

2022 SURVEY OF

AMERICA'S PHYSICIANS

Part Three of Three:
Assessing the State of Physician
Practice and the Strategies
to Improve It

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2022 SURVEY OF AMERICA’S PHYSICIANS

PART THREE OF THREE:

Assessing the State of Physician Practice and the Strategies to Improve It

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INTRODUCTION: REVITALIZING THE PHYSICIAN PRACTICE ENVIRONMENT

Before the pandemic and now, regulations and compliance requirements have changed the landscape of physician practice. The resulting environment is rife with capacity issues that have impacted physicians' ability to deliver care to patients and their overarching outlook on being a physician.

Reductions in staff, administrative burdens, prior authorization and concerns with reimbursement have led to a system where physicians feel overworked, underappreciated and unable to do their jobs to the best of their ability. Some are bearing this burden more heavily than others—with employed physicians, female physicians, physicians of color, primary care physicians and younger physicians feeling the effects more acutely. These barriers also have had a devastating effect on primary care and its role to enhance access and improve health outcomes for patients. They have also affected physicians' confidence to ensure access to high quality, cost-efficient care for all.

The Physicians Foundation assesses physician sentiment surrounding the practice environment not only to place a stake in the ground to indicate where things stand, but also to spur action and drive change, which are urgently needed. The strategies and solutions included in the survey have been identified by physicians as vital to enhance the physician practice and, ultimately, to improve patients' health outcomes.

We believe the survey will be of interest to health care professionals, policy makers, academics, media members and anyone interested in the state of physician practice today and the strategies necessary to improve it. We encourage all of those who have a stake in our health care system and its workforce to reference this survey and comment on its findings.

Gary Price, M.D.
President

Robert Seligson
Chief Executive Officer

KEY FINDINGS:

Part Three of The Physicians Foundation's 2022 *Survey of America's Physicians* focuses on the state of physician practice and the strategies to improve it. The survey was conducted from September 28 through October 7, 2022, and the data presented is based on 1,501 responses. Complete methodology is available on page 27.

Key findings of the survey include:

The current state of the health care system has affected physicians' views on their profession.

- Nearly half of physicians do not have high professional morale.
- More than half of physicians do not have positive feelings about the current state or future of the medical profession.
- Half of physicians would not recommend medicine as a career to young people.
- More than one in five physicians would like to retire within the next year.

Physicians are facing capacity issues that impact their ability to deliver care to patients.

- One-third report their current practice is overextended and overworked, and nearly half of physicians report being at full capacity in their current practice.
- Approximately one in three physicians have experienced a reduction in staff over the past year.
- Approximately one in five physicians reported cutting back on their work hours.



Staff shortages are a main driver of concern about the capacity of the health care system.

- The majority of physicians report staff shortages across all the respective staffing roles, with the following roles having the most shortages:
 - **90%** reported shortages of registered nurses
 - **86%** reported shortages of nursing assistants
 - **85%** reported shortages of social workers
 - **84%** reported shortages of physicians
 - **83%** reported shortages of licensed practice nurses
- Among physicians who reported staff shortages, the most impactful contributing factors were:
 - **85%** rated administrative burdens as impactful
 - **79%** rated increased working hours without compensation as impactful
 - **71%** rated reduced salaries/benefits as impactful
- Additionally, almost one-quarter of physicians rated experiencing violence in the workplace as a contributing factor to staff shortages.

Physicians have identified which solutions would support them the most in addressing staff shortages.

- More than half of physicians place high importance across each of the proposed solutions*, with the top four being:
 - **94%** rated removing low-value work as helpful
 - **92%** rated eliminating insurance approvals as helpful
 - **92%** rated offering customized retention strategies as helpful
 - **89%** rated addressing burnout among physicians/staff as helpful



When it comes to primary care specifically, physicians are facing mounting challenges.

- Physicians identified the top four challenges impacting primary care's role in providing high-quality, cost-efficient health care:
 - **85%** report administrative burdens, such as EHRs and prior approval as a challenge
 - **70%** report lack of insurance for patients as a challenge
 - **64%** report not prioritizing mental health integration as a challenge
 - **63%** report pay-for-performance measurement as a challenge

Physicians have identified which strategies would most improve primary care's role in enhancing access and improving health outcomes for patients.

- At least half of physicians place high importance across each of the proposed strategies**,
 - **86%** rated reimbursement for responding to questions through emails, texts or telephone calls as important
 - **84%** rated building partnerships to foster preventive health discussions, such as vaccinations, to reach critical populations, such as rural and low-income communities, as important
 - **76%** rated reevaluating reporting requirements to align with delivering quality care as important

Physicians identified which actions would help the entire profession ensure access to high-quality, cost-efficient care for all.

- The majority of physicians place high importance across each of the proposed actions***.
 - **93%** identified simplifying/streamlining prior authorization for medical services and prescriptions as important
 - **88%** identified reimbursing physicians for providing telehealth services as important
 - **88%** identified simplifying access to integrated mental health services as important
 - **88%** identified advancing interoperability of EHRs as important

* Full list of solutions included on page 23

** Full list of strategies included on page 15

*** Full list of actions included on page 13

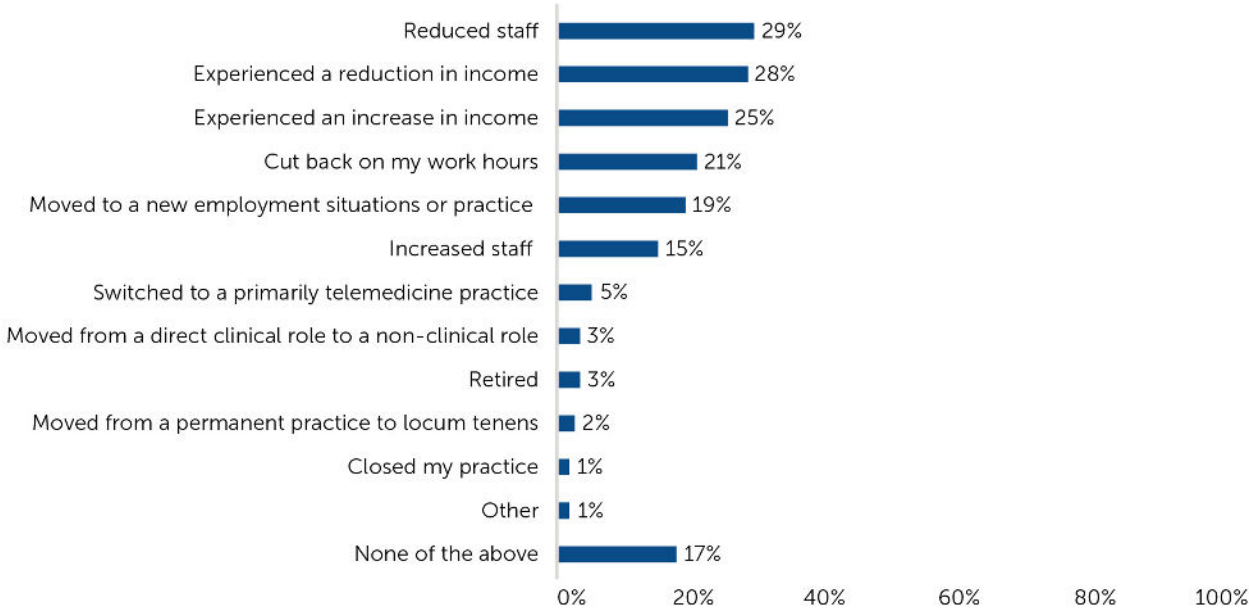
QUESTIONS ASKED AND RESPONSES RECEIVED

Part Three of The Physicians Foundation’s 2022 Survey of America’s Physicians focuses on state of physician practice and the strategies to improve it.

Detailed questions asked and responses received include the following:

Q1: Have you done or experienced any of the following over the past year?

Percent of Physicians Who Experienced the Following Activities in the Past Year



Nearly one in three physicians (29%) have experienced a reduction in staff over the past year, and one quarter or more report either a reduction in income or an increase in income. Approximately one in five physicians reported cutting back on their work hours (21%) or moving to a new employment situation or practice (19%). More than one in 10 reported experiencing an increase in staff in the past year, with a significantly higher percentage of non-white physicians (32%) than white physicians (27%) experiencing a reduction.

While more than one quarter of physicians (29%) reported a reduction in income, one quarter (25%) reported an increase in income. Independent, older and suburban physicians reported experiencing a reduction in income; conversely, employed, younger and urban physicians reported experiencing an increase in income.

Proportion of Physicians Who Experienced the Following Activities in the Past Year by Practice Type, Age and Geography

	Employed Physicians	Independent Physicians	Physicians ≤45 Years Old	Physicians 46+ Years Old	Suburban Physicians	Urban Physicians
Experienced a reduction in income	23%	46%	20%	36%	32%	23%
Experienced an increase in income	29%	13%	38%	13%	22%	30%

Additionally, a higher proportion of Hispanic physicians (39%) than white physicians (28%) and Black physicians (23%) experienced a reduction in income over the past year; a higher proportion of Black physicians (36%) and Asian physicians (28%) than white physicians (22%) experienced an increase in income.

Proportion of Physicians Who Experienced the Following Activities in the Past Year by Race/Ethnicity

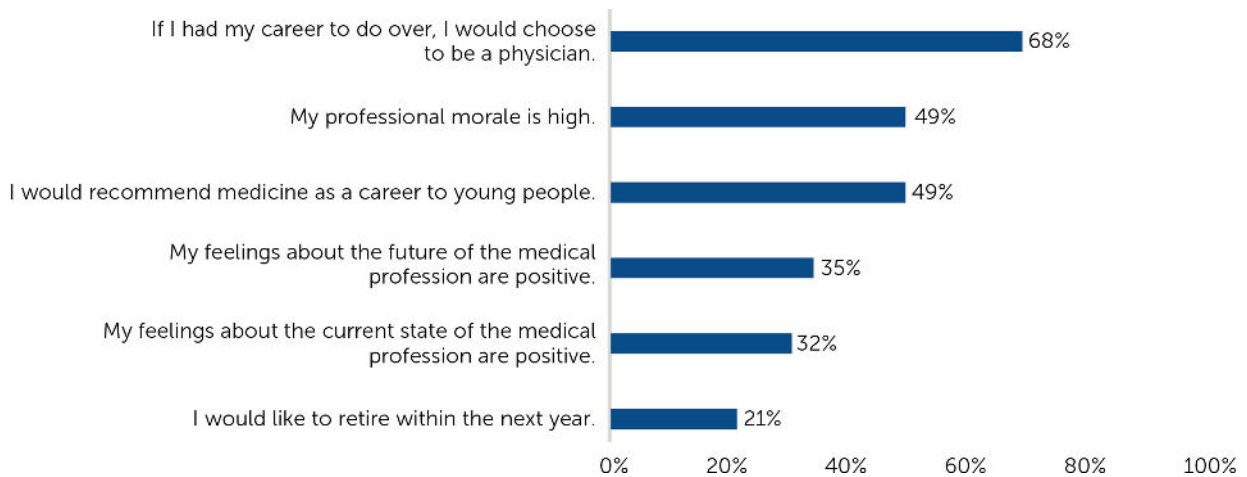
	Asian Physicians	Black Physicians	Hispanic Physicians	White Physicians
Experienced a reduction in income	–	23%	39%	28%
Experienced an increase in income	28%	36%	–	22%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.



Q2: To what extent do you agree with each of the following statements?

Percent of Physicians Who Strongly/Somewhat Agree with the Following Statements



The majority of physicians (68%) would still choose to be a physician if they had their career to do over again. However, more than half do not agree that their professional morale is high and/or that they would recommend medicine as a career option for young people. Additionally, almost seven in 10 physicians do not agree that their feelings about the future of medicine and about the current state of the medical profession are positive. Two in 10 physicians would like to retire within the next year.

A higher proportion of independent physicians (73%) than employed physicians (66%) and physicians 46+ years old (70%) than physicians ≤45 years old (65%) agree that they would do their career as a physician over again.

Proportion of Physicians Who Strongly/Moderately Agree They Would Choose to Be Physician

	2022
Employed Physicians	66%
Independent Physicians	73%
Physicians ≤45 Years Old	65%
Physicians 46+ Years Old	70%

A higher proportion of primary care physicians than specialty physicians and female physicians than male physicians do not agree that they would do their career as a physician over again, that their professional morale is high or that they have positive feelings about the current state or future of the medical profession.

Proportion of Physicians Who Do Not Agree with the Following Statements by Specialty and Gender

	Primary Care Physicians	Specialty Physicians	Female Physicians	Female Physicians
If I had my career to do over, I would choose to be a physician.	35%	30%	38%	29%
My professional morale is high.	55%	48%	58%	47%
I would recommend medicine as a career to young people.	–	–	58%	47%
My feelings about the <u>future</u> of the medical profession are positive.	69%	62%	70%	62%
My feelings about the <u>current</u> state of the medical profession are positive.	71%	66%	72%	65%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.

A higher proportion of suburban physicians and rural physicians than urban physicians do not agree that they have positive feelings about the current state or future of the medical profession.

Proportion of Physicians Who Do Not Agree with the Following Statements by Geography

	Rural Physicians	Suburban Physicians	Urban Physicians
My feelings about the <u>future</u> of the medical profession are positive.	69%	68%	60%
My feelings about the <u>current</u> state of the medical profession are positive.	73%	71%	63%

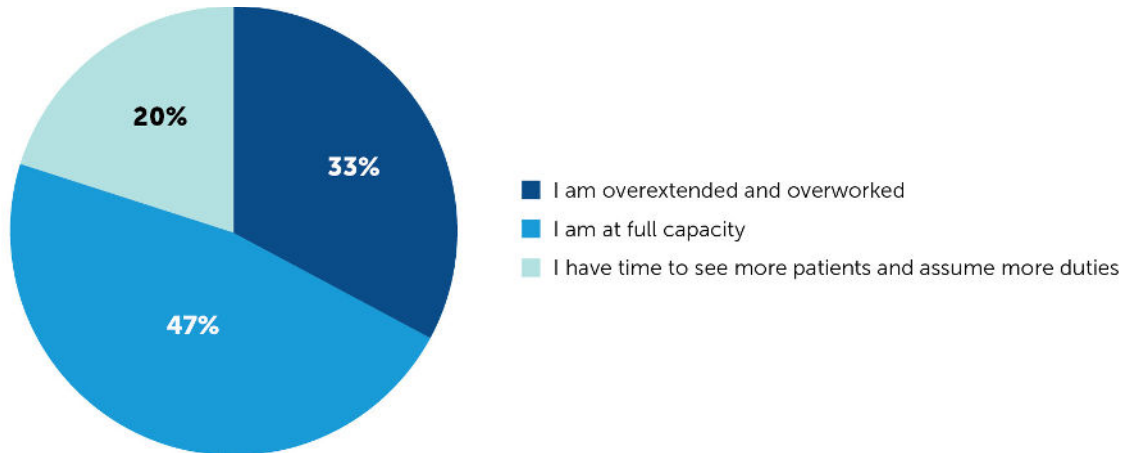
Significantly more physicians 46+ years old (30%) than physicians ≤45 years old (12%), white physicians (24%) than non-white physicians (17%) and suburban physicians (24%) than urban physicians (17%) would like to retire in the next year.

Proportion of Physicians Who Strongly/ Moderately Agree They Would Like to Retire Within the Next Year

	2022
Physicians ≤45 Years Old	12%
Physicians 46+ Years Old	30%
Non-White Physicians	17%
White Physicians	24%
Suburban Physicians	24%
Urban Physicians	17%

Q3: Which of the following best describes your current practice?

Current Practice Capacity Classifications by Percentage of Physicians



Nearly half of physicians (47%) report being at full capacity in their current practice, and one-third (33%) are overextended and overworked. Only two in 10 physicians report having time to see more patients and assume more duties.

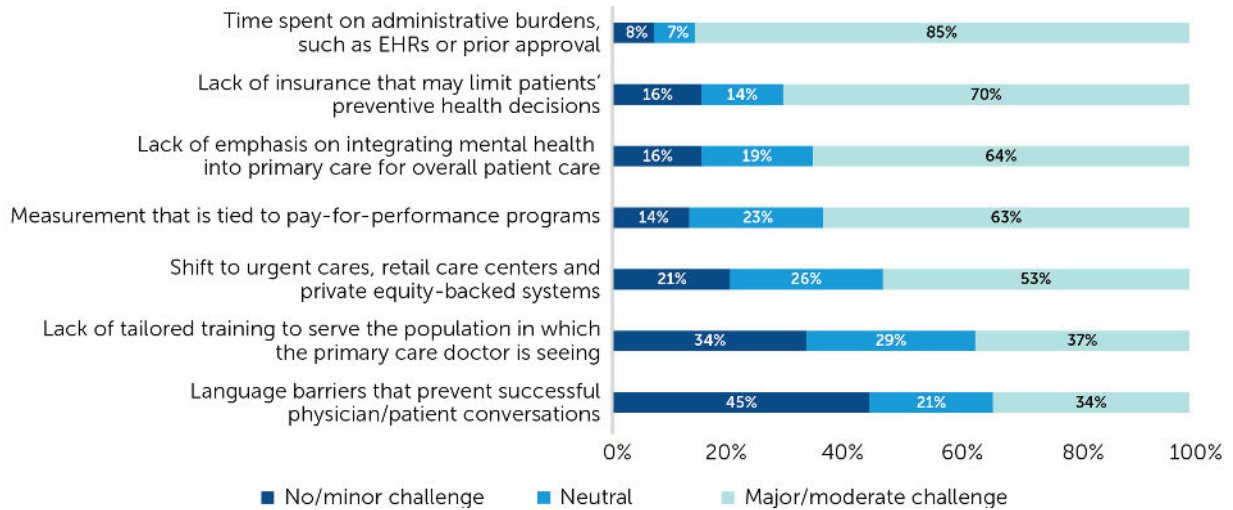
A higher proportion of employed physicians (35%) than independent physicians (24%) and female physicians (41%) than male physicians (27%) are overextended and overworked; conversely, a higher proportion of independent physicians (32%) than employed physicians (16%) and male physicians (24%) than female physicians (15%) have time to see more patients and assume more duties.

Proportion of Physicians Who Selected the Following Responses by Practice Type and Gender

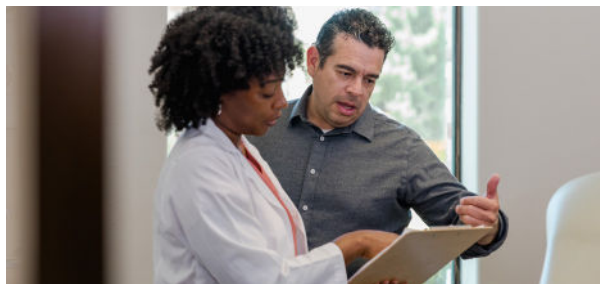
	Employed Physicians	Independent Physicians	Female Physicians	Male Physicians
Have time to see more patients/assume more duties	16%	32%	15%	24%
Are overextended and overworked	35%	24%	41%	27%

Q4: How would you characterize each of the following in terms of being a challenge to primary care's role in providing high-quality, cost-efficient health care, if at all?

Perceptions Surrounding Impact of Challenges to Primary Care by Percentage of Physicians



The top four challenges impacting primary care's role in providing high-quality, cost-efficient health care are administrative burdens (85%), lack of insurance for patients (75%), not prioritizing mental health integration (64%) and pay-for-performance measurement (63%). More than half of physicians (53%) also identify shifts to urgent cares/retail centers/private equity-backed systems as a challenge.



More physicians ≤45 years old than physicians 46+ years old view administrative burdens, lack of insurance for patients and not prioritizing mental health integration as a challenge to primary care.

Proportion of Physicians Who Rate the Following as a Moderate/Major Challenge by Age

	Physicians ≤45 Years Old	Physicians 46+ Years Old
Time spent on administrative burdens, such as EHRs or prior approval	87%	83%
Lack of insurance that may limit patients' preventive health decisions	73%	67%
Lack of emphasis on integrating mental health into primary care for overall patient care	68%	60%

There were also significant differences in perception of administrative burdens and lack of insurance by patients as a challenge by race/ethnicity.

Proportion of Physicians Who Rate the Following as a Moderate/Major Challenge by Race/Ethnicity

	Asian Physicians	Black Physicians	White Physicians
Time spent on administrative burdens, such as EHRs or prior approval	80%	–	87%
Lack of insurance that may limit patients' preventive health decisions	74%	78%	67%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.

More specialty physicians (73%) than primary care physicians (66%) rated lack of insurance for patients as a challenge to primary care.



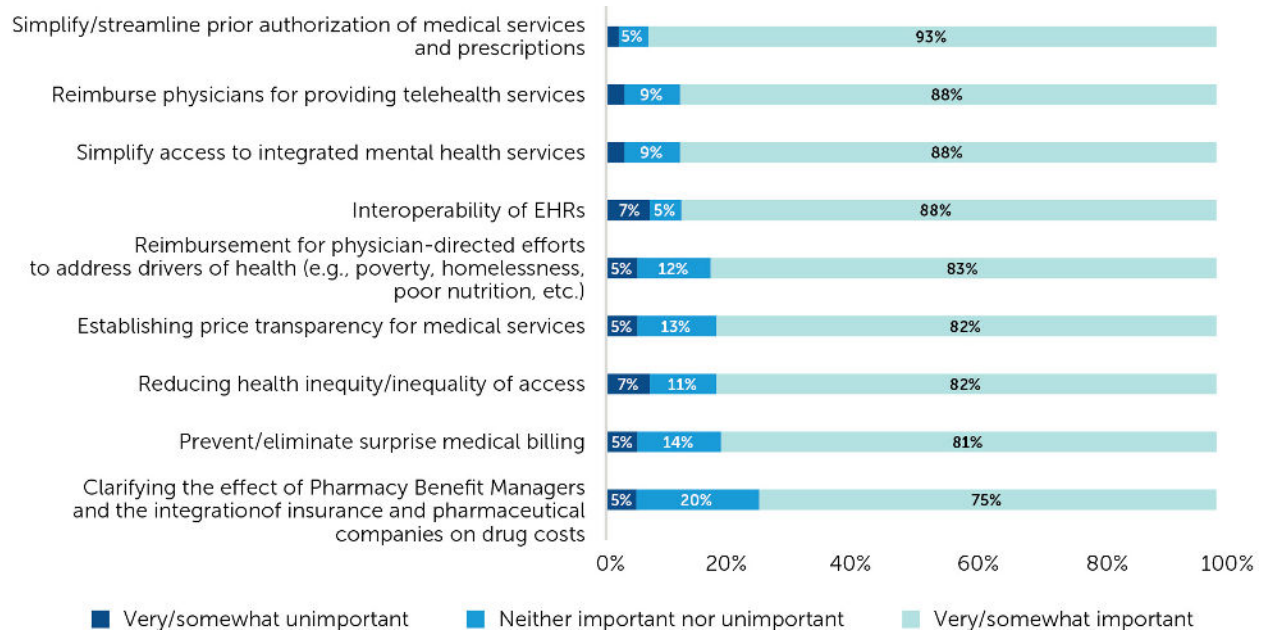
Not prioritizing mental health integration was viewed as a challenge by more primary care physicians (68%) than specialty physicians (61%), employed physicians (68%) than independent physicians (53%), physicians ≤45 years old (68%) than physicians 46+ years old (60%), female physicians (73%) than male physicians (59%) and urban physicians (67%) than suburban physicians (62%).

Proportion of Physicians Who Rate Not Prioritizing Mental Health Integration as a Moderate/Major Challenge

	2022
Primary Care Physicians	68%
Specialty Physicians	61%
Employed Physicians	68%
Independent Physicians	53%
Physicians ≤45 Years Old	68%
Physicians 46+ Years Old	60%
Female Physicians	73%
Male Physicians	59%
Suburban Physicians	62%
Urban Physicians	67%

Q5: Please rate how important, if at all, each of the following actions would be to physicians for ensuring access to high-quality, cost-efficient care for all.

Importance of Actions for Physicians to Ensure Access to Care by Percentage of Physicians



A majority (75%-93%) of physicians place high importance across each of the proposed actions to help ensure access to high-quality, cost-efficient care for all. The actions identified as important by the most physicians included simplifying prior authorization (93%), reimbursing physicians for providing telehealth services (88%), simplifying access to integrated mental health services (88%), and advancing interoperability of EHRs (88%).

A higher proportion of female physicians than male physicians rated eight of the nine actions as important.

Proportion of Physicians Who Rate the Following as Very/ Somewhat Important by Gender

	Female Physicians	Male Physicians
Simplify/streamline prior authorization for medical services and prescriptions	96%	91%
Reimburse physicians for providing telehealth services	90%	86%
Simplify access to integrated mental health services	93%	84%
Reimbursement for physician-directed efforts to address drivers of health (e.g., poverty, homelessness, poor nutrition, etc.)	86%	81%
Establishing price transparency for medical services	87%	79%
Reducing health inequity/inequality of access	90%	77%
Prevent/eliminate surprise medical billing	84%	79%
Clarifying the effect of PBMs and the integration of insurance and pharmaceutical companies on drug costs	78%	73%

A higher proportion of physicians ≤ 45 years old than physicians 46+ years old rated five of the nine actions as important.

Proportion of Physicians Who Rate the Following as Very/ Somewhat Important by Age

	Physicians ≤ 45 Years Old	Physicians 46+ Years Old
Reimburse physicians for providing telehealth services	90%	86%
Simplify access to integrated mental health services	90%	85%
Reimbursement for physician-directed efforts to address drivers of health (e.g., poverty, homelessness, poor nutrition, etc.)	87%	79%
Establishing price transparency for medical services	85%	79%
Reducing health inequity/inequality of access	87%	77%

A higher proportion of Black physicians than Asian physicians and white physicians rated three of the top five actions as important.

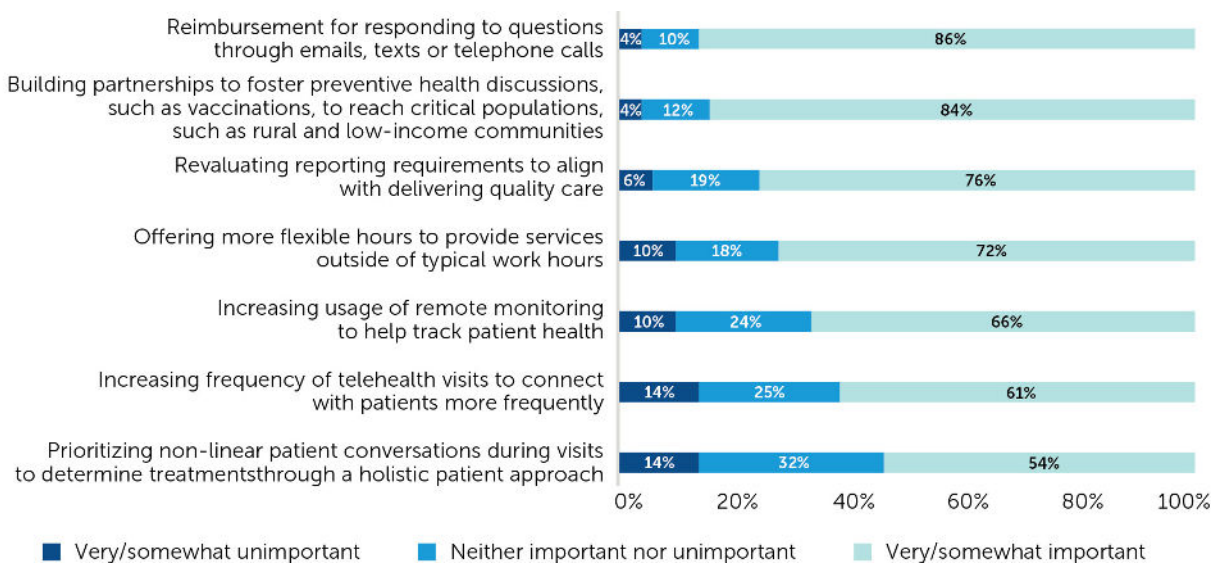
Proportion of Physicians Who Rate the Following as Very/Somewhat Important by Race/Ethnicity

	Asian Physicians	Black Physicians	White Physicians
Reimburse physicians for providing telehealth services	86%	95%	88%
Interoperability of EHRs	86%	94%	88%
Reimbursement for physician-directed efforts to address drivers of health (e.g., poverty, homelessness, poor nutrition, etc.)	85%	93%	82%

Additionally, simplifying access to integrated mental health services was rated as important by more primary care physicians (91%) than specialty physicians (85%).

Q6: Please rate how important, if at all, each of the following strategies would be to improving primary care’s role in enhancing access and health outcomes for patients.

Importance of Strategies for Improving Primary Care’s Role in Patient Access/Outcomes by Percentage of Physicians



At least half of physicians (54%-86%) place high importance across each of the proposed strategies to improve primary care’s role in enhancing access and health outcomes for patients. The strategies identified as important by the most physicians included reimbursement for responding to questions through emails, texts or telephone calls (86%); building partnerships to foster preventive health discussions (84%); reevaluating reporting requirements to align with delivering quality care (76%) and offering more flexible hours to provide services outside of typical work hours (72%).

For six of the seven proposed strategies to improve primary care, a higher proportion of female physicians than male physicians found them to be important.

Proportion of Physicians Who Rate the Following as Very/Somewhat Important by Gender

	Female Physicians	Male Physicians
Reimbursement for responding to questions through emails, texts or telephone calls	89%	84%
Building partnerships to foster preventive health discussions, such as vaccinations, to reach critical populations, such as rural and low-income communities	89%	81%
Reevaluating reporting requirements to align with delivering quality care	79%	74%
Offering more flexible hours to provide services outside of typical work hours	75%	70%
Increasing frequency of telehealth visits to connect with patients more frequently	68%	57%
Prioritizing non-linear patient conversations during visits to determine treatments through a holistic patient approach	61%	49%

For five of the seven proposed strategies, a higher proportion of urban physicians than suburban and/or rural physicians found them to be important.

Proportion of Physicians Who Rate the Following as Very/Somewhat Important by Geography

	Rural Physicians	Suburban Physicians	Urban Physicians
Reevaluating reporting requirements to align with delivering quality care	–	74%	79%
Offering more flexible hours to provide services outside of typical work hours	64%	–	74%
Increasing usage of remote monitoring to help track patient health	58%	64%	71%
Increasing frequency of telehealth visits to connect with patients more frequently	54%	–	65%
Prioritizing non-linear patient conversations during visits to determine treatments through a holistic patient approach	–	50%	57%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.

For four of the seven strategies, more employed physicians found them to be helpful than independent physicians.

Proportion of Physicians Who Rate the Following as Very/Somewhat Important by Practice Type

	Employed Physicians	Independent Physicians
Building partnerships to foster preventive health discussions, such as vaccinations, to reach critical populations, such as rural and low-income communities	86%	79%
Increasing usage of remote monitoring to help track patient health	69%	57%
Increasing frequency of telehealth visits to connect with patients more frequently	63%	56%
Prioritizing non-linear patient conversations during visits to determine treatments through a holistic patient approach	57%	42%

There were also significant differences in rating strategies as important to improve primary care by race/ethnicity.

Proportion of Physicians Who Rate the Following as Very/Somewhat Important by Race/Ethnicity

	Asian Physicians	Black Physicians	Hispanic Physicians	White Physicians
Building partnerships to foster preventive health discussions, such as vaccinations, to reach critical populations, such as rural and low-income communities	86%	93%	–	83%
Reevaluating reporting requirements to align with delivering quality care	75%	–	87%	75%
Offering more flexible hours to provide services outside of typical work hours	78%	–	–	69%
Increasing usage of remote monitoring to help track patient health	74%	–	–	63%
Increasing frequency of telehealth visits to connect with patients more frequently	67%	78%	71%	57%
Prioritizing non-linear patient conversations during visits to determine treatments through a holistic patient approach	61%	66%	66%	48%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.

Additionally, a higher proportion of primary care physicians (58%) than specialty physicians (50%) rated prioritizing non-linear patient conversations during visits as important.

Q7: Please rate how much, if at all, you are experiencing shortages for the following staff roles.

Level of Staff Shortages Experienced by Role in Practice

	Total Base Size by Role	% Experiencing ANY shortages for this role	Experiencing <u>no shortages</u> for this role	Experiencing <u>minimal shortages</u> for this role	Experiencing <u>moderate shortages</u> for this role	Experiencing <u>significant shortages</u> for this role	<u>NET:</u> Experiencing significant + moderate shortages
Registered Nurses	(n=1341)	90%	10%	17%	33%	40%	73%
Nursing Assistants	(n=1229)	86%	14%	30%	32%	24%	56%
Licensed Clinical Social Workers	(n=1158)	85%	15%	25%	30%	30%	60%
Physicians	(n=1448)	84%	16%	21%	34%	30%	63%
Licensed Practical Nurses	(n=1200)	83%	17%	24%	34%	25%	59%
Patient Care Technicians	(n=1109)	82%	18%	31%	33%	18%	51%
Receptionists and Administrative Assistants	(n=1442)	82%	18%	33%	30%	19%	49%
Certified Nurse Specialists	(n=1007)	79%	21%	29%	32%	18%	50%
Laboratory Technicians	(n=1073)	79%	21%	35%	30%	14%	44%
Surgical Assistants	(n=792)	73%	27%	30%	30%	13%	43%
Nurse Practitioners	(n=1304)	70%	30%	30%	29%	12%	40%
Physician Assistants	(n=1199)	70%	30%	34%	26%	11%	37%
Medical Billers and Coders	(n=1268)	69%	31%	35%	25%	9%	34%
Certified Registered Nurse Anesthetists	(n=791)	65%	35%	31%	21%	14%	34%
Transcriptionists	(n=814)	60%	40%	31%	21%	9%	30%
Certified Nurse Midwives	(n=668)	59%	41%	30%	20%	9%	29%

Staff shortages across all the respective staffing roles are reported by physicians, with registered nurses (90%), nursing assistants (86%), social workers (85%), physicians (84%) and licensed practice nurses (83%) identified by the most physicians as the roles with shortages.

Across all roles, more employed physicians reported shortages than independent physicians.

Proportion of Physicians who Reported Shortage of Staff Role by Practice Type

	Employed Physicians	Independent Physicians
Registered Nurses	92%	81%
Nursing Assistants	89%	78%
Licensed Clinical Social Workers	87%	74%
Physicians	87%	74%
Licensed Practical Nurses	86%	70%
Patient Care Technicians	85%	71%
Receptionists & Administrative Assistants	84%	75%
Certified Nurse Specialists	82%	67%
Laboratory Technicians	83%	63%
Surgical Assistants	77%	63%
Nurse Practitioners	73%	59%
Physician Assistants	73%	60%
Medical Billers and Coders	71%	64%
Certified Registered Nurse Anesthetists	67%	58%
Transcriptionists	64%	49%
Certified Nurse Midwives	63%	47%



For six of the seven top-reported staff roles with shortages, a higher proportion of female physicians reported shortages than male physicians.

Proportion of Physicians Who Reported Shortage of Staff Role by Gender

	Female Physicians	Male Physicians
Registered Nurses	92%	88%
Nursing Assistants	90%	84%
Physicians	87%	82%
Licensed Practical Nurses	86%	81%
Receptionists & Administrative Assistants	87%	79%
Licensed Clinical Social Workers	90%	81%

For nine of the 16 staff roles, a higher proportion of physicians ≤45 years old than physicians 46+ reported shortages.

Proportion of Physicians Who Reported Shortage of Staff Role by Age

	Physicians ≤45 Years Old	Physicians 46+ Years Old
Licensed Clinical Social Workers	88%	82%
Patient Care Technicians	86%	78%
Receptionists and Administrative Assistants	85%	79%
Certified Nurse Specialists	82%	75%
Laboratory Technicians	84%	74%
Surgical Assistants	78%	70%
Transcriptionists	65%	57%
Nursing Assistants	88%	85%
Physicians	86%	82%

A higher proportion of rural physicians (89%) than suburban physicians (83%) reported a shortage of physicians.

Additionally, more specialist physicians than primary care physicians reported shortages of surgical assistants, physician assistants and certified registered nurse anesthetists.

Proportion of Physicians Who Reported Shortage of Staff Role by Specialty

	Primary Care Physicians	Specialist Physicians
Surgical Assistants	65%	78%
Physician Assistants	66%	74%
Certified Registered Nurse Anesthetists	60%	68%

There were also significant differences by race/ethnicity in reported shortages of staff roles.

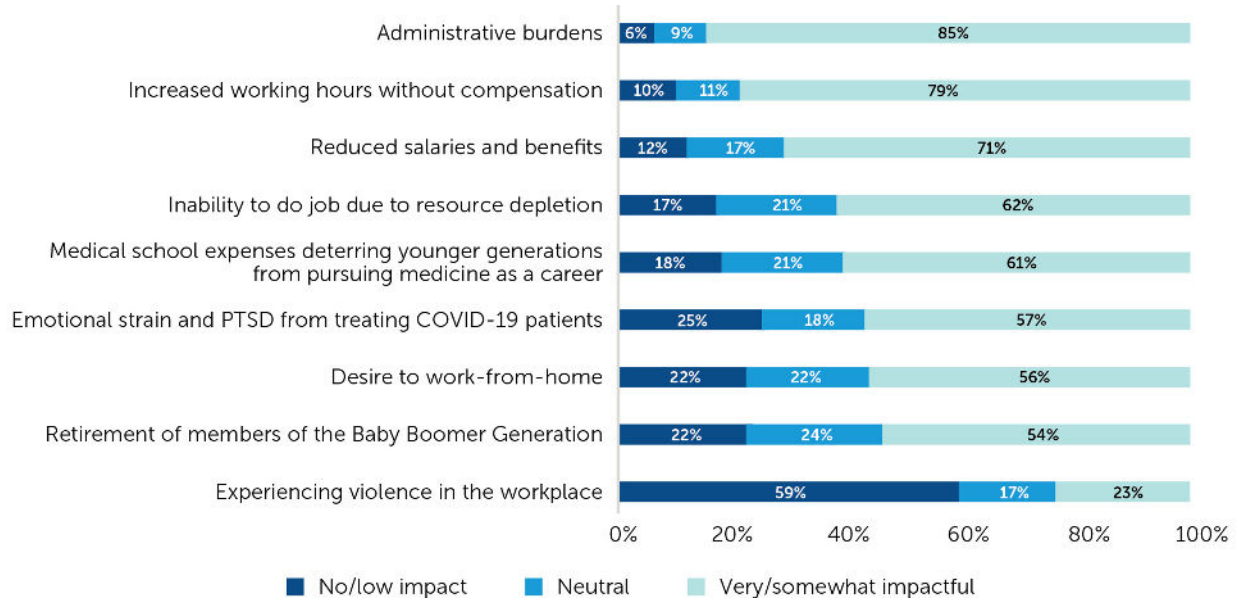
Proportion of Physicians Who Reported Shortage of Staff Role by Race/Ethnicity

	Asian Physicians	Black Physicians	Hispanic Physicians	White Physicians
Physicians	87%	–	–	82%
Patient Care Technicians	82%	77%	92%	82%
Certified Nurse Specialists	82%	–	89%	76%
Laboratory Technicians	84%	–	85%	76%
Medical Billers and Coders	73%	58%	–	–
Certified Registered Nurse Anesthetists	71%	–	–	62%
Transcriptionists	66%	–	71%	57%
Certified Nurse Midwives	64%	47%	83%	55%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.

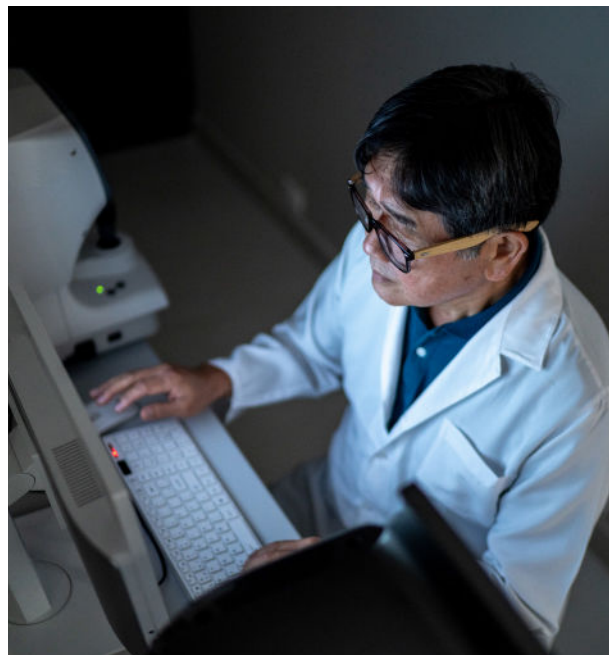
Q8: Please rate the impact of each of the following, if any, on staff shortages in your practice environment.

Impact of Potential Factors Contributing to Staff Shortages by Percentage of Physicians



Among physicians who reported staff shortages, the most impactful contributing factors were administrative burdens (85%), increased working hours without compensation (79%) and reduced salaries/benefits (71%). For eight of the nine factors, more than half of physicians rated them to be impactful on staff shortages (54%-85%).

Almost one-quarter (23%) of physicians rated experiencing violence in the workplace as a contributing factor to staff shortages.



More employed physicians than independent physicians, physicians ≤45 years old than 46+ years old, female physicians than male physicians, non-white physicians than white physicians and urban physicians than suburban physicians reported increased working hours without compensation to be impactful on shortages.

Proportion of Physicians Who Reported Increased Working Hours without Compensation as Very/Somewhat Impactful on Shortages

	2022
Employed Physicians	82%
Independent Physicians	70%
Physicians ≤45 Years Old	84%
Physicians 46+ Years Old	75%
Female Physicians	84%
Male Physicians	76%
Non-White Physicians	82%
White Physicians	77%
Suburban Physicians	76%
Urban Physicians	82%

More physicians ≤45 years old than physicians 46+ years old and Asian, Black and Hispanic physicians than white physicians reported reduced salaries and benefits to be impactful on shortages.

Proportion of Physicians Who Reported Reduced Salaries and Benefits as Very/Somewhat Impactful on Shortages

	2022
Physicians ≤45 Years Old	73%
Physicians 46+ Years Old	68%
Asian Physicians	74%
Black Physicians	81%
Hispanic Physicians	80%
White Physicians	77%

Significantly more physicians 46+ years old (61%) than physicians ≤45 years old (47%) and suburban physicians (57%) than urban physicians (50%) reported retirement of members of the Baby Boomer generation as impactful on shortages.

Proportion of Physicians Who Reported Retirement of Members of the Baby Boomer Generation as Very/Somewhat Impactful on Shortages

	2022
Physicians ≤45 Years Old	47%
Physicians 46+ Years Old	61%
Suburban Physicians	57%
Urban Physicians	50%

Non-white and female physicians were more likely to report experiencing violence in the workplace as impactful on staff shortages.

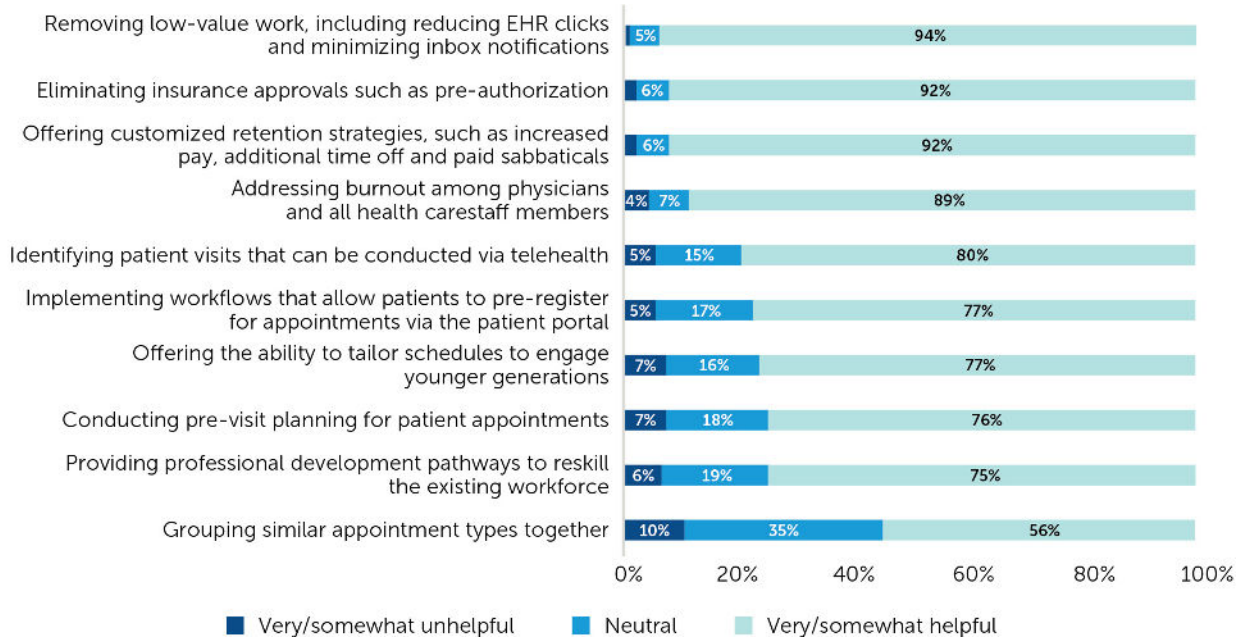
Proportion of Physicians Who Reported Experiencing Violence in the Workplace as Very/Somewhat Impactful on Shortages

	2022
Female Physicians	27%
Male Physicians	21%
Asian Physicians	28%
Black Physicians	32%
Hispanic Physicians	33%
White Physicians	19%



Q9: Please rate how helpful, if at all, each of the following solutions would be in addressing staff shortages.

Helpfulness of Solutions to Address Staff Shortages by Percentage of Physicians



More than half of physicians (56%-94%) place high importance across each of the proposed solutions to address staff shortages, with at least nine in 10 reporting removing low-value work (94%), eliminating insurance approvals (92%), offering customized retention strategies (92%) and addressing burnout among health care staff members (89%) as important.

When it comes to eliminating insurance approvals such as pre-authorization, more independent physicians (95%) and male physicians (94%) reported it as helpful than employed physicians (92%) and female physicians (90%).

Proportion of Physicians Who Reported Eliminating Insurance Approvals as Very/Somewhat Helpful

	2022
Employed Physicians	92%
Independent Physicians	95%
Female Physicians	90%
Male Physicians	94%

Conversely, for offering customized retention strategies, more employed physicians (94%) than independent physicians (85%) and female physicians (94%) than male physicians (91%)

reported it to be helpful. Additionally, more physicians ≤45 years old (96%) than physicians 46+ (89%) reported it as helpful.

Proportion of Physicians Who Reported Offering Customized Retention Strategies as Very/Somewhat Helpful

	2022
Employed Physicians	94%
Independent Physicians	85%
Physicians ≤45 Years Old	96%
Physicians 46+ Years Old	89%
Female Physicians	94%
Male Physicians	91%

For eight of the 10 strategies, more Black physicians than white physicians found them to be helpful. There were also other significant differences by race/ethnicity.

Proportion of Physicians Who Reported Strategy as Very/Somewhat Helpful by Race/Ethnicity

	Asian Physicians	Black Physicians	Hispanic Physicians	White Physicians
Removing low-value work, including reducing EHR clicks and minimizing inbox notifications	92%	99%	97%	94%
Eliminating insurance approvals such as pre-authorization	91%	–	97%	92%
Offering customized retention strategies, such as increased pay, additional time off and paid sabbaticals	93%	100%	94%	91%
Identifying patient visits that can be conducted via telehealth	93%	89%	–	77%
Implementing workflows that allow patients to pre-register for appointments via the patient portal	83%	93%	73%	74%
Offering the ability to tailor schedules to engage younger generations	81%	89%	–	73%
Conducting pre-visit planning for patient appointments	–	85%	–	75%
Providing professional development pathways to reskill the existing workforce	80%	81%	81%	72%
Grouping similar appointment types together	67%	73%	63%	49%

NOTE: An empty cell means there is not a statistically significant difference for that demographic.



CONCLUSION

The Physicians Foundation's *2022 Survey of America's Physicians* shows that physicians continue to face urgent challenges that impact their day-to-day work. Before the pandemic and now, regulations and compliance requirements have changed the landscape of physician practice, and the resulting environment is rife with capacity issues that have impacted their ability to deliver care to patients and their overarching outlook on being a physician.

One-third of physicians report that their current practice is overextended and overworked, and an additional half report being at full capacity in their current practice. Overall, approximately one in three physicians have experienced a reduction in staff over the past year. This could, in part, be tied to the fact that approximately one in five physicians reported cutting back on their work hours.

A main driver of concern about the capacity of the health care system is staff shortages, which physicians reported across all staff roles, with the most shortages reported for registered nurses, nursing assistants, social workers, physicians and licensed practice nurses. Physicians identified administrative burdens, increased working hours without compensation and reduced salaries/benefits as the most impactful factors contributing to these shortages. Additionally—and upsettingly—almost one-quarter of physicians rated experiencing violence in the workplace as a contributing factor to staff shortages.

Understandably, these capacity issues have had a devastating effect on physicians' views on their profession. More than half of physicians do not have high professional morale, and more than half do not have positive feelings about the current state or future of the medical profession. To make an urgent situation even more dire, current physician outlook points to future mounting challenges, with less than half of physicians

agreeing that they would recommend medicine as a career to young people. Additionally, more than one in five physicians would like to retire within the next year.

With staffing shortages on track to worsen, it's clear an immediate course correction is needed. Physicians support proposed solutions to address staff shortages, pointing to removing low-value work, eliminating insurance approvals, offering customized retention strategies and addressing burnout among physicians/staff as the most vital.

In order to shift our health care system to one where we prevent disease rather than just treat disease, we know that primary care plays one of the most important roles. Unfortunately, physicians are also facing mounting challenges in primary care, most notably administrative burdens, lack of insurance for patients, not prioritizing mental health integration and pay-for-performance measurement.

Physicians have identified which strategies are most vital to immediately improve primary care's role in enhancing access and improving health outcomes for patients. At least half of physicians place high importance across each of the proposed strategies, with the most important being reimbursement for responding to questions through emails, texts or telephone calls; building partnerships to foster preventive health discussions to reach critical populations and reevaluating reporting requirements to align with delivering quality care.

The findings point to a worrisome inflection point when it comes to health care in the United States. Without action to address how we deliver primary care and how we staff our care centers, shortages will grow, and the resulting health of the country will worsen. The path towards this action is clear—physicians have identified what would most support them in ensuring access to high-quality, cost-efficient care for all patients. Approximately nine in 10 physicians identified simplifying/streamlining prior authorization for medical services and prescriptions; reimbursing physicians for providing telehealth services; simplifying access to integrated mental health services and advancing interoperability of EHRs as important.

There is extensive action needed on the systemic, structural, organizational and policy level to improve the state of physician practice in 2023 and beyond. The Physicians Foundation has measured the sentiment surrounding the practice environment not only to place a marker in the ground of where things stand, but also to spur action and drive change. Immediate action is not only needed for physicians, but for every one of us who touches the health care system. The proposed strategies and solutions, which have been identified by physicians as vital to enhance physician practice and to improve patient outcomes, are an excellent place to start. We all have a stake in this.

METHODOLOGY

The 2022 survey was sent by email to a list of physicians derived from Medscape’s proprietary database. Medscape leveraged their proprietary distribution of percentage of primary care physicians vs. specialist physicians to set quotas for this study. The survey was fielded from September 28 through October 7, 2022, and the data presented is based on 1,501 responses. For the purposes of this survey report, responses addressing gender demographics are identified using the binary terms male and female.

Responses by Physician Type

Practice	2022
Primary Care	45%
Specialty	55%

Forty-five percent of physicians who responded to the survey practice primary care, defined in this survey as family medicine, general practice, internal medicine and pediatrics, while the remaining 55% identified as a practicing physician in one of the following specialties: addiction medicine, allergy/immunology, cardiology, dermatology, endocrinology/diabetes, gastroenterology, gynecology oncology, HIV/AIDS specialist, infectious disease, interventional cardiology, intensive care/critical care, medical oncology, nephrology, neurology, OB/GYN, oncology/hematology, orthopedics/orthopedic surgery, otolaryngology/ENT, pain management/pain medicine, pathology, pediatrics sub-specialty, radiation oncology, rheumatology, surgeon or urology.

Responses by Gender

Gender	2022
Female	39%
Male	61%
Other/Prefer not to answer	<1%

Sixty-one percent of physicians who responded to the survey are male, 39% are female and less than 1% indicated they are other or preferred to not designate a gender.

Responses by Race/Ethnicity

Race/ethnicity	2022
Asian	25%
Black	6%
Hispanic	6%
White	62%
Other/Prefer not to answer	3%

Sixty-two percent of physicians who responded to the survey are white, 25% are Asian, 6% are Hispanic and 6% are Black. Three percent of respondents indicated they are other or chose not to disclose their race/ethnicity. The representation in the survey is relative with active physicians’ demographic breakdown; according to American Association of Medical Colleges, 56% of physicians are white, 14% are Asian, 5.8% are Hispanic and 5% are Black.

Responses by Geography

Geography	2022
Rural	10%
Suburban	49%
Urban	42%

Forty-nine percent of physicians who responded to the survey practice in a suburban area, 42% practice in an urban area and 10% practice in a rural area.

Responses by Practice Status

Practice status	2022
Independent	24%
Employed by hospital or hospital-owned medical group	46%
Employed by a physician-owned medical group	18%
Employed by non-physician owned medical group	10%
Other	3%

Forty-six percent of physicians who responded to the survey are employed by a hospital or hospital-owned medical group, 24% are independently employed (practice owner or partner), 18% are employed by a physician-owned medical group and 10% are employed by a non-physician-owned medical group.

Responses by Age

Age	2022
18-35 years old	18%
36-45 years old	31%
46-55 years old	22%
56-64 years old	17%
65+ years old	12%

The ages of survey respondents generally correspond to the ages of all physicians.

MARGIN OF ERROR ASSESSMENT

The sample for this study of N=1501 represents the Medscape online population with a margin of error of $\pm 2.53\%$, at a 95% confidence level. The survey used a point estimate (a statistic) of 50%, given a binomial distribution.

ABOUT THE PHYSICIANS FOUNDATION

The Physicians Foundation is a nonprofit seeking to advance the work of practicing physicians and help them facilitate the delivery of high-quality health care to patients. As the U.S. health care system continues to evolve, The Physicians Foundation is steadfast in strengthening the physician-patient relationship, supporting medical practices' sustainability and helping physicians navigate the changing health care system. The Physicians Foundation pursues its mission through research, education and innovative grant making that improves physician wellbeing, strengthens physician leadership, addresses drivers of health and lifts physician perspectives.

For more information, visit www.physiciansfoundation.org.

Signatory Medical Societies of The Physicians Foundation include:

- Alaska State Medical Association
- California Medical Association
- Connecticut State Medical Society
- Denton County Medical Society (Texas)
- El Paso County Medical Society (Colorado)
- Florida Medical Association
- Hawaii Medical Association
- Louisiana State Medical Society
- Medical Association of Georgia
- Medical Society of New Jersey
- Medical Society of the State of New York
- Nebraska Medical Association
- New Hampshire Medical Society
- North Carolina Medical Society
- Medical Society of Northern Virginia
- South Carolina Medical Association
- Tennessee Medical Association
- Texas Medical Association
- Vermont Medical Society
- Washington State Medical Association

For further information about this survey, contact:



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