



Nevada
Hospital
Association

2023



Nevada Healthcare LEGISLATIVE GUIDE



Facts on
Nevada
Healthcare



Healthcare
Providers



Government
Programs

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MYTH vs. REALITY

MYTH	REALITY
Nevada Hospitals are making record setting profits.	More than half of the hospitals in Nevada reported operating margins of 1% or less for the first three quarters of 2022. ¹
Uninsured Nevadans have no options for healthcare coverage.	83% of uninsured Nevadans are eligible for Medicaid or subsidies on the Silver State Health Insurance Exchange. ² Most can obtain healthcare coverage at no cost.
Nevada does not have a nursing shortage as evidenced by the large increase in the number of licensed registered nurses.	The number of licensed nurses increased because thousands of temporary nurses were brought into the state for COVID and they had to be licensed. When they leave, their license remains active for two years.
The Nurse Licensure Compact does not require background checks for nurses.	The Enhanced Nurse Licensure Compact, adopted in 2017, requires fingerprint background checks before a license is issued. ³ It is now referred to as the new NLC.
The current nursing shortage in Nevada is nothing new. It has existed for ten years.	It's true that Nevada's healthcare providers have experienced nursing challenges for more than ten years. Unfortunately, unaddressed problems typically worsen. Today, Nevada is in crisis. The shortage is impacting cost and patient access. Post-acute providers, such as nursing homes, can't accept patients because they don't have enough nurses to staff their beds.
Traveling nurses are only needed during patient surges.	Unfortunately, traveling nurses are part of the daily staffing for many hospitals and healthcare facilities. Nevada hospitals have more than 2,000 openings for nurses. ⁴ The cost of traveling nurses rather than resident nurses is increasing the cost of healthcare.
The only answer to the physician shortage is to graduate more doctors.	Nevada needs more Graduate Medical Education (GME) programs across the state. The vast majority of Nevada medical graduates leave the state for GME programs because the residency or fellowship opportunities are unavailable or in short supply in Nevada. ⁵ It is often difficult to recruit them back.

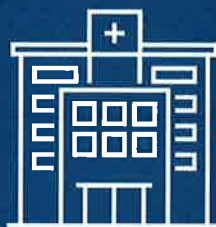


NEVADA HOSPITALS

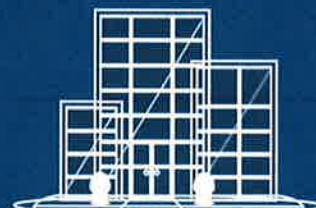
Healthy Hospitals Create Healthy Communities



34,517 people
are employed by
Nevada Hospitals¹



More than half of the
acute care hospitals in
Nevada had an operating
margin of 1% or less in
the first three quarters
of 2022²



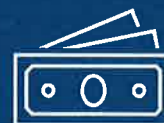
Hospitals invested \$524
million in capital
improvements to
enhance access to care
(2021)³



359,741 patients were
admitted⁴



1,061,176
people were treated in
Emergency Departments⁵



Local communities
experienced a \$4.3
billion economic impact
from the direct and
indirect payroll of
Nevada's hospitals⁶

BIGGEST CHALLENGES for HOSPITALS



Labor shortages lead to increased costs and affect patient access



Nevada Hospitals reported 2,393 open (RN) nursing positions as of July 1, 2022¹



Increased drug costs lead to a higher cost of care



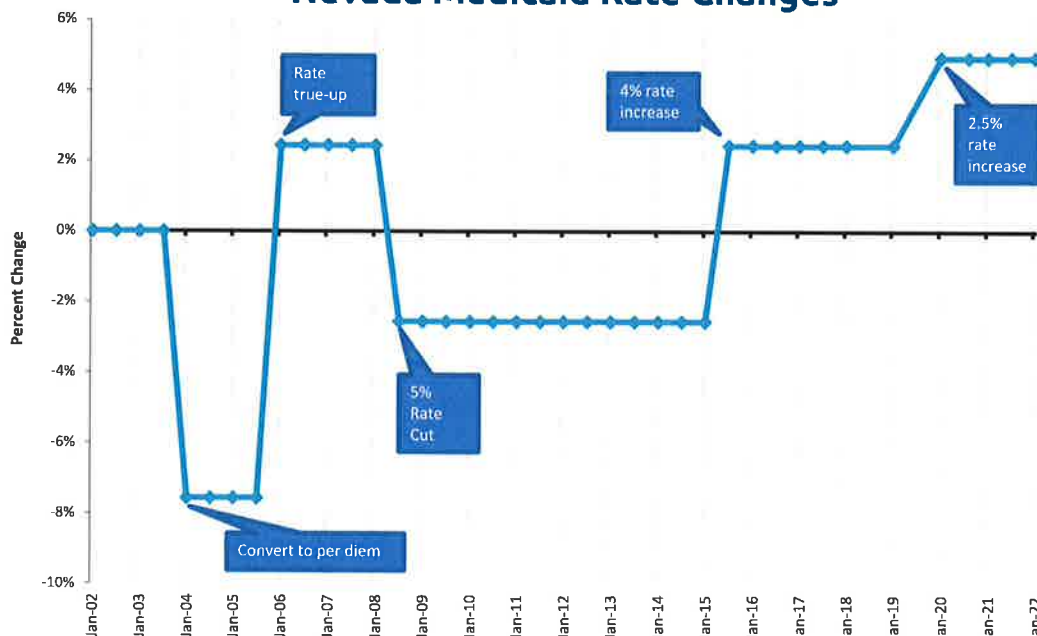
Hospitals are unable to discharge patients who are medically cleared for discharge (average of 517 patients daily in December 2022)²



Medicaid hospital rates increased 5% since 2002, while hospital costs have increased approximately 50% in the same time period³

HOSPITAL MEDICAID RATES INCREASED ONLY 5% IN THE LAST 20 YEARS³

Nevada Medicaid Rate Changes





NURSING in NEVADA

To meet national averages, Nevada needs:

**Shortage numbers below are likely understated*

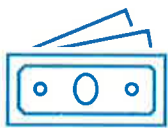
3,162 Registered Nurses¹

3,284 Licensed Practical Nurses¹

5,055 Nursing Assistants¹

Nevada's current and future nursing shortage is caused by a lack of nurse educators, limited nursing school capacity, burnout, and an aging workforce.

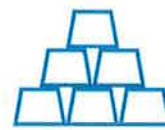
*Traveling nurses must obtain a state nursing license regardless of whether they work in the state for one day or months. Those licenses remain in effect for two years. This inflates the number of licensed nurses in Nevada.



The average RN wage in Nevada is \$89,700; the average LPN wage is \$59,580¹



Nevada's RN wages are the 6th highest in the nation when adjusted for Cost of Living²



Nevada hospitals pay traveling companies as much as four times the hourly rate of hospital staff nurses in some specialties³



41% of Nevada's RN licenses are held by nurses with an out-of-state address⁴



Nurses' opinions count: Nevada requires larger hospitals to have staffing committees comprised of elected direct patient care nurses and CNAs to develop staffing plans, review complaints and resolve issues⁵



NURSING EDUCATION PROGRAMS

BARRIERS TO PROGRAM EXPANSION:

- Shortage of faculty due to low salaries
- Masters or doctorate degree required to teach
- Small classes with a ratio of one faculty to eight students

4 year RN Programs

Arizona College
Chamberlin University
Nevada State College
Roseman University
University of Nevada, Las Vegas
University of Nevada, Reno

21/22 Graduates

135
170
254
166
240
143

1,108

2 year RN Programs

College of Southern Nevada
Great Basin College
Las Vegas College
Western Nevada College
Carrington College Reno
Truckee Meadows Comm. College

21/22 Graduates

109
30
146
48
126
69

528

LPN Programs

Las Vegas College
College of Southern Nevada
Unitek College

21/22 Graduates

9
16
32

57

Table Source: 1

NURSE LICENSURE COMPACT (NLC)



*Not a real nursing license. Illustrative purposes only.

The NLC functions like a driver's license. It allows nurses to practice in multiple states with one license.

We know it can work in Nevada. For more than two years during the pandemic, Governor Sisolak's Declaration of Emergency Directive 11 provided a licensing waiver for nurses. It worked well!

NLC nurses can quickly cross state lines to help with patient surges and disaster relief. The uptick of respiratory viruses in Fall 2022 illustrated the need for the NLC.



The NLC helps nurses who frequently move from state to state, such as nurse spouses of military members.

37 states and two U.S. territories have adopted the NLC.¹



93% of Nevada nurses surveyed by the National Council of State Boards of Nursing support the NLC.²



SHORTAGE of PHYSICIANS in NEVADA



Nevada needs 1,589 physicians to meet the national average¹



Nevada ranks 45th for active physicians among U.S. states²



Nevada is below the national average in 33 of 39 physician specialties³



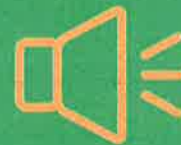
Clark County is below the national average in 34 of 39 specialty areas³



In 25 of 39 specialty areas, the number of physicians did not keep pace with Nevada's population growth over the last decade⁴



46.7% of active physicians in the U.S. were age 55 or older in 2021; retirements will intensify the competition to recruit physicians to Nevada⁵



Don't exacerbate the problem by increasing medical malpractice premiums or prohibiting hospitals from employing physicians

GRADUATE MEDICAL EDUCATION

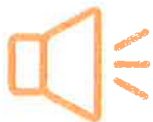


Medical students intending to practice medicine must obtain additional education after they earn their MD or DO degree. This additional education is called Graduate Medical Education (GME). A “residency” educates and trains a physician in a particular specialty. A “fellowship” occurs after a residency and provides subspecialty education and training. Medicare is the primary source of funding for GME programs. Medicaid funds a few.

Nevada has an insufficient number of GME slots, and medical school graduates must leave the state for additional training. Often, they do not return to the state.



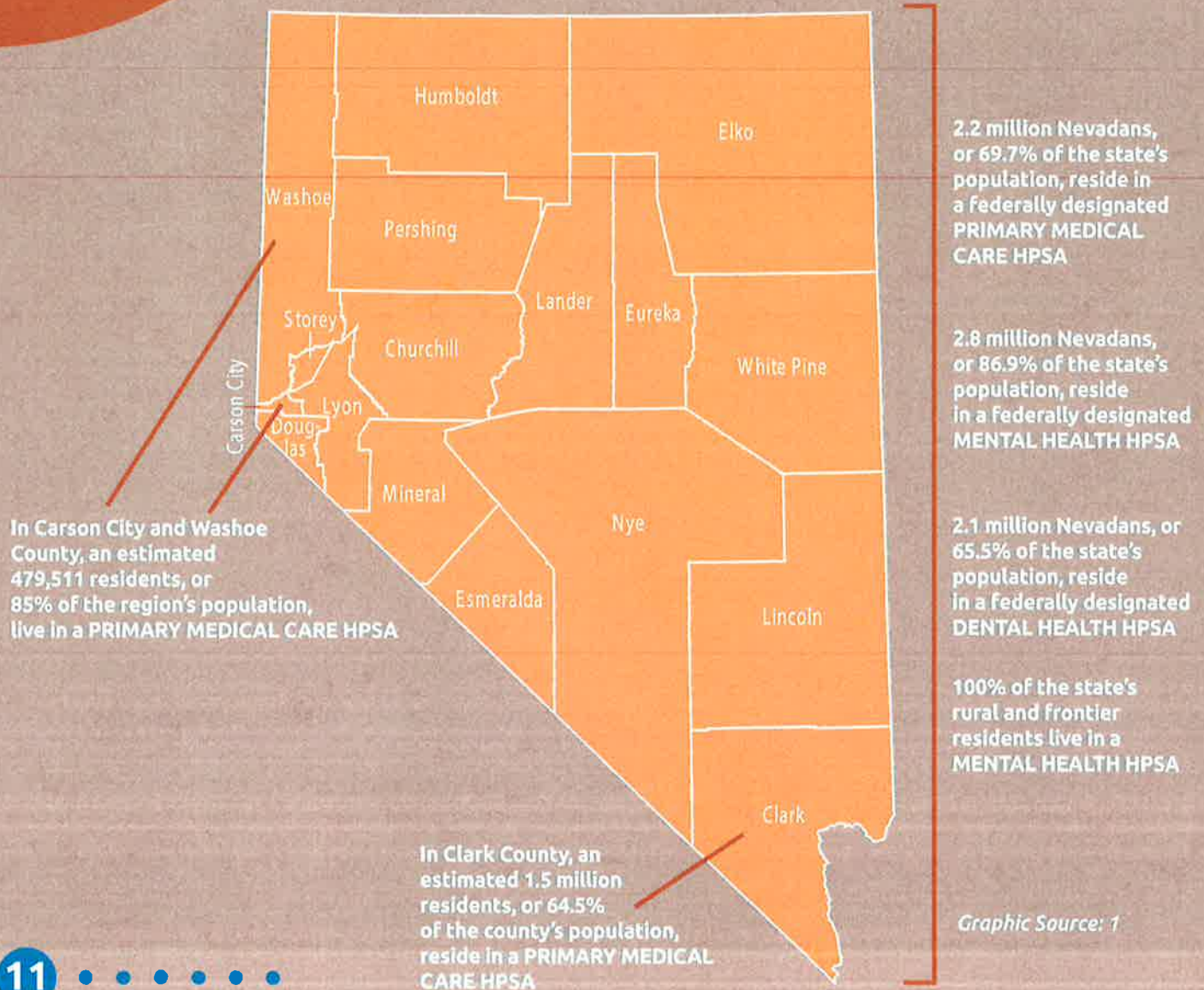
In 2022, 39.3% of all GME graduates will remain in Nevada to begin clinical practice or pursue training; 60.7% plan to leave Nevada.¹



Physicians who receive all their GME in Nevada are more likely to stay in Nevada!²

HEALTH PROFESSIONAL SHORTAGE AREAS (HPSA)

The Health Resources and Services Administration (HRSA) of the federal government identifies geographic areas that are lacking health professionals in primary care, mental health, and dental care. The primary factor used to determine **Health Professional Shortage Areas (HPSA)** is the ratio of health professionals to population (with consideration of high need).



BEHAVIORAL HEALTH



Nevada ranks 29th in the nation for prevalence of mental illness and access to care for adults and youth¹



Many patients suffering from mental illness are inappropriately held in hospitals because behavioral health services are not readily available



Nevada needs 1,478 Substance Abuse, Behavioral Disorder, and Mental Health Counselors to meet the national average²

1

2

3



NEVADA 988

Nevada implemented the 988 Suicide and Crisis Lifeline for people experiencing a mental health crisis. People can dial 988 on their phone 24/7 and be connected with a trained mental health counselor.



MEDICARE



17%
of Nevadans
are Medicare
beneficiaries¹



Americans become eligible for Medicare enrollment when they turn 65, have ALS or end-stage renal disease, or are receiving disability benefits for 24 months.

Less than 11% of Nevada's Medicare beneficiaries are younger than 65. This is below the national average.²



Medicare beneficiaries are able to receive coverage through traditional Medicare or through private plans, known as Medicare Advantage.

In Nevada, 53% of Medicare beneficiaries were in traditional Medicare, with the remaining 47% enrolled in a Medicare Advantage Health Plan offered through a private health insurance plan.³

25%
of Nevadans are
Medicaid beneficiaries¹

MEDICAID

To be eligible for Nevada Medicaid, you must be a resident of the state, a U.S. national, citizen, permanent resident, or legal alien, who is:

- An adult between the age of 19-64 whose household income is at or below 138% of the Federal Poverty Level (FPL)
- A child under the age of 19 whose household income is at or below 205% of the FPL
- A pregnant woman whose household income is less than 165% of the FPL
- A parent or caretaker with a household income at or below 138% of the FPL
- A Supplemental Security Income recipient

Certain Medicare beneficiaries are also eligible.²

Nevada ranks 50th out of 51 for its spend per Medicaid enrollee. The national average spend is \$9,164 per enrollee. Nevada's spend is \$6,055 per Medicaid enrollee.³



83% of uninsured Nevadans are eligible for Medicaid or subsidies on the Silver State Health Insurance Exchange but do not participate in either!⁴



SILVER STATE HEALTH INSURANCE EXCHANGE

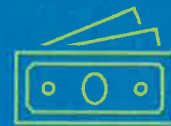
The Affordable Care Act established a national “Marketplace” for Americans to compare and purchase health insurance. States had the option of participating in a federal program or creating their own program. Nevada created Nevada Health Link, which is operated by the Silver State Health Insurance Exchange. Nevadans can compare and purchase health insurance plans. Nevadans with estimated household incomes between 100% and 400% of the Federal Poverty Level (FPL) are eligible for tax credits or subsidies.



96,379 Nevadans are enrolled in qualified health and dental plans¹



The Exchange offers 163 different plans across seven insurance carriers, with at least 50 plans available to every county in Nevada²



86% of enrollees qualified for financial assistance to lower their insurance costs and 40% had a net premium of \$100 or less²



Nevada ranks 8th in the nation for having the LOWEST Average Benchmark Premium in 2023³

HOSPITAL UTILIZATION



- Medicare and Medicaid patients make up the majority of patients treated in Nevada hospitals. Their utilization of hospital services is much higher than the portion of the population they represent.¹
- Emergency room utilization continues to be driven by Medicaid usage. In 2021, 38% of emergency room visits were made by Medicaid patients. Medicaid beneficiaries utilize emergency rooms because there are no barriers to entry (no co-pay or deductibles), poor access to primary care, and emergency rooms are open 24/7.²

NATIONAL RECOGNITION

Forbes ranks Nevada among the top five states in the nation:



Where healthcare is LEAST expensive³



Where overall healthcare spending grew the LEAST³

The Kaiser Family Foundation ranks Nevada:



Third in the nation for the LOWEST healthcare expenditures per capita⁴

COST SHIFTING

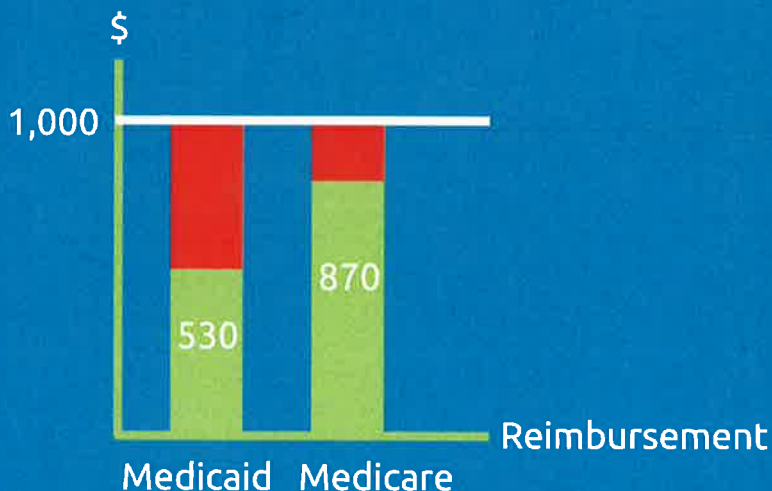
Watch a video
on cost shifting



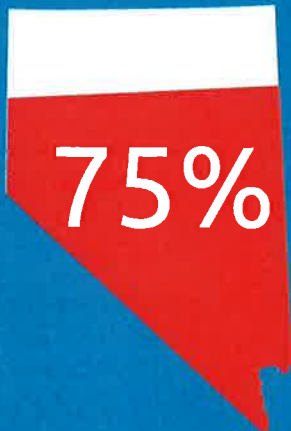
Cost shifting occurs when government programs do not pay the full cost of the care provided. The unpaid cost is shifted to individuals with commercial insurance.

For example, if a procedure costs a hospital \$1,000 to provide, Nevada Medicaid will pay, on average, \$530 for the procedure, or about 53% of the cost (some hospitals receive a supplemental payment from the government but not all).¹

Medicare pays, on average, \$870 or about 87% of the cost.²



Because Medicare and Medicaid pay less than the hospital's cost to provide the service, union members, small businesses, families, and anyone with private insurance picks up the cost difference.



Approximately 70% of the care provided by Nevada Hospitals is to Medicaid and Medicare beneficiaries. Another 5% of the care is provided to people who are unable to pay their medical bills.³

In all, nearly 75% of the care provided in Nevada Hospitals is partially subsidized by insured groups!

HOW YOU CAN HELP



Increase the number of nurses in Nevada

The cost of traveling nurses is exorbitant and significantly adds to the cost of healthcare. We need to expand the number of slots for nursing students in nursing programs and remove barriers for those wanting to teach future nurses.

Increase prenatal care

Too many expecting mothers do not sign up for Medicaid until they are at the hospital delivering their baby. Often, the babies require days of expensive NICU care. A program should be developed to identify pregnant mothers, encourage them to enroll in Medicaid, and assist them in receiving prenatal care.

Increase access to primary care

Nevada needs to make it easy for physicians to practice in the state. We need more GME slots so medical students will stay after graduation. In addition, we need to preserve medical malpractice reforms and provide physicians with a variety of practice options, including being employed by Nevada hospitals.



HOW YOU CAN HELP

**Increase Medicaid
reimbursement**

All healthcare providers in Nevada need higher Medicaid rates to cover the high cost of inflation.

**Create temporary
care for homeless
patients after discharge**

Homeless hospital patients who no longer meet the criteria for acute care need a place that can provide basic care for a few days.

**Create more mental
health crisis
stabilization centers**

Too many patients with mental health conditions (and no medical conditions) are brought to emergency departments where there are no behavioral health services. They need a center that focuses on their specific needs.

**Eliminate high
deductible insurance
plans**

People are delaying care because of high deductible plans.

**Expand drug
prevention programs**

Too many drug overdose patients receive expensive treatment at hospitals.

SOURCES

PAGE 2: Myth V. Reality

1. Nevada Healthcare Quarterly Reporting, Operating Margins, https://www.nhqrnv.com/public/output_reports.php, Calendar Year 2022, Financial for Acute Care Hospitals
2. Manatt, Senate Concurrent Resolution No. 10 Study: Evaluating Public Health Insurance Plan Options for Nevada Residents, p. 9, January 2021
3. ncsbn.org – Uniform Licensure Requirements for a Multistate License
4. Unpublished Nevada Hospital Association FTE Staffing Survey of Open Positions as of July 1, 2022
5. Unpublished resident match data from UNR and UNLV

PAGE 3: Nevada Hospitals

1. Nevada Healthcare Quarterly Reporting, Hospital Employees, <https://www.nhqrnv.com/public/outputreports.php>, Calendar Year 2021, Utilization for Acute Care and Non Acute Care Hospitals
2. Nevada Healthcare Quarterly Reporting, Operating Margins, https://www.nhqrnv.com/public/output_reports.php, Calendar Year 2022, Financial for Acute Care Hospitals
3. Nevada Compare Care, Nevada Hospital Report, <https://www.nevadacomparecare.net/nv-reports.php>, Calendar Year 2021, Summary Report
4. Nevada Compare Care, Patients Admitted, <https://www.nevadacomparecare.net/static-standard-reports.php> Hospital Inpatient by Payor, Calendar Year 2021
5. Nevada Compare Care, Emergency Department, <https://www.nevadacomparecare.net/static-standard-reports.php> Outpatient Emergency, Hospital by Payor, Calendar Year 2021
6. UNR School of Medicine, Office of Statewide Initiatives, Nevada Rural and Frontier Health Data Book – 11th Edition, January 2023, Table 6.7

PAGE 4: Biggest Challenges for Hospitals

1. Unpublished Nevada Hospital Association FTE Staffing Survey of Open Positions as of July 1, 2022
2. Nevada Hospital Association, Daily COVID-19 Discharge Reports
3. Medicaid rate changes:
 - Nevada Compare Care, Nevada Hospital Report, <https://www.nevadacomparecare.net/nv-reports.php>
 - Nevada Healthcare Quarterly Reporting, Financial Information for Acute Care Hospitals, https://www.nhqrnv.com/public/output_reports.php
 - Nevada Compare Care, Patient Day Information, <https://www.nevadacomparecare.net/static-standard-reports.php> Hospital Inpatient

PAGE 5: Nursing in Nevada

1. Nevada Health Workforce Research Center's analysis of unpublished data from the Department of Employment, Training, and Rehabilitation, 2023

PAGE 6: Nursing in Nevada

1. UNR Office of Statewide Initiatives, Health Care Careers in Nevada 2022-2023, p.20 and 22
2. Becker's Hospital Review, RN pay for all 50 states adjusted by the cost of living, Oct. 31, 2022
3. Nevada Hospital Association Members
4. Nevada State Board of Nursing
5. NRS 449.242-449.2425

PAGE 7: Nursing Education Programs

1. Nevada State Board of Nursing, Annual Report Fiscal Year 2021/2022, p. 12

PAGE 8: Nurse Licensure Compact

1. NCSBN.org, <https://www.ncsbn.org/compacts/nurse-licensure-compact.page>
2. Nevada State Board of Nursing

PAGE 9: Physicians in Nevada

1. Nevada Health Workforce Research Center, Physician Workforce in Nevada: A Chartbook – 2022 Edition, p.16
2. Nevada Health Workforce Research Center, Physician Workforce in Nevada: A Chartbook – 2022 Edition, p.1
3. Nevada Health Workforce Research Center, Physician Workforce in Nevada: A Chartbook – 2022 Edition, p.2
4. Nevada Health Workforce Research Center, Physician Workforce in Nevada: A Chartbook – 2022 Edition, p.3
5. American Medical Association, 2022 Physician Specialty Data Report

PAGE 10: Graduate Medical Education

1. Nevada Health Workforce Research Center, Graduate Medical Education Trends in Nevada – 2022, p. 1
2. Griswold, T., et al. Graduate Medical Education Trends in Nevada – 2022. Reno NV: Nevada Health Workforce Research Center, October 2022

PAGE 11: Health Professional Shortage Areas

1. UNR School of Medicine, Office of Statewide Initiatives, Nevada Rural and Frontier Health Data Book – 11th Edition, January 2023, Table 5.48

PAGE 12: Behavioral Health

1. Dept. of Health and Human Services Office of Analytics, The State of Mental Health in America, Nevada Summary and National Comparisons.
2. Nevada Health Workforce Research Center, Health Workforce in Nevada: A Chartbook, June 2021, p.55

PAGE 13: Medicare

1. Nevada Division of Insurance, 2021 Insurance Market Report, p.10
2. Healthinsurance.org, Medicare in Nevada, June 2, 2022, p.2
3. Healthinsurance.org, Medicare in Nevada, June 2, 2022, p.1 and 3

PAGE 14: Medicaid

1. Division of Health Care Financing and Policy, Nevada Department of Health and Human Services, 2022 Biennial Report on the Condition, Operation and Functioning of Nevada Medicaid, May 2022
2. Division of Welfare and Support Services, Peace of mind is just a click away, brochure
3. <https://www.kff.org/medicaid/state-indicator/total-medic-aid-spending/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D> and <https://data.medicaid.gov/datasets>, Medicaid enrollment by state
4. Manatt, Senate Concurrent Resolution No. 10 Study: Evaluating Public Health Insurance Plan Options for Nevada Residents, p. 9, January 2021

PAGE 15: Silver State Health Insurance Exchange

1. Nevada Health Link press release, January 23, 2023
2. Nevada Health Link press release, December 1, 2022
3. Kaiser Family Foundation, Average Marketplace Premiums by Metal Tier, 2018-2023, Timeframe 2023

PAGE 16: Hospital Utilization

1. <https://www.nevadacomparecare.net/>, Standard Report for Hospital Inpatient -Report 2A: Hospital by Payor Discharge Period: 1/1/2021 – 12/31/2021, Created: 11/22/2022
2. <https://www.nevadacomparecare.net/>, Standard Report for Hospital Outpatient (Emergency) - Report 2: Hospital by Payor, Discharge Period: 1/1/2021 – 12/31/2021, Created: 11/22/2022
3. Forbes.com, Most and Least Expensive States for Health Care, Ranked, Nov. 8, 2022
4. KKF.org, Health Care Expenditures per Capita by State of Residence, Timeframe: 2020

PAGE 17: Cost Shifting

1. Nevada Medicaid, 2020 Medicare Cost Report data, CMS data warehouse, Schedule S10
2. Medicare Information, 2019, Fortune Magazine, Spring 2021
3. Nevada Compare Care, Percentage of Patient Days, 2020, <https://www.nevadacomparecare.net/static-standard-reports.php>, Hospital Inpatient by Payor, Calendar Year 2020

Back Cover: What Does a Hospital Pay

1. Nevada Hospital Association Members
2. Becker's Healthcare, Average nurse pay v. travel pay for all 50 states, December 15, 2022
3. Nevada Rural Hospital Partners (NRHP) purchasing organization, Health Future

North Vista Hospital: Bariatric Surgery Excellence Award • Healthgrades' Patient Safety Excellence Award & Treatment of Sepsis Five-Star Recipient **St. Rose Dominican - Siena Campus:** U.S. News & World Report High Performing Ratings for: Heart Attack, Heart Failure, Knee Replacement, Hip Replacement, Stroke, and Chronic Obstructive Pulmonary Disease • 2022 Get with the Guidelines - Stroke Gold Plus Quality Achievement Award **St. Rose Dominican - San Martin Campus:** Center for Excellence in Robotic Surgery • 2022 Get with the Guidelines Stroke Gold Plus Quality Achievement Award **Saint Mary's Health Network:** Merative 100 Top Hospitals • Leapfrog Safety Grade "A" **Northern Nevada Medical Center:** Leapfrog Safety Grade "A" • Healthgrades' Five-Star Recipient for Total Hip Replacement and Spinal Fusion Surgery **Willow Springs Center:** Quality Award out of 450 UHS hospitals (2021) **Grover C. Dils Medical Center:** Top 100 CAH **Seven Hills Hospital:** Nursing Excellence/Clinical Nursing Education Award from UNLV • SAPTA Certified Program, SAMHSA certified OTP program **Carson Valley Medical Center:** Douglas County Spotlight Award for Community Partnership • Women's Choice Award for Best Hospitals **Renown South Meadows:** US News & World Report Number One Rights Campaign Foundation of support as "LGBTQ+ Accredited" **Renown South Meadows:** Accreditation **Renown South Meadows:** CARF Accreditation Medical Rehabilitation **Desert Center:** Leapfrog Safety Excellence 2023 Award Safety Grade "A" • Nevada as a "Most Distinguished Hospital": 2022 Stroke Gold Target: Type 2 Diabetes Honor Roll Plus STEMI Receiving **Valley Hospital:** Safety Grade "A" • U.S. News & World performing facility for Heart Failure, Stroke **Hospital:** Nevada Donor Network Recognition Department and Platinum Recognition for for Life Campaign **Summerlin Hospital Medical Center:** "A" • U.S. News & World Report recognition as high performing facility for Heart Failure & Stroke **Centennial Hills Hospital:** Advanced Attack Center & Thrombectomy-Capable Stroke Center • GOLD Plus Achievement Award **Humboldt General Hospital:** Excellence Award **Mesa View Regional Hospital:** NHA Community Trustee **Pershing General Hospital:** 2022 Top-20 CAH - Quality Award, National Rural Health Association • Recognized as a Most Distinguished Hospital by Nevada Donor Network **Incline Village Community Hospital Emergency Department:** Beta Heart 2022 Award, Domains I, II, III, IV and V • Quest for Zero: Excellence in ED Tier 2 - 2022 Beta Healthcare Group **Southern Hills Hospital:** Healthgrades' America's 100 Best Hospitals for Critical Care, Orthopedic Surgery & Pulmonary Care • Healthgrades' Surgical Care Excellence Award **Nathan Adelson Hospice:** Modern Healthcare Best Places to Work 2022 • Las Vegas Review Journal 2022 Gold Winner Best Hospice Facility & Best Home Medical Provider **Northern Nevada Sierra Medical Center (opened 2022)** Joint Commission Certification • Certified to perform open heart procedures and completed NICU Level II survey



**Congratulations to
NEVADA'S
AWARD-WINNING
Hospitals!**

This is a sample (not an exhaustive list) of the awards received by Nevada Hospitals in 2022.



WHAT DOES A HOSPITAL PAY • • • • •

Guess the cost of each item below.

1.



1 cm medical grade screw

2.



QLED 32" TV

3.



Hourly wage, traveling Registered Nurse

4.



Rattlesnake antivenom

5.



Ozempic Pen

6.



Medical refrigerator

7.



3,000 Exam Gloves

ANSWERS:

- 1. \$456¹:** This 1-centimeter screw is used in orthopedic surgeries. It is just one small component needed for an orthopedic procedure.
- 2. \$664¹:** 32" TVs can be purchased at Costco for \$120. Hospitals are required to purchase medical grade TVs that cost much more.
- 3. \$80²:** The average hourly rate for traveling RNs was \$79.97 in November 2022. Earlier in the year, hospitals paid as much as \$250 an hour for traveling RNs in some specialties.
- 4. \$17,877¹:** Most Nevada hospitals stock rattlesnake antivenom. The first dose is six vials, which costs \$17,877. This important medication expires within 24 months. If it is not used, it must be discarded and a new batch ordered.
- 5. \$831¹:** An Ozempic injection pen, used to treat diabetes, costs a hospital \$831. Typically, the pen is used once during a patient stay and then is discarded. Medicare does not reimburse for this expense.
- 6. \$5,438¹:** Hospitals purchase refrigerators that meet Centers for Disease Control and Prevention standards. A similar sized refrigerator at sears.com costs approximately \$749.
- 7. \$308³:** The cost of nitrile exam gloves increased 221% from 2019 to 2022.