Annual Salaries

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Figure 2: Employment Facility .................................................................3
Figure 3: Median Full-Time Annual Salaries, by Primary Employment Facility ....4
Figure 4: Median Full-Time Annual Salaries, by Primary Employment Function ..4
Figure 5: Median Full-Time Annual Salaries, by Highest Degree .....................5
Figure 6: Median Full-Time Annual Salaries, by Years of Experience .................5

Tables
Table 1: Median Full-Time Annual Salaries, by State .....................................6
Table 2: Median Annual Salaries, by Population Setting .................................6
Table 3: Fees or Dues Paid by Employer (%) ..................................................8
The American Speech-Language-Hearing Association (ASHA) conducted a survey of audiologists in the fall of 2021. 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**

- 93% of the audiologists worked full time.
- The median full-time salary was $87,822.
- The median part-time salary was $62,000.
- Median full-time salaries were highest in industry: $99,000.
- Median full-time salaries were highest for administrators, supervisors, directors, and owners: $123,600.
- Median full-time salaries were highest for PhD holders: $114,000.
- Median full-time salaries increased from $72,800 with 1–3 years of experience to $100,000 with 34 or more years.
- The highest median salaries were in California: $111,000.
- Private practice owners earned a median annual salary of $90,000.
- Median commissions were $20,000 for audiologists who received an annual salary, $14,000 for those who received an hourly wage, and $50,000 for those who worked for commission.
- The median bonus was $2,500.
The data in this report were gathered from 1,487 audiologists who responded to the ASHA 2021 Audiology Survey. Of the 1,461 respondents who reported how they were paid, 76% received primarily an annual salary, 22% received primarily an hourly wage, and 3% received primarily a commission (see Figure 1 and Appendix Table 1).

![Figure 1: Primarily Annual Salary, Hourly Wage, or Commission](image)

**Note.** $n = 1,461$.

Of the respondents who received primarily an annual salary, 93% worked full time and 7% 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 worked full time, 41% were employed in nonresidential health care facilities, which includes audiologists’ and physicians’ offices. More than one third (39%) worked in hospitals. The remainder worked in colleges and universities (12%), industry (7%), and audiology franchises or retail chains (3%; see Figure 2). Nearly all who worked part time ($n = 68$) were employed in either a hospital (46%) or a nonresidential health care facility (44%).

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.
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.
The median full-time salary was $87,822 ($n = 913), and the median part-time salary was $62,000 ($n = 71).

The median annual salary for audiologists who were employed full time ranged from $68,000 in franchises and retail chains to $99,000 in industry (see Figure 3 and Appendix Table 2).

The overwhelming majority (80%) of respondents were employed as clinical service providers. (Data do not appear in any table.) Median full-time annual salaries ranged from $85,000 for clinical service providers to $123,600 for administrators, supervisors, directors, and owners (see Figure 4).
Of the audiologists employed full time, those with a master’s degree reported a median salary of $85,000; those with an AuD degree as the only doctorate, $86,000; and those with a PhD as the only doctorate, $114,000 (see Figure 5).

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 $72,800. With 34 or more years of experience, the median was $100,000 (see Figure 6).
Fewer than one third of the states (31%) met the threshold for the minimum number reporting data to include their responses. Of that group, the highest median annual salary for full-time employment was reported in California (see Table 1.) In addition, two 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

<table>
<thead>
<tr>
<th>State</th>
<th>Median Full-Time Annual Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>$111,000</td>
</tr>
<tr>
<td>New Jersey</td>
<td>$101,000</td>
</tr>
<tr>
<td>New York</td>
<td>$92,000</td>
</tr>
<tr>
<td>Washington</td>
<td>$90,000</td>
</tr>
<tr>
<td>Florida</td>
<td>$90,000</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>$88,956</td>
</tr>
<tr>
<td>Texas</td>
<td>$89,000</td>
</tr>
<tr>
<td>Tennessee</td>
<td>$88,000</td>
</tr>
<tr>
<td>Illinois</td>
<td>$88,000</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>$85,000</td>
</tr>
<tr>
<td>Ohio</td>
<td></td>
</tr>
<tr>
<td>Wisconsin</td>
<td>$85,000</td>
</tr>
<tr>
<td>Minnesota</td>
<td>$82,000</td>
</tr>
<tr>
<td>Virginia</td>
<td></td>
</tr>
<tr>
<td>Note. n = 596.</td>
<td></td>
</tr>
</tbody>
</table>

Audiologists reported annual salaries in a variety of locations.

Table 2: Median Annual Salaries, by Population Setting

<table>
<thead>
<tr>
<th>Population Setting</th>
<th>Full Time</th>
<th>Part Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>City/urban area</td>
<td>$89,000</td>
<td>$62,000</td>
</tr>
<tr>
<td>Suburban area</td>
<td>$85,000</td>
<td>$60,000</td>
</tr>
<tr>
<td>Rural area</td>
<td>$85,000</td>
<td>n &lt; 25</td>
</tr>
<tr>
<td>n</td>
<td>900</td>
<td>64</td>
</tr>
</tbody>
</table>

Private practice owners reported a median annual salary of $90,000 (n = 126). Audiologists who were employed full time as salaried employees in a private practice reported a median salary of $76,000 (n = 151). (Data do not appear in any table.)

Additional data on audiologists employed in private practice can be found in the 2021 ASHA Audiology Survey Private Practice report.
| Commission | Of the audiologists who were paid primarily on an annual basis (full time or part time), 157 indicated that during the previous 12 months, they had received a median commission of $20,000. Of those audiologists who received a commission in addition to receiving primarily an annual salary, the median combined amount of their earnings was $95,000 ($n = 143).

| Dollar Amount | The median commission was $14,000 for respondents who received primarily an hourly wage ($n = 49) and $50,000 for those who worked primarily for commission ($n = 29).

| Percentage | The median commission percentages that audiologists reported were 10% for those paid on either an annual ($n = 159) or hourly basis ($n = 54) and 25% for audiologists who worked primarily for commission ($n = 27). These results, too, are regardless of whether respondents were employed full- or part time.

| Bonus | A total of 428 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 $2,500, and the mean was $10,344. Three types of facilities had a sufficient number of respondents to report their means ($p = .048):

- $4,960 in hospitals ($n = 139)
- $11,567 in industry ($n = 39)
- $13,662 in nonresidential health care facilities ($n = 219)

| | The median bonus amount was $3,200, and the mean was $11,567 for the 337 audiologists who were employed full- or part time and received an annual salary. The median and mean were $1,440 and $3,895, respectively, for the 82 audiologists who received an hourly wage.

| Facility | Facility was an indicator of the average (mean) bonus size among audiologists who were employed full- or part time and received an annual salary ($p = .038):

- $5,888 in hospitals ($n = 106)
- $11,945 in industry ($n = 49)
- $16,152 in nonresidential health care facilities ($n = 143)
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 they had received during the past 12 months for any of six purposes.

Among the audiologists who were employed full time and received an annual salary, 134 received a median upgrade of $250 for holding ASHA CCCs.

For the remaining five purposes, there were insufficient numbers of respondents who were employed full time and received an annual salary to provide data:
- Multilingual services ($n = 0$)
- Medicaid billing ($n = 1$)
- Supervision of assistants or aides ($n = 1$)
- Supervision of graduate students ($n = 9$)
- Supervision of hearing aid dealers ($n = 1$)

We also asked whether their employer had paid their fees or dues. Table 3 provides responses from audiologists who were employed full time or part time and received an annual salary. ASHA’s dues were paid in full for 64% of that group, but the number of respondents to the item was small ($n = 180$) compared to the number who responded to the other three parts of the question.

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>Part</th>
<th>Full</th>
<th>NA</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASHA dues</td>
<td>31</td>
<td>4</td>
<td>64</td>
<td>2</td>
<td>180</td>
</tr>
<tr>
<td>Audiology conference fees</td>
<td>23</td>
<td>25</td>
<td>47</td>
<td>6</td>
<td>1,043</td>
</tr>
<tr>
<td>Professional development fees</td>
<td>28</td>
<td>23</td>
<td>45</td>
<td>5</td>
<td>1,052</td>
</tr>
<tr>
<td>State licensing fees</td>
<td>34</td>
<td>3</td>
<td>60</td>
<td>3</td>
<td>1,072</td>
</tr>
</tbody>
</table>
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 October, November, and December, 2021 to a random sample of 5,000 ASHA-certified audiologists who were employed in the United States. Half of each group was assigned to a random sample to receive an additional response option on the primary employment function question, i.e., owner was added to the option of administrator/supervisor/director for half of the sample.

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.

Of the original 5,000 audiologists in the sample, 27 were retired, 90 were not currently employed in the profession, and 43 had undeliverable mail addresses. The actual number of respondents was 1,487, resulting in a 30.7% response rate. The results presented in this report are based on responses from those 1,487 individuals.

Results from the ASHA 2021 Audiology Survey are presented in a series of reports:
- Survey Summary
- Annual Salaries
- Hourly and Per Home-Visit Wages
- Clinical Focus Patterns
- Private Practice
- Survey Methodology, Respondent Demographics, and Glossary

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


For billing and reimbursement, please refer to the following:


For additional information regarding the 2021 Audiology Survey, please contact ASHA’s audiology practices unit at [audiology@asha.org](mailto: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/](http://www.asha.org/aud/).

ASHA would like to thank the audiologists who completed the ASHA 2021 Audiology Survey. Reports like this one are possible only because people like you participate.

**Is this information valuable to you?** If so, please accept invitations to participate in other ASHA-sponsored surveys and focus groups. You are the experts, and we rely on you to provide data to share with your fellow members. ASHA surveys benefit you.
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
### 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.*

12. **How are you paid in your main job? Select only one response. (Percentages)**

Analyses limited to respondents who met the following criteria:
- CCC-A
- Employed full time or part time

<table>
<thead>
<tr>
<th>Salary basis</th>
<th>All facility types (n = 1,461)</th>
<th>College/university (n = 129)</th>
<th>Hospital (n = 497)</th>
<th>Franchise/retail chain (n = 52)</th>
<th>Nonres. health care (n = 675)</th>
<th>Industry (n = 70)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primarily per hour</td>
<td>21.6</td>
<td>5.4</td>
<td>20.1</td>
<td>25.0</td>
<td>27.3</td>
<td>10.0</td>
</tr>
<tr>
<td>Primarily annual salary (SKIP to Q. 15.)</td>
<td>75.8</td>
<td>93.8</td>
<td>79.9</td>
<td>67.3</td>
<td>68.0</td>
<td>88.6</td>
</tr>
<tr>
<td>Primarily commission (SKIP to Q. 16.)</td>
<td>2.6</td>
<td>0.8</td>
<td>0.0</td>
<td>7.7</td>
<td>4.7</td>
<td>1.4</td>
</tr>
</tbody>
</table>

Too many cells (20%) have an expected count of less than 5. **Conclusion:** Too little data are available in some facility categories to test whether responses vary by facility type.
Table 2: Full-Time Annual Salaries, by Facility

15. What is your base annual salary, before deductions, for your main job? *Bonuses and commissions will be asked about in a separate question.*

Analyses limited to respondents who met the following criteria:

- CCC-A
- Employed full time
- Paid primarily an annual salary
- Annual salary of at least $1

<table>
<thead>
<tr>
<th>Annual salary</th>
<th>Facility type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All facility types</td>
</tr>
<tr>
<td></td>
<td>(n = 913)</td>
</tr>
<tr>
<td></td>
<td>College/university</td>
</tr>
<tr>
<td></td>
<td>(n = 102)</td>
</tr>
<tr>
<td></td>
<td>Hospital</td>
</tr>
<tr>
<td></td>
<td>(n = 342)</td>
</tr>
<tr>
<td></td>
<td>Franchise/retail chain</td>
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<tr>
<td></td>
<td>(n = 26)</td>
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<tr>
<td></td>
<td>Nonres. health care</td>
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<tr>
<td></td>
<td>(n = 359)</td>
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<tr>
<td></td>
<td>Industry</td>
</tr>
<tr>
<td></td>
<td>(n = 57)</td>
</tr>
<tr>
<td>25th percentile</td>
<td>$75,000</td>
</tr>
<tr>
<td>50th percentile</td>
<td>$87,822</td>
</tr>
<tr>
<td>(Median)</td>
<td>$87,968</td>
</tr>
<tr>
<td>75th percentile</td>
<td>$101,734</td>
</tr>
<tr>
<td>Mean</td>
<td>$93,350</td>
</tr>
<tr>
<td>Standard deviation</td>
<td>$31,887</td>
</tr>
<tr>
<td>Mode</td>
<td>$85,000</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Facility type</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>College/university</td>
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<tr>
<td></td>
<td>Hospital</td>
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<tr>
<td></td>
<td>Franchise/retail</td>
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Statistical significance: $F(4, 881) = 10.4, p = .000$

Conclusion: There is adequate evidence from the data to say that the means vary by facility type.