Purpose: A decline in US rheumatologists is anticipated when retirement rates will exceed new fellowship completions. Decline in rheumatology services is increasing due to an expanding and aging US population, new medications and treatments. A workforce (WF) study by the Lewin Group in 2005-2006 investigated this supply and demand interface, the ACR Subcommittee on Workforce (Committee on Training and Workforce) served an advisory role.

Methods: The WF study included a literature review, analyses of national databases, and a survey sent to a random sample of 4946 rheumatologists (n=367 total first year positions) by 2025 would be required to equalize supply and demand. The committee recommends that the ACR develop strategies that address the projected imbalance and use the computer model in evaluating the required to equalize supply and demand.

Results: 1,683 rheumatologists were surveyed, 627 responded (mean: Men= 3,758; Women = 2,800 per year). Results showed that 70% were male (mean age 52), 20% were female (mean age 46). Overall there were 17,273 rheumatologists per million people. There were 170,000 fellowship offers in 2005, with an occupancy rate of 95% and 95% completion rate. At least 35% were filled by international medical graduates of whom 80% remain in the US. The US population will grow at rates projected by the US census bureau.

Recommendations:
1. Increase number of fellowship positions:
   - Presentation to the ACR board
   - Consider any demographic differences in workforce distribution.

2. Rheumatology services is increasing due to an expanding and aging US population.
3. New medications and treatments.
4. Decline in rheumatology services is increasing due to an expanding and aging US population.
5. New medications and treatments.

Abstract

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Response Rates by Sampling Strata

<table>
<thead>
<tr>
<th>Strata</th>
<th>Sample Size</th>
<th>Number of Eligible Respondents</th>
<th>Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>3,684</td>
<td>2,684</td>
<td>73%</td>
</tr>
<tr>
<td>Pediatric</td>
<td>367</td>
<td>145</td>
<td>39.5%</td>
</tr>
<tr>
<td>Academic</td>
<td>367</td>
<td>138</td>
<td>37.6%</td>
</tr>
<tr>
<td>NPs</td>
<td>367</td>
<td>131</td>
<td>35.8%</td>
</tr>
<tr>
<td>PA's</td>
<td>367</td>
<td>126</td>
<td>34.6%</td>
</tr>
<tr>
<td>Total</td>
<td>1,500</td>
<td>536</td>
<td>35.7%</td>
</tr>
<tr>
<td>Adult</td>
<td>1,254</td>
<td>413</td>
<td>33%</td>
</tr>
<tr>
<td>Pediatric</td>
<td>259</td>
<td>91</td>
<td>35.3%</td>
</tr>
<tr>
<td>Academic</td>
<td>259</td>
<td>78</td>
<td>30%</td>
</tr>
<tr>
<td>NPs</td>
<td>259</td>
<td>72</td>
<td>28%</td>
</tr>
<tr>
<td>PA's</td>
<td>259</td>
<td>70</td>
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</tbody>
</table>

Possible Responses to Predicted Shortage

1. Increase fellowship positions: 30% increase in 5-year increments to 362 first year positions (current total 173 positions) will result in supply = demand in 2025
   - **Questions**
     - Will we need more training programs to train more fellows?
   - **Answers**
     - Yes
     - No
     - Only if demand increases

2. Expanding roles of NPs and PA's
   - **Questions**
     - Can rheumatology attract and retain NPs and PA's in adequate numbers?
     - **Answers**
     - Yes
     - No

3. Will rheumatologists and healthcare systems align their practice processes to become standard?
   - **Questions**
     - Will we take care of patients rheumatologists choose not to see?
   - **Answers**
     - Yes
     - No