

# PA Workforce 2017: An Update

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# Data Sources

## 2017 AAPA Salary Survey

- National cross-sectional survey conducted by the AAPA in 2017.
- Sent via email link to 70,846 PAs in February 2017 with subsequent reminders sent. Participants were also recruited via the AAPA website, e-newsletters, and social media.
- 7,225 PAs responded with an overall margin of error of +/- 1.12%.

### AAPA Census Reports

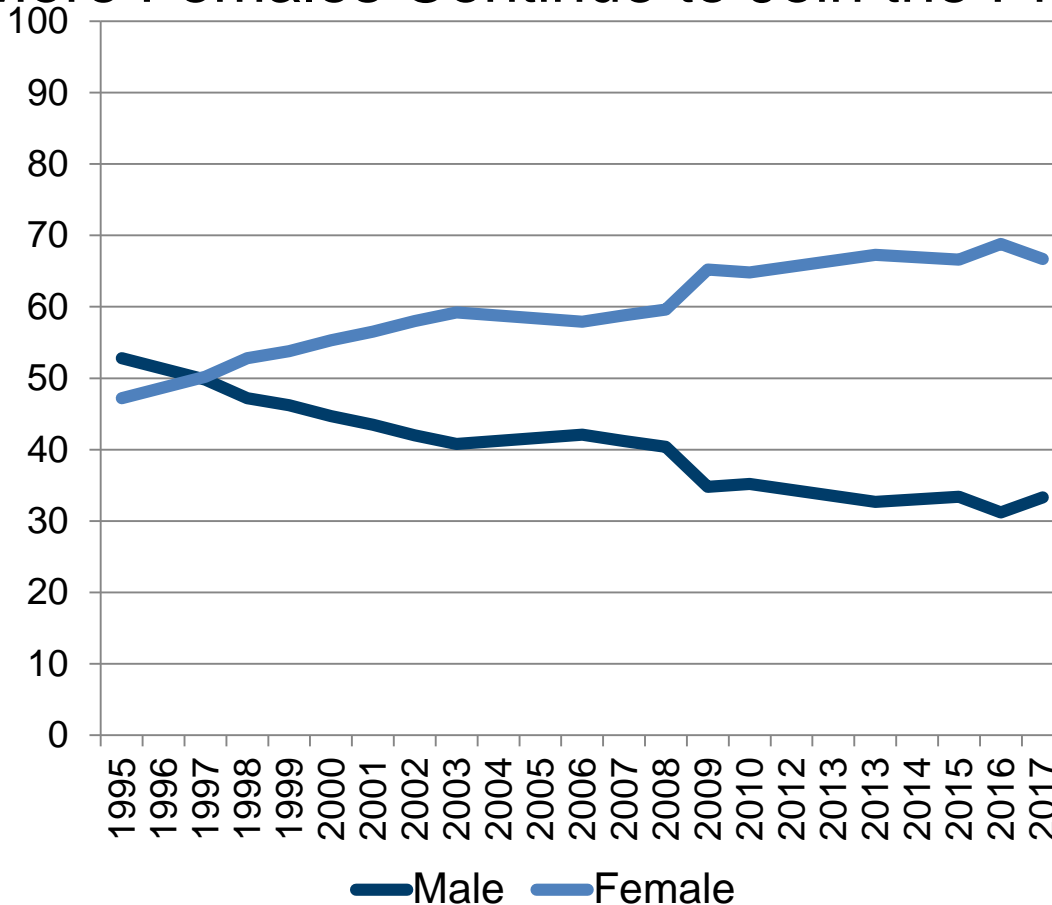
- Historical AAPA Census Reports were examined to identify historical trends.

# Current PA Demographics

	All Respondents	2015 and 2016 Graduates
Age	Years	Years
Median age	37	28
Gender	%	%
Female	66.2	71.4
Male	33.1	27.7
Prefer not to answer	0.7	0.9
Race	%	%
White	87.3	87.0
Asian	4.7	6.6
Black or African American	3.0	1.9
American Indian and Alaskan Native	0.4	0.3
Native Hawaiian and Other Pacific Islander	0.2	0.1
Two or More Races	4.4	4.2
Ethnicity	%	%
Hispanic or Latino	5.3	5.7
Not Hispanic or Latino	94.7	94.3

# A Historical Look at PA Demographics

## More Females Continue to Join the Profession



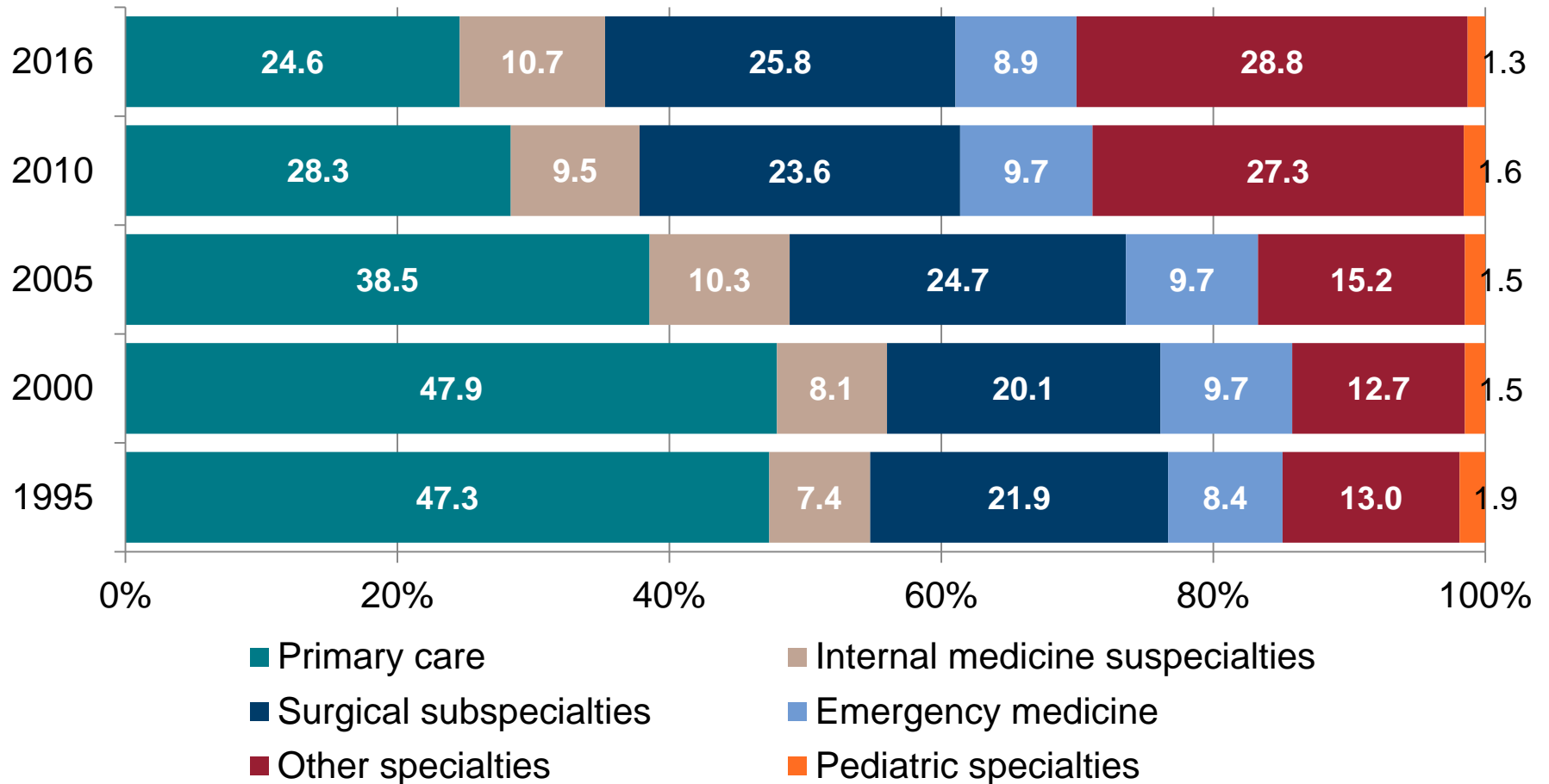
The median age has decreased from **40** in 1995 to **37** in 2017.

The number of clinically practicing **female** PAs now **outnumber** males **2 to 1**.

# Current PA Practice Characteristics

	All Respondents	2015 and 2016 Graduates
<b>Major Specialty Areas</b>	<b>%</b>	<b>%</b>
Surgical subspecialties	25.8	26.8
Primary care	24.6	25.1
Internal medicine subspecialties	10.7	10.8
Emergency medicine	8.9	9.2
Pediatric subspecialties	1.3	1.2
All other specialties	28.8	26.9
<b>Primary setting</b>	<b>%</b>	<b>%</b>
Physicians office/clinic	45.1	44.1
Hospital	38.1	40.5
All other settings	16.7	15.4
<b>Typical Number of Patients</b>	<b>Median</b>	<b>Median</b>
Patients per day	17.0	15.0
Patients per week	84.5	80.0

# A 20-Year Look Back at PA Specialties

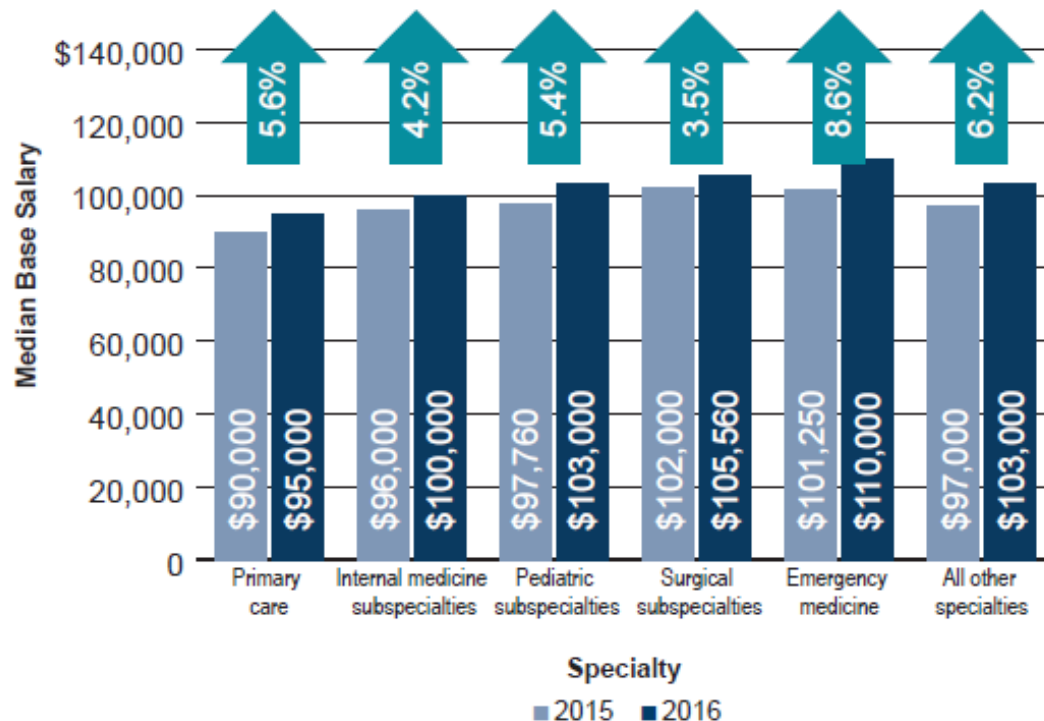


The increasing proportion of PAs practicing in “other specialties” reflects the **diversification** of the PA profession.

# Current PA Compensation

In 2016, the median PA salary was **\$102,000**

and the median hourly wage was **\$60.00**.



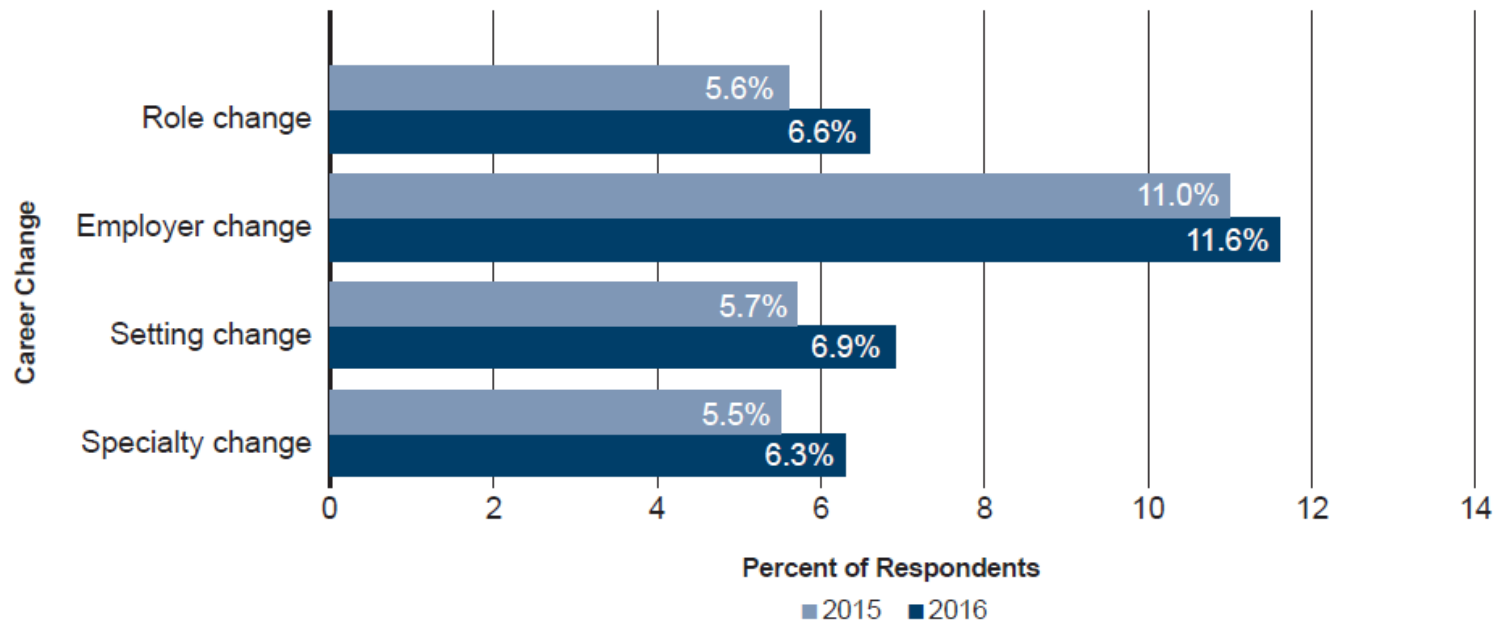
# PA's Experience Career Flexibility

- PAs are educated and certified as generalists.
- Positioned to meet the changing needs of employers.
- Most PAs will change their specialty at least once in their career.

1. National Governors Association. The role of physician assistants in health care delivery. <http://www.nga.org/files/live/sites/NGA/files/pdf/2014/1409TheRoleOfPhysicianAssistants.pdf>. Accessed 1/7/2016.
2. Everett C, Thorpe C, Palta M, et al. Physician assistants and nurse practitioners perform effective roles on teams caring for Medicare patients with diabetes. Health Aff. 2013;32(11):1942-1948.



# Career Changes in 2016



Note: Respondents were able to indicate they made multiple changes in 2016. Overall, 17.7% of respondents made at least one type of change.

# Career Changes Among Newer Graduates

Type of Change in 2016	None	Role	Employer	Setting	Specialty
<b>All Respondents</b>	82.3	6.6	11.6	6.9	6.3
<b>2011 to 2015 Graduates</b>	80.4	5.8	14.2	7.6	8.2
<b>2011</b>	79.8	5.8	12.0	7.0	7.8
<b>2012</b>	82.7	3.0	13.9	7.1	7.1
<b>2013</b>	77.4	7.7	15.7	9.2	9.2
<b>2014</b>	78.2	6.7	16.7	9.9	9.9
<b>2015</b>	83.5	5.3	12.7	5.1	7.1

# Why Are PAs Making a Job Change?

Reason for Employer Change	%
Better work/life balance	24.7
Better compensation/benefits	16.9
Moved	16.6
Other	12.8
Better professional/clinical opportunities	10.9
Opportunity to switch to a new clinical focus/specialty	8.2
Better commute	3.1
Completed education or postgraduate program	2.9
Was unemployed	2.7
Re-enter the workforce following sabbatical or extended leave	1.2
<b>Total</b>	<b>100.0</b>

# Reason for Career Changes Among Newer Graduates

New graduates start off as generalists and then change jobs to move into a specialty, right?

Among **all PAs** who changed jobs in 2016, we saw the top three reasons were:

1. Better work life balance
2. Better compensation and benefits
3. Moved

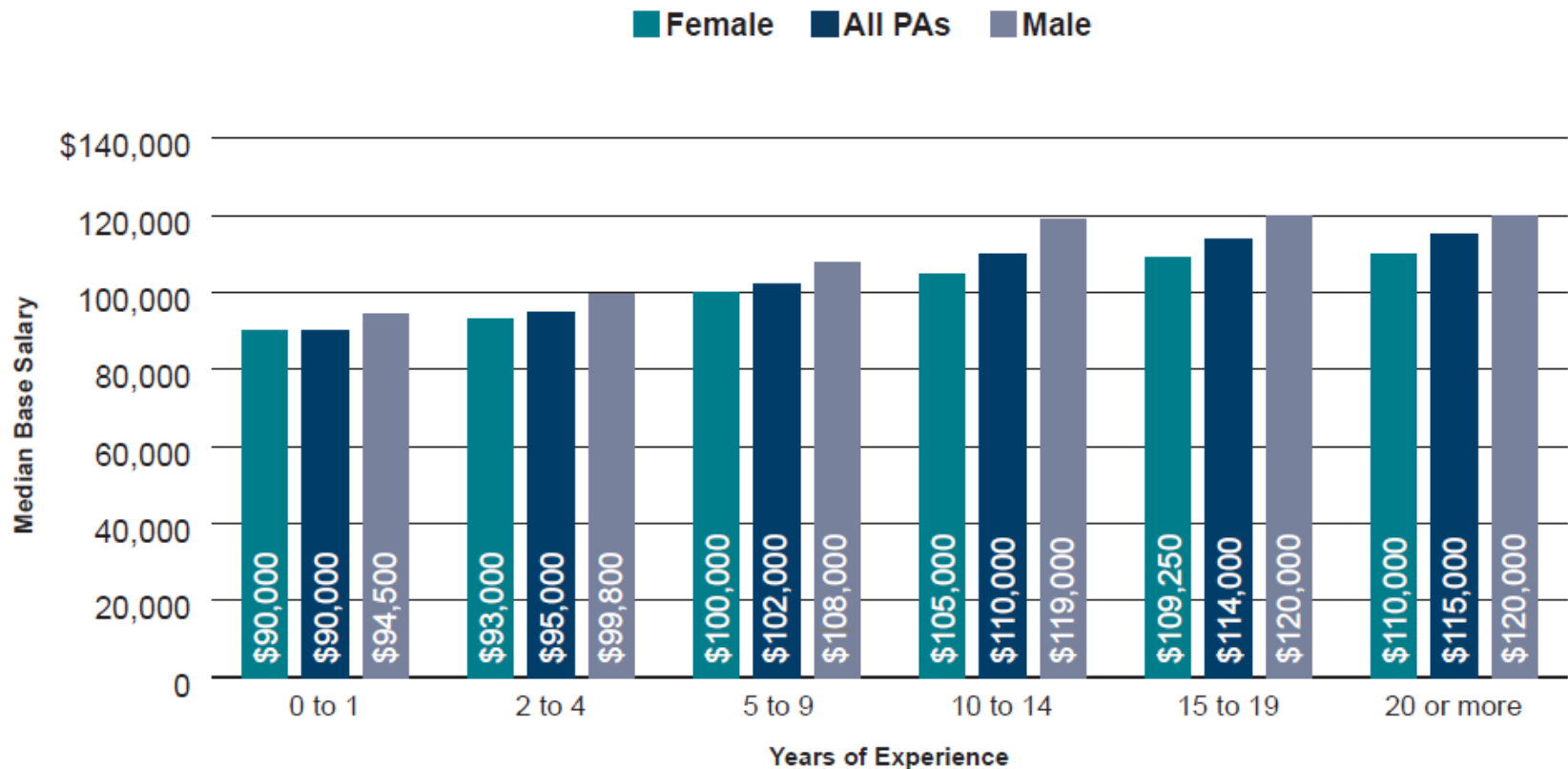
Among PAs who **graduated between 2011 and 2015**, those were the same factors, albeit in a different order:

1. Better work life balance
2. Moved
3. Better compensation and benefits

# Top 3 Reasons PAs Are Making a Change

<b>All Respondents</b>	Work/life balance (25%)	Compensation/benefits (17%)	Moved (17%)
<b>2011 to 2015 Graduates</b>	Work/life balance (30%)	Moved (22%)	Compensation/benefits (15%)
<b>2011</b>	Work/life balance (32%)	Compensation/benefits (19%)	Moved (19%)
<b>2012</b>	Work/life balance (43%)	<b>Professional/clinical opportunities (19%)</b>	Compensation/benefits (16%)
<b>2013</b>	Moved (29%)	Work/life balance (25%)	Compensation/benefits (17%)
<b>2014</b>	Work/life balance (35%)	Moved (21%)	Compensation/benefits (17%)
<b>2015</b>	Moved (20%)	Work/life balance (18%)	<b>New clinical focus/specialty (18%)</b>

# 2016 Median Base Salary: Years of Experience



Source: American Academy of PAs. (2017). 2017 AAPA Salary Report. Alexandria, VA.

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# Compensation Disparity in the PA Profession

- Salary inequities by gender have been observed among practicing PAs since the mid-1980s.<sup>1, 4</sup>
- In the early 1990s, salary differences between male and female PAs existed despite comparable levels of experience and similar practice characteristics.<sup>2</sup>

## These differences still exist.

- Among new graduate PAs, women earn less than men, even after controlling for variables including years of experience in healthcare, specialty, weekly hours worked, and monthly on-call hours.<sup>3</sup>

1. Oliver, DR, Carter, RD, Conboy JF. Practice characteristics of male and female physician assistants. Am J Public Health. 1984; 74(12): 1398-1400.  
2. Willis J. Explaining the salary discrepancy between male and female PAs. Journal of the American Academy of Physician Assistants. 1992;5:280-288.  
3. Zorn J, Snyder J, Satterblom K. Analysis of incomes of new graduate physician assistants and gender, 1998-2006. J Allied Health. 2009;38(3):127-131.  
4. Coplan B, Essary A, Virdan T, Cawley J, Stoehr J. Salary discrepancies between practicing male and female physician assistants. Women's Health Issues. 2012;22(1):83-89.

# Wage Disparity

## (Not Controlling for Practice Variables)

PA Gender	Mean Base Salary	Mean Bonus	Receive Bonus
Men	\$114,457	\$15,314	51.9%
Women	\$100,457	\$10,080	44.9%
All PAs	\$105,071	\$12,030	47.1%

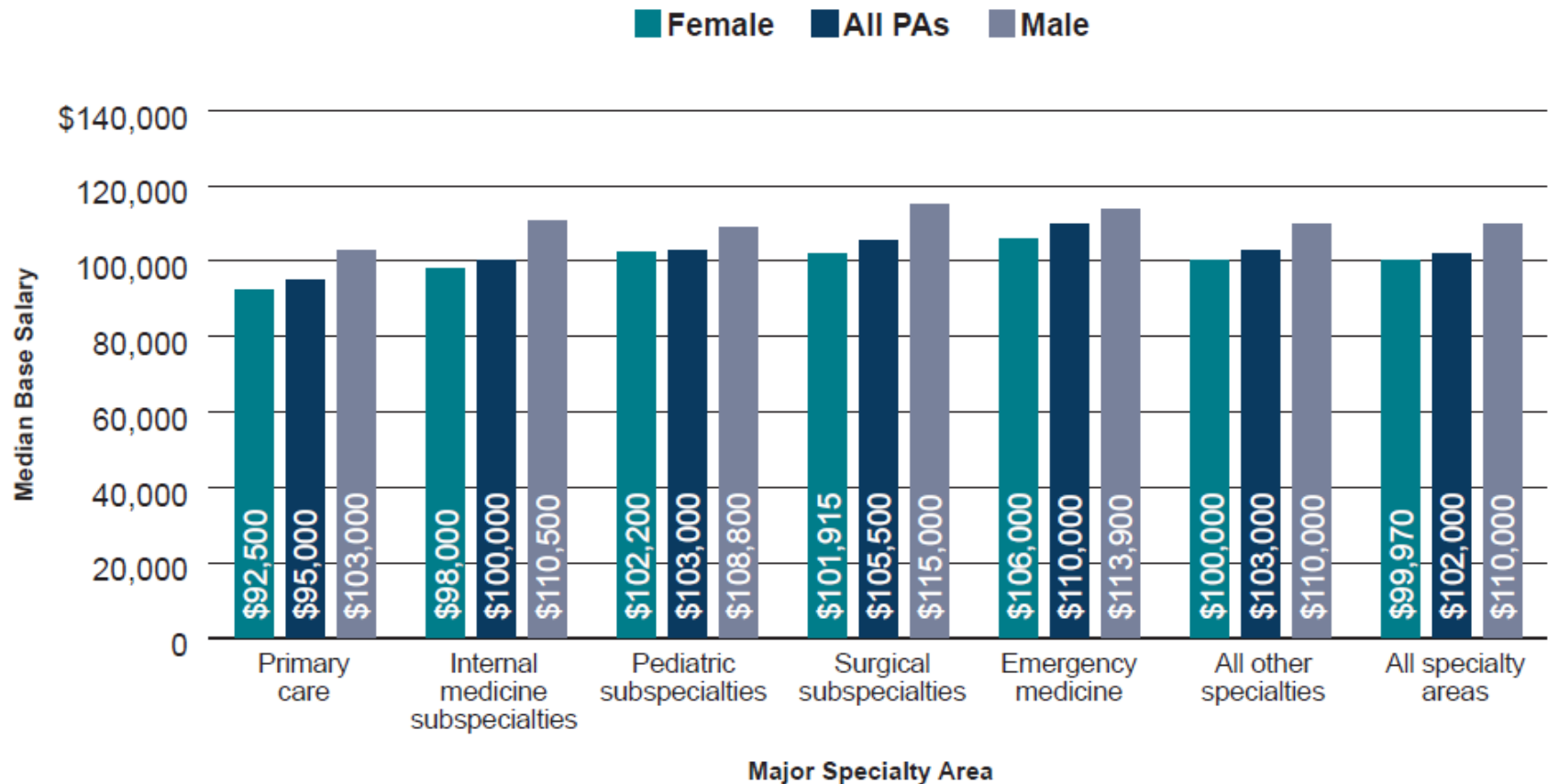
Men are *more likely* to receive a bonus

Men's bonuses are *larger*

**There must be variables that explain the compensation disparity ... right?**



# 2016 Median Compensation: Specialty by Gender



Source: American Academy of PAs. (2017). 2017 AAPA Salary Report. Alexandria, VA.

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# 2017 AAPA PA Compensation Data

- 2017 AAPA Salary Survey compensation data were subjected to a hierarchical regression analysis with multiple steps.

## Initial Steps: Compensation-relevant predictors

- Geographic Region
- Major Specialty Area
- Practice variables (total years as a PA, hours worked, weeks worked)
- Leadership and military (leadership position, practice ownership, active duty)
- Bonus: received?

## Final Step: Gender as a predictor of compensation

- Hierarchical regression allows for the prediction of total compensation from various practice variables and for determining the relationship gender and compensation have *after* controlling for compensation-relevant variables.
  - Conservative test for the gender-compensation relationship

# Compensation Disparity Findings

- When considering only gender as a predictor of total W2 compensation, there is a gender disparity in mean compensation. For mean base salary, there is a **\$14,000** difference between male and female PAs; \$10,000 for median.
- When all variables other than gender are controlled for using hierarchical regression analysis, a wage disparity in total compensation still exists.
  - It is smaller, but still substantial, in magnitude – **\$7,985**

# Advancing the Discussion on Compensation Disparity

- Based on the data from the 2017 AAPA Salary Survey, we can conclude that there is still a pay disparity between male and female PAs in the United States.
  - Cannot be fully accounted for by compensation-relevant practice variables
- This is an issue that AAPA is taking seriously and will be working with PAs as well as employers to eliminate.

# Questions?

For more information:

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