Adaptive Workforce Solutions

CONTRACT LABOR MARKET RATE ANALYSIS

HEALTHCARE Q1 2024 RESULTS

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INTRODUCTION AND OVERVIEW

Even before the pandemic, labor expenses, encompassing recruitment, retention, benefits, and incentives for employed staff, constituted over 50% of hospitals' total costs. Although the spiking labor costs resulting from the increased usage of contract labor during the pandemic have largely subsided, even small fluctuations in the ebb and flow of contract labor utilization can have a significant impact on a hospital's overall financial situation and operating margins. As such, Adaptive Workforce Solutions' quarterly reporting on bill rates, pertinent legislation, and other items impacting the healthcare workforce is a service we provide to keep our clients informed about the staffing industry and prepared for what may be on the healthcare labor horizon.

In this Q1 Contract Labor Market Report, we will review first quarter bill rate averages and report on legislation impacting healthcare labor bill rates and other items of interest to employers of healthcare contingent labor. In the bill rate analysis section that follows, the bill rate data is broken down by clinical category and specialty and national and regional bill rate averages are shown and discussed. For the Nursing category – the largest area of contract labor spend – we will show the combined 24-month nursing trend.

The general rate trend in the first quarter showed a continuing decline from pandemic highs in nursing, allied health, and therapy specialties, reflecting decreased demand as well as, in some areas of the country, seasonal fluctuations. In contrast, and reflecting sustained and increasing demand, locums bill rates held roughly steady or, for some specialty levels and advanced practice nursing, showed distinct increases.

Relative to locums, some of the stories we've been following and discuss in this report are the recent activation of the Physician Assistant Licensure Compact, the proposed changes to the Conrad 30 Visa Waiver Program, and the growing interest on the part of physicians, residents, and interns in union organizing and collective bargaining activity.

In other healthcare employment news, we report on staffing agency legislation and litigation we're following that's of particular interest to the staffing industry and healthcare employers. We also provide a status update on the California Healthcare Minimum Wage law and, finally, discuss the hugely disruptive and costly Change ransomware attack that reverberated through the U.S. healthcare system in late February, creating havoc in cash flow processes and damage that is still being assessed.

NATIONAL AVERAGE BILL RATES

In this section we show the national average bill rates observed in the first quarter by category and specialty. The bill rates were compiled using job postings sourced from our Vendor Management Software (VMS), market and supplier surveys, and online contract labor job postings aggregated from hospitals around the country. **Please note that the rates shown and discussed in this report are from the first quarter and do not reflect current rates.**

NATIONAL LOCUM TENENS

For the period of January 1 through March 31, 2024, and reflecting sustained demand for locums, national physician bill rate averages for all practice levels held roughly steady in the first quarter, while bill rates for advanced practice professionals registered an increase at all practice levels.

2024 Q1 NATIONAL PHYSICIAN BILL RATES

Physicians		All Inclusive Bill Rates Low	High	Average
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$206	$262	$234
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$226	$343	$284
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$291	$425	$358
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$305	$435	$370

2024 Q1 NATIONAL ADVANCED PRACTICE AVERAGES

Advanced Practice		All Inclusive Bill Rates Low	High	Average
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$167	$186	$177
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$176	$204	$190
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$200	$331	$266

NATIONAL NURSING SPECIALTIES

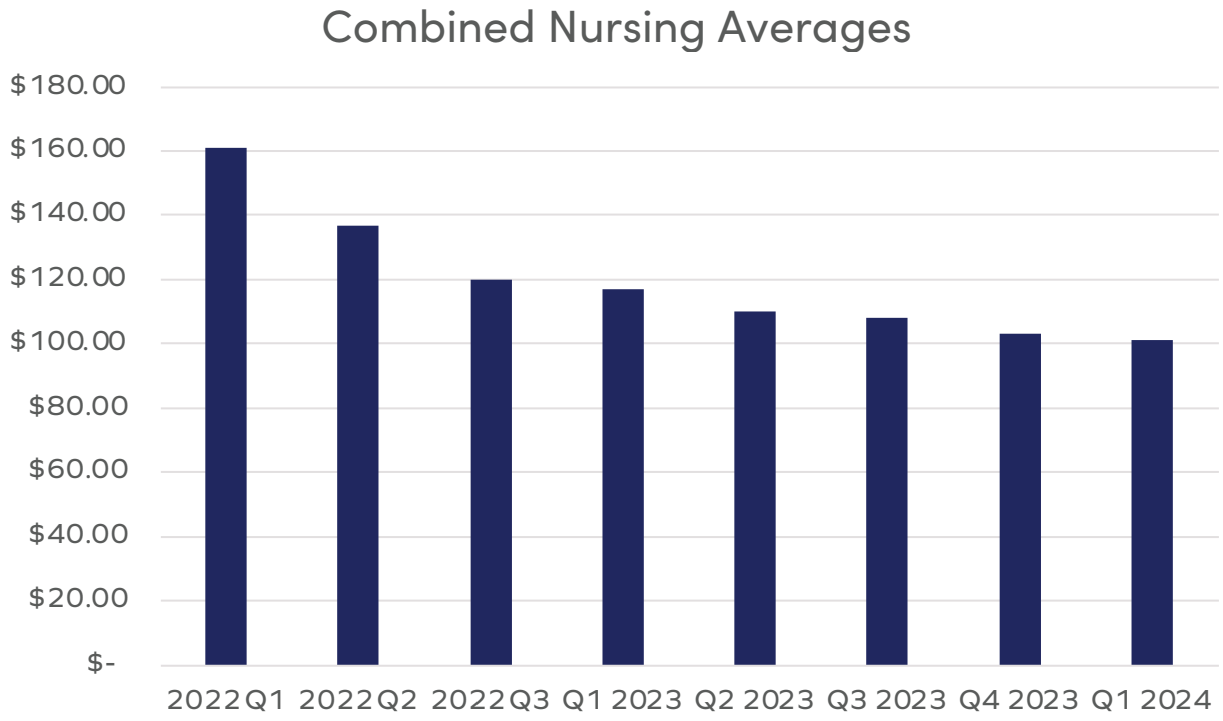
For the period of January 1 through March 31, 2024, in a continuation of the trend observed throughout 2023 and reflecting declining demand, national bill rate averages were down across all nursing specialties.

2024 Q1 NATIONAL NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$84	$105	$95
Cath Lab	$93	$118	$105
Clinics	$78	$93	$85
CNA	$37	$54	$47
CVICU	$93	$116	$105
Dialysis	$81	$100	$91
ER	$83	$109	$96
Home Care	$77	$91	$84
ICU	$85	$108	$97
L&D	$86	$111	$98
Long Term Care	$74	$93	$83
LPN	$50	$69	$60
MA	$35	$47	$41
Med Surg/Tele	$80	$105	$92
NICU	$89	$109	$99
ONC	$83	$106	$94
OR	$91	$117	$104
Ortho	$81	$98	$89
PACU	$87	$108	$98
Peds	$85	$106	$96
Psych	$79	$99	$89
Radiology	$89	$112	$101

27-MONTH COMBINED NURSING TREND

Here we show the combined 27-month nursing trend, the largest area of contract labor spend. As expected, the trend shows a clear decline from pandemic highs, with the downward trend continuing through the period of January 1 through March 31, 2024.



NATIONAL ALLIED HEALTH

First quarter rates for the allied health specialties showed the same rate fluctuations observed throughout 2023, with most specialties showing declines but some, such as Cath Lab, IR, and Pharmacist, showing mild to moderate increases.

2024 Q1 NATIONAL ALLIED AVERAGES

	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$97	$120	$109
CT Tech	$86	$109	$98
Echo Tech	$89	$109	$99
General X-Ray	$77	$99	$88
IR Tech	$100	$117	$109
Medical Lab Tech	$75	$95	$85
MRI Tech	$87	$105	$96
Nuclear Medicine Tech	$90	$106	$98
OR Tech	$72	$94	$83
Pharmacist	$112	$138	$125
Pharmacist Tech	$52	$62	$57
Phlebotomist	$46	$59	$52
Sterile Processing Tech	$48	$62	$55
Ultrasound Tech	$89	$109	$99
X-Ray	$79	$97	$88

NATIONAL THERAPY

This occupational category includes Occupational Therapists (Occupational), Occupational Therapy Assistants (OT Assistant), Physical Therapists (Physical), Physical Therapy Assistants (PT assistant), Respiratory Therapists (Respiratory), and Speech Therapists (Speech). In all categories, first-quarter bill rates decreased, with rates for Physical Therapists and Respiratory Therapists showing the most significant declines.

2024 Q1 NATIONAL THERAPY AVERAGES

	All Inclusive Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$70	$89	$80
OT Assistant	$53	$65	$59
Physical Therapist	$71	$91	$81
PT Assistant	$55	$67	$61
Respiratory Therapist	$70	$92	$81
Speech Therapist	$73	$91	$82

REGIONAL Q1 BILL RATES

NORTHEASTERN REGION

***NEW YORK EXCLUDED**

2024 Q1 EASTERN PHYSICIAN AVERAGES

		All Inclusive Bill Rates		
Physicians		**Low**	**High**	**Average**
Level 1	Primary Care - Family Practice, Internal Medicine, Dentistry	$208	$260	$234
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$223	$345	$284
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$285	$425	$355
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$325	$423	$374

2024 Q1 EASTERN ADVANCED PRACTICE AVERAGES

		All Inclusive Bill Rates		
Advanced Practice		**Low**	**High**	**Average**
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$165	$200	$183
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$180	$215	$198
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$200	$335	$268

2024 Q1 EASTERN NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$83	$104	$94
Cath Lab	$90	$117	$103
Clinics	$78	$91	$85
CNA	$35	$51	$43
CVICU	$94	$114	$104
Dialysis	$81	$104	$92
ER	$82	$110	$96
Home Care	$79	$102	$91
ICU	$80	$106	$93
L&D	$81	$108	$94
Long Term Care	$70	$92	$81
LPN	$47	$71	$59
MA	$32	$42	$37
Med Surg/Tele	$83	$107	$95
NICU	$90	$108	$99
ONC	$87	$107	$97
OR	$91	$120	$105
Ortho	$83	$103	$93
PACU	$87	$108	$97
Peds	$85	$103	$94
Psych	$82	$99	$90
Radiology	$94	$114	$104

REGIONAL Q1 BILL RATES

NORTHEASTERN REGION

*NEW YORK EXCLUDED

2024 Q1 EASTERN ALLIED AVERAGES

	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$95	$119	$107
CT Tech	$85	$111	$98
Echo Tech	$89	$108	$98
General X-Ray	$75	$102	$89
IR Tech	$96	$121	$108
Medical Lab Tech	$73	$94	$83
MRI Tech	$88	$106	$97
Nuclear Medicine Tech	$89	$108	$98
OR Tech	$70	$97	$83
Pharmacist	$112	$135	$124
Pharmacist Tech	$51	$61	$56
Phlebotomist	$45	$59	$52
Sterile Processing Tech	$44	$62	$53
Ultrasound Tech	$87	$111	$99
X-Ray	$77	$100	$88

2024 Q1 EASTERN THERAPY AVERAGES

	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$69	$88	$78
OT Assistant	$52	$64	$58
Physical Therapist	$68	$87	$77
PT Assistant	$53	$65	$59
Respiratory Therapist	$67	$85	$76
Speech Therapist	$74	$86	$80

NORTHEASTERN REGION CONCLUSION:

***NEW YORK EXCLUDED**

First quarter bill rates for physicians in the Northeast Region held roughly steady across all levels. Similarly, and reflecting the sustained demand for locums, bill rates in the advanced practice category showed increases for all practice levels. In contrast, nursing bill rates across all specialties decreased, continuing the trend observed in 2023. In the allied health category, first quarter bill rates showed decreases across most specialties. Similarly, first quarter rates in the therapy category also showed mild to moderate decreases across all specialties.

REGIONAL Q1 BILL RATES

NEW YORK STATE

2024 Q1 NEW YORK PHYSICIAN AVERAGES

		All Inclusive Bill Rates		
Physicians		**Low**	**High**	**Average**
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$213	$278	$245
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$228	$348	$288
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$300	$428	$364
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$328	$450	$389

2024 Q1 NEW YORK ADVANCED PRACTICE AVERAGES

		All Inclusive Bill Rates		
Advanced Practice		**Low**	**High**	**Average**
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$158	$182	$170
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$165	$200	$183
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$203	$345	$274

2024 Q1 NEW YORK NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$90	$108	$99
Cath Lab	$99	$120	$110
Clinics	$91	$111	$101
CNA	$49	$62	$56
CVICU	$105	$121	$113
Dialysis	$91	$105	$98
ER	$94	$115	$104
Home Care	$85	$97	$91
ICU	$94	$115	$104
L&D	$96	$114	$105
Long Term Care	$82	$104	$93
LPN	$53	$71	$62
MA	$39	$51	$45
Med Surg/Tele	$84	$106	$95
NICU	$95	$114	$104
ONC	$97	$115	$106
OR	$99	$122	$111
Ortho	$88	$105	$97
PACU	$100	$114	$107
Peds	$92	$110	$101
Psych	$85	$104	$95
Radiology	$96	$114	$105

REGIONAL Q1 BILL RATES NEW YORK STATE

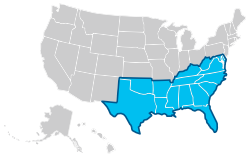
2024 Q1 NEW YORK ALLIED AVERAGES			
	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$104	$122	$113
CT Tech	$93	$111	$102
Echo Tech	$92	$111	$102
General X-Ray	$80	$103	$92
IR Tech	$108	$124	$116
Medical Lab Tech	$78	$93	$85
MRI Tech	$88	$108	$98
Nuclear Medicine Tech	$87	$103	$95
OR Tech	$74	$94	$84
Pharmacist	$104	$121	$113
Pharmacist Tech	$53	$62	$58
Phlebotomist	$49	$61	$55
Sterile Processing Tech	$50	$63	$56
Ultrasound Tech	$93	$110	$102
X-Ray	$82	$101	$91

2024 Q1 NEW YORK THERAPY AVERAGES			
	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$71	$88	$80
OT Assistant	$55	$69	$62
Physical Therapist	$75	$98	$86
PT Assistant	$57	$67	$62
Respiratory Therapist	$78	$102	$90
Speech Therapist	$70	$92	$81

NEW YORK STATE CONCLUSION:

Consistent with the national trend and reflecting a sustained demand for locums, bill rates for physicians in the New York Region held roughly steady across all practice levels with the exception of level 4, which showed an increase. Bill rates in the advanced practice category followed a similar pattern, with rates for levels 1 and 2 holding roughly steady and level 3 rates increasing. In the nursing category, nursing bill rates in New York State were down in nearly all specialties. Iin the allied health category, first quarter bill rates showed the same fluctuation observed in other regions, with rates for IR Tech, Pharmacist, and Phlebotomist showing increases and rates for other specialties trending downward. Therapy bill rates followed the nationwide pattern, with rates across all specialties declining.

REGIONAL Q1 BILL RATES



SOUTHERN REGION

2024 Q1 SOUTHERN PHYSICIAN AVERAGES

		All Inclusive Bill Rates		
Physicians		**Low**	**High**	**Average**
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$194	$225	$210
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$218	$280	$249
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$285	$425	$355
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$308	$450	$379

2024 Q1 SOUTHERN ADVANCED PRACTICE AVERAGES

		All Inclusive Bill Rates		
Advanced Practice		**Low**	**High**	**Average**
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$170	$185	$178
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$175	$210	$193
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$195	$320	$258

2024 Q1 SOUTHERN NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$78	$95	$86
Cath Lab	$89	$111	$100
Clinics	$72	$84	$78
CNA	$35	$47	$41
CVICU	$87	$115	$101
Dialysis	$79	$95	$87
ER	$75	$99	$87
Home Care	$71	$84	$78
ICU	$80	$96	$88
L&D	$80	$99	$89
Long Term Care	$70	$84	$77
LPN	$50	$65	$57
MA	$33	$42	$38
Med Surg/Tele	$78	$96	$87
NICU	$85	$105	$95
ONC	$79	$100	$89
OR	$87	$112	$99
Ortho	$77	$91	$84
PACU	$82	$100	$91
Peds	$78	$96	$87
Psych	$75	$91	$83
Radiology	$79	$104	$91

REGIONAL Q1 BILL RATES — SOUTHERN REGION

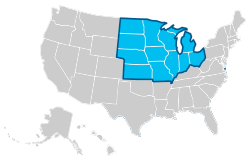
2024 Q1 SOUTHERN ALLIED AVERAGES			
	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$94	$113	$104
CT Tech	$83	$102	$92
Echo Tech	$86	$108	$97
General X-Ray	$74	$92	$83
IR Tech	$100	$111	$105
Medical Lab Tech	$74	$95	$84
MRI Tech	$83	$98	$91
Nuclear Medicine Tech	$88	$100	$94
OR Tech	$71	$91	$81
Pharmacist	$115	$144	$129
Pharmacist Tech	$51	$61	$56
Phlebotomist	$44	$54	$49
Sterile Processing Tech	$47	$59	$53
Ultrasound Tech	$84	$104	$94
X-Ray	$77	$93	$85

2024 Q1 SOUTHERN THERAPY AVERAGES			
	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$68	$87	$77
OT Assistant	$50	$62	$56
Physical Therapist	$61	$86	$74
PT Assistant	$50	$62	$56
Respiratory Therapist	$62	$86	$74
Speech Therapist	$71	$86	$78

SOUTHERN REGION CONCLUSION:

In the Southern Region, physician bill rates for level 1,2, and 3 decreased slightly and level 4 increased. Bill rates for advanced practice professionals, following the trend observed nationally and reflecting increased demand, trended up for all practice levels. In the nursing category, although rates showed more fluctuation than observed in the rest of the country, rates were down in most specialties. Similarly, allied health rates in the Southern Region showed fluctuation across specialties, with Cath Lab, IR, and Ultrasound, among others, trending up, and most specialties showing declines. In the therapy category, bill rates were down across all specialties.

REGIONAL Q1 BILL RATES



MIDWEST REGION

2024 Q1 MIDWEST PHYSICIAN AVERAGES

Physicians		All Inclusive Bill Rates Low	High	Average
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$202	$248	$225
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$220	$334	$277
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$285	$418	$352
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$308	$430	$369

2024 Q1 MIDWEST ADVANCED PRACTICE AVERAGES

Advanced Practice		All Inclusive Bill Rates Low	High	Average
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$153	$156	$160
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$163	$171	$180
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$193	$224	$255

2024 Q1 MIDWEST NURSING AVERAGES

Nursing	All Inclusive Bill Rates Low	High	Average
Case Manager	$82	$103	$93
Cath Lab	$88	$117	$102
Clinics	$69	$92	$81
CNA	$35	$52	$43
CVICU	$86	$113	$99
Dialysis	$75	$95	$85
ER	$79	$100	$89
Home Care	$71	$79	$75
ICU	$78	$103	$91
L&D	$83	$109	$96
Long Term Care	$70	$87	$78
LPN	$52	$64	$58
MA	$36	$50	$43
Med Surg/Tele	$75	$99	$87
NICU	$85	$101	$93
ONC	$74	$103	$88
OR	$85	$108	$97
Ortho	$77	$96	$86
PACU	$82	$105	$93
Peds	$80	$96	$88
Psych	$71	$95	$83
Radiology	$89	$102	$95

REGIONAL Q1 BILL RATES MIDWEST REGION

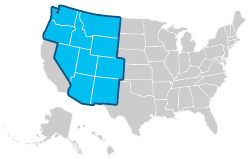
2024 Q1 MIDWEST ALLIED AVERAGES			
	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$92	$119	$105
CT Tech	$84	$110	$97
Echo Tech	$86	$114	$100
General X-Ray	$78	$99	$88
IR Tech	$96	$118	$107
Medical Lab Tech	$69	$99	$84
MRI Tech	$85	$104	$94
Nuclear Medicine Tech	$89	$110	$99
OR Tech	$76	$97	$87
Pharmacist	$115	$144	$129
Pharmacist Tech	$51	$60	$56
Phlebotomist	$42	$57	$49
Sterile Processing Tech	$48	$61	$55
Ultrasound Tech	$86	$107	$96
X-Ray	$80	$96	$88

2024 Q1 MIDWEST THERAPY AVERAGES			
	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$69	$89	$79
OT Assistant	$50	$61	$56
Physical Therapist	$71	$90	$81
PT Assistant	$51	$63	$57
Respiratory Therapist	$67	$93	$80
Speech Therapist	$73	$90	$82

MIDWEST REGION CONCLUSION:

In the Midwest Region, consistent with other regions and reflecting sustained demand, physician rates at all practice levels held roughly steady and advanced practice rates for all levels trended up. Midwestern nursing rates also followed the national pattern, with rates trending down in every specialty. Allied Health rates registered the same fluctuation we've observed in other regions, with some specialties showing declines and others, notably Cath Lab and Pharmacist, showing an increase. Therapy bill rates showed the same declines observed in other regions.

REGIONAL Q1 BILL RATES



WESTERN REGION

***CALIFORNIA EXCLUDED**

2024 Q1 WESTERN PHYSICIAN AVERAGES

		All Inclusive Bill Rates		
Physicians		**Low**	**High**	**Average**
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$205	$265	$235
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$233	$338	$281
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$285	$420	$353
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$308	$445	$376

2024 Q1 WESTERN ADVANCED PRACTICE AVERAGES

		All Inclusive Bill Rates		
Advanced Practice		**Low**	**High**	**Average**
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$173	$185	$179
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$183	$195	$189
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$205	$340	$273

2024 Q1 WESTERN NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$83	$105	$94
Cath Lab	$89	$120	$105
Clinics	$80	$85	$83
CNA	$37	$51	$44
CVICU	$89	$113	$101
Dialysis	$79	$97	$88
ER	$80	$108	$94
Home Care	$70	$87	$79
ICU	$84	$107	$95
L&D	$85	$112	$99
Long Term Care	$70	$92	$81
LPN	$52	$67	$60
MA	$36	$45	$41
Med Surg/Tele	$78	$106	$92
NICU	$85	$106	$95
ONC	$80	$101	$91
OR	$91	$112	$102
Ortho	$79	$96	$87
PACU	$83	$105	$94
Peds	$85	$110	$98
Psych	$76	$98	$87
Radiology	$88	$121	$105

REGIONAL Q1 BILL RATES

WESTERN REGION
*CALIFORNIA EXCLUDED

2024 Q1 WESTERN ALLIED AVERAGES

	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$95	$123	$109
CT Tech	$87	$110	$98
Echo Tech	$86	$106	$96
General X-Ray	$78	$98	$88
IR Tech	$95	$110	$103
Medical Lab Tech	$79	$99	$89
MRI Tech	$87	$105	$96
Nuclear Medicine Tech	$94	$109	$101
OR Tech	$71	$95	$83
Pharmacist	$113	$136	$124
Pharmacist Tech	$51	$60	$56
Phlebotomist	$46	$61	$54
Sterile Processing Tech	$50	$62	$56
Ultrasound Tech	$89	$107	$98
X-Ray	$80	$95	$88

2024 Q1 WESTERN THERAPY AVERAGES

	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$73	$91	$82
OT Assistant	$56	$66	$61
Physical Therapist	$73	$94	$83
PT Assistant	$56	$67	$61
Respiratory Therapist	$70	$90	$80
Speech Therapist	$75	$92	$84

WESTERN REGION CONCLUSION:
***CALIFORNIA EXCLUDED**

Consistent with the trend observed in other regions, first quarter bill rates for physician levels 1,2, and 3 held roughly steady, while level 4 showed an increase. Similarly, advanced practice bill rates increased across all practice levels, reflecting sustained demand for locums. In the nursing category, bill rates declined across all specialties. In the allied health and therapy categories, first quarter bill rates were consistent with the national pattern, with rate fluctuations in allied health and rate declines in all therapy specialties.

REGIONAL Q1 BILL RATES

CALIFORNIA STATE

2024 Q1 CALIFORNIA PHYSICIAN AVERAGES

		All Inclusive Bill Rates		
Physicians		**Low**	**High**	**Average**
Level 1	Primary Care- Family Practice, Internal Medicine, Dentistry	$205	$270	$238
Level 2	General Psychiatry, Pediatrics, Child and Adolescent Psychiatry, OBGYN, Neurology, Hospitalist, Emergency Medicine	$233	$348	$290
Level 3	Critical Care, Pediatric Critical Care, Cardiology, Radiology, Anesthesiology	$305	$435	$370
Level 4	Pediatric Surgery, Neurosurgery, Maternal Fetal, CVT Surgery, Gastroenterology, Interventional Cardiology, Invasive Radiology	$350	$440	$395

2024 Q1 CALIFORNIA ADVANCED PRACTICE AVERAGES

		All Inclusive Bill Rates		
Advanced Practice		**Low**	**High**	**Average**
Level 1	Primary Care, Urgent Care/Fast Track, Psychologist	$185	$210	$198
Level 2	Psychiatry, Inpatient Hospitalist, Pediatrics, Emergency Room, General Surgery, Orthopedic Surgery	$195	$220	$208
Level 3	CRNA, Neonatology, Critical Care, Cardiothoracic/Vascular Surgery & Neurosurgery	$205	$340	$273

2024 Q1 CALIFORNIA NURSING AVERAGES

	All Inclusive Bill Rates		
Nursing	**Low**	**High**	**Average**
Case Manager	$88	$111	$99
Cath Lab	$106	$128	$117
Clinics	$77	$89	$83
CNA	$38	$54	$46
CVICU	$100	$123	$111
Dialysis	$86	$103	$95
ER	$89	$119	$104
Home Care	$80	$92	$86
ICU	$92	$121	$106
L&D	$89	$119	$104
Long Term Care	$82	$98	$90
LPN	$50	$74	$62
MA	$35	$45	$40
Med Surg/Tele	$83	$114	$99
NICU	$92	$121	$107
ONC	$84	$111	$98
OR	$100	$125	$113
Ortho	$79	$99	$89
PACU	$93	$113	$103
Peds	$91	$116	$104
Psych	$82	$106	$94
Radiology	$88	$121	$105

REGIONAL Q1 BILL RATES CALIFORNIA STATE

2024 Q1 CALIFORNIA ALLIED AVERAGES

	All Inclusive Bill Rates		
Allied	**Low**	**High**	**Average**
Cath Lab Tech	$103	$128	$115
CT Tech	$88	$112	$100
Echo Tech	$92	$109	$101
General X-Ray	$79	$101	$90
IR Tech	$104	$120	$112
Medical Lab Tech	$78	$95	$87
MRI Tech	$91	$107	$99
Nuclear Medicine Tech	$95	$111	$103
OR Tech	$71	$92	$81
Pharmacist	$115	$143	$129
Pharmacist Tech	$51	$61	$56
Phlebotomist	$46	$58	$52
Sterile Processing Tech	$50	$63	$57
Ultrasound Tech	$98	$114	$106
X-Ray	$81	$98	$90

2024 Q1 CALIFORNIA THERAPY AVERAGES

	All Inclusive Bill Rates		
Therapy	**Low**	**High**	**Average**
Occupational Therapist	$71	$92	$82
OT Assistant	$55	$69	$62
Physical Therapist	$73	$93	$83
PT Assistant	$59	$73	$66
Respiratory Therapist	$74	$95	$85
Speech Therapist	$75	$96	$86

CALIFORNIA STATE CONCLUSION:

Consistent with the pattern observed in other regions and reflecting a sustained demand for locums, California first quarter bill rates for physician levels 1, 2, and 3 held roughly steady, while rates for level 4 increased. Similarly, in the advanced practice category, bill rates increased at all practice levels.

In the nursing category, and consistent with the decreased demand observed nationally, California bill rates declined across all specialties. First quarter rates for allied health showed the same fluctuation observed in other regions, with Cath Lab, Ultrasound, and Pharmacist, among others, showing increases, and most other specialties trending down. In the therapy category, bill rates were down across all specialties.

LEGISLATIVE ACTIVITY

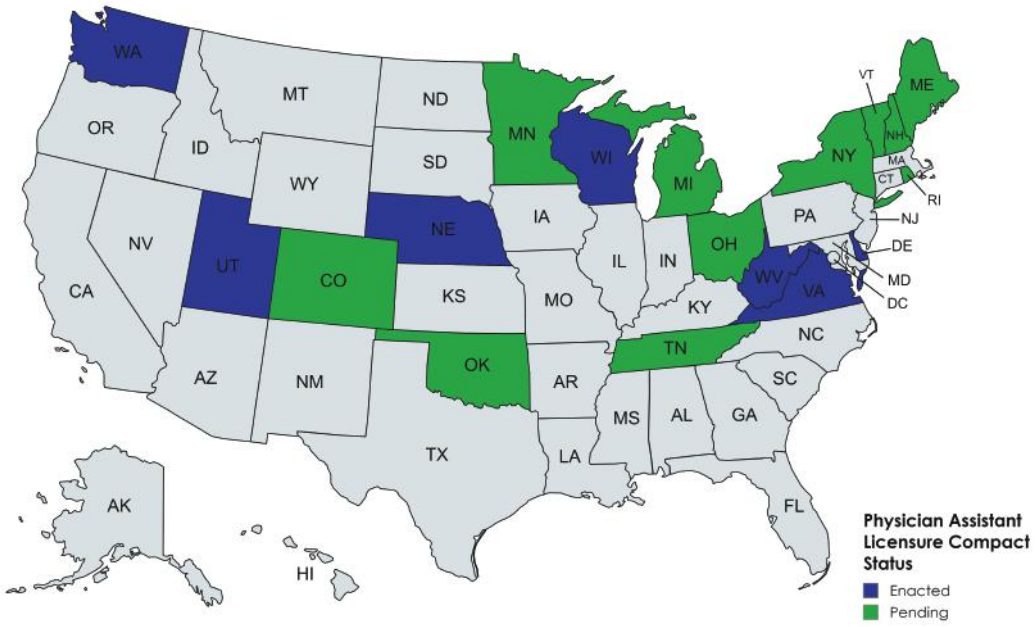
A. Staffing Industry Legislation

In early February, Iowa lawmakers advanced a bill that would require additional oversight and regulation of temporary healthcare staffing agencies doing business in Iowa. The legislation would prohibit healthcare staffing firms from charging more than 150% of the statewide average wage for nurses. The total amount of the average wage is defined in the proposed legislation to include administrative fees, contract fees, transportation, travel stipends, per diems and any other costs such as overtime and taxes. A coalition of industry groups has formed to fight the legislation in the Iowa Senate, arguing that the proposed cap is unworkable and will worsen rather than solve the healthcare workforce shortage in Iowa. If the legislation passes the Senate and is signed into law, Iowa will become one of a handful of states – including Massachusetts, Minnesota, and Oregon – to regulate temporary healthcare labor bill rates.

B. Workforce Legislation

1. Physician Assistant Licensure Compact

Virginia became the seventh state to join the compact on April 4, meaning the model is now activated and will be operationalized over the next 18-24 months. Delaware, Utah, and Wisconsin were the first states to enact the legislation in 2023, and West Virginia, Washington and Nebraska joined the compact earlier this year. PA compact model legislation is pending in 11 states.



2. Conrad 30 Visa Waiver Program Changes

The Conrad 30 waiver program exempts foreign-born medical school graduates who came to the United States on the J-1 Visa Exchange Visitor Program from the requirement that they return to their country of origin after their visa expires. Each state is allocated 30 waivers under the program, which are distributed on the condition that recipients agree to practice medicine for three years in a Health Professional Shortage Area, Medically Underserved Area, or Medically Underserved Population. In 2021, only 24 states used their maximum 30 allocated waivers, with 376 waivers going unused.

In January, legislation was introduced in Congress to reallocate the unused waivers to states that utilize all 30 of their allocated waivers. The bipartisan-sponsored DOCTORS Act would require state authorities to report to the Secretary of State how many unused waivers they retained at the end of each fiscal year. The Secretary will calculate the total unused waivers and disburse those equally back to the states that used their maximum 30 slots in the previous fiscal year.

Although legislative adjustments that address the nationwide physician shortage are welcome, many hospitals and healthcare organizations around the country are struggling to fill physician vacancies. And while many employers are reluctant to consider locum tenens because of the higher costs, sustainable solutions are out there. Under a vendor-neutral Managed Service Program, locums staffing vendors compete on a transparent and even playing field, giving healthcare employers access to a huge database of physician and advance practice candidates while simultaneously exerting downward pressure on bill rates.

C. California Healthcare Minimum Wage Law Update

As discussed in our Q4 2023 Report, California enacted a new minimum wage law in October to increase pay for health care workers employed at most types of medical facilities, from hospitals and outpatient clinics to skilled nursing facilities and physician offices. The starting $21 per hour rate is meant to go into effect July 1, 2024, and inch up to $25 an hour by 2028 for most workers. However, this timeline is now in question as California lawmakers grapple with an expected $68 billion budget deficit.

According to an analysis by UC Berkeley's Labor Center, it is estimated to increase wages for up to 426,000 workers. In the first year of implementation, the center says annual earnings will average $6,400 per worker, and the cumulative pay increase over four years is projected to grow individual earnings by 25%.

In his January 2024 budget proposal, California Governor Gavin Newsom asked the Legislature to delay the implementation date, make the wage increases subject to the state's budget and available revenue, and provide an exemption for state facilities.

The abrupt reversal by the Newsom Administration following the realization of the actual cost of the measure will likely prompt other states to proceed with caution when considering similar legislation.

LITIGATION OF INTEREST

A. Capital Health System, Inc., v. Symmetry Workforce Solutions, LLC and AYA Healthcare, INC.

In January, Capital Health System, Inc. (Capital Health), a New Jersey hospital, filed a lawsuit against Symmetry Workforce Solutions, LLC (Symmetry), a Managed Service Provider (MSP) and AYA Healthcare, Inc., the large, California-based travel nurse staffing company that is the parent company of Symmetry. The claims against Symmetry are for breach of contract, breach of the implied covenant of good faith and fair dealing, unjust enrichment, violations of New Jersey's Consumer Fraud Act ("NJCFA"), breach of fiduciary duty, and fraud. The claims against both Symmetry and Aya are civil conspiracy, unfair competition, and tortious interference with prospective economic advantage.

Specifically, Capital Health alleges that AYA and Symmetry exacerbated and profited from the COVID-driven staffing shortages by "raiding and poaching local hospital-employed nurses" and then turning around and offering these nurses to Capital Health as travel nurses at inflated and continually escalating rates.

Notably, Capital Health takes aim at the relationship between AYA and Symmetry,

> "While Symmetry advertises itself and holds itself out to Capital as being a "100% Vendor Neutral MSP," the fact is that Symmetry is the wholly-owned subsidiary of Aya, the largest privately held travel nurse provider in the United States. Far from being "vendor neutral," Symmetry exclusively or almost exclusively funneled Aya travel nurses to Capital. Through their relationship, Symmetry and Aya exploited the public health crisis in order to maximize profit margins directly at the expense of Capital and the public at large."

Capital Health further argues that, unlike truly vendor neutral arrangements where the MSP's role is to act in the best interest of the client, "a non-neutral MSP model allows the MSP to favor themselves or certain staffing firms over others at the expense of the client. More specifically, staffing-led/affiliated MSPs can restrict access to the labor market to align with their own interests by placing and keeping their own nurses on billable engagements and maximizing margins directly at the expense of the hospital."

Also of note, Capital Health claims Symmetry utilized its partnership arrangement with the New Jersey Hospital Association's for-profit subsidiary, NJHA Healthcare Business Solutions, to falsely advertise itself as vendor-neutral. "By holding itself out as a "100% vendor-neutral" MSP," Capital Health argues, "Symmetry misleads prospective hospital clients into believing that it will act in their best interests, free of any conflicts of interests with travel nurse staffing agencies."

Although it's unclear how Capital Health's claims will be resolved in court, the allegations should serve as a helpful corrective to the industry and an opportunity for hospitals to investigate their MSP's arrangements with its staffing agency vendors. If the MSP has agreements that advantage affiliated or preferred vendors, they aren't vendor-neutral. And if the MSP isn't vendor-neutral, the hospital is probably paying more for contingent labor.

B. Health Carousel Visa Fraud Settlement

In late March, the US Attorney's Office for the Southern District of Ohio announced that Health Carousel had agreed to pay $9.25 million and pledged an additional $8 million for healthcare projects to resolve a federal investigation over visa fraud. The Cincinnati-headquartered healthcare staffing company was accused of submitting false visa immigrant applications and aiding in the making of false statements to government officials during the recruitment of nurses, physical therapists, and other healthcare specialists to the United States. Allegations also involved the provision of fraudulent job placement letters to hasten visa approvals, despite individuals not being assigned to particular healthcare facilities.

It is essential for companies to follow the rules when it comes to recruiting workers to the United States," said Homeland Security Investigations Detroit Acting Special Agent in Charge Shawn Gibson in a press release. "Given the inherent risks associated with working in the medical field, we need to ensure that there are no shortcuts and everyone is held accountable under the law."

As part of the settlement, the company has performed extensive remedial measures to address compliance gaps and pledged an additional $8 million to address harm caused by its prior practices. The pledged funds will be distributed to various nongovernmental and nonprofit organizations, including $3 million to promote the sustainability, development and ethical recruitment of healthcare professionals and $3 million to strengthen healthcare access and infrastructure in developing countries where Health Carousel recruits healthcare professionals. Additional monies will be distributed to promote healthcare access for rural, underserved, and immigrant communities in the United States.

HEALTHCARE WORKFORCE NEWS

A. Growing Unionization by Physicians, Fellows, and Interns

Even as COVID pressures have eased, the tight labor market has continued to fuel union activity by healthcare workers. According to the Labor Action Tracker maintained by Cornell University, there were 50 strikes by healthcare workers 2023 compared to 39 the year before. Healthcare unions are also deploying non-traditional tactics to pursue their agenda - including targets on C-level compensation, non-standard reporting of patient safety concerns, and advertised opposition to hospital M&A.

As discussed in our Q4 2023 Report, union organizing activity by physicians, fellows, and interns has also been a growing trend, most recently including those affiliated with Northwestern Medicine in Chicago, University of Chicago, and Kaiser Permanente in Northern California. At the University of Chicago, over 1000 residents and fellows have petitioned the National Labor Relations Board to hold a union election, a move that comes two months after a majority of 1,300 residents and fellows at Northwestern Medicine voted in favor of union representation by the Committee of Interns and Residents (CIR). A few years earlier, in 2021, more than 800 residents, fellows and interns at University of Illinois at Chicago formed a union under the CIR. Today, CIR represents about 32,000 physicians, fellows, and interns, making it the largest house staff union in the nation.

As healthcare workers continue to turn to collective action to secure higher pay and workplace policy changes, hospitals and healthcare facilities should consider adding a surge staffing resource to their workforce solution toolbox.

B. Change Healthcare Ransomware Attack

The February 21, 2024, cyberattack on Change Healthcare/Optum, the claims processing subsidiary of UnitedHealth Group that reportedly touches 1 in 3 American patient records, is being described as the most significant cyberattack on the U.S. healthcare system in history. Although the details of how the ransomware group ALPHV, also known as BlackCat, was able to infiltrate and compromise Change's systems remain unknown, the data security imperative for all players in the healthcare industry is clear.

As a result of the ransomware group's actions, healthcare systems and providers suffered cash flow issues, which resulted in providers being unable to pay their rent, owners dipping into their personal savings and patients being prevented from receiving important medications. Equally disturbing, the stolen medical claims data has put patients' personal, financial and health data at risk. Once hackers have such data, it can be used to scam or hack those consumers, their banks or credit cards. The data could also be sold to other criminals.

As of late March, at least six class action lawsuits have been filed against Change and UnitedHealth Group which, if successful could inflict even more damage on the insurance giant. The most recent class action suit, filed in Tennessee, alleges that Change "failed to adequately protect their systems, failed to adequately prepare for known threats, and failed to reasonably prevent the breadth and scope of the data breach."

Unsurprisingly, the Department of Health and Human Services Office of Civil Rights is investigating the incident. "Given the unprecedented magnitude of this cyberattack, and in the best interest of patients and health care providers, OCR is initiating an investigation into this incident," a letter written by OCR's Director Melanie Fontes Rainer. "OCR's investigation of Change Healthcare and UHG will focus on whether a breach of protected health information occurred and Change Healthcare's and UHG's compliance with the HIPAA Rules."

A legislative response is also under consideration, with Oregon Senator Ron Wyden releasing a press release taking UnitedHealth and federal agencies to task for their failure to anticipate and prevent the breach, commenting, "I'm also investigating whether additional legislation is needed to bolster security in the health care sector, including increasing financial penalties and holding company executives liable for failing cybersecurity 101."

As the healthcare industry grapples with the fallout of this catastrophic attack, hospitals and healthcare organizations should ensure their cyber security performance requirements extend to and are being enforced by all third-party vendors. Contingent labor staffing vendors should be regularly monitored to ensure they have systems in place to prevent payment diversion schemes and a process to monitor the issuance and collection of facility-specific passes, identification badges, and training materials at the completion of an assignment.

MANAGED SERVICE PROVIDER SHOPPING GUIDE

In today's dynamic healthcare landscape, where staffing needs fluctuate unpredictably and cost-efficiency is paramount, finding the right Managed Service Provider (MSP) partner is crucial. In addition to baseline considerations like technology capabilities, service delivery team commitments, and compliance standards, healthcare organizations need to ask the questions that will help them see behind the marketing fluff and enable them to choose an MSP that will be a true partner and deliver significant cost savings.

For example:

Is the MSP's management of sub-vendor staffing agencies truly vendor-neutral, or are there undisclosed arrangements that advantage affiliated or preferred vendors? Similarly, In the GPO context, a supposedly "unbiased" assessment may be a referral to an affiliate. In either case, you need to know.

A true consultant and partner should be sharing bill rate data and analysis to help you understand what's going on in the market at large. If your current MSP isn't sharing their bill rate data, you need to ask them why.

Does the MSP have a proactive program for converting travelers to full-time employees? Your MSP partner's highest loyalty should be to you – not its staffing agency vendors. If you're looking for full-time staff, your MSP should be using its analytics and position as the manager of your program to help you convert high-performing travelers to full-time employees.

Similarly, an MSP should be proactive about offering Employer of Record (EOR)/Payroll Service options, which can be a source of significant savings. It's a touchy area for MSPs for obvious reasons but a true workforce partner's foremost obligation is to provide solutions that meet the needs of its hospital clients. If there's a staffing need that makes sense to fill with payroll service rather than through an agency, your MSP partner should be proactively suggesting it.

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Adaptive Workforce Solutions

EMERGENCY STAFFING SERVICE

Emergency Staffing Service is a commitment-free alternative staffing solution from Adaptive Workforce Solutions that's flexible, fast, and designed to peacefully co-exist with other strategic staffing relationships.

Emergency Staffing Service (ESS) from Adaptive Workforce Solutions provides access to a large and diverse network of over 100 independent national and local staffing vendors who compete to fill job orders for locums, nursing, allied, and therapy providers on our vendor-neutral platform without the contractual commitments of a managed service agreement or a staffing agency markup.

How much does it cost?

Absolutely nothing, apart from the bill rate which is typically between 10% and 30% lower than staffing agency pricing. There are no setup, service or technology fees.

How does it work?

It's simple. Tell us what you need for additional resources and your candidate screening requirements and our ESS program team with the help of Adaptive's state-of-the-art vendor management software platform will deliver the qualified, pre-screened candidate profiles right to your inbox. You select the candidate that best fits your needs, and we do all the back-office paperwork.

Sounds too good to be true. What's the catch?

There isn't one. This simple, streamlined, and non-exclusive service comes with no strings attached. Use it once, on an ongoing basis, only in times of crisis or when you have a hard-to-fill position, or not at all. Think of it as a contingent staffing insurance policy: Even if you never use it, it's still a great option to have in your workforce solution toolbox.

WORKFORCE ASSESSMENT SERVICES

In the fast-paced world of healthcare, optimizing resources is paramount. With our comprehensive Workforce Assessment Services, we help hospitals identify process inefficiencies and areas of overspending within their contingent labor programs, empowering them to enhance operational efficiency and strategically reallocate funds to where they're most needed.

From Analysis to Action: Uncover Savings, Boost Efficiency

Invoice and Vendor Contract Analysis: Even minor discrepancies between contracted bill rates and actual invoices can add up to significant losses. Our team of experts specialize in identifying any instances of overbilling, offering you concrete data to facilitate corrective measures. In a typical invoice audit, our financial analysts uncover multiple instances of overbilling, amounting to thousands of dollars in avoidable losses. Our team will also perform a meticulous analysis of your staffing vendor contracts, identifying any problematic terms, ambiguities, or areas for improvement.

Bill Rate Analysis: Contingent labor bill rates can often become entrenched at the organizational level or gradually escalate over time. Our bill rate analysis will evaluate your rates against market conditions in your specific area, providing you with the bill rate data you need for accurate pricing and negotiation.

Compliance Processes Review: Our comprehensive review ensures that your contingent labor practices not only meet but exceed applicable state and federal laws and regulations. Uncover potential risks and streamline compliance processes to fortify your organization against unnecessary setbacks.

Comprehensive Process Evaluation: Our team will conduct an analysis of your contingent labor processes and workflows, identifying any inefficiencies and bottlenecks that may hinder performance.

Why Choose Adaptive Workforce Solutions for Workforce Assessment?

Workforce Solution Expertise: Our multidisciplinary team of experts have a wide range of experience in contingent labor staffing, providing day-to-day oversight as program and account managers, serving in financial analysis and oversight roles, and implementing Managed Service Programs in multiple industries, including healthcare, telecom, finance, IT, and biotech.

Technology Integration Expertise: Having successfully implemented and managed multiple contingent labor management technology platforms, including Shiftwise, Fieldglass, VINDLY, LaborEdge, and VectorVMS, our teams have the cross-platform expertise required to make insightful recommendations for program improvement.

Cost-Saving Expertise: Our experienced analysts specialize in identifying invoicing errors, overspending, and process inefficiencies, allowing you to redirect funds where they matter most.

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Adaptive Workforce Solutions

THE ADAPTIVE WORKFORCE SOLUTION

For over 20 years, the dynamic team of healthcare staffing experts at Adaptive Workforce Solutions have been designing solutions to help healthcare organizations procure and manage contract labor. We love what we do and take enormous pride in our role as valued consultants and advocates for the hospitals and healthcare systems we serve across the country.

Central to the Adaptive approach to Managed Service Programs is the concept of vendor neutrality, which means that all staffing vendors receive staffing requisitions through our VMS software at the same time - none are given advanced access to requisitions or preferred status – and the rates are completely transparent. This ensures an even playing field and promotes price competition. This unbiased approach is a core part of who we are, enabling us to deliver uncompromised service, advocacy, and guaranteed cost-savings to our clients.

We specialize in designing customized solutions that streamline and automate the entire contract labor lifecycle onto a single, integrated, and easy-to-use web-based platform The platform, together with a dedicated Adaptive Program Manager and Product Support Team, will simplify and manage all aspects of the program for the client, greatly expanding access to qualified temporary staff and enabling a wide array of reporting, analytics, and auditing tools. But because bigger isn't always better, we also offer a wide array of more targeted solutions.

Our Services Include:

- **Managed Service Programs**
- **Payroll/Employer of Record Service**
- **In-House Program Development**
- **Emergency Staffing Services**
- **Locum Tenens Staffing**
- **Guaranteed Savings Plans**
- **Workforce Assessment**
- **1099 Compliance Audits**
- **Consulting Services**
- **International Nurse Programs**

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