



A POST ROE IDAHO

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PREPARED BY THE IDAHO PHYSICIAN WELL-BEING ACTION COLLABORATIVE
IN PARTNERSHIP WITH THE IDAHO COALITION FOR SAFE HEALTHCARE



About Us

THE IDAHO PHYSICIAN WELL BEING ACTION COLLABORATIVE

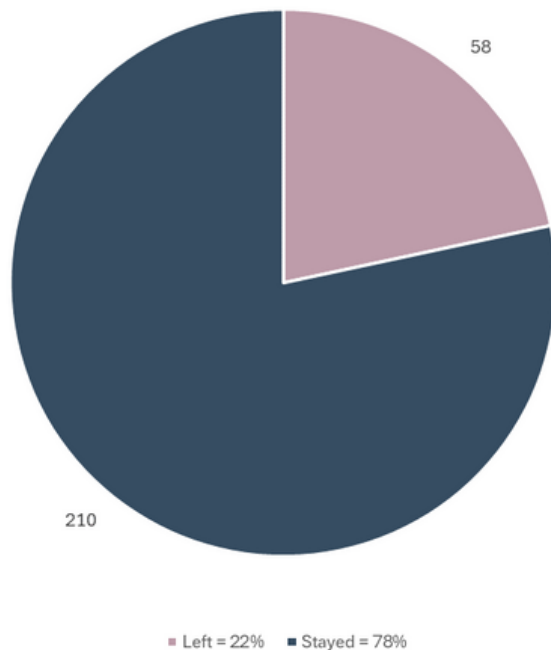
The Idaho Physician Well-Being Action Collaborative was created by local physicians in 2018 to bring together individuals from several sectors of healthcare to address system level issues with significant impact on the health of our physician and patient communities. Our mission is to make life better for physicians and other clinicians and thereby, make life better for our extended community. Dr. Ed McEachern and Dr. Deb Roman co-chair the Idaho Physician Well-Being Action Collaborative.

We have cultivated a strong network of healthcare professionals who openly share ideas, insights, and experiences and are committed to doing this work together. Our "roundtable" is now viewed as a place where people with different perspectives and experiences can come together to actively and effectively address complex system-level healthcare issues.

Participants include representatives from our five major insurance payers, the Department of Insurance, two major health systems, the Ada County Medical Society, the Idaho Medical Association, the Idaho Academy of Family Physicians, the Idaho Retailers Association, the Idaho State Pharmacy Association, the Idaho Data Exchange, as well as independent physicians, pharmacists, and industry consultants.

THERE IS A STRAIN BEING PLACED ON MEDICAL PROVIDERS IN IDAHO

Obstetricians leaving Idaho in 15 months, from August 2022 - November 2023



The net supply of obstetricians practicing obstetrics in Idaho went down between 40 and 60 doctors in the 15-month period between August 2022 and November 2023, from 268 to about 210 providers for ~962,000 Idaho women.¹



Two hospital OB programs closed in that time period; another will close its obstetrician program by April 1, 2024 (West Valley Medical Center) due to the inability to recruit obstetricians.

At least one more OB hospital program is in serious jeopardy of closing.

22%

Idaho has lost 22% of its practicing obstetricians in the 15 months since the abortion bans went into place.



Nearly 85% of OB/GYN providers practice in the 7 most populous counties.

- This number decreased from 227 in 2022 to about 176 in 2023, a loss of nearly 50 providers.
- There are now only 210 obstetrician providers in the state of Idaho and probably less than that number in Full Time Equivalent (FTE) workers as not all practice full-time.
- HRSA projected in 2018 there was a need for 250 full-time obstetricians in Idaho, growing 10% over the decade as the population grows to 275 in 2028.⁴
- 58% of OB/GYN's report being burned out.³



Only 22 of 44 Idaho counties have access to any practicing obstetricians

- Of those 22 counties, every county except Boundary and Power counties lost OB's in that time period (Bonn timer Ferry and American Falls picked up one OB each).
- In the 15-month period of this study, only two new OB's moved to Idaho, while between 40 to 60 obstetricians quit practicing, left the state, or retired altogether.
- The ratio of people serviced by OB's went from 1 OB per 6,668 Idahoans to 1 OB per 8,510 Idahoans
 - National average live births per OB = 94
 - Idaho average live births per OB = 107
- In August 2022, Idaho OB's practiced at 258 unique office locations. By November 2023, that number shrank to 201 unique locations.
- Many rural Idaho counties have no OBGYN and rely on consult services from more urban areas where coverage is already stretched thin.
- The top six metro areas have nearly 80% of physicians; the top 10 metro areas have nearly 90%.
- Outside of Ada and Canyon Counties, only Bannock and Twin Falls counties have more than 10 OB's.



Idaho struggles to meet bare minimum coverage standards

- It takes a bare minimum of three doctors to cover call 24/7/365.
- Of the 22 counties that have OB's, only 10 counties have more than three doctors. (down from 12 counties in August 2022)
- 34 counties in Idaho are in jeopardy of losing their OB coverage if one doctor from that community leaves.
- The American College of Surgeons Level II trauma certification requires there are two OB's on call, on in-house and one within 15 minutes of the hospital.
- Without OB coverage, there is no real trauma coverage.
- There are about 947,504 women in Idaho and 210 OB/GYN's, making the ratio of 2.22 / 10,000 women one of the lowest in the country (4.44 / 10,000 Idahoans)⁷ From 1997 - 2008, the median US number of OB/GYN's per 10,000 people was fairly constant at 14.1 - 14.7 per 10,000 persons.⁸



Idaho struggles to retain and recruit new doctors

- OB/GYN's train family medicine residents and medical students in obstetrics. The departure of OB/GYN's will affect the ability to train Idaho resident family medicine physicians who usually stay in Idaho.
- In 2000, Idaho was 50th out of 51 (including Puerto Rico) in doctors per capita at 192.6 per 100,000 residents. In 2018, that ratio had fallen to 188.4 per 100,000 residents.⁵
- In 2018, the population's demand in Idaho for OB/GYN's was 250 full-time doctors. As of today, there are 210 *licensed* doctors. In other terms, we only have the ability to cover 92% of the need adequately.⁶
- In 202, prior to losing a large percentage of our workforce, Idaho ranked 28th out of 50 in the "best place to have a baby."
- 85% of practicing OB/GYN's identify as female. All of the OB's practicing in Idaho have been trained elsewhere and chose to move to Idaho.



Maternal Mortality is at risk

- CMS data has Idaho at the 10th percentile of maternal pregnancy outcomes. This means that 90% of the United States has better maternal pregnancy outcomes than Idaho.
- Idaho is currently the only state that does not track or report maternal outcomes.
- 55% of high-risk obstetricians (Maternal Fetal Medicine doctors or MFM's) have left the state in that 15-month period..
- There are less than 5 full-time MFM's for the entire state practicing in Idaho.

Questions to consider

What happens with maternal care in Idaho when just a few OB/GYN's quit practice or leave the state due to 'hostile conditions'?

What happens to providers when just one doctor shows up on the front page in handcuffs for saving a pregnant person's life?

What happens to Idaho's key high-paying industries and their ability to recruit/retain young workers to Idaho?

What happens to the ability to retain workers who have an opportunity to live anywhere else when even basic maternal standards of care are suboptimal to other regional states?

If Idaho wanted to be the best place in the USA, what would we need to do to get there?

Citations

1. Data is compiled from publicly and commercially available data sources, credentialing files, and regulators, as well as local knowledge from members of IPWAC.
2. <https://www.census.gov/quickfacts/fact/table/ID/PST045222>
3. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/state-of-primary-care-workforce-2023.pdf>
4. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/projections-supply-demand-2018-2030.pdf>
5. <https://www.cdc.gov/nchs/hus/contents2019.htm#Figure-016>
6. HRSA projections of supply and demand for women's health services providers March 2021 – DHHS, HRSA, BHW
7. <https://www.census.gov/quickfacts/fact/table/ID>
8. American Medical Association. Physician Characteristics and Distribution in the US. 1997/8-2008 USA: AMA;
9. See: <https://www.idahohealthymoms.org/>

ABOUT THE IDAHO COALITION FOR SAFE HEALTHCARE

The Idaho Coalition for Safe Healthcare's mission is to ensure Idahoans have safe, legal, and equitable access to evidence-based medical care, that physicians and healthcare professionals are able to provide accepted standards of care, and that healthcare decisions made within a patient-provider relationship are honored and preserved.

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