

Rural doctor shortage to worsen with Obamacare

By: Thomas Mitchell – July 10, 2013

While America, as a result of a number of factors, is about to get slapped with a serious shortage of doctors, rural Nevada may be in for a train wreck.

By 2020 the nation will have 90,000 too few physicians, according to the Association of American Medical Colleges.

AAMC predicts the doctor shortfall will affect everyone, but will especially impact those who live in areas designated as health professional shortage areas.

According to the University of Nevada School of Medicine, 66.9 percent of Nevada's rural population already live in a designated Primary Care Health Professional Shortage Area. In addition, all 14 rural counties have been designated Mental Health Professional Shortage Areas and 56.5 percent of rural Nevada is in a Dental Health Professional Shortage Area.

While there are 182.2 physicians per 100,000 residents in urban areas of Nevada, there are only 76.5 physicians per 100,000 in rural areas — for a statewide ratio that is 48th worst in the nation.

Just in time to twist the scalpel in the wound, along comes the Patient Protection and Affordable Care Act, which seeks to provide health insurance to an estimated 30 million Americans.

Also potentially exacerbating the doctor shortage in Nevada is Gov. Brian Sandoval's decision to expand the eligibility for Medicaid under the dictates of ObamaCare. That means an additional 204,000 uninsured Nevada adults will qualify for the federally funded insurance program for the poor. Some portion of the additional 300,000 currently uninsured Nevadans could qualify for health insurance subsidies.

More insured patients. No more doctors.

At a recent meeting of the Nevada Republican Men's Club, I asked Nevada Rep. Joe Heck, himself a former emergency room physician, about the impending doctor shortage.

"This bill (ObamaCare) has done nothing to increase access to health care. All it has tried to do is increase access to health insurance. Having insurance does not equate to having health care ..." he said. "So what is going to happen is you're going to get a big influx of people who now

have insurance. They're going to call a doctor and ask for an appointment. And they're going to be told, 'We can see you in three to six months.' And they're going to say, 'Wait a minute, I don't want to wait three to six months. I've got insurance now. Hmm, let me go to the emergency department.'”

Emergency rooms are already overcrowded, Heck noted.

“So all these people that are getting access to programs, it's not going to make a difference,” he said. “They're not going to have health care. They're going to wind up in an ER, which as you all know is the most costly place to receive health care. The bill's going to do absolutely nothing to drive down cost.”

With the governor's decision to expand Medicaid, instead of Medicaid covering people up to 87 percent of the poverty level, those making 138 percent of the poverty level will be covered. Currently a family of three with income of \$16,000 qualifies for Medicaid, but expanding the coverage qualifies such a family if it earns about \$32,000 a year. ObamaCare also subsidizes health insurance for a family of four making up to \$91,000 now and \$100,000 in a couple of years.

“Medicaid is rife with waste and fraud. It increases the cost of private health care and insurance, crowds out private health insurance and long-term care insurance, and discourages enrollees from climbing the economic ladder. There is scant reliable evidence that Medicaid improves health outcomes, and no evidence that it is a cost effective way of doing so,” says Michael Cannon, director of health policy at the Cato Institute.

Already 25 percent of Nevada doctors refuse to take any new Medicaid patients. Many doctors are finding they lose money treating Medicaid patients due to the poor reimbursement rate by the government. ObamaCare promises to raise reimbursement by 30 percent, but doctors question how long that will last.

One small glimmer of hope for Nevadans is that the state Legislature passed and Gov. Sandoval signed a bill that as of July 1 allows certain qualified nurse practitioners to practice independently of a doctor.

The journal Health Affairs noted “nurse practitioners could fill the growing primary care shortage more quickly than could physicians, since it takes nurses on average 6 years to complete their education and training, including undergraduate and graduate degrees, compared to an average of 11 to 12 years for physicians, including schooling and residency training.”

See you in the doctor's waiting room.

