

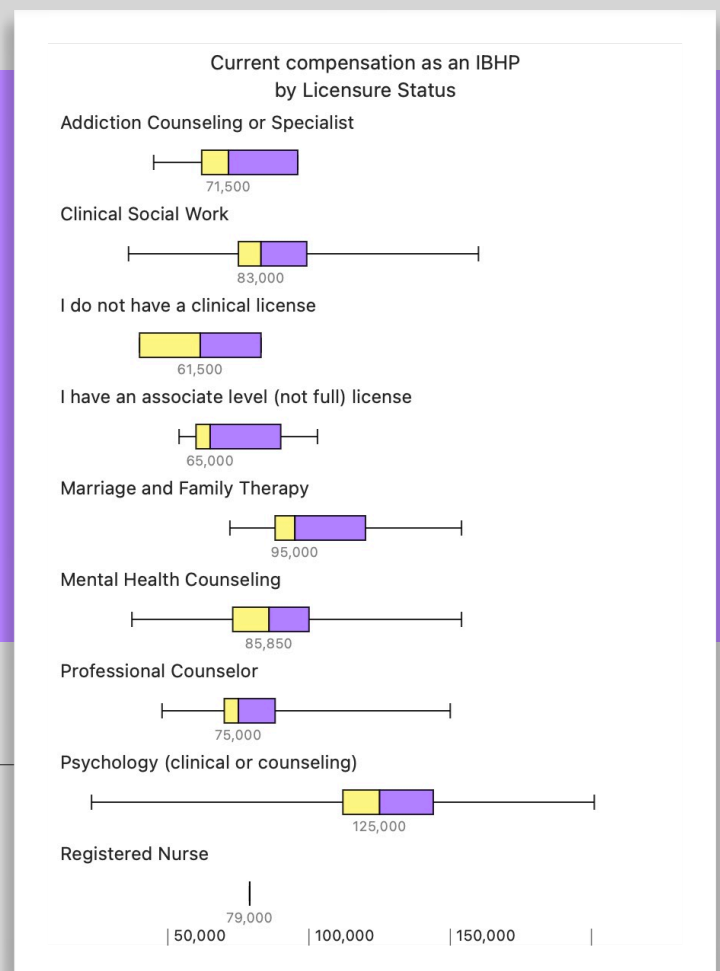
2024 Salary Survey Report for Integrated Care Behavioral Health Workers



Executive Summary

The 2024 salary survey for integrated care behavioral health professionals provides insights into compensation, demographic disparities, workload, quality of life, and billing issues. The results mimic findings from the 2022 survey sample with trends remaining directionally consistent. The behavioral health portion of the integrated care workforce appears to be in a favorable position compared to peers in non-integrated care positions in terms of compensation and qualitative feeling about their work. Actionable recommendations for employers, employees and the field-at-large provide pathways to rectify disparities and strengthen this portion of the healthcare workforce. This report was made possible by CFHA membership dues which strengthen the community of healthcare teams in integrated care.

244 Respondents
80% Female
83% White
41 YRS Mean Age
93% Urban
55% Master's Degree
13 YRS Employed In Current Position
6.6 YRS Employed In Integrated Care
87% Full-Time
36.9% At least 50% in CoCM
74.1% At least 50% in PCBH
29% In An FQHC
18.6% In An Academic Medical Center



Compensation Analysis

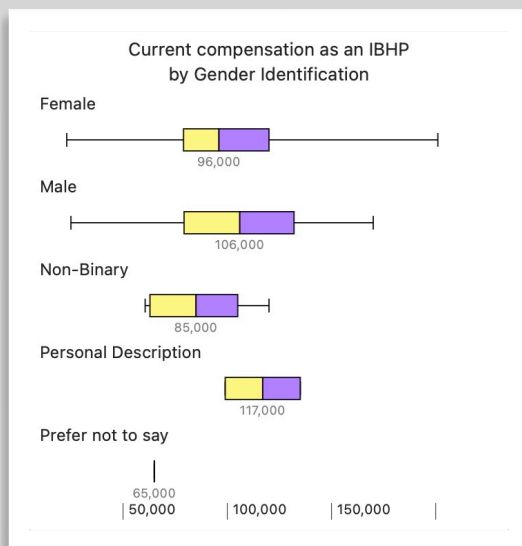
- Average annual compensation increased by about 9.5% to \$100,786 (median: \$96,000), higher than the 2022 figure of \$91,970 (median: \$89,000).
- Continuing Education (CE) funds remained stable at an average of \$2,017 from \$2,164 in 2022.
- Paid time off (PTO) remained stable, averaging 27 days.

Years of training and scarcity play a role in compensation. The more years of training (eg. Psychologist) and the fewer there are of a profession type (eg. MFTs), the higher the compensation.

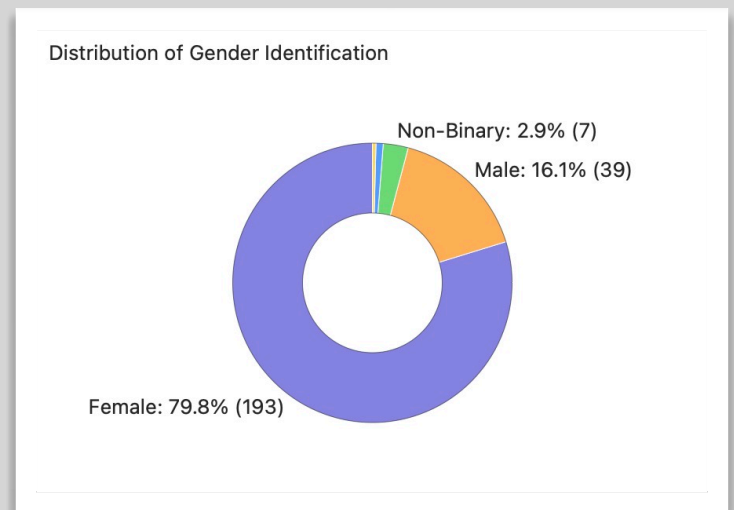
- 59% of respondents did not report any bonus payment; of those reporting a bonus payment the range was wide, from \$100 to \$31,000.
- Licensure: Psychologists reported the highest average salaries (\$125,306), while master-level clinicians earned 29% less (\$89,315).

Demographic Disparities:

- Gender: Women earned on average 4.4% less than men, consistent with the 2022 trend.
- Race: Minoritized groups reported an average of 8% lower compensation than their Caucasian American peers, similar to the 10% differential in the 2022 report.
- Urban areas offered 5% higher compensation (\$101,285 vs. \$96,583) than rural settings, similar to 2022 observations, although the overall sample of providers in rural areas surveyed was small (N=15).

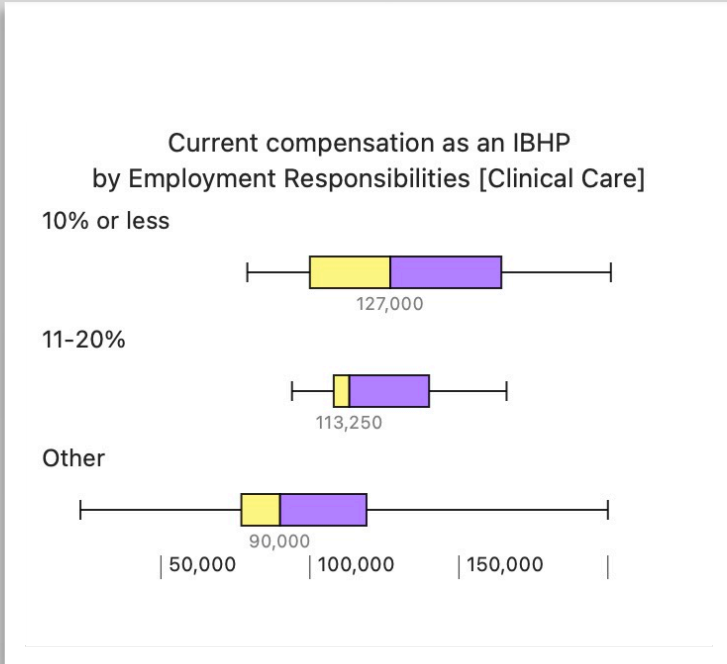


Males continue to show higher earnings than females, though the means are within statistical variation (not statistically significant).



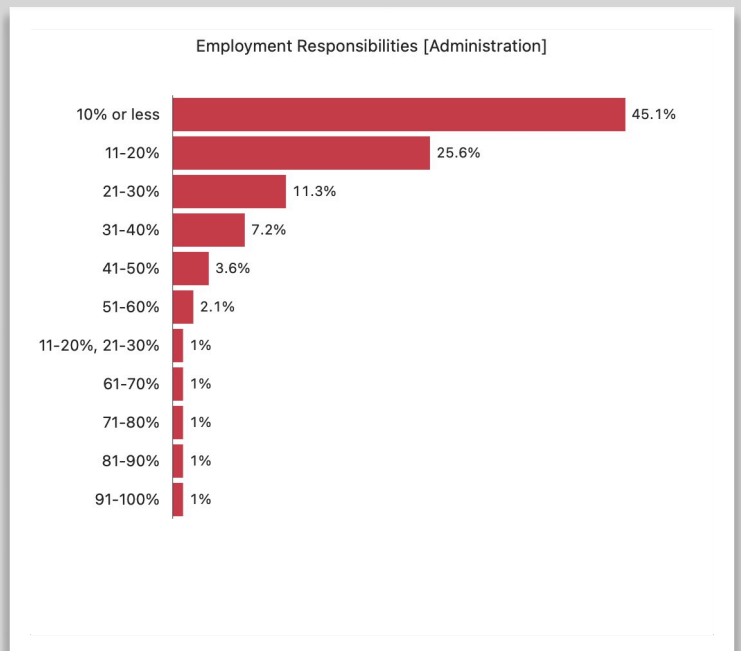
Females are over-represented in the field compared to the general population.

Workload and Billing Issues



Higher pay is correlated with lower clinical responsibilities. Those with 20% or less clinical work are generally paid more than those with higher clinical responsibilities ("Other" category).

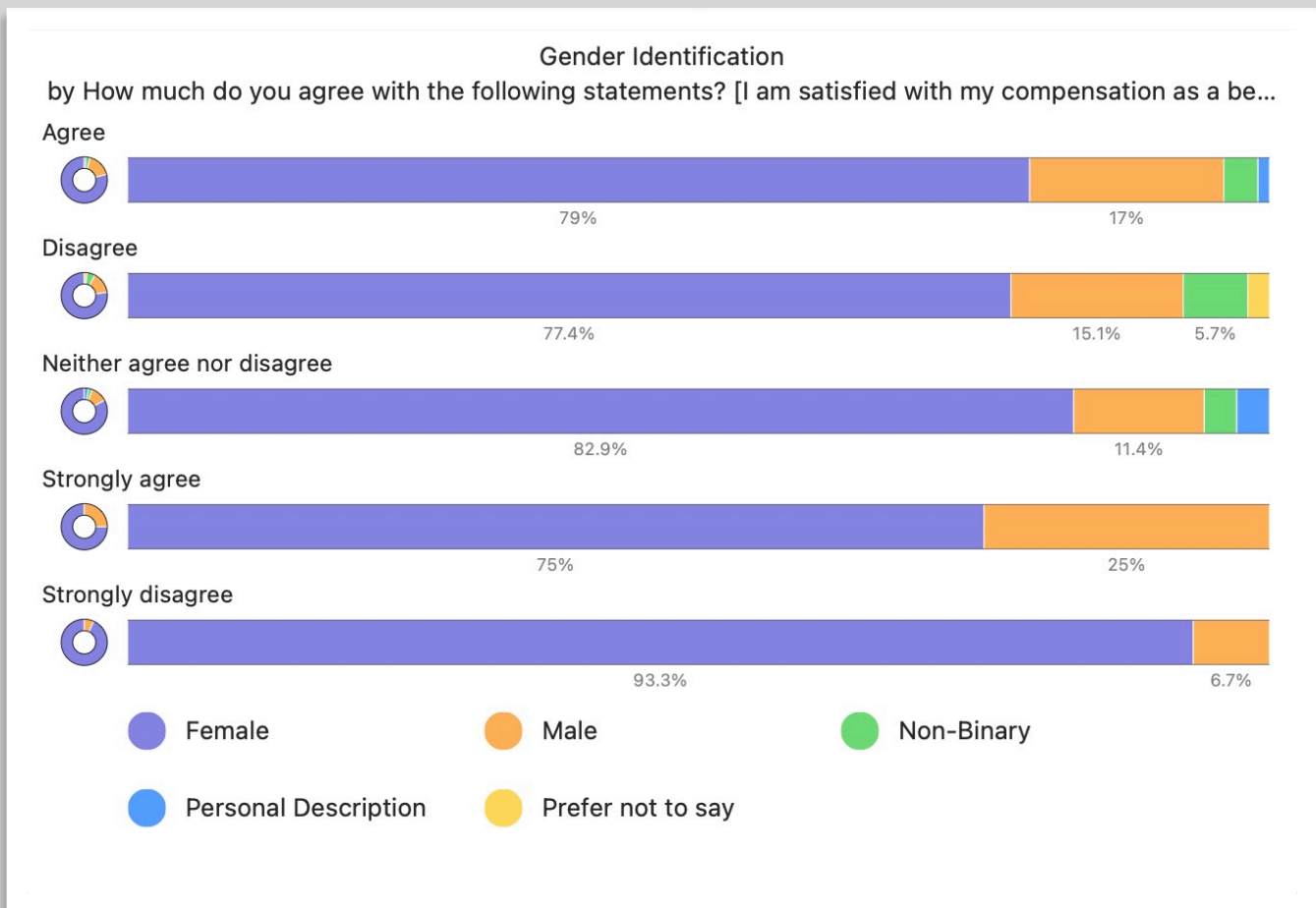
- The average patients seen per week for respondents with at least 81% clinical FTE was 28.2 patients per week.
- Billable hours expectations for respondents with at least 81% clinical FTE was 17.8 billable patients per week.
- Billing challenges continue to be an issue (rated as somewhat to extreme) for many clinicians with prominent issues including low reimbursement rates (49.5%), no reimbursement for trainees (33%), high uninsured population rate (29%), and inability to bill health and behavior codes (20.2%) or bill incident-to the primary care provider (24.5%).



Percent FTE devoted to administration, sorted.

Quality of Life and Wellness

- Job Satisfaction: 88.1% of respondents reported being "satisfied" or "very satisfied," a similar finding from 2022.
- Burnout Risk: 31.2% of respondents indicated feelings of depression at work at times.
- Life Satisfaction: 91.4% strongly agreed or agreed with being content overall.
- Compensation & Career Plans: 56.8% of respondents were satisfied with their compensation. 71.2% plan to stay at their current employment for at least the next two years, similar to the 2022 survey rate (66.8%).



Although the majority of respondents were satisfied with compensation, of those who were not satisfied, females were more likely than males to be dissatisfied.

Recommendations for Workforce Development

Employers:

- **Equitable Pay Structures:** Address gender and racial disparities through regular audits and transparent compensation strategies. C-Suite executives should regularly ask themselves to justify why pay gaps exist and where legal/ethical justification does not exist, rectify the gaps.
- **Streamline Billing:** Invest in training and technology to reduce billing complexities and improve efficiency. Communicate specific billing barriers to local and state payer systems regularly.
- **Marketing:** The satisfaction rate of integrated care behavioral health professionals is high - use this in your marketing efforts to attract new hires.
- **Pay Well:** Whereas [BLS data](#) shows that median annual pay for social workers is \$58,380, our data set showed average median wages at \$83,000 for LCSWs in integrated care settings.

Employees:

- **Advocate for Resources:** Engage with leadership to promote equitable pay using this data as a broad benchmark. Integrated care professionals appear to receive higher compensation than their peers.
- **Continuing Education:** Leverage CE funds to enhance qualifications, increasing earning potential and add value to your workplace and your CV. A clear pathway to having higher pay is to take on more non-clinical work (eg. Program development, administration) which can come with taking advantage of training opportunities and opportunities to demonstrate non-clinical skills.
- **Collaborate To Solve Billing Issues:** There appears to be a significant amount of money left on the table in the form of unreimbursed care. Collaborating to solve these issues can lead to a healthier organization and healthier compensation.
- **Wellness Practices:** Prioritize self-care and seek out organizations with robust wellness policies. Your colleagues appear to be less prone to burnout than the [general behavioral health field](#), so lean into the positives of team-based work to mitigate burnout factors.

Field At Large:

- **Representation Matters:** Efforts are needed to increase representation of males and ethnic/racial groups in behavioral health professions in order to more closely represent the interests of the population at-large.
- **Employers Need More Guidance:** It is likely a conundrum for employers to discern how to pay for the different license types represented in the behavioral health portion of the integrated care workforce. Guidance and education on the specific benefits each license type providers to integrated care teams would help create equitable standards.
- **Share The Benefits Of Teams:** If the wellness results are representative, the field of integrated care should be seen as a beacon of hope in an increasingly burdened healthcare landscape. It may be that high functioning, integrated care teams are an important part of the answer to the burnout crisis in the healthcare workforce. The field should study and share these benefits with peers.

Limitations

1. The data was self-report and respondents self-selected based on responses to requests from social media and email.
2. Some variables in the dataset had low overall sample sizes.
3. Comparison to the 2022 data set is limited by the non-longitudinal nature of the data (the same respondents are not tracked survey to survey).
4. Comparison to BLS data and other large data sets are affected by the above limitations that may distinguish this sample from those samples.

How To Read The Charts

Box plot:

- The yellow section represents the interquartile range (IQR), covering the middle 50% of the data (from the 25th percentile to the 75th percentile).
- The purple section extends beyond the yellow portion and represents the upper range of salaries (e.g., from the median to the upper quartile or beyond).
- The horizontal line inside the box represents the median salary for each category.
- The whiskers (lines extending from the boxes) show the range of compensation, excluding outliers.

Why Duplicate Categories Exist In Some Graphics:

- In some instances respondents were allowed to select more than one answer. This results in instances where there are repeated categories, such as a category showing 61-70% & 71-80% and another category shown listing 51-60% & 61-70%. This was permitted with certain items to ensure the most accurate representation of real-world working conditions, which are highly variable and not static.

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