



# APTA Benchmark Report: Hiring Challenges Continue in Outpatient Physical Therapy Practices

October 2023

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## A Report From the American Physical Therapy Association and APTA Private Practice

### Introduction

On May 11, 2023, the federal COVID-19 public health emergency declaration finally came to an end. For the United States, the date marked the official close of one of the most significant challenges the country has ever faced. For many physical therapists, it also provided hope that life and business would eventually return to normal.

Months later, it's become clear that while the worst of the pandemic is indeed behind us, COVID-19 is continuing to impact physical therapists and the profession overall. The issues are varied – some clinics, for example, have yet to recover financially – but one of the biggest challenges practices face is maintaining a qualified and adequate workforce.

It's estimated that over 13,000 new physical therapist and almost 5,900 physical therapist assistant graduates will enter the workforce in 2024. Together with the nearly 50,000 PT and PTA students who are currently enrolled in physical therapy education programs, this seems to indicate the profession can count on a robust workforce pipeline for at least several years.

The problem is these incoming annual cohorts of physical therapists do not address current labor pressures. The health care data consultancy Definitive Healthcare has estimated that [as many as 22,000 physical therapists stopped billing through their National Provider Identification in 2021](#), representing an exit from the workforce or a shift to practices and career options outside of billing commercial payers.

Aware of these labor pressures even before the pandemic was declared over, APTA and APTA Private Practice collaborated with Vault Consulting in summer 2022 to conduct a series of surveys of outpatient physical therapy facilities. The results from the first of these “workforce pulse” surveys were released in September 2022 in the “APTA Benchmark Report: Hiring Challenges in Outpatient Physical Therapy Practices.”

Here, we share the results of our first annual follow-up workforce pulse survey. Based on data collected between June 8 and July 21, 2023, this report shows that hiring challenges continue.

Wherever possible, this report also identifies trends to highlight how the workforce has changed in the year since the original survey was conducted. The 2023 survey asked respondents for information on location and number of sites, number of full-time equivalent positions, currently filled versus open positions, reasons for staff openings, and changes to staffing levels in outpatient practices. The survey was sent to 2,330 practices across the United States and yielding 239 usable responses (10.3% response rate). Responses represent 3,843 clinics and 20,443.2 full-time equivalent employee positions, including physical therapists, physical therapist assistants, and support personnel.

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## Executive Summary

As the physical therapy profession continues to evolve following the COVID-19 pandemic, maintaining an adequate and qualified workforce has become a significant challenge. In summer 2022, APTA conducted an initial benchmarking survey to better understand the current labor pressures facing outpatient physical therapy practices. This benchmarking survey was replicated in 2023 with a wider distribution of practices.

Survey data from 2023 reveals three main hiring challenges for outpatient physical therapy practices.

- 1. Outpatient physical therapy practices are still experiencing significant vacancy rates**, although these vacancy rates have improved from 2022 to 2023. The vast majority of practices have openings of at least 5%, with a 10.1% total vacancy rate across all employee categories (physical therapists, physical therapist assistants, and support personnel). PT and PTA opening rates are similar and both are higher than the rate of support-personnel openings.
- 2. While the overall vacancy rate is lower in 2023, hiring challenges are increasing for many practices.** Almost 40% of practices with openings are facing a higher vacancy rate now than they did last year. The distribution of vacancy rates varies by position type, clinic size, and location.
- 3. Company growth was the most frequently cited reason for current position openings.** More than half of respondents (51.5%) said company growth was contributing to openings, and almost 70% of practices said that growth was one of their top reasons for current position openings. Omitting company growth and considering only responses related to existing employees leaving a practice, 40% of respondents said the top reason employees left their practice was because they found jobs offering better pay.

In light of these findings, APTA and APTA Private Practice reiterate their recommendations to advance four action steps that will invest in workforce development and strategy in the profession. These are: (1) support national initiatives for collection of a universal dataset on the physical therapy workforce; (2) continue collection of data on the vacancy status of the physical therapy workforce; (3) explore comprehensive workforce models that factor in physical therapy supply and demand dynamics; and (4) conduct a series of benchmark reports on the profession.

Finally, the information in this report is meant for APTA members to use. Our goal is to provide insight into the state of the current workforce to help you better understand and manage your own staffing situations.

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## Review of Survey Findings

The data collected through this survey reveal three major hiring challenges that are creating labor pressures for outpatient physical therapy practices:

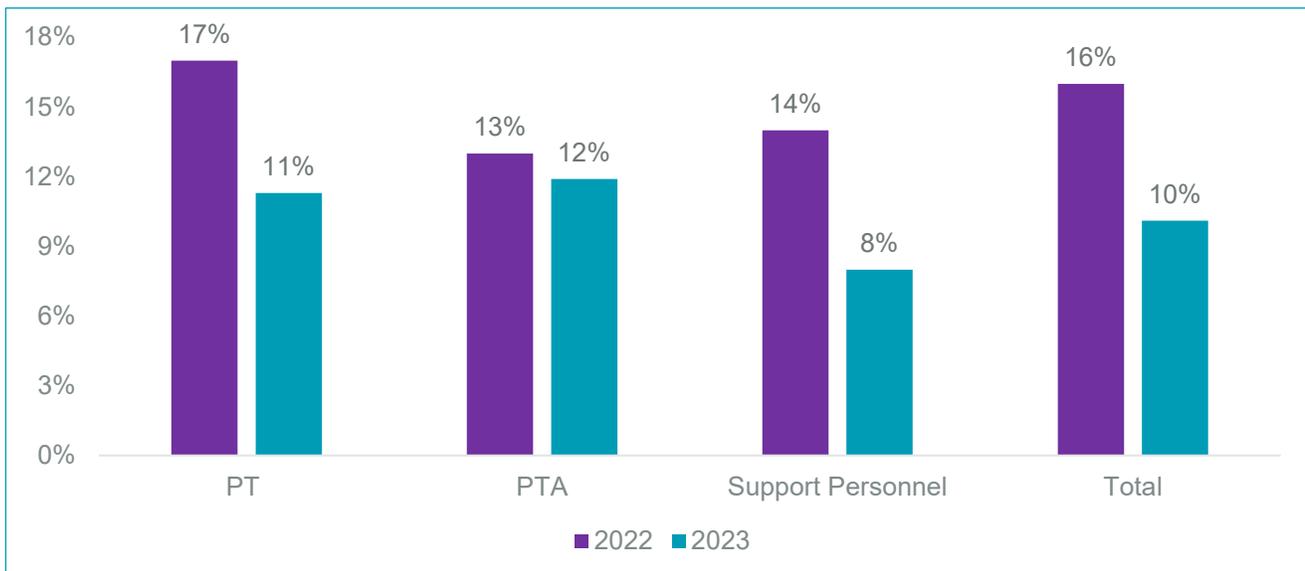
- 1. Vacancy rates are significant but improving.** In 2023, physical therapist, physical therapist assistant, and support-personnel vacancy rates dropped almost 6% from the 2022 rate of 17%, but they remain over 10% across practices in the survey.
- 2. Variation is significant among practices both regionally and across regions.** Currently, about a quarter of the respondents report no openings, but almost 40% report openings at a higher rate than a year ago.
- 3. The outpatient physical therapy workforce is dynamic and mobile.** While company growth — involving new positions — is the highest-ranking reason for physical therapist and physical therapist assistant position openings, pay, work-life balance, and relocation of self or a significant other rank high as top reasons for existing employees leaving positions.

### Vacancy Rates in Outpatient Physical Therapy Practices Are Significant but Improving

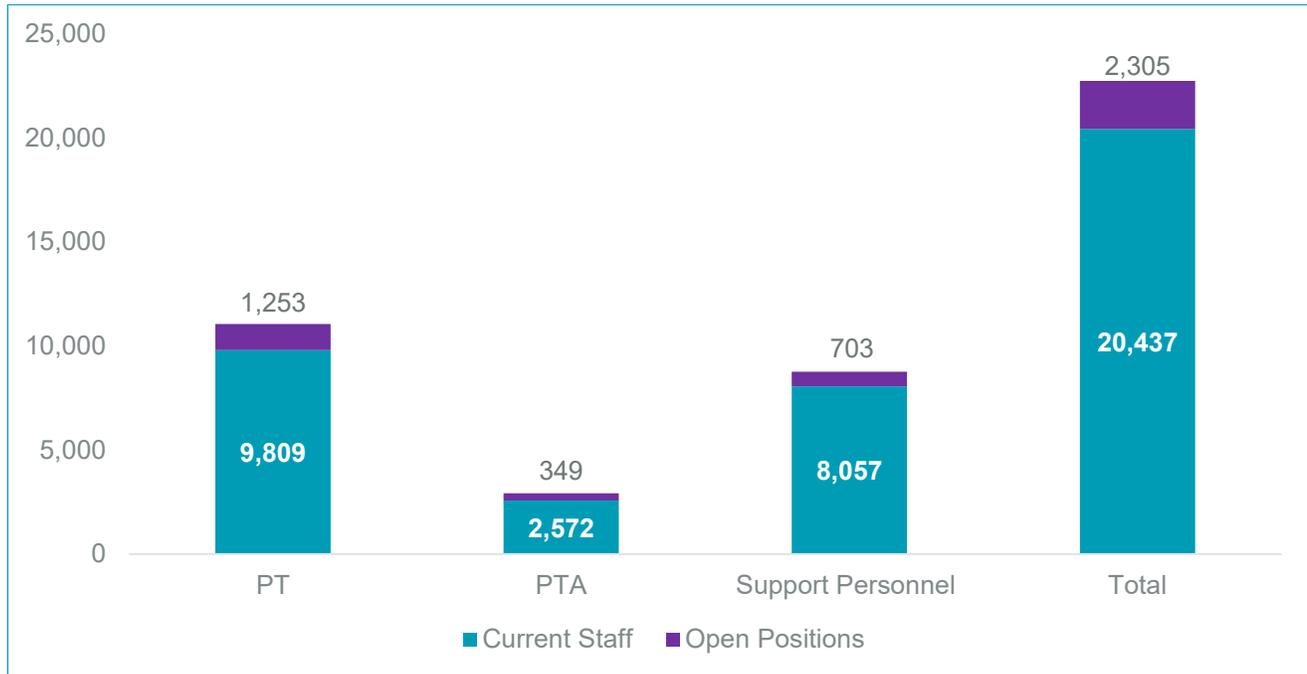
Survey respondents indicated significant challenges in hiring in 2023, but they also showed progress and improvement relative to [data collected and reported in 2022](#). Based on the 2022 survey, more than three-fourths (78.9%) of practices reported at least a 5% level of current openings for their workforce. This dropped to 70% in 2023. The job-opening rate was calculated by dividing full-time equivalent job openings by total FTEs, defined as currently employed FTEs plus the number of FTE openings.

Across all employee categories (PTs, PTAs, and support personnel), the total vacancy rate (position openings) for the survey population was 10.1%. Looking at each category specifically, the vacancy rates were 11.3% for PTs, 11.9% for PTAs, and 8.0% for support personnel. Since 2022, this dropped by approximately 6 percentage points for PTs and support personnel but only 1 percentage point for PTAs.

#### Vacancy Rate Percentage in Outpatient Physical Therapy Practices — 2022 Versus 2023



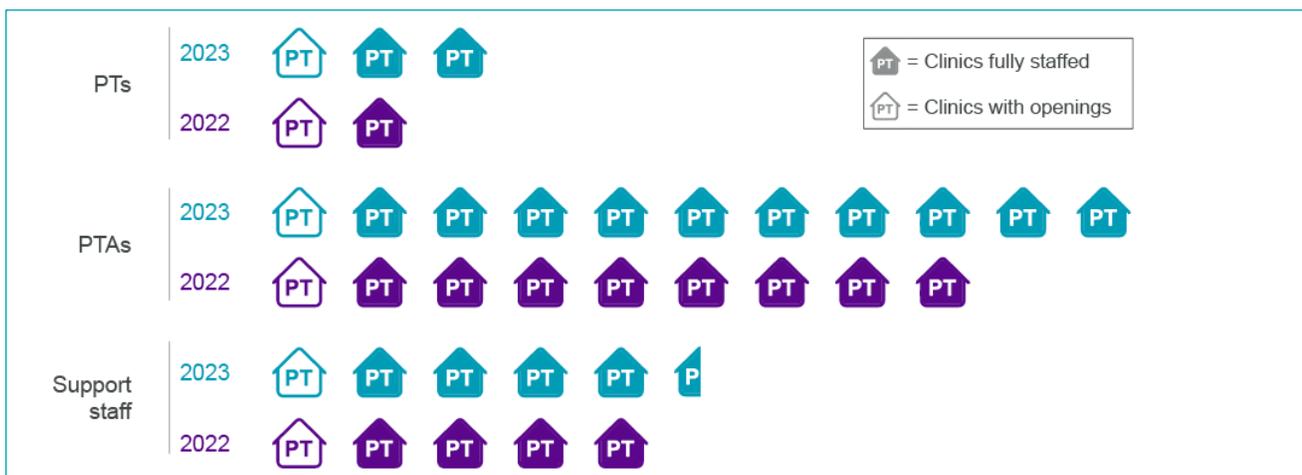
**Current Staff Versus Job Openings for Specific Employee Categories — 2023**



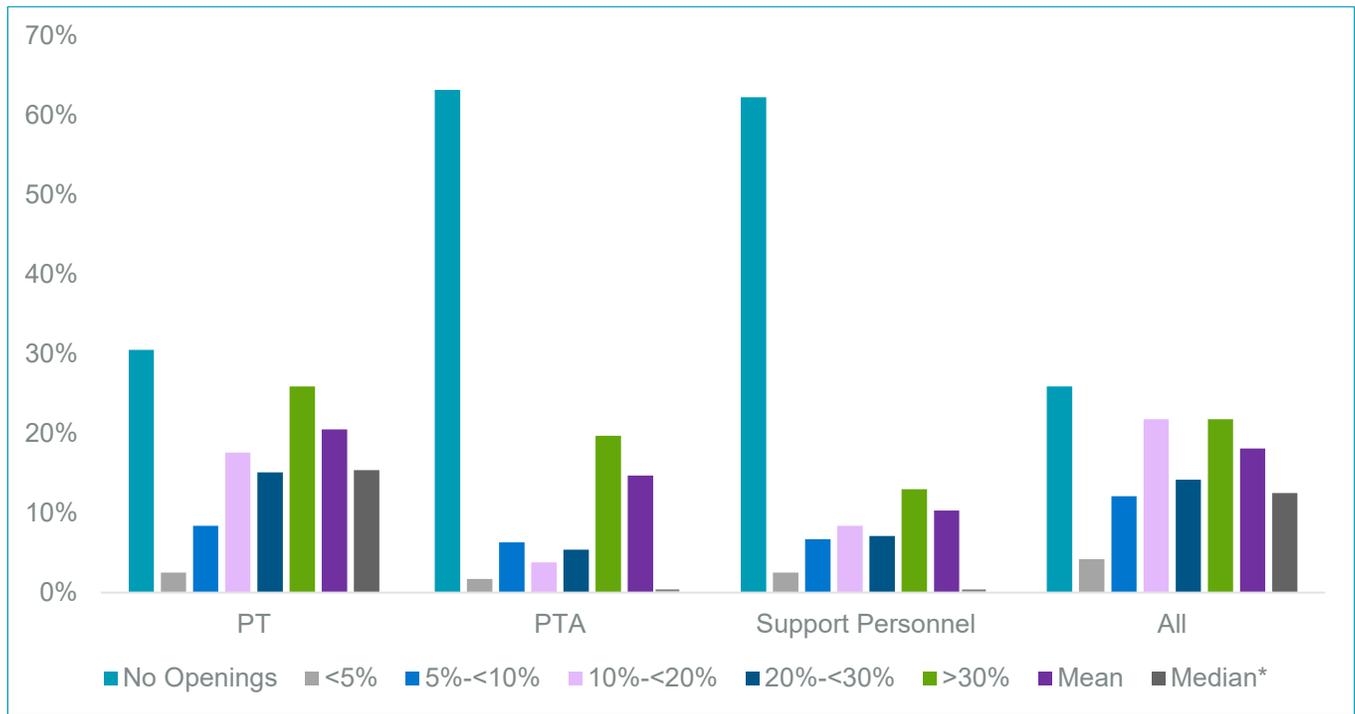
For individual outpatient physical therapy practices, filling open positions for PTs and PTAs remains a top challenge. Among the 239 respondents representing 3,843 clinics, there were 1,253 open PT positions, 349 PTA positions, and 703 support-personnel positions.

Looking at clinics rather than individual employees, 1 in every 3 clinics had an opening for a PT, compared with 1 in every 11 clinics for a PTA and 1 in every 5.5 clinics for support personnel. This is an improvement over the 2022 numbers of 1 in every 2 clinics for PTs and 1 in every 9 clinics for PTAs. The 2022 numbers for support-personnel vacancy of 1 in every 5 clinics remains similar.

**Clinics Fully Staffed (PTs, PTAs, and Support Staff) Versus With Openings**



Percentage of Job Openings Per Position — 2023



\*Median for PTAs and Support Personnel was zero.

The discrepancy between the mean and median percentages indicate that a few large practices raised the average. Most respondents (79%) were practices with four or fewer sites, with 53% being single-site clinics. Practices with more than 21 clinics represented 9%, with only 4% having more than 50 clinics.

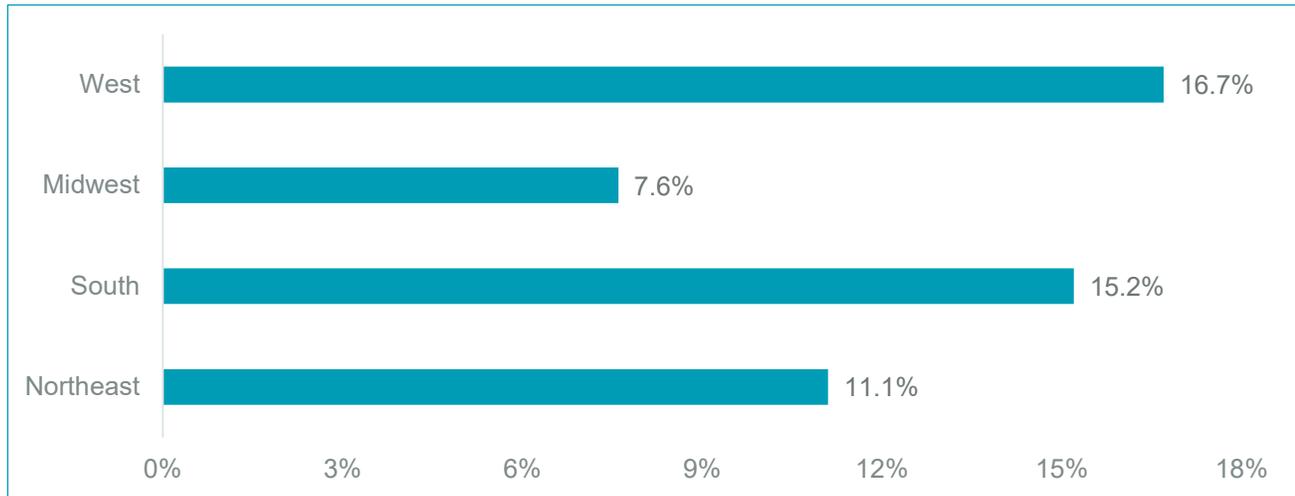
Vacancy rates varied among the different practice positions. While most practices (70%) reported some level of physical therapy vacancies, 30% reported being fully staffed with physical therapists. Conversely, fewer practices reported openings for PTAs (37%) and support-personnel vacancies (38%).

The distribution of openings is variable across practice types, with small practices being less impacted by openings than the largest practices. Nearly 50% of small practices (<5 FTEs) reported no openings for PTs, 75% reported no openings for PTAs, and 80% reported no openings for support staff. Conversely, 100% of large practices (≥50 FTEs) reported openings for PTs (most frequently at 10%-20% vacancy), PTAs (most frequently at 5%-10% vacancy), and support staff (most frequently at 5%-10% vacancy).

## Vacancy Rates Vary Among U.S. Regions

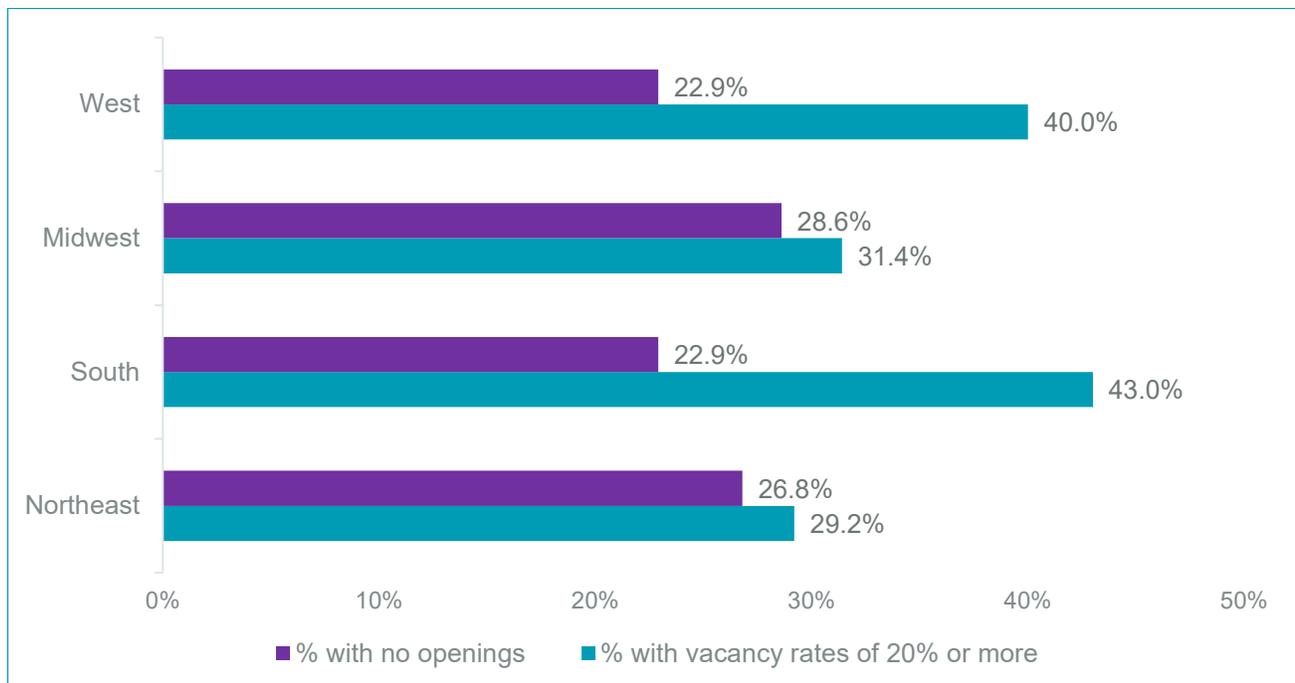
Regional variation was seen in the survey, with the West demonstrating the highest median vacancy rate, at 16.7%, and the Midwest the lowest, at 7.6%.

### Median Vacancy Rates per U.S. Region — 2023



Looking beyond the median and viewing specific vacancy rates, 43% of practices in the South reported job-opening rates of 20% or more, the highest of all regions. At 29.2%, practices in the Northeast were least likely to experience job-opening rates of 20% or more. Almost 1 in 4 respondents report no openings across all regions, from the West at 22.9% to the South at 30.4%. (Practices operating across multiple regions were removed from this analysis to evaluate how openings varied across the regions.)

### Vacancy Rates of 20% or More Versus No Openings, by Region

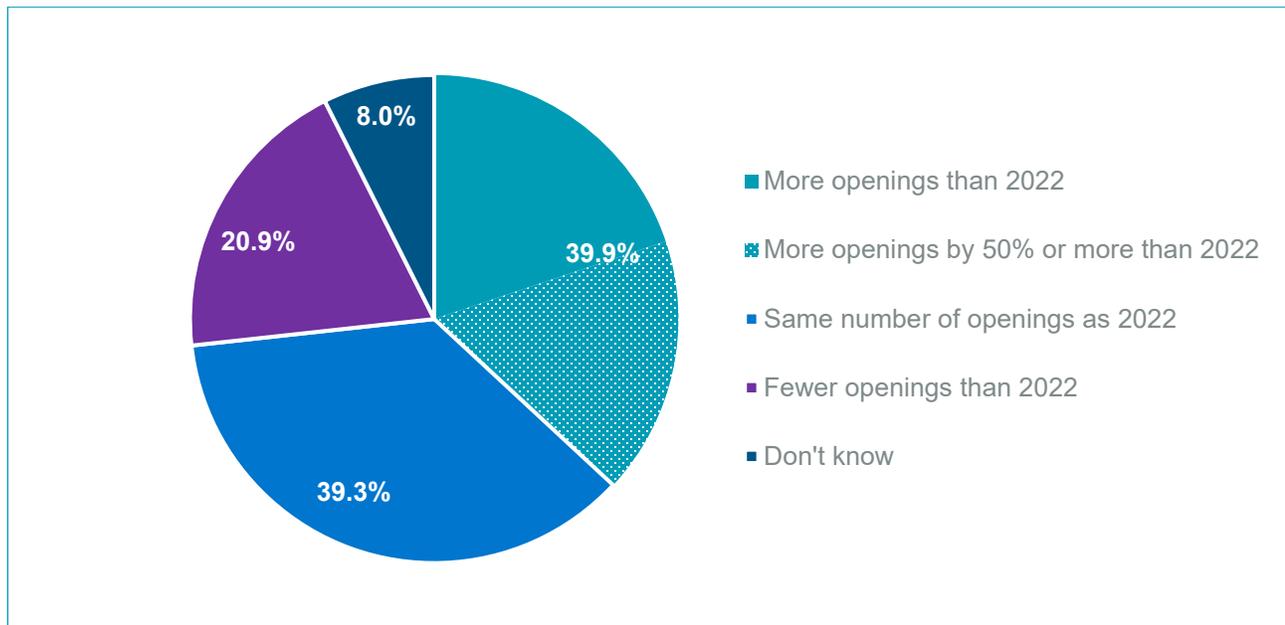


## Hiring Challenges in 2023 Continue Across Physical Therapy Practices

Nearly 40% (39.9%) of 2023 respondents reported the same number of staff openings compared with the same time in 2022. The same percentage (39.9%) reported having more openings than in 2022, and 20.9% reported having fewer openings than in 2022.

Of the respondents who said they had more openings than they did one year ago, almost half (46.2%) reported that their openings had increased by 50% or more.

### Change in Job Openings From 2022-2023



## Company Growth Fuels Practice Openings While Pay and Relocation Top Reasons for Leaving

Respondents were asked to rank the top three reasons for the current physical therapist and physical therapist assistant openings in their practice. Most respondents indicated that company growth was the top reason for PT and PTA openings. More than half of the respondents identified company growth as the primary reason for openings in their practice, while almost 70% of respondents identified company growth as one of the top three reasons for practice vacancies.

Omitting company growth and considering only responses related to existing employees leaving a practice, the top three reasons for PTs and PTAs leaving practices were identified:

- **Left for better pay** was the primary reason 40% of respondents noted for PTs and PTAs leaving, and 72% of respondents placed it within the top three reasons for clinical staff departure.
- **Relocation of self or a significant other** was identified by 20% respondents as the primary reason for employees leaving, and 40% of respondents placed it within the top three reasons.

- **Concerns about work-life balance** were significantly lower in 2023 than 2022. In 2022, 22.9% of respondents cited this as the primary cause for their employees' departures, while (notably) 77.1% of respondents placed it within the top three reasons for leaving. In 2023, work-life balance was identified as the primary reason for leaving by 14% of the respondents. That spiked to 72% (same as leaving for better pay) when the top three reasons for leaving were combined.
- **Other reasons for leaving PT and PTA positions** were the employee changing profession (6% primary, 24% top 3), left workforce/early retirement (4% primary, 12% top 3), and reduced hours or FTE status (0% primary, 34% top 3).

**Top Reasons for Practice Openings (by percent of respondents)**

Reasons for Company Openings	Primary	Second	Third	Top 3 Combined
Increased hiring due to company growth	51.5%	10.9%	7.3%	69.7%
<b>Reasons related only to existing employees leaving</b>				
Left for better pay	40%	14%	18%	72%
Left for better work-life balance	14%	34%	24%	72%
Other	16%	8%	22%	46%
Employee or significant other relocation	20%	12%	8%	40%
Employee reduced hours/FTE status	0%	18%	16%	34%
Changed profession	6%	12%	6%	24%
Employee left workforce or retired early	4%	2%	6%	12%



## Conclusion and Action Steps

Despite the end of the COVID-19 public health emergency on May 11, 2023, outpatient physical therapy practices continue to face significant staffing challenges.

Seven in 10 respondents report a vacancy rate of at least 5%, and the average vacancy across all practices exceeds 10%. Physical therapists and physical therapist assistants both have vacancy rates between 11% and 12%, while the support-personnel vacancy rate currently stands at 8%.

Vacancies continue due to increasing demand for services (company growth) and due to attrition in the workforce. Among employees who leave practices voluntarily, the top reasons are pay/compensation, relocation of self or significant other, and the need for better work-life balance.

The 2023 “APTA Benchmark Report: Hiring Challenges Continue in Outpatient Physical Therapy Practices” is meant to provide APTA members with key benchmarks on the current workforce in this practice setting. With it, practice owners can directly compare their own staffing levels and workforce challenges against other practices of similar sizes and geographic locations.

In addition to this annual benchmarking study, APTA and APTA Private Practice are committed to comprehensive workforce development and strategy. The following four action steps will continue to provide data and information that informs the profession and policymakers on the state of the physical therapy workforce. These action steps are as follows:

1. **Commitment to a national initiative to participate in a universal dataset for national data on the physical therapy workforce.** The Federation of State Boards of Physical Therapy is working with state regulatory boards on the collection of a minimum dataset, and APTA and APTA Private Practice urge state chapters to work with their regulatory board on initiatives to establish this reporting mechanism and data in their state.
2. **Ongoing collection of data on the status of the physical therapy workforce in varied settings, with reporting at regular intervals.** APTA and APTA Private Practice will continue to conduct this benchmark study for outpatient private practices. APTA also will seek to collaborate with others in the profession on potential replication of this work in other physical therapy settings.
3. **Exploration of comprehensive workforce models that factor in current status and the ongoing impact of the COVID-19 pandemic on the physical therapy workforce.** APTA will partner with a leading workforce research center in 2024 to revise its workforce modeling to project supply and demand in the profession.
4. **Expansion of APTA reports for the profession that include workforce data and trends to inform and advance physical therapist practice.** Recently, APTA completed two reports containing descriptive data on demographics and wages in the profession, a final report in our series on the impact from COVID-19, and a landmark report on the economic value of physical therapy for various conditions. These reports can be accessed at [Reports | APTA](#).

## About This Report

The information collected in the survey and reported in the aggregate is for informational purposes only.

**Objective:** The purpose of this survey is to provide APTA's members with key benchmarks offering insight into the current state of the workforce. Participants can directly compare their own staffing levels and workforce challenges against other practices of similar sizes and geographic locations.

**Methodology:** Survey data was collected between June 8, 2023, and July 21, 2023. The survey was sent to 447 practices across the United States and yielded 239 usable responses (10.3% response rate), representing 3,843 clinics and 10,977 full-time equivalent employee positions. When applicable, responses from this survey were compared with responses from last year's survey, which was conducted between May 25, 2022, and June 16, 2022, and [published in September 2022](#).

Analysis of each question was performed only for respondents who answered that question. Non-responses were excluded from the analysis.

Among respondents, the most-represented geographic region was the South, with 1,231 clinics or other sites of service. Most practices (79%) had between one and four sites of service, up significantly from 2022 (62%). A majority of respondents operated in only one region (94%). In 2023, the survey did not collect data on patient population, operating history, or tenure of the practice or distribution of insurance versus cash-based payment.

Practice respondents represented 20,443.2 full-time equivalent employees, including physical therapists, physical therapist assistants, and support personnel. Practices could determine what they considered full-time hours, although one PT or PTA was considered one FTE regardless of how many hours they worked per week. If a PT or PTA began working for a practice midway through the year, they were considered 0.5 FTE.

- Total 9,808.7 FTE PTs with a median of 4.2 PTs per practice and a mean of 41.0 PTs per practice.
- Total 2,577.8 FTE PTAs with a median of 1.0 PTAs per practice and a mean of 10.8 PTAs per practice.
- Total 8,056.7 FTE support personnel with a median of 2.0 support personnel per practice and a mean of 33.7 FTEs per practice.

### Definitions

- **Full-time equivalent, or FTE:** An employee who works whatever number of hours the practice considers to be a full-time employee (35, 40, 45, 50, etc.). A therapist was not counted as more than 1.0 FTE, regardless of the number of hours worked. Only time that a therapist worked in the position was included (i.e., if a therapist began working halfway through the year, they were recorded as 0.5 FTE). Non-exempt staff were recorded as a decimal based on their hours worked (i.e., a non-exempt staff member who worked 20 hours of a 40-hour workweek was recorded as 0.5 FTE).
- **Clinic/site of service:** A freestanding clinic or other location in which practices contract to provide services (i.e., management service agreements, employee lease agreements, partnerships).
- **Total FTEs:** Currently employed FTEs plus the number of FTE openings.
- **Job Openings Rate:** FTE job openings divided by total FTEs, with total FTEs defined as currently employed FTEs plus the number of FTE openings.

**Regions:**

- Northeast: Conn., Del., Mass., Maine, N.H., N.J., N.Y., Pa., R.I., and Vt.
- South: Ala., Ark., District of Columbia, Fla., Ga., Ky., La., Md., Miss., N.C., Okla., S.C., Tenn., Texas, Va., and W.Va.
- Midwest: Iowa, Ill., Ind., Kan., Mich., Minn., Mo., N.D., Neb., Ohio, S.D., and Wis.
- West: Alaska, Ariz., Calif., Colo., Hawaii, Idaho, Mont., N.M., Nev., Ore., Utah, Wash., Wyo.

**Disclaimer:** APTA and APTA Private Practice recognize the significant limitations of this report. Although respondents represented practices with a total of 20,443.2 FTEs, the difference in the mean and the median indicate a higher portion of small practices as part of the survey sample and almost 53% of the respondents having only one clinic site. Even with these limitations, we believe this survey reflects the current labor challenges facing outpatient physical therapy practices.