Of all of the health matters that state lawmakers are currently wrestling with in Carson City, none is more pressing than the shortage of health care professionals in Nevada.

By any measure and well before the passage of the Affordable Care Act, Nevada possessed a health workforce crisis characterized by low numbers of primary care and mental health providers, as well as chronic shortages of specialists and allied health professionals. The depth of these deficits will soon be exposed with the anticipated increase in insured Nevadans associated with the expansion of Medicaid eligibility and implementation of the Silver State Health Insurance Exchange in early 2014.

In some respects, then, the tsunami may already upon us.

Despite steady increases in the number of physicians, nurses, and other licensed health professionals practicing Nevada in recent years, the size and composition of our health workforce have not kept pace with population growth and mounting competition among neighboring states for health professions graduates from our comparatively lean institutions of higher education. Consequently, Nevada’s health workforce rankings have not changed a great deal over the past two decades.

Nevada is currently ranked 45th among US states and the District of Columbia in the number of physicians per capita and 50th in the number of registered nurses. These poor rankings extend across a wide range of fields and specialty areas, including primary care physicians (46th), psychiatrists (50th), psychologists (47th), optometrists (49th), physicians in general surgery (51st), and orthopedic surgeons (51st).

In general, current data indicate that our state’s health workforce falls well short of national averages for most of the key professions needed to ensure access to basic primary, preventive, and specialty services in Nevada over the coming decade – access barriers already compounded by an aging workforce and woeful health indicators.

In the next two years alone, nearly 300,000 Nevadans will gain health insurance coverage through the reform-related Medicaid expansion and through plans offered on the new health insurance exchange. By 2020, nearly 600,000 Nevada residents will gain coverage via health reform and through employer-sponsored plans as the economy improves.
Lawmakers appear to be poised to address health workforce supply issues by re-examining state scope of practice laws for non-physician primary care providers and possibly reducing barriers to timely licensure facing health professionals in other states willing and able to practice in Nevada.

At the end of the day, however, the legislature will need to do some unprecedented heavy lifting in the area of funding health care education and training if we are to prepare a health workforce commensurate with the projected demand for health services in Nevada.

The good news is that vast majority of physicians, nurses, and other health professionals educated and trained in Nevada remain in the state to begin their careers. The bad news is the tsunami of demand for their services on our immediate horizon.

In other words, that “heavy lifting” I mentioned cannot happen quick enough.

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