

# **Crisis? What Crisis? Nevada's Health Care Workforce: Implications for Health Reform and Public Health**

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# Overview

- Nevada's health workforce ranking among US states
- Geographic maldistribution of health professionals within Nevada
- Physician, nursing, and mental health workforce trends in Nevada
- Policy implications – insurance coverage expansion proposals, state's poor population health profile, and state budget crisis



*"Your prognosis is tied to the outcome of the election."*

# **Nevada's Ranking Among US States and the Geographic Maldistribution of Health Professionals Within Nevada**

# General Trends

- We're number 50! Widespread shortages of health care professionals across most health care occupations and specialty areas versus other states
- Geographic maldistribution – Shortages are particularly acute in rural and frontier regions
- Shortages are compounded by boomer-fueled demand and the looming retirement of boomer-born health care professionals in Nevada and the US
- Good news for students and future health professionals – Health care occupations are recession-resistant, if not recession proof

# Nevada Health Rankings – Physicians

- Physicians, MDs – 46<sup>th</sup> among US states
- Primary care physicians – 46<sup>th</sup>
- Psychiatrists – 46<sup>th</sup>
- Obstetricians and Gynecologists – 41<sup>st</sup>
- General surgeons – 50<sup>th</sup>
- Specialty surgeons – 50<sup>th</sup>
- Physicians, DOs – 19<sup>th</sup>

Source: Health Care Rankings 2008. Washington DC: CQ Press.

# Nevada Health Rankings – Nursing

- Licensed Practical Nurses (LPNs) – 47<sup>th</sup>
- Registered Nurses (RNs) – 49<sup>th</sup>
- Neighboring states' RN rankings
  - Arizona – 50<sup>th</sup>
  - California – 45<sup>th</sup>
  - Idaho – 47<sup>th</sup>
  - Utah – 46<sup>th</sup>

Source: Health Care Rankings 2008. Washington DC: CQ Press.

# Nevada Health Rankings – Other

- Dentists – 42<sup>nd</sup>
- EMTs and Paramedics – 40<sup>th</sup>
- Optometrists – 30<sup>th</sup>
- Pharmacists – 26<sup>th</sup>
- Physical Therapists – 50<sup>th</sup>
- Physician Assistants – 38<sup>th</sup>

Source: Health Care Rankings 2008. Washington DC: CQ Press.

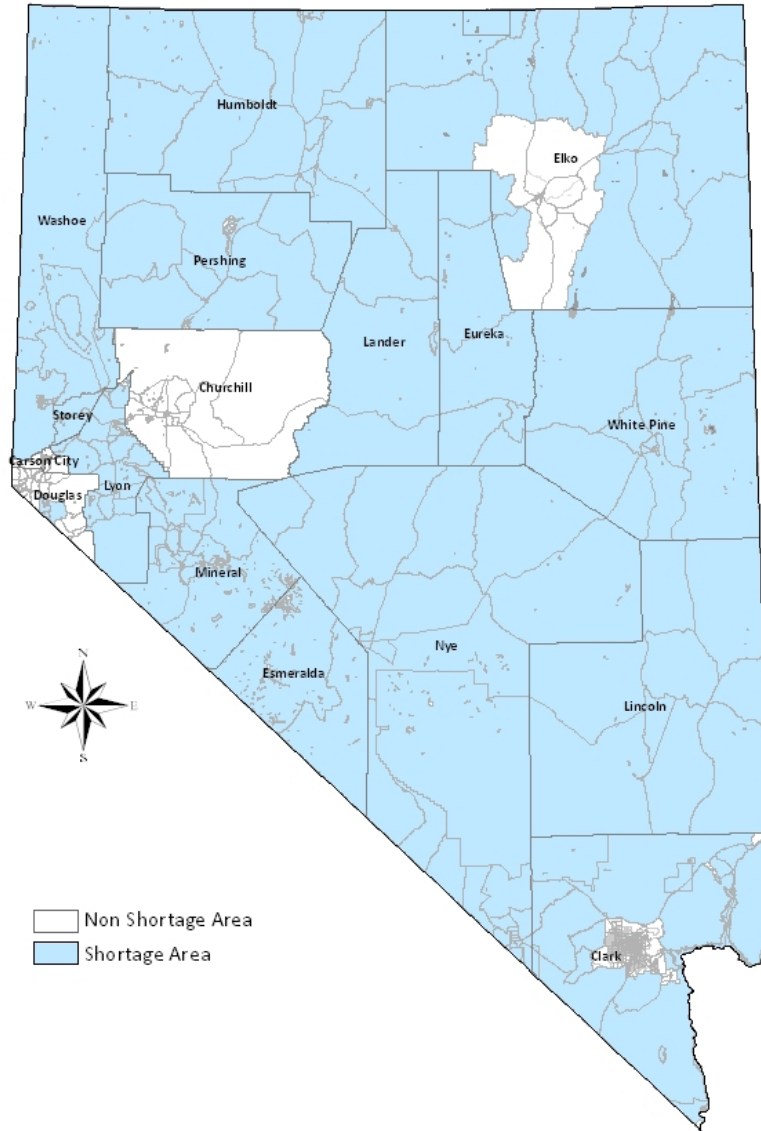
# Geographic Maldistribution

- With few exceptions, the number of licensed health professionals per 100,000 residents is much lower in rural versus urban counties
- Rural clinics and hospitals are at a competitive disadvantage versus urban facilities in their ability to recruit and retain health professionals

# Geographic Maldistribution

- Single-county health professional areas (HPSAs) in rural Nevada:
  - 11 primary medical care HPSAs
  - 13 mental health care HPSAs
  - 13 dental care HPSAs
- Substantial population-based and geographic areas within urban counties are HPSAs

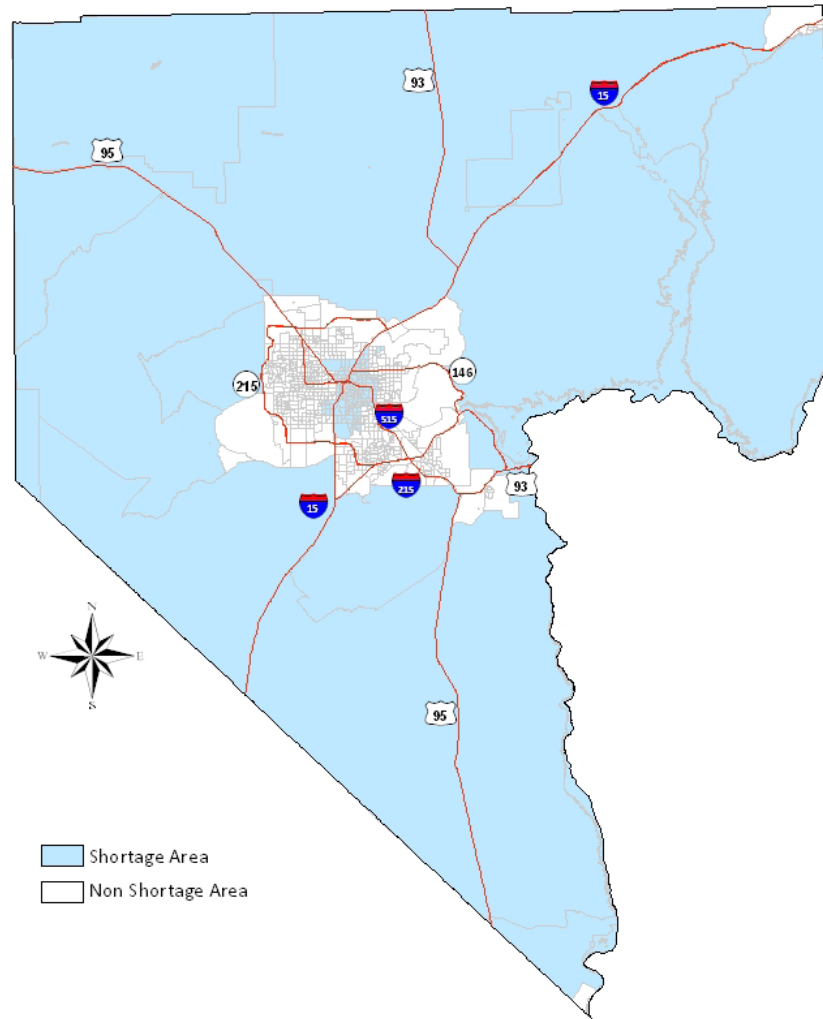
**Map 4: Primary Medical Care Health Professional Shortage Areas in Nevada**



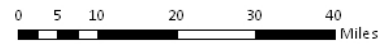
Source: Nevada Office of Rural Health (2009)

0 12.5 25 50 75 100 Miles

**Map 5: Primary Medical Care Health Professional Shortage Areas in Clark County**



Source: Nevada Office of Rural Health (2009)



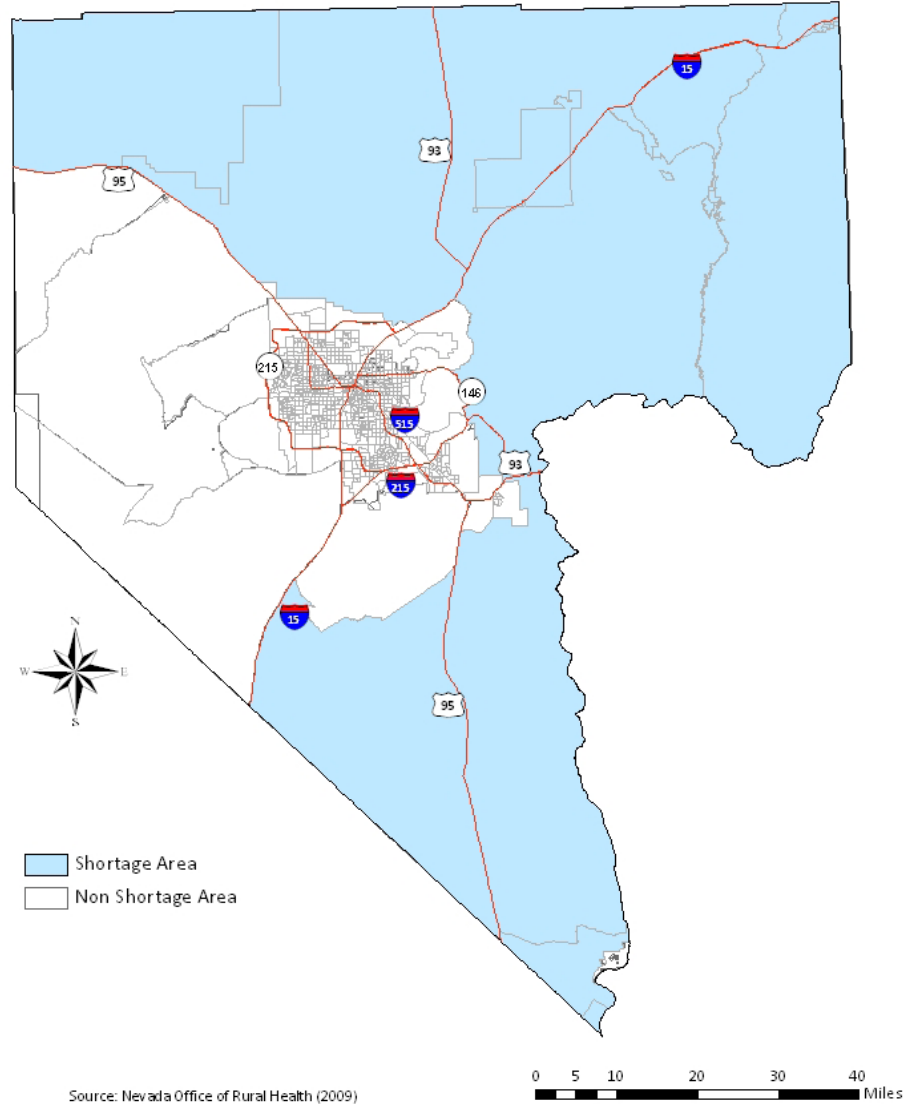
**Map 6: Mental Health Professional Shortage Areas in Nevada**



Source: Nevada Office of Rural Health (2009)

0 12.5 25 50 75 100 Miles

Map 7: Mental Health Professional Shortage Areas in Clark County

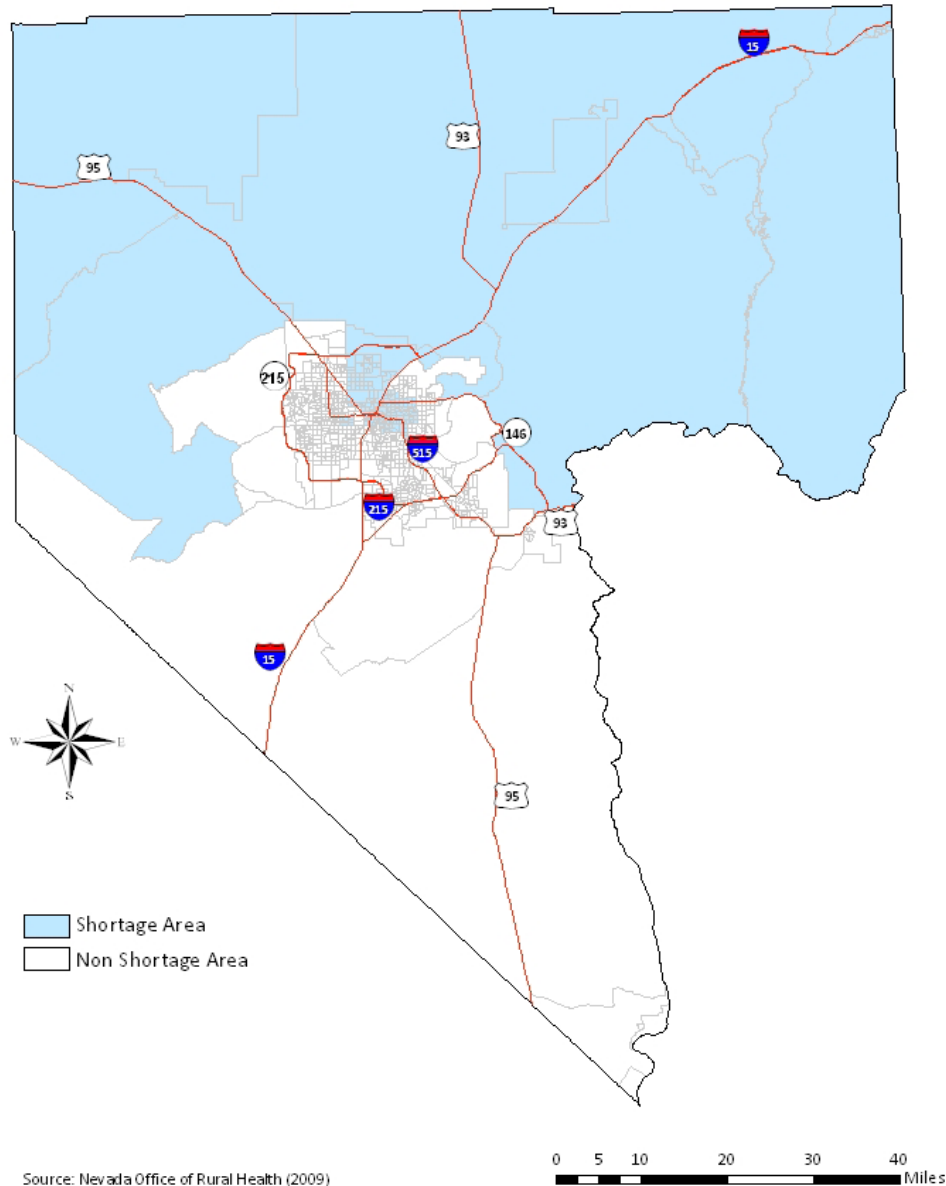


### Map 8: Dental Health Professional Shortage Areas in Nevada



Source: Nevada Office of Rural Health (2009)

Map 9: Dental Health Professional Shortage Areas in Clark County



Source: Nevada Office of Rural Health (2009)

# **Physician, Nursing, and Mental Health Care Workforce in Nevada**

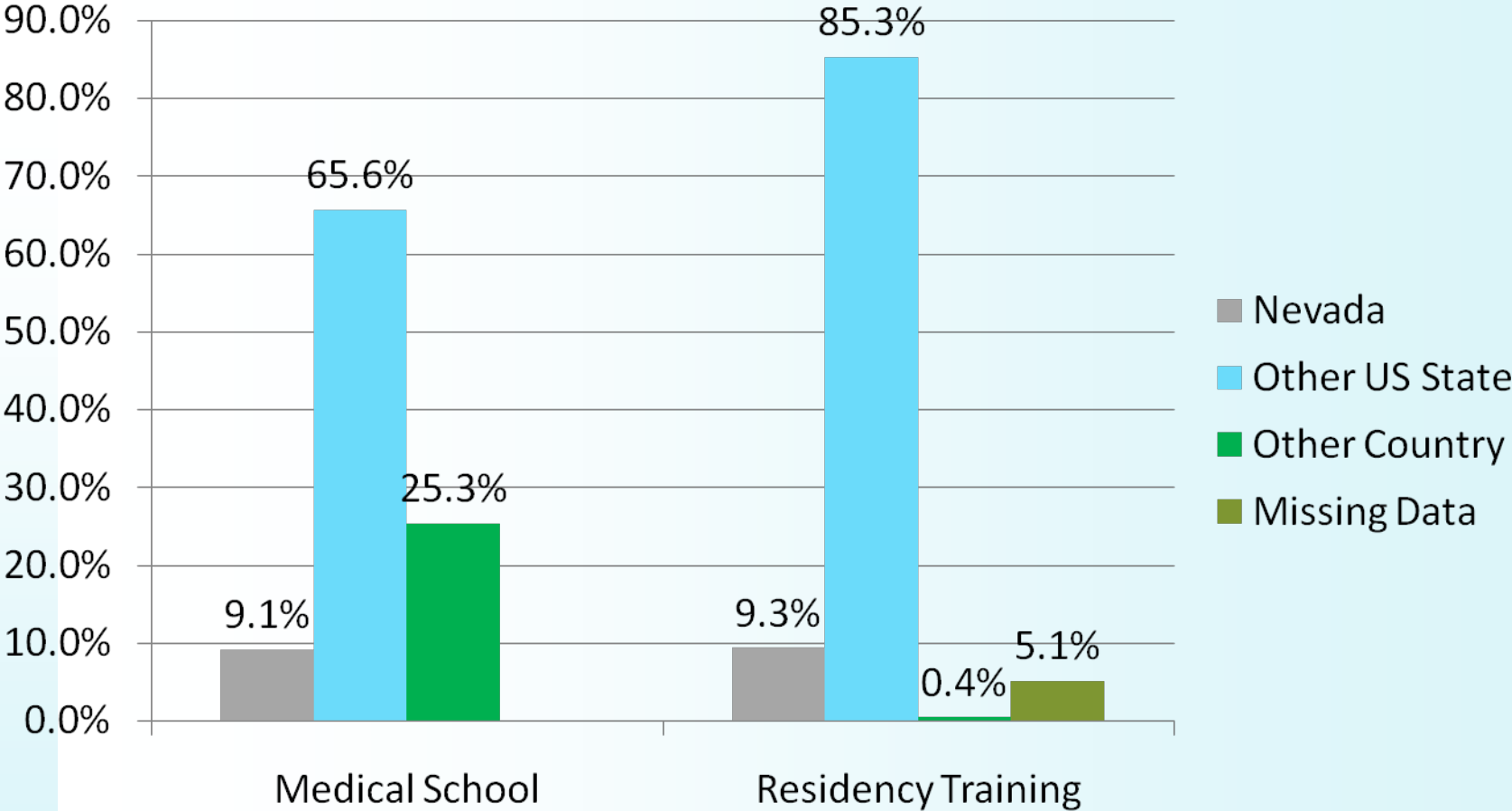
# Physician Workforce in Nevada

- 4,796 allopathic physicians (MDs) in Nevada with an active license (85.8%) in 2007
- 795 MDs with an inactive license (14.2%)
- Total of 5,591 MDs
- 1,693 or 30.3% of the physician work force are international medical graduates (IMGs)
- 512 osteopathic physicians (DOs)

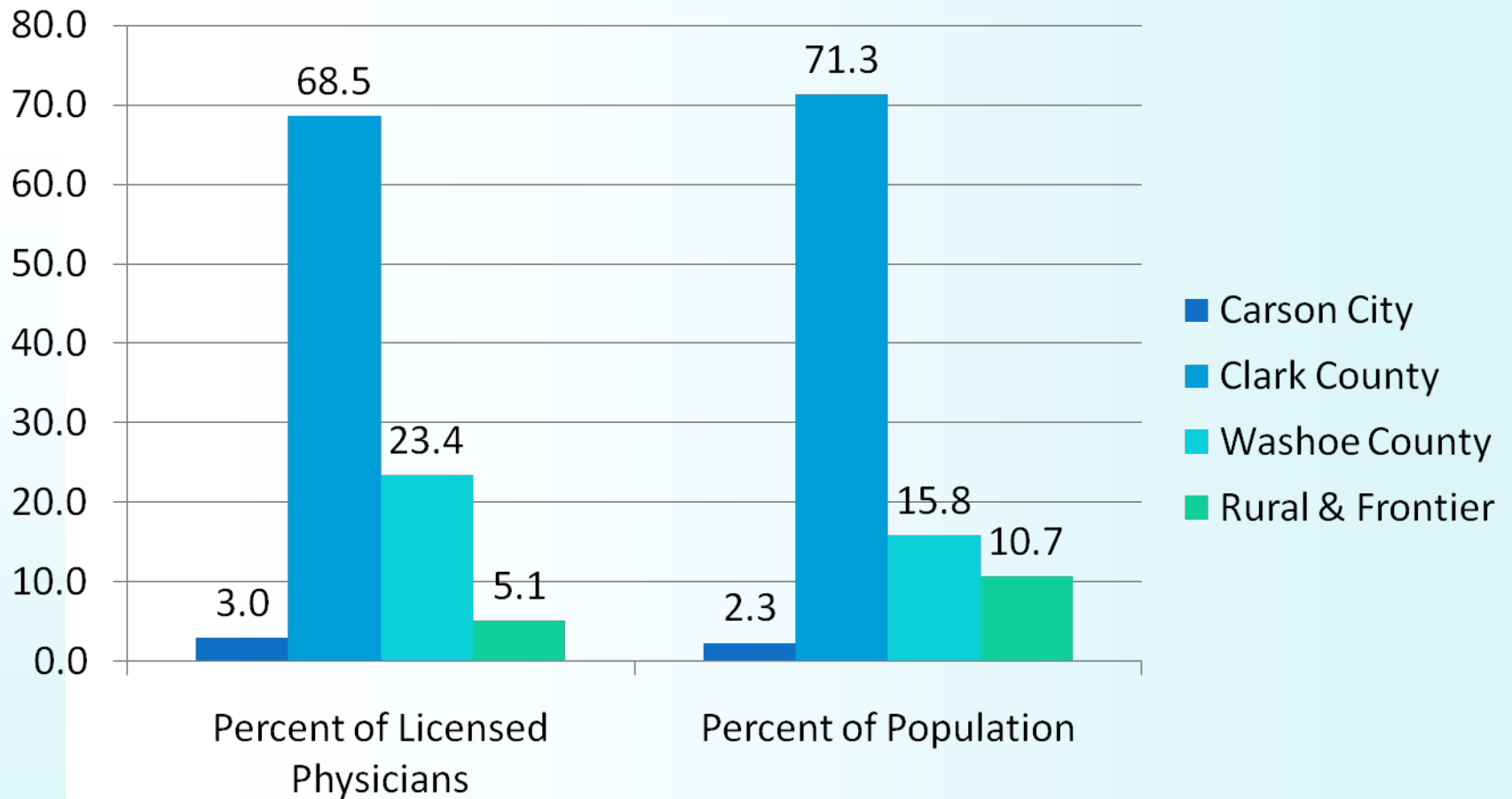
# Physician Workforce in Nevada

- In 2007, 23.1% of MDs are women, versus 15.4% in 1997
- 79.4% of MDs are employed in direct patient care (i.e., hospital or office-based clinical practice) versus 20.6% employed in administration, medical teaching/research, and other non-patient care activities
- Female MDs are more likely to be providing patient care (83.7%) than male MDs (78.2%)
- 40.0% of MDs are practicing in primary care specialties (family med, general practice, internal med, ob/gyn, pediatrics) versus medical and surgical specialties (42.1%)

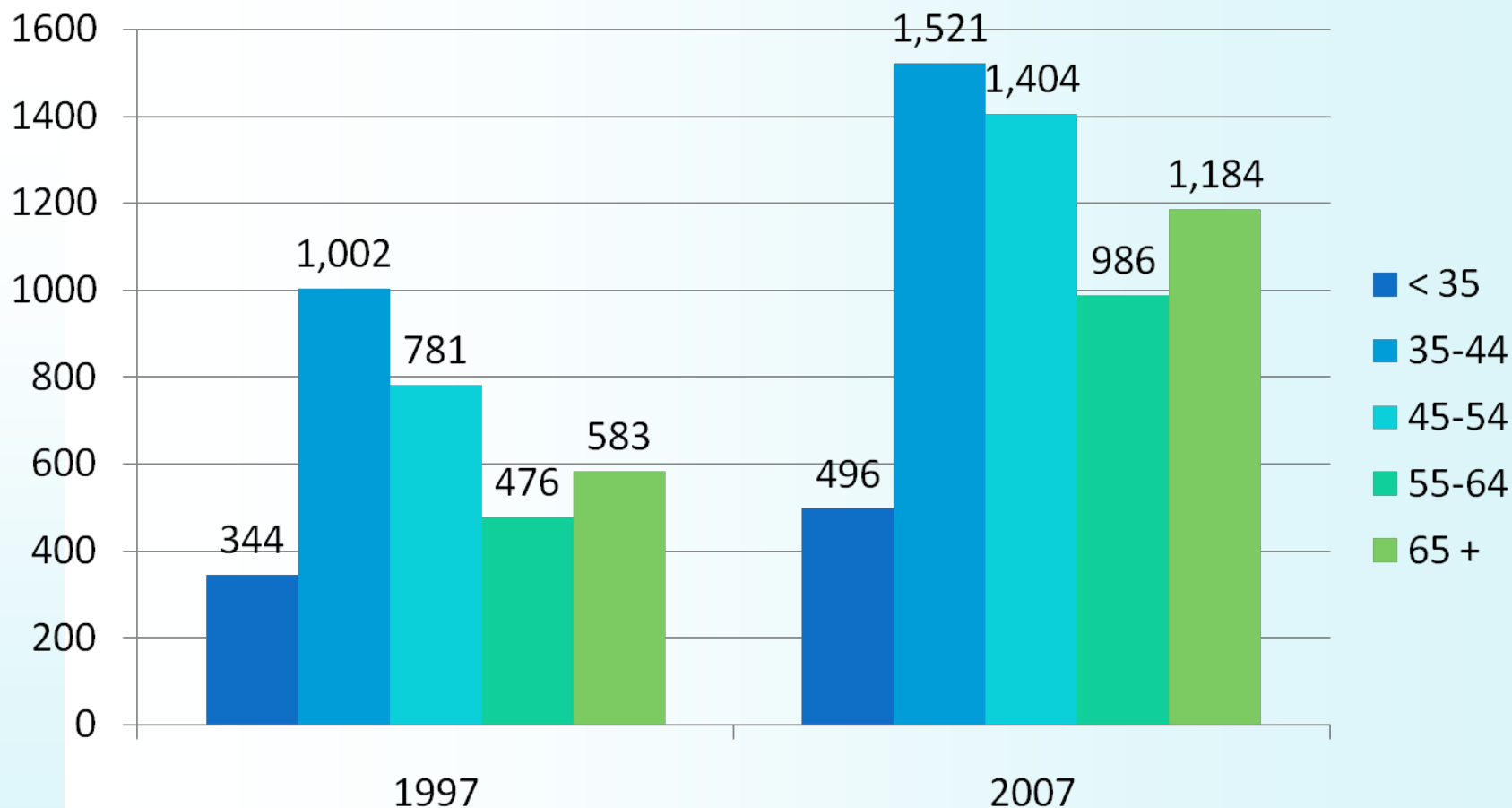
# Undergraduate and Graduate Medical Education of Physicians in Nevada – 2006



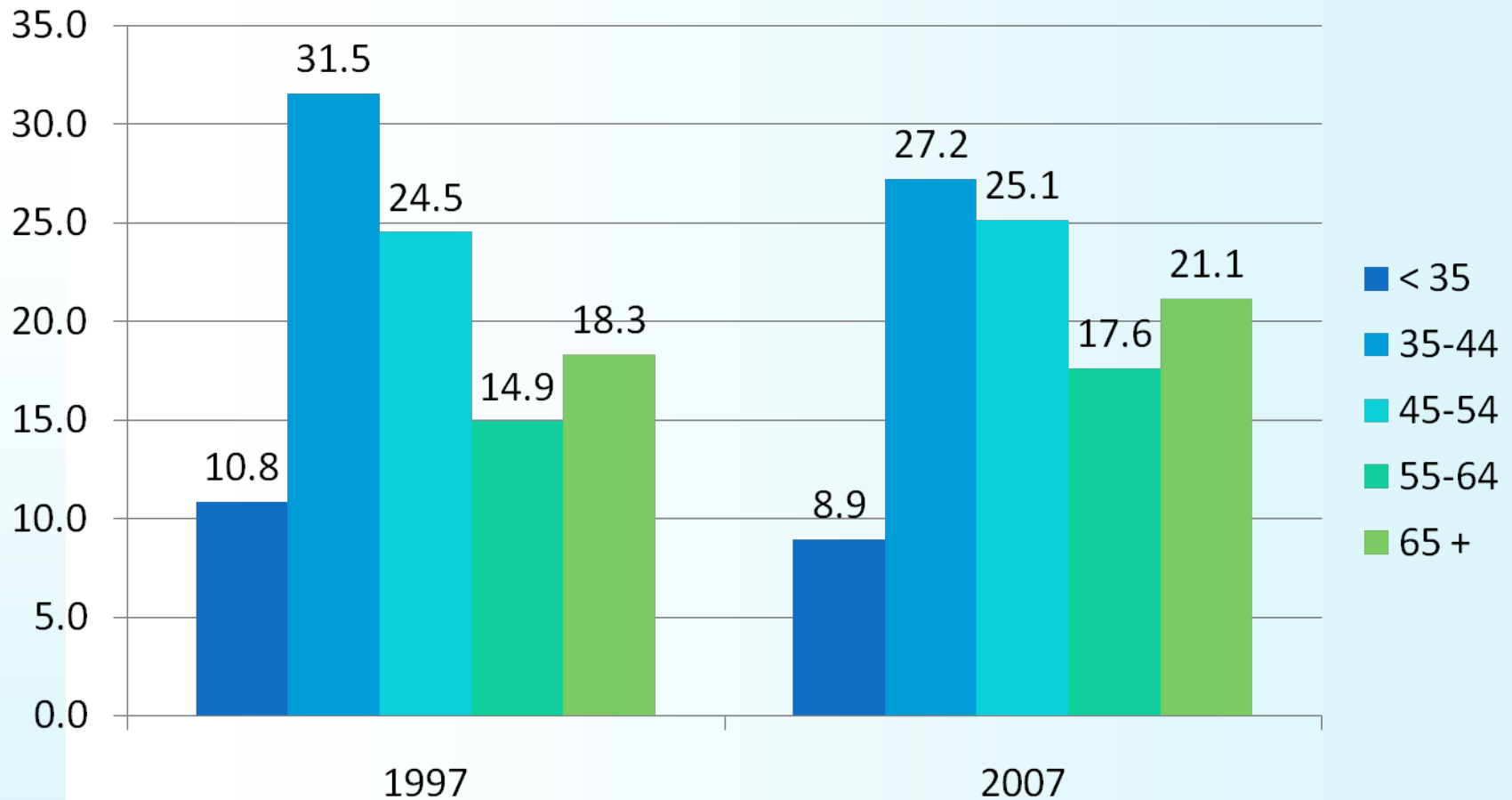
# Physician Workforce in Nevada – 2007



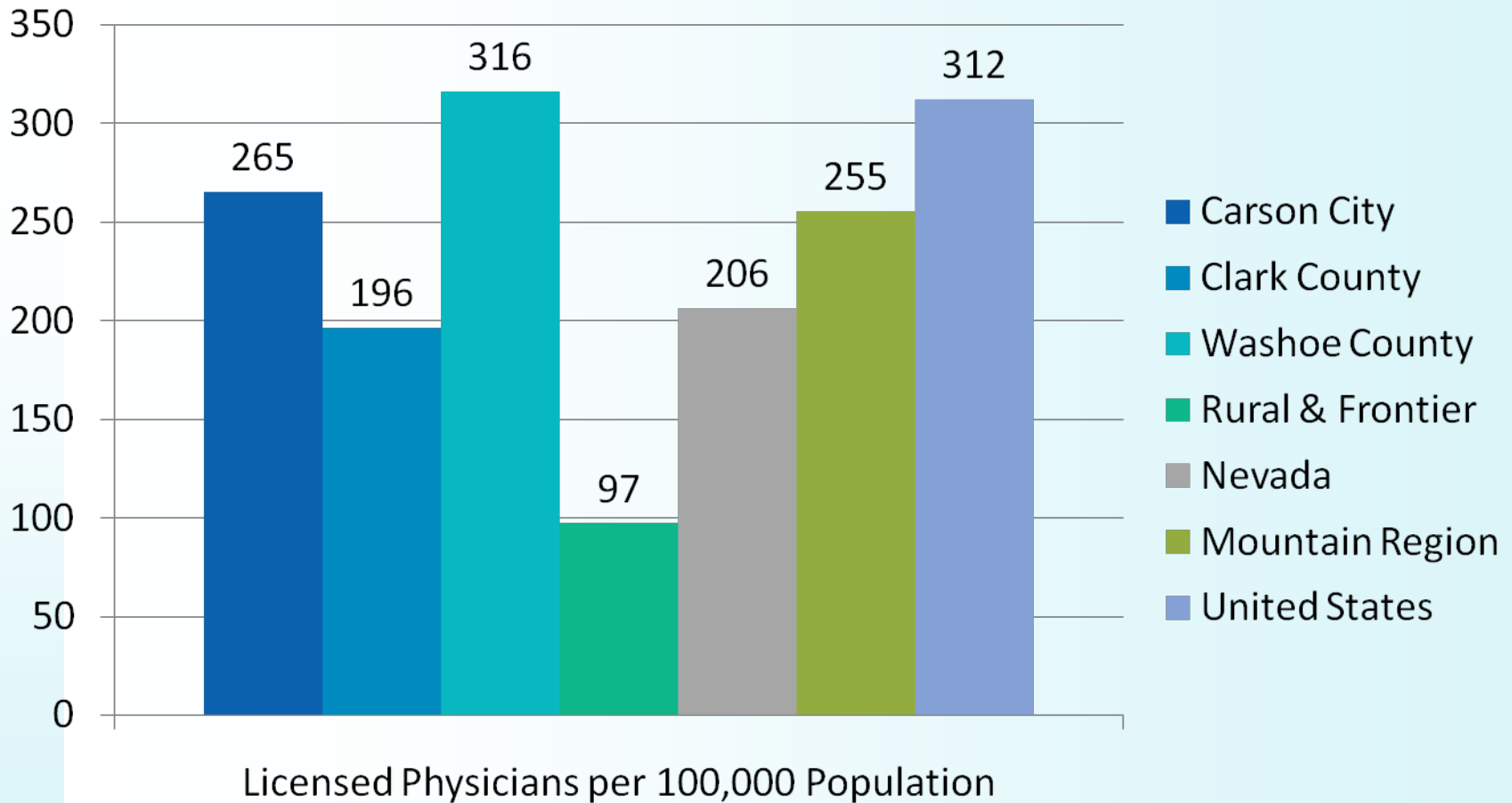
# Age Distribution of Physician Workforce in Nevada – 1997 to 2007 (Number)



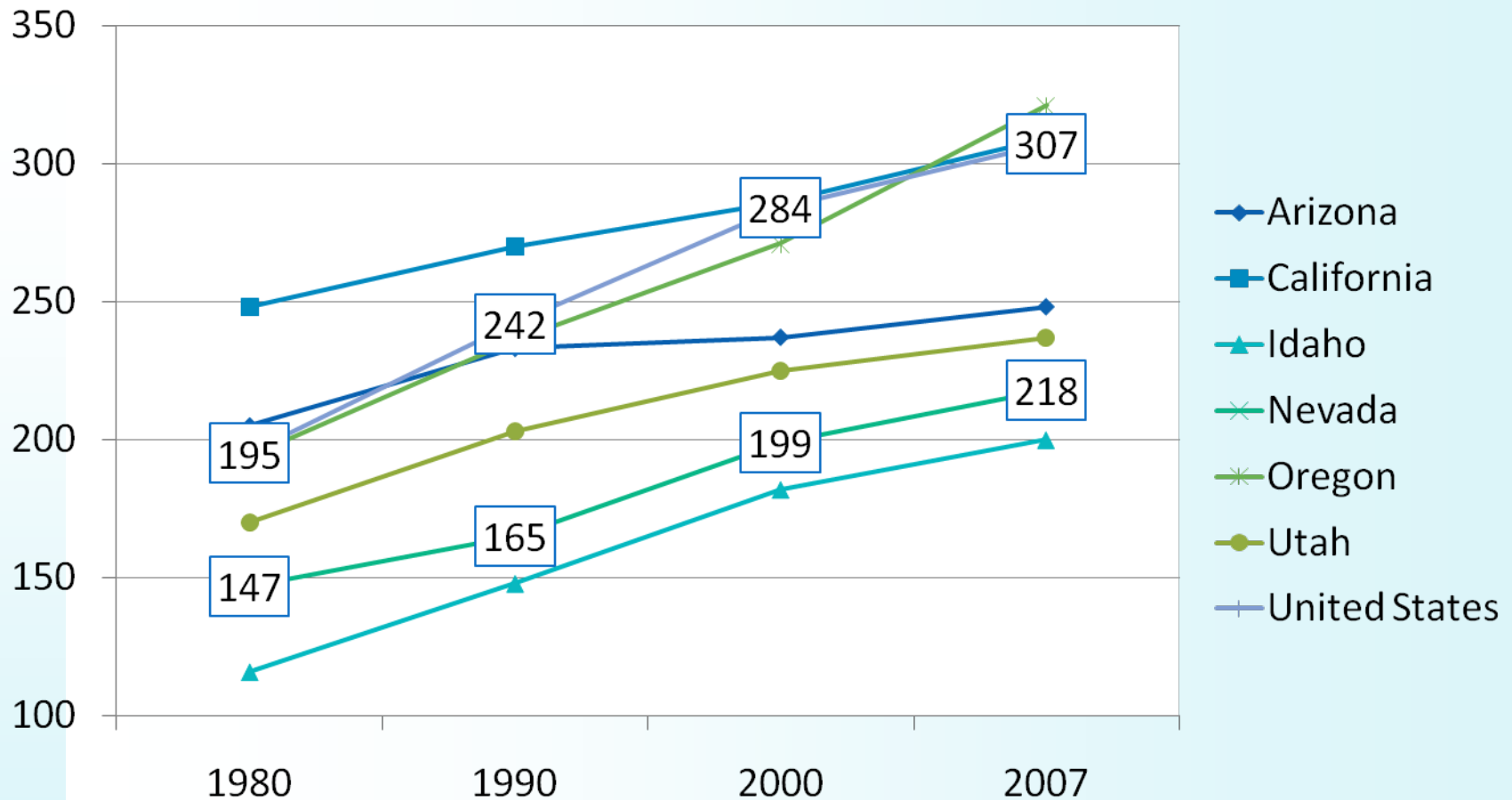
# Age Distribution of Physician Workforce in Nevada – 1997 to 2007 (Percent)



# Physician Workforce in Nevada – 2007



# Number of Physicians per 100,000 Population – 1980 to 2007



# Physician Supply by Specialty – 2007

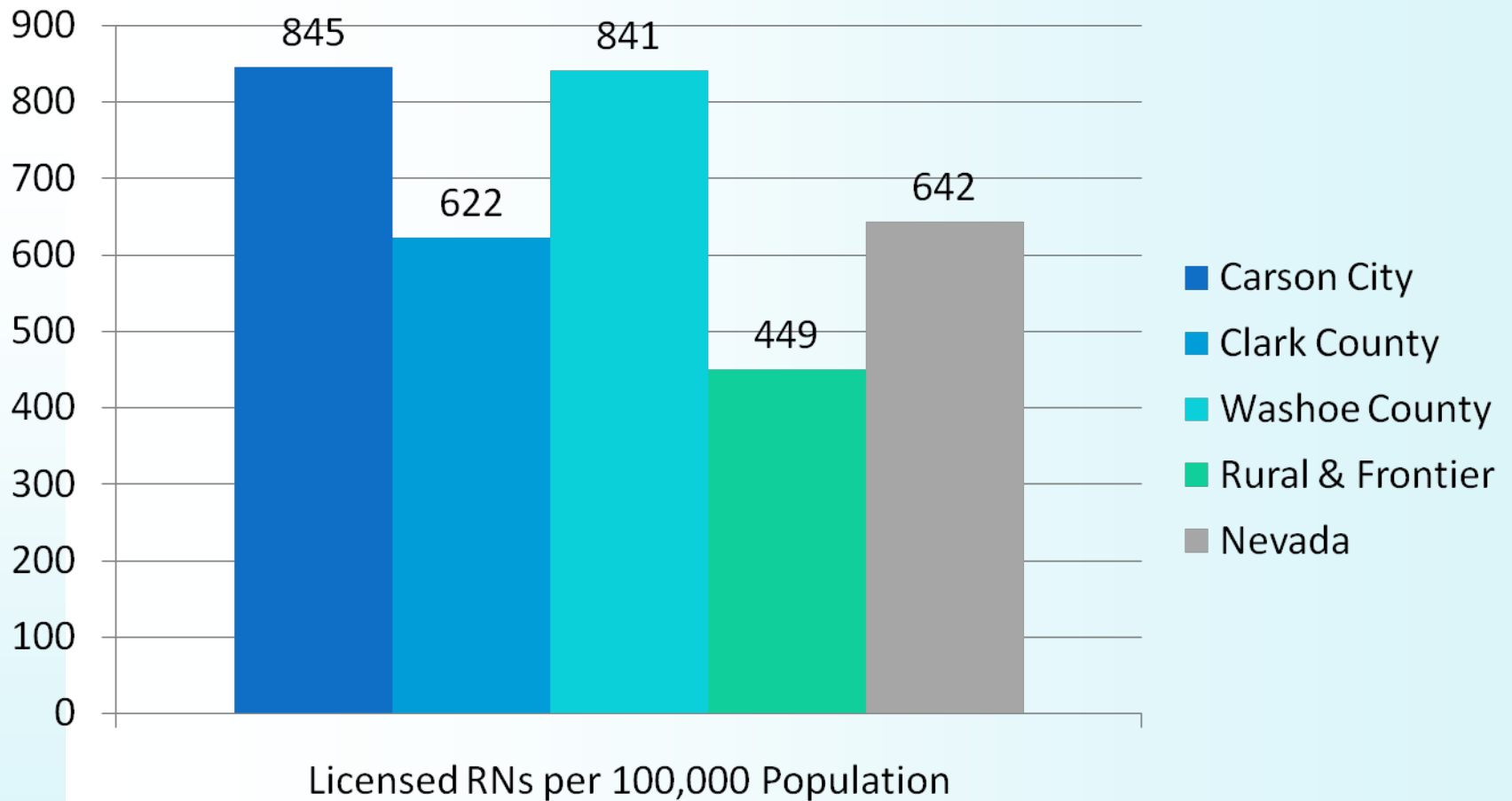
- Of 39 specialty areas, only five specialty areas possess higher number of licensed MDs per 100,000 population in Nevada versus the Mountain Region
  - Cardiovascular disease
  - Internal medicine
  - Thoracic surgery
  - Anesthesiology
  - Forensic medicine

# Physician Supply by Specialty – 2007

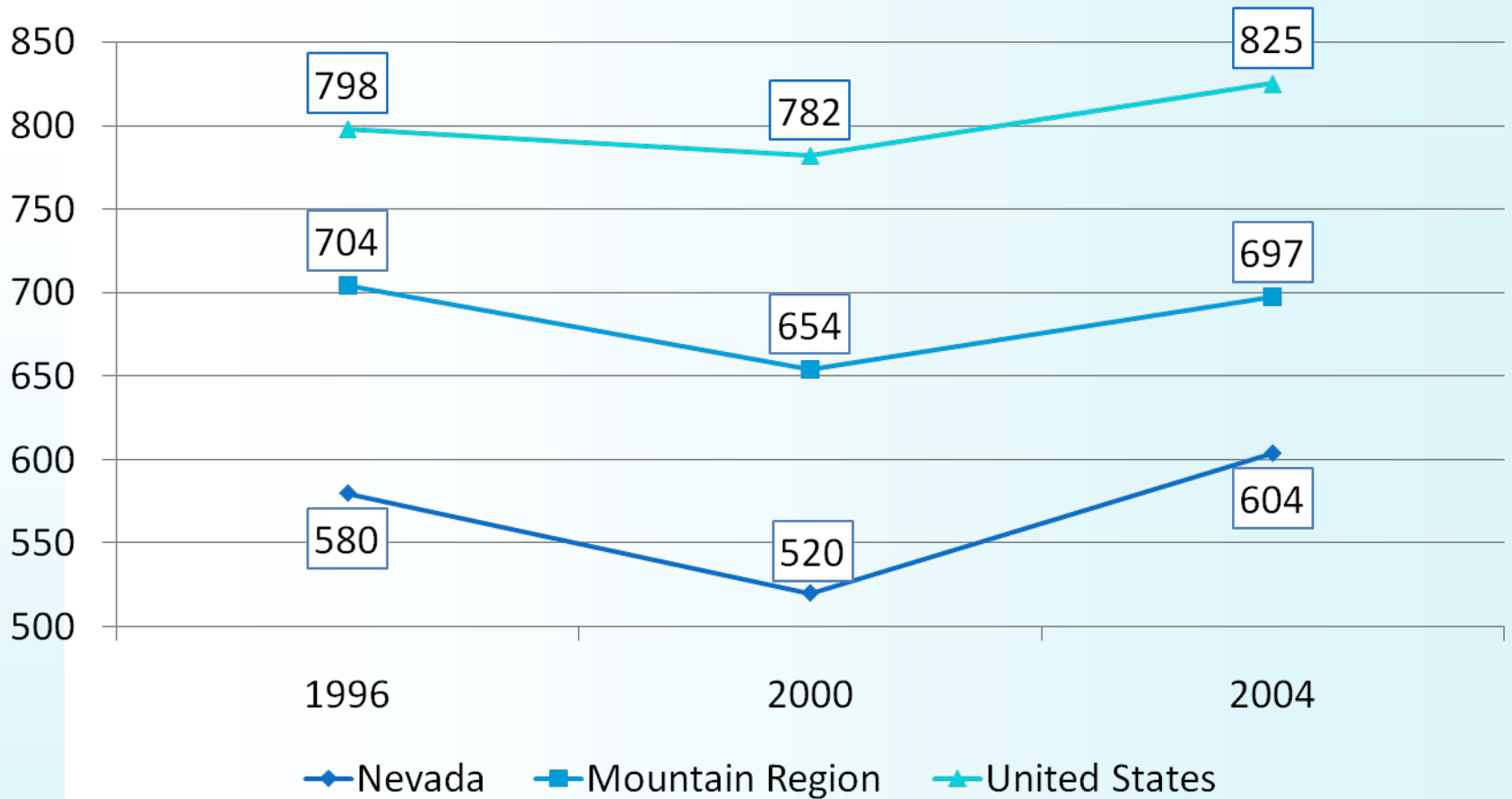
- Of 39 specialty areas, only two specialty areas possess higher number of licensed MDs per 100,000 population in Nevada versus the US
  - Anesthesiology
  - Forensic medicine
- Across most specialty areas, the number of MDs per 100,000 population is 50% to 80% that of regional and national ratios

# Nursing Workforce in Nevada

# Registered Nurse (RN) Workforce in Nevada – 2008

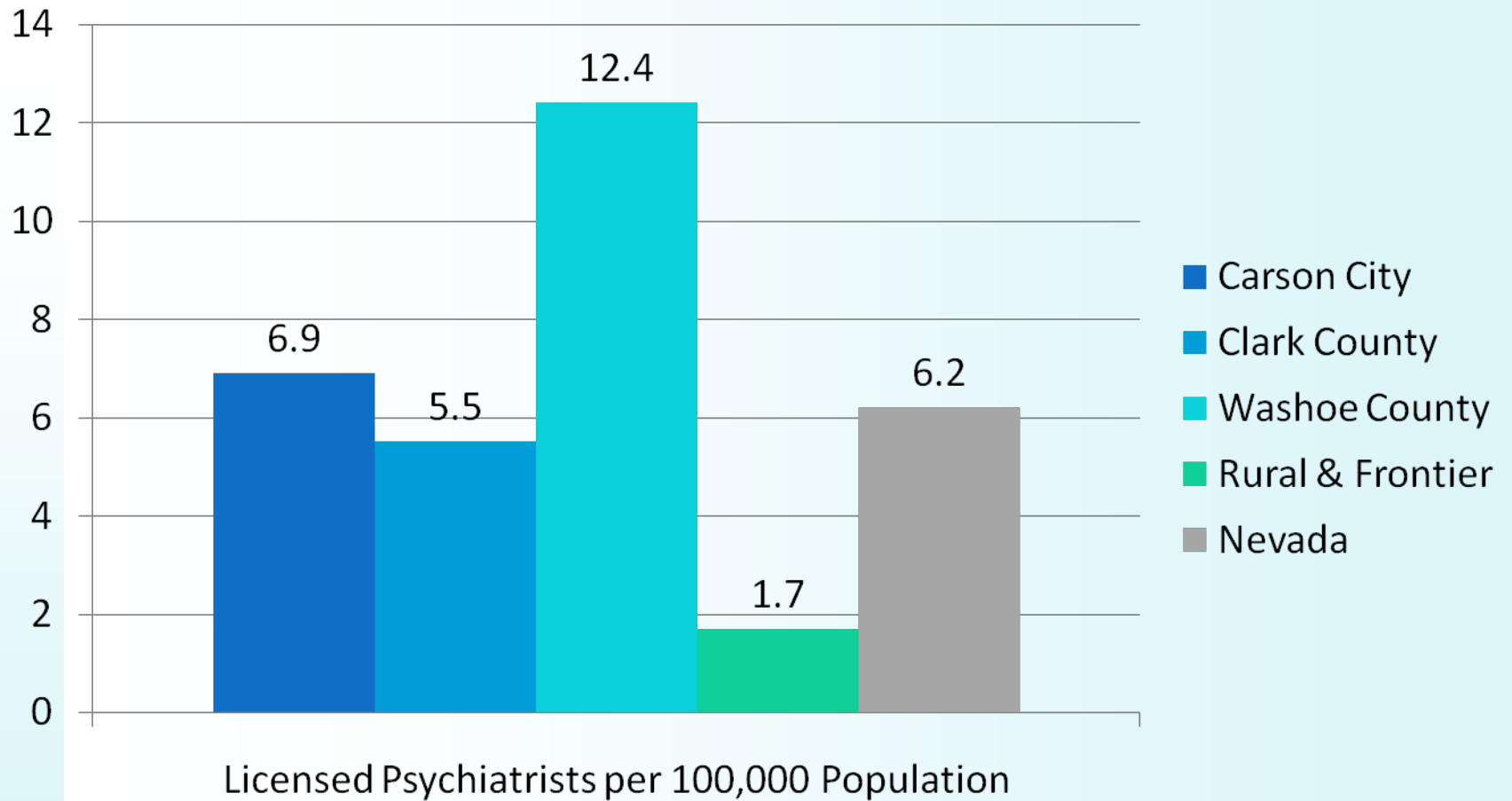


# Employed RNs per 100,000 Population in Nevada, Mountain Region, and US – 1996 to 2004

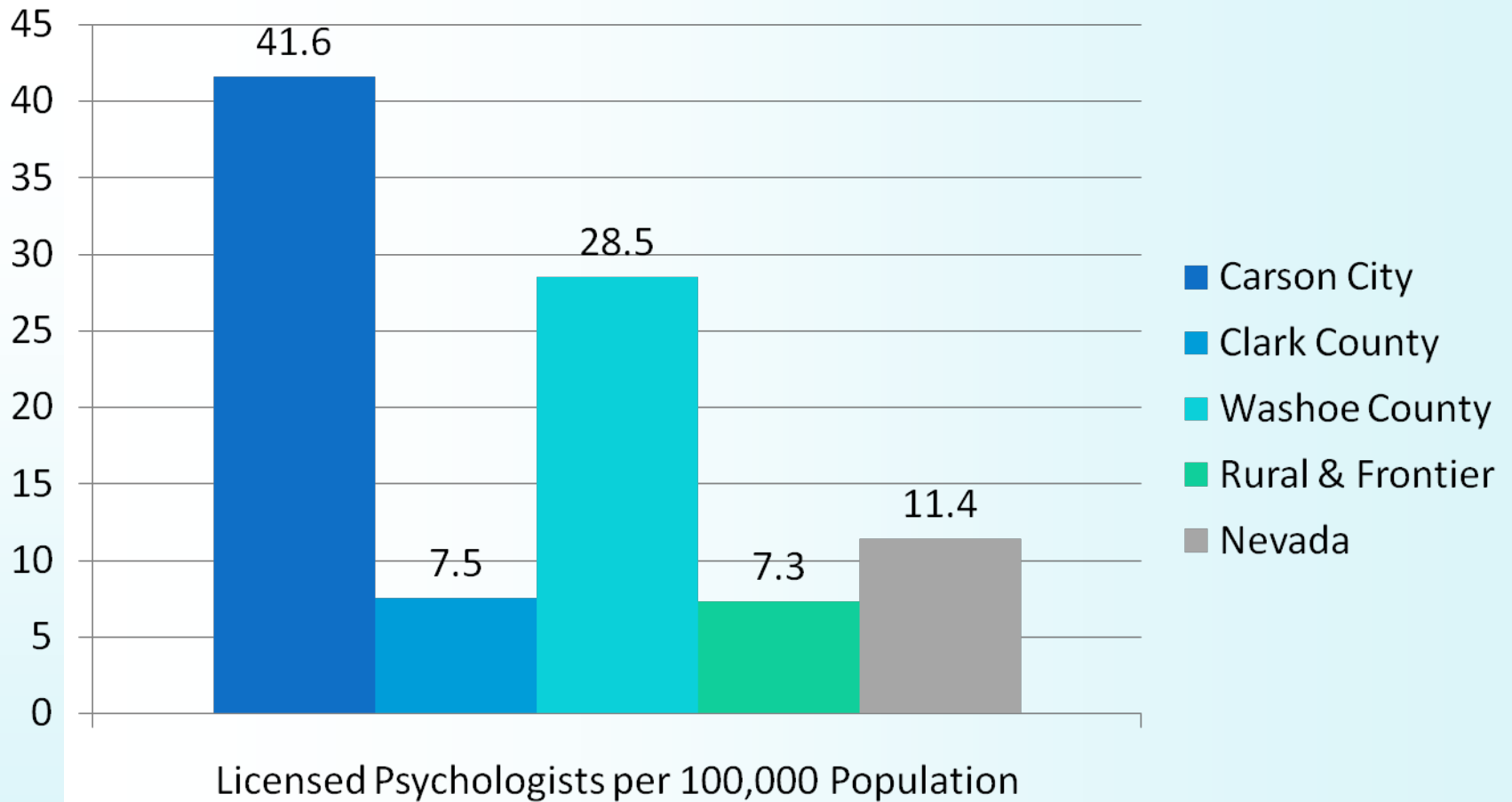


# Mental Health Care Workforce in Nevada

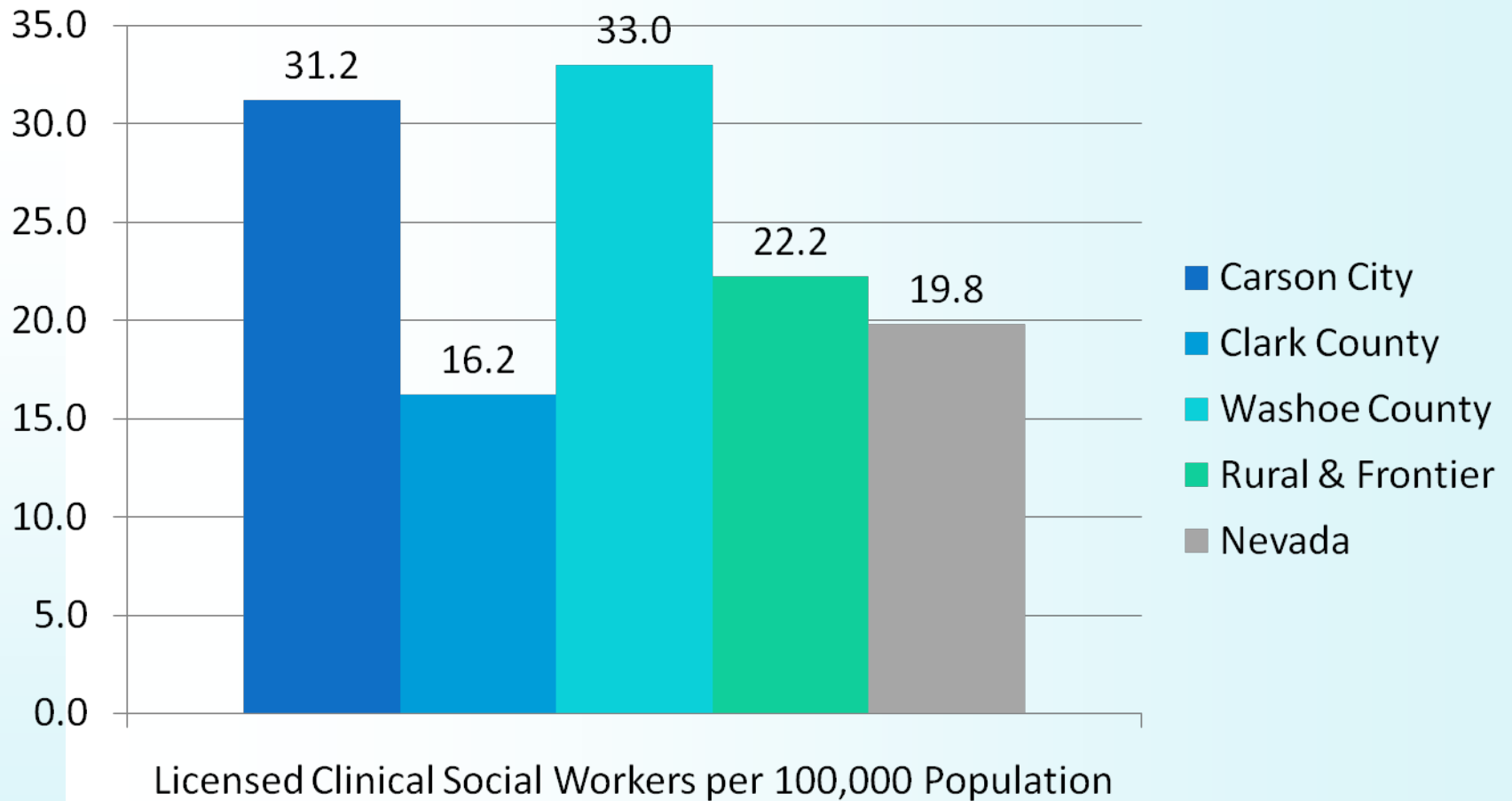
# Licensed Psychiatrists in Nevada – 2008



# Licensed Psychologists in Nevada – 2008



# Licensed Clinical Social Workers (LCSW) in Nevada – 2008



# Need versus Demand for Mental Health Care Services in Nevada

- Statewide shortage of psychiatrists and other mental health care providers
- Cutbacks to state-supported rural mental health clinics
- Poor population health and mental health indicators – second highest suicide rate in US
- High levels of alcohol and other substance abuse
- Severe economic downturn – highest unemployment in a decade, one of the highest rates of home mortgage foreclosures



*"Stop! Wait! Government's no longer the problem—it's the solution!"*

# Policy Implications and Discussion

- Health Care Reforms Under Consideration by Congress
  - Substantial investments in health professions education and training, including public health professionals
  - Incentives for primary care physicians and other primary care providers
  - Will health workforce growth keep pace with insurance coverage expansion?

# Policy Implications and Discussion

- The Sorry State of Population Health in Nevada
  - Demand for health care  $\neq$  need for health care
  - Meeting the **demand** for health care and health professionals: an economic matter
  - Meeting the **need** for health care and health professionals: a moral and political matter
  - Balancing the need for a health workforce to improve health care system performance and the need to increase investments in public health

# Additional Information

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