

Presented to the Board of Medicine and the Board of Osteopathic Medicine

November 1, 2021

Ron DeSantis _{Governor}

Joseph A. Ladapo, MD, PhD State Surgeon General

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Key Definitions

Certification of Added Qualification (CAQs): Physician assistants were asked to provide information on any certifications for added qualifications they held. The National Commission on Certification of Physician Assistants (NCCPA) lists seven specialty areas. Survey respondents hold CAQs in Cardiovascular/Thoracic Surgery, Emergency Medicine, Hospital Medicine, Nephrology, Orthopedic Surgery, Pediatrics, and Psychiatry.

Physician Assistants (PAs) Actively Practicing in Florida: Physician assistants who are actively practicing in Florida, have a valid practice address in a Florida county, and possess a valid license in active status.

Physician Assistants Not Included in this Report: Not included are physician assistants holding a Florida license who took the survey and indicated that they did not practice medicine in Florida during the twelve months prior to taking the survey; physician assistants with inactive licenses; physician assistants whose primary practice location is not in Florida (based on county responses); and physician assistants whose license status as of July 22, 2021,¹ does not authorize them to practice (administrative suspension, delinquent, emergency suspension, military active, retired, suspended, temporary military active, and voluntary withdrawal).

Physician Assistants Workforce Survey: The survey completed by all physician assistants biennially during the Florida physician assistant license renewal process.

Primary Care Physician Assistants: Physician assistants indicating a sub-specialty in Family Medicine (0400-0406), General Internal Medicine (0500-0501), or General Pediatrics (1400-1401), as defined by the American Academy of Family Physicians. In this survey, all practice locations with unique sub-specialty information were included.

Primary Specialty: The supervisor's primary practice specialty reported by the physician assistant.

¹ License status is determined *after* the due date for renewal, January 31 of odd years. On December 23, 2020 and again on March 31, 2021 by Emergency Order (20-015 and 21-001) the State Surgeon General extended the deadline for upcoming license renewal. The final deadline was June 30, 2021, with license status for the 2021-2023 cycle collected in July 2021 instead of February.

Specialty Area: Physician assistants were asked to provide the specialty area(s) of their supervising physician.² Reponses included specialty area and, in parentheses, any sub-specialty areas identified in any of the three practice locations:

- 01 Anesthesiology (0100-0104)
- 02 Dermatology (0200, 0203-0204)
- 03 Emergency Medicine (0300-0301, 0304-0305)
- 04 Family Medicine (0400-0403, 0405-0406)
- 05 Internal Medicine (0500-0511, 0513-0521)
- 06 Medical Genetics (0600)
- 07 Neurology (0700, 0704, 0706-0708)
- 08 Nuclear Medicine (0800)
- 09 Obstetrics & Gynecology (0900-0902, 0904-0905)
- 10 Ophthalmology
- (1000)

- 11 Orthopedic Medicine
 - (1100-1103)
- 12 Otolaryngology
 - (1200-1204)
- 13 Pathology
 - (1300, 1307)
- 14 Pediatrics
 - (1400, 1404-1405, 1408-1409, 1411-1415, 1417, 1420-1422, 1425-1427)
- 15 Physical Medicine & Rehabilitation
 - (1500, 1503, 1505-1506)
- 16 Preventive Medicine

(1600-1601, 1604-1606)

18 Psychiatry

(1800-1801, 1803-1804, 1806-1807)

19 Radiology

(1900-1902, 1909, 1912)

20 Surgery

(2000-2002, 2004-2011)

21 Urology

(2100-2101).

² Appendix E provides the list of specialty and subspecialties published by Department of Health (the Department) as form DH5025-MQA-07/2017 under Rule 64B-9.002, Florida Administrative Code, Physician and Physician Assistant Survey Procedures.

Executive Summary

The 2017 Florida Legislature required a Physician Assistant Workforce survey comparable to the Physician Workforce survey completed by allopathic and osteopathic physicians as part of license renewal, as provided in §458.347(6)(b)1.c and §458.347(6)(b)2, Florida Statutes. This 2021 Physician Assistant Workforce Annual Report presents a summary and analysis of the 2019-2021 Physician Assistant Workforce Survey,³ using the Physician Workforce Survey as a guide. Physician assistants (PAs) are required to complete the survey every two years when they renew their license to practice.⁴

A total of 11,461 physician assistants possess a license that allows them to practice in Florida. Of these physician assistants, 9,397 renewed their medical license for 2021-2023 and responded to the workforce survey. Of the physician assistants renewing their medical license, 7,920 (84.3%) were practicing in Florida in July 2021 and held an active license. Survey results presented in this report are based on these physician assistants, unless otherwise specified.

- Based on data in the Medical Quality Assurance (MQA) licensure database and survey respondents, 65.1% of physician assistants are female, 73.4% identified as White, and 25.4% are age 50 years and older.
- The top four specialty areas for physician assistants in Florida are Emergency Medicine (15.8%), Family Medicine (15.9%), Internal Medicine (21.0%), and Surgery (14.1%).
- Primary care physician assistants account for 20.9% of the physician assistant workforce.
- Half, 50.6%, of physician assistants work in an office practice setting and 34.9% practice in a hospital.
- More physician assistants report their practice accepts new Medicare patients (87.3%) compared to new Medicaid patients (64.3%).
- A total of 7.8% of physician assistants have already retired, or plan to retire in the next five years. An additional 7.8% of respondents indicated plans to relocate out of state in the next five years. In total these represent 14.6% (1,154 of 7,920) of individual currently licensed PAs.

³ The 2019–2021 biennial survey cycle is from February 1, 2019 through January 31, 2021.

⁴ Newly licensed physician assistants do not complete a survey.

• There are generally more physician assistants in areas with large population centers or academic programs, but the ratio of PAs to population shows 48 counties, 41% of Florida's population, have less than the state average-3.6 PAs per 10,000 residents

2021 Florida Physician Assistants Workforce Annual Report

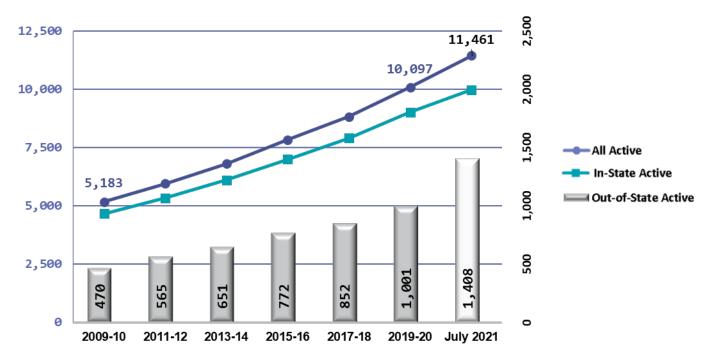
Introduction

The 2021 Physician Assistant Workforce Annual Report is based on responses to the first Florida Physician Assistants Workforce Survey. The survey was established as part of the biennial licensure renewal process for physician assistants in sections 458.347(6)(b)1.c, 458.347(6)(b)2, and 459.022(7), Florida Statutes, effective July 1, 2018. Physician assistants must renew their license every other year to continue practicing. Because the survey is only administered upon licensure renewal, newly licensed PAs are not included in the analysis.

The survey is administered in the same manner as the physician workforce survey established in section 458.3191, Florida Statutes, and submitted to the Board of Medicine and the Board of Osteopathic Medicine. The survey and report are the responsibility of the Florida Department of Health's (the Department) Division of Medical Quality Assurance (MQA). It should be noted that the Physicians Workforce Survey was updated in 2019, while this survey was based on the previous version.

A total of 11,461 PAs possess a license that allows them to practice in Florida. Of these PAs, 9,397 renewed their license during 2019 and 2020 and responded to the workforce survey. Of those surveyed, 7,920 (84.3%) are actively practicing in Florida. Unless otherwise noted, as in Figure 1, this report presents survey results for these PAs.

Figure 1 provides active licensure data for physician assistants from past MQA Annual Reports.





The top line in Figure 1 shows the increase in all active physician assistant licensees from 5,183 in 2009-2010 to 10,097 licensees in 2019-2020. Active licensee counts from the July 2021 MQA licensure database (11,461) are included to align with survey data. While most active licensees are in-state, the percentage of active licensees reporting a primary practice location out-of-state each year also increased, from approximately 9% of all active licensees in 2009 to 10% in 2020. In the July 2021 MQA licensure data, the percentage of active PA licensees with out-of-state primary practice locations compared to in-state licensees jumped to 12% (1,408 of 11,461 active licenses).

Council on Physician Assistants

The Council on Physician Assistants, established in sections 458.347(9) and 459.022(9), Florida Statutes, makes recommendations to the Department on the licensure of physician assistants. It develops rules regulating the use of physician assistants by physicians and makes recommendations to the Board of Medicine and Board of Osteopathic Medicine regarding all matters relating to physician assistants. It addresses concerns and problems of practicing physician assistants to improve safety in the clinical practice of licensed physician assistants.

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Table 1	Physician	Assistant	Worktorce	Advisorv	Council	Membership.
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Council Member	Name
Council Chair and fully licensed physician assistant appointed by the State Surgeon General.	Dayne Alonso, PA
Council Vice Chair and fully licensed physician assistant appointed by the State Surgeon General.	John Byrnes, PA
A physician and member of the Board of Medicine who supervises a physician assistant in the physician's practice.	Ravi Chandra, MD
A physician and member of the Board of Osteopathic Medicine who supervises a physician assistant in the physician's practice.	Michelle Mendez, DO
A third member appointed by the State Surgeon General or her or his designee as a fully licensed physician assistant licensed under chapter 458 or chapter 458.	Katie Callaway, PA

Physician Assistant Workforce Demographics

National and State Context

Historically, the United States Census Bureau report⁵ has shown Florida's population increased consistently faster than the rate of the United States as a whole. For example, between 2010 and 2020 the number of Florida residents increased by 14.6% compared to the increase overall at 7.4%.

In contrast, the Florida Office of Economic and Demographic Research long-term trend analysis indicates a shrinking workforce pool for skilled and educated employees as well as labor intensive employees with a resulting increase in salary and other costs to compete with other states.⁶ This coincides with an overall decrease in resident population as the percentage of prime working age residents (25-54) continues to shrink, from 41.5% of the population in 2000 to 37.2% in 2019.⁷ The section on Workforce Attrition provides related survey results.

The Statistical Profile of Certified Physician Assistants by State,⁸ from the National Commission on Certification of Physician Assistants (NCCPA) shows certified, licensed PAs⁹ in Florida have been increasing, from 6,765 in 2015, the earliest year with state data, to 8,760 in 2019. Florida's PA numbers have remained consistently around 6.3% (9,381 of 148,560 of all certified PAs) in 2020.

In 2020, NCCPA reported "The PA profession grew 28.6% between 2016 and 2020, reaching 148,560 Certified PAs nationally at the end of 2020."¹⁰ While Florida has maintained its percentage of PAs overall, its ratio of PAs to residents remains in the lower quartiles compared to other states, ranking 31st in 2015⁶ and gradually increasing to ranking 29th in 2020.⁸ For comparison, California ranked 22nd in 2015, but fell to 45th in 2020; New York rose from 5th in 2015 to 4th in 2020 and Texas fell from 39th in 2015 to 42nd in 2020.

See Table 2 for sex, ethnicity, and race for respondents to the 2019-2021 Physician Assistant Workforce Survey data compared to census data on population percentages:

• The percentage of female PAs in Florida is greater than the population percentage in Florida and nationwide.¹¹ Gender information is not collected in the profile and not reported here.

⁵ United States Census Bureau, Historical Population Change Data (1910-2020). (<u>https://www.census.gov/data/tables/time-series/dec/popchange-data-text.html</u>.)

⁶ Florida Office of Economic and Demographic Research, Demographic Overview & Population Trends (January 28, 2020), p. 9. (<u>http://edr.state.fl.us/Content/presentations/population-demographics/DemographicTrends_1-28-20.pdf</u>.)

⁷ Florida Office of Economic and Demographic Research, Florida: An Economic Overview (August 31, 2021), p. 10. (<u>http://edr.state.fl.us/Content/presentations/economic/FIEconomicOverview_8-31-21.pdf.</u>)

⁸ National Commission on Certification of Physician Assistants, 2015 through 2019 Statistical Profiles of Certified Physician Assistants by State (<u>https://www.nccpa.net/resources/nccpa-research/</u>.) NCCPA eliminated the detailed state profiles in 2020.

⁹ Florida requires certification by the NCCPA in its licensure process.

¹⁰ National Commission on Certification of PAs, Inc. (2021, July). 2020 Statistical Profile of Certified PAs: An Annual Report of the National Commission on Certification of PAs, p. 5. (<u>https://www.nccpa.net/wp-content/uploads/2021/07/Statistical-Profile-of-Certified-PAs-2020.pdf</u>.)

¹¹ United States Census Bureau, QuickFacts. (<u>https://www.census.gov/quickfacts/fact/</u>)

- The only ethnicity captured by the PA licensure application in the MQA licensure database is "Hispanic or Latino." The percentage of survey respondents who self-identified as Hispanic in the licensure database is 14.5% which is below the population percentage in Florida (26.4%) and nationally (18.5%).
- For race data in the licensure profile, 8.2% (650) did not provide information or chose "Other." Of the 7,270 who did respond and participate in the survey, 73.4% identified as White, 5.3% as African American, 0.34% as Native American, and 4.9% as Asian. All are less than Florida's and the United States' percentages overall, except for Florida's Asian population, at 3.0%.

The Physician Assistant Education Association (PAEA) annual publication on 2019 graduating and entering student data, provides current and projected PA representation by gender (reported here under "Sex"), ethnicity, and race.¹² Table 2 shows survey data and PA trends from several sources, including NCCPA and PAEA.

		Female	Hispanic	White	African American	Native American	Asian
ensus eau	U.S.	50.8%	18.5%	76.3%	13.4%	1.3%	5.9%
2019 Census Bureau	Florida	51.1%	26.4%	77.3%	16.9%	0.5%	3.0%
2019-2021 PA Workforce Survey	Survey Participants	65.1%	16.7%	73.4%	5.3%	0.34%	4.9%
CCPA Profile	U.S.	69.3%	6.6%	86.8%	3.6%	0.4%	6.0%
2019 NCCPA Statistical Profile	Florida	67.0%	16.1%	85.3%	4.8%	0.3%	4.5%
AEA Report	Entering	74.8%	9.1%	86.2%	3.9%	1.3%	11.9%
2019 PAEA Student Report	Graduating	75.1%	6.8%	88.1%	3.0%	0.7%	10.5%

Table 2: Trends in Physician Assistants by Sex (gender), Ethnicity, and Race.

Current projections for Florida PA characteristics (based on trends and to a limited extent on the national data from PAEA student reports) suggest continuing gaps in representation of Florida's population.

¹² Student Report 4: Data from the 2019 Matriculating Student and End of Program Surveys (MSS & EOPS) .(<u>https://paeaonline.org/wp-content/uploads/2020/12/student-report-4-updated-20201201.pdf</u>.)

For example, the percentage of African American PAs participating in the survey is less than one-third of Florida's population, 5.3% compared to 16.9%. Similarly, only 16.7% of survey participants have indicated "Hispanic" under ethnicity compared to Florida's reported population at 26.4%.

Note that ethnicity and race are based on MQA licensure profile data. Languages other than English are not available from MQA or the 2019-2021 Physician Assistant Workforce survey. The 2019 NCCPA state report data showed 30.6% of PAs responding to its survey could communicate in another language. The most common were "Spanish, French, and French Creole."¹³

Survey Respondent Demographics

Sex

7,838 survey respondents had data on their sex in the licensure profile, 82 did not. Gender information is not collected in the profile and not reported here. More of Florida's actively practicing physician assistants are female, with 65.1% (5,101 of 7,838) compared to 34.9% (2,737 of 7,838) for male. According to 2019 U.S. Census Bureau data, the percentage of PAs is greater than Florida's population, at 51.1% female.¹⁴ A similar gap in state population and PAs in terms of reported sex is also present in the 2019 Statistical Profile Survey of Certified Physician Assistants by State, reporting 69.3% female nationally and 67% female in Florida.¹⁵

Ethnicity and Race

Unlike other reports that collect these type of data, Florida's health care practitioner data do not separate ethnicity from race. See Figure 2. This skewing of race data (counts lost because the forced choice) makes comparisons

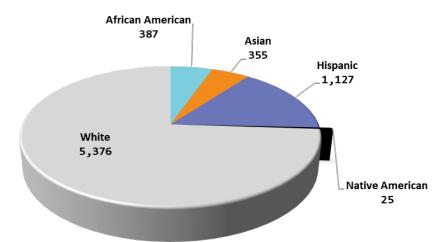


Figure 2. Counts for PAs responding to the survey by reported ethnicity/race in the MQA licensure database. N = 7,270 (650 respondents do not have race/ethnicity data.)

¹³ National Commission on Certification of Physician Assistants, 2019 Statistical Profile of Certified Physician Assistants by State (<u>https://www.nccpa.net/resources/nccpa-research/</u>.) See page 45.

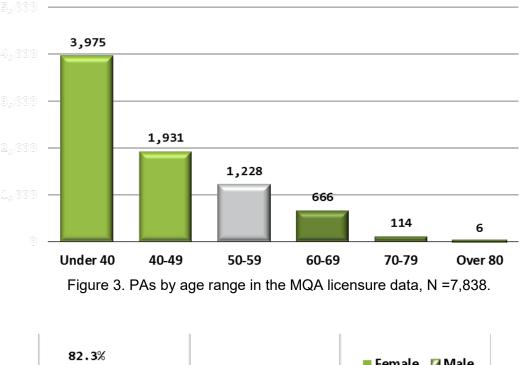
¹⁴ The 2019 Florida sex percentages are published on the United States Census Bureau's QuickFacts webpage (<u>https://www.census.gov/quickfacts/fact/table/FL/</u>).

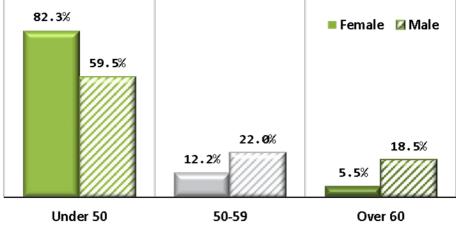
¹⁵ National Commission for Certification of Physician Assistants, 2019 Statistical Profile of Certified Physician Assistants by State, webpage (<u>https://www.nccpa.net/resources/nccpa-research/</u>).

to other reports difficult. In addition, 8.2% (650) of survey respondents did not provide ethnicity/race information or chose "Other" in the licensure data; 93.7% (7,270) of survey respondents had the combined race and ethnicity data. Of these, 73.4% (5,376) identified as White, 16.7% (1,127) as Hispanic, 5.3% (387) as African American, 0.34% (25) as Native American and 4.9% (355) as Asian.

Age

The average age of physician assistants in this report is 43.9, with a range of 25 to 88, a median of 57 and a mode of 33.¹⁶ Most PAs, 74.6% (5,906), are under 50 years of age, followed by 15.5% (1,228) aged 50-59, and 9.9% (786) aged 60 and older. See Figure 3. The percentage of physician assistants working past the current retirement age (over 66) is 4.4% (348). Figure 4 breaks down this information into age group and sex.¹⁷







¹⁶ There were 6 physician assistants age 80 and older who renewed their license for 2021-2023.

¹⁷ Sex was not available for X survey respondents.

Physician Assistant Workforce Practice Characteristics

The 2019-2021 Physician Assistant Workforce survey reports demographic information to describe workforce diversity, but also collects information specific to the practice of health care-what are physician assistants doing (specialty areas), where do they do it (practice settings), and how much time do they spend with patients compared to other tasks? Finally, the survey reports information on physician assistants whose practice settings accept Medicaid and Medicare.

Primary Specialty

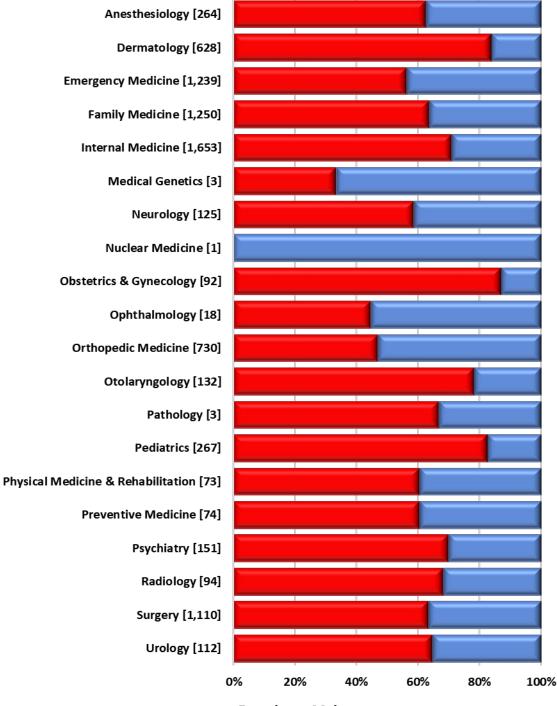
Table 3 shows the specialty area distribution of the 7,863 physician assistants for *all practice locations*, 57 respondents did not list a primary practice location. Almost 6% of PAs responding did not share a primary practice area of their supervising physician. For all respondents and all practice locations, 2.7% (216)

Table 3. 2019-2021 Physician Assistants by Supervising Physician's Specialty Area.

Primary Specialty	Number [7,863]	Percentage
01 Anesthesiology	264	3.4%
02 Dermatology	628	8.0%
03 Emergency Medicine	1,239	15.8%
04 Family Medicine	1,250	15.9%
05 Internal Medicine	1,653	21.0%
06 Medical Genetics	3	0.0%
07 Neurology	125	1.6%
08 Nuclear Medicine	1	0.0%
09 Obstetrics & Gynecology	92	1.2%
10 Ophthalmology	18	0.2%
11 Orthopedic Medicine	730	9.3%
12 Otolaryngology	132	1.7%
13 Pathology	3	0.0%
14 Pediatrics	267	3.4%
15 Physical Medicine & Rehabilitation	73	0.9%
16 Preventive Medicine	74	0.9%
18 Psychiatry	151	1.9%
19 Radiology	94	1.2%
20 Surgery	1,110	14.1%
21 Urology	112	1.4%

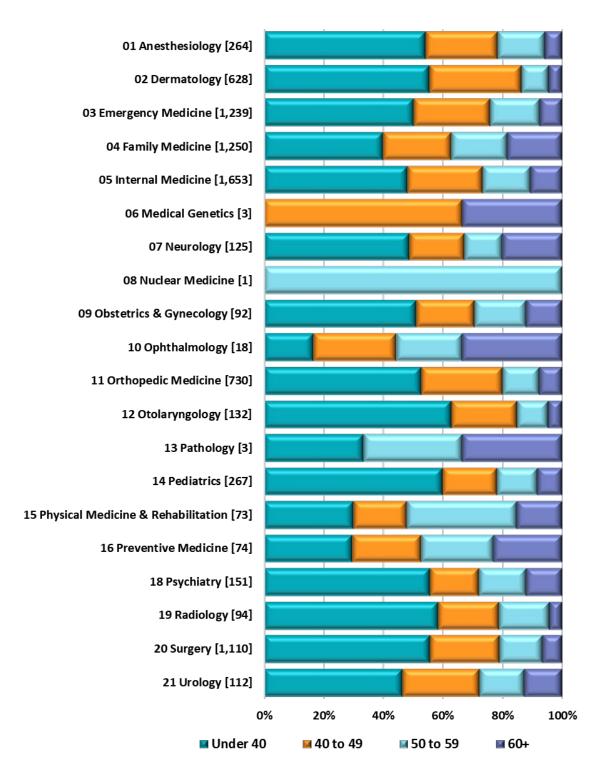
had more than one specialty area and 4.2% (330) had more than one location in the same county. The top four specialty areas—Emergency Medicine (15.8%), Family Medicine (15.9%), Internal Medicine (21.0%), and Surgery (14.1%)—compose 52.7% of the total physician assistant workforce (4,142 of 7,864 reported). See Appendix D for information regarding physician assistant specialty area by county.

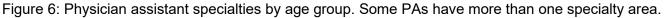
Figures 5 and 6 show the distribution of specialty area using licensure profiles data by sex and by age group.



📕 Female 🛛 🛤 Male

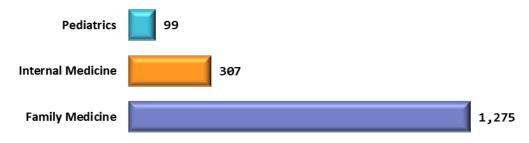
Figure 5. Physician assistant specialties by reported sex. Some PAs have more than one specialty area.





Primary Care Physician Assistants

Primary care physician assistants make up 20.9% (1,644 of all 7,864) of all PAs who reported specialties and subspecialties.¹⁸ See Figure 7. Appendix D provides breakdown by major specialty group and county.





Physician Assistant Education

Figure 8 has counts for level of education responses we could decipher (7,750 of 7,809 respondents): Associates (110), Bachelor's (1,070), Master's (5,562), a specified Physician Assistant degree (721), and a Doctoral / Professional degree (287). At least one master's degree was identified by 71.8% of respondents but the specific PA degree did not provide a degree level. PA degree programs that are accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) require a bachelor's degree as part of admission requirements and confer a master's degree upon completion. These requirements suggest the distribution of degrees for level of education can be projected to change.

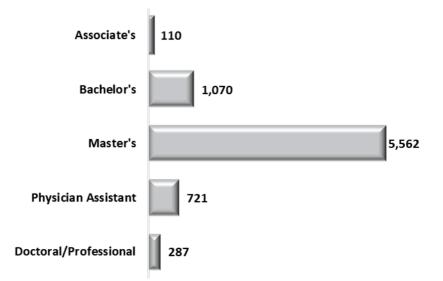


Figure 8. Number and type of degrees PAs reported for "Level of Education", N = 7,750.

¹⁸ Results for primary care PAs are based on respondents who selected general internal medicine (subspecialty codes 0500-0501) or family medicine (all specialty and subspecialty codes (04, 0400–0406) or general pediatrics (subspecialty codes 1400-1401). See Appendix E for a list of specialty and subspecialty choice codes.

Where PAs Earned Their Degrees

The majority of licensed physician assistants in this survey, 61.2% (4,725 of 7,725) reported earning their PA degree in Florida. Others earned their degrees in 44 other states, the District of Columbia, Guam, and other countries. Table 4 lists the 17 states with 60 or more of the 7,725 respondents. Florida offers 10 of the 229 PA degree programs listed by the National Center for Education Statistics.¹⁹

State where PA Degree Earned	Number and Pe Reporting Degre	rcent of PAs ee States N= 7,725	Number of Degree Programs Offered in the State
Florida	4,725	61.2%	10
New York	529	6.8%	21
Pennsylvania	413	5.3%	24
Alabama	225	2.9%	2
Tennessee	160	2.1%	7
North Carolina	157	2.0%	11
Ohio	127	1.6%	12
Nebraska	125	1.6%	3
Texas	119	1.5%	9
West Virginia	98	1.3%	3
Illinois	90	1.2%	7
California	78	1.0%	12
Virginia	75	1.0%	8
Michigan	68	0.9%	7
Massachusetts	67	0.9%	8
District of Columbia	65	0.8%	1
Connecticut	60	0.8%	5

Table 4.States where 60 or more survey respondents reported earning their PA degree.

NCCPA Certificates of Added Qualifications

NCCPA offers seven specialty certificates, Certificate of Added Qualifications (CAQ). "The CAQ is a voluntary credential that Certified PAs can earn in seven specialties: Cardiovascular & Thoracic Surgery, Emergency Medicine, Hospital Medicine, Nephrology, Orthopedic Surgery, Pediatrics and Psychiatry."²⁰ Of the 7,822

¹⁹ Institute of Education Sciences' National Center for Education Statistics, College Navigator. Accessed October 2021. <u>College Navigator - Search Results (ed.gov)</u>

²⁰ National Commission for the Certification of Physician Assistants (NCCPA), Certificates of Additional Qualifications (CAQs) (<u>https://www.nccpa.net/specialty-certificates/</u>.)

respondents to this item, 0.8% (66) of PAs hold a total of 68 CAQs. See Figure 9.

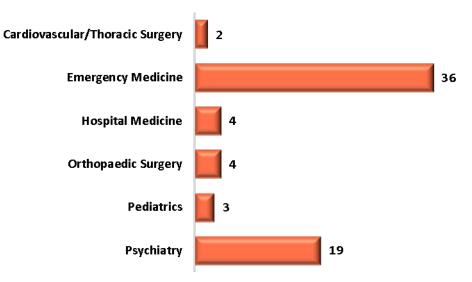


Figure 9. Reported Certificates of Added Qualifications, N = 66 respondents.

Physician Assistant Practice

The survey included detailed questions for the primary practice location that were not gathered for second or third practice locations (hours spent on administrative matters, and other tasks; counts for type of patient insurance coverage; practice setting and employer type; and distance patients travel.) Practice location information was combined where relevant to distribution of PAs in counties throughout the state.

Number of Patients Per Week

The workforce survey asked physician assistants to report the average number of patients they see per week at each practice location. A total of 685,052 patients seen were reported for the PA's primary practice location. Only 1.2% (94 of the 7,774 PAs responding) saw no patients at all, instead reporting involvement in administration, education/research, consulting, or already in the process of retirement. Just over half, 51.4%, saw between 21 and 70 patients per week, although the survey did not collect information on FTE per week. See Figure 11 for the distribution of the number of patients seen by the number of PAs. The average of the reported number of patients seen per week by all PAs was 1,166 with a median of 70 patients and a mode of 100 patients per week. PAs who saw lower numbers per week tended to report being involved in other tasks. Most of the PAs with large numbers of patients per week worked in emergency departments or hospitals.

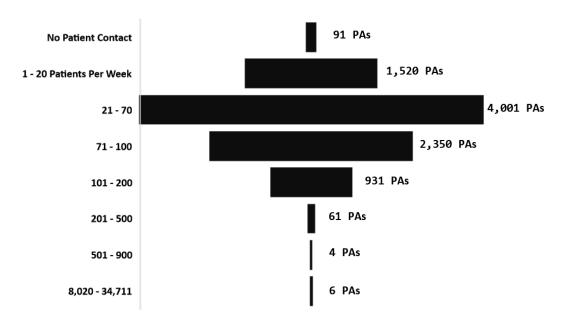


Figure 11. Average number of patients per week seen by 7,774 PAs responding.

Practice Hours

Only 7,667 survey respondents (of 7,920) reported the average number of hours of patient care they provide each week at their primary, secondary, and third practice locations. See Figure 12. As a week is 168 hours,

PA data entries of more than 100 hours of patient care per week at any practice location, and total entries across all three practice locations that were also over 100 hours, were removed from the practice hour calculations. This left a total of 7,555 respondents. Not all PAs report spending time on patient care at their primary practice location. PAs who worked in research, education, or consulting reported more hours spent on administrative and other tasks at their primary practice location. A small number of PAs whose primary employment was administrative worked with patients in a second, and sometimes third, practice location. The 7,555 respondents



Figure 12. Average number of patient care hours per week by reported practice locations.

whose practice location hours or total hours for all locations were less than 100, reported providing an average of 39.0 hours per week on patient care, with total hours per week ranging from 1 to 100 (where the median and mode were each 40 hours.)

Patient Hours at the Primary Practice Location

PAs reporting hours for primary practice locations (7,598 reporting 100 or less hours) provided an average of 37.5 hours per week on patient care with total hours per week ranging from 1 to 100 (where the median and mode were each 40 hours.)

Patient Hours at a Second Practice Location

PAs with a second practice location (1,003 reporting 100 or less hours) provided an average of 13.6 hours a week on patient care with total hours per week ranging from 1 to 100 (where the median was 10 hours and the mode was 8 hours.)

Patient Hours at a Third Practice Location

PAs with a third practice location (223, none of whom reported more than 80 hours per week) provided an average of 12.9 hours a week on patient care with total hours per week ranging from 1 to 80 (where the median and mode were both 8 hours.)

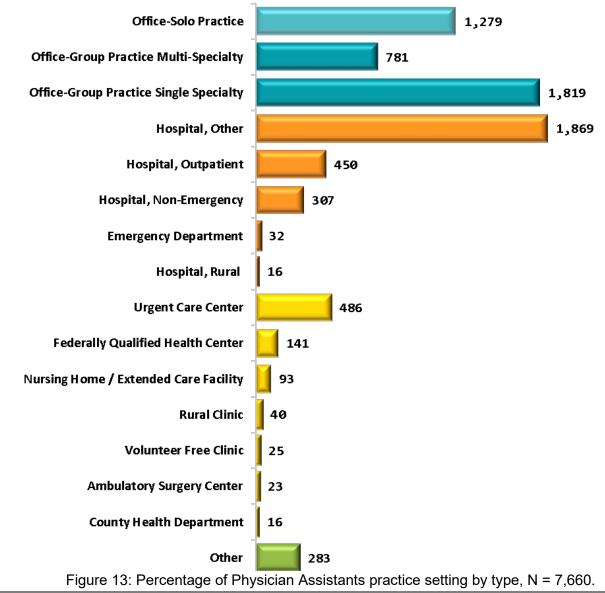
Administrative and Other Task Hours at the Primary Practice Location.

The number of hours spent on administrative and other tasks each week was asked only for the primary practice location. Of the 7,718 PAs who responded to having a primary practice location, 56.9% (4,396) spent time on administrative tasks. Time spent ranged from 1 to 100 (our cutoff) hours per week, for an average of 8.5 hours with a median and mode of 5 hours a week each. A small number of PAs, 3.7% (164), spent 30 or more hours per week on administrative tasks, averaging 40.6 hours per week.

Only 8.3% (640 of 7,718) of PAs reported spending time on other tasks. We do not know what these other tasks were as the survey did not ask for additional information. However, PAs reported an average of 10 hours per week with a range of hours from 1 to 85 and a median and mode of 5 hours a week each on other tasks. Only 0.6%, (45), of all PAs reporting primary practice locations spent 30 hours or more per week on other tasks, averaging 44.3 hours per week.

Practice Setting

7,660 of survey respondents reported the practice setting of their primary practice location (the only practice location with this question.) These PAs reported that 50.6% of practice settings were office practices (3,879). Two thirds of the office practices are groups (2,600 of 3,879). The second largest practice setting, with 34.9% (2,674) of responses, was a hospital setting of some kind. A total of 10.8% of responses (824) indicated other practice areas, the largest of these being an Urgent Care Center with 6.4%, (486) of responses. See Figure 13.



Additional practice settings added by respondents were 3.7% (283) of responses. See Figure 14 for a breakdown of the categories used for other, added, responses where "Specialized Practice" includes the following responses, with respondent counts: Medical Spa/Cosmetic Practice (24) and Telehealth (4); "Populations Specific Practice" includes: Department of Corrections (30), Employee Health Clinic (33), Military Base/VA Facility (52), Rehabilitation/Detoxification Facility (12), and School/University Clinic (19).



Figure 14. Categories and counts for practice settings listed by respondents.

Reported Employers

Asked for information about the type of employer, 7,751 PAs gave 7,625 responses (25% of the 128 non-responses could not be determined using the information provided). The two largest employer categories are "Practice or Practice Group" with 70.4% of identified responses and "Hospital" with 16.8%. See Figure 15. Of the



Figure 15. Reported employers of survey respondent. These counts do not include reports of no longer employed at the practice setting referenced in Figures 13 and 14.

346 responses PAs added in the "Other" category, the largest, at less than 3% of all responses, identified business or corporate employers.

Patient Travel Time

PAs were asked to estimate how far the majority of their patients had to travel; 80% (6,197 of 7,709 respondents) reported their patients traveled 20 miles or less. See Table 5.

Table 5. Number of PAs and Estimated Travel Time for the Majority of their Patients.

Patient Travel Time	Number of PAs Reporting
1 – 10 miles	3,534
11 – 20 miles	2,660
21 – 30 miles	931
31 – 40 miles	297
Over 40 miles	287

Hospital Care

The workforce survey asked PAs to report the number of hospitals where they had hospital privileges. Of the 7,553 responses, 59.2% (4,469) reported privileges at hospitals with an average number of approximately two hospitals and a reported range of 1 to 44. However, the median number of hospitals was two, and the most frequent response was one hospital. On-call emergency room coverage was provided by 83.3% (6,352 of 7,622) of respondents.

PAs working in trauma centers or attending trauma patients, 16.6% (1,286 of 7,729), reported working in a trauma center or with trauma patients. Only 219 responded to the request to identify the trauma setting:

Level I = 73 Level II = 139 Pediatric = 7

Number of Primary Practice Location Patients by Type of Insurance

Table 6. PA Report for Number of Patients by Insurance Type.

Insurance Type	Number of Patients	Number of Responding PAs
Insured	342,230	6,582
Uninsured	85,758	5,528
Medicare	193,232	5,466
Medicaid	77,442	3,915

Medicare Patients

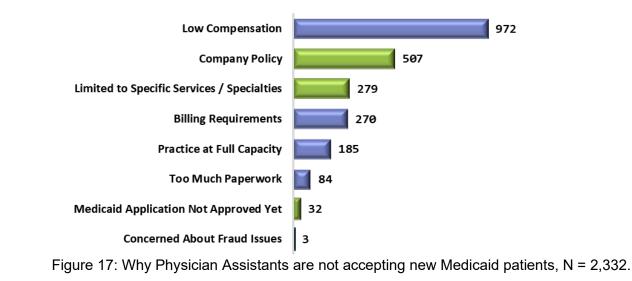
Of the 7,752 PAs who responded to this item, 87.3% (6,764) reported accepting new Medicare patients at their primary practice location, although 5,466 reported seeing Medicare patients. 816 of 988 PAs not accepting new Medicare patients gave a reason. See Figure 16. The two most common were added by the PAs (see green bars): 72.2% (589 of 816) of respondents. For example, Medicare is "limited to specific services/specialties" outside of the PA's specialty, e.g. medical spa settings or dermatology.



Figure 16: Why Physician Assistants are not accepting new Medicare patients, N = 816.

Medicaid Patients

Of the 7,724 physician assistants who responded to this item, over 64% (4,966) reported accepting new Medicaid patients at their primary practice location, although 3,915 PAs reported seeing Medicaid patients. 2,332 of 2,758 PAs not accepting new Medicaid patients gave a reason. See Figure 17. Low compensation was the top reason with 41.7% of responses.



Reported Salary Ranges

7,086 PAs provided a response for their approximate annual salary. Responses were not included where an amount could not be determined (76) or the entry was zero (37). All other numbers were included as entered as it was not possible to determine the number of work hours in the approximate annual salaries.

There were 6,973 PAs with a number entered for annual salary amount. The minimum amount reported was \$1.00 and the maximum amount reported was \$1,600,000.

The average of reported salaries from the survey was \$110,447 with a median of \$108,000. The mode was \$100,000.

For comparison, the 2020 NCCPA Statistical Profile of Certified PAs²¹ reported a national average of \$115,470 with a median of \$115,000.

In 2019, the last year state specific data from the NCCPA²² was reported, Florida's average annual salary was \$112,833 with a median of \$105,000 compared to the national average salary of \$113,219 and a median of \$105,000.

²¹ National Commission on Certification of PAs, Inc. (2021, July). 2020 Statistical Profile of Certified PAs: An Annual Report of the National Commission on Certification of PAs, p. 24. (<u>https://www.nccpa.net/wp-content/uploads/2021/07/Statistical-Profile-of-Certified-PAs-2020.pdf</u>.)

²² National Commission on Certification of Physician Assistants, 2019 Statistical Profiles of Certified Physician Assistants by State, p. 7 and p. 47. (<u>https://www.nccpa.net/resources/nccpa-research/</u>.).

Workforce Attrition

There are two sets of questions in the survey to address current and prospective changes in licensed PAs in Florida: Retirement and Relocation. Figure 18 shows an off-setting variable to consider-counts for new applications. For example, there were 2,311 new licensees in a two-year period (1,048 in 2019-2020 from MQA Annual Reports and 1,263 in 2020-2021 in the MQA public data portal) compared to 1,154 individual PA workforce survey respondents who have retired or plan to retire or relocate in the next five years.

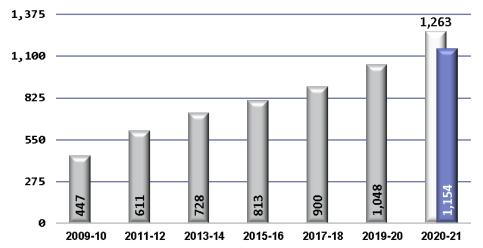


Figure 18. New approved PA applications for licensure from 2009-2020 (silver bars); 2020-2021 data from the MQA public data portal (white bar); Survey counts for retirement and relocation (purple bar).

Retired or Plans to Retire

Just over 8% of PAs, 649 of 7,829 respondents, plan to retire in the next five years or have already retired (41). Of those 649, 301 plan to volunteer in a health setting in retirement. There were 589 PAs who gave reasons for retiring, the top three were: time to retire (493), family (55), and compensation (15). See Figure 19.

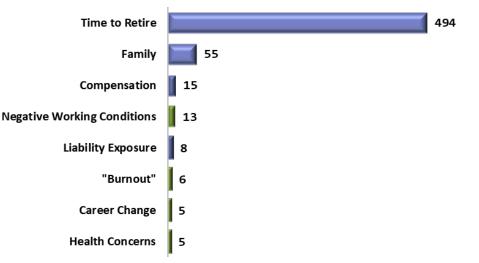


Figure 19. One or more reasons for retiring in the next five years, N = 595.

Added responses (see green bars) included: negative working condition (bureaucracy, focus on business, loss of autonomy); specific references to "burnout"; career change; and health concerns.

Who has Retired or Plans to Retire?

Age and sex data from licensure profiles were available for 648 of respondents who have already retired or are planning to retire in the next five years. Almost 56%, 362 of 648, were male; 82% of whom are over the age of 60. See Figure 20. The average age of male PAs planning to retire within the next five years is 65 and ranged

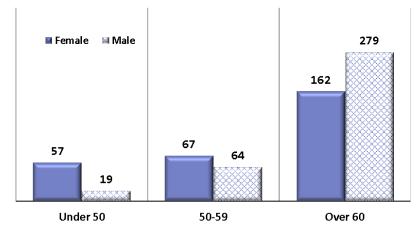
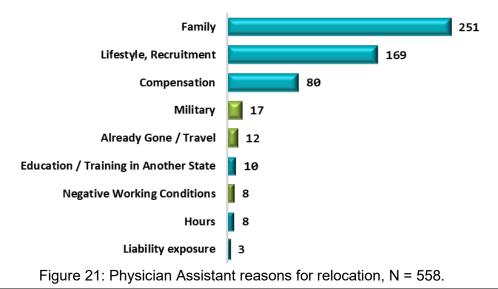


Figure 20. Age ranges in each sex for PAs already retired or planning to retire, N = 648.

from 33-85 years of age, with a median of 66 and a mode of 65. The average age of female PAs planning to retire is 60 and ranged from 30-88 years of age, with a median of 63 and a mode of 64. Almost 75% of all PAs under 50 years of age who are planning to retire are female.

Planning to Relocate

Approximately 8% of PAs, 611 of 7,819 respondents, said they plan to relocate out of Florida in the next five years. There were 554 PAs who gave for reasons for relocating, see Figure 21. Added responses (in green



bars) included military related moves, negative working conditions (such as bureaucracy/regulatory restrictions or loss of autonomy), and already moved/traveling. The "Lifestyle, Recruitment" reason included references to Florida climate or to a new position.

Who has Relocated or Plans to Relocate?

Age and sex data from licensure profiles were available for 597 respondents who already relocated or are planning to relocate in the next five years. See Figure 22.

Almost 70%, 414 of 597, were female; 85.7% of whom were under the age of 50. The average age of female PAs already relocated or planning to relocate within the next five years is 39 and ranged from 26-75 years of age, with a median of 36 and a mode of 30.

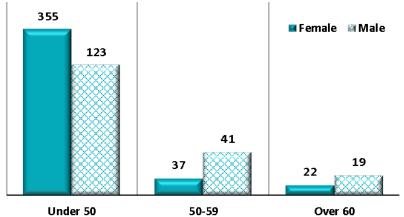


Figure 22. Age ranges in each sex for PAs planning to relocate. Female (414), Male (183).

The average age of male PAs planning to retire is 45.6 and ranged from 27-78 years of age, with a median of 45 and a mode of 31. Of the PAs who have already relocated or are planning to relocate in the next five years, 80% (478 of 597), are under 50 years of age.

Attrition in Specialty Areas

A greater number of PA specialty areas seen in workforce attrition counts are in the top four specialty areas (emergency medicine, family medicine, internal medicine, and surgery). Overall, 52.7% of current PAs practice in these top four areas. However, 71.8% (432 of 601) of the retired or planning to retire PAs practice in these four areas. Similarly, 70.5% (431 of 611) of relocated or planning to relocate PAs are in the same four areas. Specialty areas reported in Table 3 on page 7 include the projected attrition counts. See Figure 23.

The difference in percentage of physicians overall with primary care areas (20.8%) compared to retired or planning to retire and relocated or planning to relocate, is not as extreme: 30% (180 of 601) and 21.8% (133 of 611) respectively.

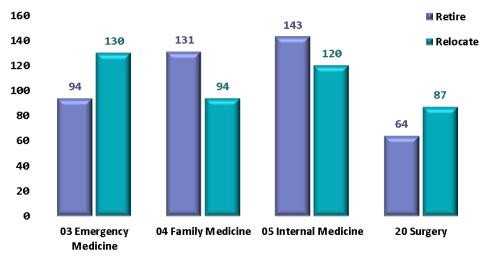


Figure 23. Primary practice location specialty areas for physician assistants already retired/relocated or planning to retire, or relocate out of state, in the next five years. Retiring = 601, Relocating = 611.

Physician Assistants Not Actively Practicing in Florida

A total of 1,234 physician assistants are licensed but, in the survey, responded as not actively practicing in Florida. These respondents comprised 13.1% (1,234 of 9,397) of the PAs who renewed their licenses in the 2019–2021 cohort.²³ See Figure 24.

Of the licensed PAs who indicated they were not practicing in Florida, 91.1%, (1,124), responded with a reason why. The most common reason was that they "live/work in another state or country." Added responses (green bars) include: military related moves, currently not working (unemployed / between jobs), family / personal issues, administrative, research, or academic work, telehealth, career change, and in school / educational program.

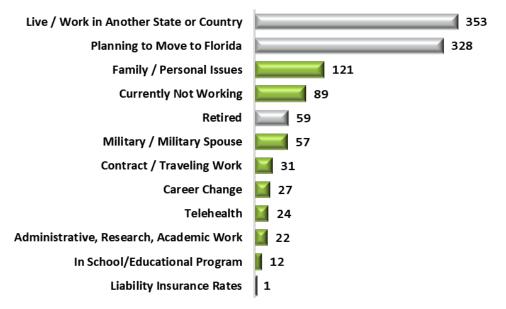


Figure 24: Why Florida licenses PAs are not actively practicing, N = 1,124.

Observations

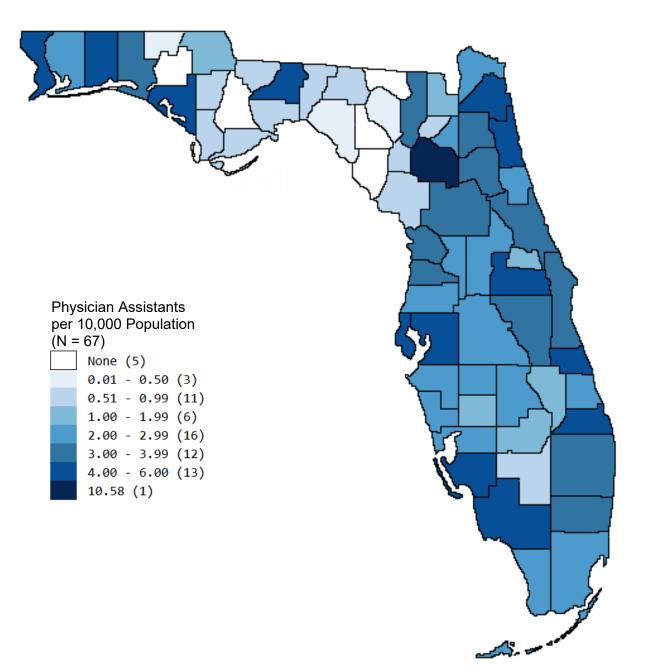
There were three opportunities identified in analyzing the first Physician Assistant Workforce Survey.

- 1. Data from other sources²⁴ was included to provide context for the survey data in this report and address questions related to patient access. However, the utility of comparison data is dependent upon the questions this report, or others like it, is intended to answer.
 - a. It may be helpful to identify PA specific questions (such as Florida program enrollments/graduates or information from the NCCPA) that could be gathered from other sources and provided as an additional resource. In addition, identify questions for PAs that might augment information provided to the Physician Workforce Advisory Council. For example, include the county data for PA practice locations as well as specialty areas of interest in terms of patient access (such as specialty certifications of added qualifications for Psychiatry or Orthopedic Surgery.)
 - b. One way to provide responsiveness to questions that may arise during the survey data collection period (the impact of COVID-19 for example) is to utilize other data sources – surveys from professional associations or simple poll sent to licensees.
- 2. The current data collection instrument, the survey used and how it was delivered, is outdated and not a match to the Physician Workforce Survey. Develop a plan to revise the instrument and report contents, hopefully in time to update the survey for the 2023-2025 data collection period.
- 3. As part of the revision process, review and edit items, response options, and field settings to reduce user burden and better capture the desired data.

²⁴ These included material from the National Commission on the Certification of Physician Assistants, the Physician Assistant Education Association, Florida's Office of Economic and Demographic Research, and population data from the U.S. Census Bureau.

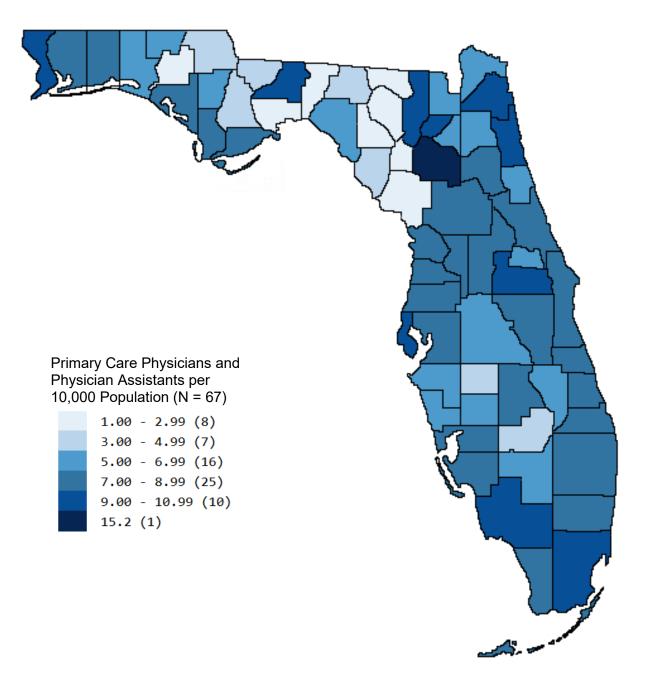
Appendix A: Physician Assistant Workforce per Capita by County, 2019–2021

This map illustrates a per capita distribution of practicing physician assistants at the county level. Generally, there are more PAs in areas with large population centers. For example, Miami-Dade County alone has almost one-tenth of all practicing PAs, 9.6%. However, when looking at the ratio of PAs compared to its population, Miami-Dade County has 2.8 PAs per 10,000 residents, which falls below the statewide average of 3.6 PAs per 10,000 residents. In total, 48 counties, representing 41% of the state's population, fall below the statewide average.



Appendix B: Primary Care Physician and Physician Assistant Workforce per Capita by County, 2019–2021

This map illustrates a per capita distribution of both primary care physicians and primary care PAs at the county level. Primary care physicians make up 29.9% (16,692 of 55,809) of physicians overall. Primary care physician assistants make up 21.0% (1,664 of 7,920) of PAs overall. When looking at the ratio of primary care providers to population, there are 50 counties, representing 37% of the population, that have less than the statewide average of 8.4 per 10,000 population. There are six Florida counties with no primary care PAs, five of which have no PAs at all (Dixie, Hamilton, Lafayette, Liberty, and Washington), and one county, (Madison), which has one non-primary care PA.



Appendix C: Physician Assistants per capita and population by County, 2019–2021²⁵

	2020 Census	Number of	Physician Assistants	Primary Care
	Population	Physician	per 10,000	Physician
	(Provisional)	Assistants	Population	Assistants
STATEWIDE	21,640,766	7,864	3.6	1,644
Alachua	270,405	286	10.6	36
Baker	28,588	3	1.0	2
Вау	175,776	76	4.3	17
Bradford	28,818	6	2.1	3
Brevard	604,154	219	3.6	50
Broward	1,946,104	716	3.7	184
Calhoun	14,894	1	0.7	1
Charlotte	185,392	39	2.1	15
Citrus	149,781	57	3.8	18
Clay	219,925	74	3.4	18
Collier	386,478	193	5.0	31
Columbia	70,694	22	3.1	12
Dade	2,864,600	805	2.8	193
DeSoto	36,388	5	1.4	4
Dixie	16,704	0	0	0
Duval	988,783	574	5.8	105
Escambia	324,620	173	5.3	42
Flagler	114,053	25	2.2	10
Franklin	12,229	1	0.8	1
Gadsden	46,345	4	0.9	3
Gilchrist	18,027	1	0.6	1
Glades	13,230	2	1.5	2
Gulf	14,716	1	0.7	1
Hamilton	14,618	0	0.0	0
Hardee	27,571	6	2.2	7
Hendry	40,594	3	0.7	2
Hernando	192,189	60	3.1	15
Highlands	104,384	27	2.6	10
Hillsborough	1,481,163	651	4.4	124
Holmes	20,184	1	0.5	1
Indian River	158,238	70	4.4	16
Jackson	47,171	6	1.3	2
Jefferson	14,831	1	0.7	1

²⁵ County counts include multiple head counts for PAs who have a practice location in more than one county.

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Appendix C. Phy	ysician Assistants	per capita and	i population b	y County	<i>,</i> 2019 — 2021 <i>,</i> C	onunueu.

	2020 Census	Number of	Physician Assistants	Primary Care
	Population	Physician	per 10,000	Physician
	(Provisional)	Assistants	Population	Assistants
STATEWIDE	21,640,766	7,864	3.6	1,644
Lafayette	8,721	0	0	0
Lake	368,828	104	2.8	16
Lee	756,912	341	4.5	50
Leon	300,519	126	4.2	29
Levy	41,634	4	1.0	2
Liberty	8,774	0	0	0
Madison	19,254	1	0.5	0
Manatee	397,727	110	2.8	27
Marion	367,247	120	3.3	26
Martin	161,017	73	4.5	13
Monroe	76,280	21	2.8	6
Nassau	87,389	23	2.6	12
Okaloosa	204,326	104	5.1	32
Okeechobee	42,187	8	1.9	3
Orange	1,426,631	688	4.8	118
Osceola	388,132	118	3.0	23
Palm Beach	1,469,904	559	3.8	100
Pasco	539,769	156	2.9	42
Pinellas	986,400	453	4.6	71
Polk	707,191	143	2.0	29
Putnam	73,355	23	3.1	9
St. Johns	266,128	74	2.8	34
St. Lucie	316,620	94	3.0	20
Santa Rosa	183,633	36	2.0	12
Sarasota	434,853	220	5.1	32
Seminole	480,417	143	3.0	25
Sumter	133,310	33	2.5	8
Suwannee	46,028	1	0.2	1
Taylor	22,654	1	0.4	1
Union	15,493	1	0.6	1
Volusia	546,612	195	3.6	57
Wakulla	33,394	2	0.6	1
Walton	72,528	27	3.7	10
Washington	25,252	0	0	0

Appendix D: Physician Assistant Specialty Areas by County, 2019–2021

Specialty	Alachua	Baker	Вау	Bradford	Brevard	Broward	Calhoun
STATEWIDE ²⁶	286	3	76	6	219	716	1
Primary Care	36	2	17	3	50	184	1
01 Anesthesiology	26	0	2	0	8	23	0
02 Dermatology	18	0	14	0	24	41	0
03 Emergency Medicine	26	0	13	3	50	98	0
04 Family Medicine	27	0	13	3	35	122	1
05 Internal Medicine	71	1	12	0	34	168	0
06 Medical Genetics	1	0	0	0	0	0	0
07 Neurology	4	0	2	0	3	8	0
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	5	0	0	0	1	13	0
10 Ophthalmology	1	0	0	0	0	0	0
11 Orthopedic Medicine	17	0	8	0	25	67	0
12 Otolaryngology	11	0	0	0	3	21	0
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	11	2	6	0	2	27	0
15 Physical Medicine & Rehabilitation	6	0	0	0	0	6	0
16 Preventive Medicine	0	0	0	0	3	11	0
18 Psychiatry	5	0	0	0	3	12	0
19 Radiology	9	0	0	0	1	4	0
20 Surgery	43	0	5	0	29	89	0
21 Urology	6	0	1	0	1	13	0

²⁶ Includes multiple head counts for PAs with more than one specialty and/or practice location.

Appendix D: Physician Assistant Specialty Areas by County, 2019–2021, continued.

Specialty	Charlotte	Citrus	Clay	Collier	Columbia	Dade	Desoto
STATEWIDE	39	57	74	193	22	805	5
Primary Care	15	18	18	31	12	193	4
01 Anesthesiology	0	1	5	6	1	20	0
02 Dermatology	1	4	5	15	0	70	0
03 Emergency Medicine	6	7	11	38	3	101	1
04 Family Medicine	7	8	16	22	7	141	3
05 Internal Medicine	15	17	13	46	5	211	1
06 Medical Genetics	0	0	0	0	0	2	0
07 Neurology	1	1	7	2	0	7	0
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	0	2	0	5	0	12	0
10 Ophthalmology	0	0	1	1	0	2	0
11 Orthopedic Medicine	2	6	4	25	0	47	0
12 Otolaryngology	0	1	0	1	0	10	0
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	3	4	6	1	4	44	0
15 Physical Medicine & Rehabilitation	1	0	0	0	0	7	0
16 Preventive Medicine	0	0	0	3	0	7	0
18 Psychiatry	1	3	0	4	0	13	0
19 Radiology	1	1	1	1	0	14	0
20 Surgery	3	4	7	22	2	98	0
21 Urology	0	1	1	5	0	13	0

Specialty	Dixie	Duval	Escambia	Flagler	Franklin	Gadsden	Gilchrist
STATEWIDE	0	574	173	25	1	4	1
Primary Care	0	105	42	10	1	3	1
01 Anesthesiology	0	30	3	2	0	0	0
02 Dermatology	0	29	11	2	0	0	0
03 Emergency Medicine	0	83	24	5	0	0	0
04 Family Medicine	0	81	37	7	1	3	1
05 Internal Medicine	0	101	33	4	0	1	0
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	0	16	3	0	0	0	0
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	0	8	0	0	0	0	0
10 Ophthalmology	0	0	0	0	0	0	0
11 Orthopedic Medicine	0	47	20	3	0	0	0
12 Otolaryngology	0	12	3	0	0	0	0
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	0	34	4	0	0	0	0
15 Physical Medicine & Rehabilitation	0	11	2	0	0	0	0
16 Preventive Medicine	0	5	1	0	0	0	0
18 Psychiatry	0	5	4	0	0	0	0
19 Radiology	0	19	4	0	0	0	0
20 Surgery	0	87	23	3	0	0	0
21 Urology	0	11	2	0	0	0	0

Specialty	Glades	Gulf	Hamilton	Hardee	Hendry	Hernando	Highlands
STATEWIDE	2	1	0	6	3	60	27
Primary Care	2	1	0	7	2	15	10
01 Anesthesiology	0	0	0	0	0	0	0
02 Dermatology	0	0	0	0	0	7	4
03 Emergency Medicine	0	0	0	0	1	15	2
04 Family Medicine	2	0	0	4	2	8	4
05 Internal Medicine	0	0	0	0	0	15	7
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	0	0	0	0	0	0	0
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	0	0	0	0	0	1	1
10 Ophthalmology	0	0	0	0	0	2	0
11 Orthopedic Medicine	0	0	0	0	0	5	3
12 Otolaryngology	0	0	0	0	0	0	1
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	0	1	0	2	0	0	4
15 Physical Medicine & Rehabilitation	0	0	0	0	0	0	0
16 Preventive Medicine	0	0	0	0	0	0	0
18 Psychiatry	0	0	0	0	0	0	1
19 Radiology	0	0	0	0	0	1	0
20 Surgery	0	0	0	0	0	5	0
21 Urology	0	0	0	0	0	1	0

Specialty	Hillsborough	Holmes	Indian River	Jackson	Jefferson	Lafayette	Lake
STATEWIDE	651	1	70	6	1	0	104
Primary Care	124	1	16	2	1	0	16
01 Anesthesiology	12	0	2	0	0	0	2
02 Dermatology	51	0	5	0	0	0	10
03 Emergency Medicine	91	0	11	3	0	0	32
04 Family Medicine	103	1	8	2	1	0	14
05 Internal Medicine	170	0	20	0	0	0	17
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	11	0	2	0	0	0	2
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	2	0	1	0	0	0	3
10 Ophthalmology	3	0	0	0	0	0	0
11 Orthopedic Medicine	55	0	7	1	0	0	4
12 Otolaryngology	4	0	0	0	0	0	3
13 Pathology	3	0	0	0	0	0	0
14 Pediatrics	19	0	3	0	0	0	1
15 Physical Medicine & Rehabilitation	9	0	1	0	0	0	0
16 Preventive Medicine	4	0	0	0	0	0	1
18 Psychiatry	12	0	0	0	0	0	3
19 Radiology	17	0	0	0	0	0	0
20 Surgery	84	0	9	0	0	0	14
21 Urology	7	0	1	0	0	0	0

Specialty	Lee	Leon	Levy	Liberty	Madison	Manatee	Marion
STATEWIDE	341	126	4	0	1	110	120
Primary Care	50	29	2	0	0	27	26
01 Anesthesiology	20	2	0	0	0	2	4
02 Dermatology	29	17	0	0	0	14	8
03 Emergency Medicine	44	18	0	0	1	21	25
04 Family Medicine	31	27	1	0	0	18	21
05 Internal Medicine	82	20	2	0	0	16	19
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	1	4	0	0	0	2	3
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	3	1	0	0	0	1	3
10 Ophthalmology	2	0	0	0	0	0	0
11 Orthopedic Medicine	36	23	0	0	0	13	7
12 Otolaryngology	6	1	0	0	0	0	1
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	9	0	0	0	0	4	3
15 Physical Medicine & Rehabilitation	4	1	1	0	0	1	2
16 Preventive Medicine	2	0	0	0	0	1	3
18 Psychiatry	9	3	0	0	0	2	0
19 Radiology	3	0	0	0	0	0	3
20 Surgery	56	8	0	0	0	16	18
21 Urology	8	2	0	0	0	1	2

Specialty	Martin	Monroe	Nassau	Okaloosa	Okeechobee	Orange	Osceola
STATEWIDE	73	21	23	104	8	688	118
Primary Care	13	6	12	32	3	118	23
01 Anesthesiology	6	0	0	4	0	21	2
02 Dermatology	7	4	2	6	0	43	4
03 Emergency Medicine	10	7	5	21	2	105	30
04 Family Medicine	9	4	9	27	3	91	19
05 Internal Medicine	16	2	5	14	1	122	14
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	2	2	1	0	0	10	0
08 Nuclear Medicine	0	0	0	0	0	1	0
09 Obstetrics & Gynecology	0	0	0	2	0	9	2
10 Ophthalmology	0	0	0	0	0	2	0
11 Orthopedic Medicine	9	1	0	11	0	81	5
12 Otolaryngology	1	1	0	2	0	13	7
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	0	0	0	1	0	27	2
15 Physical Medicine & Rehabilitation	0	0	0	0	0	0	0
16 Preventive Medicine	1	0	0	3	0	8	1
18 Psychiatry	2	0	2	0	0	10	5
19 Radiology	0	0	0	0	0	3	0
20 Surgery	12	1	0	14	2	137	27
21 Urology	0	0	0	1	0	9	0

Specialty	Palm Beach	Pasco	Pinellas	Polk	Putnam	Saint Johns	Saint Lucie
STATEWIDE	559	156	453	143	23	74	94
Primary Care	100	42	71	29	9	34	20
01 Anesthesiology	19	8	12	3	0	1	5
02 Dermatology	67	9	28	17	0	12	6
03 Emergency Medicine	61	29	99	33	12	5	8
04 Family Medicine	73	29	55	23	9	24	14
05 Internal Medicine	115	34	70	14	1	11	12
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	8	2	8	0	0	0	2
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	1	2	8	2	0	0	1
10 Ophthalmology	0	1	4	0	0	0	0
11 Orthopedic Medicine	71	15	49	10	1	6	21
12 Otolaryngology	8	1	5	2	0	1	0
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	9	1	14	6	0	6	2
15 Physical Medicine & Rehabilitation	9	0	5	0	0	0	0
16 Preventive Medicine	6	1	3	4	0	0	1
18 Psychiatry	18	6	18	2	0	1	3
19 Radiology	2	1	3	3	0	1	0
20 Surgery	93	15	75	25	0	6	21
21 Urology	10	2	2	1	0	1	0

Appendix D: Physician Assistant Specialty Are	as by County, 2019–2021, continued.
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Specialty	Santa Rosa	Sarasota	Seminole	Sumter	Suwannee	Taylor	Union
STATEWIDE	36	220	143	33	1	1	1
Primary Care	12	32	25	8	1	1	1
01 Anesthesiology	1	7	5	0	0	0	0
02 Dermatology	1	28	10	13	0	0	0
03 Emergency Medicine	7	18	36	4	0	0	0
04 Family Medicine	11	18	19	7	1	1	1
05 Internal Medicine	7	63	27	2	0	0	0
06 Medical Genetics	0	0	0	0	0	0	0
07 Neurology	1	5	6	0	0	0	0
08 Nuclear Medicine	0	0	0	0	0	0	0
09 Obstetrics & Gynecology	0	1	1	0	0	0	0
10 Ophthalmology	0	0	0	0	0	0	0
11 Orthopedic Medicine	6	19	10	1	0	0	0
12 Otolaryngology	0	13	2	0	0	0	0
13 Pathology	0	0	0	0	0	0	0
14 Pediatrics	1	2	3	2	0	0	0
15 Physical Medicine & Rehabilitation	0	3	3	0	0	0	0
16 Preventive Medicine	0	3	1	2	0	0	0
18 Psychiatry	0	1	7	1	0	0	0
19 Radiology	0	1	0	0	0	0	0
20 Surgery	2	40	11	0	0	0	0
21 Urology	0	3	3	1	0	0	0

Specialty	Volusia	Wakulla	Walton	Washington
STATEWIDE	195	2	27	0
Primary Care	57	1	10	0
01 Anesthesiology	5	0	0	0
02 Dermatology	13	1	3	0
03 Emergency Medicine	44	0	10	0
04 Family Medicine	44	1	8	0
05 Internal Medicine	46	0	4	0
06 Medical Genetics	0	0	0	0
07 Neurology	2	0	0	0
08 Nuclear Medicine	0	0	0	0
09 Obstetrics & Gynecology	2	0	0	0
10 Ophthalmology	0	0	0	0
11 Orthopedic Medicine	10	0	0	0
12 Otolaryngology	2	0	0	0
13 Pathology	0	0	0	0
14 Pediatrics	2	0	0	0
15 Physical Medicine & Rehabilitation	1	0	0	0
16 Preventive Medicine	0	0	0	0
18 Psychiatry	0	0	0	0
19 Radiology	1	0	0	0
20 Surgery	19	0	2	0
21 Urology	6	0	0	0

Appendix E: List of Survey Specialty and Subspecialty Codes

01 Anesthesiology 0100 Anesthesiology, General 0101 Addiction Medicine 0102 Critical Care Medicine 0103 Hospice & Palliative Medicine 0104 Pain Medicine 02 Dermatology 0200 Dermatology, General 0201 Dermatological Immunology 0202 Dermatopathology 0203 MOHS Micrographic Surgery 0204 Pediatric Dermatology **03 Emergency Medicine** 0300 Emergency Medicine, General 0301 Emergency Medical Services 0302 Hospice & Palliative Medicine 0303 Medical Toxicology 0304 Pediatric Emergency Medicine 0305 Sports Medicine 0306 Undersea & Hyperbaric Medicine **04 Family Medicine** 0400 Family Medicine, General 0401 Addiction Medicine 0402 Adolescent Medicine 0403 Geriatric Medicine 0404 Hospice & Palliative Medicine 0405 Sleep Medicine 0406 Sports Medicine **05 Internal Medicine** 0500 Internal Medicine, General 0501 Addiction Medicine 0502 Allergy & Immunology 0503 Advanced Heart Failure & Transplant Cardiology 0504 Cardiology 0505 Clinical Cardiac Electrophysiology 0506 Critical Care Medicine 0507 Endocrinology 0508 Gastroenterology 0509 Geriatric Medicine 0510 Hematology 0511 Hematology & Oncology 0512 Hospice & Palliative Medicine 0513 Infectious Disease 0514 Interventional Cardiology 0515 Oncoloav 0516 Nephrology 0517 Pulmonary Disease

0518 Rheumatology 0519 Sleep Medicine 0520 Sports Medicine 0521 Transplant Hepatology 0522 Undersea & Hyperbaric Medicine 06 Medical Genetics 0600 Medical Genetics. General 0601 Clinical Biochemical Genetics 0602 Clinical Cytogenetics 0603 Clinical Molecular Genetics 0604 Medical Biochemical Genetics 0605 Molecular Genetic Pathology 07 Neurology 0700 Neurology, General 0701 Addiction Medicine 0702 Clinical Neurophysiology 0703 Epilepsy 0704 Hospice & Palliative Medicine 0705 Neurodevelopmental Disabilities 0706 Neuromuscular Medicine 0707 Pain Medicine 0708 Pediatric Neurology 0709 Sleep Medicine 0710 Vascular Neurology **08 Nuclear Medicine** 0800 Nuclear Medicine, General 0801 Nuclear Cardiology 0802 Nuclear Imaging & Therapy 0803 Nuclear Radiology 0804 In Vivo & In Vitro Nuclear Medicine 09 Obstetrics & Gynecology 0900 Obstetrics & Gynecology, General 0901 Critical Care Medicine 0902 Gynecologic Oncology 0903 Hospice & Palliative Medicine 0904 Maternal & Fetal Medicine 0905 Reproductive Endocrinology 10 Ophthalmology 1000 Ophthalmology, General **11 Orthopedic Medicine** 1100 Orthopedic Medicine, General 1101 Hand Surgery 1102 Orthopedic Sports Medicine 1103 Orthopedic Surgery

12 Otolaryngology 1200 Otolaryngology, General 1201 Neurotology 1202 Pediatric Otolaryngology 1203 Facial Plastic Surgery 1204 Otolaryngic Allergy 1205 Sleep Medicine 13 Pathology 1300 Pathology, General 1301 Anatomic Pathology 1302 Blood Banking & Transfusion Medicine 1303 Chemical Pathology 1304 Clinical Pathology 1305 Cytopathology 1306 Dermatopathology 1307 Hematologic Pathology 1308 Immunopathology 1309 Medical Microbiology 1310 Molecular Genetic Pathology 1311 Neuropathology 1312 Pediatric Pathology **14 Pediatrics** 1400 Pediatrics, General 1401 Adolescent Medicine 1402 Child Abuse Pediatrics 1403 Developmental & Behavioral Pediatrics 1404 Hospice & Palliative Medicine 1405 Neonatal & Perinatal Medicine 1406 Neurodevelopmental Disabilities 1407 Pediatric Allergy & Immunology 1408 Pediatric Cardiology 1409 Pediatric Critical Care Medicine 1410 Pediatric Dermatology 1411 Pediatric Emergency Medicine 1412 Pediatric Endocrinology 1413 Pediatric Gastroenterology 1414 Pediatric Hematology & Oncology 1415 Pediatric Infectious Diseases 1416 Pediatric Nephrology 1417 Pediatric Neurology 1418 Pediatric Otolarvngology 1419 Pediatric Pathology 1420 Pediatric Pulmonology 1421 Pediatric Radiology 1422 Pediatric Rehabilitation Medicine 1423 Pediatric Rheumatology 1424 Pediatric Transplant Hepatology 1425 Pediatric Urology

1426 Sleep Medicine 1427 Sports Medicine **15 Physical Medicine & Rehabilitation** 1500 Physical Medicine & Rehabilitation, General 1501 Hospice & Palliative Medicine 1502 Neuromuscular Medicine 1503 Pain Medicine 1504 Pediatric Rehabilitation Medicine 1505 Spinal Cord Injury Medicine 1506 Sports Medicine **16 Preventive Medicine** 1600 Preventive Medicine, General 1601 Aerospace Medicine 1602 Environmental Medicine 1603 Medical Toxicology 1604 Public Health 1605 Occupational Medicine 1606 Sports Medicine 1607 Undersea & Hyperbaric Medicine 17 Proctology 1700 Proctology, General **18 Psychiatry** 1800 Psychiatry, General 1801 Addiction Medicine 1802 Adolescent Psychiatry 1803 Forensic Psychiatry 1804 Geriatric Psychiatry 1805 Hospice & Palliative Care 1806 Pain Medicine 1807 Pediatric Psychiatry 1808 Psychosomatic Medicine 1809 Sleep Medicine 19 Radiology 1900 Radiology, General 1901 Body Imaging 1902 Diagnostic Radiology 1903 Diagnostic Roentgenology 1904 Diagnostic Ultrasound 1905 Hospice & Palliative Medicine 1906 Neuroradiology 1907 Nuclear Radiology 1908 Pediatric Radiology 1909 Radiation Oncology 1910 Radiation Therapy 1911 Roentgenology

1912 Vascular & Interventional Radiology

20 Surgery

2000 Surgery, General
2001 Colon & Rectal Surgery
2002 Congenital Cardiac Surgery
2003 Hand Surgery
2004 Neurological Surgery
2005 Orthopedic Surgery
2006 Pediatric Surgery
2007 Plastic & Reconstructive Surgery
2008 Surgical Critical Care
2009 Thoracic Surgery
2010 Urological Surgery
2011 Vascular Surgery

21 Urology

2100 Urology, General

2101 Pediatric Urology

Appendix F: List of Florida Counties

11	Alachua	34	Hamilton	57	Okeechobee
12	Baker	35	Hardee	58	Orange
13	Bay	36	Hendry	59	Osceola
14	Bradford	37	Hernando	60	Palm Beach
15	Brevard	38	Highlands	61	Pasco
16	Broward	39	Hillsborough	62	Pinellas
17	Calhoun	40	Holmes	63	Polk
18	Charlotte	41	Indian River	64	Putnam
19	Citrus	42	Jackson	65	St. Johns
20	Clay	43	Jefferson	66	St. Lucie
21	Collier	44	Lafayette	67	Santa Rosa
22	Columbia	45	Lake	68	Sarasota
23	Dade	46	Lee	69	Seminole
24	Desoto	47	Leon	70	Sumter
25	Dixie	48	Levy	71	Suwannee
26	Duval	49	Liberty	72	Taylor
27	Escambia	50	Madison	73	Union
28	Flagler	51	Manatee	74	Volusia
29	Franklin	52	Marion	75	Wakulla
30	Gadsden	53	Martin	76	Walton
31	Gilchrist	54	Monroe	77	Washington
32	Glades	55	Nassau	78	Unknown
33	Gulf	56	Okaloosa	79	Out of State