Health Workforce Supply and Demand: Implications for Rural Health Workforce Development

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Health Workforce Demand in Nevada

Primary Factors

• Population growth, aging, and diversification
• Reform-related insurance coverage expansions
• Economic growth and related job growth, e.g., Tesla effects
Health Workforce Demand in Nevada

Secondary Factors

• Population health (demand ≠ need), e.g., mental health care

• Health care system change, e.g., team-based models of care

• Technological change, e.g., telehealth
Health Workforce Supply in Nevada

- Steady growth in the number of licensed health professionals across most professions
- “Treading water” in the number of licensed health professionals per capita for many occupations
Health Workforce Supply in Nevada

• Severe health workforce shortages compounded by an aging health workforce and ACA-related demand
• Persistent specialty and allied health shortages
• Geographic maldistribution of physicians and most health professionals
Primary Care Workforce Shortages

- 2.0 million Nevadans reside in a primary care health professional shortage area or “HPSA” or 67.3% of the state’s population
- Majority of Clark and Washoe County residents live in a primary care HPSA
- 11 single-county HPSAs in rural and frontier areas of Nevada
Dental Health Workforce Shortages

- 2.2 million Nevadans reside in a dental HPSA or 72.0% of the state’s population, including 100% of Washoe County and Carson City

- 12 single-county dental HPSAs in rural and frontier counties of Nevada
Mental Health Workforce Shortages

• 2.8 million Nevadans reside in a mental care HPSA or 94.3% of the state’s population, including 100% of Clark County residents

• 16 single-county mental care HPSAs, including all 14 rural and frontier counties of Nevada

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## What it Takes to be Average – Medicine and Nursing

<table>
<thead>
<tr>
<th>Profession</th>
<th>Number per 100,000 Population</th>
<th>Number Needed to be Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>US</td>
<td>Nevada</td>
<td>Clark</td>
</tr>
<tr>
<td>-----------------------------------------</td>
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</tr>
<tr>
<td>Physicians (MD and DOs)</td>
<td>299.4 206.0 197.9</td>
<td>2,801 2,233</td>
</tr>
<tr>
<td>Primary Care Physicians (MD and DOs)</td>
<td>93.8 67.1 68.6</td>
<td>725 554</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>38.5 33.2 31.4</td>
<td>159 156</td>
</tr>
<tr>
<td>Advanced Practice Registered Nurses</td>
<td>46.2 42.5 39.4</td>
<td>111 150</td>
</tr>
<tr>
<td>Registered Nurses</td>
<td>955.4 724.4 704.4</td>
<td>6,930 5,523</td>
</tr>
<tr>
<td>Certified RN Anesthetists</td>
<td>8.3 2.5 2.7</td>
<td>174 123</td>
</tr>
</tbody>
</table>

Current Policy Developments to Improve Health Workforce Supply in Nevada

• Recognized need to expand higher education programs, diversity, capacity, and budget, esp., NSHE

• Promotion of K-12 health-careers pipeline programs (e.g., AHECs) and career ladders by health care employers

• Growing state, federal, and private support for targeted residency and fellowship program development for physicians (GME) and advanced practice clinicians
Current Policy Developments to Improve Health Workforce Supply in Nevada

- Changing health professions licensing and regulation – esp., licensure barriers, reciprocity, scope of practice
- Expanding state and federal scholarship and student loan repayment programs, e.g., Nevada Health Service Corps
- Addressing provider reimbursement, work environment, and pay and benefits of all licensed health workers
- Technological and health delivery innovation, e.g., telemedicine, Project ECHO Nevada
## GME and the Physician Workforce
Supply in Nevada – 2008 to 2018

<table>
<thead>
<tr>
<th></th>
<th>Begin Clinical Practice</th>
<th>Continue Training</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remaining in Nevada</td>
<td>467 (44.9%)</td>
<td>35 (3.4%)</td>
<td>502 (48.2%)</td>
</tr>
<tr>
<td>Leaving Nevada</td>
<td>358 (34.4%)</td>
<td>181 (17.4%)</td>
<td>539 (51.8%)</td>
</tr>
<tr>
<td>Total</td>
<td>825 (79.3%)</td>
<td>216 (20.8%)</td>
<td>1,041 (100.0%)</td>
</tr>
</tbody>
</table>

N = 1,041

Source: OSI analysis of Graduate Medical Education survey data (2018).
Nevada Health Service Corps

- Since 1989, 143 physicians and practitioners have been supported in every Nevada county.
- 27 NHSC recipients are currently practicing in ten Nevada counties.
- Since 2016, 70.4% of NHSC-supported health professionals have remained in Nevada.
- SB 289 will provide $500,000 in additional state match to $500,000 in federal support.
Implications for Rural Health Workforce Development

• Steady demand from employers – hospitals, clinics, and practices – for a wide-range of health professionals, including rural areas of the state

• Abundant unmet, statewide need for primary care, oral health services, and behavioral health services

• Health care sector remains a source of recession-resistant, if not recession-proof jobs for Nevada students and graduates
Additional Information

Office of Statewide Initiatives
Nevada State Office of Rural Health
Project ECHO Nevada
Nevada Health Workforce Research Center
https://med.unr.edu/statewide