

Budget could worsen health care shortage

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To address the state's projected \$2.3 billion budget shortfall, Governor Jim Gibbons' proposed budget for the upcoming biennium includes a 6 percent salary cut for teachers, state workers, and university and community college employees. The Governor is also asking legislators to whack the higher education budget by 36 percent.

Leaving aside the damage already done to higher education by state lawmakers and the worsening economic downturn over the past year, it's important to consider what an additional 36 percent cut to public programs responsible for the education and training of health care professionals might mean for Nevadans.

For starters, let's assume that cuts to higher education would be uniform across campuses and programs (in truth, cuts of any magnitude won't be uniform and under the Governor's proposal could be as high as 50 percent at the state's two universities). Let's also assume that a 36 percent cut would mean 36 percent fewer students enrolled in health care programs and, ultimately, 36 percent fewer graduates prepared for licensure in their respective fields at some point down the road.

Is Nevada truly in a position where we can educate and train 36 percent fewer "home grown" registered nurses and licensed practical nurses? Are we really prepared to cut undergraduate and graduate medical education for primary care doctors and other physicians in Nevada by more than a third? Are we willing to slash health care education opportunities for Nevada residents who, if trained and educated in another state, are much less likely to return to Nevada to establish health careers and practices?

The answer to these questions, of course, is "no."

The answer is "hell no!" if you are an urban hospital administrator already dealing with emergency-room overcrowding, or a rural hospital administrator already spending thousands of additional dollars each month on travel or per diem nursing staff, or a human resources director whose daily headache is keeping medical-surgical or long-term care beds adequately staffed, or simply someone in immediate need of care but unable to schedule, much less receive, timely and appropriate medical services due to health workforce shortages.

Nevada's Health Care Workforce

Health Professionals	Number per 100,000 Nevada Residents	Number per 100,000 US Residents	Nevada Rank Among US States
Dentists	45	60	42
Emergency Medical Techs & Paramedics	42	66	40
General Surgeons	8	12	50
Licensed Practical Nurses (LPNs)	106	241	47
Obstetricians/Gynecologists	21	27	41
Physicians, Allopathic Medicine (MDs)	216	304	46
Primary Care Physicians	73	99	46
Psychiatrists	7	14	46
Physician Therapists (PTs)	29	52	50
Registered Nurses (RNs)	564	809	49
Specialty Surgeons	37	53	50

Source: KO Morgan and S Morgan. *Health Care Rankings 2008 – Health Care Across American*. (2008). Washington DC: CQ Press.

By any measure, most health care professions are already in short supply in Nevada. Nevada ranks 46th among US states in the number of physicians and primary care physicians per resident population, 42nd in dentists per capita, and 50th among all states for both general and specialty surgeons.

Similarly, despite important strides taken by lawmakers earlier this decade to double nursing program enrollment, Nevada ranks 49th among US states in the number of registered nurses per capita. Worse, Nevada is bordered by states with serious nursing shortages in their own right, including California (45th), Utah (46th), Idaho (47th), and Arizona (50th). Hospitals and clinics in neighboring states already compete mightily with Nevada employers for new nursing program graduates.

In previous columns, I explored Nevada's perennially poor ranking among US states along a wide range of population health measures and argued that Nevada's lousy health status is largely a product of the 24-hour-a-day lifestyle associated with state's primary industry, gaming and tourism, and the boom-and-bust nature of other important sectors such as mining, construction, and ranching.

Nevada's poor population health is compounded by the transient nature of the state's population, a strong libertarian ethic and associated lack of support for governmental solutions to most health and social problems, and, as this column contends, chronic health workforce shortages.

State lawmakers have reached a point in which there are few easy budget decisions and even fewer easy budget cuts. Nonetheless, any further cuts to health care education will certainly worsen existing health professional shortages in Nevada – shortages that already represent threats to the quality, cost, and availability of medical and nursing care to all state residents.

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