

## Paulding County Physician Standard Report

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Anesthesiology</b>		<b>127,903</b>	<b>2</b>	<b>1.6</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	14.0	18	Deficit: -16	24	
Two Mature HMO	9.7	12	Deficit: -10	16	
Adjusted FTE	9.1	12	Deficit: -10	15	
GMENAC	8.9	11	Deficit: -9	15	
Kaiser Portland	5.9	8	Deficit: -6	7	
7 Kaiser Plans	3.9	5	Deficit: -3	7	
GHC Seattle	9.0	12	Deficit: -10	15	
Three HMOs					
Goodman	7.0	9	Deficit: -7	12	
Hicks & Glenn					
Solucient					
Average Requirement	7.6	10	Deficit: -8	13	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Cardiovascular Diseases</b>		<b>127,903</b>	<b>3</b>	<b>2.3</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	7.5	10	Deficit: -7	13	
Two Mature HMO	5.4	7	Deficit: -4	9	
Adjusted FTE	5.0	6	Deficit: -3	8	
GMENAC	3.1	4	Deficit: -1	5	
Kaiser Portland	3.0	4	Deficit: -1	3	
7 Kaiser Plans	1.8	2	Surplus: 1	3	
GHC Seattle	2.9	4	Deficit: -1	5	
Three HMOs					
Goodman	3.6	5	Deficit: -2	6	
Hicks & Glenn	2.6	3	Adequate 0	4	
Solucient	4.2	5	Deficit: -2	7	
Average Requirement	3.5	4	Deficit: -1	6	

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Dermatology</b>		<b>127,903</b>	<b>1</b>	<b>0.8</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	3.7	5	Deficit: -4	6	
Two Mature HMO	2.8	4	Deficit: -3	5	
Adjusted FTE	2.6	3	Deficit: -2	4	
GMENAC	2.8	4	Deficit: -3	5	
Kaiser Portland	2.5	3	Deficit: -2	4	
7 Kaiser Plans	2.4	3	Deficit: -2	4	
GHC Seattle	2.6	3	Deficit: -2	4	
Three HMOs	1.6	2	Deficit: -1	3	
Goodman	1.4	2	Deficit: -1	2	
Hicks & Glenn	2.1	3	Deficit: -2	4	
Solucient	3.1	4	Deficit: -3	5	
Average Requirement	2.4	3	Deficit: -2	4	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Emergency Medicine</b>		<b>127,903</b>	<b>2</b>	<b>1.6</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	10.5	13	Deficit: -11	18	
Two Mature HMO	5.5	7	Deficit: -5	9	
Adjusted FTE	5.2	7	Deficit: -5	9	
GMENAC	5.4	7	Deficit: -5	9	
Kaiser Portland	6.7	9	Deficit: -7	9	
7 Kaiser Plans	5.3	7	Deficit: -5	9	
GHC Seattle					
Three HMOs					
Goodman	2.7	3	Deficit: -1	5	
Hicks & Glenn					
Solucient	12.4	16	Deficit: -14	21	
Average Requirement	6.2	8	Deficit: -6	11	

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k		Population
<b>Family Practice</b>		<b>127,903</b>	<b>13</b>	<b>10.2</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	31.5	40	Deficit: -27	53	
Two Mature HMO	45.6	58	Deficit: -45	77	
Adjusted FTE	42.6	54	Deficit: -41	72	
GMENAC	25.2	32	Deficit: -19	43	
Kaiser Portland	16.7	21	Deficit: -8	19	
7 Kaiser Plans	11.0	14	Deficit: -1	19	
GHC Seattle					
Three HMOs	9.2	12	Surplus: 1	16	
Goodman					
Hicks & Glenn	16.2	21	Deficit: -8	27	
Solucient	22.5	29	Deficit: -16	38	
Average Requirement	23.6	30	Deficit: -17	40	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k		Population
<b>Internal Medicine</b>		<b>127,903</b>	<b>6</b>	<b>4.7</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	53.1	68	Deficit: -62	90	
Two Mature HMO	21.4	27	Deficit: -21	36	
Adjusted FTE	20.0	26	Deficit: -20	34	
GMENAC	28.8	37	Deficit: -31	49	
Kaiser Portland	28.1	36	Deficit: -30	51	
7 Kaiser Plans	30.3	39	Deficit: -33	51	
GHC Seattle					
Three HMOs	16.7	21	Deficit: -15	28	
Goodman					
Hicks & Glenn	11.3	14	Deficit: -8	19	
Solucient	19.0	24	Deficit: -18	32	
Average Requirement	22.0	28	Deficit: -22	37	

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Physician Specialty	2008 Actual			2015 Projected
	Population	Physicians /100k		Population
<b>OB/GYN</b>	<b>127,903</b>	<b>1</b>	<b>0.8</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need
AMA	14.1	18	Deficit: -17	24
Two Mature HMO	12.1	15	Deficit: -14	21
Adjusted FTE	11.3	14	Deficit: -13	19
GMENAC	9.9	13	Deficit: -12	17
Kaiser Portland	11.6	15	Deficit: -14	20
7 Kaiser Plans	11.5	15	Deficit: -14	20
GHC Seattle	10.0	13	Deficit: -12	17
Three HMOs	8.8	11	Deficit: -10	15
Goodman	8.4	11	Deficit: -10	14
Hicks & Glenn	8.0	10	Deficit: -9	14
Solucient	10.2	13	Deficit: -12	17
Average Requirement	10.2	13	Deficit: -12	17

Physician Specialty	2008 Actual			2015 Projected
	Population	Physicians /100k		Population
<b>Pediatrics</b>	<b>127,903</b>	<b>2</b>	<b>1.6</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need
AMA	24.9	32	Deficit: -30	42
Two Mature HMO	16.6	21	Deficit: -19	28
Adjusted FTE	15.5	20	Deficit: -18	26
GMENAC	12.4	16	Deficit: -14	21
Kaiser Portland	11.9	15	Deficit: -13	27
7 Kaiser Plans	16.0	20	Deficit: -18	27
GHC Seattle				
Three HMOs	9.8	13	Deficit: -11	17
Goodman				
Hicks & Glenn	7.6	10	Deficit: -8	13
Solucient	13.9	18	Deficit: -16	24
Average Requirement	13.0	17	Deficit: -15	22

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k	Status	Population
<b>Psychiatry</b>		<b>127,903</b>	<b>1</b>	<b>0.8</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status		Physician Need
AMA	13.6	17	Deficit: -16		23
Two Mature HMO	7.7	10	Deficit: -9		13
Adjusted FTE	7.2	9	Deficit: -8		12
GMENAC	15.4	20	Deficit: -19		26
Kaiser Portland	5.2	7	Deficit: -6		7
7 Kaiser Plans	4.1	5	Deficit: -4		7
GHC Seattle					
Three HMOs					
Goodman	7.2	9	Deficit: -8		12
Hicks & Glenn	3.9	5	Deficit: -4		7
Solucient	5.7	7	Deficit: -6		10
Average Requirement	7.1	9	Deficit: -8		12

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k	Status	Population
<b>General Surgery</b>		<b>127,903</b>	<b>2</b>	<b>1.6</b>	<b>169,702</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status		Physician Need
AMA	12.5	16	Deficit: -14		21
Two Mature HMO	9.4	12	Deficit: -10		16
Adjusted FTE	8.8	11	Deficit: -9		15
GMENAC	9.7	12	Deficit: -10		16
Kaiser Portland	7.0	9	Deficit: -7		11
7 Kaiser Plans	6.2	8	Deficit: -6		11
GHC Seattle	5.9	8	Deficit: -6		10
Three HMOs	4.2	5	Deficit: -3		7
Goodman	9.7	12	Deficit: -10		16
Hicks & Glenn	4.1	5	Deficit: -3		7
Solucient	6.0	8	Deficit: -6		10
Average Requirement	7.1	9	Deficit: -7		12

## Paulding County Physician Standard Report

Report created by Georgia Board for Physician Workforce, State of Georgia

\*Standards are presented as rates per 100,000 population

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- (2) Graduate Medical Education National Advisory Committee Summary Report. 1981. Pub. No. (HRA) 81-651. Washington: Government Printing Office.
- (3) American Medical Association. 1996. Physician Characteristics and Distribution in the US: 1995/1996. Chicago.
- (4) American Osteopathic Association. 1993. 1994 Yearbook and Directory of Osteopathic Physicians. Chicago.
- (5) Hart, L., E. Wagner, J. Parzada, A. Nelson, and R. Rosenblah. 1997. Physician Staffing Ratios in Staff- Model HMO's: A Cautionary Tale, Health Affairs 16, no. 1:55-70.
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- (7) Steinwachs, D., J.P. Weiner, S. Shapiro, et al. 1986. A Comparison of the Requirements for Primary Care Physicians in with Projections Made by the Graduate Medical National Advisory Committee. New England Journal of Medicine 314:217-222.
- (8) Kronick, R., D.C. Goodman, J. Wennberg, and E. Wagner. 1993. The Marketplace in Health Care Reform: The Demographic Limitations of Managed Competition. New England Journal of Medicine 328:1480-152. See also, related NAPS Document 04998.
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- (10) Forte, G.J., Dionne, M., Beaulieu, M., and Salsberg, E. Profile of New York State Physicians. Rensselaer, NY: Center for Health Workforce Studies, School of Public Health, SUNY Albany. April 2001.
- (11) A Review of Physician-to-Population Ratios. Merritt Hawkins & Associates. GMENAC, Goodman (Dec. 11, 1996 JAMA), Hicks & Glenn (1989 Journal of Health Care Management), Solucient (2003).
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