SEPTEMBER 2019

doximity

2019 OB-GYN Workforce Study

Physician Shortages Contribute to Women's Health Crisis

doximity.com

The U.S. healthcare system continues to face a shortage of physicians across a variety of medical specialties and practice areas. In obstetrics and gynecology, the problem is particularly acute. The American Congress of Obstetricians and Gynecologists (ACOG) continues to project a shortage of up to 8,800 obstetricians and gynecologists (OB-GYNs) by 2020, and a shortfall of up to 22,000 by 2050.[1] In fact, the ACOG estimated in 2017 that half of the U.S. counties lack a single OG-GYN.[2]

At the same time, the U.S. faces a rapidly declining birthrate. The Centers for Disease Control and Prevention reported that the number of births in 2018 fell 2% from 2017, the lowest number of births in 32 years.[3] For millennial women, this drop is particularly pronounced; birthrates for women aged 25-29 in 2018 fell 3% from 2017 while birthrates for women aged 20-24 decreased 4% during the same time period. It's likely that the lingering effects of the Great Recession, along with a host of related financial pressures, have intertwined to make the goal of having children harder to reach for millennial women. A shortage of trained OB-GYN specialists will likely compound these problems. As for some women, it will become more difficult to receive standard prenatal care.

The ramifications of this shortage for women's health extend far beyond childbirth. While OB-GYNs are a primary source of care to women during pregnancy and delivery, they also provide a wide range of gynecological care throughout women's lives. From reproductive cancer screenings to preventive services, the ACOG recommends many women visit their OB-GYNs at least once a year.[4] The ACOG's predicted shortages would have a significant and negative impact on women's healthcare in the U.S.

In this report, we have built on a body of data that we began collecting in 2017 detailing demographic and workload variations for OB-GYNs nationally. Drawing on the Doximity profiles of more than 43,000 licensed OB-GYNs, we examined the ages and workload distribution of OB-GYNs across the largest 50 U.S. metropolitan statistical areas (MSAs) by population.

We used this data to calculate a shortage risk index, in which we identify the U.S. cities where we anticipate OB-GYN workforce shortages will first arise.

New to the report this year, we also examined the regions which had the highest number of births covered by Medicaid vs. private insurance and analyzed how many of these regions corresponded to the metros with the largest OB-GYN workloads.

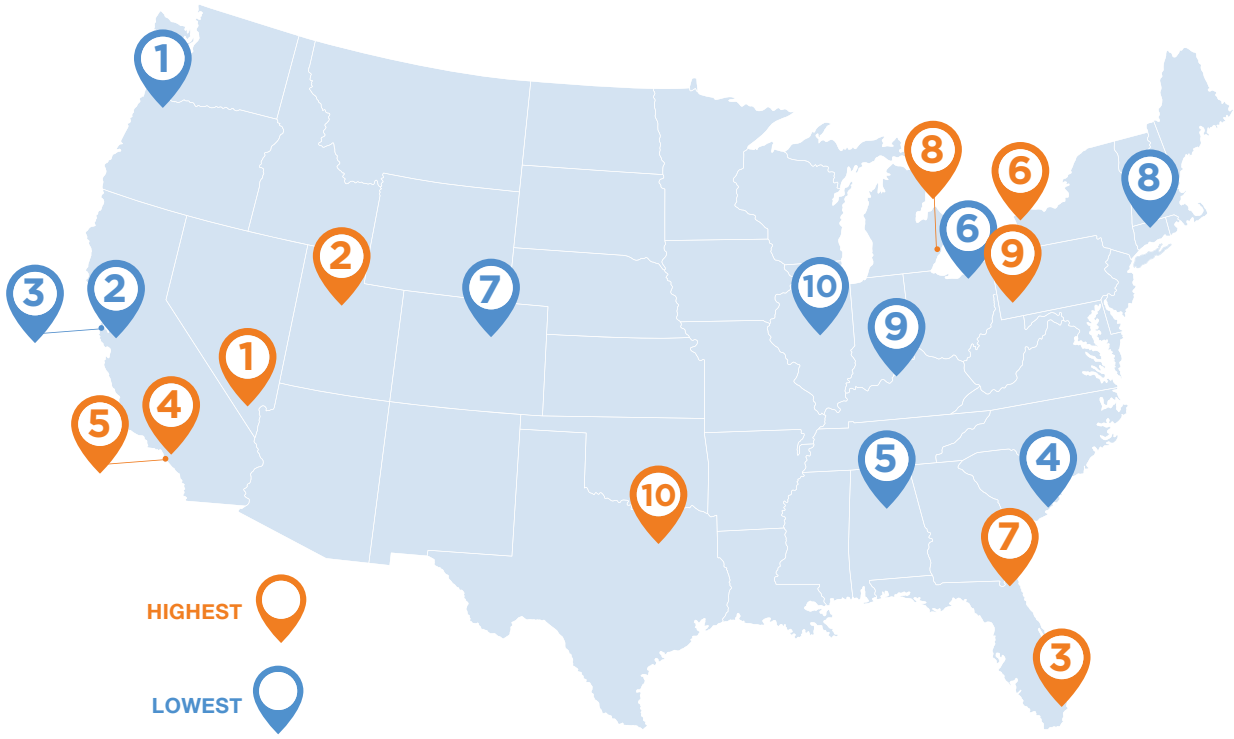
With over 70% of all U.S. doctors as members, Doximity is the country's largest medical network. As such, we are uniquely positioned to study these phenomena not just on the national level but also, and more importantly, on the local level where healthcare is practiced and delivered.

KEY FINDINGS

Risk Index: Highest and Lowest Risk Metros for OB-GYN Shortages

Combining these factors, Doximity developed a composite index score to assess how severe the risk of OB-GYN shortages is in each of the top 50 metropolitan areas, taking into consideration the average age of their workforce and the number of births per OB-GYN, per year.

The metropolitan areas with older OB-GYNs and higher workloads will have a greater risk of shortages. Conversely, the metropolitan areas with younger OB-GYNs and lower workloads will have a lower risk of shortages.



METROPOLITAN AREAS WITH THE HIGHEST RISK OF SHORTAGES

1	Las Vegas
2	Salt Lake City
3	Miami
4	Riverside, Calif.
5	Los Angeles
6	Buffalo, N.Y.
7	Jacksonville, Fla.
8	Detroit
9	Pittsburgh
10	Dallas

METROPOLITAN AREAS WITH THE LOWEST RISK OF SHORTAGES

1	Portland, Ore.
2	San Jose, Calif.
3	San Francisco
4	Charleston, S.C.
5	Birmingham, Ala.
6	Cleveland
7	Denver
8	Hartford, Conn.
9	Louisville, Ky.
10	Indianapolis

KEY FINDINGS

The Coming OB-GYN Retirement Wave

Nationally, 35% of OB-GYNs are 55 years old or older. Of the 50 metropolitan areas evaluated in this survey, Doximity found there are 33 metros where at least one third of OB-GYNs are 55 years old or older.

TOP 15 metropolitan areas ranked by **HIGHEST** percentage of OB-GYNs older than 55

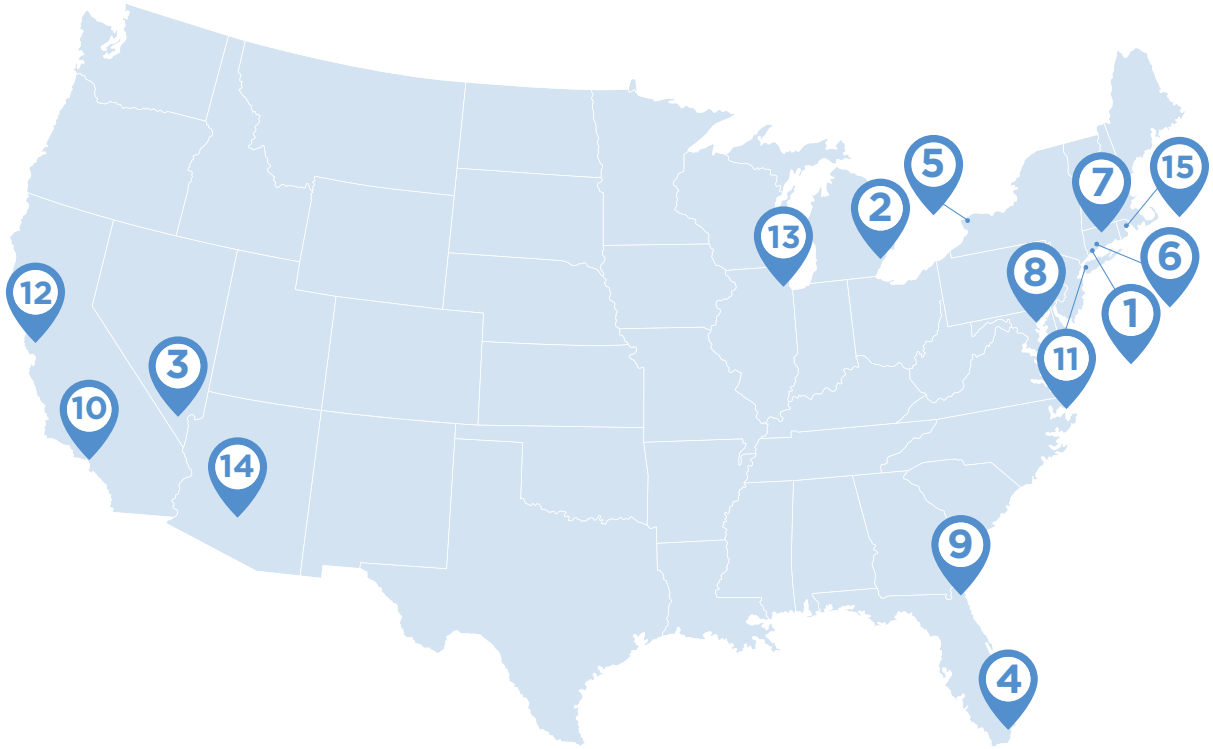
1	Pittsburgh	41.54%
2	Las Vegas	41.08%
3	Salt Lake City	40.24%
4	Virginia Beach, Va.	39.35%
5	New Haven, Conn.	39.01%
6	Buffalo, N.Y.	38.76%
7	Bridgeport, Conn.	37.43%
8	Rochester, N.Y.	37.23%
9	Miami	37.20%
10	Cincinnati	36.96%

11	Boston	36.75%
12	Kansas City, Mo.	36.51%
13	Detroit	36.48%
14	Chicago	36.43%
15	New York City	36.21%

KEY FINDINGS

Metropolitan Areas with the Youngest OB-GYNs

An aging OB-GYN population would not be as severe a problem if there was a growing cohort of younger OB-GYNs. However, only 19% of the nation's OB-GYNs are younger than 40 years old. Additionally, none of the largest metros studied in this report have at least 30% of their OB-GYN workforce under the age of 40.



TOP 15 metropolitan areas ranked by **LOWEST** percentage of OB-GYNs younger than 40

1	Bridgeport, Conn.	13.41%
2	Detroit	14.55%
3	Las Vegas	14.59%
4	Miami	15.70%
5	Buffalo, N.Y.	16.28%
6	New Haven, Conn.	16.31%
7	Hartford, Conn.	16.36%
8	Baltimore	17.03%
9	Jacksonville, Fla.	17.06%
10	Los Angeles	17.10%

11	New York City	17.10%
12	San Jose, Calif.	17.53%
13	Chicago	17.61%
14	Phoenix	18.06%
15	Providence, R.I.	18.09%

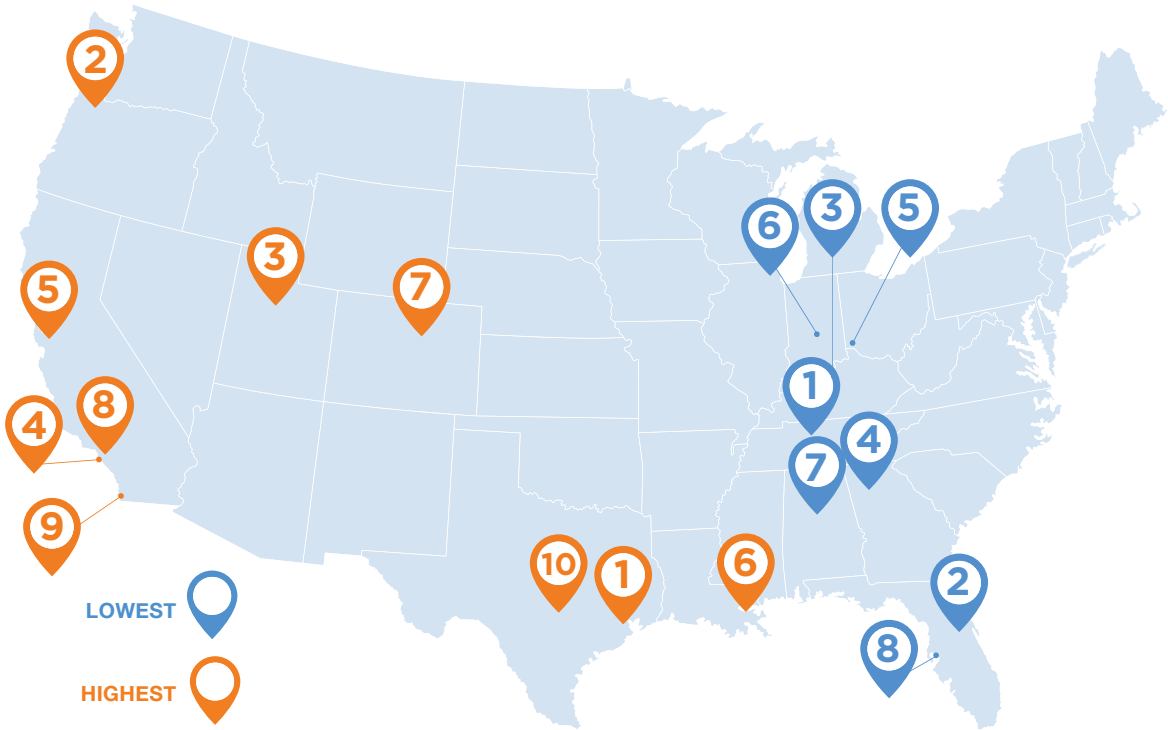
KEY FINDINGS

Birth Rates are Dropping

This year, the Centers for Disease Control and Prevention published data showing that in 2018, the U.S. reached a 32-year low in birth rates.

Of the metros observed in this study, 42 experienced a declining birth rate of –1% to –5%. Eight of these metros are in the top 20 most expensive states to have a baby, vaginally or via C-section, with and without insurance.[5]

Only eight metros observed no change or a slight increase in birth rates.



TOP 10 METROS WITH THE LARGEST DECLINE IN BIRTH RATES

1	Houston	–5%
2	Portland, Ore.	–5%
3	Salt Lake City	–5%
4	Los Angeles	–4%
5	San Jose, Calif.	–4%
6	New Orleans	–4%
7	Denver	–4%
8	Riverside, Calif.	–4%
9	San Diego	–3%
10	Austin, Texas	–3%

METROS WITH A SLIGHTLY GROWING OR STAGNANT BIRTH RATE

1	Nashville, Tenn.	1%
2	Orlando, Fla.	1%
3	Louisville, Ky.	0%
4	Atlanta	0%
5	Cincinnati	0%
6	Indianapolis	0%
7	Birmingham, Ala.	0%
8	Tampa, Fla.	0%

KEY FINDINGS

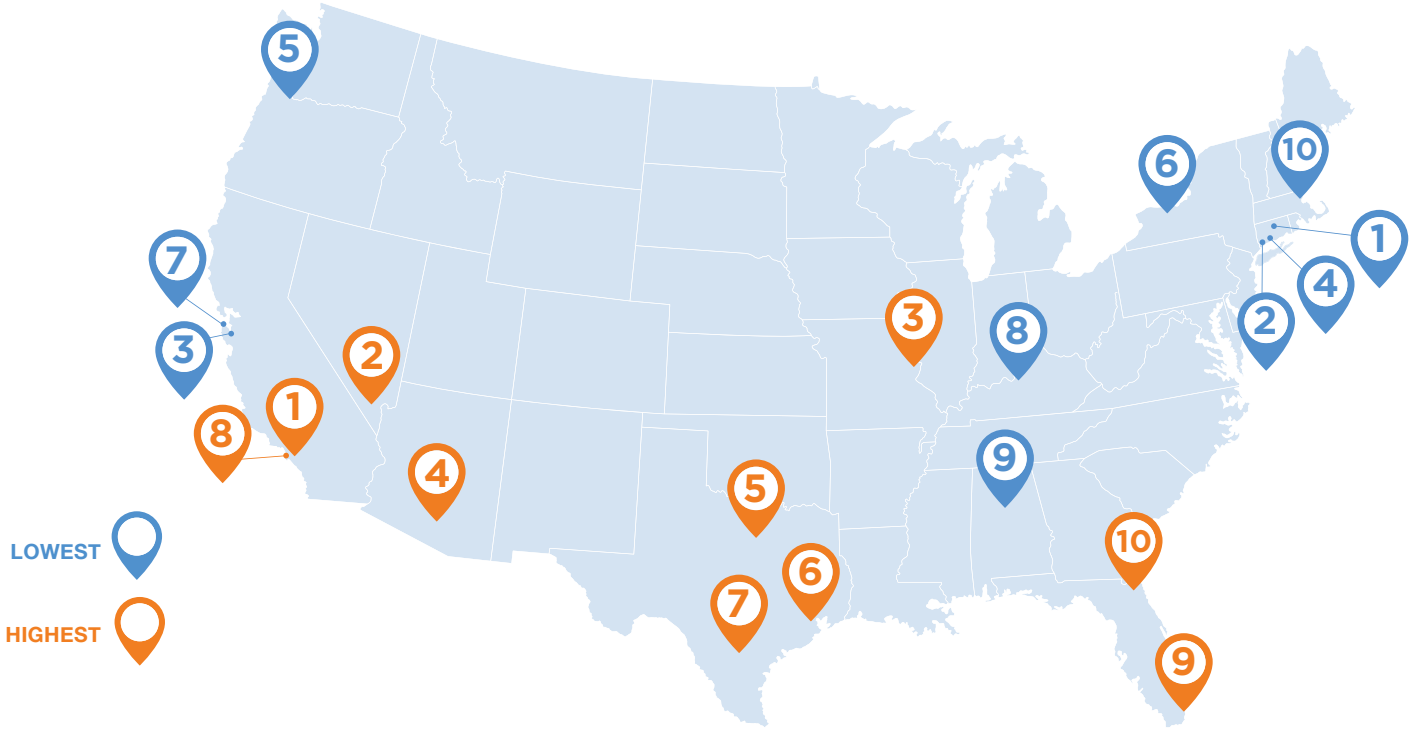
Nearly six-fold variation in OB-GYN workload

In this year's study, we also evaluated the number of live births performed on average by OB-GYNs in various U.S. MSAs to better understand workload variations within the specialty. Interestingly, we found that the frequency in the number of live births performed by an OB-GYN is largely determined by where they practice.

Doximity compared the number of OB-GYNs with the number of births in each of the 50 largest metros. The ratio ranged from nearly 200 live births per OB-GYN in Riverside, Calif. to 54 in Hartford, Conn., a nearly six-fold variation in OB-GYN workloads.

Despite declining birth rates, nationally, each OB-GYN delivers nearly 100 babies per year. This is in addition to the myriad of other services an OB-GYN provides to expecting mothers during prenatal, perinatal, and postpartum care. In the last trimester of pregnancy alone, it's recommended that women visit an OB-GYN at least every 2 weeks.[6] Beyond prenatal, perinatal, and postpartum care, OB-GYNs also juggle appointments to provide pap smears, sexually transmitted infection (STI) testing, pelvic exams, reproductive health consultations, blood work, etc.

An increase in retiring OB-GYNs could cause workforce shortages, making it difficult to keep up with the demand for women's health care services, especially in MSAs where the ratio is already strained.



THE LARGEST OB-GYN WORKLOAD: METROS WITH THE HIGHEST BIRTH TO OB-GYN RATIOS

1	Riverside, Calif.	197.67
2	Las Vegas	145.67
3	St. Louis	144.93
4	Phoenix	128.72
5	Dallas	116.21
6	Houston	115.11
7	San Antonio	112.94
8	Los Angeles	111.34
9	Miami	105.47
10	Jacksonville, Fla.	103.02

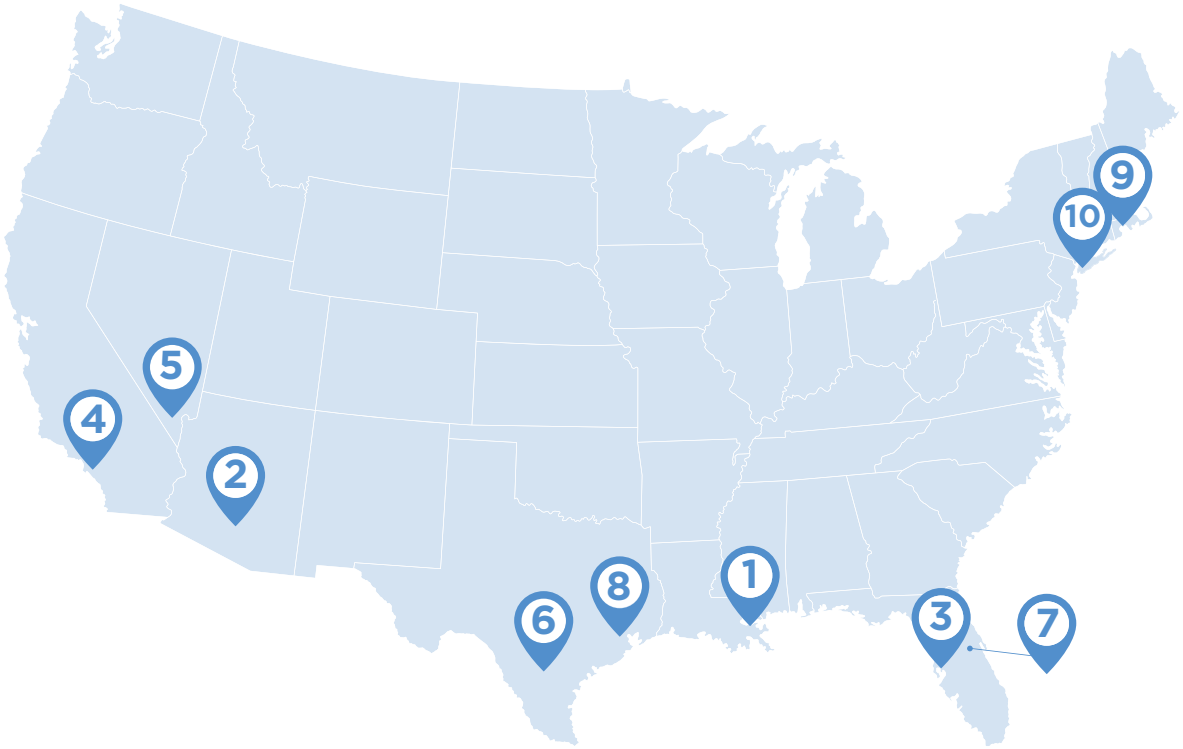
THE SMALLEST OB-GYN WORKLOAD: METROS WITH THE LOWEST BIRTH TO OB-GYN RATIOS

1	Hartford, Conn.	54.20
2	Bridgeport, Conn.	55.33
3	San Jose, Calif.	60.64
4	New Haven, Conn.	61.28
5	Portland, Ore.	62.12
6	Rochester, N.Y.	64.80
7	San Francisco	65.01
8	Louisville, Ky.	66.17
9	Birmingham, Ala.	66.20
10	Boston	69.57

KEY FINDINGS

Metropolitan Areas – Source of Insurance

Nationally, approximately 50% of all births are covered by Medicaid.[7] However, we found that regions with the largest OB-GYN workloads also delivered the highest number of Medicaid-funded births, relative to the privately insured population. These regions included Phoenix, Riverside, Calif., Las Vegas, San Antonio, and Houston. Simultaneously, regions with fewer mothers on Medicaid or mothers who are uninsured tend to have lower workloads and a younger distribution of OB-GYNS.



THE TOP 10 MEDICAID MSAS

1	New Orleans	62.5%
2	Phoenix	51.5%
3	Tampa, Fla.	51.0%
4	Riverside, Calif.	50.2%
5	Las Vegas	49.9%

6	San Antonio	47.6%
7	Orlando, Fla.	47.3%
8	Houston	46.7%
9	Providence, R.I.	46.2%
10	New York City	45.3%

OB-GYNs continue to face high workload demands and compensation issues that are potentially contributing to a national shortage. Women, millennials in particular, may feel this burden most acutely when trying to access an OB-GYN for routine women's health services or pregnancy-related care. Stakeholders across the country will hopefully find this research helpful in developing strategies to address the crisis.

METHODOLOGY

Doximity's study is drawn from CMS data, board certification data, and self-reported data on approximately 43,000 full-time, board-certified OB-GYN practitioners. To avoid including retired OB-GYNs, physicians older than 70 were removed from the data set.

Responses were mapped across MSAs, and the top 50 MSAs were selected by population according to 2010 Census data. Population growth data is based on comparisons with Census 2016 population estimates.

The number of births in each metropolitan area comes from the 2015 National Center for Health Statistics and the Centers for Disease Control and Prevention's WONDER database.

Data on the Medicaid, uninsured, and privately insured population comes from the American Community Survey (ACS). For each MSA, we limited the population to women aged 15-45. We calculated the Medicaid and uninsured rate as the number of women aged 15-45 either enrolled in Medicaid or uninsured relative to the number of women aged 15-45 with private insurance.

REFERENCES

1. Ollove, Michael. "A Shortage in the Nation's Maternal Health Care." The Pew Charitable Trusts, 15 August, 2016. http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2016/08/15/a-shortage-in-the-nations-maternal-health-care.
2. American Congress of Obstetricians and Gynecologists. The Obstetrician–Gynecologist Workforce in the United States 2017. Washington, DC: American Congress of Obstetricians and Gynecologists; 2017. https://m.acog.org/~/media/BB3A7629943642ADA47058D0BDCD1521.pdf.
3. Hamilton, B. E., and Martin, J. A. Births: Provisional Data for 2018, Births: Provisional Data for 2018 (2019). https://www.cdc.gov/nchs/data/vsrr/vsrr-007-508.pdf.
4. American Congress of Obstetricians and Gynecologists. Women's Health Care Physicians. https://www.acog.org/About-ACOG/ACOG-Departments/Annual-Womens-Health-Care/Your-Annual-Health-Care-Visit.
5. Hoffower, Hillary. "How much it costs to have a baby in every state, whether you have health insurance or don't" FAIR Health and Business Insider, 9 July 2018. https://www.businessinsider.com/how-much-does-it-cost-to-have-a-baby-2018-4.
6. U.S. National Library of Medicine. MedlinePlus. Prenatal care in your third trimester. https://medlineplus.gov/ency/patientinstructions/000558.htm.
7. Smith, Vernon K., Kathleen Gifford, Eileen Ellis, and Barbara Edwards, Health Management Associates; and Robin Rudowitz, Elizabeth Hinton, Larisa Antonisse and Allison Valentine, Kaiser Commission on Medicaid and the Uninsured. "Implementing Coverage and Payment Initiatives: Results from a 50-State Medicaid Budget Survey for State Fiscal Years 2016 and 2017." The Henry J. Kaiser Family Foundation, October 2016.

APPENDIX

Full OB-GYN Shortages Index, Highest to Lowest Risk

1	Las Vegas	11	San Diego	21	New York City	31	Providence, R.I.	41	Indianapolis
2	Salt Lake City	12	St. Louis	22	Philadelphia	32	Bridgeport, Conn.	42	Louisville, Ky.
3	Miami	13	Chicago	23	Sacramento, Calif.	33	Columbus, Ohio	43	Hartford, Conn.
4	Riverside, Calif.	14	Kansas City, Mo.	24	Atlanta	34	Charlotte, N.C.	44	Denver
5	Los Angeles	15	Cincinnati	25	Boston	35	Milwaukee	45	Cleveland
6	Buffalo, N.Y.	16	Orlando, Fla.	26	New Haven, Conn.	36	Austin, Texas	46	Birmingham, Ala.
7	Jacksonville, Fla.	17	Virginia Beach, Va.	27	San Antonio	37	Baltimore	47	Charleston, S.C.
8	Detroit	18	Phoenix	28	Rochester, N.Y.	38	Minneapolis	48	San Francisco
9	Pittsburgh	19	Tampa, Fla.	29	Houston	39	Washington, D.C.	49	San Jose, Calif.
10	Dallas	20	Seattle	30	Nashville, Tenn.	40	New Orleans	50	Portland, Ore.

APPENDIX

Full list of MSAs ranked by births per OB-GYNs

		Births per OBGYN
	National Average	**94**
1	Riverside, Calif.	198
2	Las Vegas	146
3	St. Louis	145
4	Phoenix	129
5	Dallas	116
6	Houston	115
7	San Antonio	113
8	Los Angeles	111
9	Miami	105
10	Jacksonville, Fla.	103
11	San Diego	103
12	Salt Lake City	102
13	Sacramento, Calif.	102
14	Detroit	100
15	Orlando, Fla.	99
16	Columbus, Ohio	99
17	Tampa, Fla.	97
18	Buffalo, N.Y.	93
19	Charlotte, N.C.	92
20	Indianapolis	92
21	Seattle	91
22	Austin, Texas	90
23	Atlanta	90
24	Chicago	89
25	Minneapolis	88
26	Kansas City, Mo.	88
27	Denver	87
28	Cincinnati	87
29	Milwaukee	85
30	Philadelphia	85
31	Pittsburgh	82
32	New York City	79
33	Charleston, S.C.	79
34	Washington, D.C.	78
35	Nashville, Tenn.	77
36	Providence, R.I.	77
37	Virginia Beach, Va.	76
38	Cleveland	76
39	Baltimore	71
40	New Orleans	70
41	Boston	70
42	Birmingham, Ala.	66
43	Louisville, Ky.	66
44	San Francisco	65
45	Rochester, N.Y.	65
46	Portland, Ore.	62
47	New Haven, Conn.	61
48	San Jose, Calif.	61
49	Bridgeport, Conn.	55
50	Hartford, Conn.	54

APPENDIX

Full list of MSAs with age brackets

	Percent OBGYNs under 40	Percent OBGYNs 40-55	Percent OBGYNs older than 55
National Average	**18.90%**	**46.07%**	**35.03%**
Atlanta	19.29%	47.33%	33.38%
Austin, Texas	22.76%	48.13%	29.10%
Baltimore	17.03%	48.91%	34.06%
Birmingham, Ala.	22.29%	45.18%	32.53%
Boston	19.67%	43.58%	36.75%
Bridgeport, Conn.	13.41%	49.16%	37.43%
Buffalo, N.Y.	16.28%	44.96%	38.76%
Charleston, S.C.	21.85%	51.26%	26.89%
Charlotte, N.C.	20.26%	49.84%	29.90%
Chicago	17.61%	45.96%	36.43%
Cincinnati	24.64%	38.41%	36.96%
Cleveland	19.58%	48.95%	31.47%
Columbus, Ohio	23.29%	46.99%	29.72%
Dallas	20.98%	45.37%	33.66%
Denver	25.66%	47.35%	26.98%
Detroit	14.55%	48.98%	36.48%
Hartford, Conn.	16.36%	49.07%	34.58%
Houston	26.13%	47.98%	25.89%
Indianapolis	20.63%	53.57%	25.79%
Jacksonville, Fla.	17.06%	47.65%	35.29%
Kansas City, Mo.	23.41%	40.08%	36.51%
Las Vegas	14.59%	44.32%	41.08%
Los Angeles	17.10%	47.11%	35.79%
Louisville, Ky.	19.19%	47.67%	33.14%
Miami	15.70%	47.10%	37.20%
Milwaukee	25.23%	41.74%	33.03%
Minneapolis	26.73%	44.77%	28.51%

	Percent OBGYNs under 40	Percent OBGYNs 40-55	Percent OBGYNs older than 55
National Average	**18.90%**	**46.07%**	**35.03%**
Nashville, Tenn.	18.63%	46.39%	34.98%
New Haven, Conn.	16.31%	44.68%	39.01%
New Orleans	19.58%	47.09%	33.33%
New York City	17.10%	46.69%	36.21%
Orlando, Fla.	21.36%	44.07%	34.58%
Philadelphia	19.31%	45.42%	35.27%
Phoenix	18.06%	51.69%	30.25%
Pittsburgh	20.59%	37.87%	41.54%
Portland, Ore.	23.43%	49.12%	27.46%
Providence, R.I.	18.09%	46.73%	35.18%
Riverside, Calif.	18.27%	46.51%	35.22%
Rochester, N.Y.	20.44%	42.34%	37.23%
Sacramento, Calif.	21.37%	46.95%	31.68%
Salt Lake City	18.90%	40.85%	40.24%
San Antonio	24.25%	47.76%	27.99%
San Diego	18.95%	46.13%	34.91%
San Francisco	20.20%	48.98%	30.82%
San Jose, Calif.	17.53%	52.05%	30.41%
Seattle	21.06%	44.29%	34.65%
St. Louis	22.33%	45.15%	32.52%
Tampa, Fla.	20.78%	45.48%	33.73%
Virginia Beach, Va.	21.30%	39.35%	39.35%
Washington, D.C.	20.40%	47.74%	31.86%

doximity

Founded in 2011, Doximity connects physicians and advanced practice clinicians to make them more successful and productive. Doximity is the largest professional medical network, with over 70 percent of all U.S. physicians as members, enabling collaboration across specialties and every major medical center. Doximity is based in San Francisco, California.

doximity.com