The FutureDocs Forecasting Model: It's A Tool Not an Answer

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What makes our model different in 2 slides: Slide 1

- Starts with different question: what services will patients need versus how many doctors will we need?
- Employs new methodology- plasticity matrix maps services provided by physicians in different specialties to patients' visits
- Uses different geography: state and sub-state data allow you to see local workforce challenges
- Seeks different outcome: designed to engage stakeholders (you!) in using data to develop policy

Access the model here: https://www2.shepscenter.unc.edu/workforce

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What makes our model different in 2 slides: Slide 2

Mindset — it's a tool, not an answer. Interactive data format allows you to choose from:

- 3 models supply, utilization, relative capacity (a.k.a. "surplus/shortage")
- 3 types of visualizations maps, line charts and population pyramids
- 3 geographic views national, state and sub-state level
- 5+ alternate futures "what if" scenarios regarding ACA implementation, physician FTEs, retirement, use of NPs and PAs, and redistributing graduate medical education (GME)

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We turn workforce modeling upside down

- Model does not produce estimate of counts of physicians needed by specialty
- Instead, it asks: what are patients' needs for care and how can those needs be met (or not!) by different workforce configurations in different geographies?



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You end up with a picture that shows capacity of workforce to meet demand for different types of health services Shortage/Surplus for Outpatient Circulatory Visits by TSA, 2014 Rochester, MN Bangor, ME Washington, DC Huntington, MV Roston, NA Reason Capacity: San Francisco, CA Reason Capacity: Solidar, CA Solidar, CA Solidar, CA Solidar, CA Solidar, CA Solidar, CA Reason Capacity: Solidar, CA Reason Capacity: Solidar, CA Reason Capacity: Solidar, CA Reason Capacity: Solidar, CA Reason Capacity: Solidar, CA Solidar, CA Reason Capacity: Solidar, CA Soli