



Statistical Profile of Certified PAs

ANNUAL REPORT

2021

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Message from the President and CEO

Dear Colleagues:

At the beginning of each year, I anxiously await seeing the data presented in the *Statistical Profile of Certified PAs*, one of four annual reports on the PA profession. We continuously strive to enhance the data on the PA profession by updating data gathered each year. When new fields are included in the PA Professional Profile, we initially include that data in the appendix and then incorporate that information into the report after two-years of collection. I'm always interested in new data we are able to add to the report or appendix, and I also look for places where we see changes from previous years with the five-year comparisons.



The appendix for the 2021 report includes new information on postgraduate training. We have found that 5.2% of Certified PAs complete either a postgraduate residency or fellowship, and 23.6% were in emergency medicine and 15.1% were in general surgery. We also asked Certified PAs to tell us more about the care they are providing to underserved populations and found that 21.8% are working in a Medically Underserved Area or Health Professional Shortage Area.

In the five-year period from 2017-2021, the two specialty practice areas experiencing the greatest proportional growth were family medicine (+2.2%) and psychiatry (+0.6%). As our country faces increased substance abuse and mental health issues, Certified PAs are there for patients. Not surprisingly, we've seen a tremendous increase in the use of telemedicine, and 33.6% of Certified PAs use telemedicine in their practice, with the large majority using it for videoconferencing with patients for diagnosing or treating patients or for follow up visits. This trend helps to increase access to care, especially for patients in remote areas or with travel restrictions.

The data unfortunately show that Certified PAs, like other health care professionals, are experiencing higher levels of burnout. In 2020, 73.4% of Certified PAs denied having any symptoms of burnout, compared to 69.4% in 2021. Of the larger practice settings, Certified PAs working in community health centers reported the highest level of burnout symptoms (40.6%), which is particularly alarming at a time when providing care to the underserved populations is so critical. Similarly, in 2020, 34.2% of Certified PAs were considering leaving their principal clinical position due to burnout, compared to 40.2% in 2021. However, even with the current stresses in health care, overall job satisfaction continues to be strong for Certified PAs, with 70.5% reporting they are completely or mostly satisfied with their current job.

These are only a few highlights of the data provided in the report. I trust you will find it both informative and interesting. Once again, a record number of PAs earned their initial certification in 2021. These 10,950 newly Certified PAs are part of the 158,470 PAs who made this report possible. To all of you, thank you for your contributions to this report and most of all, thank you for the care you provide your patients every day.

Sincerely,

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

Dawn Morton-Rias, Ed.D., PA-C
President and CEO

About the Data Collection and Methodology

Introduction

Since 1975, NCCPA has collected data on the profession as PAs obtained their initial certification, maintained their certifications, earned and logged continuing medical education credits and passed 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 certified for less than six months. Data from that module can be found in the *Statistical Profile of Recently Certified Physician Assistants*, first published in 2014 and updated annually.

Data Editing and Analysis

Data reflected in this report include aggregated responses from PAs who were certified as of December 31, 2021 and have made updates to their Profile between January 1, 2019 and December 31, 2021. Data from 2017 has been included to provide five-year comparisons. In addition, some data were obtained from other NCCPA data collection strategies. As of December 31, 2021, there were 158,470 Certified PAs, and 133,905 provided responses for at least a portion of the Profile, yielding an overall response rate of 84.5%. In 2021 new questions were added to the Profile. Those data can be found in the appendix. The response rate for the new items is $\geq 57\%$ as of December 31, 2021. 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 2017 to 2021 throughout the report unless otherwise noted.

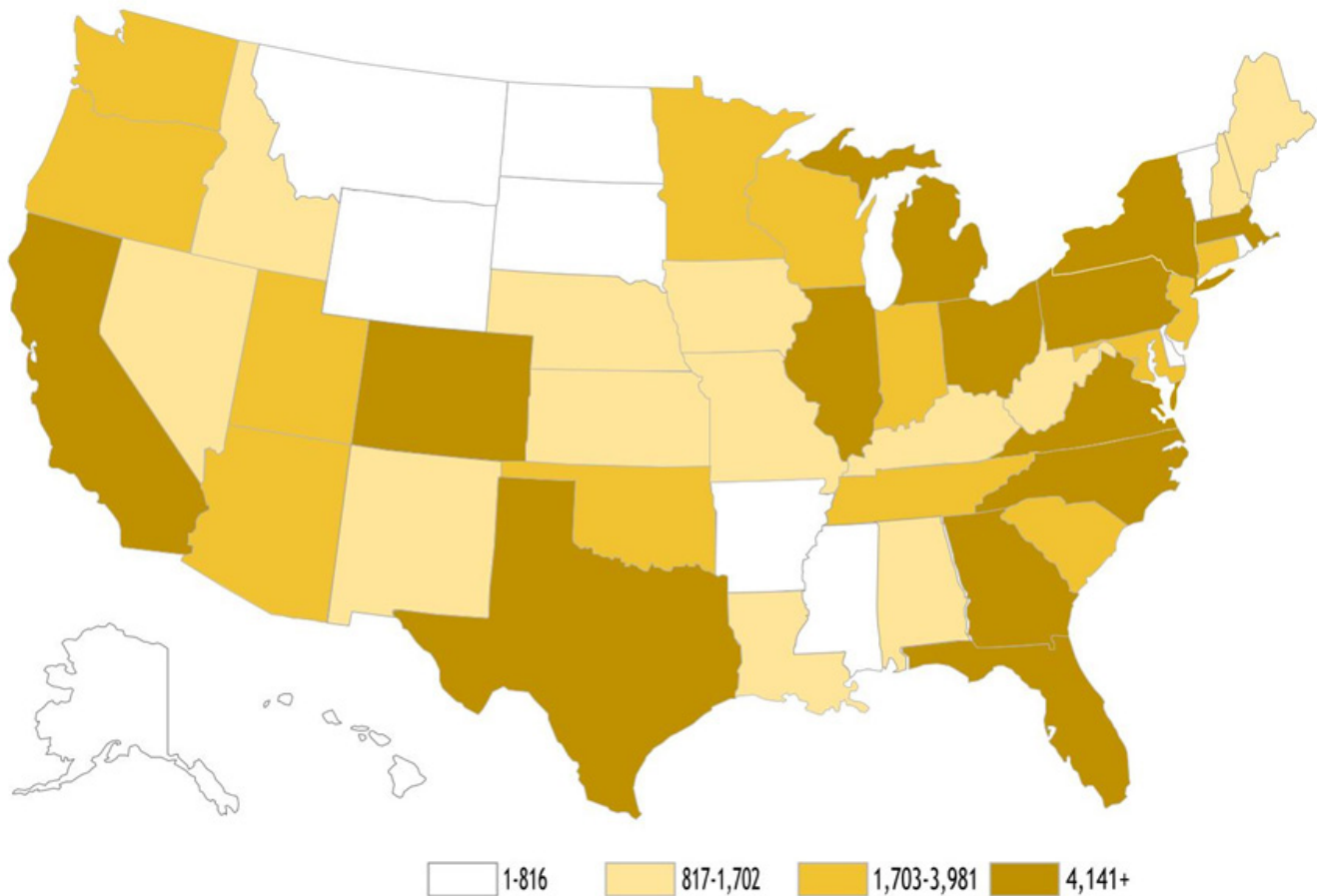
About NCCPA

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 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 185,000 PAs have been certified by NCCPA since 1975.

For more information, visit our website at: www.nccpa.net

Distribution of Certified PAs in the U.S.

2021 Distribution of Certified PAs*



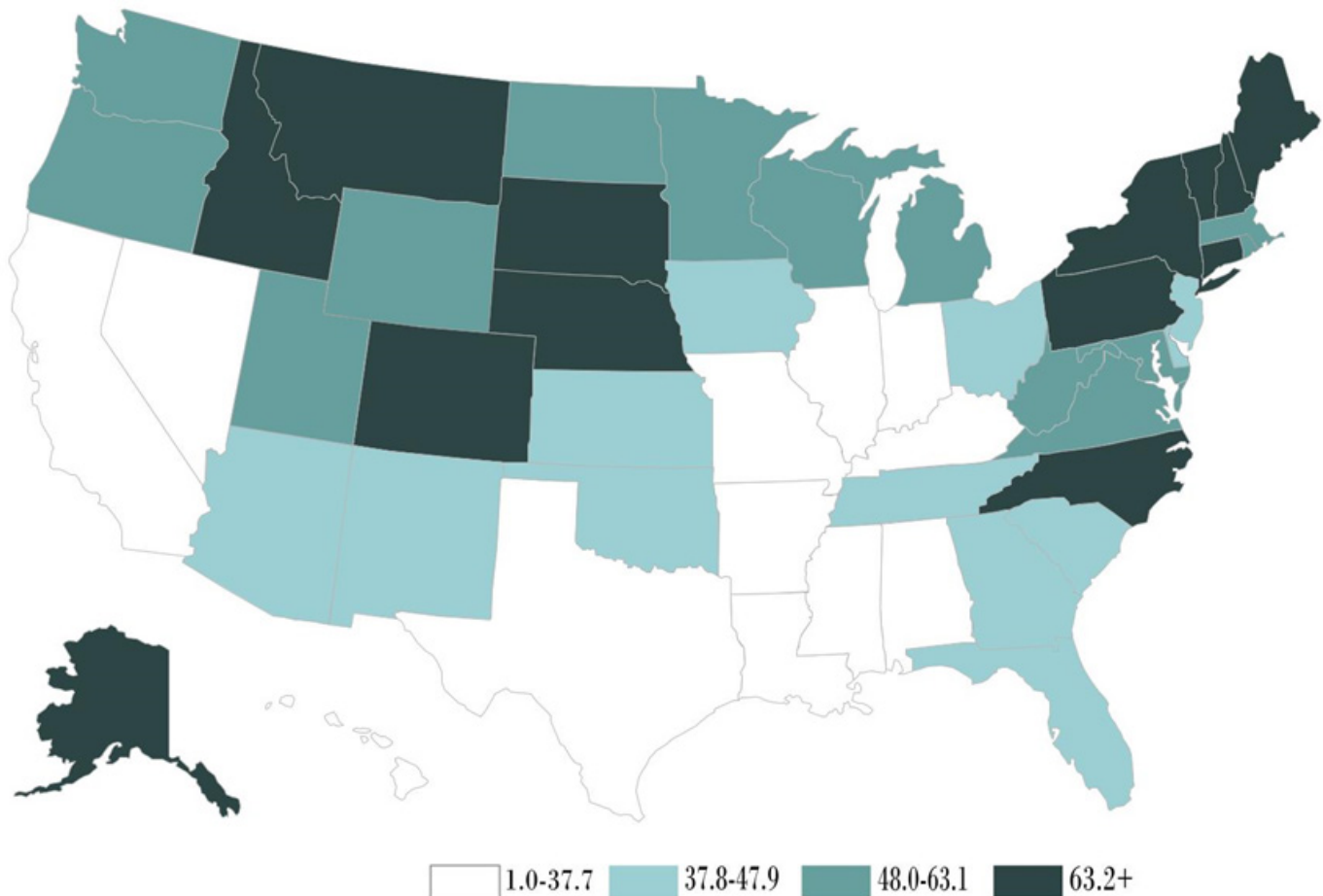
*Distribution of Certified PAs based on reported state of residence.

The PA profession grew 28.7% between 2017 and 2021, reaching 158,470 Certified PAs at the end of 2021.

Distribution of Certified PAs in the U.S.

2021 Distribution of Certified PAs per 100,000 Population*

Based on 2021 U.S. Census Bureau estimates



*Distribution of Certified PAs based on reported state of residence.



In 2021, there were 48 Certified PAs per 100,000 population in the U.S., compared to 37 in 2017. ARC-PA estimates that the number of PA educational programs will grow from 282 in March of 2022 to 317 by 2024,¹ thus increasing the number of individuals who may join the Certified PA workforce.

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

Distribution of Certified PAs in the U.S.

Certified PAs by State, Number, Percent, Rate and Rank*

State	Number	% of Total (Rank)	Rate* (Rank)	% Change 2017-2021 (Rank)**
Alabama	1,106	0.7% (35)	21.9 (49)	40.9% (6)
Alaska	655	0.4% (42)	89.4 (1)	14.1% (48)
Arizona	3,438	2.2% (17)	47.2 (28)	26.6% (33)
Arkansas	587	0.4% (43)	19.4 (50)	42.1% (5)
California	12,177	7.7% (2)	31.0 (45)	28.2% (27)
Colorado	4,141	2.6% (13)	71.2 (12)	26.7% (31)
Connecticut	2,847	1.8% (20)	79.0 (3)	34.2% (13)
Delaware	481	0.3% (45)	47.9 (27)	35.5% (11)
District of Columbia	307	0.2% (50)	45.8 (30)	14.1% (48)
Florida	10,173	6.4% (5)	46.7 (29)	31.7% (16)
Georgia	4,461	2.8% (9)	41.3 (37)	25.7% (35)
Hawaii	402	0.3% (47)	27.9 (47)	24.8% (37)
Idaho	1,365	0.9% (32)	71.8 (10)	31.1% (18)
Illinois	4,277	2.7% (10)	33.8 (43)	28.2% (27)
Indiana	2,068	1.3% (24)	30.4 (46)	46.0% (3)
Iowa	1,374	0.9% (31)	43.0 (33)	21.4% (40)
Kansas	1,311	0.8% (33)	44.7 (31)	19.4% (44)
Kentucky	1,702	1.1% (27)	37.7 (40)	26.0% (34)
Louisiana	1,471	0.9% (29)	31.8 (44)	29.3% (22)
Maine	986	0.6% (38)	71.9 (9)	20.4% (41)
Maryland	3,505	2.2% (16)	56.9 (18)	20.1% (42)
Massachusetts	4,317	2.7% (10)	61.8 (15)	33.4% (14)
Michigan	6,340	4.0% (7)	63.1 (14)	25.3% (36)
Minnesota	3,361	2.1% (18)	58.9 (17)	30.8% (19)
Mississippi	340	0.2% (49)	11.5 (51)	47.2% (2)
Missouri	1,499	0.9% (28)	24.3 (48)	37.6% (9)
Montana	816	0.5% (40)	73.9 (7)	29.3% (22)
Nebraska	1,415	0.9% (30)	72.1 (8)	28.1% (29)
Nevada	1,150	0.7% (34)	36.6 (41)	40.2% (7)
New Hampshire	991	0.6% (37)	71.3 (11)	29.0% (24)
New Jersey	3,981	2.5% (14)	43.0 (33)	42.4% (4)
New Mexico	888	0.6% (39)	42.0 (36)	18.4% (45)

Distribution of Certified PAs in the U.S.

State	Number	% of Total (Rank)	Rate* (Rank)	% Change 2017-2021 (Rank)**
New York	14,944	9.5% (1)	75.3 (4)	24.3% (38)
North Carolina	7,938	5.0% (6)	75.2 (5)	31.7% (16)
North Dakota	385	0.2% (48)	49.7 (24)	19.6% (43)
Ohio	4,626	2.9% (8)	39.3 (39)	36.1% (10)
Oklahoma	1,783	1.1% (26)	44.7 (31)	22.5% (39)
Oregon	2,217	1.4% (23)	52.2 (21)	28.8% (25)
Pennsylvania	10,639	6.7% (3)	82.1 (2)	30.0% (21)
Rhode Island	549	0.3% (44)	50.1 (22)	48.0% (1)
South Carolina	2,230	1.4% (22)	43.0 (33)	39.0% (8)
South Dakota	667	0.4% (41)	74.5 (6)	16.0% (47)
Tennessee	2,752	1.7% (21)	39.5 (38)	32.8% (15)
Texas	10,345	6.6% (4)	35.0 (42)	26.8% (30)
Utah	1,887	1.2% (25)	56.5 (19)	35.3% (12)
Vermont	423	0.3% (46)	65.5 (13)	13.1% (50)
Virginia	4,192	2.7% (10)	48.5 (25)	30.2% (20)
Washington	3,747	2.4% (15)	48.4 (26)	28.6% (26)
West Virginia	1,071	0.7% (36)	60.1 (16)	8.4% (51)
Wisconsin	3,301	2.1% (19)	56.0 (20)	26.7% (31)
Wyoming	290	0.2% (51)	50.1 (22)	16.9% (46)
TOTAL	157,918	100%	47.6	28.9%

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

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

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

1.	Alaska
2.	Pennsylvania
3.	Connecticut
4.	New York
5.	North Carolina

*Rate per 100,000 population based on 2021 U.S. Census estimate

**Percent change reflects raw change in number of Certified PAs in each state from 2017 to 2021

3,889 Certified PAs indicated they have a current military status of active duty, National Guard or Reserve.

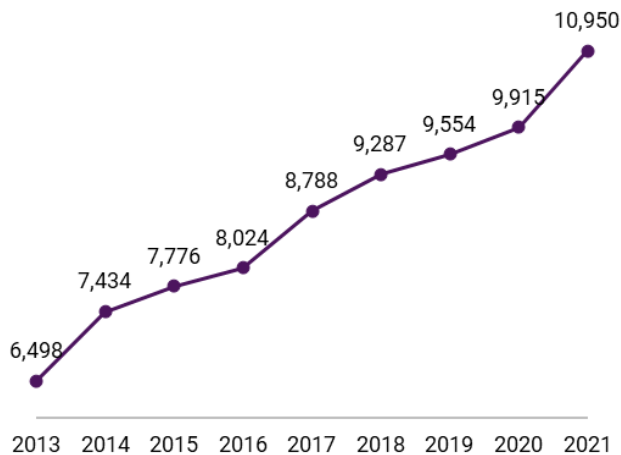
222 Certified PAs reported a military or U.S. territory address, and 329 Certified PAs indicated they are living abroad.

The top five states that experienced the largest percent growth in the number of PAs from 2017-2021:

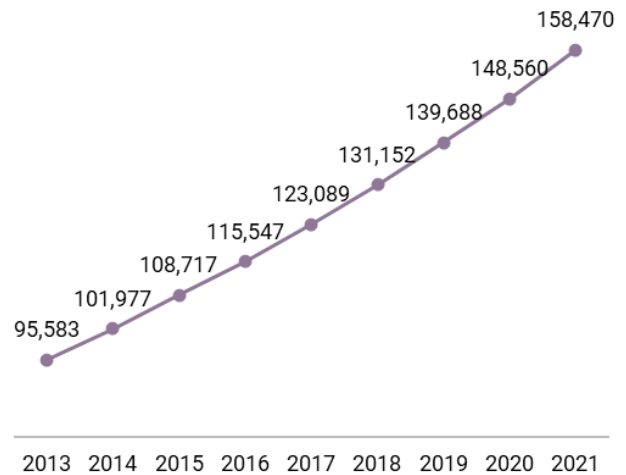
1.	Rhode Island
2.	Mississippi
3.	Indiana
4.	New Jersey
5.	Arkansas

Supply and Demand

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



Number of Certified PAs by Year



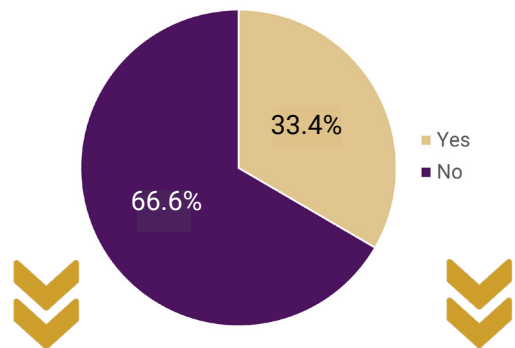
5.4% of the Certified PA workforce indicated they have plans to retire in the next five years.

Percent Increase of Certified PAs by Year

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

Percent increase is calculated using the total number of Certified PAs.

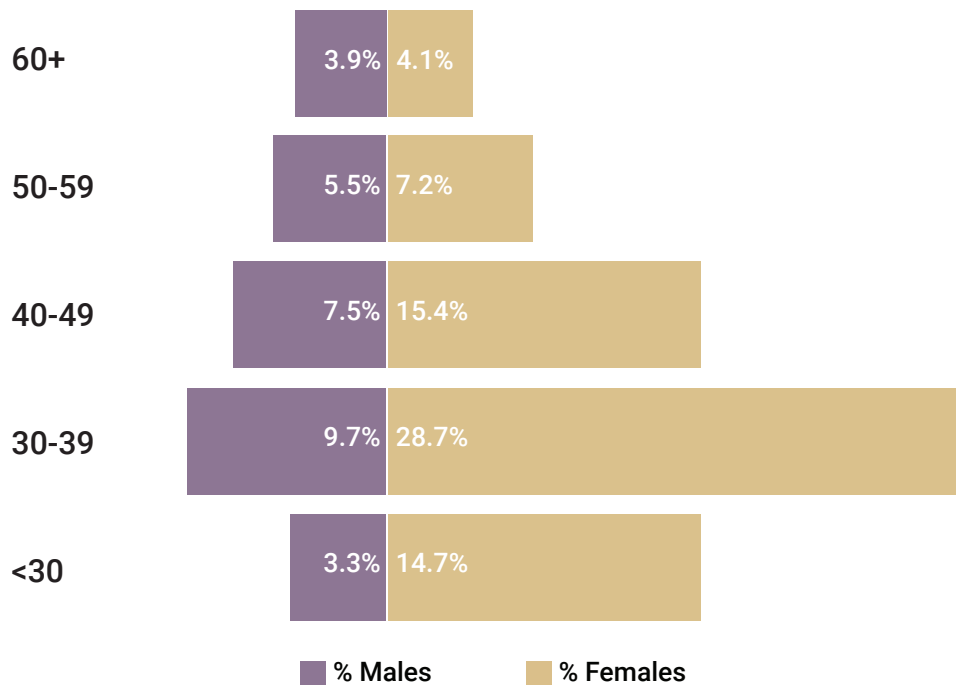
Primary Place of Employment Currently Recruiting/Hiring PAs



Number of Months Open Positions Have Remained Unfilled

Months Unfilled	Percent
1 month	40.7%
2 months	17.1%
3 months	17.5%
4 months	3.9%
5 months	1.5%
6 or more months	19.4%

Distribution of Certified PAs by Age and Gender



Gender	2021 Percent	Percent Change 2017-2021
Male	29.8%	-2.0%
Female	70.1%	1.8%
Non-binary	<0.1%	NA
Prefer not to answer	<0.1%	NA

Percent change reflects proportional change from 2017 to 2021.
NA- Gender identity choice first included in 2021.

Age Group	2021 Percent	Percent Change 2017-2021
<30	18.0%	1.2%
30-39	38.4%	0.2%
40-49	22.9%	-0.6%
50-59	12.7%	-0.5%
60+	8.0%	-0.4%

Percent change reflects proportional change from 2017 to 2021.

As with the past five years, the median age of Certified PAs remains at 38. The profession continues to be majority female. In 1975, 23.9% of the Certified PAs identified as female,¹ compared to 70.1% in 2021.

¹NCCPA data records

Race and Ethnicity of Certified PAs

Certified PAs by Race

Race	2021 Percent	Percent Change 2017-2021
White	80.6%	-0.4%
Black/African American	3.3%	-0.1%
Asian	6.2%	1.0%
Native Hawaiian/Pacific Islander	0.3%	0.0%
American Indian or Alaskan Native	0.4%	0.0%
Other	2.7%	-0.2%
Multi-race	2.2%	0.5%
Prefer not to answer	4.4%	-0.7%

Percent change reflects proportional change from 2017 to 2021.

Although the number of PAs has increased during the five-year period from 2017-2021, 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 1.0% proportional increase.

6.8% of Certified PAs indicated they are Hispanic, an increase from 6.2% in 2017.

Educational Profile of Certified PAs

Certified PAs by Highest Degree Completed

Degree	2021 Percent	Percent Change 2017-2021
Certificate program	1.0%	-0.5%
Associate's degree	0.9%	-0.5%
Bachelor's degree	15.1%	6.0%
Master's degree	80.3%	6.5%
Doctorate degree*	2.1%	1.0%
Other	0.7%	-0.2%

Percent change reflects proportional change from 2017 to 2021.

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

The average PA education program is 111 weeks in length, which includes didactic and clinical instruction.¹ 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.² This is evident as the percentage of master's degrees held by Certified PAs has increased from 73.5% in 2017 to 80.3% in 2021.³

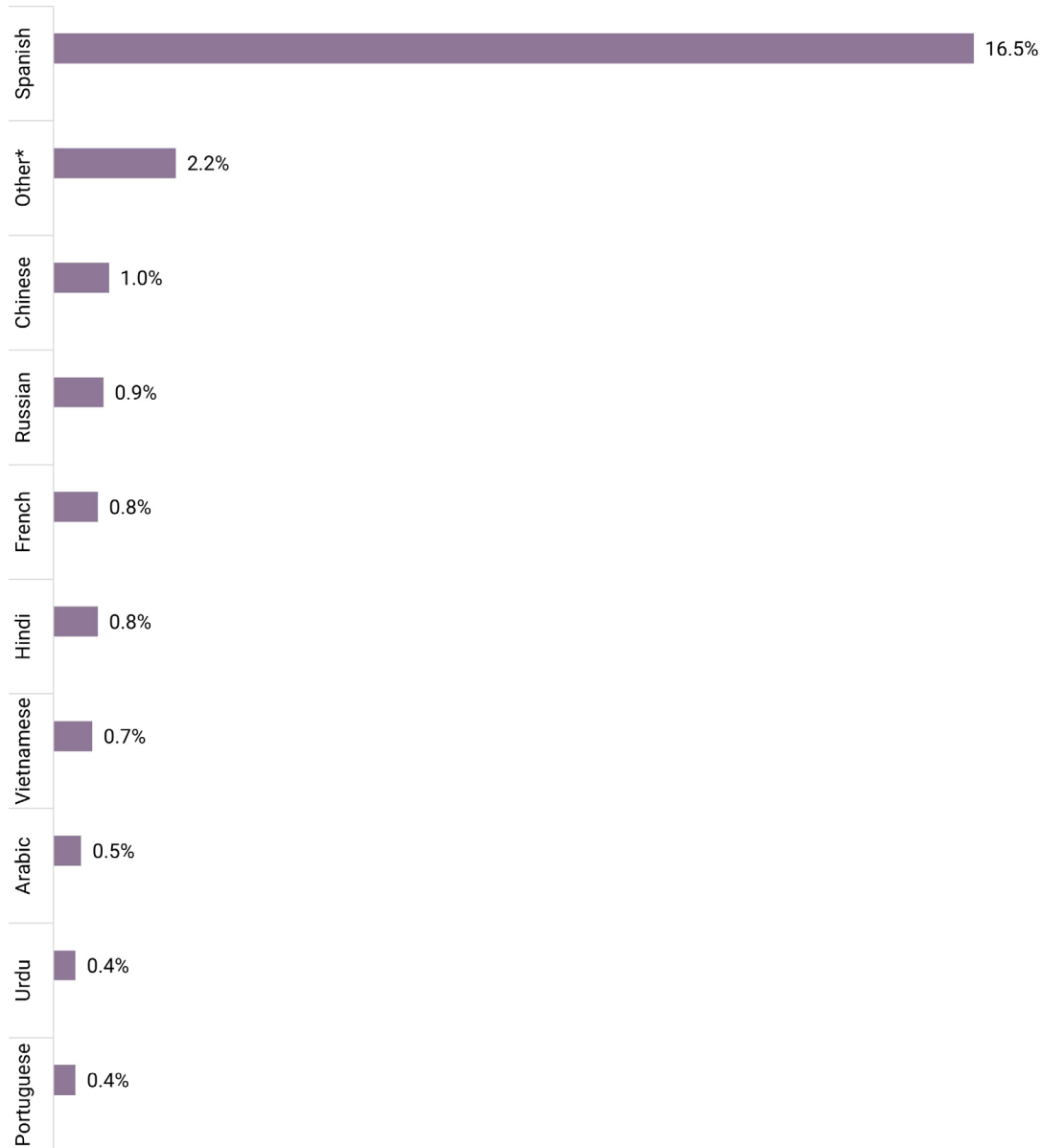
¹PAEA Physician Assistant Educational Programs in the United States, By the Numbers: Program Report 35; 2020.

²ARC-PA Accreditation Standards for Physician Assistant Education®, 5th edition. Approved September 2020, latest clarification March 2022.

³NCCPA 2017 Statistical Profile of Certified PAs, An Annual Report of the National Commission on Certification of Physician Assistants. 2018.

Language in Addition to English Spoken with Patients

Certified PAs Who Communicate with Patients in Another Language in Addition to English



Note: Percentage of Certified 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 Malayalam.

In 2021, 22.5% of Certified PAs indicated they communicate with patients in a language in addition to English; 22.7% in 2017. Of the Certified PAs who communicate with patients in another language, most do so in Spanish.

3.9% of Certified PAs speak two or more languages, in addition to English in 2017 and 2021.

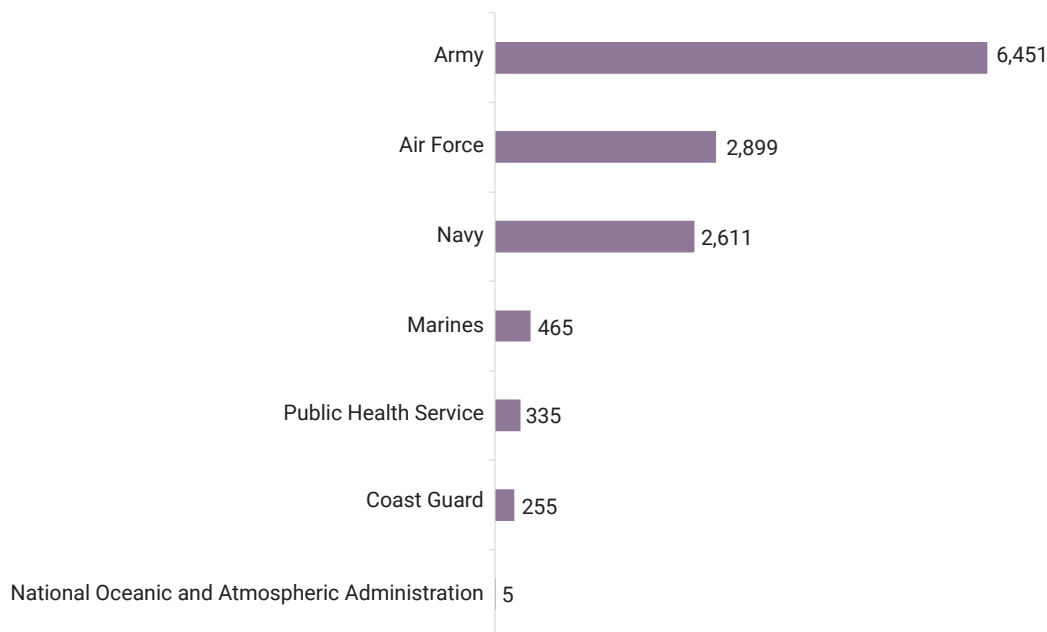
Armed Forces

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

Status	Number	Percent of Total PAs with Armed Forces Experience
Active Duty	2,287	19.1%
National Guard	1,027	8.6%
Reserve	575	4.8%
Veteran	5,307	44.4%
Retired Veteran	2,750	23.0%
Total	11,946	100%

9.0% of Certified PAs reported they have served or are currently serving in the U.S. Armed Forces.

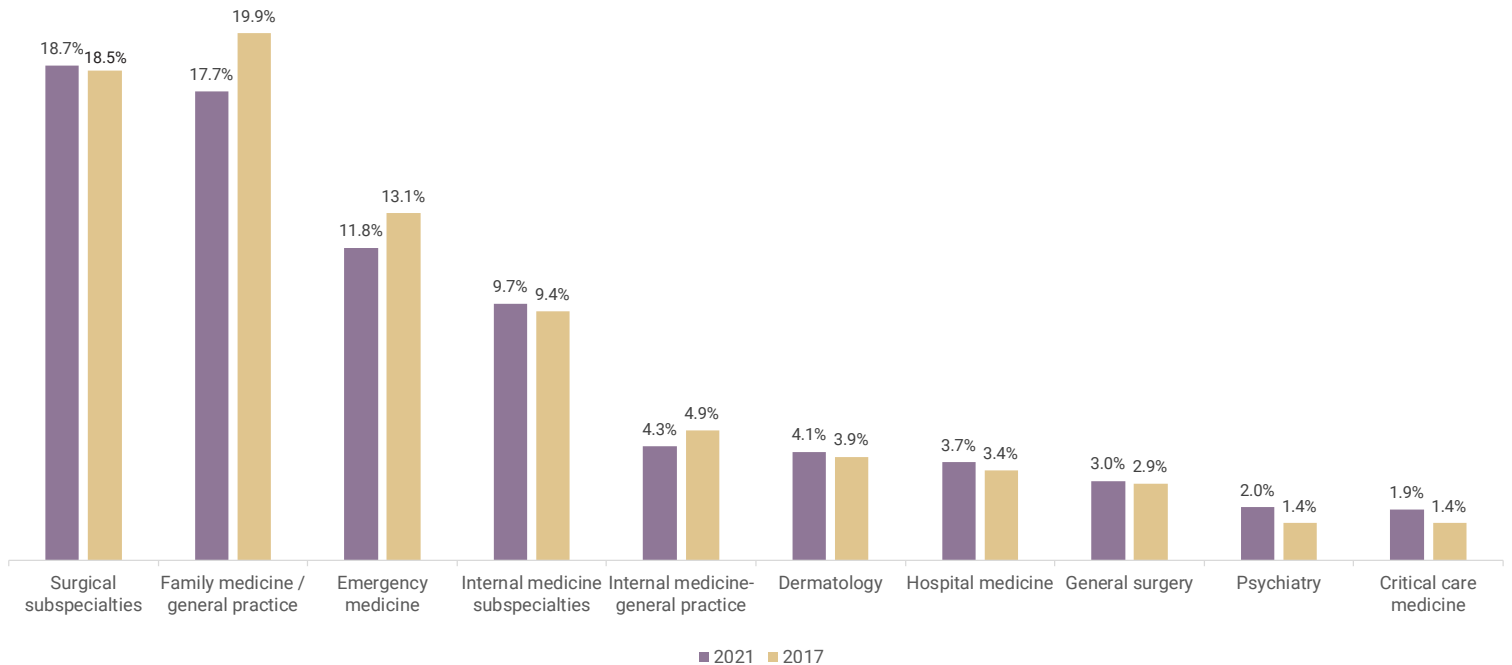
Branch of U.S. Armed Forces Served



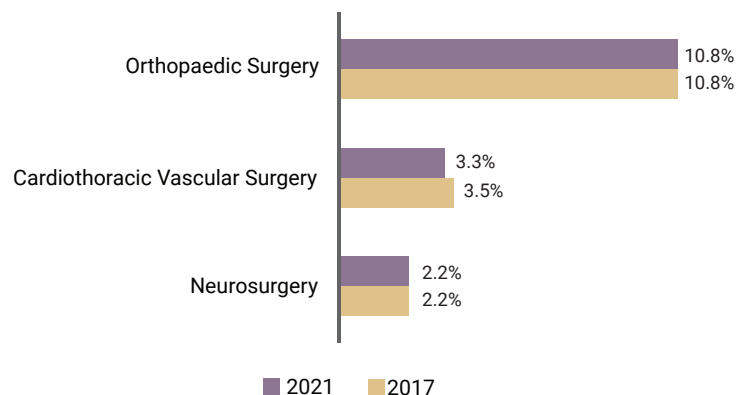
Note: PAs could select multiple branches of the armed forces, and 949 PAs indicated they served in more than one branch.

Current Practice Area of Principal Clinical Position

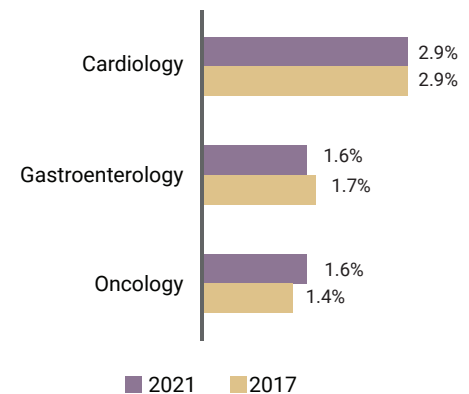
Top Certified PA Practice Areas



Top Surgical Subspecialties



Top Internal Medicine Subspecialties

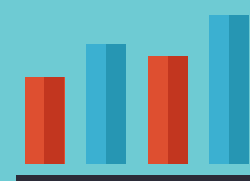


The Profile asks Certified PAs to identify their practice area and other practice characteristics for their principal clinical position and for those working in more than one clinical position, for a secondary clinical position. The data shown in this section is based only on responses to the question regarding the principal clinical position. In 2021, 10 specialties comprise over three-quarters (76.9%) of Certified PAs.

Principal Clinical Position

Number and Percent of Certified PAs by Principal Clinical Position

Area of Practice*	2021 Number	2021 Percent	Percent Change 2017-2021***
Addiction medicine	520	0.5%	0.3%
Adolescent medicine	129	0.1%	-0.1%
Anesthesiology	297	0.3%	0.0%
Critical care medicine	2,071	1.9%	0.5%
Dermatology	4,580	4.1%	0.2%
Emergency medicine	13,198	11.8%	-1.3%
Family medicine/general practice	19,700	17.7%	-2.2%
Gynecology	357	0.3%	-0.1%
Hospice and palliative medicine	138	0.1%	0.0%
Hospital medicine	4,074	3.7%	0.3%
Internal medicine - general practice	4,750	4.3%	-0.6%
Internal medicine subspecialties	10,773	9.7%	0.3%
Neurology	1,098	1.0%	0.2%
Obstetrics and gynecology	1,322	1.2%	0.0%
Occupational medicine	1,466	1.3%	-0.2%
Ophthalmology	93	0.1%	0.0%
Otolaryngology	1,133	1.0%	0.1%
Pain medicine	1,595	1.4%	0.2%
Pathology	5	<0.1%	0.0%
Pediatrics-general practice	2,005	1.8%	-0.2%
Pediatric subspecialties	1,416	1.3%	0.1%
Physical medicine/rehabilitation	622	0.6%	-0.1%
Preventive medicine/public health	155	0.1%	-0.1%
Psychiatry	2,262	2.0%	0.6%
Radiation oncology	198	0.2%	0.0%
Radiology	841	0.8%	0.1%
Surgery-general	3,387	3.0%	0.1%
Surgical subspecialties	20,819	18.7%	0.2%
Urology	1,126	1.0%	0.0%
Other**	11,289	10.1%	1.7%
TOTAL	111,428	100%	NA



Most specialties increased in size from 2017 to 2020, but a few decreased.

The five specialties with the largest number of PAs:

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

*Clinical specialties are listed in alphabetical order.

**Most frequent responses include: urgent care, interventional radiology, sleep medicine, trauma, bariatric surgery, correctional medicine, functional medicine.

***Percent change reflects proportional change from 2017 to 2021

Primary Care and Non-Primary Care by State

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

State	Primary care* (%)	Non-primary care (%)	Percent change in primary care 2017-2021**
Alabama	150 (20.8%)	572 (79.2%)	-1.6%
Alaska	232 (47.4%)	257 (52.6%)	-5.9%
Arizona	625 (25.8%)	1,800 (74.2%)	-3.6%
Arkansas	115 (29.6%)	274 (70.4%)	-1.4%
California	2,347 (29.0%)	5,755 (71.0%)	-3.4%
Colorado	950 (31.4%)	2,075 (68.6%)	-5.4%
Connecticut	285 (14.4%)	1,692 (85.6%)	-1.5%
Delaware	52 (16.3%)	267 (83.7%)	-3.4%
District of Columbia	44 (21.1%)	165 (78.9%)	-3.5%
Florida	1,364 (19.4%)	5,652 (80.6%)	-2.3%
Georgia	631 (20.0%)	2,517 (80.0%)	-3.6%
Hawaii	102 (35.7%)	184 (63.3%)	-0.7%
Idaho	364 (35.6%)	659 (64.4%)	-2.3%
Illinois	646 (22.2%)	2,269 (77.8%)	-2.1%
Indiana	224 (16.3%)	1,148 (83.7%)	-1.2%
Iowa	365 (35.1%)	676 (64.9%)	-5.2%
Kansas	324 (33.4%)	647 (66.6%)	-3.8%
Kentucky	312 (25.4%)	915 (74.6%)	-3.3%
Louisiana	156 (14.8%)	897 (85.2%)	-3.4%
Maine	175 (24.4%)	541 (75.6%)	-1.9%
Maryland	377 (15.2%)	2,109 (84.8%)	-2.8%
Massachusetts	473 (15.8%)	2,530 (84.2%)	-2.4%
Michigan	1,086 (23.7%)	3,491 (76.3%)	-2.7%
Minnesota	662 (26.1%)	1,871 (73.9%)	-3.4%
Mississippi	49 (22.2%)	172 (77.8%)	0.1%
Missouri	222 (20.9%)	839 (79.1%)	-1.8%
Montana	207 (33.4%)	413 (66.6%)	-2.4%
Nebraska	393 (36.7%)	678 (63.3%)	-4.9%
Nevada	246 (30.7%)	555 (69.3%)	-2.0%
New Hampshire	161 (21.0%)	605 (79.0%)	-5.0%
New Jersey	405 (15.2%)	2,251 (84.8%)	-1.4%
New Mexico	225 (34.0%)	437 (66.0%)	-5.9%
New York	1,607 (15.9%)	8,488 (84.1%)	-2.3%

Primary Care and Non-Primary Care by State

State	Primary care* (%)	Non-primary care (%)	Percent change in primary care 2017-2021**
North Carolina	1,499 (26.8%)	4,100 (73.2%)	-2.6%
North Dakota	127 (44.1%)	161 (55.9%)	-5.1%
Ohio	446 (13.6%)	2,825 (86.4%)	-1.9%
Oklahoma	380 (28.8%)	940 (71.2%)	-2.8%
Oregon	548 (33.1%)	1,107 (66.9%)	-0.1%
Pennsylvania	1,509 (19.7%)	6,169 (80.3%)	-1.7%
Rhode Island	58 (16.5%)	293 (83.5%)	0.2%
South Carolina	342 (22.7%)	1,166 (77.3%)	-2.0%
South Dakota	206 (39.8%)	312 (60.2%)	-4.3%
Tennessee	511 (26.8%)	1,394 (73.2%)	-5.9%
Texas	2,273 (31.1%)	5,045 (68.9%)	-4.3%
Utah	405 (30.1%)	939 (69.9%)	-2.5%
Vermont	93 (29.2%)	225 (70.8%)	-2.2%
Virginia	639 (22.1%)	2,250 (77.9%)	-2.5%
Washington	795 (29.6%)	1,889 (70.4%)	-2.4%
West Virginia	252 (31.3%)	553 (68.7%)	-5.3%
Wisconsin	527 (22.0%)	1,869 (78.0%)	-3.9%
Wyoming	99 (42.7%)	133 (57.3%)	-7.8%
TOTAL	26,285 (23.7%)	84,771 (76.3%)	-3.0%

**Percent change reflects proportional change from 2017 to 2021.

23.7% of Certified PAs work in primary care, compared to 26.7% in 2017. Although the overall percentage of the Certified 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 Certified PAs entered the workforce.

*Primary care includes family medicine/general practice, internal medicine general, and pediatrics general. The total counts of Certified 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.

Practice Setting

Number of Certified PAs by Principal Clinical Practice Setting

Practice setting	2021 Number	2021 Percent	Percent change 2017-2021****
Hospital	46,296	41.6%	1.6%
Office-based private practice	41,651	37.4%	-3.2%
Urgent care*	6,007	5.4%	2.2%
Federal government facility/hospital/unit**	5,444	4.9%	-0.7%
Community health center	3,239	2.9%	-0.2%
Other***	1,892	1.7%	--
Rural health clinic	1,765	1.6%	-0.5%
School-based or college-based health center or school clinic	847	0.8%	-0.1%
Public or community health clinic	831	0.7%	-0.5%
Occupational health setting	808	0.7%	-0.3%
Extended care facility/nursing home	711	0.6%	-0.1%
Behavioral/mental health facility	646	0.6%	0.1%
Ambulatory surgical center	338	0.3%	-0.1%
Rehabilitation facility	303	0.3%	0.0%
Retail clinic	222	0.2%	0.1%
Free clinic	172	0.2%	0.0%
Home health care agency	152	0.1%	0.0%
Hospice	6	<0.1%	0.0%

****Percent change reflects proportional change from 2017 to 2021.

*Urgent care appeared on the profile for the first time in 2016; therefore, the increase may be inflated as PAs were provided the opportunity to select this option as additional responses were gathered.

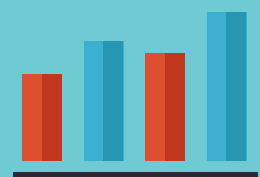
**3,889 Certified PAs indicated they have a current military status of active duty, national guard, or reserve in 2021.

79.0% of Certified PAs work in a hospital or office-based private practice setting.

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

The mean and median number of hours worked per week for all Certified PAs in their principal clinical position is 40. The mean is a slight decrease from 2017 (40.5).

Throughout all practice settings, the average number of patients seen per week for all full-time (40+ hours per week) Certified PAs who see patients in their principal clinical position is 71. This is a decrease from 2017 when the average was 73.



The estimated number of patients seen each week by all clinically practicing Certified PAs is 9.9 million.

The number of patients seen by Certified PAs is estimated based on the total number of Certified 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 position and secondary eliminating outliers in the data.

Patient Panels

Number of Patients in Panels with PA as the Primary Provider

Number of patients in panel	Number	Percent
1-25	7,077	20.3%
26-50	5,376	14.1%
51-75	1,337	3.5%
76-100	4,722	12.4%
101-150	1,309	3.4%
151-200	2,447	6.4%
201-300	2,497	6.6%
301-400	1,231	3.2%
401-500	2,476	6.5%
Over 500	8,927	23.5%
TOTAL	38,029	100%

34.2% (over 38,000) of clinically practicing Certified PAs indicated they have a patient panel for which they are the primary provider.



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

Telemedicine

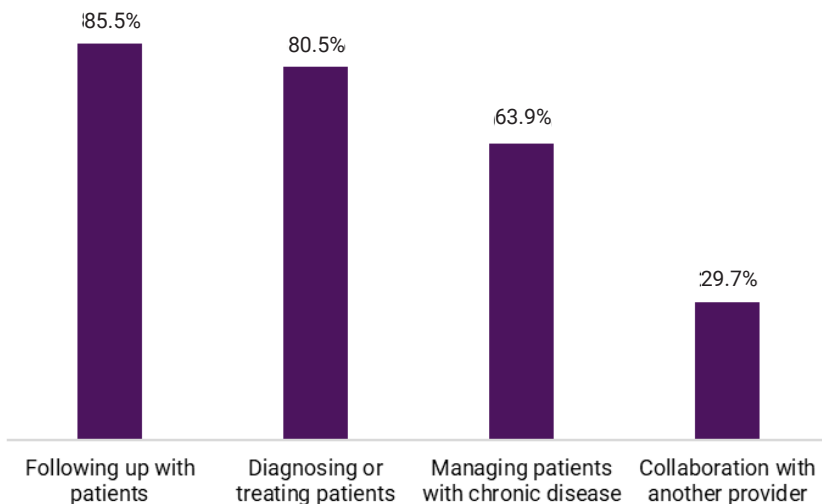
Hours per Week Participating in Telemedicine

Hours participating in telemedicine	2021 Percent	Percent change 2017-2021*
Less than 10	76.3%	-11.0%
10-19	13.4%	6.8%
20-29	5.8%	3.2%
30-39	2.7%	1.0%
40 or more	1.8%	0.0%

*Percent change reflects proportional change from 2017 to 2021.

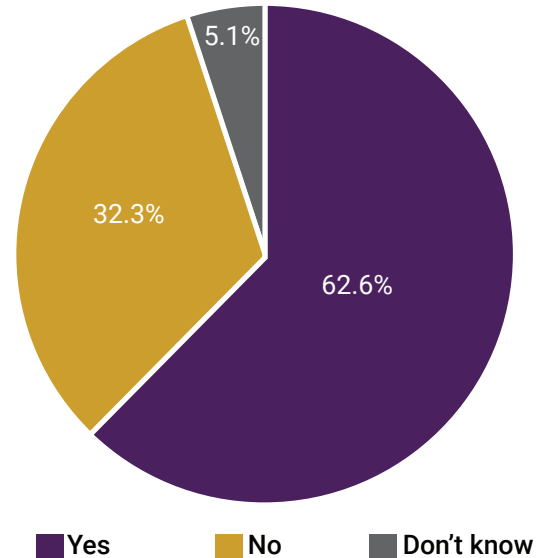
In 2021, 33.6% of Certified PAs participated in telemedicine in their practice compared to 8.4% in 2017.

Functions of Telemedicine



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

Practice or Institution Participates in Telemedicine Services



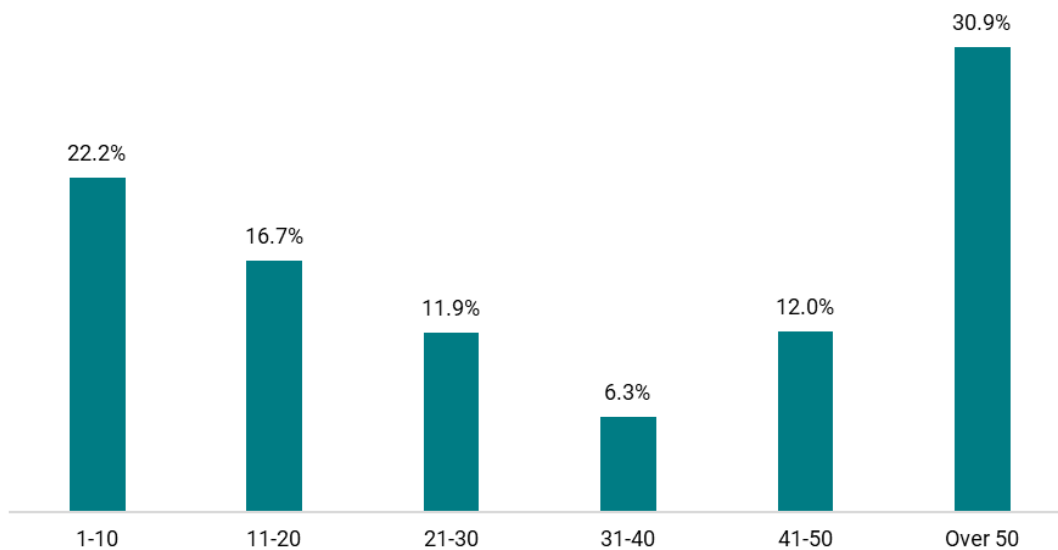
Note: Percentage of Certified PAs who indicated they did not participate in telemedicine, and asked if their practice or institution participates.

Modalities PAs Use When Participating in Telemedicine:

- Videoconferencing: 89.1%
- Remote patient monitoring: 18.4%
- Storing and forwarding data: 8.7%

Prescribing

Average Number of Prescriptions/Refills Written per Week



95.6% of clinically practicing Certified PAs prescribe pharmacologic agents for patients. The median number of prescriptions written by Certified PAs per week is 30.

Plans to Leave Clinical Position

Certified PAs planning to leave principal clinical position in the next 12 months:

2021	2017
7.8%	6.2%

Factors Influencing Certified PAs Planning to Leave Principal Clinical Position

Factor listed as “very important”	2021 Number	2021 Percent	Percent change 2017-2021**
Seeking another clinical PA position	5,157	59.6%	-4.2%
Feelings of professional burnout	3,480	40.2%	NA*
Insufficient wages given the workload and responsibilities	3,350	38.7%	1.7%
Relocating to another geographic area	2,353	27.2%	-5.0%
Work is not professionally challenging or satisfying	2,165	25.0%	-1.5%
Other	1,843	21.3%	-3.3%
Work responsibilities would interfere with my ability to care for my family	1,795	20.8%	5.1%
Plan to retire from active workforce	980	11.3%	1.7%
Want to pursue additional education	579	6.7%	-1.4%
Desire a non-clinical health-related position	568	6.6%	2.3%
Desire a position outside of health care	471	5.4%	1.6%
Want to work in a health professional training program position	390	4.5%	-0.4%
My health does not allow me to continue working as a PA	181	2.1%	0.0%

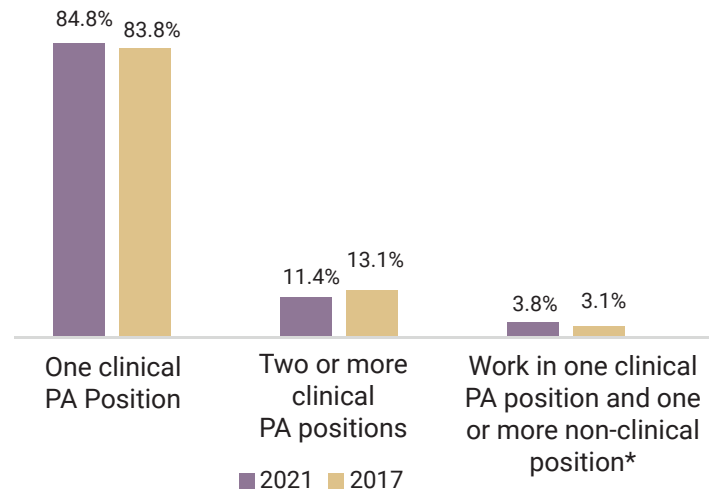
**Percent change reflects proportional change from 2017 to 2021.

*Factor was not included in the 2017 Profile.

Note: PAs could choose multiple factors.

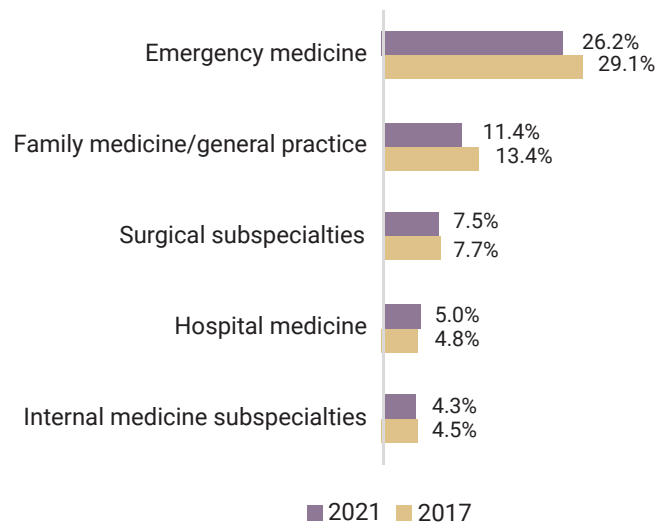
Distribution Working in More than One Position

Distribution of Certified PAs Working in More than One Position



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

Top Five Secondary Specialty Areas of Certified PAs with More than One Clinical Position



In 2021, 15.7% of Certified PAs who were working in more than one clinical position were working in a primary care position in their secondary position, compared to 18.6% in 2017.

Distribution Working in More than One Position

Reasons Certified PAs are Employed in More than One Clinical Position

	2021	Percent change from 2017-2021*
Supplement earnings from principal clinical position	45.2%	1.2%
Enjoy working in a variety of clinical settings	26.4%	-0.4%
To gain experience in a different aspect of clinical care	18.0%	-0.9%
Other (e.g., financial, military service, gain experience, etc.)	8.6%	0.0%
Was not offered full-time work in my principal clinical PA position	1.9%	0.2%

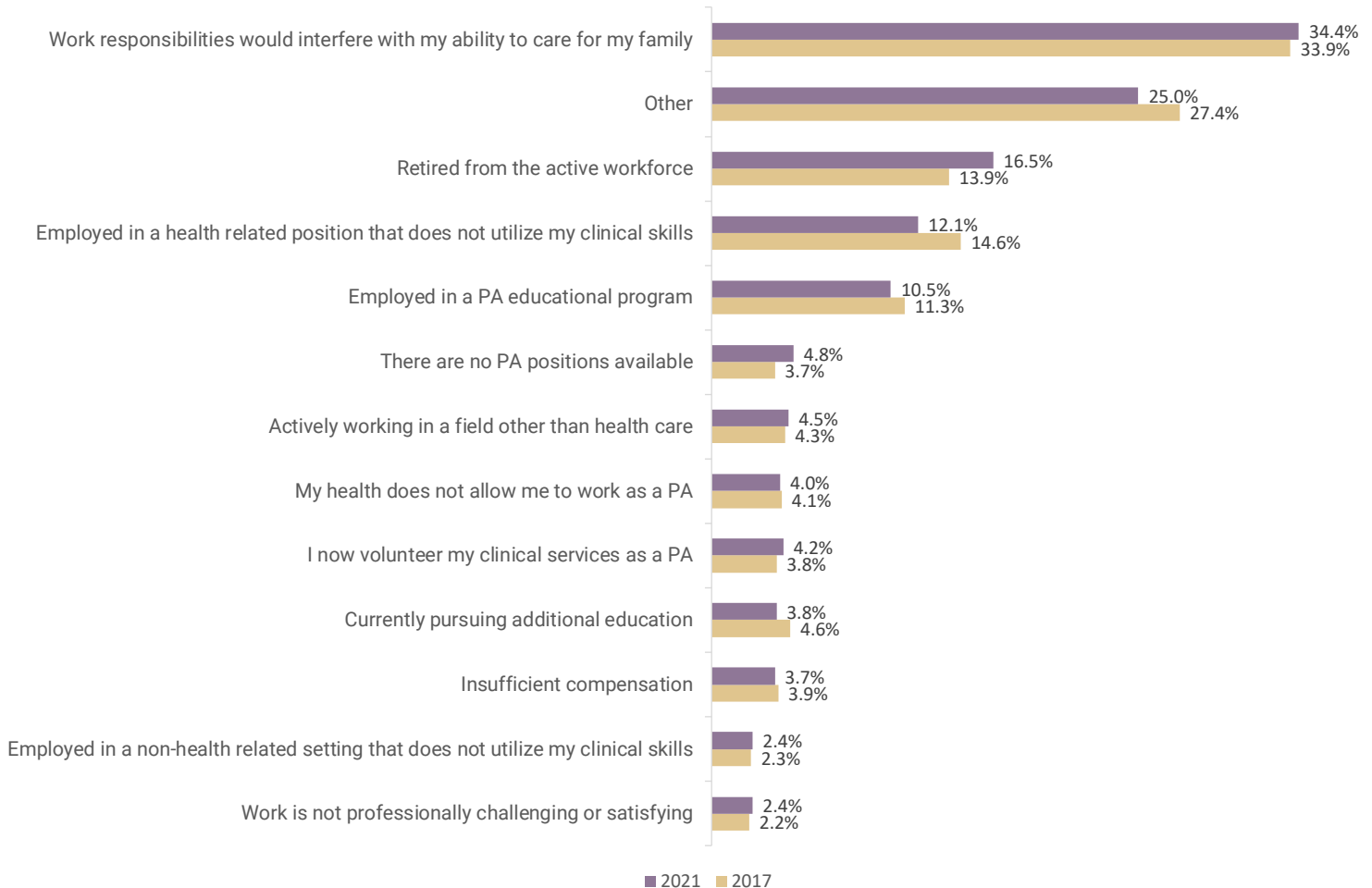
*Percent change reflects proportional change from 2017 to 2021.



Certified PAs who work in a secondary clinical position work an average of 11.1 hours per week (10.9 hours in 2017) and see an average of 22 patients per week (same as 2017) in their secondary clinical position.

Certified PAs Not in Clinical Practice

Why Certified PAs Do Not Practice Clinically



Note: PAs could select multiple reasons. Percentages are the percent of Certified PAs who indicated they did not practice clinically and chose each reason.

The vast majority of Certified PAs are engaged in clinical practice. In 2021, 93.9% indicated they were practicing clinically (95.4% in 2017).

In the last five years, the most common reason for not practicing clinically has been family responsibilities. "Other" reasons Certified PAs are not clinically practicing include: military duty in a non-clinical setting, own or partner in a practice, leadership or administrative job, and burnout from previous position.

Job Satisfaction

Satisfaction with Present Job

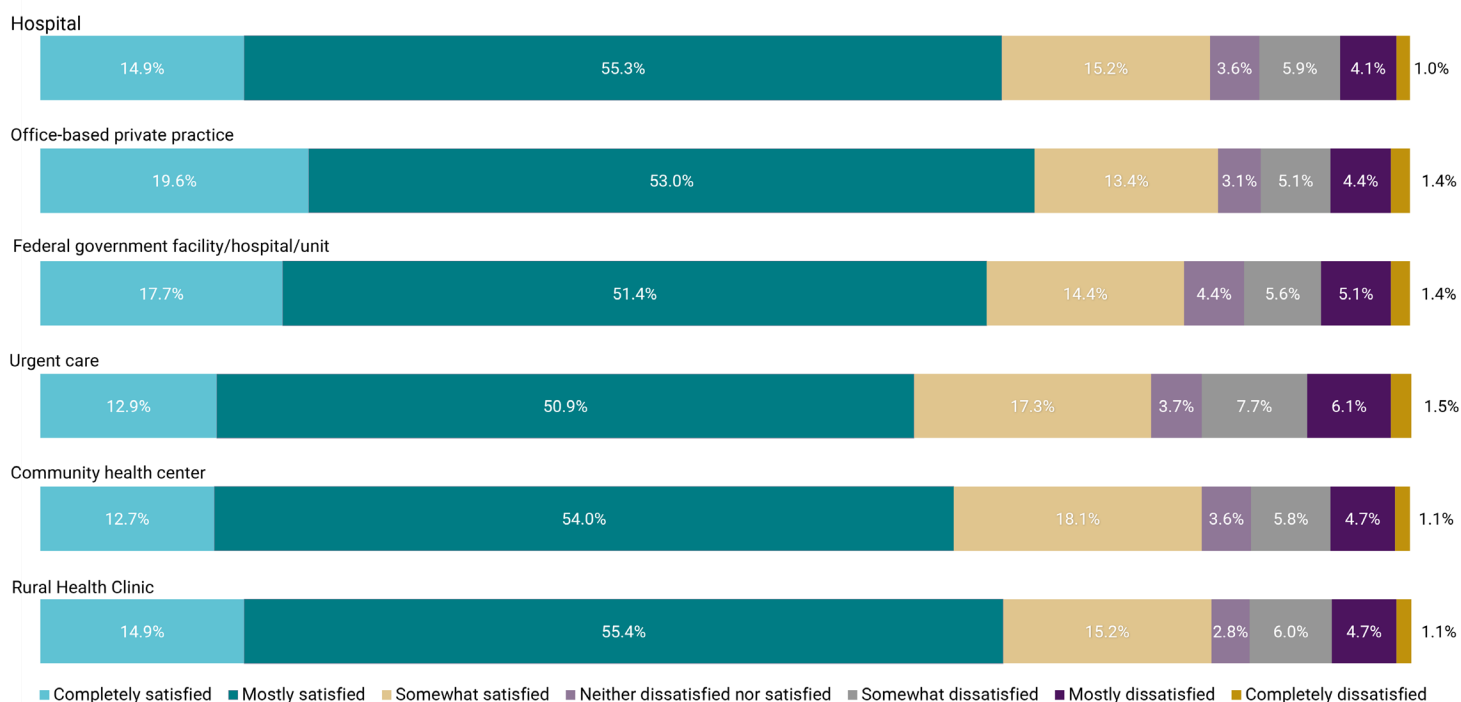
Level of Satisfaction	Percent
Completely satisfied	16.8%
Mostly satisfied	53.7%
Somewhat satisfied	14.6%
Neither dissatisfied nor satisfied	3.5%
Somewhat dissatisfied	5.6%
Mostly dissatisfied	4.5%
Completely dissatisfied	1.2%



70.5% of all Certified PAs indicated they are completely or mostly satisfied with their present job.

Job Satisfaction

Satisfaction with Present Job by Top Practice Settings*



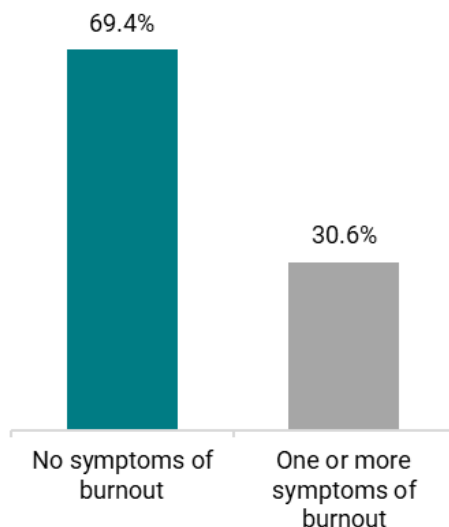
*Includes practice settings with greatest number of Certified PAs in 2021.

Certified PAs working in an office-based private practice reported the highest satisfaction with their present job. 72.6% of Certified PAs who work in an office-based private practice indicated they are completely or mostly satisfied with their job.

15.3% of Certified PAs who work in urgent care reported some level of dissatisfaction with their present job, but 63.8% said they were completely or mostly satisfied.

Burnout

Feeling of Burnout



Burnout Scale ^{1, 2}	Percent
1= I enjoy my work; I have no symptoms of burnout.	15.1%
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.	54.3%
3= I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.	23.6%
4= The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.	5.8%
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.	1.3%

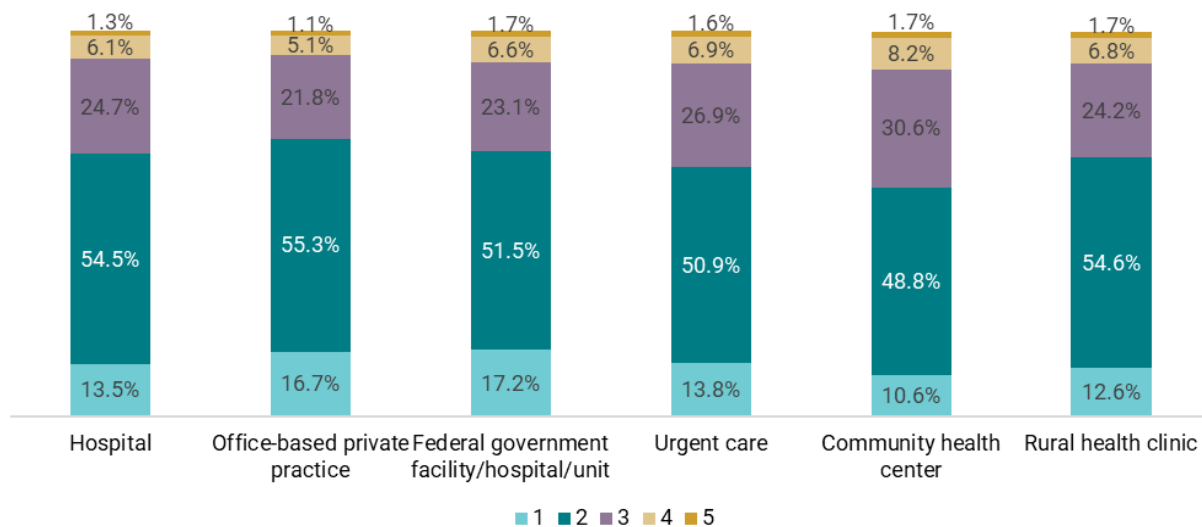
Certified PAs were asked to rate their level of burnout based on their own definition of burnout. The median burnout score was 2.0. Overall, 30.6% of Certified PAs feel some level of burnout.

¹Rohland 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.

²Dolan 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.

Burnout

Level of Burnout by Top Practice Settings



Of the six largest practice settings, Certified PAs working in community health centers reported experiencing the highest percentage of some level of burnout (40.6%), while office-based private practice Certified PAs reported the lowest burnout (28.0%).

Income

Total Income in Last Calendar Year from PA Positions

Income Range	2021	Percent Change 2017-2021*
Less than or equal to \$60,000	4.7%	-1.0%
\$60,001-\$70,000	1.9%	-0.5%
\$70,001-\$80,000	2.7%	-2.3%
\$80,001-\$90,000	6.1%	-6.1%
\$90,001-\$100,000	12.2%	-4.7%
\$100,001-\$110,000	16.7%	-0.5%
\$110,001-\$120,000	15.1%	2.2%
\$120,001-\$130,000	12.1%	3.2%
\$130,001-\$140,000	8.3%	2.9%
\$140,001-\$150,000	5.9%	2.2%
\$150,001-\$160,000	4.0%	1.4%
\$160,001-\$170,000	2.6%	1.0%
\$170,001-\$180,000	1.9%	0.6%
\$180,001-\$190,000	1.4%	0.5%
\$190,001-\$200,000	1.2%	0.4%
More than \$200,000	3.3%	1.2%

*Percent change reflects proportional change from 2017 to 2021.

Mean and Median Income

	2021	2017
Mean	\$117,381	\$107,718
Median	\$115,000	\$105,000

The average income for Certified PAs increased by 9.0% between 2017-2021.

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

The percentage of Certified PAs earning more than \$200,000 has increased by 1.2% between 2017 and 2021.

Future Data on Certified 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](https://www.nccpa.net/resources/nccpa-research/Collaboration) and [guidelines](https://www.nccpa.net/resources/nccpa-research/guidelines) that describe the process external researchers will need to 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/

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 Certified Physician Assistants*
- *Statistical Profile of Certified Physician Assistants by State*
- *Statistical Profile of Certified Physician Assistants by 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 45C.F.R. §46.101(b).

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Appendix

Postgraduate Training

Certified PAs Who Completed a Postgraduate Training Program: Area of Training

Area of Training	Number	Percent
Addiction medicine	14	0.2%
Anesthesiology	6	0.1%
Critical care medicine	279	4.8%
Dermatology	300	5.1%
Emergency medicine	1,380	23.6%
Family medicine/general practice	513	8.8%
Hospice and palliative medicine	6	0.1%
Hospital medicine	162	2.8%
Internal medicine - general practice	98	1.7%
Internal medicine - subspecialties	190	3.2%
Neurology	34	0.6%
Obstetrics and gynecology	82	1.4%
Occupational medicine	49	0.8%
Ophthalmology	4	0.1%
Otolaryngology	42	0.7%
Pain medicine	13	0.2%
Pathology	1	<0.1%
Pediatrics- general	69	1.2%
Pediatrics- subspecialties	172	2.9%
Physical medicine/rehabilitation	4	0.1%
Preventive medicine/public health	12	0.2%
Psychiatry	157	2.7%
Radiation oncology	1	<0.1%
Radiology	5	0.1%
Surgery- general	886	15.1%
Surgery- subspecialties	804	13.7%
Urology	15	0.3%
Other*	553	9.5%
TOTAL	5,851	100%

*Top "other" responses include: hepatology, aviation/aerospace medicine, integrative medicine and trauma.

5.2% of Certified PAs indicated they completed a PA postgraduate training program (PA residency or fellowship) after graduating from their PA program.

Certified PAs Providing Care to Underserved Populations

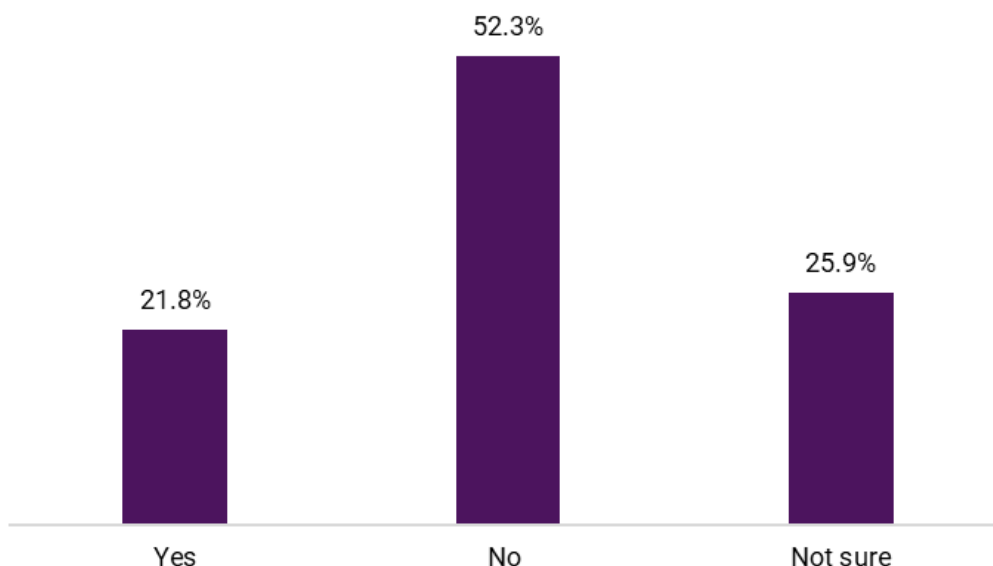
Certified PAs were presented with the following information:

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).

21.8% of Certified PAs provide care to patients in a designated HPSA or MUA.

Provide Care to Patients in a Designated HPSA or MUA



Working with Other Health Professionals

Type of Health Professional	Percent
I am a solo practitioner, with an off-site licensed physician supervisor/collaborator	4.5%
Physician(s)	94.6%
Other PAs	79.1%
Advanced practice nurse(s) (nurse practitioners, nurse midwives, etc...)	68.7%
Registered nurse(s)	66.6%
Other levels of nurses (LPN, CAN)	24.0%
Mental health provider(s) (social workers, psychologists, etc...)	39.6%
Dentists or dental hygienists	6.0%
Pharmacists	39.7%
Radiology technicians	35.5%
Physical therapists	14.5%
Occupational therapists	11.1%
Speech therapists	8.1%

Note: PAs could select multiple health professionals.

99.7% of clinically practicing Certified PAs indicated that they work with other health professionals in their principal clinical position.