

The background of the cover is a photograph of two men in a physical therapy setting. In the foreground, a man with glasses and a yellow polo shirt is seated and holding a black resistance band. Behind him, another man in a blue and white checkered shirt is standing, with his hands on the first man's shoulders, appearing to assist or observe. The setting includes a blue exercise machine and a whiteboard in the background. A large, semi-transparent teal triangle is overlaid on the bottom left of the image, containing the title and date.

APTA Benchmark Report: Hiring Challenges in Outpatient Physical Therapy Practices, 2024

October 2024

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

Findings from APTA's third annual survey on vacancies in outpatient physical therapy practices indicate that the labor market remains strong for physical therapists seeking positions but a challenge for employers hiring to meet growing demand for services.

Introduction

Employee vacancy rates are a crucial issue for outpatient physical therapy practices. Vacancies directly impact the quality of care and patient satisfaction, and high vacancy rates can disrupt a practice's operations and strain finances. Employee morale can also be affected, further complicating hiring, retention, and overall clinic performance.

This report reviews results from APTA's third survey of outpatient physical therapy practices since the aftermath of the public health emergency caused by the COVID-19 pandemic. It assesses employment and vacancies in outpatient physical therapy practices, building on previous reports released in [2022](#) and [2023](#). As we continue to move on from the pandemic, future surveys will likely reflect less of its influence and hopefully track the trends of a more stable health care industry.

APTA's findings on growth in employment and job openings from 2023 to 2024, as well as the analyses of vacancy rates, are relevant to physical therapists, private practice owners, hiring managers, job seekers, policymakers, and higher education institutions.

The 2024 survey asked outpatient physical therapy practice owners for information on the number and regional locations of clinics, the number of current employees, and job openings for 2023 and 2024. Employment and openings were measured as full-time equivalents, or FTEs. Respondents also reported the top reasons for open positions. Using two years of data from the 2024 survey, this report identifies year-over-year trends in employment, openings, the number of clinics, and vacancy rates.

We also analyzed data by practice size — defined by the number of clinics operated — and region. The survey was sent to 2,938 practices across the United States, yielding 330 usable responses (11.2% response rate). Responses represent 5,113 clinics and 28,725 full-time equivalent employee positions, and 3,003 openings. Employees include physical therapists, physical therapist assistants, and support personnel. (See "About This Report" on Page 21 for details on the sample, limitations, and definitions of terms used.)

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Executive Summary

Even as the physical therapy profession moved away from the COVID-19 pandemic and the resulting labor shortages, maintaining an adequate and qualified physical therapy workforce remains challenging. In the summer of 2022, APTA conducted an initial benchmarking survey to understand better the labor pressures facing outpatient physical therapy practices, following up with a 2023 survey. Here, we share the results of the third survey, based on data collected between May 15 and July 2, 2024. Employment and openings were measured as full-time equivalents, or FTEs.

Note that findings about 2023 in this report are from the 2024 survey, for which respondents answered questions about both years. Thus, the 2023 findings here may not match precisely with last year's report. However, using the 2024 collection of 2023 data allows for a direct year-over-year comparison across one set of respondents. For more information about the sample, see "About This Report."

Key Takeaways

According to APTA's survey, the 2024 national vacancy rate for outpatient physical therapy practices is 9.5%, nearly double the U.S. Bureau of Labor Statistics estimate for all industries as of June 2024 (4.8%). This implies a strong demand for labor at outpatient physical therapy practices and, when combined with other statistics, growth in the industry. The high vacancy rates and other findings also suggest that employers are encountering difficulty finding or retaining skilled workers. The vacancy rate varied by region and employee type.



The 2024 national vacancy rate for outpatient physical therapy practices is 9.5%, nearly double that in June 2024 for all industries (4.8%).

- From 2023 to 2024, outpatient physical therapy practices expanded the number of employees and openings, suggesting both growth and hiring challenges. (Pages 5, 12-13)
- There were more openings for PTs and PTAs in 2024 than in 2023, reflecting not only unfilled demand for labor in 2023 but also increased demand in 2024. (Page 13)
- Practice growth is the primary reason for openings. (Page 15)
- Approximately one in every seven physical therapist positions was open. For physical therapist assistants, nearly one in every eight positions was open. (Page 16)

More on Openings

- The number of openings in 2023 was greater than the increase in employees (i.e., hires) between 2023 and 2024. Specifically, the increase in employees between 2023 and 2024 equaled only 76.3% of the openings in 2023. (Page 13)
- There was a 2.1% growth in total job openings: 3.2% for PTs and 17.2% for PTAs. There was a decline in openings for support staff. (Page 13)
- The percentage of practices reporting openings for PTs grew from 64.2% to 71.1%. For PTAs, the percentage increased from 28.7% to 36.8%. (Page 14)

More on Employment and Clinic Expansions

- Responding practices reported operating 4.4% more clinics in 2024 than in 2023. More than half of practices with 10 or more clinics added sites between 2023 and 2024. (Page 5)
- There was an 8.5% year-over-year increase in the total number of employees reported by respondents: 9.4% increase in PTs, 11.5% in PTAs, and 7.2% in support staff. (Page 11)
- About 38% of practices added FTE PTs, one in four decreased the number of PTs, and 37% reported no change. Nearly two-thirds of practices had no change in FTE PTAs. (Page 12)

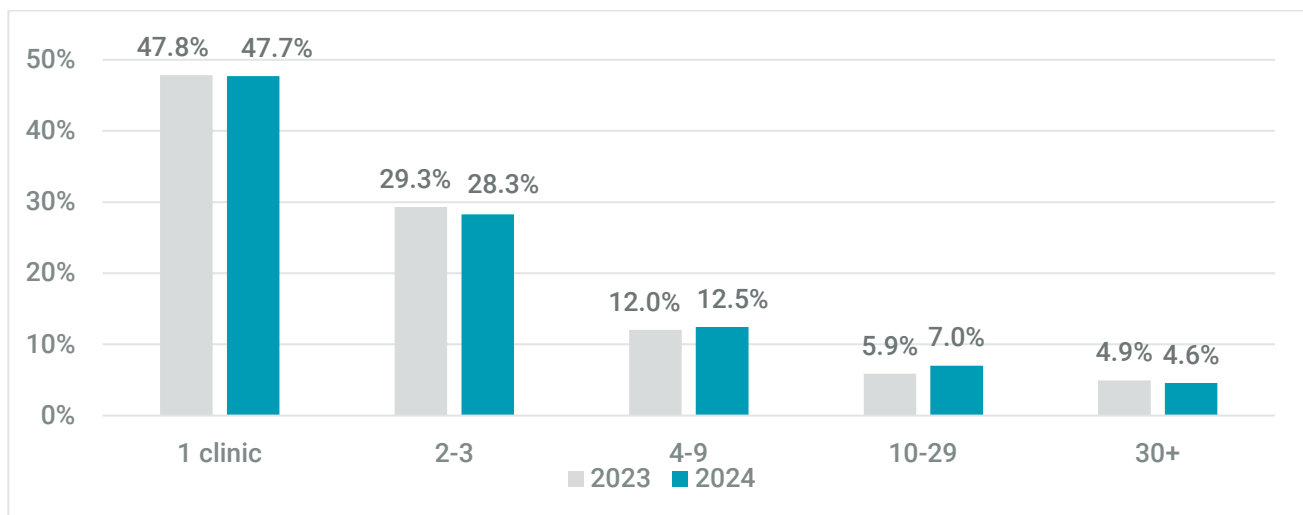
APTA's previous reports on hiring challenges and other workforce-related reports on demographics and wages [are available digitally on the association's Reports webpage.](#)

Practices: Size, Growth, and Location

Practice Size and Growth

Based on survey responses, slightly less than half of outpatient physical therapy practices (47.7%) operated only one clinic, and three-quarters of practices had three or fewer clinics, a negligible change from 2023 (**Figure 1**). However, due to the influence of a small number of large practices, the average number of clinics per practice was 15.4. The survey results are consistent with market research showing that the top 10 outpatient physical therapy practices represent 20% of the market, with 7,500 to 8,000 sites of services, or clinics.

Figure 1. Distribution of Practices by Number of Clinics, 2023 and 2024



Between 2023 and 2024, the total number of clinics operated by respondents to the 2024 survey increased by 4.4%. Even though most practices reported they did not add clinics (78.7%), more practices expanded their number of clinics (17%) than contracted (4.3%) (**Table 1**). Clinic expansion was more common among larger practices (those with more than 10 clinics); more than half of these practices added at least one clinic between 2023 and 2024. (Note that we do not have data about practices that closed or merged between 2023 and 2024. Nonetheless, among existing practices growth was more common than contraction.)

Table 1. Change in Number of Clinics From 2023 to 2024 by Practice Size in 2023

2023 # of Clinics	% That Increased	% That Decreased	% With No Change
0*	100.0%	0.0%	0.0%
1	3.2%	0.0%	96.8%
2-3	13.7%	4.2%	82.1%
4-9	28.2%	12.8%	59.0%
10-29	47.4%	15.8%	36.8%
30+	75.0%	12.5%	12.5%
All practices	17.0%	4.3%	78.7%

*Six practices reported zero clinics in 2023 but one each in 2024.

Practice and Clinic Locations

The distribution of practices was the highest in the South and West, at 30.3% each, followed by the Midwest at 20.3%, and the Northeast at 13.9% (**Figure 2**). About one in 20 practices (5.2%) operated clinics in multiple geographic regions, with 3.6% operating clinics across two regions, 0.6% across three regions, and 0.9% across all four regions. (See "About This Report" for regional definitions.)

Figure 2. Geographic Distribution of Practices, 2024

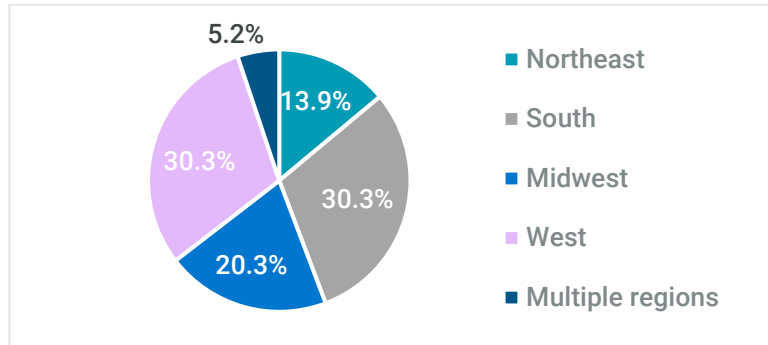
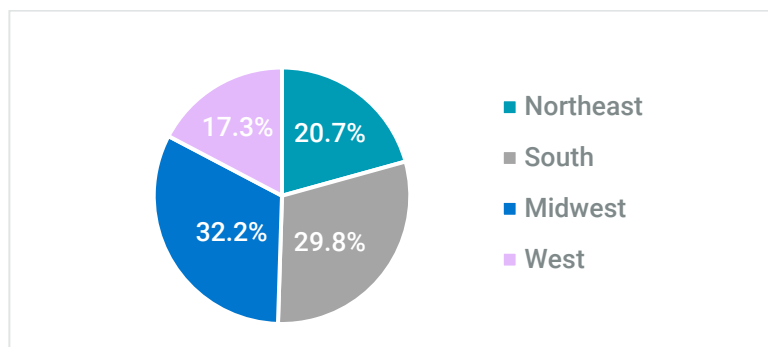


Table 2 and **Figure 3** show the distribution of clinics by geographic region. According to the 2024 survey responses, the regional distribution of clinics changed negligibly from 2023 to 2024.

Table 2. Geographic Distribution of Clinics, 2023 and 2024

Region	Distribution	
	2023	2024
Northeast	19.5%	20.7%
South	29.6%	29.8%
Midwest	33.1%	32.2%
West	17.7%	17.3%

Figure 3. Geographic Distribution of Clinics, 2024



Employment: Composition, Distribution, and Growth

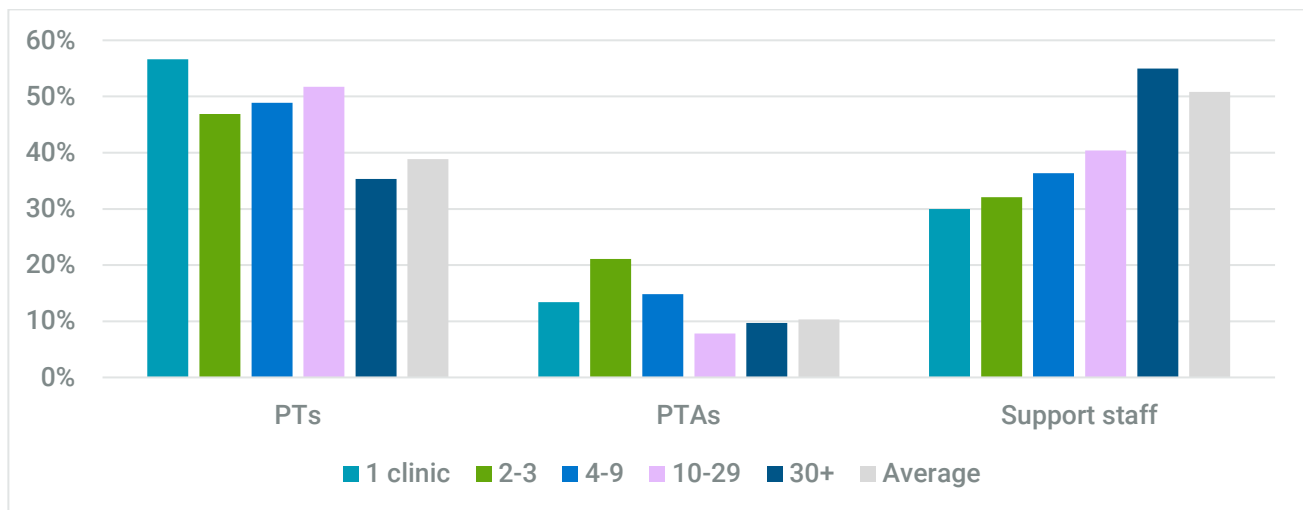
Composition of Employees by Practice Size

The 2024 survey collected employment data for physical therapists, physical therapist assistants, and support staff (aides, front office employees, and technical staff). On average, support staff comprised about half of all FTEs, and practices had nearly four FTE PTs for every FTE PTA (**Table 3 and Figure 4**). However, these averages don't necessarily reflect the structure of most practices because a few large practices tend to have a higher average percentage of support staff, some of which may work not at clinics but at regional or national offices. Hence, the national averages in **Table 3** are skewed toward larger numbers of support staff. In contrast, when looking at the more numerous smaller practices, PTs comprise about half of the employees, with support staff representing roughly 30% to 40% and PTAs less than 20%.

Table 3. Average Composition of Employees (FTEs) by Practice Size, 2024

# of Clinics	PTs	PTAs	Support Staff
1	56.6%	13.4%	30.0%
2-3	46.9%	21.1%	32.1%
4-9	48.9%	14.8%	36.3%
10-29	51.7%	7.8%	40.4%
30+	35.3%	9.7%	55.0%
All practices	38.8%	10.3%	50.8%

Figure 4. Table 3 in Chart Form to Illustrate Comparisons Between Employee Types and Practice Size



Looking at the distribution of employee types at practices another way, **Table 4** focuses on the number of employees per practice after ranking practices within employee categories by the number of employees. In 2024, the 50th percentile, or the median, for each employee type was 4.5 PTs, one PTA, and 2.5 support staff, meaning that half of all practices fell above and half fell below those numbers. The 25th percentile indicates that 25% of all practices had two or fewer PTs, zero PTAs, and one or fewer support staff. The 75th percentile

indicates that 75% of all practices had 10 or fewer PTs, three or fewer PTAs, and six or fewer support staff. The 90th percentile can be interpreted similarly. (Note that three employee categories and the total number of employees are each ranked separately, so the numbers do not add up to the total number of employees.)

This makes clear that the averages of 33.9 PTs, nine PTAs, and 44.4 support staff — and the average total of 87.3 employees per practice — are skewed markedly higher than the median by the relatively small number of large firms that employ far more employees.

Table 4. Number of Employees (FTEs) per Practice by Percentiles Within Employee Categories and Average Numbers, 2024

Percentile	PTs	PTAs	Support	All Employees
25th	2	0	1	4
50th (Median)	4.5	1	2.5	9.0
75th	10	3	6	20
90th	37	9.6	20	80
Average	33.9	9.0	44.4	87.3

Composition of Employees by Practice and Number of Clinics

The survey responses below through Page 12 categorize practices by their total number of clinics in 2024. This provides the average and median number of physical therapists, physical therapist assistants, and support staff employed per practice and available per clinic across the differing practice sizes. Because respondents provided employee totals by practice and not by clinic, we can only infer the number of staff per clinic; thus, we refer to these as “available per clinic.”

In general, the survey results depict a representative clinic as having two to four PTs, zero to one PTA, and one to two support staff.

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Physical Therapists

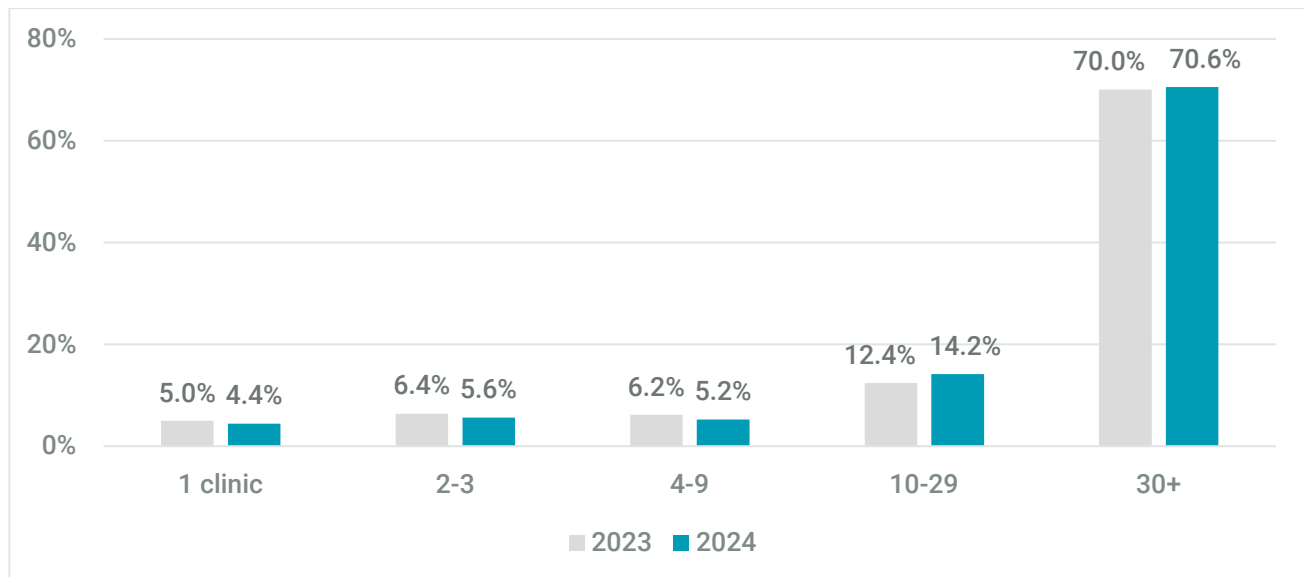
Whether a practice has a single clinic or dozens of clinics across the country, the number of PTs available within a practice per clinic is similar — between two and three (**Table 5**).

Table 5. Number of PTs (FTEs) per Practice and Available per Clinic by Practice Size, 2024

# of clinics	PTs per Practice		PTs Available per Clinic	
	Average	Median	Average	Median
1	3.1	2.5	3.1	2.5
2-3	6.7	6.0	2.8	2.5
4-9	14.2	12.0	2.6	2.3
10-29	68.8	52.0	4.3	2.8
30+	524.7	308.0	2.7	2.4
All practices	33.9	4.5	3.0	2.5

While surveyed practices with few clinics are more common than practices with many clinics, the survey indicates that most physical therapists working at outpatient clinics are employed by larger practices (**Figure 5**). A similar dynamic is common in other health care professions. In 2024, more than two-thirds (71%) of physical therapists were employed by larger practices (30 clinics or more). Additional data from future surveys will help determine if there is a trend in employment consolidation into larger practices. (The presence of a few very large practices among survey respondents might distort findings.)

Figure 5. Distribution of PTs (FTEs) by Practice Size, 2023 and 2024



Physical Therapist Assistants

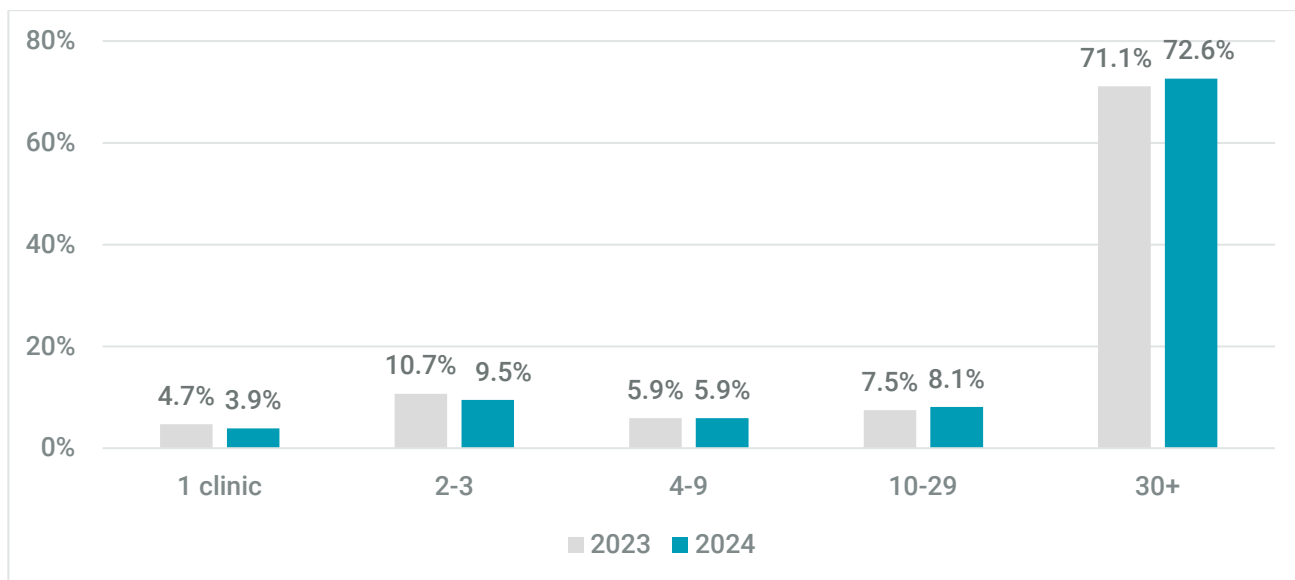
Table 6 shows the average and median number of PTAs per practice and the average and median number available per clinic. As with PTs, the average number of PTAs available per clinic is similar regardless of practice size. For PTAs, the average number available within a practice per clinic is less than one (0.9). This indicates that most clinics, even at larger practices, have no PTAs or, at least, no full-time PTAs.

Table 6. Number of PTAs (FTEs) per Practice and Available per Clinic by Practice Size, 2024

# of clinics	PTAs per Practice		PTAs Available per Clinic	
	Average	Median	Average	Median
1	0.7	0.0	0.7	0.0
2-3	3.0	2.0	1.3	0.7
4-9	4.3	4.0	0.8	0.8
10-29	10.4	6.0	0.6	0.3
30+	143.8	50.0	0.6	0.5
All practices	9.0	1.0	0.9	0.5

Figure 6 shows the distribution of PTAs across practices. Like PTs, more than two-thirds of PTAs work for the largest practices, and according to the 2024 survey responses, this concentration increased slightly from 2023 to 2024.

Figure 6. Distribution of PTAs (FTEs) by Practice Size, 2023 and 2024



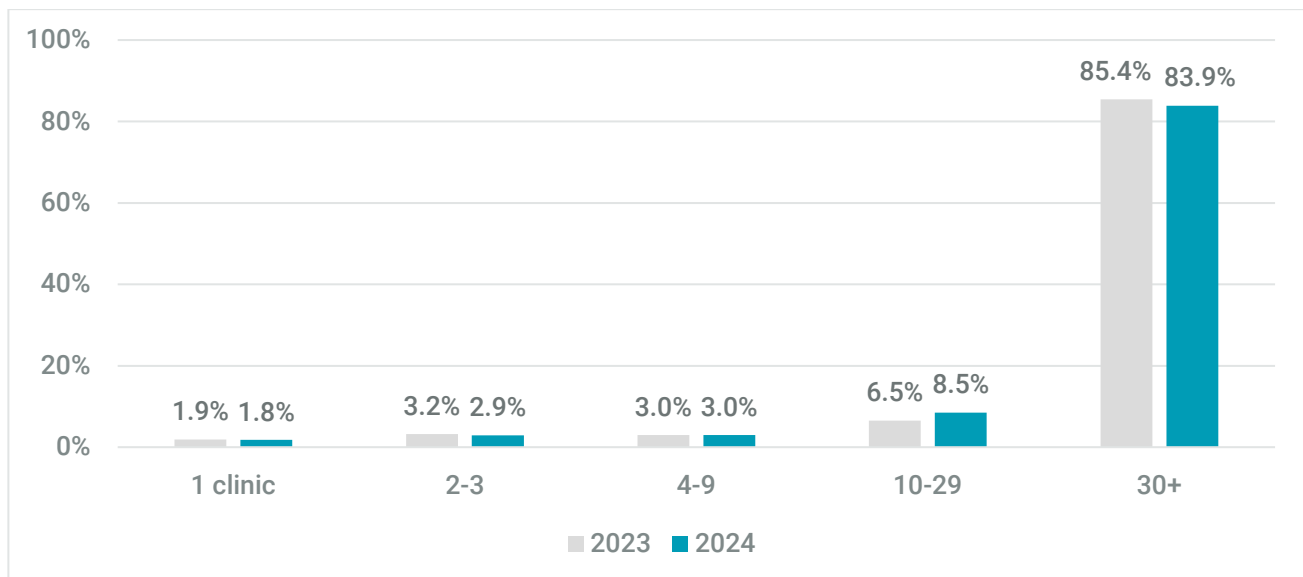
Support Staff

Support staff make up a larger share of overall employment than do PTAs, partially because small practices are more likely to employ support staff than PTAs (**Table 7 and Figure 7**). The average number of support staff available per clinic is between one and two for most practices but increases to nearly three for large practices (**Table 7**). Of course, for firms with many clinics, some support staff may work at a central office, not a clinic site.

Table 7. Number of Support Staff (FTEs) per Practice and Available per Clinic by Practice Size, 2024

# of clinics	Support Staff per Practice		Support Staff Available per Clinic	
	Average	Median	Average	Median
1	1.66	1	1.7	1
2-3	4.6	3.8	1.9	1.5
4-9	10.56	7	1.8	1.4
10-29	53.7	24	2.9	1.7
30+	815.9	150	2.3	2.8
All practices	44.4	2.5	1.9	1.5

Figure 7. Distribution of Support Staff (FTEs) by Practice Size, 2023 and 2024



Employee Growth

Based on the 2024 survey respondents' data about 2023 and 2024 FTE employees, the number of physical therapists increased by 9.4%, physical therapist assistants increased by 11.5%, and support personnel increased by 7.2% (**Table 8**). Overall, the total number of employees (FTEs) increased 8.5% between 2023 and 2024.

Table 8. Increase in Number of Employees From 2023 to 2024

Employee Category	% Increase
PTs	9.4%
PTAs	11.5%
Support staff	7.2%
Total	8.5%

Overall, 44.1% of responding practices added employees, 25.8% decreased employees, and 30.1% had no change (**Table 9**). Looking at the different employee categories, 37.7% of practices added PTs, 25.2% reported a decrease, and 37.1% had no change. For PTAs and support staff, practices reported far less change in status, with nearly two-thirds having no change for both types of employees.

Table 9. Percentage of Practices With Increases, Decreases, and No Change in Employee FTEs From 2023 to 2024

Employee Category	% With Increase	% With Decrease	% With No Change
PTs	37.7%	25.2%	37.1%
PTAs	20.4%	14.6%	65.0%
Support staff	25.2%	9.4%	65.3%
Total	44.1%	25.8%	30.1%

Table 10 shows the likelihood that practices, separated by worker category and practice size, increased the number of employees between 2023 and 2024. Perhaps not surprisingly, practices with more clinics are more likely to have added employees in the past year. However, roughly a third of single-clinic practices added employees between 2023 and 2024, and slightly more than a quarter added PTs. Practices were markedly more likely to have added PTs than PTAs or support staff. Approximately half of the medium-sized practices added PTs.

Roughly a third of single-clinic practices added employees between 2023 and 2024, and slightly more than a quarter of single-clinic practices added PTs.

Table 10. Percentage of Practices Increasing Number of Employees by Employee Category and Practice Size From 2023 to 2024

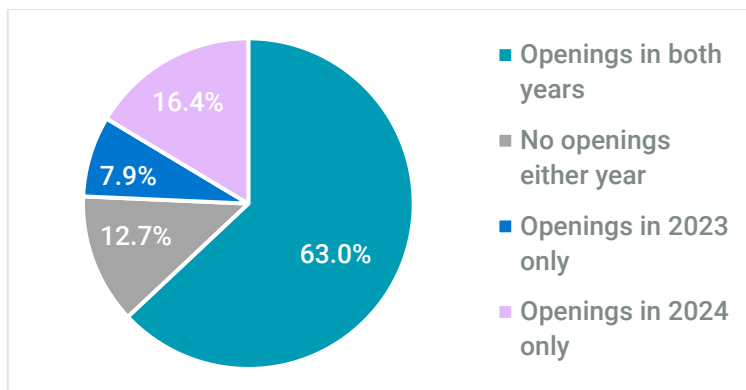
# of Clinics	PTs	PTAs	Support Staff	All Employees
1	27.4%	9.6%	17.2%	33.1%
2-3	34.4%	19.4%	23.7%	43.0%
4-9	53.7%	41.5%	36.6%	56.1%
10-29	56.5%	26.1%	39.1%	69.6%
30+	93.3%	73.3%	66.7%	93.3%
All practices	37.7%	20.4%	25.2%	44.1%

Openings: Growth, Composition, and Reasons

Growth in Openings

About 79.4% of practices reported having at least one job opening in 2024, a marked increase from 70.9% in 2023 (**Figure 8**). Nearly two-thirds of practices reported openings in both years, and 12.7% reported having no openings in either year. (The percentage of practices with openings in each year is derived by adding the percentage of openings in both years, 63.0%, to the percentage for each year only; as in 63.0% plus 16.4% to get 79.4% for 2024.)

Figure 8. Practices Reporting Openings in 2023, 2024, Both, or Neither Years



Total job openings increased by 2.1% over 2023 (**Table 11**), but there was variance between employee types, with openings for PTs up 3.2%, openings for PTAs up 17.2%, and openings for support staff down 6.7%.

Table 11. Percentage Change in Practice Openings From 2023 to 2024

Employee Category	% Change
PTs	3.2%
PTAs	17.2%
Support staff	-6.7%
Total	2.1%

Looking at the percentage of job openings by employee category, more than half were for PTs in 2023 and 2024 (**Table 12**). The growth in open positions may be partially attributed to the fact that the increase in employees between 2023 and 2024 equaled only 76.3% of the openings in 2023. In other words, some openings in 2024 are likely unfilled 2023 positions as well as new positions created by industry growth and 2024 staff turnover.

Table 12. Distribution of Practice Openings by Employee Category, 2023 and 2024

	2023	2024
PTs	57.1%	57.8%
PTAs	12.9%	14.8%
Support staff	30.0%	27.4%

Since 2023, the percentage of practices with openings has increased for each employee category, almost regardless of practice size (**Table 13**). In 2024, 28.9% of practices had zero openings for PTs, 63.2% for PTAs, and 61.1% for support staff. Practices with more clinics, of course, were much less likely to have zero openings.

Table 13. Percentage of Practices With Openings by Employee Category and Practice Size, 2023 and 2024

# of clinics	PTs		PTAs		Support Staff	
	2023	2024	2023	2024	2023	2024
1	56.1%	61.8%	21.3%	29.3%	24.5%	27.4%
2-3	64.2%	69.9%	27.4%	31.2%	30.5%	38.7%
4-9	69.2%	87.8%	38.5%	56.1%	38.5%	48.8%
10-29	89.5%	91.3%	31.6%	47.8%	63.2%	73.9%
30+	100.0%	100.0%	81.2%	80.0%	75.0%	80.0%
All practices	64.2%	71.1%	28.7%	36.8%	32.7%	38.9%

A notable finding of the survey is that more than half of the single-clinic practices reported at least one opening (**Table 13**), and the average number of openings for these practices was 1.7 (**Table 14**). Of course, the number of openings per practice increases with practice size. Overall, more than half of practices have at least two openings. Again, the larger firms pull the average number of openings per practice up to 9.1.

Table 14. Average and Percentiles of Number of Openings by Practice Size, 2024

# of clinics	Percentiles				
	25th	50th (Median)	75th	90th	Average
1	0	1	2	4	1.7
2-3	1	2	3	5	2.2
4-9	2	4	5	8	4.3
10-29	4	7	11	22	10.8
30+	20	50	305.5	425	140.6
All practices	1	2	4	7	9.1

Reasons for Openings

Practices with at least one opening for PTs or PTAs in 2024 were asked to rank their top three reasons for vacancies. **Table 15** gives the percentage distribution of all rankings across the options. Company growth was the most often ranked primary reason (12.3%). Respondents were also asked what percentage of their openings was due to company growth; the average answer was 46.8%, and the median was 50%.

While company growth was the most common primary reason, the next two most frequently named primary reasons were relocation by a significant other and better pay elsewhere. If the first, second, and third rankings are grouped, **Table 15** shows that relocation and better pay surpassed company growth as reasons for job openings. Staff departing to seek a better work-life balance as a reason for open positions was not among the top of the rankings but still selected far more often than the remaining options.

Table 15. Top Three Reasons for PT and PTA Job Openings, 2024*

Ranking	Company Growth	Relocated	Better Pay	Changed Profession	Employee Reduced Hours	Retired Early	Work/Life Balance	Other
First	12.3	7.8	8.7	1.3	0.4	1.1	3.6	2.7
Second	4.5	7.6	7.2	1.3	4.7	1.8	5.2	1.3
Third	1.8	5.4	5.4	1.6	3.4	2.9	6.3	2.5
Total	18.6	20.9	20.4	4.3	8.5	5.8	15	6.5

*The data are for practices with one or more open PT or PTA positions in 2024. The percentages are of total ranking responses.

National, Regional, and Practice Vacancy Rates

This section reviews the national, regional, and practice vacancy rates based on the 2024 survey responses for years 2023 and 2024. An industry’s vacancy rate is defined as the number of openings divided by the total number of current employees plus openings. A vacancy rate can be measured at a geographic level (national or regional) and the practice level. As this rate measures labor demand, persistently high vacancy rates are generally interpreted as an indicator of hiring challenges.

The national and regional metrics provide overviews of the outpatient physical therapy practice industry, which may be of most interest to job seekers, industry leaders, and policymakers. Hiring managers and practice owners who want to compare their firms with similar practices may be most interested in the practice-level vacancy rates.

National Vacancy Rate

From 2023 to 2024, the national vacancy rate remained essentially the same, declining only slightly from 10% to 9.5%. Each employee category had minor changes, with the vacancy rate slightly down for PTs and support staff but marginally up for PTAs (**Table 16**). (Given that there are more openings in 2024 than in 2023, why wasn’t there an increase in the national vacancy rate? Because openings are used in the numerator and denominator for calculating the vacancy rate, an increase in openings has less influence on the rate than one might expect. In addition, employment grew over the same period, further increasing the denominator.)

A national vacancy rate of 9.5% is nearly twice the [U.S. Bureau of Labor Statistics estimate of 4.8% for all industries as of June 2024](#). Moreover, this rate is higher than the BLS estimate for the health care and social assistance industry (grouped together in BLS reporting) of 6.7% as of June 2024.

Table 16. National Vacancy Rates by Employee Category, 2023 and 2024

Employee Category	2023	2024
PTs	14.1%	13.5%
PTAs	12.5%	13.0%
Support staff	6.1%	5.3%
Total	10.0%	9.5%

Regional Vacancy Rates

The regional vacancy rates (**Table 17**) are calculated like the national vacancy rate — for each region, the total number of openings is divided by the openings plus current employees. However, because the survey responses are associated with practices and not individual clinics, the regional rates below refer to practices that operate only in one region, which covers about 95% of practices. The vacancy rate for the 5% of practices with clinics in multiple regions is reported separately.

Not only is there variance in the vacancy rate among regions, but the rates vary in some cases between employee categories across regions. The Midwest has the lowest regional vacancy rate and lowest vacancy rate for PTs, PTAs, and support staff. However, the Northeast has the highest rates for PTAs and support staff, while the rate is highest for PTs in the West. The unusually high vacancy rate for PTAs in the Northeast may be an

anomalous finding due to the relatively small survey sample from that region (see **Table 22** in “About This Report”).

Table 17. Regional Vacancy Rates for PTs, PTAs, Support Staff, and All Employee Categories, 2023 and 2024

	PTs		PTAs		Support Staff		All Employees	
	2023	2024	2023	2024	2023	2024	2023	2024
Northeast	11.4%	11.8%	32.9%	34.2%	12.9%	15.0%	15.3%	16.3%
South	11.8%	13.6%	12.9%	15.6%	8.2%	7.2%	10.6%	11.5%
Midwest	6.4%	8.2%	6.2%	7.7%	6.0%	5.4%	6.3%	7.6%
West	17.5%	17.2%	24.3%	22.5%	7.6%	7.1%	14.2%	13.5%
Multiple	15.7%	13.9%	8.2%	9.2%	5.6%	4.7%	9.4%	8.4%

Practice-Level Vacancy Rates

When calculated at the practice level, the distribution of vacancy rates is broad, and the rate has increased from 14.2% in 2023 to 16.8% in 2024. **Table 18** displays the distribution of practices across several categories of practice-level vacancy rates for 2023 and 2024. The percentage of practices with a vacancy rate of 0% dropped from 29.1% in 2023 to 20.6% in 2024 because more practices are hiring in 2024 than were in 2023.

The practice-level vacancy rate is higher than the national rate because practices with few employees will have a sizable vacancy rate when there is even one opening. Thus, the many small practices skew the average practice-level rate higher than the national vacancy rate. Moreover, whereas the national rate has dipped slightly, the practice-level rate has increased for a similar reason. (Specifically, the practice-level rate is lower for a few larger firms with many employees, which brings down the national rate due to their sizable labor pool. Meanwhile, smaller firms increase the practice-level rate, as each firm is weighted equally when calculating the average. Thus, if the large firms fill positions and small firms increase openings simultaneously, as we see in our data, the national vacancy rate drops and the practice vacancy rate rises.)

Table 18. Distribution of Practices Across Practice-Level Vacancy Rates, 2023 and 2024

Practice Vacancy Rate	2023	2024
0%	29.1%	20.6%
>0%-5%	4.6%	5.2%
5%-10%	14.2%	18.5%
10%-20%	21.5%	20.9%
20%-30%	14.9%	16.7%
30%+	15.8%	18.2%
All practices	14.2%	16.8%

Table 19 displays the percentage of practices whose vacancy rate changed from 2023 to 2024. Most practices maintained a similar vacancy rate. The diagonal numbers (in bold) show the percentage of practices that remained at a similar vacancy rate. The percentages to the right of the diagonal reflect practices whose vacancy rate increased to a higher category; the percentages to the left reflect those that dropped to the lower category.

For example, for practices with 2023 vacancy rates in the “5%-10%” category, 57.4% stayed in that range in 2024. Meanwhile, 8.5% had no openings in 2024, 12.8% fell to the “>0%-5%” category, and another 12.8% moved up one category to “10%-20%.” Furthermore, 6.4% moved up two categories to “20%-30%” and 2.1% moved up three categories to “30%+.”

Table 19. Percentages of Practices Whose Vacancy Rate Category Changed From 2023 to 2024

2023 Vacancy Rate	2024 Vacancy Rate					
	0%	>0%-5%	5%-10%	10%-20%	20%-30%	30%+
0%	43.8%	4.2%	8.3%	17.7%	14.6%	11.5%
>0%-5%	13.3%	40.0%	33.3%	13.3%	0.0%	0.0%
5%-10%	8.5%	12.8%	57.4%	12.8%	6.4%	2.1%
10%-20%	12.7%	1.4%	22.5%	42.3%	15.5%	5.6%
20%-30%	14.3%	0.0%	6.1%	20.4%	46.9%	12.2%
30%+	7.7%	0.0%	3.8%	7.7%	7.7%	73.1%

Table 20 gives the mean and median practice vacancy rates by practice size for PTs, PTAs, and support staff in 2024. (Recall that 28.9% of practices had zero openings for PTs, 63.2% for PTAs, and 61.1% for support staff.)

Table 20. Mean and Median Practice Vacancy Rates for PTs, PTAs, and Support Staff by Practice Size, 2024

# of clinics	PTs		PTAs		Support Staff	
	Mean	Median	Mean	Median	Mean	Median
1	21.2%	19.0%	17.1%	0.0%	10.9%	0.0%
2-3	15.3%	14.3%	13.9%	0.0%	13.6%	0.0%
4-9	14.5%	13.8%	12.8%	9.6%	15.5%	0.0%
10-29	7.7%	8.3%	10.9%	0.0%	5.6%	4.0%
30+	12.4%	10.4%	12.0%	9.1%	7.4%	3.4%
All practices	17.3%	13.8%	15.0%	0.0%	11.7%	0.0%

Conclusion and Action Steps

Maintaining a qualified and accessible workforce to meet patient demand for physical therapist services is critical in health care and the profession. Outpatient physical therapy practices are among the predominant settings for patients accessing services. Understanding the vacancy rate of these settings provides one measure of the state of the workforce and the profession's ability to meet its objective of ensuring access to physical therapist services in the United States.

The after-effects of the COVID-19 pandemic persist in the U.S. health care system, and the physical therapy workforce has been under significant pressure due to increasing demand for services and stress due to disruption to the workforce qualified to provide these services. APTA and APTA Private Practice have surveyed practices over the past three years to assess the dynamics and health of labor demand in outpatient physical therapy practices.

National vacancy rates for these physical therapy practices have remained nearly double [the national rate for all industries across these three years of assessment \(2022-2024\)](#), and continue to challenge the profession and our ability to serve the needs of individuals and communities seeking physical therapist services to address their health care needs.

APTA is committed to leadership and collaboration to ensure physical therapy has a qualified and accessible workforce to address the health care needs of all Americans. APTA is committed to the following actions to realize this goal and meet its responsibility to its members, the profession, and the health care community.

- A revised forecast of supply and demand trends in physical therapy using state-of-the-art methods has been submitted for publication in PTJ: Physical Therapy & Rehabilitation Journal. APTA will issue a companion report and other resources about the forecast.
- APTA will continue to collaborate with APTA Private Practice to assess the workforce in outpatient physical therapy practices. After this third annual post-pandemic assessment, APTA and APTA Private Practice will conduct periodic assessments of vacancy rates in outpatient physical therapy every two to three years.
- APTA will expand its practice setting-based assessments beyond the outpatient setting in 2025 to provide insight into the similarities and differences across physical therapy settings on workforce measures.
- APTA will continue to collaborate with the Federation of State Boards of Physical Therapy on authorization and implementation of the minimum data set to be collected at licensure issue and renewal.
- APTA will advocate with state and federal agencies on policies and programs to continue to support workforce assessment and investment to ensure a qualified workforce to meet the health care needs of individuals and communities in the United States.

Outpatient physical therapy practices are among the predominant settings for patients accessing services.

- APTA will continue to support health services research, including workforce research, to better understand the challenges facing the physical therapy workforce and its ability to meet health care needs in our communities, states, and country.
- APTA will continue its report series on the state of physical therapy practice. In 2025, APTA will conduct its demographic and wage profiles with publication in 2026. APTA will also be conducting its administrative burden survey and report in 2025.

Physical therapy continues to be challenged by workforce dynamics and challenging payment for services while seeing increasing demand and expanded roles to meet the health care needs of individuals in the United States. Ensuring a qualified workforce in physical therapy is essential to the health of all, and APTA remains committed to this objective and priority.

Acknowledgments

APTA and APTA Private Practice are grateful to the outpatient physical therapy practices that provided data on their workforce to be part of this report. These practices represented 5,113 clinics and 28,725 employees that are committed to serving patients that need physical therapy to meet their health care needs and return to their activities, work, families, and pursuits.

About This Report

Sample

Data for the 2024 APTA Workforce Vacancy Report is from a survey launched on May 15, 2024, and closed on July 10, 2024. The survey was distributed to 2,938 potential respondents from the United States and yielded usable responses from 330 practices with 5,113 clinics. A breakdown of the 330 practices by size is below (**Table 21**), as is a breakdown by region with additional selected statistics (**Table 22**).

Respondents who reported no physical therapists or physical therapist assistants and no openings for those employees in both 2023 and 2024 were dropped, as were those reporting no clinics in both years. The adjusted response rate was 11.2%. Below are some descriptive statistics on the respondents.

Note that the 2023 data in this report is from the 2024 respondents. Thus, while 2023 findings here may not precisely match the results in [the report that was published in 2023](#), they are generally close, and using the 2024 collection of 2023 data allows for a direct study over time across respondents.

Table 21. Number of Responses by Practice Size Reported for 2023 and 2024*

# of Clinics	2023	2024
0	6	1
1	155	157
2-3	95	93
4-9	39	41
10-29	19	23
30+	16	15
Total	330	330

*Six practices reported zero clinics in 2023 and one each in 2024.
One practice reported one clinic in 2023 and zero in 2024.

Table 22. Sample Descriptive Statistics by Region, 2024

Region	Responses	Total Clinics	Average Clinics per Practice	Total (FTE) Employees	Average (FTE) Employees per Practice
Northeast	46	165	3.6	980.4	21.3
South	100	354	3.5	2,108.9	21.1
Midwest	67	401	6.0	2,042.9	30.5
West	100	398	4.0	3,063.5	30.6
Multiple	17	3,795	223.2	20,529.2	1,207.6
Total	330	5,113		28,724.9	

Limitations

There is no complete list of outpatient physical therapy practices in the United States, so how well the respondents represent the universe of outpatient physical therapy practices cannot be determined. Nonetheless, the diverse range of respondents — across all regions and from single-clinic to large multiple-clinic practices — provides a portrait of the profession that is in line with other workforce studies in health care.

In addition, because practices that have closed are not available to be surveyed, precise statements about increases in employment, openings, or clinics in outpatient physical therapy as a whole cannot be made. Instead, we can study data on employment, openings, and clinics for practices in 2024 and compare them to 2023 for those same practices. Nonetheless, the evidence of growth in the industry from census and Bureau of Labor Statistics data, and the frequency with which company growth is stated as the reason for openings, all indicate that the industry is expanding.

Definitions

Full-time equivalent: An employee that works whatever number of hours the practice considers full-time. Respondents were not to count any employee as more than one FTE, and nonexempt employees were to be recorded as a fraction of FTE based on their hours worked. Additionally, openings for part-time positions were to be recorded as a fraction of FTE.

Clinic or site of service: Freestanding clinics and locations where practices contract to provide services, such as via management service agreements, employee lease agreements, partnerships, etc.; a practice that realizes all the expenses and revenue for services rendered.

Total FTEs: Currently employed FTEs plus the number of FTE openings.

Vacancy rate: FTE job openings divided by total FTEs (defined to include openings and current employment). The rate can be calculated nationally, regionally, or for each practice.

Geographic Regions

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