# Rosman

# 2024 traines: Where are they now?

**REPORT** 

# Rosman provider geographic trends.

# Where are specialty trainees putting down roots—and practicing?

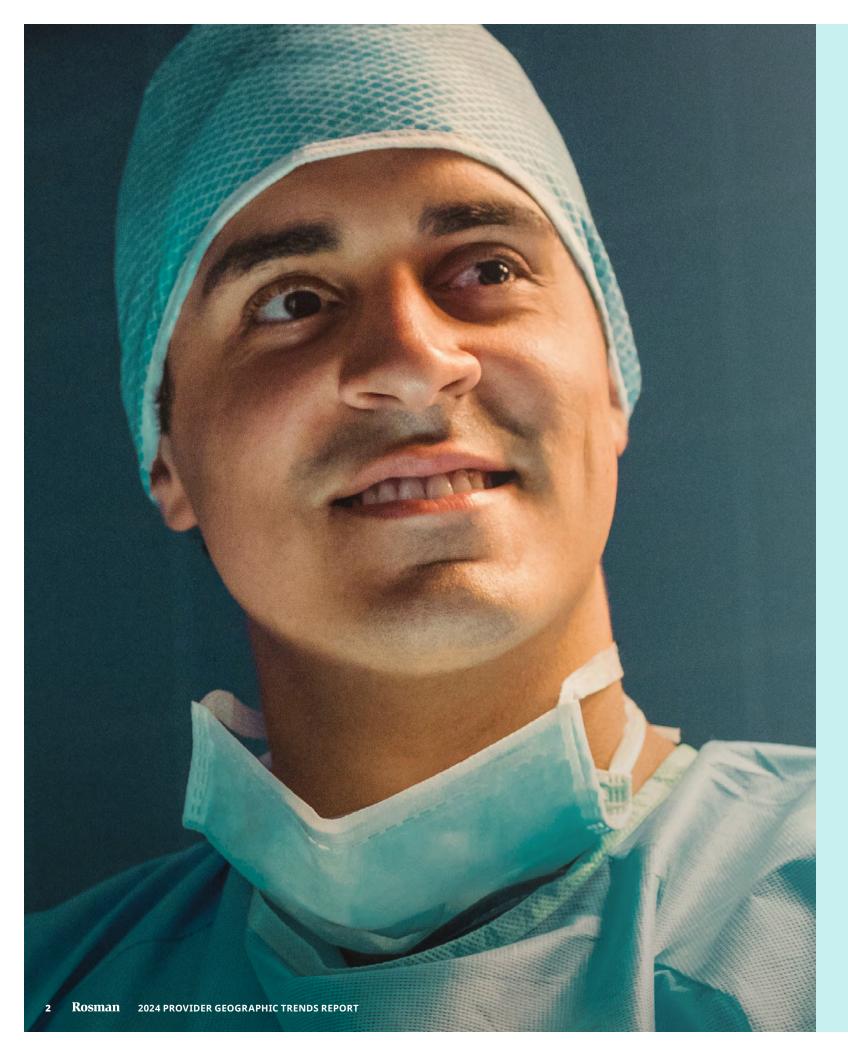
Using Rosman proprietary data, we've examined geographic practice trends across four in-demand specialties:

- Neurology
- Neurosurgery
- Gastroenterology
- Urology

This report summarizes the findings to help you as you formulate your post-training plans:

- · Which regions are popular
- · What's driving location choices





# A few highlights include:



# Gastroenterologists are living "on edge."

Edge states, that is. Their top five job destinations are all locations along the outer U.S., and North is the only direction that doesn't pique their interest.



# **Urologists are "going big."**

We are seeing post-fellowship/ residency moves to states with the largest populations and healthcare infrastructures, including California, Texas, and Florida.



# Neurosurgeons are "doing the research."

Cities with major academic centers and research powerhouses, like Boston, New York City, Chicago, and Houston, are magnets for these specialists.



# Neurologists are OK "in the middle."

Middle of the country, that is. Demand is great, and options are many, which puts many in central states like Illinois, Michigan, Missouri, and Wisconsin.

**READ ON** for a more in-depth review of what's impacting lifestyle and career geography for critical care specialists in 2025 and beyond.

**REACH OUT** to Rosman at any time for more information to help you narrow down your practice placement options.



# Where are new GI physicians putting down roots?

### A Look at Post-Fellowship Job Trends

When gastroenterologists finish fellowship training, their next move often reflects a mix of opportunity, lifestyle, and personal preference. And while it may seem like their job hires are scattered across the map, there are clear patterns that reveal where new GIs are most likely to land. We reviewed data on 739 gastroenterologists who accepted full-time roles after completing training, and the results offer insights into how this specialized workforce is shaping up across the U.S. and beyond.

# A snapshot of the numbers.

Let's start with the most popular destinations:

California — 93 New York — 72

Florida — 46

Pennsylvania — 52

**Texas** — 49

These five states alone accounted for a significant share of hires. Others like Illinois (27), North Carolina (29), Massachusetts (25), New Jersey (23) and Ohio (24) followed closely behind.



Other Noteworthy States

Meanwhile, smaller, or more remote states like Alaska,
Delaware, and Montana each only saw one new
GI placement. A few gastroenterologists chose international
opportunities — mainly in Canada (British Columbia and
Ontario), with others heading to additional global destinations.

# Why are some states left out?

### **Rural Realities & Recruitment Challenges**

Less populated or more remote states often lack the infrastructure to support large numbers of specialists. Places like Alaska, Montana, and parts of the Great Plains may have a need but struggle to compete with the compensation, amenities, and networks found in larger urban markets.

### **Professional Isolation**

Young physicians often seek vibrant peer networks and strong mentorship opportunities, something that is easier to find in metropolitan areas. For many, joining an established practice or academic center with robust support systems is a top priority.

### What's behind the location choices?



### **Population & Patient Demand**

High-population states with large and aging communities such as California, Florida, Texas, and New York, naturally create more demand for GI services. These areas often offer a steady stream of patients and robust healthcare networks.



### **Academic & Research Hubs**

Cities like Boston, New York City, Philadelphia, and Chicago are home to renowned academic medical centers. These environments appeal to early-career physicians interested in research, teaching, or practicing within innovative systems rich in resources and mentorship.



# Lifestyle & Personal Ties

For some new physicians, the appeal is simple, sunshine and beaches. That's why states like California, Florida, and Hawaii often attract interest. Others choose to stay in regions where they trained or have family connections. Familiarity and support systems go a long way in shaping these decisions.

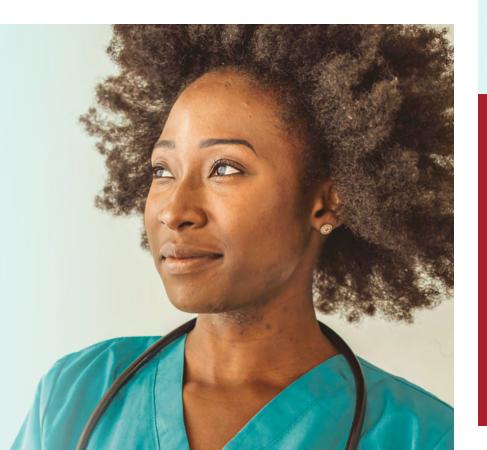


### **Financial & Tax Considerations**

The cost of living, compensation models, and tax environments also influence decisions. States like Texas and Florida, with no state income tax, offer added financial appeal. In contrast, states with higher living costs may compensate with larger salary packages or a wider range of job opportunities.

# The international factor.

While the number is small, a few new GIs ventured abroad — mainly to Canada, and a handful to other international destinations. For some, these moves reflect personal ties, a desire for global health experience, or research collaborations. It's a reminder that GI career paths can take many forms, and not all of them are within U.S. borders.



The **Rosman** perspective:

### What could the future hold?

### **Telemedicine & Remote Practice**

With the continued expansion of telehealth, it is possible that more gastroenterologists will be able to live wherever they want, while still serving patients across states or regions. This shift could redistribute the workforce over time, especially to underserved areas.

### **Rising Demand in Underserved Regions**

As the need for GI care grows in rural and remote communities, stronger incentives like loan forgiveness, signing bonuses, and competitive salaries may begin to sway more new graduates. These programs could help narrow the access gap while creating appealing career paths for early-career physicians.

### **Demographic** & Policy Shifts

States with growing populations, especially retirees in the Sun Belt, may see an increase in GI demand. Additionally, healthcare policy changes, such as expanded Medicaid or enhanced reimbursement for GI services, could make certain areas more attractive for practice.

### **Work-Life Balance Matters**

New physicians are placing greater emphasis on flexibility, work-life balance, and job satisfaction. Locations and practice models that support those values may have an edge in the coming years.

# Final thoughts.

Whether they are heading to high-volume hubs like New York and California, settling into academic powerhouses, or exploring opportunities in a more relaxed community, newly trained gastroenterologists are choosing where to build their careers based on a blend of professional and personal priorities.

For fellows evaluating their next steps, or employers looking to recruit the next wave of GI talent, these trends offer a valuable guide. As healthcare continues to evolve, so will the geography of gastroenterology.

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# Class of 2024 GI trainees.

### Accepted jobs by state.

- 1-25 trainees
- 26-50 trainees
- 51-75 trainees
- 76+ trainees



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# Where are new urologists putting down roots?

Ever wonder where urologists end up practicing after they have completed their fellowships or residencies? We recently looked at data on 389 Urologists who recently completed training across the United States (and a few in Canada and beyond). Below is a snapshot of where they decided to settle, along with some thoughts on why certain spots are more popular than others.

# Quick overview of the numbers.

Not surprisingly, the biggest states in terms of population and healthcare infrastructure drew the most 2024 trainees:

California — 43

**Texas** — **29** 

New York — 26

Florida — 20

These four states consistently top the charts, thanks to their large patient populations and robust medical communities.



**Other Noteworthy States** 

Other states with strong showings include: Virginia (16), North Carolina (15), Washington (15), New Jersey (15), Colorado (12), Massachusetts (12). Maryland (11), Ohio (11), Pennsylvania (11), Georgia and Indiana (10 each). While smaller in comparison, these states offer thriving metro areas and well-established health systems that attract young physicians.

On the other end of the spectrum, a few states, and territories, including Alaska, Montana, North Dakota, Puerto Rico, Vermont, and West Virginia, only saw one or two new urologists. These areas, though in need of specialists, often struggle to compete with larger or more urban centers.

International hires of trainees were limited but notable. A few new urologists made the move to Canada (British Columbia, Ontario, Quebec, Saskatchewan) or even further abroad, to places like the United Arab Emirates.

# What about international hires?

While many new urologists stay in the U.S., a few opt for international opportunities. Some may be returning to their home countries, while others are drawn to unique cultural experiences, research opportunities, or the chance to work within different healthcare systems.

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# What's driving these choices?



### **Population & Patient Demand**

Urologists tend to go where the patients are. High-population states like California, Texas, Florida, and New York offer no shortage of clinical volume. Especially with aging populations that typically need more urological care.



### **Academic & Research Hubs**

Many new urologists gravitate toward cities with renowned academic medical centers. Places like Boston, Denver, Baltimore, and Seattle are magnets for those looking to participate in advanced research, continue their subspecialty training, or collaborate with top experts.



### Lifestyle & **Personal Ties**

Some doctors stay where they are trained, thanks to strong personal or professional ties. Others are drawn by lifestyles such as good weather, vibrant city life, outdoor recreation, or proximity to family. These personal factors often tip the scales when choosing between offers.



### **Financial & Career Incentives**

States with strong job markets or higher salaries, like Texas and Florida, often look more attractive, especially when combined with no state income tax. Even in higher-cost areas like New York or California, extensive hospital systems and competitive compensation can make the trade-off worthwhile.



# Rural vs.

Rural states may face greater challenges in attracting new urologists, despite a pressing need. Many young specialists start out in urban areas where they can join larger practices, benefit from mentorship, and work with innovative technology. That said, with the right incentives, such as loan repayment or signing bonuses, some rural regions are starting to gain ground.



The **Rosman** perspective:

# Looking ahead.

### Telehealth & **Technology**

Although urology remains hands-on in many respects, telemedicine is opening new possibilities, especially for post-op consultations and routine follow-ups. As this tech continues to evolve, it may give future urologists more flexibility where they practice.

### **Policy & Incentive Changes**

More states are introducing creative incentives to attract physicians to underserved areas, including loan forgiveness, relocation support, and rural practice subsidies. These efforts could start to shift the map in coming years.

### **Population Trends**

The aging of the U.S. population, especially in retirement-heavy states like those in the Sun Belt, means growing demand for urologists. This will likely continue to drive job growth in these areas.

# **Final** thoughts.

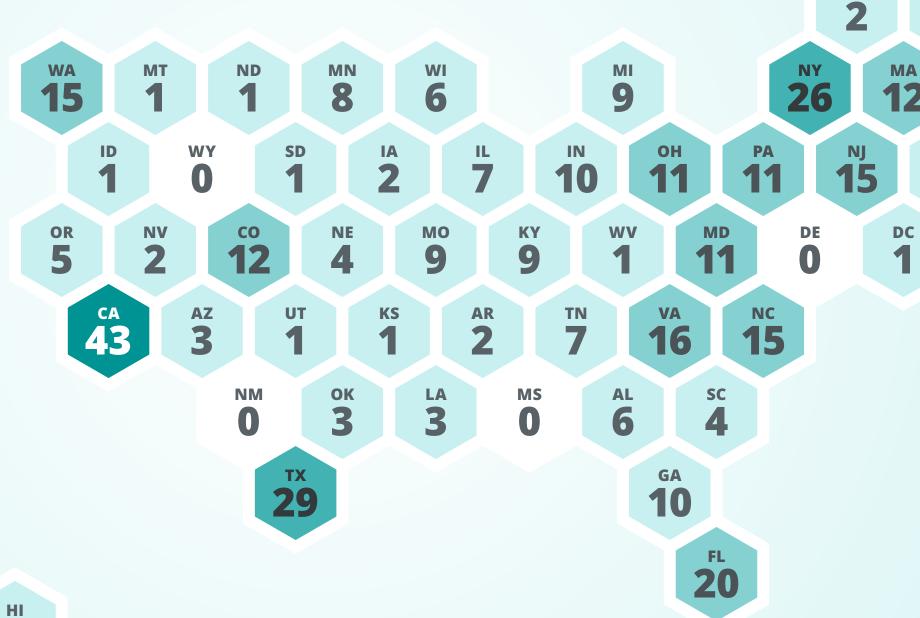
From big cities like Los Angeles and New York to mid-sized hubs like Raleigh and Denver, new urologists are choosing locations based on a mix of patient demand, lifestyle preferences, academic opportunities, and personal connections. A smaller but significant group is even venturing internationally in search of the right fit.

For hospitals and practices looking to attract top talent, understanding these trends can help tailor recruiting strategies. And for early-career urologists, it is not just about finding a job, it's about finding the right place to build a life and career. Because where you settle can shape not just your practice, but your future. AK

# Class of 2024 urology trainees.

### Accepted jobs by state.

- 1-10 trainees
- 11-20 trainees
- 21-30 trainees
- 31+ trainees



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# Where are new neurosurgeons setting up shop?

Neurosurgery is one of the most rigorous and in-demand fields in medicine, so it is only natural to wonder where these specialists land once they finish training. We looked at 268 neurosurgeons who accepted positions across the United States and internationally. Below is a snapshot of what we found, plus a few thoughts on why certain places are pulling in more neurosurgeons than others.

## The numbers at a glance.

Some states clearly lead the way when it comes to attracting new neurosurgeons.







Less common destinations states such as Arkansas, Delaware, Hawaii, Montana, New Hampshire, New Mexico, Rhode Island, and West Virginia saw only one or two hires each. And a handful of neurosurgeons took positions in places like Jeddah, Jerusalem, Ethiopia, Mato Grosso do Sul, and Rio Grande do Sul (Brazil) which highlights the truly global scope of this specialty.

## Why the big states lead.

### **High Population**, **High Demand**

Larger populations naturally create higher demand for specialized services, especially in trauma care, spine disorders, and complex neurological conditions. Add in aging populations in states like Florida, and the need only grows.

### **Academic & Research Powerhouses**

Major academic centers and research hospitals are magnets for newly trained neurosurgeons. Cities like Boston, New York City, Chicago, and Houston offer innovative technology, subspecialty training, and vibrant professional communities.

### **Large Hospital Systems**

Well-established hospital networks offer the surgical volume and case variety neurosurgeons want. These systems also tend to offer strong support teams and resources, making them appealing destinations for those just out of training.

## What drives these decisions?



# Lifestyle & Personal Goals

After years of intense training, lifestyle plays a significant role. Some prioritize sunny weather, mountain access, or proximity to family. Others look for cultural offerings, good schools, or strong communities for raising children.



### **Compensation** & Cost of Living

Even in a high-earning field like neurosurgery, financial considerations matter. States with no income tax (like Texas and Florida) or lower cost of living may offer more take-home pay, while high-cost areas like California and New York remain attractive due to professional benefits and opportunities.



### **Mentorship & Career Growth**

Many new neurosurgeons seek mentorship as they refine subspecialty skills in areas like spine, neuro-oncology, or cerebrovascular surgery. Academic institutions and major teaching hospitals offer structured environments that support this kind of growth.



# **International** hires and unique destinations.

While most new neurosurgeons stay in the U.S., a notable number head abroad, especially to Canada (Ontario, Quebec, British Columbia, Alberta) and occasionally to more far-flung locations. These neurosurgeons go international for a multitude of reasons. Family or cultural ties draw some back to their home countries, research opportunities and international grants can be attractive for those with academic or global health interests and healthcare system differences also appeal to those curious about practicing in single-payer systems or emerging private networks.

The **Rosman** perspective:

### What's next?

### **Technology**

Advancements in robotics. AI, and telemedicine may reshape practice patterns in the coming years. Hospitals with innovative equipment could become even bigger magnets for tech-savvy neurosurgeons.

### **Rural Demand**

There is a growing need for neurosurgical services in rural areas, though recruitment remains a challenge. If smaller hospitals can improve incentives or share resources with urban centers, we may see more early-career neurosurgeons willing to fill these critical roles.

### Global Collaboration

As the field continues to specialize, international partnerships may become more common, especially for rare procedures or complex cases. These collaborations could offer new training avenues and research paths, especially for those eager to build a global impact.

# **Final** thoughts.

The data shows that newly trained neurosurgeons tend to land in high-demand, wellresourced states, often anchored by academic centers and strong hospital systems. Still, a portion of them take more unique paths, whether abroad or in less common U.S. locations, driven by personal priorities and career aspirations.

For hospitals and health systems looking to recruit top neurosurgical talent, understanding these trends is key. Offering strong mentorship, competitive compensation, and a supportive work environment can go a long way in attracting the next generation of neurosurgeons.

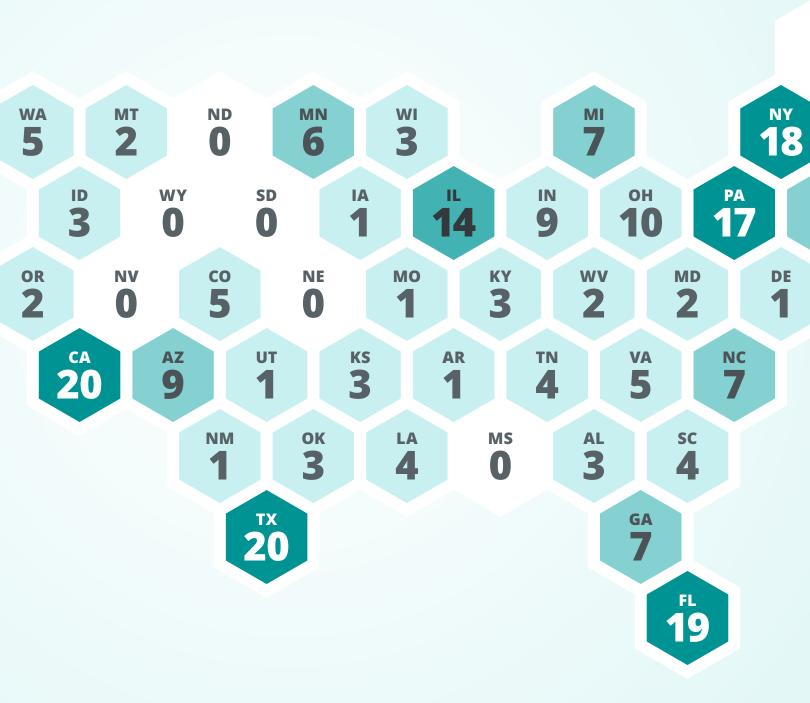
And for the neurosurgeons themselves, this first job out of residency or fellowship is more than a title, it's the beginning of a long, impactful career. Choosing the right environment to grow in, both professionally and personally, sets the tone for everything that follows.



# Class of 2024 neurosurgery trainees.

### Accepted jobs by state.

- 1-5 trainees
- 6-10 trainees
- 11-15 trainees
- 16-20 trainees



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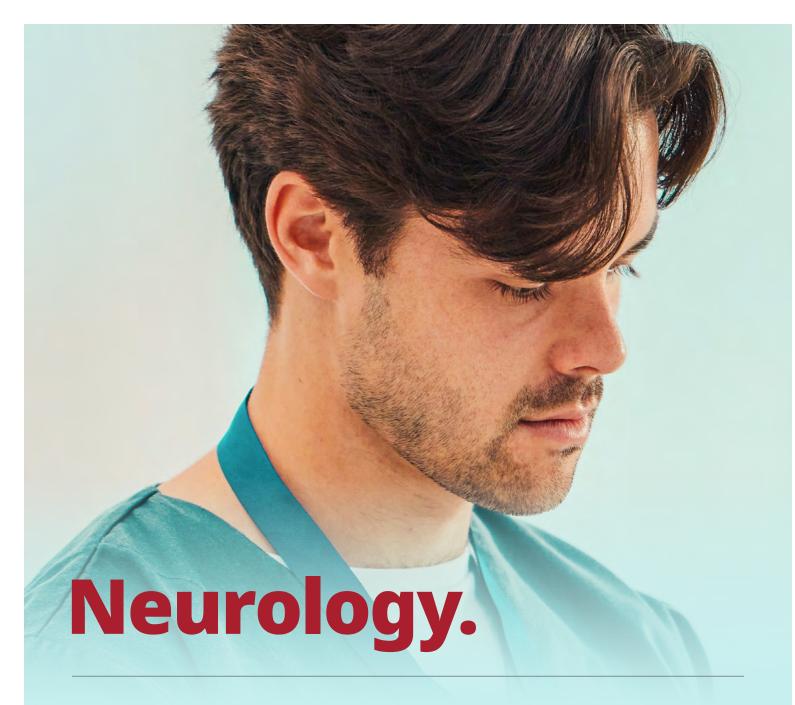
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# Where are newly trained neurologists landing?

Neurology is one of the most wide-ranging medical specialties, spanning everything from innovative neuroscience to collaborative primary care. But once neurologists complete their training, where do they go next? We reviewed data from 1,091 hires of recent neurology graduates, spanning the U.S. and a few international destinations, to uncover where new neurologists are choosing to begin their careers and why.

# The big picture: top destinations.

Unsurprisingly, several states stand out as the most common landing spots for new neurologists:

California — 115
New York — 90
Florida — 84
Texas — 67
Illinois — 55
Pennsylvania — 54
Ohio — 54
Massachusetts — 46
Michigan — 36
Georgia — 35

These ten states alone account for well over half of all new neurologist hires, with California leading the pack.



### **Other Noteworthy States**

Beyond the top ten, several other states also attract a solid number of newly trained neurologists: New Jersey (33), North Carolina (29), Wisconsin (29), Maryland (25), Colorado (25), Tennessee (25), Missouri (24), and Virginia (20) show strong mid-tier hire figures.

At the other end of the spectrum, a few more remote or less populated states — including Alaska, Maine, North Dakota, and Vermont — had just one hire each. These numbers highlight the wide variation in demand, infrastructure, and opportunities across the country.

# What about international hires?

Although most new neurologists remain stateside, a few venture abroad to places like Bangkok, Zurich, Reykjavik, and several Canadian provinces including Ontario, Quebec, British Columbia, and Alberta. These often reflect personal motivations, such as returning to a home country, pursuing research abroad, or exploring healthcare systems with different administrative or funding models.

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# Why these states stand out.



# Population Density & Demand

Larger states like California, New York, Florida, and Texas have the patient populations to match. With aging residents and rising rates of neurological conditions like Alzheimer's, Parkinson's, and stroke, the demand for care is higher and so are the job opportunities.



### Lifestyle Considerations

Quality of life plays a significant role too. Whether it is the sunshine and beaches of California and Florida, the academic legacy of Massachusetts, or the outdoor recreation of Colorado, personal lifestyle preferences can be a powerful factor in deciding where to practice.



### Academic & Research **Opportunities**

Cities like Boston, New York, Cleveland, San Francisco, and Los Angeles host some of the nation's top research institutions and medical schools. For many neurologists starting out, proximity to academic medicine and access to robust research programs in areas like epilepsy, neurodegenerative diseases, and stroke care are a major draw.



### **Economic & Policy Incentives**

Competitive salaries, favorable malpractice environments, and strong reimbursement structures can help offset higher living costs in places like California and New York. Some states may also offer student loan forgiveness or relocation support to attract specialists.



### **Hospital Networks** & Specialization

States with multiple large hospital systems such as Pennsylvania, Illinois, and Texas, offer structured environments for subspecialty training and practice, including neurocritical care, neuroimmunology, and movement disorders.



The **Rosman** perspective:

# Where neurology might be headed.

### **Telehealth Growth**

As neurology continues embracing telemedicine, especially in telestroke programs and follow-ups, more neurologists may live in less traditional areas while still serving large patient populations remotely.

### **Increased Demand** in Aging States

States like Florida and Arizona, with rapidly growing senior populations, may see an influx of neurologists to meet the demand for specialized memory care, stroke services, and movement disorder clinics.

### **Policy & Incentive Programs**

If more states roll out loan forgiveness or other incentive programs for underserved or rural areas, we may see new neurologists heading to places that have historically had lower hire counts.

### **Collaboration** & Innovation

Neurologists drawn to innovative research or clinical trials will continue to cluster in regions investing heavily in biotech and neuroscience infrastructure.

# Final thoughts.

The decisions newly trained neurologists make about where to practice are shaped by professional opportunity and personal preference. For healthcare systems aiming to attract top neurologists, understanding these trends is key. Whether it's working in a high-profile academic center in New York, joining a large hospital system in Texas, or starting a unique journey in Reykjavik, these early career choices set the stage for a future of service, learning, and impact.

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# Class of 2024 neurology trainees.

### Accepted jobs by state.

- 1-25 trainees
- 26-50 trainees
- 51-75 trainees
- 76+ trainees



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# Rosman