

# Health Workforce Supply and Demand in Nevada: Implications for Network Adequacy

M. Tabor Griswold, PhD

Director, Nevada Health Workforce Research

Co-Director, Nevada Health Workforce Research Center

Office of Statewide Initiatives

University of Nevada, Reno School of Medicine



University of Nevada, Reno  
School of Medicine



# Health Workforce Demand in Nevada

## Primary Factors

- Population growth and aging
- Gains in public and private insurance coverage
- Economic growth and diversification – “Tesla effects” on income and insurance coverage
- Growth in volume and intensity of health care services used per person





# Health Workforce Demand in Nevada

## Secondary Factors

- Population health, e.g., behavioral health care, long-term care (caveat: need  $\neq$  demand)
- Health care system change, e.g., integrated models of care, growth of retail clinics
- Clinical and non-clinical technological change



# Health Workforce Supply in Nevada

- Steady growth in the number of licensed health professionals across most professions
- “Treading water” trend in the number of health professionals per capita for many occupations
- Aging health workforce – 42% of primary care physicians in Nevada are over 55 years of age



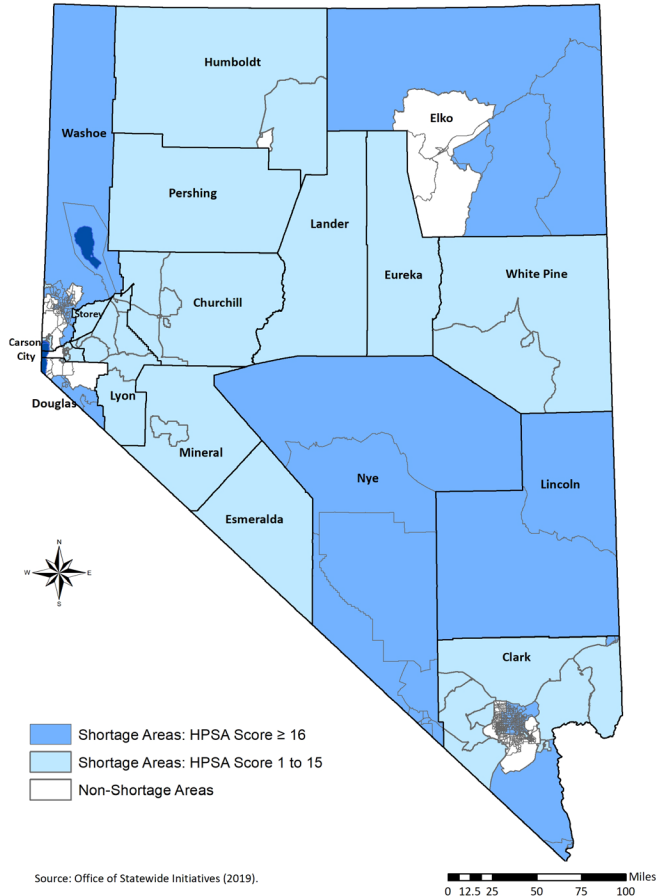
# Health Workforce Supply in Nevada

- Severe health workforce shortages compounded by accelerated demographic change and ACA-related demand
- Geographic maldistribution of physicians, nurses, and other health professionals
- Mismatch between the diversity of the population and health workforce in Nevada



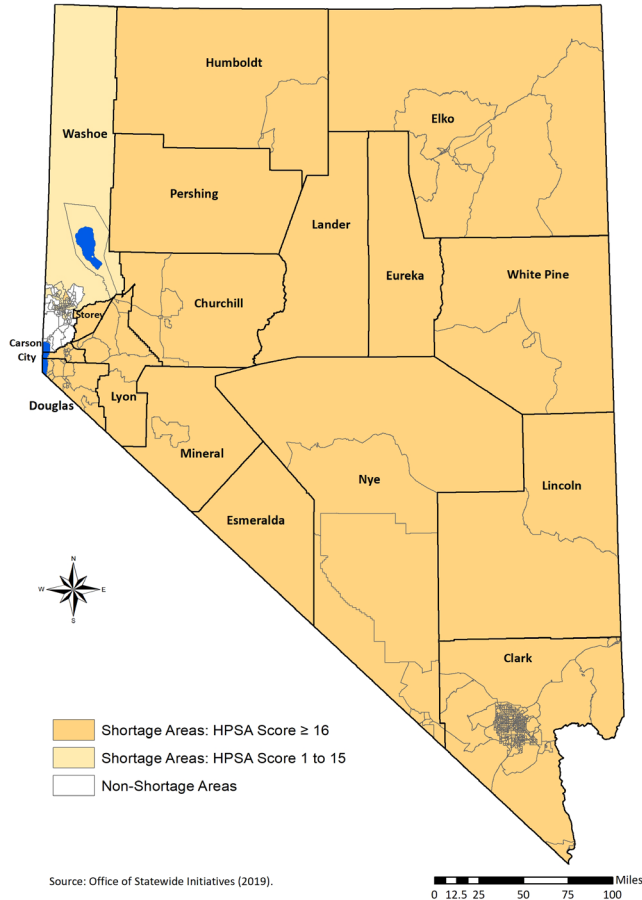
# Primary Care Workforce Shortages

- 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



# 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 and Carson City residents
- 16 single-county mental care HPSAs, including all 14 rural and frontier counties of Nevada



# What it Takes to be Average

Profession	Number per 100,000 Population			Number Needed to be Average	
	US	Nevada	Clark	Nevada	Clark
Physicians (MD and DO)	309.4	212.4	204.7	2,592	2,188
Primary Care Physicians (MD and DO)	122.6	85.4	80.5	1,112	899
Psychiatrists	12.6	6.7	5.7	174	148
Psychologists	37.5	13.4	10.6	728	592
Physician Assistants	34.2	32.4	31.4	54	62
Nurse Practitioners	51.4	42.5	39.4	269	264
Registered Nurses	894.4	724.4	704.4	5,134	4,180





# Providers by Type of Network Adequacy Geographic Designation

Profession	Number of Providers				
	Metro	Micro	Rural	CEAC	Nevada
Family Medicine	868	49	0	45	962
Internal Medicine	1,452	39	0	25	1,516
Pediatrics	472	12	0	7	491
Endocrinology	36	0	0	1	37
Infectious Diseases	28	0	0	0	28
Oncology	21	0	0	0	21
Rheumatology	18	1	0	0	19

Note: Metro = Clark and Washoe, Micro = Carson City, Douglas and Lyon, Rural = Storey, and CEAC = the balance of counties in Nevada  
 Source: OSI analysis of unpublished licensure data (2019).



University of Nevada, Reno  
 School of Medicine

# Population per Provider by Type of Network Adequacy Geographic Designation

Profession	Population per Provider					
	Metro	Micro	Rural	CEAC	Nevada	US
Family Medicine	3,122	3,285	-	3,992	3,176	2,869
Internal Medicine	1,867	4,127	-	7,185	2,015	2,819
Pediatrics	1,384	2,625	-	5,194	1,469	1,479
Endocrinology	75,283	-	-	179,631	82,570	53,141
Infectious Diseases	96,793	-	-	-	98,551	31,335
Oncology	129,057	-	-	-	145,480	21,090
Rheumatology	150,567	-	-	-	152,754	61,786

Note: Metro = Clark and Washoe, Micro = Carson City, Douglas and Lyon, Rural = Storey, and CEAC = the balance of counties in Nevada  
Source: OSI analysis of unpublished licensure data (2019).



University of Nevada, Reno  
School of Medicine

# Providers by Geographic Rating Area

Profession	Number of Providers				
	1	2	3	4	Nevada
Family Medicine	643	231	42	46	962
Internal Medicine	1,185	273	39	19	1,516
Pediatrics	392	80	12	7	491
Endocrinology	27	9	0	1	37
Infectious Diseases	20	8	0	0	28
Oncology	18	3	0	0	21
Rheumatology	13	5	1	0	19

Note: 1 = Clark and Nye Counties; 2 = Washoe County; 3 = Carson City, Douglas and Lyon Counties; 4 = balance of counties in Nevada  
 Source: OSI analysis of unpublished licensure data (2019).



University of Nevada, Reno  
 School of Medicine

# Population per Provider by Geographic Rating Area

Profession	Population per Provider					
	1	2	3	4	Nevada	US
Family Medicine	3,487	2,025	3,832	3,998	3,176	2,869
Internal Medicine	1,892	1,714	4,127	9,680	2,015	2,819
Pediatrics	1,395	1,326	2,625	5,268	1,469	1,479
Endocrinology	83,050	23,392	-	183,927	76,377	53,141
Infectious Diseases	112,118	58,481	-	-	98,551	31,335
Oncology	124,575	155,949	-	-	145,480	21,090
Rheumatology	172,489	93,569	160,945	-	152,754	61,786

Note: 1 = Clark and Nye Counties; 2 = Washoe County; 3 = Carson City, Douglas and Lyon Counties; 4 = balance of counties in Nevada  
 Source: OSI analysis of unpublished licensure data (2019).



University of Nevada, Reno  
 School of Medicine

# Concluding Remarks

- Health workforce development is critical to addressing provider shortages and ensuring network adequacy in Nevada
- Policy planning and development requires better data on available providers, practice patterns, and the geographic distribution of providers



# 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>



University of Nevada, Reno  
School of Medicine