

## Walker County Physician Standard Report

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k		Population
<b>Anesthesiology</b>		<b>64,558</b>	<b>3</b>	<b>4.6</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	14.0	9	Deficit: -6	10	
Two Mature HMO	9.7	6	Deficit: -3	7	
Adjusted FTE	9.1	6	Deficit: -3	6	
GMENAC	8.9	6	Deficit: -3	6	
Kaiser Portland	5.9	4	Deficit: -1	3	
7 Kaiser Plans	3.9	3	Adequate 0	3	
GHC Seattle	9.0	6	Deficit: -3	6	
Three HMOs					
Goodman	7.0	5	Deficit: -2	5	
Hicks & Glenn					
Solucient					
Average Requirement	7.6	5	Deficit: -2	5	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k		Population
<b>Cardiovascular Diseases</b>		<b>64,558</b>	<b>2</b>	<b>3.1</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	7.5	5	Deficit: -3	5	
Two Mature HMO	5.4	3	Deficit: -1	4	
Adjusted FTE	5.0	3	Deficit: -1	3	
GMENAC	3.1	2	Adequate 0	2	
Kaiser Portland	3.0	2	Adequate 0	1	
7 Kaiser Plans	1.8	1	Surplus: 1	1	
GHC Seattle	2.9	2	Adequate 0	2	
Three HMOs					
Goodman	3.6	2	Adequate 0	3	
Hicks & Glenn	2.6	2	Adequate 0	2	
Solucient	4.2	3	Deficit: -1	3	
Average Requirement	3.5	2	Adequate 0	2	

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Emergency Medicine</b>		<b>64,558</b>	<b>3</b>	<b>4.6</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	10.5	7	Deficit: -4	7	
Two Mature HMO	5.5	4	Deficit: -1	4	
Adjusted FTE	5.2	3	Adequate 0	4	
GMENAC	5.4	3	Adequate 0	4	
Kaiser Portland	6.7	4	Deficit: -1	4	
7 Kaiser Plans	5.3	3	Adequate 0	4	
GHC Seattle					
Three HMOs					
Goodman	2.7	2	Surplus: 1	2	
Hicks & Glenn					
Solucient	12.4	8	Deficit: -5	9	
Average Requirement	6.2	4	Deficit: -1	4	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Family Practice</b>		<b>64,558</b>	<b>18</b>	<b>27.9</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	31.5	20	Deficit: -2	22	
Two Mature HMO	45.6	29	Deficit: -11	32	
Adjusted FTE	42.6	28	Deficit: -10	30	
GMENAC	25.2	16	Surplus: 2	18	
Kaiser Portland	16.7	11	Surplus: 7	8	
7 Kaiser Plans	11.0	7	Surplus: 11	8	
GHC Seattle					
Three HMOs	9.2	6	Surplus: 12	6	
Goodman					
Hicks & Glenn	16.2	10	Surplus: 8	11	
Solucient	22.5	15	Surplus: 3	16	
Average Requirement	23.6	15	Surplus: 3	17	

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k	Physician Need	Population
<b>Nephrology</b>		<b>64,558</b>	<b>2</b>	<b>3.1</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	2.6	2	Adequate 0	2	
Two Mature HMO	1.4	1	Surplus: 1	1	
Adjusted FTE	1.3	1	Surplus: 1	1	
GMENAC	1.1	1	Surplus: 1	1	
Kaiser Portland	0.8	1	Surplus: 1	0	
7 Kaiser Plans	0.7	0	Surplus: 2	0	
GHC Seattle	0.9	1	Surplus: 1	1	
Three HMOs					
Goodman					
Hicks & Glenn					
Solucient	0.7	0	Surplus: 2	1	
Average Requirement	1.0	1	Surplus: 1	1	

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians /100k	Physician Need	Population
<b>OB/GYN</b>		<b>64,558</b>	<b>1</b>	<b>1.5</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need	
AMA	14.1	9	Deficit: -8	10	
Two Mature HMO	12.1	8	Deficit: -7	8	
Adjusted FTE	11.3	7	Deficit: -6	8	
GMENAC	9.9	6	Deficit: -5	7	
Kaiser Portland	11.6	7	Deficit: -6	8	
7 Kaiser Plans	11.5	7	Deficit: -6	8	
GHC Seattle	10.0	6	Deficit: -5	7	
Three HMOs	8.8	6	Deficit: -5	6	
Goodman	8.4	5	Deficit: -4	6	
Hicks & Glenn	8.0	5	Deficit: -4	6	
Solucient	10.2	7	Deficit: -6	7	
Average Requirement	10.2	7	Deficit: -6	7	

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Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Ophthalmology</b>		<b>64,558</b>	<b>1</b>	<b>1.5</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status		Physician Need
AMA	6.0	4	Deficit: -3		4
Two Mature HMO	5.9	4	Deficit: -3		4
Adjusted FTE	5.5	4	Deficit: -3		4
GMENAC	4.6	3	Deficit: -2		3
Kaiser Portland	2.4	2	Deficit: -1		2
7 Kaiser Plans	3.1	2	Deficit: -1		2
GHC Seattle	5.0	3	Deficit: -2		3
Three HMOs					
Goodman	3.5	2	Deficit: -1		2
Hicks & Glenn	3.2	2	Deficit: -1		2
Solucient	4.7	3	Deficit: -2		3
Average Requirement	4.2	3	Deficit: -2		3

Physician Specialty		2008 Actual			2015 Projected
		Population	Physicians	/100k	Population
<b>Radiology</b>		<b>64,558</b>	<b>2</b>	<b>3.1</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status		Physician Need
AMA	11.4	7	Deficit: -5		8
Two Mature HMO	13.6	9	Deficit: -7		10
Adjusted FTE	13.7	9	Deficit: -7		10
GMENAC	7.7	5	Deficit: -3		5
Kaiser Portland	8.5	5	Deficit: -3		3
7 Kaiser Plans	4.7	3	Deficit: -1		3
GHC Seattle	7.7	5	Deficit: -3		5
Three HMOs					
Goodman	8.0	5	Deficit: -3		6
Hicks & Glenn					
Solucient					
Average Requirement	9.1	6	Deficit: -4		6

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Physician Specialty	2008 Actual			2015 Projected
	Population	Physicians /100k		Population
<b>General Surgery</b>	<b>64,558</b>	<b>2</b>	<b>3.1</b>	<b>69,994</b>
National Physician Standards*	Standard Phys/100,000 Pop.	Physician Need	Status	Physician Need
AMA	12.5	8	Deficit: -6	9
Two Mature HMO	9.4	6	Deficit: -4	7
Adjusted FTE	8.8	6	Deficit: -4	6
GMENAC	9.7	6	Deficit: -4	7
Kaiser Portland	7.0	5	Deficit: -3	4
7 Kaiser Plans	6.2	4	Deficit: -2	4
GHC Seattle	5.9	4	Deficit: -2	4
Three HMOs	4.2	3	Deficit: -1	3
Goodman	9.7	6	Deficit: -4	7
Hicks & Glenn	4.1	3	Deficit: -1	3
Solucient	6.0	4	Deficit: -2	4
Average Requirement	7.1	5	Deficit: -3	5

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

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

- (1) McClendon, B., R. Polizer, E. Christain, and E. Fernandez. 1997. Downsizing the Physician Workforce. Public Health Reports. May/June 112:231-239.
- (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.
- (6) Weiner, J.P. 1994 Forecasting the Effects of Health Reform on U.S. Physician Workforce Requirement. JAMA 272, no. 3:222-230.
- (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.
- (9) Vansdow, N.A. The Physician Workforce: Issues for Academic Medical Centers. Forum on the Future of Academic Medicine. December 2, 1996.
- (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).
- (12) American Medical Association. Physician Characteristics and Distribution in the US, 2010 Edition; 2010.