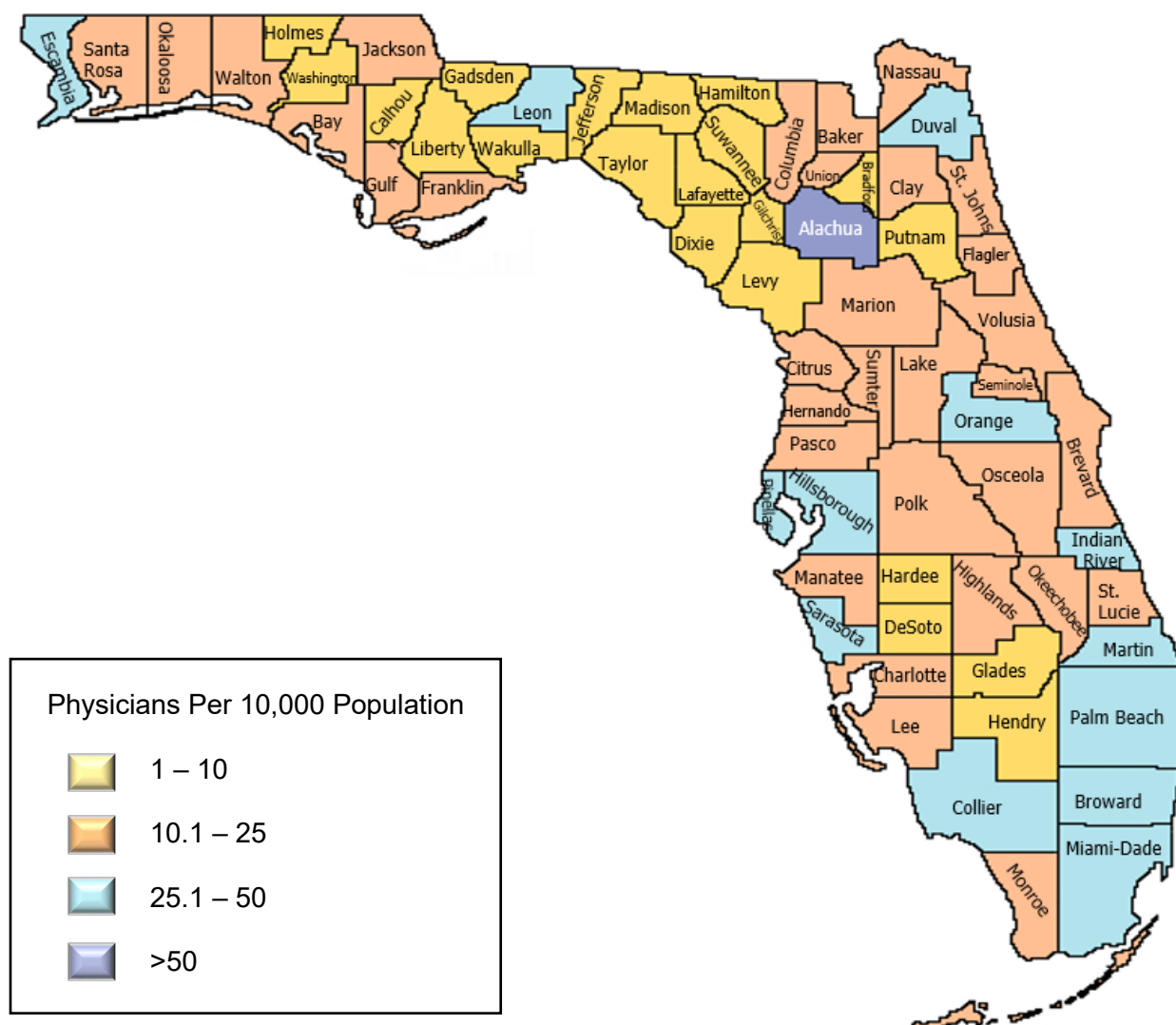
Key information from this report for policy consideration includes:

- During the last ten-year period, the number of practicing physicians increased 34%, from 43,406 as reported in 2012–13 to 58,062 in 2021–22. During this same time, the population of Florida increased almost 15%, from 19.3 million to 22.2 million.
- Physicians are generally concentrated in populous counties and within large, urban population centers. Survey results indicated that 98% of physicians work in urban counties while 2% work in Florida's 30 rural counties. In two-thirds of the rural counties, at least 20% of physicians are primary care providers. (See Appendix A and Appendix B for details.)
- Gender and ethnic diversity of Florida's physician workforce has increased since 2012–13. The percentage of female physicians has increased from 25.8% in 2012–13 to 31.9% in 2021–22, and the percentage of Hispanic, Asian, Black and Native American physicians has increased 6.6%.
- Physicians continue to specialize, with more physicians practicing in specialties than in primary care. The percentage of primary care physicians in 2021–22 (31.5%) has decreased slightly from what it was in 2012–13 (33.4%). The percentage of primary care physicians has vacillated in the last 10 years with a low of 31.4% in 2020–21 and a high of 37.2% in 2016–17.
- Each year physicians report if they are planning to retire in the next five years. The percentage of physicians planning on retiring in 2021–22 (9.7%) has decreased from what it was in 2012–13 (13.2%). The percentage of physicians planning to retire in the next five years has vacillated in the last 10 years with a low of 8.7% in 2019–20 and a high of 16.6% in 2017–18.



## Appendix A: Physician Workforce per Capita by County, 2021–22

This map illustrates a per capita distribution of practicing physicians at the county level.<sup>40</sup> Miami-Dade, Broward and Palm Beach Counties combined have almost one-third (31.9%) of all practicing physicians in Florida. Miami-Dade County alone has 14.% of all practicing physicians. Even though these are the three most populous counties, when looking at the per capita distribution (number of physicians per 10,000 population) of physicians shown on the map below, the counties of Alachua (64.6), Duval (35.8), Escambia (32.6), Sarasota (32.3), Hillsborough (30.9), and Pinellas (30.5) have the highest per capita rate. There are 21 counties (31.3%) whose per capita rate is 10 or less.



<sup>40</sup> There were 6,186 physicians whose survey response county did not match the county of their official practice location. Survey response counties were used on the map.

## Appendix B: Change in Practicing Physicians by County

Figures B-1 and B-2 show a history of practicing physicians by county for the last nine report cohorts.<sup>41</sup>

**Figure B-1: Number of Practicing Physicians by County by Year**

\* Rural Counties per 381.0406, Florida Statutes

County	2013–14	2014–15	2015–16	2016–17	2017–18	2018–19	2019–20	2020–21	2021–22
Alachua	1,370	1,426	1,443	1,429	1,615	1,666	1,707	1,754	1,778
Baker*	42	38	37	39	46	40	37	36	37
Bay	380	380	395	400	424	418	420	403	415
Bradford*	23	21	24	25	21	20	26	27	24
Brevard	1,240	1,231	1,260	1,254	1,333	1,377	1,371	1,377	1,408
Broward	4,209	4,269	4,346	4,342	4,767	4,878	5,008	5,124	5,287
Calhoun*	9	9	8	8	11	10	10	10	11
Charlotte	348	338	348	332	361	376	399	398	391
Citrus	238	249	245	225	258	259	259	270	255
Clay	283	285	315	322	349	368	340	340	356
Collier	823	819	829	835	954	998	1,069	1,117	1,121
Columbia*	136	139	144	137	142	143	142	134	130
Desoto*	31	31	27	25	25	26	28	26	30
Dixie*	10	12	11	15	13	5	8	8	7
Duval	2,707	2,762	2,828	2,851	3,093	3,199	3,343	3,451	3,561
Escambia	841	878	885	881	952	981	1,030	1,027	1,066
Flagler	121	129	139	139	150	144	142	140	165
Franklin*	15	14	10	8	12	13	15	18	13
Gadsden*	40	40	39	35	34	29	35	35	32
Gilchrist*	8	8	5	7	6	5	4	5	8
Glades*	8	7	7	8	6	5	3	3	6
Gulf	16	18	15	13	19	21	23	23	18
Hamilton*	7	7	5	4	3	6	9	6	3
Hardee*	13	13	14	12	9	10	10	9	9
Hendry*	23	24	25	25	33	30	29	28	27
Hernando	300	300	313	324	334	325	349	372	384
Highlands*	190	197	195	189	195	194	192	189	203

<sup>41</sup> There were 6,696 physicians whose 2021-22 survey response county did not match the county of their official practice location. Survey response counties were used in the table.

County	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Hillsborough	3,356	3,470	3,611	3,696	4,041	4,167	4,362	4,464	4,675
Holmes*	16	16	13	11	16	16	15	18	14
Indian River	369	371	379	370	425	430	447	447	467
Jackson*	60	57	52	47	52	49	55	54	53
Jefferson*	6	8	8	6	7	5	7	7	3
Lafayette*	4	4	2	2	3	1	1	1	2
Lake	618	642	684	671	704	705	734	743	784
Lee	1,254	1,275	1,336	1,332	1,483	1,506	1,571	1,615	1,706
Leon	661	632	656	667	750	764	782	797	815
Levy*	15	15	15	15	14	13	15	13	12
Liberty*	0	1	2	1	2	2	2	3	4
Madison*	10	8	9	8	9	10	7	9	7
Manatee	592	591	611	631	689	693	717	733	754
Marion	593	618	601	598	680	684	689	697	722
Martin	358	367	388	398	443	443	469	477	483
Miami-Dade	6,535	6,648	6,697	6,726	7,313	7,407	7,583	7,803	7,935
Monroe*	171	180	180	181	187	186	183	175	193
Nassau	85	83	80	76	76	87	81	87	98
Okaloosa	412	414	419	430	460	454	463	465	483
Okeechobee*	57	56	49	58	61	55	61	61	57
Orange	2,808	2,844	2,977	3,079	3,473	3,660	3,924	4,111	4,316
Osceola	454	477	515	530	650	625	655	715	726
Palm Beach	3,710	3,804	3,919	3,901	4,262	4,241	4,227	4,360	4,511
Pasco	820	824	828	835	923	922	958	974	1024
Pinellas	2,555	2,568	2,620	2,613	2,874	2,878	2,970	2,996	3,062
Polk	941	945	975	1,001	1,121	1,090	1,092	1,116	1,179
Putnam	107	97	84	88	98	97	91	89	74
Santa Rosa	174	165	172	171	193	195	201	201	218
Sarasota	1,074	1,092	1,119	1,126	1,267	1,284	1,347	1,385	1,457
Seminole	666	660	687	712	774	793	827	846	857
St. Johns	327	339	347	338	385	400	424	439	476
St. Lucie	414	426	428	410	447	474	507	512	547
Sumter	123	126	148	161	188	187	183	196	200
Suwannee*	22	17	22	28	25	25	21	16	15

County	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Taylor*	16	17	20	22	18	16	20	18	15
Union*	14	13	22	25	26	26	23	22	18
Volusia	1,015	1,051	1,049	1,040	1,140	1,122	1,158	1,192	1,232
Wakulla*	9	10	9	8	9	7	11	12	10
Walton*	87	91	89	89	94	92	99	104	120
Washington*	18	19	12	10	14	13	12	12	13
<b>State Totals</b>	<b>43,957</b>	<b>44,685</b>	<b>45,746</b>	<b>45,995</b>	<b>50,561</b>	<b>51,370</b>	<b>53,002</b>	<b>54,315</b>	<b>56,082</b>

**Figure B-2: Percentage Increase or Decrease by County**

County	2013-14 to 2014-15	2014-15 to 2015-16	2015-16 to 2016-17	2016-17 to 2017-18	2017-18 to 2018-19	2018-19 to 2019-20	2019-20 to 2020-21	2020-21 to 2021-22	2013-14 to 2021-22
Alachua	4.1%	1.2%	-1.0%	13.0%	3.2%	2.5%	2.8%	1.4%	29.8%
Baker*	-9.5%	-2.6%	5.4%	17.9%	-13.0%	-7.5%	-2.7%	2.8%	-11.9%
Bay	0.0%	3.9%	1.3%	6.0%	-1.4%	0.5%	-4.0%	3.0%	9.2%
Bradford*	-8.7%	14.3%	4.2%	-16.0%	-4.8%	30.0%	3.8%	-11.1%	4.3%
Brevard	-0.7%	2.4%	-0.5%	6.3%	3.3%	-0.4%	0.4%	2.3%	13.5%
Broward	1.4%	1.8%	-0.1%	9.8%	2.3%	2.7%	2.3%	3.2%	25.6%
Calhoun*	0.0%	-11.1%	0.0%	37.5%	-9.1%	0.0%	0.0%	10.0%	22.2%
Charlotte	-2.9%	3.0%	-4.6%	8.7%	4.2%	6.1%	-0.3%	-1.8%	12.4%
Citrus	4.6%	-1.6%	-8.2%	14.7%	0.4%	0.0%	4.2%	-5.6%	7.1%
Clay	0.7%	10.5%	2.2%	8.4%	5.4%	-7.6%	0.0%	4.7%	25.8%
Collier	-0.5%	1.2%	0.7%	14.3%	4.6%	7.1%	4.5%	0.4%	36.2%
Columbia*	2.2%	3.6%	-4.9%	3.6%	0.7%	-0.7%	-5.6%	-3.0%	-4.4%
Desoto*	0.0%	-12.9%	-7.4%	0.0%	4.0%	7.7%	-7.1%	15.4%	-3.2%
Dixie*	20.0%	-8.3%	36.4%	-13.3%	-61.5%	60.0%	0.0%	-12.5%	-30.0%
Duval	2.0%	2.4%	0.8%	8.5%	3.4%	4.5%	3.2%	3.2%	31.5%
Escambia	4.4%	0.8%	-0.5%	8.1%	3.0%	5.0%	-0.3%	3.8%	26.8%
Flagler	6.6%	7.8%	0.0%	7.9%	-4.0%	-1.4%	-1.4%	17.9%	36.4%
Franklin*	-6.7%	-28.6%	-20.0%	50.0%	8.3%	15.4%	20.0%	-27.8%	-13.3%
Gadsden*	0.0%	-2.5%	-10.3%	-2.9%	-14.7%	20.7%	0.0%	-8.6%	-20.0%
Gilchrist*	0.0%	-37.5%	40.0%	-14.3%	-16.7%	-20.0%	25.0%	60.0%	0.0%
Glades*	-12.5%	0.0%	14.3%	-25.0%	-16.7%	-40.0%	0.0%	100.0%	-25.0%
Gulf	12.5%	-16.7%	-13.3%	46.2%	10.5%	9.5%	0.0%	-21.7%	12.5%
Hamilton*	0.0%	-28.6%	-20.0%	-25.0%	100.0%	50.0%	-33.3%	-50.0%	-57.1%
Hardee*	0.0%	7.7%	-14.3%	-25.0%	11.1%	0.0%	-10.0%	0.0%	-30.8%
Hendry*	4.3%	4.2%	0.0%	32.0%	-9.1%	-3.3%	-3.4%	-3.6%	17.4%
Hernando	0.0%	4.3%	3.5%	3.1%	-2.7%	7.4%	6.6%	3.2%	28.0%
Highlands*	3.7%	-1.0%	-3.1%	3.2%	-0.5%	-1.0%	-1.6%	7.4%	6.8%
Hillsborough	3.4%	4.1%	2.4%	9.3%	3.1%	4.7%	2.3%	4.7%	39.3%
Holmes*	0.0%	-18.8%	-15.4%	45.5%	0.0%	-6.3%	20.0%	-22.2%	-12.5%
Indian River	0.5%	2.2%	-2.4%	14.9%	1.2%	4.0%	0.0%	4.5%	26.6%
Jackson*	-5.0%	-8.8%	-9.6%	10.6%	-5.8%	12.2%	-1.8%	-1.9%	-11.7%
Jefferson*	33.3%	0.0%	-25.0%	16.7%	-28.6%	40.0%	0.0%	-57.1%	-50.0%
Lafayette*	0.0%	-50.0%	0.0%	50.0%	-66.7%	0.0%	0.0%	100.0%	-50.0%
Lake	3.9%	6.5%	-1.9%	4.9%	0.1%	4.1%	1.2%	5.5%	26.9%
Lee	1.7%	4.8%	-0.3%	11.3%	1.6%	4.3%	2.8%	5.6%	36.0%

County	2013-14 to 2014-15	2014-15 to 2015-16	2015-16 to 2016-17	2016-17 to 2017-18	2017-18 to 2018-19	2018-19 to 2019-20	2019-20 to 2020-21	2020-21 to 2021-22	2013-14 to 2021-22
Leon	-4.4%	3.8%	1.7%	12.4%	1.9%	2.4%	1.9%	2.3%	23.3%
Levy*	0.0%	0.0%	0.0%	-6.7%	-7.1%	15.4%	-13.3%	-7.7%	-20.0%
Liberty*	100.0%	100.0%	-50.0%	100.0%	0.0%	0.0%	50.0%	33.3%	400.0%
Madison*	-20.0%	12.5%	-11.1%	12.5%	11.1%	-30.0%	28.6%	-22.2%	-30.0%
Manatee	-0.2%	3.4%	3.3%	9.2%	0.6%	3.5%	2.2%	2.9%	27.4%
Marion	4.2%	-2.8%	-0.5%	13.7%	0.6%	0.7%	1.2%	3.6%	21.8%
Martin	2.5%	5.7%	2.6%	11.3%	0.0%	5.9%	1.7%	1.3%	34.9%
Miami-Dade	1.7%	0.7%	0.4%	8.7%	1.3%	2.4%	2.9%	1.7%	21.4%
Monroe*	5.3%	0.0%	0.6%	3.3%	-0.5%	-1.6%	-4.4%	10.3%	12.9%
Nassau	-2.4%	-3.6%	-5.0%	0.0%	14.5%	-6.9%	7.4%	12.6%	15.3%
Okaloosa	0.5%	1.2%	2.6%	7.0%	-1.3%	2.0%	0.4%	3.9%	17.2%
Okeechobee*	-1.8%	-12.5%	18.4%	5.2%	-9.8%	10.9%	0.0%	-6.6%	0.0%
Orange	1.3%	4.7%	3.4%	12.8%	5.4%	7.2%	4.8%	5.0%	53.7%
Osceola	5.1%	8.0%	2.9%	22.6%	-3.8%	4.8%	9.2%	1.5%	59.9%
Palm Beach	2.5%	3.0%	-0.5%	9.3%	-0.5%	-0.3%	3.1%	3.5%	21.6%
Pasco	0.5%	0.5%	0.8%	10.5%	-0.1%	3.9%	1.7%	5.1%	24.9%
Pinellas	0.5%	2.0%	-0.3%	10.0%	0.1%	3.2%	0.9%	2.2%	19.8%
Polk	0.4%	3.2%	2.7%	12.0%	-2.8%	0.2%	2.2%	5.6%	25.3%
Putnam	-9.3%	-13.4%	4.8%	11.4%	-1.0%	-6.2%	-2.2%	-16.9%	-30.8%
Santa Rosa	-5.2%	4.2%	-0.6%	12.9%	1.0%	3.1%	0.0%	8.5%	25.3%
Sarasota	1.7%	2.5%	0.6%	12.5%	1.3%	4.9%	2.8%	5.2%	35.7%
Seminole	-0.9%	4.1%	3.6%	8.7%	2.5%	4.3%	2.3%	1.3%	28.7%
St. Johns	3.7%	2.4%	-2.6%	13.9%	3.9%	6.0%	3.5%	8.4%	45.6%
St. Lucie	2.9%	0.5%	-4.2%	9.0%	6.0%	7.0%	1.0%	6.8%	32.1%
Sumter	2.4%	17.5%	8.8%	16.8%	-0.5%	-2.1%	7.1%	2.0%	62.6%
Suwannee*	-22.7%	29.4%	27.3%	-10.7%	0.0%	-16.0%	-23.8%	-6.3%	-31.8%
Taylor*	6.3%	17.6%	10.0%	-18.2%	-11.1%	25.0%	-10.0%	-16.7%	-6.3%
Union*	-7.1%	69.2%	13.6%	4.0%	0.0%	-11.5%	-4.3%	-18.2%	28.6%
Volusia	3.5%	-0.2%	-0.9%	9.6%	-1.6%	3.2%	2.9%	3.4%	21.4%
Wakulla*	11.1%	-10.0%	-11.1%	12.5%	-22.2%	57.1%	9.1%	-16.7%	11.1%
Walton*	4.6%	-2.2%	0.0%	5.6%	-2.1%	7.6%	5.1%	15.4%	37.9%
Washington*	5.6%	-36.8%	-16.7%	40.0%	-7.1%	-7.7%	0.0%	8.3%	-27.8%
<b>Statewide</b>	<b>1.7%</b>	<b>2.4%</b>	<b>0.5%</b>	<b>9.9%</b>	<b>1.6%</b>	<b>3.2%</b>	<b>2.5%</b>	<b>3.3%</b>	<b>24.1%</b>

## Appendix C: Specialty Group Counts by County, 2021–22

This table represents a count of physicians by county and specialty<sup>42</sup>.

Specialty	Alachua	Baker	Bay	Bradford	Brevard	Broward	Calhoun
Anesthesiology	156	0	30	1	83	355	0
Dermatology	27	1	9	0	30	115	0
Emergency Medicine	99	5	33	2	85	307	2
Family Medicine	180	10	60	7	211	639	3
Internal Medicine	457	4	107	2	424	1,479	4
Medical Genetics	6	0	0	0	0	5	0
Neurology	66	0	12	2	49	120	0
Nuclear Medicine	3	0	0	0	1	5	0
Obstetrics & Gynecology	69	0	20	2	57	303	0
Ophthalmology	35	0	9	0	34	120	0
Orthopedic Medicine	18	0	14	1	35	128	0
Otolaryngology	27	0	6	0	21	52	2
Pathology	58	1	1	0	17	86	0
Pediatrics	165	1	23	2	77	465	0
Physical Medicine & Rehabilitation	22	1	1	0	24	79	0
Preventive Medicine	3	0	1	1	13	19	0
Proctology	0	0	0	0	0	2	0
Psychiatry	96	14	22	2	47	211	0
Radiology	113	0	13	0	76	240	0
Surgery	138	0	39	1	97	434	0
Urology	11	0	6	0	12	51	0
<b>TOTAL</b>	<b>1,749</b>	<b>37</b>	<b>406</b>	<b>23</b>	<b>1,393</b>	<b>5,215</b>	<b>11</b>

<sup>42</sup> There were 1,581 physicians who did not answer either the county or specialty question, so they are not counted above.

Specialty	Charlotte	Citrus	Clay	Collier	Columbia	Desoto	Dixie
Anesthesiology	23	12	26	64	6	1	0
Dermatology	8	7	6	37	1	0	0
Emergency Medicine	27	10	18	75	8	1	0
Family Medicine	66	52	74	151	37	9	4
Internal Medicine	111	82	113	346	34	8	2
Medical Genetics	0	0	0	0	0	0	0
Neurology	10	5	10	20	3	0	0
Nuclear Medicine	0	0	0	2	0	1	0
Obstetrics & Gynecology	8	9	15	40	4	1	0
Ophthalmology	13	8	9	28	3	0	0
Orthopedic Medicine	15	6	4	30	0	0	0
Otolaryngology	5	3	5	24	0	0	0
Pathology	8	4	1	12	0	0	0
Pediatrics	14	9	24	53	6	4	0
Physical Medicine & Rehabilitation	3	1	3	17	4	0	0
Preventive Medicine	1	1	1	8	0	1	0
Proctology	0	0	0	0	0	0	0
Psychiatry	17	5	8	38	9	2	0
Radiology	22	12	5	65	5	0	0
Surgery	32	19	27	83	7	2	0
Urology	5	4	5	11	0	0	0
<b>TOTAL</b>	<b>388</b>	<b>249</b>	<b>354</b>	<b>1,104</b>	<b>127</b>	<b>30</b>	<b>6</b>



Specialty	Duval	Escambia	Flagler	Franklin	Gadsden	Gilchrist	Glades
Anesthesiology	255	80	11	1	0	0	0
Dermatology	46	14	2	0	0	0	0
Emergency Medicine	274	83	12	1	3	0	0
Family Medicine	454	137	44	5	10	5	3
Internal Medicine	951	241	49	3	6	0	0
Medical Genetics	5	0	0	0	0	0	0
Neurology	113	23	4	0	0	0	0
Nuclear Medicine	6	1	0	0	0	0	0
Obstetrics & Gynecology	172	55	5	3	0	0	0
Ophthalmology	70	23	4	0	0	0	0
Orthopedic Medicine	66	21	7	0	0	0	0
Otolaryngology	49	19	2	0	0	0	0
Pathology	72	18	0	0	0	0	0
Pediatrics	294	106	3	0	0	1	1
Physical Medicine & Rehabilitation	53	17	1	0	0	1	0
Preventive Medicine	18	6	0	0	2	0	0
Proctology	0	0	0	0	0	0	0
Psychiatry	119	42	3	0	10	1	0
Radiology	233	53	5	0	0	0	0
Surgery	248	105	8	0	0	0	0
Urology	27	11	2	0	0	0	0
<b>TOTAL</b>	<b>3,525</b>	<b>1,055</b>	<b>162</b>	<b>13</b>	<b>31</b>	<b>8</b>	<b>4</b>

Specialty	Gulf	Hamilton	Hardee	Hendry	Hernando	Highlands	Hillsborough
Anesthesiology	1	0	0	1	24	10	284
Dermatology	0	0	0	0	5	4	73
Emergency Medicine	5	0	1	1	26	21	281
Family Medicine	4	0	5	10	74	34	502
Internal Medicine	4	1	1	4	134	68	1,325
Medical Genetics	0	0	0	0	0	0	6
Neurology	0	0	0	1	5	2	118
Nuclear Medicine	0	0	0	0	0	0	5
Obstetrics & Gynecology	0	0	0	0	15	7	219
Ophthalmology	0	0	0	0	8	2	91
Orthopedic Medicine	0	0	0	0	4	5	64
Otolaryngology	0	0	0	0	3	1	69
Pathology	0	0	0	0	5	3	144
Pediatrics	1	0	1	6	15	11	389
Physical Medicine & Rehabilitation	0	0	0	0	6	1	65
Preventive Medicine	1	0	0	0	0	1	30
Proctology	0	0	0	0	0	0	0
Psychiatry	0	0	0	0	12	4	222
Radiology	0	1	0	2	11	9	289
Surgery	2	1	0	2	23	15	397
Urology	0	0	0	0	5	4	38
<b>TOTAL</b>	<b>18</b>	<b>3</b>	<b>8</b>	<b>27</b>	<b>375</b>	<b>202</b>	<b>4,611</b>

Specialty	Holmes	Indian River	Jackson	Jefferson	Lafayette	Lake	Lee
Anesthesiology	0	33	0	0	0	44	91
Dermatology	0	11	0	0	0	16	35
Emergency Medicine	0	27	6	0	0	40	88
Family Medicine	7	59	9	2	1	147	250
Internal Medicine	1	148	9	0	1	274	470
Medical Genetics	0	0	0	0	0	1	1
Neurology	0	11	1	1	0	12	85
Nuclear Medicine	0	0	0	0	0	0	2
Obstetrics & Gynecology	0	11	2	0	0	29	70
Ophthalmology	0	22	2	0	0	24	63
Orthopedic Medicine	0	11	2	0	0	18	44
Otolaryngology	0	6	1	0	0	7	26
Pathology	0	7	1	0	0	15	27
Pediatrics	1	23	5	0	0	38	124
Physical Medicine & Rehabilitation	0	8	0	0	0	9	26
Preventive Medicine	0	1	0	0	0	5	2
Proctology	0	0	0	0	0	0	0
Psychiatry	1	22	1	0	0	19	57
Radiology	0	29	7	0	0	29	79
Surgery	3	30	4	0	0	36	127
Urology	0	6	1	0	0	10	13
<b>TOTAL</b>	<b>13</b>	<b>465</b>	<b>51</b>	<b>3</b>	<b>2</b>	<b>773</b>	<b>1,680</b>

Specialty	Leon	Levy	Liberty	Madison	Manatee	Marion	Martin
Anesthesiology	43	1	0	0	41	40	28
Dermatology	16	0	0	0	17	14	14
Emergency Medicine	54	1	0	0	52	52	28
Family Medicine	167	4	2	4	138	122	62
Internal Medicine	175	3	2	2	220	228	138
Medical Genetics	1	0	0	0	1	0	0
Neurology	19	0	0	0	12	7	13
Nuclear Medicine	3	0	0	0	0	0	0
Obstetrics & Gynecology	37	0	0	0	36	19	20
Ophthalmology	19	0	0	0	27	23	18
Orthopedic Medicine	19	0	0	0	16	7	19
Otolaryngology	6	0	0	0	11	6	7
Pathology	11	1	0	0	8	6	5
Pediatrics	53	2	0	0	38	43	15
Physical Medicine & Rehabilitation	6	0	0	0	15	11	7
Preventive Medicine	6	0	0	0	4	7	2
Proctology	0	0	0	0	0	0	0
Psychiatry	39	0	0	0	30	29	21
Radiology	62	0	0	0	20	33	32
Surgery	55	0	0	1	56	50	38
Urology	11	0	0	0	6	11	7
<b>TOTAL</b>	<b>802</b>	<b>12</b>	<b>4</b>	<b>7</b>	<b>748</b>	<b>708</b>	<b>474</b>

Specialty	Miami-Dade	Monroe	Nassau	Okaloosa	Okeechobee	Orange	Osceola
Anesthesiology	473	9	8	37	1	265	26
Dermatology	152	5	1	9	1	39	7
Emergency Medicine	374	24	9	45	1	274	67
Family Medicine	1,064	38	28	76	10	602	164
Internal Medicine	2,218	40	20	103	20	1,079	193
Medical Genetics	15	0	0	0	0	10	0
Neurology	206	4	2	11	0	73	14
Nuclear Medicine	8	0	0	0	0	4	0
Obstetrics & Gynecology	366	8	2	21	2	238	55
Ophthalmology	187	2	2	12	1	63	6
Orthopedic Medicine	129	10	1	21	3	72	10
Otolaryngology	86	4	3	9	0	44	10
Pathology	116	3	1	4	3	60	6
Pediatrics	753	8	5	31	5	566	49
Physical Medicine & Rehabilitation	91	2	2	4	1	52	9
Preventive Medicine	40	3	2	3	1	22	12
Proctology	0	0	0	0	0	0	0
Psychiatry	412	8	4	23	0	160	18
Radiology	384	4	4	23	2	249	12
Surgery	636	15	4	42	2	343	47
Urology	73	3	0	3	2	40	6
<b>TOTAL</b>	<b>7,783</b>	<b>190</b>	<b>98</b>	<b>477</b>	<b>55</b>	<b>4,255</b>	<b>711</b>

Specialty	Palm Beach	Pasco	Pinellas	Polk	Putnam	St. Johns	St. Lucie
Anesthesiology	309	58	182	63	1	33	30
Dermatology	153	19	75	20	0	13	5
Emergency Medicine	215	63	167	81	3	26	45
Family Medicine	426	166	472	201	19	109	82
Internal Medicine	1,320	335	863	338	27	103	125
Medical Genetics	2	0	3	0	0	1	0
Neurology	115	17	62	31	1	7	15
Nuclear Medicine	1	0	3	0	0	0	0
Obstetrics & Gynecology	227	36	113	51	5	18	25
Ophthalmology	153	27	87	39	1	14	6
Orthopedic Medicine	134	26	57	18	2	10	16
Otolaryngology	81	10	42	11	1	3	11
Pathology	60	8	43	17	1	6	8
Pediatrics	318	70	268	69	5	32	54
Physical Medicine & Rehabilitation	61	13	40	7	0	2	8
Preventive Medicine	29	7	17	7	0	2	3
Proctology	0	0	0	0	0	0	0
Psychiatry	213	48	131	47	0	24	23
Radiology	233	31	148	74	2	27	24
Surgery	343	73	213	80	3	35	54
Urology	39	8	33	12	0	2	5
<b>TOTAL</b>	<b>4,432</b>	<b>1,015</b>	<b>3,019</b>	<b>1,166</b>	<b>71</b>	<b>467</b>	<b>539</b>

Specialty	Santa Rosa	Sarasota	Seminole	Sumter	Suwannee	Taylor	Union
Anesthesiology	9	86	35	3	0	1	2
Dermatology	4	53	22	8	0	0	0
Emergency Medicine	18	78	54	7	3	3	0
Family Medicine	68	206	175	47	6	4	11
Internal Medicine	37	446	231	78	2	2	2
Medical Genetics	0	0	0	0	0	0	0
Neurology	4	28	15	6	0	0	0
Nuclear Medicine	0	0	0	0	1	0	0
Obstetrics & Gynecology	10	67	45	5	0	0	0
Ophthalmology	0	47	22	2	0	0	0
Orthopedic Medicine	15	45	11	2	0	0	0
Otolaryngology	1	23	4	2	0	0	0
Pathology	1	15	5	1	0	0	0
Pediatrics	21	56	77	2	2	3	0
Physical Medicine & Rehabilitation	4	28	15	3	0	0	0
Preventive Medicine	2	4	5	0	0	0	0
Proctology	0	0	0	0	0	0	0
Psychiatry	1	61	31	2	1	0	2
Radiology	9	69	29	23	0	0	0
Surgery	10	116	54	5	0	2	1
Urology	0	13	11	3	0	0	0
<b>TOTAL</b>	<b>214</b>	<b>1,441</b>	<b>841</b>	<b>199</b>	<b>15</b>	<b>15</b>	<b>18</b>

Specialty	Volusia	Wakulla	Walton	Washington	Out of State	TOTAL
Anesthesiology	58	0	12	1	38	3,485
Dermatology	19	0	3	0	19	1,135
Emergency Medicine	99	0	16	1	88	3,489
Family Medicine	297	6	22	9	231	8,303
Internal Medicine	317	2	27	1	224	15,784
Medical Genetics	0	0	0	0	1	58
Neurology	22	0	1	0	65	1,423
Nuclear Medicine	0	0	0	0	2	48
Obstetrics & Gynecology	39	0	6	0	23	2,590
Ophthalmology	34	0	0	0	11	1,371
Orthopedic Medicine	24	0	1	0	9	1,170
Otolaryngology	13	0	3	0	6	725
Pathology	19	0	0	0	52	940
Pediatrics	52	0	11	0	40	4,510
Physical Medicine & Rehabilitation	17	0	0	0	9	749
Preventive Medicine	2	0	1	0	15	311
Proctology	0	0	0	0	0	2
Psychiatry	38	2	4	0	79	2,435
Radiology	63	0	6	0	254	3,115
Surgery	95	0	7	1	53	4,314
Urology	12	0	0	0	2	524
<b>TOTAL</b>	<b>1,220</b>	<b>10</b>	<b>120</b>	<b>13</b>	<b>1,221</b>	<b>56,481</b>