



2021 INDIANA PHYSICIAN WORKFORCE BRIEF

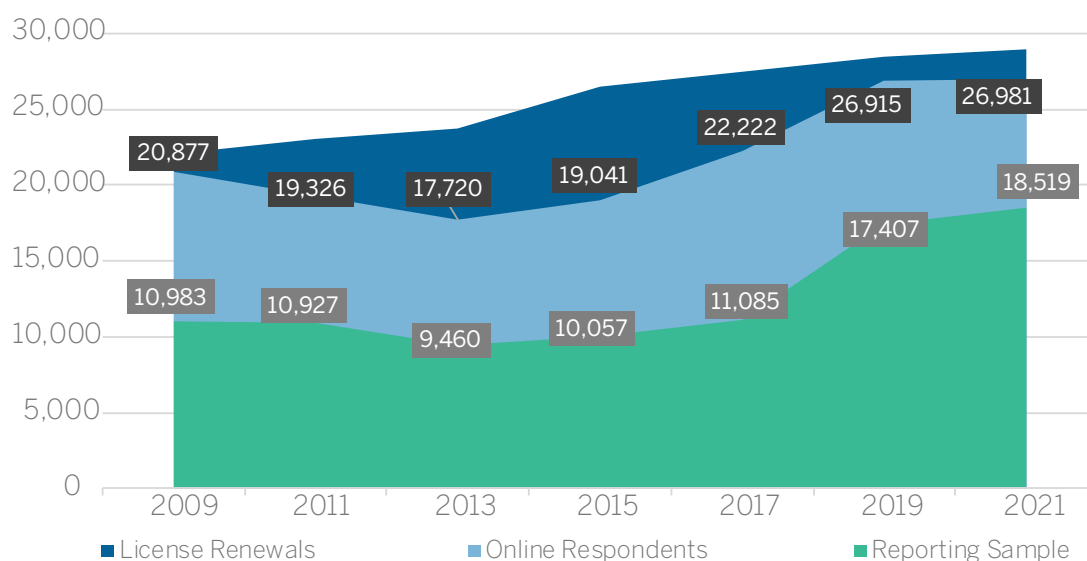


ABOUT THE DATA IN THIS BRIEF

Indiana's physicians are licensed and regulated by the Indiana Medical Licensing Board at the Professional Licensing Agency. Indiana physicians provide information on their demographic, education, and practice characteristics through a series of supplemental questions embedded in the license renewal process. These data are critical to monitoring trends in the physician workforce and identifying gaps across the state. As such, physicians renewing licenses online are required to provide key information to inform State policy and planning.¹

INDIANA PHYSICIAN WORKFORCE TRENDS

The figure below depicts trends in total Indiana physician licenses, respondents to the supplemental questions, and the physicians included in the reporting sample from 2009 to 2021. Since 2013, the number of total physician license renewals, online survey respondents, and reporting sample of Indiana physicians have seen a steady increase. Today, Indiana has more licensed physicians that report serving Hoosiers than ever before.



Of Indiana's 28,980 licensed physicians, 63.8% (18,519) renewed online and reported actively practicing in medicine in Indiana.

Who is included in the reporting sample?

- Active physicians who renewed their license online
- Practicing in medicine
- Serving Hoosiers (either in-person or through telemedicine)

The reporting sample is referred to as the "Indiana Physician Workforce"

Who is NOT included in the reporting sample?

- Physicians who renewed their licenses offline (paper renewals)
- Inactive providers
- Physicians who are located out of state and do not report serving Hoosiers

How does Indiana's physician workforce compare to our contiguous states and national averages?

Indiana has less physician capacity compared to contiguous states and national averages.

Active Physicians per 100,000 Population



236.4
AAMC²

223.0
HRSA Area Health Resource File³

203.6
Indiana licensure & supplemental data



272.0
AAMC²



300.8



292.9



302.3



235.6

1. IC 25-1-2-10. Available at: <https://iga.in.gov/legislative/laws/2021/ic/titles/025#25-1-2-10>

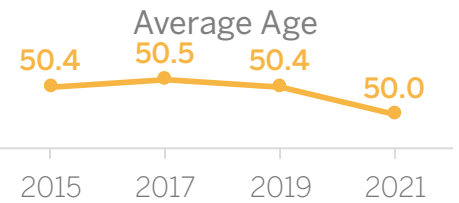
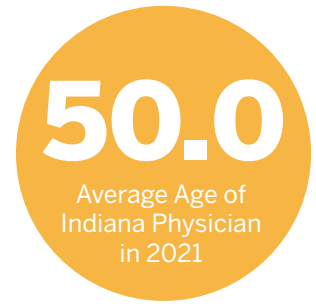
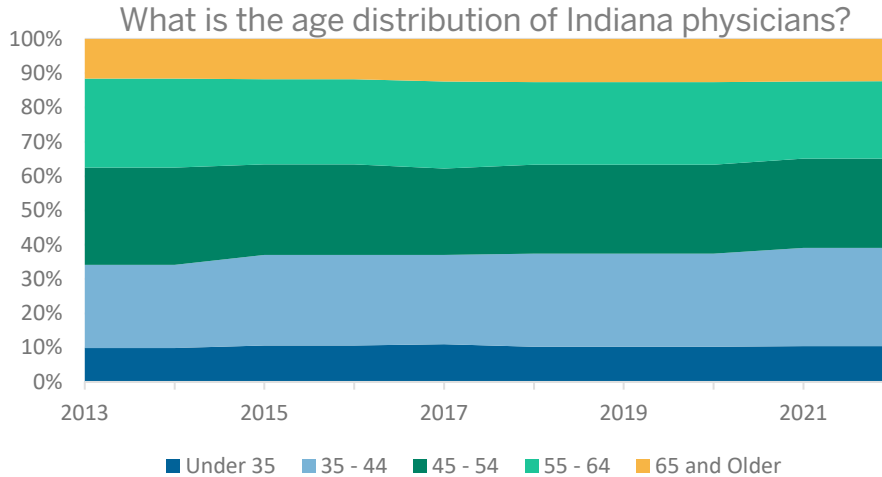
2. AAMC State Workforce Profiles. Available at: <https://www.aamc.org/data-reports/workforce/data/2021-state-profiles>

3. Health Resources & Services Administration Area Health Resource File. Download at: <https://data.hrsa.gov/topics/health-workforce/ahrif>

DEMOGRAPHIC CHARACTERISTICS

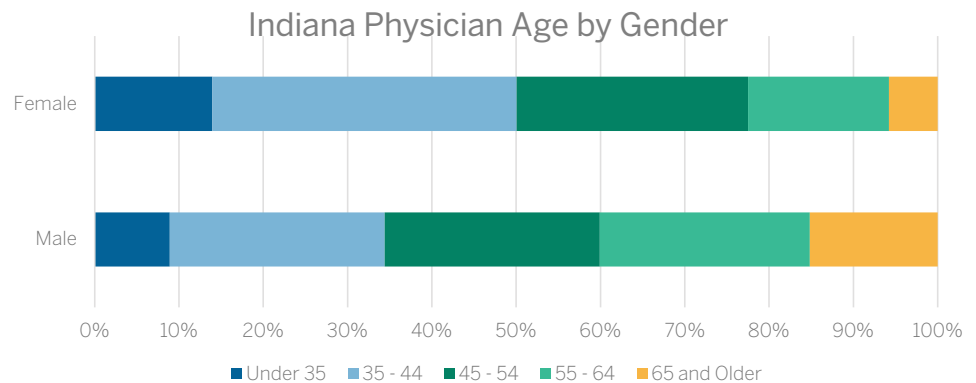


The Takeaway: Indiana's physician workforce is balanced with relatively similar percentages of new entrants compared to those nearing retirement. Indiana's physician workforce is more racially diverse today than ever before.



AGE

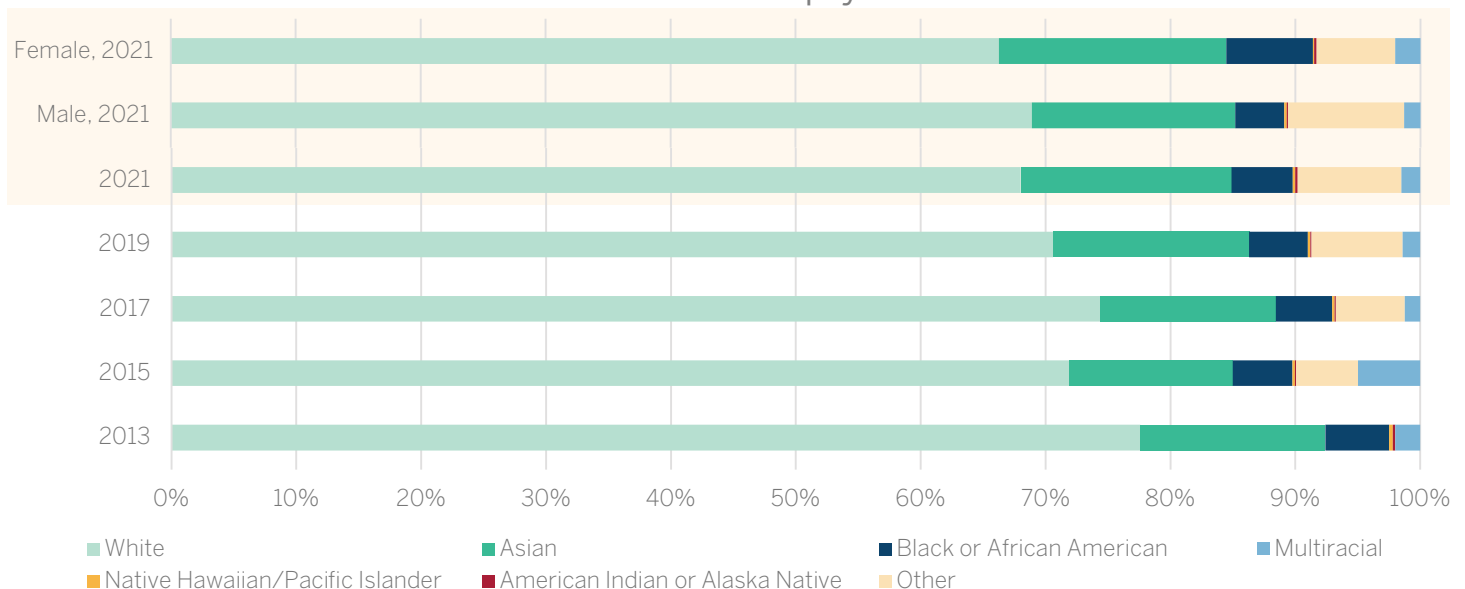
The greatest proportion of Indiana's physicians are between 35-44 years old, placing them in the early to middle stages of their practice careers. The age distribution of the 2021 Indiana physician workforce is similar to that of previous years. This may suggest that the workforce is stable (i.e. the rate of retirement is approximately equivalent to the rate of backfilling).



RACE

Whereas in 2013, only 21.9% of the workforce self-identified as being a race other than white, this increased to 32.0% in 2021. This increase is driven by a growing reporting sample of physicians identifying as "Asian" or as another race not listed. There is more racial diversity among Indiana's female physicians than among their male counterparts.

What is the racial distribution of Indiana's physician workforce over time?

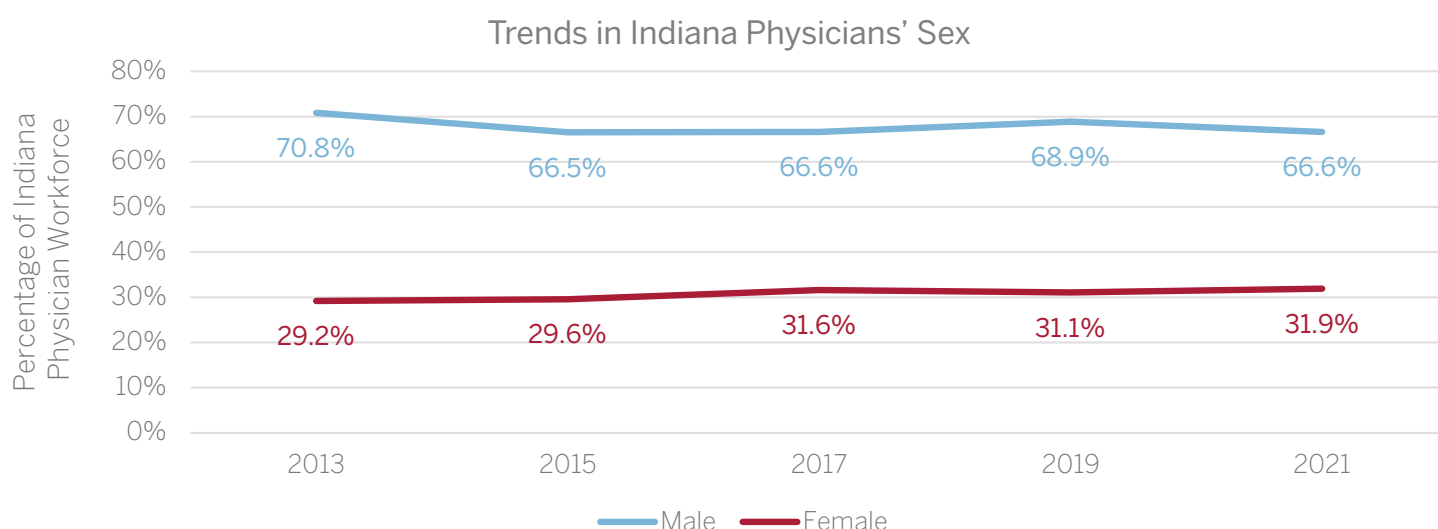


INCREASE IN FEMALE REPRESENTATION IN THE PHYSICIAN WORKFORCE



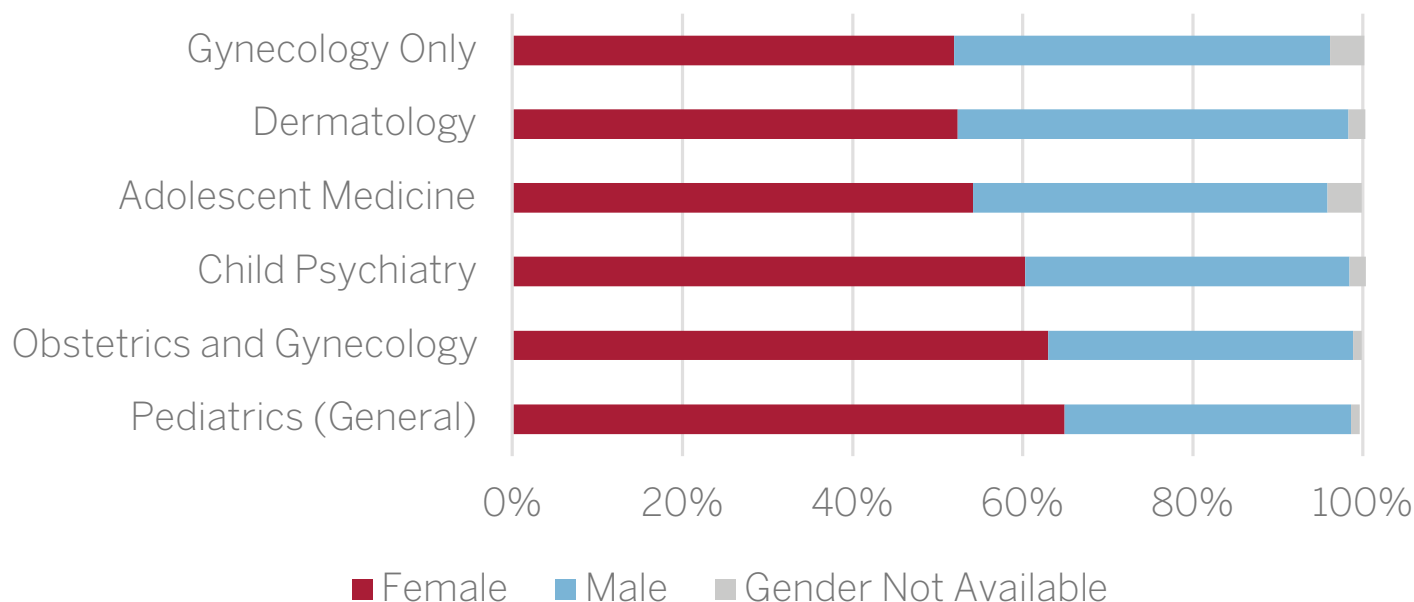
The Takeaway: The percent representation of females in Indiana's physician workforce is increasing, but not as rapidly as national averages.

One of the most prominent national trends within the United States physician workforce is the increased representation of women/females. The Association of American Medical Colleges reports an increased in representation of women in the physician workforce nationally, growing from 28.3% in 2007 to 36.3% in 2019. Indiana has also experienced this trend but to a lesser extent, with women representing 29.2% of the Indiana physician workforce in 2013, and 31.9% of the workforce in 2021.



National data reports the physician specialties with high female representation as pediatrics (64.3% female representation), obstetrics and gynecology (58.9%), child and adolescent psychiatry (54.0%), and neonatal-perinatal medicine (52.8%). How do Indiana physician specialties compare?

Indiana Physician Specialties with the Highest Proportionate Representation of Women



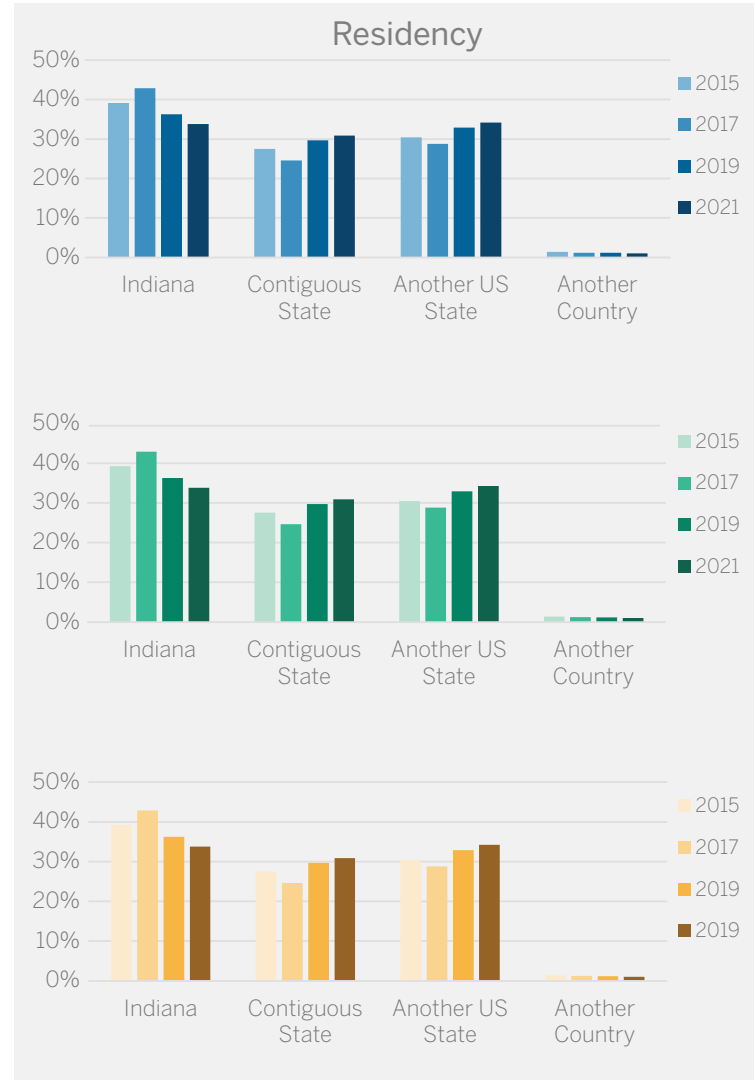
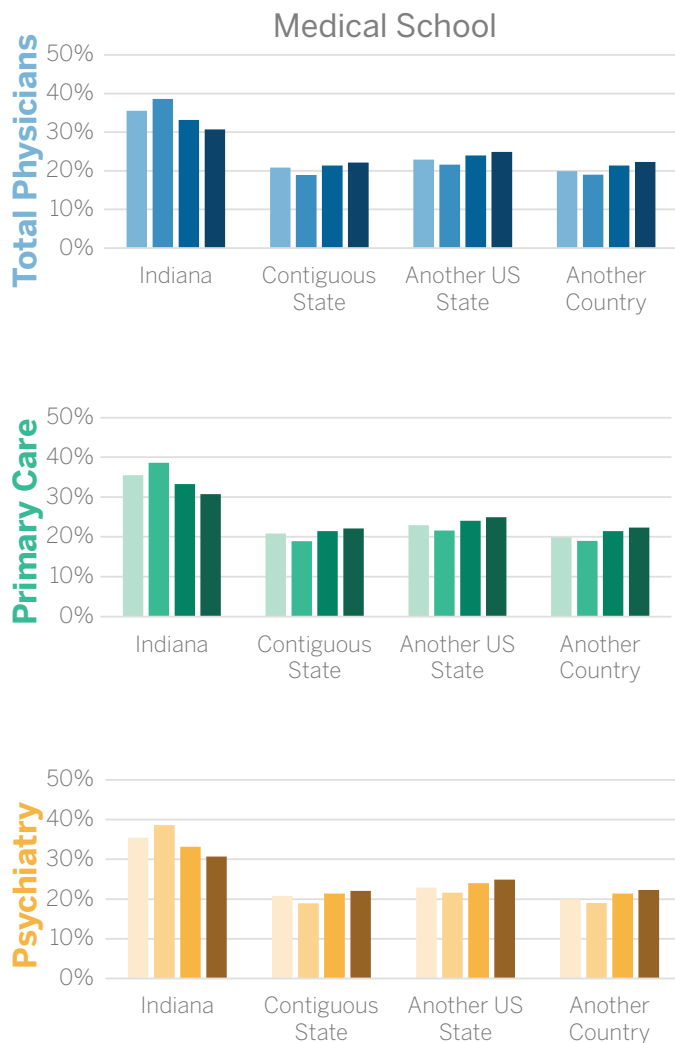
1. Association of American Medical Colleges. Nation's physician workforce evolves: more women, a bit older, and toward different specialties. 2021. Available at: <https://www.aamc.org/news-insights/nation-s-physician-workforce-evolves-more-women-bit-older-and-toward-different-specialties#:~:text=Women's%20steady%20rise,2007%20%E2%80%94%2028.3%25>

EDUCATIONAL CHARACTERISTICS



The Takeaway: A greater proportion of Indiana physicians report completing their medical education outside of Indiana, which is likely partially attributable to the expansion of telehealth and increase in out-of-state practitioners serving Hoosiers.

Where did Indiana physicians complete...



There have been recent initiatives to expand graduate medical education (GME) opportunities in Indiana. The Indiana GME Board, which was created by lawmakers in 2015, was charged with expanding graduate medical education residency opportunities across Indiana through aligning state appropriations with physician workforce development in areas of need. Since its creation, the GME Board has added more than 330 residency slots through new development or expansion of programs in Emergency Medicine, General Surgery, **Obstetrics and Gynecology**, Outpatient Community-Based **Internal Medicine**, Community-based **General Pediatrics**, and **Psychiatry**.^{1,2}

Congress also approved 1,000 new Medicare-funded residency slots for qualifying hospitals that will be phased in over five years.³ It is unclear how many would be allocated to Indiana, as the first round of 200 residency slots will be announced in January 2023.⁴ Regardless, workforce data will be critical to monitor the impact of residency positions in Indiana on retention and physician workforce capacity.

1. Graduate Medical Residency Program Adds More Than 100 Resident Physicians, 2022. Available at: https://www.in.gov/che/files/220217_RELEASE_GMEB-Expansion1.pdf

2. Indiana GME Report Summary Available at: <https://www.in.gov/che/files/Tripp-Umbach-Indiana-GME-Report-Summary.pdf>

3. Consolidated Appropriations Act, 2021. Available at: <https://www.congress.gov/bill/116th-congress/house-bill/133/text>

4. CMS Funding 1,000 New Residency Slots for Hospitals Serving Rural & Underserved Communities, 2021. Available at: <https://www.cms.gov/newsroom/press-releases/cms-funding-1000-new-residency-slots-hospitals-serving-rural-underserved-communities>

INDIANA PHYSICIANS AND TELEHEALTH



The Takeaway: Indiana's physician workforce followed national trends to greatly expand the use of telehealth during the COVID-19 pandemic.

Indiana physicians' reported engagement with telehealth has increased by more than 50% from 2019 to 2021, with nearly 60% of all physicians reporting providing telehealth services in 2021.

Under Indiana's current laws, any physician (or other health care practitioner) that provides telehealth services to Hoosiers must hold an Indiana license. In accordance with [IC 25-1-2-10](#), physicians identify whether they provide telehealth services. This information allows the State the ability to identify and describe telehealth-engaged physicians and monitor the future trends in telehealth participation coming out of the COVID-19 pandemic.

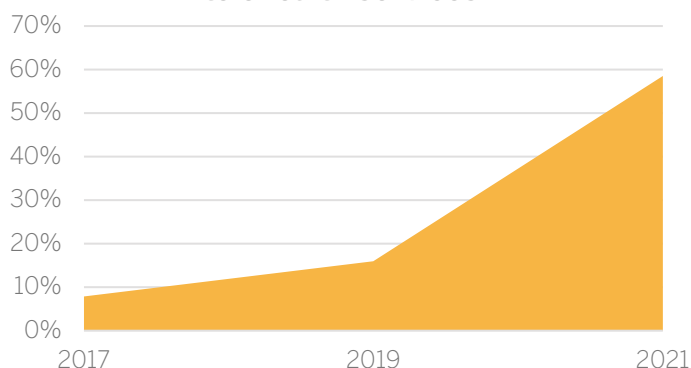
Across the country, the adoption and use of telehealth services rapidly expanded in response to the COVID-19 pandemic. Indiana saw a similar trend, evidenced by Indiana physicians' reported engagement in telehealth during the latest renewal periods.

WHAT IS TELEHEALTH?

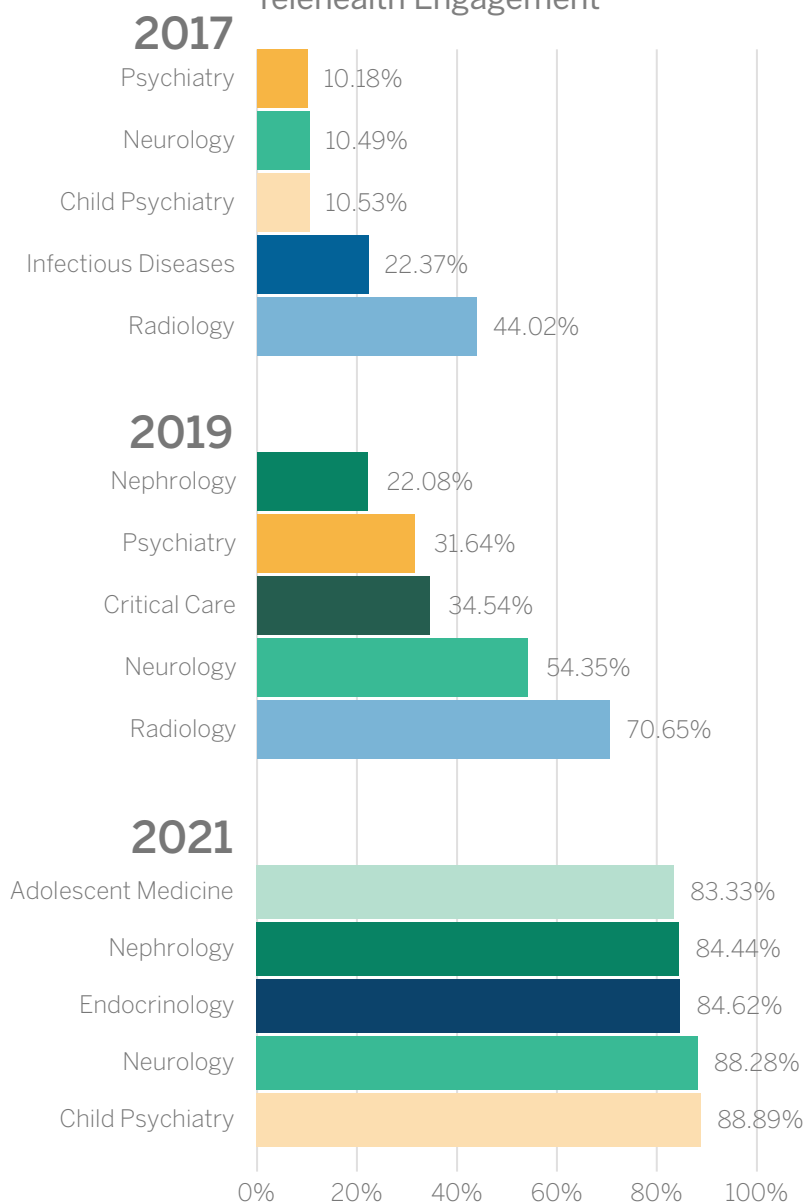
Indiana Code defines telehealth as "the delivery of health care services using interactive electronic communications and information technology, in compliance with the federal Health Insurance Portability and Accountability Act (HIPAA), including: (1) secure videoconferencing; (2) store and forward technology; or (3) remote patient monitoring technology; between a provider in one (1) location and a patient in another location." There have been numerous recent updates to the telehealth definition over the past few legislative sessions (in [2016](#), [2021](#), and [2022](#)).

Sources: <https://aspe.hhs.gov/sites/default/files/documents/4e1853c0b4885112b2994680a58af9ed/telehealth-hps-ib.pdf>
<https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/telehealth-a-quarter-trillion-dollar-post-covid-19-reality>

Indiana physicians that report providing telehealth services



Specialties with the Greatest Proportion of Telehealth Engagement



INDIANA PHYSICIAN SPECIALTIES

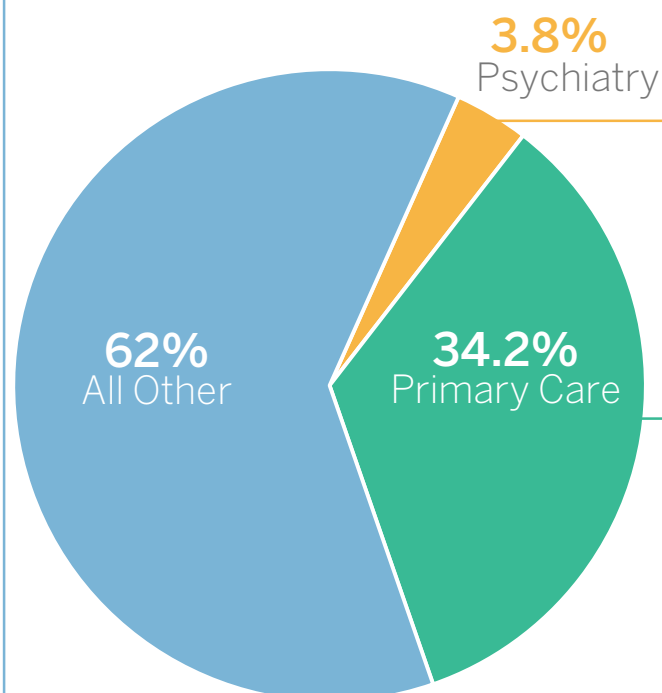


The Takeaway: Primary care specialties make up one-third of Indiana's physician workforce. Psychiatry specialties represent between 3-4% of the physician workforce, while remaining physicians represent other specialties.

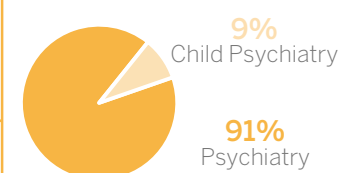
The Indiana Medical Licensing Board licenses physicians, not medical specialties (for example, cardiologists are licensed as “physicians” by the State of Indiana and not “cardiologists”). Medical specialties are regulated through third party certifying boards, not government entities. Many Indiana physicians maintain a board certification in their specialty of practice and practice under that specialty. The supplemental information fields captured through [IC 25-1-2-10](#) provides a unique opportunity for the State to capture specialty information on all physicians that complete their license renewal online.

More than one-third of Indiana physicians have a specialty that falls under primary care as defined by the Health Resources and Services Administration¹ (Family Medicine, General Internal Medicine, Obstetrics & Gynecology, or General Pediatrics). Information on primary care physicians and psychiatrists are used to inform Health Professional Shortage Area designations for Indiana’s Primary Care Office.²

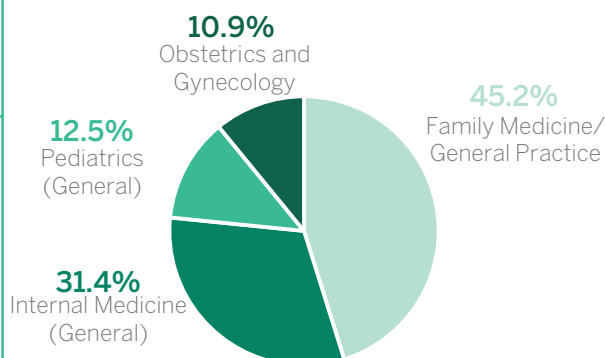
Total Physician Workforce



Psychiatrist Workforce



Primary Care Physician Workforce



Specialty	%	Specialty	%	Specialty	%
Emergency Medicine	7.5	Ophthalmology	1.5	Thoracic Surgery	0.6
Radiology	6.2	Nephrology	1.4	Neurological Surgery	0.6
Anesthesiology	6.1	Critical Care Medicine	1.3	Gynecology Only	0.6
Cardiology	3.8	Dermatology	1.2	Allergy and Immunology	0.5
Orthopedic Surgery	3.6	Urology	1.2	Rheumatology	0.5
Pediatrics Subspecialties	3.3	Otolaryngology	1.2	Geriatric Medicine	0.5
Neurology	2.9	Pulmonology	1.2	Radiation Oncology	0.5
Other Specialties	2.9	Physical Medicine and Rehabilitation	1.0	Vascular Surgery	0.4
Surgery (General)	2.7	Infectious Diseases	0.9	Colon and Rectal Surgery	0.2
Gastroenterology	1.7	Endocrinology	0.8	Preventive Medicine/Public Health	0.2
Pathology	1.6	Plastic Surgery	0.7	Other Surgical Specialties	0.2
Hematology and Oncology	1.6	Occupational Medicine	0.7	Adolescent Medicine	0.1

1. Primary Care specialties include Family Medicine, General Internal Medicine, Obstetrics & Gynecology, or General Pediatrics <https://bhw.hrsa.gov/grants/resourcecenter/glossary#P>

2. More information about Health Professional Shortage Areas available at: <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

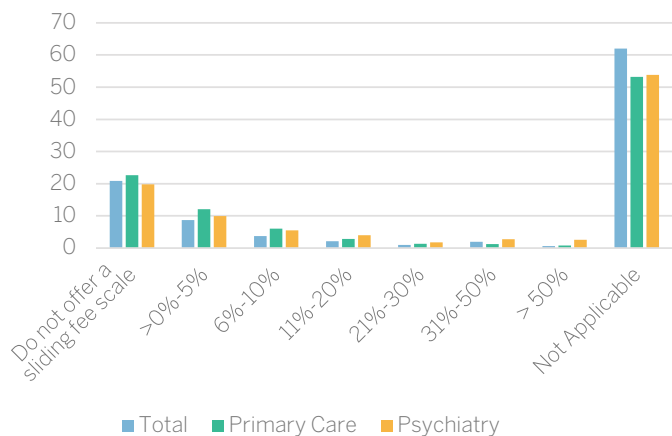
PRACTICE CHARACTERISTICS



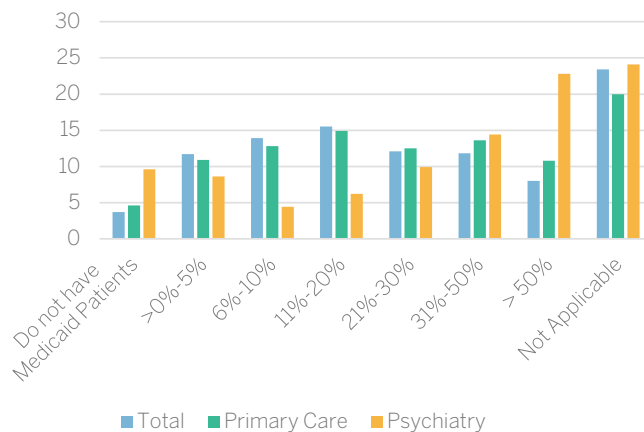
The Takeaway; The majority (81.3%) of physicians reporting accepting new Indiana Medicaid patients. Many physicians also reported serving other special populations.

How Many Indiana Physicians...

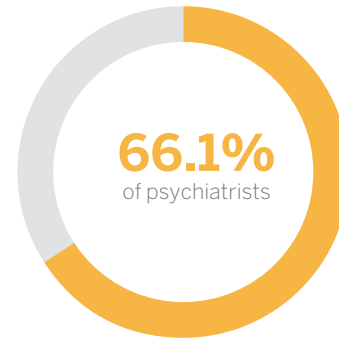
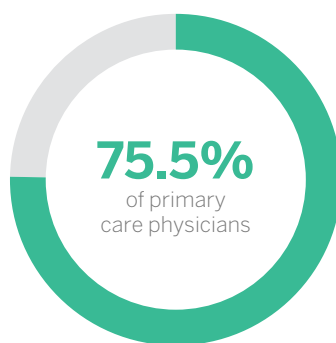
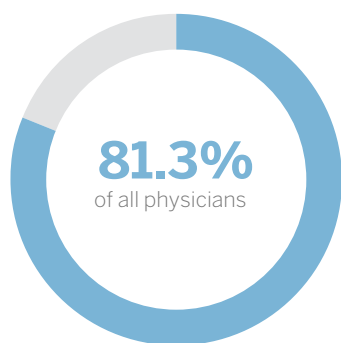
Serve Medicaid Patients?



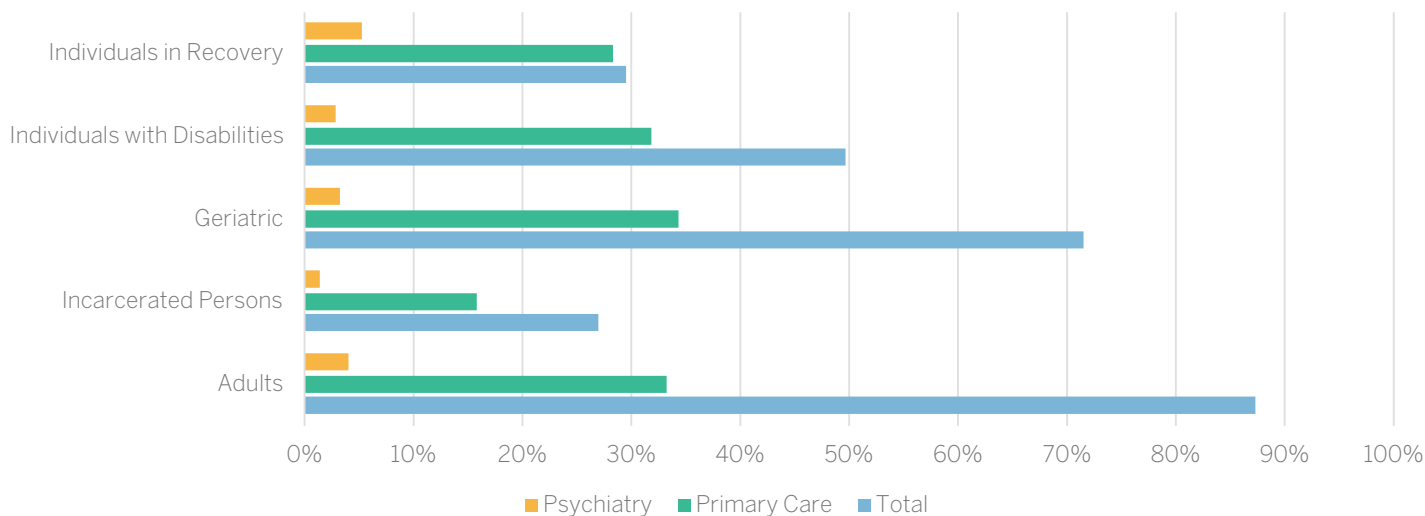
Offer a Sliding Scale?



How many Indiana physicians report accepting new Medicaid patients?



Adult and Special Populations Served by Physicians



INDIANA LOCAL HEALTH OFFICERS: PHYSICIANS IN PUBLIC HEALTH



The Takeaway: Physicians serve in local public health through service as a Local Health Officer.

Indiana's Local Health Officer physicians had higher rates of completing medical education in Indiana than the overall physician workforce.

In 2021, Governor Holcomb established the Indiana's Governor's Public Health Commission (GPHC) through [Executive Order 21-21](#). The Commission issued its final [report](#) to the Governor in August 2022. In its report, the GPHC highlighted the need for a strengthened public health workforce, including the need for additional personnel to serve as local health officers. Under Indiana's current law, only physicians can serve as local health officers ([IC 16-20-2-16](#)). Below is additional information about the physicians that report serving as local health officers in Indiana.

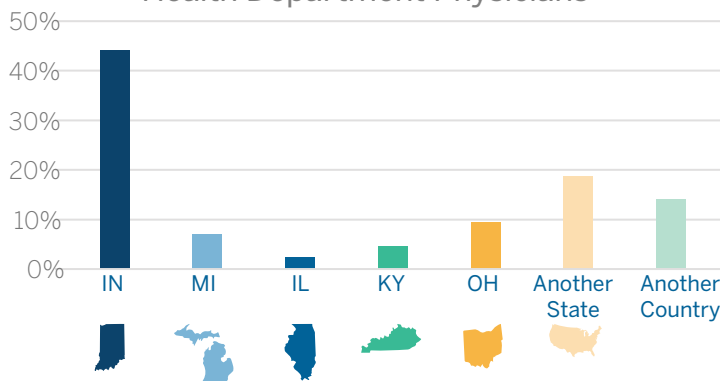
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Indiana Physicians Report Practicing in a Local Health Department

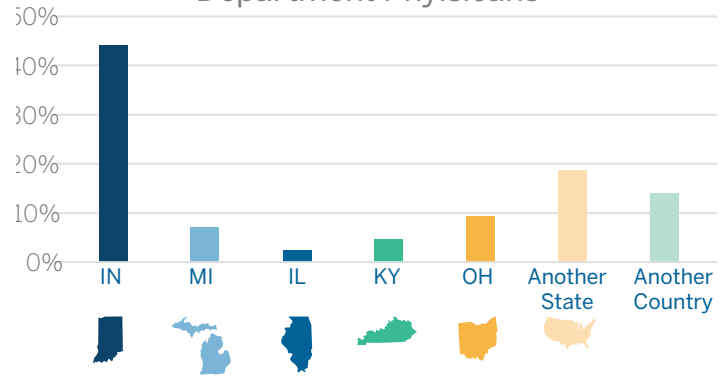
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Indiana Counties have a physician that reported working in a Local Health Department

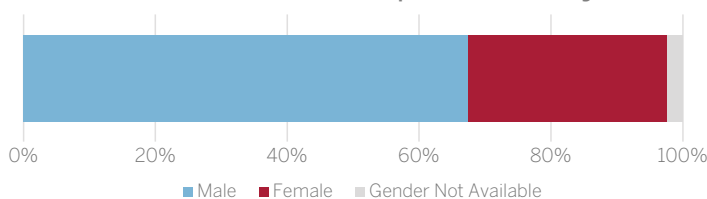
Location of Medical School for Indiana Local Health Department Physicians



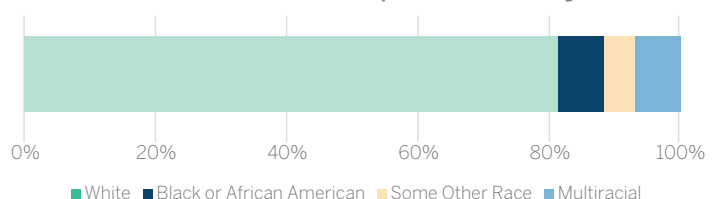
Location of Residency for Indiana Local Health Department Physicians



Gender of Local Health Department Physicians



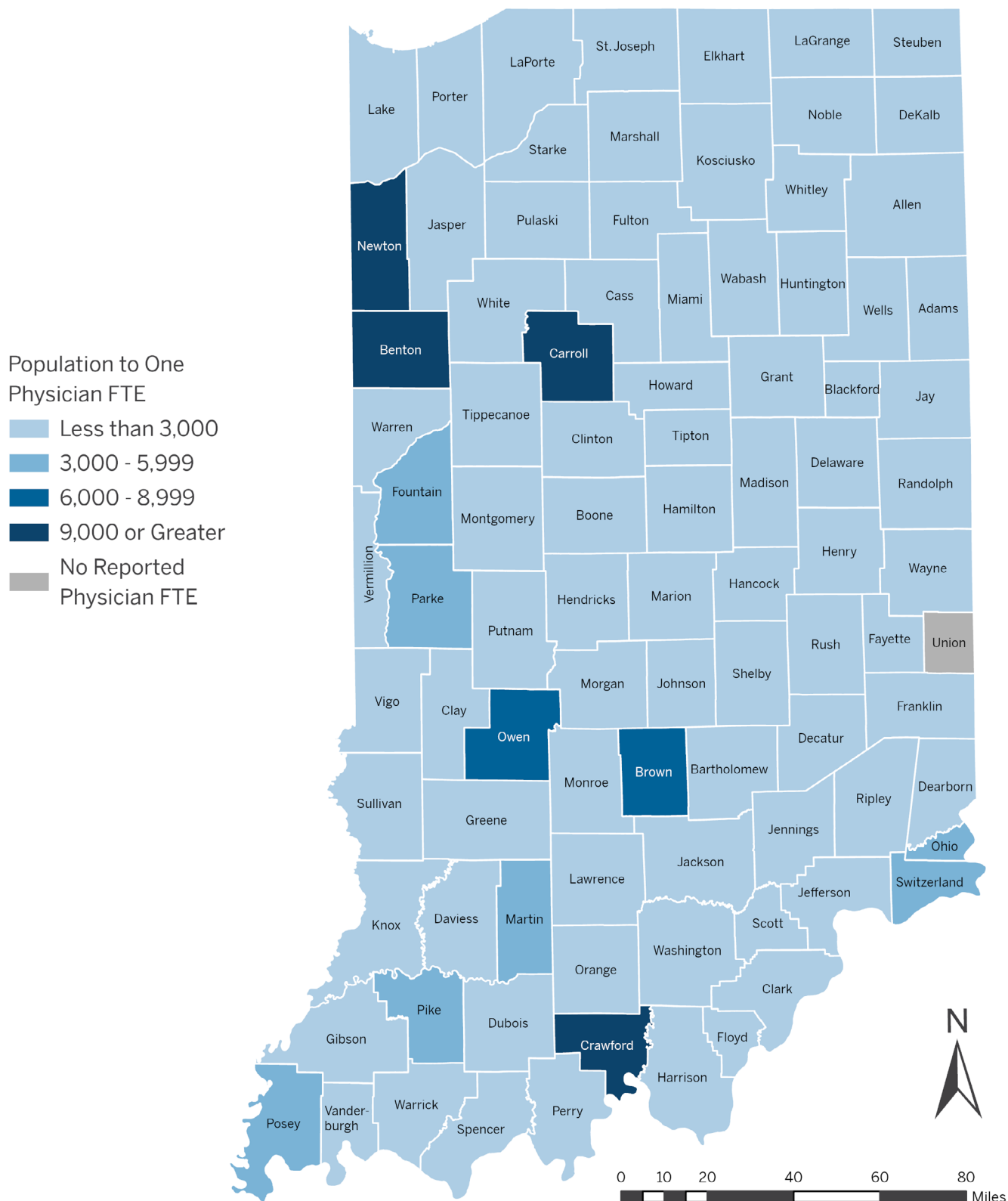
Race of Local Health Department Physicians



Note: To identify Indiana physicians who serve as local health officers, the total licensed workforce was used prior to applying inclusion/exclusion criteria for the final sample. This was done to support identification of LHOs that may not be actively practicing medicine in Indiana. Local health officer physicians may not self-identify the health department they serve as a "practice location". If a physician did not report a local health department as a setting, they were not included in this reporting.

INDIANA PHYSICIAN WORKFORCE:

CAPACITY & GEOGRAPHIC DISTRIBUTION

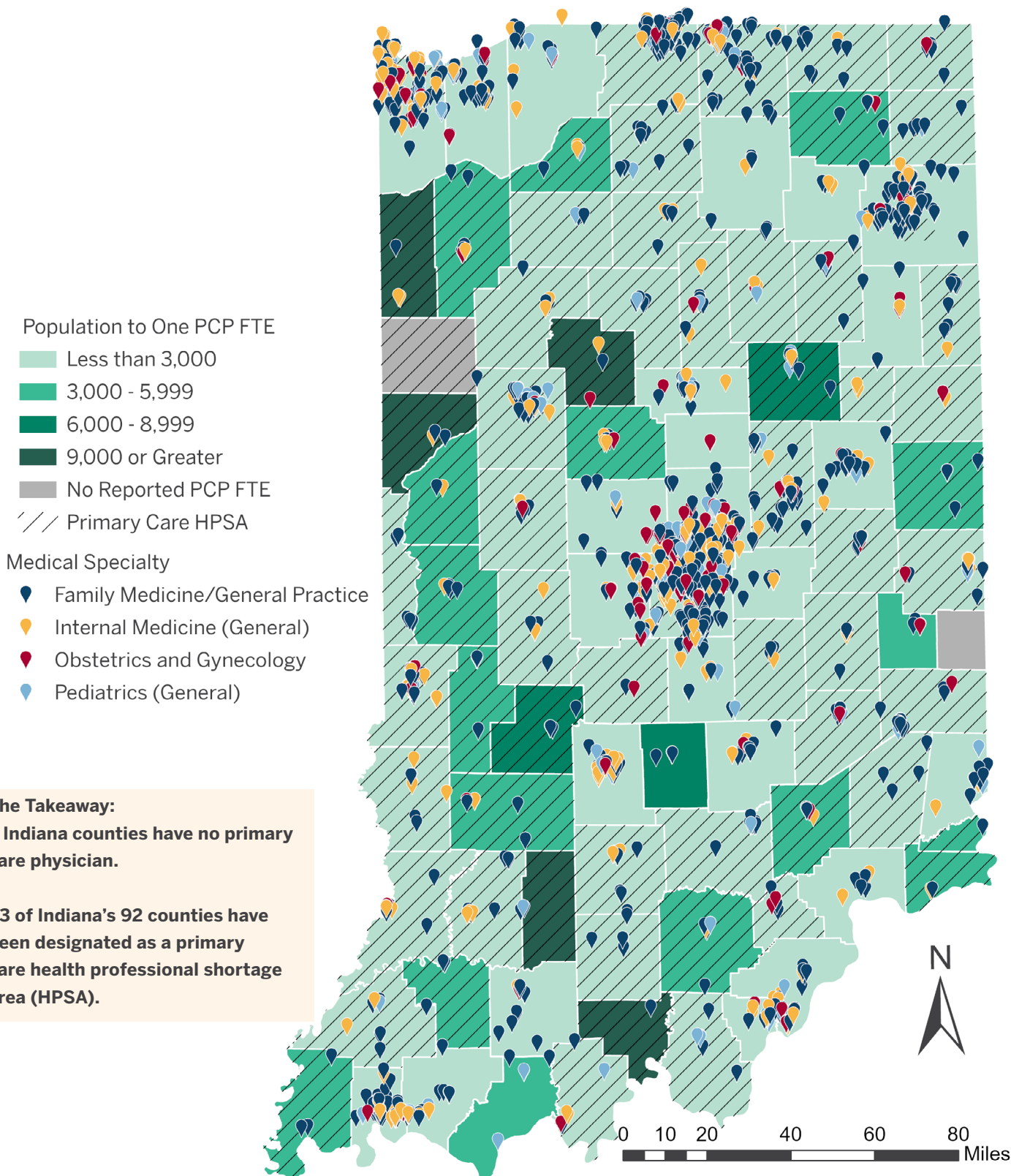


Source: 2021 Indiana Physician License and Supplemental Survey Data; U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates
 Note: Population-to-provider FTE ratios cannot be calculated for counties with no reported physician FTE.

INDIANA PRIMARY CARE PHYSICIANS:

CAPACITY & GEOGRAPHIC DISTRIBUTION

Reported Primary, Secondary, & Tertiary Practice Locations



Source: 2021 Indiana Physician License and Supplemental Survey Data; U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates.

Note: Population-to-provider FTE ratios cannot be calculated for counties with no reported physician FTE. Only Practice locations with geocoordinates were included in the map.

INDIANA PSYCHIATRISTS:

CAPACITY & GEOGRAPHIC DISTRIBUTION

Reported Primary, Secondary, & Tertiary Practice Locations

Population to One Psychiatrist FTE

Less than 20,000

20,000 - 39,999

40,000 - 59,999

60,000 or Greater

No Reported Psychiatrist FTE

//// Mental HPSA

Medical Specialty

Child Psychiatry

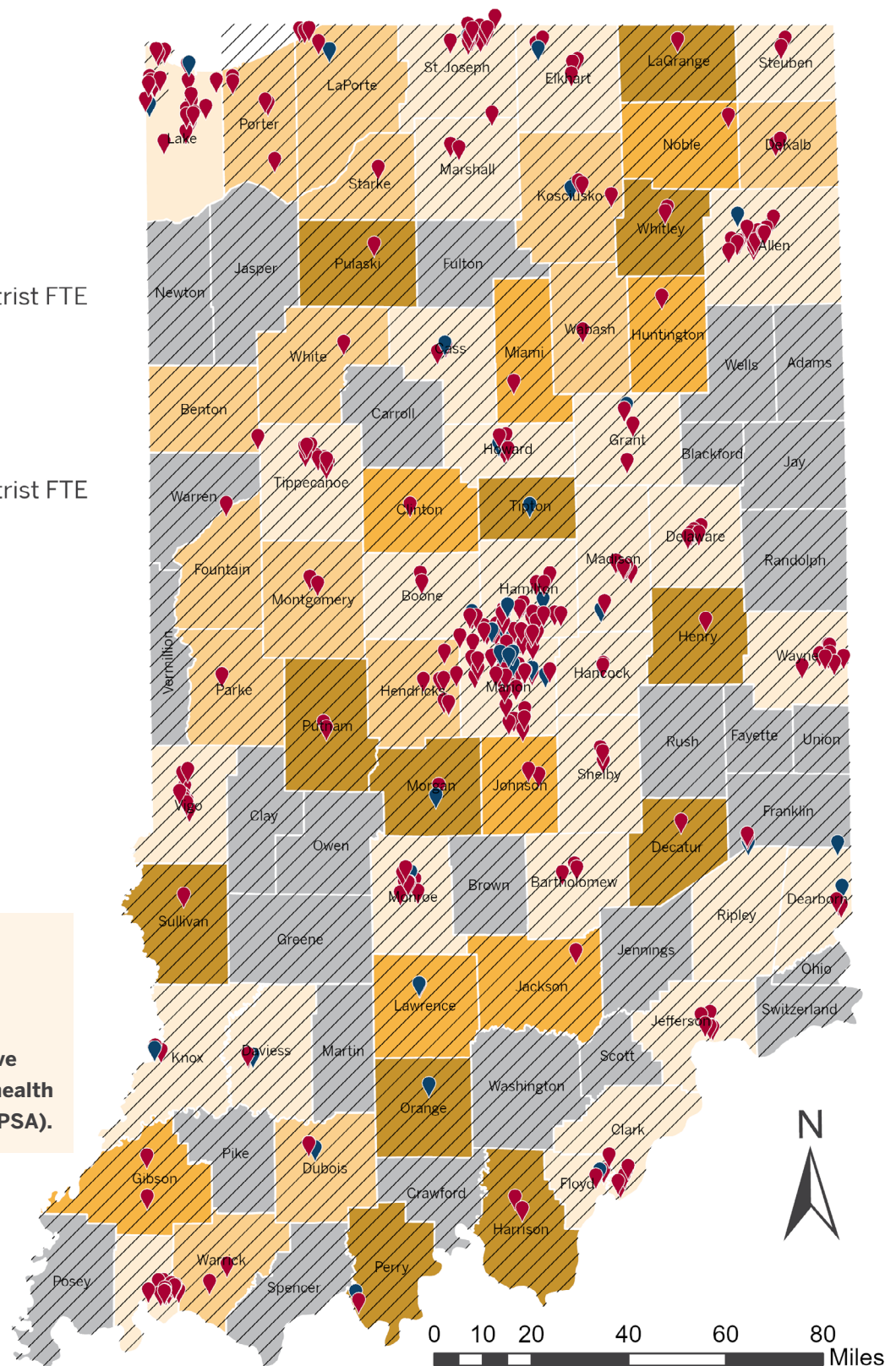
Psychiatry



The Takeaway:

29 Indiana counties have no psychiatrist

91 of Indiana's 92 counties have been designated as a mental health professional shortage area (HPSA).



Source: 2021 Indiana Physician License and Supplemental Survey Data; U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates.

Note: Population-to-provider FTE ratios cannot be calculated for counties with no reported physician FTE. Only Practice locations with geocoordinates were included in the map.



ARE YOU A MEDICAL STUDENT, RESIDENT, PHYSICIAN, OR EMPLOYER?

CHECK OUT THE INDIANA PHYSICIAN WORKFORCE DEVELOPMENT INCENTIVE PROGRAMS THAT MAY BE AVAILABLE!

There are several federally funded, State-operated, and externally-housed incentive programs available to support Indiana physicians. Most of these programs incentivize service in rural and underserved areas or specialties in Indiana.

DID YOU KNOW?

Most federal and state opportunities require service in a shortage area. Check out whether your employer qualifies by reading the program eligibility requirements and exploring health professional shortage area designations in Indiana at: <https://data.hrsa.gov/tools/shortage-area/hpsa-find>



FEDERAL OPPORTUNITIES

Federal Opportunities through the [Health Resources and Services Administration National Health Service Corps](#):

- [Loan Repayment Program](#): Loan repayment for primary care physicians in exchange for service in underserved areas.
- [Substance Use Disorder Workforce Loan Repayment Program](#): Loan repayment for clinicians in exchange for 3 years service to provide evidence-based SUD in underserved areas
- [Rural Community Loan Repayment Program](#): Loan repayment for clinicians in exchange for 3 years service to provide evidence-based SUD in rural underserved areas
- Learn more about federal opportunities on [HRSA's Website](#).



STATE OPPORTUNITIES:

- The Indiana Department of Health operates [Indiana's State Loan Repayment Program](#) which offers up to \$20,000 per year to serve in certain geographies or settings throughout the State.
- The [Indiana Primary Care Shortage Area Scholarship](#) funds \$15,000 per year scholarships for osteopathic medicine students at Marian University who agree to provide primary care in Indiana upon becoming a licensed physician.



OTHER OPPORTUNITIES:

- There are also numerous other incentive programs operated externally to the State of Indiana through the [Indiana Osteopathic Association](#), the [Indiana State Medical Association](#), the [Indiana University School of Medicine](#), among others. Additional incentive opportunities available to licensed physicians in Indiana can be found on the [Bowen Portal](#).

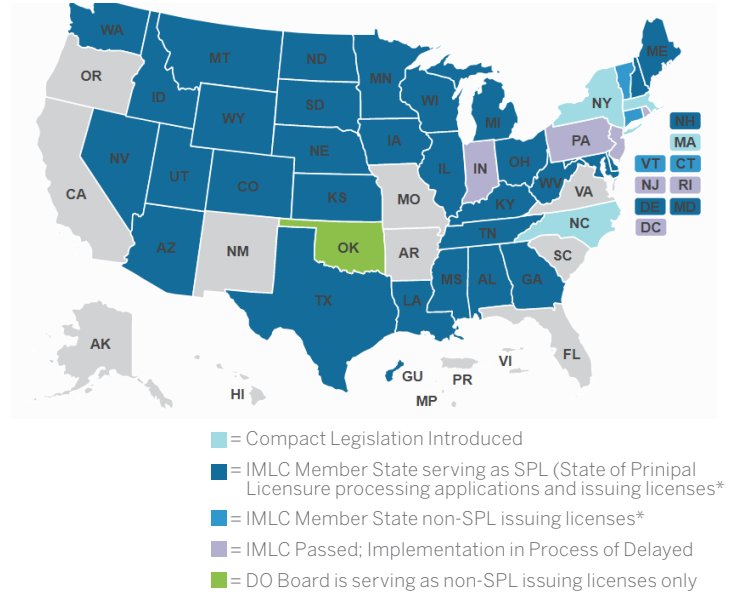
THE INTERSTATE MEDICAL LICENSURE COMPACT

In the 2022 legislative session, the Indiana General Assembly passed, and the governor signed Senate Enrolled Act 251 to adopt the Interstate Medical Licensure Compact (IMLC).

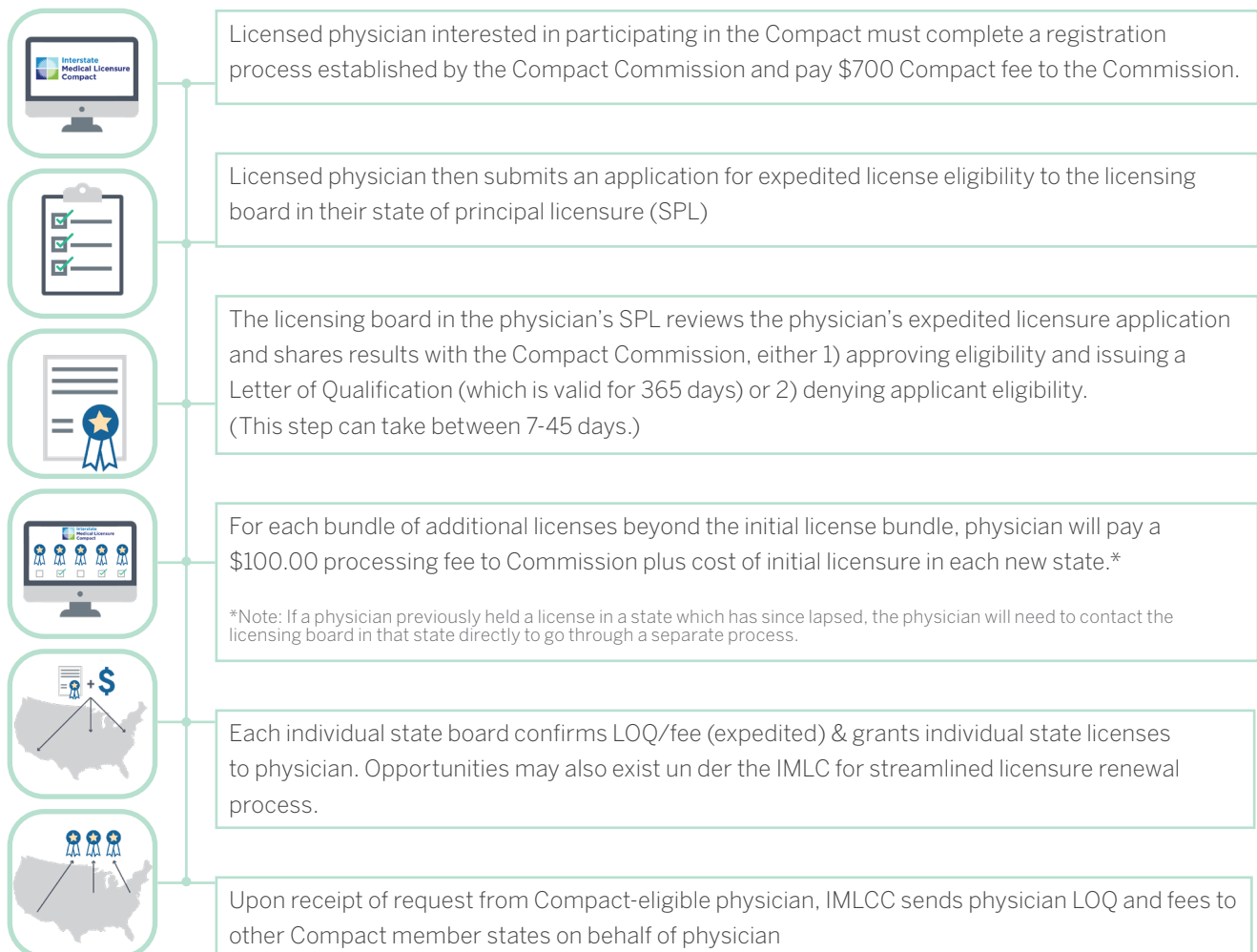
What is the Compact? The Medical Licensure Compact is an “expedited license review” compact whereby IMLC-participating states agree on certain standardized requirements for physician licensure and offer expedited licensure for Compact-participating physicians.

How will the Compact impact Indiana? Compact-participating physicians may prepare a single license application to obtain individual licenses in Compact-participating states under an expedited license review process. It is likely that Indiana will continue to gather workforce data from Compact-participating physicians during online license renewal.

WHAT STATES PARTICIPATE IN THE IMLC?



IMLC PROCESS



ACKNOWLEDGEMENTS

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