

# FSBPT Census of Licensed Physical Therapists and Physical Therapist Assistants in the United States

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## Introduction

In the face of pervasive workforce shortages, health workforce data collection has emerged as a top national and state priority. Access to health workforce data is essential to inform various aspects of policy and programs, such as identifying health workforce shortage areas, planning for educational programs or regulatory policy changes, and forecasting employment demands.

Health workforce data collection has been a national priority for decades. The Health Resources and Services Administration (HRSA), in collaboration with national organizations, established minimum data set survey tools for several health professions, including physical therapy, in 2013. Detailed information about the health workforce is necessary to evaluate existing programs and to plan for future needs.

This is the 2023 census of licensed physical therapists and physical therapist assistants using data from the Federation of State Boards of Physical Therapy (FSBPT). FSBPT is a membership organization comprised of the fifty-three bodies charged with the regulation of physical therapy in their respective jurisdiction. All jurisdictional licensing boards regulating physical therapy in the fifty states, the District of Columbia, Puerto Rico, and the United States Virgin Islands require an individual to be legally authorized to practice as a physical therapist or work as a physical therapist assistant. To legally provide physical therapy services, a jurisdiction may require a license, certification (PTA only), compact privilege, or, in limited jurisdictions, a registration limited to the provision of physical therapy via telehealth technologies. This report is the initial attempt to provide information about the physical therapy workforce including, but not limited to, information about the number of active licenses in the United States, the age of the physical therapists/physical therapist assistants, the sex of the physical therapists/physical therapist assistants, the percentage of physical therapists educated at entry-level programs accredited by the Commission on Accreditation on Physical Therapy Education (CAPTE), and the entry-level degree of physical therapists (bachelors, masters, doctorate).

## Methodology

The source of data for this census is FSBPT's Examination, Licensure, and Disciplinary Database (ELDD). The ELDD is a secure, comprehensive national physical therapy database of disciplinary, licensure, and FSBPT examination score information (National Physical Therapy Examination, Law Examinations, and the Jurisprudence Assessment Module). The FSBPT mission is to protect the public by providing service and leadership that promote safe and competent physical therapy practice. The ELDD helps support public protection by serving as a mechanism to proactively notify other jurisdictions of disciplinary action in which an individual is licensed or has requested a score transfer to in order to prevent sanctioned individuals from moving across state lines to avoid the effects of disciplinary action (Federation of State Boards of Physical Therapy, 2023).

Table 1: Data Sources

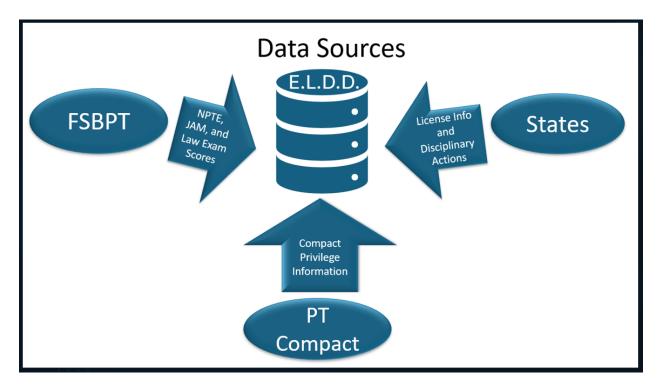
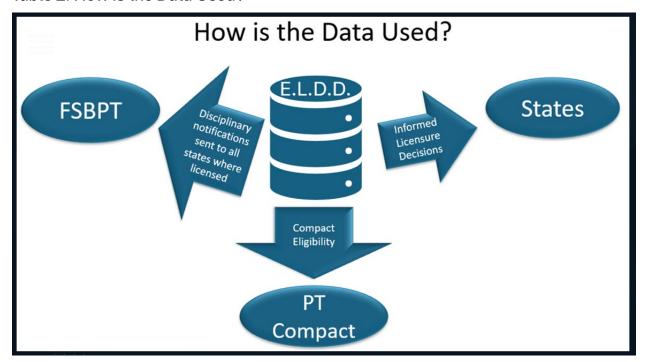


Table 2: How is the Data Used?

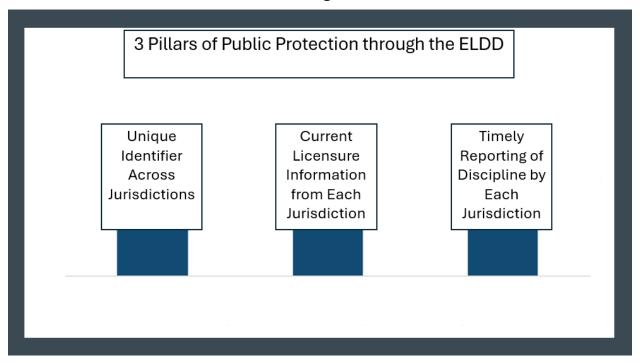


The data provided by FSBPT also includes school and candidate registration details. Having the ELDD information compiled in a single database enhances public protection. When disciplinary actions are reported to the ELDD, the FSBPT proactively disseminates disciplinary notifications to all jurisdictions

where the individual holds a license. For the ELDD to be effective, there are three requirements from member jurisdictions:

- 1. Use of a unique identifier across jurisdictions (the FSBPT ID),
- 2. Current licensure Information from each jurisdiction (the goal is no less than weekly licensure information sharing by each jurisdiction), and
- 3. Timely reporting of disciplinary action by each jurisdiction.

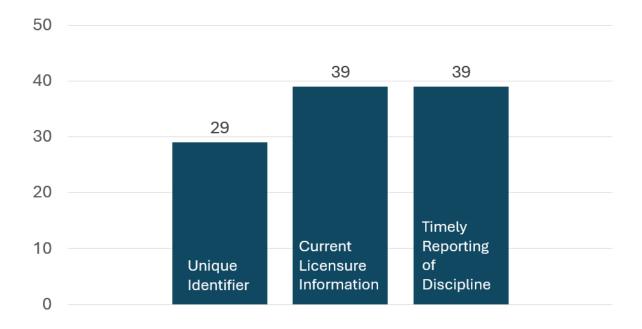
Table 3: 3 Pillars of Public Protection through ELDD



Unfortunately, not all jurisdictions are actively contributing to the ELDD and FSBPT staff attempt to fill gaps in the data by either requesting license information from those jurisdictions who do not contribute or downloading the information from a public download site, if available. In both situations, the data is often missing important elements that are included when the licensure information is proactively provided by the jurisdiction. The charts below list the number of jurisdictions contributing to each of the following areas of the ELDD as of December 31, 2023:

Table 4: Number of Jurisdiction Contributing to the ELDD by Year End 2023

Number of Jurisdiction Contributing to the ELDD by Year End 2023



The lack of contribution by some jurisdictions, especially those with large numbers of physical therapists and physical therapist assistants, is a limitation of this study.

Table 5: Jurisdictions Providing FSBPT ID In 2023

29 Jurisdictions Providing FSBPT ID In 2023		
Alabama	Maryland	Oklahoma
Arizona	Minnesota	Oregon
Arkansas	Mississippi	South Carolina
Delaware	Montana	South Dakota
Georgia	Nebraska	Texas
Indiana	Nevada	Utah
Iowa	New Jersey	Virginia
Kansas	North Carolina	Washington
Kentucky	North Dakota	West Virginia
Louisiana	Ohio	

Table 6: Jurisdictions Providing Weekly Licensure Files In 2023

39 Jurisdictions Providing Weekly Licensure Files In 2023		
Alabama	Kentucky	Ohio
Arizona	Louisiana	Oklahoma
Arkansas	Maryland	Oregon
California	Minnesota	South Carolina
Colorado	Mississippi	South Dakota
Delaware	Missouri	Tennessee
District of Columbia	Montana	Texas
Florida	Nebraska	Utah
Georgia	Nevada	Virgin Islands
Idaho	New Hampshire	Virginia
Indiana	New Jersey	Washington
Iowa	North Carolina	West Virginia
Kansas	North Dakota	Wisconsin

Table 7: Jurisdictions Reporting Timely Disciplinary Actions In 2023

39 Jurisdictions Reporting Timely Disciplinary Actions In 2023		
Alabama	Louisiana	Oklahoma
Alaska	Maryland	Oregon
Arizona	Minnesota	Rhode Island
Arkansas	Mississippi	South Carolina
California	Missouri	Tennessee
Colorado	Nebraska	Texas
Delaware	Nevada	Utah
District of Columbia	New Hampshire	Virgin Islands
Georgia	New Jersey	Virginia
Indiana	New Mexico	Washington
Iowa	North Carolina	West Virginia
Kansas	North Dakota	Wisconsin
Kentucky	Ohio	Wyoming

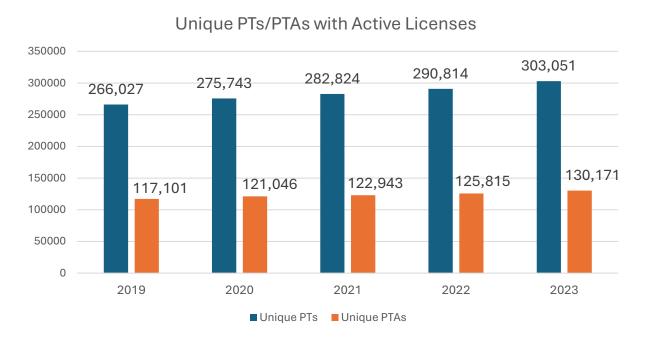
In addition to its role in public protection, the ELDD contains a wealth of information about individuals licensed to provide physical therapy care. This census was run for the year 2023, with data current as of December 31, 2023.

## Results

#### **Active Licenses**

Physical therapists are licensed in all fifty-three jurisdictions. Physical therapist assistants are regulated by licensure or certification in all fifty-three jurisdictions. For simplicity in this report, we will use the term licensure to include both licensure and certification for physical therapist assistants. There are 303,051 unique physical therapists with active licenses in the United States and 130,171 unique physical therapist assistants licensed in the United States.

Table 8: Unique PTs/PTAs with Active Licenses



When looking at active licenses by jurisdiction, New York has the largest number of physical therapists and Florida has the largest number of physical therapist assistants. Some physical therapists and physical therapist assistants have licenses to practice in multiple jurisdictions, so the total number of active licenses will be larger than the number of unique PT/PTAs with active licenses.

Table 9: Active Licenses by Jurisdiction – PTs/PTAs

Active Licenses		
Physical Therapist and Physical Therapist Assistant		
Jurisdiction	Physical Therapist	Physical Therapist Assistant
Alabama	3,438	3,005
Alaska	2,120	330
Arizona	6,793	2,176
Arkansas	2,677	1,766

Active Licenses		
Physical Therapist and Physical Therapist Assistant		
Jurisdiction	Physical Therapist	Physical Therapist Assistant
California	29,934	8,710
Colorado	8,693	2,099
Connecticut	7,621	1,422
Delaware	1,668	556
District of Columbia	1,350	80
Florida	19,607	11,984
Georgia	8,895	2,993
Hawaii	1,435	242
Idaho	2,669	1,048
Illinois	13,654	6,174
Indiana	7,109	3,644
Iowa	3,608	1,710
Kansas	3,445	2,098
Kentucky	4,196	2,367
Louisiana	3,683	1,715
Maine	2,952	690
Maryland	7,252	2,351
Massachusetts	11,055	2,991
Michigan	12,548	5,617
Minnesota	6,618	1,860
Mississippi	2,198	1,558
Missouri	7,705	3,484
Montana	1,913	433
Nebraska	2,214	1,159
Nevada	2,516	873
New Hampshire	2,411	579
New Jersey	12,985	1,935
New Mexico	2,326	1,051
New York	30,590	8,098
North Carolina	10,924	4,393
North Dakota	1,149	196
Ohio	11,878	8,470
Oklahoma	2,764	2,125
Oregon	5,471	1,321
Pennsylvania	16,696	6,117
Puerto Rico	839	1,614
Rhode Island	1,773	795
South Carolina	5,575	2,802

Active Licenses Physical Therapist and Physical Therapist Assistant		
Jurisdiction	Physical Therapist	Physical Therapist Assistant
South Dakota	1,822	467
Tennessee	6,912	4,057
Texas	21,878	11,245
Utah	2,984	1,080
Vermont	1,343	235
Virgin Islands	55	13
Virginia	9,300	3,693
Washington	7,924	2,436
West Virginia	1,713	1,370
Wisconsin	7,205	2,248
Wyoming	816	299
Total	356,899	141,774

### **Compact Privileges**

Additionally, some licensees may be authorized to practice/work in one or more jurisdictions via a compact privilege issued by the Physical Therapy Compact Commission. In order to obtain a compact privilege, the jurisdiction must join the Physical Therapy Compact Commission and be actively issuing compact privileges. As of December 31, 2023, thirty-one jurisdictions were actively issuing and accepting compact privileges.

Table 10: Jurisdictions Issuing Compact Privileges

Jurisdictions Issuing Compact Privileges		
Arizona	Mississippi	Oregon
Arkansas	Missouri	South Carolina
Colorado	Montana	South Dakota
Delaware	Nebraska	Tennessee
District of Columbia	New Hampshire	Texas
Georgia	New Jersey	Utah
Indiana	North Carolina	Virginia
lowa	North Dakota	Washington
Kentucky	Ohio	West Virginia
Louisiana	Oklahoma	Wisconsin
Maryland		

When looking at active compact privileges by jurisdiction, Washington issued the largest number of physical therapist compact privileges and Virginia issued the largest number of physical therapist assistant compact privileges.

Table 11: Active Compact Privileges by Jurisdiction – PTs/PTAs

Active Compact Privileges		
Physical Therapist and Physical Therapist Assistant		
Jurisdiction	Physical Therapist	Physical Therapist Assistant
Arkansas	141	65
Arizona	460	51
Colorado	527	71
District of Columbia	21	3
Delaware	163	25
Georgia	461	140
Iowa	259	55
Indiana	148	42
Kentucky	282	75
Louisiana	212	68
Maryland	252	52
Missouri	223	47
Mississippi	142	43
Montana	127	24
North Carolina	499	101
North Dakota	88	5
Nebraska	207	37
New Hampshire	126	10
New Jersey	66	7
Ohio	327	33
Oklahoma	274	59
Oregon	345	98
South Carolina	311	38
South Dakota	112	9
Tennessee	362	112
Texas	490	130
Utah	174	18
Virginia	613	159
Washington	784	142
Wisconsin	107	2
West Virginia	213	67
Totals	8517	1788

#### Licensees Who Live Within the Jurisdiction

Physical therapists and physical therapist assistants frequently possess the flexibility to engage in traveling assignments, reside near the border of another jurisdiction, or provide treatment via telehealth. This flexibility often necessitates holding multiple licenses and/or compact privileges. Additionally, some professionals may relocate to a new jurisdiction while retaining their original license, irrespective of their intention to continue treating patients in their previous jurisdiction. The table below illustrates the number of physical therapists and physical therapist assistants reported by each jurisdiction as having an address within their jurisdiction. It is important to note that the quality of the data is limited by the jurisdiction's participation with the ELDD (e.g., address information is very limited for Puerto Rico and the US Virgin Islands).

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Table 12: Active Licenses who Live in Jurisdiction – PTs/PTAs

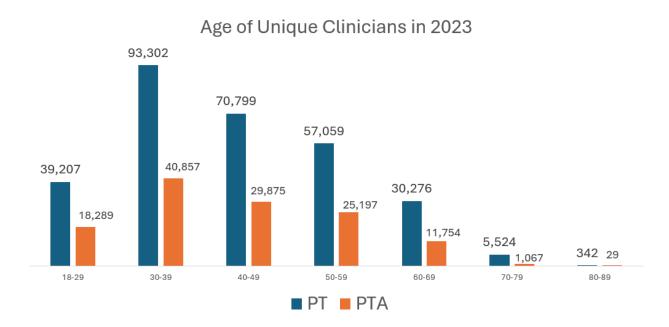
Active Licenses who Live in Jurisdiction Physical Therapist and Physical Therapist Assistant		
Jurisdiction	Physical Therapist	Physical Therapist Assistant
Alabama	3,008	2,850
Alaska	995	224
Arizona	5,531	1,926
Arkansas	2,504	1,609
California	26,228	8,128
Colorado	6,544	1,713
Connecticut	5,250	1,054
Delaware	999	446
District of Columbia	405	21
Florida	17,277	11,370
Georgia	7,419	2,588
Hawaii	285	119
Idaho	1,977	902
Illinois	11,828	5,617
Indiana	5,701	3,199
Iowa	2,970	1,442
Kansas	2,878	1,830
Kentucky	3,570	2,085
Louisiana	3,455	1,639
Maine	2,036	567
Maryland	5,859	1,895
Massachusetts	8,129	2,508
Michigan	10,544	5,274

Active Licenses who Live in Jurisdiction		
-	rapist and Physical The	
Jurisdiction	Physical Therapist	Physical Therapist Assistant
Minnesota	5,617	1,641
Mississippi	1,991	1,444
Missouri	5,792	2,848
Montana	1,497	372
Nebraska	2,030	1,064
Nevada	2,066	788
New Hampshire	1,100	291
New Jersey	11,124	1,743
New Mexico	1,019	574
New York	22,302	6,089
North Carolina	9,536	4,017
North Dakota	934	157
Ohio	10,504	7,921
Oklahoma	2,586	2,035
Oregon	4,250	1,034
Pennsylvania	14,587	5,734
Puerto Rico	2	0
Rhode Island	1,012	451
South Carolina	4,389	2,533
South Dakota	592	135
Tennessee	6,015	3,671
Texas	19,511	10,548
Utah	2,593	991
Vermont	960	160
Virgin Islands	4	4
Virginia	7,726	3,312
Washington	6,649	2,213
West Virginia	1,265	1,028
Wisconsin	6,176	2,087
Wyoming	576	240
Total	289,797	124,131

## Age

Of all physical therapists and physical therapist assistants with an active license and known age in the ELDD, the largest number of physical therapists and physical therapist assistants are between 30-39 years of age. The mean age of physical therapists is 43 years-old and the mean age of physical therapist assistants is 42 years-old.

Table 13: Age of Unique Clinicians in 2023



Alaska, District of Columbia, and North Dakota have the lowest mean age of physical therapists (40 years-old). Puerto Rico and South Dakota have the highest mean age of physical therapists (54 and 47 years-old respectively).

Table 14: Age of Physical Therapists by Jurisdiction

Age of Physical Therapists by Jurisdiction									
Jurisdiction	$\overline{\mathbf{x}}$	18-29	30-39	40-49	50-59	60-69	70-79	80-89	Unknown
Alabama	41	549	1186	733	632	280	57	1	0
Alaska	40	248	1008	342	254	163	39	6	60
Arizona	42	1141	2299	1322	1185	691	144	10	1
Arkansas	42	406	899	524	581	237	28	2	0
California	43	3183	10063	7118	5415	3358	730	65	2
Colorado	42	1204	2982	1755	1734	864	124	7	23
Connecticut	44	851	2304	1509	1260	1022	291	13	371
Delaware	42	238	543	412	291	159	15	3	7

		Age of	Physical <b>T</b>	herapists	by Jurisdic	tion			
Jurisdiction	$\overline{\mathbf{x}}$	18-29	30-39	40-49	50-59	60-69	70-79	80-89	Unknown
District of Columbia	40	225	527	314	177	94	11	2	0
Florida	44	2249	5354	4594	4754	2283	353	17	3
Georgia	41	1383	2987	1932	1412	654	113	6	408
Hawaii	43	105	520	326	206	123	27	1	127
Idaho	42	353	849	576	506	215	52	8	110
Illinois	41	1427	4035	3483	1506	544	82	12	2565
Indiana	43	971	2097	1775	1523	638	84	4	17
Iowa	41	584	1262	824	648	245	39	5	1
Kansas	41	580	1217	780	571	262	34	0	1
Kentucky	42	641	1386	939	804	372	52	1	1
Louisiana	42	527	1163	916	686	320	71	0	0
Maine	44	335	920	649	524	385	131	6	2
Maryland	43	917	2285	1783	1377	716	125	10	39
Massachusetts	44	1299	3206	2220	2243	1455	245	10	377
Michigan	45	1204	3575	3112	2751	1481	382	35	8
Minnesota	41	1067	2433	1393	1082	587	55	1	0
Mississippi	43	261	704	540	450	220	21	2	0
Missouri	42	1235	2374	1767	1424	694	80	3	128
Montana	44	209	601	403	408	241	43	5	3
Nebraska	41	322	756	567	405	144	18	2	0
Nevada	42	284	941	617	445	190	38	1	0
New Hampshire	44	290	689	540	555	303	33	1	0
New Jersey	42	2036	4086	3110	2302	1251	180	14	6
New Mexico	43	237	748	492	417	270	44	3	115
New York	42	4353	8989	7227	4745	2805	563	18	1890
North Carolina	42	1602	3556	2640	2005	957	157	6	1
North Dakota	40	225	417	266	141	90	10	0	0
Ohio	42	1750	3920	2742	2109	1154	191	11	1
Oklahoma	43	356	843	606	612	287	56	4	0
Oregon	43	607	1944	1239	1008	563	107	3	0
Pennsylvania	42	2433	5257	3788	3330	1616	200	8	64
Puerto Rico	54	0	77	229	236	168	89	7	33
Rhode Island	43	234	592	340	364	214	28	1	0
South Carolina	41	937	1887	1195	1028	448	50	1	29
South Dakota	47	172	428	396	489	201	79	25	32
Tennessee	42	1079	2250	1445	1479	581	73	5	0
Texas	42	3217	7518	5325	3667	1839	304	6	2
Utah	43	317	1035	628	633	303	65	3	0
Vermont	44	115	405	300	230	146	17	1	129

		Age of	Physical T	herapists	by Jurisdic	tion			
Jurisdiction	$\overline{\mathbf{x}}$	18-29	30-39	40-49	50-59	60-69	70-79	80-89	Unknown
Virgin Islands	44	2	16	16	16	3	1	0	1
Virginia	41	1462	3197	2069	1637	819	112	3	1
Washington	43	933	2751	1869	1439	815	113	3	1
West Virginia	42	221	556	423	346	132	30	4	1
Wisconsin	42	1100	2375	1559	1372	670	99	10	20
Wyoming	41	108	320	170	145	62	6	0	5
Totals		47784	114332	81839	65559	34334	6091	375	6585

Nebraska and Mississippi have the lowest mean age of physical therapist assistants (37 and 38 years-old respectively). Massachusetts and New Hampshire have the highest mean age of physical therapist assistants (48 and 47 years-old respectively).

Table 15: Age of Physical Therapist Assistants by Jurisdiction

Age of Physical Therapist Assistants by Jurisdiction									
Jurisdiction	$\overline{\mathbf{x}}$	18-29	30-39	40-49	50-59	60-69	70-79	80-89	Unknown
Alabama	41	558	927	664	647	193	16	0	0
Alaska	39	48	147	64	36	23	3	0	9
Arizona	40	352	793	498	370	145	16	1	1
Arkansas	40	354	562	404	310	127	9	0	0
California	42	1048	3039	1940	1654	915	108	6	0
Colorado	42	273	761	469	374	207	14	1	0
Connecticut	43	126	423	256	246	139	24	1	207
Delaware	41	91	184	134	105	34	5	0	3
District of Columbia	41	13	29	19	13	6	0	0	0
Florida	43	1484	3594	2877	2651	1267	109	0	2
Georgia	42	375	964	704	586	215	22	1	126
Hawaii	41	34	89	58	35	25	1	0	0
Idaho	39	239	340	239	139	59	7	0	25
Illinois	42	705	1656	1250	837	425	50	4	1247
Indiana	42	542	1079	946	751	297	23	1	5
Iowa	39	332	603	396	255	119	5	0	0
Kansas	40	410	683	453	363	181	8	0	0
Kentucky	42	351	679	636	491	198	11	1	0
Louisiana	40	278	606	407	297	118	9	0	0
Maine	44	87	202	141	150	100	8	0	2
Maryland	42	349	799	531	435	208	24	4	1
Massachusetts	48	189	639	511	968	585	58	1	40
Michigan	43	706	1649	1387	1211	609	53	0	2
Minnesota	41	301	596	446	349	162	6	0	0

		Age of Phy	/sical Thei	apist Assi	stants by Ju	ırisdictio	n		
Jurisdiction	x	18-29	30-39	40-49	50-59	60-69	70-79	80-89	Unknown
Mississippi	38	370	571	366	199	45	7	0	0
Missouri	42	599	1067	753	697	345	22	0	1
Montana	41	59	155	112	66	36	2	0	3
Nebraska	37	258	475	249	129	47	1	0	0
Nevada	40	110	374	183	150	50	5	1	0
New Hampshire	47	42	152	122	160	98	5	0	0
New Jersey	45	188	575	363	490	290	28	0	1
New Mexico	41	140	404	236	167	90	11	0	3
New York	41	1044	2388	1626	1041	634	93	1	1271
North Carolina	43	586	1305	1002	1053	413	34	0	0
North Dakota	40	33	77	40	34	11	1	0	0
Ohio	42	1177	2622	2043	1793	776	58	1	0
Oklahoma	40	412	670	559	334	134	16	0	0
Oregon	44	139	402	294	303	165	18	0	0
Pennsylvania	42	1017	1945	1273	1281	552	43	0	6
Puerto Rico	41	131	641	393	236	118	10	0	85
Rhode Island	45	89	231	125	212	124	14	0	0
South Carolina	42	451	856	671	571	220	13	0	20
South Dakota	41	80	149	112	71	38	9	1	7
Tennessee	43	600	1114	951	944	416	30	2	0
Texas	41	1683	3789	2722	2099	876	74	1	1
Utah	39	218	382	287	142	49	2	0	0
Vermont	45	24	58	46	52	32	3	0	20
Virgin Islands	41	0	7	4	1	1	0	0	0
Virginia	41	591	1213	818	724	323	23	1	0
Washington	42	305	799	591	472	250	19	0	0
West Virginia	40	236	459	405	196	61	5	0	8
Wisconsin	43	294	692	512	532	206	10	0	2
Wyoming	40	54	96	59	53	26	0	0	11
Total		20175	44711	32347	27475	12783	1145	29	3109

### Sex

The sex of physical therapists and physical therapist assistants is not well captured in the ELDD with unreported data in 34% of physical therapists and 29% of physical therapist assistants. Of those individuals with sex reported, 67% of physical therapists are female and 69% of physical therapist assistants are female.

Table 16: Sex of Unique Physical Therapists

# **Physical Therapists**

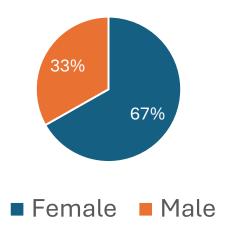
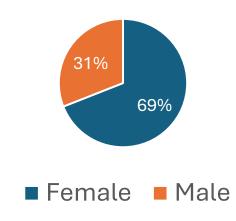


Table 17: Sex of Unique Physical Therapist Assistants

## Physical Therapist Assistants



Not all jurisdictions have the same percentages of females and males. Puerto Rico, Vermont, and Massachusetts have at greatest percentage of female physical therapists (76%, 75%, and 75% respectively), while Utah is the only jurisdiction with male physical therapists as the majority (53%).

Table 18: Sex of Physical Therapists by Jurisdiction

Sex of Physical Therapists by Jurisdiction					
Jurisdiction	Female	Male			
Alabama	65%	35%			
Alaska	66%	34%			
Arizona	60%	40%			

Sex of Physical Therap	ists by Jurisdi	ction
Jurisdiction	Female	Male
Arkansas	64%	36%
California	62%	38%
Colorado	70%	30%
Connecticut	69%	31%
Delaware	64%	36%
District of Columbia	73%	27%
Florida	65%	35%
Georgia	69%	31%
Hawaii	65%	35%
Idaho	54%	46%
Illinois	69%	31%
Indiana	67%	33%
Iowa	68%	32%
Kansas	71%	29%
Kentucky	66%	34%
Louisiana	62%	38%
Maine	71%	29%
Maryland	70%	30%
Massachusetts	75%	25%
Michigan	63%	37%
Minnesota	70%	30%
Mississippi	65%	35%
Missouri	73%	27%
Montana	67%	33%
Nebraska	67%	33%
Nevada	54%	46%
New Hampshire	75%	25%
New Jersey	67%	33%
New Mexico	63%	37%
New York	63%	37%
North Carolina	69%	31%
North Dakota	70%	30%
Ohio	70%	30%
Oklahoma	67%	33%
Oregon	65%	35%
Pennsylvania	68%	32%
Puerto Rico	76%	24%
Rhode Island	71%	29%
South Carolina	67%	33%

Sex of Physical Thera	pists by Jurisdi	ction
Jurisdiction	Female	Male
South Dakota	66%	34%
Tennessee	66%	34%
Texas	67%	33%
Utah	47%	53%
Vermont	75%	25%
Virgin Islands	67%	33%
Virginia	69%	31%
Washington	66%	34%
West Virginia	62%	38%
Wisconsin	71%	29%
Wyoming	65%	35%

For physical therapist assistants, North Dakota and Puerto Rico have the highest percentage of female physical therapist assistants (81% and 80% respectively). Nevada has the largest percentage of male physical therapist assistants (42%).

Table 19: Sex of Physical Therapist Assistants by Jurisdiction

_	Sex of Physical Therapist Assistant by Jurisdiction					
Jurisdiction	Female	Male				
Alaska	71%	29%				
Alabama	73%	27%				
Arkansas	71%	29%				
Arizona	64%	36%				
California	52%	48%				
Colorado	69%	31%				
Connecticut	67%	33%				
District of Columbia	63%	38%				
Delaware	73%	27%				
Florida	62%	38%				
Georgia	68%	32%				
Hawaii	62%	38%				
Iowa	79%	21%				
Idaho	74%	26%				
Illinois	72%	28%				
Indiana	77%	23%				
Kansas	74%	26%				
Kentucky	73%	27%				
Louisiana	69%	31%				

Sex of Physical The Jurisdi		t by
Jurisdiction	Female	Male
Massachusetts	73%	27%
Maryland	72%	28%
Maine	74%	26%
Michigan	71%	29%
Minnesota	78%	22%
Missouri	73%	27%
Mississippi	71%	29%
Montana	73%	27%
North Carolina	71%	29%
North Dakota	81%	19%
Nebraska	76%	24%
New Hampshire	72%	28%
New Jersey	66%	34%
New Mexico	65%	35%
Nevada	58%	42%
New York	64%	36%
Ohio	74%	26%
Oklahoma	75%	25%
Oregon	71%	29%
Pennsylvania	74%	26%
Puerto Rico	80%	20%
Rhode Island	70%	30%
South Carolina	73%	27%
South Dakota	78%	22%
Tennessee	71%	29%
Texas	66%	34%
Utah	75%	25%
Virginia	72%	28%
Virgin Islands	64%	36%
Vermont	73%	27%
Washington	72%	28%
Wisconsin	78%	22%
West Virginia	70%	30%
Wyoming	75%	25%

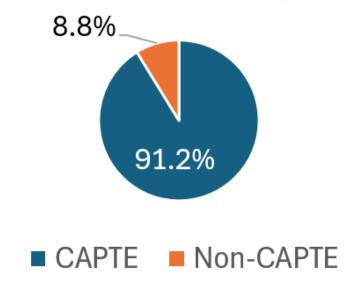
# **Entry-Level Education**

The Commission on Accreditation in Physical Therapy Education (CAPTE) grants accreditation status to qualified entry-level education programs for physical therapists and physical therapist assistants

(Commission on Accreditation in Physical Therapy Education, 2024a). Most physical therapists in the United States come from CAPTE Accredited Program (91.2%).

Table 20: Percentages of Licensee who Graduated from CAPTE Accredited Programs

# Percentages of Licensee who Graduated from CAPTE Accredited Programs



New York has the highest percentage of non-CAPTE accredited program graduates (27.6%) and Ohio has the smallest percentage of non-CAPTE accredited program graduates in its license pool (1.4%).

Table 21: Percentage of Non-CAPTE Accredited Program Graduates by Jurisdiction

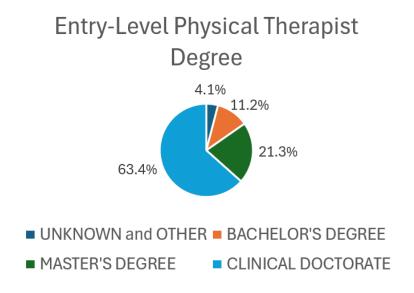
Jurisdiction	Non-CAPTE Accredited Program Graduates
Alabama	2.8%
Alaska	2.0%
Arizona	2.1%
Arkansas	3.9%
California	12.9%
Colorado	4.8%
Connecticut	13.3%
Delaware	13.6%
District of Columbia	9.1%
Florida	10.0%

	Non-CAPTE Accredited
Jurisdiction	Program Graduates
Georgia	5.0%
Hawaii	7.9%
Idaho	1.9%
Illinois	12.8%
Indiana	12.5%
Iowa	7.4%
Kansas	1.9%
Kentucky	1.8%
Louisiana	3.4%
Maine	3.2%
Maryland	12.5%
Massachusetts	4.9%
Michigan	16.0%
Minnesota	2.1%
Mississippi	1.6%
Missouri	3.2%
Montana	5.7%
Nebraska	5.3%
Nevada	12.5%
New Hampshire	2.6%
New Jersey	14.1%
New Mexico	9.7%
New York	27.6%
North Carolina	5.9%
North Dakota	4.7%
Ohio	1.4%
Oklahoma	2.4%
Oregon	5.0%
Pennsylvania	3.7%
Puerto Rico	3.0%
Rhode Island	2.2%
South Carolina	3.4%
South Dakota	5.8%
Tennessee	3.3%
Texas	15.9%
Utah	2.6%
Vermont	4.0%
Virgin Islands	3.0%
Virginia	6.8%
Washington	5.3%

Jurisdiction	Non-CAPTE Accredited Program Graduates	
West Virginia	8.1	%
Wisconsin	2.6	%
Wyoming	1.7	%

While physical therapist assistants continue to be educated at an associate's degree level, physical therapist education has seen significant transformations over the years. The entry-level degree has been standardized to a clinical doctorate since 2016 (American Physical Therapy Association, 2023) but many in this census graduated prior to that time. Historical data in the ELDD did not contain the entry-level degree information. The CAPTE Master List of Accredited Education Programs for the Physical Therapist (Commission on Accreditation in Physical Therapy Education, 2024b) contains dates of which degrees were offered at each program. By utilizing ELDD data (school and graduation year) combined with the CAPTE Master List, many gaps in the data can be filled.

Table 22: Entry-Level Physical Therapist Degree



More than 60% of the physical therapists with licenses are trained at the clinical doctorate level. This does not include those who pursued further education after initial licensure such as the Transitional Doctor of Physical Therapy degree.

## Discussion

#### **Data Quality**

The lack of contribution to the ELDD by some jurisdictions, especially those with large numbers of physical therapists and physical therapist assistants, is a limitation of this study. As the quality of the data in the ELDD continues to improve through active jurisdiction participation, so will the quality of the data

in the physical therapy census. In recent years, several jurisdictions began actively sharing licensure data daily through an application programming interface (API). By the end of 2023, ten jurisdictions share licensure information at least daily through the API. The API has the potential for near real-time capture of census information and would improve the accuracy of the ELDD information in a more secure, more efficient method.

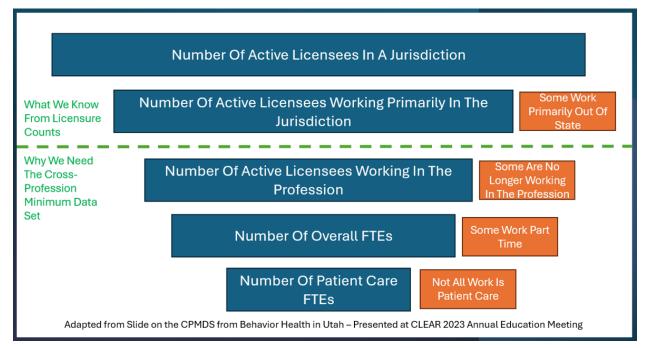
#### The Need for a Cross-Profession Minimum Data Set

Regulatory boards are in a unique position to collect workforce information at the time of initial licensure and renewal. A Cross-Profession Minimum Data Set (CPMDS) is needed to ensure consistency, where appropriate, in health workforce data. Inconsistencies in data collection strategies (questions and response options) for data elements such as demographics threaten cross profession comparison analysis. In 2022, seven national organizations came together to review existing survey tools and prepare the CPMDS to serve as a resource to the federal and state governments, organizations, and researchers seeking to collect health workforce data. Broad adoption of the CPMDS will streamline current and support future initiatives by ensuring comparability across health professions data. Consistent workforce data across health professions is needed to inform policy and planning (Maxey and Medlock, 2023).

The CPMDS is a set of core questions for collecting data elements widely considered the "minimum necessary" for health workforce planning. The intent of the CPMDS is to serve as a framework for standardizing data collection across various health professions for the purpose of supporting within and between profession comparisons and analyses. As a framework, the CPMDS questions have been designed with varying levels of standardization. For example, the CPMDS provides standardized questions and response options for data elements that are consistent across the professions (e.g., demographics) but includes flexible questions and response options for data elements requiring customizations (e.g., specialty and practice setting). The CPMDS provides a framework upon which individual profession-specific tools can be developed (Maxey and Medlock, 2023).

While this census information gives insight to the number of individuals with licenses across the United States, it does not consider other important workforce information, such as the number of physical therapists who have a license but live primarily out of state, or the number of hours spent in direct patient care. The CPMDS will provide much stronger workforce information and should be implemented by each jurisdiction.

Table 23: What We Know from Licensure Counts & Why We Need the CPMDS



#### Alternative Authorizations to Practice

In addition to the Physical Therapy Compact discussed above, Universal Recognition Laws and Telehealth Registries may also allow qualified individuals authorization to practice without a traditional license. Of these alternative authorizations to practice, only the Physical Therapy Compact supports the ELDD. The Physical Therapy Compact enhances public protection by reporting directly to the ELDD, which has improved the number of jurisdictions actively participating in the ELDD and has improved the quality of the data. Universal recognition laws and telehealth registries do not report data to the ELDD and may, therefore, reduce the public protection efforts of the ELDD.

## Conclusion

The ELDD is one of the primary tools FSBPT uses to accomplish its mission of public protection.

Collecting a core set of data elements for physical therapists and physical therapist assistants allows census information to be standardized across the fifty-three jurisdictions. To maintain the most up-to-date physical therapist and physical therapist assistant information possible, FSBPT needs to receive data directly from jurisdiction licensing boards. Licensing boards are uniquely positioned to collect workforce data as every physical therapist and physical therapist assistant licensed to provide services in the jurisdiction must interact with the regulatory board. Reporting this licensing data to FSBPT's ELDD ensures national workforce data is in one place. As more jurisdictions participate in sharing data with the ELDD, the quality of the census data will improve.

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