Examining AT Salaries in THE PHYSICIAN PRACTICE SETTING

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In the spring of 2016, the NATA Physician Practice Work Group worked with NATA to conduct a salary survey for athletic trainers working in the physician practice setting. In addition to the information gleaned from NATA's biennual salary survey that addresses all job settings, this survey was designed to capture additional data specific to this practice setting, including how salaries are affected by the clinical skills performed.

STATISTICAL ANALYSIS

Continuous variables are presented as means \pm standard deviation; categorical variables are presented as numbers included (n) or percentage of the total respondents. The total number of specialized skills that respondents indicated they currently perform in a physician clinic was calculated. We then used independent T-tests at several thresholds to determine the effect of number of specialized skills on annual salary.

Specifically, we compared the reported annual salary of those who reported one or more, three or more, five or more, seven or more and nine or more specialized skills with those who reported not performing the set threshold of specialized skills. Statistical significance was set a-priori at $\alpha < .05$ and all statistical analyses were performed with Statistical Package for the Social Sciences (version 23, IBM Inc., Armonk, NY).

PHYSICIAN PRACTICE SALARY SURVEY RESULTS

A total of 8,008 questionnaires were sent to NATA members, and 922 individuals

completed the survey, for a response rate of 11.5 percent. Of the 922 respondents, 537 indicated they worked in a physician clinic 50 percent of the time or more. Those 537 responses make up the official results summarized on the next page. The majority of respondents were women between ages 30 and 49 who had completed a master's degree.

Salary by Skills Performed

The survey examined how daily roles and skills performed by an AT in physician practice were related to salaries. The questionnaire identified 11 skills as "specialized," which was defined as a skill requiring additional education and/or instruction beyond a foundational athletic training degree. Those specialized skills included reading radiographs, presenting to a physician/ fellow, application of splints and casts, preparing patient for in-office procedures, preoperative education, operating room setup, surgical assist, postoperative patient care, clinic note dictation, understanding comorbidities and interactions with insurance/ peer-to-peer reviews.

The most commonly performed specialized skills were presenting to a physician/ fellow, applying/removing casts and preparing patients for in-office procedures. Patient education, obtaining patient history and completing patient phone calls were the most commonly performed non-specialized skills. Those respondents who performed seven or more specialized skills reported earning significantly higher annual salaries than those who did not.

Salary by Years of Experience

The survey assessed salaries by both years of experience in the athletic training profession and years of experience as an athletic trainer in the physician practice setting. Results showed that years of experi-ence in the specific job setting had a greater impact on salary than overall years of experience as an athletic trainer. For example, respondents with three to five years of experience in the physician practice setting had the same average salary as those who had been certified for six to 10 years.

As expected, salaries increased relative to years of experience as a certified athletic trai-ner. ATs with less than five years of experience as a certified AT had the lowest salaries, and there was a significant gap between ATs with 11 to 15 years of experience compared to those who had more than 25 years of experience.

When analyzing years of experience as an athletic trainer in the physician practice setting, salaries once again increased relative to years of experience. The increase was more significant within the practice setting, with significant salary differences recorded between those with three to five years of experience and those with six to eight years of experience.

Salary by NATA District

While salaries varied slightly between the 10 NATA districts, the findings were not statistically significant for this analysis. \$



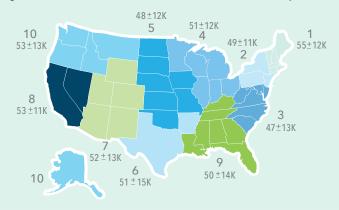
What is the skillset of the athletic trainer?





Salary based on NATA district

Salaries across the can be based on cost of living but there was not a significant difference based on the district from which the AT reported.



Operating at the top of scope

Those who responded that they typically perform seven or more and nine or more specialized skills earn significantly higher salaries than those who did not.

Roles performed by ATs

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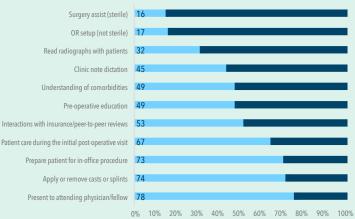
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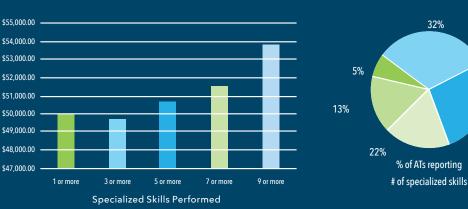
These are the duties that ATs reported that they perform in the physician practice. This list are the duties that an entry-level AT can perform in the physician practice and the percentage of AT who perform that duty.

Gait analysis	30									
	36		_							
nister computerized neurocognitive testing										
Gait training	39									
High school, college, or club sport outreach	44									
Community event coverage/education	44									
eview/develop/construct provider schedules	52									
duling follow-up tests/procedures after visit	55									
Scribing/electronic documentation	63									
Perform physical exam and special tests	63									
Patient emails	69									
Take vitals	69									
Room patients	78									
Order radiographs	78									
Crutch/cane fitting	79									
Durable medical equipment/bracing	82									
Utilize EMRs	84									
Home exercise program instruction	85									
Patient phone calls	85									
Obtain patient history	87									
Patient education	90									
09	6 10%	20%	30%	40%	50%	60%	70%	80%	90%	10

Specialized Skills

Specialized skills were defined as those which require higher level of training and skill than those gained during an entry-level athletic training degree.





28%