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The State of Rehab Therapy

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2022



Foreword

These past two years have felt surreal. They’ve challenged the space-time continuum in that they’ve lasted both a split-second and a century, they’ve pushed each of us to new extremes in our personal and professional lives, and they’ve accelerated the inevitable shift to value-based, digitally driven care. Experiencing so much change in such a compressed period of time takes a toll. It can make it difficult to keep up with and take meaningful action on what’s happening in the present, which in turn poses a threat to our future. That is why this report is so, so valuable.

Each year, we release our annual industry report to shed light on the biggest challenges, trends, and opportunities impacting our profession. And over the past six years that we’ve conducted this survey, declining reimbursement rates, mounting student debt, therapist burnout, and lack of workforce diversity remain some of our industry’s biggest enduring challenges. **This year’s report brings another critical issue to the forefront: employee retention and satisfaction**—which is where I’d really like to zero in.

People are, without a doubt, our industry’s greatest asset. But, as will be evidenced by this report, we are at risk of an exodus of clinically focused providers and future leaders in pursuit of more work-life balance, schedule flexibility, higher wage opportunities, and enhanced benefits packages.

Our profession’s turnover rate average is roughly 9% this past year, which is considerably higher than [the current healthcare industry average of 3.7%](#). Unsurprisingly, our data also shows that more than two-thirds of our workforce are currently considering a career move of some kind.

The evidence to why is all here:

- Patient volume has soared to 20 patients per therapist per day in some practice settings
- Performance metrics remain largely grounded in the fee-for-service model, prioritizing quantity over quality
- Employee’s workplace needs have shifted, but incentives haven’t
- Student debt remains disproportionately high and yet only 8% of rehab therapy organizations offer any sort of student loan payback option

This isn’t an isolated issue to rehab therapy, but with increasing regulatory burdens, evolving patient demands, and rising costs of goods and labor, business profitability margins have shrunk to an all-time low—especially in the small business segment.

We are a service industry that requires an engaged, knowledgeable, and compassionate workforce who can hyper-focus on quality of care and patient outcomes despite market forces that can distract us from that goal. However, it’s evident that our operational practices must evolve and innovative approaches to workforce management are needed. Many of the hot-button issues in this year’s report are fixable if we turn our focus inward to take care of our most important asset: our people.

The old adage of happy employees equals happy customers rings true. With a focus on both the patient and employee experience, operational efficiency must be a priority for all rehab therapy companies across the nation regardless of size. Here at WebPT, the industry’s leading EMR solution, we recognize that some of that efficiency can be solved with the right technology. Therefore, we take our user experience and efficiency very seriously and will continue to prioritize it across all of our platform products.

When organizations center their attention on reducing wasted time, effort, and materials, people can remain at the forefront of our industry’s success strategy, enabling us to excel as healthcare leaders and changemakers.



Dr. Heidi Jannenga
PT, DPT, ATC

Chief Clinical Officer and
Co-Founder of WebPT

Survey Methods

We conducted this survey electronically using the SurveyGizmo platform. In an effort to secure as many responses as possible, we distributed and promoted the survey via multiple channels—to both the WebPT Member base and the general rehab therapy community—including email, digital ads, internal and external media outlets, and social platforms.

The survey was open for a little more than a month. During this window, we collected a total of **6,647 responses**. **WebPT Members accounted for 65%** of those responses, and **non-WebPT Members accounted for 35%**.

In an effort to produce the cleanest data possible, we performed standard post-survey data cleansing, which eliminated duplicate responses, spam responses, and partially completed surveys that did not contain enough data to be considered.

Responses

6,647

WebPT Members

65%

Non-WebPT Members

35%

The Big Picture: Key Takeaways



Before we dive into the details, let's run through some high-level results and analysis. Here are some of our biggest overall takeaways:

Employees and employers are misaligned on what is driving resignations.

Overall, nearly 70% of respondents are considering a professional change, with almost 15% citing they're considering moving to a different clinical role or care setting, 14% citing they're considering moving to a non-clinical role, and nearly 13% citing they're thinking of leaving health care altogether. Their biggest reason? Higher wages. Comparatively, clinic leaders and executives ranked the request for higher salaries as the third-biggest driver of resignations. What's more, among employees, relocating to a new state or city ranked as the second-lowest reason for considering a career change, yet executives ranked this as the highest reason for employee resignations last year.

Staff retention strategies aren't quite hitting the mark.

The number-one strategy that executives are using to retain or hire employees is offering flexible schedules. However, executives ranked the desire for more flexible schedules as the seventh reason for employee resignations last year. Employees, on the other hand, ranked improved work-life balance, company culture, and income stability as the top three most important factors when weighing new job opportunities.

Burnout has reached a dangerous level in rehab therapy.

More than a third of the rehab therapy workforce report that they are burnt out, with high patient workloads and long work hours cited as the top reasons for burnout. Clinical providers also ranked burdensome documentation as the third biggest contributor to burnout.

All respondents, regardless of role, setting, age, race/ethnicity, or years worked in the industry ranked burnout as the second-highest concern for the future of the rehab therapy industry.

New technology adoption is happening faster than ever before.

Overall, there was a greater range of new technologies used in the last year that weren't used in the year previously. The top four include:

- Videoconferencing and virtual meeting software (35.6%)
- Telehealth software (22.6%)
- Digital home exercise program (HEP) software (22.5%)
- Patient engagement and marketing software/secure patient messaging (21.9%)

What's more, nearly 18% of respondents stated that they are looking to invest in digital home exercise program (HEP) software, making it the second-most sought-after piece of technology after EMRs.

Female representation at the executive level is growing.

Women continue to out-represent men in all rehab therapy roles except for at the executive level. Currently, about 53% of our industry's C-level positions are held by men and 46% are held by women. However, in 2021, about 60% of C-level respondents were men and 40% were women, indicating this gap may be shrinking.

Results

We’ve divided our results into six categories: Demographics, Business and Financials, Staffing and Employment, Challenges and Opportunities, Salary, and Technology.

The **Demographics** category provides details about the survey respondents and the organizations they represent.

The **Business and Financials** category offers insights on revenue, therapist productivity, key performance indicators, operational workflows, and growth strategies—all broken down by company size.

The **Staffing and Employment** category covers reasons for career changes, job expectations, employee turnover, and retention strategies.

The **Challenges and Opportunities** category explores factors influencing career and industry outlook—including burnout, top organizational challenges, and student debt.

The **Salary** category shares compensation information based on job role, employment type, location, age, and gender identity.

The **Technology** category focuses on telehealth adoption and use in addition to highlighting some of the other technologies rehab therapy organizations plan to use in the future.



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Demographics



Overall Role Distribution

Some respondents selected multiple roles.

Owner	1,022	Administrator	676	Physical Therapist	2,640
C-Level Executive	182	Office Manager	1,011	Occupational Therapist	714
VP/Director	340	Billing Manager	491	Speech-Language Pathologist	245

Executive Total

1,452

Manager Total

1,511

Therapist Total

3,542

Physical Therapist Assistant (PTA)	441	Clerical Staff	662
Occupational Therapy Assistant (OTA)	99	Student	327
Speech-Language Pathologist Assistant (SLPA)	114	Other	446

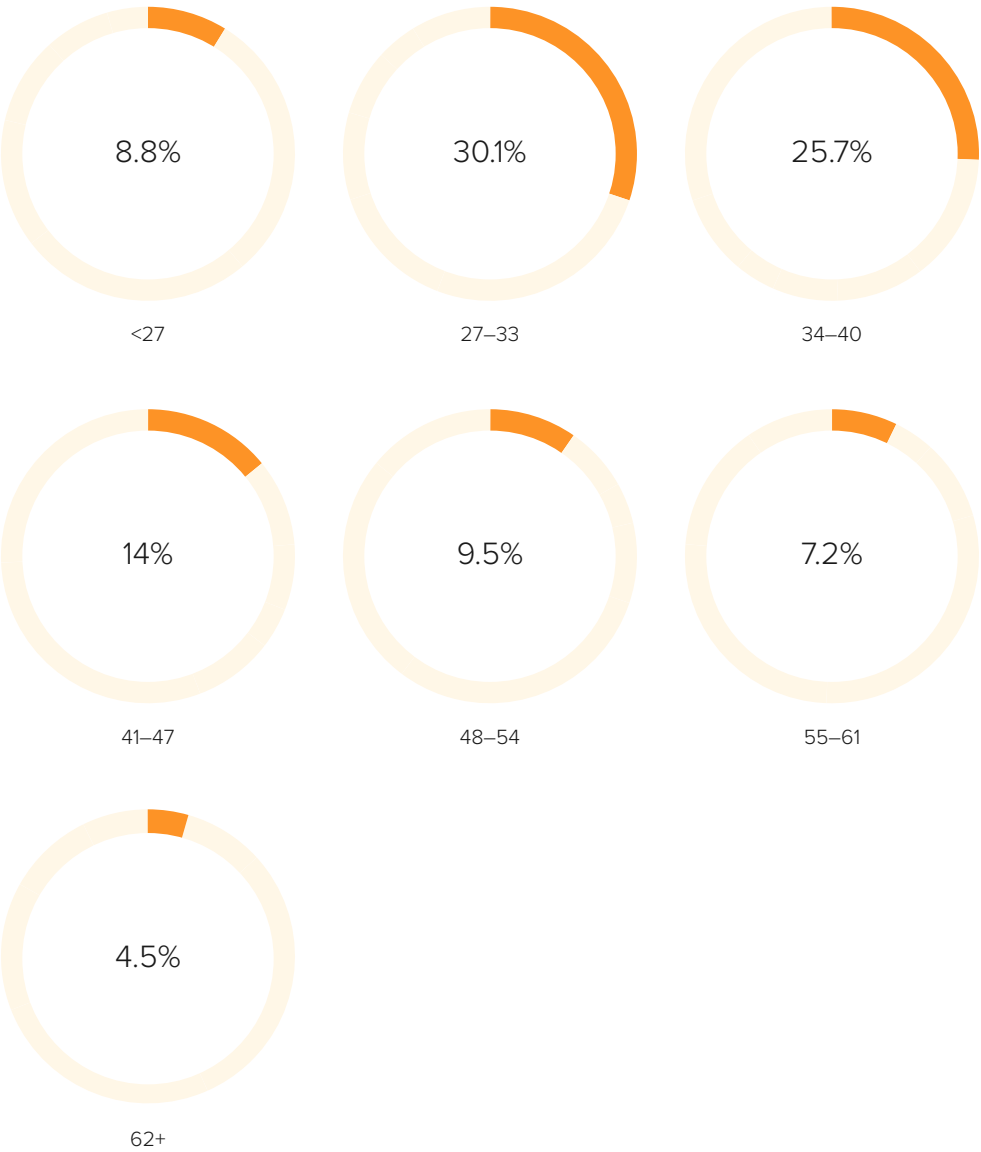
Therapy Assistant Total

640

Clerical, Student, Other Total

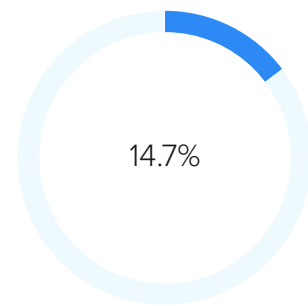
1,385

Overall Age Distribution

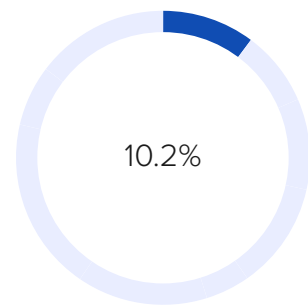


Respondent Makeup

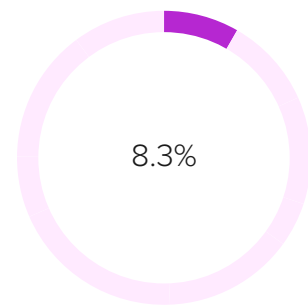
Overall Region/Location Distribution



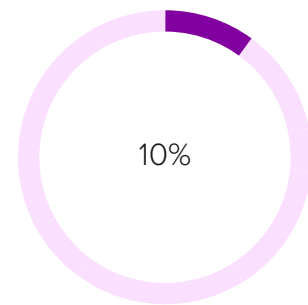
Pacific



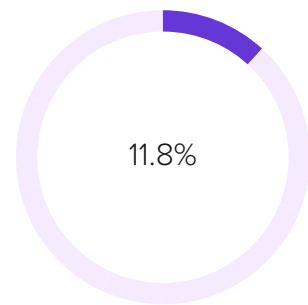
Mountain



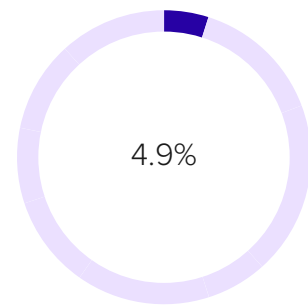
West North Central



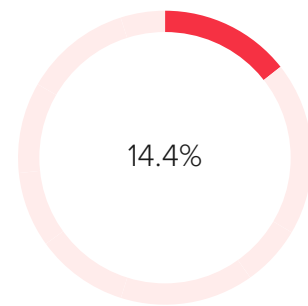
West South Central



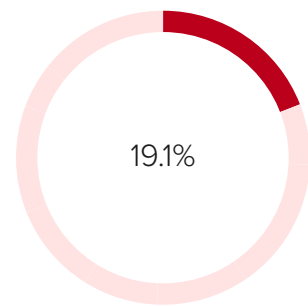
East North Central



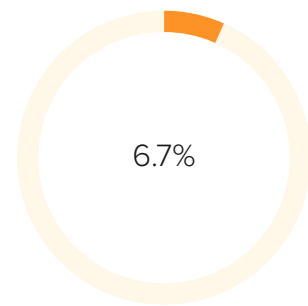
East South Central



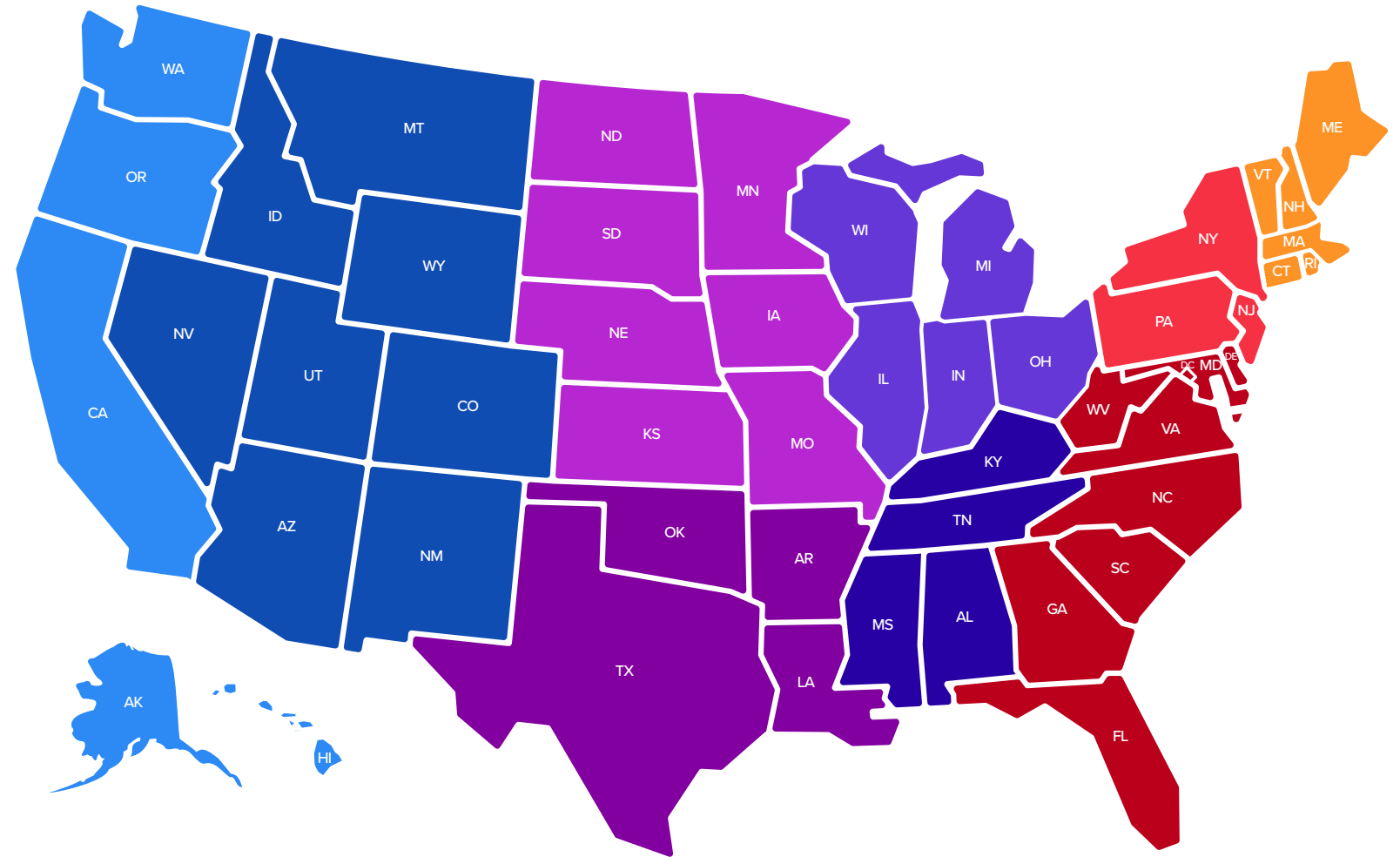
Middle Atlantic



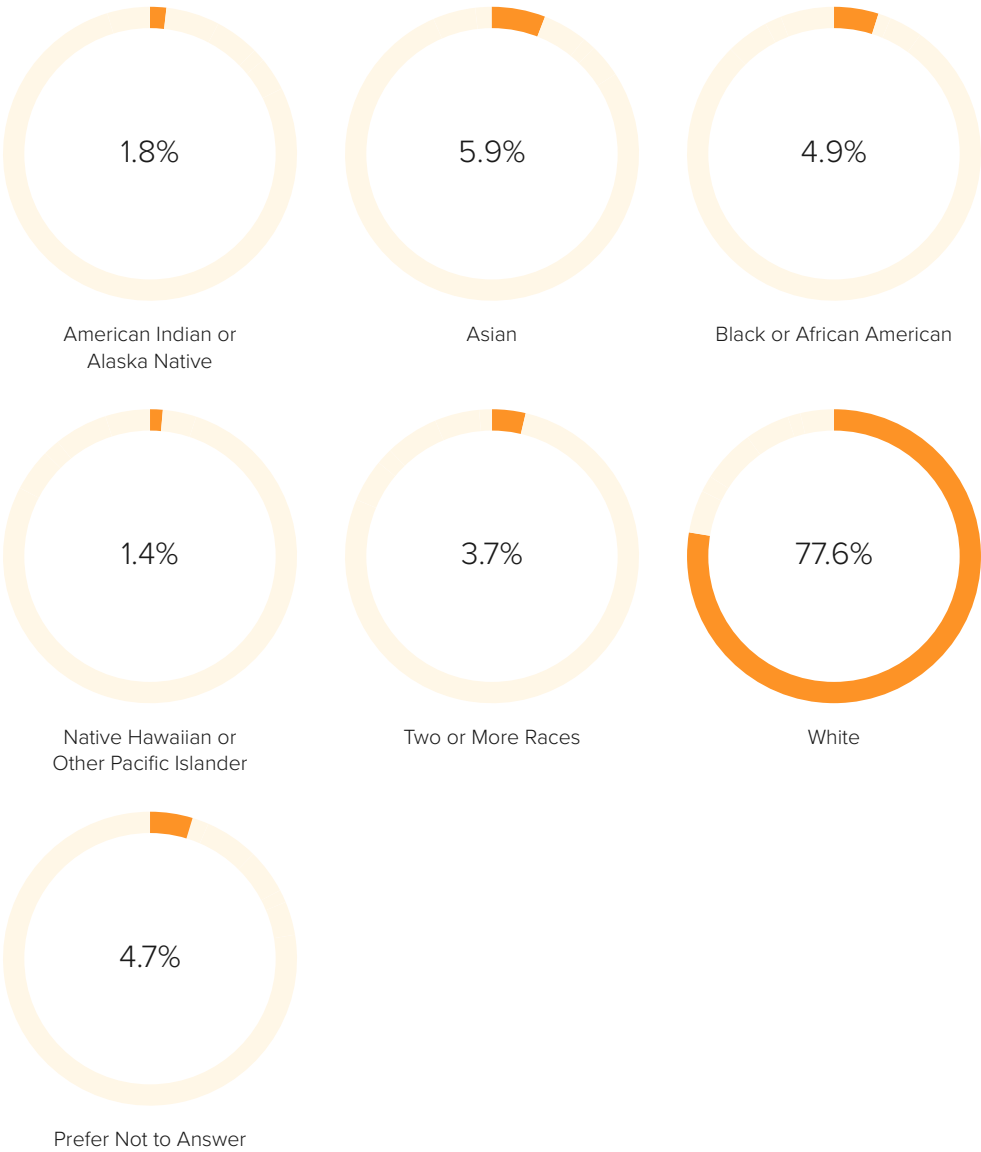
South Atlantic



New England



Overall Ethnicity Distribution



More than three-quarters of therapy professionals are white. By contrast, according to 2021 US Census data, 60% of the US population is white.



“The importance of diversity, equity, and inclusion has raised awareness essential to addressing disparities, providing opportunities for underrepresented professionals and pre-professionals, and building a stronger and more diverse workforce.

Creating a safe, supportive, and inclusive environment opens the door to active participation and sets in motion personal and professional growth. Each of us plays a critical role in amplifying our collective efforts on this front and setting the course for the future of rehab therapy.”

JeMe Cioppa–Mosca, PT, MBA
Senior Vice President
HSS Rehabilitation and Performance

“Diversity in the industry is an issue that goes beyond simply increasing admission rates. To truly impact the diversity of the industry we need to ask some tough questions; namely, are we supporting the students we admit to our professional programs? How different are the demographics in our local elementary schools compared to our professional programs? I believe that the early childhood educational experience sets the stage for the demographics we measure professionally.”

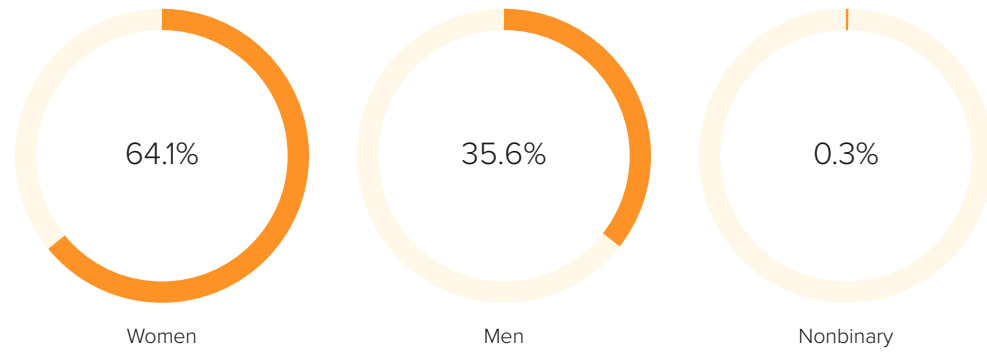
Kendell Jno-Finn, PT, DPT, TPI-M2
Founder and President
M3 Performance and Physical Therapy

“Prioritizing diversity might help expand access, but only if we then also provide education and support for PTs who want to open clinics in these underserved communities. No matter the race and setting, if providers are not aware of and sensitive to cultural differences, it can create a lack of distrust, which can decrease patient buy-in and affect outcomes.”

TaVona Boggs, PT
Master Certified Life and Business Coach
Owner, Thrive Network



Overall Gender Breakdown



Nearly 64% of the profession are women



Role Type of Respondents by Gender

	Women	Men	Nonbinary
Owner	53.8%	45.5%	0.7%
C-Level Executive	45.6%	52.9%	1.5%
VP/Director	51.7%	48.3%	0%
Executive Total	53.5%	46%	0.5%
Administrator	79.6%	19.8%	0.7%
Manager	57.4%	42.3%	0.3%
Biller	90.1%	9.9%	0%
Manager Total	64.8%	34.7%	0.5%
Physical Therapist	55.6%	44.1%	0.2%
Occupational Therapist	66.4%	33.4%	0.2%
Speech-Language Pathologist	64.6%	35.4%	0%
Therapist Total	58.4%	41.4%	0.2%

Women outrepresent men in all roles except at the C-level. Roughly 53% of all C-level positions are held by men and 46% are held by women. However, this gap has closed by six percentage points since last year.



“Men, and more specifically white cis-gender men, have traditionally been in positions of power. Despite the fact women make up the majority of the rehab therapy workforce, there are several reasons they’re precluded from coveted C-level positions:

- Men act as gatekeepers
- White women act as gatekeepers to marginalized groups like Black and Brown women
- Women bear greater responsibility for family support
- Women contend with “imposter syndrome”
- Women are deemed as an “emotional liability”

To see an improvement in this statistic, we must seek to dismantle these existing issues with an emphasis on race being at the forefront.”

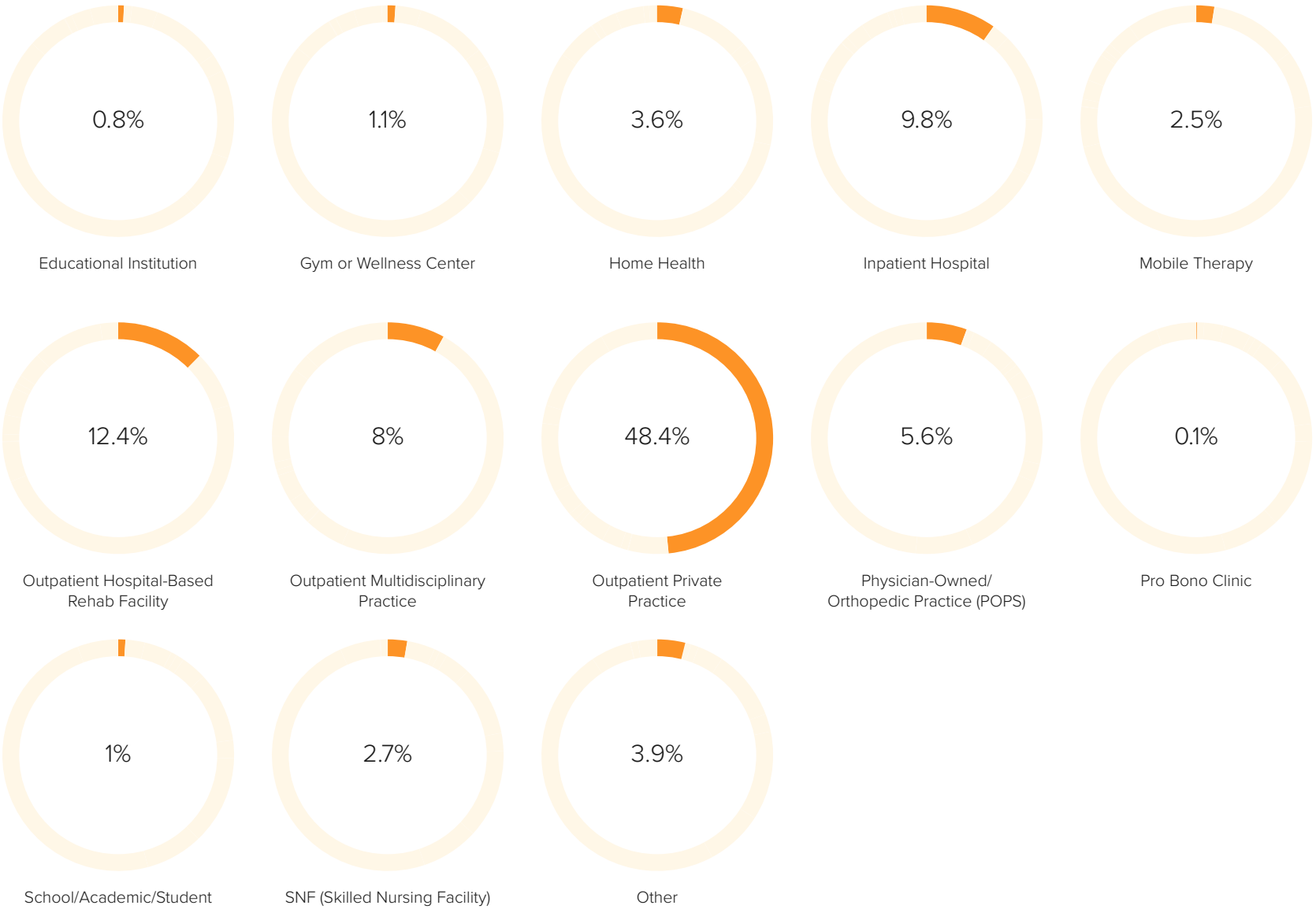
Oluremi Wanjiru Onifade, PT, DPT, M.Ed, CCI, CDP
Co-Founder and President, NABPT

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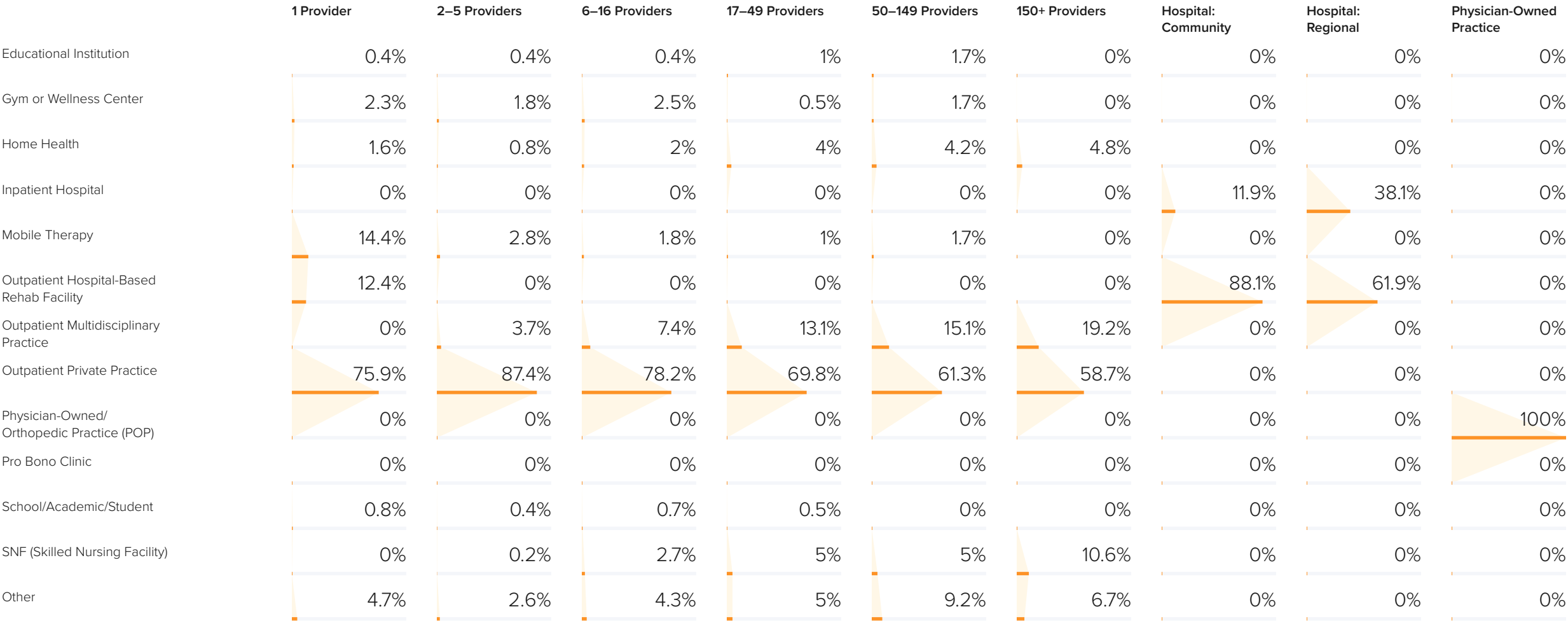
Role Type of Respondents by Gender
(Continued)

	Women	Men	Nonbinary
Physical Therapist Assistant (PTA)	65.1%	34.9%	0%
Occupational Therapy Assistant (OTA)	60.3%	38.4%	1.4%
Speech-Language Pathologist Assistant (SLPA)	50%	50%	0%
Therapy Assistant Total	61.1%	38.7%	0.2%
Clerical Staff	91.9%	7.6%	0.5%
Student	66.7%	33.3%	0%
Other	77.4%	22.2%	0.4%
Clerical, Student, Other Total	79.9%	19.8%	0.3%

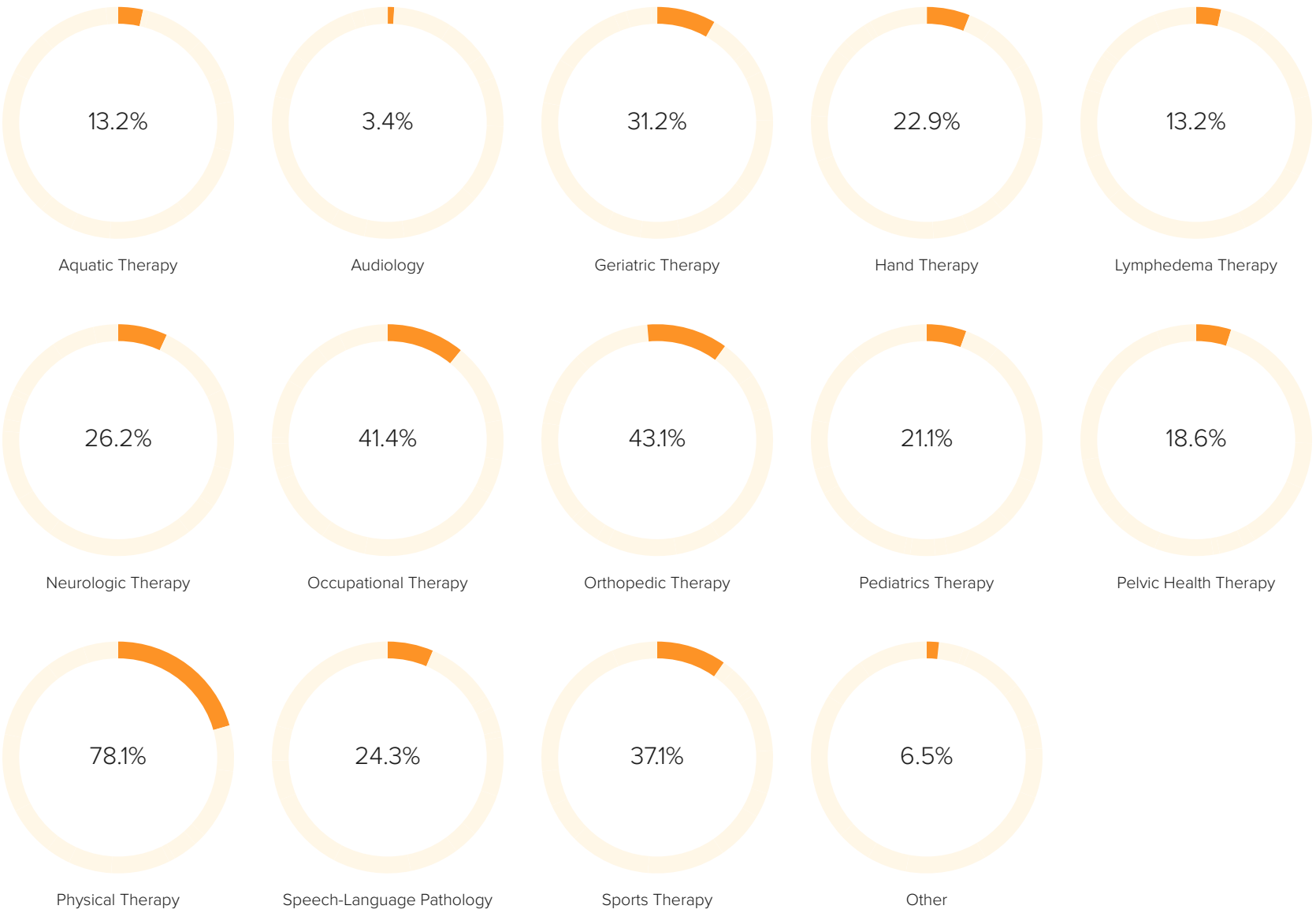
Practice Setting Overall



Number of Providers by Practice Setting



Types of Therapy Provided Overall

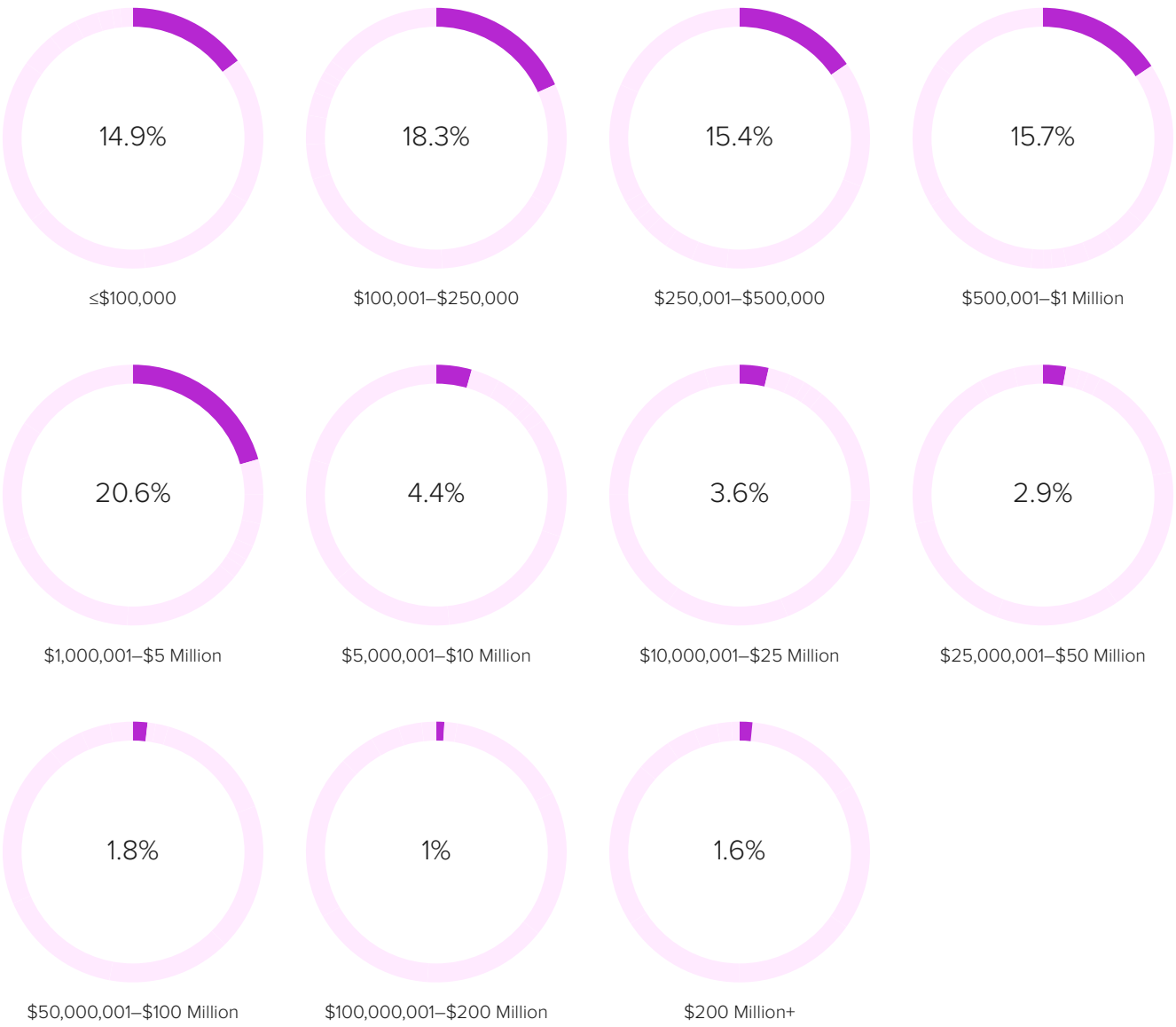




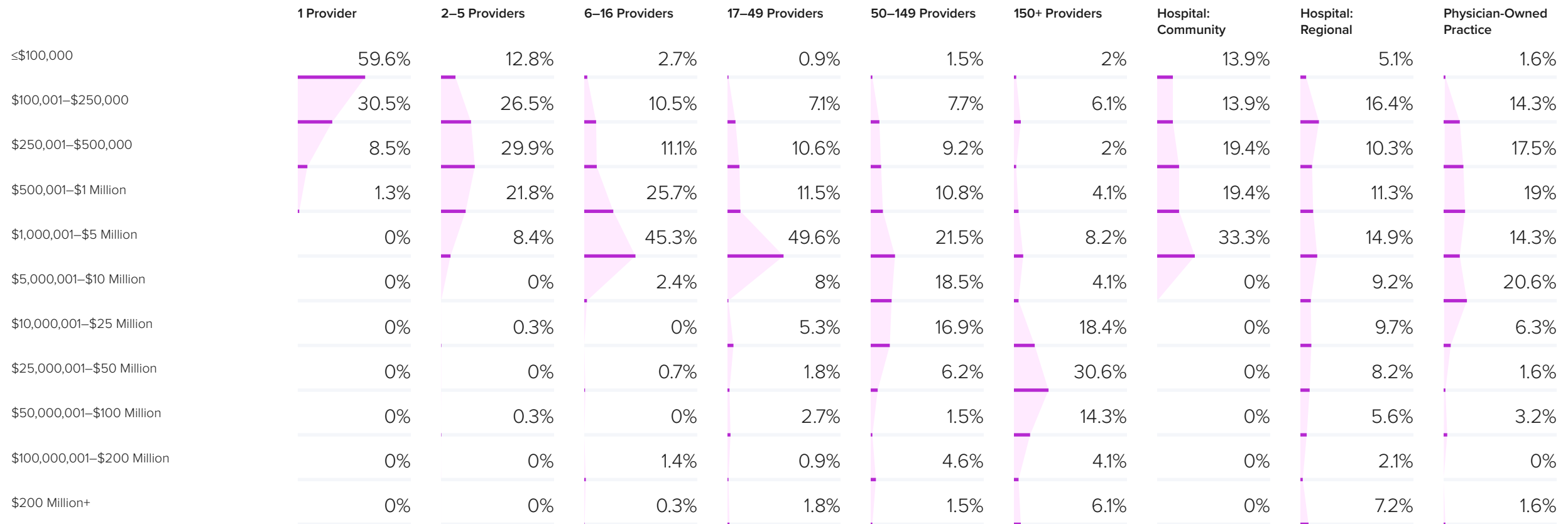
Business and Financials



Annual Gross Revenue Overall



Annual Gross Revenue by Provider Segment



Patients Seen Per Therapist, Per Day Overall

1 Provider	8.5	17–49 Providers	12.1	Hospital: Community	12.8
2–5 Providers	12.8	50–149 Providers	16.9	Hospital: Regional	15.6
6–16 Providers	12.8	150+ Providers	13.6	Physician-Owned Practice	14.4

Overall

12.9

The average number of patients seen per therapist, per day is 12.9. However, in organizations with more than 50 providers, this number rises to 17 patients seen per therapist, per day.



“While patient visits per therapist per day does have a ceiling, unfortunately, payer restrictions, limits to reimbursement and other factors limiting net revenue per visit does not seem to have a limited basement. Relying on ever-escalating per-therapist patient volume per day will negatively impact patient satisfaction, therapist satisfaction, and outcomes.”

John Brickley, PT, MA
Vice President, Ambulatory Operations and Network Development
MedStar Health Physical Therapy

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Patients Seen Per Therapist, Per Day by Practice Setting

Educational Institution	20.4	Inpatient Hospital	20	Outpatient Multidisciplinary Practice	11.7	Pro Bono Clinic	N/A
Gym or Wellness Center	10.3	Mobile Therapy	6.8	Outpatient Private Practice	12.8	School/Academic/Student	8.3
Home Health	10.7	Outpatient Hospital-Based Rehab Facility	12.7	Physician-Owned/Orthopedic Practice (POP)	14.4	SNF (Skilled Nursing Facility)	13.2

Educational institutions and inpatient hospitals top the patient volume charts, with each of its providers seeing approximately 20 patients per day.

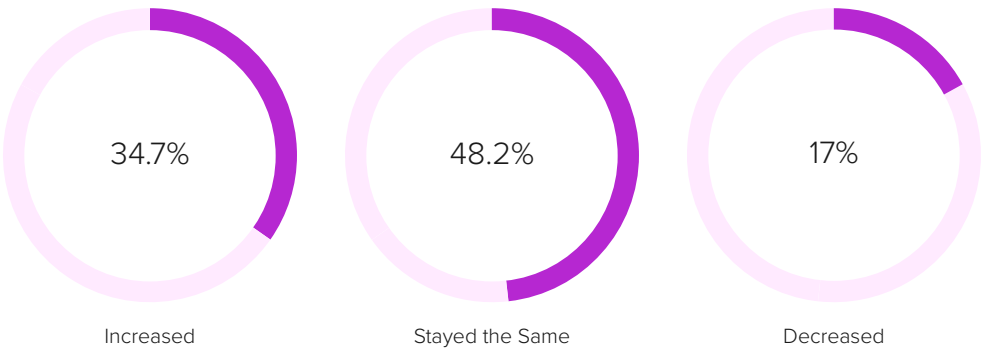


“It’s not as simple as “more is better” when it comes to one-on-one time spent with patients. Rather, a competitive advantage is created when providers are judicious in how they balance their time throughout the day, including time spent with each patient and time spent meeting their many other professional responsibilities.”

Rick Lybbert, PT, OCS
CEO and President
Mountain Land Physical Therapy

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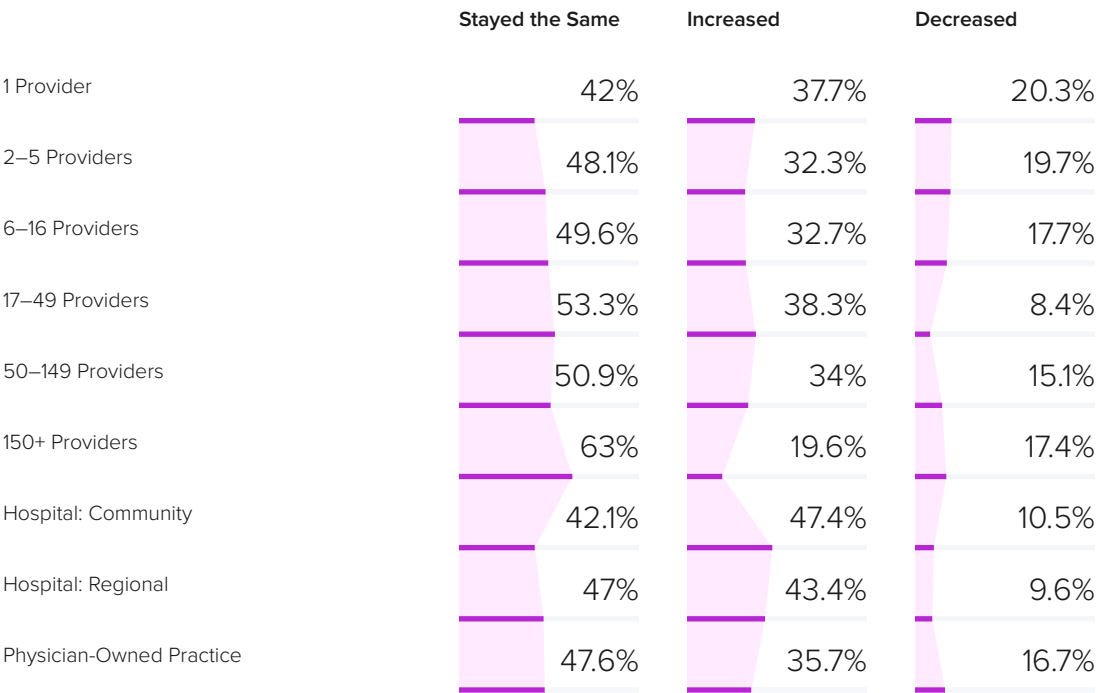
Patient Volume in 2021 Compared to Years Past Overall



Nearly 35% of rehab therapy organizations saw an increase in patient volume over the past year compared to years past.



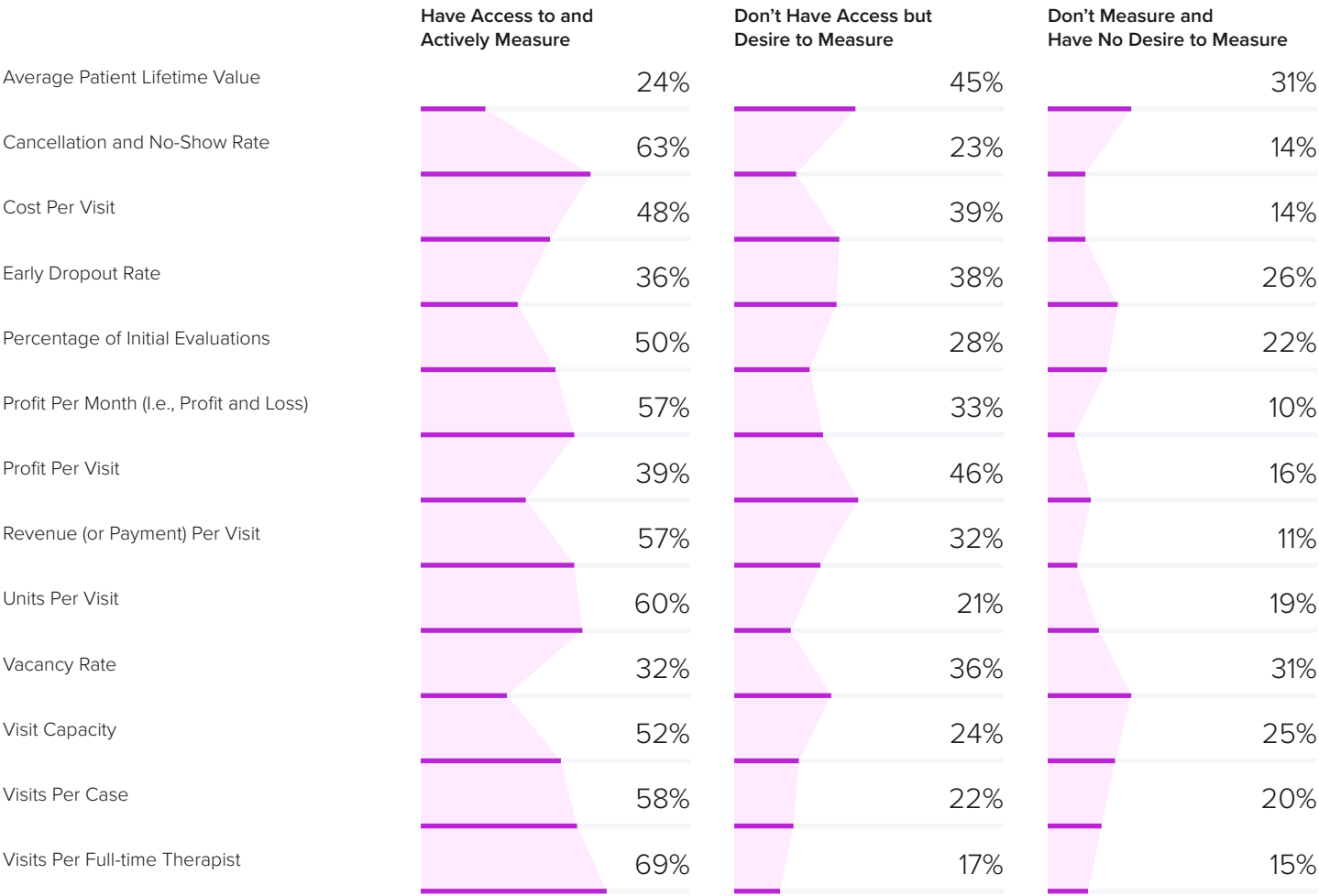
Patient Volume in 2021 Compared to Years Past by Provider Segment



Community hospitals witnessed the highest increase in rehab patient volume (47.4%) over this past year compared to years past.



Key Performance Indicators Measured Overall



The top five key performance indicators (KPIs) measured across all rehab therapy organizations is visits per full-time therapist, cancellation and no-show rate, units per visit, visits per case, and revenue per visit.

Conversely, the least measured KPI is average patient lifetime value.

“A practice that establishes a universal productivity goal invariably fails to account for the individual differences between clinicians, which can lead to frustration and misinterpretation. By contrast, variable compensation models allow a provider to set his/her own productivity goals and to be paid according to their relative contribution to the company.”

Jason Wambold, MSPT
Co-Founder and Managing Partner
Pay for Performance Solutions/Onus One

“Over my career, I have consistently seen clinics and clinicians with the best operational KPIs also have the best clinical KPIs and outcomes. We have done extensive research around KPIs at our organization and their impact on outcomes, and the number one driver for positive outcomes is a high arrival rate.”

Troy Bage, PT, DPT
COO, Ivy Rehab Physical Therapy

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Workflows That Drive Clinical Efficiency Overall

Workflows That Drive Clinical Efficiency by Provider Segment

	Overall	1 Provider	2–5 Providers	6–16 Providers	17–49 Providers	50–149 Providers	150+ Providers	Hospital: Community	Hospital: Regional	Physician-Owned Practice
Clinical (e.g., Documentation, Customizable Content, Outcomes Tools, Flowsheets)	1	1	2	2	1	1	1	2	2	1
Front Office Workflows (e.g. Scheduling, Benefit Verification)	2	2	1	1	2	2	2	1	1	2
Physician/Referral Marketing	3	3	3	4	4	3	4	4	4	6
Reporting/Data	4	6	6	5	3	5	3	3	3	4
Patient Marketing	5	4	4	3	6	4	6	5	5	5
Patient Tools (e.g., Portal, HEP, Online Bill Pay)	6	5	5	6	7	6	5	6	6	3
Back Office/RCM	7	7	7	7	5	7	7	7	7	7

Clinical and front office workflows were ranked the two most important workflows for driving clinical efficiency overall.



“With declining reimbursements and significant increases in costs to run a practice, I am both surprised and disappointed to read that the back office and RCM consistently ranked as the least important workflows overall.

“ ”

Practice owners need to focus more on the back-end items of running a business, like tracking productivity, units per visit, and visits per work day, as well as which CPT codes and the percentage of each CPT code therapists and assistants are billing. Additionally, owners must be involved in reviewing monthly financial reports and key performance metric indicators in order to make the tough, but necessary, decisions for the financial success of their practice.”

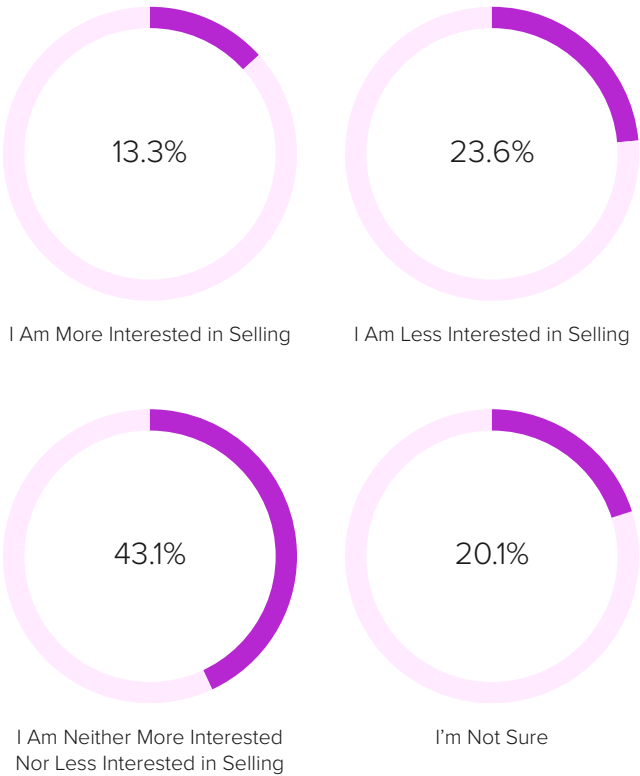
Rick Gawenda, PT
President
Gawenda Seminars and Consulting

Workflows That Require the Most Improvement/ Technological Investment Overall	Workflows That Require the Most Improvement/Technological Investment by Provider Segment									
	Overall	1 Provider	2–5 Providers	6–16 Providers	17–49 Providers	50–149 Providers	150+ Providers	Hospital: Community	Hospital: Regional	Physician-Owned Practice
Clinical (e.g., Documentation, Customizable Content, Outcomes Tools, Flowsheets)	1	3	3	3	2	4	3	1	2	1
Front Office Workflows (e.g. Scheduling, Benefit Verification)	2	4	1	1	1	2	1	4	1	2
Patient Tools (e.g., Portal, HEP, Online Bill Pay)	3	5	5	2	4	3	4	2	3	3
Physician/Referral Marketing	4	2	2	6	6	7	5	6	5	6
Patient Marketing	5	1	4	5	5	5	6	5	6	5
Reporting/Data	6	6	7	4	3	1	2	3	4	4
Back Office/RCM	7	7	6	7	7	6	7	7	7	7

Similarly, respondents cited that clinical and front office workflows could also use the most improvement.



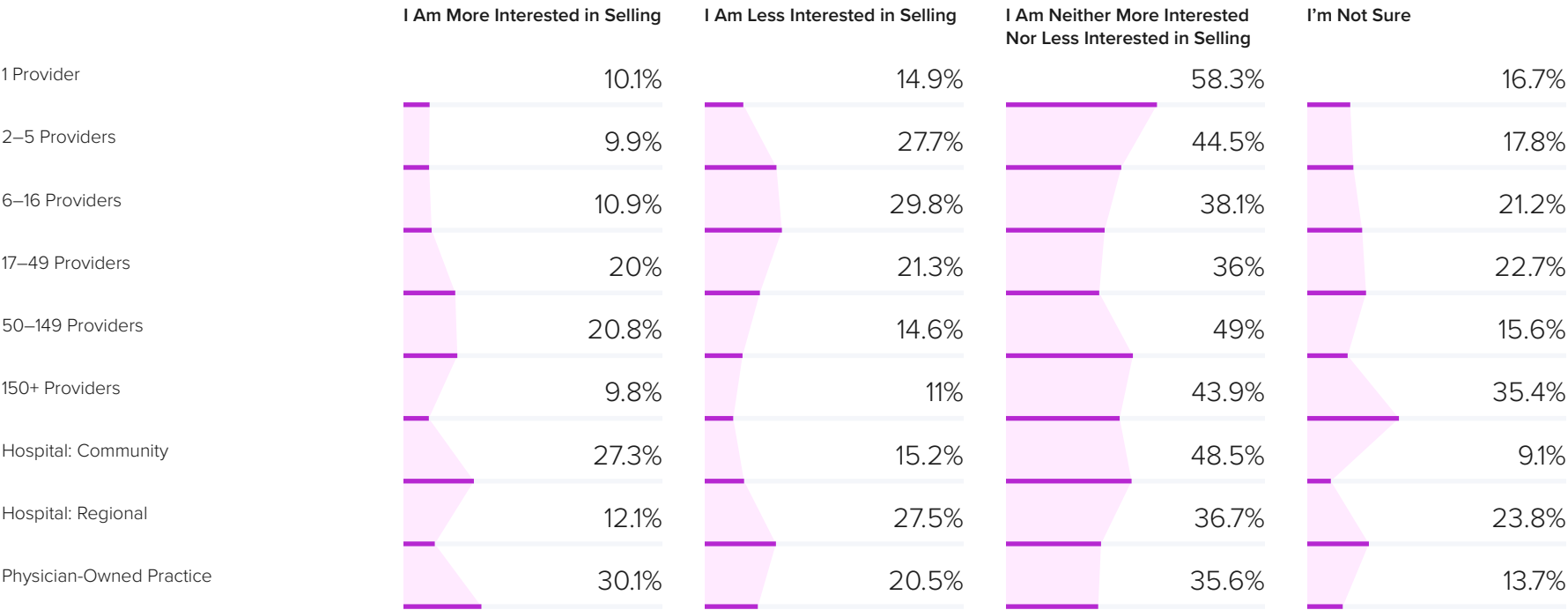
Interest in Selling This Year Compared to Last Year Overall



Overall, 13% of practice leaders are more interested in selling their business this year compared to last year.



Interest in Selling This Year Compared to Last Year by Provider Segment



“Physical therapy has experienced unprecedented growth in outpatient practices from new investments and increasing demand for services over the past decade. However, it’s understandable that this growth is slowing as the market stabilizes post pandemic and navigates current workforce and payment challenges.”

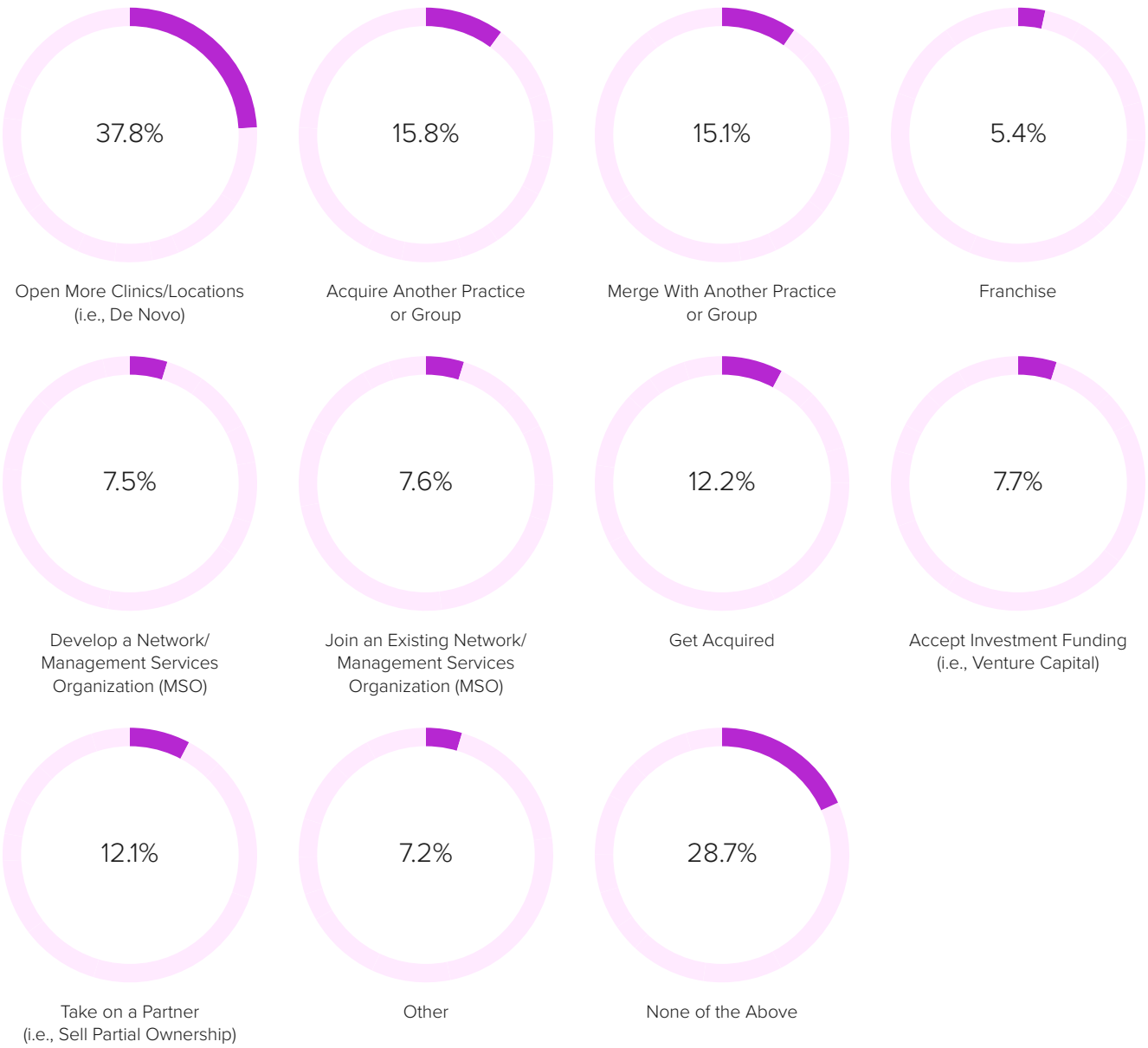
Justin Moore, PT, DPT
CEO
American Physical Therapy Association



Clinic leaders from physician-owned practices showed the most interest in selling, with nearly 1 in 3 reporting that they are more interested in selling their business this year compared to last year.



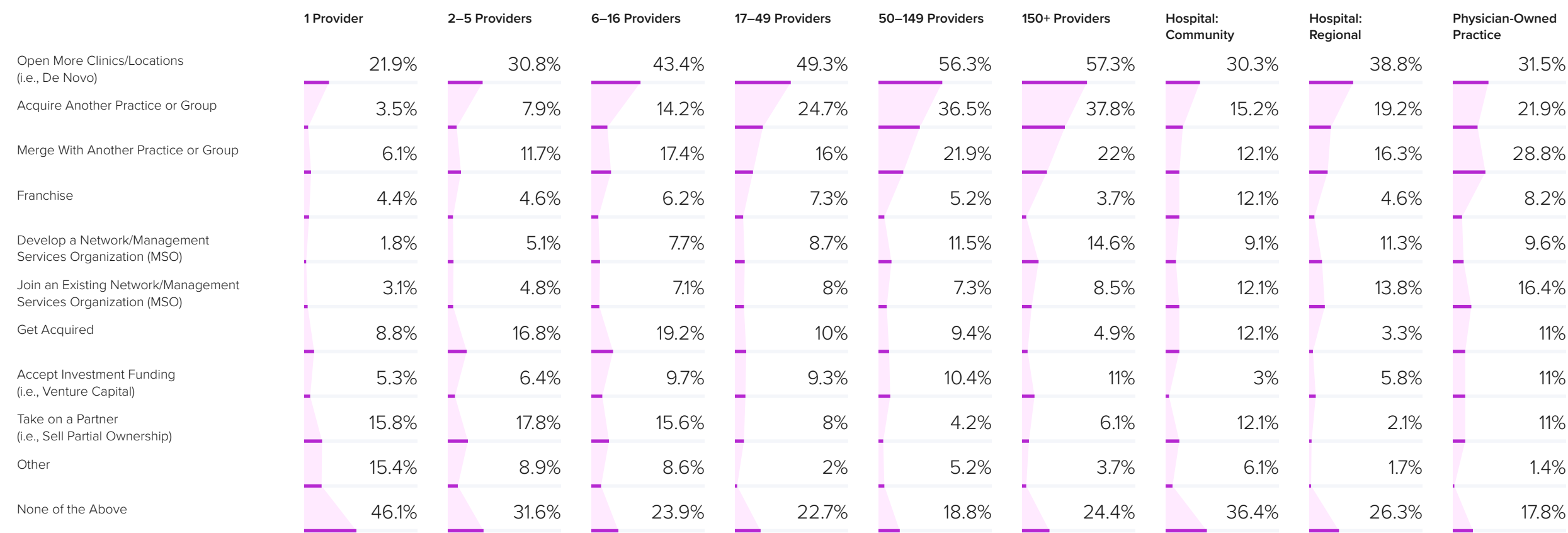
Growth Strategies in the Next Five Years Overall



Overall, 29% of clinic leaders responded that they weren't interested in implementing any growth strategies in the next five years.



Growth Strategies in the Next Five Years by Provider Segment



The most-considered growth strategy across all practice sizes and segments is opening more new locations (nearly 40% overall). This strategy becomes more popular as clinics increase in size, with more than 56% of leaders from organizations with 50 or more providers looking at opening a new clinic in the next five years.



“With so many people currently investing in the PT industry and fewer acquisition opportunities available, it’s not surprising existing clinics would prefer to grow by opening new units rather than jumping into the competition of growth by acquisition.

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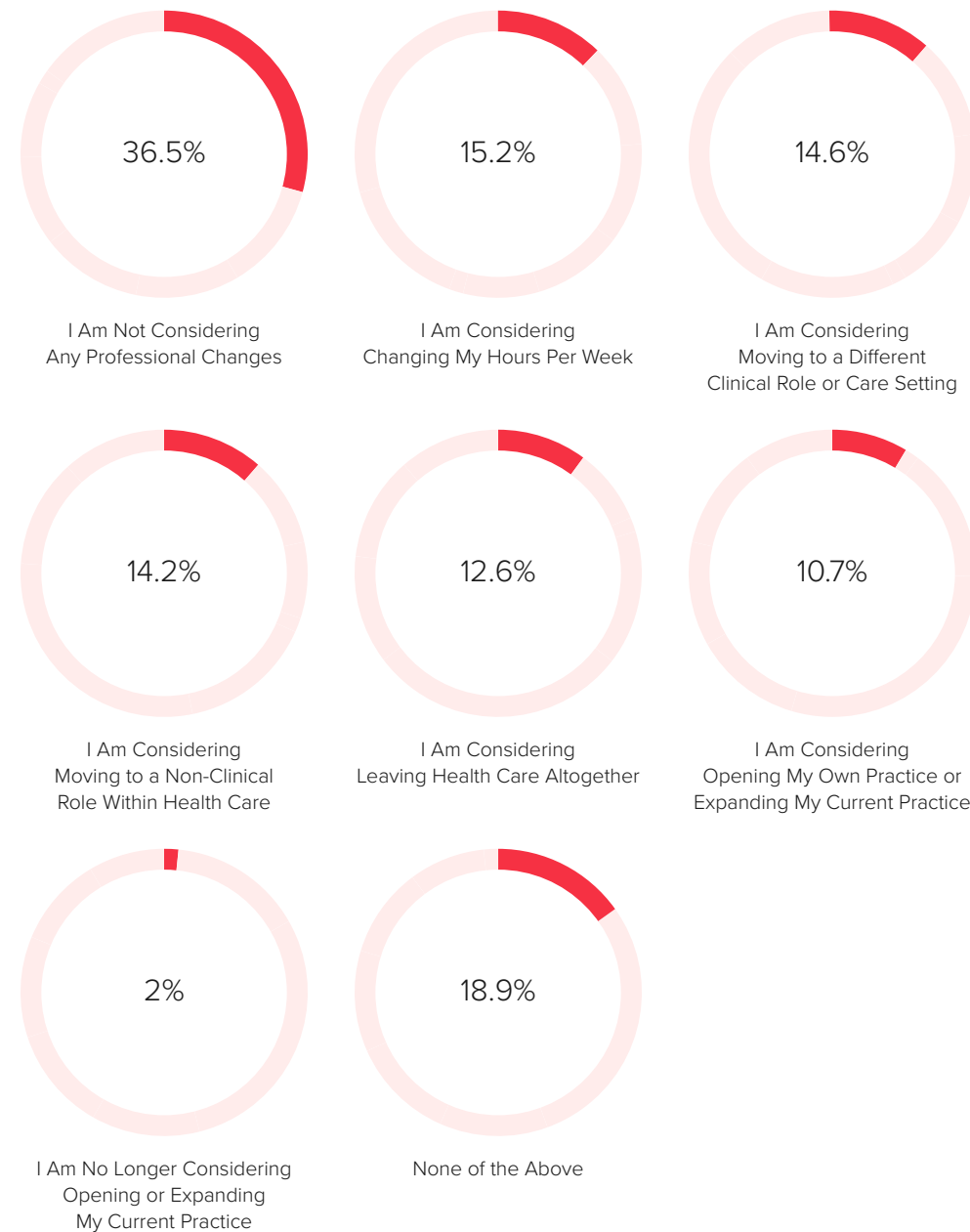
Rick Douglass, PT, DPT, FAAOMPT
President of Operations
FYZICAL



Staffing and Employment



Professional Changes Being Considered Overall



Nearly 70% of respondents are considering a professional change of some kind, with nearly 15% citing they're considering moving to a different clinical role or setting, 14% citing they're considering moving to a non-clinical healthcare role, and nearly 13% citing they're thinking about leaving health care altogether.



Professional Changes Being Considered by Role Type

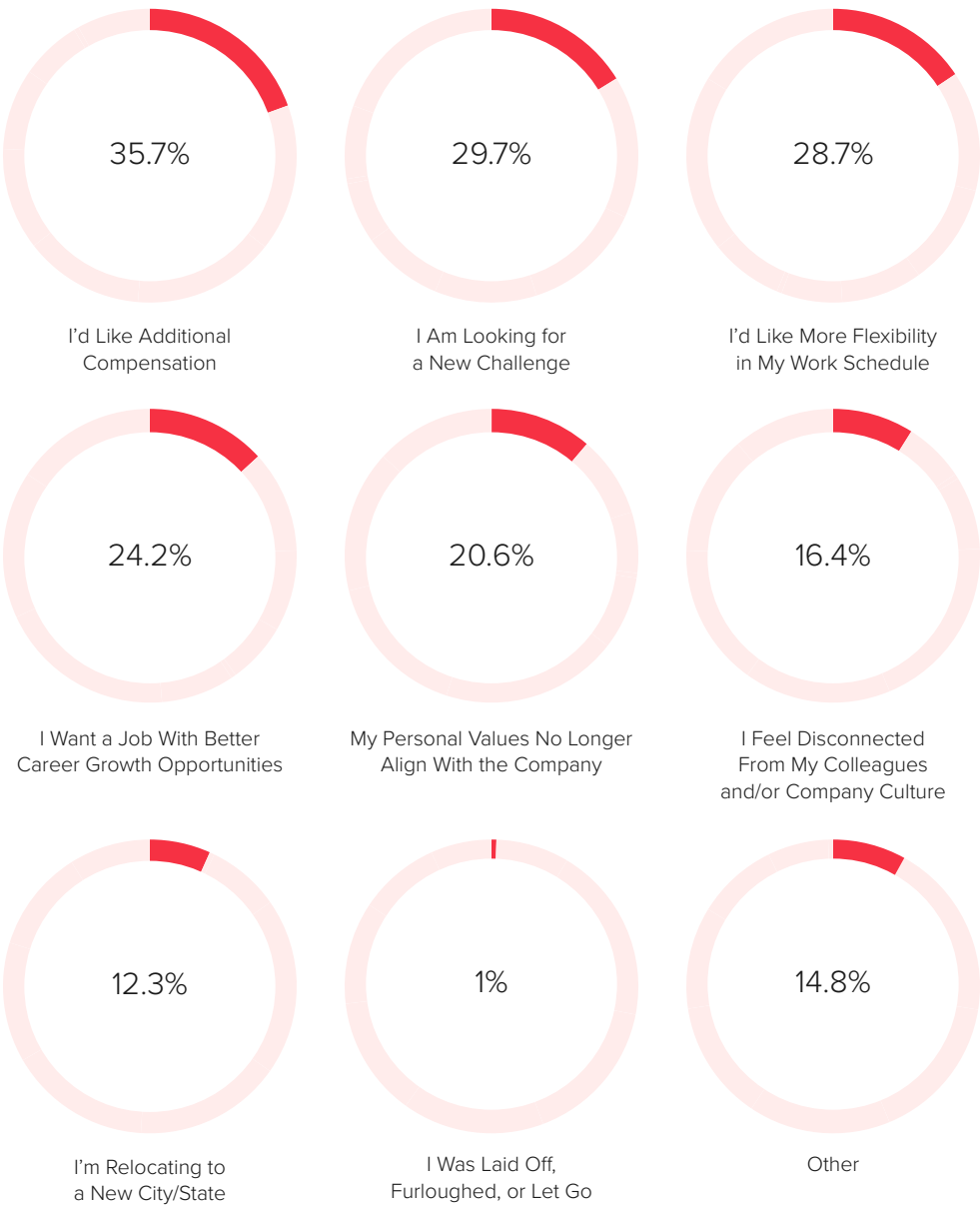
	Executive	Manager	Provider	Assistants	Other
I Am Not Considering Any Professional Changes	35.6%	37.7%	35.4%	36.8%	39%
I Am Considering Changing My Hours Per Week	15.2%	12.5%	18.2%	19.7%	8.4%
I Am Considering Moving to a Different Clinical Role or Care Setting	14.6%	11.6%	17.3%	15.8%	11.7%
I Am Considering Moving to a Non-Clinical Role Within Health Care	14.2%	13.2%	17.1%	16.4%	8.9%
I Am Considering Leaving Health Care Altogether	12.6%	10.8%	14.7%	15.2%	9.1%
I Am Considering Opening My Own Practice or Expanding My Current Practice	10.7%	10.5%	13.2%	8.4%	4.6%
I Am No Longer Considering Opening or Expanding My Current Practice	2%	2.3%	2.5%	2.1%	1.3%
None of the Above	18.7%	25.3%	11.9%	18.3%	31.3%

“I’m surprised that the number of clinicians considering a non-clinical career move isn’t higher. If the last couple of years have taught us anything, it’s that small business owners are not who the federal government agencies are favoring within our healthcare industry. It’s the larger corporations, medical systems, and bigger conglomerates that are able to keep pace with today’s overburdening regulatory policies amidst the falling reimbursement.”

Brian Gallagher, PT
Founder and President
MEG Business Management

“ ”

Reasons for Considering a Professional Change Overall



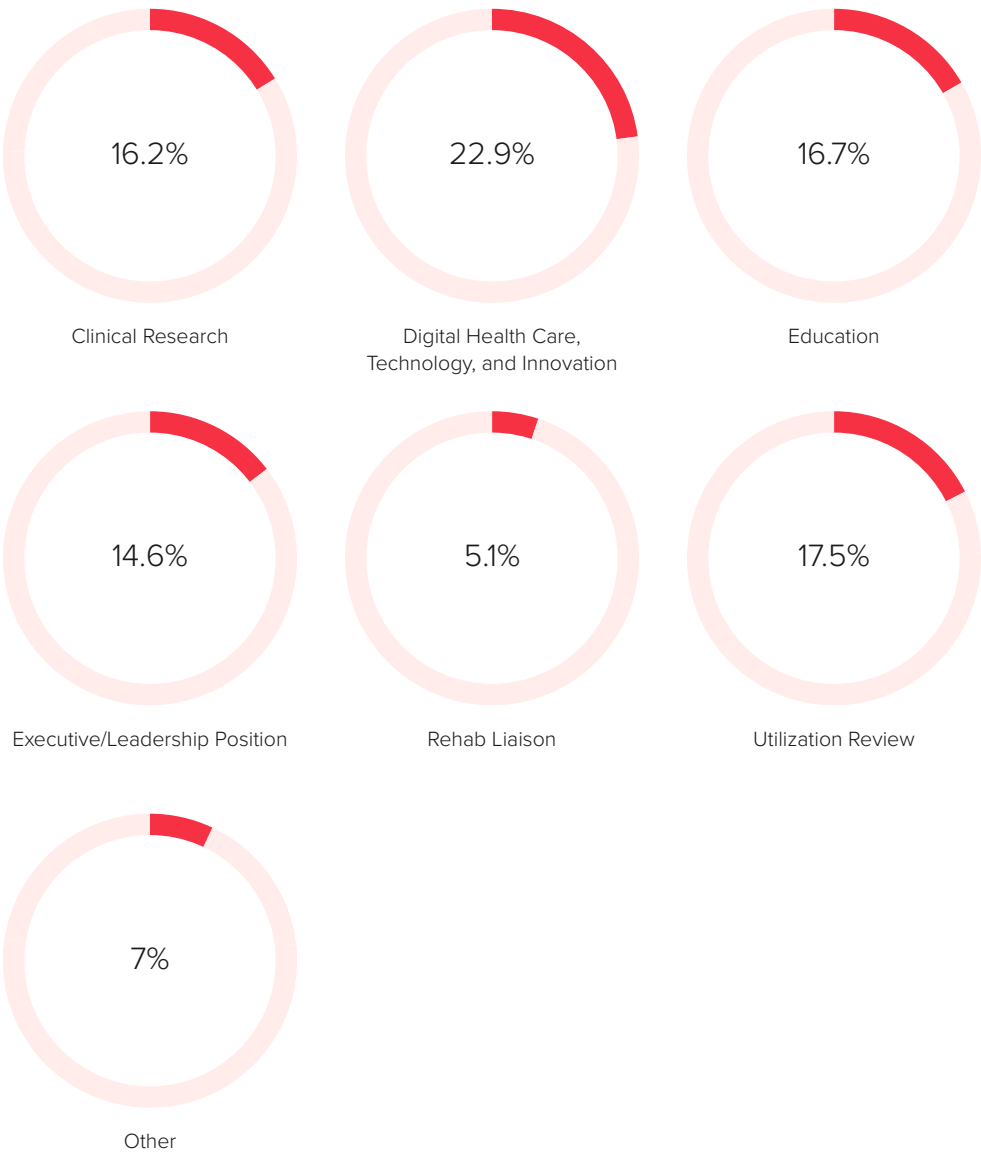
Additional compensation was the top-cited reason overall for those considering a professional change (35.7%).



Reasons for Considering a Professional Change by Role Type

	Executive	Manager	Provider	Assistants	Other
I'd Like Additional Compensation	33.9%	38.4%	35.6%	38.6%	37.4%
I Am Looking for a New Challenge	29.5%	36.7%	28.9%	22.7%	40.3%
I'd Like More Flexibility in My Work Schedule	33.7%	33%	30.5%	27%	28.4%
I Want a Job With Better Career Growth Opportunities	15.3%	26.5%	23.1%	25.8%	32.7%
My Personal Values No Longer Align With the Company	14%	17%	21.2%	28.3%	12.8%
I Feel Disconnected From My Colleagues and/or Company Culture	10.7%	13.3%	17.4%	23.6%	8.5%
I'm Relocating to a New City/State	9.2%	12.1%	11.6%	19.3%	8.1%
I Was Laid Off, Furloughed, or Let Go	1.1%	1.2%	0.8%	2.1%	0.9%
Other	25.3%	19.3%	15.3%	9.9%	24.2%

Non-Clinical Career Path Considerations



Nearly a quarter of rehab therapy professionals who are considering leaving clinical care are leaning most toward entering the digital health, technology, and innovation industry.



“I’ve always felt that there’s a certain type of PT whose full potential is unlocked once you remove the emotional and physical demands of patient care. I believe that technology will play a big role in the future of healthcare, which means that we will be meeting patients where they are: using technology as part of their busy lives.”

Meredith Castin, PT, DPT
Owner
The Non-Clinical PT

“ ”

Most Important Job Factors Overall	Most Important Job Factors by Role Type					
	Overall	Executive	Manager	Provider	Assistants	Other
Work-Life Balance	1	2	1	1	1	2
Company Culture	2	1	4	2	4	5
Income Stability	3	5	3	4	2	1
Salary/Benefits	4	4	2	3	3	3
Schedule Flexibility	5	3	5	5	5	4
Growth Opportunities	6	6	6	6	6	6
Specialty/Practice Setting	7	7	7	7	7	7

Having a healthy work-life balance and being employed at an organization that prioritizes its culture are the top two most important job factors to respondents who are weighing new opportunities.

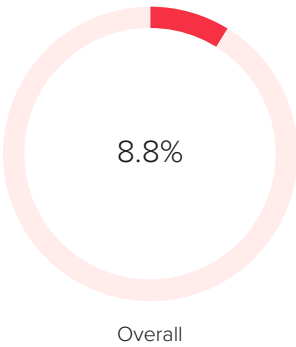


“The pandemic made many people realize that time is the one resource they cannot get back, and money isn’t as important as they thought it was, so if they choose to spend at least a third of their day at a particular job, they would like to have a sense of fulfillment and satisfaction.”

“ ”

TaVona Boggs, PT
Master Certified Life and Business Coach
Owner, Thrive Network

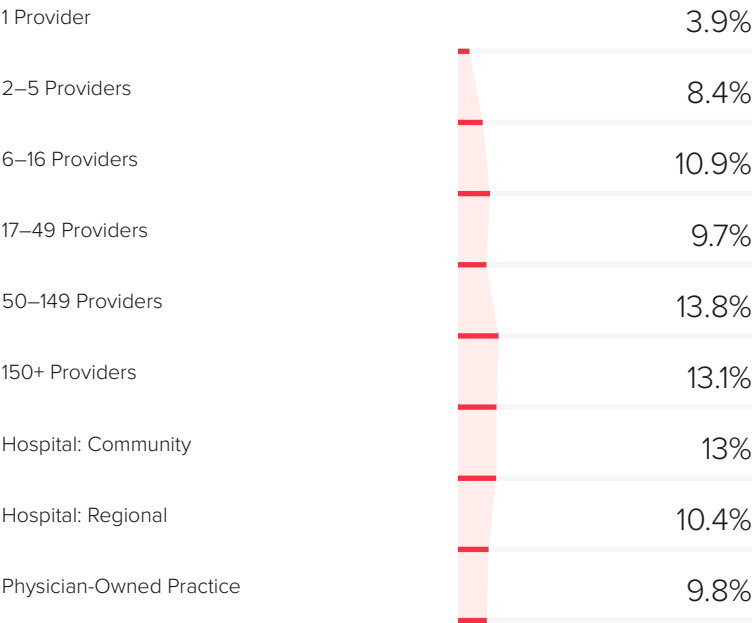
Percentage of Employees Who Resigned in 2021 Overall



The average percentage of rehab therapy employees who resigned in 2021 is approximately 9%.



Percentage of Employees Who Resigned in 2021 by Provider Segment



Rehab organizations with 50 providers or more experienced the most employee resignations in 2021—nearly 14% of their workforce overall.



“Employee retention is the top goal of most businesses post-COVID. Unfortunately, many aren’t willing to budget or actually develop a focused employee engagement strategy. Clinic leaders must also remember that company culture and employee engagement are not the same and need to be approached in different manners. It’s possible to have a staff that’s highly productive but not engaged, which is why leaders must focus on promoting and supporting the intrinsic values of their team.”

Brian Hartz, MPT, DPT, OCS, CSCS
CEO and President
HARTZ Physical Therapy

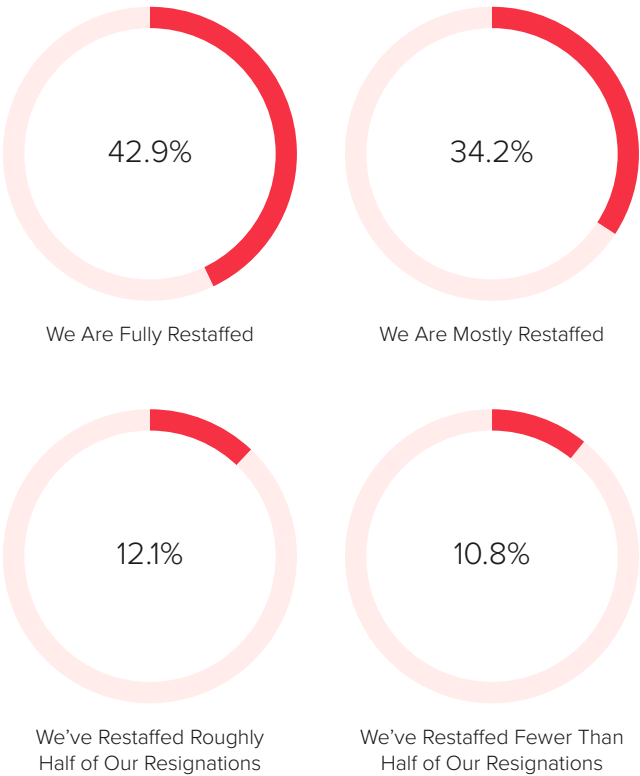
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Roles With the Most Turnover Overall		Roles With the Most Turnover by Provider Segment								
	Overall	1 Provider	2–5 Providers	6–16 Providers	17–49 Providers	50–149 Providers	150+ Providers	Hospital: Community	Hospital: Regional	Physician-Owned Practice
Physical Therapist	1	1	1	2	1	4	1	1	1	4
Clerical Staff	2	2	2	1	2	1	2	7	3	1
Physical Therapist Assistant (PTA)	3	5	4	5	4	5	5	2	7	3
Occupational Therapist	4	7	5	6	3	3	3	6	6	2
Manager	5	6	3	4	8	2	7	5	4	6
Biller	6	3	8	3	5	8	6	10	12	10
Speech-Language Pathologist	7	4	6	10	9	9	4	3	8	7
Administrator	8	8	7	9	10	7	9	8	9	8
VP/Director	9	11	9	6	6	11	11	4	5	9
C-Level Executive	10	12	11	8	7	12	12	12	2	5
Occupational Therapy Assistant (OTA)	11	9	10	11	11	10	8	9	10	12
Speech-Language Pathologist Assistant (SLPA)	12	9	12	12	12	6	10	11	11	11

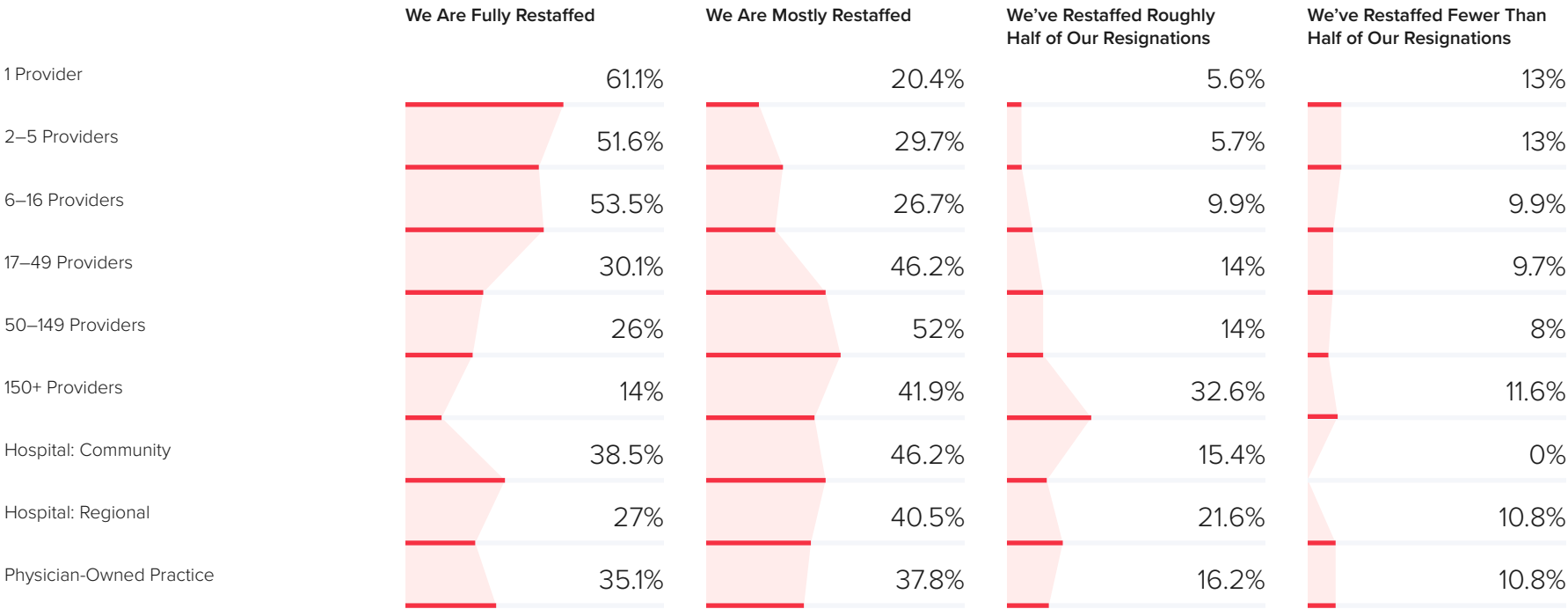
The top three roles in which therapy organizations saw the most turnover in 2021 were physical therapists, clerical staff, and physical therapy assistants.



Success in Filling Vacant Roles Overall



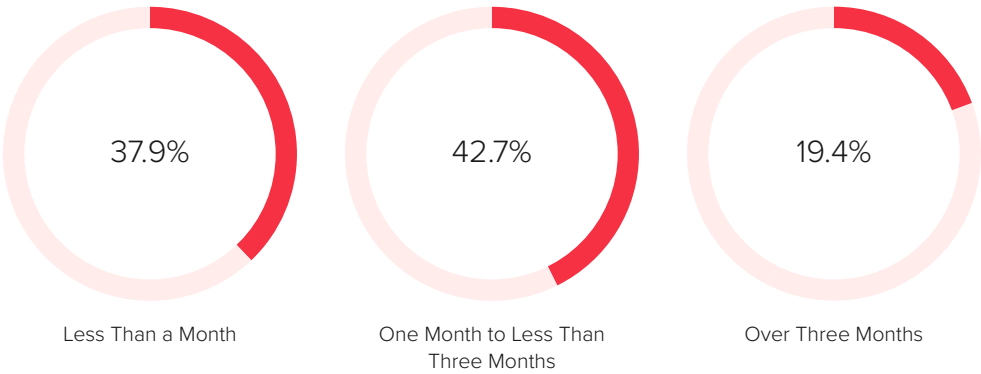
Success in Filling Vacant Roles by Provider Segment



Approximately 3 out of 4 (77%) of respondents indicated that they are mostly, if not fully, restaffed.



Length of Time to Fill Open Roles



Overall, it takes the majority of therapy organizations three months or less to refill vacant positions, with 38% of clinic leaders responding that it takes them less than one month on average to refill a vacant role.



“The increasing length of time it’s taking to fill vacancies within our profession is mainly due to the fact that most employers are still in the mindset of hiring from within their own backyards. But that won’t cut it today. The labor pool has been suffering and continues to suffer with low numbers of talented potential employees. Great employees need to be made, not hired, and this takes an internal learning management system that most small practices owners don’t have.”

Brian Gallagher, PT
Founder and President
MEG Business Management

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Reasons for Employee Resignations Overall

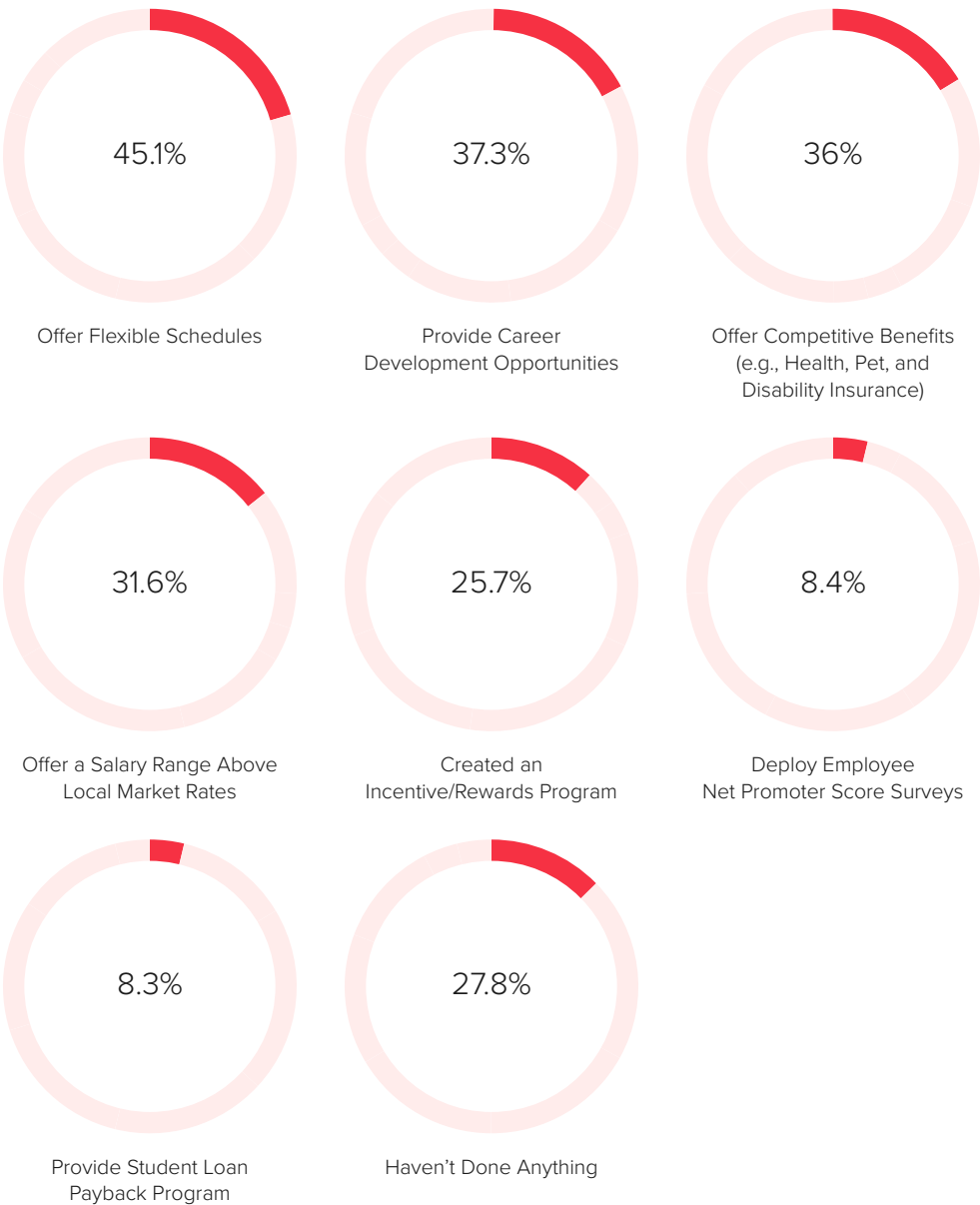
They Are Relocating to a New City/State	1
Other	2
They Want Additional Compensation	3
They Are Looking for a New Challenge	4
They Want a Job With Better Career Growth Opportunities	5
Their Personal Values No Longer Align With the Company	6
They'd Like More Flexibility in Their Work Schedule	7
They Were Laid Off, Furloughed, or Let Go	8
They Feel Disconnected From Their Colleagues and/or Company Culture	9
I'm Not Sure Why They're Leaving	10

The top three reasons therapy leaders gave for why people resigned from their organization were because they were relocating to a new city/state, “other,” and because they wanted additional compensation.

Of those who responded “other,” the vast majority cited retirement as their reason.



Retention Strategies Overall



Overall, the top most-used strategy to retain or hire new employees is offering flexible schedules. Conversely, the most infrequently used retention strategy is providing student loan payback options.

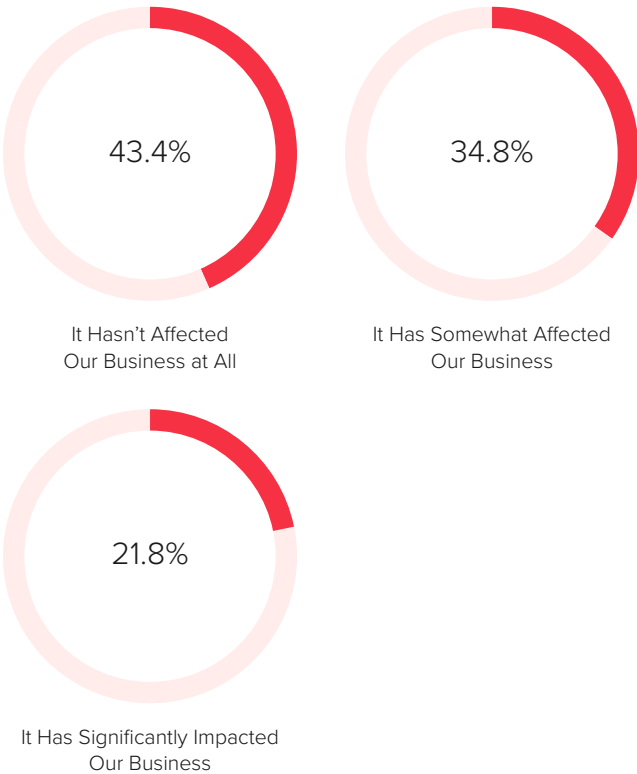


“The misalignment between therapy leaders and PTs is down to generational differences. The challenge for leaders is to enhance their communication and to understand the perspectives of their PTs.”

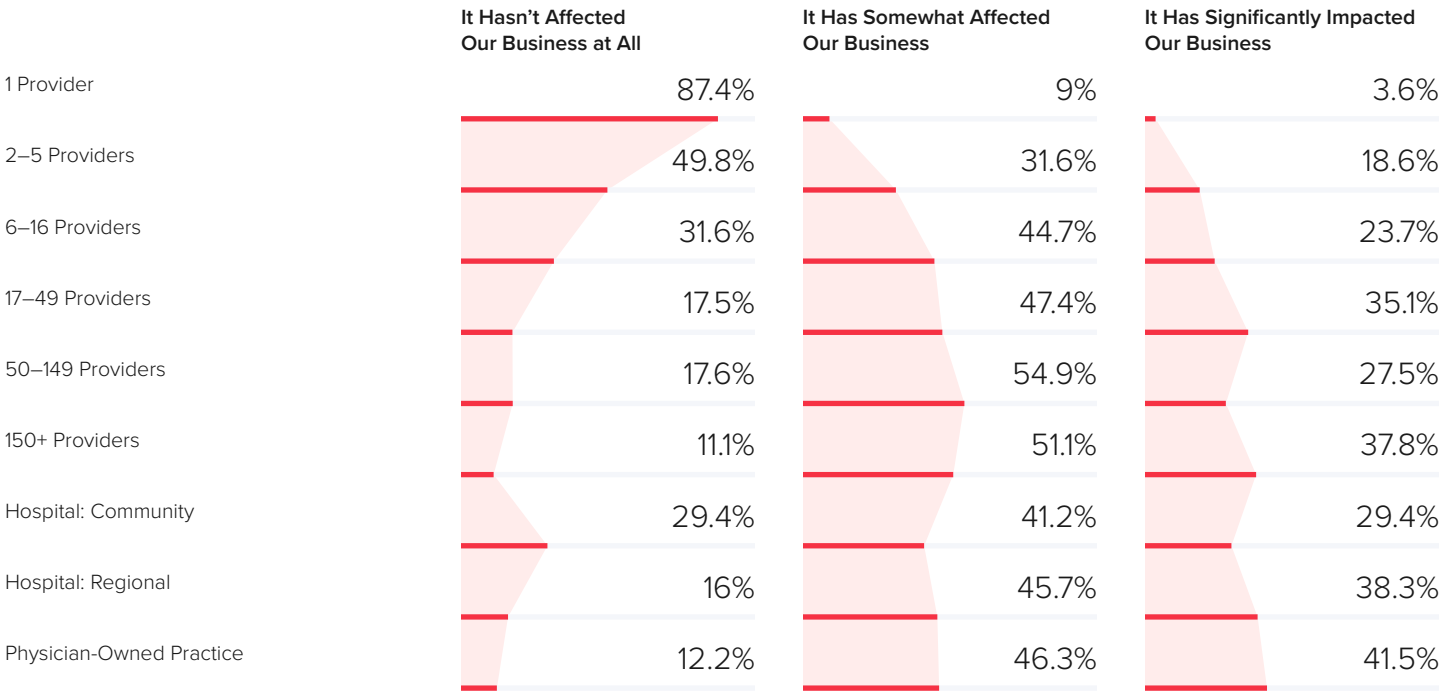
Larry Benz, DPT, OCS, MBA, MAPP, FAPTA
President and CEO
Confluent Health



Impact of Employee Turnover Overall



Impact of Employee Turnover by Provider Segment



Overall, employee turnover is affecting more than half of rehab therapy organizations in some capacity; however, as the organizations grow, the number increases significantly, reaching as high as 89%.





Challenges and Opportunities



Biggest Perceived Challenges as a Company Overall

Managing Employee Happiness (i.e., Internal Communication, Resolving Concerns, Increasing Morale)	1
Spending Time on Documentation	2
Retaining Patients Throughout Their Full Course of Care	3
Getting Referrals and Attracting New Patients	4
Managing Billing or Revenue Cycle Management Processes	5
Maintaining Regulatory Compliance (e.g., Meeting Continuing Ed Requirements)	6
Improving Patient Satisfaction	7
Outperforming, Competitors	8
Managing Business Health (i.e., Analytics, Reporting, Strategy)	9
Marketing to Physicians	10
Obtaining Credentialing	11

Managing employee happiness, time spent on documentation, and retaining patients throughout the full course of care were the top three company challenges overall for clinic owners and executives.

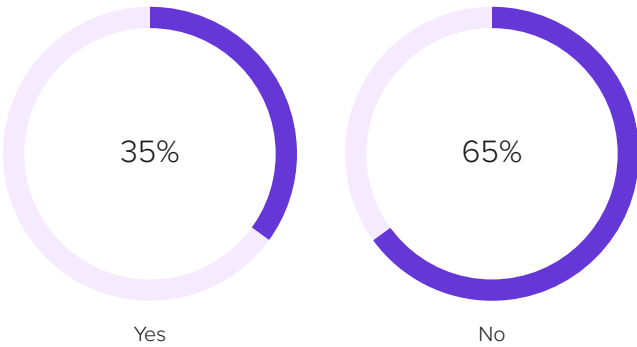


“While building a strong and cohesive culture is a challenge, it is also one of our greatest opportunities as business owners. No business can perfectly satisfy all employees, but the businesses that listen to the stories our employees are telling us are the ones that continue to grow. At my organization, we always say ‘empowered providers empower their patients.’ The investment in your employee base is worth every penny.”

Keaton Ray, PT, DPT, OCS, ATC, Cert. MDT, CSCS
Co-Founder and COO
MovementX



Breakdown of Burnout Overall



1 out of 3 rehab therapy professionals describe themselves as burnt out.

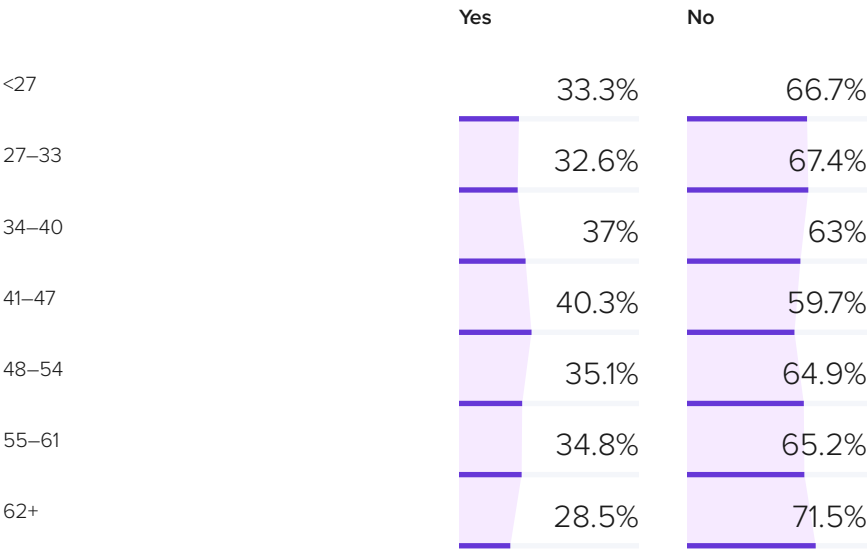


“Let’s face it, the past few years have been stressful on just about everyone. As therapists, we are the healers and the helpers in society and that takes effort and can cause mental strain. It is important to have open and honest conversations about burnout and create opportunities for team members to recharge and rejuvenate. By reconnecting to our ‘why’—the passion for helping others—we can often mitigate burnout by reminding ourselves why we went into this rewarding profession in the first place.”

Dan Rootenberg, PT, DPT, CSCS
CEO and Founder
Spear Physical Therapy

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Breakdown of Burnout by Age



Burnout among therapy professionals between the ages of 41 and 47 is the highest (40%) compared to all other age ranges, and 5% higher than the overall average of therapy professionals who describe themselves as burnt out.



Factors Contributing to Burnout Overall

Factors Contributing to Burnout by Age

	Overall	<27	27–33	34–40	41–47	48–54	55–61	62+
High Patient Load	1	3	2	2	2	3	1	4
Long Work Hours	2	1	1	1	1	1	2	1
Low Salary	3	5	3	3	3	2	3	2
Burdensome Documentation and Regulatory Requirements	4	6	6	5	5	9	9	9
Poor Clinic Morale	5	2	4	4	4	5	4	5
Change in Clinic Policies	6	4	5	6	6	8	5	7
Fear of Contracting COVID-19	7	9	9	8	7	4	7	3
External (Non-Work) Factors	8	7	7	9	8	6	6	8
Lack of Job Security	9	8	8	7	9	7	8	6

High patient load was the top-cited contributor to burnout overall.



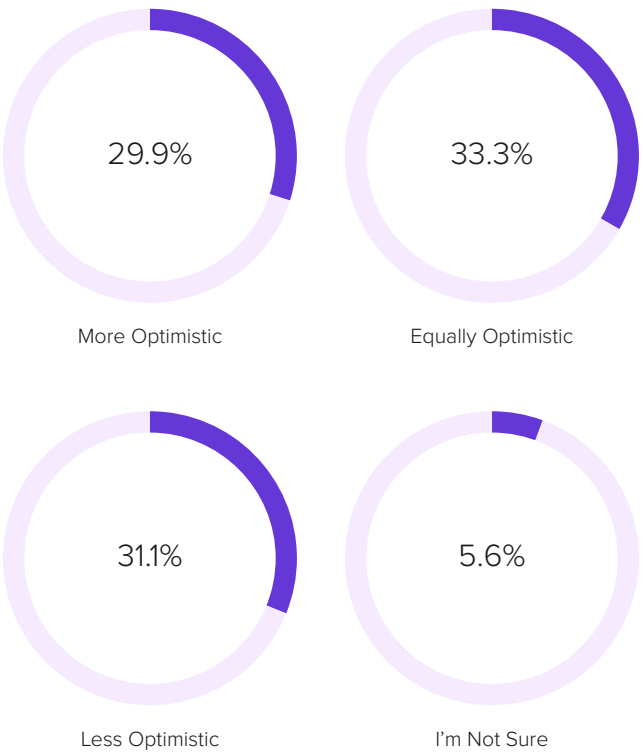
“One of the main contributing factors to burnout is personal growth and satisfaction, or lack thereof. I think those a bit further along in their careers are often more affected by this aspect of burnout while younger physical therapists are affected more by debt burden and working hours.

On the whole, though, I believe the traditional ‘visits per full-time therapist’ metric is profit-driven versus people-driven. We haven’t quite figured out the right metric to balance employee happiness and volume/value of care.”

Stephanie Weyrauch, PT, DPT, MSCI
Physical Therapist
Physical Therapy and Sports Medicine Centers

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Optimism About the Future of Rehab Therapy Overall



Overall, nearly 30% of rehab therapy professionals are feeling more optimistic about the industry’s future than they were a year ago. That’s a 17% increase from last year’s industry report data.

“Despite recent stresses, I remain as optimistic as ever that our profession is going to continue to thrive. We now have a workforce that is more innovative, more flexible, more personalized, and more efficient than ever before. We have created alternative revenue streams, built innovative practice models, leveraged technology to enhance the delivery of care, taken strides to bring diversity to the forefront, and placed a renewed importance on career satisfaction.”

Keaton Ray, PT, DPT, OCS, ATC, Cert. MDT, CSCS
Co-Founder and COO
MovementX

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Top Concerns About the Future Success of Rehab Therapy

	Overall	Executive	Manager	Provider	Assistants	Other
Steadily Declining Insurance Reimbursements	1	1	1	1	1	1
Increasing Threat of Burnout	2	2	2	2	2	2
Low Salary	3	7	5	4	3	3
Student Debt	4	5	6	3	4	6
Labor Shortage	5	3	3	5	6	4
Difficult to Stay in Business as an Independent Practice	6	4	4	6	5	5
Increasing Regulatory Burden	7	6	7	7	8	7
Difficult to Start a Practice	8	8	8	8	7	11
Lack of Patient Access to Rehab Therapy	9	9	9	9	9	8
The Rise of Digital Healthcare Companies (e.g. Health Information Technology, Digital Musculoskeletal Platforms, Wearable Devices, Personalized Medicine)	10	10	10	10	10	9
Consolidation	11	11	11	11	11	12
I Don't Have Any Concerns	12	12	12	12	12	10

Declining reimbursements is the top industry concern shared by all rehab therapy professionals, with burnout coming in second.

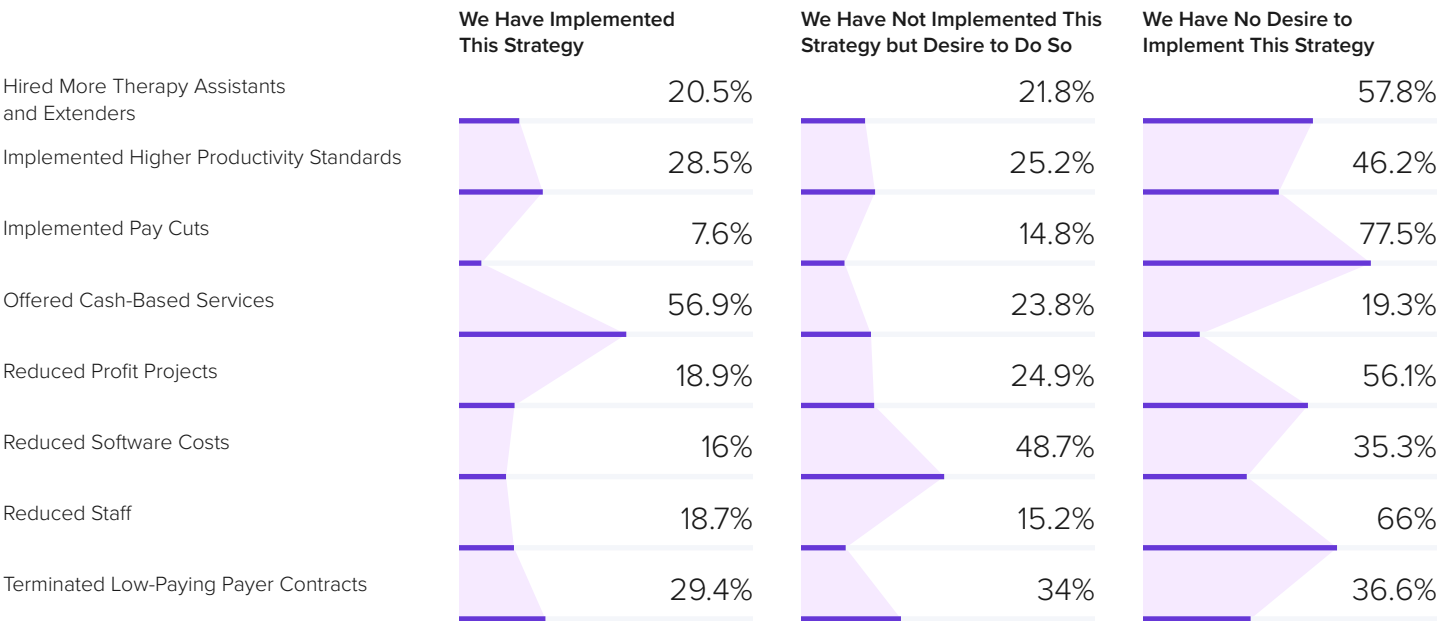


“The single biggest piece of advice I would give to clinic leaders looking to increase optimism within the industry would be to actively engage in advocacy efforts related to issues that are important to you as a clinician and the profession as a whole. It’s a reminder as to why we are passionate about what we do, but it also allows clinicians to be active participants in leading the charge for the profession as opposed to sitting on the sidelines and just waiting for the next shoe to drop.”

Stephen Huntsman
Chief Compliance Officer,
Upstream Rehabilitation



Changes Made to Adapt to Declining Reimbursements Overall



To offset declining reimbursements, more than half of therapy organizations now offer cash-based services, and another quarter of therapy leaders expressed the desire to offer cash-based services.



“In many ways, incorporating cash-based services is a ‘win-win’ for burnt-out practitioners that are often governed by the insurance policies rather than by what they feel is best for the patient, and for patients who want more personalized care that is more proactive or preventative in nature and in the long run may even be less expensive than insurance. My prediction is that this will be a big wave of the future.”

Susan Lofton, MPT
Digital Health and Clinical Transformation Specialist
WebPT

“I know dropping low-paying contracts is a scary proposition, but there is a path to making this strategy work—and more and more practices are walking this path to get out from under the thumb of insurance companies who will never again pay well for their services. So, if you’re considering this approach, know that it is possible to do so without losing patients. But I’d recommend getting guidance from someone who has already done it or is guiding others through the process.”

Jarod Carter, PT, DPT, MTC
Owner and Head Physical Therapist
Carter Physiotherapy

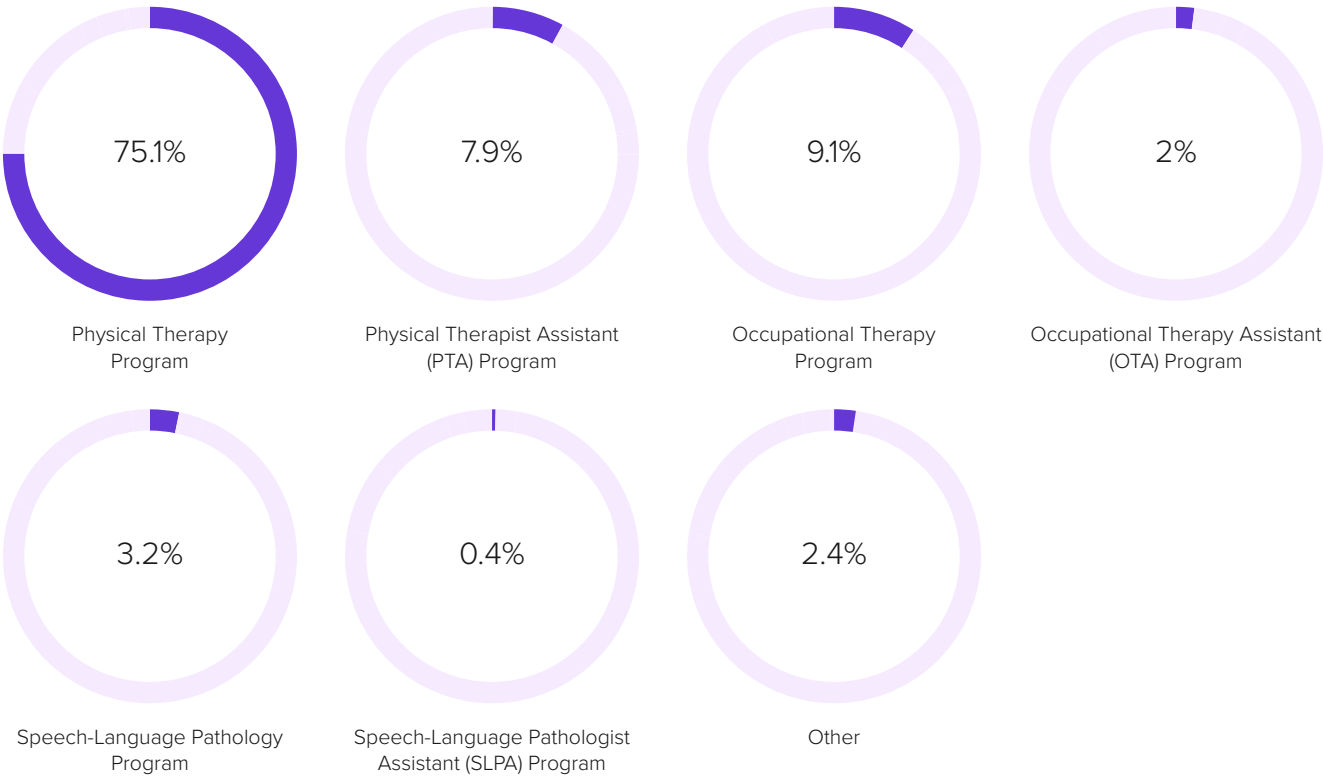
Author and Business Consultant
DrJarodCarter.com

“Individuals are increasingly willing to seek out and pay out-of-pocket for high-touch, highly personalized care. Tapping into the cash-pay marketing is a smart and necessary tactic for rehab therapy professionals looking to strengthen their long-term strategic plans.”

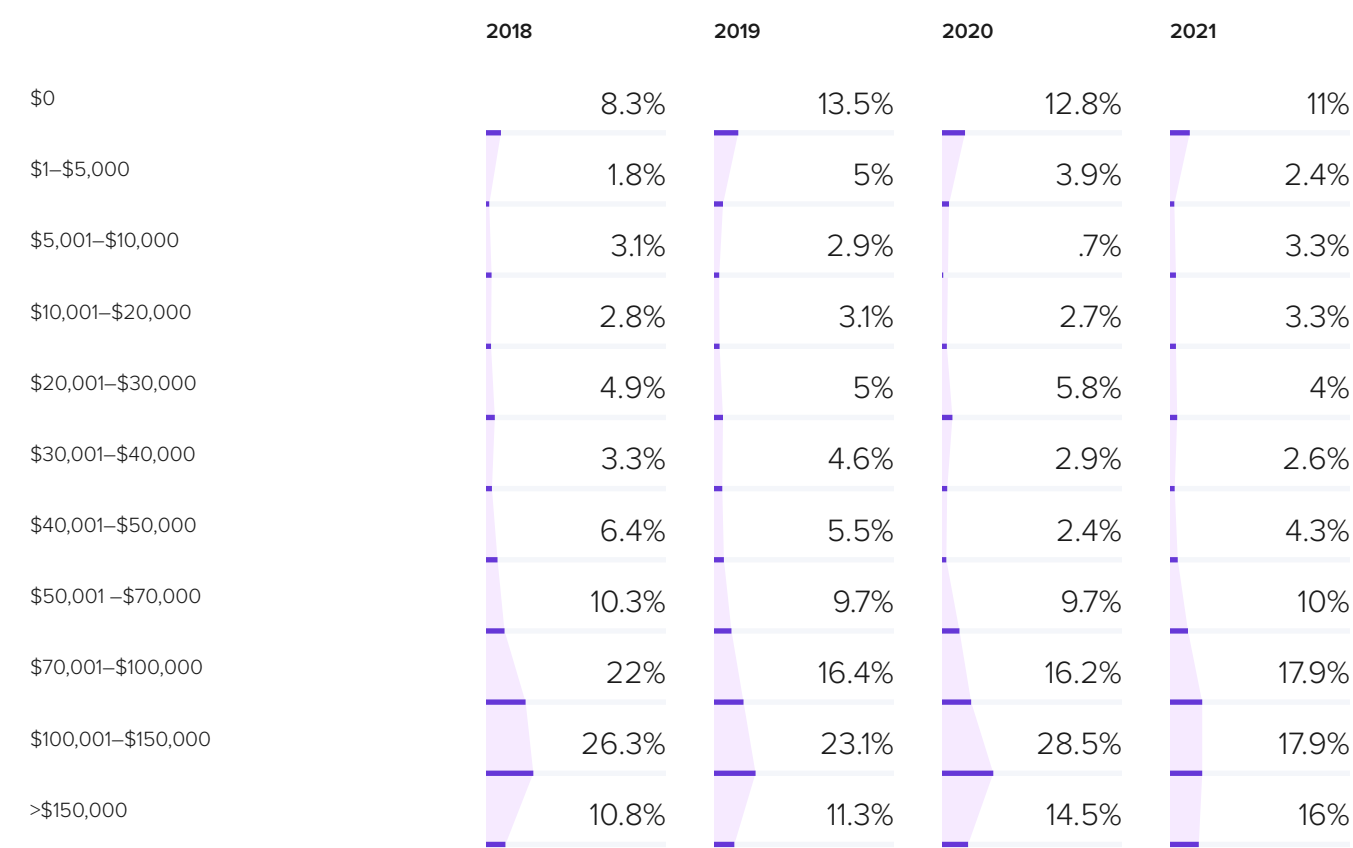
David Elton
VP of Musculoskeletal Research and Development
UnitedHealth Group

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Breakdown of Student Types



Total Student Loan Debt at Graduation: Last Four Years



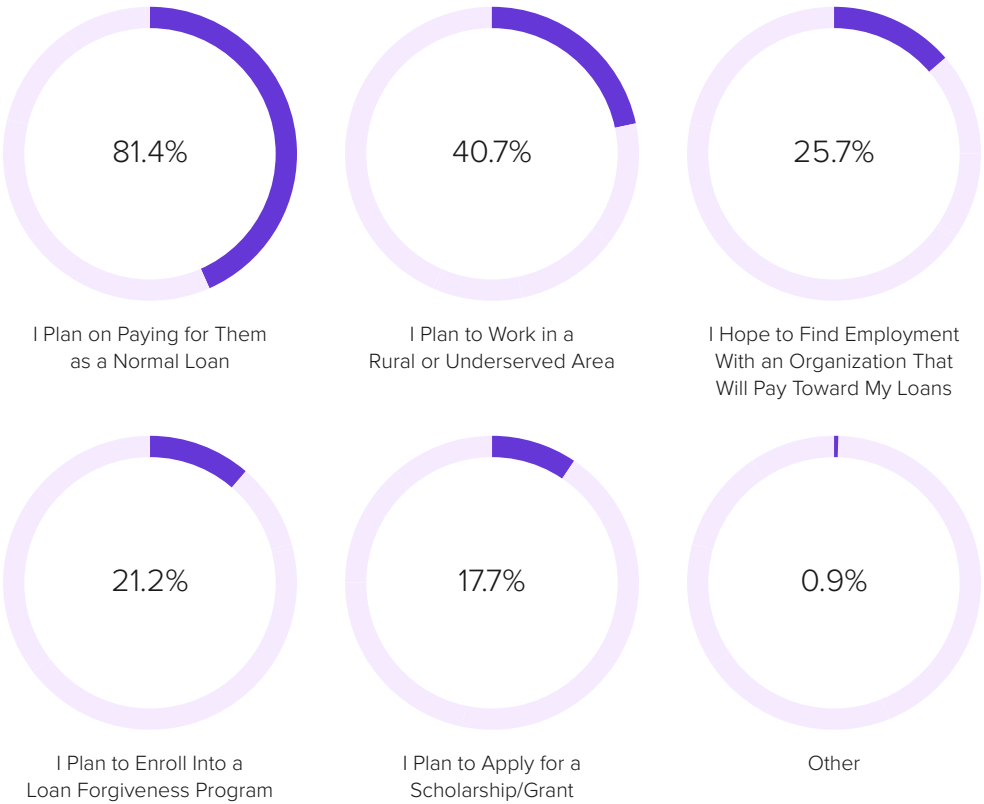
One in two students will graduate with more than \$70,000 in student loan debt. Of those students, 16% will graduate with more than \$150,000 in student loan debt—a 5% increase since 2018.

“I say this with no exaggeration that the student debt to income ratio is one of the most important issues regarding the long-term sustainability of the physical therapy profession. We must accept that if becoming a physical therapist is not financially viable it will lead to the collapse of the profession.”

Richard Severin, PT, DPT, PhD, CCS
Owner
PTReviewer

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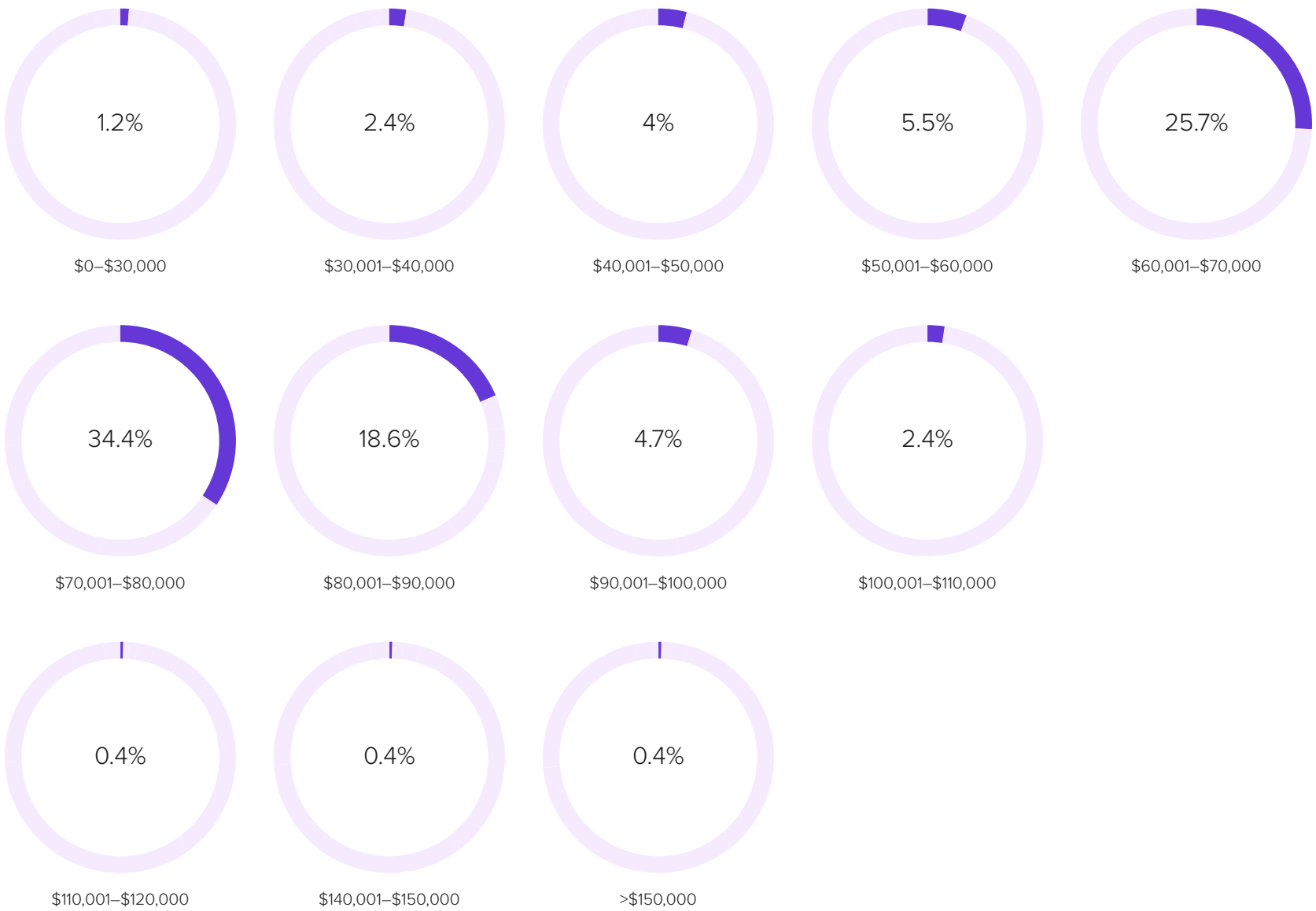
Plans to Repay Student Loan Debt



The vast majority of students plan on repaying their debt by simply paying off their loans. And 41% of students plan to work in a rural or underserved area to help repay their debt.



Salary Expectations After Graduating



Over half of the students who responded expect to make between \$70,000 and \$90,000 once they enter the field.



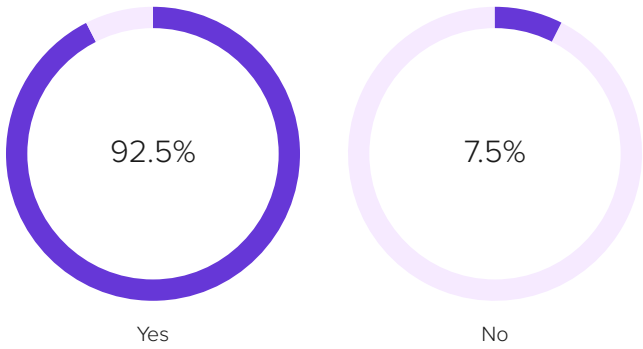
Most Important Job Factors

Income Stability	1
Salary/Benefits	2
Work-Life Balance	3
Company Culture	4
Opportunity for Growth	5
Schedule Flexibility	6
Specialty/Area of Practice	7

Overall, students ranked income stability as the most important factor when considering new job opportunities.



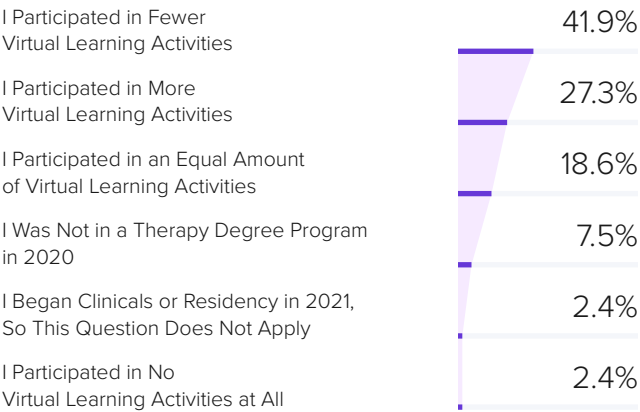
Participation in Virtual Learning



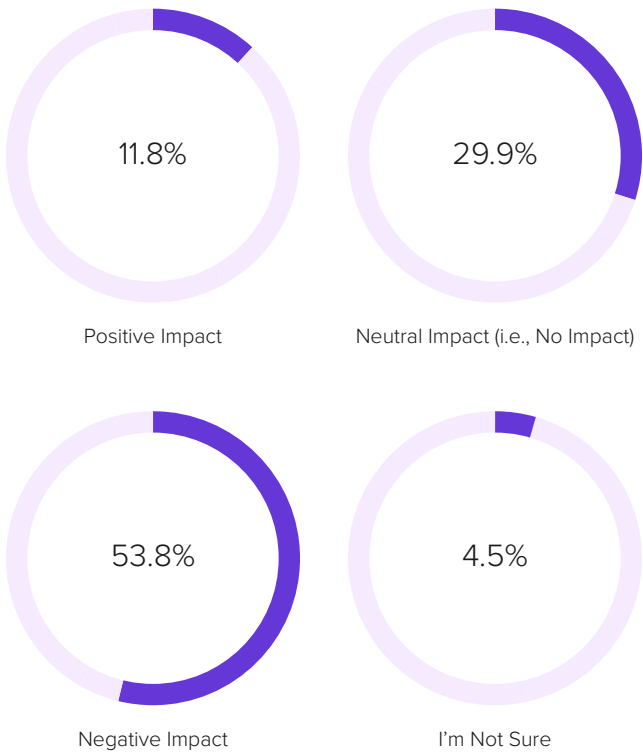
Nearly 93% of students participated in virtual learning activities over the past year.



Participation in Virtual Learning in 2021 Compared to 2020



Perceived Impact of Virtual Learning on Quality of Education



More than half of the students who participated in virtual learning activities this past year felt it negatively impacted the quality of their education.



“Students, educators and employers will need to work together to study the effects as well as the opportunities of virtual learning for improvement, as well as the satisfaction of key stakeholders. Research and outcomes are important for evolving PT education and to determine an appropriate balance between virtual and in-person learning.”

Jaime Edelstein, PT, DSCPT, OCS, COMT
Assistant Vice President
HSS Rehabilitation

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Desired Curriculum Additions

Clinical Training and Residency Opportunities	1
Training on Common Clinic Technology (e.g., EMRs, HEPs, Billing Software)	2
Medical Training (i.e., More General Information About Anatomy, Diagnostics, and Treatment)	3
Information About Cutting-Edge Therapeutic Interventions	4
Business Training (i.e., How to Write a Compliant Medical Record)	5
Documentation Training (i.e., How to Write a Compliant Medical Record)	6
Communication (i.e., How to Motivate and Connect With Patients)	7
Telehealth Administration Training	8
Marketing Training (i.e., How to Promote a Clinic)	9
Cultural Competency Training (i.e., How to Treat Patients From Different Cultures)	10
I Do Not Want to Add Anything to My Curriculum	11

The overwhelming majority of students responded that they’d most like to see more clinical training and residency opportunities added to their curriculum.

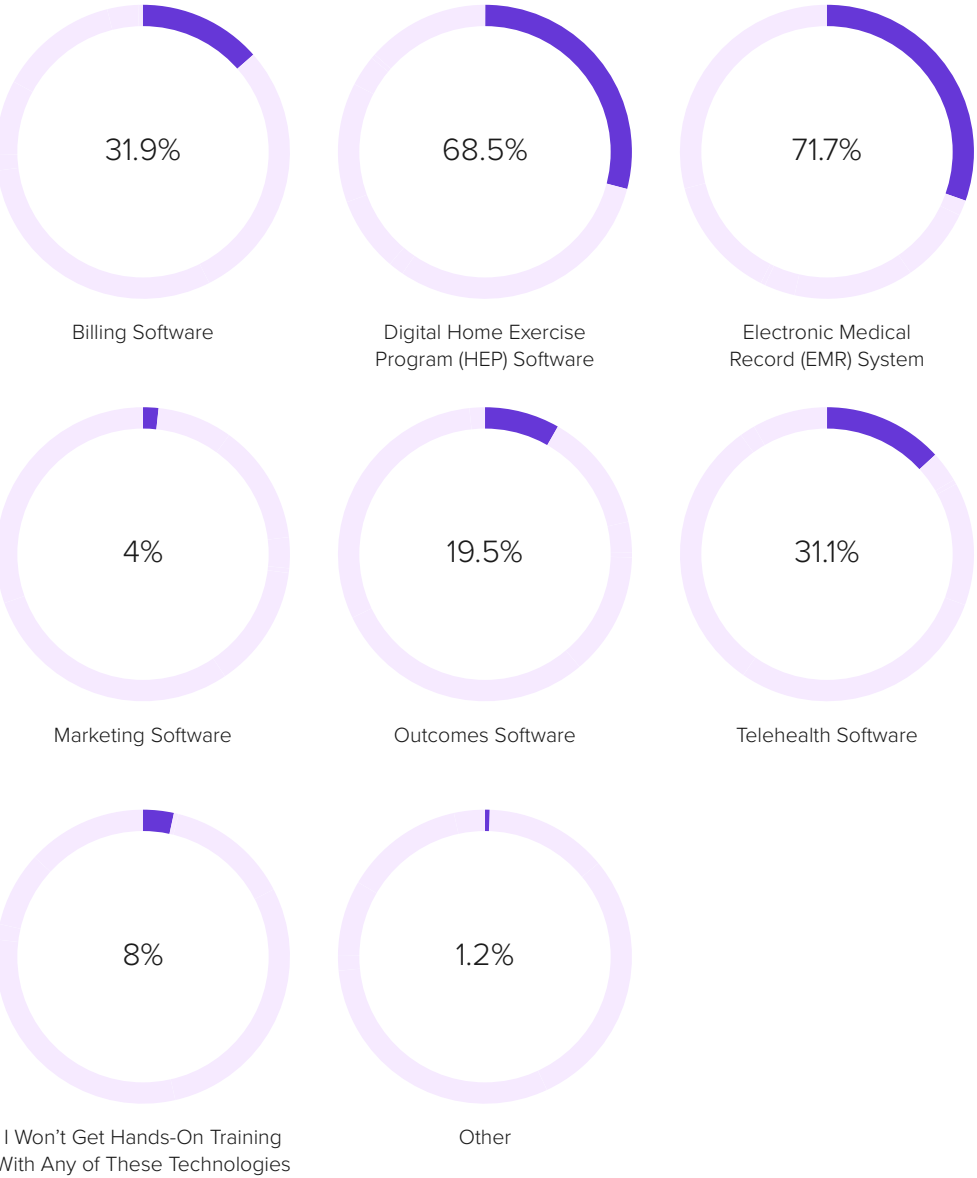


“Residency training and other formal clinical training programs offer structured didactic and psychomotor training for clinicians who want to become more specialized. Even if not through something as structured as a residency or fellowship, clinicians could benefit from some form of mentorship, one could argue, throughout their career.”

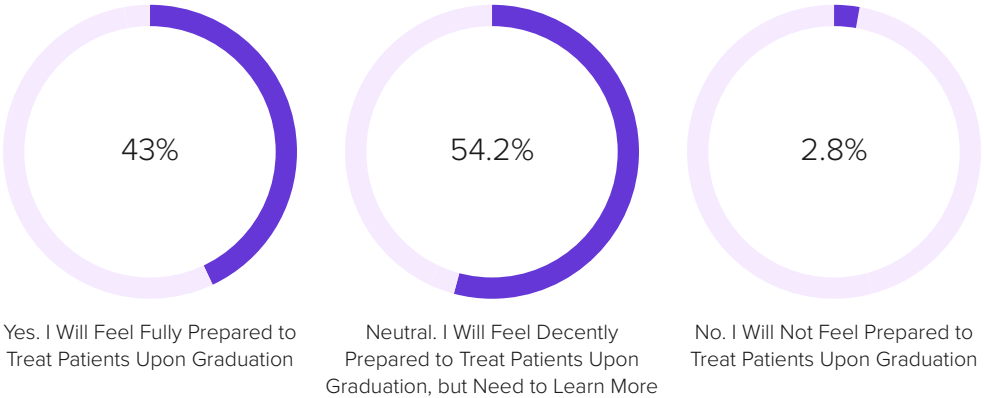
Mike Markee, PT, DPT, PhD, COMT, ATC
Board-Certified Clinical Specialist in Orthopaedic Physical Therapy
Associate Professor
Saint Louis University



Technology Used in Students' Course of Study



Level of Preparedness Upon Completing Degree



Around 70% of students have experience using EMRs and HEPs in their curriculum; however, they are seldomly trained on all other technologies.

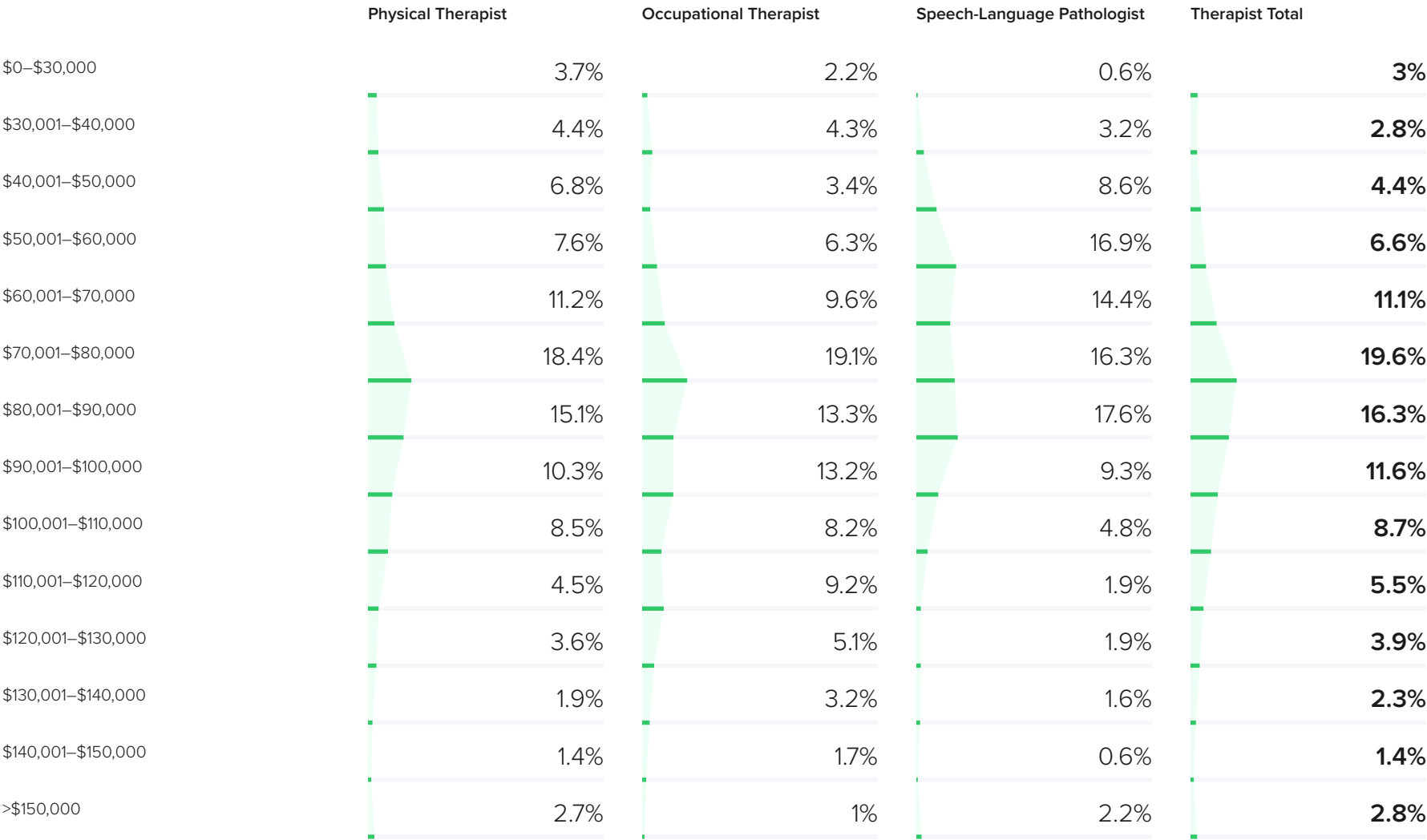




Salary



Salary by Role: Therapists



About half of therapists make between \$60,000 and \$90,000 per year.



Salary by Role: Therapist Assistants

	Physical Therapist Assistant (PTA)	Occupational Therapy Assistant (OTA)	Speech-Language Pathologist Assistant (SLPA)	Therapist Assistant Total
\$0–\$30,000	6.2%	4.2%	1.9%	5.1%
\$30,001–\$40,000	15.9%	7%	4.8%	12%
\$40,001–\$50,000	22.4%	19.7%	13.5%	20.6%
\$50,001–\$60,000	20%	8.5%	18.3%	17.7%
\$60,001–\$70,000	14.1%	15.5%	12.5%	14.4%
\$70,001–\$80,000	9.7%	7%	21.2%	12%
\$80,001–\$90,000	4.1%	11.3%	19.2%	8.4%
\$90,001–\$100,000	1.7%	12.7%	3.8%	3.5%
\$100,001–\$110,000	3.1%	7%	1.9%	2.9%
\$110,001–\$120,000	1%	1.4%	0%	0.7%
\$120,001–\$130,000	0.3%	4.2%	1%	1.1%
\$130,001–\$140,000	0.7%	1.4%	0%	0.7%
\$140,001–\$150,000	0.7%	0%	1%	0.7%
>\$150,000	0%	0%	1%	0.2%

Nearly 40% of therapist assistants make between \$40,000 and \$60,000 per year.



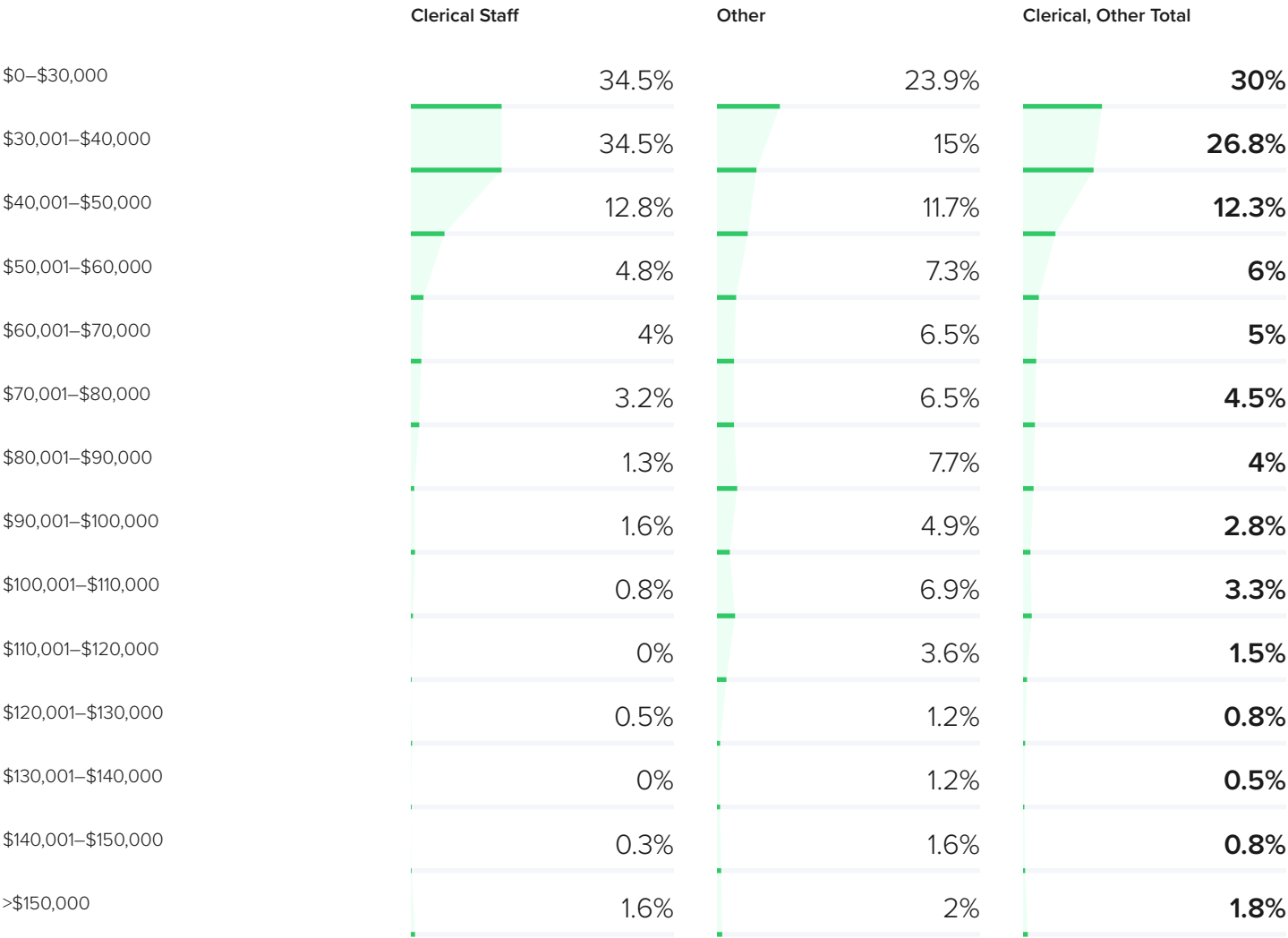
Salary by Role: Managers

	Administrator	Manager	Biller	Manager Total
\$0–\$30,000	16.2%	5.1%	18.7%	9.4%
\$30,001–\$40,000	17.2%	10.3%	19.4%	12.9%
\$40,001–\$50,000	14.1%	9%	15.5%	10.5%
\$50,001–\$60,000	11.7%	7.6%	12.7%	9%
\$60,001–\$70,000	8.1%	7.3%	11.3%	7.3%
\$70,001–\$80,000	8.1%	9.9%	7%	8.9%
\$80,001–\$90,000	4.8%	10.8%	2.5%	8.9%
\$90,001–\$100,000	6.2%	11.7%	3.9%	9.7%
\$100,001–\$110,000	5%	10.6%	2.8%	8.9%
\$110,001–\$120,000	2.6%	6.1%	1.1%	5%
\$120,001–\$130,000	0.7%	4.3%	0.4%	3.2%
\$130,001–\$140,000	0.7%	3%	0.7%	2.3%
\$140,001–\$150,000	1%	1.3%	0.4%	1.2%
>\$150,000	3.6%	2.8%	3.9%	3%

One-third of managers make \$50,000 or less per year.



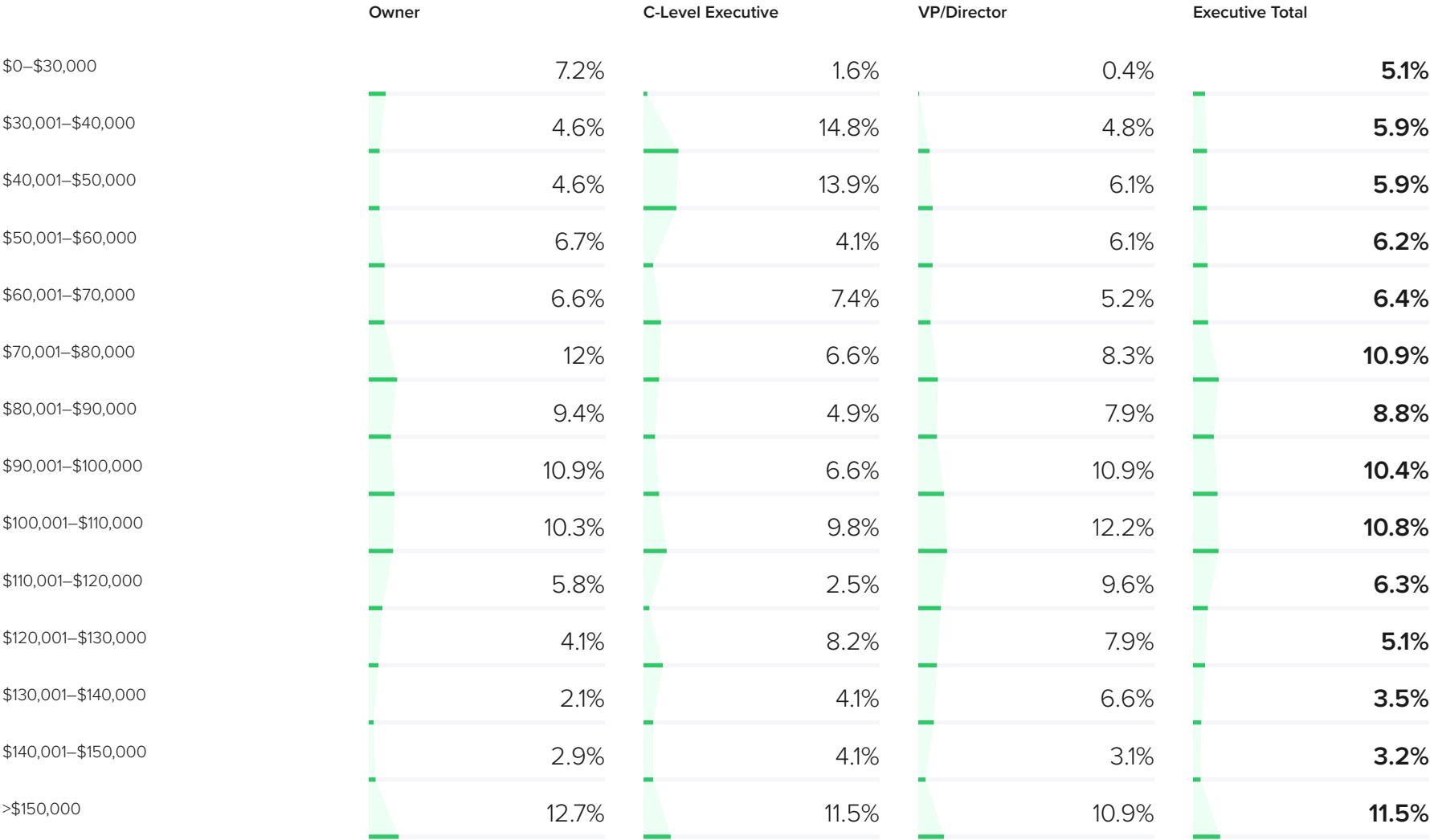
Salary by Role: Clerical Staff



More than two-thirds of clerical staff make \$40,000 or less per year.



Salary by Role: Executives



About 30% of executives make more than \$110,000 per year.



Salary by Setting

	Educational Institution	Gym or Wellness Center	Home Health	Inpatient Hospital	Mobile Therapy	Outpatient Hospital-Based Rehab Facility
\$0–\$30,000	5.9%	15.4%	2.5%	0.4%	7%	6.1%
\$30,001–\$40,000	17.6%	11.5%	6.3%	3.6%	11.4%	4.9%
\$40,001–\$50,000	5.9%	17.3%	13.1%	5.5%	18.4%	7.4%
\$50,001–\$60,000	14.7%	13.5%	17.5%	6.3%	14.9%	6.3%
\$60,001–\$70,000	5.9%	3.8%	10%	10.6%	12.3%	7.4%
\$70,001–\$80,000	5.9%	9.6%	11.3%	21.8%	12.3%	12.2%
\$80,001–\$90,000	8.8%	9.6%	14.4%	12.1%	4.4%	12.6%
\$90,001–\$100,000	11.8%	5.8%	8.1%	6.8%	5.3%	14%
\$100,001–\$110,000	14.7%	5.8%	5.6%	8.2%	2.6%	10.6%
\$110,001–\$120,000	N/A	1.9%	5.6%	10.6%	1.8%	6.3%
\$120,001–\$130,000	N/A	1.9%	3.1%	7.4%	1.8%	4.3%
\$130,001–\$140,000	2.9%	1.9%	2.5%	3.2%	0.9%	4.1%
\$140,001–\$150,000	2.9%	N/A	N/A	1.7%	5.3%	2.2%
>\$150,000	2.9%	1.9%	N/A	1.9%	1.8%	1.6%

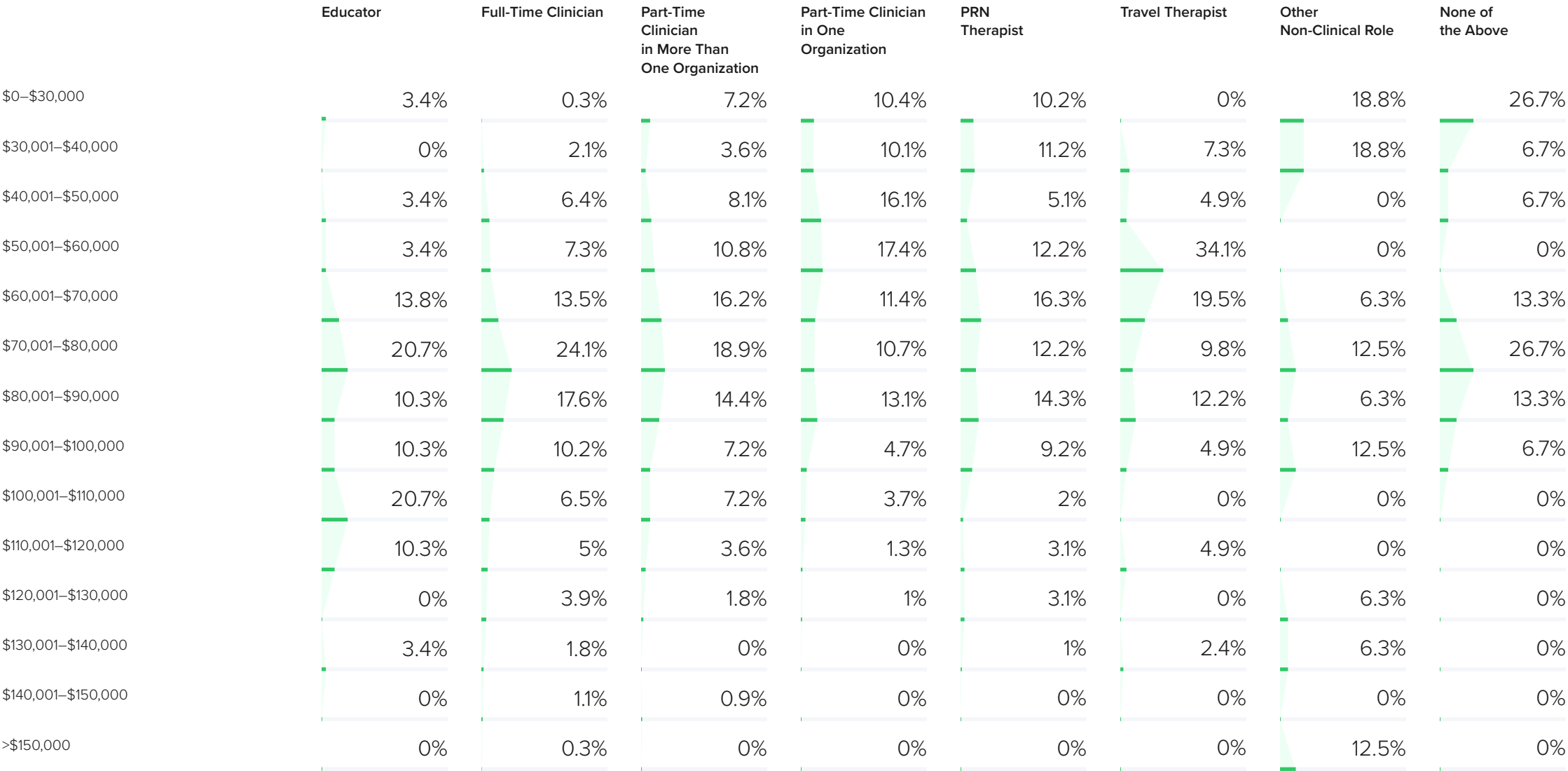
Salary by Setting
(Continued)

	Outpatient Multidisciplinary Practice	Outpatient Private Practice	Physician-Owned/ Orthopedic Practice (POPT)	Pro Bono Clinic	School/Academic/ Student	SNF (Skilled Nursing Facility)	Other
\$0–\$30,000	7.2%	10.8%	3.4%	N/A	15.2%	0.8%	20.7%
\$30,001–\$40,000	8.1%	11.3%	7.3%	25%	12.1%	9%	12.7%
\$40,001–\$50,000	8.1%	9.7%	6.1%	N/A	3%	9.8%	7.3%
\$50,001–\$60,000	10.7%	7.8%	8%	N/A	12.1%	8.2%	4.7%
\$60,001–\$70,000	12.4%	10.4%	9.6%	25%	24.2%	10.7%	5.3%
\$70,001–\$80,000	15%	14.7%	13.8%	N/A	9.1%	13.1%	10%
\$80,001–\$90,000	12.4%	10.7%	16.1%	25%	9.1%	15.6%	10.7%
\$90,001–\$100,000	9.5%	7%	11.9%	N/A	6.1%	13.1%	7.3%
\$100,001–\$110,000	4.9%	5.8%	8.4%	N/A	6.1%	6.6%	6.7%
\$110,001–\$120,000	3.7%	3%	4.6%	25%	N/A	2.5%	4%
\$120,001–\$130,000	4%	2.1%	5%	N/A	N/A	4.1%	2%
\$130,001–\$140,000	1.4%	1.1%	2.7%	N/A	N/A	1.6%	2.7%
\$140,001–\$150,000	1.4%	1.3%	0.8%	N/A	N/A	0.8%	1.3%
>\$150,000	1.2%	4.3%	2.3%	N/A	3%	4.1%	4.7%

The inpatient, outpatient multidisciplinary, outpatient private practice, and physician-owned/orthopedic settings showed the most representation of professionals earning more than \$70,000 per year.



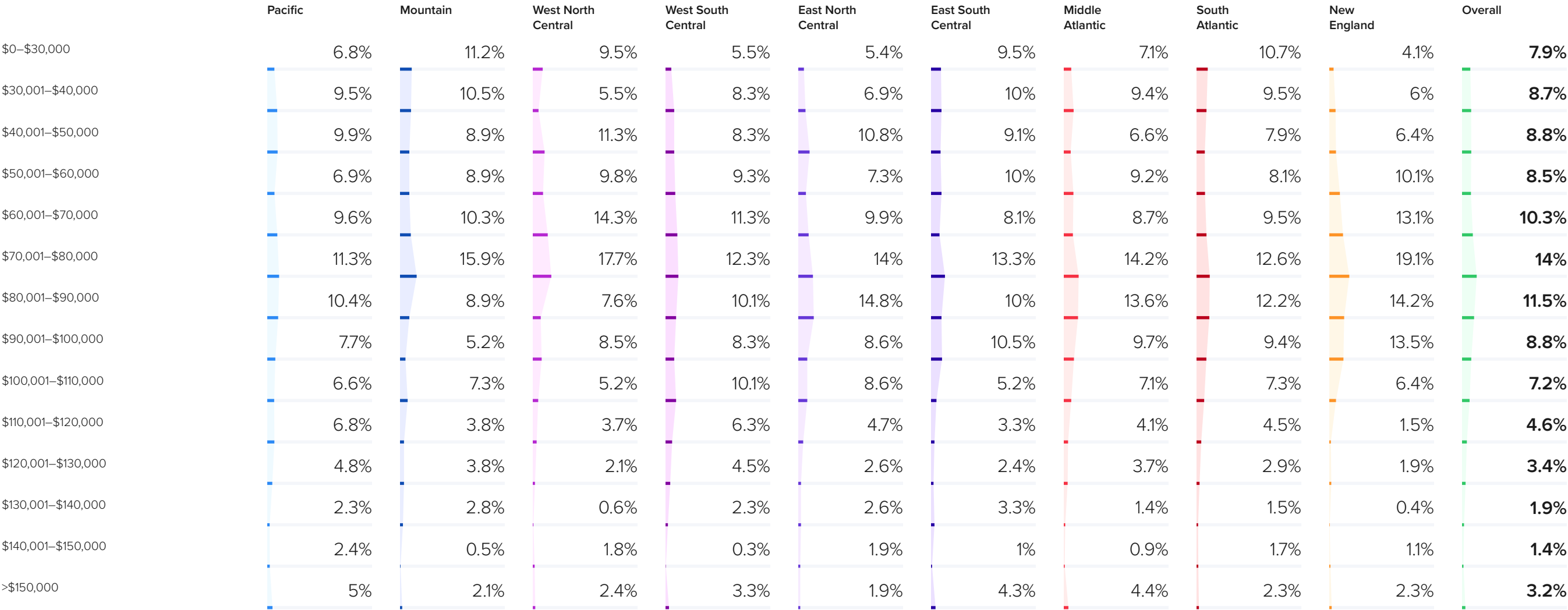
Salary by Employment Type



Educators and other non-clinical professionals showed the greatest representation in salary brackets above \$90,000.



Salary by Region/Location



The Pacific, East North Central, West South Central, and Middle Atlantic regions have the highest concentrations of salaries above \$80,000. The Mountain, South Atlantic, and East South Central regions have the highest concentrations of salaries at or below \$40,000.

Salary by Age

	<27	27–33	34–40	41–47	48–54	55–61	62+	Overall
\$0–\$30,000	22.9%	6%	4.9%	5.7%	7.9%	7.3%	18.5%	8%
\$30,001–\$40,000	19.1%	9.1%	6.3%	7.3%	10.1%	7.8%	8.1%	8.9%
\$40,001–\$50,000	11.7%	8.9%	7.4%	7.8%	9.5%	9.3%	9.5%	8.7%
\$50,001–\$60,000	5%	7.3%	10.9%	6.8%	8.6%	10.5%	8.1%	8.4%
\$60,001–\$70,000	11.7%	11.5%	11.6%	8.6%	7%	8%	9%	10.1%
\$70,001–\$80,000	14.4%	19.5%	17.6%	11.8%	10.4%	7.8%	6.6%	14.6%
\$80,001–\$90,000	6.7%	13%	13.9%	14.1%	9.3%	9%	8.5%	11.8%
\$90,001–\$100,000	5.3%	8.3%	8.1%	10.2%	9.3%	9.5%	8.1%	8.5%
\$100,001–\$110,000	2.1%	5.6%	6.1%	8.7%	8.8%	9.8%	8.1%	6.9%
\$110,001–\$120,000	0.6%	4.8%	5%	5.4%	4.6%	4.5%	3.3%	4.5%
\$120,001–\$130,000	0.3%	3.2%	3.5%	4.9%	2.9%	3.3%	3.3%	3.3%
\$130,001–\$140,000	0.3%	1.5%	2%	2.8%	2.9%	2.5%	1.4%	2%
\$140,001–\$150,000	0%	0.6%	1.3%	1.7%	2.4%	2.8%	0.5%	1.3%
>\$150,000	0%	0.6%	1.4%	4.4%	6.2%	8%	7.1%	3.1%

After the age of 40, there’s a distinct increase in the percentage of rehab therapy professionals earning \$100,000 or more per year.



Salary by Gender



Men are more represented in salary ranges above \$70,001, while women are more represented in salary ranges below \$70,000.



“Women are often seen as wives and mothers first, and professionals second. We are not taught to advocate for ourselves early in our lives or careers, and men can inadvertently play into this dynamic, relying on women for “soft” tasks like note-taking. At the end of the day, we can all do better to ensure that women’s value is recognized and celebrated.”

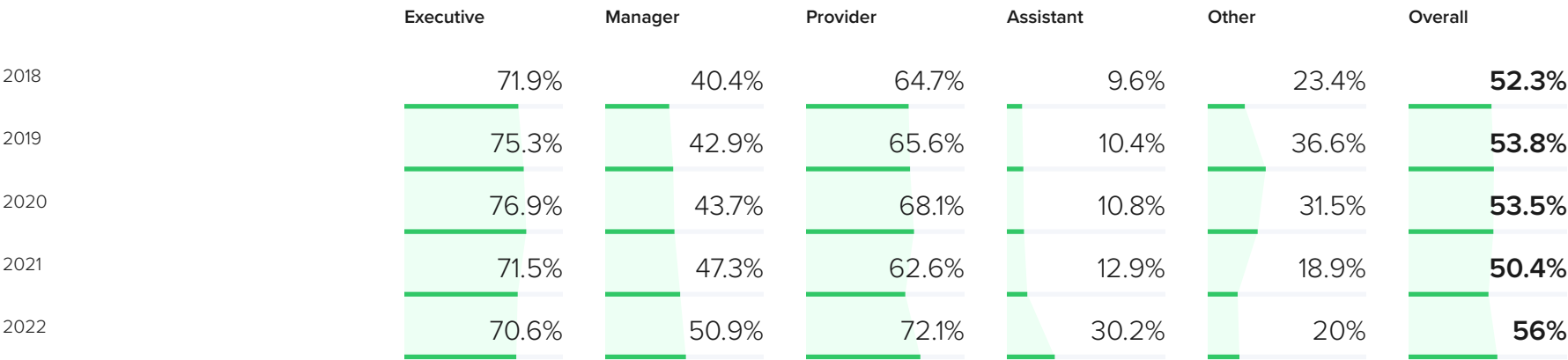
Meredith Castin, PT, DPT
Owner
The Non-Clinical PT

“Bridging this gap means overcoming traditional bias—both conscious and unconscious—from both sides of the table. Leadership competence, expectations, and compensation should be consistent regardless of gender; for women, critical thinking is often muted as being thoughtful and risk-averse, and having confidence and command may be seen as pushy and unlikeable. Until these disparate expressions on leadership are overcome, the value women bring as leaders will be discounted. It is up to all of us to continue moving these issues forward; failing to do so will result in missed opportunities across our profession.”

JeMe Cioppa–Mosca, PT, MBA
Senior Vice President
HSS Rehabilitation and Performance

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Percentage of Respondents Making More Than \$70,000 per Year by Role Type: Last Five Years



The percentage of providers making more than \$70,000 annually has risen by nearly 10% since 2020. Office managers and assistants have also experienced a similar increase, whereas executives have seen a slight dip.





Technology



Technology Used in the Last Year That Wasn't Used Previously (Practice Level)

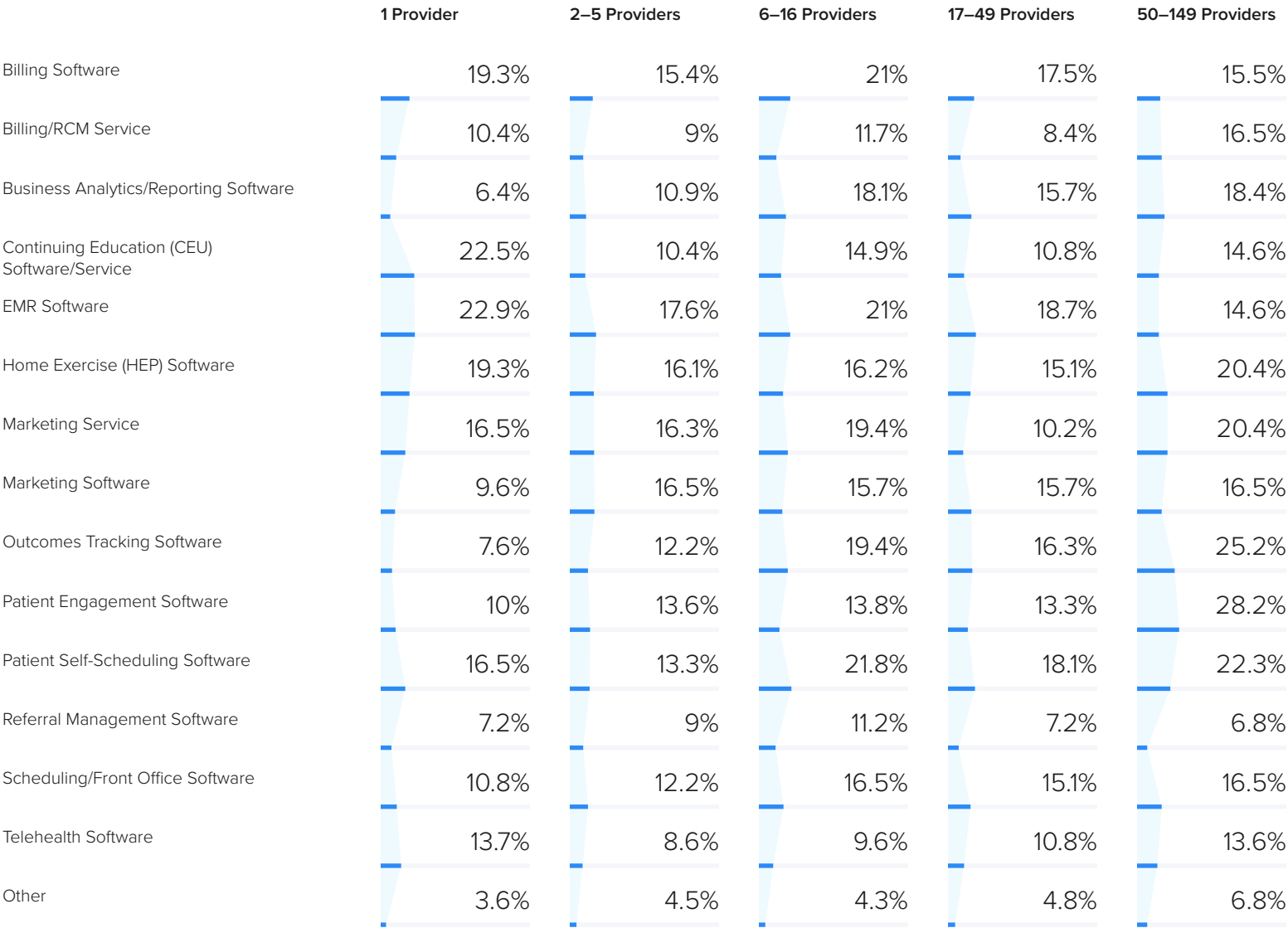
	1 Provider	2–5 Providers	6–16 Providers	17–49 Providers	50–149 Providers	150+ Providers	Hospital: Community	Hospital: Regional	Physician-Owned Practice	Overall
Automated Appointment Reminder Software	12.7%	21.3%	17.6%	13.8%	11.8%	18.6%	13.3%	11.3%	9.8%	16.1%
Digital HEP Software (i.e., Patient HEP App)	17.5%	22.3%	27%	22.3%	21.6%	27.9%	13.3%	25%	19.5%	22.5%
Digital/Online Patient Intake Software	14.2%	17%	21.2%	22.3%	21.6%	16.3%	20%	13.8%	9.8%	17.5%
Motion Capture Software	1.4%	1.4%	2.3%	2.1%	0%	2.3%	6.7%	2.5%	2.4%	1.8%
Online Self-Scheduling Software	7.5%	3.9%	7.2%	10.6%	5.9%	7%	26.7%	13.8%	12.2%	7.6%
Outcomes Questionnaire/Tracking Software	2.8%	7.1%	5.9%	16%	9.8%	16.3%	13.3%	16.3%	2.4%	7.9%
Patient Engagement and Marketing Software/Secure Patient Messaging	9.4%	16.7%	28.8%	23.4%	33.3%	25.6%	46.7%	36.3%	26.8%	21.9%
Team Messaging/Task Management Software (e.g., Slack, Microsoft Teams)	4.2%	11.7%	22.1%	24.5%	31.4%	51.2%	13.3%	32.5%	31.7%	18.5%
Telehealth Software	15.1%	15.6%	27.5%	24.5%	39.2%	44.2%	13.3%	25%	34.1%	22.6%
Videoconferencing/Virtual Meeting Software (e.g., Zoom)	25%	27.7%	42.3%	45.7%	47.1%	55.8%	40%	45%	31.7%	35.6%
We Did Not Use Any New Types of Technology During the Last Year	43.4%	37.2%	26.6%	27.7%	9.8%	16.3%	13.3%	21.3%	17.1%	30.8%
Other	6.1%	3.2%	4.5%	3.2%	2%	4.7%	0%	1.3%	2.4%	3.8%

About 36% of therapy professionals used videoconferencing and virtual meeting software for the first time in 2021, and more than 22% reported using telehealth for the first time.

The next most used new technology was digital home exercise program software, with nearly 23% of respondents using this type of solution.



Solutions Therapy Leaders are Considering Investing in Over the Next Two Years



The top three technology platforms therapy leaders are considering investing in over the next two years are:

- EMR software (21%),
- home exercise program software (18%), and
- billing software (17%).

“One piece of technology I don’t see on this list, but definitely an important and timely addition to the digital health needs of every clinic, is remote therapeutic monitoring (RTM). Not only can RTM technology support better communication with your patients, but it also can help improve patient adherence and outcomes.”

Troy Bage, PT, DPT
COO
Ivy Rehab Physical Therapy

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Solutions Therapy Leaders are Considering Investing in Over the Next Two Years

(Continued)

	150+ Providers	Hospital: Community	Hospital: Regional	Physician-Owned Practice	Overall
Billing Software	17.2%	14.6%	12.1%	17.1%	17.4%
Billing/RCM Service	6.9%	7.3%	7.5%	17.1%	10.1%
Business Analytics/Reporting Software	20.7%	12.2%	11.7%	22.4%	13.4%
Continuing Education (CEU) Software/Service	17.2%	24.4%	10.9%	13.2%	14.1%
EMR Software	28.7%	34.1%	25.1%	27.6%	21.3%
Home Exercise (HEP) Software	23%	19.5%	16.3%	25%	17.8%
Marketing Service	9.2%	17.1%	12.1%	14.5%	15.5%
Marketing Software	13.8%	12.2%	20.1%	15.8%	15.6%
Outcomes Tracking Software	25.3%	24.4%	17.6%	25%	16.2%
Patient Engagement Software	20.7%	22%	14.2%	21.1%	14.4%
Patient Self-Scheduling Software	14.9%	9.8%	10%	19.7%	16%
Referral Management Software	6.9%	9.8%	6.7%	3.9%	8.1%
Scheduling/Front Office Software	11.5%	12.2%	12.6%	21.1%	13.4%
Telehealth Software	18.4%	17.1%	9.2%	10.5%	10.8%
Other	3.4%	0%	1.7%	2.6%	3.8%

“The recent rise of digital home exercise programs can be attributed to two main factors:

First off, PTs have long known that patient adherence and compliance rates are not ideal, but there was no reason to pierce the clinic/home divide—until COVID-19 provided a reason to put devices, apps, and services in homes.

Secondly, there is an increasing awareness that digital ‘exercise-in-a-box’ programs are rising as competitors to outpatient PT, and there is a growing existential threat that PT might be partially ‘replaced’ over time by all-digital platforms.”

James Heathers, Ph.D
Chief Scientific Officer
Cipher Skin

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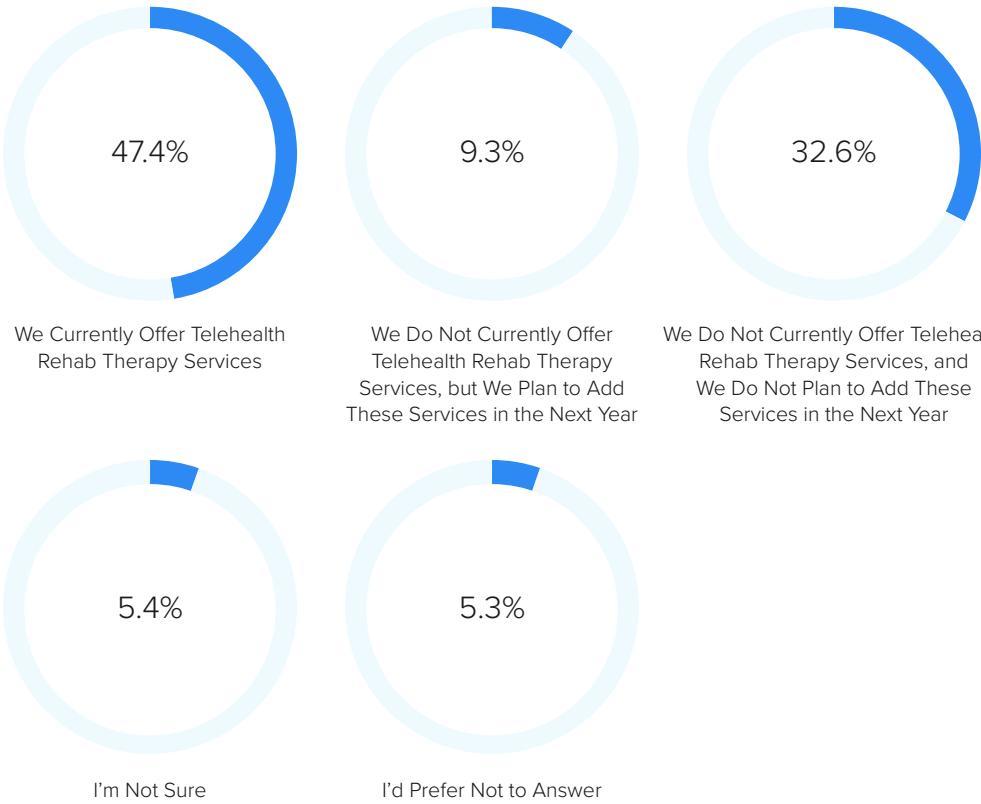
Most Problematic Digital Solutions Overall

Insurance Verification	1
Billing	2
Patient Communications	3
Patient Intake	4
Referral Management	5
Patient Outcomes	6
Fax Communications	7
Scheduling	8

Overall, respondents ranked insurance verification as the most problematic digital operations solution in their organization, with billing coming in a close second.



Current Telehealth Use/Service Offerings Overall

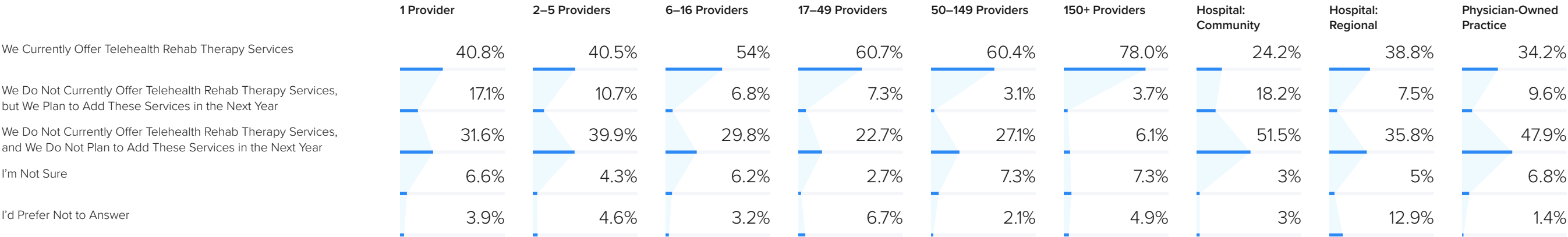


Nearly half of therapy professionals indicated that their organization currently offers telehealth services to patients.

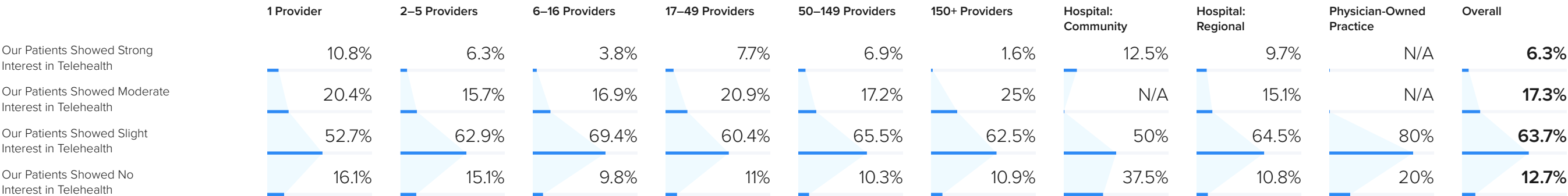
An additional 9% of respondents indicated that although they don't currently offer telehealth services, they plan to add these services in the next year.



Current Telehealth Use/Service Offerings by Provider Segment



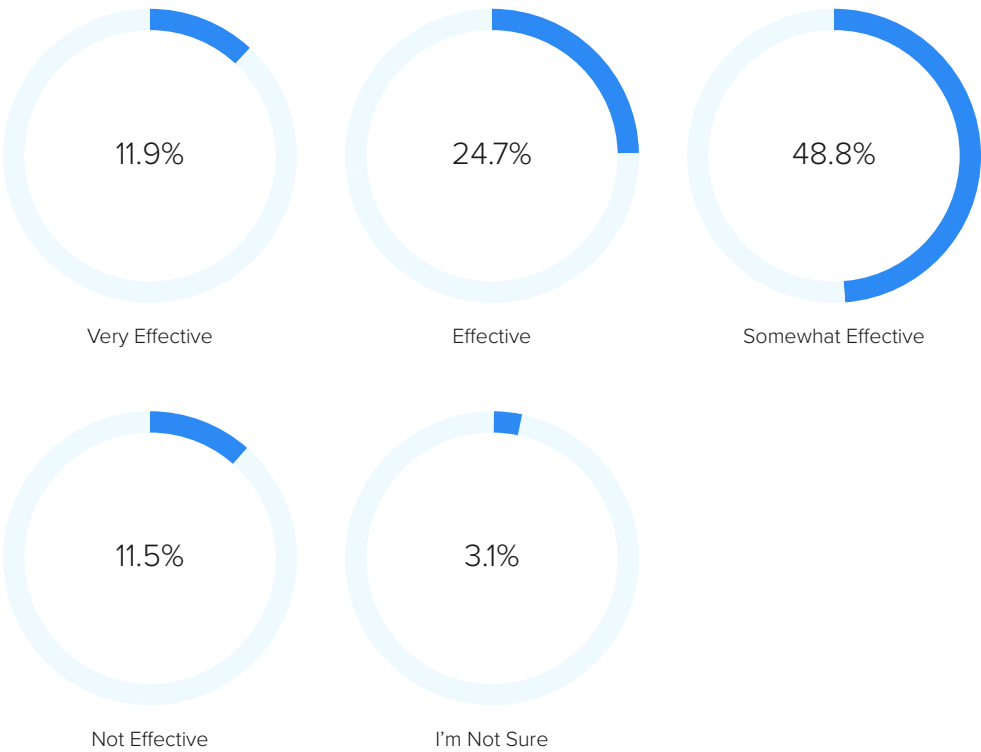
Patient Interest in Telehealth Overall and by Provider Segment



More than 70% of rehab therapy organizations report that their patients show zero to slight interest in telehealth. However, the larger the organization, the more interest patients show in telehealth.



Perceived Telehealth Efficacy Overall



The vast majority of respondents (approximately 85%) report that telehealth is somewhat to very effective based on patient outcomes.

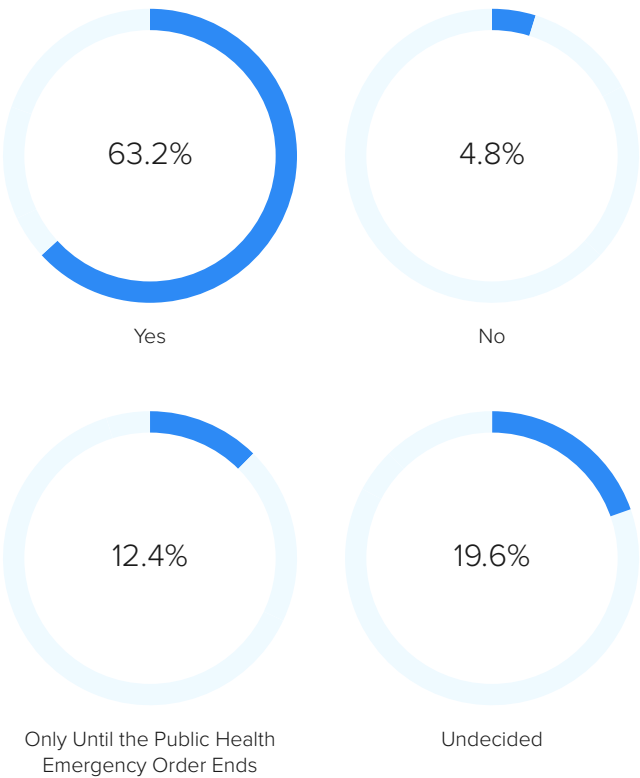
Only 1 in 10 therapy professionals think telehealth is not effective at all.

“One of the issues I ran into with the use of telehealth is how to modify my treatments to fit the medium while providing safe and effective treatment. And, when it comes to scheduling overlapping patients or seeing multiple people in person, you can’t really do that with telehealth. Regardless, I think telehealth is here to stay as it allows patients access to high-quality care outside the clinic walls—but it will require some planning ahead on the scheduling side to achieve optimal efficiency and reimbursement.”

Kathleen Rosas, PT, DPT
Clinical Content Product Manager
WebPT

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Plans to Use Telehealth Moving Forward Overall



63.2% of rehab therapy organizations plan to continue using telehealth moving forward.



“I think healthcare is quickly moving beyond the brick-and-mortar thought processes, which is why I believe telehealth will remain a permanent fixture in this industry. Rehab therapy should not be contained in a session or series of sessions. Engaging with the patients remotely and allowing them to manage their care in their environment, while assisting them through the process and being able to provide options to accelerate their outcomes is critical, as is reducing the cost of care delivery.”

Theresa Bell
President and CTO
Kno2

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Conclusion



As you can see, there’s a lot to unpack in this year’s report. And as such, a lot of opportunities—especially with regard to addressing our industry’s second-biggest perceived threat: burnout. Per a series of articles written a couple of months prior to this report’s publication, the [US Surgeon General came straight out with it](#): **“Confronting the long-standing drivers of burnout among our health workers must be a top national priority. And if we fail to act, we will place our nation’s health at risk.”**

While the data alone tells a compelling story about the levers we can (and should) be pulling to mitigate burnout in our profession, I’d like to take this one step further and provide you with some actionable footnotes:

- **Create a people-first workplace culture** that empowers employees and provides them with open communication channels in which they can voice their concerns. The onus is on clinic leaders to then be open and responsive to this feedback, educate all employees on best business practices, and then make adjustments when feasible.
- **Reduce administrative burdens** and advocate for point-of-care documentation for all staff across the board. This means reevaluating the technology you’re using and determining if there are better, more interoperable solutions out there to ease the workload.
- **Protect the health, safety, and well-being** of all health workers by providing paid sick and family leave, evaluation of workloads, student loan support, and childcare for all staff. This also includes making rehab therapy a covered service within your organization.
- **Seek to build productivity measures** around metrics that will help you run a successful business *without* running your providers into the ground. Some of [these baseline metrics](#) include profit per visit, net revenue per month, payer revenue per patient, revenue per therapist, Net Promoter Scores®, and employee satisfaction.
- **Provide mentorship and career development opportunities** to help your staff further their professional goals, improve their clinical skills, and enhance employee engagement and loyalty in the long run.

Bottom line: We’re all looking to create change at scale to improve patients’ lives and move our profession forward. But we must first take care of those who are on the front lines with us.

As the industry’s leading EMR platform, this data is not falling on deaf ears and we recognize that we play an important role in helping to improve business efficiency and employee experience. Together, we will continue to strengthen our profession’s position in the MSK healthcare continuum.

About WebPT

With more than 150,000 Members and 17,600 clinics, WebPT is the leading software platform for outpatient physical, occupational, and speech therapists. Simple and affordable, WebPT makes it easy for therapy professionals to transition from paper and outdated software to a user-friendly, cloud-based solution. With WebPT, therapists, directors, owners, billers, and front office staff have access to patients’ medical records, schedules, and claims anywhere, anytime, from any web-enabled device.

WebPT’s therapy-centric design and scalable architecture make it a great fit for clinics of any size, and the web-based application alleviates any large, upfront investments; costly IT support; or bulky, in-office servers. It provides an integrated method to manage patient documents and progress as well as clinic schedules, analytical reports, and billing. WebPT has an intuitive workflow, allowing therapists to efficiently create compliant and consistent documentation.

In addition to documentation, WebPT offers the tools necessary to run an organized clinic, including a multiuser scheduler with appointment reminders and the ability to upload external patient documents. With WebPT Analytics, therapists and staff can track productivity, cancellations, and no-shows as well as referrals. Therapists can also benchmark and track patient progress through WebPT’s outcomes tracking product and obtain continuing education units entirely online through WebPT CEU. Additionally, WebPT empowers practices to gain and retain patients through our powerful patient marketing software and improve patient compliance with our interactive, mobile-friendly home exercise program (HEP). Lastly, WebPT’s billing options—including the WebPT RCM Service and Billing Software as well as integrations with several certified billing partners—ensure clinics receive reliable, accurate claims submission and processing as well as speedy, maximized reimbursements.

With WebPT, rehab therapists have a modern and intuitive end- to-end software platform that’s well-suited to their needs, empowering them to be better in business—and more importantly, enabling them to provide better patient care.

Headquartered in the historic Warehouse District in downtown Phoenix, WebPT has a 99.9% uptime rate and a 99% customer retention rate. It was named to the Inc. 5000 list of the nation’s fastest-growing companies nine years in a row and to the Deloitte Fast 500 list in 2016.

Members
150,000+

Clinics
17,600

Uptime Rate
99.9%

Customer Retention Rate
99%



**See why thousands of rehab therapists
choose WebPT over any other
software solution in the industry.**

Learn more about WebPT at
webpt.com/demo.

