



AUDIOLOGY SURVEY **2023**

Annual Salaries

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Executive Summary

The American Speech-Language-Hearing Association (ASHA) conducted a survey of audiologists in the fall of 2023. The survey was designed to provide information about salaries, working conditions, and service delivery, as well as to update and expand information gathered during previous *Audiology Surveys*.

The results are presented in a series of reports. This salary report is based on responses from audiologists in colleges and universities, hospitals, audiology franchises and retail chains, nonresidential health care facilities (including audiologists' and physicians' offices), and industry who received primarily an annual salary. Data on audiologists who received primarily an hourly wage or commission are in a separate report.

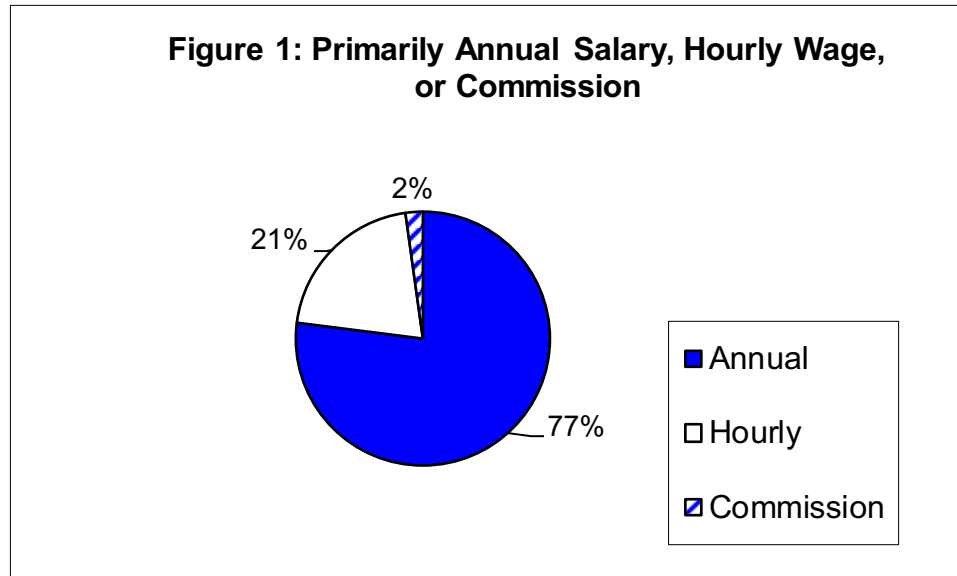
Highlights

- 77% of the audiologists received primarily an annual salary, and 94% of this group worked full time.
- The median full-time salary was \$91,113.
- The median part-time salary was \$61,616.
- Median full-time salaries were highest in hospitals: \$100,000.
- Median full-time salaries were highest for administrators, supervisors, directors, and owners: \$120,000.
- Median full-time salaries were highest for PhD holders: \$122,400.
- Median full-time salaries increased from \$75,500 with 1–3 years of experience to \$102,804 with 37 or more years.
- The highest median salaries were in California: \$119,000.
- Private practice owners earned a median annual salary of \$90,000.
- Median commissions were \$23,459 for audiologists who received an annual salary and \$15,421 for those who received an hourly wage.
- The median bonus was \$3,949.

Respondents

Salary Basis

The data in this report were gathered from 1,329 audiologists who responded to the *ASHA 2023 Audiology Survey*. Of the respondents who were employed full- or part time and who reported how they were paid, 77% received primarily an annual salary, 21% received primarily an hourly wage, and 2% received primarily a commission (see Figure 1 and Appendix Table 1).



Note. *n* = 1,308.

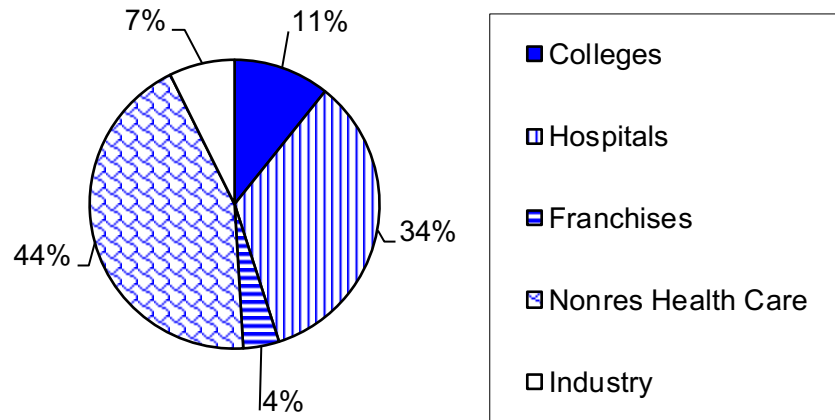
Primary Employment Facility

Of the respondents who received primarily an annual salary, 94% worked full time and 6% worked part time. In order to have sufficient respondents from each type of facility, those with small numbers of audiologists were oversampled. The result was that, of audiologists who received an annual salary and who worked full time, 44% were employed in nonresidential health care facilities, which includes audiologists' and physicians' offices. More than one third (34%) worked in hospitals. The remainder worked in colleges and universities (11%), industry (7%), and audiology franchises or retail chains (4%; see Figure 2). More than half of those who worked part time (*n* = 68) were employed in a nonresidential health care facility (57%).

A few audiologists worked in an *other* facility category that will not be presented separately. Individuals who selected this category will be included in the *All facility types* column in the appended tables.

The following analyses will be limited to those who worked full time unless noted otherwise.

Figure 2: Employment Facility, Full Time



Note. n = 931.

Revised
Question
Wording

We changed the wording of the salary questions in 2010. Prior to that year, we asked respondents to include bonuses and commissions in their basic salary. Beginning with the 2010 survey, however, bonuses and commissions were to be excluded, and those amounts were determined in separate questions. In addition, prior to 2014, we asked respondents whether they were paid on an hourly basis or an annual basis; in 2014, we changed the response options to *primarily per hour*, *primarily annual salary*, and *primarily commission*. These changes may account for some of the differences among median salaries across years that can be found in the trend reports.

Also, in this survey we did not include audiologists who work in schools because we have included educational audiologists in the *Schools Surveys* for several years. We decided that the questions on the *Schools Surveys* were a better match for educational audiologists than were the questions on the *Audiology Survey*, so educational audiologists are no longer included in the *Audiology Survey* sample.

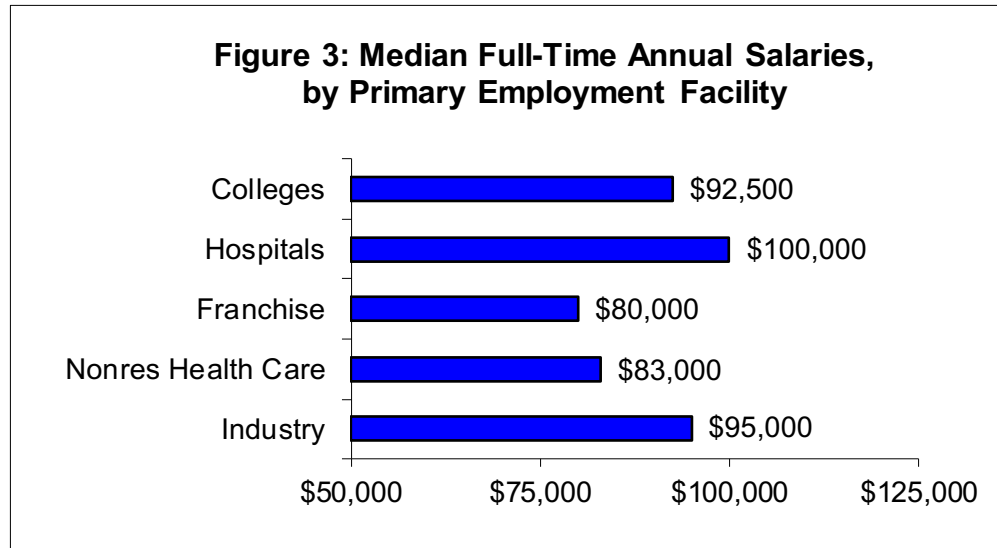
To protect anonymity and reduce variability, the minimum number of respondents required in a cell is 25. Also, some percentages may not total 100 because of rounding.

Annual Salaries

The median full-time salary was \$91,113 ($n = 889$), and the median part-time salary was \$61,616 ($n = 61$).

Primary Employment Facility

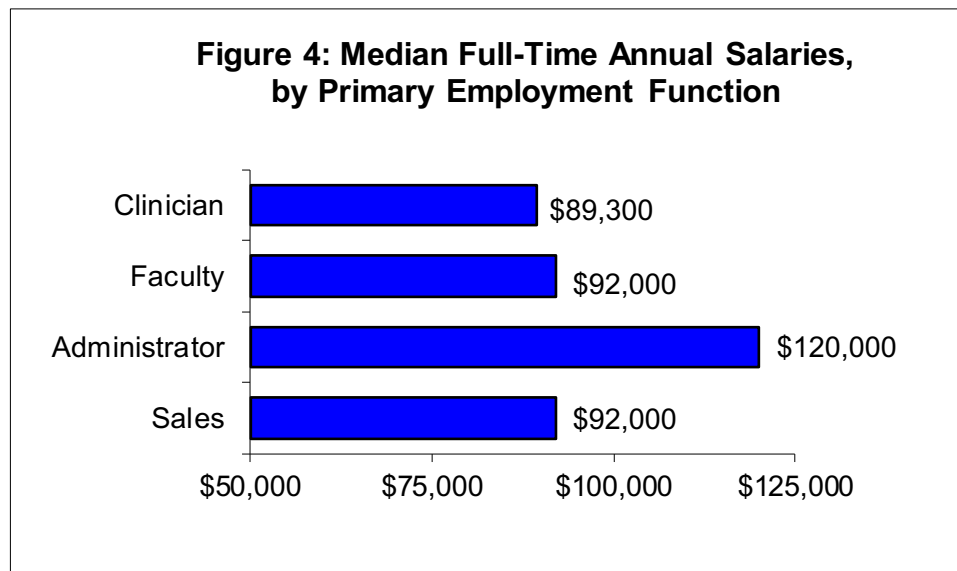
The median annual salary for audiologists who were employed full time ranged from \$80,000 in franchises and retail chains to \$100,000 in hospitals (see Figure 3 and Appendix Table 2).



Note. $n = 881$.

Primary Employment Function

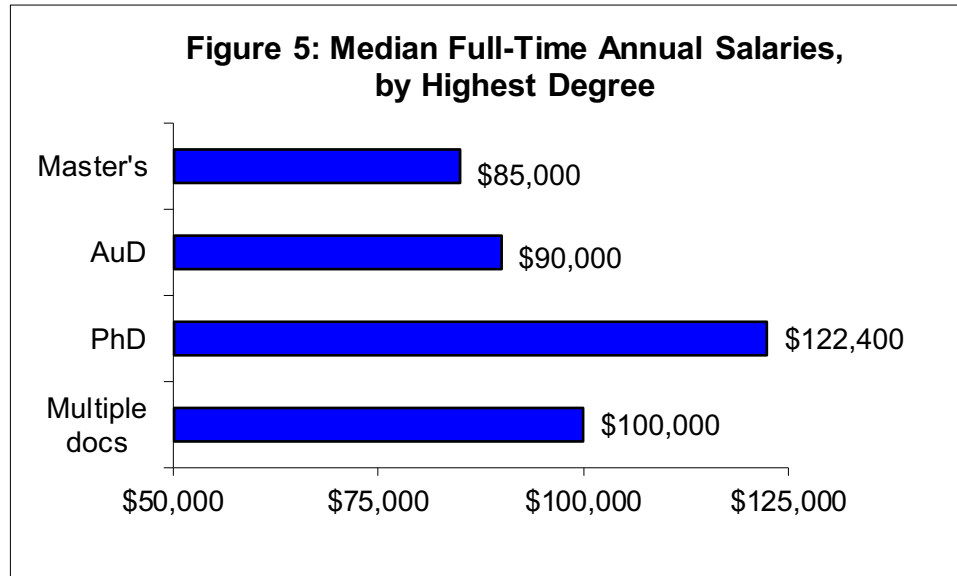
The overwhelming majority (79%) of respondents were employed as clinical service providers. (Data do not appear in any table.) Administrators, supervisors, directors, and owners reported the highest median full-time annual salaries (\$120,000; see Figure 4).



Note. $n = 856$.

Highest Degree

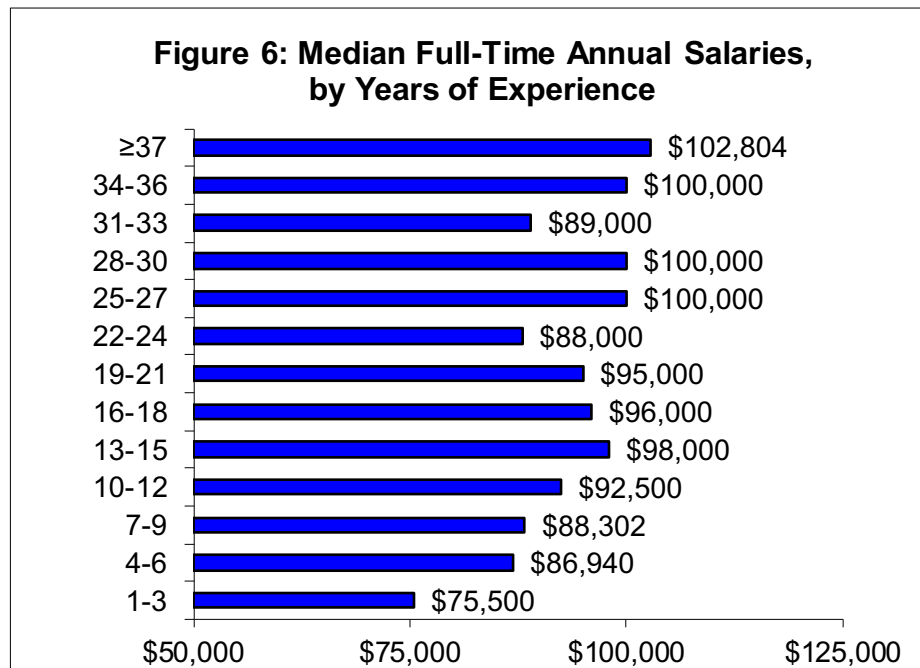
Of the audiologists employed full time, median annual salaries ranged from \$85,000 for those with a master’s degree to \$122,400 for those with a PhD as their only doctorate (see Figure 5).



Note. n = 883. Docs = doctorates.

Years of Experience

Median annual salaries for audiologists who were employed full time tended to increase with experience, although not in a straight line. For audiologists who had 1–3 years of experience, the median salary was \$75,500. With 37 or more years of experience, the median was \$102,804 (see Figure 6).



Note. n = 884.

State

Fewer than one third of the states (27%) met the threshold for the minimum number of audiologists reporting data to include their responses. Three states reported median salaries of at least \$100,000 (see Table 1). In addition, four states were on the cusp of being reported—with 24 respondents providing their full-time salaries.

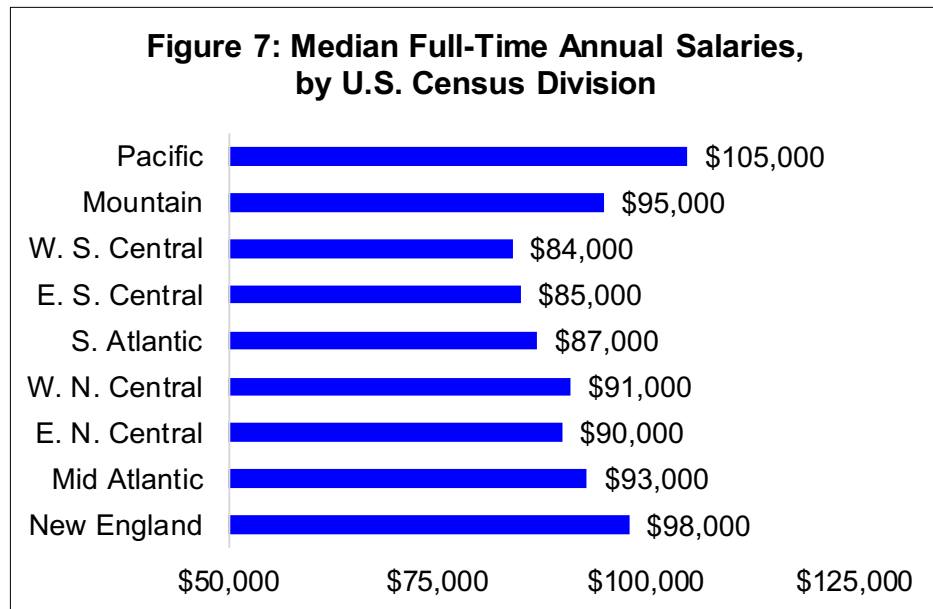
Table 1: Median Full-Time Annual Salaries, by State

California	\$119,000	Illinois	\$90,000
Massachusetts	\$105,000	Pennsylvania	\$88,000
Wisconsin	\$101,000	Texas	\$86,940
Ohio	\$98,000	Michigan	\$85,000
Tennessee	\$95,000	North Carolina	
Florida	\$92,000	Virginia	
Minnesota			
New York			

Note. n = 492.

Census Division

When the states were merged into the nine standard U.S. Census divisions, the highest median annual salaries were in the Pacific states and the lowest were in the West South Central states (see Figure 7). The listing of states in each division can be found in the Appendix.



Note. n = 887.

Population Setting

Audiologists reported annual salaries in a variety of locations.

Table 2: Median Annual Salaries, by Population Setting

Location	Full Time (n = 886)	Part Time (n = 57)
City/urban area	\$93,000	\$63,000
Suburban area	\$90,000	\$57,000
Rural area	\$90,000	n/r

Note. n/r = not reported because n < 25.

Private Practice

Among those who worked full time in a private practice, *owners* reported a median annual salary of \$90,000 (n = 102). Audiologists who were employed full time as salaried *employees* in a private practice reported a median salary of \$80,000 (n = 110). (Data do not appear in any table.)

Additional data on audiologists employed in private practice can be found in the *2023 ASHA Audiology Survey Private Practice* report.

Commission

Of the audiologists who were paid primarily on an *annual* basis (full time or part time), 188 indicated that during the previous 12 months, they had received a median commission of \$23,459. Of those audiologists who received a commission in addition to receiving primarily an *annual salary*, the median combined amount of their earnings was \$105,000 (n = 188).

The median commission was \$15,421 for respondents who received primarily an *hourly wage* for full- or part-time work (n = 50). Too few audiologists reported a commission to be included in this report (n = 22).

Bonus

A total of 411 audiologists who were employed full- or part time reported receiving bonuses during the previous 12 months. Regardless of whether they received an annual salary, hourly wage, or commission, the median amount of their bonus was \$3,949, and the mean was \$12,639. Three types of facilities had a sufficient number of respondents to report their means ($p = .006$):

- \$5,993 in hospitals ($n = 120$)
- \$13,664 in industry ($n = 36$)
- \$16,532 in nonresidential health care facilities ($n = 235$)

The median bonus amount was \$5,000, and the mean was \$14,530 for the 329 audiologists who were employed full- or part time and who received an *annual* salary. The median and mean were \$1,200 and \$3,467, respectively, for the 74 audiologists who received an *hourly* wage.

Facility was an indicator of the average (mean) bonus size among audiologists who were employed full- or part time and who received an *annual* salary ($p = .002$):

- \$6,757 in hospitals ($n = 99$)
- \$14,387 in industry ($n = 39$)
- \$19,909 in nonresidential health care facilities ($n = 153$)

Salary Upgrade

We included two additional financial questions on the survey. The first question asked the dollar amount of any salary supplement, stipend, or other type of salary upgrade that they had received during the past 12 months for either of two purposes.

Dollar Amount

Among the audiologists who were employed full time and who received an annual salary, 114 received a median upgrade of \$253 for holding the ASHA Certificate of Clinical Competence (CCC). Only 15 audiologists received a supplement for supervision, so their data cannot be reported.

Employer Reimbursement

We also asked who was responsible for paying a variety of expenses:

- S = *themselves*,
- E = *their employer*,
- C = *a combination*,
- NA = *not applicable*.

Table 3 provides responses from audiologists who were employed full time or part time and who received an annual salary. More than half of their employers paid for ASHA dues and state licensing fees (see Table 3).

Survey
Notes and
Methodol-
ogy

Payment Purpose	S	E	C	NA	n
ASHA dues	38	58	4	1	1,005
ASHA Convention	29	21	9	41	953
Professional development	30	49	18	4	984
Special Interest Groups (SIGs)	37	11	3	50	934
State licensing fees	38	58	3	2	1,002
Leave time to volunteer	31	17	4	48	935
Other, specify*	34	54	13	0	27

*See list of *other* responses in Appendix C of the *Summary Report*.

The *ASHA Audiology Survey* has been fielded in even-numbered years between 2004 and 2018 to gather information of interest to the profession. The 2020 version was postponed by 1 year because of the COVID-19 pandemic. Members, volunteer leaders, and staff rely on data from the survey to better understand the priorities and needs of audiologists.

The survey was fielded via postal mail in September, October, and November 2023 to a random sample of 5,000 ASHA-certified audiologists who were employed in the United States.

The sample was a random sample, stratified by both type of facility and private practice. Small groups, such as industry, were oversampled. Weighting was used when presenting data to reflect the actual distribution of audiologists in each type of facility.

Response Rate

Of the original 5,000 audiologists in the sample, 7 were retired, 49 were not currently employed in the profession, and 64 had undeliverable mail addresses. The actual number of respondents was 1,329, resulting in a 27.2% response rate. The results presented in this report are based on responses from those 1,329 individuals.

Survey Reports

Results from the ASHA 2023 Audiology Survey are presented in a series of reports:

- Survey Summary
- Annual Salaries
- Hourly Wages
- Clinical Focus Patterns
- Private Practice
- Survey Methodology, Respondent Demographics, and Glossary

Suggested Citation

American Speech-Language-Hearing Association. (2024). *ASHA 2023 Audiology Survey: Annual Salaries*. www.asha.org

Supplemental Resources

Salary data may also be available from other sources, such as state associations and state departments of labor. Suggested websites include the following:

Bureau of Labor Statistics, U.S. Department of Labor. (2023). *Healthcare-audiologists*. www.bls.gov/ooh/healthcare/audiologists.htm

Council of Academic Programs in Communication Sciences and Disorders. (2023). *CAPCSD 2023 salary survey*. www.capcsd.org/academic-and-clinical-resources/

Salary.com. (2023). *Audiologist salaries*. www.salary.com/research/salary/benchmark/audiologist-salary

For billing and reimbursement, please refer to the following: American Speech-Language-Hearing Association. (n.d). *Billing and reimbursement*. www.asha.org/practice/reimbursement

Additional Information

For additional information regarding the 2023 Audiology Survey, please contact ASHA's audiology practices unit at audiology@asha.org. To learn more about how the Association is working on behalf of ASHA-certified audiologists, visit ASHA's website at www.asha.org/aud/.

Thank You

ASHA would like to thank the audiologists who completed the ASHA 2023 Audiology Survey. Reports like this one are possible only because people like you participate.

Appendix:
State Listings and Data Tables

Regions of the Country

Northeast

- ◆ Middle Atlantic
 - New Jersey
 - New York
 - Pennsylvania
- ◆ New England
 - Connecticut
 - Maine
 - Massachusetts
 - New Hampshire
 - Rhode Island
 - Vermont

South

- ◆ East South Central
 - Alabama
 - Kentucky
 - Mississippi
 - Tennessee
- ◆ South Atlantic
 - Delaware
 - District of Columbia
 - Florida
 - Georgia
 - Maryland
 - North Carolina
 - South Carolina
 - Virginia
 - West Virginia
- ◆ West South Central
 - Arkansas
 - Louisiana
 - Oklahoma
 - Texas

Midwest

- ◆ East North Central
 - Illinois
 - Indiana
 - Michigan
 - Ohio
 - Wisconsin
- ◆ West North Central
 - Iowa
 - Kansas
 - Minnesota
 - Missouri
 - Nebraska
 - North Dakota
 - South Dakota

West

- ◆ Mountain
 - Arizona
 - Colorado
 - Idaho
 - Montana
 - Nevada
 - New Mexico
 - Utah
 - Wyoming
- ◆ Pacific
 - Alaska
 - California
 - Hawaii
 - Oregon
 - Washington

Appendix Table 1: Salary Basis

Income data are used to provide information to members, students, policymakers, and others with a vested interest in the topic. Your responses will be reported in aggregate form only

11. How are you paid in your main job? <i>Select only <u>one</u> response. (Percentages)</i> Analyses limited to respondents who met the following criteria: ❖ CCC-A ❖ Employed full time or part time						
Salary basis	Facility Type					
	All facility types (n = 1,308)	College/ university (n = 115)	Hospital (n = 425)	Franchise/ retail chain (n = 55)	Nonres. health care (n = 620)	Industry (n = 78)
Primarily per hour	20.8	7.0	20.2	21.8	25.0	7.7
Primarily annual salary (SKIP to Q. 14.)	77.0	92.2	79.5	70.9	71.6	89.7
Primarily commission (SKIP to Q. 15.)	2.2	0.9	0.2	7.3	3.4	2.6
	Too many cells (20%) have an expected count of less than 5. <u>Conclusion:</u> Too little data are available in some facility categories to test whether responses vary by facility type.					

Appendix Table 2: Full-Time Annual Salaries, by Facility

<p>14. What is your <u>base annual salary</u>, before deductions, for your main job? <i>Bonuses and commissions will be asked about in a separate question.</i></p> <p>Analyses limited to respondents who met the following criteria:</p> <ul style="list-style-type: none"> ❖ CCC-A ❖ Employed full time ❖ Paid primarily an annual salary ❖ Annual salary of at least \$1 						
Annual salary	Facility type					
	All facility types (n = 889)	College/ university (n = 94)	Hospital (n = 304)	Franchise/ retail chain (n = 37)	Nonres. health care (n = 382)	Industry (n = 64)
25th percentile	\$80,000	\$82,000	\$87,000	\$72,000	\$71,000	\$85,000
50th percentile (Median)	\$91,113	\$92,500	\$100,000	\$80,000	\$83,000	\$95,000
75th percentile	\$108,000	\$110,000	\$118,185	\$86,000	\$100,000	\$114,000
Mean	\$97,621	\$99,923	\$104,612	\$76,427	\$92,520	\$103,203
Standard deviation	\$34,595	\$28,855	\$26,889	\$18,330	\$40,761	\$32,192
Mode	\$80,000	\$80,000	\$120,000	\$80,000	\$80,000	\$93,000
		<p>Statistical significance: $F(4, 876) = 9.6, p = .000$ <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.</p>				