

Utah's Podiatrist Workforce

June 2004

Utah has an adequate number of podiatrists to meet the needs of the population. The primary reason for the state's success is the podiatry residency program at the Salt Lake V.A. hospital. Because of this residency program, Utah should have enough podiatrists to serve the state for many years.

INTRODUCTION

Since 1997, the Utah Medical Education Council has been conducting surveys of health professionals to determine the actual supply and distribution of health care providers throughout the state. In 2001, a survey was mailed to all 163 podiatrists licensed in Utah. Seventy percent of Utah's podiatrists responded to the survey and the resulting data was analyzed to gain a better understanding of Utah's podiatrist workforce. As of late 2001, Utah had about 107 active podiatrists, or 4.7 podiatrists per 100,000 population.

In 1997, the American Podiatric Medical Association (APMA) forecasted that in metropolitan areas with HMO or integrated network plans (such as the Wasatch Front), the need for podiatrists in 2010 would be 3.5 podiatrists per 100,000 population.¹

According to Census and APMA research, Utah ranked 11th highest in state podiatrist supply ratios in 1999. In general, New England and Midwestern states have very high concentrations of podiatrists while Southern and Western states have far fewer; Utah is one big exception in this distribution.

The APMA also estimated that there were 13,300 active podiatrists in the United States in 2000, which meant an average of 4.7 podiatrists per 100,000 people. According to most available statistics, Utah seems to have an appropriate number of podiatrists for its population.

More recently, the APMA conducted a nationwide workforce survey of its members entitled *2002 Podiatric Practice Survey*. The results of that survey enabled the UMEC to make useful comparisons of Utah's workforce with the national podiatrist workforce. This report will make frequent reference to the findings of the national survey.

The purpose of this report is to (1) present an analysis of the 2001 Utah Podiatrist Survey data, (2) discuss the reasons why Utah's podiatrist workforce is so strong, (3) highlight the major issues that challenge the state's podiatrists, and (4) provide recommendations to help preserve Utah's podiatrist workforce.

SURVEY RESULTS

Active Podiatrists in Utah

In September 2001, a survey was sent to all 163 podiatrists licensed in Utah. There were 115 respondents to the survey (70% response rate). Of the 115 respondents, 82 indicated that they practice in the state of Utah, but 6 of these were residents and were removed from the database to prevent skewed results. The number of respondents practicing in Utah (76 excluding residents) was then weighted to account for non-respondents. The resulting data indicate that there were approximately 107 podiatrists working in Utah, meaning that an estimated 66 percent of all podiatrists licensed in Utah actually provided services in the state. Based on the 2001 population estimate of 2,295,971, there were 4.7 podiatrists per 100,000 people in Utah.

¹ *The Marketplace and Podiatric Medicine: A Workforce Update 1997-2010*, APMA, 1997.

Location of Practice

Most podiatrists in Utah (76%) indicated their primary practice was in an urban county, with about 42 podiatrists in Salt Lake, 19 in Utah, 10 in Davis, and 10 in Weber. There were about 25 podiatrists serving the remainder of Utah's population, and the majority of these were in St. George, Cedar City, and Logan. Approximately 11-15 podiatrists (10-14%) were serving Utah's rural population. This rural/urban distribution is consistent with other healthcare professions in Utah. The national data from the APMA survey suggested a similar distribution of podiatrists working in urban or suburban settings (80%) and rural areas (16%). This data suggests that podiatrists are far more likely to serve metropolitan areas where there is a greater likelihood of specialized healthcare. *Figure 1* represents the combination of podiatrists' primary and secondary locations of practice.

Figure 1 - Utah Podiatrists by Geographic Area, 2001

Preston, ID	1		
Logan	4		
Brigham City	1		
Ogden/ Roy	10		
Layton/ Kaysville/ Farmington	6		
Centerville/ Bountiful	6		
Salt Lake/ Tooele	59		
Park City/ Heber	3	Vernal	2
Lehi/ Am. Fork/ Pleasant Grove	7		
Orem/ Provo	16		
Springville/ Spanish Fork	6	Price	1
Payson/ Santaquin	3		
Nephi	1		
Manti	1	Moab	1
Richfield	1		
Beaver	1		
Cedar City	4		
St. George	10	Blanding	1
Mesquite, NV	1	Cortez, CO	1

Podiatrists in Weber County were significantly older than podiatrists in other counties. This age difference probably accounts for the findings that show Weber County podiatrists treated significantly more charity patients than podiatrists in other counties and also said full-time for their work settings was fewer hours.

Podiatrists in rural counties worked in significantly more cities than podiatrists in urban counties. Rural podiatrists also treated a higher percentage of Medicare patients, and a lower percentage of managed care patients. Rural podiatrists also had smaller waiting periods for new patient appointments.

The median percent of time that podiatrists in Utah spent at their primary practice was 88%. Thirty-nine percent of Utah's podiatrists worked at only one location. Another 31 percent worked at 2 locations, 22 percent at 3 locations, and only 8 percent worked at 4 or more locations.

The number of cities in which podiatrists worked was best explained by their age and their Medicaid and Medicare patient percentages. These three variables accounted for 30 percent of the variability in the number of cities. Older podiatrists were more likely to work in only one city. Also, the more Medicaid and Medicare patients that podiatrists had, the more likely they were to work in more than one city.

Certification

Of the 107 podiatrists working in Utah, 63 percent were certified by the American Board of Podiatric Surgery (ABPS) while 91 percent practiced podiatric surgery. Also, only 20 percent of Utah's podiatrists were certified by the American Board of Podiatric Orthopedics and Primary Podiatric Medicine (ABPOPPM), but 80 percent practiced podiatric orthopedics. The national percentages are similar to Utah's, with about 52 percent certified by the ABPS and 22 percent certified by the ABPOPPM. These low levels of board certification can be accounted for in a number of ways.

First, most podiatrists will certify in surgery rather than orthopedics because surgery certification is usually required for hospital privileges, and one certification is sufficient for most other purposes. Second, the process of moving from board qualified to board certified takes longer for podiatrists than most health professions (there were about six podiatrists that were board qualified and working toward surgery certification). Lastly, board certification in podiatry developed later than many other health professions, so many of Utah's podiatrists might not have needed to obtain certification when they started practicing.

Podiatrists certified by the ABPS were older and had higher average incomes than podiatrists without certification. Podiatrists *practicing* surgery also had higher incomes.

Practice Type

Podiatrists in Utah worked primarily in private practice (70%) and group practice (26%) settings. There were only about four podiatrists that worked primarily in other settings (*see Figure 2*). However, 13 podiatrists (12%) indicated that their secondary practice is in a hospital. Nationally, the statistics for podiatrists in solo settings (57%) and group settings (37%) are a little different. The probable reason for this difference is that Utah's survey used the words "private practice" instead of "solo practice," and respondents could have interpreted "private" differently. Taking this difference into consideration, Utah's workforce is probably quite similar to the national percentages.

Podiatrists in private practices indicated that full-time was fewer hours than group or government/hospital staff podiatrists. Podiatrists in private practices also had shorter in-office waiting times.

Podiatrists in government/hospital settings treated many more patients per week than podiatrists in private or group practices, and group practice podiatrists treated significantly more patients than private practice podiatrists. Government/hospital staff podiatrists also treated

significantly fewer Medicare patients and had more waiting days for appointments than podiatrists in other practice settings.

Figure 2 – Utah Podiatrists by County and Practice Type, 2001

County	Practice Type			Total
	Private	Group	Gov./ Hospital	
Cache	3			3
Carbon	1			1
Davis	7	1	1	9
Iron	3			3
Salt Lake	25	11	3	39
San Juan	1			1
Sevier	1			1
Summit	1			1
Tooele	1			1
Uintah	1			1
Utah	13	6		19
Washington	4	4		8
Weber	7	3		10
Total	68	25	4	97

Time at Practice

While most podiatrists in Utah worked in either private or group practice settings, the number of hours they worked, and also what they considered full-time, has more variability. Forty-two percent of Utah's podiatrists worked 40-49 hours/week providing patient care, while 17 percent worked 30-39 hours/week and 17 percent worked 50-59 hours/week. With a very similar distribution, 49 percent also said 40-49 hours is considered full-time for their work setting, while 27 percent said 30-39 hours is full-time and 21 percent said 50-59 hours is considered full-time. This suggests that most podiatrists were working the total number of hours expected for their work settings and they were using most of that time to provide patient care. Nationally, podiatrists are working a similar number of hours: 38 percent worked 40-49 hours/week, 22 percent worked 30-39 and 19 percent worked 50-59 hours/week. All of this data suggests podiatrists were normally distributed by number of hours working.

On average, podiatrists in Utah spent 39 hours a week providing patient care. About 19 percent of this time was devoted to surgery, and the remainder for primary care. Nationally, podiatrists averaged about 42 hours of work per week, including administration hours.

Four variables accounted for 60 percent of the variability in the number of patient care hours podiatrists provide: days worked per week, number of patients, years planning to practice, and percent of patients that were charity patients. Percent charity patients was the only variable with a negative linear relationship to patient care hours, therefore, the more charity patients a podiatrist treated, the fewer patient care hours he/she was likely to provide.

Fifty-two percent of Utah podiatrists worked 5 days a week, 28 percent worked 4 days a week, and 11 percent worked 6 days a week. About 48 percent of the variability in the number of days a podiatrist worked could be explained by three variables: whether the podiatrist practiced surgery, patient care hours, and income. Podiatrists that didn't practice surgery worked fewer days. Podiatrists were also likely to work more days if they had more patient care hours and lower incomes than other podiatrists.

Figure 3 – Utah Podiatrist Averages, 2001

PODIATRISTS IN UTAH	AVERAGE
Age	48.2
Days/ week	4.5
Patient Care Hours/ week	39.6
Surgery Hours/ week	7.4
Orthop. & Prim. Care Hours/ week	28.1
Percent working in rural county	24%
Number of patients/ week	78.0
Gross Income	\$ 144,000

Retirement

Ten podiatrists indicated that they were planning to retire in the next five years (about 2 per year). Not surprisingly, the best predictors of how long a podiatrist planned to practice were

age, days worked per week, and primary care hours. These three variables accounted for 63 percent of the variability in the number of years that podiatrists planned to continue practicing at their primary location. Older podiatrists planned to work for fewer years, and podiatrists that worked more days and hours planned to work for a longer period of time.

Income

Podiatrist incomes varied greatly in Utah, usually between \$80,000 and \$200,000. The median annual gross income for Utah podiatrists working full-time was \$125,000. It was not possible to accurately compare Utah's median podiatrist income with the national statistics reported by the APMA survey.² However, the Bureau of Labor Statistics reported that the median annual salary of podiatrists nationwide was \$107,560 in 2000. Thus, Utah's podiatrists earned a similar salary to podiatrists nationwide. As expected, most Utah podiatrists that earned less than \$50,000 were not working full-time. Fifty-four percent indicated that their income had increased from five years ago and another 23 percent said it had remained constant. Throughout the nation, the percentage of those with increasing incomes was very similar (56%).

The best predictors of podiatrist income were: number of patients, number of orthopedic/primary care hours, percent of patients that were charity and managed care, and days worked per week. These five variables accounted for 63 percent of the variability in income.

Podiatrists with decreasing incomes had a much higher percentage of fee-for-service and self-paying patients and were more likely to limit Medicaid and Medicare patients.

² The APMA survey contained two income questions: the first asked podiatrists to report their "personal gross income" and the second asked them to report their "net income (after practice expenses, but before taxes)." Since the two questions ask for the same information but had significantly different results, no comparisons were made.

Hospital Privileges & Language Capability

Only 7 percent of Utah's podiatrists did not have hospital privileges. Nationally, 5 percent of podiatrists were without hospital privileges. About 40 percent of Utah's podiatrists provided language interpretation to patients, the most common language being Spanish.

Health Care Teams

About 51 percent of Utah's podiatrists worked with other podiatrists, 34 percent worked with physicians, 17 percent worked with advanced practice nurses, 14 percent worked with pharmacists, 13 percent worked with physician assistants, 6 percent worked with social workers, and about 10 percent worked with another type of health professional. This data suggests that Utah podiatrists were most likely to work with other podiatrists and physicians in providing health care through a team approach.

Number of Patients

Podiatrists in Utah treated an average of 80 patients per week compared to the national average of 101 patients per week. The smaller number of patients per podiatrist can be explained because there is a higher concentration of podiatrists per population in Utah compared to most of the nation. Therefore, most podiatrists in Utah could treat more patients if the demand for services increased.

Fifty-eight percent of the variability in the number of patients a podiatrist treated could be explained by three variables: income, patient care hours, and years planning to practice at primary location. Podiatrists that were planning to practice fewer years at their primary locations were treating more patients than those who were planning to practice for many more years.

Patient Type

The average percentages of patients that podiatrists in Utah treated were 36 percent Medicare, 28 percent managed care, 10 percent fee-for-service, 8 percent Medicaid, 7 percent

self-pay, and 12 percent from other sources. The national statistics were quite similar, with podiatrists treating an average of 39 percent Medicare, 22 percent managed care, 19 percent fee-for-service, 7 percent self-pay, 6 percent Medicaid, and 6 percent from other sources. The major difference between Utah podiatrists and the nation was the higher percentage of managed care patients, probably resulting from the dominance of managed care in the Utah market.

Between 5 and 16 percent of Utah's podiatrists were limiting the number of Medicaid, Medicare, or non-paying patients, indicating that the majority were still willing to accept new patients from any of these groups. About 27 percent offered a sliding-fee payment option.

Figure 4 – Utah Podiatrists by Practice Type and Number of Patients per Week, 2001

Number of Patients	Practice Type			Total
	Private	Group	Gov./ Hospital	
<25	8	1		9
26 - 50	11			11
51 - 75	16	7		23
76 - 100	23	6		29
101 - 125	7	10	1	18
126+	4	3	3	10
Total	69	27	4	100

New Patients

Sixty percent of podiatrists indicated that they can see a new patient in 1 to 2 days, and 61 percent said 1 to 2 days for an established patient. More than 81 percent of podiatrists said their patients spend less than 15 minutes waiting in the office for a scheduled appointment.

Podiatrist Characteristics

Approximately 96 percent of Utah's podiatrists were male and 97 percent were Caucasian. In fact, there were only two podiatrists that indicated another race or ethnicity, therefore neither gender nor race/ethnicity was used in any analysis.

Nationally, about 87 percent were male and 90 percent were Caucasian. Utah typically has a lower number of female and minority health professionals than the national average, so this difference among podiatrists was not surprising. Similar to national trends, however, Utah's younger podiatrists were more likely to be female or minority professionals since podiatry schools have been admitting more individuals from these groups in the past decade.

The average age of Utah podiatrists (48.2) was significantly higher than the national average (44.9).

The majority of Utah's podiatrists were raised in Utah (77%), and most of the others were raised in California and Nevada. Approximately 21 percent grew up in rural areas. *Figure 5* shows that podiatrists who were raised in more rural areas are more likely to practice in rural areas.

Figure 5 – Utah Podiatrists by Upbringing and Location of Practice, 2001

Population Upbringing	Location of Practice		Total
	Urban	Rural	
Frontier	4	4	8
% upbringing	50%	50%	100%
Rural	7	4	11
% upbringing	64%	36%	100%
Urban	63	14	77
% upbringing	82%	18%	100%
Total	74	22	96
% upbringing	77%	23%	100%

Sixty-two percent of Utah's podiatrists graduated from the California College of Podiatric Medicine. Another 14 percent graduated from the Scholl/Illinois College of Podiatric Medicine and 7 percent graduated from Temple University. 39 percent graduated within the ten years prior to the survey (1991-2001).

Eighty-three percent of Utah's podiatrists completed a residency. Of those that completed a residency, 33 percent received their resident training in California, 25 percent in Utah, 9 percent in Arizona, and 7 percent in Michigan. Fifty-three percent completed their residency

since 1991. There were about 4 podiatrists completing a fellowship in Utah at the time of the survey. These statistics show the importance that California's podiatry school has had on Utah.

UTAH'S PODIATRIST WORKFORCE

Utah's Residency Program

Since 1979, there has been a podiatric residency program in Salt Lake City. Originally started at the Doxey-Hatch Medical Center, the program became affiliated with the V.A. hospital in 1987. Since 1993, about 4 podiatrists per year have completed residency training in Utah. Approximately 2 of these 4 residents end up practicing in Utah because they already know the system and have established patients. At present, there are about 20 podiatrists in Utah that received their training from the V.A. program. The existence of this residency program is the primary reason that Utah has a high number of podiatrists per population. This residency program is also a major supplier of podiatrists to other Western states including Idaho, Wyoming, Nevada, and Montana.

ISSUES FACING PODIATRISTS IN UTAH

Insurance

Insurance is the biggest factor in determining the number of podiatrists practicing in Utah. Many insurance companies limit the number of podiatrists on their plans, including the major insurance and managed care plans in Utah. Since there are very few patients that pay for podiatric services with cash, podiatrists must enroll with insurance plans to build a patient base. Residents from the Utah training program are encouraged to seek employment with clinics because the odds of getting on insurance plans increases dramatically.

Diabetes

The number of new diabetic patients is increasing rapidly, probably because of both the increasing numbers of diabetics in the national population and increased awareness about the foot problems that can result from the disease. As the number of diabetic patients increases in Utah, there will be an increased demand for podiatric services. However, this increased demand can be absorbed by existing Utah podiatrists until their patient load approaches the national average.

RECOMMENDATIONS

According to the results of the survey, Utah has a sufficient number of podiatrists to meet the needs of the state's population. This is primarily due to the training program at the V.A. hospital. Therefore, it is important for Utah to preserve this program through continued support from policy makers, health care professionals, and the public.

One way the training program could be enhanced would be to rotate residents to locations outside the V.A., especially in rural areas. This would enable residents to understand the differences between urban and rural practice settings. Increasing the number of residency

locations would require the help of podiatrists and hospitals throughout the state.

Two main factors are contributing to an increased demand for podiatrists throughout the nation. First, podiatrists are receiving increasingly advanced training which will increase the range of patients that podiatrists can serve. Second, the population of the nation is aging which will increase the number of foot problems in the populace and, therefore, increase the demand for podiatrists. For these reasons, it is beneficial for Utah to be training more podiatrists than it needs because additional podiatrists might be needed in the future.

Appendix A – Survey Questions and Results for Podiatrists in Utah

1. Please indicate the location of your primary practice by state and zip code.

County of Practice	Podiatrists
Salt Lake	42
Utah	19
Davis	10
Weber	10
Washington	9
Iron	4
Cache	3
Carbon	1
San Juan	1
Sevier	1
Summit	1
Tooele	1
Uintah	1
Total	107

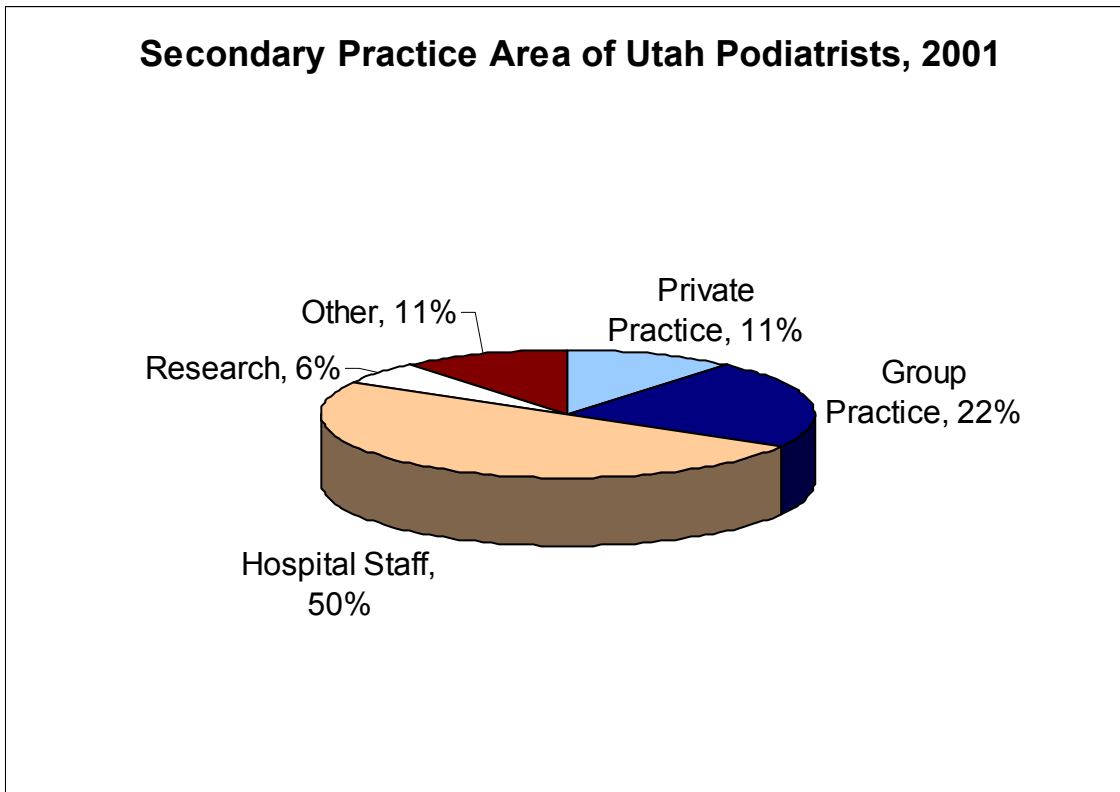
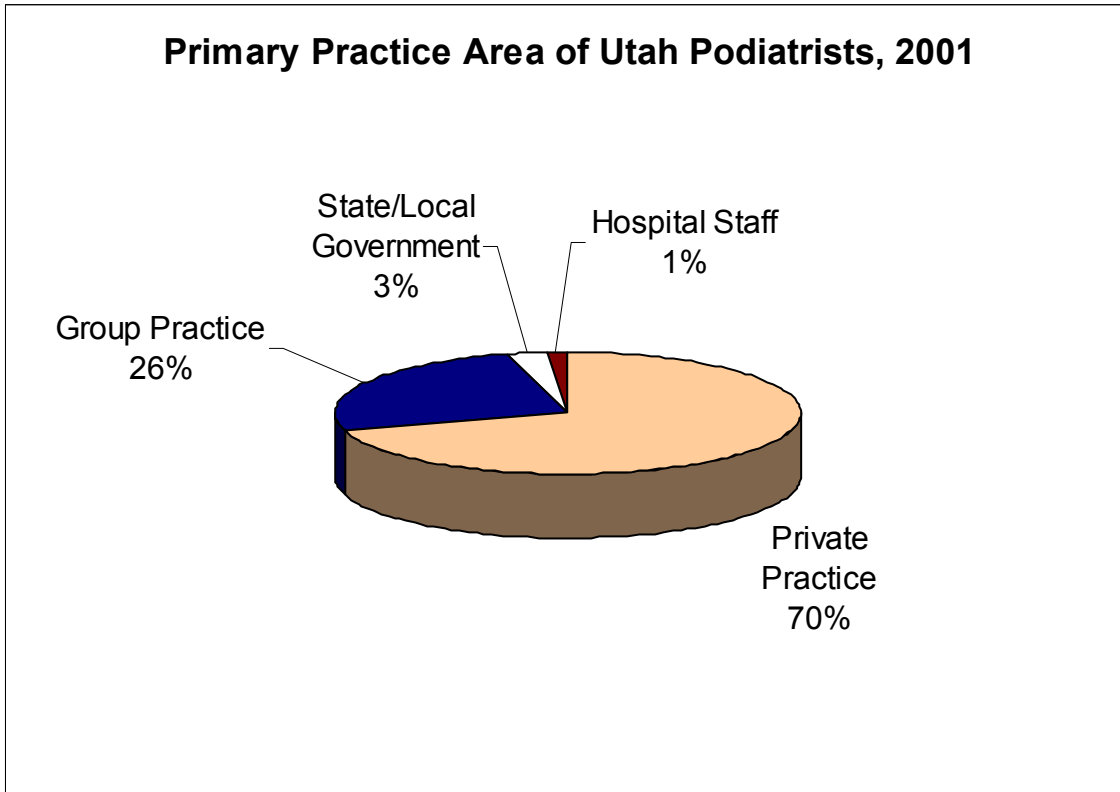
2. Which board certifications do you hold? (ABPS or ABPOPPM)

63% of Utah's podiatrists are certified in surgery, and 20% are certified in orthopedics.

3. In which areas do you currently practice? (Surgery or Orthopedics and Primary Medicine)

91% practice surgery and 80% practice orthopedics and primary medicine.

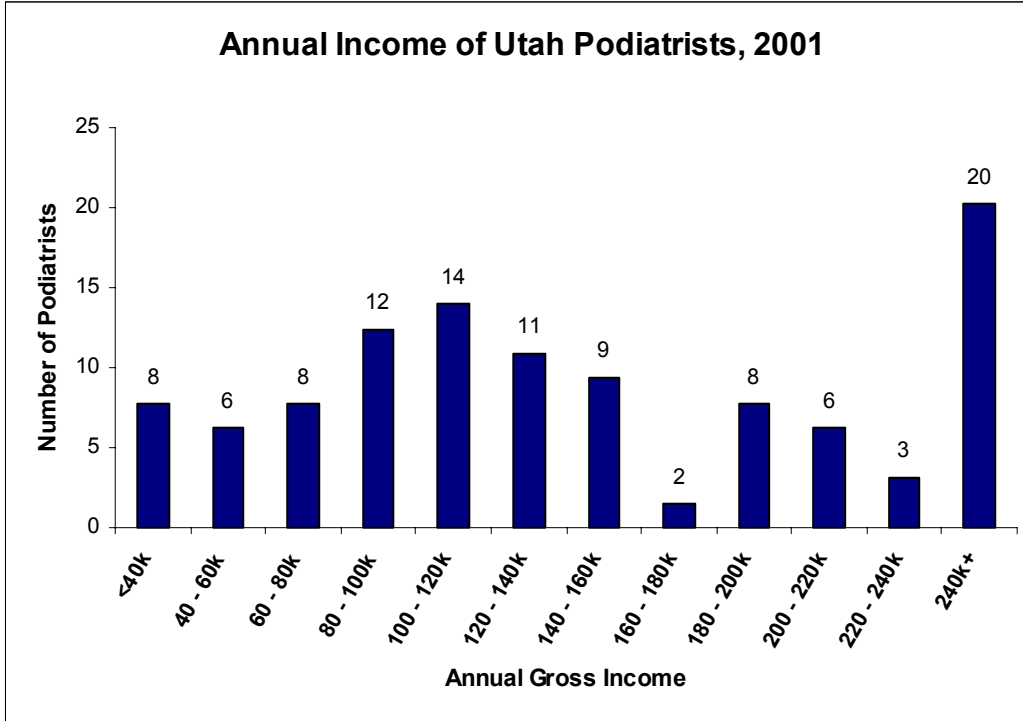
4. What is your current occupation(s)?



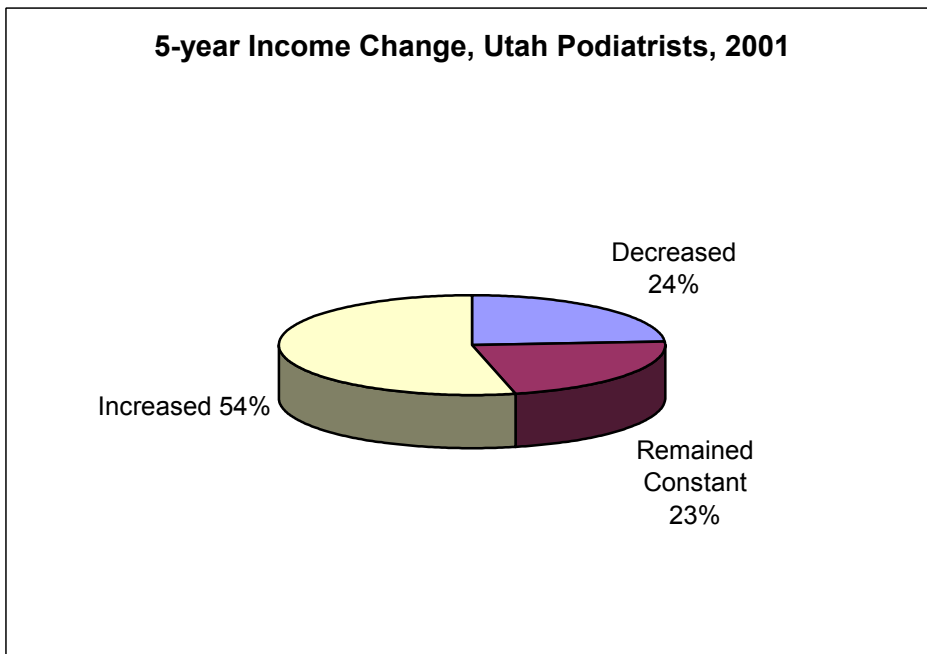
5. For your work setting how many hours working per week is considered full time?

Almost half (49%) of podiatrists indicated 40-49 hours is full time for their work settings. Another 27% said 30-39, 21% indicated 50-59, and only 3% said more than 60 hours was full time.

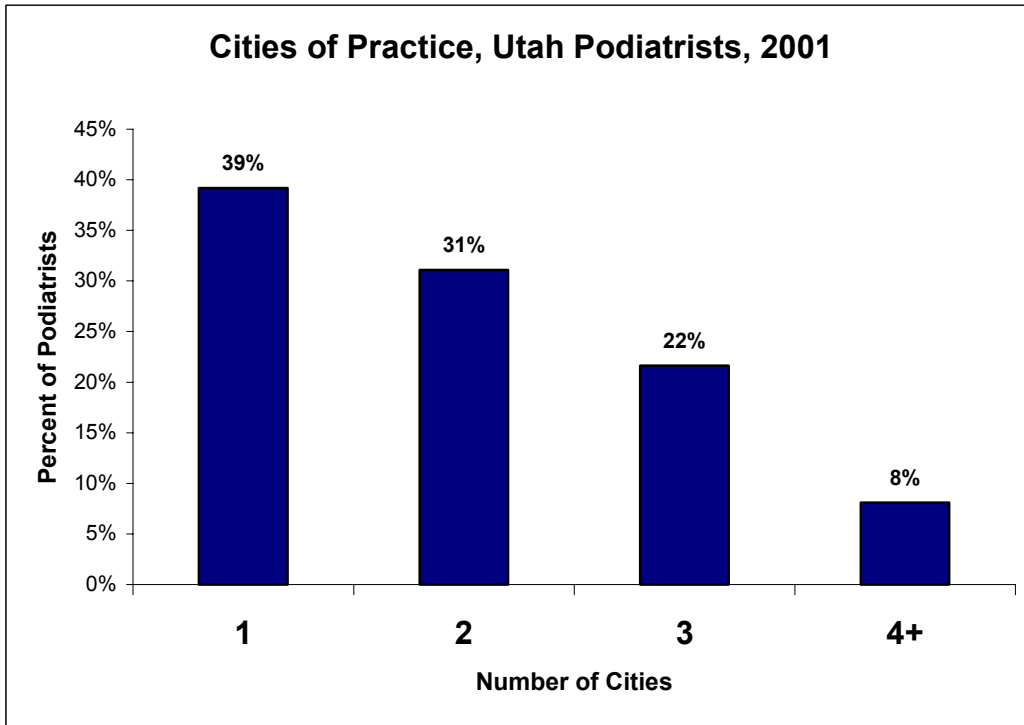
6. What is your average yearly compensation? (Gross Amount)



7. Compared to five years ago, has your gross income:



8. In how many separate cities/towns do you currently provide patient care?



Please complete questions 9 - 14 for the two locations where you spend the largest portion of your time delivering patient care and combined teaching/patient care.

9. Zip Code:

County of Primary Practice	Podiatrists
Cache	3
Carbon	1
Davis	10
Iron	3
Salt Lake	35
Sevier	1
Tooele	1
Uintah	1
Utah	17
Washington	8
Weber	4
Other State	4
Total	90

County of Secondary Practice	Podiatrists
Beaver	1
Box Elder	1
Cache	1
Davis	1
Grand	1
Juab	1
Salt Lake	21
San Juan	1
Sanpete	1
Summit	1
Uintah	3
Utah	14
Washington	4
Other State	4
Total	59

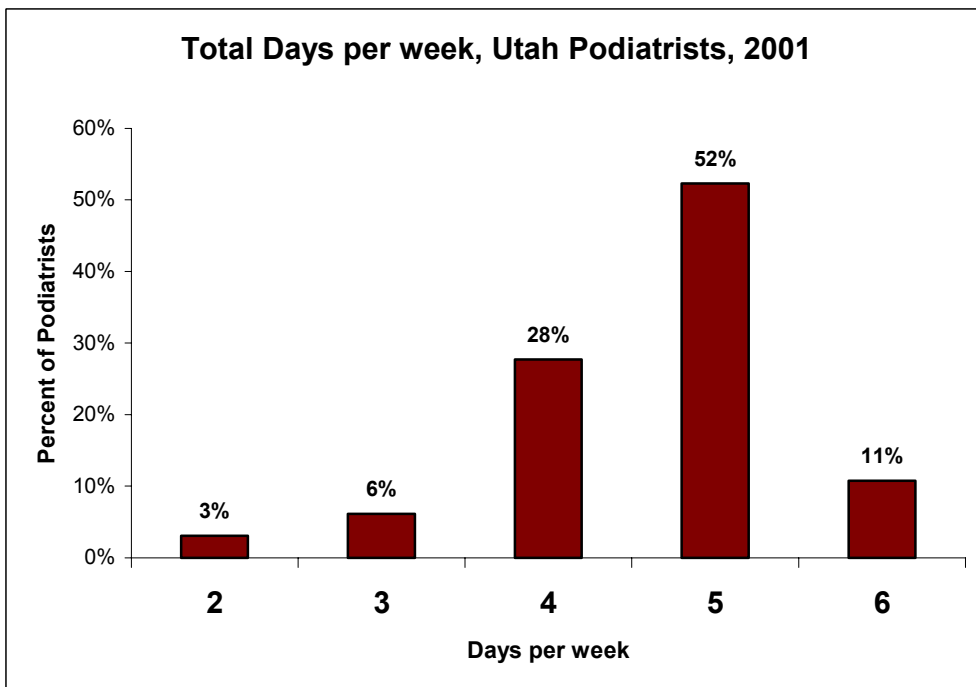
Primary & Secondary practice location comparison

County of Primary Practice	County of Secondary Practice														Total
	Beaver	Box Elder	Cache	Davis	Grand	Juab	Salt Lake	San Juan	Sanpete	Summit	Uintah	Utah	Washington	Other State	
Cache		1												1	2
Carbon					1										1
Davis			1				3			1					5
Iron	1												1		2
Salt Lake				1			17		1		3				22
Sevier								1							1
Tooele											1				1
Uintah										1					1
Utah						1						10			11
Washington													3	3	6
Other State							1	1							2
Total	1	1	1	1	1	1	21	1	1	1	2	14	4	4	54

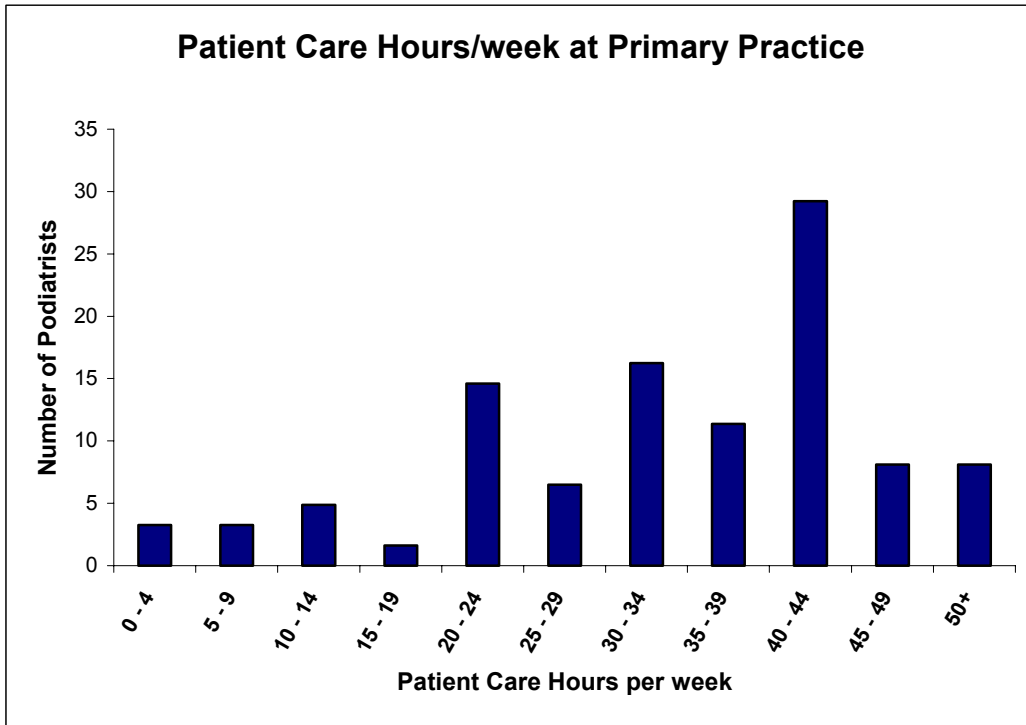
10. How many more years do you plan on practicing at each location?

Years Planning to Practice	Primary Location	Second Location
1 - 5	12	10
6 - 10	22	11
11 - 15	24	13
16 - 20	21	10
21 - 25	12	8
26+	16	7
Total	107	59

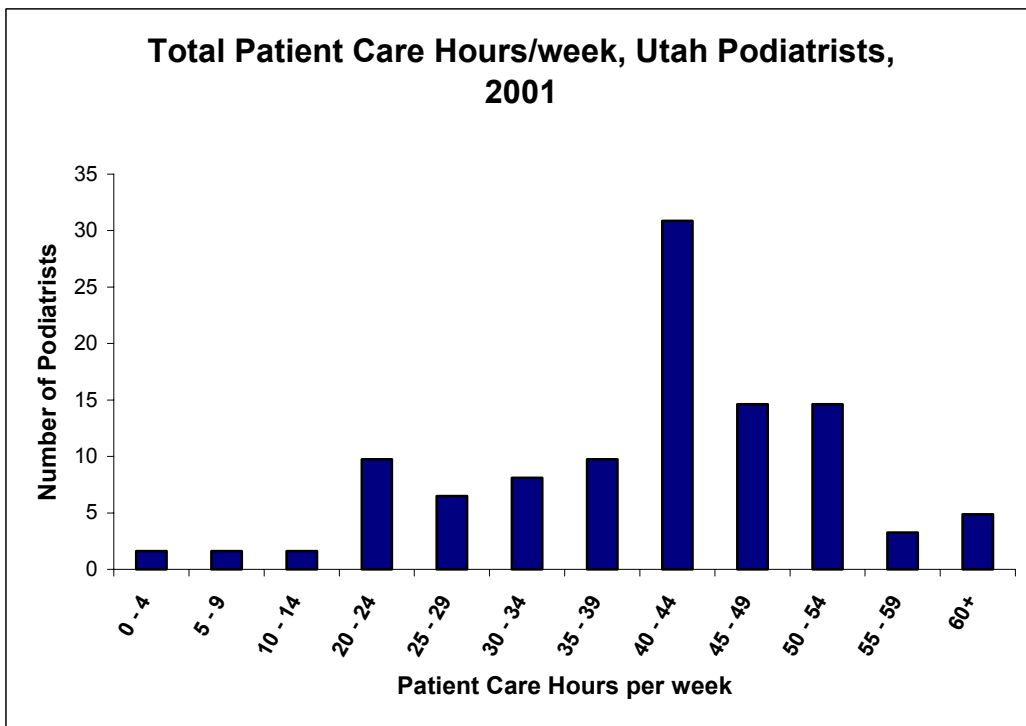
11. Number of days per week. (Sum of days worked at primary and secondary locations)



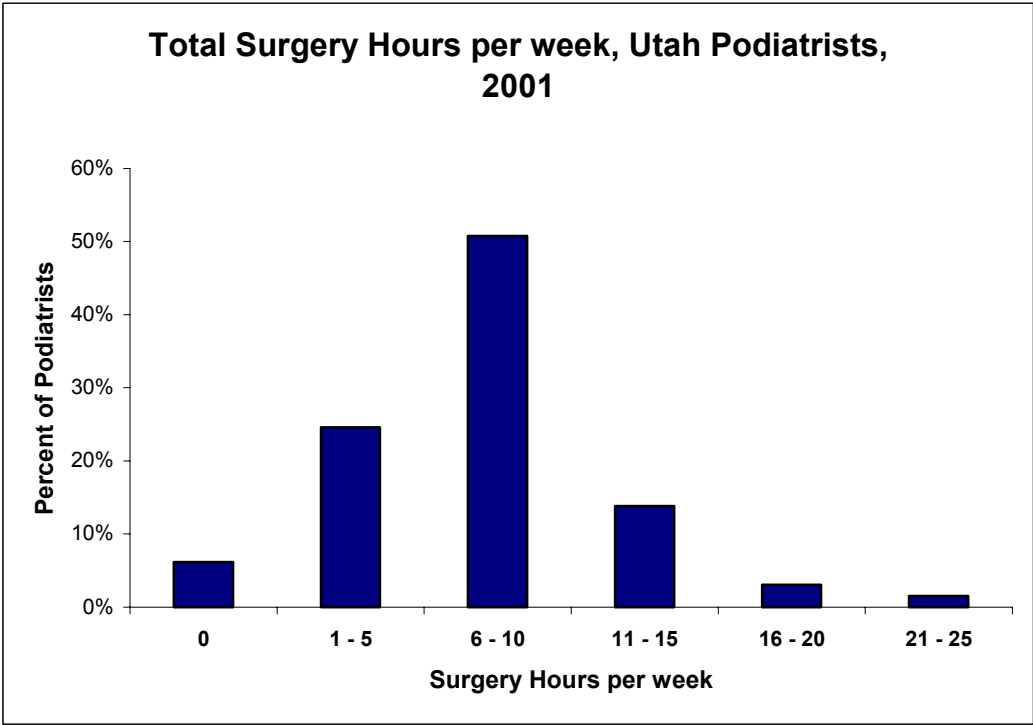
12. Hours spent delivering patient care and/or combined teaching/patient care in an average week.



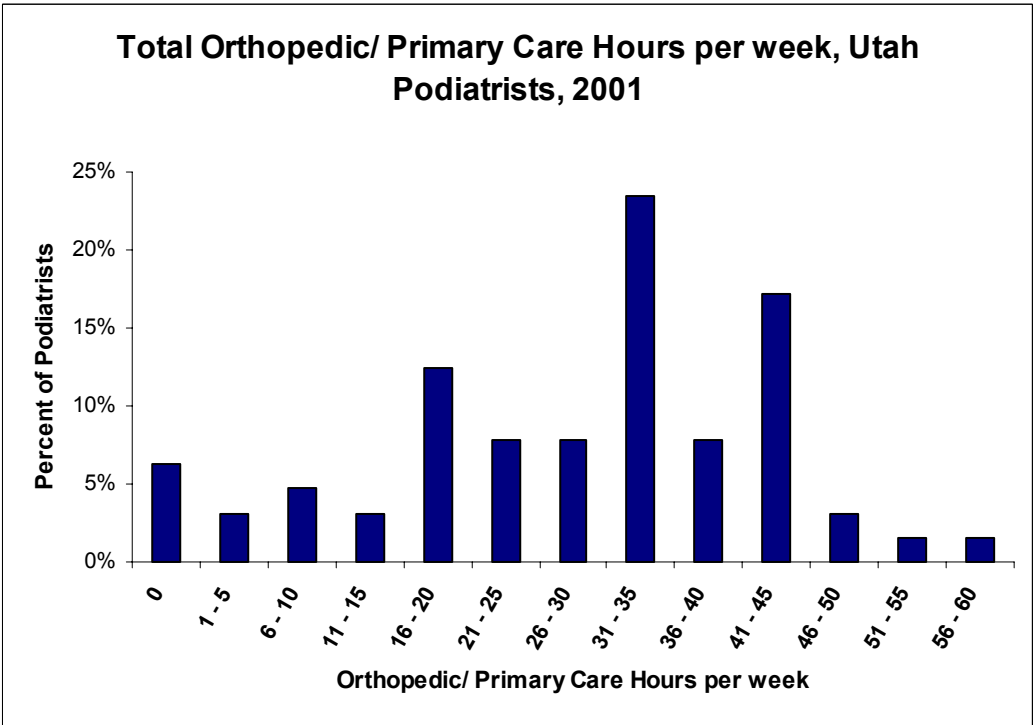
Total Patient Care Hours – combined locations 1 & 2



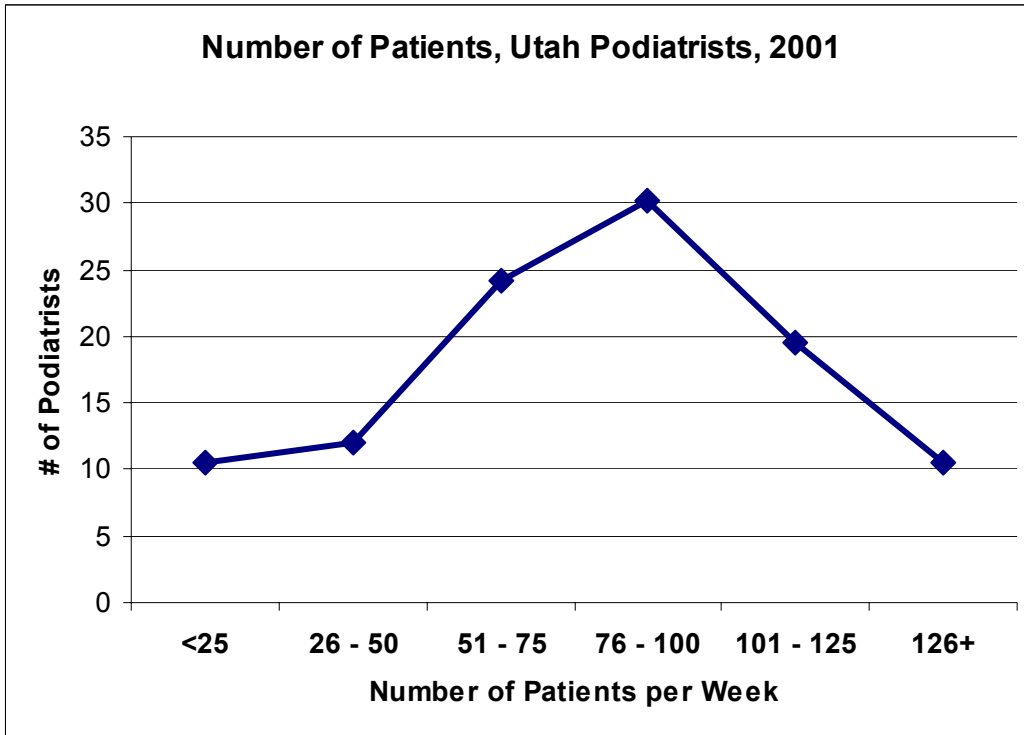
13. Hours of practice devoted to surgery.



14. Hours of practice devoted to orthopedic and primary care.



15. In an average week how many patients do you see?



16. Do you have hospital privileges?

93% of Utah podiatrists had hospital privileges.

17. Does your clinic offer language interpretation to your patients?

Only 40% of Utah’s podiatrists offer language interpretation. 68% of which provide Spanish.

18. Which professionals comprise your immediate health care team?

Team Member	% of Podiatrists Working With
PA	13%
APN	17%
MD/DO	40%
DPM	51%
Pharm D	14%
Social Worker	6%

19. Does your clinic offer a Sliding-Fee Scale based payment option?

Only 27% of podiatrists offer a sliding-fee payment option.

20. Are you limiting the number of new:

Patient Type	% Limiting
Medicaid	15%
Medicare	5%
Non-paying	16%
Other	1%

21. What percent of your patients are:

Patient Type	Average % of Patients
%M-care	36%
%Manage	28%
%Fee	10%
%M-caid	8%
%Self Pay	7%
%VA	4%
%Charity	4%
%Military/Tri-Care	2%
%Work Comp	2%

22. What is the average number of days waiting time for an appointment?

Wait for Appointment	New Patient	Established Patient
1 - 2 days	62	51
3 - 4 days	21	13
5+ days	21	20
Total	104	83

23. What is the average office waiting time for a patient with a scheduled appointment?

Office Waiting Time	Number of Podiatrists
Less than 5 min.	14
5 - 10 min.	48
10 - 15 min.	23
15 - 20 min.	11
More than 20 min.	8
Total	104

24. Please list one or more continuing medical education (CME) programs you would like to have available locally: Diabetes was the only program listed more than once.

25. What is your race/ethnic background?

There were only 2 podiatrists who were not Caucasian.

26. What is the population density of the area where you spent the majority of your upbringing?

79% of Utah's podiatrists were raised in urban settings and 21% in rural settings (8% frontier and 13% rural).

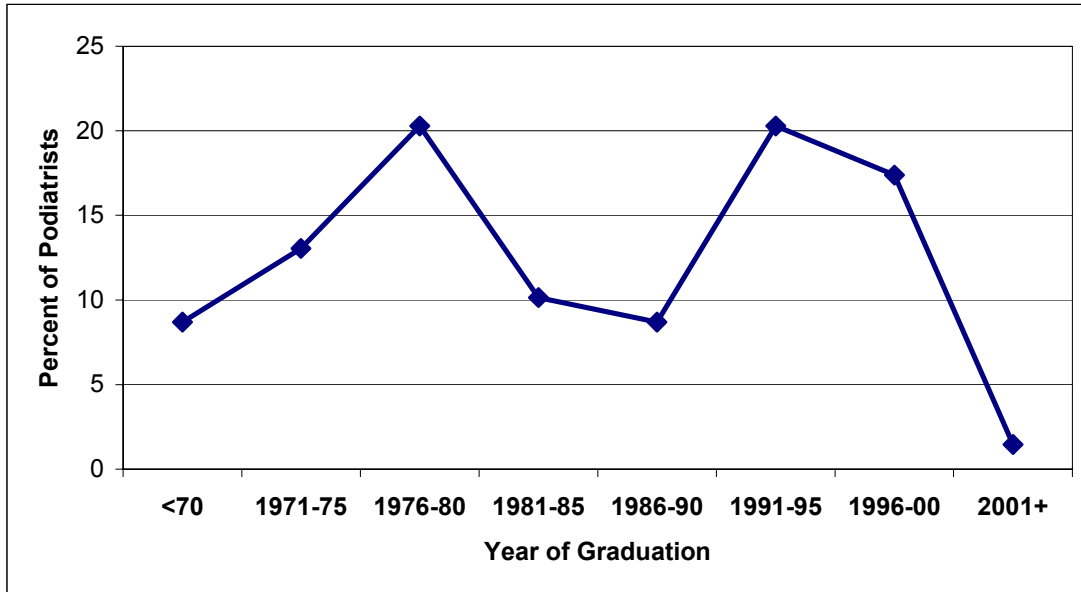
27. Where did you attend high school:

72% attended high school in Utah, 9% in California, and 5% in Nevada. A few other states were reported but had only one podiatrist.

28. The college/institution where you received your podiatric medicine degree (and year received):

62% of Utah's podiatrists graduated from the California College of Podiatric Medicine. Another 14% graduated from the Scholl/Illinois College of Podiatric Medicine, 7% from Temple University, 4% from Ohio College, and 3% from Des Moines College.

Year of Graduation, Utah Podiatrists, 2001



29. The institution that sponsored your internship/ residency and year completed:

83% of Utah's podiatrists completed a residency. 43% were residents at a Veteran's Affairs hospital and 23% were residents at the Salt Lake V.A. hospital.

30. Are you currently enrolled in a residency or fellowship training program?

There were approximately six residents in Utah at the time of the survey, but they were not included in any analysis because of the potential to skew some findings.