

2026 Healthcare Staffing Market Realignment

The market is stabilising. The operating model is not.

The US market is forecast at **\$38.7B in 2026**, but aggregate stability hides a widening split: nursing channels remain under pressure while locum tenens and advanced-practice demand expand.[1][2]

\$38.7B

2026 market
[1]

73%

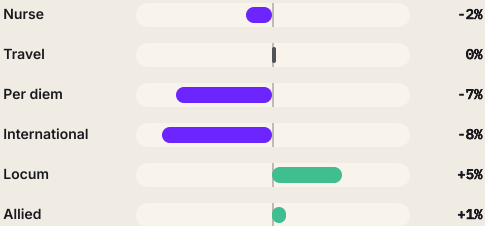
MSP share
[3]

\$9.9B

2026 locum
[2]

01 · SEGMENT OUTLOOK

Six trajectories, not one recovery.



2026 forecast: nurse -2%, travel flat, per diem -7%, international -8%, locum about +5%, allied +1%.[1]

02 · THREE INDUSTRY SHIFTS

\$38.7B → \$39.6B

Stability masks allocation choices
Total growth coexists with sharp segment divergence.[1]

69% → 73%

Managed channels tighten economics
Travel-nurse MSP share rose as bill rates and gross margin fell.[3]

+35% vs +3%

Provider mix becomes APP-heavy
APP-group employment growth versus physicians/surgeons, 2024–2034.[5]

TRAVEL-NURSE BENCHMARK

\$89.78
bill rate / hr

19.3%
gross margin

73%
MSP share

2024 · Source [3]

03 · OPERATING RESPONSE

Investigate workflows—not promises.

01 **Credentialing readiness**
Historical, read-only exception baseline

02 **Timecard / payroll exceptions**
Reconciliation and rework visibility

03 **Candidate-order matching**
Human-controlled shortlist support

30-day first experiment

Use approved historical credential packages. AI extracts, compares and organises; authorised people validate every output and make every clearance decision.

BASELINE FIRST · NO INVENTED TARGET

FIVE ROI INPUTS

01 Weekly volume

02 Hours spent

03 Exception volume

04 Loaded cost

05 Impact of delay

AI organises, explains and recommends.

Authorised people retain every material decision.