



2021 Physician Workforce Annual Report

November 2021

Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

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Executive Summary

The 2021 Physician Workforce Annual Report presents a summary and analysis of the 2020 and 2021 Physician Workforce Surveys.¹ 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.² This report helps policymakers make informed decisions and create policies about Florida's current and future physician workforce and access to care.

During the 2020–21 survey cycle, there were 89,396 physicians who possessed a license that allowed them to practice in Florida. Of these physicians, 77,631 renewed their medical license during 2020 and 2021 and responded to the workforce survey. Of the physicians renewing their medical license, 55,809 (71.9%) indicated they are providing direct patient care in Florida. Unless otherwise specified, survey results presented in this report are based on these physicians.³

Key findings based on the 2020–21 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% (1,059) of physicians have a direct patient care practice in Florida's rural counties (Appendix B).
- The percentage of minority physicians has been increasing since 2011-12 from 38.7% to 44.9% (page 8).
- Over 60% (33,773) 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 (46.8%) (page 10).
- The top three specialty groups for physicians providing direct patient care in Florida are internal medicine (28.2% or 15,339), family medicine (14.6% or 7,951) and pediatrics (8.1% or 4,411) (page 11).
- Primary care physicians account for 31.4% of physicians providing direct patient care (page 14).
- Almost three-quarters (74.7% or 37,864) of physicians practice in an office setting, and 19.0% (9,633) practice in a hospital (page 16).
- Over three-quarters (76.7%) of physicians report they accept patients with Medicare (page 22).
- Just under two-thirds (64.0%) of physicians report they accept patients with Medicaid (page 25).

¹ The 2020–21 biennial survey cycle is from July 1, 2019 through June 30, 2021.

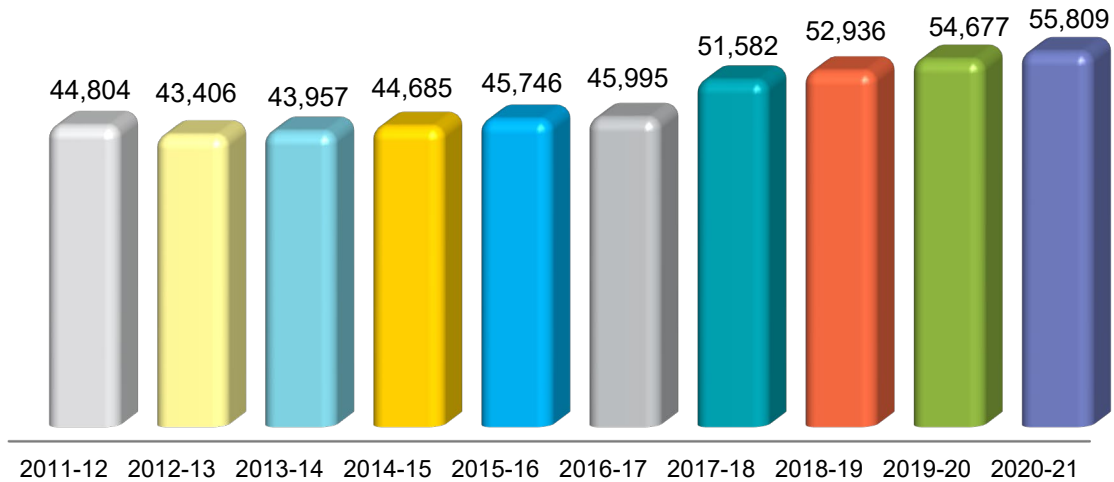
² Newly licensed physicians do not complete a survey.

³ See page 2 for a key to physician definitions.

- A total of 9.2% (5,107) of active physicians plan to retire in the next five years (page 28).

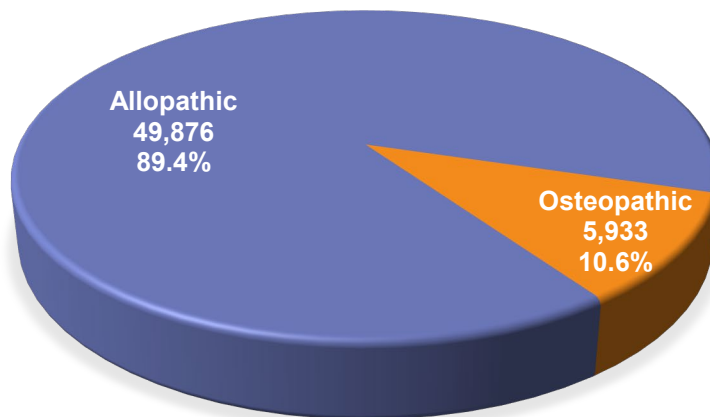
During the last ten-year period, the number of physicians providing direct patient care in Florida has increased 24.6%, as shown in the following chart.⁴ The increase in these numbers occurred while the total population of Florida increased just 13.5%.⁵

Active Physicians in Florida from 2011–12 to 2020–21



Of the 55,809 physicians providing direct patient care who renewed their medical license during 2020 and 2021 and responded to the workforce survey, 89.4% were allopathic physicians and 10.6% were osteopathic physicians.

Active Physicians in Florida by Physician Type for 2020–21



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

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

2021 Florida Physician Workforce Annual Report

Introduction

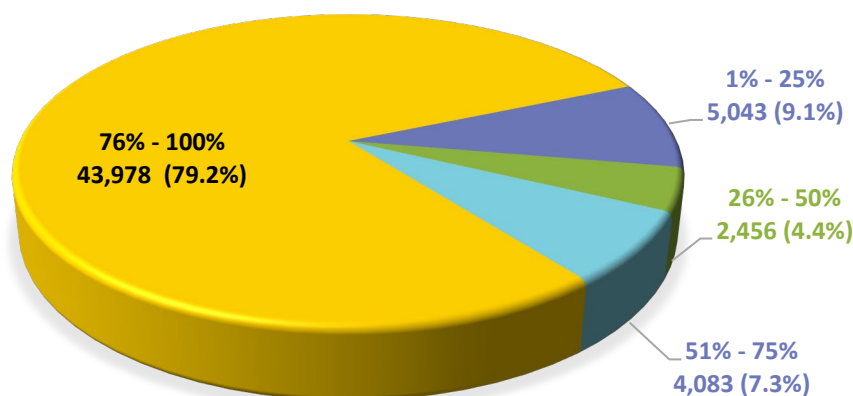
The 2021 Physician Workforce Annual Report is based on responses to the Florida Physician Workforce Survey. The survey is part of the licensure renewal process for physicians and is administered by the Florida Department of Health's Division of Medical Quality Assurance. Physicians must renew their license every other year. Newly licensed physicians are not included in the analysis because the survey is only administered upon licensure renewal.

A total of 89,396 physicians possess a license that allows them to practice in Florida. Of these physicians, 77,631 renewed their medical license during 2020 and 2021 and responded to the workforce survey. Of those surveyed, 55,809 are providing direct patient care.

From the 2011–12 survey cohort to the 2020–21 survey cohort, the number of actively practicing physicians increased 24.0%, from 44,804 to 55,809. During this same time, the population of Florida increased 13.5%, from 19.3 million to 21.9 million.⁶

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.⁷

Physicians Providing Direct Patient Care as a Percentage of Their Time



⁶ The 2021 Florida estimated population number is published by *World Population Review* (<https://worldpopulationreview.com/states/florida-population>).

⁷ There were 249 (.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 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, 2021, 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 (0400-0406) 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.	Saima Chaudhry, MD
One individual representing a statutory teaching hospital as defined in s. 408.07 and recommended by the Safety Net Hospital Alliance.	Steven Sonenreich, MBA
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.	Joan St. Onge, 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.	Michael Curtis, MBA

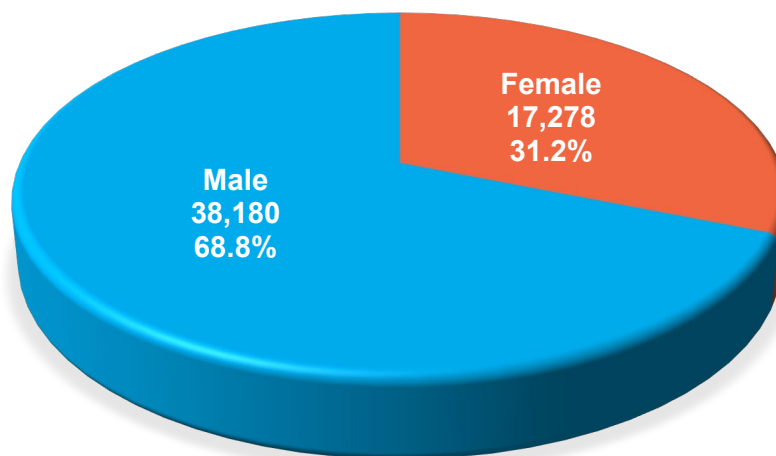
The Council continues to monitor the status of Graduate Medical Education (GME) programs in Florida. GME programs and residency programs are an important component of Florida's physician workforce. In 2013, the Florida Legislature created the Statewide Medicaid Residency Program, and appropriated \$80 million to the program in the form of recurring state and matching federal funds. In 2015, the Legislature also 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, and it appropriated \$100 million to the program. The 2020 Legislature appropriated a total of \$287.6 million to these programs.

Physician Workforce Demographics

Gender

The percentage of physicians who possess a license that allows them to practice in Florida is 68.9% male and 31.1% female. Likewise, in the 2020–21 survey cohort, 68.8% of Florida’s actively practicing physicians are male and 31.2% are female, as shown in Figure 1.

Figure 1: 2020–21 Physician Gender
n = 55,458



The gender ratio of actively practicing physicians in Florida is approaching the state population average. In April 2010, the U.S. Census Bureau reported Florida’s population was 51.1% female, which is the same percentage for its 2021 estimated female population.⁸ The male-to-female ratio of physicians in the 2011–12 survey cohort was 2.9:1. The ratio for the 2020–21 cohort changed to 2.2:1. The *Association of American Medical Colleges’ 2019 State Physician Workforce Data Report* states 30.7% of Florida’s active physicians are female, which ranks Florida 39th in the country. The nationwide average percentage of female physicians is 35%.^{9, 10, 11}

⁸ The 2019 Florida gender percentages are published on the *United States Census Bureau’s QuickFacts* webpage (www.census.gov/quickfacts/fact/table/fl/PST045217).

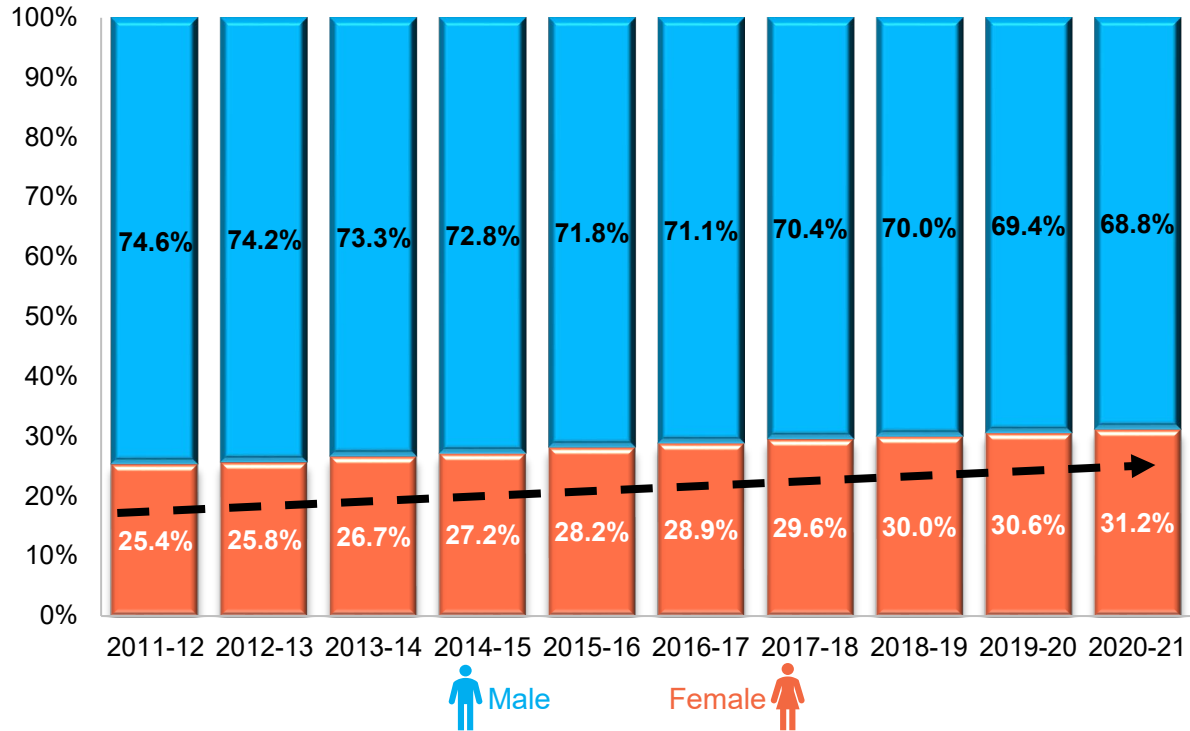
⁹ This figure is on pages 21 and 22 of the *2019 State Physician Workforce Data Book* (<https://www.aamc.org/data-reports/workforce/report/state-physician-workforce-data-report>).

¹⁰ The percentage is slightly higher than the numbers in this report because it includes all physicians, not just those renewing their licenses.

¹¹ *The Association of American Medical Colleges’ State Physician Workforce Data Report* is published biennially and the 2021 report is expected to be published in November 2021.

The percentage of female physicians has steadily increased from 25.4% in 2011–12 to 31.2% in 2020–21 (see Figure 2). While the number of female physicians has increased 51.8% from 11,379 to 17,278 the number of male physicians has only increased 14.2% from 33,425 to 38,180.

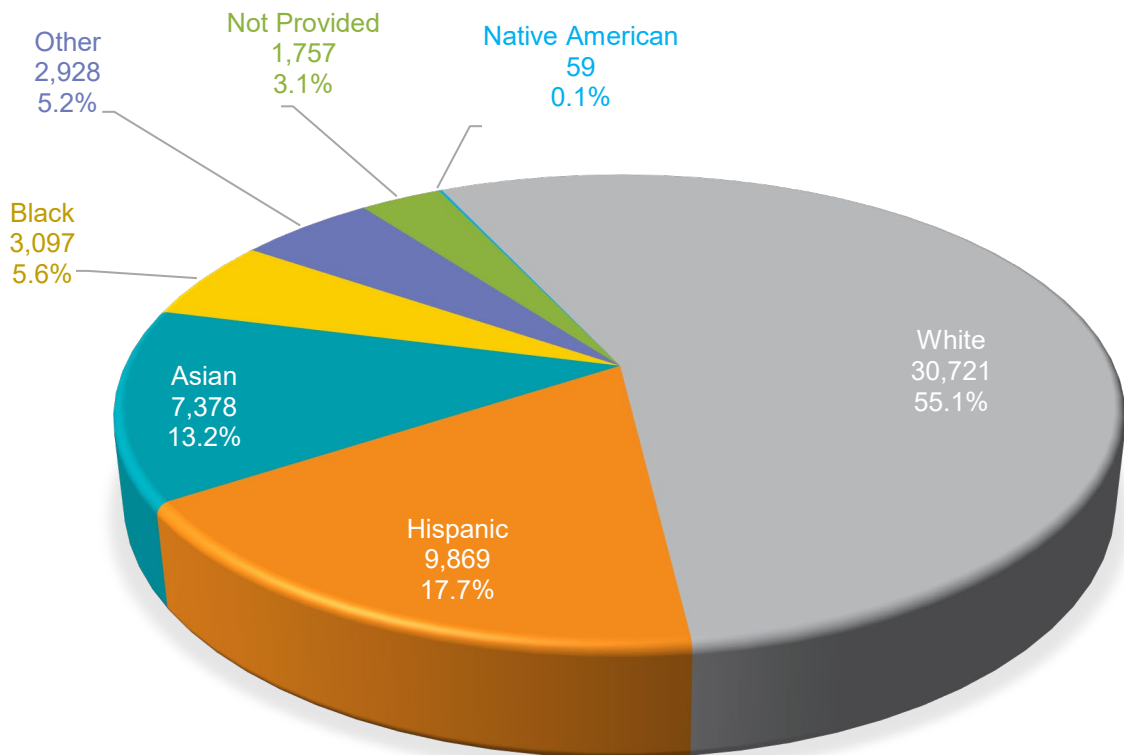
**Figure 2: Ten-Year Trend of Physicians by Gender
2011–12 to 2020–21**



Ethnicity

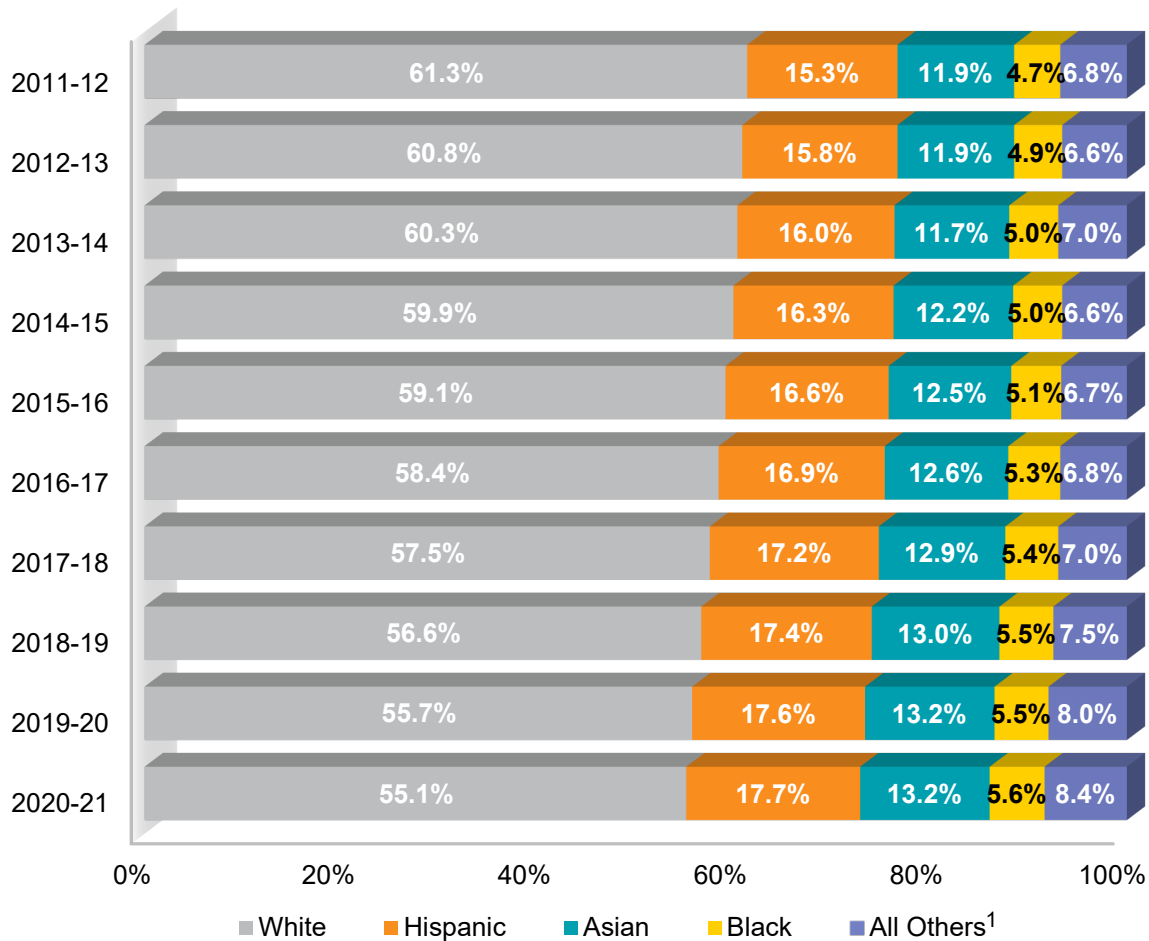
The percentage of all physicians who possess a license that allows them to practice in Florida is 56.3% White, 15% Hispanic, 13.4% Asian, 5.6% Black, and 0.1% Native American (4.6% did not provide an ethnicity). Similarly, in the 2020–21 survey cohort, just over half of Florida’s actively practicing physician workforce is White (55.1%), 17.7% is Hispanic, 13.2% is Asian and 5.6% is Black, as shown in Figure 3.

Figure 3: 2020–21 Physicians by Ethnicity
n = 55,809



The percentage of minority physicians in Florida has been increasing since 2011–12 (see Figure 4). In the 2011–12 cohort, minority physicians comprised 38.7% of all physicians. In the 2020–21 cohort, minority physicians increased to 44.9%.

Figure 4: Ten-Year Trend of Physicians by Ethnicity as a Percentage of Practicing 2011–12 to 2020–21



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

Since the 2011–12 cohort, the following changes have occurred:

- The number of Black physicians increased 47.1% (from 2,106 to 3,097).
- The number of Asian physicians increased 38.4% (from 5,332 to 7,378).
- The number of Hispanic physicians increased 44% (from 6,855 to 9,869).
- The number of Native American physicians increased 55.3% (from 38 to 59).
- The number of White physicians increased 11.9% (from 27,465 to 30,721).

Age

The average age of practicing physicians is 54 years old. The three youngest physicians renewing a license are 28 years old. The two oldest practicing physicians are 100 and 101 years old.¹² The percentage of physicians working past typical retirement age (65 or older) is 21.8%. In addition, 34.7% (19,359) of practicing physicians are ages 60 years and older, and 25.8% (14,414) are between ages 50 and 59. There are over twice as many physicians ages 60 years and older than there are under age 40. Figure 5 shows the age ranges for practicing physicians and Figure 6 shows the age group distribution by gender for these physicians.

Figure 5: 2020–21 Physicians by Age Group
n = 55,809

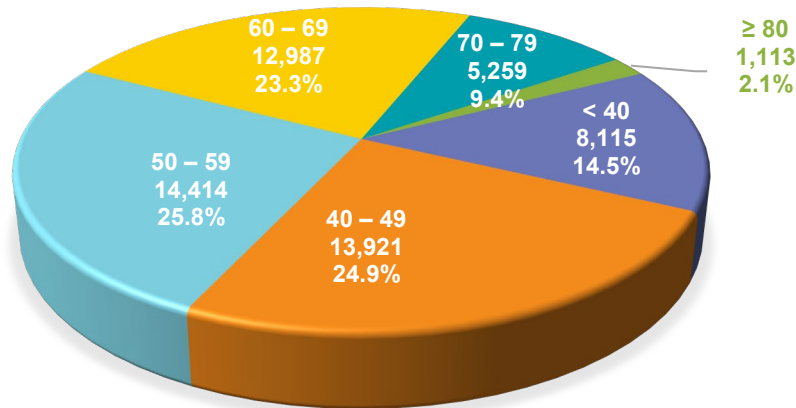
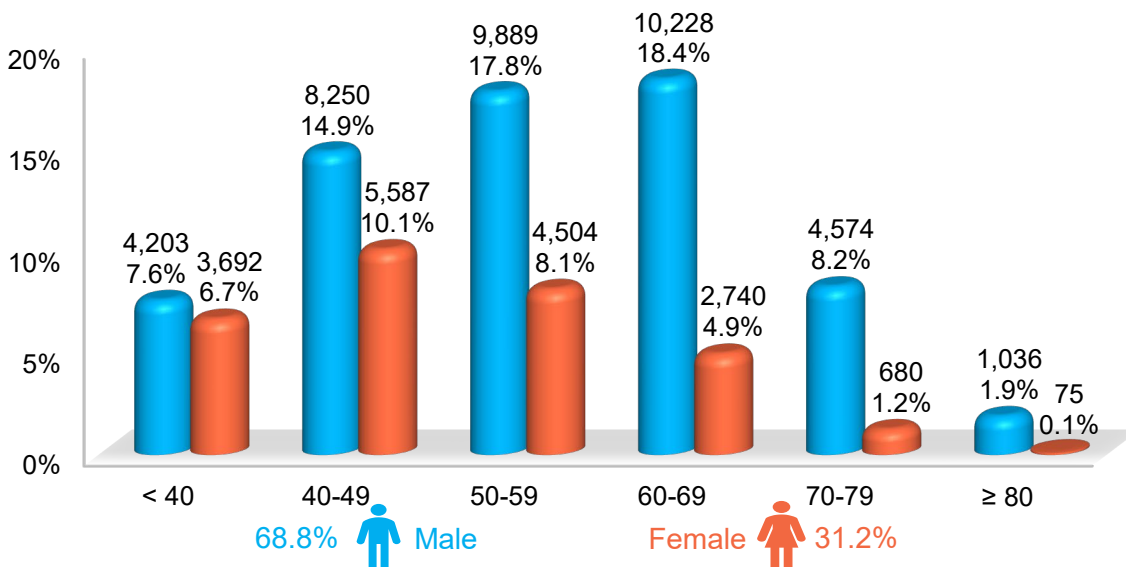


Figure 6: 2020–21 Physicians by Gender and Age Group
n = 55,458¹³

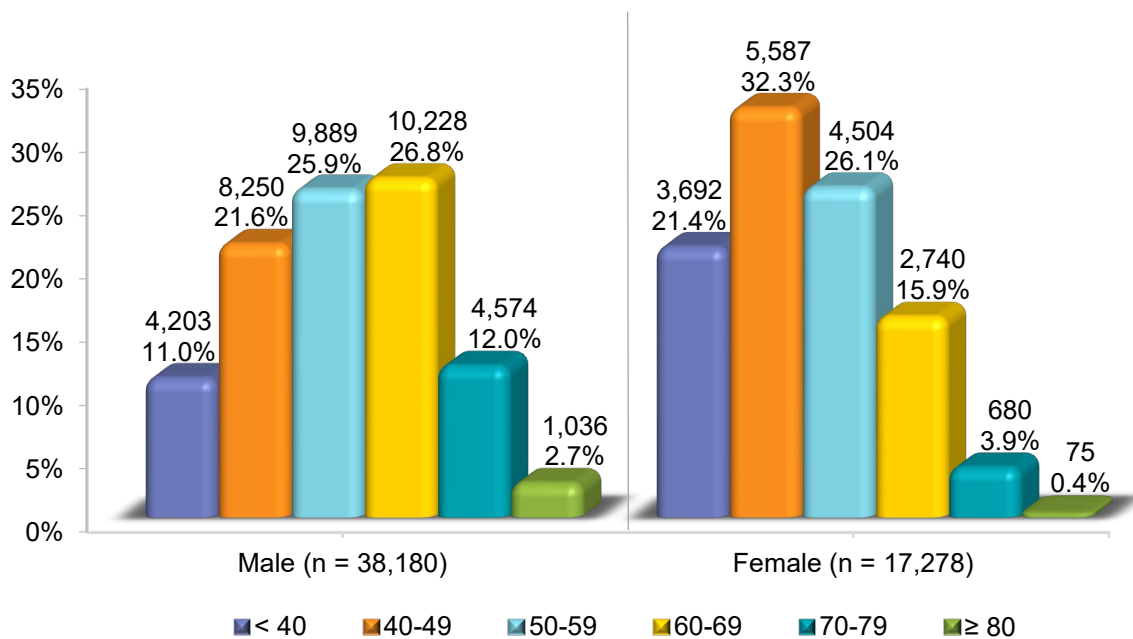


¹² There were 65 physicians ages 90 and older who responded they were actively practicing.

¹³ There were 351 physicians who did not report their gender.

For age groups by gender, 74.3% of both male and female physicians are between the ages of 40 and 69. For physicians under age 40 years, 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 (11% vs. 21.4%) as illustrated below in Figure 7. For physicians ages 70 years and older, there are 10% more male physicians actively practicing than female physicians of the same age group.

Figure 7: 2020–21 Physicians by Gender in Each Age Group
n = 55,458



The number of physicians under age 40 includes an almost equal number of females (3,692 or 46.8%) and males (4,203 or 53.2%). 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.

Physician Workforce Practice Characteristics

Primary Specialty

The top three specialty groups—internal medicine, family medicine, and pediatrics—comprise just over 50% of the total physician workforce. Figure 8 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.)

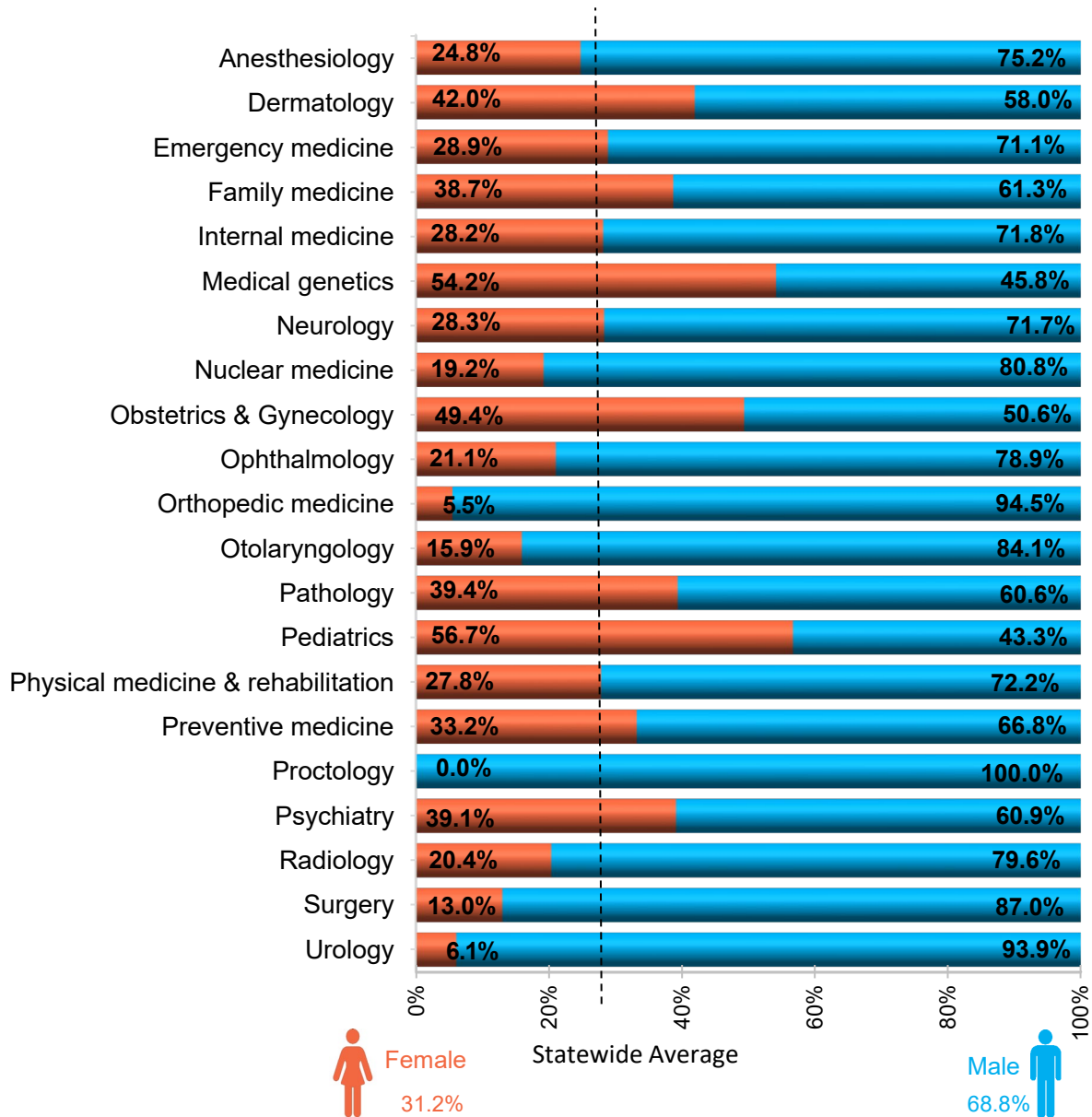
Figure 8: 2020–21 Physicians by Primary Specialty

Primary Specialty	Number	Percentage	Percentage Increase from 2019–20
Internal medicine	15,339	28.2%	4.0%
Family medicine	7,951	14.6%	2.3%
Pediatrics	4,411	8.1%	3.4%
Surgery	4,132	7.6%	8.2%
Anesthesiology	3,348	6.1%	-0.5%
Emergency medicine	3,279	6.0%	2.95%
Radiology	3,008	5.5%	5.7%
Obstetrics & Gynecology	2,500	4.6%	4.3%
Psychiatry	2,332	4.3%	3.7%
Neurology	1,359	2.5%	4.9%
Ophthalmology	1,350	2.5%	3.1%
Orthopedic medicine	1,149	2.1%	-9.9%
Dermatology	1,083	2.0%	1.7%
Pathology	922	1.7%	7.0%
Otolaryngology	712	1.3%	5.3%
Physical medicine & rehabilitation	697	1.3%	7.7%
Urology	511	0.9%	-1.9%
Preventive medicine	294	0.5%	7.7%
Nuclear medicine	52	0.1%	-5.5%
Medical genetics	51	0.1%	4.1%
Proctology	4	0.0%	0.0%
TOTAL	54,484¹	100%	3.4%

¹ This table does not include the 1,325 physicians who did not answer this question.

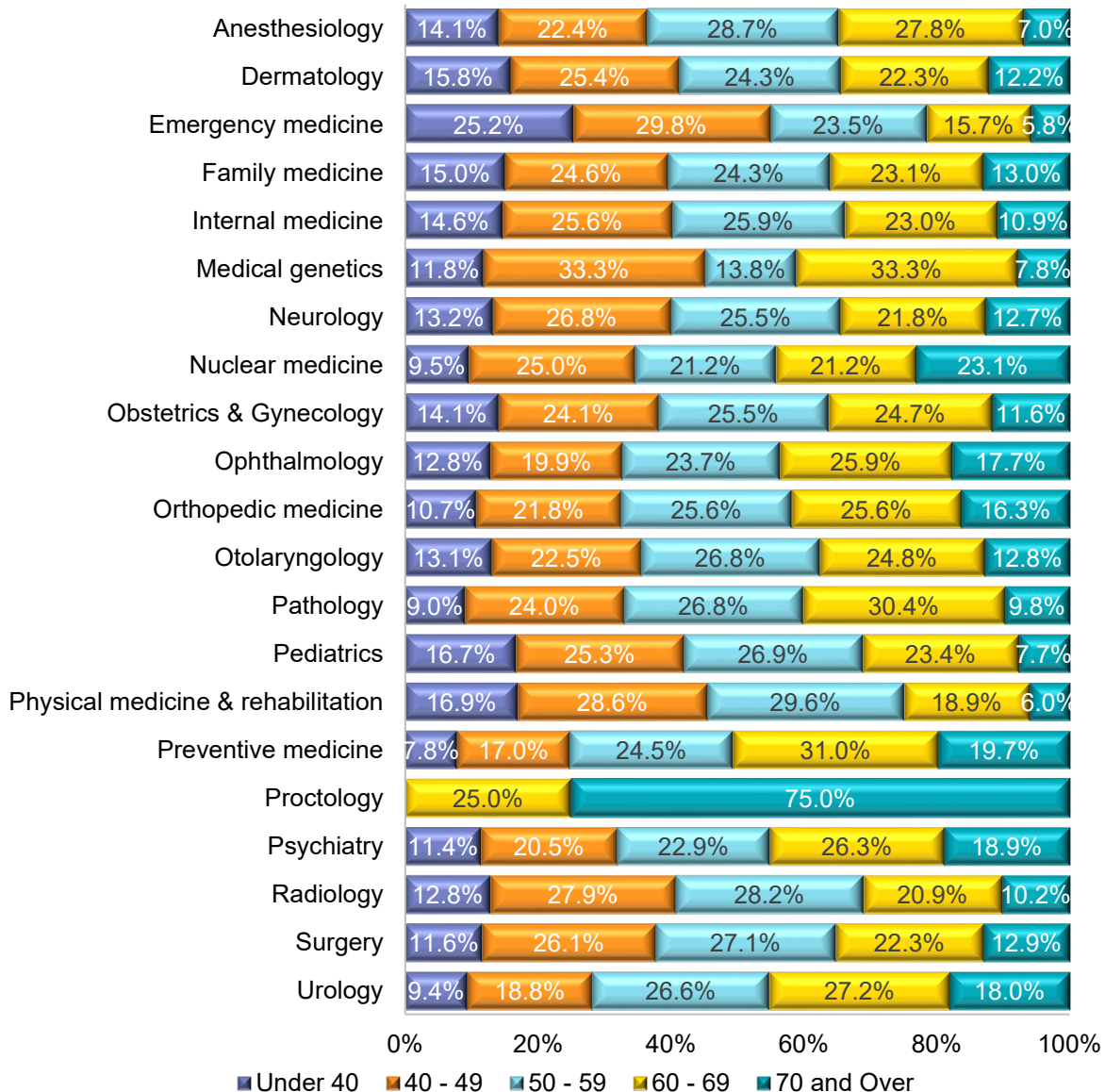
When specialties are analyzed by gender and compared to the total composition, the percentage of practicing female physicians meets or exceeds the average (31.2%) for eight specialties (see Figure 9). More females than males practice pediatrics (56.7%) and medical genetics (54.2%). Males comprise the greatest percentage of proctologists (100%), orthopedic specialists (94.5%) and urologists (93.9%).

Figure 9: 2020–21 Physicians by Specialty and Gender



When specialties are analyzed by age, the specialties with the largest percentage of older physicians are clearly delineated, as shown in Figure 10 below. The specialties with the largest percentage of physicians ages 60 and older are proctologists (100%), preventive medicine (50.7%), urology (45.2%) and psychiatry (45.2%). The specialties with the largest percentage of physicians under age 40 are emergency medicine (25.2%), physical medicine & rehabilitation (16.9%) and pediatrics (16.7%).

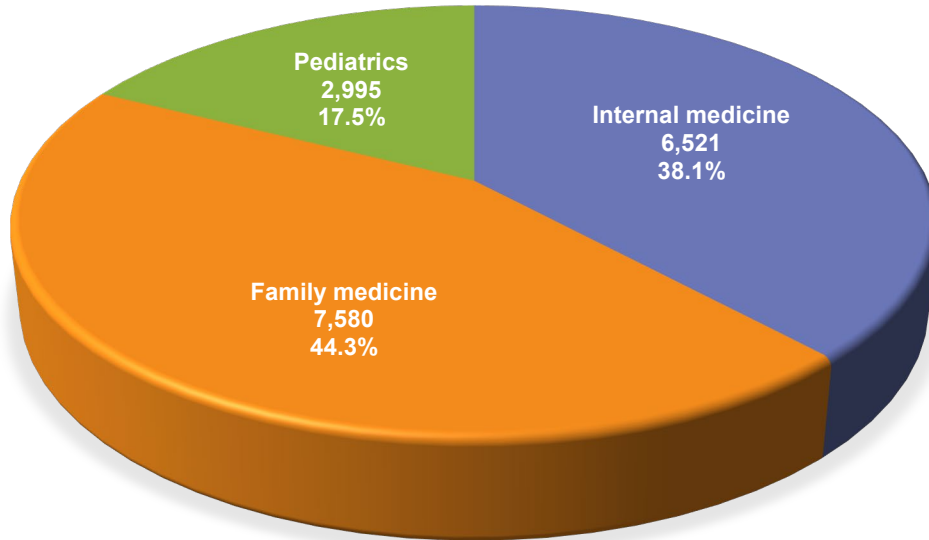
Figure 10: 2020–21 Physicians by Specialty and Age Range



Medical genetics has the same percentage of physicians ages 40–49 and 60–69 (33.3%). Likewise, nuclear medicine and orthopedic medicine each have the same percentage in their specialties at ages 50–59 and ages 60–69.

Primary care physicians are defined as those practicing in the areas of general internal medicine, family medicine and general pediatrics.¹⁴ Primary care physicians make up less than one-third of the active physician workforce (31.4% or 17,096). Approximately 83% of primary care physicians specialize in general internal medicine or family medicine. Approximately 17% specialize in general pediatrics (see Figure 11).

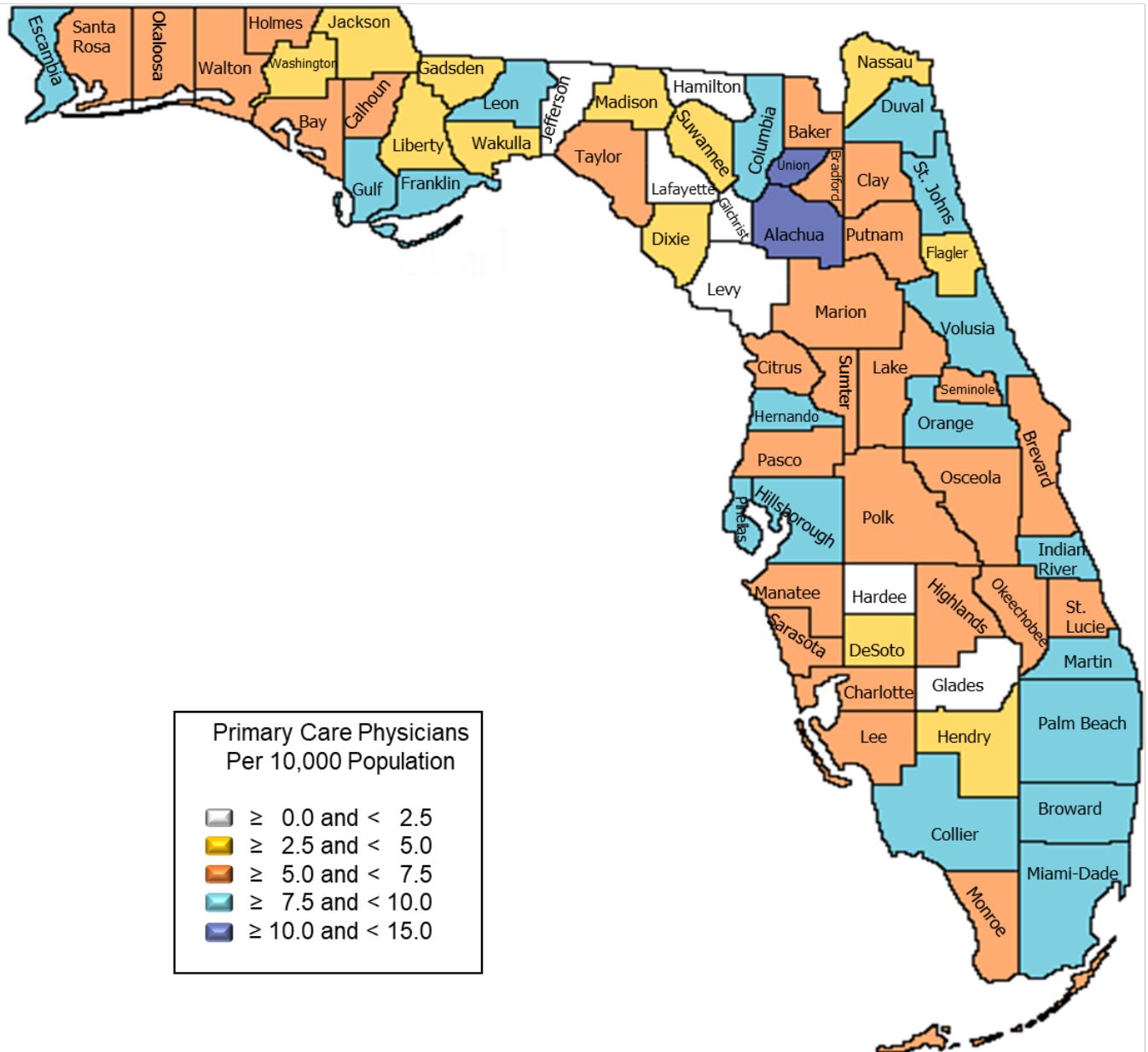
Figure 11: 2020–21 Primary Care Physicians
n = 17,096



¹⁴ Results for general internal medicine are based on respondents who selected 2 of the 22 internal medicine subspecialty codes (0500-0501). Family medicine includes all subspecialty codes (0400–0405). Pediatrics includes subspecialty codes (1400-1401).

The counties with the largest number of primary care physicians per 10,000 population are Alachua (13.9), Union (13.2) and Pinellas (9.4). Figure 12 illustrates the per capita distribution of practicing primary care physicians at the county level.^{15,16} The statewide average is 7.8 primary care physicians per 10,000 population.

Figure 12: 2020–21 Primary Care Physicians by County



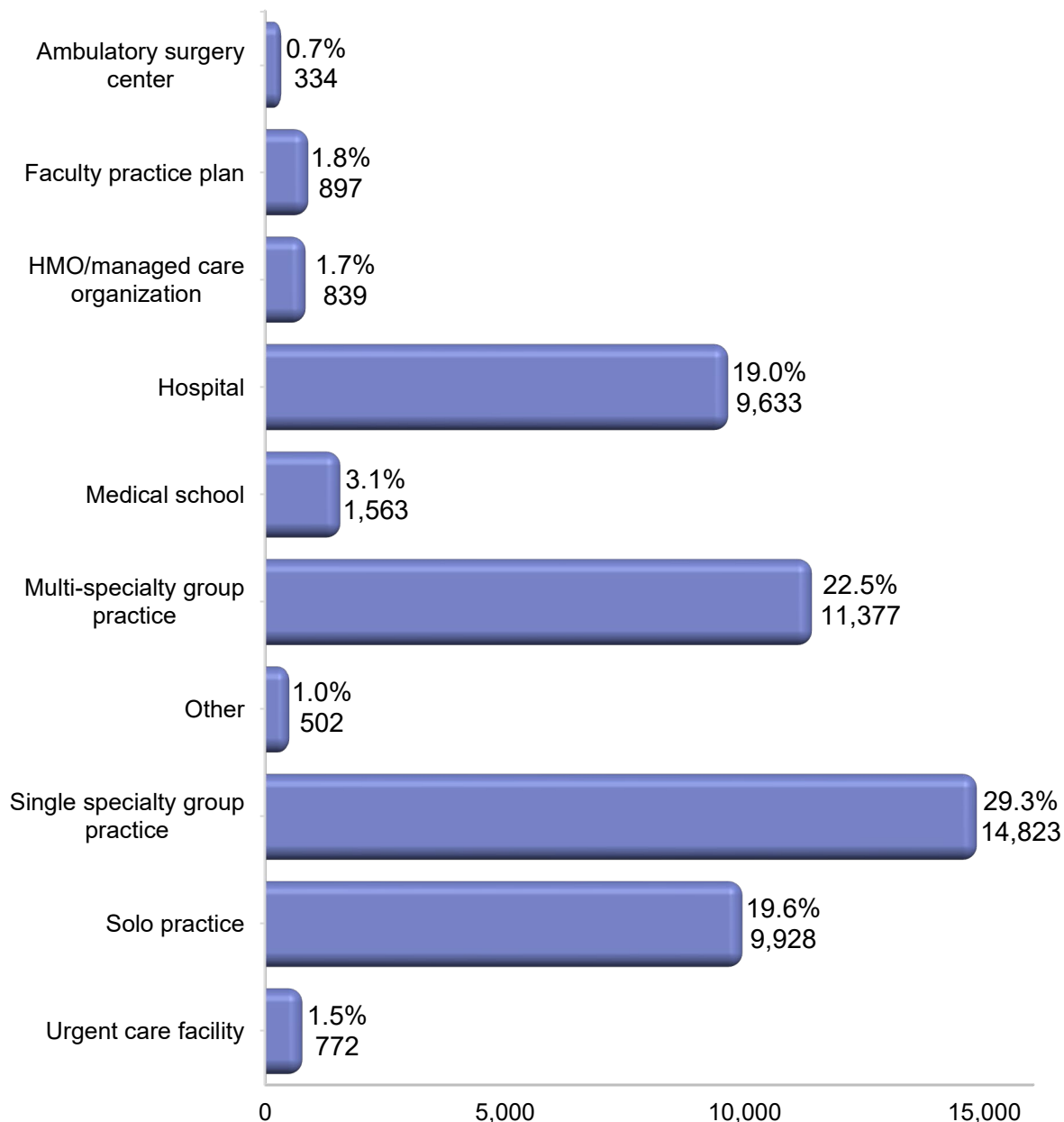
¹⁵ There were 6,186 physicians whose survey response county did not match the county of their official practice location. Survey response counties were used on the map.

¹⁶ Population data from the Office of Economic & Demographic Research, April 1, 2020 Florida County Population Estimates (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 13).

Figure 13: 2020–21 Physicians by Practice Setting
n = 50,668

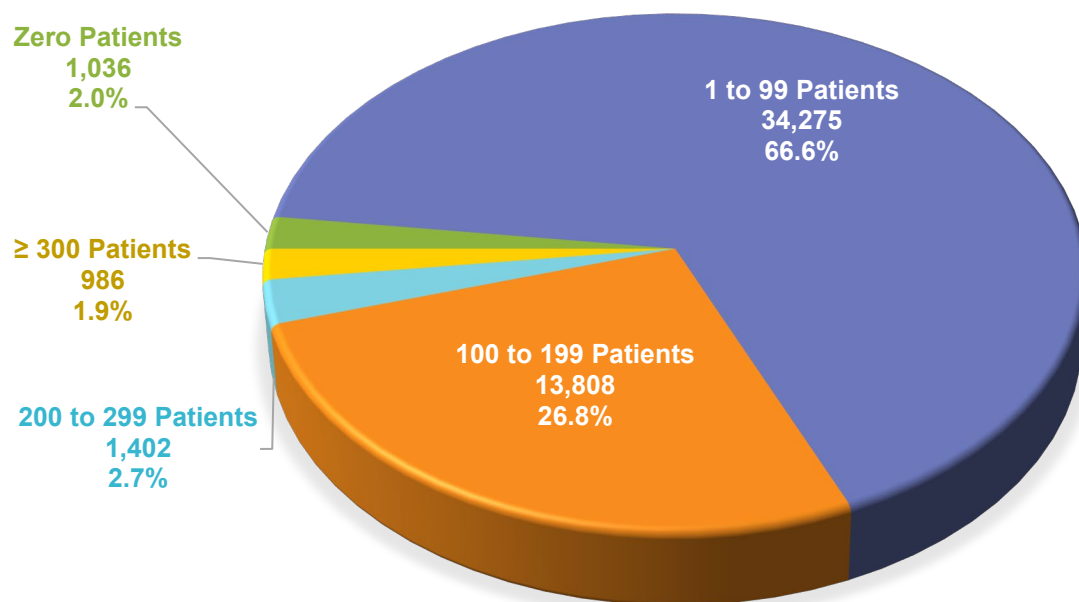


The survey asked physicians what year they started practicing at their current location. The answers ranged from 1952 to 2021, with almost 9% (4,775) responding they started practicing at their current location in 2019.

Practice Hours

The survey asked physicians to report the average number of patients they see per week.¹⁷ As shown in Figure 14, 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.

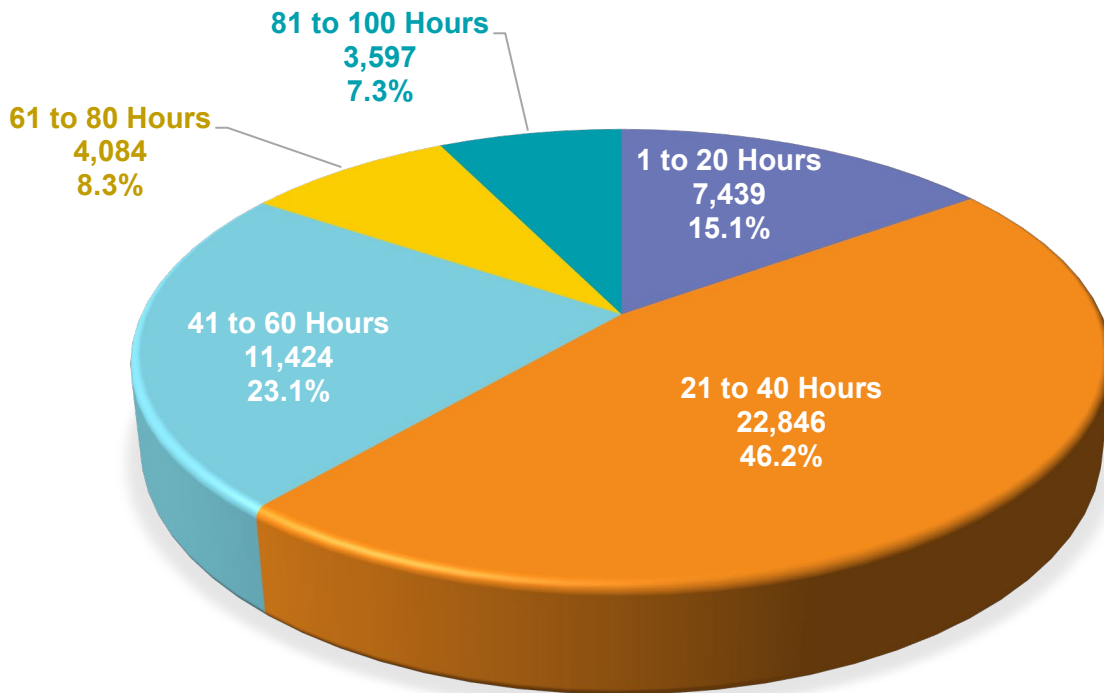
Figure 14: 2020–21 Average Number of Patients per Week at Primary Practice Location
 n = 51,507



¹⁷ There were 4,302 physicians who did not respond (7.7%).

Most physicians spend 60 hours or less per week on direct patient care (84.4% or 41,709) as shown in Figure 15. 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 15: 2020–21 Practicing Physicians Weekly Hours Spent Providing Patient Care
n = 49,390

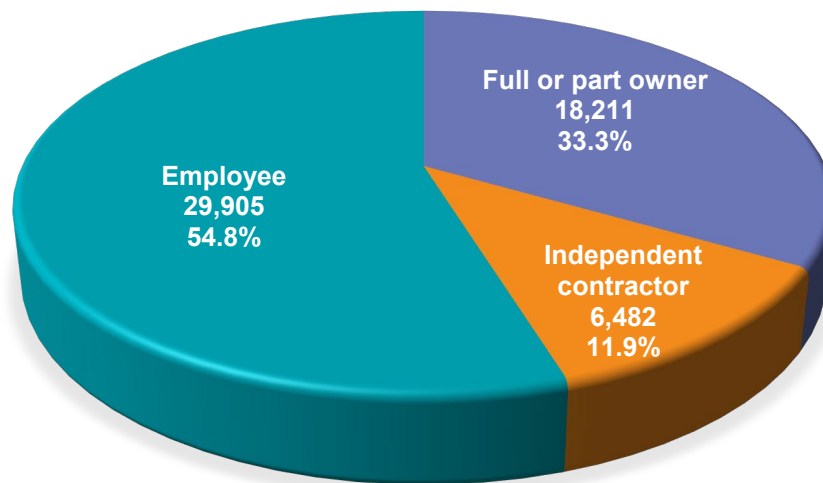


Almost 92% of physicians providing direct patient care reported spending between one and 20 hours on administrative matters, and 6.5% reported spending between 21 to 40 hours on administrative matters. Just over 93% of physicians providing direct patient care reported spending between 1 to 20 hours on 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 16.

Figure 16: 2020–21 Physician Employment Ownership
n = 54,598



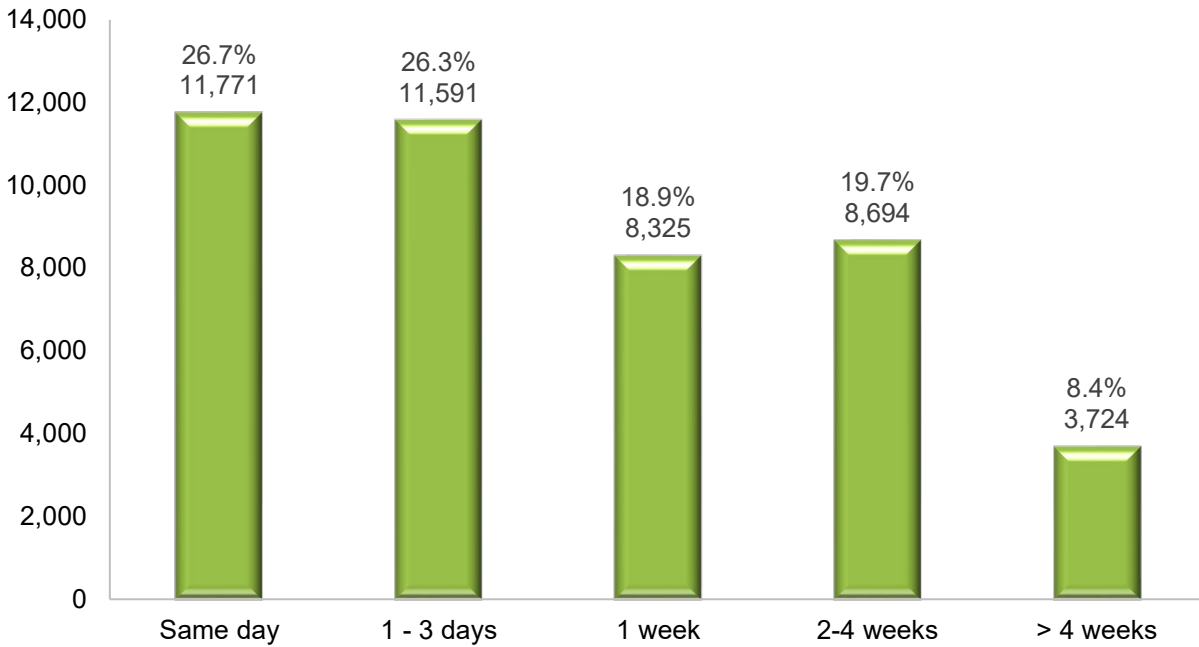
Physicians who reported being employed by a hospital were asked if they were employed directly by the hospital or if the practice was owned by a hospital. Of the 7,384 physicians who responded, over half (57.9%) of them reported they were employed directly by a hospital, 21.2% responded their practice is owned by a hospital, and 20.9% did not know. Of the 1,614 physicians who reported they were independent contractors who worked in a hospital, 38.9% contract directly with the hospital, 15.7% contract with a practice owned by the hospital and the remaining 44.4% did not know. Over 85% of the physicians whose practice is owned by a hospital reported they work in a group plan—49.0% in a multi-specialty group practice and 39.9% in a single specialty group practice.

Of physicians who reported working for a faculty practice plan, almost three-quarters (71.9%) work in a multi-specialty group, with the remaining 28.1% working in a single specialty practice. There were 12,148 physicians who reported they did not work for a hospital, faculty practice plan or as a sole practitioner. Of these, 70.1% 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 (79.0%) responded they are taking new patients and noted the wait time for those new patient appointments (see Figure 17). Slightly under one-quarter (21.0%) either responded they are not taking new patients, or they did not respond.

Figure 17: 2020–21 New Patient Appointment Wait Times
n = 44,105

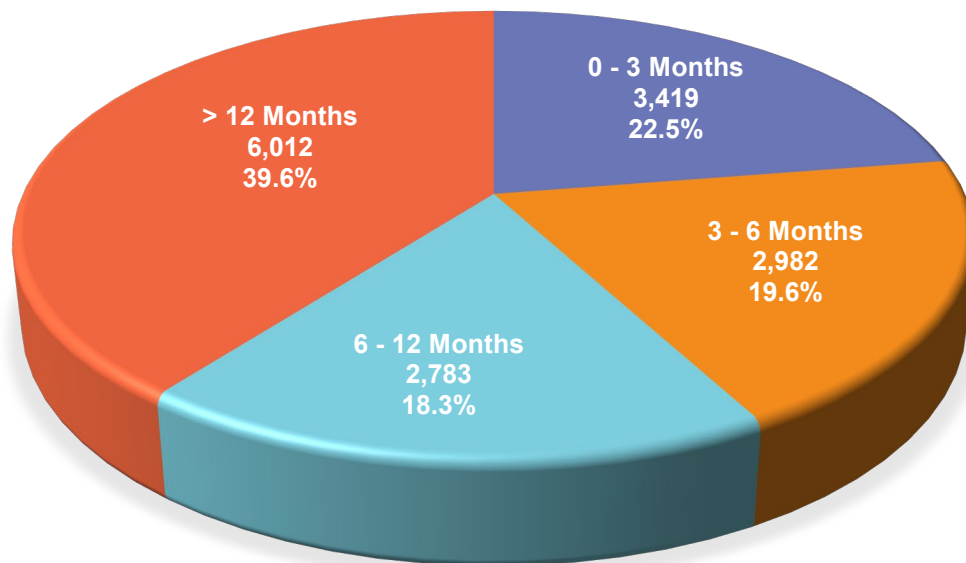


Practice New Recruitment

Over one-quarter (28.3%) of physicians reported actively recruiting for a new physician in the responding physician’s specialty. As shown in Figure 18, of those recruiting, almost 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 (35.2%), meeting salary/financial requirements for new hires (27.2%) and recruiting to their locations (18.0%).

Figure 18: 2020–21 New Physician Recruitment Time

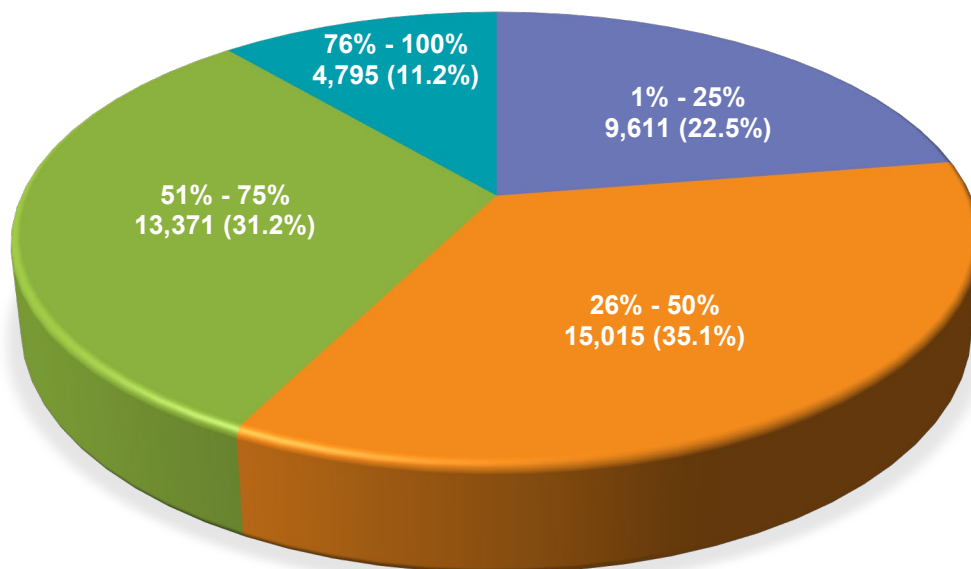
n = 15,196



Medicare Patients

In 2009, the Centers for Medicare and Medicaid Services reported 3 million Floridians were enrolled in Medicare Part A or B. According to the Medicare Enrollment Dashboard, as of December 2020, the number of Floridians enrolled in Medicare has increased to almost 4.7 million.¹⁸ Over 80% of physicians responded that they accepted Medicare for patients in their practice. Of the 42,792 physicians who responded with a percentage of their practice's patients with Medicare, over two-thirds (28,386) responded that between 26% and 75% of their practice is composed of Medicare beneficiaries (see Figure 19).

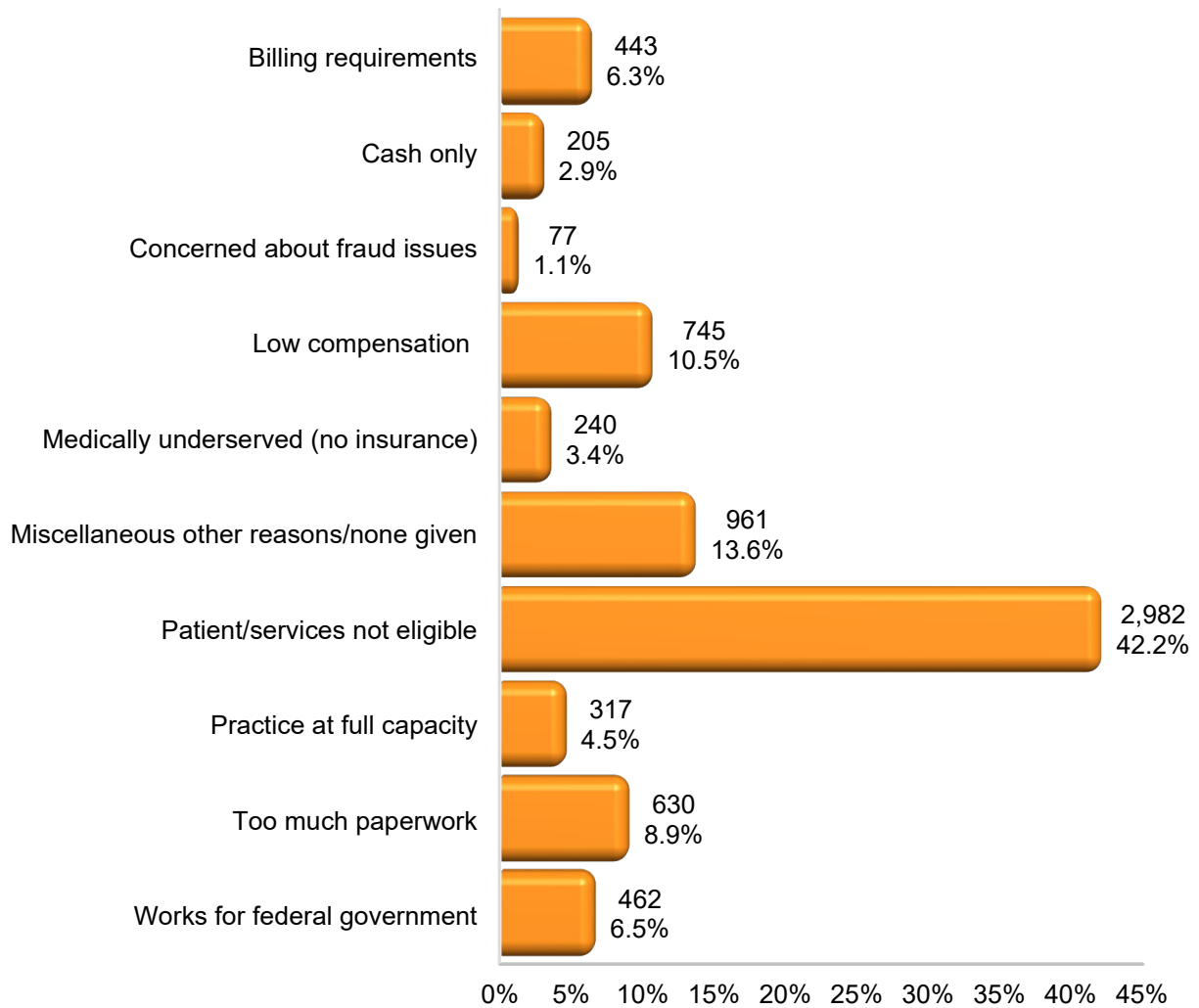
Figure 19: 2020–21 Patients with Medicare as a Percentage of Practice
n = 42,792



¹⁸ 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).

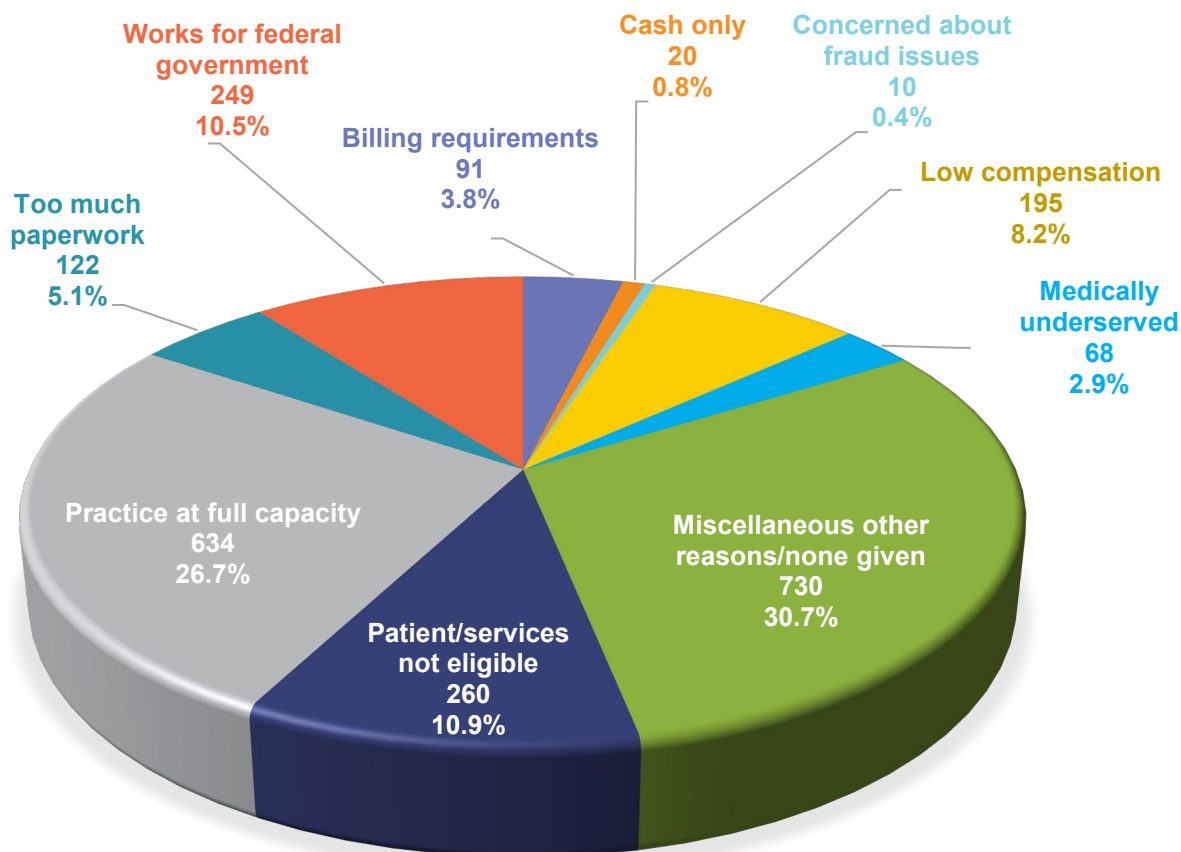
Almost 20% of physicians do not see patients with Medicare, with the most common reason being either their patients or the services they provide are not eligible for Medicare reimbursement (see Figure 20). Some services not covered by Medicare include cosmetic surgery, eye exams for glasses/contacts and alternative medicine. Some patients not eligible for Medicare include pediatrics and military personnel.

Figure 20: 2020–21 Reasons Why Physicians Do Not Accept Medicare
n = 7,062



Almost 95% (42,340) of practicing physicians reported they accept new patients with Medicare. Of the 2,379 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 21).

Figure 21: 2020–21 Why Physicians Are Not Accepting New Patients with Medicare
n = 2,379



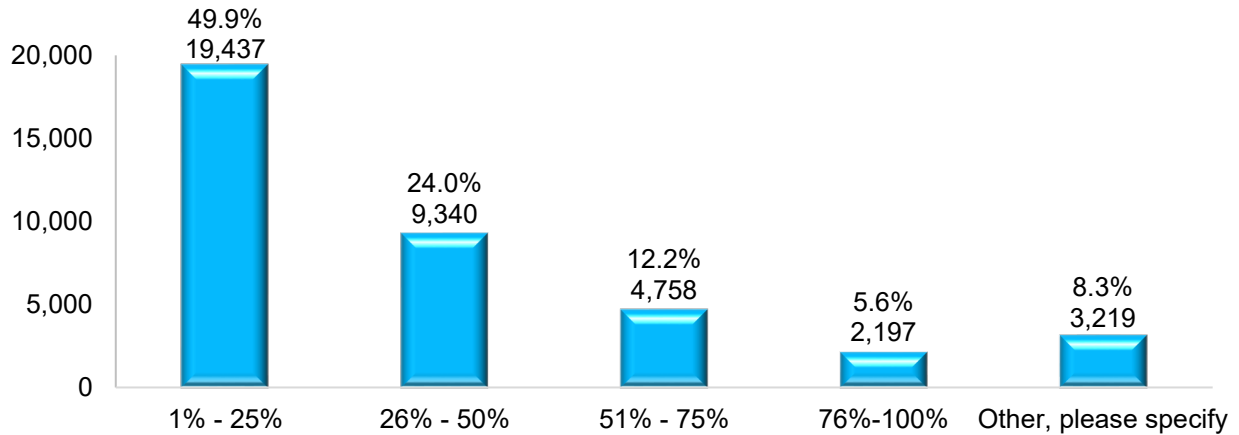
Of physicians who see patients with Medicare, when asked if they limit their practice in any way for these patients, the majority (97.1%) stated they do not. For the small percentage who reported limiting their practice, the two main reasons were: “limit number of new Medicare patients” (48%) and “other” (50%). 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

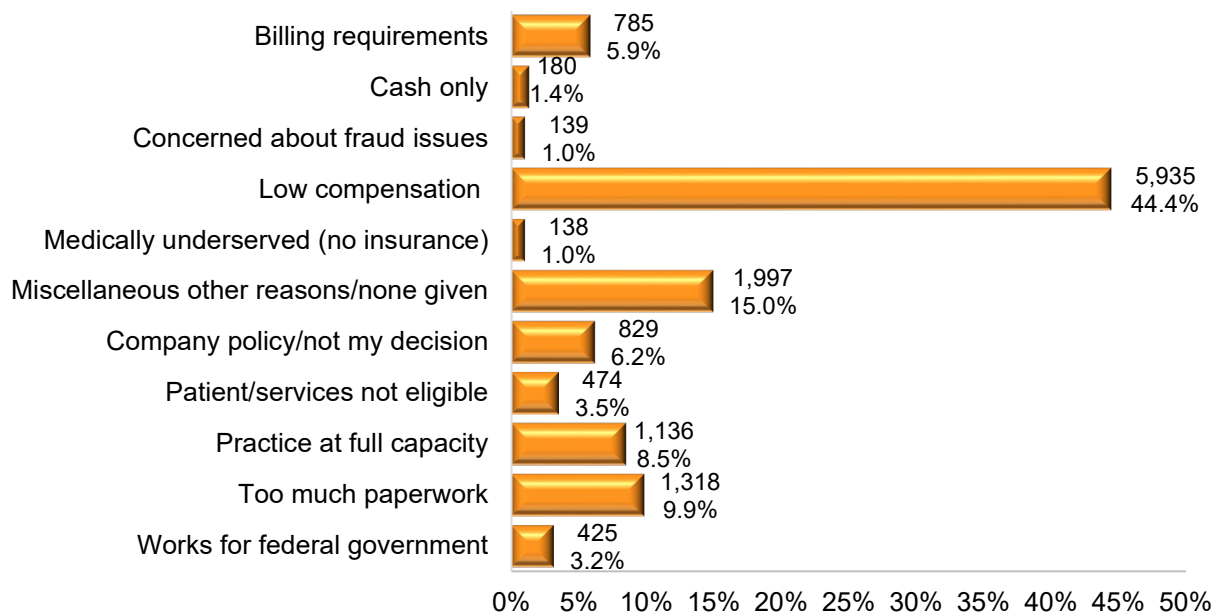
Of the physicians who responded to the question asking what percentage of their practice includes patients with Medicaid, almost three-quarters responded they see patients with Medicaid. Of the 35,732 physicians who have patients with Medicaid, just over half (54.4%) reported that these patients comprise less than 25% of their patient panel (see Figure 22).¹⁹

Figure 22: 2020-21 Patients with Medicaid as a Percentage of Practice
n = 38,951



The reasons physicians do not take patients with Medicaid are shown in Figure 23. The most common reason selected was “low compensation” (44.4%).

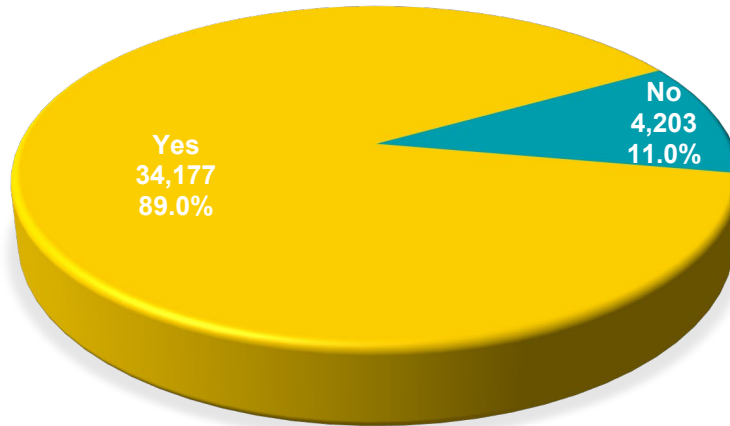
Figure 23: 2020–21 Reasons Why Physicians Do Not Accept Medicaid
n = 13,356



¹⁹ These percentages do not include those who chose “Other, please specify” as their response.

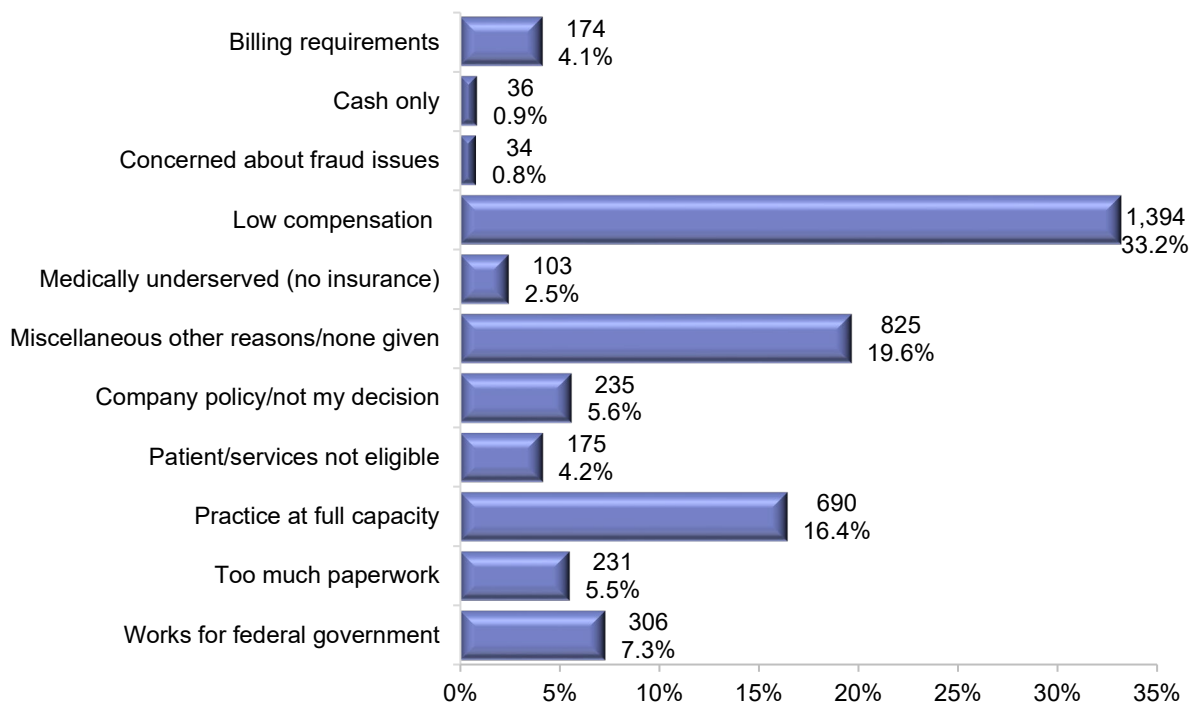
The percentage of Florida physicians who reported accepting new patients with Medicaid was 89.0% (see Figure 24). Compared to the 2019–20 cohort, there is just over a 15% increase in physicians accepting new patients with Medicaid (33,089 vs. 34,177).

Figure 24: 2020–21 Physicians Accepting New Patients with Medicaid
n = 38,380



The most common reason given for not accepting new patients with Medicaid was “low compensation” (33.2%) (see Figure 25).

Figure 25: 2020–21 Reasons Why Physicians Who Have Medicaid Patients Do Not Accept New Patients Who Have Medicaid
n = 4,203



Of the physicians who see patients on Medicaid, when asked if they limit their practice in any way for patients on Medicaid, the majority (91.2%) 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” (52.8%) 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 2020–21 survey responses showed 9.2% (5,107) of practicing physicians reported they are planning to retire within the next five years, which is .5% more physicians than in the last report cohort (8.7% or 4,757), 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 highest number of physicians indicating their intention to retire in the next five years are:

- Internal medicine (1,238)
- Family medicine (689)
- Surgery (422)
- Anesthesiology (418)
- Pediatrics (375)

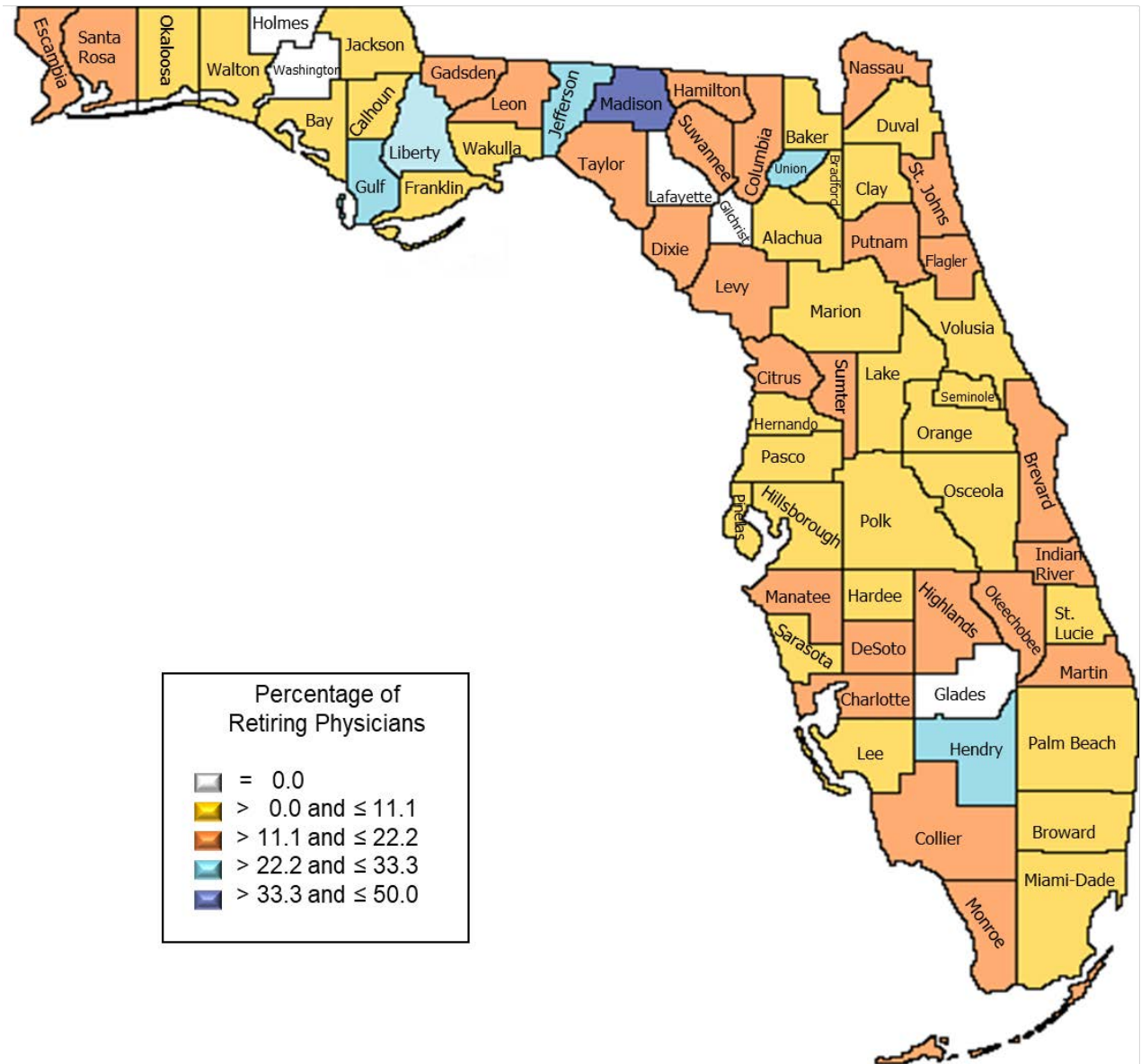
The percentage of physicians, by specialty, who are planning to retire in the next five years is shown in Figure 26. Proctology has the highest percentage at 25%, and physical medicine and rehabilitation has the lowest at 4.7%.

Figure 26: 2020–21 Percentage of Physicians in Each Specialty Planning to Retire in the Next Five Years
n = 4,966

Specialty	Number Planning on Retiring	Percent Planning on Retiring	All Physicians by Specialty	Percent of All Physicians in Specialty Planning on Retiring
Anesthesiology	418	8.4%	3,348	12.5%
Dermatology	86	1.7%	1,083	7.9%
Emergency medicine	300	6.0%	3,279	9.1%
Family medicine	689	13.9%	7,951	8.7%
Internal medicine	1,238	24.9%	15,339	8.1%
Medical genetics	6	0.1%	51	11.8%
Neurology	106	2.1%	1,359	7.8%
Nuclear medicine	8	0.2%	52	15.4%
Obstetrics & Gynecology	261	5.3%	2,500	10.4%
Ophthalmology	123	2.5%	1,350	9.1%
Orthopedic medicine	115	2.3%	1,149	10.0%
Otolaryngology	78	1.6%	712	11.0%
Pathology	111	2.2%	922	12.0%
Pediatrics	375	7.6%	4,411	8.5%
Physical medicine & rehabilitation	33	0.7%	697	4.7%
Preventive medicine	41	0.8%	294	13.9%
Proctology	1	0.1%	4	25.0%
Psychiatry	250	5.0%	2,332	10.7%
Radiology	250	5.0%	3,008	8.3%
Surgery	422	8.5%	4,132	10.2%
Urology	55	1.1%	511	10.8%
Total	4,966	100.0%	54,484	9.1%

Of the 55,809 physicians providing direct patient care, 9.2% (5,107) said that they were planning to retire in the next five years. Figure 27 illustrates the percentage of practicing physicians in each county who reported that they are planning to retire.²⁰

Figure 27: Physicians Planning to Retire in the Next Five Years



There are no counties with more than 45% of their physicians planning to retire in the next five years. There were five counties with at least 25% of their physicians reporting that they are planning to retire in the next five years—Madison (44.4%), Liberty (33.3%), Jefferson (28.6%), Gulf (26.1%) and Hendry (25.0%).

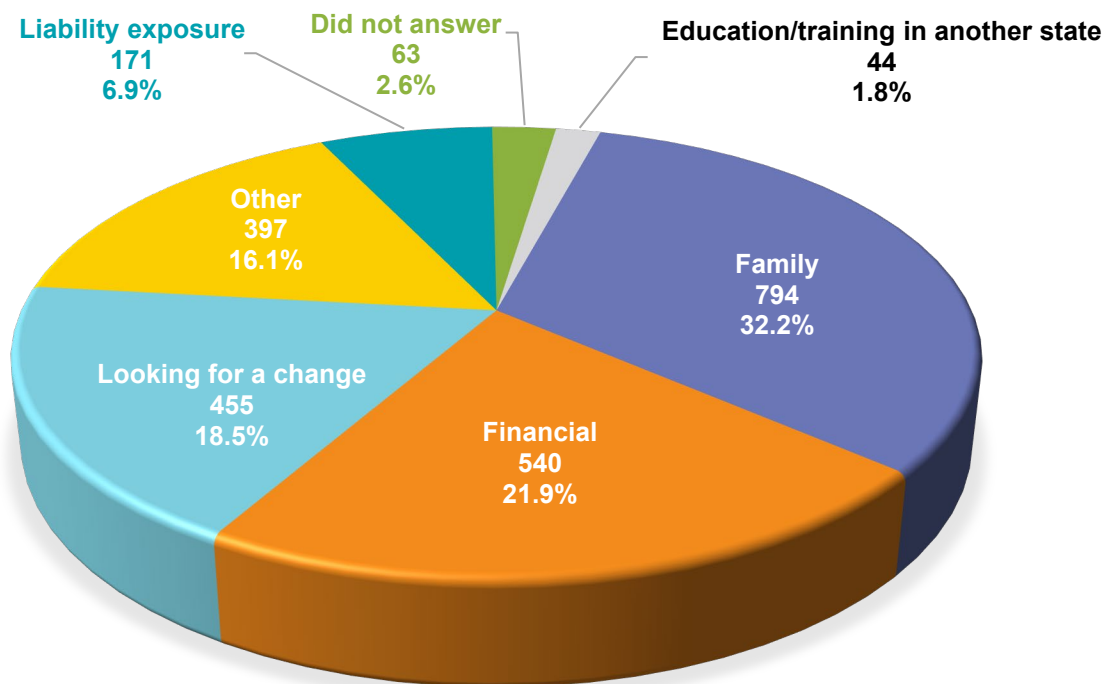
²⁰ There were 6,186 physicians whose survey response county did not match the county of their official practice location. The survey responses were used to create this map.

Physicians Planning to Relocate

In the 2020–21 survey cohort, approximately 4.7% (2,464) of physicians who answered the question responded that they plan to relocate out of Florida in the next five years. As shown in Figure 28, the top three reasons for relocating are:

- “Family” (32.2%)
- “Financial” (21.9%)
- “Looking for a change” (18.5%)

Figure 28: 2020–21 Physician Relocation Reasons
n = 2,464

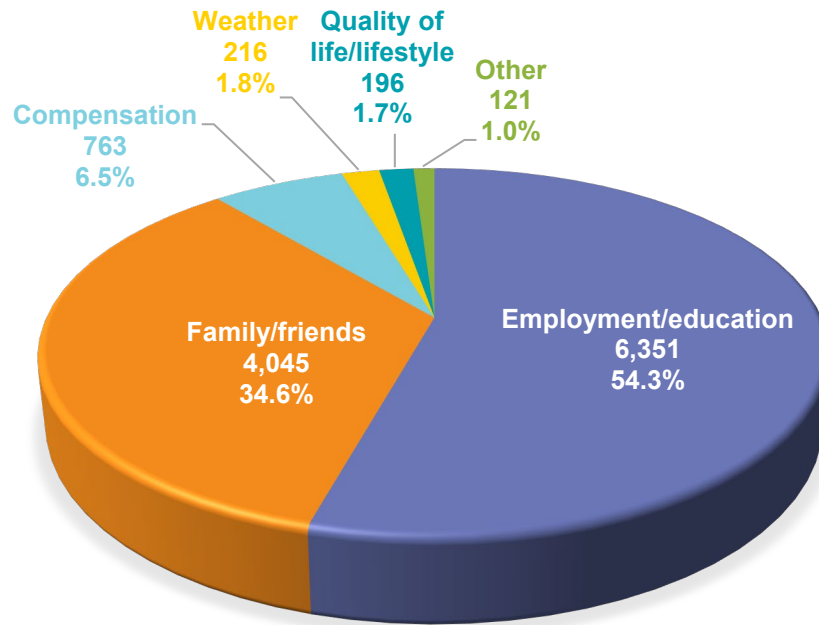


Of the 2,464 physicians indicating their intention to relocate out of state in the next five years, 2,415 also specified their specialty. The four specialties with the highest reported percentages of those planning to move are:

- Internal medicine (23.9%)
- Family medicine (13.3%)
- Emergency medicine (11.6%)
- Anesthesiology (8.7%)

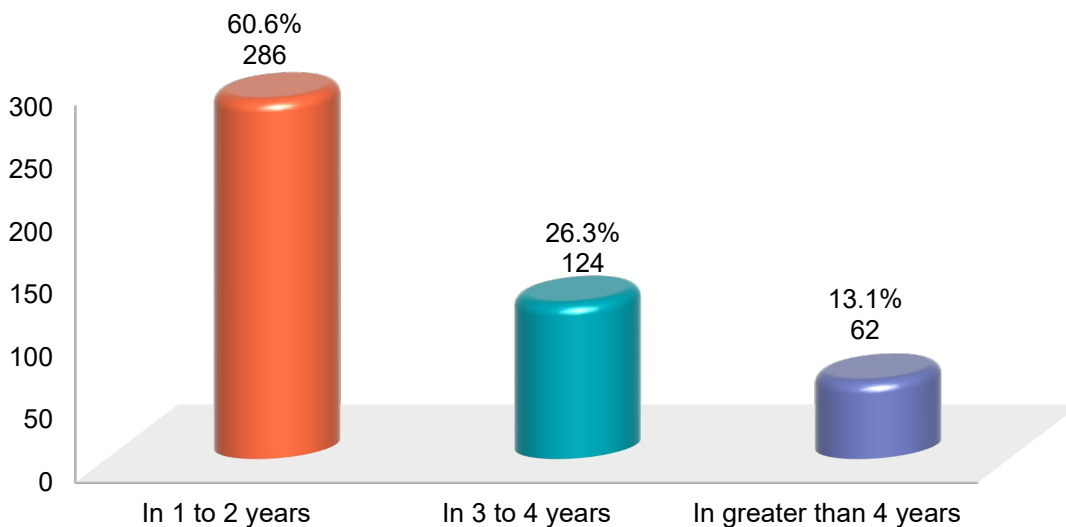
Physicians were asked if they had relocated to Florida in the last five years and 17.7% reported they had. Of these, just over half stated it was for employment opportunities or employment after finishing their education, as shown in Figure 29.

Figure 29: 2020–21 Reasons Physicians Relocated to Florida
n = 11,692



There were 472 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 30.

Figure 30: 2020–21 Timeframe for When Physicians Plan to Relocate to Florida
n = 472

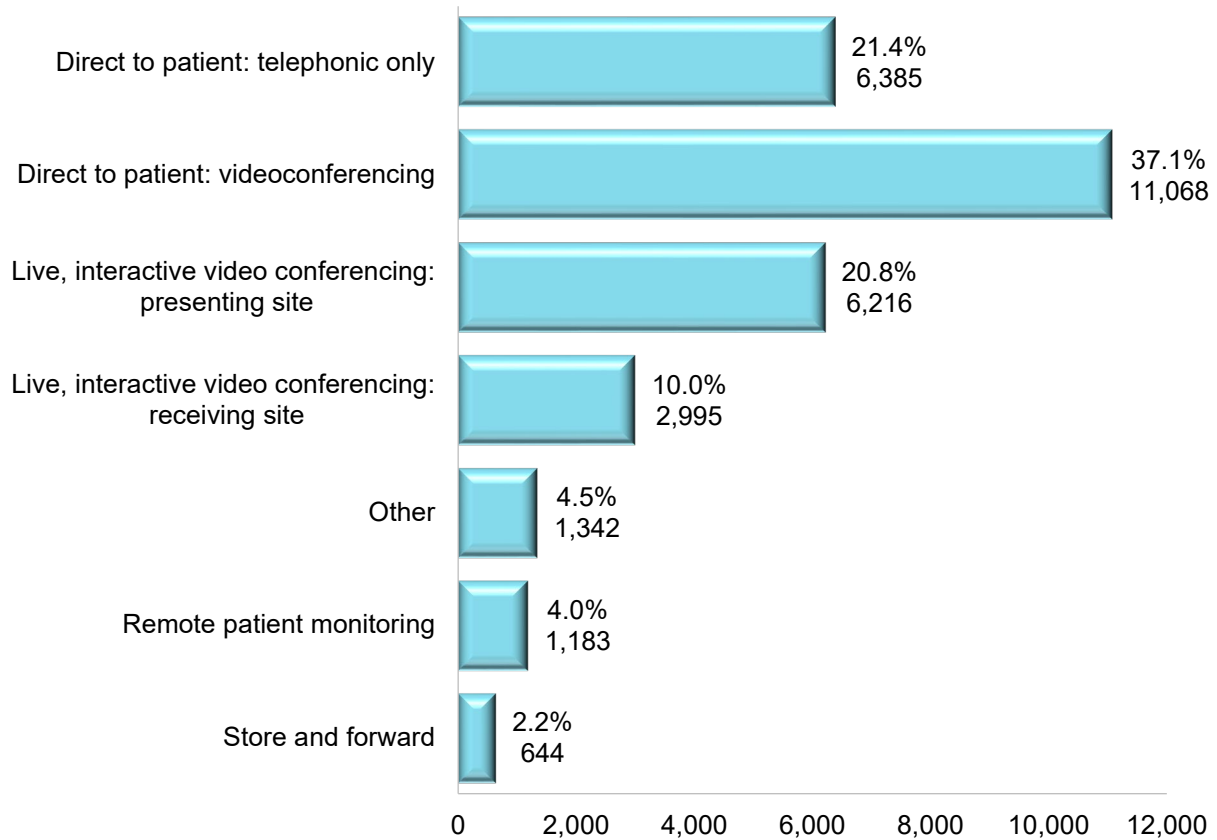


Telemedicine

Of the physicians who took the survey, 38.8% reported using telemedicine in their practice.

Figure 31 shows the different types of telemedicine delivery systems used, with direct telephone contact with patients being the most common method.²¹

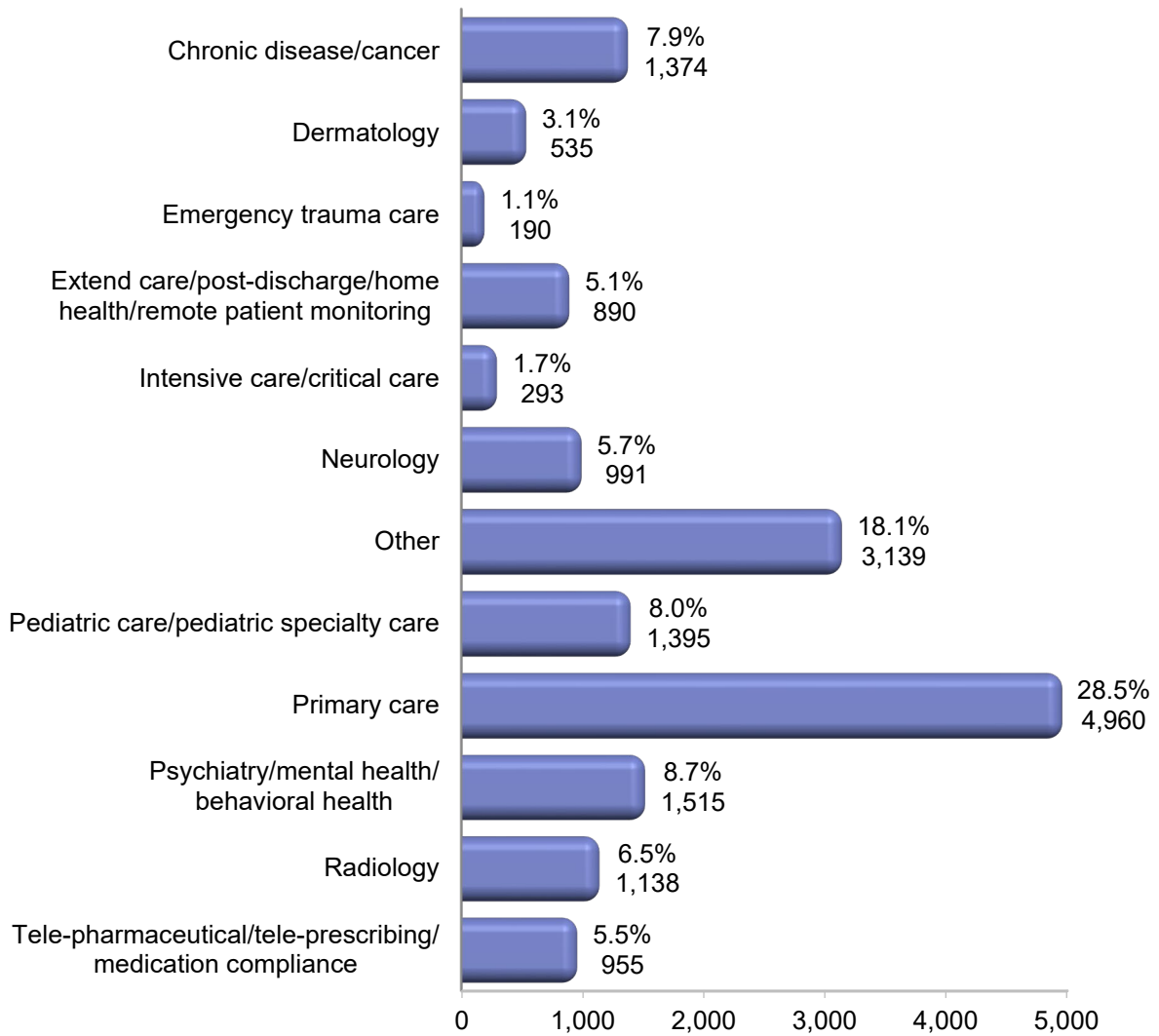
Figure 31: 2020–21 Telemedicine Delivery Systems
n = 29,833



²¹ Physicians were able choose more than one response: 19,521 physicians made 29,833 choices.

Physicians who use telemedicine were asked what types of patients they serve in their private practice or group practice.²² As shown in Figure 32, the most common patient type was primary care (28.5%), followed by other (18.1%), psychiatry/mental health/behavioral health (8.7%) and pediatric care/pediatric specialty care (8.0%).

Figure 32: 2020–21 Telemedicine Types of Patient Care
n = 17,375

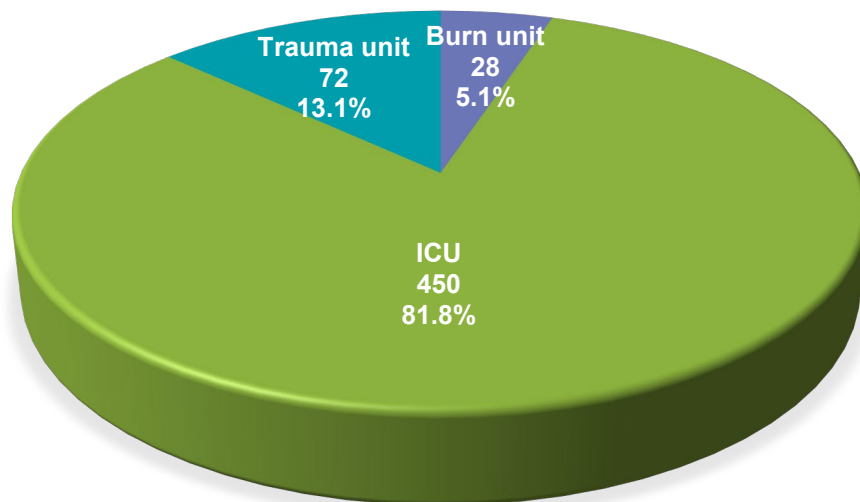


²² Physicians were able choose more than one response: 14,024 physicians made 17,375 choices.

Critical Care Medicine Specialty Question

There were 667 physicians who reported their primary specialty was critical care medicine; 466 (69.9%) responded to the specialty question. Physicians were asked to indicate the setting where they cared for patients—intensive care, trauma or burn units.²³ Just over 80% see patients in the intensive care unit (ICU), as shown in Figure 33.

Figure 33: 2020–21 Critical Care Physicians by Critical Care Medicine Setting
n = 550



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 451 physicians who responded, 450 (99.8%) 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 34.

Figure 34: Category of Patients by Location Selections

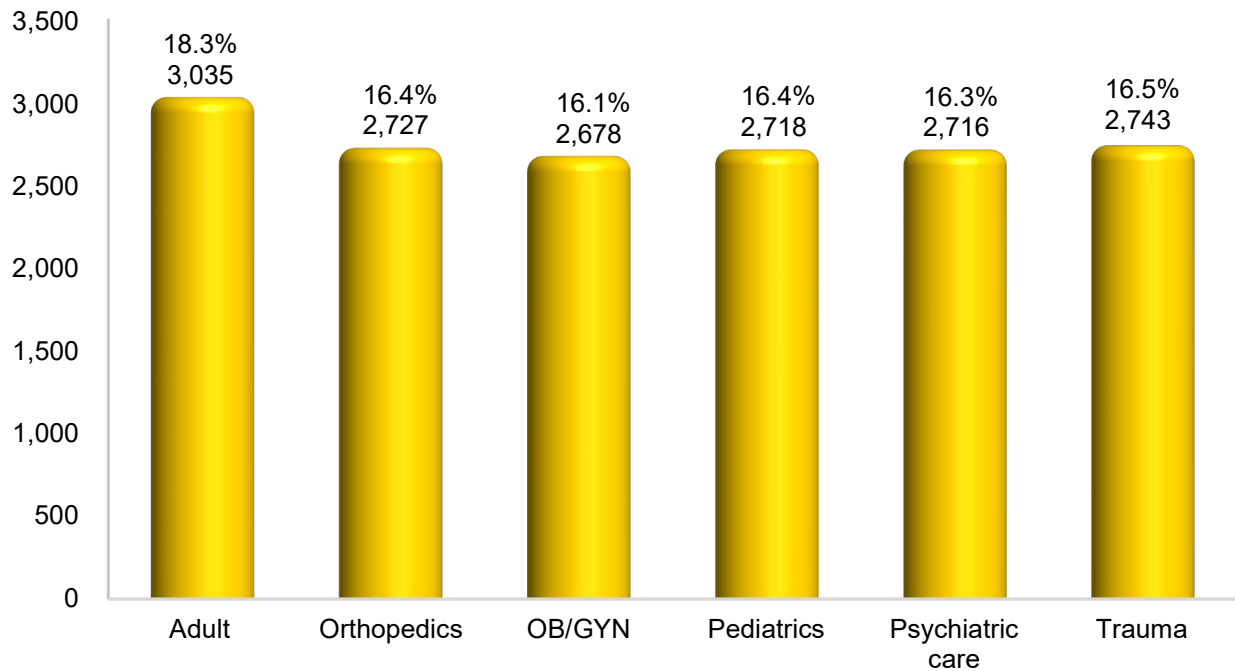
Patient Location	Number of Physicians	Percentage of Physicians
ICU only	372	82.5%
ICU & trauma unit	51	11.3%
Burn unit, ICU and trauma unit	21	4.7%
Burn unit & ICU	6	1.3%
Burn unit only	1	0.2%
TOTAL	451	100.0%

²³ Physicians were able to choose more than one response.

Emergency Medicine Specialty Question

There were 3,279 physicians who reported their primary specialty was emergency medicine; 3,211 (97.9%) responded to the specialty question. Physicians were asked to indicate all categories of patients they see (they could select more than one patient category). The responses were equally distributed across six specialties (see Figure 35).

Figure 35: 2020–21 Emergency Medicine Physicians by All Patient Types
n = 16,617



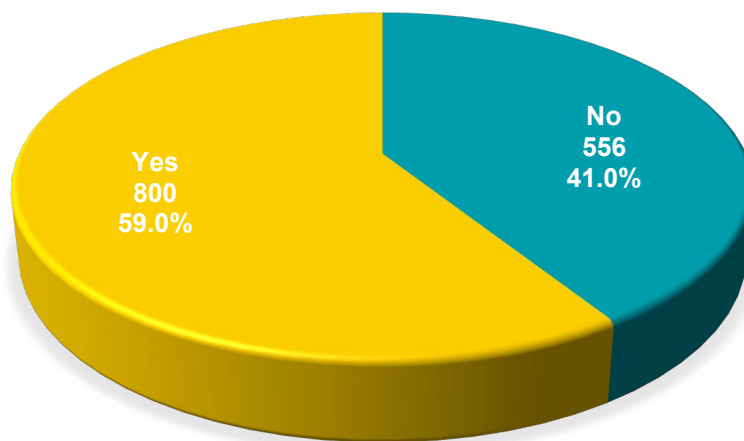
The patient types were analyzed by physicians to determine the distribution across the six types, and almost three-quarters (72.2% or 2,318) of the physicians saw all six types of patients. The remaining quarter of the responses were separated into 42 different configurations based on physician responses. Most of these configurations represent less than 1% of the total.

Obstetrics and Gynecology Specialty Questions

There were 2,500 physicians who reported their primary specialty was obstetrics & gynecology (OB/GYN) and only 1,356 (54.2%) responded to the specialty questions.

The first specialty question was “Do you deliver babies?” As shown in Figure 36, 47% of those who responded reported delivering babies as part of their practice.

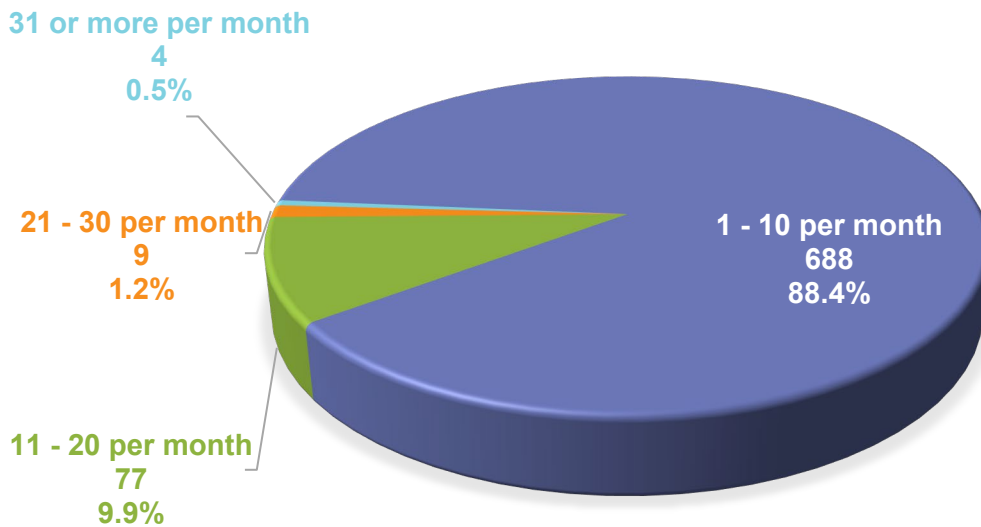
Figure 36: 2020–21 OB/GYNs Who Deliver Babies
n = 1,356



Over 78% of obstetricians 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 85.8% 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 (48.7% and 51.3% respectively).

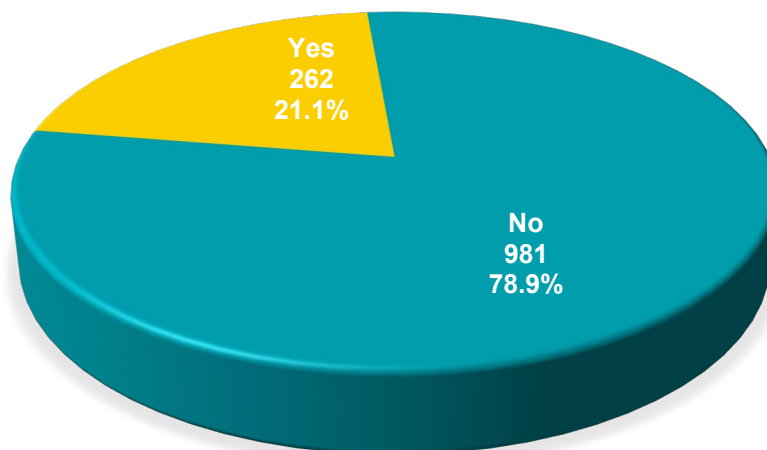
The number of obstetricians in Florida who report performing cesarean sections (C-sections) within each specified range is shown below in Figure 37. Of the 800 obstetricians who reported they deliver babies, 778 (97.3%) report performing C-sections. Of those 778 obstetricians, 88.4% (688) responded they perform an average of between 1 and 10 C-sections per month.

Figure 37: 2020–21 Physician Average Number of C-Sections Performed
n = 778



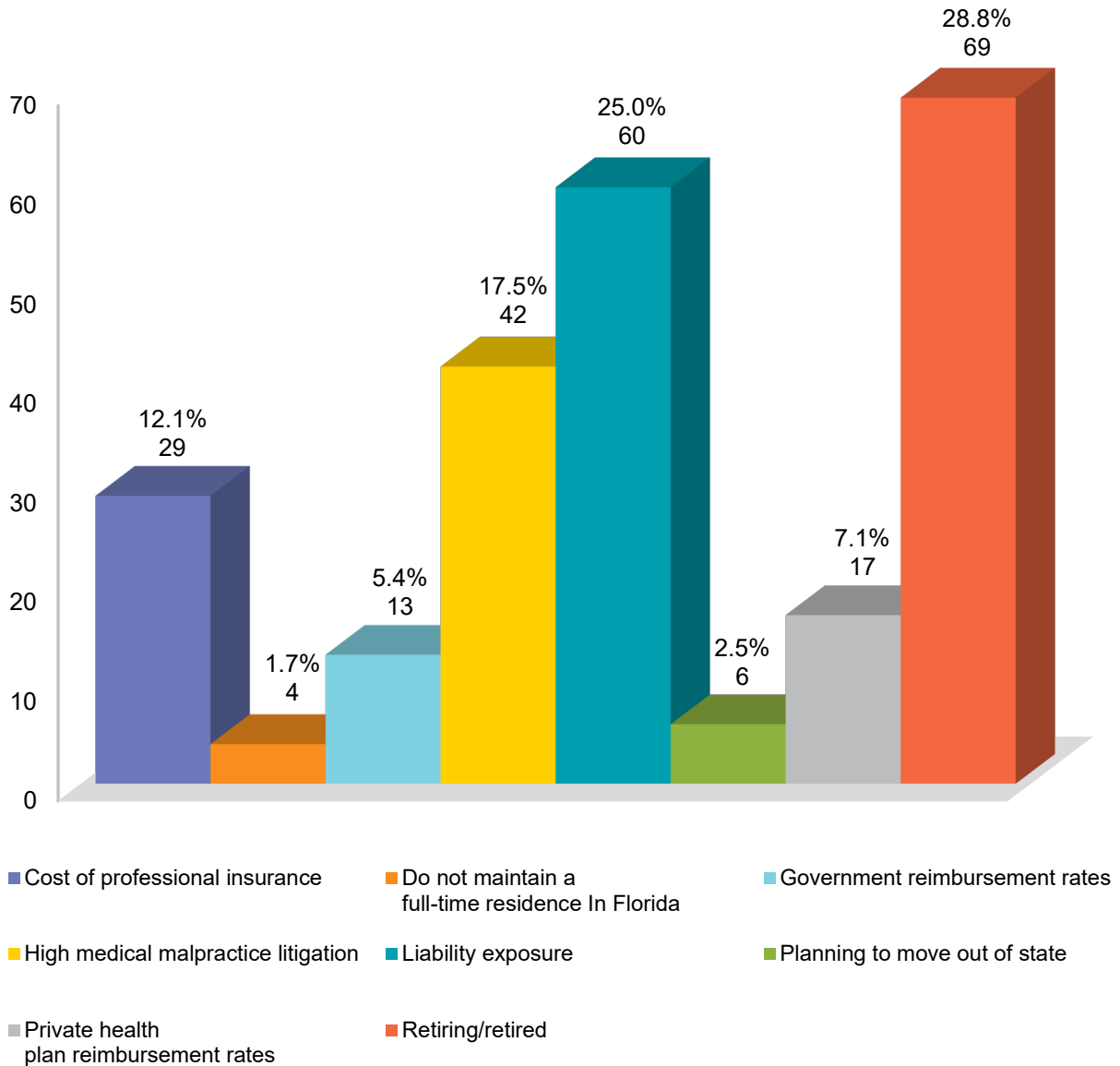
Another specialty question was “Are you planning to discontinue obstetric care in the next two years?” As shown in Figure 38, just over 20% of obstetricians plan to discontinue providing obstetric care in the next two years.

Figure 38: 2020–21 OB/GYNs Planning to Discontinue Obstetric Care
n = 1,243



The reasons given by the physicians who reported they were discontinuing obstetric care are shown below in Figure 39. The most frequently selected reason was “Retired,” “Liability Exposure” and “High Medical Malpractice Litigation.”

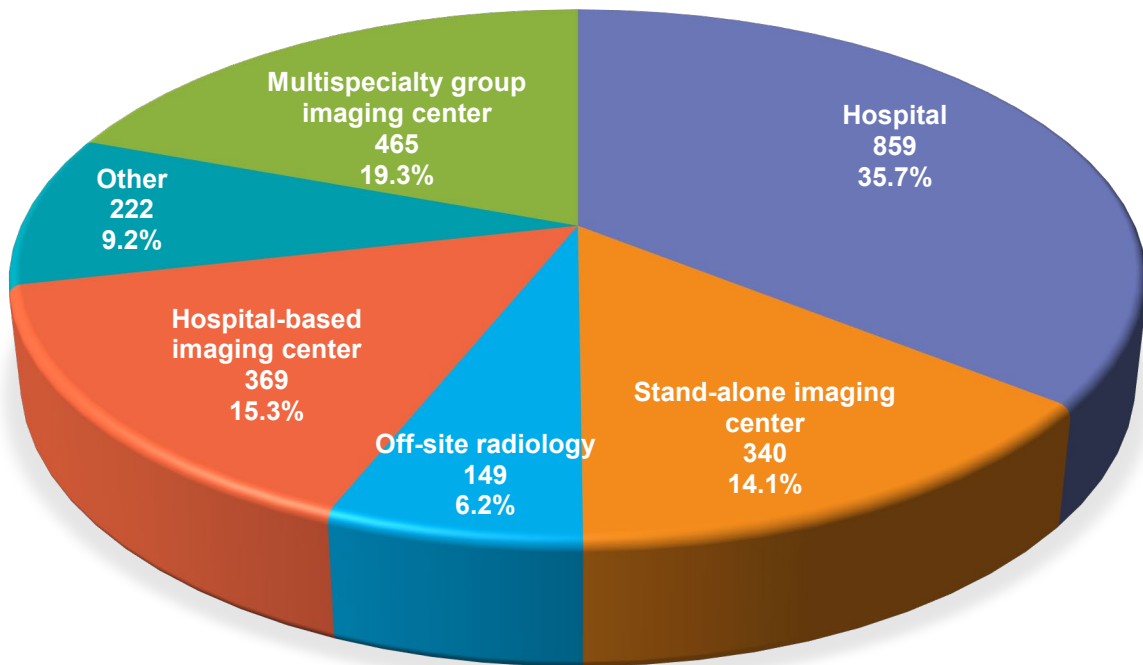
Figure 39: 2020–21 Reasons Why Physicians are Discontinuing Obstetric Care
n = 240



Radiology Specialty Questions

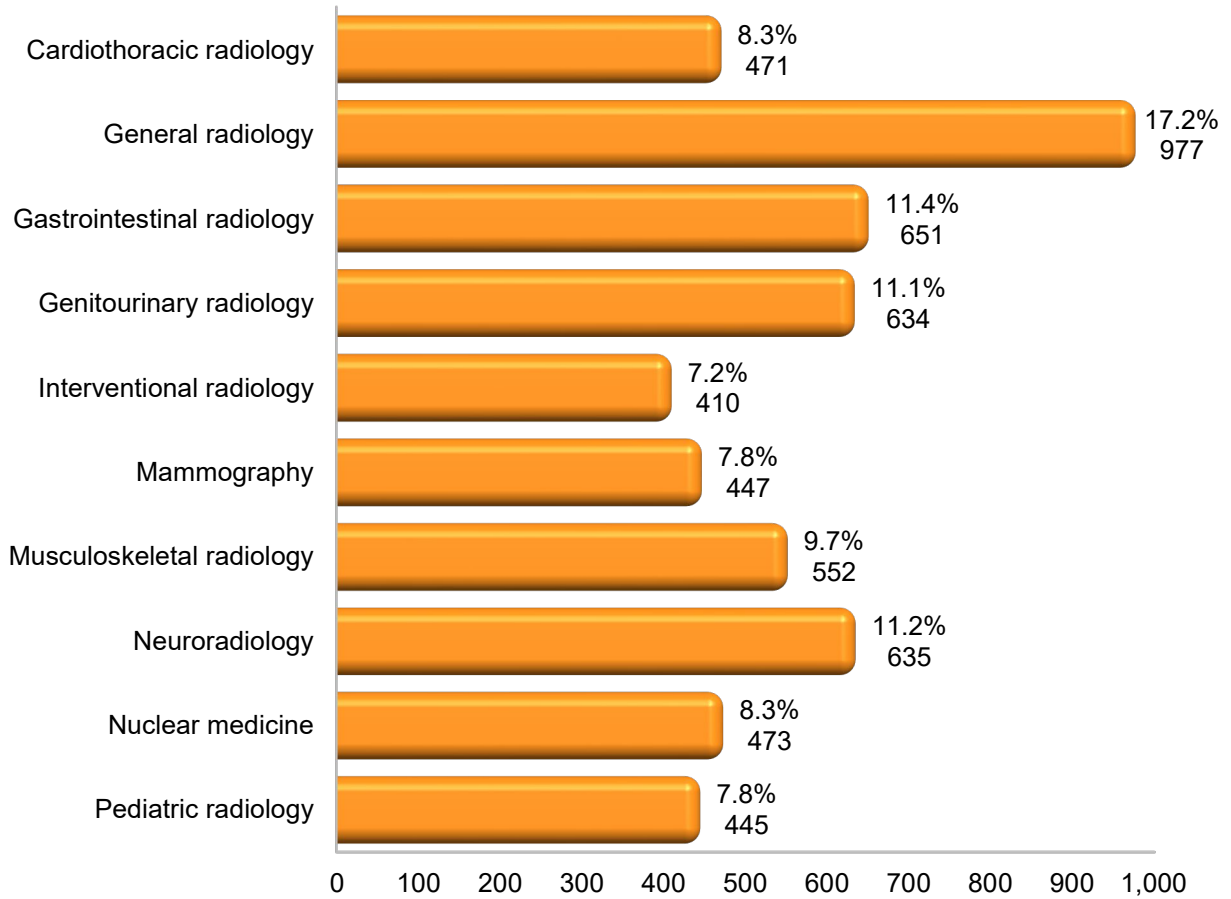
There were 3,008 physicians who reported their primary specialty was radiology. As shown in Figure 40, just over one-third of physicians indicated practicing in a hospital, and just under one-fifth (19.3%) indicated practicing at a multispecialty group imaging center.

Figure 40: 2020–21 Radiology Practice Settings
n = 2,404 (Duplicative Count)



Radiologists selected all the different types of patients they see. Figure 41 shows the patient types and percentages based on the physicians who responded. Of these physicians, 17.2% reported they saw general radiology patients, 11.4% saw gastrointestinal radiology patients and 11.2% saw neuroradiology patients.

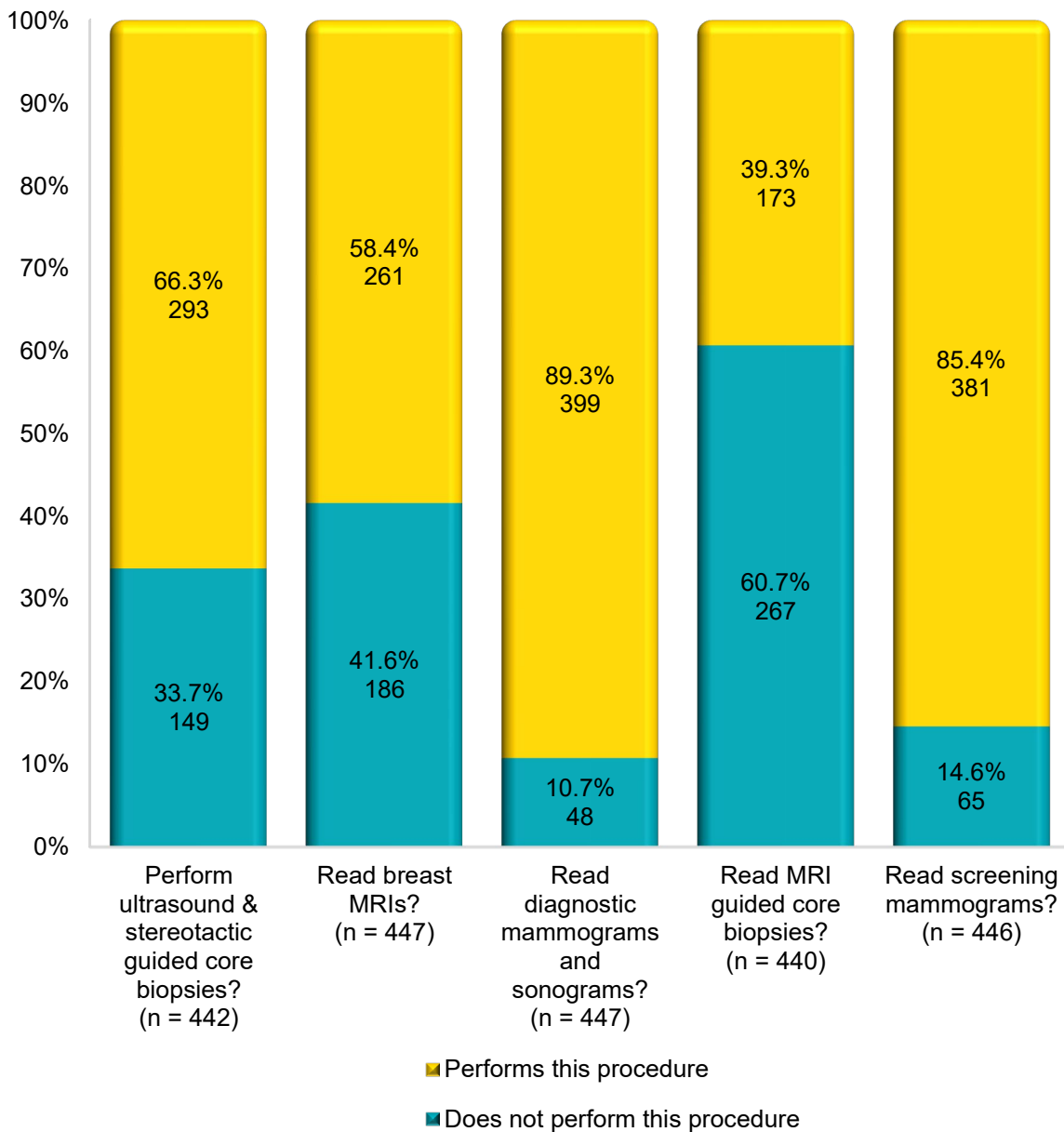
Figure 41: 2020–21 Radiology Patient Types
 n = 5,695 (Duplicative Count)



Radiologists who reported that mammography was part of their practice were asked five additional questions about performing specified procedures. Only 10.7% of these radiologists reported they do not read diagnostic mammograms and sonograms (see Figure 42). Conversely, only 39.3% reported that they read MRI guided core biopsies.

Figure 42: 2020–21 Mammography and Related Radiological Procedures

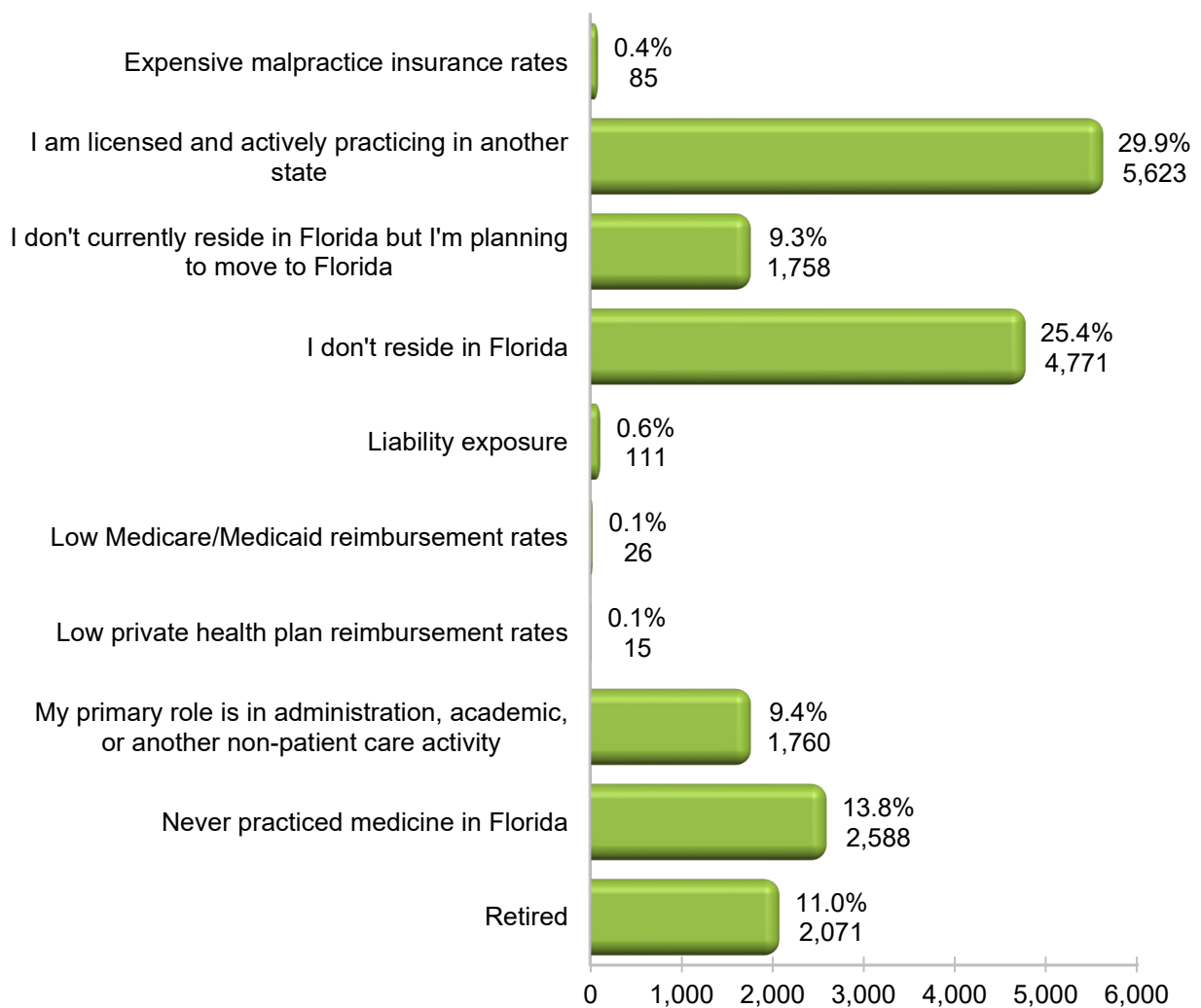
If you indicated that mammography is part of your practice (n = 447), do you:



Physicians Not Providing Direct Patient Care in Florida

A total of 20,488 physicians are licensed and responded to the survey, but they are not providing direct patient care in Florida.²⁴ This represents 26.4% of the physicians in the 2020–21 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. As shown in Figure 43, 29.9% of physicians 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.

Figure 43: 2020–21 Why Licensed Physicians Are Not Providing Direct Patient Care
n = 18,808



²⁴ See physician definitions on page 2.

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). Florida has 412 HPSAs: 126 primary care, 62 mental health, 109 dental, and 115 are at 40 of the state correctional institutions. (Of the HPSAs in state correctional institutions, 38 are primary care, 40 are mental health, and 37 are dental.) As of July 16, 2021, there are 708 approved National Health Service Corps (NHSC) sites, with 291 of those sites having program participants. There are 600 participants in NHSC programs: 129 physicians who participate in the NHSC loan repayment program in medically underserved areas in Florida, and 13 physicians who are NHSC Scholars. Since 2012, only six physician participants in the NHSC have provided their service in Florida and subsequently moved out of state. There have been 29 physicians who have provided their service out of state and have subsequently moved into Florida. Of the 129 current physician participants, eight are currently working in a HRSA defined rural area and 10 are working in a Florida defined rural county. There are 11 physicians practicing in a rural area, either HRSA defined or Florida defined.²⁵

- 82% are allopathic and 18% are osteopathic.
- 45% work in a Federally Qualified Health Center (FQHC), 45% work in a Certified Rural Health Clinic (RHC), and 10% work in a correctional facility.
- 55% are pediatricians, 36% are family practice, and 9% are obstetricians/gynecologists.

Since the inception of the State Conrad 30 Waiver Program in 1994, more than 80%, or nearly 500 physicians, continue to practice in Florida. In addition, approximately 131 National Interest Waiver foreign physicians practice in Florida; these physicians are required to practice in underserved areas for five years.

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

²⁵ 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.

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 and rural health clinics. From January 1, 2021, through June 30, 2021, there were 841 location views and 1,293 opportunity views. During this same time period, 3RNet had 3,118 active candidates and 31 jobs added or updated in Florida.

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. Florida's Project ECHO hub hosted its first session, focused on palliative care, during the fall of 2019. In 2020, the Office supported six Project ECHO sessions on developing a rural EMS community paramedicine program. In 2021, the Office funded six Project ECHO sessions on COVID-19 related topics for rural providers. Topics included: COVID-19 Vaccinations with a Community Health Lens (March 2021); Anticoagulation COVID-19 Considerations for Mobile Integrated Healthcare (MIH) Teams (April 2021); EMS Documentation: Chronology, Deviation, and COVID-19 (April 2021); COVID-19 EMS and Immune Health (April 2021); Corticosteroids and MIH clinical Pearls (May 2021); and MIH program and Measure Development (June 2021). Visit <https://www.floridaruralhealth.org/rural-ems-project-echo> for more information.

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 13,340 health care professionals serving in the Volunteer Health Care Provider Program.

Physician Workforce Advisory Council 2021 Recommendations

Ongoing Recommendations

- 1. Collaborate with the Council of Florida Medical School Deans to 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.** In addition, expand and collaborate with university pre-med and medical sciences programs as well as high school medical magnet programs throughout the state. Florida's nine medical schools provided feedback about their pipeline programs to the Florida Department of Health (Department) and the Physician Workforce Advisory Council (Council). The Medical School Pipeline report is located on the Physician Workforce Web Page at www.FloridaHealth.gov.
- 2. Collaborate with the Council of Florida Medical School Deans to develop and maintain a comprehensive database of current Graduate Medical Education (GME) residency positions in Florida with the goal of describing the current and projected areas of need that can be addressed by creating or expanding GME programs.** The Council of Florida Medical School Deans has a GME Working Group which collaborates on GME-related issues across the state including workforce issues, physician wellness, research and faculty development. The GME Working Group determined that in 2020–2021 there were 7,608 residency and fellowship slots in the state, which is 1,761 more slots than in 2016–2017.
- 3. Enhance collaboration with the Health Resources and Services Administration (HRSA) through continued promotion of the National Health Service Corps (NHSC) Loan Repayment Program via partnerships with the Florida Association of Community Health Centers, rural hospital outpatient practices, federally qualified health centers, community health centers and the colleges of medicine.** The Department continually provides ongoing technical assistance to clinicians and practice sites interested in the program. The Primary Care Office (PCO) works collaboratively with the Florida Association of Community Health Centers, the Office of Rural Health and the Volunteer Health Care Provider Program to promote the National Health Service Corps to eligible clinics and clinicians. The PCO monitors the quarterly field strength report provided by the Health Resources and Services Administration to determine the current status of the NHSC in Florida. The PCO also works to identify participants in

their final year of service and sends email reminders about recertification processes. Also, the PCO provides technical assistance during each NHSC loan repayment and site designation application cycle. Additionally, it works collaboratively with the federal regional coordinators during application periods while providing guidance and support to individual applicants to achieve successful site designation and loan repayment awards. There are over 708 National Health Service Corps sites in Florida. Currently there are 129 primary care physicians serving through the loan repayment program.

4. **Evaluate models which forecast physician and subspecialty needs in Florida.** The anticipated 2022 Florida Statewide and Regional Physician Workforce Analysis provided by IHS Markit on behalf of the Safety Net Hospital Alliance of Florida will be reviewed. Seek assistance with finding, evaluating and testing additional simulation models which will help predict Florida physician workforce needs in the future and guide policy recommendations to the Legislature. This effort should focus on how to retain family medicine and internal medicine residency graduates in the state of Florida once they have completed residency.
5. **Review and revise the Council's strategic plan based on emerging physician workforce issues.** Accomplished objectives will be removed, objectives in process will be updated and the need for new objectives will be evaluated.
6. **Determine how to best review the impact and quality of the new and existing GME programs.** Develop metrics to assess the impact and quality of the new GME programs on the physician workforce.
7. **Develop steps the Department can take to help with the recruitment and retention of the best residents and fellows for Florida's training programs. Impact metrics should be created as well.** Develop common messaging to let allopathic and osteopathic medical students know about training opportunities in Florida and why they would benefit from training in Florida.
8. **The Council recommends the Florida Legislature fund a state-level student loan reimbursement program at \$10 million per year to assist physicians who can fill specific gaps in location and subspecialty in Florida. It also recommends seeking funding partners from the private sector, such as HMOs, pharmaceutical companies and hospitals.** Benefits in the form of tax savings or similar benefits as extended to military members would be attractive. Physicians often leave the state once

their loans are paid off. Tax benefits extended to physicians in HPSAs would promote longevity and retention.

- 9. The Council recommends that the Legislature direct the Agency for Health Care Administration to seek resident physician specialty board pass-rate 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.
- 10. 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) foster a more inclusive work environment and 3) foster a high-quality health care provision environment for our diverse populations to address inequalities and disparities.**
- 11. Advocate for an increase in J-1 Visa Waivers to increase retention of residents and fellows in Florida.** There are two J-1 Waiver programs for physicians: the Conrad 30 program and the HHS Exchange Visitor program. The Conrad 30 program allows for an annual sponsorship of 30 physicians with a J-1 visa by the state surgeon general to work in Florida. The maximum number of slots for sponsorship by all states is regulated by federal statute, and any increase must come from the U.S. Congress. Advocating for an increase in spots would require dialog with Florida's Congressional delegation. Legislation to increase the number of Conrad slots was last proposed in 2017, but it did not get out of committee. The HHS Exchange Visitor program allows a J-1 Visa holder to request a waiver when employed by private or non-federal institutions, organizations, agencies or components of HHS. Examples include correctional institutions, veterans administration facilities, federally qualified health centers, CMS-approved rural health clinics or Indian health clinics.

New Recommendations

- 12. The Council recommends monitoring and sharing of data related to disparity 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.
- 13. The Council recommends increased workforce development and workforce education related to the COVID 19 pandemic and response.** Because of the

pandemic, special attention should be given to the protection, support and wellness programming for the physician workforce.

- 14. 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 due to the current COVID crisis.** Crisis counselors should be available to assist those needing acute or subacute counseling services. In addition, virtual physician support groups that physicians can log onto as needed should be created and run by a licensed mental health provider.
- 15. The Council recommends that the Physician Workforce Survey include questions that measure the impact the COVID-19 crisis has had on physician practices.**
- 16. 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.**

Completed Recommendation

- 17. The Council recommends the Florida Board of Medicine and the Board of Osteopathic Medicine accept the revised questions regarding substance abuse and mental health into the original licensure process.** The revised questions will address the issues regarding mental health among physicians while also allowing more physicians to practice medicine in Florida. **Update:** The Florida Board of Medicine and the Board of Osteopathic Medicine both confirmed that the revised questions regarding substance abuse and mental health were inserted into the original licensure process.

Conclusion

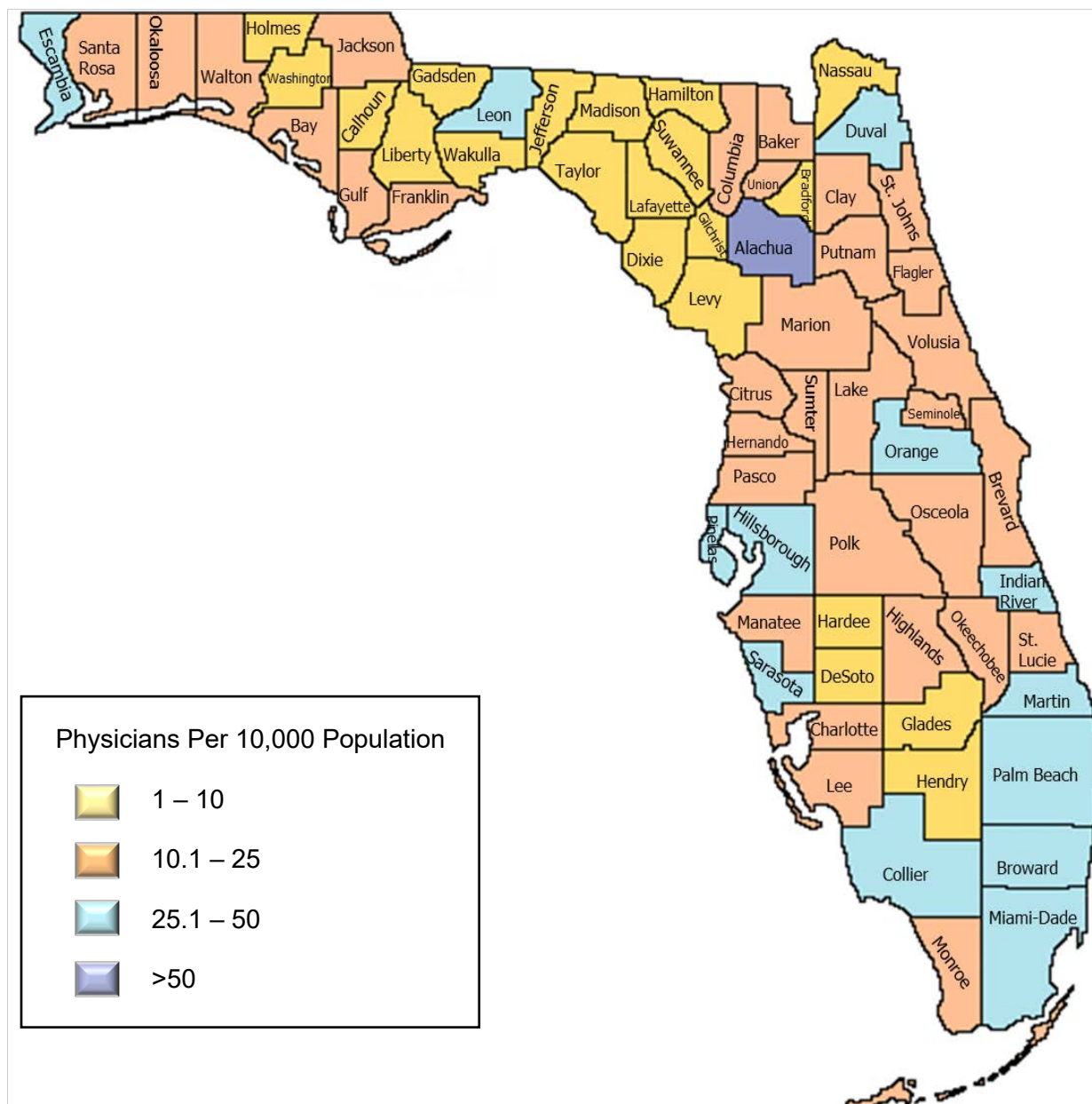
The Florida Department of Health renews its commitment to review and assess current and future physician workforce needs in Florida. Physician workforce assessment and planning in this state has resulted in new information for policymakers on clinical practice, geographic location and scope of practice 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 just over 24%, from 44,804 as reported in 2011–12 to 55,809 in 2020–21. During this same time, the population of Florida increased almost 15%, from 19.1 million to 21.9 million.
- Physicians are generally concentrated in populous counties and within large, urban population centers. Physicians working in rural areas are more likely to be primary care providers. Survey results indicated that 98% of physicians work in urban counties while 2% work in Florida's 30 rural counties. (See Appendix A and Appendix B for details.)
- Gender and ethnic diversity of Florida's physician workforce has increased since 2011–12. The percentage of female physicians has increased from 24.4% in 2011–12 to 31.2% in 2020–21, and the percentage of Hispanic, Asian, Black and Native American physicians has increased 6.2%.
- Physicians continue to specialize, with more physicians practicing in specialties than in primary care. However, although the percentage (33.7%) of primary care physicians in 2019–20 increased slightly from what it was in 2012–13 (33.4%), the percentage decreased to 31.4% in 2020–21.
- Each year physicians report if they are planning to retire. The percentage of physicians who reported that they are planning to retire within the next five years had grown to a high of 16.6% in 2017–18. The number of those planning to retire decreased to a low of 8.7% in 2019–20. It increased to 9.2% in 2020–21.

Appendix A: Physician Workforce per Capita by County, 2020–21

This map illustrates a per capita distribution of practicing physicians at the county level.²⁶ Miami-Dade, Broward and Palm Beach Counties combined have almost one-third (31.8%) of all practicing physicians in Florida. Miami-Dade County alone has 14.4% 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 (64.9), Duval (34.9), Sarasota (31.8), Escambia (31.6) and Pinellas (30.4) have the highest per capita rate. There are 21 counties (31.3%) whose per capita rate is 10 or less.



²⁶ 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 seven report cohorts.²⁷

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

²⁷ There were 6,186 physicians whose 2020-21 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
Hillsborough	3,356	3,470	3,611	3,696	4,041	4,167	4,362	4,464
Holmes*	16	16	13	11	16	16	15	18
Indian River	369	371	379	370	425	430	447	447
Jackson*	60	57	52	47	52	49	55	54
Jefferson*	6	8	8	6	7	5	7	7
Lafayette*	4	4	2	2	3	1	1	1
Lake	618	642	684	671	704	705	734	743
Lee	1,254	1,275	1,336	1,332	1,483	1,506	1,571	1,615
Leon	661	632	656	667	750	764	782	797
Levy*	15	15	15	15	14	13	15	13
Liberty*	0	1	2	1	2	2	2	3
Madison*	10	8	9	8	9	10	7	9
Manatee	592	591	611	631	689	693	717	733
Marion	593	618	601	598	680	684	689	697
Martin	358	367	388	398	443	443	469	477
Miami-Dade	6,535	6,648	6,697	6,726	7,313	7,407	7,583	7,803
Monroe*	171	180	180	181	187	186	183	175
Nassau	85	83	80	76	76	87	81	87
Okaloosa	412	414	419	430	460	454	463	465
Okeechobee*	57	56	49	58	61	55	61	61
Orange	2,808	2,844	2,977	3,079	3,473	3,660	3,924	4,111
Osceola	454	477	515	530	650	625	655	715
Palm Beach	3,710	3,804	3,919	3,901	4,262	4,241	4,227	4,360
Pasco	820	824	828	835	923	922	958	974
Pinellas	2,555	2,568	2,620	2,613	2,874	2,878	2,970	2,996
Polk	941	945	975	1,001	1,121	1,090	1,092	1,116
Putnam	107	97	84	88	98	97	91	89
Santa Rosa	174	165	172	171	193	195	201	201
Sarasota	1,074	1,092	1,119	1,126	1,267	1,284	1,347	1,385
Seminole	666	660	687	712	774	793	827	846
St. Johns	327	339	347	338	385	400	424	439
St. Lucie	414	426	428	410	447	474	507	512
Sumter	123	126	148	161	188	187	183	196
Suwannee*	22	17	22	28	25	25	21	16

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

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	2013-14 to 2020-21
Alachua	4.1%	1.2%	-1.0%	13.0%	3.2%	2.5%	2.8%	28.0%
Baker*	-9.5%	-2.6%	5.4%	17.9%	-13.0%	-7.5%	-2.7%	-14.3%
Bay	0.0%	3.9%	1.3%	6.0%	-1.4%	0.5%	-4.0%	6.1%
Bradford*	-8.7%	14.3%	4.2%	-16.0%	-4.8%	30.0%	3.8%	17.4%
Brevard	-0.7%	2.4%	-0.5%	6.3%	3.3%	-0.4%	0.4%	11.0%
Broward	1.4%	1.8%	-0.1%	9.8%	2.3%	2.7%	2.3%	21.7%
Calhoun*	0.0%	-11.1%	0.0%	37.5%	-9.1%	0.0%	0.0%	11.1%
Charlotte	-2.9%	3.0%	-4.6%	8.7%	4.2%	6.1%	-0.3%	14.4%
Citrus	4.6%	-1.6%	-8.2%	14.7%	0.4%	0.0%	4.2%	13.4%
Clay	0.7%	10.5%	2.2%	8.4%	5.4%	-7.6%	0.0%	20.1%
Collier	-0.5%	1.2%	0.7%	14.3%	4.6%	7.1%	4.5%	35.7%
Columbia*	2.2%	3.6%	-4.9%	3.6%	0.7%	-0.7%	-5.6%	-1.5%
Desoto*	0.0%	-12.9%	-7.4%	0.0%	4.0%	7.7%	-7.1%	-16.1%
Dixie*	20.0%	-8.3%	36.4%	-13.3%	-61.5%	60.0%	0.0%	-20.0%
Duval	2.0%	2.4%	0.8%	8.5%	3.4%	4.5%	3.2%	27.5%
Escambia	4.4%	0.8%	-0.5%	8.1%	3.0%	5.0%	-0.3%	22.1%
Flagler	6.6%	7.8%	0.0%	7.9%	-4.0%	-1.4%	-1.4%	15.7%
Franklin*	-6.7%	-28.6%	-20.0%	50.0%	8.3%	15.4%	20.0%	20.0%
Gadsden*	0.0%	-2.5%	-10.3%	-2.9%	-14.7%	20.7%	0.0%	-12.5%
Gilchrist*	0.0%	-37.5%	40.0%	-14.3%	-16.7%	-20.0%	25.0%	-37.5%
Glades*	-12.5%	0.0%	14.3%	-25.0%	-16.7%	-40.0%	0.0%	-62.5%
Gulf	12.5%	-16.7%	-13.3%	46.2%	10.5%	9.5%	0.0%	43.8%
Hamilton*	0.0%	-28.6%	-20.0%	-25.0%	100.0%	50.0%	-33.3%	-14.3%
Hardee*	0.0%	7.7%	-14.3%	-25.0%	11.1%	0.0%	-10.0%	-30.8%
Hendry*	4.3%	4.2%	0.0%	32.0%	-9.1%	-3.3%	-3.4%	21.7%
Hernando	0.0%	4.3%	3.5%	3.1%	-2.7%	7.4%	6.6%	24.0%
Highlands*	3.7%	-1.0%	-3.1%	3.2%	-0.5%	-1.0%	-1.6%	-0.5%
Hillsborough	3.4%	4.1%	2.4%	9.3%	3.1%	4.7%	2.3%	33.0%
Holmes*	0.0%	-18.8%	-15.4%	45.5%	0.0%	-6.3%	20.0%	12.5%
Indian River	0.5%	2.2%	-2.4%	14.9%	1.2%	4.0%	0.0%	21.1%
Jackson*	-5.0%	-8.8%	-9.6%	10.6%	-5.8%	12.2%	-1.8%	-10.0%
Jefferson*	33.3%	0.0%	-25.0%	16.7%	-28.6%	40.0%	0.0%	16.7%
Lafayette*	0.0%	-50.0%	0.0%	50.0%	-66.7%	0.0%	0.0%	-75.0%
Lake	3.9%	6.5%	-1.9%	4.9%	0.1%	4.1%	1.2%	20.2%

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	2013-14 to 2020-21
Lee	1.7%	4.8%	-0.3%	11.3%	1.6%	4.3%	2.8%	28.8%
Leon	-4.4%	3.8%	1.7%	12.4%	1.9%	2.4%	1.9%	20.6%
Levy*	0.0%	0.0%	0.0%	-6.7%	-7.1%	15.4%	-13.3%	-13.3%
Liberty*	100.0%	100.0%	-50.0%	100.0%	0.0%	0.0%	50.0%	300.0%
Madison*	-20.0%	12.5%	-11.1%	12.5%	11.1%	-30.0%	28.6%	-10.0%
Manatee	-0.2%	3.4%	3.3%	9.2%	0.6%	3.5%	2.2%	23.8%
Marion	4.2%	-2.8%	-0.5%	13.7%	0.6%	0.7%	1.2%	17.5%
Martin	2.5%	5.7%	2.6%	11.3%	0.0%	5.9%	1.7%	33.2%
Miami-Dade	1.7%	0.7%	0.4%	8.7%	1.3%	2.4%	2.9%	19.4%
Monroe*	5.3%	0.0%	0.6%	3.3%	-0.5%	-1.6%	-4.4%	2.3%
Nassau	-2.4%	-3.6%	-5.0%	0.0%	14.5%	-6.9%	7.4%	2.4%
Okaloosa	0.5%	1.2%	2.6%	7.0%	-1.3%	2.0%	0.4%	12.9%
Okeechobee*	-1.8%	-12.5%	18.4%	5.2%	-9.8%	10.9%	0.0%	7.0%
Orange	1.3%	4.7%	3.4%	12.8%	5.4%	7.2%	4.8%	46.4%
Osceola	5.1%	8.0%	2.9%	22.6%	-3.8%	4.8%	9.2%	57.5%
Palm Beach	2.5%	3.0%	-0.5%	9.3%	-0.5%	-0.3%	3.1%	17.5%
Pasco	0.5%	0.5%	0.8%	10.5%	-0.1%	3.9%	1.7%	18.8%
Pinellas	0.5%	2.0%	-0.3%	10.0%	0.1%	3.2%	0.9%	17.3%
Polk	0.4%	3.2%	2.7%	12.0%	-2.8%	0.2%	2.2%	18.6%
Putnam	-9.3%	-13.4%	4.8%	11.4%	-1.0%	-6.2%	-2.2%	-16.8%
Santa Rosa	-5.2%	4.2%	-0.6%	12.9%	1.0%	3.1%	0.0%	15.5%
Sarasota	1.7%	2.5%	0.6%	12.5%	1.3%	4.9%	2.8%	29.0%
Seminole	-0.9%	4.1%	3.6%	8.7%	2.5%	4.3%	2.3%	27.0%
St. Johns	3.7%	2.4%	-2.6%	13.9%	3.9%	6.0%	3.5%	34.3%
St. Lucie	2.9%	0.5%	-4.2%	9.0%	6.0%	7.0%	1.0%	23.7%
Sumter	2.4%	17.5%	8.8%	16.8%	-0.5%	-2.1%	7.1%	59.3%
Suwannee*	-22.7%	29.4%	27.3%	-10.7%	0.0%	-16.0%	-23.8%	-27.3%
Taylor*	6.3%	17.6%	10.0%	-18.2%	-11.1%	25.0%	-10.0%	12.5%
Union*	-7.1%	69.2%	13.6%	4.0%	0.0%	-11.5%	-4.3%	57.1%
Volusia	3.5%	-0.2%	-0.9%	9.6%	-1.6%	3.2%	2.9%	17.4%
Wakulla*	11.1%	-10.0%	-11.1%	12.5%	-22.2%	57.1%	9.1%	33.3%
Walton*	4.6%	-2.2%	0.0%	5.6%	-2.1%	7.6%	5.1%	19.5%
Washington*	5.6%	-36.8%	-16.7%	40.0%	-7.1%	-7.7%	0.0%	-33.3%
Statewide	1.7%	2.4%	0.5%	9.9%	1.6%	3.2%	2.5%	23.6%

Appendix C: Specialty Group Counts by County, 2020–21

This table represents a count of physicians by county and specialty²⁸.

Specialty	Alachua	Baker	Bay	Bradford	Brevard	Broward	Calhoun
Anesthesiology	148	0	23	1	84	359	0
Dermatology	26	1	5	0	27	109	0
Emergency Medicine	89	6	32	3	82	292	1
Family Medicine	171	10	54	8	198	621	6
Internal Medicine	462	6	103	5	409	1,420	2
Medical Genetics	6	0	0	0	0	5	0
Neurology	61	0	12	2	45	119	0
Nuclear Medicine	2	0	1	0	2	5	0
Obstetrics & Gynecology	66	1	21	1	57	289	0
Ophthalmology	34	0	6	0	35	125	0
Orthopedic Medicine	21	0	15	0	31	125	0
Otolaryngology	28	0	6	0	21	59	1
Pathology	54	1	2	0	18	87	0
Pediatrics	167	1	24	3	80	433	0
Physical Medicine & Rehabilitation	21	0	1	0	23	73	0
Preventive Medicine	2	0	1	0	17	14	0
Proctology	0	0	0	0	0	2	0
Psychiatry	96	10	21	2	48	196	0
Radiology	112	0	20	0	76	225	0
Surgery	127	0	38	2	91	406	0
Urology	10	0	5	0	10	45	0
TOTAL	1,703	36	390	27	1,354	5,009	10

²⁸ There were 1,926 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	22	18	25	63	5	2	0
Dermatology	9	8	7	33	1	0	0
Emergency Medicine	24	9	17	74	10	1	0
Family Medicine	62	56	68	135	32	5	5
Internal Medicine	123	84	97	349	38	8	1
Medical Genetics	0	0	0	0	0	0	0
Neurology	10	5	9	18	3	0	1
Nuclear Medicine	1	0	0	3	0	0	0
Obstetrics & Gynecology	8	10	17	42	5	0	0
Ophthalmology	13	8	9	33	4	0	0
Orthopedic Medicine	14	5	3	27	1	0	0
Otolaryngology	4	3	4	23	1	0	0
Pathology	7	5	1	14	0	0	0
Pediatrics	15	7	26	57	8	4	0
Physical Medicine & Rehabilitation	3	2	3	17	3	0	0
Preventive Medicine	1	0	2	8	1	0	1
Proctology	0	0	0	0	0	0	0
Psychiatry	17	8	6	40	9	3	0
Radiology	24	15	5	62	6	0	0
Surgery	29	19	28	75	7	2	0
Urology	4	4	6	14	0	0	0
TOTAL	390	266	333	1,087	134	25	8

Specialty	Duval	Escambia	Flagler	Franklin	Gadsden	Gilchrist	Glades
Anesthesiology	240	75	13	1	0	0	0
Dermatology	41	14	1	0	0	0	0
Emergency Medicine	251	72	6	1	2	0	0
Family Medicine	442	131	36	7	13	2	2
Internal Medicine	918	243	40	4	7	0	0
Medical Genetics	4	0	0	0	0	0	0
Neurology	111	21	4	0	0	0	0
Nuclear Medicine	7	0	0	0	0	0	0
Obstetrics & Gynecology	168	53	5	3	0	0	0
Ophthalmology	70	23	4	0	1	0	0
Orthopedic Medicine	67	18	8	0	0	0	0
Otolaryngology	45	20	1	0	0	0	0
Pathology	70	16	0	0	0	0	0
Pediatrics	287	105	2	0	0	1	0
Physical Medicine & Rehabilitation	49	13	1	0	0	1	0
Preventive Medicine	19	5	0	0	1	0	0
Proctology	0	1	0	0	0	0	0
Psychiatry	113	39	2	1	10	0	0
Radiology	220	50	4	0	0	0	0
Surgery	243	94	8	1	1	0	0
Urology	23	14	2	0	0	0	0
TOTAL	3,388	1,007	137	18	35	4	2

Specialty	Gulf	Hamilton	Hardee	Hendry	Hernando	Highlands	Hillsborough
Anesthesiology	1	0	0	1	16	12	275
Dermatology	0	0	0	0	4	5	69
Emergency Medicine	4	0	3	2	27	14	249
Family Medicine	8	2	4	8	60	30	487
Internal Medicine	4	1	1	5	138	62	1,248
Medical Genetics	0	0	0	0	0	0	5
Neurology	0	0	0	1	5	2	109
Nuclear Medicine	1	0	0	0	0	0	8
Obstetrics & Gynecology	0	0	0	0	15	6	205
Ophthalmology	0	0	0	0	9	2	83
Orthopedic Medicine	0	0	0	0	7	4	67
Otolaryngology	0	0	0	0	2	1	63
Pathology	0	0	0	0	5	4	135
Pediatrics	1	0	1	7	16	10	366
Physical Medicine & Rehabilitation	0	0	0	0	7	1	63
Preventive Medicine	1	1	0	0	1	0	30
Proctology	0	0	0	0	0	0	0
Psychiatry	0	1	0	0	12	4	204
Radiology	0	1	0	2	12	9	265
Surgery	3	0	0	2	24	15	379
Urology	0	0	0	0	4	4	35
TOTAL	23	6	9	28	364	185	4,345

Specialty	Holmes	Indian River	Jackson	Jefferson	Lafayette	Lake	Lee
Anesthesiology	0	32	0	0	0	44	86
Dermatology	0	10	0	0	0	11	32
Emergency Medicine	0	26	6	0	0	36	88
Family Medicine	9	60	9	3	0	121	252
Internal Medicine	3	139	12	1	1	266	429
Medical Genetics	0	0	0	0	0	1	1
Neurology	0	11	0	0	0	12	62
Nuclear Medicine	0	0	0	0	0	0	1
Obstetrics & Gynecology	0	14	2	0	0	28	72
Ophthalmology	0	19	3	0	0	22	59
Orthopedic Medicine	0	12	1	0	0	19	38
Otolaryngology	0	5	1	0	0	9	22
Pathology	0	9	1	0	0	17	26
Pediatrics	1	23	4	0	0	37	123
Physical Medicine & Rehabilitation	0	8	0	0	0	10	26
Preventive Medicine	0	1	1	0	0	6	0
Proctology	0	0	0	0	0	0	0
Psychiatry	1	17	3	1	0	17	58
Radiology	1	27	6	1	0	30	68
Surgery	3	22	3	1	0	29	121
Urology	0	7	1	0	0	6	12
TOTAL	18	442	53	7	1	721	1,576

Specialty	Leon	Levy	Liberty	Madison	Manatee	Marion	Martin
Anesthesiology	42	1	0	0	32	39	29
Dermatology	20	0	0	0	11	16	13
Emergency Medicine	48	1	0	0	46	43	29
Family Medicine	161	6	2	5	137	109	56
Internal Medicine	180	2	1	2	212	231	144
Medical Genetics	1	0	0	0	0	0	0
Neurology	15	0	0	0	16	6	16
Nuclear Medicine	0	0	0	0	0	0	0
Obstetrics & Gynecology	35	0	0	0	34	15	14
Ophthalmology	17	0	0	0	26	21	14
Orthopedic Medicine	15	0	0	0	18	9	13
Otolaryngology	9	0	0	0	11	5	6
Pathology	11	1	0	0	7	8	5
Pediatrics	52	1	0	0	43	41	16
Physical Medicine & Rehabilitation	6	0	0	0	12	10	6
Preventive Medicine	3	0	0	0	3	6	3
Proctology	0	0	0	0	0	0	0
Psychiatry	43	1	0	1	30	25	21
Radiology	55	0	0	0	18	34	36
Surgery	55	0	0	1	53	53	34
Urology	12	0	0	0	7	9	8
TOTAL	780	13	3	9	716	680	463

Specialty	Miami-Dade	Monroe	Nassau	Okaloosa	Okeechobee	Orange	Osceola
Anesthesiology	466	10	5	42	1	232	29
Dermatology	138	4	1	7	2	39	7
Emergency Medicine	356	24	12	37	2	245	66
Family Medicine	1,029	29	22	72	10	569	154
Internal Medicine	2,155	36	19	103	19	1,004	187
Medical Genetics	14	0	0	0	0	8	0
Neurology	211	4	2	11	1	67	13
Nuclear Medicine	7	0	0	0	0	4	0
Obstetrics & Gynecology	357	7	2	21	1	234	51
Ophthalmology	180	1	1	13	1	62	6
Orthopedic Medicine	141	9	2	19	2	75	9
Otolaryngology	84	3	2	9	0	44	8
Pathology	115	2	1	2	2	58	5
Pediatrics	768	8	4	25	8	543	52
Physical Medicine & Rehabilitation	80	2	2	2	1	50	8
Preventive Medicine	46	0	1	7	1	23	10
Proctology	1	0	0	0	0	0	0
Psychiatry	399	10	5	23	1	151	22
Radiology	375	3	2	18	2	245	12
Surgery	626	10	2	46	3	317	49
Urology	70	4	1	1	2	33	7
TOTAL	7,618	166	86	458	59	4,003	695

Specialty	Palm Beach	Pasco	Pinellas	Polk	Putnam	St. Johns	St. Lucie
Anesthesiology	282	52	175	58	2	26	27
Dermatology	149	18	64	19	0	9	7
Emergency Medicine	199	65	175	80	6	27	38
Family Medicine	408	160	457	187	25	108	85
Internal Medicine	1,283	331	840	334	30	103	124
Medical Genetics	2	0	2	0	0	1	0
Neurology	105	17	62	27	1	6	16
Nuclear Medicine	2	0	5	0	0	0	0
Obstetrics & Gynecology	219	33	106	45	4	14	21
Ophthalmology	152	23	89	40	1	12	7
Orthopedic Medicine	123	22	62	18	2	12	18
Otolaryngology	79	10	42	10	1	5	9
Pathology	60	6	44	13	1	5	8
Pediatrics	314	60	251	66	7	27	47
Physical Medicine & Rehabilitation	48	12	39	8	0	4	7
Preventive Medicine	33	2	18	3	0	0	0
Proctology	0	0	0	0	0	0	0
Psychiatry	202	37	110	43	1	18	21
Radiology	215	31	142	58	3	25	21
Surgery	325	69	203	77	3	28	39
Urology	42	9	32	11	0	1	7
TOTAL	4,242	957	2,918	1,097	87	431	502

Specialty	Santa Rosa	Sarasota	Seminole	Sumter	Suwannee	Taylor	Union
Anesthesiology	9	69	39	3	0	1	2
Dermatology	2	46	25	8	0	0	0
Emergency Medicine	11	81	56	6	1	1	1
Family Medicine	68	185	174	49	7	8	12
Internal Medicine	35	426	210	71	3	3	2
Medical Genetics	0	0	0	0	0	0	0
Neurology	5	34	17	5	0	0	0
Nuclear Medicine	0	0	0	0	1	0	0
Obstetrics & Gynecology	9	63	41	5	0	0	0
Ophthalmology	1	43	21	1	0	0	0
Orthopedic Medicine	12	41	10	2	0	0	0
Otolaryngology	2	22	4	2	0	0	0
Pathology	0	12	3	1	0	0	0
Pediatrics	20	51	76	1	2	3	0
Physical Medicine & Rehabilitation	5	25	14	3	0	0	0
Preventive Medicine	1	3	6	1	0	0	0
Proctology	0	0	0	0	0	0	0
Psychiatry	3	63	28	3	1	0	5
Radiology	7	71	28	21	0	0	0
Surgery	10	110	57	5	1	2	0
Urology	0	18	11	3	0	0	0
TOTAL	200	1,363	820	190	16	18	22

Specialty	Volusia	Wakulla	Walton	Washington	Out of State	TOTAL
Anesthesiology	69	0	8	1	24	3,321
Dermatology	18	0	3	0	15	1,054
Emergency Medicine	86	0	15	1	59	3,244
Family Medicine	285	8	22	7	141	7,874
Internal Medicine	302	0	20	1	131	15,173
Medical Genetics	0	0	0	0	1	51
Neurology	21	0	1	0	46	1,348
Nuclear Medicine	0	0	0	0	1	51
Obstetrics & Gynecology	40	0	5	0	15	2,479
Ophthalmology	37	0	0	0	8	1,339
Orthopedic Medicine	22	0	2	0	5	1,146
Otolaryngology	12	0	2	0	7	707
Pathology	16	0	0	0	49	907
Pediatrics	49	0	9	0	28	4,381
Physical Medicine & Rehabilitation	14	0	0	0	9	692
Preventive Medicine	0	0	1	0	7	291
Proctology	0	0	0	0	0	4
Psychiatry	42	4	3	1	41	2,297
Radiology	60	0	7	0	197	2,927
Surgery	85	0	4	1	47	4,088
Urology	13	0	0	0	2	509
TOTAL	1,171	12	102	12	833	53,883