

State needs more health care professionals

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In my last column, I argued that any cuts to health care education programs would certainly worsen existing health professional shortages in Nevada – deficits that already represent threats to the quality, cost, and availability of medical and nursing care to state residents.

I also noted that Nevada's perennially poor standing among US states on numerous population health measures, while a result of many factors, is undoubtedly aggravated by chronic statewide shortages for most health care occupations.

Remedies to health workforce shortages in Nevada typically begin and end with the discussion of strategies to increase the overall, statewide supply of health workers in Nevada. Attention is usually drawn to our state's low number of professionals per capita (particularly, physicians and registered nurses) and what might be done to increase statewide supply.

Much less attention is paid to the geographic distribution of the health workforce or variation within the state's boundaries – particularly, substantial disparities between rural and urban areas of Nevada for most health care occupations.

Data from the recently released [Nevada Rural and Frontier Health Data Book – 2009 Edition](#) indicates that, with few exceptions, the number of licensed health professionals per 100,000 residents is much lower in the state's fourteen rural and frontier counties than in Nevada's three urban counties.

In some instances, it makes no economic or technological sense for the number of health workers in rural areas to be on par with urban areas – the base population and technological resources required for many specialty medical services is simply not present in most rural areas of Nevada and thus specialty services should be located in tertiary medical centers in Carson City, Reno and Las Vegas.

Licensed Health Professionals per 100,000 Nevada Residents by Region – 2008

Licensed Health Care Occupation	Number of Professionals per 100,000 Residents		
	Rural Nevada	Urban Nevada	Nevada Statewide
Advanced Practitioners of Nursing	14.6	19.1	18.6
Alcohol, Drug, and Gambling Counselors	78.4	41.4	45.4
Allopathic Physicians (MDs)	76.7	170.2	160.3
Chiropractors	13.2	21.7	20.8
Certified Nursing Assistants	284.1	216.0	223.3
Dentists	35.4	54.8	52.7
Dispensing Opticians	2.8	8.8	8.2
Emergency Medical Technicians (EMTs) & Paramedics	615.5	198.8	244.3
Licensed Practical Nurses (LPNs)	82.6	105.1	102.7
Medical Laboratory Personnel, All Types of Licensees	280.0	338.7	332.5
Occupational Therapists	10.1	16.7	16.0
Optometrists	9.7	11.4	11.3
Osteopathic Physicians (DOs)	11.4	17.6	17.0
Pharmacists	46.5	80.3	76.7
Pharmaceutical Technicians	81.9	120.4	116.3
Physical Therapists	28.8	42.3	40.8
Physician Assistants (PAs)	16.3	15.8	15.9
Podiatrists	3.5	8.6	8.1
Primary Care Physicians (MDs & DOs)	50.3	79.4	76.3
Psychiatrists	1.7	6.7	6.2
Psychologists	7.3	11.9	11.4
Registered Dental Hygienists	30.9	37.2	36.5
Registered Nurses (RNs)	448.9	665.1	642.2
Registered Nurse Anesthetists	4.9	2.3	2.6
Respiratory Therapists	25.7	33.7	32.8
Social Workers, All Types of Licensees	66.6	73.3	72.6
Speech-Language Pathologists	13.2	19.6	18.9

Source: Packham, JF and MT Griswold. *Nevada Rural and Frontier Health Data Book*, 2009 Edition. (February 2009). Reno NV: Nevada Office of Rural Health.

On the other hand, despite sufficient economic demand and the greater health needs of their typically older populations, rural areas of the state struggle to recruit and retain a wide range of basic or general medical, nursing, and oral health providers.

For example, the number of primary care physicians serving rural and frontier residents is 50.3 doctors per 100,000 population, as compared to 79.4 in urban counties. There are two-thirds as many dentists in rural counties versus urban counties. And the per capita numbers of registered nurses (RNs), advanced practitioners of nursing, and licensed practical nurses (LPNs) practicing in rural counties are, respectively, a fraction of numbers for the same professions in Carson City, Clark and Washoe Counties.

Presently, 11 of 14 rural counties in Nevada have been designated by the federal government as entire-county primary care health professional shortage areas, 11 are dental health professional shortage areas, 13 of 14 counties are mental health professional shortage areas.

In general, the uneven distribution of health care providers across rural and urban areas of Nevada impedes access to care to the 290 thousand residents or 10.6 percent of the state's population that live and work in the towns scattered across the 95 thousand square miles that comprise rural and frontier Nevada.

Addressing the state's abundant health and health care needs will thus require both an expansion of the supply of health care professionals and attending to the geographic maldistribution of Nevada's health care workforce.

For additional information on Nevada's health workforce and to download a copy of the School of Medicine's [Nevada Rural and Frontier Health Data Book – 2009 Edition](http://www.medicine.nevada.edu/cehso/databk09.html), please visit www.medicine.nevada.edu/cehso/databk09.html.

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