



# Statistical Profile of Board Certified Physician Assistants

ANNUAL REPORT

National Commission on  
Certification of Physician Assistants

2023



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# Message from the President and CEO

Dear Colleagues:

I begin each new year in anticipation of this report—the first of our four annual statistical reports that provided workforce data on the PA profession. It's hard to believe that the 2023 Statistical Profile of the Board Certified PAs is now in its eleventh year of publication. I want to thank all of the PAs who take the time to complete and update their PA Professional Profile. Their efforts make it possible for us to provide these reports.

2023 was a landmark year for NCCPA. There are over 207,000 PAs who have earned Board Certification since 1975, and 178,708 were currently certified at the end of 2023. This is a 6.2% increase over 2022 and a 75.2% increase in the past ten years. Almost 95% of PAs are practicing clinically. These PAs are making a difference in healthcare, with an estimated 10.8 million patients seen each week. Almost a quarter of PAs (23.7%) provide care to patients in a designated HPSA or MUA.



Although all states experienced a growth in the number of PAs, Mississippi, South Carolina, and Alabama led with growth rates of 54.2%, 46.4%, and 45.1% respectively over the past five years. The median age for the PA profession has remained at 38 over the past six years, and the proportion of females continues to grow slightly, reaching 71.2% in 2023. Racial and ethnic diversity continues to be a challenge for the PA profession with very little change over the past five years.

PAs continue to practice in all disciplines, and the three largest are the surgical subspecialties (18.7%), Family medicine/general practice (16.5%), and Emergency Medicine (10.8%), even though we saw a small decrease in the proportional percent of PAs working in Family medicine/general practice and Emergency Medicine over the past five years. The large majority of PAs (78.8%) work in a hospital or office-based private practice setting, and 42.7% participate in telemedicine, compared to only 9.2% in 2019. Mental health continues to be a concern, with over a third of PAs (33.4%) indicating they encounter patients daily who they believe may need treatment for mental disorders.

As the world continues to emerge from the pandemic healthcare crisis, we see the toll it has taken on the PA profession, with 34.1% of PAs experiencing professional burnout. Of the PAs planning to leave their principal clinical position in the next 12 months, 44.9% indicated it was due to feelings of professional burnout. However, the large majority of PAs are still satisfied with their career as a PA (86.7%) and with their current job (83.1%). PAs working in rural health clinics reported the highest satisfaction with their career (81.1%), and PAs working in community health centers reported the highest level of burnout (43.1%).

We update the PA Professional Profile each year to gather additional data that may be timely and relevant. Response data for those new questions is reported in the report's appendix until we have experienced a full two-year data collection cycle. The appendix includes interesting data on new mental health questions. The mean proportion of patients in a PA practice who need treatment for a mental health disorder was 26.7%.

We encourage you to dive into this report. Our goal in providing these quarterly reports is to help increase the knowledge and understanding of the PA profession and its impact on healthcare.

Sincerely,

A handwritten signature in dark ink that reads "Dawn Morton-Rias".

Dawn Morton-Rias, Ed.D., PA-C, ICE-CCP, FACHE  
**President and CEO**

# About the Data Collection and Methodology

## Introduction

Since certifying the first physician assistants/associates (PAs) in 1975, NCCPA has collected data on the PA profession as PAs completed various processes related to obtaining initial certification and then maintaining certification by earning and logging continuing medical education credits and passing recertification examinations. In May 2012, NCCPA's data gathering efforts were significantly enhanced with the launch of the PA Professional Profile. This data gathering instrument is presented to PAs through a secure portal within NCCPA's website. The Profile was launched with two modules: "About Me" and "My Practice."

In December 2012, NCCPA added a "Recently Certified" module delivered online to PAs who have been board certified for less than one year. Data from that module can be found in the *Statistical Profile of Recently Certified PAs*, first published in 2014 and updated annually.

## Data Editing and Analysis

Data reflected in this report includes aggregated responses from PAs who were board certified as of December 31, 2023 and have made updates to their Profile between January 1, 2021 and December 31, 2023. Data from 2019 has been included to provide five-year comparisons. In addition, some data were obtained from other NCCPA data collection strategies. As of December 31, 2023, there were 178,708 board certified PAs, and 149,909 provided responses for at least a portion of the Profile, yielding an overall response rate of 83.9%. In 2023 new questions were added to the Profile. Findings from that data can be found in the appendix. The response rate for the new items is approximately 50% as of December 31, 2023. As more PAs access their Profile and provide responses to these newly added questions, it is anticipated that response rates on these items will be similar to the current overall response rate, and data from these items will be moved from the appendix to the body of the report in future years.

Responses were examined for consistency and potential errors. In cases of obvious error or inconclusive data, the responses were not included in the analysis. The number of responses to individual items varies due to differing response rates or due to the data being removed for reasons previously noted. Analyses of the data consist primarily of descriptive statistics. Percent change calculations reflect proportional changes from 2019 to 2023 throughout the report unless otherwise noted.

## About NCCPA

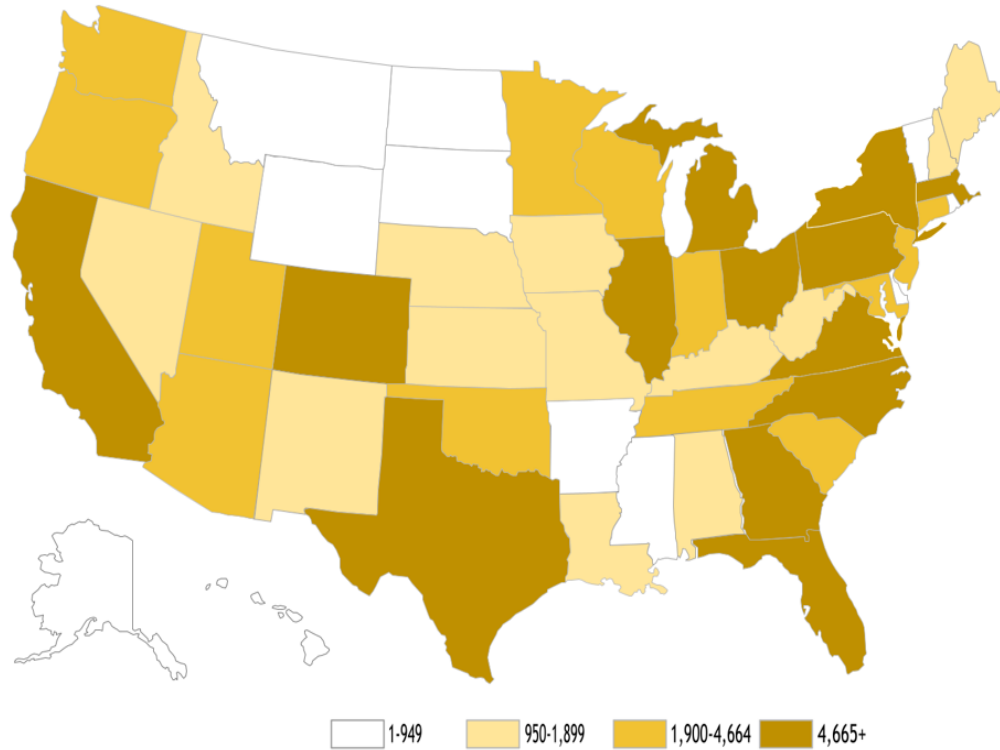
NCCPA is the only certifying organization for PAs in the United States. Established as a not-for-profit organization in 1974, NCCPA is dedicated to providing board certification programs that reflect standards for clinical knowledge, clinical reasoning and other medical skills and professional behaviors required upon entry into practice and throughout the careers of PAs. All U.S. states, the District of Columbia and the U.S. territories have decided to rely on NCCPA certification as one of the criteria for initial licensure or regulation of PAs. More than 207,000 PAs have been certified by NCCPA since 1975.

For more information, visit our website at: [www.nccpa.net](http://www.nccpa.net)



# Distribution of PAs in the U.S.

## 2023 Distribution of PAs by State\*



\*Distribution of PAs based on reported state of residence

The PA profession grew 27.9% between 2019 and 2023, reaching 178,708 PAs at the end of 2023.

## Rural/Urban Distribution in the U.S.

RUCA Area*	Percent
Urban	93.2%
Large rural	4.0%
Small rural	1.6%
Isolated	1.2%

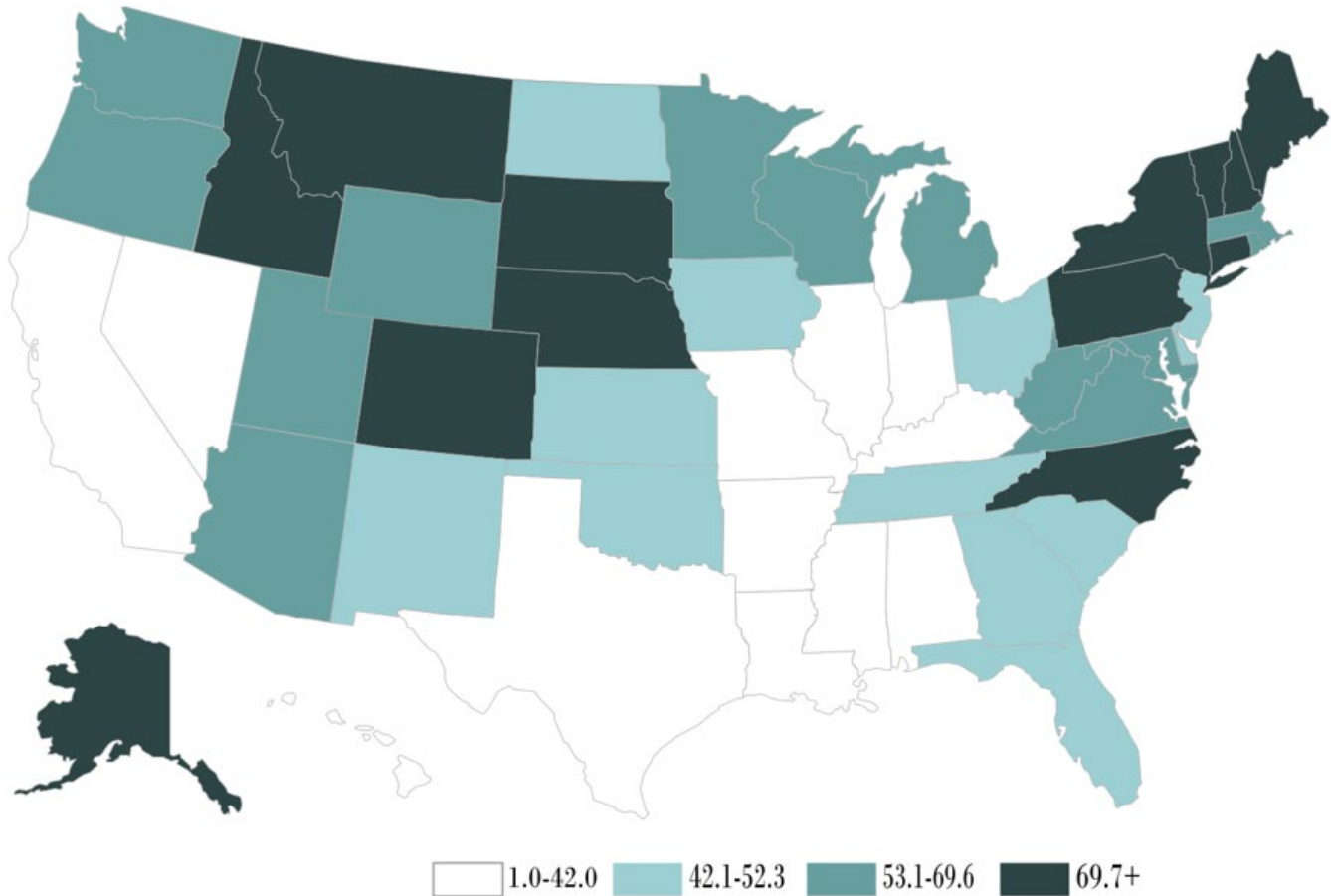
An additional 688 PAs had addresses classified as out of the country or military.

\*Rural-Urban Commuting Area Codes (RUCA) classify U.S. census tracts that utilize population density, urbanization and daily commuting

# Distribution of PAs in the U.S.

## 2023 Distribution of PAs per 100,000 Population\*

Based on 2023 U.S. Census Bureau estimates



\*Distribution of PAs based on reported state of residence

In 2023, there were 53 PAs per 100,000 population in the U.S., compared to 42 in 2019. ARC-PA estimates that the number of PA educational programs will grow from 306 in January of 2024 to 348 by 2027<sup>1</sup>, thus increasing the number of individuals who may potentially join the PA workforce.

<sup>1</sup>ARC-PA Accreditation Standards for Physician Assistant Education©, <http://www.arc-pa.org/accreditation/program-data/>

# Distribution of PAs in the U.S.

## PAs by State, Number, Percent, Rate and Rank

State	Number	Percent of Total (Rank)	Rate* (Rank)	Percent Change 2019-2023** (Rank)
Alabama	1,312	0.7% (34)	25.7 (49)	45.1% (3)
Alaska	690	0.4% (42)	94.1 (1)	11.7% (51)
Arizona	3,947	2.2% (16)	53.1 (25)	29.8% (22)
Arkansas	685	0.4% (43)	22.3 (50)	39.5% (6)
California	14,023	7.9% (2)	36.0 (45)	31.4% (16)
Colorado	4,860	2.7% (11)	82.7 (6)	32.5% (12)
Connecticut	3,198	1.8% (21)	88.4 (3)	29.6% (23)
Delaware	523	0.3% (45)	50.7 (30)	27.9% (27)
District of Columbia	310	0.2% (50)	45.7 (35)	17.0% (48)
Florida	11,821	6.6% (3)	52.3 (27)	34.9% (11)
Georgia	5,087	2.9% (9)	46.1 (34)	28.4% (26)
Hawaii	502	0.3% (46)	35.0 (46)	40.6% (4)
Idaho	1,548	0.9% (30)	78.8 (9)	31.5% (15)
Illinois	4,738	2.7% (13)	37.8 (43)	25.6% (33)
Indiana	2,392	1.3% (24)	34.9 (47)	39.5% (7)
Iowa	1,455	0.9% (32)	45.4 (37)	17.2% (46)
Kansas	1,409	0.8% (33)	47.9 (33)	17.5% (44)
Kentucky	1,899	1.1% (27)	42.0 (40)	27.7% (28)
Louisiana	1,678	0.9% (29)	36.7 (44)	29.2% (24)
Maine	1,098	0.6% (38)	78.7 (10)	26.4% (32)
Maryland	3,769	2.1% (18)	61.0 (20)	17.5% (45)
Massachusetts	4,867	2.7% (10)	69.5 (15)	30.2% (20)
Michigan	6,983	3.9% (7)	69.6 (14)	23.1% (38)
Minnesota	3,818	2.1% (17)	66.5 (16)	28.7% (25)
Mississippi	424	0.2% (48)	14.4 (51)	54.2% (1)
Missouri	1,739	1.0% (28)	28.1 (48)	35.8% (10)
Montana	949	0.5% (40)	83.8 (5)	32.4% (13)
Nebraska	1,542	0.9% (31)	77.9 (12)	23.4% (37)
Nevada	1,287	0.7% (35)	40.3 (41)	30.3% (19)
New Hampshire	1,117	0.6% (37)	79.7 (8)	27.7% (29)
New Jersey	4,664	2.6% (14)	50.2 (31)	39.8% (5)
New Mexico	966	0.5% (39)	45.7 (35)	19.3% (43)
New York	16,168	9.1% (1)	82.6 (7)	19.5% (42)

\*Rate per 100,000 population based on 2023 U.S. Census estimate

\*\*Percent change reflects raw change in number of PAs in each state from 2019 to 2023



# Distribution of PAs in the U.S.

## PAs by State, Number, Percent, Rate and Rank

State	Number	Percent of Total (Rank)	Rate* (Rank)	Percent Change 2019-2023** (Rank)
North Carolina	9,115	5.1% (6)	84.1 (4)	31.3% (17)
North Dakota	408	0.2% (49)	52.0 (28)	13.6% (49)
Ohio	5,264	3.0% (8)	44.7 (39)	30.8% (18)
Oklahoma	2,019	1.1% (26)	49.8 (32)	24.5% (34)
Oregon	2,521	1.4% (23)	59.6 (21)	26.8% (31)
Pennsylvania	11,471	6.4% (5)	88.5 (2)	21.2% (40)
Rhode Island	618	0.3% (44)	56.4 (22)	32.3% (14)
South Carolina	2,730	1.5% (22)	50.8 (29)	46.4% (2)
South Dakota	723	0.4% (41)	78.6 (11)	17.2% (47)
Tennessee	3,202	1.8% (20)	44.9 (38)	37.8% (8)
Texas	11,687	6.6% (4)	38.3 (42)	27.4% (30)
Utah	2,211	1.2% (25)	64.7 (18)	37.2% (9)
Vermont	478	0.3% (47)	73.8 (13)	21.9% (39)
Virginia	4,812	2.7% (12)	55.2 (23)	30.2% (21)
Washington	4,160	2.3% (15)	53.2 (24)	24.1% (36)
West Virginia	1,150	0.6% (36)	65.0 (17)	13.3% (50)
Wisconsin	3,673	2.1% (19)	62.1 (19)	24.3% (35)
Wyoming	310	0.2% (50)	53.1 (25)	20.6% (41)
<b>TOTAL</b>	<b>178,020</b>	<b>100.0%</b>	<b>53.2</b>	<b>27.9%</b>

\*Rate per 100,000 population based on 2023 U.S. Census estimate

\*\*Percent change reflects raw change in number of PAs in each state from 2019 to 2023

### The top five states ranked by the number of PAs:

1. New York
2. California
3. Florida
4. Texas
5. Pennsylvania

### The top five states ranked by PA rate per 100,000 population:

1. Alaska
2. Pennsylvania
3. Connecticut
4. North Carolina
5. Montana

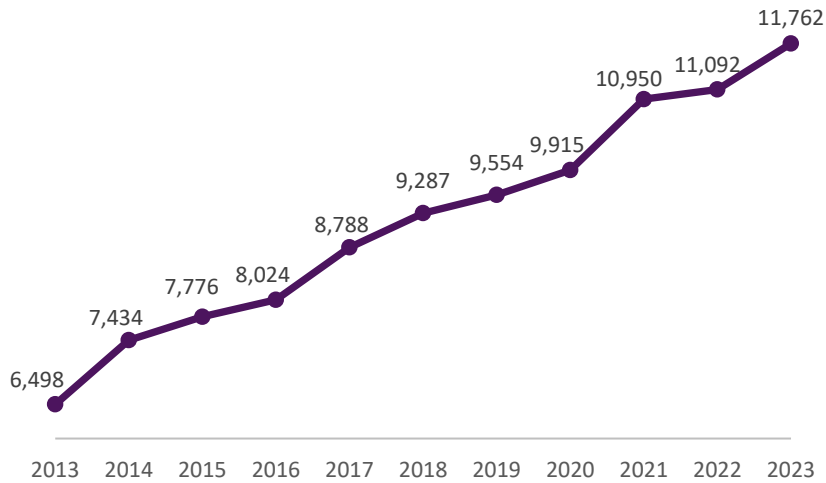
### The top five states that experienced the largest percent growth in the number of PAs from 2019 - 2023:

1. Mississippi
2. South Carolina
3. Alabama
4. Hawaii
5. New Jersey

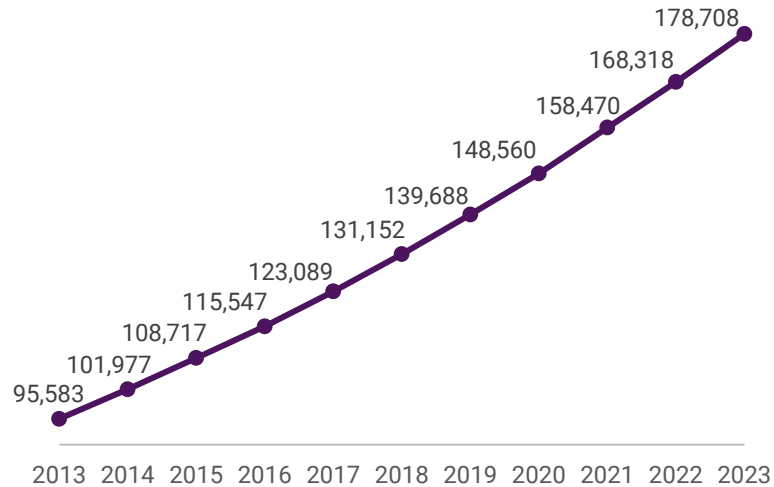
4,225 PAs indicated that they have a current military status of active duty, National Guard or Reserve, and 281 PAs reported a military or U.S. territory address. 407 PAs indicated they are living abroad.

# Supply and Demand

## Number of PAs Who Were Certified for the First Time by Year



## Number of PAs by Year



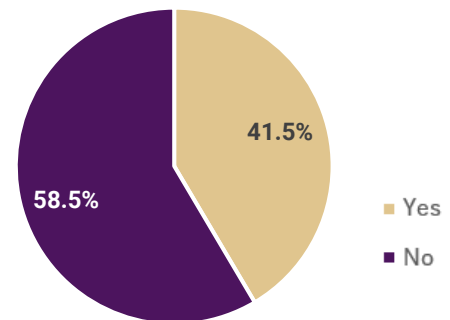
5.9% of the PA workforce indicated they have plans to retire in the next five years.

## Percent Increase of PAs by Year\*

Year	Percent Increase
2014	6.7%
2015	6.6%
2016	6.3%
2017	6.5%
2018	6.6%
2019	6.5%
2020	6.4%
2021	6.7%
2022	6.2%
2023	6.2%

\*Percent increase is calculated using the total number of PAs as of the end of the year reported

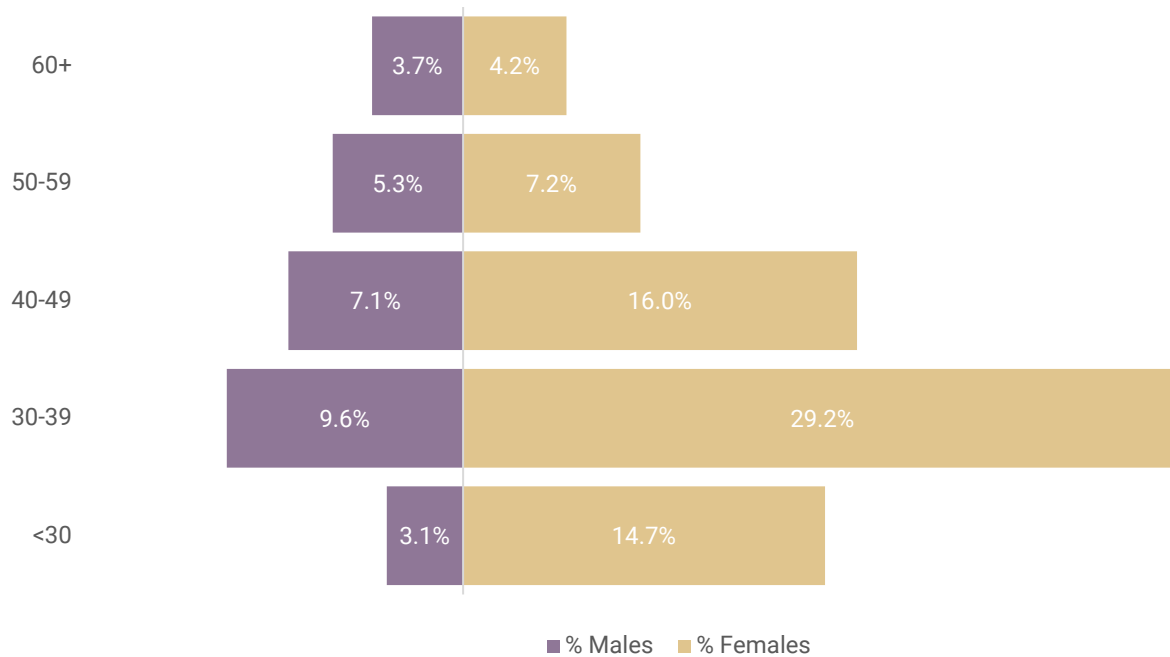
## Primary Place of Employment Currently Recruiting/Hiring PAs



## Number of Months Unfilled

Months Unfilled	Percent
1 month	29.3%
2 months	13.0%
3 months	14.9%
4 months	3.8%
5 months	1.6%
6 or more months	21.6%
Not sure	15.9%

# Distribution of PAs by Age and Gender



## Number of PAs by Gender

Gender	2023 Percent	Percent Change 2019-2023*
Male	28.8%	-1.9%
Female	71.2%	1.9%
Non-binary**	<0.1%	NA
Prefer not to answer**	0.1%	NA

\*Percent change reflects proportional change from 2019 to 2023

\*\*Gender identity choice first included in 2021

## Number of PAs by Age Group

Age Group	2023 Percent	Percent Change 2019-2023*
<30	17.8%	-0.1%
30-39	38.8%	0.6%
40-49	23.1%	-0.1%
50-59	12.5%	-0.2%
60+	7.8%	-0.3%

\*Percent change reflects proportional change from 2019 to 2023

As with the past six years, the median age of PAs remains at 38. The profession continues to be majority female. In 1975, 23.9% of the PAs identified as female<sup>1</sup>, compared to 71.2% in 2023.

<sup>1</sup>NCCPA data records

# Race and Ethnicity of PAs

## PAs by Race

Race	2023 Percent	Percent Change 2019-2023*
White	79.9%	-1.0%
Black/African American	3.4%	0.1%
Asian	6.8%	1.2%
Native Hawaiian/Pacific Islander	0.3%	0.0%
American Indian or Alaskan Native	0.4%	0.1%
Other	2.6%	-0.2%
Multi-race	2.5%	0.6%
Prefer not to answer	4.2%	-0.6%

\*Percent change reflects proportional change from 2019 to 2023

Although the number of PAs has increased during the five-year period from 2019-2023, the overall racial/ethnic diversity of the PA profession has remained relatively consistent, with the largest change occurring in the Asian population, which had a **1.2%** proportional increase. **7.2%** of PAs indicated they are Hispanic, an increase from **6.6%** in 2019.

## Race by Gender

Race	Female	Male	Non-binary	Prefer not to answer
White	71.9%	28.1%	<0.1%	<0.1%
Black/African American	69.2%	30.7%	0.0%	0.1%
Asian	74.0%	26.0%	0.0%	0.1%
Native Hawaiian/Pacific Islander	53.4%	46.6%	0.0%	0.0%
American Indian or Alaskan Native	61.7%	38.0%	0.0%	0.4%
Other	65.2%	32.8%	0.0%	<0.1%
Multi-race	71.4%	28.5%	0.0%	<0.1%
Prefer not to answer	57.3%	42.7%	<0.1%	<0.1%

# Educational Profile of PAs

## Number of PAs by Highest Degree Completed

Degree	2023 Percent	Percent Change 2019-2023*
Certificate program	0.8%	-0.4%
Associate's degree	0.7%	-0.4%
Bachelor's degree	12.9%	-5.0%
Master's degree	82.6%	5.4%
Doctorate degree**	2.4%	0.6%
Other	0.6%	-0.2%

\*Percent change reflects proportional change from 2019 to 2023

\*\*Most frequent doctorate degrees include: DMSc, PhD, MD and DHSc

The average PA educational program is 111 weeks long, which includes didactic and clinical instruction (not vacation).<sup>1</sup> Over time, programs have trended toward the graduate degree level, and as of 2020, all PA programs must confer a graduate degree to be accredited by ARC-PA.<sup>2</sup> This is evident as the percentage of master's degrees held by PAs has increased from 77.2% in 2019 to 82.6% in 2023.<sup>3</sup>

<sup>1</sup>PAEA Physician Assistant Educational Programs in the United States, By the Numbers: Program Report 36; 2023.

<sup>2</sup>ARC-PA Accreditation Standards for Physician Assistant Education®, 5th edition. Approved September 2020, latest clarification September 2023. <sup>3</sup>NCCPA 2019 Statistical Profile of Certified PAs, An Annual Report of the National Commission on Certification of Physician Assistants. 2020.

# Postgraduate Program Completion

## PAs who Completed a Postgraduate Program: Area of Training

Area of Training	Number	Percent
Addiction medicine	19	0.2%
Anesthesiology	6	0.1%
Critical care medicine	424	5.5%
Dermatology	470	6.1%
Emergency medicine	1,828	23.7%
Family medicine/general practice	622	8.1%
Hospice and palliative medicine	10	0.1%
Hospital medicine	253	3.3%
Internal medicine – general practice	135	1.7%
Internal medicine – subspecialties	255	3.3%
Neurology	44	0.6%
Obstetrics and gynecology	95	1.2%
Occupational medicine	52	0.7%
Ophthalmology	4	0.1%
Otolaryngology	43	0.6%
Pain medicine	17	0.2%
Pathology	0	0.0%
Pediatrics – general	96	1.2%
Pediatrics – subspecialties	260	3.4%
Physical medicine/rehabilitation	6	0.1%
Preventive medicine/public health	19	0.2%
Psychiatry	240	3.1%
Radiation oncology	2	<0.1%
Radiology	6	0.1%
Radiology – interventional	3	<0.1%
Surgery – general	1,016	13.2%
Surgery – subspecialties	990	12.8%
Urology	27	0.3%
Other*	780	10.1%
<b>Total</b>	<b>7,722</b>	<b>100.0%</b>

\*Top “other” specialties include: aviation/aerospace medicine, functional medicine, sports medicine, and trauma

5.7% of PAs indicated they completed a PA postgraduate training program (PA residency or fellowship) after graduating from their PA program.

Top three specialty areas include: emergency medicine, surgery – general, and surgery – subspecialties



# Satisfaction with Postgraduate Program

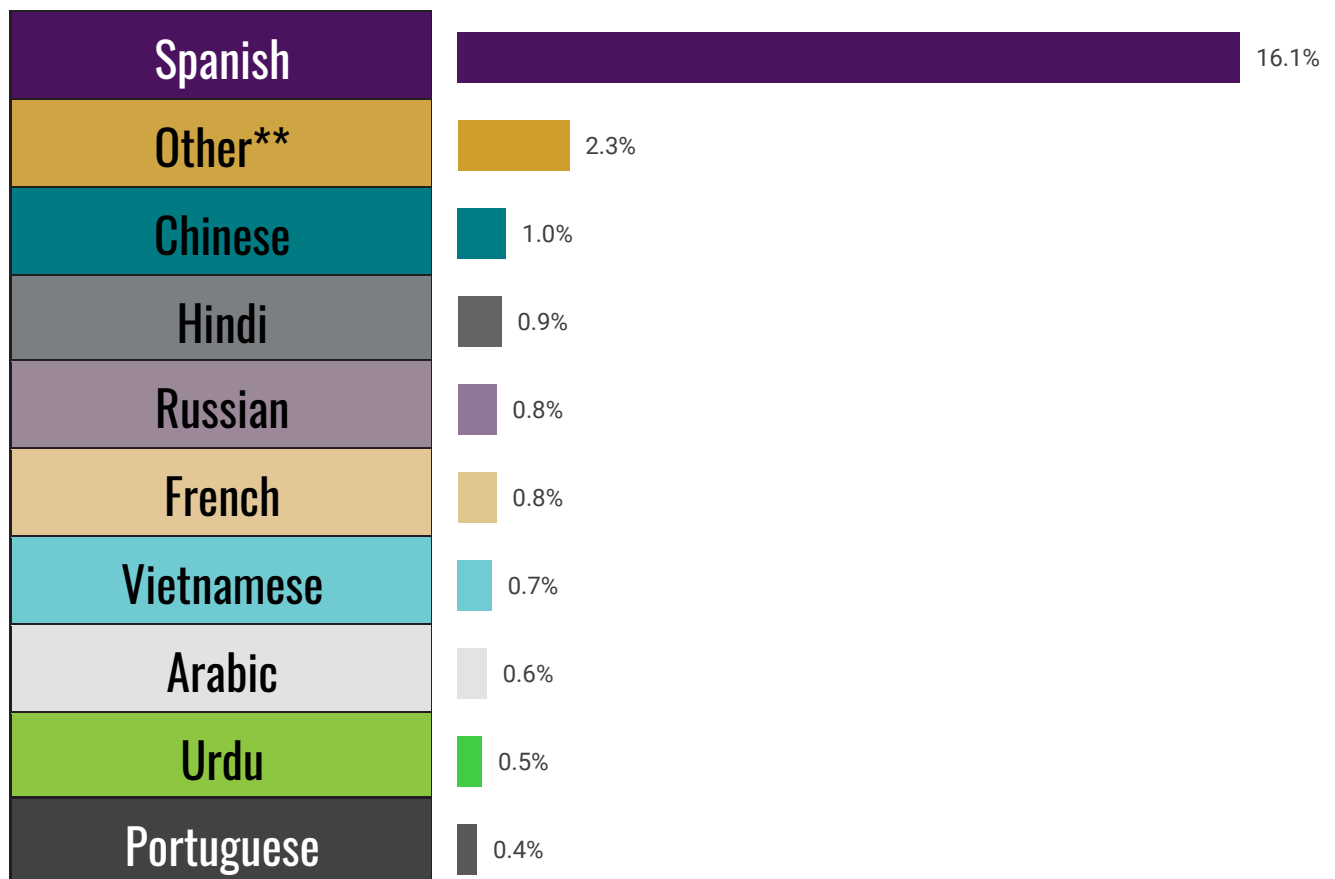
## Level of Satisfaction of PAs Who Completed a Postgraduate Program

Level of Satisfaction	Percent
Completely satisfied	40.1%
Mostly satisfied	34.6%
Somewhat satisfied	7.8%
Neither dissatisfied nor satisfied	3.6%
Somewhat dissatisfied	2.6%
Mostly dissatisfied	4.5%
Completely dissatisfied	6.8%
<b>Total</b>	<b>100.0%</b>

5.7% of PAs reported having completed a postgraduate training program (PA residency or fellowship) after graduating from their PA program, and 82.5% reported some level of satisfaction with the program.

# Languages Other Than English Spoken with Patients

## Top Ten Languages Other than English: PAs who Communicate with Patients in Another Language in Addition to English\*



\*Percentage of PAs who communicate with patients in languages other than English by the top 10 most frequently identified languages

\*\*Most common "other" languages noted: Punjabi, American Sign Language, Hebrew and Ukrainian

In 2023, **22.4%** of PAs indicated they communicate with patients in a language other than English; **22.8%** in 2019. Of the PAs who communicate with patients in a language other than English, most do so in **Spanish**.

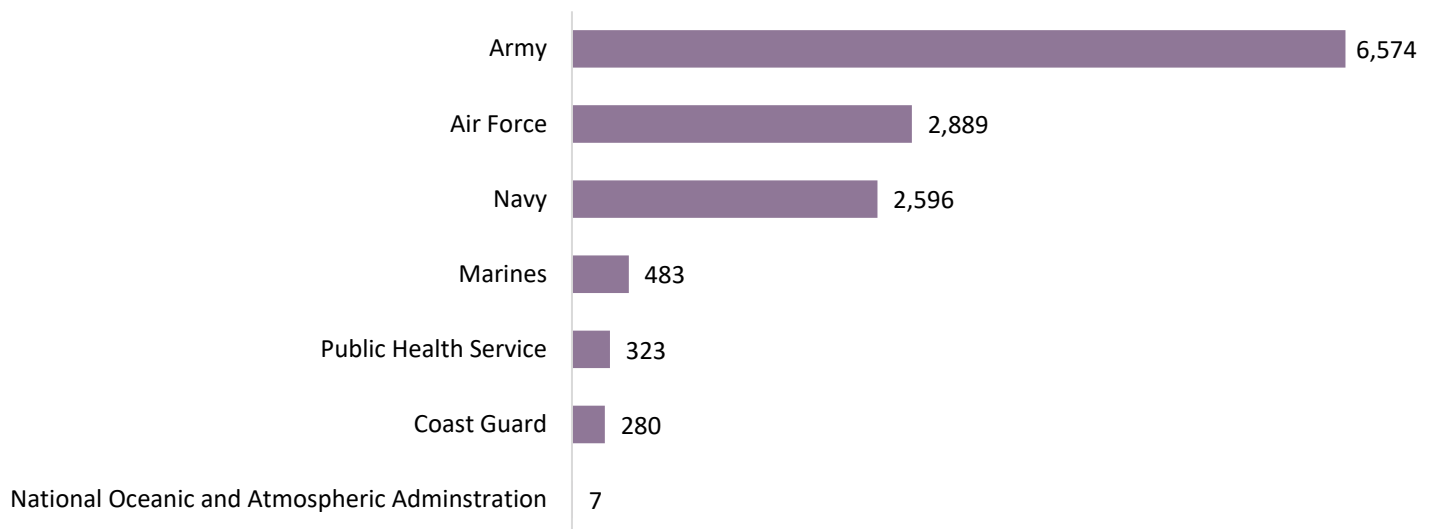
**3.9%** of PAs speak two or more languages, in addition to English in 2023. In 2019, **3.8%** reported being able to speak two or more languages.

## Current Status of PAs who Have Previously or Are Currently Serving in the U.S. Armed Forces

Status	Number	Percent
Active Duty	2,508	20.6%
National Guard	1,100	9.1%
Reserve	617	5.1%
Veteran	5,305	43.7%
Retired	2,616	21.5%
<b>Total</b>	<b>12,146</b>	<b>100.0%</b>

8.2% of PAs reported they have served or are currently serving in the U.S. Armed Forces.

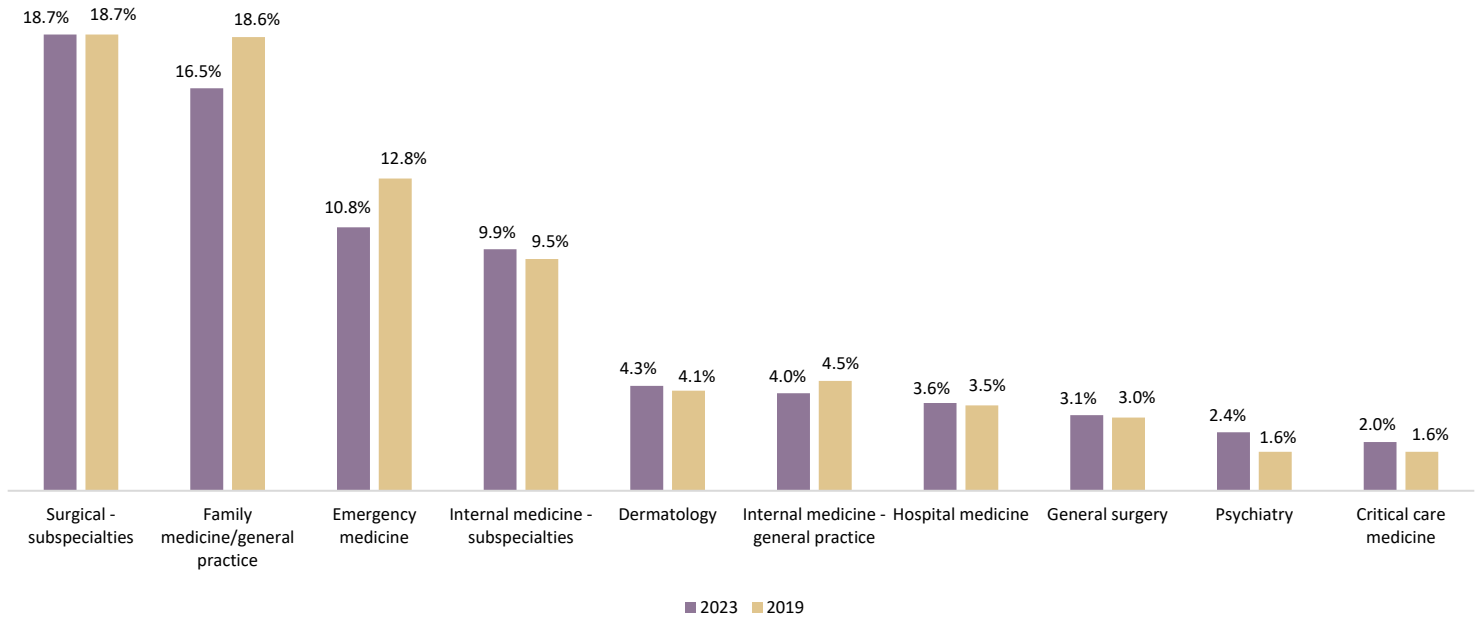
## Branch of U.S. Armed Forces Served or Currently Serving\*



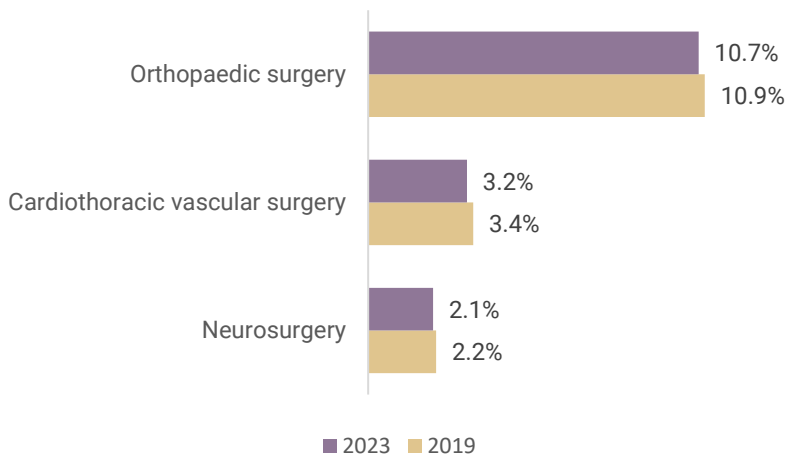
\*PAs could select multiple branches of the armed forces, and 885 indicated they served in more than one branch.

# Principal Clinical Position

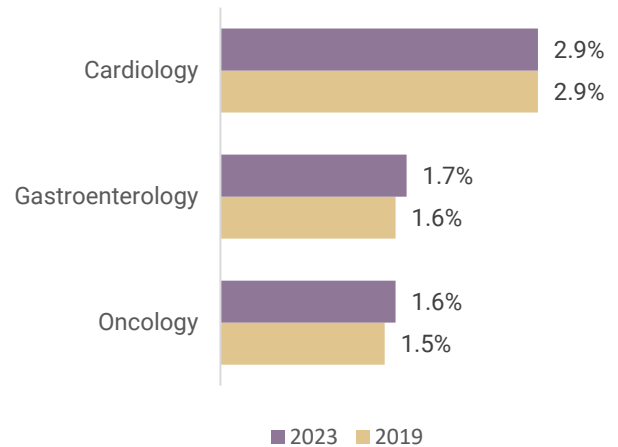
## Top PA Practice Areas



## Top Surgical Subspecialties



## Top Internal Medicine Subspecialties



The Profile asks PAs to identify their practice area and other practice characteristics for their principal clinical position and for those working in more than one clinical position, for a secondary clinical position. The data shown in this section is based only on responses to the question regarding their principal clinical position. In 2023, 10 specialties comprise over three-quarters (**75.3%**) of PAs.

# Principal Clinical Position

## Number and Percent of PAs by Principal Clinical Position

Area of Practice*	2023 Number	2023 Percent	Percent Change 2019-2023**
Addiction medicine	677	0.5%	0.1%
Adolescent medicine	135	0.1%	0.0%
Anesthesiology	320	0.3%	0.0%
Critical care medicine	2,561	2.0%	0.4%
Dermatology	5,449	4.3%	0.2%
Emergency medicine	13,727	10.8%	-2.0%
Family medicine/general practice	20,940	16.5%	-2.1%
Gynecology	441	0.3%	0.0%
Hospice and palliative medicine	227	0.2%	0.1%
Hospital medicine	4,548	3.6%	0.1%
Internal medicine – general practice	5,073	4.0%	-0.5%
Internal medicine – subspecialties	12,510	9.9%	0.4%
Neurology	1,359	1.1%	0.2%
Obstetrics and gynecology	1,535	1.2%	0.1%
Occupational medicine	1,614	1.3%	-0.1%
Ophthalmology	136	0.1%	0.0%
Otolaryngology	1,376	1.1%	0.1%
Pain medicine	1,874	1.5%	0.1%
Pathology	10	<0.1%	0.0%
Pediatrics – general practice	2,269	1.8%	-0.1%
Pediatrics – subspecialties	1,695	1.3%	0.0%
Physical medicine/rehabilitation	713	0.6%	0.0%
Preventive medicine/public health	175	0.1%	0.0%
Psychiatry	2,999	2.4%	0.8%
Radiation oncology	242	0.2%	0.0%
Radiology	745	0.6%	-0.1%
Radiology – interventional	384	0.3%	NA
Surgery – general	3,895	3.1%	0.1%
Surgery – subspecialties	23,755	18.7%	0.0%
Urology	1,349	1.1%	0.1%
Other***	14,208	11.2%	1.9%
<b>TOTAL</b>	<b>126,941</b>	<b>100.0%</b>	<b>NA</b>

Most specialties increased in size from 2019 to 2023, but a few decreased.

The five specialties with the largest numbers of PAs:

1. Surgery – subspecialties
2. Family medicine/general practice
3. Other\*\*\*
4. Emergency medicine
5. Internal medicine – subspecialties

\*Clinical specialties are listed in alphabetical order

\*\*Percent change reflects proportional change from 2019 to 2023

\*\*\*Most frequent responses include: urgent care, acute care, aesthetics, wound care, trauma surgery, regenerative medicine, and transplant surgery

# Primary Care and Non-Primary Care by State

## Number and Percent of PAs Practicing in Primary Care and Non-Primary Care by State

State	Primary Care* (%)	Non-Primary Care (%)	Percent Change in Primary Care 2019-2023**
Alabama	154 (17.4%)	731 (82.6%)	-3.9%
Alaska	218 (43.4%)	284 (56.6%)	-5.8%
Arizona	660 (23.5%)	2,149 (76.5%)	-4.4%
Arkansas	115 (23.4%)	377 (76.6%)	-9.3%
California	2,555 (27.3%)	6,804 (72.7%)	-2.9%
Colorado	1,029 (28.1%)	2,633 (71.9%)	-5.7%
Connecticut	307 (13.6%)	1,949 (86.4%)	-1.4%
Delaware	57 (15.3%)	316 (84.7%)	-3.9%
District of Columbia	39 (18.6%)	171 (81.4%)	-0.6%
Florida	1,495 (17.9%)	6,849 (82.1%)	-2.6%
Georgia	689 (19.4%)	2,864 (80.6%)	-3.1%
Hawaii	109 (31.0%)	243 (69.0%)	-5.0%
Idaho	393 (33.1%)	793 (66.9%)	-3.5%
Illinois	661 (20.2%)	2,608 (79.8%)	-3.4%
Indiana	272 (16.6%)	1,366 (83.4%)	-0.9%
Iowa	358 (32.5%)	744 (67.5%)	-6.5%
Kansas	342 (32.5%)	709 (67.5%)	-2.5%
Kentucky	335 (23.8%)	1,070 (76.2%)	-2.6%
Louisiana	189 (15.9%)	1,000 (84.1%)	-0.9%
Maine	190 (23.0%)	637 (77.0%)	-1.9%
Maryland	393 (14.8%)	2,262 (85.2%)	-1.5%
Massachusetts	550 (15.9%)	2,901 (84.1%)	-1.1%
Michigan	1,118 (22.2%)	3,916 (77.8%)	-3.0%
Minnesota	680 (23.9%)	2,160 (76.1%)	-4.1%
Mississippi	49 (18.2%)	220 (81.8%)	-6.7%
Missouri	243 (19.8%)	984 (80.2%)	-0.8%
Montana	211 (29.3%)	509 (70.7%)	-4.0%
Nebraska	393 (33.6%)	775 (66.4%)	-4.8%
Nevada	250 (27.8%)	649 (72.2%)	-1.3%
New Hampshire	168 (19.7%)	684 (80.3%)	-2.6%
New Jersey	448 (14.3%)	2,692 (85.7%)	-1.4%
New Mexico	211 (31.3%)	486 (68.7%)	-4.9%
New York	16,694 (15.2%)	9,474 (84.8%)	-1.4%



# Primary Care and Non-Primary Care by State

## Number and Percent of PAs Practicing in Primary Care and Non-Primary Care by State

State	Primary Care* (%)	Non-Primary Care (%)	Percent Change in Primary Care 2019-2023**
North Carolina	1,630 (25.1%)	4,870 (74.9%)	-2.9%
North Dakota	118 (40.7%)	172 (59.3%)	-5.6%
Ohio	500 (13.3%)	3,266 (86.7%)	-0.7%
Oklahoma	371 (25.8%)	1,068 (74.2%)	-3.3%
Oregon	577 (30.9%)	1,291 (69.1%)	-3.0%
Pennsylvania	1,554 (18.5%)	6,839 (81.5%)	-1.6%
Rhode Island	78 (18.0%)	355 (82.0%)	2.4%
South Carolina	413 (21.8%)	1,481 (78.2%)	-0.4%
South Dakota	208 (38.1%)	388 (61.9%)	-4.1%
Tennessee	616 (27.2%)	1,647 (72.8%)	-1.7%
Texas	2,413 (29.2%)	5,857 (70.8%)	-3.8%
Utah	451 (28.2%)	1,147 (71.8%)	-4.1%
Vermont	94 (25.8%)	270 (74.2%)	-7.3%
Virginia	693 (20.6%)	2,666 (79.4%)	-2.0%
Washington	847 (28.0%)	2,183 (72.0%)	-2.7%
West Virginia	263 (30.2%)	609 (69.8%)	-3.7%
Wisconsin	566 (20.7%)	2,170 (79.3%)	-2.9%
Wyoming	93 (38.8%)	147 (61.3%)	-6.8%
<b>TOTAL***</b>	<b>28,070 (22.2%)</b>	<b>98,385 (77.8%)</b>	<b>-2.8%</b>

\*Primary care includes family medicine/general practice, general internal medicine, and general pediatrics. The total counts of PAs in primary care and non-primary care specialties are based on the numbers of PAs who provided specialty information for their principal area of practice.

\*\*Percent change reflects proportional change from 2019 to 2023

\*\*\*Total includes U.S. and District of Columbia

**22.3% of all PAs work in primary care, compared to 25.0% in 2019. Although the overall percentage of the PA workforce practicing in primary care decreased during this five-year period, there was an increase in the number of PAs working in primary care as more PAs entered the workforce.**

## Number of PAs by Principal Clinical Practice Setting

Practice Setting	2023 Number	2023 Percent	Percent Change 2019-2023*
Hospital	52,734	41.7%	0.6%
Office-based private practice	46,912	37.1%	-1.5%
Urgent care	7,365	5.8%	1.2%
Federal government facility/hospital/unit**	5,755	4.5%	-0.7%
Community health center	3,473	2.7%	-0.3%
Other***	2,887	2.3%	1.6
Rural health clinic	1,765	1.4%	-0.4%
School-based or college-based health center or school clinic	899	0.7%	-0.1%
Public or community health clinic (non-federally qualified)	884	0.7%	-0.2%
Occupational health setting	827	0.7%	-0.1%
Behavioral/mental health facility	795	0.6%	0.1%
Extended care facility/nursing home	772	0.6%	-0.1%
Ambulatory surgical center	403	0.3%	0.0%
Rehabilitation facility	363	0.3%	0.0%
Retail clinic	248	0.2%	0.0%
Home health care agency	205	0.2%	0.1%
Free clinic	178	0.1%	-0.1%
Locum tenens****	102	0.1%	NA
Hospice	11	<0.1%	0.0%

Most PAs work in a **hospital** or an **office-based private practice setting** (78.8%).

The mean number of hours worked per week for all PAs in their principal clinical position is **39.7 (median is 40)**. This is a slight decrease from 2019 when the mean was **40.3**.

Throughout all practice settings, the mean number of patients seen per week for all full-time (40+ hours per week) PAs who see patients in their principal clinical position is **69**. This is a decrease from 2019 when the mean was **72**.

\*Percent change reflects proportional change from 2019 to 2023

\*\*4,225 PAs indicated they have a current military status of active duty, national guard, or reserve in 2023.

\*\*\*Most frequent "other" practice settings include: academic medical center, correctional institution, and mobile urgent care/wound care

\*\*\*\*Locum tenens added to the Profile for the first time in 2022

The estimated number of patients seen each week by all clinically practicing PAs is 10.8 million.

The number of patients seen by PAs is estimated based on the total number of PAs, the proportion indicating to work in at least one clinical position and using a measure of central tendency of the number of patients PAs report seeing per week in their principal and secondary positions, with outliers eliminated.

## Number of Patients in Panels with PA as the Primary Provider

Number of Patients in Panel	Number of PAs	Percent
1 – 25	9,407	21.3%
26 – 50	6,201	14.1%
51 – 75	1,574	3.6%
76 – 100	5,283	12.0%
101 – 150	1,443	3.3%
151 – 200	2,811	6.4%
201 – 300	2,899	6.6%
301 – 400	1,419	3.2%
401 – 500	2,789	6.3%
Over 500	10,241	23.2%
<b>Total</b>	<b>44,067</b>	<b>100.0%</b>

35.2% (nearly 45,000) of clinically practicing PAs indicated they have a patient panel for which they are the primary provider.

The median number of patients in a panel with a PA as the primary provider is 100.

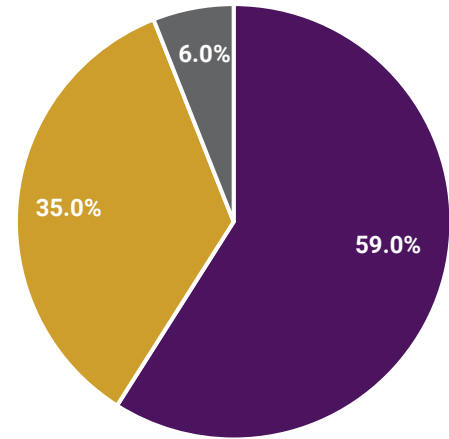
## Hours per Week Participating in Telemedicine

Hours Participating in Telemedicine	2023 Percent	Percent Change 2019-2023*
Less than 10	80.0%	-5.7%
10 – 19	11.6%	3.7%
20 – 29	4.7%	2.1%
30 – 39	2.2%	0.4%
40 or more	1.6%	-0.2%

\*Percent change reflects proportional change from 2019 to 2023

In 2023, 42.7% of PAs participated in telemedicine in their practice compared to 9.2% in 2019.

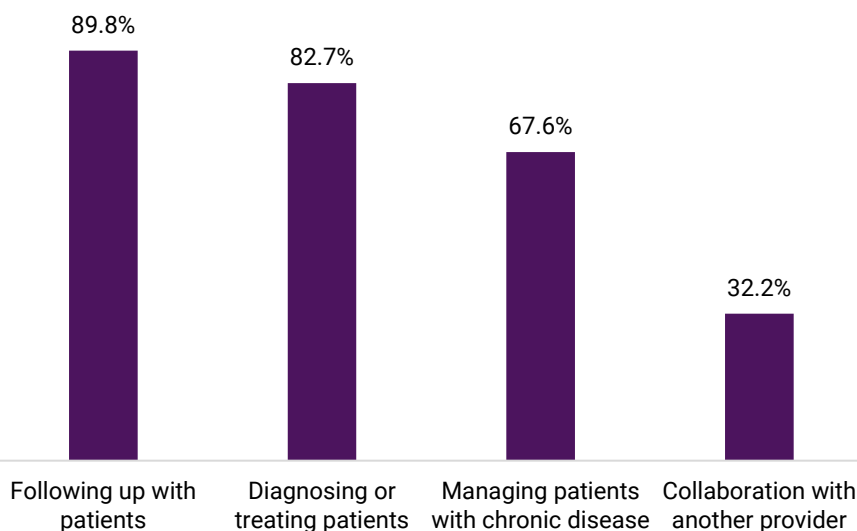
## Practice or Institution Participates in Telemedicine Services\*



■ Yes ■ No ■ Don't Know

\*Percentage of PAs who indicated they did not participate in telemedicine, but responded if their practice or institution participates in telemedicine

## Functions of Telemedicine\*



\*Percentages represent functions reported by PAs who indicated they participate in telemedicine

## Modalities PAs Use When Participating in Telemedicine:

- Videoconferencing: 92.3%
- Remote patient monitoring: 19.2%
- Storing and forwarding data: 8.5%

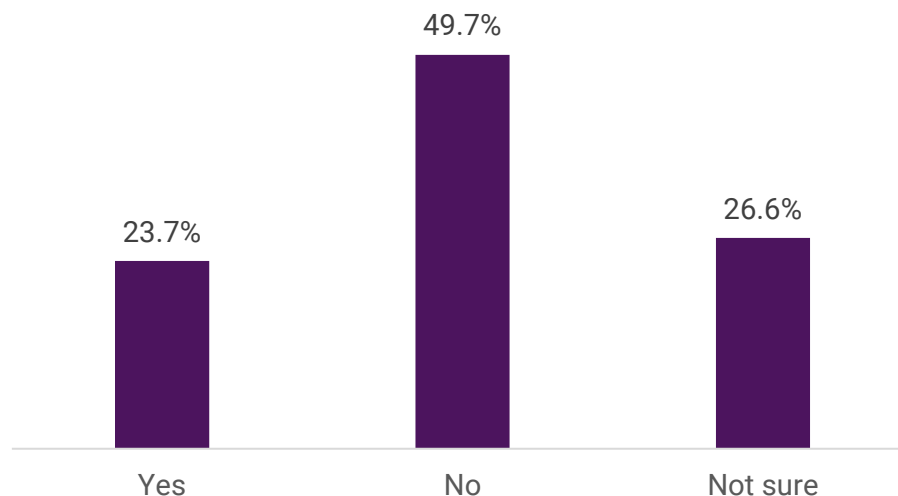
# Providing Care to Underserved Populations

PAs were presented with the following information and then asked if they provide care to patients in HPSAs or MUAs:

According to the Health Resources and Services Administration (HRSA), Medically Underserved Areas (MUA)/Populations refer to areas or populations designated by HRSA as having insufficient primary care providers, high infant mortality rates, poverty, or an older adult population.

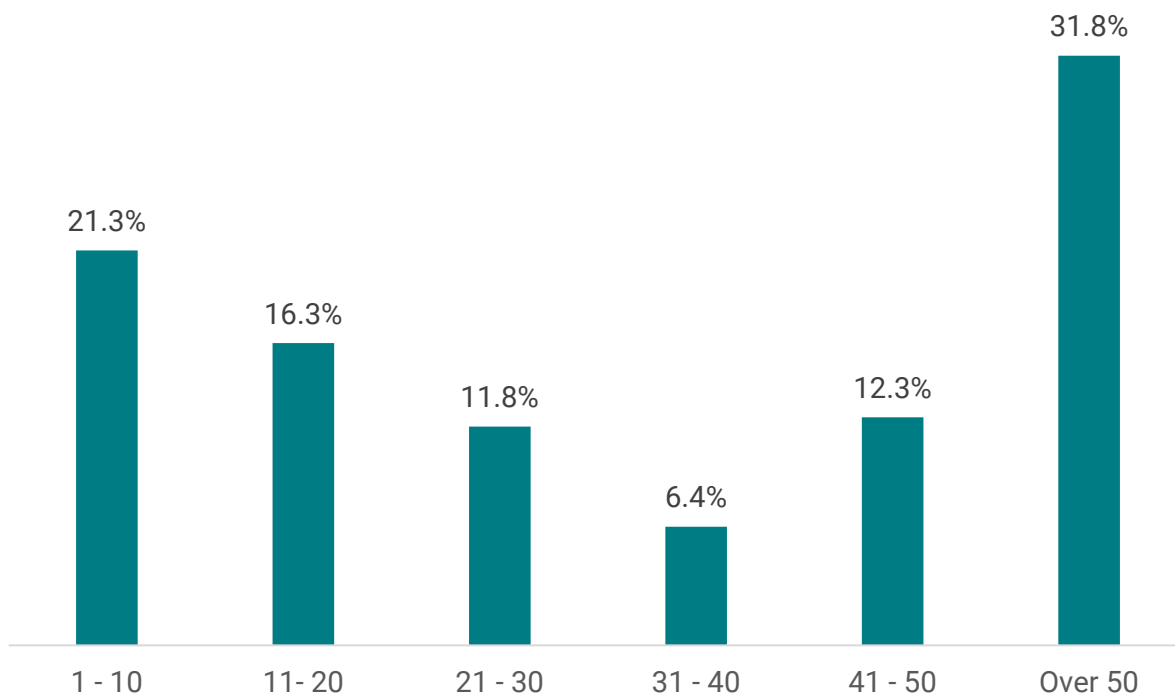
Health Professional Shortage Areas (HPSAs) refer to areas designated by HRSA as having insufficient numbers of primary medical care, dental or mental health and may be geographical (e.g., service area), population (e.g., qualify for Medicaid) or facilities (e.g., federally qualified health center).

## Provide Care to Patients in a Designated HPSA or MUA



**23.7% of PAs provide care to patients in a designated HPSA or MUA.**

## Average Number of Prescriptions/Refills Written per Week



95.0% of clinically practicing PAs prescribe pharmacologic agents for patients. The median number of prescriptions written by PAs per week is 30.



# Intentions for Leaving Clinical Position

## PAs Intending to Leave Principal Clinical Position in the Next 12 Months

2023	2019
9.3%	5.2%

## Factors Influencing PAs Planning to Leave Principal Clinical Position

Factors selected as “very important”*	2023 Number	2023 Percent	Percent Change 2019-2023**
Seeking another clinical PA position	6,645	56.9%	-4.6%
Feelings of professional burnout***	5,243	44.9%	22.0%
Insufficient wages given the workload and responsibilities involved	4,907	42.0%	5.1%
Work responsibilities would interfere with ability to care for family	3,238	27.7%	11.1%
Relocating to another geographic area	3,087	26.4%	-6.1%
Work is not professionally challenging or satisfying	2,631	22.5%	-2.6%
Other	1,613	13.8%	-9.6%
Plan to retire from active workforce	1,376	11.8%	-0.1%
Desire a non-clinical health-related position	907	7.8%	2.4%
Desire a position outside of health care	876	7.5%	2.7%
Want to pursue additional education	692	5.9%	-1.8%
Want to work in a health professional training program position	484	4.1%	-0.7%
My health does not allow me to continue working as a PA	308	2.6%	0.5%

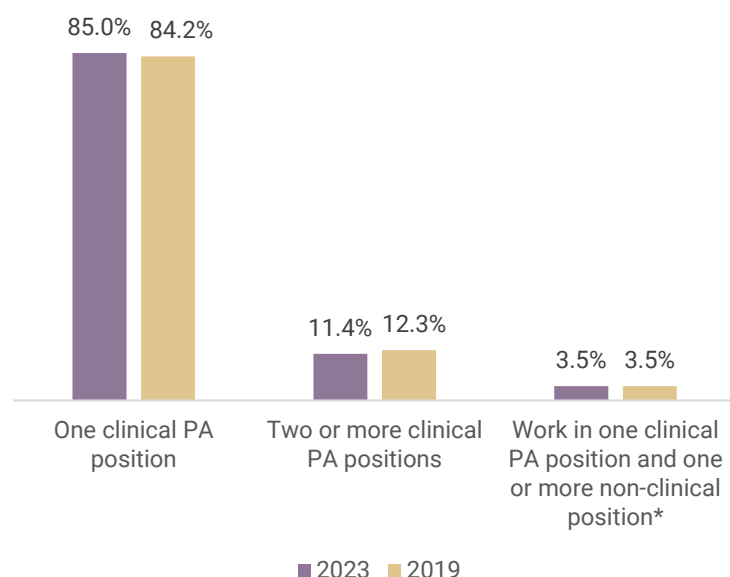
\*PAs could choose multiple factors

\*\*Percent change reflects proportional change from 2019 to 2023

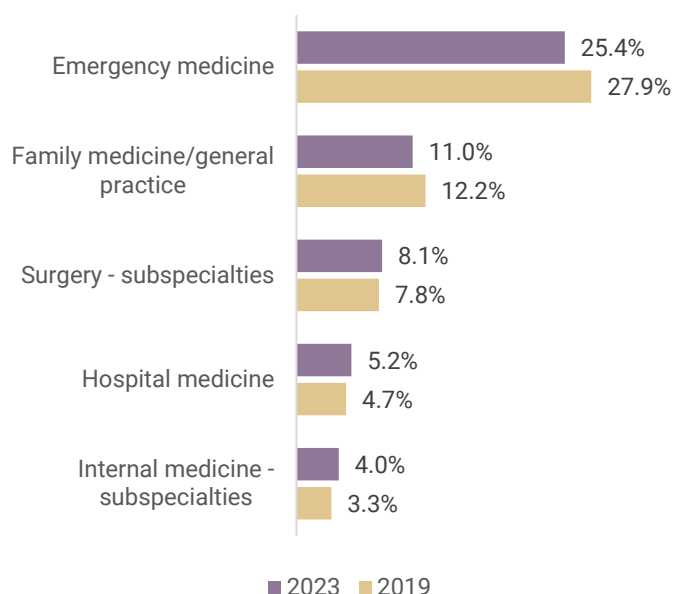
\*\*\*Factor first included in 2019. Percent change may be affected due to 2019 being the first year it was included.

# Distribution Working in More than One Position

## Distribution of PAs Working in More than One Clinical Position



## Top Five Secondary Specialty Areas



\*Non-clinical position does not provide direct patient care (i.e., education, research, administration)

In 2023, 15.2% of PAs who were working in more than one clinical position were working in a primary care position in their secondary position, compared to 16.8% in 2019.

## Reasons PAs are Employed in More Than One Clinical Position

Reasons Chosen*	2023	Percent Change 2019-2023**
Supplement earnings from principal clinical position	47.0%	2.2%
Enjoy working in a variety of clinical settings	25.0%	-1.4%
To gain experience in a different aspect of clinical care	17.7%	-1.3%
Other (e.g., financial, military service, gain experience, etc.)	8.5%	0.5%
Was not offered full-time work in my principal clinical PA position	1.8%	0.1%

\*PAs could select multiple reasons

\*\*Percent change reflects proportional change from 2019 to 2023

# Non-Clinical Secondary Position

## Non-Clinical Position in Addition to Clinical PA Position

Non-Clinical Position	Percent*
Faculty	20.0%
Medical administration	22.4%
Consulting	12.5%
Speaking	11.1%
Clinical trial research	5.8%
Expert witness	4.0%
Other**	35.6%

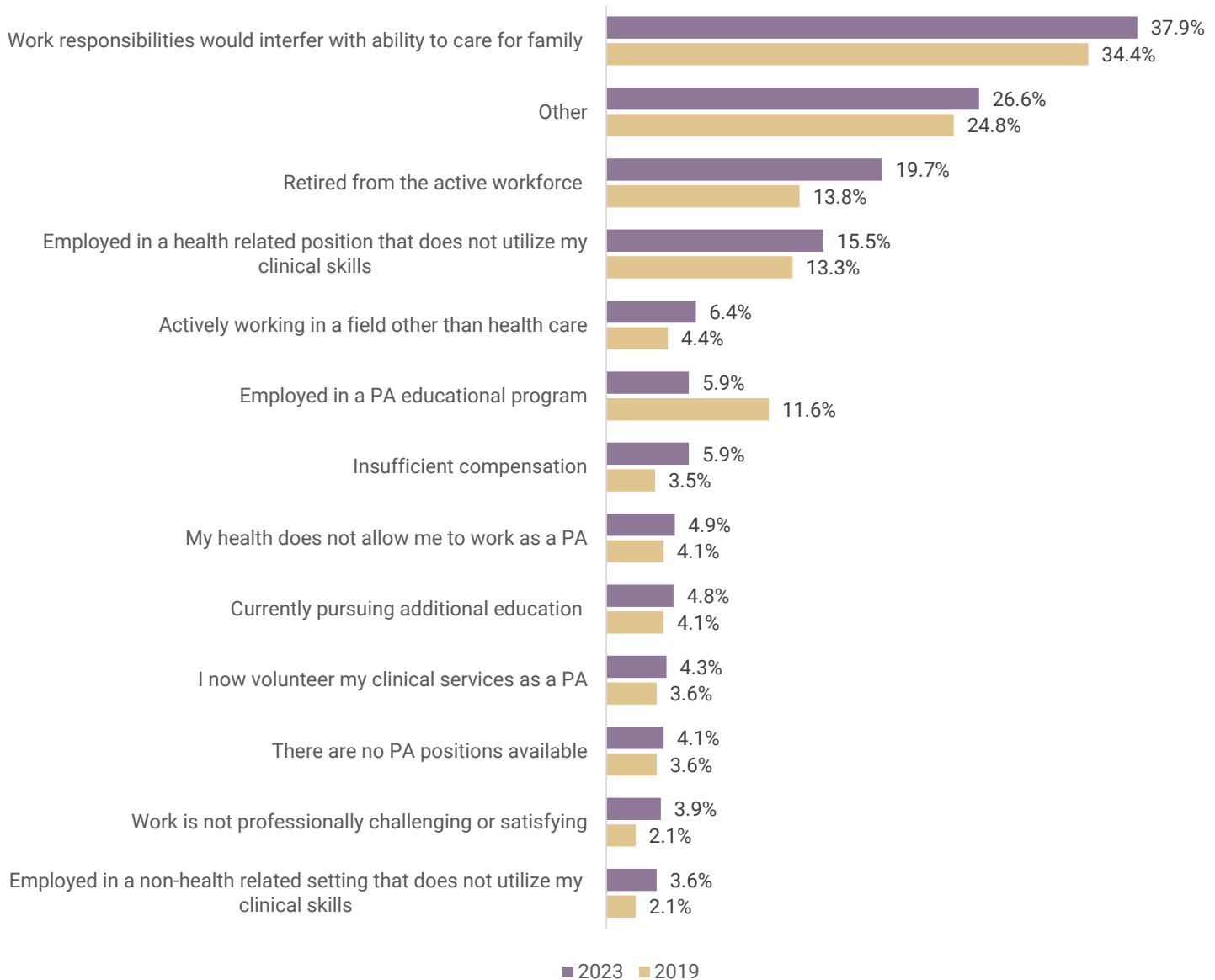
Note: PAs were able to choose more than one secondary non-clinical position.

\*Percent of PAs who indicated they have a secondary non-clinical position in addition to their principal clinical PA position

\*\*Other non-clinical positions listed include: health assessments, quality improvement/control, medical research, IT/medical informatics

# PAs Not in Clinical Practice

## Reasons PAs Do Not Practice Clinically\*



\*PAs could select multiple reasons

The vast majority of PAs are engaged in clinical practice. In 2023, **94.7%** of PAs indicated they were practicing clinically (94.5% in 2019).

In the last five years, the most common reason for not practicing clinically has been family responsibilities.

“Other” reasons PAs are not clinically practicing includes: spouse’s job, burnout, COVID-19 concerns, own or partner in a practice, leadership, or administrative job

# Job Satisfaction

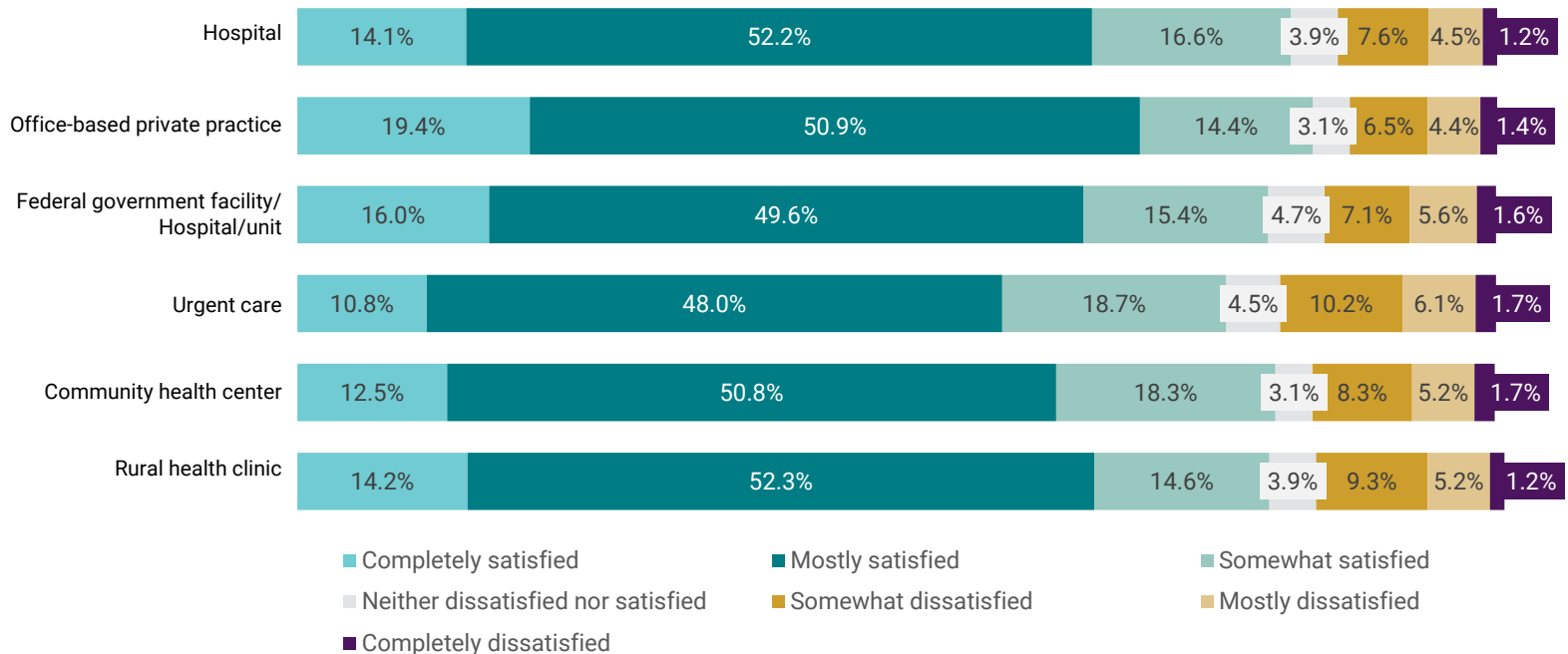
## Job Satisfaction

Areas of Job Satisfaction	Percent Satisfied*
Present job	83.1%
Career as a PA	86.7%
Number of hours worked	77.6%
Work-life balance	71.7%
Income	75.2%
Benefits	72.9%
Geographical location of principal position	82.5%
Employer	74.4%

\*Satisfied includes responses of “completely satisfied,” “mostly satisfied,” and “somewhat satisfied”

**86.7% of all PAs indicated they are satisfied with their career as a PA.**

## Satisfaction with Present Job by Top Practice Settings\*

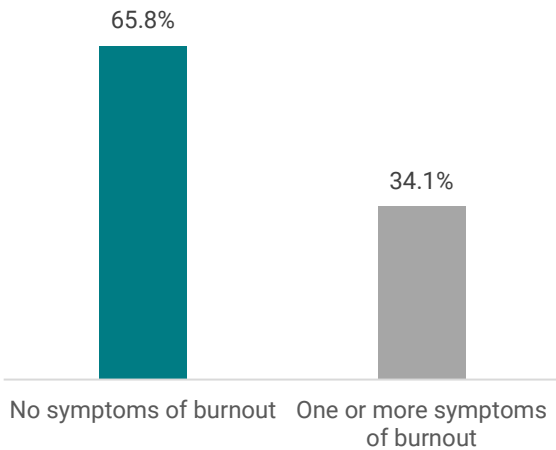


\*Practice settings with greatest number of PAs in 2023

PAs working in office-based private practice reported the highest satisfaction with their career as a PA, with **84.7%** indicating they are satisfied.

PAs working in urgent care as their principal position reported the highest dissatisfied level at **18.0%**, but most (**77.5%**) were satisfied.

## Feelings of Burnout



## Level of Burnout

### Burnout Scale<sup>1,2</sup>

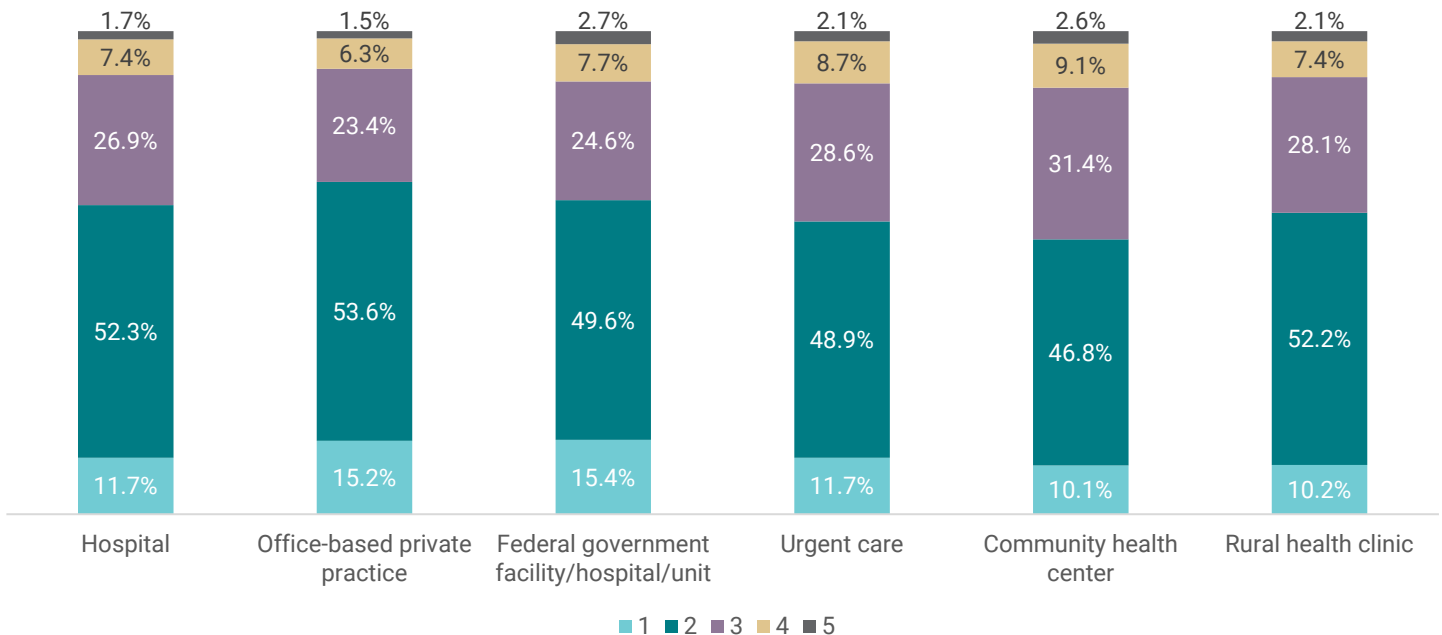
	Percent
1= I enjoy my work; I have no symptoms of burnout.	13.5%
2= Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out.	52.3%
3= I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.	25.4%
4= The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.	7.0%
5= I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.	1.7%

<sup>1</sup>Rohland BM, Kruse GR, Rohrer JE. Validation of a single-item measure of burnout against the Maslach Burnout Inventory among physicians. *Stress and Health: Journal of the International Society for the Investigation of Stress*. 2004 Apr;20(2):75-9.

<sup>2</sup>Dolan ED, Mohr D, Lempa M, Joos S, Fihn SD, Nelson KM, Helfrich CD. Using a single item to measure burnout in primary care staff: a psychometric evaluation. *Journal of general internal medicine*. 2015 May 1;30(5):582-7.

**PAs were asked to rate their level of burnout based on their own definition of burnout. The median burnout score was 2.0. Overall, 34.1% of PAs feel some level of burnout.**

## Level of Burnout by Top Practice Settings\*



\*Principal position practice settings with the greatest number of PAs in 2023

Of the six largest practice settings, PAs working in community health centers reported experiencing the highest percentage of some level of burnout (**43.1%**), while office-based private practice PAs reported the lowest burnout (**31.2%**).



# Working with Other Health Professionals

## Types of Health Professionals PAs Work Within Their Practice Setting

Type of Health Professional*	Percent
I am a solo practitioner, with an off-site licensed physician supervisor/collaborator	5.1%
Physician(s)	93.8%
Other PAs	80.4%
Advanced practice nurse(s) (i.e., nurse practitioners, nurse midwives, etc.)	71.4%
Registered nurse(s)	67.2%
Other levels of nurses (LPN, CAN)	37.9%
Mental health provider(s) (i.e., social workers, psychologists, etc.)	41.1%
Dentists or dental hygienists	6.0%
Pharmacists	41.2%
Radiology technicians	37.9%
Physical therapists	22.8%
Occupational therapists	17.8%
Speech therapists	13.0%

\*PAs could select multiple health professionals

**99.1% of clinically practicing PAs indicated that they work with other health professionals in their principal clinical position.**

## Total Income in Last Calendar Year from PA Positions

Income Range	2023	Percent Change from 2019-2023*
Less than or equal to \$60,000	4.2%	-2.2%
\$60,001-\$70,000	1.6%	-0.1%
\$70,001-\$80,000	2.2%	-0.6%
\$80,001-\$90,000	4.5%	-2.4%
\$90,001-\$100,000	9.2%	-2.7%
\$100,001-\$110,000	13.7%	-0.9%
\$110,001-\$120,000	14.5%	2.5%
\$120,001-\$130,000	13.4%	4.5%
\$130,001-\$140,000	9.5%	3.9%
\$140,001-\$150,000	7.6%	3.7%
\$150,001-\$160,000	5.3%	2.6%
\$160,001-\$170,000	3.5%	1.8%
\$170,001-\$180,000	2.7%	1.4%
\$180,001-\$190,000	1.8%	0.8%
\$190,001-\$200,000	1.6%	0.8%
More than \$200,000	4.7%	2.5%

\*Percent change reflects proportional change from 2019 to 2023

## Mean and Median Income

	2023	2019
<b>Mean</b>	\$123,490	\$113,186
<b>Median</b>	\$125,000	\$105,000

The average total income for PAs increased by **9.1%** between 2019 and 2023.

Specialties with the highest average income include: cardiothoracic and vascular surgery, dermatology, critical care medicine, neurosurgery, and emergency medicine.

The percentage of PAs earning more than \$200,000 has increased by **2.5%** between 2019 and 2023.

# Income by Years Practicing

## Income by Years Working as a PA

Years Working	Income								
	<\$60,000	\$60,001-\$80,000	\$80,001-\$100,000	\$100,001-\$120,000	\$120,001-\$140,000	\$140,001-\$160,000	\$160,001-\$180,000	\$180,001-\$200,000	More than \$200,000
Up to 1 year	5.4%	4.5%	22.3%	42.6%	17.8%	4.9%	1.6%	0.5%	0.3%
2 – 3 years	2.8%	3.0%	21.5%	40.4%	20.6%	7.2%	2.5%	1.0%	1.0%
4 – 5 years	1.7%	2.5%	17.7%	36.6%	23.7%	10.0%	4.0%	1.9%	2.0%
6 – 10 years	2.9%	2.8%	13.3%	29.8%	25.2%	13.3%	5.8%	3.0%	3.9%
11 – 15 years	4.7%	4.8%	11.3%	24.1%	23.9%	14.4%	7.4%	4.0%	5.2%
16 – 20 years	5.3%	5.0%	10.6%	21.0%	22.3%	15.7%	8.1%	5.1%	7.0%
Over 20 years	6.6%	4.8%	9.4%	19.0%	21.5%	16.2%	8.6%	5.5%	8.3%

## Mean and Median Income by Years Working

Years Working	Mean	Median
Up to 1 year	\$107,076	\$105,000
2 – 3 years	\$112,751	\$115,000
4 – 5 years	\$118,782	\$115,000
6 – 10 years	\$124,278	\$125,000
11 – 15 years	\$125,873	\$125,000
16 – 20 years	\$128,760	\$125,000
Over 20 years	\$129,985	\$125,000

# Changed Specialties During Career

## Number of Times PAs Changed Specialties\*

Changed Specialties	Percent
Have not changed specialties	46.6%
1 time	22.8%
2 – 3 times	23.0%
4 – 5 times	6.0%
6 – 10 times	1.6%
11 or more times	<0.1%

**\*53.4%** of PAs indicated they have changed specialties at least once during their career as a PA.

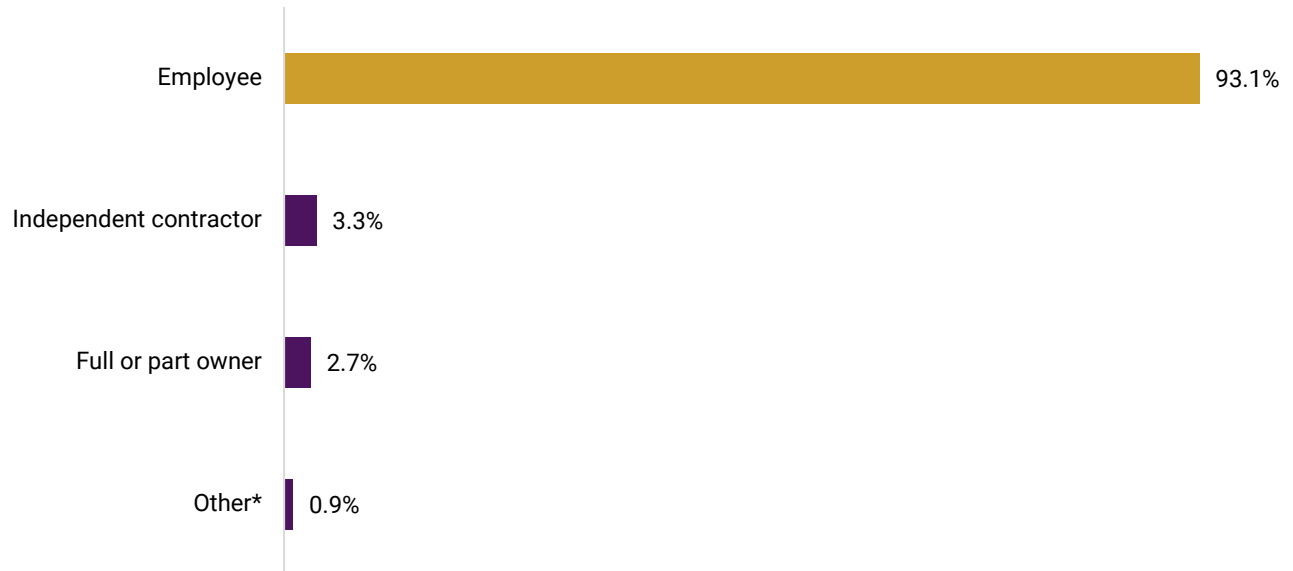
The mean number of times PAs changed specialties is 1.2 and median is 1.0.

## Number of Times Changed Specialties by Years Working as a PA

Number of Times Changed Specialties						
Years Working	0 times	1 time	2-3 times	4-5 times	6-10 times	Over 10 times
0 – 1 year	87.4%	9.7%	2.8%	0.1%	<0.1%	0.0%
2 – 3 years	68.2%	23.6%	7.9%	0.2%	<0.1%	<0.1%
4 – 5 years	59.0%	26.5%	13.8%	0.6%	<0.1%	0.0%
6 – 10 years	47.3%	27.1%	22.6%	2.8%	0.2%	<0.1%
Over 10 years	33.2%	21.5%	31.2%	10.8%	3.1%	0.1%

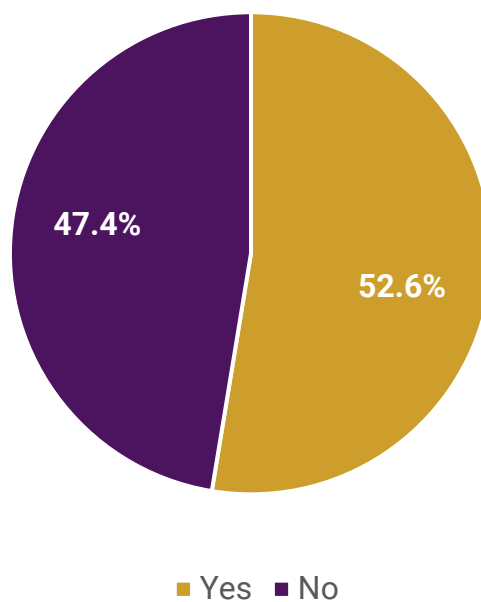
# Employment and Working After Hours

## Employment Type in Principal Clinical Position



\*Other employment types reported include: military assignment, retired but remaining certified, PA volunteer in medicine

## PAs Who Treat Patients on Weekends and/or Evenings



# Changes in Work Environment

## Changes in Past Year in Work Environment

Change	Increased	No Change	Decreased	Not Applicable
Competition for jobs with other healthcare professional	25.7%	55.4%	3.3%	15.6%
Clinical opportunities available	25.5%	50.3%	12.6%	11.6%
Quality of working conditions	12.0%	45.9%	35.4%	6.7%

# Total Educational Debt

## Current Total Educational Debt from All Undergraduate and Graduate Programs

Educational Debt	Percent
No educational debt	42.5%
Less than \$25,000	5.5%
\$25,000 - \$49,999	5.4%
\$50,000 - \$74,999	5.6%
\$75,000 - \$99,999	6.0%
\$100,000 - \$124,999	6.9%
\$125,000 - \$149,999	6.7%
\$150,000 - \$199,999	9.5%
\$200,000 or more	6.3%
Not sure	1.1%
Prefer not to answer	4.4%

# Future Data on PAs

NCCPA pursues a research agenda that focuses on its core activities and the ongoing evaluation and improvement of its exams and certification program. NCCPA is also committed to collaborating with external researchers to share data in appropriate and ethical ways to further advance the health and safety of the public or otherwise conduct useful research related to PAs. To facilitate research collaborations, NCCPA developed Policies for the Review of Requests for Data and External Research Collaboration and guidelines that describe the process external researchers must follow for submitting requests for data and how those requests will be reviewed. The policies and guidelines are provided on NCCPA's website at: [www.nccpa.net/resources/nccpa-research/](http://www.nccpa.net/resources/nccpa-research/)

This Statistical Profile will be updated and published annually. In addition, NCCPA provides supplementary reports that are currently available and updated annually. Those reports include:

- Statistical Profile of Recently Board Certified PAs
- Statistical Profile of Board Certified PAs by State
- Statistical Profile of Board Certified PAs by Specialty
- Specialty Supplement Report on Secondary Specialty

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This study is exempt from IRB review pursuant to the terms of the U.S. Department of Health and Human Service's Policy for Protection of Human Research Subjects at 45 C.F.R. §46.101(b).

NCCPA would like to acknowledge the following contributors:

Colette Jeffery, MA, Senior Research Analyst

Andrzej Kozikowski, PhD, Senior Director of Research

Kasey Puckett, MPH, Research Analyst

Mirela Bruza-Augatis, PhD, PA-C, Research Scientist

Josh Goodman, PhD, Vice President, Research and Exam Programs

Dawn Morton-Rias, EdD, PA-C, ICE-CCP, FACHE, President and CEO

Sheila Mauldin, MNM, ICE-CCP, Senior Advisor for Research and Exam Programs

Please address questions or comments to **PAProfile@nccpa.net**



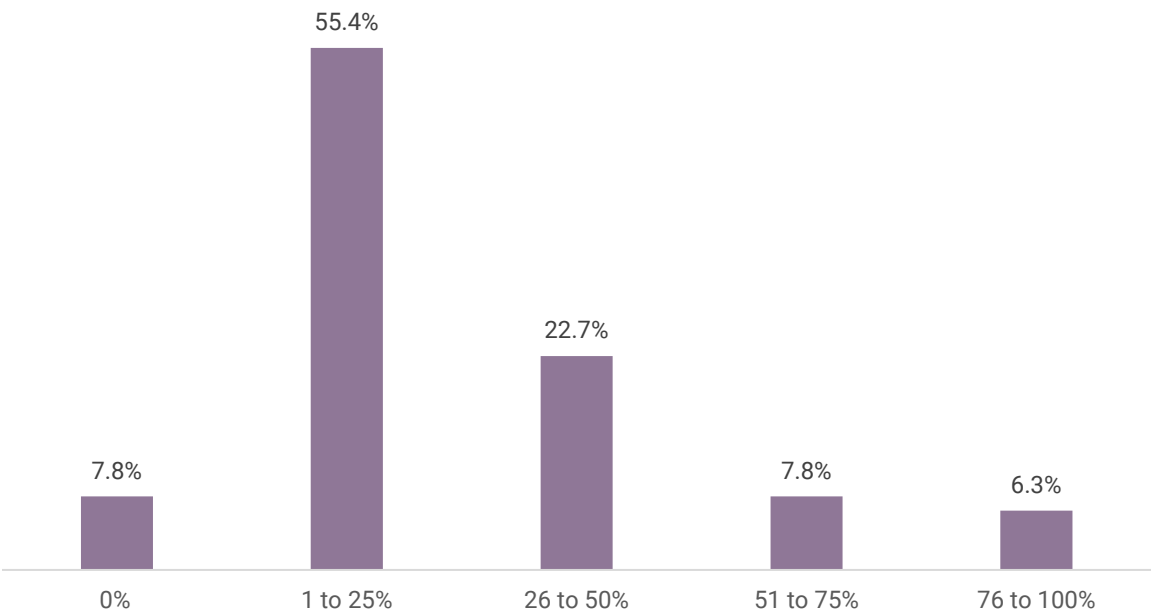
# Appendix

## Frequency of Interactions and Treatments

	Daily	Weekly	Monthly	Yearly	Less than yearly	Never
How often do you encounter (not necessarily screen, treat or refer) patients that you believe may need treatment for mental disorders in your practice?	33.4%	31.5%	18.3%	5.7%	5.2%	5.9%
How often do you screen patients for mental health disorders in your practice?	33.4%	15.8%	9.3%	4.6%	7.8%	29.1%
How often do you diagnose mental health disorders in patients in your practice?	13.4%	17.5%	14.0%	5.3%	8.0%	41.7%
How often do you initiate treatment for patients with mental disorders in your practice?	11.5%	16.5%	14.3%	5.9%	7.6%	44.2%
How often do you implement treatment maintenance for patients with mental disorders in your practice?	14.8%	15.3%	11.4%	4.6%	6.6%	47.2%
How often do you make referrals for patients with mental disorders in your practice?	11.3%	24.1%	23.6%	11.9%	11.4%	17.8%

Note: PAs were asked what proportion of patients they see in their practice for mental disorders.

## Proportion of Patients Who Need Treatment for Mental Health Disorders



The mean proportion was 26.7% and the median was 20.0%.