

# Health Care Workforce Shortages Persist in Massachusetts and the United States

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The United States continues to face an unprecedented health care staffing shortage at the end of 2022. As a result, we have seen a recent increase in [federal and state legislative activity focusing on addressing these shortages](#). Multiple states have passed new laws or proposed legislation, Congress has introduced a bill aimed at transparency around nurse staffing agency payment models, and lawmakers have pressed the Federal Trade Commission (FTC) and the White House COVID-19 Response Team to open investigations into price gouging by nurse staffing agencies.

The Massachusetts Health and Hospital Association (MHA) recently released a survey raising similar concerns about health care workforce shortages in Massachusetts. The survey, titled [An Acute Crisis: How Workforce Shortages are Affecting Access and Costs](#), provided a stark overview of the challenges facing the health care workforce in Massachusetts, citing staffing shortages, increased labor costs, and capacity constraints.

## Workforce Shortages

According to the MHA survey, there are currently an estimated 19,000 open acute care hospital positions across Massachusetts. These position vacancies exist across practice areas and disciplines, including nursing, behavioral health, technicians, laboratory personnel, and clinical support staff. MHA reported a median vacancy rate for these positions of 17.2%. Nurses are facing some of the highest percentage of vacancies, with a 56% vacancy rate specifically for licensed practical nurses. Mental health workers and technicians have a 32% vacancy rate and there is a 35% vacancy rate for pulmonary function technicians.

Health care worker shortages at the national level began early on during the Covid-19 pandemic. According to [US News & World Report](#), an estimated 1.5 million health care jobs were lost in first two months of the pandemic and those job numbers have not returned to pre-pandemic levels. In a [letter to the U.S. House of Representatives in March 2022](#), the American Hospital Association (AHA) addressed the growing workforce shortages by reporting that: (i) 500,000 nurses will leave the workforce in 2022; (ii) 23% of hospitals are operating with a critical staffing shortage; and (iii) 95% of health care facilities had to hire staff from contract labor firms. In September 2021, the [American Nurses Association \(ANA\) wrote a letter](#) to Secretary Becerra at the U.S. Department of Health and

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Human Services urging immediate action to combat the national nursing shortage. The letter detailed the impact of the then-new Covid-19 Delta variant, the shortages of nurses in various states, and proposed policy solutions.

### **Labor Costs and Capacity Constraints**

These workforce shortages are reportedly placing a large financial burden on Massachusetts hospitals. As referenced in the MHA survey, on average, 70% of hospital overhead is spent on labor costs, but the compounding effects of Covid-19, health care provider burn-out, and health care providers exiting the profession, hospitals are having to spend even more money to keep staff and retain safe operating levels for patients. Hospitals are spending more on sign-on bonuses and retention packages than prior to the pandemic and relying more heavily on travel nurses. MHA reports that in Fiscal Year 2022, Massachusetts hospitals spent \$445 million on travel nurses, a significant jump from the \$133 million spent in Fiscal Year 2019.

The AHA letter stated that median hourly rates for travel nurses at national hospitals have more than tripled since January 2019. Some hospitals are paying rates as much as \$240 an hour or more to retain travel nurses. In addition to workforce shortages and increased costs, hospitals are struggling to meet the needs of patients. Emergency room wait times are higher than normal and patients awaiting discharge to post-acute care facilities face long waits, up to 30 days at times, according to the MHA survey.

### **Proposed Policies**

The MHA recommended steps that stakeholders can take to alleviate the strain at both the state and federal levels. These steps include:

- providing additional federal funding to hospitals and affiliated providers,
- investing in training for behavioral health, substance use disorder, and trauma-responsive workers,
- launching statewide campaigns to encourage entrance into the health care workforce with direct connections to employment, education, and training,
- maintaining the public emergency flexibilities on the state and federal levels that allow for telehealth capabilities, and
- passing stronger workplace protections for violence against health care workers.

The AHA suggested concentrating on recruitment and diversity in the health care workforce by:

- lifting the limit on Medicare-funded physician residencies,
- providing loan forgiveness and scholarships,
- encouraging work visa relief for foreign-trained nurses,
- increasing support for nursing schools and faculty, and

- providing behavioral health funding to address, prevent, and treat burn-out

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