

On March 11th, 2020, COVID-19 was declared a global pandemic by the WHO. Following that pronouncement we began to see major actions taken within the US Healthcare system to prepare for the coming outbreak. Elective surgeries were cancelled, people began getting laid off or furloughed, and the normalcy of practicing medicine in the United States was turned on its head.

We saw surveys conducted by groups like the AMA, state and regional physician organizations, and specialty organizations such as the American Academy of Pediatrics and began wondering how the COVID-19 pandemic and response affected urologists and the practice of urology.

Survey Respondents

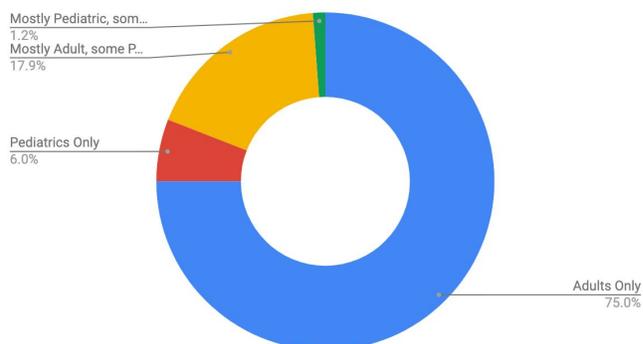
Utilizing an email database as well as urologist-specific social media groups, we sent the survey out to approximately 1,800 urologists and received responses from 84.

Of these 84, 27 (32.1%) were part of a urology group, 25 (29.8%) were in academic practice, 20 (23.8%) were hospital-employed, 7 (8.3%) were in solo practice, 3 (3.6%) were residents/fellows and 2 (2.4%) were part of a multi-specialty group.

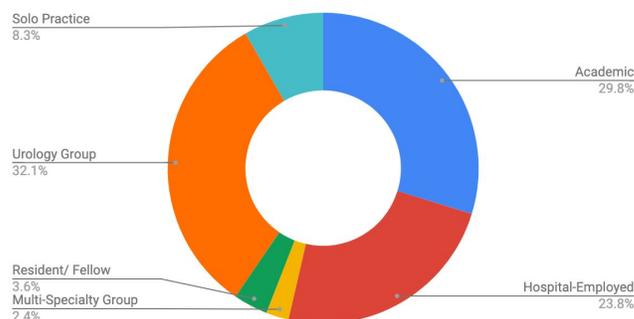
The vast majority (75%) of our respondents were adult urologists, with a further 17.9% of respondents who see mostly adult patients with some pediatrics. 7.2% of our respondents were primarily pediatric urologists.

Age was one area where our survey was heavily skewed: we had 39 (46.4%) respondents aged 30-39 and 32 (38.1%) aged 40-49. For comparison, the 2018 AUA Urology Workforce Census found the median age of practicing urologists to be 56, with 52.5% of urologists over the age of 55¹.

Count of Which best describes your patient mix?

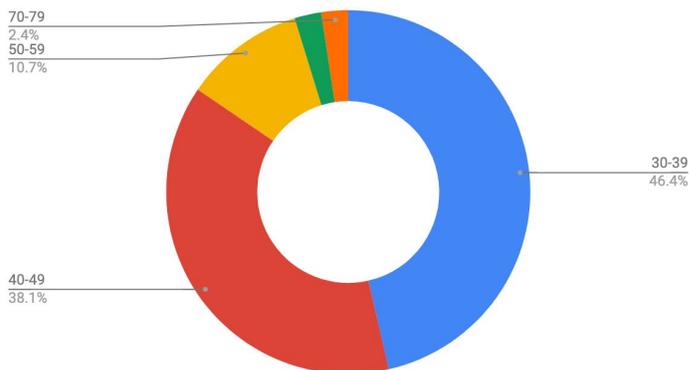


Count of Which of the following best describes your current practice?



¹<https://www.auanet.org/Documents/research/census/2018%20The%20State%20of%20the%20Urology%20Workforce%20Census%20Book.pdf>

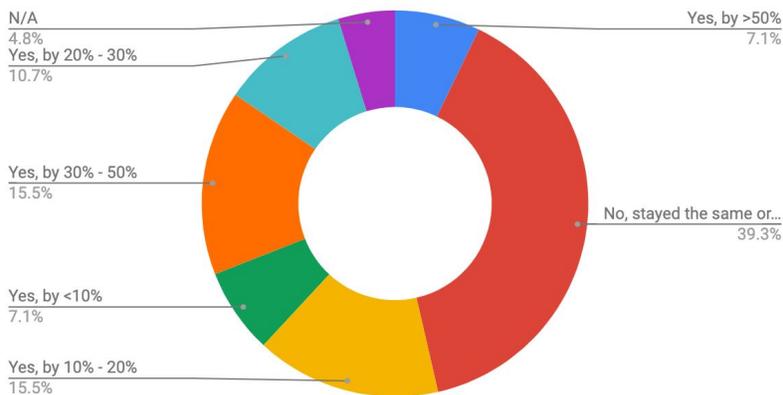
Count of Which of the following best describes your age group?



Financial Effects of COVID-19

Of the 80 respondents who answered the question regarding personal income, we found that 41.25% of urologists reported no change or an increase to their income due to COVID-19. Among the 58.75% of urologists who have seen an income reduction, 7.1% saw a reduction of <10%, 15.5% saw a reduction of 10-20%, 10.7% saw a reduction of 20-30%, 15.5% saw a reduction of 30-50% and 7.1% saw a massive reduction of >50%.

Has your personal income been reduced as a result of COVID-19?



Quick methodology note: We had 4 responses of “N/A” for this question that we removed for our analysis. This chart (and all of the charts) show the unaltered responses but we will remove non-answers when doing our analysis.

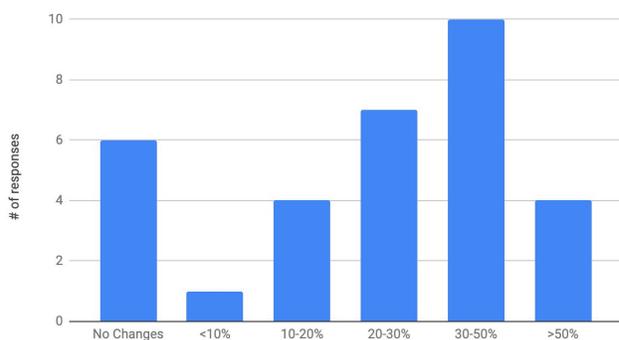
We then separated the data by practice type to see which practice models were being impacted the most and to get a scope of the magnitude.

Among academic urologists, we found that 64% had not seen their income reduced as a result of COVID-19. Other than the Resident/Fellow group which saw 0 income reductions, academic urologists were the least affected financially by COVID. Hospital-employed urologists also fared relatively well with 42.1% reporting no changes to their income. Among private practice

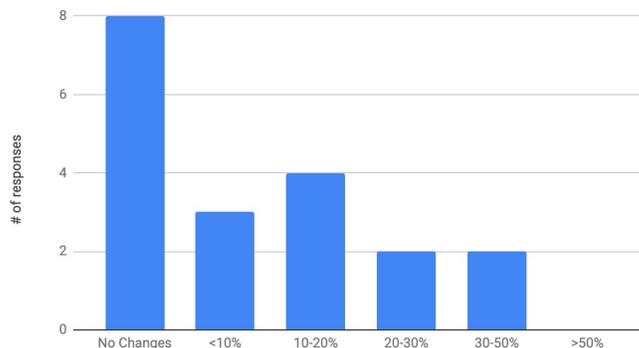
urologists (combining Solo, Urology Group, Multispecialty Group), only 18.8% reported no income reduction.

As for the magnitude of the losses, private practice urologists fared worse than their counterparts in hospital employment or academia.

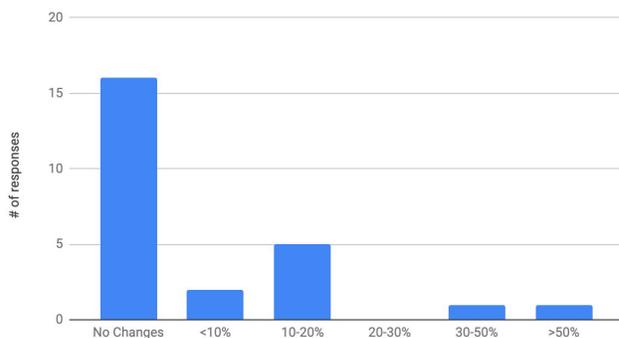
COVID-19 Income Reduction: Private Practice



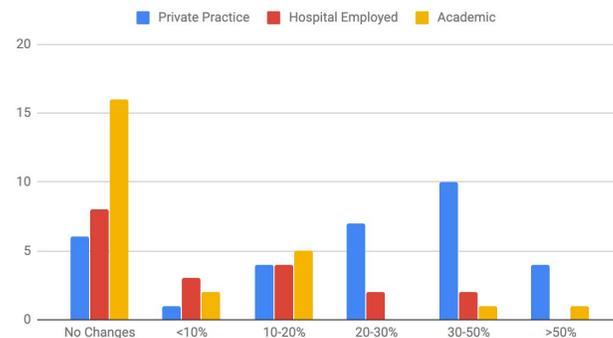
COVID-19 Income Reduction: Hospital Employed



COVID-19 Income Reduction: Academic



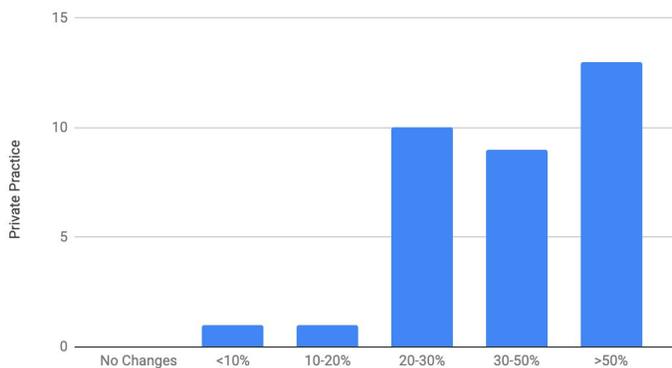
COVID-19 Personal Income Reduction by Employment Type



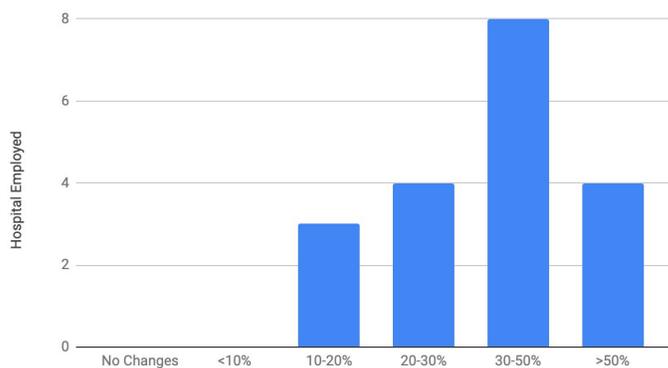
The next financial question we asked was “Has your practice’s revenue been reduced as a result of COVID-19?” As one might expect, we saw results that correlated with the previous question about personal income. We only had one respondent (in academia) who reported no change to practice revenue.

94% of urologists in private practice reported a decrease in revenue of at least 20% with 40.6% reporting a decrease of greater than 50%. This includes 92.5% of urologists in groups and 100% of solo urologists that we surveyed.

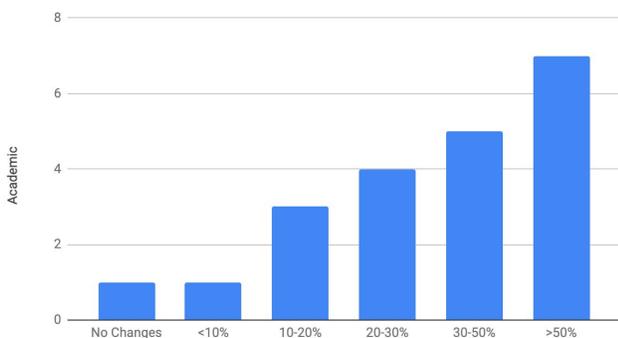
COVID-19 Practice Revenue Reduction: Private Practice



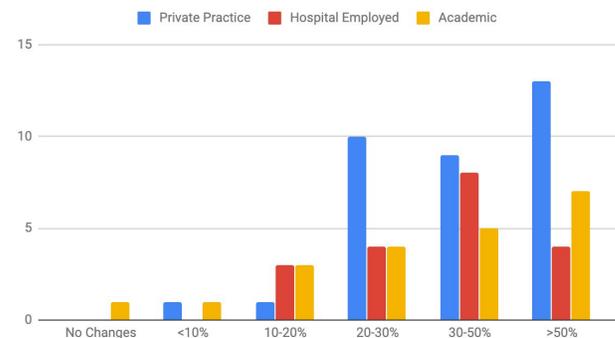
COVID-19 Practice Revenue Reduction: Hospital Employed



COVID-19 Practice Revenue Reduction: Academic

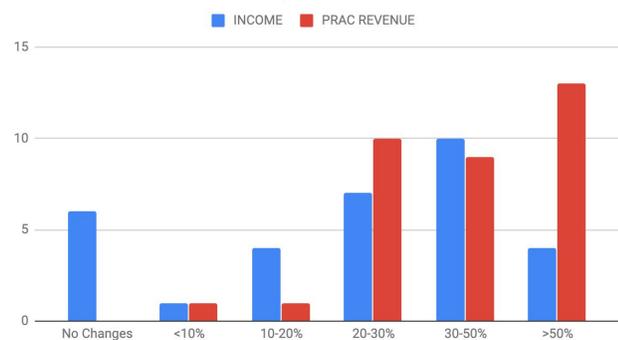


COVID-19 Practice Revenue Reduction by Employment Type

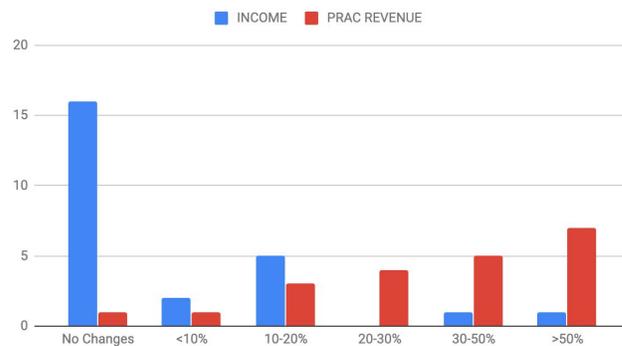


When comparing the loss of income vs. the loss of revenue, academic urologists again fared better than hospital-employed urologists, who again fared better than private practice urologists.

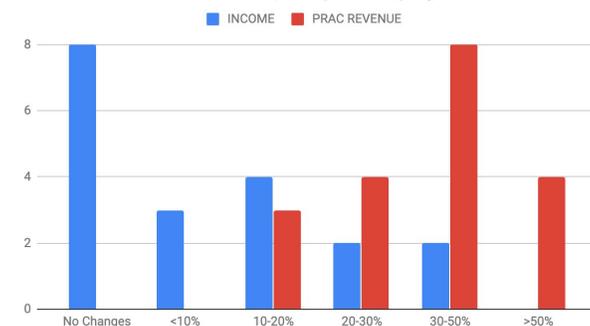
Income vs. Practice Revenue, Private Practice



Income vs. Practice Revenue, Academic



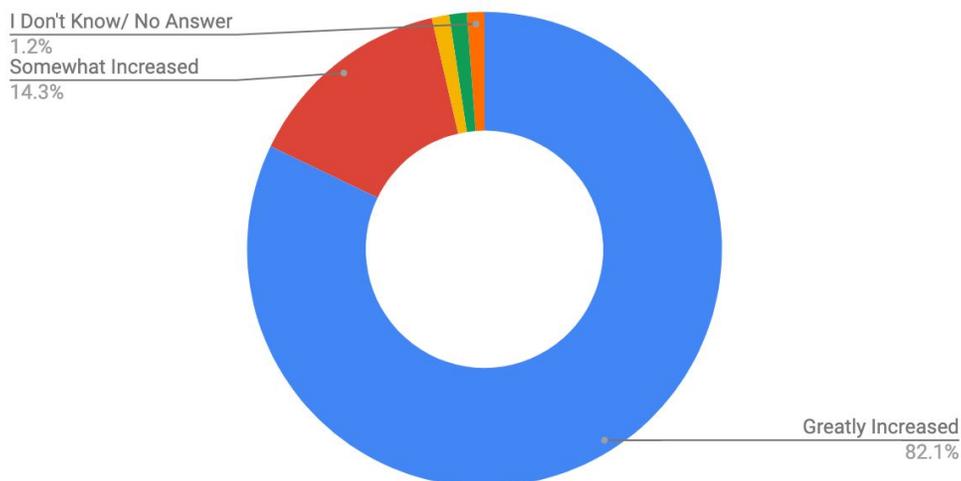
Income vs. Practice Revenue, Hospital Employed



Practice Management Changes Due to COVID-19

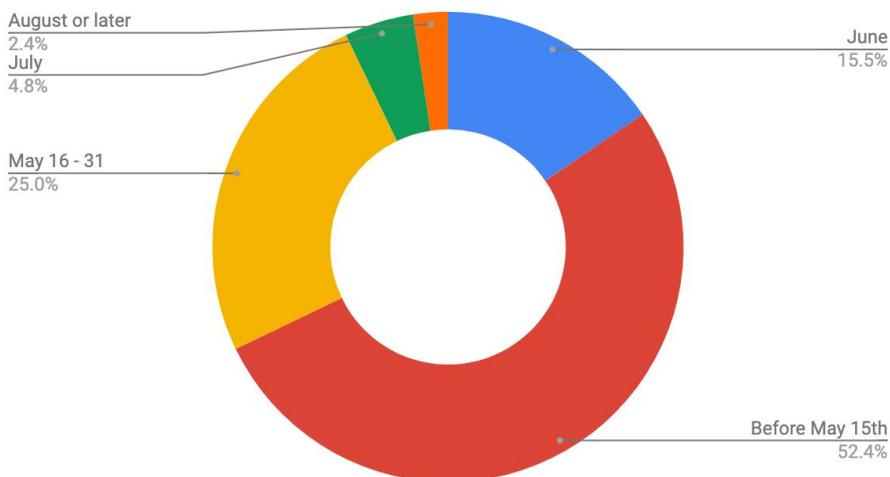
It's been widely reported that telemedicine usage has skyrocketed during the COVID-19 pandemic and our survey results overwhelmingly agree. 97.6% of respondents to this question indicated that telemedicine usage has increased at their practice, split between 83.1% who say COVID "greatly" increased telemedicine use and 14.5% who say it "slightly" increased.

How has COVID-19 affected the usage of telemedicine in your practice?



We also asked respondents when they planned on resuming elective cases locally and found that 75.4% of urologists resumed elective cases in May with another 15.5% expected to resume in June. Interestingly we had 4.8% of respondents say they anticipate resuming cases in July and another 2.4% expecting their elective cases to remain halted until August or later.

When do you anticipate resuming elective cases?

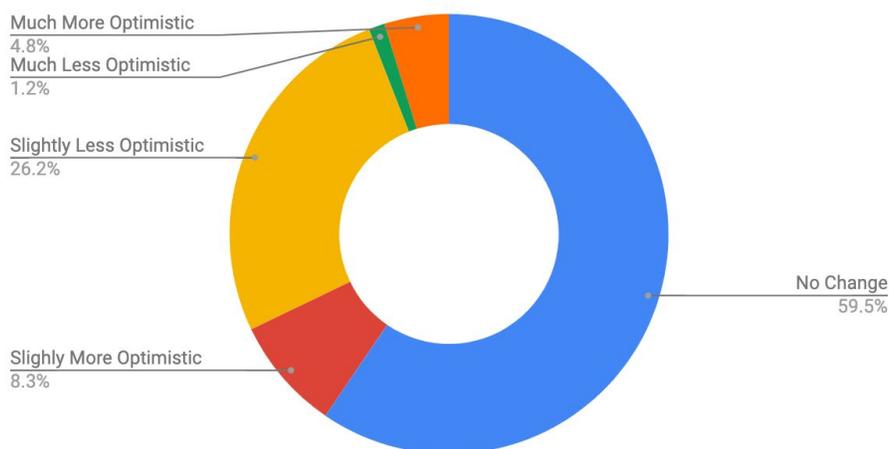


Outlook of Urology

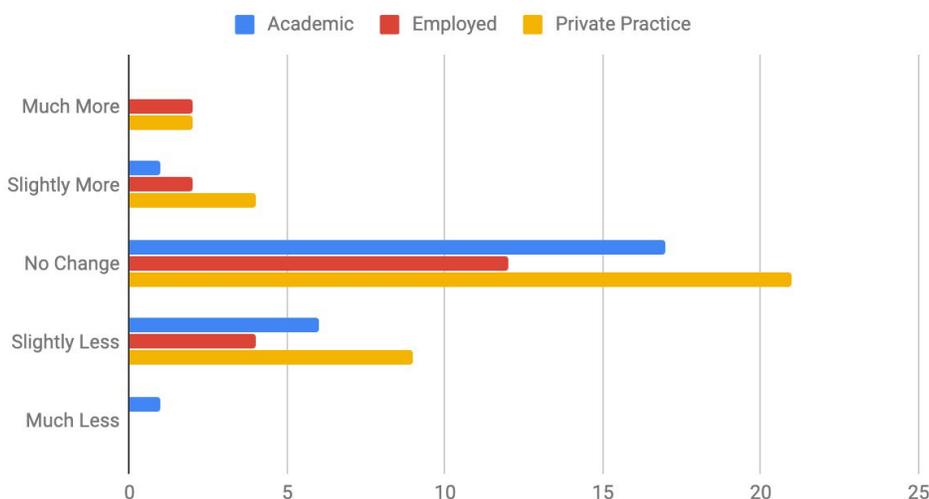
We also asked our survey respondents how they felt about the future of urology and their practice situation. A majority (59.5%) said their outlook for urology hasn't changed, 27.4% are less optimistic, and 13.1% of urologists are more optimistic about their specialty.

When we separated the data by practice type, we found a lower percentage of optimistic urologists in academic practice (4%) than in private practice (16.6%) or hospital-employed positions (22.2%). Interestingly all three groups had similar rates of pessimism- 28% of academic urologists, 22.2% of employed urologists, and 25% of private practice urologists answered that they are less optimistic about the future of urology as a result of COVID-19.

How has COVID-19 changed your outlook on your outlook for the specialty of urology?



Outlook for Urology, By Practice Type



The next question we asked was “As a Result of COVID-19, have you thought about making changes to your practice situation?”

The overall results were split- 53.75% of respondents said “yes” while 46.25% said “no.” When we separated the answers by practice type, we found some really compelling data regarding hospital-employed urologists. 75% of hospital-employed urologists say they are considering making a change, compared with 57.5% of private practice urologists and only 44% of academic urologists.

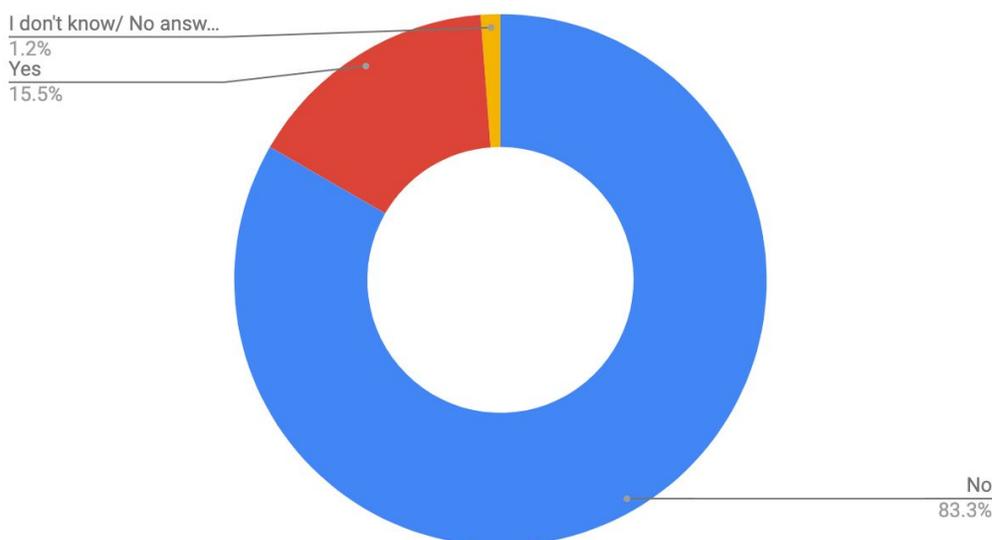
This data could point to a coming reversal in the decades-long trend towards hospital employment of urologists, although it’s impossible to say how much these attitudes ultimately matter when considering the economic realities of medicine.

Urology Locum Tenens (Locums)

The final section of the COVID-19 Urology Workforce Survey was related to locum tenens (locums) work and the most well-known companies among urologists.

We asked our respondents if they’d ever done locum tenens work before and found that an overwhelming majority (84.3%) had not. This included 80% of academic urologists, 75% of employed urologists, and 87.5% of private practice urologists.

Count of Have you done locum tenens (locums) work before?

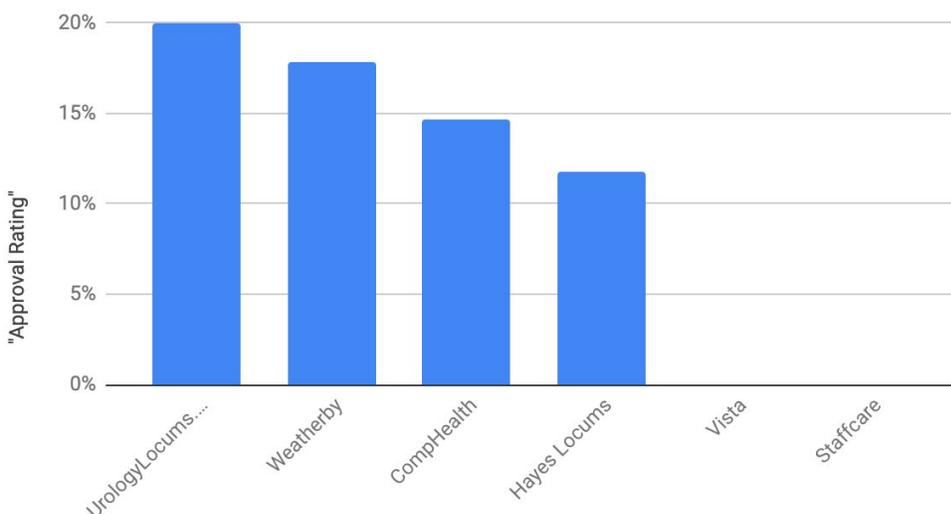


The last two questions we asked were related to the most well-known locums companies in the specialty of urology and how they stack up in terms of name/brand recognition and positive impressions among urologists.

In terms of name recognition, Weatherby and UrologyLocums.com fared the best, with 52.9% of respondents being familiar with these locums companies. CompHealth and Hayes Locums tied for third place with a 40% rate of name recognition. Vista and Staffcare were the least known at 11.8% and 10.6% respectively.

We then decided to divide the number of positive impressions by the number of overall impressions to come up with an “approval rating” for each company. UrologyLocums.com received an industry-leading 20% approval rating among urologists, followed by Weatherby at 17.8%, CompHealth at 14.7%, and Hayes Locums at 11.8%. Both Staffcare and Vista received a 0% approval rating.

Approval Rating= # heard of/ # with positive impression of



Which of the following locums companies have you heard of?

