



Department of Health Care
Access and Information

**HEALTH WORKFORCE
RESEARCH DATA CENTER
ANNUAL REPORT TO THE LEGISLATURE
JANUARY 2026**



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“A healthier California where all receive equitable, affordable, and quality health care”

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Introduction

California Health and Safety Code [Section 128050](#) established the Health Workforce Research Data Center at the Department of Health Care Access and Information (HCAI) as the state's central source of health care workforce and education data. HCAI is responsible for the collection, analysis, and distribution of information on the educational and employment trends for health care occupations and geographic distribution across the state. The statute requires HCAI to produce an annual report to the legislature that:

- a) Identifies education and employment trends in the health care professions.
- b) Reports the current supply and demand for health care workers in California and gaps in the educational pipeline producing workers in specific occupations and geographic areas.
- c) Recommends state policy to address issues of health workforce shortage and distribution.
- d) Describes outcomes and effectiveness of the state's health workforce programs.

With the establishment of the Research Data Center in 2021 (Assembly Bill 133, Committee on Budget, 2021), HCAI began the work to collect the data necessary to provide comprehensive, timely, and accessible workforce information to ensure that state policies are as informed and effective as possible.

While new data collection efforts are in progress, this report focuses on building the baseline for health professions data by summarizing the data collected and providing general information about the professions for which data are already available. As HCAI collects more data, reports will include more state policy recommendations and analyses of program outcomes and effectiveness. The [Looking Ahead](#) section of this report summarizes HCAI's ongoing data collection efforts and reporting plans.

There are more than a million licensed health professionals in California across more than 50 professions, each playing a role in delivering health care to Californians. While basic supply data are available for many of these professions in the form of license counts, supply data have lacked important detail necessary for a comprehensive understanding of the workforce (i.e., in-depth demographic details, detailed practice metrics, education information, etc.). HCAI's ongoing collaboration with the Department of Consumer Affairs (DCA) expanded the breadth and quality of licensure data and overhauled its supplemental workforce survey, which has provided high-quality, high-value data on topics like employment, education, demographics, and language fluency. This survey has greatly enriched and expanded upon HCAI's ability to analyze, evaluate, and model the workforce. These metrics have been incorporated into HCAI's most thorough workforce models on Behavioral Health and Nursing.

This report groups related licensed professions into six health workforce groups:

- **Allied Health:** Advanced Practice Pharmacists (APH), Audiologists (AU), Chiropractors (DC), Doctors of Podiatric Medicine (DPM), Hearing Aid Dispensers (HA), Hearing Aid Dispenser Trainees (HT), Licensed Acupuncturists (AC), Occupational Therapists (OT), Occupational Therapy Assistants (OTA), Optometrists (OPT), Pharmacy Technicians (PhT), Physical Therapists (PT), Physical Therapist Assistants (PTA), Polysomnographic Technicians (PTN), Polysomnographic Technologists (PTL), Registered Contact Lens Dispensers (CLD), Registered Pharmacists (RPH), Registered Spectacle Lens Dispensers (SLD), Respiratory Care Practitioners (RCP), Speech Pathologists (SP), and Speech-Language Pathology Assistants (SPA)
- **Behavioral Health:** Associate Clinical Social Workers (ACSW), Associate Marriage and Family Therapists (AMFT), Associate Professional Clinical Counselors (APCC), Licensed Clinical Social Workers (LCSW), Licensed Educational Psychologists (LEP), Licensed Marriage and Family

Therapists (LMFT), Licensed Professional Clinical Counselors (LPCC), Psychiatric Mental Health Nurses (PMHN), Psychiatric Technicians (PST), Psychologists (PSY), and Registered Psychological Associates (RPA)

- **Medicine:** Naturopathic Doctors (ND), Osteopathic Physicians and Surgeons (DO), Physicians and Surgeons (MD), and Physician Assistants (PA)
- **Nursing:** Public Health Nurses (PHN), Registered Nurses (RN), and Vocational Nurses (LVN)
- **Advanced Practice Nursing:** Clinical Nurse Specialists (CNS), Licensed Midwives (LM), Nurse Anesthetists (NA), Nurse Midwives (NM), and Nurse Practitioners (NP)
- **Oral Health:** Dental Sedation Assistants (DSA), Dentists (DDS), Orthodontic Assistants (OA), Registered Dental Assistants (RDA), RDAs in Extended Functions (RDAEF), Registered Dental Hygienists (RDH), RDHs Alternative Practice (RDHAP), and RDHs Extended Function (RDHEF)

Professions in the Allied Health section were chosen from our surveyed license types to best match those assigned by the Health Resources and Services Administration's (HRSA) Bureau of Health Workforce (BHW)¹.

The key findings section of this report highlights select figures within each topic, while each workforce section contains all topics and figures for each profession group. Future reports will go into more detail about these professions and others as more data become available. In comparison to last year's report, we have added a section to showcase the supply and demand modeling work that HCAI completed on both the Behavioral Health workforce and Nursing workforce. We have also included additional details on the response rates for each survey metric as well as the total counts for each license type in the [Technical Appendix](#). Additionally, data on Sexual Orientation, Gender Identity, and Grand Total are included in this year's report. Furthermore, we have added a section for Certified Wellness Coaches, a new profession certified and administered by HCAI starting in January of 2024. Additional data will be included in future reports as the program expands.

Data Sources

The primary data source for this report is licensure data collected by the Department of Consumer Affairs (DCA) as part of the administrative licensing process. This licensure data enumerates every license within a given profession and is foundational to accurately describe California's health workforce. Licensure data collected include each license's status, issue date, licensee's public address of record, and date of birth. See the [Technical Appendix](#) for a full list of licenses covered in this report.

Since the establishment of the Research Data Center in 2021, HCAI has partnered with DCA to update the data it collects. Previously, HCAI received licensure and survey data for only a subset of licensing boards, and the workforce survey collected inconsistent data. In July 2022, HCAI began receiving more comprehensive licensure reports from every board and launched a modernized HCAI [Health Workforce License Renewal Survey](#) administered as part of the electronic licensure renewal process (typically every two years for most license types). This survey builds upon DCA's licensure data by adding demographic information about each licensee and provides details about their past, present, and future work plans. The new renewal survey collects a standard set of information across all licensees and maximizes response rates by requiring a response to every question (but provides a "decline to state" option for all items). Business and Professions Code [section 502](#) prescribes the minimum information

¹See HRSA's website for more information on how they defined Allied Health: <https://bhw.hrsa.gov/data-research/projecting-health-workforce-supply-demand/technical-documentation/allied-health-other>

to be collected in the modernized survey. As part of the ongoing HCAI and DCA collaboration, HCAI receives updates to both licensure and survey data on the third of every month.

Health Workforce Data

All licensure data presented in this report represent a snapshot of the active license population on September 3, 2025, collected by DCA. All survey data presented in this report for licensed professionals represent data received from the [HCAI Health Workforce License Renewal Survey](#) as of September 3, 2025. Response rates from the renewal survey vary by profession, so HCAI utilizes a cell-based weighting methodology to compensate for any disproportionate quantity of responses from a certain group. The [Technical Appendix](#) details the response rates and weighting methodology.

All Wellness Coach data presented in this report represent a snapshot of the certified population on December 29th, 2025, collected by HCAI.

California Population Data

This report incorporates data about California's population for the purposes of supply/demand analysis and demographic comparison. This report uses county population projections from the California Department of Finance ([P-2A](#)) for the year 2024. For demographic and social characteristics, this report utilizes population estimates from the 2023 U.S. Census Bureau's American Community Survey 5-year estimates for race and ethnicity ([DP-05](#)) and languages spoken ([DP-02](#)).

Health Workforce Modeling Data

HCAI developed models to measure and forecast the current and future supply and demand of the Behavioral Health and Nursing workforces. While other sections in this report (Allied Health, Medicine, and Oral Health) include future supply projections based on historical monthly counts of active licenses, these models utilize licensing data and care delivery trends broken down by role or role group to create supply projections by Full Time Equivalent (FTE). These FTEs are used in conjunction with actual reported average patient care hours and employment rates from each role or role group to estimate supply and demand at the individual provider level. In addition, these models consider the current and potential future demand for each role or role grouping. Behavioral Health demand is based on the calculated inpatient met/unmet demand and outpatient met/unmet demand for each role. The Nursing model uses capacity and utilization rates, in addition to provider-to-population ratios based on setting, to estimate demand.

For the purposes of supply modeling, Behavioral Health licenses were categorized into the following roles or role groups based on role similarity and scope of practice:

- **Associate Level Clinicians:** Associate Clinical Social Worker (ACSW), Associate Marriage and Family Therapist (AMFT), Associate Professional Clinical Counselor (APCC) and Registered Psychological Associate (RPA).
- **Non-Prescribing Licensed Clinicians:** Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), Licensed Professional Clinical Counselor (LPCC), and Psychologist (PSY).
- **Psychiatrists**

Nursing professions were categorized into the following role or role groups based on role similarity and scope of practice:

- **Nurse Anesthetist:** Nurse Anesthetist (NA).
- **Vocational Nurse:** Vocational Nurse (LVN).
- **Registered Nurse:** Registered Nurse (RN), Certified Nurse Specialist (CNS), Public Health Nurse (PHN), and Psychiatric Mental Health Nurse (PMHN).

Nurse Practitioners are essential to addressing access to primary care. Therefore, HCAI will be including them in a future model for the Primary Care Workforce.

See the [HCAI Modeling Methodology](#) for additional details.

Health Workforce Group Projection Models

For healthcare licenses in the Medicine, Allied Health, and Oral Health groups, we used 3.25 years of past data to build and check our projections. We tested several common forecasting approaches (Prophet, SARIMAX, and Exponential Smoothing) and compared how accurate they were using a single accuracy score (MASE). Exponential Smoothing performed best overall, so we used that method to create projections for all licenses in these groups. Using monthly license data, we produced projections looking two years ahead including 95% confidence intervals.

For Certified Wellness Coaches, we had less historical data to train the model on (22 months), so we followed a slightly different approach. We tested the same forecasting methods as for the licenses and again chose the one that showed the highest accuracy. In this case, SARIMAX performed best. Given the smaller training dataset, we limited the projections to six months only with an 80% confidence interval.

California Regions

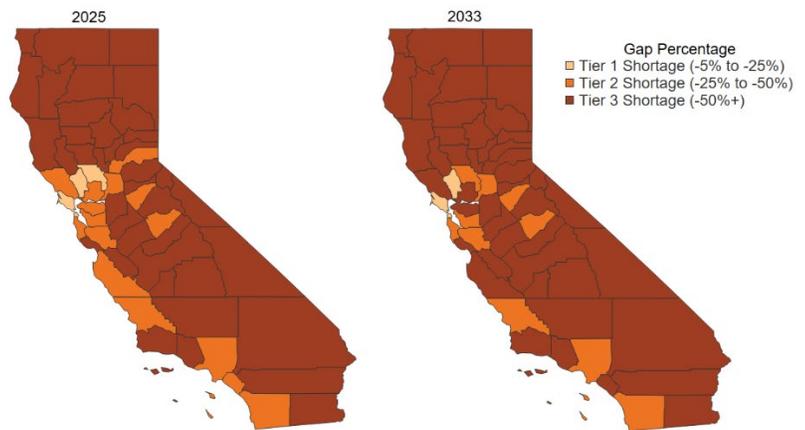
HCAI analyzes data at multiple geographic levels of detail. Statewide aggregated numbers cause loss of granularity with respect to geographic or demographic variation that exist within the state. To report similarly to research findings conducted by the Healthforce Center at the University of California, San Francisco and the California Health Interview Survey (CHIS) from the University of California, Los Angeles and to make reports comparable to other research reports produced by HCAI, this report includes both statewide results and results for nine regions. The [Technical Appendix](#) details the counties within each region.

Key Findings

Workforce Model Projections for Behavioral Health

- All nine California regions are facing a shortage of all behavioral health roles examined in this report.
- All regions and counties face a shortage of Non-Prescribing Licensed Clinicians, with two regions and 22 counties facing a shortage of -50% or more ([Figure A-1](#)). Statewide, this represents an estimated need for 55,297 additional providers to meet current demand ([Table A-1](#)).
- By 2033, it is projected that 45 counties and all nine regions will face a shortage of -25% or more of Non-Prescribing Licensed Clinicians ([Figure A-2](#)). The overall statewide shortage is projected to be -42.5%, representing a need for 72,889 providers to meet demand ([Table A-2](#)).
- All regions and 55 counties face a shortage of Associate Level Clinicians ([Figure A-3](#)). Statewide, there is a -30.6% shortage representing an estimated need for over 13,100 providers to meet current demand ([Table A-3](#)).
- By 2033, it is projected that 28 counties and three regions will face a shortage of -25% or more of Associate Level Clinicians ([Figure A-4](#)). The overall statewide shortage is projected to decrease to -17.7% ([Table A-4](#)).
- All regions and counties face a shortage of Psychiatrists with four regions and 39 counties facing a shortage of -50% or more ([Figure A-5](#)). Statewide, this is an estimated need for 3,782 additional providers to meet current demand ([Table A-5](#)).
- By 2033, it is projected that all regions and 55 counties will face a shortage of -25% or more of Psychiatrists ([Figure A-6](#), right). The overall statewide shortage is projected to increase to -53.1%, representing an estimated shortage of 6,216 providers ([Table A-6](#)).

Figure A-6: Psychiatrists: Supply & Demand Data – Projections

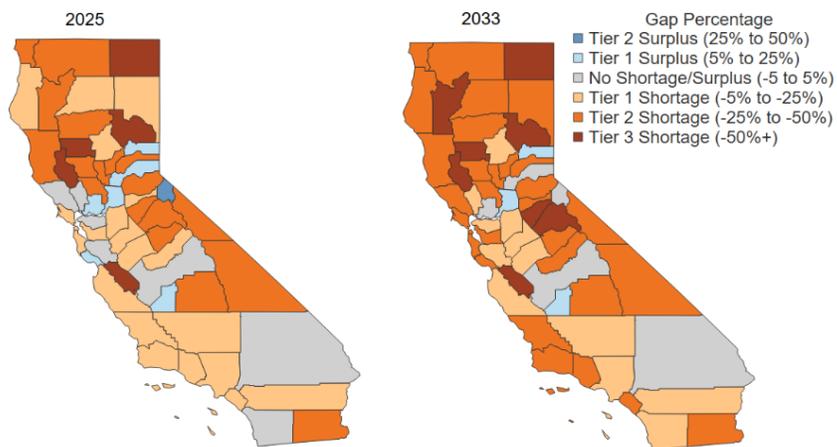


Workforce Model Projections for Nursing

- Six of the nine regions are facing a shortage of one or more Nursing role groups, with the highest shortages falling in the LA County, Central Coast, and Greater Bay Area regions.
- Overall, the statewide shortage of Registered Nurses is just over -6% with an estimated need for over 18,762 additional providers to meet current demand ([Table B-1](#)). The Northern & Sierra, Central Coast, Los Angeles County, San Joaquin Valley, and Orange County regions are all facing a shortage of -5% or more while the Sacramento Area Region has a surplus of over 10% ([Figure B-1](#)). This represents a worsening shortage since 2022, during which the state faced a shortage of -2% for Registered Nursing statewide.

Figure B-2: Registered Nurse: Supply & Demand – Projections

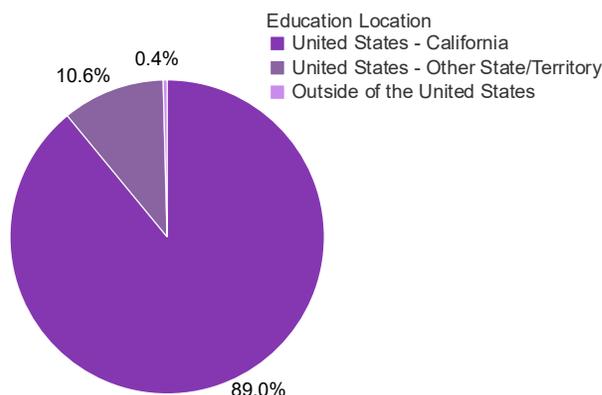
- By 2033, it is projected that 50 counties and eight of the nine regions will face a -5% shortage or more of Registered Nurses ([Figure B-2](#), right). The overall statewide shortage will increase to just under -17%, and an estimated need for 61,141 additional providers will be required to meet future demand ([Table B-2](#)).
- Statewide, there is a 6.5% surplus of Vocational Nurses ([Table B-3](#)). However, two regions and 20 counties are facing a shortage of Vocational Nurses, while five regions and 25 counties are facing a surplus ([Figure B-3](#)). These findings represent an overall increase in providers from 2022, which saw a surplus of 5.7% statewide. Despite this improvement, these findings still indicate a maldistribution of Vocational Nurses across the state.
- By 2033, it is projected that 20 counties and one region will face a -5% shortage or more of Vocational Nurses ([Figure B-4](#)). The overall statewide surplus will decrease to 4.9% ([Table B-4](#)).
- Statewide, there is a -20.5% shortage of Nurse Anesthetists ([Table B-5](#)), however though the central coast has a Tier 3 shortage of -51.1%, the Sacramento region has a Tier 1 surplus of 23.3% ([Figure B-5](#)). This indicates a maldistribution of Nurse Anesthetists across the state.
- By 2033, it is projected that 32 counties and six regions will face a -5% shortage or more of Nurse Anesthetists ([Figure B-6](#)). The current statewide surplus is projected to dramatically decrease to a shortage of -11.5% ([Table B-6](#)).



Health Workforce Education Trends

- Since 2024, Behavioral Health licensees in California were more likely than any other health workforce group to complete their initial qualifying degree in California. Within this group, 89% earned their initial degree in California, and 99.6% completed their initial education somewhere in the U.S. ([Figure D-1](#), right). In contrast, the Medicine group had the lowest proportion completing their initial degree in California, at 49.9% ([Figure E-1](#)).
- Nursing licensees had the highest proportion of initial qualifying degrees earned outside the U.S., at 11% ([Figure F-1](#)). This share has remained stable since 2024.
- Among license types requiring a residency, over 99% of Osteopathic Physician and Surgeons ([Figure E-2](#)) and Doctors of Podiatric Medicine ([Figure C-2](#)) reported completing their residency within the U.S., the highest rates across these groups. In addition, just over 60% of Osteopathic Physician and Surgeons and Physician and Surgeons indicated they completed their residency in

Figure D-1: Education Location: Behavioral Health



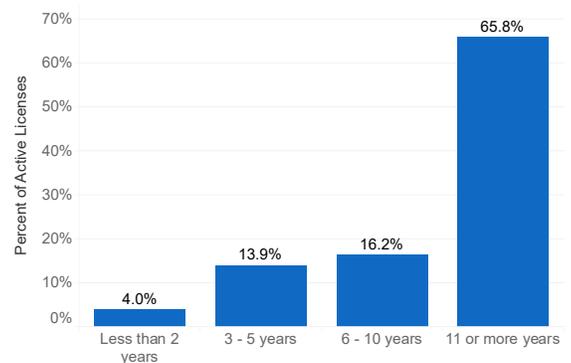
in

California. Dentists reported the highest rate of residency completion within California, at just under 70% ([Figure H-2](#)). These rates have remained stable since 2024.

Health Workforce Employment Trends

- On average, the Nursing ([Figure F-2](#)) and Allied Health ([Figure C-3](#)) groups reported the lowest rate of licensees actively working or seeking work at just below 93%. This appears to be driven by retired individuals for Nursing (3.7%) and licensees working in a different field for Allied Health (4.5%).
- While the Behavioral Health group did not have the lowest employment rate overall, it did have the two lowest rates among the individual license types included in this report; only 65% of Psychiatric Mental Health Nurses and 72.7% of Licensed Educational Psychologists report actively working or seeking work using their license ([Figure D-2](#)). These rates have remained stable since 2024.
- Licensees within the Medicine group reported spending the highest amounts of time per week on Patient Care with an average of 33.4 hours ([Figure E-4](#)), while Behavioral Health licensees reported spending the least at 22 hours per week ([Figure D-3](#)).
- Nearly five percent of Nursing licensees actively working or seeking work estimate retiring within the next two years, the highest rate in this span of time of any health workforce group ([Figure F-4](#)). This trend is driven primarily by Public Health Nurses (6.7%) and Registered Nurses (5.2%). The higher rate among Public Health Nurses may be partly attributable to age, as more than 25% are over 50 years old. However, the factors contributing to the speed of retirement estimates in Registered Nurses remains unclear.
- Medicine licensees estimate retiring in the next five years at a higher rate (17.9%) than any other health workforce group ([Figure E-5](#), right). This marks a shift from the previous year, when Oral Health licensees had the highest five-year retirement rate. The current trend is largely driven by Physicians and Surgeons, 20.4% of whom expect to retire within the next five years. In addition, Physicians and Surgeons have a relatively older workforce, with 30% over the age of 60, which may be contributing to these retirement estimates.
- HCAI designed two pathways to Wellness Coach certification: the Education Pathway, focused on competencies gained from specific degree programs, and the Workforce Pathway, focused on competencies gained from work experience (see HCAI's [Certified Wellness Coach homepage](#) for more information). Within Certified Wellness Coaches (CWCs), the Workforce Pathway is the primary certification route, used by over 80% of CWCs ([Figure I-1](#)).
- Nearly 50% of CWCs reported they were already working in behavioral health and applied to be a Wellness Coach to enhance their skills while 13% indicated they used the certification to enter the Behavioral Health workforce and 33% indicated their employer required them to get the certification ([Figure I-2](#)).

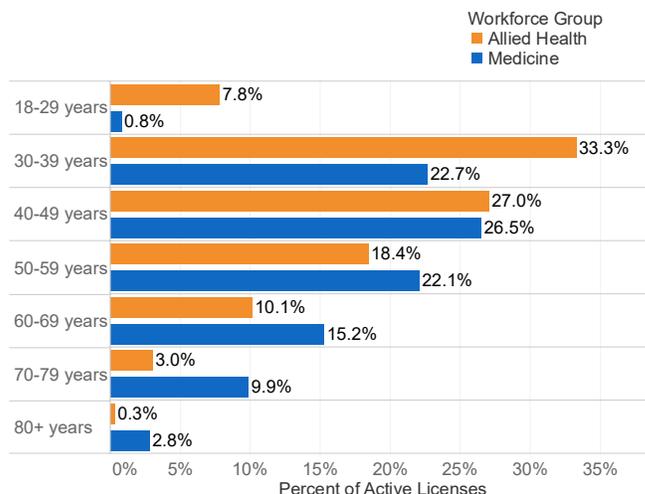
Figure E-5: Retirement Estimates: Medicine



Health Workforce Demographics

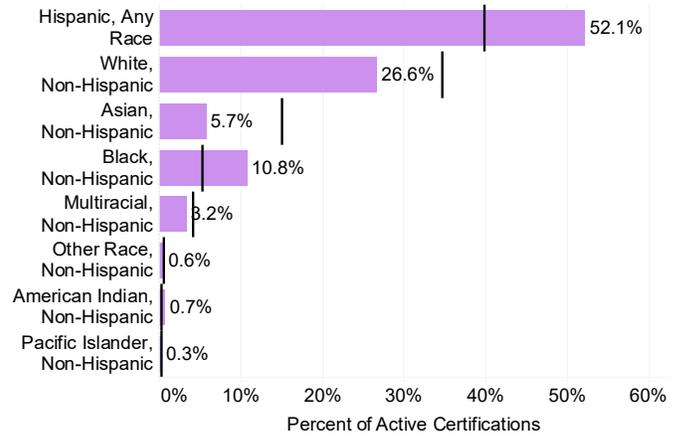
- Licensees within the Medicine group are among the oldest in the health workforce, with nearly 28% 60 years or older ([Figure E-6](#)). Conversely, Allied Health licensees are some of the youngest in the health workforce, with almost eight percent under the age of 30 ([Figure C-6](#)). These rates have remained stable since 2024 (see figure, right).
- Hispanic licensees are the most underrepresented in the health workforce when compared to California’s population. Since 2024, they have been underrepresented in all six health workforce groups and as of this year are underrepresented in 40 of the 49 license types included in this report. Oral Health has had the highest representation of Hispanic licensees, at 30.1% ([Figure H-7](#)) compared with 39.8% of the population, while Medicine has the lowest representation at only 9.8% of licensees ([Figure E-7](#)). These rates are similar to trends observed since 2024.
- Since 2024, Black, Non-Hispanic licensees have been underrepresented in three of the six health workforce groups when compared to California’s population (5.3%). Oral Health has the lowest representation with less than two percent of licensees identifying as Black, Non-Hispanic ([Figure H-7](#)), while Advanced Practice Nursing licenses are the most well-represented at 7.4% ([Figure G-6](#)).
- Spanish-speaking licensees are the most underrepresented language group in the health workforce when compared to California’s population (28.2%); they are underrepresented in all six health workforce groups and 38 of the 49 license types included in this report. Oral Health has the highest representation of Spanish speakers at 23.2% ([Figure H-8](#)), while Medicine ([Figure E-8](#)), Nursing ([Figure F-7](#)), and Advanced Practice Nursing ([Figure G-7](#)) all have similar rates at just over 15%.
- Asian and Pacific Islander language speakers are underrepresented in all 11 license types within the Behavioral Health group ([Table D-7](#)) and three of the four license types within the Medicine group license types ([Table E-8](#)) compared to California’s population (10%),.
- Other languages are well represented in all six health workforce groups compared to California’s population. Other Indo-European languages are well-represented in all health workforce groups with the exceptions of Behavioral Health and Nursing (see [Technical Appendix](#) for the breakdown of language groups).
- Certified Wellness Coaches (CWCs) tend to be younger than the other health workforce groups discussed in this report. Nearly just under 68% of all CWCs are between the ages of 30 and 59 and just over a quarter are under 30. This trend is more apparent when looking at the registered certificate holders, none of whom are over the age of 59 ([Figure I-4](#)).

Age Distribution of Allied Health and Medicine



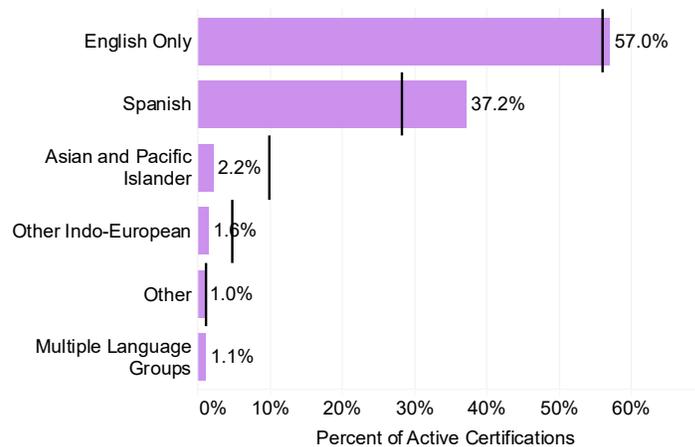
- Wellness Coaches have relatively high racial and ethnic diversity. More than half of all CWCs identify as Hispanic, Any Race and 10.8% identify as Black, Non-Hispanic; both higher proportions than any other health workforce group ([Figure I-5](#), right).

Figure I-5: Race/Ethnicity: Wellness Coaches



- Over one third of CWCs can provide services in Spanish, making them the only health workforce group to meet the population threshold for Spanish speakers ([Figure I-6](#), right).

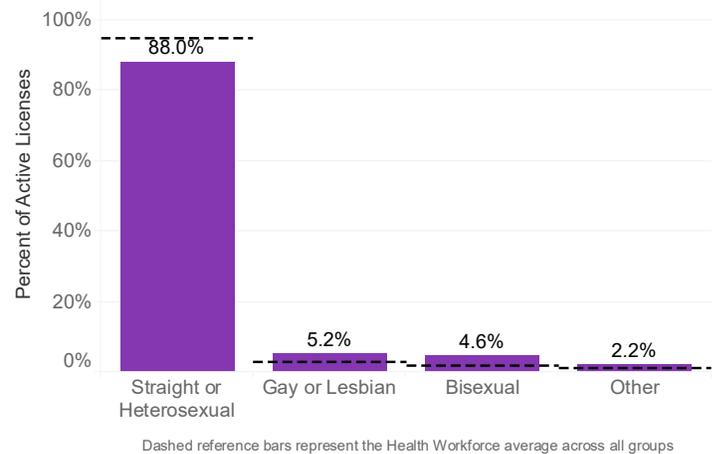
Figure I-6: Languages Spoken: Wellness Coaches



Health Workforce Sexual Orientation, Sex at Birth, Gender Identity, and Disability Status

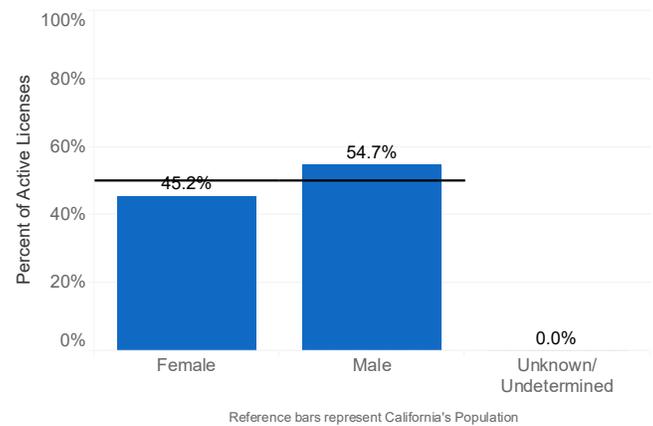
- Licensees within the Behavioral Health group reported the most diverse sexual orientations. While the majority identified as straight or heterosexual (88%), 5.2% identified as gay or lesbian and 4.6% identified as bisexual, the highest rates among any health workforce group ([Figure D-8](#), right). These rates have stayed consistent since 2024.
- The Behavioral Health group also reported the highest rates of licensees identifying as transgender at 0.4%, four times that of the other health workforce groups ([Figure D-10](#)). Additionally, the Behavioral Health group had the highest rates of individuals who did not identify as male, female, or transgender at 0.5%.

Figure D-8: Sexual Orientation: Behavioral Health



- Since 2024, Medicine has been the only health workforce group in which most licensees indicated male as their sex assigned at birth (55.2%; [Figure E-10](#)). This is primarily driven by Osteopathic Physicians and Surgeons (53.9%) and Physicians and Surgeons (58.2%).
- The Advanced Practice Nursing group reported the highest rates of licensees identifying as Female (85.5%; [Figure G-9](#)) with the Nursing group coming in at a close second (84.3%; [Figure F-9](#)). Responses are similarly distributed among the license types within the Nursing group but vary more widely for Advanced Practice Nursing license types, a trend that has been in place since 2024.
- Within Behavioral Health licensees, 8.1% identify as having a disability, the largest percentage of licensees in any health workforce group [Figure D-11](#)). Medicine had the lowest with only 1.5% of licensees ([Figure E-12](#), right).
- Certified Wellness Coaches (CWCs) had similar rates of sexual orientation as the Behavioral Health group; a majority (88.9%) identified as straight or heterosexual, 5.9% identified as bisexual ([Figure I-7](#)).
- Just under 7% of CWCs report having a disability ([Figure I-10](#)).

Figure E-12: Disability Status: Medicine

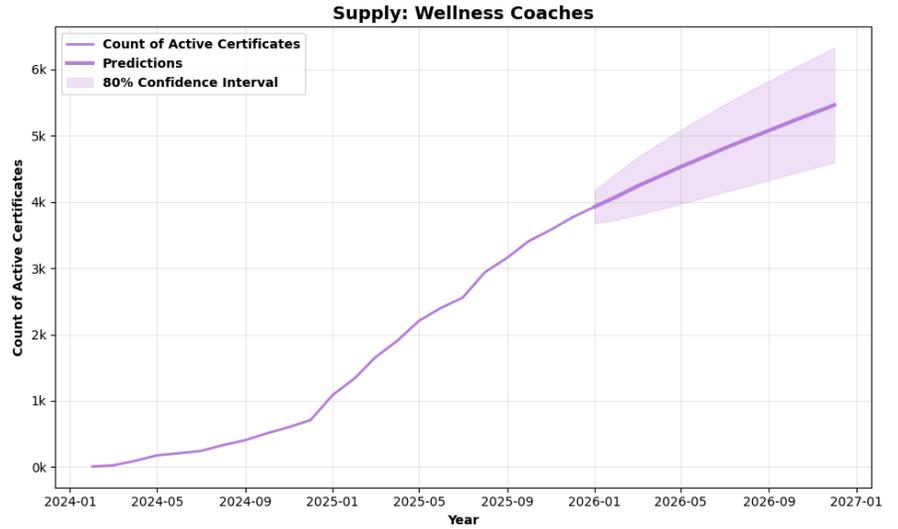


Health Workforce Statewide Workforce Availability and Distribution

- For the last two years, the Greater Bay Area region has held the highest number of active Medicine ([Figure E-13](#)) and Oral Health ([Figure H-13](#)) licensees while the Los Angeles region continues to have the highest number of all other health workforce groups.
- The Nursing group is the largest health workforce group with 607,591 active licenses at the time of this report ([Figure F-12](#)), representing a 5.5% increase in license volume from last year. Registered Nurses make up most of this group (72.1%) and are the largest of any individual license type. Advanced Practice Nursing makes up the smallest health workforce group with only 43,771 active licenses statewide ([Figure G-12](#)), representing a 4.9% increase in volume from last year.
- The Nursing group issued the highest number of new active licenses per month, a trend which has been held since 2024. As a group, an average of 3,055 new active licenses were issued per month ([Figure F-13](#)). Within the Nursing workforce, Registered Nurses make up the largest portion of the licenses issued, with an average of 1,839 new active licenses per month.
- By region, the Sacramento Area has the largest over-supply of licensees across the health workforce, with a low to medium over-supply of most license types in Allied Health ([Figure C-15](#)), Medicine ([Figure E-15](#)), Nursing ([Figure F-14](#)), and Oral Health ([Figure H-15](#)). Conversely, the San Joaquin Valley region has the largest under-supply of licenses, with a low to medium under-supply of all six workforce groups. These trends have all held stable since 2024.
- Medicine is the most maldistributed health workforce group, with four regions experiencing a low to medium under-supply of licenses while four regions face a low to medium over-supply of licenses. Los Angeles is the only region with an even share of Medicine licenses relative to its population size ([Figure E-15](#)).

- The San Joaquin Valley region has the highest total number of Certified Wellness Coaches (CWCs) while the Orange County region has the least ([Figure I-11](#)).
- On average, there were 248 new CWC licenses issued per month from December 2024 to November 2025, which represents a 313% increase from 2024 ([Figure I-12](#)).
- Supply estimates indicate all projected groups (Allied Health, Medicine, and Oral Health) should experience an increase in active licensees by the end of 2027.
- Certified Wellness Coaches exceeded 2024 projections for active certifications by 226% and are expected to grow an additional 45% by the end of 2026 ([Figure I-13](#), right).

Figure I-13: Supply Projections: Wellness Coaches



HCAI Programs

Statewide Program Awards

HCAI programs work to increase workforce diversity and access to healthcare in underserved areas throughout California in order to address supply shortages and inequities. We achieve this by providing individuals with financial aid in the form of loan repayments, scholarships, and stipends, as well as overseeing organization-level grants to support training capacity/expansion, recruitment/retention, and/or training and placement.

Figures 1 and 2 illustrate the distribution of 1,235 HCAI awards to individuals and 92 awards to organizations across the state during the 2025 cycle year. Of the 58 counties, 51 (89.5%) contained at least one awardee.

Figure 1: 2025 Cycle Year Individual Program Awards by City

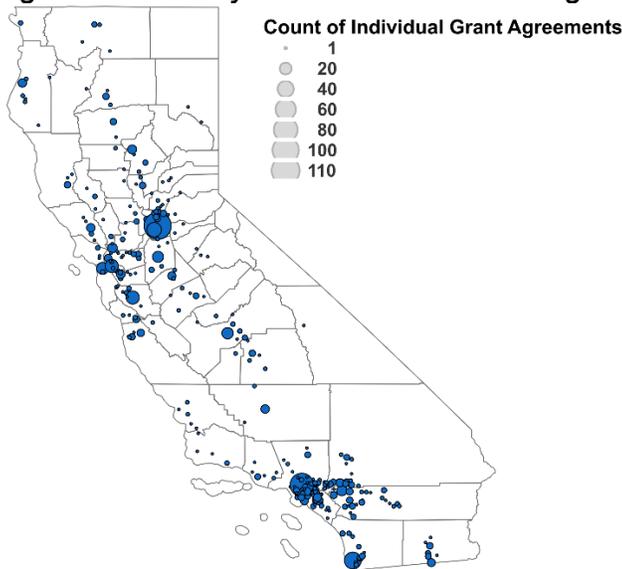


Figure 2: 2025 Cycle Year Organizational Program Awards by City

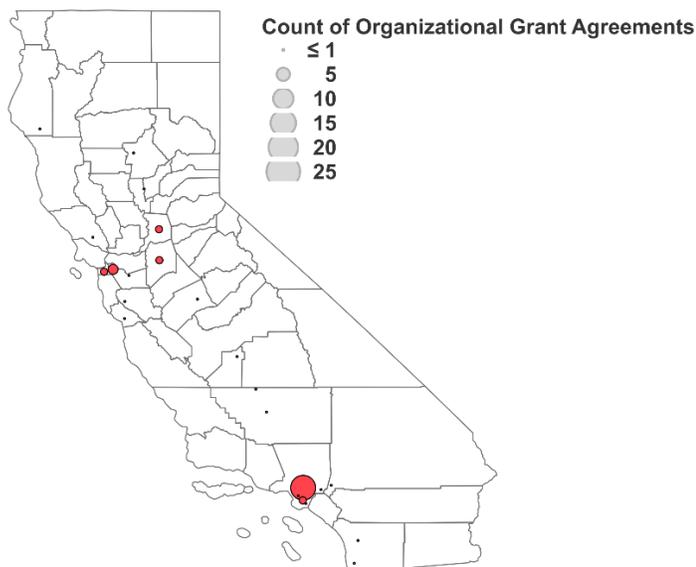


Table 1: 2024 and 2025 Cycle Year Program Awards by Program Type

Program Type	Cycle Year 24			Cycle Year 25			Grand Total		
	Amount Awarded	Award Count	% Amount Awarded	Amount Awarded	Award Count	% Amount Awarded	Amount Awarded	Award Count	% Amount Awarded
Education Expansion*	\$73,415,473	104	31%	\$3,133,000	18	6%	\$76,548,473	122	27%
Other Organizational Grant	\$136,015,016	160	57%	\$12,432,120	74	26%	\$148,447,136	234	52%
Loan Repayment	\$10,404,056	367	4%	\$5,915,279	253	12%	\$16,319,335	620	6%
Scholarship	\$19,942,924	735	8%	\$26,945,780	982	56%	\$46,888,704	1,717	16%
Grand Total	\$239,777,469	1,366		\$48,426,179	1,327		\$288,203,648	2,693	

*Song-Brown Awards for Education Expansion have not been fully announced for Cycle Year 2025 at the time of writing this report.

Looking Ahead: A Path Forward for the Health Workforce Research Data Center

HCAI will continue to work with key stakeholders to effectively position the Health Workforce Research Data Center as California’s leading generator of policy-relevant information about the state’s health workforce and build upon the baseline data displayed in this report. Over the next year, HCAI will focus on the following data for inclusion:

Collection of Health Workforce Data for Home- and Community-Based Providers

HCAI has developed data sharing agreements with key stakeholders to obtain workforce data for home and community-based providers. These data include several certified professions, along with important data on the uncertified workforce.

Collection of Education Pipeline Data

HCAI will also explore public and private education data options to better understand health program educational capacity, throughput, and demographics. The Integrated Postsecondary Education Data System (IPEDS) and collaboration with state higher education entities will be essential inputs for HCAI to leverage in future reports. HCAI will integrate these data with additional data sources, such as supply-side data and HCAI’s hospital utilization data, to gain key insights into the health workforce.

Refinement and Expansion of Supply and Demand Modeling

We will continue to update our models for Nursing and Behavioral Health and will also incorporate newer data sets, and feedback that we have received from stakeholders on how to improve our methodologies. These models will give HCAI a more accurate idea of where discrepancies are between workforce supply and demand and may be useful in influencing future funding decisions. Future work will also include adding modeling projections for all roles and role groups at the statewide, regional and county levels.

HCAI is in the process of exploring the feasibility for three additional predictive models for the supply and demand of Primary Care, Maternal Health, and Oral Health professionals across the state, as internal resources become available. This will be completed with stakeholder engagement, along with robust data management and integration.

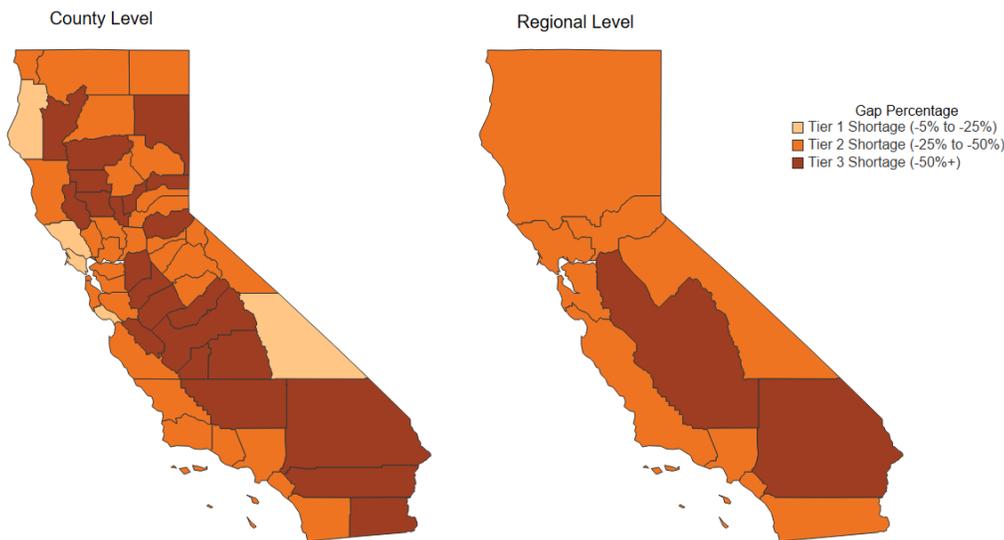
Section A: Model Findings, Behavioral Health

The license types included in the Behavioral Health model were categorized into the following role or role groups based on role similarity and scope of practice: Associate Level Clinicians (Associate Clinical Social Worker, Associate Marriage and Family Therapist, Associate Professional Clinical Counselor and Registered Psychological Associate), Non-Prescribing Licensed Clinicians (Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, Licensed Professional Clinical Social Worker, and Psychologist), and Psychiatrists.

The data presented in this section reflect estimated FTE adjusted counts of *providers*, rather than counts of active *licenses* as presented in Sections C-H of this report. See the [HCAI Modeling Methodology](#) for additional details.

Multiple measures of supply and demand are presented below: the raw difference between estimated supply and demand (Supply-Demand Gap), the Gap per 100k (Supply-Demand Gap/(County's Population/100,000)), and the Gap Percentage (Supply-Demand Gap/Demand). Each of these values provides important context to understanding the shortage or surplus of providers within a given area and relative to statewide trends. The raw Supply-Demand Gap indicates the basic difference between the estimated supply and demand and gives a picture of the sheer additional number of providers needed to meet demand. The Gap Percentage illustrates this same shortage on a standardized scale, which allows for direct comparison of severity between geographies and roles. The Gap per 100k provides population context but does not allow for comparison between roles or role groups and does not account for different utilization rates between counties, so comparisons between geographies is unequal. For example, a county may have the highest Gap per 100k without having the highest Gap Percentage.

Figure A-1: Non-Prescribing Licensed Clinicians: Supply & Demand Data – 2025



Overall, the statewide shortage of Non-Prescribing Licensed Clinicians is -40.6%, an estimated shortage of 55,298 providers. Notably, all regions and counties face some level of shortage of Non-Prescribing Licensed Clinicians. On a regional level, the San Joaquin Valley and Inland Empire are facing the most severe shortages, with fewer than 50% of the

providers needed to meet their demand. All counties within the Inland Empire and San Joaquin Valley regions are experiencing severe shortages (-50% or more), with Merced County facing the largest shortage within those regions at more than -75.9%. In contrast, the Central Coast region is facing the lowest regional level shortage at -32.7%, while Marin County is facing the lowest county level shortage at -9.9%.

Table A-1: Non-Prescribing Licensed Clinicians: Supply & Demand Data – 2025

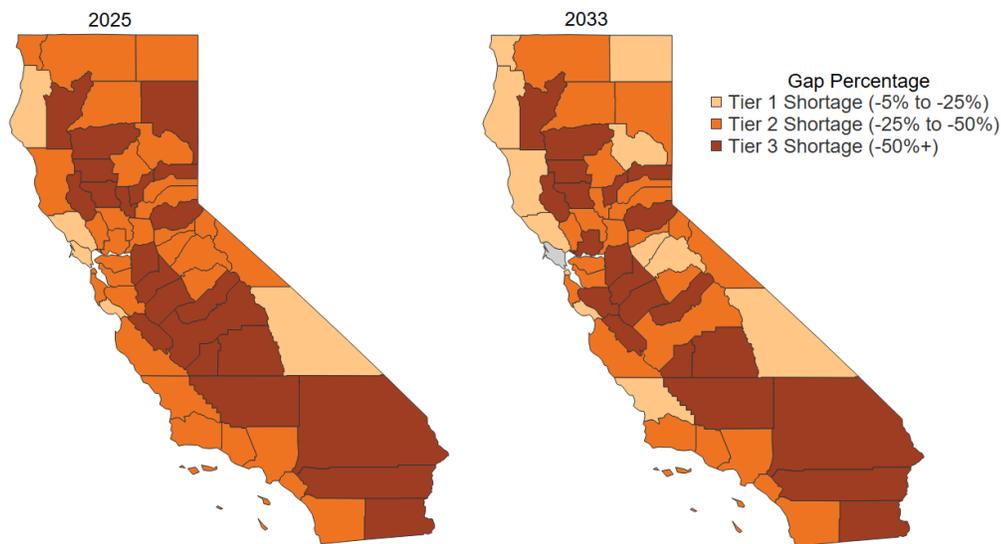
Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	688.0	1,268.1	-580.1	-131.5	-45.7%
	San Benito	63.0	181.5	-118.5	-182.2	-65.3%
	San Luis Obispo	926.0	1,268.2	-342.2	-121.9	-27.0%
	Santa Barbara	1,137.0	1,622.1	-485.1	-107.7	-29.9%
	Santa Cruz	1,044.0	1,276.7	-232.7	-89.3	-18.2%
	Ventura	1,919.0	2,971.0	-1,052.0	-127.5	-35.4%
	Region Total	5,777.0	8,587.7	-2,810.7	-121.0	-32.7%
Greater Bay Area	Alameda	5,105.0	6,853.8	-1,748.8	-105.7	-25.5%
	Contra Costa	2,467.0	4,284.6	-1,817.6	-159.3	-42.4%
	Marin	1,536.0	1,704.6	-168.6	-66.4	-9.9%
	Napa	377.0	537.9	-160.9	-120.4	-29.9%
	San Francisco	3,260.0	4,493.1	-1,233.1	-144.5	-27.4%
	San Mateo	1,733.0	2,891.3	-1,158.3	-155.1	-40.1%
	Santa Clara	3,547.0	6,624.1	-3,077.1	-160.0	-46.5%
	Solano	766.0	1,442.9	-676.9	-151.2	-46.9%
	Sonoma	1,676.0	2,134.7	-458.7	-96.1	-21.5%
	Region Total	20,467.0	30,967.1	-10,500.1	-137.6	-33.9%
Inland Empire	Riverside	3,009.0	7,183.5	-4,174.5	-170.2	-58.1%
	San Bernardino	2,811.0	5,984.3	-3,173.3	-144.8	-53.0%
	Region Total	5,820.0	13,167.8	-7,347.8	-158.2	-55.8%
LA County	Los Angeles	23,002.0	36,252.3	-13,250.3	-135.9	-36.6%
	Region Total	23,002.0	36,252.3	-13,250.3	-135.9	-36.6%
Northern & Sierra	Alpine	2.0	2.8	-0.8	-66.3	-27.8%
	Amador	63.0	98.3	-35.3	-87.6	-35.9%
	Butte	441.0	744.4	-303.4	-147.7	-40.8%
	Calaveras	70.0	105.8	-35.8	-80.6	-33.8%
	Colusa	14.0	63.7	-49.7	-226.3	-78.0%
	Del Norte	40.0	65.2	-25.2	-98.0	-38.6%
	Glenn	25.0	78.0	-53.0	-193.0	-68.0%
	Humboldt	388.0	504.8	-116.8	-86.8	-23.1%
	Inyo	33.0	43.3	-10.3	-55.4	-23.8%
	Lake	63.0	192.2	-129.2	-197.7	-67.2%
	Lassen	31.0	66.9	-35.9	-134.0	-53.7%
	Mariposa	23.0	39.5	-16.5	-98.7	-41.8%
	Mendocino	208.0	316.9	-108.9	-122.8	-34.4%
	Modoc	14.0	21.5	-7.5	-89.1	-34.8%
	Mono	18.0	30.8	-12.8	-97.4	-41.6%
	Nevada	315.0	488.1	-173.1	-174.1	-35.5%
	Plumas	28.0	47.2	-19.2	-103.8	-40.7%
	Shasta	365.0	679.0	-314.0	-176.7	-46.2%
	Sierra	0.0	7.7	-7.7	-246.0	-100.0%
Siskiyou	62.0	108.3	-46.3	-109.2	-42.7%	
Sutter	119.0	242.2	-123.2	-125.0	-50.9%	

	Tehama	53.0	169.6	-116.6	-181.4	-68.7%
	Trinity	15.0	39.9	-24.9	-157.3	-62.4%
	Tuolumne	77.0	118.2	-41.2	-76.9	-34.8%
	Yuba	51.0	231.9	-180.9	-213.1	-78.0%
	Region Total	2,518.0	4,506.0	-1,988.0	-142.3	-44.1%
Orange County	Orange	6,436.0	10,943.0	-4,507.0	-143.2	-41.2%
	Region Total	6,436.0	10,943.0	-4,507.0	-143.2	-41.2%
Sacramento	El Dorado	360.0	819.2	-459.2	-246.1	-56.1%
	Placer	968.0	1,508.4	-540.4	-130.2	-35.8%
	Sacramento	3,148.0	5,317.8	-2,169.8	-135.9	-40.8%
	Yolo	419.0	752.3	-333.3	-151.1	-44.3%
	Region Total	4,895.0	8,397.6	-3,502.6	-144.8	-41.7%
San Diego Area	Imperial	102.0	461.1	-359.1	-196.8	-77.9%
	San Diego	7,517.0	11,474.1	-3,957.1	-119.0	-34.5%
	Region Total	7,619.0	11,935.2	-4,316.2	-123.1	-36.2%
San Joaquin Valley	Fresno	1,432.0	2,907.8	-1,475.8	-145.0	-50.8%
	Kern	847.0	2,334.6	-1,487.6	-164.2	-63.7%
	Kings	124.0	344.8	-220.8	-142.5	-64.0%
	Madera	148.0	389.4	-241.4	-149.9	-62.0%
	Merced	181.0	749.9	-568.9	-198.3	-75.9%
	San Joaquin	659.0	2,037.6	-1,378.6	-174.3	-67.7%
	Stanislaus	545.0	1,557.3	-1,012.3	-186.0	-65.0%
	Tulare	457.0	1,146.5	-689.5	-144.2	-60.1%
	Region Total	4,393.0	11,467.9	-7,074.9	-163.0	-61.7%
Statewide	80,927.0	136,224.7	-55,297.7	-141.2	-40.6%	

■ Tier 3 Shortage (-50% or more)
■ Tier 2 Shortage (-25% to -50%)
■ Tier 1 Shortage (-5% to -25%)

Note: Table values are rounded to the first decimal place for display purposes only.

Figure A-2: Non-Prescribing Licensed Clinicians: Supply & Demand Projections



Our model projects that the overall statewide shortage of Non-Prescribing Licensed Clinicians will stay relatively steady, increasing slightly from -40.6% to nearly -42.5% by 2033, resulting in a need for 72,889 additional providers to meet the state's demand. At the regional level, all regions are projected to face a shortage of -25% or more, with the San

Joaquin Valley region facing the highest shortage at -62.2%. At the county level, 57 counties are projected to face a shortage of -5% or more. By 2033, 24 counties will face a tier 2 shortage (-25% to -50%), and 21 counties will face a tier 3 shortage (-50% or more). Only Marin is the only county in the state projected to avoid having a shortage of providers by 2033.

Relative to population size, the Orange County region is projected to face the largest shortage of providers with a gap of -230.9 per 100k. In contrast, the Northern & Sierra region is projected to face the lowest regional level shortage at -123.3 per 100k.

In terms of raw provider counts, the LA County region is projected to have the highest region- and county-level shortage at -15,621.7 providers. The Northern & Sierra region is estimated to have the lowest regional level shortage at -1,721.4 providers, and Marin County is estimated to have the highest county level surplus at 69 providers.

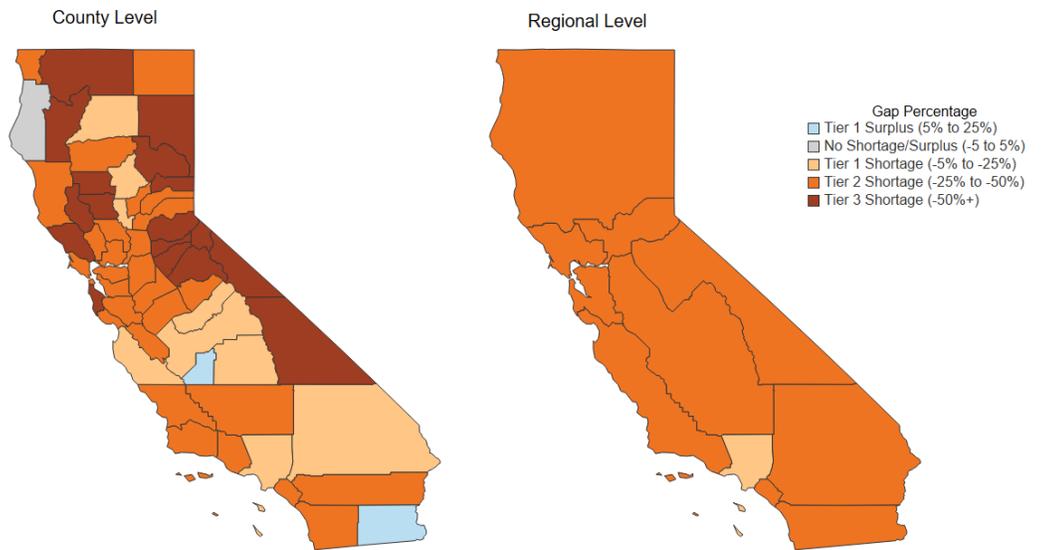
Table A-2: Non-Prescribing Licensed Clinicians: Supply & Demand Projections

Region	County	2025			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	-580.1	-131.5	-45.7%	-771.2	-165.2	-48.0%
	San Benito	-118.5	-182.2	-65.3%	-114.4	-166.8	-59.8%
	San Luis Obispo	-342.2	-121.9	-27.0%	-316.3	-109.9	-21.9%
	Santa Barbara	-485.1	-107.7	-29.9%	-493.4	-104.8	-26.3%
	Santa Cruz	-232.7	-89.3	-18.2%	-109.7	-41.8	-7.9%
	Ventura	-1,052.0	-127.5	-35.4%	-1,526.1	-184.7	-39.5%
	Region Total	-2,810.7	-121.0	-32.7%	-3,331.1	-139.8	-32.1%
Greater Bay Area	Alameda	-1,748.8	-105.7	-25.5%	-2,498.9	-145.6	-28.7%
	Contra Costa	-1,817.6	-159.3	-42.4%	-2,851.0	-241.1	-48.7%
	Marin	-168.6	-66.4	-9.9%	69.0	27.4	3.8%
	Napa	-160.9	-120.4	-29.9%	-174.4	-131.7	-27.6%
	San Francisco	-1,233.1	-144.5	-27.4%	-714.4	-81.2	-15.2%
	San Mateo	-1,158.3	-155.1	-40.1%	-1,875.2	-248.2	-47.1%
	Santa Clara	-3,077.1	-160.0	-46.5%	-4,754.6	-241.9	-52.4%
	Solano	-676.9	-151.2	-46.9%	-1,046.9	-217.9	-52.9%
	Sonoma	-458.7	-96.1	-21.5%	-652.5	-137.7	-24.2%
	Region Total	-10,500.1	-137.6	-33.9%	-14,498.9	-185.0	-36.8%
Inland Empire	Riverside	-4,174.5	-170.2	-58.1%	-6,495.4	-253.2	-63.9%
	San Bernardino	-3,173.3	-144.8	-53.0%	-4,440.4	-195.1	-56.5%
	Region Total	-7,347.8	-158.2	-55.8%	-10,935.7	-225.9	-60.7%
LA County	Los Angeles	-13,250.3	-135.9	-36.6%	-15,621.7	-160.6	-35.8%
	Region Total	-13,250.3	-135.9	-36.6%	-15,621.7	-160.6	-35.8%
Northern & Sierra	Alpine	-0.8	-66.3	-27.8%	-0.8	-68.2	-28.6%
	Amador	-35.3	-87.6	-35.9%	-26.3	-62.1	-25.5%
	Butte	-303.4	-147.7	-40.8%	-289.6	-137.6	-35.0%
	Calaveras	-35.8	-80.6	-33.8%	-17.2	-39.7	-16.6%
	Colusa	-49.7	-226.3	-78.0%	-46.0	-211.8	-73.0%
	Del Norte	-25.2	-98.0	-38.6%	-13.4	-54.4	-21.4%
	Glenn	-53.0	-193.0	-68.0%	-45.2	-170.7	-60.1%

	Humboldt	-116.8	-86.8	-23.1%	-37.1	-27.3	-7.3%
	Inyo	-10.3	-55.4	-23.8%	-2.2	-11.9	-5.1%
	Lake	-129.2	-197.7	-67.2%	-103.9	-168.9	-57.4%
	Lassen	-35.9	-134.0	-53.7%	-22.1	-91.9	-36.8%
	Mariposa	-16.5	-98.7	-41.8%	-9.9	-61.8	-26.2%
	Mendocino	-108.9	-122.8	-34.4%	-69.3	-77.7	-21.6%
	Modoc	-7.5	-89.1	-34.8%	-3.1	-39.9	-15.6%
	Mono	-12.8	-97.4	-41.6%	-8.4	-67.0	-28.7%
	Nevada	-173.1	-174.1	-35.5%	-213.0	-218.1	-35.7%
	Plumas	-19.2	-103.8	-40.7%	-10.1	-58.5	-22.9%
	Shasta	-314.0	-176.7	-46.2%	-318.3	-184.5	-41.8%
	Sierra	-7.7	-246.0	-100.0%	-7.3	-246.0	-100.0%
	Siskiyou	-46.3	-109.2	-42.7%	-28.3	-70.0	-27.4%
	Sutter	-123.2	-125.0	-50.9%	-110.5	-105.7	-43.4%
	Tehama	-116.6	-181.4	-68.7%	-107.5	-165.4	-62.7%
	Trinity	-24.9	-157.3	-62.4%	-21.5	-133.9	-53.1%
	Tuolumne	-41.2	-76.9	-34.8%	-23.1	-43.2	-19.6%
	Yuba	-180.9	-213.1	-78.0%	-187.2	-205.3	-75.1%
	Region Total	-1,988.0	-142.3	-44.1%	-1,721.4	-123.3	-36.0%
Orange County	Orange	-4,507.0	-143.2	-41.2%	-7,426.0	-230.9	-48.7%
	Region Total	-4,507.0	-143.2	-41.2%	-7,426.0	-230.9	-48.7%
Sacramento	El Dorado	-459.2	-246.1	-56.1%	-619.9	-324.2	-58.5%
	Placer	-540.4	-130.2	-35.8%	-969.4	-217.5	-45.1%
	Sacramento	-2,169.8	-135.9	-40.8%	-2,753.4	-162.8	-41.8%
	Yolo	-333.3	-151.1	-44.3%	-244.3	-103.9	-32.4%
	Region Total	-3,502.6	-144.8	-41.7%	-4,587.0	-178.9	-43.5%
San Diego Area	Imperial	-359.1	-196.8	-77.9%	-395.5	-204.2	-76.1%
	San Diego	-3,957.1	-119.0	-34.5%	-5,560.6	-161.9	-37.8%
	Region Total	-4,316.2	-123.1	-36.2%	-5,956.1	-164.2	-39.1%
San Joaquin Valley	Fresno	-1,475.8	-145.0	-50.8%	-1,710.2	-161.8	-49.5%
	Kern	-1,487.6	-164.2	-63.7%	-1,909.0	-206.0	-64.9%
	Kings	-220.8	-142.5	-64.0%	-183.9	-113.4	-54.9%
	Madera	-241.4	-149.9	-62.0%	-259.0	-154.3	-58.9%
	Merced	-568.9	-198.3	-75.9%	-592.3	-197.9	-73.0%
	San Joaquin	-1,378.6	-174.3	-67.7%	-2,032.1	-239.9	-71.7%
	Stanislaus	-1,012.3	-186.0	-65.0%	-1,264.9	-227.3	-65.6%
	Tulare	-689.5	-144.2	-60.1%	-859.8	-173.0	-60.7%
	Region Total	-7,074.9	-163.0	-61.7%	-8,811.1	-195.2	-62.2%
Statewide		-55,297.7	-141.2	-40.6%	-72,889.0	-181.8	-42.5%

Figure A-3: Associate Level Clinicians: Supply & Demand Data – 2025

Overall, the statewide shortage of Associate Level Clinicians is -30.6%, an estimated shortage of nearly 13,175 providers. On a regional level, the Sacramento Area and Greater Bay Area regions are facing the most severe shortages, with fewer than 41% of the providers needed to meet their demand in the Sacramento Area and -39.1% in Greater Bay Area.



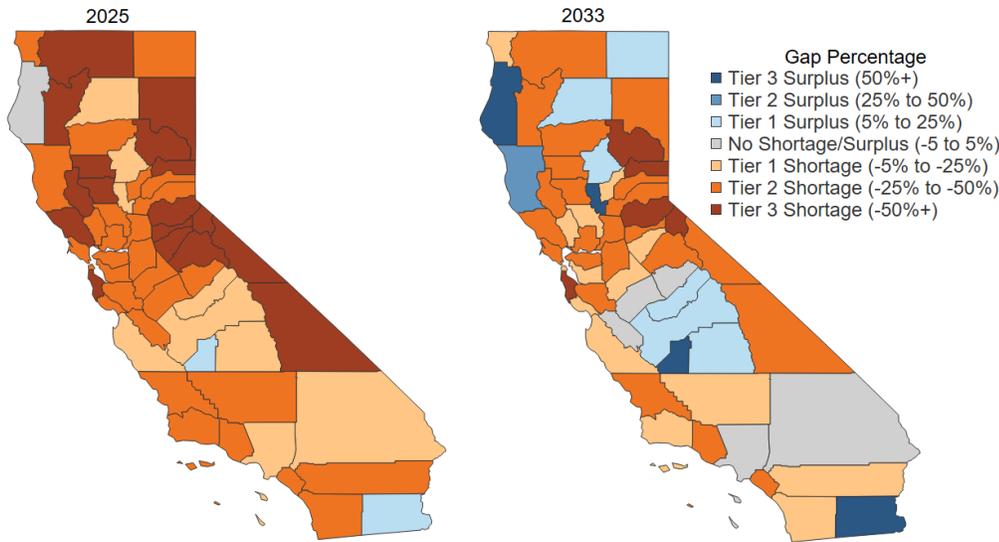
All counties in the Sacramento Area and Greater Bay Area regions are experiencing a shortage of 25% or more. In contrast, the Los Angeles County region is facing the lowest regional level shortage at -23.3%, while Kings and Imperial counties are the only areas with a small surplus.

Table A-3: Associate Level Clinicians: Supply & Demand Data – 2025

Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	302.0	386.1	-84.1	-19.0	-21.8%
	San Benito	44.0	61.5	-17.5	-27.0	-28.5%
	San Luis Obispo	189.0	343.0	-154.0	-54.8	-44.9%
	Santa Barbara	350.0	484.8	-134.8	-29.9	-27.8%
	Santa Cruz	233.0	311.4	-78.4	-30.1	-25.2%
	Ventura	589.0	908.6	-319.6	-38.7	-35.2%
	Region Total	1,707.0	2,495.5	-788.5	-33.9	-31.6%
Greater Bay Area	Alameda	1,458.0	2,005.6	-547.6	-33.1	-27.3%
	Contra Costa	761.0	1,382.9	-621.9	-54.5	-45.0%
	Marin	189.0	348.1	-159.1	-62.7	-45.7%
	Napa	87.0	128.5	-41.5	-31.1	-32.3%
	San Francisco	817.0	1,141.8	-324.8	-38.1	-28.4%
	San Mateo	397.0	884.9	-487.9	-65.3	-55.1%
	Santa Clara	1,228.0	2,117.1	-889.1	-46.2	-42.0%
	Solano	295.0	463.8	-168.8	-37.7	-36.4%
	Sonoma	309.0	627.2	-318.2	-66.7	-50.7%
	Region Total	5,541.0	9,099.9	-3,558.9	-46.6	-39.1%
Inland Empire	Riverside	1,701.0	2,440.8	-739.8	-30.2	-30.3%
	San Bernardino	1,663.0	2,119.1	-456.1	-20.8	-21.5%
	Region Total	3,364.0	4,559.9	-1,195.9	-25.8	-26.2%
LA County	Los Angeles	9,331.0	12,167.3	-2,836.3	-29.1	-23.3%
	Region Total	9,331.0	12,167.3	-2,836.3	-29.1	-23.3%
Northern & Sierra	Alpine	0.0	0.2	-0.2	-16.3	-100.0%
	Amador	12.0	31.9	-19.9	-49.4	-62.4%
	Butte	175.0	208.2	-33.2	-16.2	-15.9%

	Calaveras	17.0	34.1	-17.1	-38.5	-50.1%
	Colusa	7.0	20.7	-13.7	-62.4	-66.2%
	Del Norte	12.0	21.3	-9.3	-36.1	-43.6%
	Glenn	12.0	25.4	-13.4	-48.6	-52.7%
	Humboldt	134.0	130.1	3.9	2.9	3.0%
	Inyo	5.0	14.0	-9.0	-48.7	-64.4%
	Lake	25.0	62.7	-37.7	-57.6	-60.1%
	Lassen	8.0	21.8	-13.8	-51.7	-63.4%
	Mariposa	8.0	12.8	-4.8	-28.8	-37.7%
	Mendocino	47.0	73.7	-26.7	-30.1	-36.2%
	Modoc	5.0	7.0	-2.0	-23.9	-28.6%
	Mono	3.0	10.0	-7.0	-53.2	-70.0%
	Nevada	66.0	114.3	-48.3	-48.6	-42.3%
	Plumas	5.0	15.4	-10.4	-56.3	-67.5%
	Shasta	152.0	191.1	-39.1	-22.0	-20.4%
	Sierra	0.0	2.6	-2.6	-82.6	-100.0%
	Siskiyou	16.0	35.3	-19.3	-45.6	-54.7%
	Sutter	45.0	48.5	-3.5	-3.6	-7.2%
	Tehama	29.0	55.2	-26.2	-40.7	-47.4%
	Trinity	4.0	13.0	-9.0	-57.0	-69.2%
	Tuolumne	19.0	38.3	-19.3	-36.1	-50.4%
	Yuba	42.0	75.2	-33.2	-39.2	-44.2%
	Region Total	848.0	1,262.8	-414.8	-29.7	-32.8%
Orange County	Orange	2,277.0	3,551.5	-1,274.5	-40.5	-35.9%
	Region Total	2,277.0	3,551.5	-1,274.5	-40.5	-35.9%
Sacramento	El Dorado	99.0	243.2	-144.2	-77.3	-59.3%
	Placer	262.0	470.5	-208.5	-50.2	-44.3%
	Sacramento	1,056.0	1,682.6	-626.6	-39.2	-37.2%
	Yolo	117.0	202.3	-85.3	-38.7	-42.2%
	Region Total	1,534.0	2,598.5	-1,064.5	-44.0	-41.0%
San Diego Area	Imperial	134.0	124.5	9.5	5.2	7.6%
	San Diego	2,582.0	3,678.5	-1,096.5	-33.0	-29.8%
	Region Total	2,716.0	3,803.0	-1,087.0	-31.0	-28.6%
San Joaquin Valley	Fresno	836.0	924.0	-88.0	-8.6	-9.5%
	Kern	495.0	758.3	-263.3	-29.1	-34.7%
	Kings	90.0	78.3	11.7	7.6	15.0%
	Madera	76.0	97.7	-21.7	-13.5	-22.2%
	Merced	138.0	216.0	-78.0	-27.2	-36.1%
	San Joaquin	350.0	654.6	-304.6	-38.5	-46.5%
	Stanislaus	333.0	500.6	-167.6	-30.8	-33.5%
	Tulare	312.0	355.0	-43.0	-9.0	-12.1%
	Region Total	2,630.0	3,584.5	-954.5	-22.0	-26.6%
Statewide	29,948.0	43,122.9	-13,174.9	-33.6	-30.6%	
■ Tier 3 Shortage (-50% or more) ■ No Shortage/Surplus (-5% to 5%) ■ Tier 1 Surplus (5% to 25%) ■ Tier 2 Shortage (-25% to -50%) ■ Tier 1 Shortage (-5% to -25%)						
Note: Table values are rounded to the first decimal place for display purposes only.						

Figure A-4: Associate Level Clinicians: Supply & Demand Projections



Our model projects that the overall statewide shortage of Associate-Level Clinicians will decrease from -30.6% to nearly -17.7% by 2033, resulting in a need for 9,303.8 additional providers to meet the state's demand. At the regional level, all regions except Northern & Sierra and LA County are projected to face a shortage of -5% or more, with the Greater Bay

Area region facing the highest shortage at -33.4%. At the county level, 42 counties are projected to face a shortage of -5% or more, with the counties within the Northern & Sierra region impacted the most. By 2033, 23 counties will face a tier 2 shortage (-25% to -50%), and five counties will face a tier 3 shortage (-50% or more). Eleven counties statewide are projected to have a surplus of providers by 2033.

Relative to population size, the Greater Bay Area region is projected to face the largest shortage of providers with a gap of -51 providers per 100k, and have three of the top five highest county level shortages. In contrast, the Northern & Sierra region is projected to face the lowest regional level shortage at -0.1 per 100k.

In terms of raw provider counts, the Greater Bay Area is projected to have the highest regional shortage at -3,994.3 providers. However, Orange County is projected to have the highest county level shortage at -9,303.8 providers. The Northern & Sierra region is estimated to have the lowest regional level shortage at -0.9 providers, and Fresno County is estimated to have the highest county level surplus at 165.4 providers.

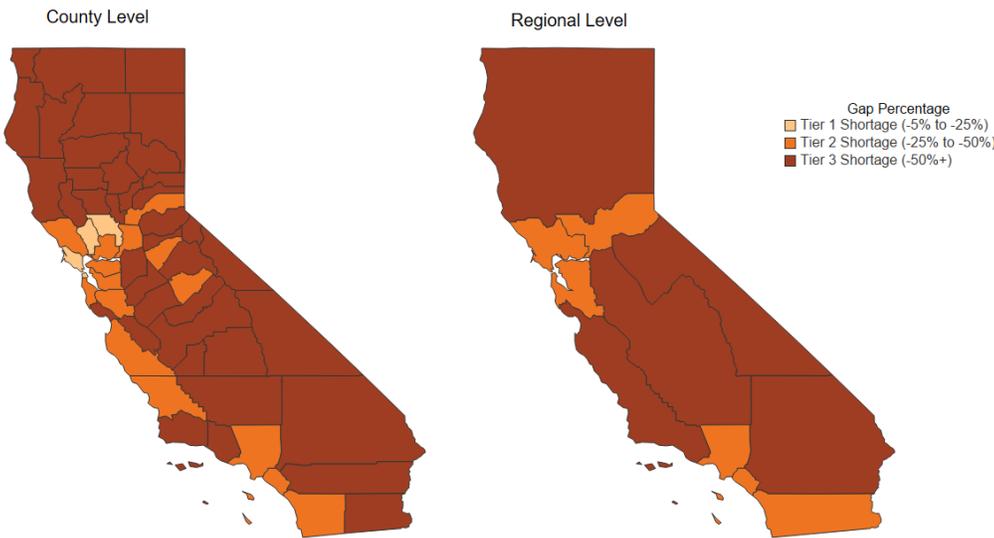
Table A-4: Associate Level Clinicians: Supply & Demand – Projections

Region	County	2025			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	-84.1	-19.0	-21.8%	-25.6	-5.5	-5.5%
	San Benito	-17.5	-27.0	-28.5%	-1.9	-2.7	-2.9%
	San Luis Obispo	-154.0	-54.8	-44.9%	-124.8	-43.4	-31.5%
	Santa Barbara	-134.8	-29.9	-27.8%	-33.8	-7.2	-6.3%
	Santa Cruz	-78.4	-30.1	-25.2%	-34.8	-13.3	-9.4%
	Ventura	-319.6	-38.7	-35.2%	-328.0	-39.7	-27.9%
	Region Total	-788.5	-33.9	-31.6%	-548.9	-23.0	-18.3%
Greater Bay Area	Alameda	-547.6	-33.1	-27.3%	-599.6	-34.9	-22.2%
	Contra Costa	-621.9	-54.5	-45.0%	-733.0	-62.0	-40.1%
	Marin	-159.1	-62.7	-45.7%	-210.5	-83.5	-43.6%
	Napa	-41.5	-31.1	-32.3%	-25.8	-19.5	-17.2%
	San Francisco	-324.8	-38.1	-28.4%	-175.4	-19.9	-13.0%

	San Mateo	-487.9	-65.3	-55.1%	-649.4	-86.0	-53.1%
	Santa Clara	-889.1	-46.2	-42.0%	-1,085.4	-55.2	-38.0%
	Solano	-168.8	-37.7	-36.4%	-163.1	-34.0	-27.8%
	Sonoma	-318.2	-66.7	-50.7%	-352.0	-74.3	-44.2%
	Region Total	-3,558.9	-46.6	-39.1%	-3,994.3	-51.0	-33.4%
Inland Empire	Riverside	-739.8	-30.2	-30.3%	-785.5	-30.6	-24.3%
	San Bernardino	-456.1	-20.8	-21.5%	-89.3	-3.9	-3.6%
	Region Total	-1,195.9	-25.8	-26.2%	-874.8	-18.1	-15.3%
LA County	Los Angeles	-2,836.3	-29.1	-23.3%	-256.1	-2.6	-1.9%
	Region Total	-2,836.3	-29.1	-23.3%	-256.1	-2.6	-1.9%
Northern & Sierra	Alpine	-0.2	-16.3	-100.0%	-0.2	-16.3	-100.0%
	Amador	-19.9	-49.4	-62.4%	-16.5	-39.0	-49.3%
	Butte	-33.2	-16.2	-15.9%	41.6	19.8	19.8%
	Calaveras	-17.1	-38.5	-50.1%	-8.3	-19.1	-24.8%
	Colusa	-13.7	-62.4	-66.2%	-8.5	-39.0	-41.4%
	Del Norte	-9.3	-36.1	-43.6%	-3.3	-13.6	-16.5%
	Glenn	-13.4	-48.6	-52.7%	-7.4	-28.1	-30.4%
	Humboldt	3.9	2.9	3.0%	85.1	62.6	78.2%
	Inyo	-9.0	-48.7	-64.4%	-6.7	-36.9	-48.8%
	Lake	-37.7	-57.6	-60.1%	-23.0	-37.3	-39.0%
	Lassen	-13.8	-51.7	-63.4%	-7.6	-31.7	-38.9%
	Mariposa	-4.8	-28.8	-37.7%	-0.3	-1.9	-2.5%
	Mendocino	-26.7	-30.1	-36.2%	14.1	15.8	26.7%
	Modoc	-2.0	-23.9	-28.6%	0.4	5.5	6.5%
	Mono	-7.0	-53.2	-70.0%	-4.6	-36.2	-47.6%
	Nevada	-48.3	-48.6	-42.3%	-44.7	-45.8	-32.0%
	Plumas	-10.4	-56.3	-67.5%	-7.4	-42.8	-51.4%
	Shasta	-39.1	-22.0	-20.4%	27.8	16.1	14.6%
	Sierra	-2.6	-82.6	-100.0%	-2.5	-82.6	-100.0%
	Siskiyou	-19.3	-45.6	-54.7%	-9.7	-24.0	-28.8%
	Sutter	-3.5	-3.6	-7.2%	32.8	31.3	98.6%
	Tehama	-26.2	-40.7	-47.4%	-14.8	-22.8	-26.5%
	Trinity	-9.0	-57.0	-69.2%	-6.2	-38.7	-47.0%
	Tuolumne	-19.3	-36.1	-50.4%	-11.3	-21.2	-29.5%
	Yuba	-33.2	-39.2	-44.2%	-19.9	-21.8	-24.6%
	Region Total	-414.8	-29.7	-32.8%	-0.9	-0.1	-0.1%
Orange County	Orange	-1,274.5	-40.5	-35.9%	-1,558.3	-48.5	-32.2%
	Region Total	-1,274.5	-40.5	-35.9%	-1,558.3	-48.5	-32.2%
Sacramento	El Dorado	-144.2	-77.3	-59.3%	-148.2	-77.5	-50.9%
	Placer	-208.5	-50.2	-44.3%	-266.9	-59.9	-41.4%
	Sacramento	-626.6	-39.2	-37.2%	-509.9	-30.1	-25.1%
	Yolo	-85.3	-38.7	-42.2%	-15.2	-6.5	-8.3%
	Region Total	-1,064.5	-44.0	-41.0%	-940.2	-36.7	-29.8%
San Diego Area	Imperial	9.5	5.2	7.6%	77.2	39.8	66.0%
	San Diego	-1,096.5	-33.0	-29.8%	-885.5	-25.8	-19.2%
	Region Total	-1,087.0	-31.0	-28.6%	-808.3	-22.3	-17.1%
	Fresno	-88.0	-8.6	-9.5%	165.4	15.6	15.9%

San Joaquin Valley	Kern	-263.3	-29.1	-34.7%	-172.4	-18.6	-19.5%
	Kings	11.7	7.6	15.0%	73.0	45.0	130.2%
	Madera	-21.7	-13.5	-22.2%	18.5	11.0	20.2%
	Merced	-78.0	-27.2	-36.1%	-9.1	-3.0	-4.4%
	San Joaquin	-304.6	-38.5	-46.5%	-359.7	-42.5	-41.6%
	Stanislaus	-167.6	-30.8	-33.5%	-83.6	-15.0	-14.8%
	Tulare	-43.0	-9.0	-12.1%	46.0	9.3	11.4%
	Region Total	-954.5	-22.0	-26.6%	-322.0	-7.1	-7.8%
Statewide	-13,174.9	-33.6	-30.6%	-9,303.8	-23.2	-17.7%	

Figure A-5: Psychiatrists: Supply & Demand Data – 2025



Overall, the statewide shortage of Psychiatrists is -41.2%, an estimated shortage of nearly 3,782 providers. On a regional level, the Northern & Sierra, San Joaquin Valley, Inland Empire, and Central Coast regions are facing the most severe shortages, with fewer than 50% of the providers needed to meet their demand. Twenty-three counties within the Northern &

Sierra region, all eight counties within the San Joaquin Valley region, both counties within the Inland Empire region, and four counties in the Central Coast region are experiencing a tier 3 shortage (-50% or more). In contrast, the Greater Bay Area region is facing the lowest regional level shortage at -26.7%, while Marin County is facing the lowest county level shortage at -7.4%.

Relative to population size, the Northern & Sierra region faces the largest shortage of providers with a gap of -13.3 per 100k, and all 10 of the highest county level shortages. The San Diego Area faces the lowest regional shortage at -9.7 per 100k, and Sierra County faces the lowest county level shortage at -1.5 per 100k.

In terms of raw provider counts, Los Angeles County has the highest regional and county level shortages at -795.9 providers, more than two times more than the next highest county level shortage.

Table A-5: Psychiatrists: Supply & Demand Data – 2025

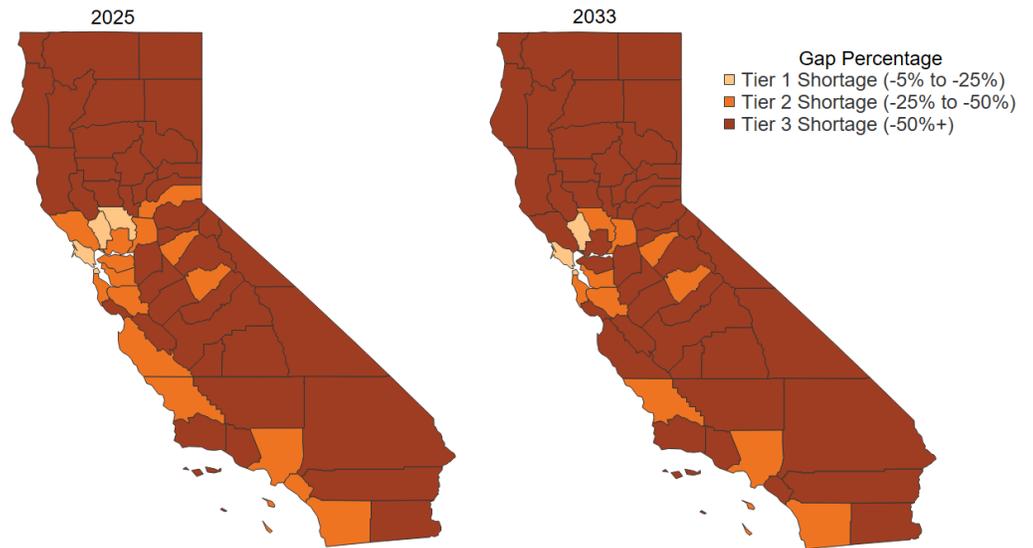
Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	46.0	81.4	-35.4	-8.0	-43.5%
	San Benito	2.0	11.0	-9.0	-13.9	-81.8%
	San Luis Obispo	68.0	115.2	-47.2	-16.8	-41.0%
	Santa Barbara	48.0	110.3	-62.3	-13.8	-56.5%

	Santa Cruz	23.0	72.7	-49.7	-19.1	-68.4%
	Ventura	79.0	177.0	-98.0	-11.9	-55.4%
	Region Total	266.0	567.6	-301.6	-13.0	-53.1%
Greater Bay Area	Alameda	265.0	401.0	-136.0	-8.2	-33.9%
	Contra Costa	144.0	255.1	-111.1	-9.7	-43.6%
	Marin	143.0	154.4	-11.4	-4.5	-7.4%
	Napa	58.0	71.4	-13.4	-10.0	-18.8%
	San Francisco	424.0	476.9	-52.9	-6.2	-11.1%
	San Mateo	182.0	245.7	-63.7	-8.5	-25.9%
	Santa Clara	411.0	565.7	-154.7	-8.0	-27.4%
	Solano	48.0	89.4	-41.4	-9.2	-46.3%
	Sonoma	73.0	123.9	-50.9	-10.7	-41.1%
	Region Total	1,748.0	2,383.4	-635.4	-8.3	-26.7%
	Inland Empire	Riverside	173.0	466.4	-293.4	-12.0
San Bernardino		191.0	473.1	-282.1	-12.9	-59.6%
Region Total		364.0	939.6	-575.6	-12.4	-61.3%
LA County	Los Angeles	1,390.0	2,185.9	-795.9	-8.2	-36.4%
	Region Total	1,390.0	2,185.9	-795.9	-8.2	-36.4%
Northern & Sierra	Alpine	0.0	0.0	0.0	-2.5	-100.0%
	Amador	2.0	6.3	-4.3	-10.7	-68.3%
	Butte	9.0	26.7	-17.7	-8.6	-66.3%
	Calaveras	4.0	7.2	-3.2	-7.1	-44.2%
	Colusa	0.0	1.8	-1.8	-8.0	-100.0%
	Del Norte	1.0	4.1	-3.1	-11.9	-75.4%
	Glenn	2.0	4.7	-2.7	-9.7	-57.2%
	Humboldt	10.0	25.8	-15.8	-11.8	-61.3%
	Inyo	1.0	2.8	-1.8	-9.4	-63.6%
	Lake	4.0	11.5	-7.5	-11.5	-65.3%
	Lassen	0.0	1.5	-1.5	-5.5	-100.0%
	Mariposa	2.0	3.1	-1.1	-6.4	-34.8%
	Mendocino	3.0	22.0	-19.0	-21.4	-86.4%
	Modoc	0.0	0.5	-0.5	-5.5	-100.0%
	Mono	0.0	0.9	-0.9	-6.6	-100.0%
	Nevada	9.0	24.3	-15.3	-15.3	-62.9%
	Plumas	0.0	1.0	-1.0	-5.6	-100.0%
	Shasta	9.0	35.3	-26.3	-14.8	-74.5%
	Sierra	0.0	0.0	0.0	-1.5	-100.0%
	Siskiyou	1.0	6.7	-5.7	-13.6	-85.2%
	Sutter	5.0	33.4	-28.4	-28.8	-85.0%
	Tehama	1.0	11.2	-10.2	-15.9	-91.1%
	Trinity	1.0	2.5	-1.5	-9.5	-60.1%
	Tuolumne	3.0	7.5	-4.5	-8.3	-59.8%
Yuba	1.0	12.5	-11.5	-13.6	-92.0%	
Region Total	68.0	253.2	-185.2	-13.3	-73.1%	
Orange County	Orange	390.0	682.9	-292.9	-9.3	-42.9%

	Region Total	390.0	682.9	-292.9	-9.3	-42.9%
Sacramento	El Dorado	13.0	49.4	-36.4	-19.5	-73.7%
	Placer	56.0	95.2	-39.2	-9.5	-41.2%
	Sacramento	249.0	372.9	-123.9	-7.8	-33.2%
	Yolo	45.0	58.7	-13.7	-6.2	-23.4%
	Region Total	363.0	576.2	-213.2	-8.8	-37.0%
San Diego Area	Imperial	11.0	32.1	-21.1	-11.6	-65.7%
	San Diego	565.0	827.5	-262.5	-7.9	-31.7%
	Region Total	576.0	859.6	-283.6	-8.1	-33.0%
San Joaquin Valley	Fresno	78.0	170.4	-92.4	-9.1	-54.2%
	Kern	51.0	162.1	-111.1	-12.3	-68.5%
	Kings	7.0	26.3	-19.3	-12.5	-73.4%
	Madera	4.0	26.8	-22.8	-14.2	-85.1%
	Merced	7.0	50.5	-43.5	-15.2	-86.2%
	San Joaquin	51.0	138.7	-87.7	-11.1	-63.2%
	Stanislaus	25.0	89.7	-64.7	-11.9	-72.1%
	Tulare	18.0	74.7	-56.7	-11.9	-75.9%
	Region Total	241.0	739.3	-498.3	-11.5	-67.4%
Statewide		5,406.0	9,187.8	-3,781.8	-9.7	-41.2%
■ Tier 3 Shortage (-50% or more) ■ Tier 2 Shortage (-25% to -50%) ■ Tier 1 Shortage (-5% to -25%)						
Note: Table values are rounded to the first decimal place for display purposes only.						

Figure A-6: Psychiatrists: Supply & Demand Data – Projections

Our model projects that the overall statewide shortage of Psychiatrists will increase from -41.2% to nearly -53.1% by 2033, resulting in a need for 6,216 additional providers to meet the state's demand. At the regional level, all regions are projected to face a shortage of -5% or more, with the Northern & Sierra region facing the highest shortage at -78.7%. At the county level, all 58 counties are projected to face a shortage of -5% or more. By 2033, 10 counties will face a tier 2 shortage (-25% to -50%), and 45 counties will face a tier 3 shortage (-50% or more).



By 2033, 10 counties will face a tier 2 shortage (-25% to -50%), and 45 counties will face a tier 3 shortage (-50% or more).

Relative to population size, the Central Coast region is projected to face the largest shortage of providers with a gap of -19.2 per 100k. In contrast, the San Diego Area region is projected to face the lowest regional level shortage at -13.4 per 100k.

In terms of raw provider counts, the LA County region is projected to have the highest region- and county-level shortage at -1,402.6 providers. The Northern & Sierra region is estimated to have the lowest regional level shortage at -251.3 providers, and Modoc County is estimated to have the lowest shortage at -0.4 providers.

Table A-6: Psychiatrists: Supply & Demand Data – Projections

Region	County	2025			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	-35.4	-8.0	-43.5%	-62.7	-13.4	-57.2%
	San Benito	-9.0	-13.9	-81.8%	-9.6	-14.0	-82.8%
	San Luis Obispo	-47.2	-16.8	-41.0%	-64.5	-22.4	-48.3%
	Santa Barbara	-62.3	-13.8	-56.5%	-89.2	-19.0	-64.5%
	Santa Cruz	-49.7	-19.1	-68.4%	-71.1	-27.1	-75.5%
	Ventura	-98.0	-11.9	-55.4%	-160.0	-19.4	-66.4%
	Region Total	-301.6	-13.0	-53.1%	-457.1	-19.2	-62.8%
Greater Bay Area	Alameda	-136.0	-8.2	-33.9%	-264.9	-15.4	-49.7%
	Contra Costa	-111.1	-9.7	-43.6%	-205.8	-17.4	-58.3%
	Marin	-11.4	-4.5	-7.4%	-25.8	-10.2	-15.0%
	Napa	-13.4	-10.0	-18.8%	-19.3	-14.6	-24.7%
	San Francisco	-52.9	-6.2	-11.1%	-73.8	-8.4	-14.6%
	San Mateo	-63.7	-8.5	-25.9%	-116.6	-15.4	-38.5%
	Santa Clara	-154.7	-8.0	-27.4%	-270.9	-13.8	-39.4%
	Solano	-41.4	-9.2	-46.3%	-77.9	-16.2	-61.4%
	Sonoma	-50.9	-10.7	-41.1%	-97.1	-20.5	-57.1%
	Region Total	-635.4	-8.3	-26.7%	-1,152.2	-14.7	-39.4%
Inland Empire	Riverside	-293.4	-12.0	-62.9%	-453.2	-17.7	-72.0%
	San Bernardino	-282.1	-12.9	-59.6%	-385.6	-16.9	-66.4%
	Region Total	-575.6	-12.4	-61.3%	-838.9	-17.3	-69.3%
LA County	Los Angeles	-795.9	-8.2	-36.4%	-1,402.6	-14.4	-49.8%
	Region Total	-795.9	-8.2	-36.4%	-1,402.6	-14.4	-49.8%
Northern & Sierra	Alpine	0.0	-2.5	-100.0%	0.0	-2.5	-100.0%
	Amador	-4.3	-10.7	-68.3%	-4.6	-10.9	-69.8%
	Butte	-17.7	-8.6	-66.3%	-35.2	-16.7	-79.6%
	Calaveras	-3.2	-7.1	-44.2%	-3.0	-6.9	-42.8%
	Colusa	-1.8	-8.0	-100.0%	-1.7	-8.0	-100.0%
	Del Norte	-3.1	-11.9	-75.4%	-2.9	-11.7	-74.3%
	Glenn	-2.7	-9.7	-57.2%	-2.5	-9.5	-55.6%
	Humboldt	-15.8	-11.8	-61.3%	-26.5	-19.5	-72.6%
	Inyo	-1.8	-9.4	-63.6%	-1.7	-9.3	-62.7%
	Lake	-7.5	-11.5	-65.3%	-6.8	-11.1	-63.1%
	Lassen	-1.5	-5.5	-100.0%	-1.3	-5.5	-100.0%
	Mariposa	-1.1	-6.4	-34.8%	-0.9	-5.9	-32.1%
	Mendocino	-19.0	-21.4	-86.4%	-25.7	-28.8	-89.6%
	Modoc	-0.5	-5.5	-100.0%	-0.4	-5.5	-100.0%
	Mono	-0.9	-6.6	-100.0%	-0.8	-6.6	-100.0%
Nevada	-15.3	-15.3	-62.9%	-28.5	-29.2	-76.0%	

	Plumas	-1.0	-5.6	-100.0%	-1.0	-5.6	-100.0%
	Shasta	-26.3	-14.8	-74.5%	-41.5	-24.0	-82.2%
	Sierra	0.0	-1.5	-100.0%	0.0	-1.5	-100.0%
	Siskiyou	-5.7	-13.6	-85.2%	-5.4	-13.5	-84.5%
	Sutter	-28.4	-28.8	-85.0%	-31.8	-30.4	-86.4%
	Tehama	-10.2	-15.9	-91.1%	-10.4	-16.0	-91.2%
	Trinity	-1.5	-9.5	-60.1%	-1.5	-9.6	-60.7%
	Tuolumne	-4.5	-8.3	-59.8%	-4.5	-8.3	-59.8%
	Yuba	-11.5	-13.6	-92.0%	-12.4	-13.6	-92.6%
	Region Total	-185.2	-13.3	-73.1%	-251.3	-18.0	-78.7%
Orange County	Orange	-292.9	-9.3	-42.9%	-533.6	-16.6	-57.3%
	Region Total	-292.9	-9.3	-42.9%	-533.6	-16.6	-57.3%
Sacramento	El Dorado	-36.4	-19.5	-73.7%	-55.6	-29.1	-81.1%
	Placer	-39.2	-9.5	-41.2%	-76.8	-17.2	-57.4%
	Sacramento	-123.9	-7.8	-33.2%	-212.4	-12.6	-45.7%
	Yolo	-13.7	-6.2	-23.4%	-23.0	-9.8	-33.3%
	Region Total	-213.2	-8.8	-37.0%	-367.8	-14.3	-50.0%
San Diego Area	Imperial	-21.1	-11.6	-65.7%	-31.1	-16.1	-73.9%
	San Diego	-262.5	-7.9	-31.7%	-456.4	-13.3	-44.2%
	Region Total	-283.6	-8.1	-33.0%	-487.5	-13.4	-45.4%
San Joaquin Valley	Fresno	-92.4	-9.1	-54.2%	-145.6	-13.8	-64.5%
	Kern	-111.1	-12.3	-68.5%	-156.3	-16.9	-75.0%
	Kings	-19.3	-12.5	-73.4%	-25.6	-15.8	-78.6%
	Madera	-22.8	-14.2	-85.1%	-31.8	-19.0	-88.8%
	Merced	-43.5	-15.2	-86.2%	-56.3	-18.8	-88.9%
	San Joaquin	-87.7	-11.1	-63.2%	-134.3	-15.9	-72.1%
	Stanislaus	-64.7	-11.9	-72.1%	-94.5	-17.0	-79.1%
	Tulare	-56.7	-11.9	-75.9%	-80.5	-16.2	-81.7%
	Region Total	-498.3	-11.5	-67.4%	-724.9	-16.1	-74.7%
Statewide		-3,781.8	-9.7	-41.2%	-6,216.0	-15.5	-53.1%

Section B: Model Findings and Projections, Nursing

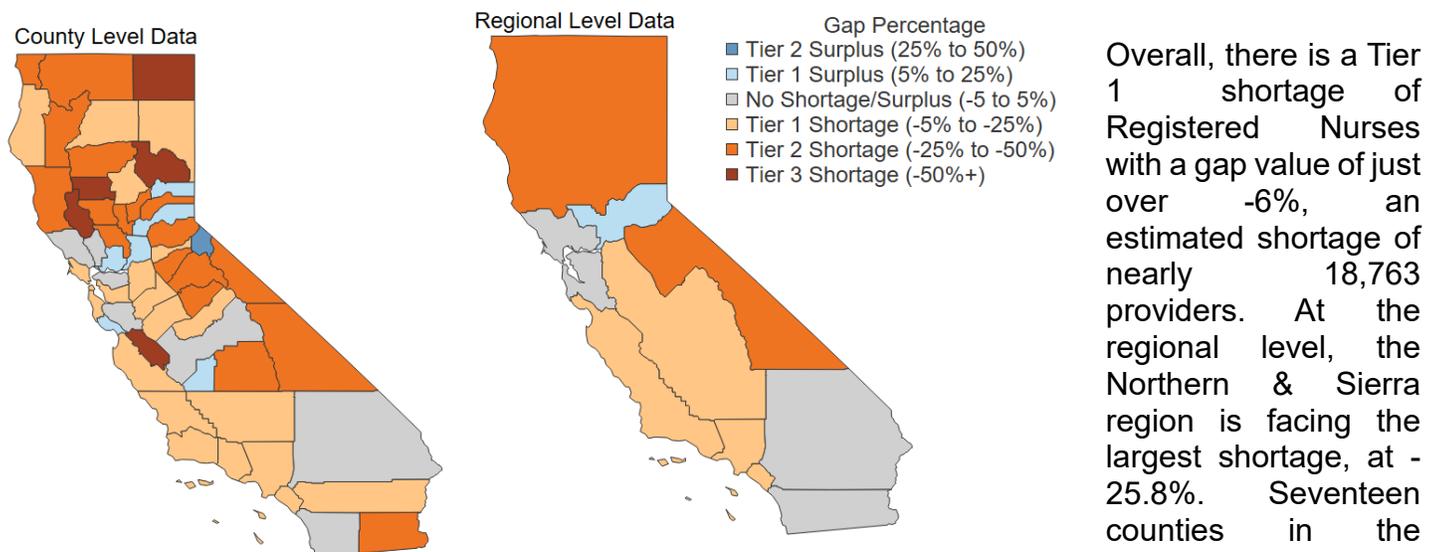
The license types included in the Nursing model were categorized into the following role or role groups based on role similarity and scope of practice: Nurse Anesthetists, Vocational Nurses and Registered Nurses (Registered Nurse, Certified Nurse Specialist, Public Health Nurse, and Psychiatric Mental Health Nurse).

The data presented in this section reflect estimated FTE adjusted counts of *individuals*, rather than total license counts as presented in Sections C-H of this report. Commuting patterns were analyzed for the Registered Nursing role group using a licensee's Address of Record and Primary Practice Address. This allowed us to redistribute individuals who cross county or regional boundaries for work (i.e. live in one county but practice in another), resulting in much more accurate Supply metrics. This is particularly important in urban areas or areas with a high cost of living where commuting is more common (such as the Greater Bay Area). Because of the large sample size needed to perform this analysis, only the Registered Nurse role group received this adjustment. See the [HCAI Modeling Methodology](#) for additional details.

Multiple measures of supply and demand are presented below: the raw difference between estimated supply and demand (Supply-Demand Gap), the Gap per 100k (Supply-Demand Gap/(County's Population/100,000)), and the Gap Percentage (Supply-Demand Gap/Demand). Each of these values provides important context to understanding the shortage or surplus of providers within a given area and relative to statewide trends. The raw Supply-Demand Gap indicates the basic difference between the estimated supply and demand and gives a picture of the sheer additional number of providers needed to meet demand. The Gap Percentage illustrates this same shortage on a standardized scale, which allows for direct comparison of severity between geographies and roles. The Gap per 100k provides population context but does not allow for comparison between roles or role groups and does not account for different utilization rates between counties, so comparisons between geographies is unequal. For example, a county may have the highest Gap per 100k without having the highest Gap Percentage.

Supply and Demand projections are provided for the Registered Nursing role group only; future work will include the expansion of our modeling projections to all roles and role groups at the statewide, regional, and county levels.

Figure B-1: Registered Nurse: Supply & Demand Data – 2025



Northern & Sierra region are facing a shortage of -25% or more. In contrast, the Sacramento Area region is experiencing the highest regional level surplus at just over 10%, while Alpine County (46.4%) and Sierra County (23.5%) are experiencing the two highest county level surpluses. This combination of shortages and surpluses within the same region suggests an issue with maldistribution among Registered Nursing providers.

Relative to population size, the Northern & Sierra region faces the largest shortage of providers with a gap of -227.5 per 100k and holds the top 10 highest county level shortages statewide. In contrast, the Sacramento Area region faces the highest regional surplus at 81.6 per 100k.

In terms of raw provider counts, Los Angeles County has the highest regional and county level shortage at -8,188.2 providers, more than double the next highest county level shortage. The Sacramento region has the highest regional level surplus with 1,974.3 providers, and Sacramento County has the highest county level surplus at 1,914 providers.

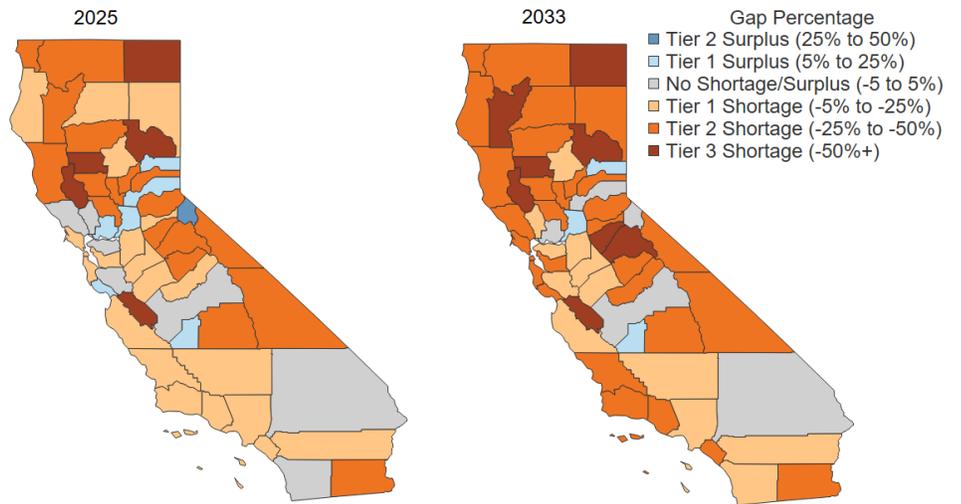
Table B-1: Registered Nurse: Supply & Demand Data – 2025

Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	2,526.0	2,684.5	-158.5	-35.9	-5.9%
	San Benito	118.8	298.7	-179.9	-276.6	-60.2%
	San Luis Obispo	2,023.7	2,355.7	-332.0	-118.2	-14.1%
	Santa Barbara	3,046.4	3,510.9	-464.4	-103.1	-13.2%
	Santa Cruz	1,707.7	1,622.5	85.2	32.7	5.3%
	Ventura	4,885.3	5,606.5	-721.2	-87.4	-12.9%
	Region Total	14,307.9	16,078.9	-1,770.9	-76.2	-11.0%
Greater Bay Area	Alameda	10,607.3	12,497.1	-1,889.8	-114.2	-15.1%
	Contra Costa	7,434.3	7,428.1	6.2	0.5	0.1%
	Marin	1,887.5	2,084.0	-196.5	-77.4	-9.4%
	Napa	1,534.5	1,463.7	70.8	53.0	4.8%
	San Francisco	10,451.3	11,251.9	-800.5	-93.8	-7.1%
	San Mateo	3,814.4	4,330.7	-516.4	-69.1	-11.9%
	Santa Clara	16,681.3	16,645.1	36.3	1.9	0.2%
	Solano	3,608.7	2,978.4	630.3	140.8	21.2%
	Sonoma	3,638.3	3,642.1	-3.9	-0.8	-0.1%
	Region Total	59,657.7	62,321.2	-2,663.5	-34.9	-4.3%
Inland Empire	Riverside	12,178.2	12,991.9	-813.7	-33.2	-6.3%
	San Bernardino	15,857.9	15,626.3	231.7	10.6	1.5%
	Region Total	28,036.1	28,618.1	-582.0	-12.5	-2.0%
LA County	Los Angeles	70,337.4	78,525.6	-8,188.2	-84.0	-10.4%
	Region Total	70,337.4	78,525.6	-8,188.2	-84.0	-10.4%
Northern & Sierra	Alpine	10.0	6.8	3.2	272.3	46.4%
	Amador	257.2	315.9	-58.7	-145.6	-18.6%
	Butte	2,015.9	2,170.4	-154.5	-75.2	-7.1%
	Calaveras	124.0	235.6	-111.6	-251.6	-47.4%
	Colusa	79.3	110.1	-30.8	-140.2	-28.0%
	Del Norte	147.7	243.5	-95.8	-373.1	-39.3%
	Glenn	27.9	152.3	-124.4	-452.5	-81.7%

	Humboldt	1,007.5	1,208.1	-200.6	-149.1	-16.6%
	Inyo	124.9	193.7	-68.8	-370.2	-35.5%
	Lake	247.6	551.3	-303.8	-464.6	-55.1%
	Lassen	139.0	161.1	-22.1	-82.6	-13.7%
	Mariposa	44.3	75.4	-31.1	-185.5	-41.3%
	Mendocino	516.5	813.2	-296.6	-334.3	-36.5%
	Modoc	26.4	94.6	-68.2	-813.2	-72.1%
	Mono	81.8	120.7	-38.9	-295.3	-32.3%
	Nevada	656.2	834.7	-178.5	-179.5	-21.4%
	Plumas	85.3	210.4	-125.1	-676.8	-59.4%
	Shasta	1,632.3	2,009.6	-377.3	-212.4	-18.8%
	Sierra	19.8	16.0	3.8	120.8	23.5%
	Siskiyou	232.6	329.9	-97.3	-229.6	-29.5%
	Sutter	226.7	308.9	-82.2	-83.4	-26.6%
	Tehama	227.0	342.3	-115.2	-179.3	-33.7%
	Trinity	39.0	77.0	-38.0	-240.5	-49.4%
	Tuolumne	417.1	704.7	-287.6	-537.4	-40.8%
	Yuba	768.2	1,045.3	-277.0	-326.5	-26.5%
	Region Total	9,154.5	12,331.6	-3,177.1	-227.5	-25.8%
Orange County	Orange	21,234.1	22,796.7	-1,562.6	-49.7	-6.9%
	Region Total	21,234.1	22,796.7	-1,562.6	-49.7	-6.9%
Sacramento	El Dorado	813.6	1,066.6	-253.1	-135.6	-23.7%
	Placer	4,698.7	4,031.5	667.2	160.7	16.6%
	Sacramento	14,636.3	12,722.3	1,914.0	119.9	15.0%
	Yolo	684.9	1,038.7	-353.8	-160.4	-34.1%
	Region Total	20,833.5	18,859.2	1,974.3	81.6	10.5%
San Diego Area	Imperial	734.7	1,025.2	-290.5	-159.2	-28.3%
	San Diego	26,603.3	26,345.8	257.5	7.7	1.0%
	Region Total	27,337.9	27,371.0	-33.0	-0.9	-0.1%
San Joaquin Valley	Fresno	7,016.8	6,986.4	30.4	3.0	0.4%
	Kern	4,863.0	5,597.0	-734.0	-81.0	-13.1%
	Kings	766.7	717.0	49.7	32.1	6.9%
	Madera	1,280.9	1,571.8	-290.9	-180.7	-18.5%
	Merced	900.2	1,114.5	-214.3	-74.7	-19.2%
	San Joaquin	4,557.9	5,027.3	-469.4	-59.4	-9.3%
	Stanislaus	4,413.5	4,660.9	-247.4	-45.5	-5.3%
	Tulare	2,113.9	2,997.6	-883.6	-184.8	-29.5%
Region Total	25,912.9	28,672.4	-2,759.5	-63.6	-9.6%	
Statewide	276,812.0	295,574.7	-18,762.6	-47.9	-6.3%	
 Tier 1 Shortage (-5% to -25%) Tier 2 Shortage (-25% to -50%) Tier 3 Shortage (-50% or more) No Shortage/Surplus (-5% to 5%) Tier 1 Surplus (5% to 25%) Tier 2 Surplus (25% to 50%) Tier 3 Surplus (50% or more)						
Note: Table values are rounded to the first decimal place for display purposes only.						

Figure B-2: Registered Nurse: Supply & Demand – Projections

Our model projects that the overall statewide shortage of Registered Nurses will increase from -6.3% to nearly -17% by 2033, resulting in a need for 61,141 additional providers to meet the state’s demand. At the regional level, all regions except the Sacramento Area are projected to face a shortage of -5% or more, with the Northern & Sierra region facing the highest shortage at -38.2%.



At the county level, 51 counties are projected to face a shortage of -5% or more, with the counties within the Northern & Sierra region impacted the most. By 2033, 15 counties will face a tier 2 shortage (-25% to -50%), and seven counties will face a tier 3 shortage (-50% or more). Only three counties statewide are projected to have a surplus of providers by 2033.

Relative to population size, the Northern & Sierra region is projected to face the largest shortage of providers with a gap of -445.3 per 100k, nearly twice that of the next highest regional shortage, and have 18 of the top 20 highest county level shortages. In contrast, the Sacramento Area region is projected to face the lowest regional level shortage at -16.5 per 100k.

In terms of raw provider counts, the Greater Bay Area is projected to surpass Los Angeles County for the highest regional shortage at -17,628 providers. However, Los Angeles County will still maintain the highest county level shortage at -17,357.7 providers. The Sacramento Area region is estimated to have the lowest regional level shortage at -422.1 providers, and Sacramento County is estimated to have the highest county level surplus at 937.7 providers.

Table B-2: Registered Nurse: Supply & Demand Data – Projections

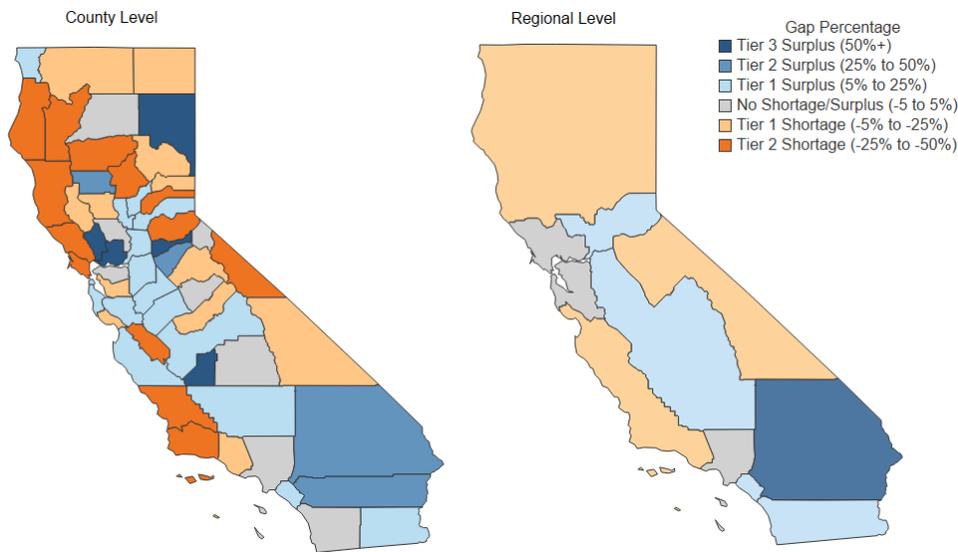
Region	County	2023			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	-158.5	-35.9	-5.9%	-552.8	-118.4	-16.6%
	San Benito	-179.9	-276.6	-60.2%	-242.5	-353.6	-64.9%
	San Luis Obispo	-332.0	-118.2	-14.1%	-952.2	-330.9	-29.9%
	Santa Barbara	-464.4	-103.1	-13.2%	-996.3	-211.7	-22.9%
	Santa Cruz	85.2	32.7	5.3%	-505.6	-192.6	-21.2%
	Ventura	-721.2	-87.4	-12.9%	-1,874.1	-226.9	-25.8%
	Region Total	-1,770.9	-76.2	-11.0%	-5,123.6	-215.0	-24.5%
Greater Bay Area	Alameda	-1,889.8	-114.2	-15.1%	-5,541.4	-322.8	-32.2%
	Contra Costa	6.2	0.5	0.1%	-1,826.2	-154.5	-18.3%
	Marin	-196.5	-77.4	-9.4%	-1,235.1	-490.2	-37.4%
	Napa	70.8	53.0	4.8%	-153.2	-115.6	-8.3%
	San Francisco	-800.5	-93.8	-7.1%	-2,965.7	-337.1	-20.6%
	San Mateo	-516.4	-69.1	-11.9%	-2,279.9	-301.8	-35.3%
	Santa Clara	36.3	1.9	0.2%	-2,634.7	-134.0	-12.6%
	Solano	630.3	140.8	21.2%	125.0	26.0	3.2%
Sonoma	-3.9	-0.8	-0.1%	-1,116.7	-235.7	-21.8%	

	Region Total	-2,663.5	-34.9	-4.3%	-17,628.0	-224.9	-21.2%
Inland Empire	Riverside	-813.7	-33.2	-6.3%	-2,323.6	-90.6	-14.7%
	San Bernardino	231.7	10.6	1.5%	324.6	14.3	1.9%
	Region Total	-582.0	-12.5	-2.0%	-1,999.0	-41.3	-6.1%
LA County	Los Angeles	-8,188.2	-84.0	-10.4%	-17,357.7	-178.5	-18.3%
	Region Total	-8,188.2	-84.0	-10.4%	-17,357.7	-178.5	-18.3%
Northern & Sierra	Alpine	3.2	272.3	46.4%	0.3	29.0	3.2%
	Amador	-58.7	-145.6	-18.6%	-189.6	-447.7	-40.0%
	Butte	-154.5	-75.2	-7.1%	-529.4	-251.5	-19.3%
	Calaveras	-111.6	-251.6	-47.4%	-298.9	-690.9	-68.7%
	Colusa	-30.8	-140.2	-28.0%	-59.1	-272.0	-40.5%
	Del Norte	-95.8	-373.1	-39.3%	-146.9	-597.8	-47.4%
	Glenn	-124.4	-452.5	-81.7%	-176.2	-665.3	-85.1%
	Humboldt	-200.6	-149.1	-16.6%	-473.2	-348.2	-30.0%
	Inyo	-68.8	-370.2	-35.5%	-74.6	-412.2	-35.2%
	Lake	-303.8	-464.6	-55.1%	-480.1	-780.3	-63.7%
	Lassen	-22.1	-82.6	-13.7%	-73.1	-303.6	-32.3%
	Mariposa	-31.1	-185.5	-41.3%	-24.3	-150.7	-33.1%
	Mendocino	-296.6	-334.3	-36.5%	-488.4	-547.9	-46.2%
	Modoc	-68.2	-813.2	-72.1%	-69.8	-887.6	-70.5%
	Mono	-38.9	-295.3	-32.3%	-77.4	-614.8	-46.4%
	Nevada	-178.5	-179.5	-21.4%	-592.0	-606.1	-45.1%
	Plumas	-125.1	-676.8	-59.4%	-226.9	-1,313.5	-70.7%
	Shasta	-377.3	-212.4	-18.8%	-690.8	-400.4	-27.7%
	Sierra	3.8	120.8	23.5%	2.8	93.3	14.7%
	Siskiyou	-97.3	-229.6	-29.5%	-234.0	-579.0	-47.8%
	Sutter	-82.2	-83.4	-26.6%	-153.8	-147.1	-38.1%
	Tehama	-115.2	-179.3	-33.7%	-224.8	-345.9	-47.3%
	Trinity	-38.0	-240.5	-49.4%	-62.0	-385.9	-59.0%
Tuolumne	-287.6	-537.4	-40.8%	-520.3	-972.7	-53.2%	
Yuba	-277.0	-326.5	-26.5%	-357.0	-391.5	-29.6%	
	Region Total	-3,177.1	-227.5	-25.8%	-6,219.4	-445.3	-38.2%
Orange County	Orange	-1,562.6	-49.7	-6.9%	-6,038.9	-187.8	-20.5%
	Region Total	-1,562.6	-49.7	-6.9%	-6,038.9	-187.8	-20.5%
Sacramento Area	El Dorado	-253.1	-135.6	-23.7%	-825.2	-431.5	-47.9%
	Placer	667.2	160.7	16.6%	81.5	18.3	1.6%
	Sacramento	1,914.0	119.9	15.0%	937.7	55.4	6.2%
	Yolo	-353.8	-160.4	-34.1%	-616.1	-262.2	-44.9%
	Region Total	1,974.3	81.6	10.5%	-422.1	-16.5	-1.8%
San Diego Area	Imperial	-290.5	-159.2	-28.3%	-398.8	-205.9	-32.9%
	San Diego	257.5	7.7	1.0%	-2,782.1	-81.0	-8.7%
	Region Total	-33.0	-0.9	-0.1%	-3,180.8	-87.7	-9.6%
San Joaquin Valley	Fresno	30.4	3.0	0.4%	-109.9	-10.4	-1.4%
	Kern	-734.0	-81.0	-13.1%	-656.2	-70.8	-10.9%
	Kings	49.7	32.1	6.9%	74.1	45.7	9.6%
	Madera	-290.9	-180.7	-18.5%	-369.7	-220.3	-20.8%
	Merced	-214.3	-74.7	-19.2%	-191.1	-63.9	-16.1%
	San Joaquin	-469.4	-59.4	-9.3%	-616.5	-72.8	-10.9%
	Stanislaus	-247.4	-45.5	-5.3%	-418.3	-75.2	-7.9%
	Tulare	-883.6	-184.8	-29.5%	-884.1	-177.9	-27.5%
	Region Total	-2,759.5	-63.6	-9.6%	-3,171.7	-70.3	-10.0%
Statewide		-18,762.6	-47.9	-6.3%	-61,141.1	-152.5	-16.7%

■ Tier 1 Shortage (-5% to -25%)
■ No Shortage/Surplus (-5% to 5%)
■ Tier 1 Surplus (5% to 25%)
■ Tier 2 Shortage (-25% to -50%)
■ Tier 2 Surplus (25% to 50%)
■ Tier 3 Shortage (-50% or more)
■ Tier 3 Surplus (50% or more)

Note: Table values are rounded to the first decimal place for display purposes only.

Figure B-3: Vocational Nurse: Supply & Demand Data – 2025



Overall, the statewide surplus of Vocational Nurses is just at 6.5%, an estimated surplus of 4,422 providers. At the regional level, the Central Coast and Northern & Sierra regions are facing the largest shortages, at -13.6% and -6.5% respectively. Three counties within the Central Coast region are facing a shortage of -25% or more, while five counties in the Northern & Sierra region are facing a shortage of -25% or more. In contrast, the Inland

Empire region is experiencing the highest regional level surplus at just under 43%, while Lassen County is experiencing the highest county level surplus at more than 200%. This combination of extreme shortages and extreme surpluses within the same region, as well as between regions, suggests an issue with maldistribution among Vocational Nursing providers.

Relative to population size, the Central Coast region faces the largest shortage of providers with a gap of -20.4 per 100k, while the Northern & Sierra region holds the six highest county level shortages statewide. In contrast, the Inland Empire region is experiencing the highest regional surplus at 69.6 per 100k.

In terms of raw provider counts, Los Angeles County has the highest regional and county level shortages at -469 providers, nearly double the next highest county level shortage. The Inland Empire region has the highest regional level surplus with 3,231 providers, while San Bernardino County has the highest county level surplus at 1,620 providers.

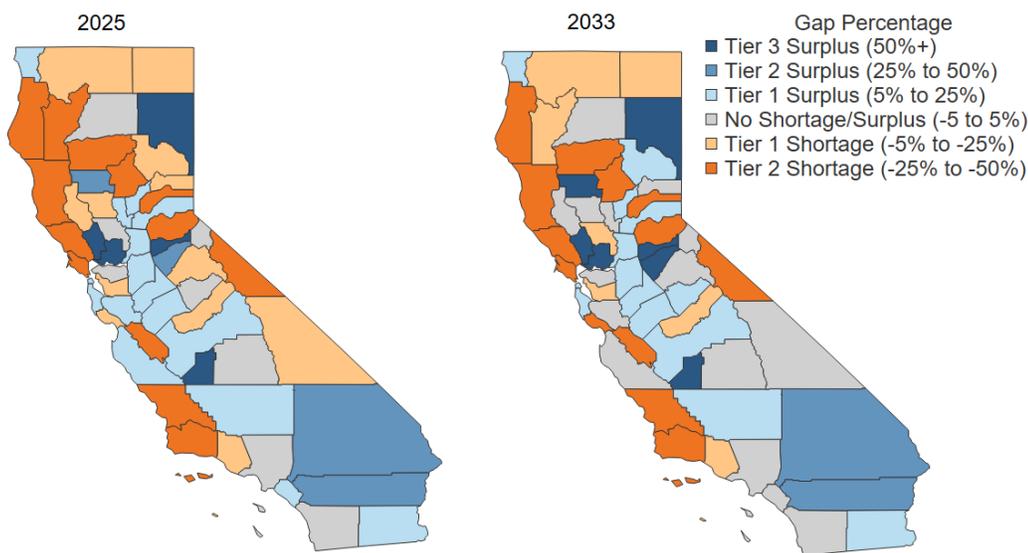
Table B-3: Vocational Nurse: Supply & Demand Data – 2025

Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	565.9	524.5	41.4	9.4	7.9%
	San Benito	33.5	47.6	-14.2	-21.8	-29.7%
	San Luis Obispo	333.9	466.2	-132.3	-47.1	-28.4%
	Santa Barbara	561.7	763.9	-202.2	-44.9	-26.5%
	Santa Cruz	243.7	298.5	-54.8	-21.0	-18.4%
	Ventura	1,259.5	1,371.3	-111.8	-13.6	-8.2%
	Region Total		2,998.3	3,472.2	-473.9	-20.4
Greater Bay Area	Alameda	2,353.3	2,649.8	-296.5	-17.9	-11.2%
	Contra Costa	1,757.6	1,695.6	62.1	5.4	3.7%
	Marin	314.0	410.7	-96.7	-38.1	-23.5%
	Napa	261.0	158.1	102.9	77.0	65.1%
	San Francisco	1,041.2	953.3	87.9	10.3	9.2%
	San Mateo	963.2	895.8	67.4	9.0	7.5%

	Santa Clara	2,596.9	2,408.6	188.2	9.8	7.8%
	Solano	756.4	433.4	323.0	72.2	74.5%
	Sonoma	536.2	702.5	-166.4	-34.9	-23.7%
	Region Total	10,579.7	10,307.8	271.9	3.6	2.6%
Inland Empire	Riverside	5,134.0	3,523.1	1,610.9	65.7	45.7%
	San Bernardino	5,628.2	4,008.1	1,620.0	73.9	40.4%
	Region Total	10,762.2	7,531.2	3,231.0	69.6	42.9%
LA County	Los Angeles	22,935.0	23,404.1	-469.0	-4.8	-2.0%
	Region Total	22,935.0	23,404.1	-469.0	-4.8	-2.0%
Northern & Sierra	Alpine	1.0	1.0	0.0	0.3	0.3%
	Amador	70.9	35.0	35.9	89.1	102.6%
	Butte	394.3	503.6	-109.3	-53.2	-21.7%
	Calaveras	67.7	46.3	21.4	48.2	46.2%
	Colusa	53.4	59.6	-6.2	-28.3	-10.4%
	Del Norte	77.3	68.4	8.9	34.6	13.0%
	Glenn	85.1	58.8	26.3	95.6	44.7%
	Humboldt	112.0	182.9	-70.9	-52.7	-38.8%
	Inyo	46.9	52.0	-5.1	-27.5	-9.8%
	Lake	104.0	122.8	-18.8	-28.8	-15.3%
	Lassen	99.0	30.5	68.5	255.9	200+%*
	Mariposa	30.7	29.4	1.3	8.0	4.6%
	Mendocino	107.4	163.3	-55.9	-63.0	-34.2%
	Modoc	24.9	30.4	-5.5	-65.1	-18.0%
	Mono	7.0	13.8	-6.8	-51.5	-49.3%
	Nevada	128.4	162.2	-33.7	-33.9	-20.8%
	Plumas	67.6	73.3	-5.7	-30.7	-7.7%
	Shasta	559.4	543.8	15.6	8.8	2.9%
	Sierra	4.0	4.3	-0.3	-10.4	-7.5%
	Siskiyou	73.6	87.8	-14.2	-33.5	-16.2%
	Sutter	193.5	180.7	12.8	13.0	7.1%
	Tehama	53.5	86.3	-32.8	-51.0	-38.0%
Trinity	13.5	18.1	-4.6	-28.8	-25.2%	
Tuolumne	110.0	123.5	-13.6	-25.3	-11.0%	
Yuba	89.7	75.2	14.5	17.1	19.3%	
	Region Total	2,574.9	2,753.0	-178.1	-12.7	-6.5%
Orange County	Orange	5,837.4	5,542.2	295.2	9.4	5.3%
	Region Total	5,837.4	5,542.2	295.2	9.4	5.3%
Sacramento	El Dorado	126.7	190.6	-63.9	-34.3	-33.5%
	Placer	686.4	572.5	113.9	27.4	19.9%
	Sacramento	2,624.3	2,208.5	415.8	26.0	18.8%
	Yolo	212.6	219.9	-7.3	-3.3	-3.3%
	Region Total	3,650.0	3,191.5	458.5	19.0	14.4%
San Diego Area	Imperial	290.8	228.8	62.0	34.0	27.1%
	San Diego	5,161.8	4,964.2	197.7	5.9	4.0%
	Region Total	5,452.7	5,193.0	259.7	7.4	5.0%

San Joaquin Valley	Fresno	2,121.6	1,761.4	360.2	35.4	20.4%
	Kern	1,614.2	1,403.9	210.3	23.2	15.0%
	Kings	324.0	153.2	170.8	110.2	111.5%
	Madera	187.9	214.5	-26.6	-16.5	-12.4%
	Merced	420.2	350.8	69.4	24.2	19.8%
	San Joaquin	1,369.6	1,222.2	147.5	18.6	12.1%
	Stanislaus	1,147.5	1,059.8	87.6	16.1	8.3%
	Tulare	853.5	846.2	7.3	1.5	0.9%
	Region Total	8,038.6	7,012.1	1,026.5	23.7	14.6%
Statewide	72,828.8	68,407.0	4,421.8	11.3	6.5%	
<ul style="list-style-type: none"> Tier 1 Shortage (-5% to -25%) Tier 2 Shortage (-25% to -50%) Tier 3 Shortage (-50% or more) No Shortage/Surplus (-5% to 5%) Tier 1 Surplus (5% to 25%) Tier 2 Surplus (25% to 50%) Tier 3 Surplus (50% or more) 						
*Surplus percentages are capped at 200%.						
Note: Table values are rounded to the first decimal place for display purposes only.						

Figure B-4: Vocational Nurse: Supply & Demand Data – Projections



Our model projects that the overall statewide surplus of Vocational Nurses will decrease from 6.5% to 4.9% by 2033, resulting in a small surplus of 3,623.7 providers. At the regional level, only the Central Coast is projected to face a shortage of -5% or more. At the county level, 20 counties are projected to face a shortage of -5% or

more, with the counties within the Central Coast region impacted the most. By 2033, 9 counties will face a tier 2 shortage (-25% to -50%), and no counties will face a tier 3 shortage (-50% or more). Twenty-two counties statewide are projected to have a surplus of providers by 2033.

Relative to population size, the Central Coast is the only region projected to face a shortage of providers with a gap of -24.2 per 100k. In contrast, the Inland Empire region is projected to have the highest regional level surplus at -67.1 per 100k.

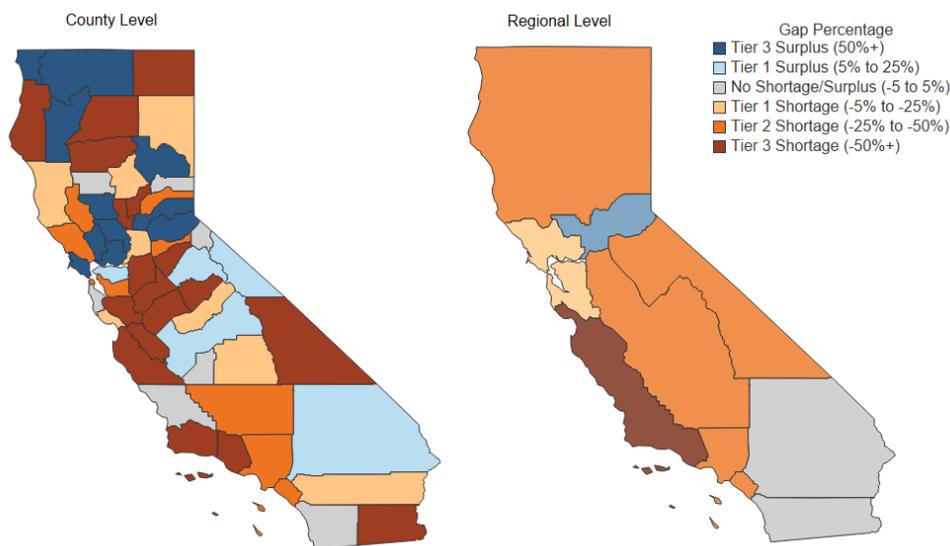
In terms of raw provider counts, the Central Coast is projected to have the highest regional shortage at -575.8 providers. However, Los Angeles County is projected to have highest county level shortage at -627.1 providers. The Inland Empire region is estimated to have the highest regional level surplus at 3,246.6 providers, and San Bernardino County is estimated to have the highest county level surplus at 1,660 providers.

Table B-4: Vocational Nurse: Supply & Demand Data – Projections

Region	County	2025			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	41.4	9.4	7.9%	28.4	6.1	4.9%
	San Benito	-14.2	-21.8	-29.7%	-14.5	-21.1	-28.8%
	San Luis Obispo	-132.3	-47.1	-28.4%	-157.7	-54.8	-30.6%
	Santa Barbara	-202.2	-44.9	-26.5%	-230.0	-48.9	-27.7%
	Santa Cruz	-54.8	-21.0	-18.4%	-72.5	-27.6	-21.7%
	Ventura	-111.8	-13.6	-8.2%	-129.6	-15.7	-8.8%
	Region Total	-473.9	-20.4	-13.6%	-575.8	-24.2	-15.2%
Greater Bay Area	Alameda	-296.5	-17.9	-11.2%	-368.3	-21.5	-12.8%
	Contra Costa	62.1	5.4	3.7%	40.6	3.4	2.2%
	Marin	-96.7	-38.1	-23.5%	-107.5	-42.7	-24.3%
	Napa	102.9	77.0	65.1%	108.5	81.9	63.6%
	San Francisco	87.9	10.3	9.2%	63.6	7.2	6.1%
	San Mateo	67.4	9.0	7.5%	59.8	7.9	6.2%
	Santa Clara	188.2	9.8	7.8%	113.3	5.8	4.3%
	Solano	323.0	72.2	74.5%	321.9	67.0	66.0%
	Sonoma	-166.4	-34.9	-23.7%	-192.2	-40.6	-25.1%
	Region Total	271.9	3.6	2.6%	39.8	0.5	0.4%
Inland Empire	Riverside	1,610.9	65.7	45.7%	1,586.6	61.8	40.6%
	San Bernardino	1,620.0	73.9	40.4%	1,660.0	72.9	38.1%
	Region Total	3,231.0	69.6	42.9%	3,246.6	67.1	39.3%
LA County	Los Angeles	-469.0	-4.8	-2.0%	-627.1	-6.4	-2.5%
	Region Total	-469.0	-4.8	-2.0%	-627.1	-6.4	-2.5%
Northern & Sierra	Alpine	0.0	0.3	0.3%	0.0	-0.7	-0.8%
	Amador	35.9	89.1	102.6%	39.6	93.5	107.7%
	Butte	-109.3	-53.2	-21.7%	-120.6	-57.3	-22.2%
	Calaveras	21.4	48.2	46.2%	27.3	63.0	60.3%
	Colusa	-6.2	-28.3	-10.4%	-1.0	-4.6	-1.7%
	Del Norte	8.9	34.6	13.0%	17.1	69.7	26.2%
	Glenn	26.3	95.6	44.7%	34.1	128.9	60.2%
	Humboldt	-70.9	-52.7	-38.8%	-78.5	-57.8	-39.4%
	Inyo	-5.1	-27.5	-9.8%	-0.7	-3.9	-1.4%
	Lake	-18.8	-28.8	-15.3%	-4.0	-6.5	-3.4%
	Lassen	68.5	255.9	200+%*	78.6	326.4	200+%*
	Mariposa	1.3	8.0	4.6%	4.3	26.6	15.2%
	Mendocino	-55.9	-63.0	-34.2%	-61.2	-68.7	-34.7%
	Modoc	-5.5	-65.1	-18.0%	-2.0	-26.0	-7.2%
	Mono	-6.8	-51.5	-49.3%	-5.2	-41.0	-39.2%
	Nevada	-33.7	-33.9	-20.8%	-36.3	-37.1	-20.9%
	Plumas	-5.7	-30.7	-7.7%	4.1	23.5	5.9%
	Shasta	15.6	8.8	2.9%	20.5	11.9	3.6%
	Sierra	-0.3	-10.4	-7.5%	-0.1	-4.6	-3.3%
	Siskiyou	-14.2	-33.5	-16.2%	-5.7	-14.0	-6.8%
Sutter	12.8	13.0	7.1%	8.8	8.4	4.5%	

	Tehama	-32.8	-51.0	-38.0%	-29.9	-46.0	-34.3%
	Trinity	-4.6	-28.8	-25.2%	-3.7	-22.8	-20.0%
	Tuolumne	-13.6	-25.3	-11.0%	-5.2	-9.7	-4.2%
	Yuba	14.5	17.1	19.3%	15.0	16.4	18.6%
	Region Total	-178.1	-12.7	-6.5%	-104.7	-7.5	-3.7%
Orange County	Orange	295.2	9.4	5.3%	226.2	7.0	3.8%
	Region Total	295.2	9.4	5.3%	226.2	7.0	3.8%
Sacramento	El Dorado	-63.9	-34.3	-33.5%	-74.9	-39.2	-35.6%
	Placer	113.9	27.4	19.9%	110.4	24.8	17.7%
	Sacramento	415.8	26.0	18.8%	367.8	21.7	15.1%
	Yolo	-7.3	-3.3	-3.3%	-30.5	-13.0	-11.8%
	Region Total	458.5	19.0	14.4%	372.8	14.5	10.6%
San Diego Area	Imperial	62.0	34.0	27.1%	57.7	29.8	22.8%
	San Diego	197.7	5.9	4.0%	84.3	2.5	1.6%
	Region Total	259.7	7.4	5.0%	142.1	3.9	2.5%
San Joaquin Valley	Fresno	360.2	35.4	20.4%	343.6	32.5	17.8%
	Kern	210.3	23.2	15.0%	173.2	18.7	11.1%
	Kings	170.8	110.2	111.5%	174.0	107.3	100.5%
	Madera	-26.6	-16.5	-12.4%	-35.0	-20.9	-14.8%
	Merced	69.4	24.2	19.8%	52.1	17.4	13.1%
	San Joaquin	147.5	18.6	12.1%	125.0	14.8	9.3%
	Stanislaus	87.6	16.1	8.3%	77.7	14.0	6.8%
	Tulare	7.3	1.5	0.9%	-6.7	-1.3	-0.7%
	Region Total	1,026.5	23.7	14.6%	903.9	20.0	11.7%
Statewide		4,421.8	11.3	6.5%	3,623.7	9.0	4.9%

Figure B-5: Nurse Anesthetist: Supply & Demand Data – 2025



Overall, the statewide shortage of Nurse Anesthetists is -20.5%, an estimated shortage of 441 providers. Four regions are facing a tier 2 shortage (-25% to -50%), and one region is facing a tier 3 shortage (-50% or more). Four of the six counties within the Central Coast region are facing a shortage of -50% or more, with San Benito County facing one of the highest county level shortages statewide (-100%). In contrast, the Sacramento Area region is

experiencing the highest regional level surplus at just over 23%, while the Northern & Sierra region has the top four county level surpluses as well as six counties with a shortage of -100%. This combination

of extreme shortages and extreme surpluses within the same region, as well as between neighboring regions, suggests an issue with maldistribution among Nurse Anesthetist providers.

Relative to population size, the Central Coast region faces the largest shortage of providers with a gap of -2.8 per 100k, while Shasta County holds the highest county level shortage at -6.6 per 100k. In contrast, the Sacramento Area region is experiencing the highest regional surplus of providers at 1.3 per 100k, and Siskiyou County has the highest county level surplus at 20.6 per 100k.

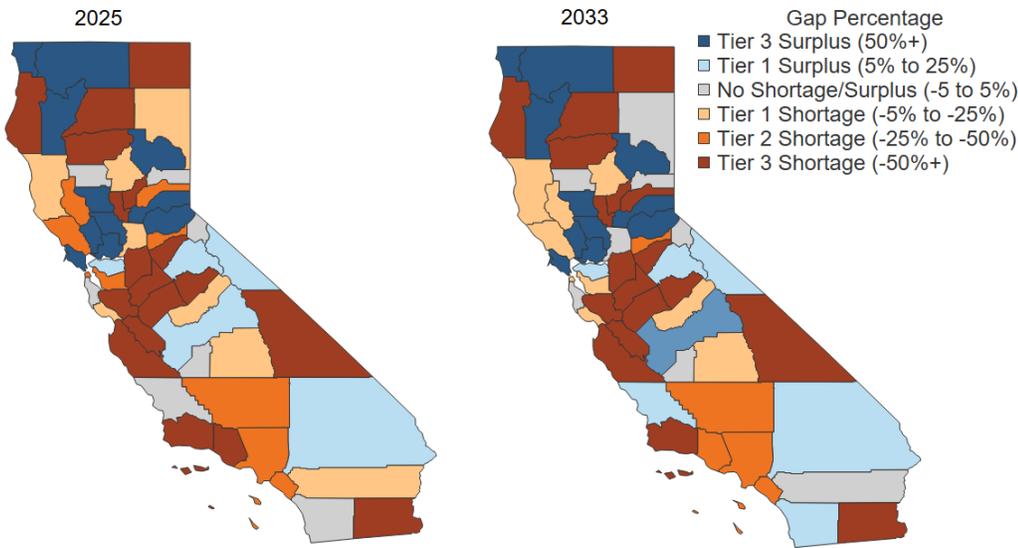
In terms of raw provider counts, Los Angeles County has the highest regional and county level shortages at -170.1 providers. The Sacramento Area region has the highest regional level surplus with 30.4 providers, while San Bernardino County has the highest county level surplus at 16.9 providers.

Table B-5: Nurse Anesthetist: Supply & Demand Data – 2025

Region	County	Estimated Supply (FTE)	Estimated Demand (FTE)	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	3.0	18.2	-15.2	-3.4	-83.5%
	San Benito	0.0	0.6	-0.6	-1.0	-100.0%
	San Luis Obispo	18.0	17.9	0.1	0.0	0.6%
	Santa Barbara	6.0	26.6	-20.6	-4.6	-77.5%
	Santa Cruz	9.0	11.2	-2.2	-0.8	-19.4%
	Ventura	26.0	52.2	-26.2	-3.2	-50.2%
	Region Total	62.0	126.8	-64.8	-2.8	-51.1%
Greater Bay Area	Alameda	65.0	86.1	-21.1	-1.3	-24.5%
	Contra Costa	66.0	56.8	9.2	0.8	16.2%
	Marin	22.0	12.3	9.7	3.8	78.2%
	Napa	11.0	5.0	6.0	4.5	121.6%
	San Francisco	54.0	67.8	-13.8	-1.6	-20.3%
	San Mateo	34.0	35.3	-1.3	-0.2	-3.8%
	Santa Clara	51.0	129.8	-78.8	-4.1	-60.7%
	Solano	37.0	21.8	15.2	3.4	69.5%
	Sonoma	18.0	23.3	-5.3	-1.1	-22.9%
	Region Total	358.0	438.3	-80.3	-1.1	-18.3%
Inland Empire	Riverside	96.0	104.8	-8.8	-0.4	-8.4%
	San Bernardino	114.0	97.1	16.9	0.8	17.4%
	Region Total	210.0	201.9	8.1	0.2	4.0%
LA County	Los Angeles	390.0	560.1	-170.1	-1.7	-30.4%
	Region Total	390.0	560.1	-170.1	-1.7	-30.4%
Northern & Sierra	Alpine	0.0	0.0	0.0	0.0	0.0%
	Amador	1.0	1.4	-0.4	-0.9	-27.2%
	Butte	12.0	14.7	-2.7	-1.3	-18.3%
	Calaveras	0.0	0.4	-0.4	-0.9	-100.0%
	Colusa	1.0	0.0	1.0	4.5	200+%*
	Del Norte	1.0	0.5	0.5	2.0	100.7%
	Glenn	0.0	0.0	0.0	0.0	0.0%
	Humboldt	1.0	5.1	-4.1	-3.1	-80.5%
	Inyo	0.0	0.3	-0.3	-1.8	-100.0%

	Lake	1.0	1.3	-0.3	-0.4	-21.1%
	Lassen	1.0	1.1	-0.1	-0.5	-11.4%
	Mariposa	0.0	0.8	-0.8	-4.9	-100.0%
	Mendocino	5.0	6.2	-1.2	-1.3	-19.1%
	Modoc	0.0	0.0	0.0	-0.4	-100.0%
	Mono	1.0	0.9	0.1	0.9	13.6%
	Nevada	2.0	3.8	-1.8	-1.8	-47.7%
	Plumas	1.0	0.1	0.9	4.8	200+%*
	Shasta	3.0	14.6	-11.6	-6.6	-79.5%
	Sierra	0.0	0.0	0.0	0.0	0.0%
	Siskiyou	10.0	1.3	8.7	20.6	200+%*
	Sutter	1.0	3.8	-2.8	-2.9	-73.9%
	Tehama	0.0	2.0	-2.0	-3.1	-100.0%
	Trinity	1.0	0.0	1.0	6.3	200+%*
	Tuolumne	4.0	3.5	0.5	0.9	12.9%
	Yuba	0.0	2.0	-2.0	-2.4	-100.0%
	Region Total	46.0	64.0	-18.0	-1.3	-28.1%
Orange County	Orange	161.0	239.8	-78.8	-2.5	-32.9%
	Region Total	161.0	239.8	-78.8	-2.5	-32.9%
Sacramento	El Dorado	21.0	6.1	14.9	8.0	200+%*
	Placer	40.0	26.0	14.0	3.4	53.6%
	Sacramento	86.0	91.8	-5.8	-0.4	-6.3%
	Yolo	14.0	6.6	7.4	3.3	110.6%
	Region Total	161.0	130.6	30.4	1.3	23.3%
San Diego Area	Imperial	1.0	5.4	-4.4	-2.4	-81.5%
	San Diego	173.0	173.3	-0.3	0.0	-0.1%
	Region Total	174.0	178.7	-4.7	-0.1	-2.6%
San Joaquin Valley	Fresno	72.0	60.4	11.6	1.1	19.1%
	Kern	26.0	42.1	-16.1	-1.8	-38.2%
	Kings	3.0	3.0	0.0	0.0	0.2%
	Madera	7.0	8.3	-1.3	-0.8	-15.2%
	Merced	1.0	10.5	-9.5	-3.3	-90.5%
	San Joaquin	12.0	27.7	-15.7	-2.0	-56.7%
	Stanislaus	8.0	36.1	-28.1	-5.2	-77.8%
	Tulare	18.0	21.2	-3.2	-0.7	-14.9%
	Region Total	147.0	209.3	-62.3	-1.4	-29.8%
Statewide	1,709.0	2,149.5	-440.5	-1.1	-20.5%	
 Tier 1 Shortage (-5% to -25%) Tier 2 Shortage (-25% to -50%) Tier 3 Shortage (-50% or more) No Shortage/Surplus (-5% to 5%) Tier 1 Surplus (5% to 25%) Tier 2 Surplus (25% to 50%) Tier 3 Surplus (50% or more)						
*Surplus percentages are capped at 200%.						
Note: Table values are rounded to the first decimal place for display purposes only.						

Figure B-6: Nurse Anesthetist: Supply & Demand Data – Projections



Our model projects that the overall statewide shortage of Nurse Anesthetists will decrease from -20.5% to -11.5% by 2033, resulting in a need for 258.4 additional providers to meet the state’s demand. At the regional level, six regions are projected to face a shortage of -5% or more, with the Central Coast region facing the highest

shortage at -44.8%. At the county level, 32 counties are projected to face a shortage of -5% or more. By 2033, 3 counties will face a tier 2 shortage (-25% to -50%), and 18 counties will face a tier 3 shortage (-50% or more). Thirteen counties statewide are projected to have a surplus of providers by 2033.

Relative to population size, the Central Coast region is projected to face the largest shortage of providers with a gap of -2.5 per 100k. In contrast, the Sacramento Area region is projected to face the highest regional level surplus at 2 providers per 100k.

In terms of raw provider counts, the LA County region is projected to have the highest region- and county-level shortage at -125.9 providers. The Sacramento Area region is estimated to have the highest regional level surplus at 51.9 providers, and San Bernardino County is estimated to have the highest county level surplus at 28.5 providers.

Table B-6: Nurse Anesthetist: Supply & Demand Data – Projections

Region	County	2025			2033		
		Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage	Supply-Demand Gap	Gap Per 100k Pop	Gap Percentage
Central Coast	Monterey	-15.2	-3.4	-83.5%	-15.9	-3.4	-79.9%
	San Benito	-0.6	-1.0	-100.0%	-0.7	-1.0	-100.0%
	San Luis Obispo	0.1	0.0	0.6%	1.7	0.6	9.2%
	Santa Barbara	-20.6	-4.6	-77.5%	-20.4	-4.3	-74.5%
	Santa Cruz	-2.2	-0.8	-19.4%	-1.2	-0.4	-9.5%
	Ventura	-26.2	-3.2	-50.2%	-22.8	-2.8	-42.4%
	Region Total	-64.8	-2.8	-51.1%	-59.2	-2.5	-44.8%
Greater Bay Area	Alameda	-21.1	-1.3	-24.5%	-17.1	-1.0	-18.3%
	Contra Costa	9.2	0.8	16.2%	16.5	1.4	27.3%
	Marin	9.7	3.8	78.2%	12.7	5.0	95.3%
	Napa	6.0	4.5	121.6%	6.4	4.9	115.5%
	San Francisco	-13.8	-1.6	-20.3%	-6.5	-0.7	-9.2%
	San Mateo	-1.3	-0.2	-3.8%	1.4	0.2	3.7%
	Santa Clara	-78.8	-4.1	-60.7%	-75.1	-3.8	-56.0%

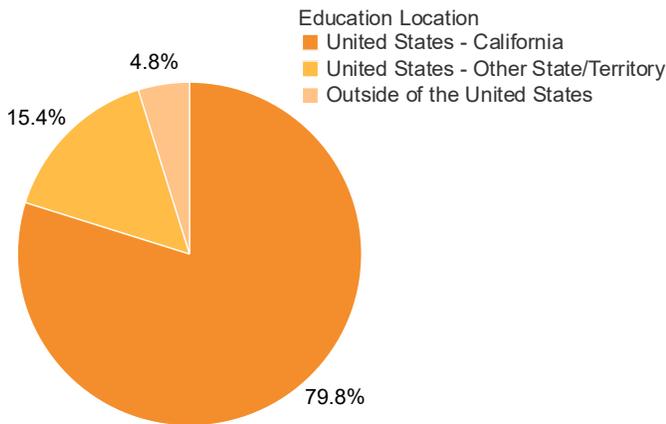
	Solano	15.2	3.4	69.5%	20.6	4.3	88.0%
	Sonoma	-5.3	-1.1	-22.9%	-3.8	-0.8	-15.3%
	Region Total	-80.3	-1.1	-18.3%	-44.9	-0.6	-9.7%
Inland Empire	Riverside	-8.8	-0.4	-8.4%	-2.6	-0.1	-2.3%
	San Bernardino	16.9	0.8	17.4%	28.5	1.3	27.6%
	Region Total	8.1	0.2	4.0%	26.0	0.5	12.0%
LA County	Los Angeles	-170.1	-1.7	-30.4%	-125.9	-1.3	-21.7%
	Region Total	-170.1	-1.7	-30.4%	-125.9	-1.3	-21.7%
Northern & Sierra	Alpine	0.0	0.0	0.0%	0.0	0.0	0.0%
	Amador	-0.4	-0.9	-27.2%	-0.4	-1.0	-30.8%
	Butte	-2.7	-1.3	-18.3%	-1.0	-0.5	-6.9%
	Calaveras	-0.4	-0.9	-100.0%	-0.4	-0.9	-100.0%
	Colusa	1.0	4.5	200+%*	1.0	4.6	200+%*
	Del Norte	0.5	2.0	100.7%	0.5	2.1	109.8%
	Glenn	0.0	0.0	0.0%	0.0	0.0	0.0%
	Humboldt	-4.1	-3.1	-80.5%	-4.9	-3.6	-83.0%
	Inyo	-0.3	-1.8	-100.0%	-0.3	-1.8	-100.0%
	Lake	-0.3	-0.4	-21.1%	-0.2	-0.3	-16.1%
	Lassen	-0.1	-0.5	-11.4%	0.0	-0.1	-1.4%
	Mariposa	-0.8	-4.9	-100.0%	-0.8	-4.9	-100.0%
	Mendocino	-1.2	-1.3	-19.1%	-0.6	-0.7	-9.5%
	Modoc	0.0	-0.4	-100.0%	0.0	-0.4	-100.0%
	Mono	0.1	0.9	13.6%	0.2	1.3	19.0%
	Nevada	-1.8	-1.8	-47.7%	-2.3	-2.3	-53.2%
	Plumas	0.9	4.8	200+%*	0.9	5.2	200+%*
	Shasta	-11.6	-6.6	-79.5%	-10.8	-6.2	-72.9%
	Sierra	0.0	0.0	0.0%	0.0	0.0	0.0%
	Siskiyou	8.7	20.6	200+%*	10.8	26.7	200+%*
	Sutter	-2.8	-2.9	-73.9%	-3.3	-3.2	-76.9%
	Tehama	-2.0	-3.1	-100.0%	-2.0	-3.1	-100.0%
	Trinity	1.0	6.3	200+%*	1.0	6.2	200+%*
	Tuolumne	0.5	0.9	12.9%	0.5	0.9	12.9%
	Yuba	-2.0	-2.4	-100.0%	-2.2	-2.4	-100.0%
	Region Total	-18.0	-1.3	-28.1%	-14.5	-1.0	-21.8%
Orange County	Orange	-78.8	-2.5	-32.9%	-56.5	-1.8	-23.1%
	Region Total	-78.8	-2.5	-32.9%	-56.5	-1.8	-23.1%
Sacramento	El Dorado	14.9	8.0	200+%*	18.1	9.4	200+%*
	Placer	14.0	3.4	53.6%	19.9	4.5	73.7%
	Sacramento	-5.8	-0.4	-6.3%	4.2	0.3	4.4%
	Yolo	7.4	3.3	110.6%	9.7	4.1	132.9%
	Region Total	30.4	1.3	23.3%	51.9	2.0	37.9%
San Diego Area	Imperial	-4.4	-2.4	-81.5%	-5.1	-2.6	-83.5%
	San Diego	-0.3	0.0	-0.1%	20.1	0.6	11.1%
	Region Total	-4.7	-0.1	-2.6%	15.1	0.4	8.1%
	Fresno	11.6	1.1	19.1%	22.5	2.1	36.5%

San Joaquin Valley	Kern	-16.1	-1.8	-38.2%	-14.5	-1.6	-32.6%
	Kings	0.0	0.0	0.2%	0.1	0.1	3.5%
	Madera	-1.3	-0.8	-15.2%	-0.7	-0.4	-8.6%
	Merced	-9.5	-3.3	-90.5%	-10.7	-3.6	-91.5%
	San Joaquin	-15.7	-2.0	-56.7%	-16.9	-2.0	-54.7%
	Stanislaus	-28.1	-5.2	-77.8%	-27.6	-5.0	-75.4%
	Tulare	-3.2	-0.7	-14.9%	-2.5	-0.5	-11.1%
	Region Total	-62.3	-1.4	-29.8%	-50.4	-1.1	-22.9%
Statewide	-440.5	-1.1	-20.5%	-258.4	-0.6	-11.5%	
<p> ■ Tier 1 Shortage (-5% to -25%) ■ No Shortage/Surplus (-5% to 5%) ■ Tier 1 Surplus (5% to 25%) ■ Tier 2 Shortage (-25% to -50%) ■ Tier 2 Surplus (25% to 50%) ■ Tier 3 Shortage (-50% or more) ■ Tier 3 Surplus (50% or more) </p>							
<p>*Surplus percentages are capped at 200%.</p> <p>Note: Table values are rounded to the first decimal place for display purposes only.</p>							

Section C: Allied Health, All Figures

The professions included in the Allied Health section align with publications from the Health Resources and Services Administration’s (HRSA) Bureau of Health Workforce (BHW) and include the following: Advanced Practice Pharmacist, Audiologist, Chiropractor, Doctor of Podiatric Medicine, Hearing Aid Dispenser, Hearing Aid Dispenser Trainee, Licensed Acupuncturist, Occupational Therapist, Occupational Therapy Assistant, Optometrist, Pharmacy Technician, Physical Therapist, Physical Therapist Assistant, Polysomnographic Technician, Polysomnographic Technologist, Polysomnographic Trainee, Registered Contact Lens Dispenser, Registered Pharmacist, Registered Psychological Testing Technician, Registered Spectacle Lens Dispenser, Respiratory Care Practitioner, Speech Pathologist, and Speech-Language Pathology Assistant.

Figure C-1: Education Location: Allied Health



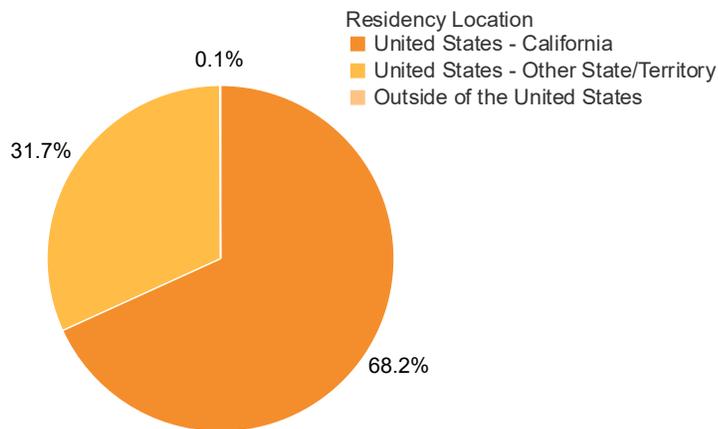
Over 95% of Allied Health licensees completed their education in the U.S., with nearly 80% receiving their initial qualifying degree within California. Notable license types within the Allied Health workforce include Audiologists with only 52% receiving their initial qualifying degree in California, and Physical Therapists with over 10% receiving their initial qualifying degree from outside the U.S.

Table C-1: Education Location: Allied Health

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Advanced Practice Pharmacist	74.9%	21.3%	3.8%
Audiologist	51.8%	47.7%	0.5%
Chiropractor	87.5%	11.8%	0.7%
Doctor Of Podiatric Medicine	73.1%	26.8%	0.1%
Hearing Aid Dispenser	86.1%	9.5%	4.4%
Hearing Aid Dispenser - Trainee	86.4%	7.1%	6.5%
Licensed Acupuncturist	90.1%	3.3%	6.5%
Occupational Therapist	72.3%	22.2%	5.5%
Occupational Therapy Assistant	86.5%	13.3%	0.2%
Optometrist	75.5%	24.0%	0.4%
Pharmacy Technician	92.3%	3.5%	4.2%
Physical Therapist	66.4%	23.6%	10.0%
Physical Therapist Assistant	82.8%	9.8%	7.5%
Registered Contact Lens Dispenser	93.3%	3.8%	2.8%
Registered Pharmacist	66.7%	26.0%	7.3%
Registered Spectacle Lens Dispenser	91.1%	5.6%	3.3%
Respiratory Care Practitioner	93.3%	6.3%	0.4%
Speech Pathologist	68.9%	28.6%	2.5%
Speech-Language Pathology Assistant	92.2%	7.5%	0.3%
Allied Health Group	79.8%	15.4%	4.8%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-2: Residency Location: Allied Health



Doctors of Podiatric Medicine are the only license type within the Allied Health workforce that requires residency. Nearly 100% of those licensees reported completing their residency within the U.S., and almost 70% completed their residency somewhere in California.

Table C-2: Residency Location: Allied Health

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Doctor Of Podiatric Medicine	68.2%	31.7%	0.1%
Allied Health Group	68.2%	31.7%	0.1%

Figure C-3: Employment Status: Allied Health

Over 90% of Allied Health licensees are actively working or seeking work, 1.5% are not working and not seeking work, 1.3% have already retired and just over four percent are working in a different field, the highest of any Health workforce group. Notable license types within the Allied Health workforce include Pharmacy Technicians with almost 12% actively working in a different field, and nearly three percent of Doctors of Podiatric Medicine, Licensed Acupuncturists and Speech Pathologists reporting already being retired despite their active license status. These metrics will be used in the future to calculate more accurate supply data for each license type.

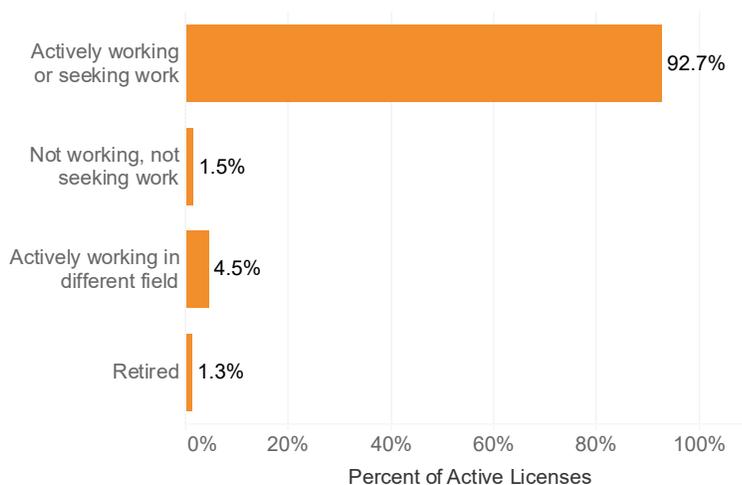


Table C-3: Employment Status: Allied Health

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Advanced Practice Pharmacist	98.1%	0.4%	1.1%	0.4%
Audiologist	95.4%	1.4%	1.0%	2.3%
Chiropractor	94.3%	1.2%	2.4%	2.1%
Doctor Of Podiatric Medicine	96.7%	0.3%	0.3%	2.6%
Hearing Aid Dispenser	97.0%	0.8%	1.3%	0.8%
Hearing Aid Dispenser - Trainee	100.0%	0.0%	0.0%	0.0%
Licensed Acupuncturist	88.7%	2.4%	6.2%	2.7%
Occupational Therapist	95.8%	2.0%	1.5%	0.7%
Occupational Therapy Assistant	95.6%	1.8%	2.4%	0.1%
Optometrist	97.4%	0.9%	0.5%	1.2%
Pharmacy Technician	85.7%	1.8%	11.8%	0.7%
Physical Therapist	96.1%	1.4%	1.4%	1.1%
Physical Therapist Assistant	96.2%	1.1%	2.4%	0.3%
Registered Contact Lens Dispenser	97.0%	0.7%	2.1%	0.3%
Registered Pharmacist	93.0%	1.5%	2.8%	2.6%
Registered Spectacle Lens Dispenser	96.1%	0.6%	2.7%	0.6%
Respiratory Care Practitioner	97.2%	0.7%	1.7%	0.4%
Speech Pathologist	93.9%	2.2%	1.4%	2.5%
Speech-Language Pathology Assistant	93.6%	1.8%	4.2%	0.3%
Allied Health Group	92.7%	1.5%	4.5%	1.3%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-4: Full-Time Equivalent Metrics: Allied Health

Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Allied Health licensees spend the highest number of hours per week on Patient Care (27.1 hours), and the least amount of time per week on Research (3.8 hours). Notable license types within the Allied Health workforce include Pharmacy Technicians, who reported spending the least amount of time on Patient Care at only 20.1 hours per week, and Hearing Aid Dispenser - Trainees who reported the highest amounts of time per week on Training (26.0 hours), the highest of any license type across the health workforce. These metrics will be used in the future to calculate more accurate supply and demand modeling.

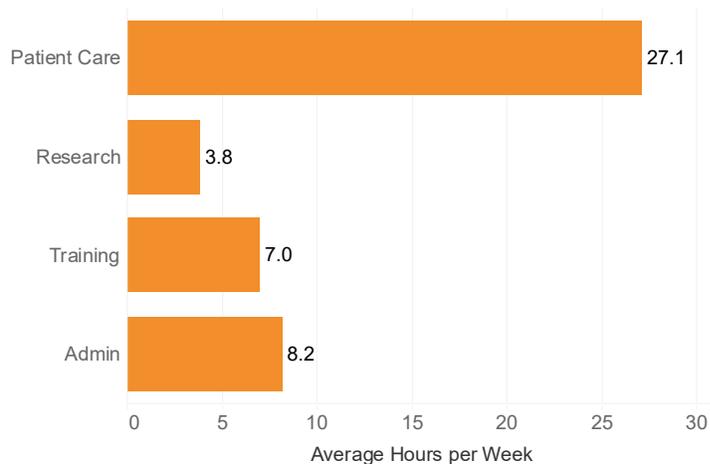


Table C-4: Full-Time Equivalent Metrics: Allied Health

License Name	Patient Care	Research	Training	Admin
Advanced Practice Pharmacist	26.3	3.7	7.7	12.1
Audiologist	30.5	2.2	5.8	8.4
Chiropractor	27.1	4.1	6.0	9.4
Doctor Of Podiatric Medicine	33.6	2.8	6.0	8.6
Hearing Aid Dispenser	32.9	4.9	7.8	10.2
Hearing Aid Dispenser - Trainee	32.6	8.5	26.0	16.1
Licensed Acupuncturist	25.5	5.8	5.8	8.2
Occupational Therapist	28.2	2.4	5.5	7.9
Occupational Therapy Assistant	31.9	4.1	7.2	5.8
Optometrist	31.4	1.6	3.5	6.5
Pharmacy Technician	20.1	6.3	9.2	9.8
Physical Therapist	31.2	1.8	5.1	7.2
Physical Therapist Assistant	33.3	3.3	6.7	4.0
Registered Contact Lens Dispenser	29.5	5.8	10.3	11.0
Registered Pharmacist	25.2	3.1	6.8	9.0
Registered Spectacle Lens Dispenser	28.0	5.7	10.1	13.1
Respiratory Care Practitioner	32.2	4.3	9.1	6.2
Speech Pathologist	27.2	3.0	5.8	8.7
Speech-Language Pathology Assistant	29.1	4.7	5.8	5.8
Allied Health Group	27.1	3.8	7.0	8.2

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-5: Retirement Estimates: Allied Health

Among Allied Health licensees who reported actively working in a position that required their license, or were actively seeking work in their field, 76.1% estimated retiring in 11 or more years, the highest of any health workforce group, and only 3.1% estimated retiring within the next two years. Of note are Chiropractors, Doctors of Podiatric Medicine and Audiologists, with nearly 20% of licensees estimating retiring in the next five years. These metrics will be crucial for calculating more accurate supply and demand models for each license type. In addition, this information may be useful in helping to identify which areas are in most need of funding to maintain the supply of Allied Health licensees across the state.

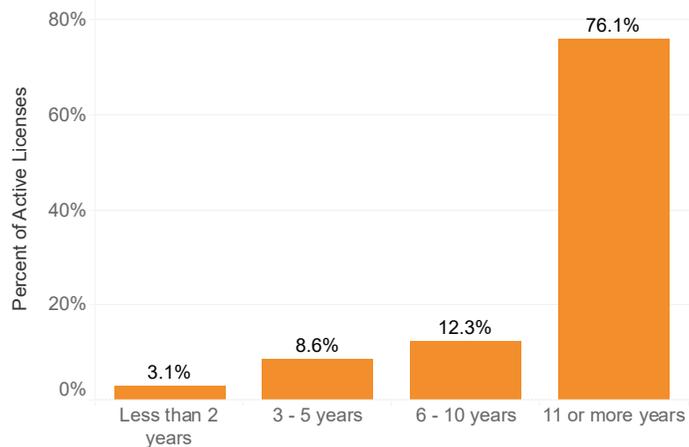
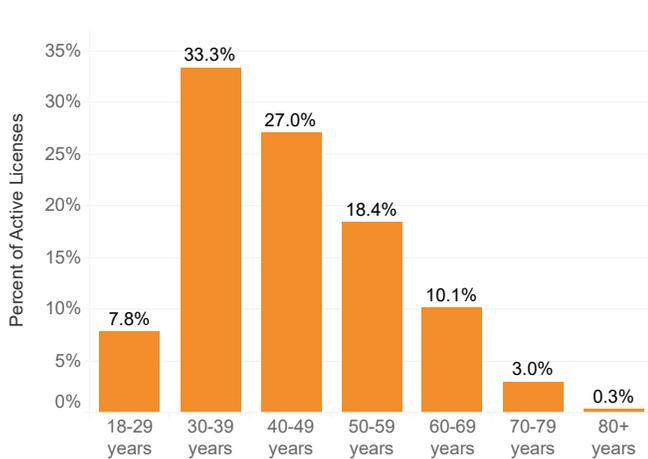


Table C-5: Retirement Estimates: Allied Health

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Advanced Practice Pharmacist	0.5%	5.0%	9.0%	85.6%
Audiologist	5.3%	12.8%	14.4%	67.5%
Chiropractor	4.8%	15.4%	21.9%	58.0%
Doctor Of Podiatric Medicine	5.9%	15.2%	15.6%	63.3%
Hearing Aid Dispenser	2.3%	11.6%	15.1%	71.0%
Hearing Aid Dispenser - Trainee	1.4%	0.0%	6.5%	92.1%
Licensed Acupuncturist	3.6%	13.8%	20.4%	62.3%
Occupational Therapist	3.2%	7.5%	11.3%	78.0%
Occupational Therapy Assistant	2.5%	6.3%	11.5%	79.7%
Optometrist	4.6%	12.7%	16.1%	66.6%
Pharmacy Technician	1.8%	5.8%	9.3%	83.1%
Physical Therapist	3.4%	9.4%	13.6%	73.5%
Physical Therapist Assistant	2.6%	7.7%	12.2%	77.6%
Registered Contact Lens Dispenser	3.3%	10.3%	13.2%	73.2%
Registered Pharmacist	3.7%	9.4%	12.5%	74.4%
Registered Spectacle Lens Dispenser	2.3%	9.0%	13.1%	75.7%
Respiratory Care Practitioner	3.3%	7.7%	11.4%	77.6%
Speech Pathologist	3.2%	8.8%	10.8%	77.3%
Speech-Language Pathology Assistant	1.3%	3.0%	5.7%	90.1%
Allied Health Group	3.1%	8.6%	12.3%	76.1%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-6: Age Distribution: Allied Health



Overall, nearly 80% of Allied Health licensees are between the ages of 30 and 59 years old, with 13.4% over the age of 59 and just under eight percent under the age of 30, the highest percentage among all health workforce groups. License types with younger licensees include Hearing Aid Dispenser Trainees, Polysomnographic Technicians, and Speech-Language Pathology Assistants with over 60% of licensees under the age of 40. License types with older licensees include Acupuncturists, Chiropractors and Doctors of Podiatric Medicine with more than 30% over the age of 59.

Table C-6: Age Distribution: Allied Health

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Advanced Practice Pharmacist	2.2%	39.7%	39.3%	13.5%	4.5%	0.9%	0.0%
Audiologist	5.4%	31.2%	23.1%	20.5%	14.1%	5.6%	0.2%
Chiropractor	3.5%	21.1%	19.8%	25.5%	21.1%	8.4%	0.6%
Doctor Of Podiatric Medicine	0.0%	21.6%	23.8%	23.5%	16.6%	13.0%	1.5%
Hearing Aid Dispenser	3.1%	24.7%	26.3%	22.2%	18.5%	4.3%	0.8%
Hearing Aid Dispenser - Trainee	28.4%	33.8%	24.3%	13.5%	0.0%	0.0%	0.0%
Licensed Acupuncturist	0.4%	10.2%	24.3%	29.0%	22.3%	12.1%	1.7%
Occupational Therapist	7.1%	38.1%	25.0%	18.0%	9.4%	2.4%	0.1%
Occupational Therapy Assistant	7.5%	40.2%	25.4%	17.2%	8.5%	1.1%	0.0%
Optometrist	1.2%	28.7%	24.2%	21.8%	14.8%	7.8%	1.5%
Pharmacy Technician	16.4%	33.9%	27.4%	15.4%	6.0%	0.8%	0.0%
Physical Therapist	4.4%	35.2%	26.7%	20.0%	11.3%	2.3%	0.2%
Physical Therapist Assistant	6.9%	37.4%	24.6%	19.2%	10.8%	1.2%	0.0%
Polysomnographic Technician	18.5%	50.0%	20.4%	5.6%	5.6%	0.0%	0.0%
Polysomnographic Technologist	1.6%	22.1%	39.1%	25.7%	9.9%	1.2%	0.4%
Polysomnographic Trainee	54.2%	8.3%	29.2%	8.3%	0.0%	0.0%	0.0%
Registered Contact Lens Dispenser	7.0%	26.5%	27.8%	19.6%	15.2%	3.5%	0.4%
Registered Pharmacist	3.7%	36.3%	29.8%	18.0%	8.9%	3.1%	0.4%
Registered Psychological Testing Technician	17.4%	43.5%	26.1%	8.7%	4.3%	0.0%	0.0%
Registered Spectacle Lens Dispenser	10.2%	29.9%	24.7%	17.9%	12.9%	3.8%	0.7%
Respiratory Care Practitioner	6.6%	31.7%	31.2%	18.6%	10.3%	1.6%	0.0%
Speech Pathologist	6.0%	38.2%	27.2%	16.3%	8.5%	3.3%	0.4%
Speech-Language Pathology Assistant	24.3%	42.3%	19.2%	9.0%	4.6%	0.6%	0.0%
Allied Health Group	7.8%	33.3%	27.0%	18.4%	10.1%	3.0%	0.3%

Figure C-7: Race/Ethnicity: Allied Health

Across the Allied Health workforce, Hispanic, Any Race and Black, Non-Hispanic licensees are the most underrepresented when compared to California’s population, with only four license types at or above the population average for Hispanic, Any Race and only one license type at or above the population average for Black, Non-Hispanic. Conversely, Asian, Non-Hispanic licensees are the most well represented with 17 license types at or above the population average. White, Non-Hispanic licensees are well represented in the Allied Health workforce on average but still make up more than 50% of all licensees in six different license types.

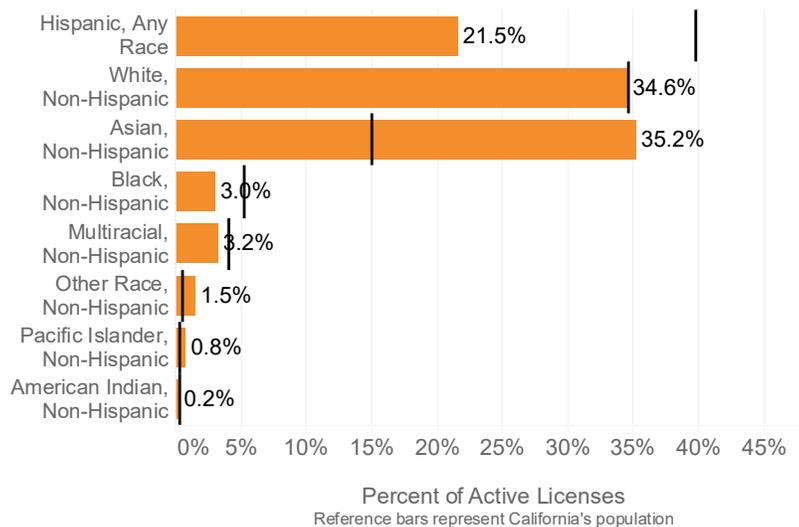
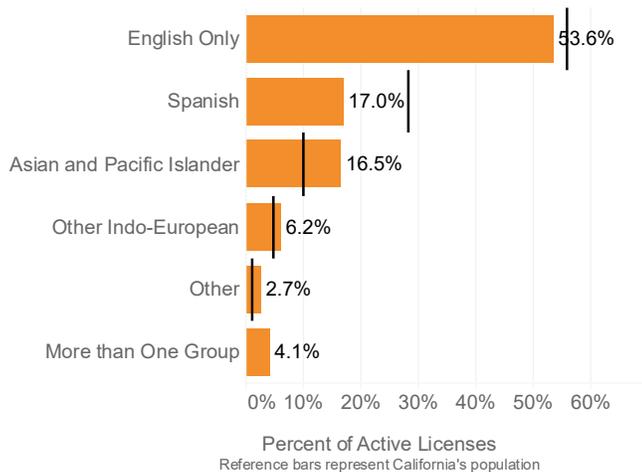


Table C-7: Race/Ethnicity: Allied Health

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Advanced Practice Pharmacist	4.8%	31.1%	57.0%	1.9%	3.2%	1.7%	0.3%	0.0%
Audiologist	12.3%	62.6%	16.9%	3.8%	3.3%	1.1%	0.1%	0.0%
Chiropractor	12.1%	61.4%	18.6%	1.8%	3.3%	2.1%	0.5%	0.3%
Doctor Of Podiatric Medicine	5.6%	55.9%	29.7%	2.3%	3.1%	2.6%	0.5%	0.3%
Hearing Aid Dispenser	28.5%	51.1%	11.2%	2.0%	4.9%	1.7%	0.1%	0.4%
Hearing Aid Dispenser - Trainee	37.6%	42.5%	17.4%	0.0%	1.7%	0.0%	0.8%	0.0%
Licensed Acupuncturist	4.7%	31.0%	59.6%	0.6%	2.5%	1.3%	0.2%	0.1%
Occupational Therapist	12.7%	46.6%	32.7%	2.1%	3.8%	1.3%	0.6%	0.1%
Occupational Therapy Assistant	27.3%	34.1%	28.3%	4.4%	3.8%	1.1%	1.0%	0.2%
Optometrist	6.1%	31.3%	57.3%	0.8%	2.5%	1.5%	0.5%	0.1%
Pharmacy Technician	42.1%	19.5%	28.0%	4.4%	2.9%	1.6%	1.3%	0.2%
Physical Therapist	10.2%	50.6%	31.5%	1.6%	4.1%	1.3%	0.5%	0.1%
Physical Therapist Assistant	22.9%	35.8%	31.2%	3.0%	4.3%	1.3%	1.2%	0.2%
Registered Contact Lens Dispenser	44.1%	29.2%	17.2%	3.0%	3.2%	2.0%	1.1%	0.2%
Registered Pharmacist	4.2%	27.1%	61.8%	2.5%	2.3%	1.8%	0.3%	0.1%
Registered Spectacle Lens Dispenser	43.1%	30.0%	18.0%	2.9%	3.6%	1.6%	0.7%	0.1%
Respiratory Care Practitioner	30.7%	28.8%	27.2%	5.6%	3.8%	1.6%	2.1%	0.3%
Speech Pathologist	18.0%	59.7%	15.1%	2.3%	3.5%	1.1%	0.1%	0.1%
Speech-Language Pathology Assistant	55.2%	27.3%	9.9%	3.2%	3.1%	0.9%	0.2%	0.1%
Allied Health Group	21.5%	34.6%	35.2%	3.0%	3.2%	1.5%	0.8%	0.2%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-8: Languages Spoken: Allied Health



On average, Spanish is the most underrepresented language in the Allied Health workforce when compared to California's population, with only five license types at or above the population average. Asian and Pacific Islander languages are represented well above the population average overall, however this is largely driven by the high rates among Licensed Acupuncturists, Registered Pharmacists and Advanced Practice Pharmacists, as these languages are at or below the population average in eight of the individual license types. Similarly, Other Indo-European languages are also represented above the population average in the Allied Health workforce overall, largely driven by the

high rates among Registered Pharmacists, Advanced Practice Pharmacists, and Doctors of Podiatric Medicine. Within the Allied Health workforce, Other Indo-European languages are still underrepresented in more than half of the individual license types.

Table C-8: Languages Spoken: Allied Health

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Advanced Practice Pharmacist	48.7%	5.8%	23.9%	11.2%	6.1%	4.2%
Audiologist	68.7%	11.4%	5.5%	4.1%	5.5%	4.8%
Chiropractor	61.2%	15.0%	9.8%	6.5%	2.0%	5.4%
Doctor Of Podiatric Medicine	57.1%	13.3%	10.3%	9.3%	2.1%	7.8%
Hearing Aid Dispenser	65.1%	19.7%	6.0%	3.2%	2.2%	3.8%
Hearing Aid Dispenser - Trainee	49.5%	32.5%	6.7%	4.6%	5.2%	1.5%
Licensed Acupuncturist	35.5%	5.5%	48.1%	4.1%	0.9%	5.9%
Occupational Therapist	66.1%	11.9%	12.3%	4.3%	1.7%	3.7%
Occupational Therapy Assistant	55.5%	21.3%	13.7%	3.1%	1.6%	4.8%
Optometrist	47.7%	16.4%	17.2%	4.9%	1.7%	12.1%
Pharmacy Technician	42.7%	29.9%	15.6%	6.5%	2.7%	2.7%
Physical Therapist	63.7%	12.8%	11.8%	5.5%	1.3%	4.8%
Physical Therapist Assistant	54.6%	21.2%	13.1%	3.8%	1.3%	6.0%
Registered Contact Lens Dispenser	53.4%	29.1%	9.2%	3.9%	1.7%	2.7%
Registered Pharmacist	48.7%	3.8%	27.2%	10.7%	5.3%	4.4%
Registered Spectacle Lens Dispenser	50.7%	31.1%	9.5%	4.0%	1.8%	2.9%
Respiratory Care Practitioner	59.8%	18.2%	12.7%	5.0%	2.2%	2.1%
Speech Pathologist	72.3%	13.8%	4.2%	4.1%	2.6%	3.0%
Speech-Language Pathology Assistant	51.6%	35.0%	3.2%	2.5%	3.8%	3.8%
Grand Total	53.6%	17.0%	16.5%	6.2%	2.7%	4.1%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-9: Sexual Orientation: Allied Health

As a group, the majority (95.4%) of Allied Health licensees reported identifying as Straight or Heterosexual, and 2.2% reported identifying as Gay or Lesbian. Licensees identifying as Bisexual and Other were nearly even at just over one percent each. Within the Allied Health workforce, five license types reported identifying as Gay or Lesbian or Other at or above the workforce average, and nine reported identifying as Bisexual at or above the workforce average. Notably, Registered Spectacle Lens Dispensers, Registered Contact Lens Dispensers and Hearing Aid Dispenser – Trainees reported above averages rates for all three minority Sexual Orientations.

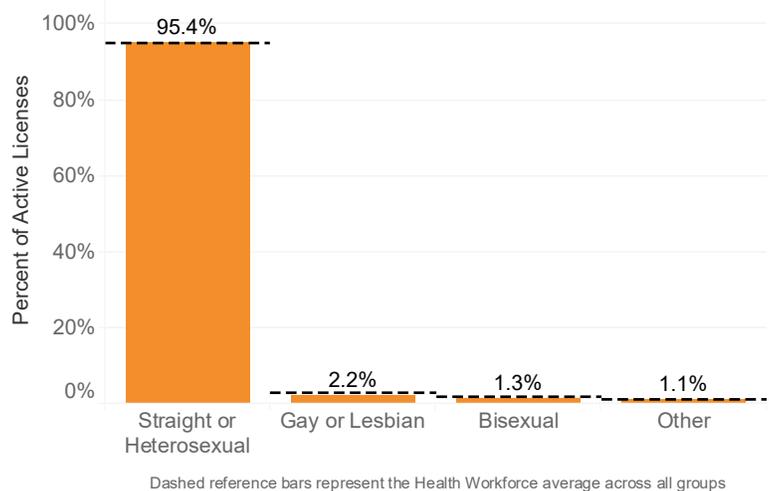
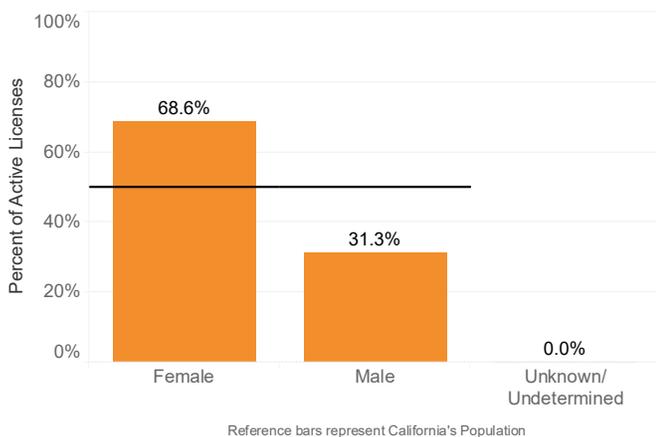


Table C-9: Sexual Orientation: Allied Health

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Advanced Practice Pharmacist	96.4%	2.9%	0.5%	0.2%
Audiologist	94.2%	2.6%	2.6%	0.5%
Chiropractor	96.2%	2.6%	0.7%	0.5%
Doctor Of Podiatric Medicine	98.0%	1.5%	0.2%	0.3%
Hearing Aid Dispenser	95.9%	2.3%	0.6%	1.3%
Hearing Aid Dispenser - Trainee	90.4%	4.1%	0.0%	5.6%
Licensed Acupuncturist	92.5%	2.5%	1.6%	3.3%
Occupational Therapist	94.7%	2.5%	2.0%	0.8%
Occupational Therapy Assistant	95.0%	2.4%	1.8%	0.7%
Optometrist	98.1%	1.2%	0.3%	0.3%
Pharmacy Technician	93.8%	2.4%	1.9%	1.9%
Physical Therapist	95.8%	2.7%	1.0%	0.5%
Physical Therapist Assistant	96.3%	2.4%	0.9%	0.4%
Registered Contact Lens Dispenser	90.7%	4.4%	1.7%	3.1%
Registered Pharmacist	96.9%	1.8%	0.7%	0.6%
Registered Spectacle Lens Dispenser	91.1%	4.1%	2.5%	2.3%
Respiratory Care Practitioner	96.7%	2.0%	0.8%	0.6%
Speech Pathologist	95.1%	2.2%	1.9%	0.7%
Speech-Language Pathology Assistant	95.6%	1.2%	2.3%	1.0%
Allied Health Group	95.4%	2.2%	1.3%	1.1%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-10: Sex at Birth: Allied Health



As a group, the majority (68.6%) of Allied Health licensees reported identifying as Female, and 31.3% reported identifying as Male. Less than 0.1% of Licensees identified as Unknown/Undetermined. Of note, over 86% of Occupational Therapists and 93% of Speech Pathologists and Speech-Language Pathology Assistants identified as Female Conversely, over 67% of Chiropractors and Doctors of Podiatric Medicine identified as Male, representing the two highest rates among all license types within the health workforce identifying as Male.

Table C-10: Sex at Birth: Allied Health

License Name	Female	Male	Unknown/Undetermined
Advanced Practice Pharmacist	67.0%	32.8%	0.2%
Audiologist	81.5%	18.5%	0.0%
Chiropractor	32.4%	67.5%	0.0%
Doctor Of Podiatric Medicine	31.8%	68.1%	0.1%
Hearing Aid Dispenser	55.1%	44.9%	0.0%
Hearing Aid Dispenser - Trainee	77.4%	22.6%	0.0%
Licensed Acupuncturist	63.6%	36.3%	0.1%
Occupational Therapist	86.6%	13.3%	0.0%
Occupational Therapy Assistant	76.7%	23.2%	0.1%
Optometrist	63.4%	36.5%	0.0%
Pharmacy Technician	76.1%	23.9%	0.1%
Physical Therapist	63.3%	36.7%	0.0%
Physical Therapist Assistant	53.7%	46.2%	0.1%
Registered Contact Lens Dispenser	64.0%	35.8%	0.3%
Registered Pharmacist	63.9%	36.1%	0.0%
Registered Spectacle Lens Dispenser	61.4%	38.5%	0.1%
Respiratory Care Practitioner	53.1%	46.8%	0.1%
Speech Pathologist	93.9%	6.1%	0.0%
Speech-Language Pathology Assistant	95.0%	5.0%	0.0%
Allied Health Group	68.6%	31.3%	0.0%
California's Population	50.0%	50.0%	N/A

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-11: Gender Identity: Allied Health

As a group, the majority (68.5%) of Allied Health licensees reported identifying as Female, and 31.2% reported identifying as Male. Licensees identifying as Transgender or not identifying as Male, Female or Transgender were even at 0.1% each. Of note, over 86% of Occupational Therapists and over 93% of Speech Pathologists and Speech-Language Pathology Assistants identified as Female, while over 67% of Chiropractors and Doctors of Podiatric Medicine identified as Male, the two highest rates among all license types within the health workforce identifying as Male.

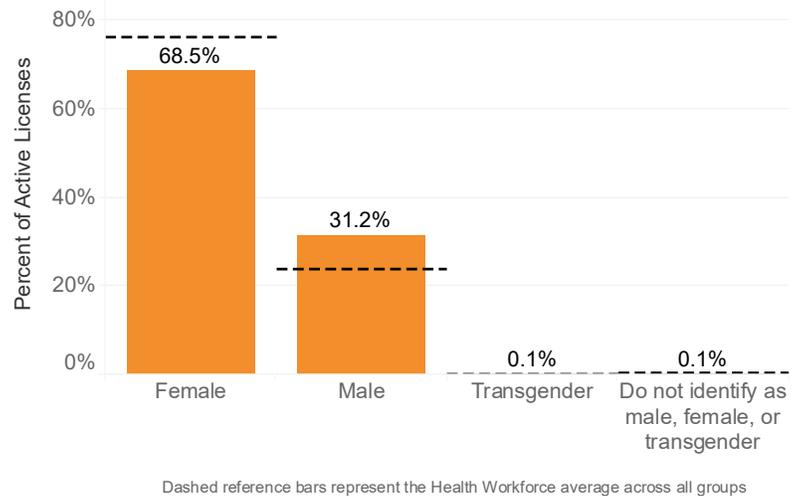
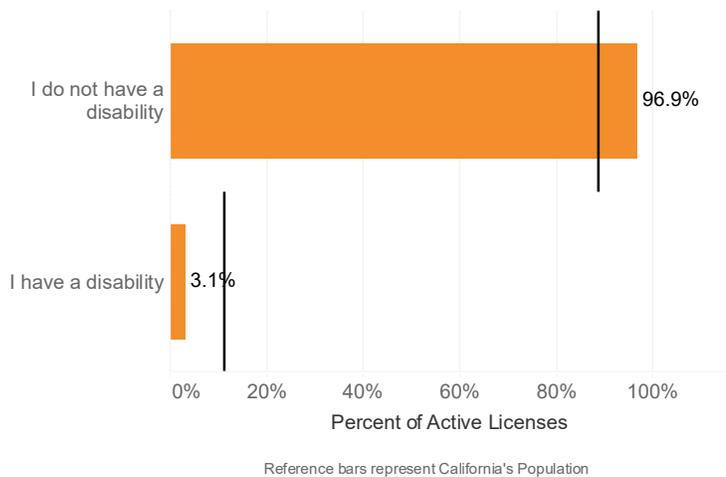


Table C-11: Gender Identity: Allied Health

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Advanced Practice Pharmacist	67.1%	32.5%	0.0%	0.4%
Audiologist	81.1%	18.5%	0.1%	0.3%
Chiropractor	32.3%	67.6%	0.1%	0.0%
Doctor Of Podiatric Medicine	31.8%	68.2%	0.0%	0.0%
Hearing Aid Dispenser	55.5%	44.3%	0.0%	0.3%
Hearing Aid Dispenser - Trainee	80.3%	19.7%	0.0%	0.0%
Licensed Acupuncturist	63.1%	36.3%	0.2%	0.4%
Occupational Therapist	86.5%	13.2%	0.1%	0.2%
Occupational Therapy Assistant	76.5%	23.2%	0.1%	0.1%
Optometrist	63.3%	36.5%	0.1%	0.1%
Pharmacy Technician	75.9%	23.8%	0.2%	0.2%
Physical Therapist	63.3%	36.5%	0.1%	0.1%
Physical Therapist Assistant	53.6%	46.3%	0.0%	0.1%
Registered Contact Lens Dispenser	66.1%	33.6%	0.1%	0.2%
Registered Pharmacist	63.8%	36.1%	0.0%	0.1%
Registered Spectacle Lens Dispenser	60.7%	38.7%	0.3%	0.3%
Respiratory Care Practitioner	53.0%	46.8%	0.1%	0.1%
Speech Pathologist	93.7%	6.0%	0.1%	0.1%
Speech-Language Pathology Assistant	94.4%	5.3%	0.2%	0.1%
Allied Health Group	68.5%	31.3%	0.1%	0.1%
Health Workforce Average	75.9%	23.8%	0.1%	0.2%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-12: Disability Status: Allied Health



On average, 96.9% of Allied Health licensees did not identify as having a disability, while 3.1% reported having a disability. Within the Allied Health workforce, Audiologists (7.1%), Hearing Aid Dispensers (5.2%), and Hearing Aid Dispenser – Trainees (4.5%) reported the highest rates of having a disability, while Optometrists reported the lowest at just over one percent.

Table C-12: Disability Status: Allied Health

License Name	I do not have a disability	I have a disability
Advanced Practice Pharmacist	97.6%	2.4%
Audiologist	92.9%	7.1%
Chiropractor	96.3%	3.7%
Doctor Of Podiatric Medicine	97.0%	3.0%
Hearing Aid Dispenser	94.8%	5.2%
Hearing Aid Dispenser - Trainee	95.5%	4.5%
Licensed Acupuncturist	97.4%	2.6%
Occupational Therapist	96.0%	4.0%
Occupational Therapy Assistant	96.9%	3.1%
Optometrist	98.5%	1.5%
Pharmacy Technician	96.3%	3.7%
Physical Therapist	98.0%	2.0%
Physical Therapist Assistant	97.6%	2.4%
Registered Contact Lens Dispenser	97.0%	3.0%
Registered Pharmacist	97.6%	2.4%
Registered Spectacle Lens Dispenser	96.1%	3.9%
Respiratory Care Practitioner	96.5%	3.5%
Speech Pathologist	96.2%	3.8%
Speech-Language Pathology Assistant	96.2%	3.8%
Allied Health Total	96.9%	3.1%
California's Population	88.7%	11.3%

Note: Polysomnographic Technologists, Polysomnographic Technicians, Polysomnographic Trainees, and Registered Psychological Testing Technicians are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure C-13: Active Licenses: Allied Health

As a group, the Los Angeles County region has the highest total number of Allied Health licenses in the state while the Northern & Sierra region has the fewest. Within the Allied Health workforce, Pharmacy Technicians make up the largest proportion, representing nearly 26% of all active licenses. In general, more specialized licenses (such as Polysomnographic Technicians) tend to have much lower license counts while more generalized licenses (such as Pharmacy Technicians) have substantially higher counts. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure C-15: Distribution Index: Allied Health](#)).

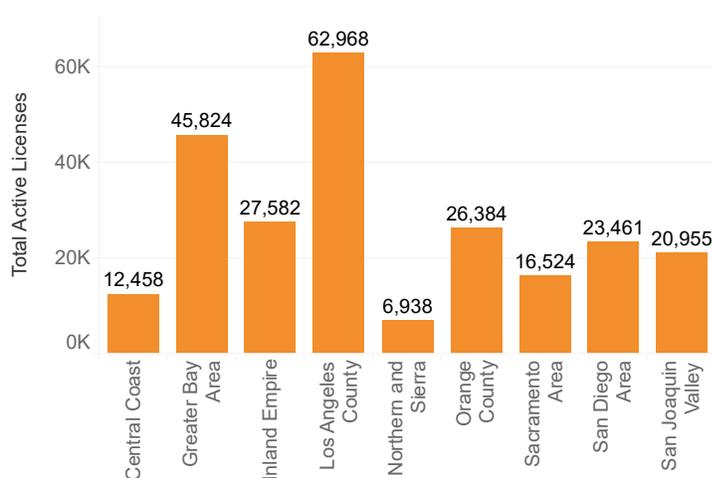
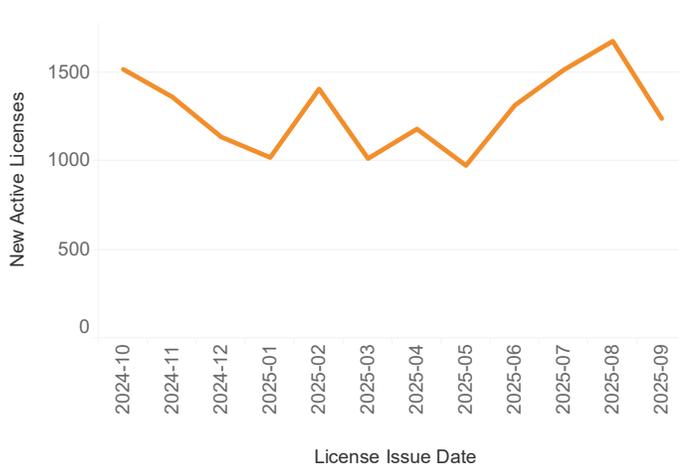


Table C-13: Active Licenses: Allied Health

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Advanced Practice Pharmacist	32	234	116	464	21	237	97	130	79
Audiologist	82	422	102	375	26	166	127	219	87
Chiropractor	788	2,449	755	2,712	390	1,414	565	1,046	590
Doctor Of Podiatric Medicine	108	500	168	579	64	229	129	157	155
Hearing Aid Dispenser	82	206	143	222	49	125	81	101	112
Hearing Aid Dispenser - Trainee	10	35	21	30	5	12	8	10	14
Licensed Acupuncturist	586	2,718	422	3,098	193	1,197	237	1,014	120
Occupational Therapist	999	3,669	1,170	4,181	341	1,639	920	1,626	709
Occupational Therapy Assistant	139	186	699	1,259	107	546	331	496	295
Optometrist	359	1,889	662	1,880	156	977	433	646	448
Pharmacy Technician	2,776	9,741	8,822	17,398	1,972	4,638	4,231	5,438	7,767
Physical Therapist	1,988	6,250	2,212	6,247	926	2,984	1,971	3,325	1,713
Physical Therapist Assistant	495	1,165	1,356	2,171	411	887	527	879	945
Polysomnographic Technician	18	26	33	21	9	4	14	5	31
Polysomnographic Technologist	46	140	59	70	21	61	71	33	54
Polysomnographic Trainee	8	15	47	16	2	35	15	3	7
Registered Contact Lens Dispenser	92	264	228	290	42	110	108	136	162
Registered Pharmacist	1,427	8,754	3,154	10,483	769	6,745	3,141	3,639	2,903
Registered Psychological Testing Technician	7	14	8	22	3	12	3	37	3
Registered Spectacle Lens Dispenser	182	581	503	803	88	289	223	350	309
Respiratory Care Practitioner	801	2,669	4,175	4,776	640	1,434	1,589	1,782	2,312
Speech Pathologist	1,242	3,567	1,810	4,139	585	1,935	1,288	2,111	1,590
Speech-Language Pathology Assistant	191	330	917	1,732	118	708	415	278	550
Allied Health Group	12,458	45,824	27,582	62,968	6,938	26,384	16,524	23,461	20,955

Figure C-14: New Licenses: Allied Health



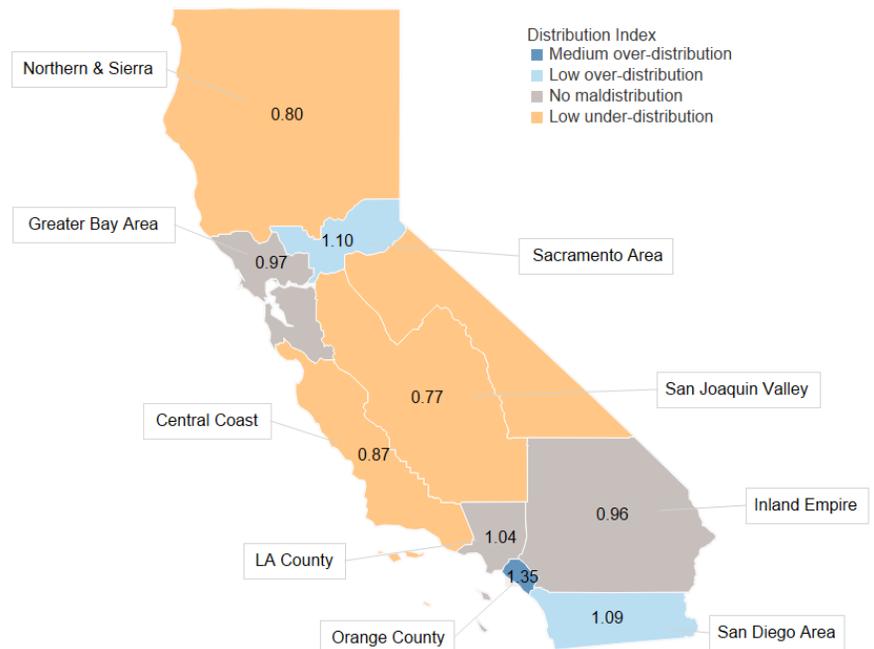
On average, there were 1,282 new active Allied Health licenses issued per month from October 2024 to September 2025. Within the Allied Health workforce, Pharmacy Technicians make up the largest portion by total volume with an average of 478 new licenses issued per month, while Hearing Aid Dispenser – Trainees had the highest average issue rate relative to their total volume at 7.6%. Future work will aim to use this information in conjunction with education pipeline data to better understand potential workforce supply trends.

Table C-14: New Licenses: Allied Health

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Advanced Practice Pharmacist	22	1	3	27	5	4	19	10	30	16	8	4
Audiologist	11	1	1	2	3	3	7	2	22	27	18	14
Chiropractor	36	20	11	22	61	42	34	39	22	23	44	30
Doctor Of Podiatric Medicine	6	3	1	4	6	7	7	10	8	9	1	5
Hearing Aid Dispenser	18	5	23	2	8	17	5	21	6	18	1	4
Hearing Aid Dispenser - Trainee	16	10	12	11	7	10	8	6	20	9	15	8
Licensed Acupuncturist	29	18	26	17	20	18	29	25	21	18	22	19
Occupational Therapist	88	71	71	59	54	61	66	50	41	88	79	92
Occupational Therapy Assistant	22	21	13	17	18	23	38	19	26	17	21	21
Optometrist	19	10	7	12	11	7	2	34	78	32	22	8
Pharmacy Technician	622	609	565	395	514	450	517	265	509	513	449	332
Physical Therapist	25	243	51	34	181	54	26	150	78	41	420	73
Physical Therapist Assistant	135	48	16	25	112	17	72	21	2	166	36	14
Polysomnographic Technician	1	0	3	2	0	5	1	3	1	2	2	2
Polysomnographic Technologist	1	1	0	1	1	0	1	0	0	0	1	0
Registered Contact Lens Dispenser	14	14	19	13	11	14	20	11	12	12	9	14
Registered Pharmacist	128	103	103	34	69	35	67	26	5	47	183	328
Registered Spectacle Lens Dispenser	39	31	33	24	14	22	37	25	29	20	16	35
Respiratory Care Practitioner	139	47	47	92	85	96	67	72	97	147	142	87
Speech Pathologist	127	98	111	123	120	98	92	142	188	186	126	108
Speech-Language Pathology Assistant	22	10	22	106	109	33	68	46	122	126	64	44
Allied Health Group	1,520	1,364	1,138	1,022	1,409	1,016	1,183	977	1,317	1,517	1,679	1,242

Figure C-15: Distribution Index: Allied Health

The distribution index describes the magnitude of difference between a region’s share of the state’s licenses and its share of the state’s population. A distribution index of 1 indicates the region has an equal share of the state’s licenses and population (e.g., 10% of the state’s licenses and 10% of the state’s population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state’s licenses and 10% of the state’s population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution.



While the Los Angeles County region has the highest total count of active Allied Health licenses by volume, the Orange County region has the highest distribution of active Allied Health licenses compared to the population. Similarly, while the Northern & Sierra region has the lowest total count of active Allied Health

licenses by volume, the San Joaquin Valley has a lower distribution of active Allied Health licenses compared to the population. Specifically, the region has half the amount of Advanced Practice Pharmacists, Audiologists, Chiropractors, Occupational Therapists, Polysomnographic Trainees, and Registered Psychological Testing Technician, as well as less than a quarter of the amount of Licensed Acupuncturists they should have based on their population size.

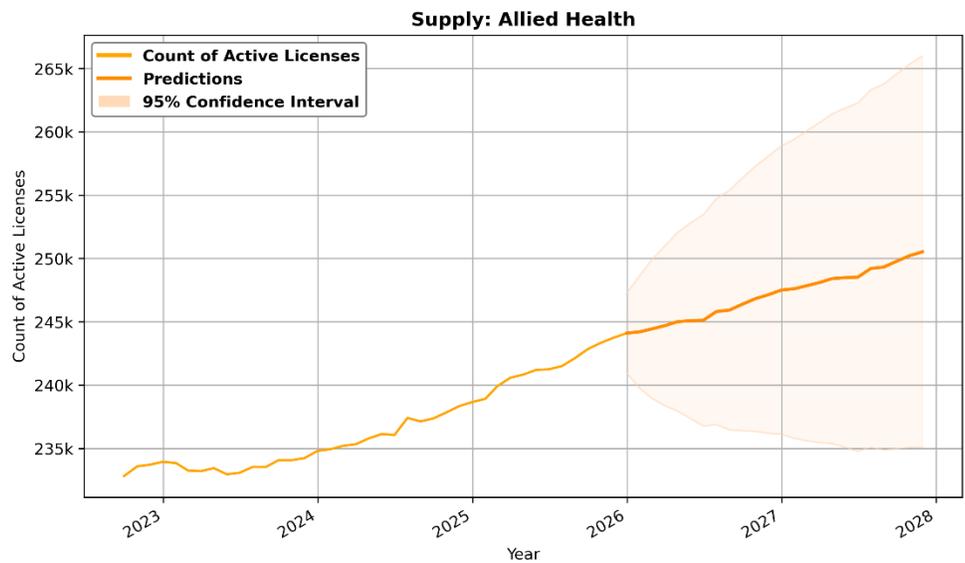
Table C-15: Distribution Index: Allied Health

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Advanced Practice Pharmacist	0.39	0.86	0.69	1.32	0.42	2.09	1.11	1.04	0.50
Audiologist	0.87	1.36	0.53	0.93	0.45	1.29	1.28	1.53	0.48
Chiropractor	1.25	1.18	0.59	1.01	1.02	1.64	0.85	1.10	0.49
Doctor Of Podiatric Medicine	0.88	1.24	0.68	1.11	0.85	1.36	1.00	0.85	0.66
Hearing Aid Dispenser	1.24	0.95	1.07	0.79	1.22	1.39	1.17	1.01	0.89
Hearing Aid Dispenser - Trainee	1.17	1.25	1.22	0.83	0.96	1.03	0.89	0.78	0.86
Licensed Acupuncturist	1.04	1.46	0.37	1.29	0.56	1.55	0.40	1.19	0.11
Occupational Therapist	1.11	1.24	0.65	1.10	0.62	1.34	0.98	1.20	0.42
Occupational Therapy Assistant	0.58	0.24	1.45	1.24	0.74	1.67	1.32	1.37	0.65
Optometrist	0.82	1.31	0.75	1.01	0.58	1.63	0.94	0.98	0.54
Pharmacy Technician	0.75	0.80	1.18	1.11	0.88	0.92	1.09	0.97	1.11
Physical Therapist	1.22	1.17	0.67	0.90	0.93	1.34	1.15	1.35	0.56
Physical Therapist Assistant	0.95	0.68	1.29	0.98	1.30	1.25	0.97	1.12	0.96
Polysomnographic Technician	1.90	0.83	1.73	0.52	1.56	0.31	1.41	0.35	1.72
Polysomnographic Technologist	1.41	1.30	0.90	0.50	1.05	1.37	2.07	0.67	0.87
Polysomnographic Trainee	0.92	0.52	2.67	0.43	0.38	2.94	1.64	0.23	0.42
Registered Contact Lens Dispenser	1.09	0.95	1.34	0.81	0.82	0.96	1.22	1.07	1.01
Registered Pharmacist	0.59	1.10	0.65	1.02	0.52	2.05	1.24	1.00	0.63
Registered Psychological Testing Technician	1.09	0.66	0.62	0.81	0.77	1.37	0.45	3.82	0.25
Registered Spectacle Lens Dispenser	0.93	0.90	1.27	0.97	0.74	1.08	1.08	1.18	0.83
Respiratory Care Practitioner	0.67	0.68	1.74	0.95	0.88	0.88	1.27	0.99	1.03
Speech Pathologist	1.15	1.01	0.83	0.91	0.89	1.32	1.14	1.30	0.78
Speech-Language Pathology Assistant	0.62	0.33	1.47	1.32	0.63	1.68	1.28	0.60	0.94
Allied Health Group	0.87	0.97	0.96	1.04	0.80	1.35	1.10	1.09	0.77

<ul style="list-style-type: none"> Low Under-Distribution (0.95-0.75) Medium Under-Distribution (0.75-0.50) High Under-Distribution (0.50 or less) 	<ul style="list-style-type: none"> <input type="checkbox"/> No Maldistribution (0.95-1.05) 	<ul style="list-style-type: none"> Low Over-Distribution (1.05-1.25) Medium Over-Distribution (1.25-1.50) High Over-Distribution (1.50 or more)
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Figure C-16: Supply Projections: Allied Health

To project supply for the Allied Health workforce, each license type within the group was individually modelled with a 95% confidence interval. Active license counts for each month from September 2022 to November 2025 were used to predict the monthly supply of active licenses each month from December 2025 to November 2027. The table below lists the count of active licenses for September of each year.



On average, the Allied Health group is expected to grow just under three percent by 2027. Most Allied Health license types are expected to increase over the next two years, with the exception of Chiropractors, Hearing Aid Dispenser Trainees, and Pharmacy Technicians, which are projected to decrease by 2027. These metrics combined with Retirement estimates (see [Figure C-5: Retirement Estimates: Allied Health](#)) will be crucial for calculating more accurate supply and demand projections for each license type in our modeling data.

Table C-16: Supply Projections: Allied Health

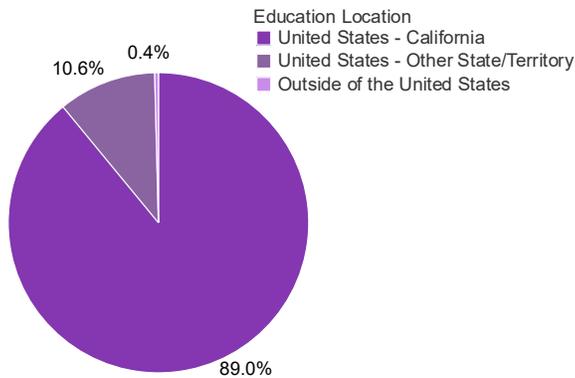
License Name	2022	2023	2024	2025	2026	2027
Advanced Practice Pharmacist	1,018	1,136	1,286	1,410	1,535	1,664
Audiologist	1,501	1,505	1,551	1,606	1,623	1,653
Chiropractor	10,719	10,759	10,694	10,709	10,681	10,671
Doctor Of Podiatric Medicine	2,016	2,040	2,074	2,089	2,119	2,145
Hearing Aid Dispenser	1,121	1,052	1,088	1,121	1,122	1,122
Hearing Aid Dispenser - Trainee	141	168	168	145	133	131
Licensed Acupuncturist	9,703	9,639	9,627	9,585	9,518	9,472
Occupational Therapist	13,741	14,217	14,789	15,254	15,779	16,287
Occupational Therapy Assistant	3,556	3,752	3,930	4,058	4,213	4,376
Optometrist	7,182	7,289	7,368	7,450	7,496	7,566
Pharmacy Technician	65,016	62,887	61,613	62,783	62,439	61,796
Physical Therapist	25,238	25,966	26,752	27,616	28,360	29,180
Physical Therapist Assistant	7,603	7,981	8,441	8,836	9,242	9,650
Polysomnographic Technician	144	144	152	161	175	182
Polysomnographic Technologist	569	529	560	555	564	563
Registered Contact Lens Dispenser	1,204	1,284	1,359	1,432	1,514	1,592
Registered Pharmacist	39,812	40,290	40,771	41,015	41,421	41,823
Registered Spectacle Lens Dispenser	3,064	3,172	3,234	3,328	3,423	3,514
Respiratory Care Practitioner	19,212	19,484	19,837	20,178	20,587	21,001
Speech Pathologist	16,033	16,375	17,165	18,267	18,916	19,549
Speech-Language Pathology Assistant	4,227	4,398	4,908	5,239	5,516	5,838
Allied Health Group	232,820	234,067	237,367	242,837	246,376	249,775

Note: Cells shaded in light orange are predictions based on the Workforce Supply Model (see Figure C-16).

Section D: Behavioral Health, All Figures

This section focuses on licenses issued by the California Board of Behavioral Sciences (Associate Clinical Social Worker, Associate Marriage and Family Therapist, Associate Professional Clinical Counselor, Licensed Clinical Social Worker, Licensed Educational Psychologist, Licensed Marriage and Family Therapist, Licensed Professional Clinical Counselor), the Board of Registered Nursing (Psychiatric Mental Health Nurse), the Board of Psychology (Psychologist, Registered Psychological Associate) and the Board of Vocational Nursing and Psychiatric Technicians (Psychiatric Technicians).

Figure D-1: Education Location: Behavioral Health



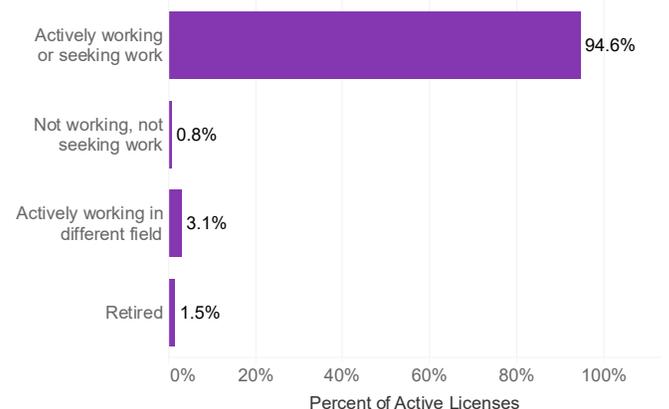
Nearly 100% of all Behavioral Health licensees complete their education in the U.S., with 89% receiving their initial qualifying degree in California, the highest of any health workforce group. Notable license types within the Behavioral Health workforce include Psychiatric Mental Health Nurses with only 51.3% receiving their initial qualifying degree in California, and Licensed Professional Clinical Counselors with only 72.5%. Psychiatric Mental Health Nurses also reported the highest rates of receiving their initial qualifying degrees from outside the U.S at 2.5%.

Table D-1: Education Location: Behavioral Health

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Associate Clinical Social Worker	85.0%	14.6%	0.4%
Associate Marriage and Family Therapist	98.1%	1.8%	0.2%
Associate Professional Clinical Counselor	84.5%	15.4%	0.1%
Licensed Clinical Social Worker	82.8%	16.8%	0.4%
Licensed Educational Psychologist	91.6%	8.4%	0.1%
Licensed Marriage and Family Therapist	97.0%	2.8%	0.2%
Licensed Professional Clinical Counselor	72.5%	27.1%	0.4%
Psychiatric Mental Health Nurse	51.3%	46.2%	2.5%
Psychiatric Technician	97.0%	1.8%	1.2%
Psychologist	78.5%	20.8%	0.7%
Registered Psychological Associate	88.2%	10.7%	1.0%
Behavioral Health Group	89.0%	10.6%	0.4%

Figure D-2: Employment Status: Behavioral Health

Nearly 95% of Behavioral Health licensees are actively working or seeking work, while just over three percent are working in a different field and 1.5% have already retired. Notable license types within the Behavioral Health workforce include Licensed Educational Psychologists with over 20% actively working in a different field, and over 30% of Psychiatric Mental Health Nurses reporting already being retired, and 2.9% reporting not working or seeking work, despite their active license status. These data correlate with the above average age

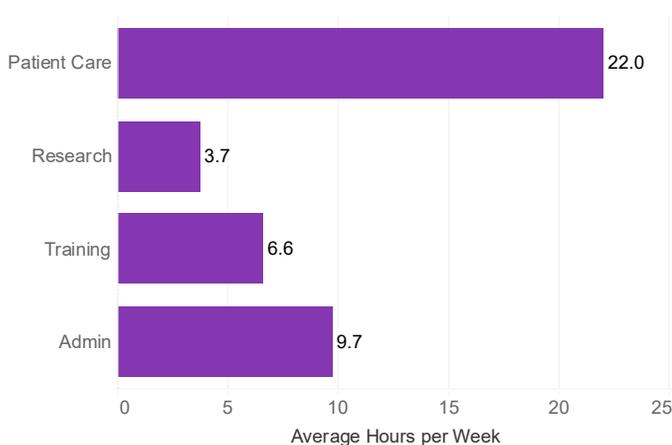


ranges for this license type (see [Figure D-5: Age Distribution: Behavioral Health](#)). These metrics will be used in the future to calculate more accurate supply data for each license type.

Table D-2: Employment Status: Behavioral Health

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Associate Clinical Social Worker	93.3%	0.2%	6.3%	0.1%
Associate Marriage and Family Therapist	96.2%	0.6%	3.0%	0.2%
Associate Professional Clinical Counselor	95.2%	0.4%	4.4%	0.0%
Licensed Clinical Social Worker	93.3%	0.9%	3.4%	2.4%
Licensed Educational Psychologist	72.7%	1.3%	21.1%	4.9%
Licensed Marriage and Family Therapist	95.6%	1.1%	2.0%	1.4%
Licensed Professional Clinical Counselor	95.6%	0.8%	3.0%	0.6%
Psychiatric Mental Health Nurse	65.0%	2.9%	1.3%	30.8%
Psychiatric Technician	90.0%	1.2%	4.2%	4.6%
Psychologist	97.5%	0.6%	1.1%	0.8%
Registered Psychological Associate	96.1%	0.3%	3.5%	0.1%
Behavioral Health Group	94.6%	0.8%	3.1%	1.5%

Figure D-3: Full-Time Equivalent Metrics: Behavioral Health



Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Behavioral Health licensees spend the highest number of hours per week on Patient Care (22.0 hours), and the least amount of time per week on Research (3.7 hours). This was the lowest amount of time spent on Patient Care of any health workforce group. Notable license types within the Behavioral Health workforce include Licensed Educational Psychologists who reported spending the least amount of time on Patient Care at only 17.5 hours per week, the lowest of any

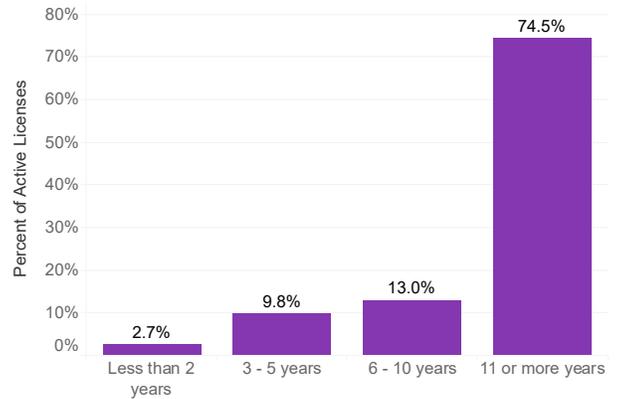
license type across the health workforce, and Psychiatric Technicians who reported the highest amounts of time per week on Patient Care (33.6 hours) and Training (8.3). These metrics will be used in the future to calculate more accurate supply and demand modeling.

Table D-3: Full-Time Equivalent Metrics: Behavioral Health

License Name	Patient Care	Research	Training	Admin
Associate Clinical Social Worker	25.5	5.9	7.6	9.4
Associate Marriage and Family Therapist	21.3	4.4	6.5	8.9
Associate Professional Clinical Counselor	21.6	4.5	6.7	9.0
Licensed Clinical Social Worker	22.4	3.1	6.4	10.8
Licensed Educational Psychologist	17.5	3.1	5.8	8.9
Licensed Marriage and Family Therapist	20.2	3.1	5.9	9.4
Licensed Professional Clinical Counselor	22.4	3.6	6.4	10.5
Psychiatric Mental Health Nurse	20.6	2.4	5.4	7.8
Psychiatric Technician	33.6	8.3	13.5	11.1
Psychologist	20.0	2.7	5.8	8.9
Registered Psychological Associate	22.3	4.5	7.5	8.6
Behavioral Health Group	22.0	3.7	6.6	9.7

Figure D-4: Retirement Estimates: Behavioral Health

Among Behavioral Health licensees who reported actively working in a position that required their license, or were actively seeking work in their field, 74.5% estimated retiring in 11 or more years, and just under three percent estimated retiring within the next two years, the lowest of any health workforce group. Of note are Psychiatric Mental Health Nurses, with over 30% reporting they estimate retiring within the next two years, and nearly 60% reporting they plan to retire within the next five years, the highest of any license type across the health workforce. This trend may be driven by the above average ages of the licensees (see [Figure D-5: Age Distribution: Behavioral Health](#)).

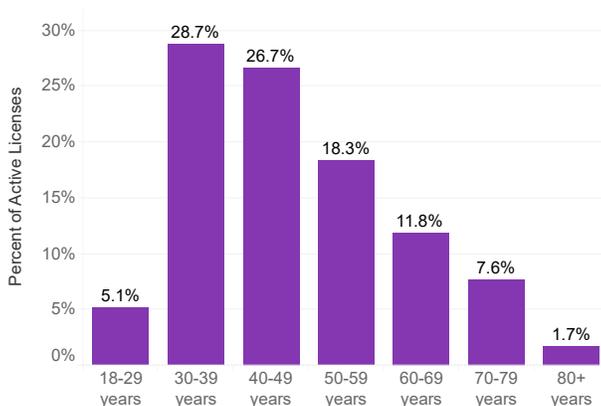


Additionally, more than 18% of Licensed Educational Psychologists, Psychiatric Technicians, and Psychologists also reported planning to retire within the next five years. These metrics will be crucial for calculating more accurate supply and demand models for each license type. In addition, this information may be useful in helping to identify which areas are in most need of funding to maintain the supply of Behavioral Health licensees across the state.

Table D-4: Retirement Estimates: Behavioral Health

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Associate Clinical Social Worker	0.5%	1.3%	4.6%	93.6%
Associate Marriage and Family Therapist	0.5%	1.3%	4.6%	93.6%
Associate Professional Clinical Counselor	0.6%	0.9%	4.0%	94.5%
Licensed Clinical Social Worker	3.4%	10.6%	14.0%	72.0%
Licensed Educational Psychologist	3.4%	16.7%	19.1%	60.9%
Licensed Marriage and Family Therapist	2.9%	12.2%	15.6%	69.3%
Licensed Professional Clinical Counselor	1.0%	4.9%	10.9%	83.3%
Psychiatric Mental Health Nurse	30.5%	29.0%	28.3%	12.3%
Psychiatric Technician	5.3%	14.9%	17.3%	62.5%
Psychologist	3.8%	15.0%	17.0%	64.2%
Registered Psychological Associate	0.3%	1.5%	3.7%	94.5%
Behavioral Health Group	2.7%	9.8%	13.0%	74.5%

Figure D-5: Age Distribution: Behavioral Health



Overall, over 70% of Behavioral Health licensees are between the ages of 30 and 59 years old, with only 5.1% under the age of thirty, and 21.1% over the age of 59. License types with younger licensees include all four associate-level licenses, with 60% or more of licensees under the age of 40. License types with older licensees include Psychiatric Mental Health Nurses with more than 88% over the age of 59, the highest of any license type in the health workforce. This high proportion of older licensees among Psychiatric Mental Health Nurses is likely a contributing factor to the high percentage that are already retired or planning to retire

within the next two years (see [Figure D-4: Retirement Estimates: Behavioral Health](#)).

Table D-5: Age Distribution: Behavioral Health

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Associate Clinical Social Worker	18.8%	47.7%	20.5%	9.7%	2.8%	0.5%	0.0%
Associate Marriage and Family Therapist	18.1%	42.0%	20.6%	12.8%	5.3%	1.2%	0.1%
Associate Professional Clinical Counselor	19.8%	45.1%	19.2%	11.3%	4.3%	0.4%	0.0%
Licensed Clinical Social Worker	1.5%	30.3%	29.5%	19.1%	11.5%	6.7%	1.4%
Licensed Educational Psychologist	0.0%	11.0%	33.3%	28.9%	15.2%	9.2%	2.4%
Licensed Marriage and Family Therapist	1.3%	22.6%	27.0%	19.9%	15.1%	11.3%	2.8%
Licensed Professional Clinical Counselor	2.8%	37.8%	26.7%	17.8%	10.8%	4.0%	0.2%
Psychiatric Mental Health Nurse	0.0%	0.0%	5.0%	6.3%	25.2%	47.8%	15.7%
Psychiatric Technician	5.3%	25.5%	30.4%	22.5%	13.4%	2.9%	0.2%
Psychologist	0.0%	14.5%	29.0%	22.3%	16.4%	14.4%	3.4%
Registered Psychological Associate	8.3%	42.1%	25.9%	15.0%	7.2%	1.3%	0.3%
Behavioral Health Group	5.1%	28.7%	26.7%	18.3%	11.8%	7.6%	1.7%

Figure D-6: Race/Ethnicity: Behavioral Health

Across the Behavioral Health workforce, Hispanic, Any Race and Asian, Non-Hispanic licensees are the most underrepresented when compared to California’s population, with only Associate Clinical Social Workers at or above the population average for Hispanic, Any Race and only Psychiatric Technicians at or above the population average for Asian, Non-Hispanic. Conversely, White, Non-Hispanic licensees are the most well represented with nine license types at or above the population average. Pacific Islander, Non-Hispanic licensees are well-represented in the Behavioral Health workforce on average but are still below the population average in seven different license types.

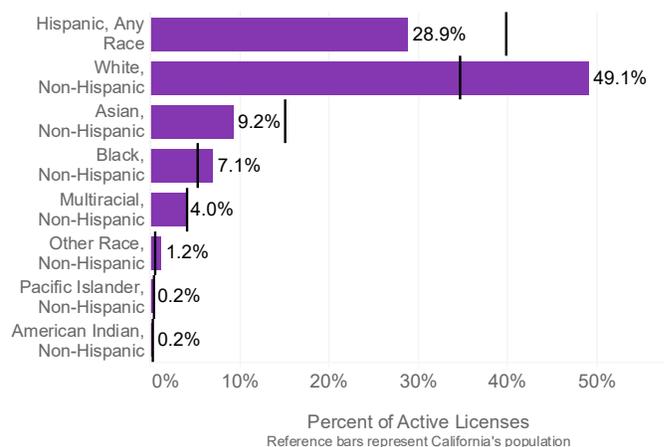
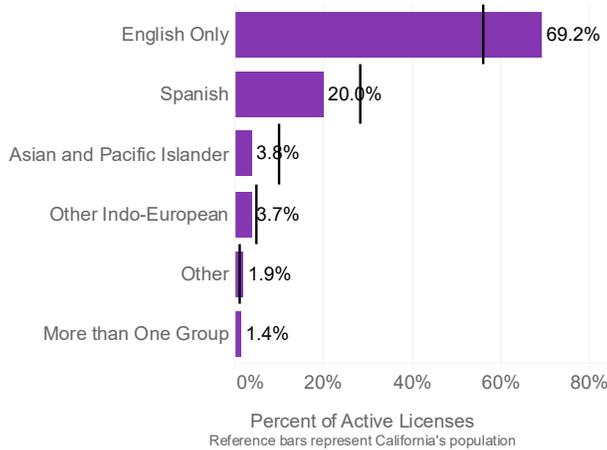


Table D-6: Race/Ethnicity: Behavioral Health

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Associate Clinical Social Worker	51.3%	23.5%	9.2%	10.7%	3.7%	0.8%	0.3%	0.4%
Associate Marriage and Family Therapist	36.6%	37.5%	10.3%	9.0%	5.1%	1.0%	0.3%	0.2%
Associate Professional Clinical Counselor	34.4%	38.9%	10.5%	9.8%	4.8%	1.2%	0.2%	0.2%
Licensed Clinical Social Worker	33.0%	45.2%	9.6%	6.9%	3.7%	1.2%	0.2%	0.2%
Licensed Educational Psychologist	21.0%	61.0%	6.6%	4.7%	5.2%	1.2%	0.1%	0.3%
Licensed Marriage and Family Therapist	22.5%	59.8%	7.0%	5.0%	3.9%	1.4%	0.2%	0.2%
Licensed Professional Clinical Counselor	21.5%	57.1%	9.1%	6.3%	4.9%	1.0%	0.1%	0.1%
Psychiatric Mental Health Nurse	4.6%	86.7%	3.6%	2.6%	2.5%	0.0%	0.0%	0.0%
Psychiatric Technician	35.8%	22.6%	17.2%	17.5%	3.9%	1.5%	1.1%	0.5%
Psychologist	12.4%	68.4%	10.1%	3.7%	3.7%	1.4%	0.1%	0.2%
Registered Psychological Associate	26.3%	41.8%	11.2%	12.2%	6.3%	1.5%	0.3%	0.4%
Behavioral Health Group	28.9%	49.1%	9.2%	7.1%	4.0%	1.2%	0.2%	0.2%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

NH = Non-Hispanic

Figure D-7: Languages Spoken: Behavioral Health



On average, the Spanish language is the most underrepresented in the Behavioral Health workforce when compared to California's population, at 20% with only Associate Clinical Social Workers at or above California's population. In addition, Asian and Pacific Islander languages are only spoken by 3.8% of the Behavioral Health group overall, the lowest of any health workforce group, and no license types are at or above the population average for Asian and Pacific Islander languages. Other-Indo European languages are also underrepresented, with only Psychologists and Registered Psychological Associates at or above the population average. Other languages are well represented overall and are above the population

average for all license types. As a group, the Behavioral Health workforce is the least diverse linguistically, with the highest rates of English Only speaking licensees of any health workforce group.

Table D-7: Languages Spoken: Behavioral Health

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Associate Clinical Social Worker	53.5%	37.5%	3.9%	2.3%	1.7%	1.1%
Associate Marriage and Family Therapist	65.2%	23.0%	4.2%	4.2%	1.9%	1.5%
Associate Professional Clinical Counselor	66.3%	21.2%	4.6%	3.9%	2.4%	1.6%
Licensed Clinical Social Worker	65.7%	25.7%	3.8%	2.4%	1.2%	1.1%
Licensed Educational Psychologist	77.1%	15.4%	2.6%	2.2%	1.2%	1.4%
Licensed Marriage and Family Therapist	74.7%	14.8%	2.9%	4.5%	1.7%	1.5%
Licensed Professional Clinical Counselor	75.4%	14.2%	3.5%	3.6%	1.9%	1.4%
Psychiatric Mental Health Nurse	86.9%	5.2%	1.9%	3.4%	1.8%	0.7%
Psychiatric Technician	63.6%	18.5%	9.5%	1.8%	4.8%	1.7%
Psychologist	78.3%	8.8%	3.4%	5.7%	2.1%	1.7%
Registered Psychological Associate	62.1%	17.3%	4.9%	9.0%	4.1%	2.5%
Behavioral Health Group	69.2%	20.0%	3.8%	3.7%	1.9%	1.4%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Figure D-8: Sexual Orientation: Behavioral Health

As a group, the majority (88.0%) of Behavioral Health licensees reported identifying as Straight or Heterosexual, the lowest of any health workforce group. Additionally, 5.2% reported identifying as Gay or Lesbian, 4.6% identified as Bisexual and 2.2% identified as Other, the highest rates for all three Sexual Orientations of any health workforce group. Within the Behavioral Health workforce, nine license types reported identifying as Gay or Lesbian or Bisexual as well as Other at or above the workforce average. Notably, Licensed Clinical Counselors and all four associate-level license types reported the most diverse Sexual Orientation rates of all license types within the health workforce.

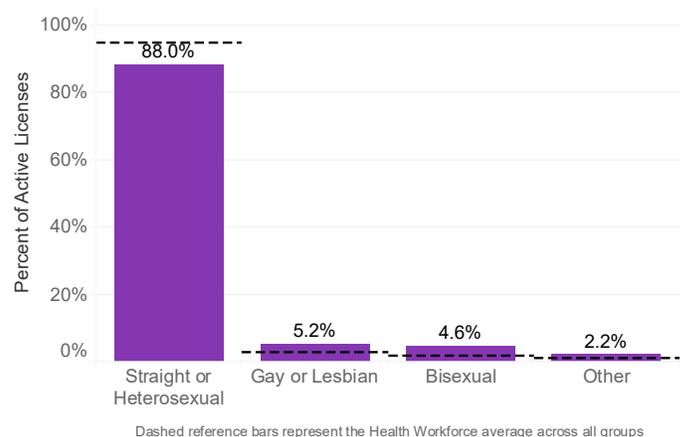
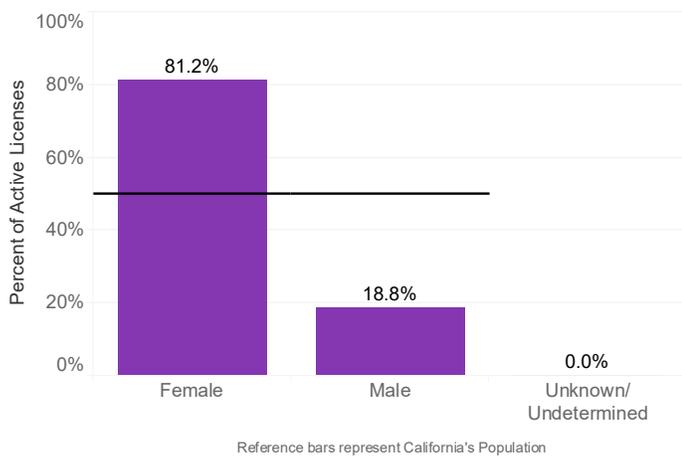


Table D-8: Sexual Orientation: Behavioral Health

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Associate Clinical Social Worker	86.7%	4.6%	6.1%	2.6%
Associate Marriage and Family Therapist	84.8%	4.8%	7.4%	3.0%
Associate Professional Clinical Counselor	85.3%	4.4%	6.9%	3.4%
Licensed Clinical Social Worker	87.9%	6.0%	4.1%	2.0%
Licensed Educational Psychologist	95.7%	2.4%	1.3%	0.6%
Licensed Marriage and Family Therapist	88.5%	5.2%	4.3%	2.1%
Licensed Professional Clinical Counselor	85.6%	5.9%	5.7%	2.9%
Psychiatric Mental Health Nurse	89.6%	8.6%	1.2%	0.6%
Psychiatric Technician	95.3%	2.1%	1.2%	1.3%
Psychologist	88.0%	6.0%	4.0%	2.0%
Registered Psychological Associate	85.4%	6.0%	6.1%	2.5%
Behavioral Health Group	88.0%	5.2%	4.6%	2.2%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Figure D-9: Sex at Birth: Behavioral Health



As a group, the majority (81.2%) of Behavioral Health licensees reported identifying as Female, and 18.8% reported identifying as Male. Less than 0.1% of licensees identified as Unknown/Undetermined. Well above the Workforce averages were Psychiatric Mental Health Nurses, with nearly 90% identifying as Female, and nearly 40% of Psychiatric Technicians and almost 30% of Psychologists identifying as Male.

Table D-9: Sex at Birth: Behavioral Health

License Name	Female	Male	Unknown/Undetermined
Associate Clinical Social Worker	86.0%	14.0%	0.0%
Associate Marriage and Family Therapist	82.0%	17.9%	0.1%
Associate Professional Clinical Counselor	84.4%	15.6%	0.0%
Licensed Clinical Social Worker	85.5%	14.5%	0.0%
Licensed Educational Psychologist	83.0%	17.0%	0.0%
Licensed Marriage and Family Therapist	82.2%	17.7%	0.0%
Licensed Professional Clinical Counselor	83.7%	16.2%	0.1%
Psychiatric Mental Health Nurse	89.4%	10.6%	0.0%
Psychiatric Technician	61.9%	37.9%	0.2%
Psychologist	72.5%	27.4%	0.0%
Registered Psychological Associate	79.0%	21.0%	0.0%
Behavioral Health Group	81.2%	18.8%	0.0%
California's Population	50.0%	50.0%	N/A

Figure D-10: Gender Identity: Behavioral Health

As a group, the majority (80.5%) of Behavioral Health licensees reported identifying as Female, and 18.6% reported identifying as Male. Licensees identifying as Transgender or not identifying as Male, Female or Transgender were nearly even at 0.4% and 0.5% each, and were the highest rates reported among any health workforce group. Well above the Workforce averages were Psychiatric Mental Health Nurses, with nearly 90% identifying as Female, and nearly 40% of Psychiatric Technicians and almost 30% of Psychologists identifying as Male.

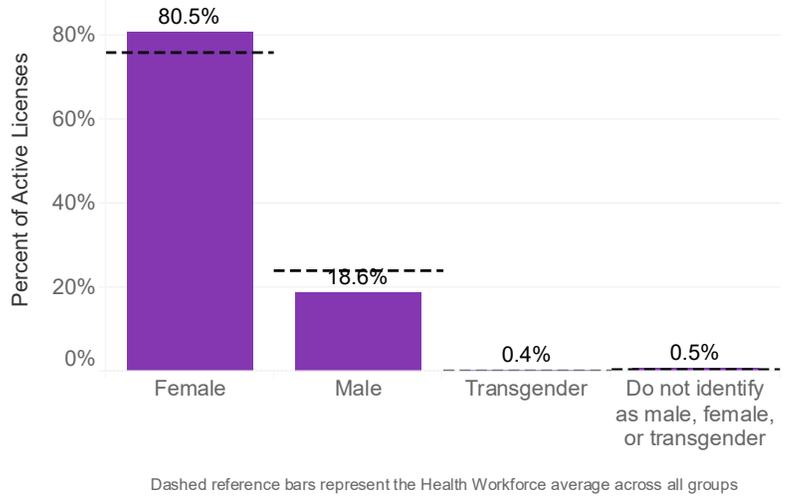
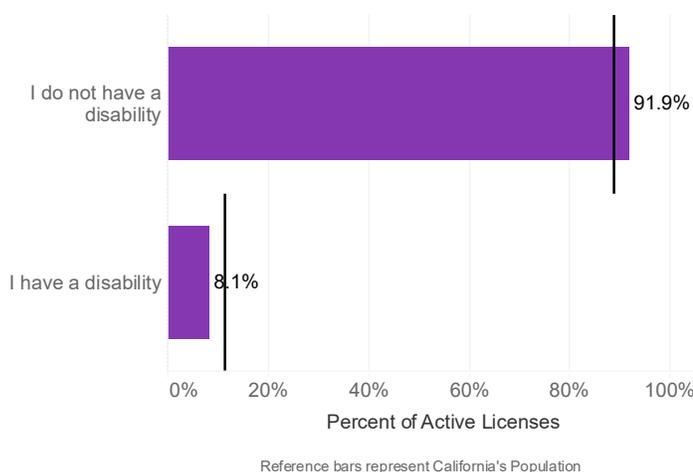


Table D-10: Gender Identity: Behavioral Health

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Associate Clinical Social Worker	84.9%	13.8%	0.5%	0.8%
Associate Marriage and Family Therapist	80.9%	17.7%	0.6%	0.8%
Associate Professional Clinical Counselor	83.0%	15.5%	0.7%	0.8%
Licensed Clinical Social Worker	84.8%	14.4%	0.3%	0.5%
Licensed Educational Psychologist	82.8%	17.2%	0.0%	0.0%
Licensed Marriage and Family Therapist	81.6%	17.6%	0.3%	0.5%
Licensed Professional Clinical Counselor	82.7%	16.1%	0.4%	0.7%
Psychiatric Mental Health Nurse	89.3%	10.7%	0.0%	0.0%
Psychiatric Technician	62.3%	37.4%	0.1%	0.1%
Psychologist	71.9%	27.4%	0.2%	0.5%
Registered Psychological Associate	78.0%	20.7%	0.6%	0.7%
Behavioral Health Group	80.5%	18.6%	0.4%	0.5%
Health Workforce Average	75.9%	23.8%	0.1%	0.1%

Figure D-11: Disability Status: Behavioral Health



On average, 91.9% of Behavioral Health licensees did not identify as having a disability, while 8.1% reported having a disability, the highest of any health workforce group. Within the Behavioral Health workforce, all four associate-level licenses and Psychiatric Mental Health Nurses reported the highest rates of having a disability (10% or more), while Psychiatric Technicians reported the lowest at just over six percent.

Table D-11: Disability Status: Behavioral Health

License Name	I do not have a disability	I have a disability
Associate Clinical Social Worker	89.6%	10.4%
Associate Marriage and Family Therapist	89.6%	10.4%
Associate Professional Clinical Counselor	88.7%	11.3%
Licensed Clinical Social Worker	91.9%	8.1%
Licensed Educational Psychologist	92.0%	8.0%
Licensed Marriage and Family Therapist	92.9%	7.1%
Licensed Professional Clinical Counselor	91.4%	8.6%
Psychiatric Mental Health Nurse	88.5%	11.5%
Psychiatric Technician	93.6%	6.4%
Psychologist	92.8%	7.2%
Registered Psychological Associate	86.1%	13.9%
Behavioral Health Group	91.9%	8.1%
California's Population	88.7%	11.3%

Figure D-12: Active Licenses: Behavioral Health

As a group, the Los Angeles County region has the highest total number of Behavioral Health licenses in the state while the Northern & Sierra region has the least. Within the Behavioral Health workforce, Licensed Marriage Family Therapists and Licensed Clinical Social Workers make up more than 50% of all active Behavioral Health licenses, at 30% and 22.1% respectively. Psychiatric Mental Health Nurses make up the smallest portion of the Behavioral Health workforce at 0.1%. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure D-14: Distribution Index: Behavioral Health](#)).

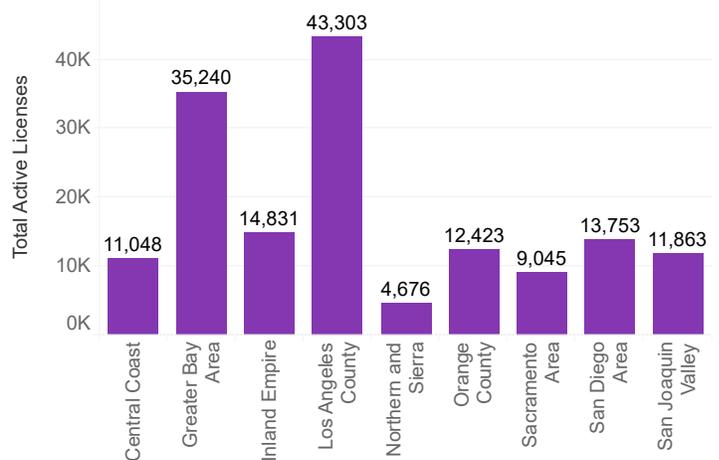


Table D-12: Active Licenses: Behavioral Health

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern and Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Associate Clinical Social Worker	908	2,922	2,044	5,616	677	1,153	979	1,345	1,813
Associate Marriage and Family Therapist	1,063	3,446	1,644	4,887	426	1,401	750	1,272	1,067
Associate Professional Clinical Counselor	331	1,128	798	1,308	117	531	369	656	472
Licensed Clinical Social Worker	1,966	7,460	2,909	11,073	1,164	2,492	2,244	3,052	2,142
Licensed Educational Psychologist	139	385	144	405	63	188	134	133	137
Licensed Marriage and Family Therapist	4,000	11,290	3,839	12,425	1,583	4,116	2,800	4,011	2,799
Licensed Professional Clinical Counselor	270	990	505	867	142	390	328	718	295
Psychiatric Mental Health Nurse	15	53	14	41	3	9	7	20	5
Psychiatric Technician	1,102	1,183	1,934	755	168	405	308	94	2,334
Psychologist	1,170	6,054	861	5,338	304	1,565	1,052	2,241	696
Registered Psychological Associate	84	329	139	588	29	173	74	211	103
Behavioral Health Group	11,048	35,240	14,831	43,303	4,676	12,423	9,045	13,753	11,863

Figure D-13: New Licenses: Behavioral Health



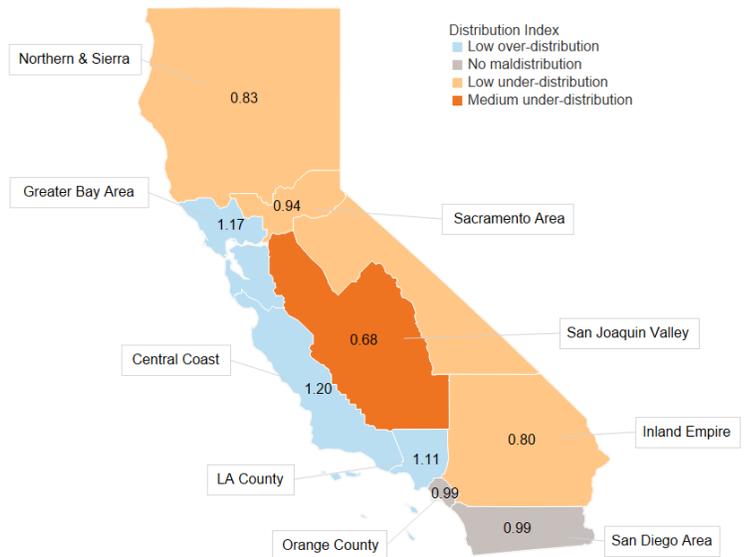
On average, there were 1,145 new active Behavioral Health licenses issued per month from October 2024 to September 2025. Within the Behavioral Health workforce, Associate Marriage and Family Therapists and Associate Clinical Social Workers make up the largest portion by total volume with an average of 788 new active licenses issued per month, more than 68% of all new Behavioral Health licenses issued. Associate-level licenses had the highest average issue rates relative to their total volume at 2-3%.

Table D-13: New Licenses: Behavioral Health

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Associate Clinical Social Worker	425	223	188	214	297	227	214	224	614	891	628	454
Associate Marriage and Family Therapist	473	397	397	315	385	434	320	241	325	491	513	571
Associate Professional Clinical Counselor	193	127	144	213	162	125	180	94	156	241	236	239
Licensed Clinical Social Worker	19	12	18	22	23	16	17	11	31	13	19	13
Licensed Educational Psychologist	3	6	18	20	8	12	16	8	15	26	21	13
Licensed Marriage and Family Therapist	22	9	11	9	5	5	3	6	3	2	3	2
Licensed Professional Clinical Counselor	10	11	18	10	9	12	11	9	7	2	4	8
Psychiatric Mental Health Nurse	0	0	0	0	0	0	0	0	0	0	0	0
Psychiatric Technician	23	15	9	21	27	13	13	5	17	28	15	11
Psychologist	84	52	62	74	45	52	59	41	44	62	84	66
Registered Psychological Associate	94	65	45	27	36	34	36	24	51	65	81	112
Behavioral Health Group	1,346	917	910	925	997	930	869	663	1,263	1,821	1,604	1,489

Figure D-14: Distribution Index: Behavioral Health

The distribution index describes the magnitude of difference between a region’s share of the state’s licenses and its share of the state’s population. A distribution index of 1 indicates the region has an equal share of the state’s licenses and population (e.g., 10% of the state’s licenses and 10% of the state’s population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state’s licenses and 10% of the state’s population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution. Note: These distribution indexes reflect the distribution of



active licenses, not the distribution of providers as presented in [Section A: Model Projections, Behavioral Health](#).

While the Los Angeles County region has the highest total count of active Behavioral Health licenses by volume, the Central Coast region has the highest distribution of active Behavioral Health licenses compared to the population. Similarly, while the Northern & Sierra region has the lowest total count of active Behavioral Health licenses by volume, the San Joaquin Valley region has the lowest distribution of active Behavioral Health licenses compared to the population. Specifically, the region has a third of the amount of Psychiatric Mental Health Nurses and Psychologists they should have based on their population size.

Table D-14: Distribution Index: Behavioral Health

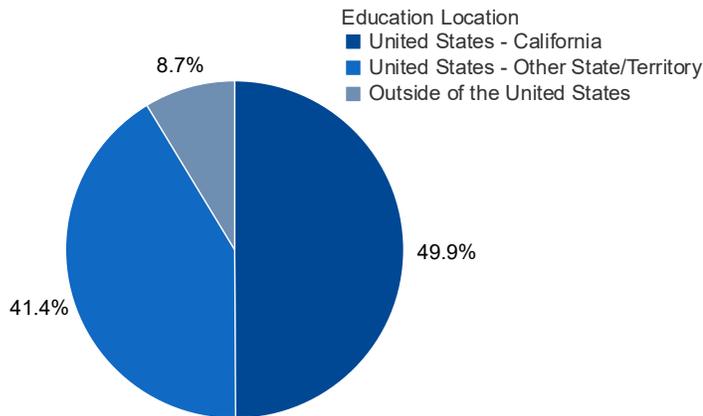
License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Associate Clinical Social Worker	0.88	0.86	0.99	1.29	1.08	0.82	0.91	0.87	0.93
Associate Marriage and Family Therapist	1.13	1.12	0.87	1.23	0.74	1.09	0.76	0.90	0.60
Associate Professional Clinical Counselor	0.98	1.02	1.18	0.92	0.57	1.16	1.05	1.29	0.74
Licensed Clinical Social Worker	0.97	1.12	0.71	1.28	0.94	0.90	1.05	0.99	0.56
Licensed Educational Psychologist	1.37	1.15	0.70	0.94	1.02	1.35	1.25	0.87	0.71
Licensed Marriage and Family Therapist	1.45	1.24	0.69	1.06	0.94	1.09	0.97	0.96	0.53
Licensed Professional Clinical Counselor	1.02	1.13	0.94	0.77	0.88	1.08	1.18	1.79	0.59
Psychiatric Mental Health Nurse	1.53	1.64	0.71	0.98	0.50	0.67	0.68	1.35	0.27
Psychiatric Technician	2.26	0.74	1.97	0.36	0.57	0.61	0.60	0.13	2.52
Psychologist	1.03	1.62	0.38	1.11	0.44	1.01	0.88	1.31	0.32
Registered Psychological Associate	0.82	0.98	0.68	1.36	0.47	1.24	0.69	1.37	0.53
Behavioral Health Group	1.20	1.17	0.80	1.11	0.83	0.99	0.94	0.99	0.68
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>Low Under-Distribution (0.95-0.75)</p> <p>Medium Under-Distribution (0.75-0.50)</p> <p>High Under-Distribution (0.50 or less)</p> </div> <div style="width: 30%; text-align: center;"> <p>□ No Maldistribution (0.95-1.05)</p> </div> <div style="width: 30%;"> <p>Low Over-Distribution (1.05-1.25)</p> <p>Medium Over-Distribution (1.25-1.50)</p> <p>High Over-Distribution (1.50 or more)</p> </div> </div>									

With the exception of Psychiatric Technicians, the San Joaquin Valley Region has a smaller share of all Behavioral Health professionals compared with its share of the state population. The distribution index of 0.68 indicates that its share of the state’s Behavioral Health licenses is barely over half of its share of the population. Data for the Inland Empire Region shows a similar, slightly less severe, maldistribution.

Section E: Medicine, All Figures

This section focuses on licenses issued by the Naturopathic Medicine Committee (Naturopathic Doctor), Medical Board of California (Physician and Surgeon), Osteopathic Medical Board of California (Osteopathic Physician and Surgeon), and the Physician Assistant Board (Physician Assistant).

Figure E-1: Education Location: Medicine



Over 90% of Medicine licensees completed their education in the U.S., but just under 50% received their initial qualifying degree within California, the lowest of any health workforce group. Notable license types within the Medicine workforce include Naturopathic Doctors with only 44.9% receiving their initial qualifying degree in California, and Physicians and Surgeons with over 10% receiving their initial qualifying degree from outside the U.S.

Table E-1: Education Location: Medicine

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Naturopathic Doctor	44.9%	50.4%	4.6%
Osteopathic Physician and Surgeon	61.3%	38.7%	0.0%
Physician And Surgeon	46.9%	42.6%	10.6%
Physician Assistant	65.3%	34.3%	0.3%
Medicine Group	49.9%	41.4%	8.7%

Figure E-2: Residency Location: Medicine

For license types within the Medicine workforce that require a residency, nearly 100% of those licensees completed their residency within the U.S., and just over 60% completed their residency somewhere in California.

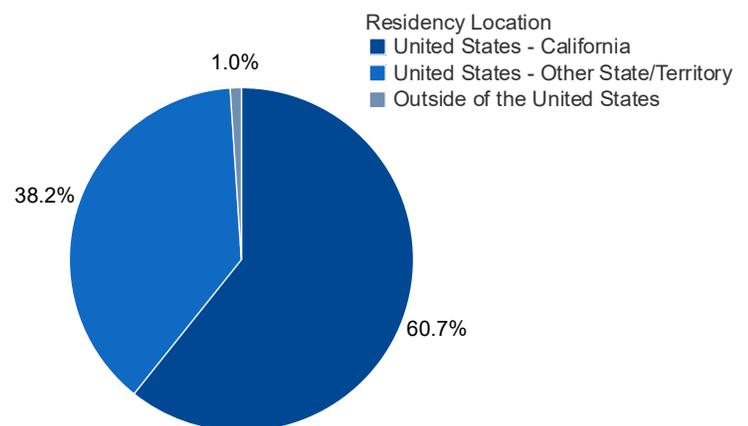
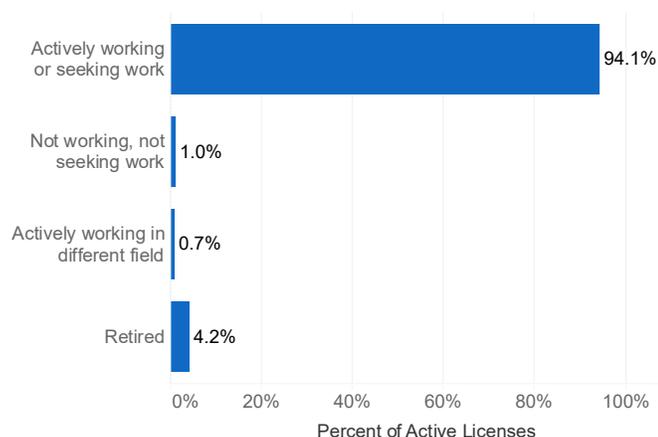


Table E-2: Residency Location: Medicine

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Osteopathic Physician and Surgeon	60.1%	39.8%	0.0%
Physician And Surgeon	60.8%	38.1%	1.1%
Medicine Group	60.7%	38.2%	1.0%

Figure E-3: Employment Status: Medicine



Nearly 95% of Medicine licensees are actively working or seeking work, while less than one percent are working in a different field. Over four percent have already retired, the highest of any health workforce group. Notable license types within the Medicine workforce include Naturopathic Doctors with 2.7% actively working in a different field, and five percent of Physician and Surgeons reporting already being retired despite their active license status. These data correlate with the above average age ranges for this license type (see [Figure E-6: Age Distribution: Medicine](#)).

Table E-3: Employment Status: Medicine

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Physician And Surgeon	93.3%	1.1%	0.7%	5.0%
Physician Assistant	97.4%	1.1%	0.8%	0.8%
Osteopathic Physician and Surgeon	98.9%	0.3%	0.2%	0.7%
Naturopathic Doctor	96.2%	0.4%	2.7%	0.7%
Medicine Group	94.1%	1.0%	0.7%	4.2%

Figure E-4: Full-Time Equivalent Metrics: Medicine

Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Medicine licensees spend the highest number of hours per week on Patient Care (33.6 hours), the highest of any health workforce group, and the least amount of time per week on Research (3.1 hours). Notable license types within the Medicine workforce include Naturopathic Doctors, who reported spending the least amount of time on Patient Care at only 22.9 hours per week, and Osteopathic Physicians and Surgeons, who reported spending the highest amount of time on Patient Care at 36.7 hours per week. These metrics will be used in the future to calculate more accurate supply and demand modeling.

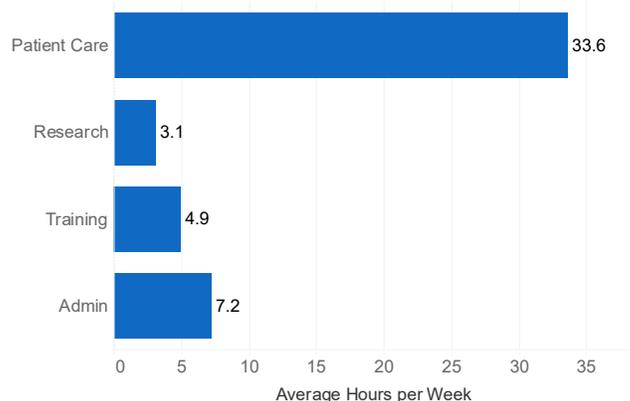
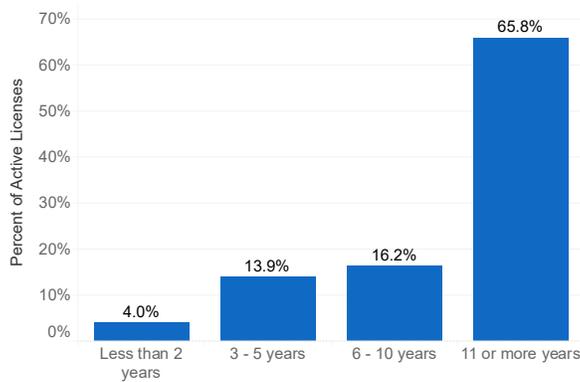


Table E-4: Full-Time Equivalent Metrics: Medicine

License Name	Patient Care	Research	Training	Admin
Naturopathic Doctor	22.9	6.0	6.1	10.0
Osteopathic Physician and Surgeon	36.7	1.7	5.6	7.4
Physician And Surgeon	33.2	3.3	4.8	7.3
Physician Assistant	35.1	2.3	4.9	6.1
Medicine Group	33.6	3.1	4.9	7.2

Figure E-5: Retirement Estimates: Medicine



Among Medicine licensees who reported actively working in a position that required their license, or were actively seeking work in their field, only 65.8% estimated retiring in 11 or more years, and four percent estimated retiring within the next two years. Nearly 18% estimated retiring within the next five years, the highest of any health workforce group. Of particular note are Physicians and Surgeons, with just over 20% estimating retiring within the next five years, and over 37% estimating retiring within the next 10 years. Nearly 20% of Naturopathic Doctors and Physician Assistants also estimate retiring within the next

10 years. These trends may be driven by the above average ages of the licensees within this health workforce group (see [Figure E-6: Age Distribution: Medicine](#)). These metrics will be crucial for calculating more accurate supply and demand models for each license type. In addition, this information may be useful in helping to identify which areas are in most need of funding to maintain the supply of Medicine licensees across the state.

Table E-5: Retirement Estimates: Medicine

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Naturopathic Doctor	1.5%	5.1%	13.0%	80.4%
Osteopathic Physician and Surgeon	1.2%	5.5%	10.3%	83.0%
Physician And Surgeon	4.5%	15.8%	17.4%	62.2%
Physician Assistant	2.1%	6.9%	11.9%	79.1%
Medicine Group	4.0%	13.9%	16.2%	65.8%

Figure E-6: Age Distribution: Medicine

Just over 71% of Medicine licensees are between the ages of 30 and 59 years old, with less than one percent under the age of thirty, and 27.9% over the age of 59, the highest across all health workforce groups. License types with younger licensees include Physician Assistants, with 5.1% under the age of 30, and 45% under the age of 40. License types with older licensees include Physicians and Surgeons, with more than 30% over the age of 59. This high proportion of older licensees among Physicians and Surgeons is likely a contributing factor to the high percentage that are already retired or planning to retire within the next two years (see [Figure E-5: Retirement Estimates: Medicine](#)).

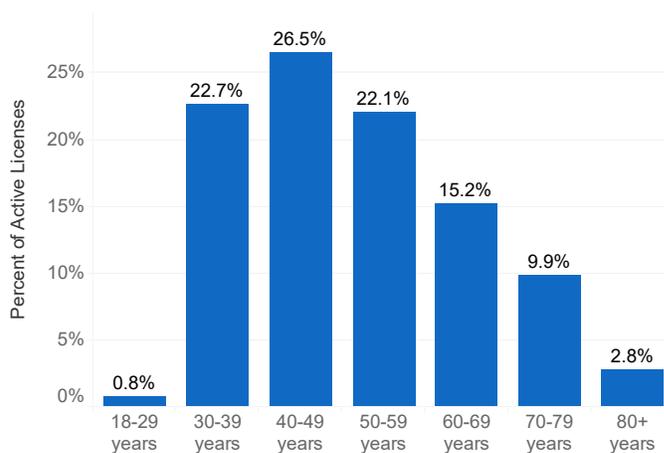
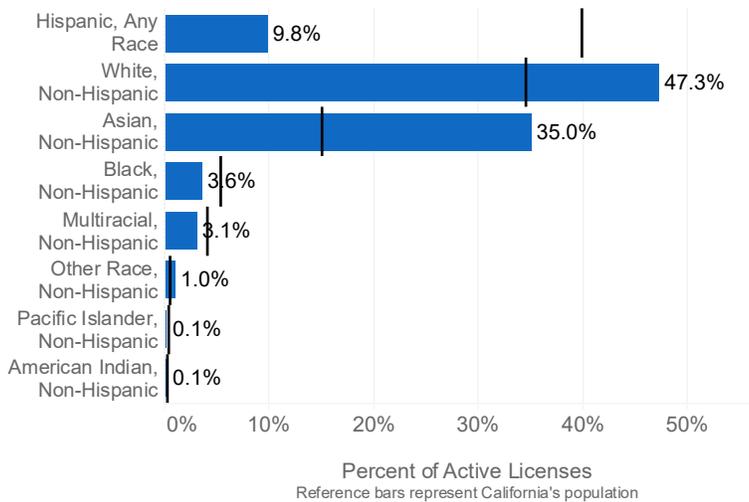


Table E-6: Age Distribution: Medicine

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Naturopathic Doctor	0.4%	29.0%	35.5%	24.2%	7.6%	2.8%	0.5%
Osteopathic Physician and Surgeon	0.2%	36.1%	34.5%	18.3%	7.7%	3.0%	0.3%
Physician And Surgeon	0.3%	19.2%	25.8%	23.1%	16.8%	11.4%	3.4%
Physician Assistant	5.1%	39.9%	26.2%	16.7%	8.9%	3.0%	0.2%
Medicine Group	0.8%	22.7%	26.5%	22.1%	15.2%	9.9%	2.8%

Figure E-7: Race/Ethnicity: Medicine



Across the Medicine workforce, Hispanic, Any Race, and Black, Non-Hispanic races are the most underrepresented when compared to California's population, with no license types at or above the population average for either Race & Ethnicity group. Conversely, White, Non-Hispanic and Asian, Non-Hispanic races are the most well represented with all four license types at or above the population average for White, Non-Hispanic, and three out of four license types for Asian, Non-Hispanic.

Table E-7: Race/Ethnicity: Medicine

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Naturopathic Doctor	8.4%	65.9%	14.9%	2.2%	5.3%	3.1%	0.0%	0.3%
Osteopathic Physician and Surgeon	6.1%	47.2%	40.8%	1.6%	3.4%	0.8%	0.1%	0.1%
Physician And Surgeon	9.0%	47.1%	36.3%	3.7%	2.9%	0.9%	0.0%	0.1%
Physician Assistant	17.9%	48.4%	23.1%	4.0%	4.3%	1.6%	0.5%	0.2%
Medicine Group	9.8%	47.3%	35.0%	3.6%	3.1%	1.0%	0.1%	0.1%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

NH = Non-Hispanic

Figure E-8: Languages Spoken: Medicine

Spanish is the most underrepresented language in the Medicine workforce when compared to California's population, with no license types at or above the population average and the lowest average of any health workforce group. Other Indo-European languages and Other languages are both well represented, with all four license types at or above the population average. Asian and Pacific Islander languages are fairly well represented on average; however, this is largely driven by the high rates among Osteopathic Physicians and Surgeons and is at or below the population average for the other three license types within the Medicine group. Physicians and Surgeons have the highest proportion of licensees who provide services in multiple census language groups.

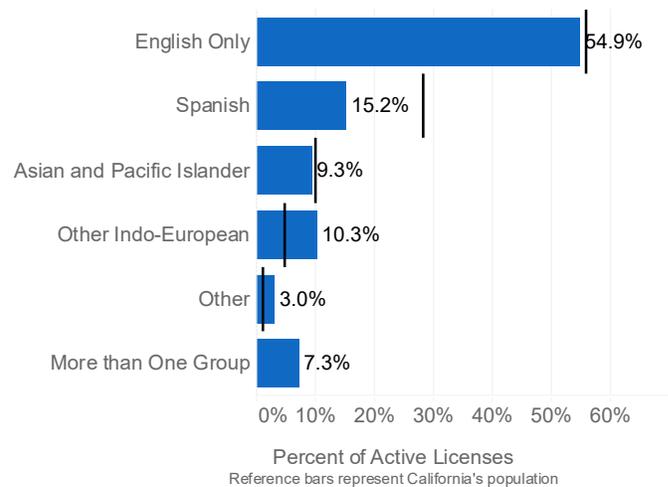
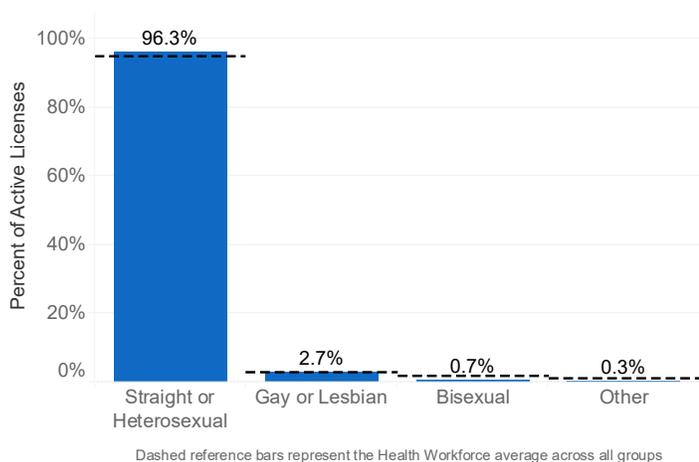


Table E-8: Languages Spoken: Medicine

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Naturopathic Doctor	72.5%	8.6%	4.6%	7.9%	2.7%	3.7%
Osteopathic Physician and Surgeon	59.4%	11.5%	11.8%	8.6%	2.0%	6.7%
Physician And Surgeon	53.6%	14.8%	9.5%	11.2%	3.2%	7.7%
Physician Assistant	60.3%	20.9%	7.1%	4.8%	1.9%	4.9%
Medicine Group	54.9%	15.2%	9.3%	10.3%	3.0%	7.3%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Figure E-9: Sexual Orientation: Medicine



As a group, the majority (96.3%) of Medicine licensees reported identifying as Straight or Heterosexual and 2.7% reported identifying as Gay or Lesbian. Less than one percent identified as Bisexual and only 0.3% identified as Other, the lowest rate among any health workforce group. Notably, Osteopathic Physicians and Surgeons and Physicians and Surgeons reported some of the lowest rates for Bisexual and Other of any license type within the health workforce, while Naturopathic Doctors reported identifying as Bisexual well above the health workforce average.

Table E-9: Sexual Orientation: Medicine

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Naturopathic Doctor	91.9%	2.9%	4.8%	0.4%
Osteopathic Physician and Surgeon	96.7%	2.6%	0.5%	0.2%
Physician And Surgeon	96.4%	2.7%	0.6%	0.3%
Physician Assistant	95.5%	2.9%	1.3%	0.3%
Medicine Group	96.3%	2.7%	0.7%	0.3%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Figure E-10: Sex at Birth: Medicine

As a group, the majority (54.7%) of Medicine licensees reported identifying as Male, and 45.2% reported identifying as Female. While this is the highest percentage identifying as Male of any health workforce group, it is also the closest split between Male and Female licensees of any health workforce group and closest to California's population. Licensees identifying as Unknown/Undetermined were the lowest of any health workforce group at less than 0.1%. Notably, Osteopathic Physicians and Surgeons have the closest split between Male and Female licensees of any license type within the health workforce.

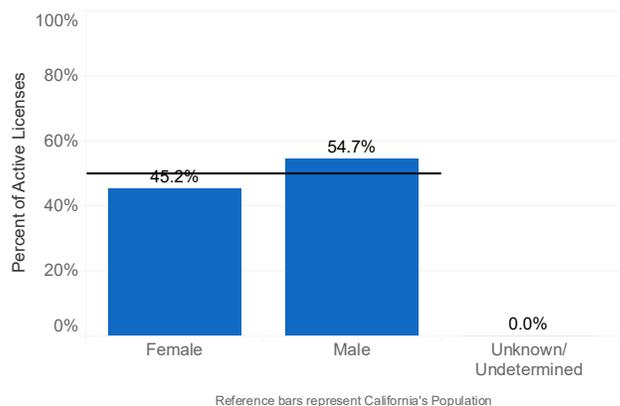
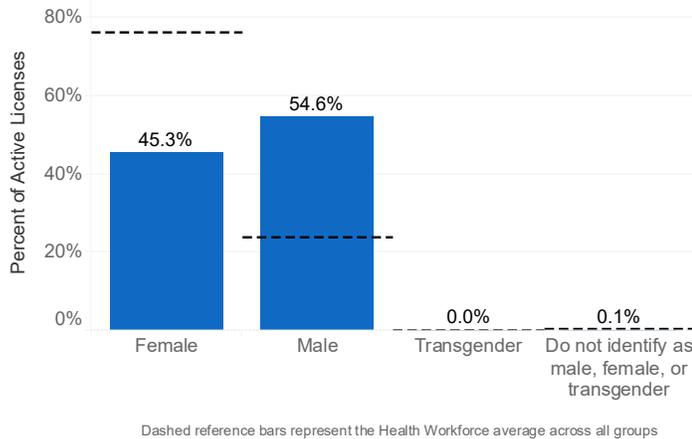


Table E-10: Sex at Birth: Medicine

License Name	Female	Male	Unknown/Undetermined
Naturopathic Doctor	75.9%	24.1%	0.0%
Osteopathic Physician and Surgeon	46.1%	53.9%	0.0%
Physician And Surgeon	41.8%	58.2%	0.0%
Physician Assistant	69.7%	30.3%	0.0%
Medicine Group	45.2%	54.7%	0.0%
California's Population	50.0%	50.0%	N/A

Figure E-11: Gender Identity: Medicine



As a group, the majority (54.6%) of Medicine licensees reported identifying as Male, and almost 45.3% reported identifying as Female. While this is the highest percentage identifying as Male of any health workforce group, it is also the closest split between Male and Female licensees of any health workforce group. Licensees identifying as Transgender were the lowest of any health workforce group at less than 0.1%, and licensees not identifying as Male, Female or Transgender were below the workforce average at 0.1%. Notably, Osteopathic Physicians and Surgeons have the closest split between Male

and Female licensees of any license type within the health workforce.

Table E-11: Gender Identity: Medicine

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Naturopathic Doctor	75.8%	24.0%	0.0%	0.2%
Osteopathic Physician and Surgeon	46.3%	53.6%	0.0%	0.1%
Physician And Surgeon	41.8%	58.0%	0.0%	0.1%
Physician Assistant	69.6%	30.3%	0.0%	0.1%
Medicine Group	45.3%	54.6%	0.0%	0.1%
Health Workforce Average	75.9%	23.8%	0.1%	0.1%

Figure E-12: Disability Status: Medicine

On average, 98.5% of Medicine licensees did not identify as having a disability, while only 1.5% reported having a disability, the lowest of any health workforce group. Within the Medicine workforce, Naturopathic Doctors reported the highest rates of having a disability at 3%, while Osteopathic Physicians and Surgeons and Physicians and Surgeons reported the lowest at just over one percent each, the lowest rates among all license types within the health workforce.

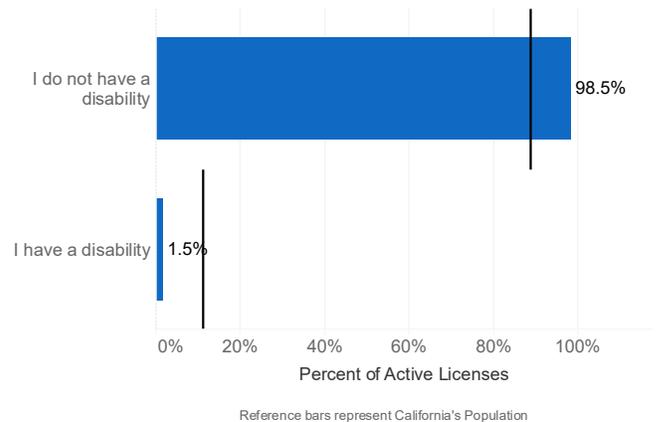
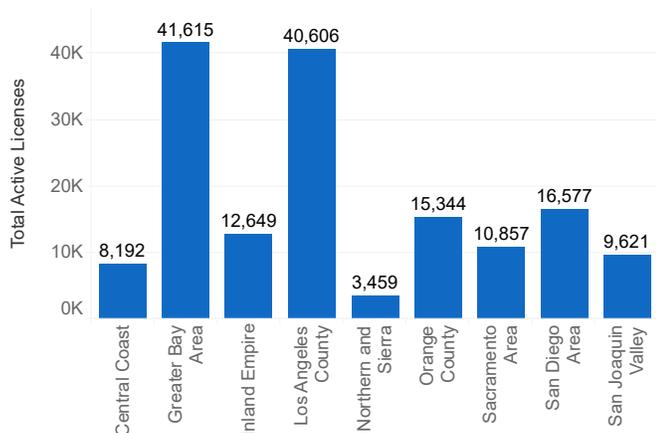


Table E-12: Disability Status: Medicine

License Name	I do not have a disability	I have a disability
Naturopathic Doctor	97.0%	3.0%
Osteopathic Physician and Surgeon	98.8%	1.2%
Physician And Surgeon	98.6%	1.4%
Physician Assistant	97.3%	2.7%
Medicine Group	98.5%	1.5%
California's Population	88.7%	11.3%

Figure E-13: Active Licenses: Medicine



As a group, the Greater Bay Area has the highest total number of Medicine licenses in the state while the Northern & Sierra Region has the fewest. Within the Medicine workforce, Physicians and Surgeons make up nearly 82% of all active Medicine licenses, while Naturopathic Doctors make up the smallest portion at 0.5%. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure E-15: Distribution Index: Medicine](#)).

Table E-13: Active Licenses: Medicine

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Naturopathic Doctor	53	215	33	127	26	100	50	218	15
Osteopathic Physician and Surgeon	756	2,081	1,652	2,832	393	1,209	840	1,234	965
Physician And Surgeon	6,288	36,313	9,201	33,826	2,434	12,087	8,891	13,292	7,390
Physician Assistant	1,095	3,006	1,763	3,821	606	1,948	1,076	1,833	1,251
Medicine Group	8,192	41,615	12,649	40,606	3,459	15,344	10,857	16,577	9,621

Figure E-14: New Licenses: Medicine

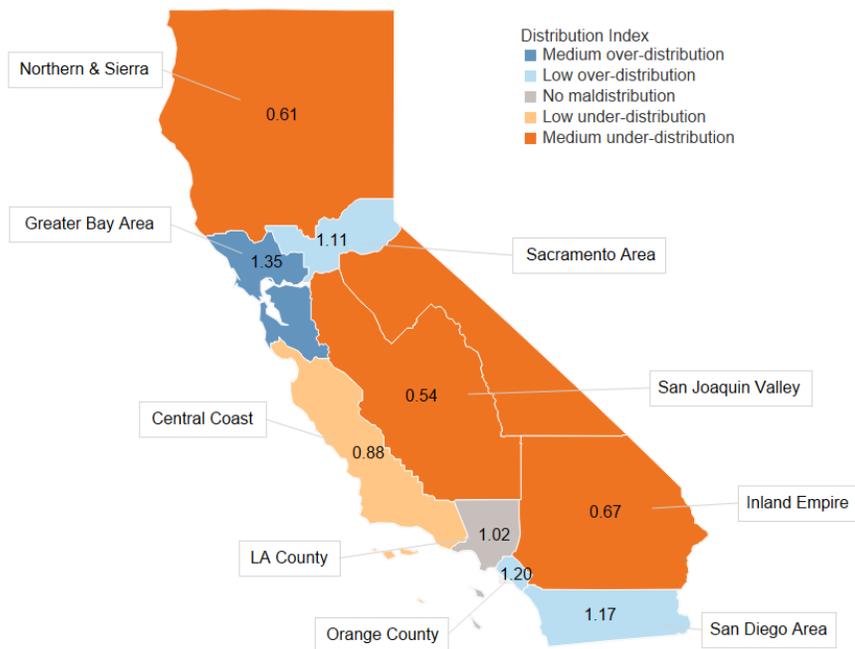
On average, there were 423 new active Medicine licenses issued per month from October 2024 to September 2025. Within the Medicine workforce, Physicians and Surgeons make up the largest portion by total volume with an average of 268 new active licenses issued per month, while Physician Assistants had the highest average issue rate relative to their total volume at just 0.6%. Future work will aim to use this information in conjunction with education pipeline data to better understand potential workforce supply trends.



Table E-14: New Licenses: Medicine

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Naturopathic Doctor	13	4	5	1	1	1	3	7	4	2	2	5
Osteopathic Physician and Surgeon	59	30	30	31	49	43	56	45	43	82	62	64
Physician And Surgeon	293	193	192	193	223	314	269	262	229	467	322	258
Physician Assistant	169	93	79	129	180	99	48	88	108	107	55	60
Medicine Group	534	320	306	354	453	457	376	402	384	658	441	387

Figure E-15: Distribution Index: Medicine



The distribution index describes the magnitude of difference between a region’s share of the state’s licenses and its share of the state’s population. A distribution index of 1 indicates the region has an equal share of the state’s licenses and population (e.g., 10% of the state’s licenses and 10% of the state’s population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state’s licenses and 10% of the state’s population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution.

The Greater Bay Area region has the highest total count of active Medicine licenses by volume, as well as the highest distribution of active Medicine licenses compared to the population. While Northern & Sierra region has the lowest total count of active Medicine licenses by volume, San Joaquin Valley has the lowest distribution of active Medicine licenses compared to the population. Specifically, the region has just over 50% of the Physicians and Surgeons, as well as less than 20% of the amount of Naturopathic Doctors they should have based on their population size.

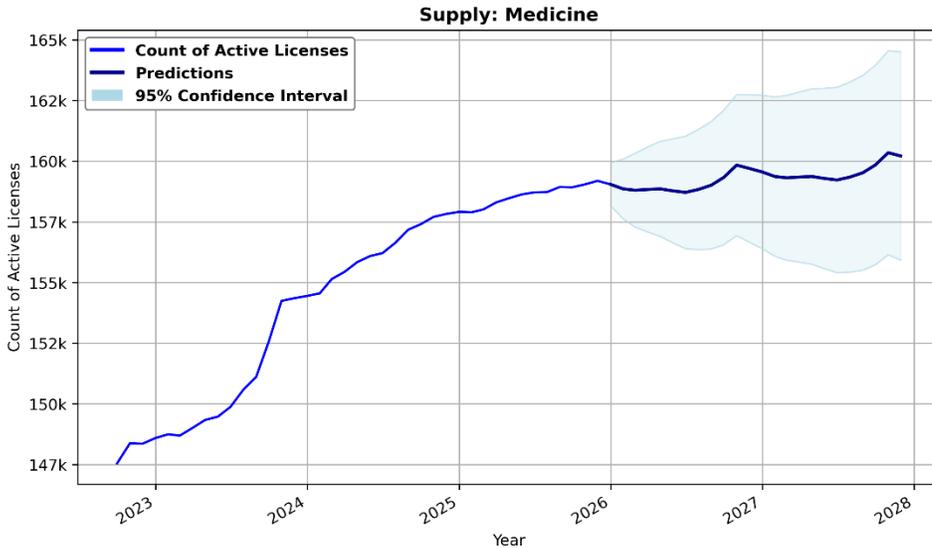
Table E-15: Distribution Index: Medicine

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Naturopathic Doctor	1.08	1.33	0.33	0.61	0.87	1.49	0.97	2.93	0.16
Osteopathic Physician and Surgeon	1.07	0.90	1.16	0.95	0.92	1.26	1.14	1.16	0.72
Physician And Surgeon	0.82	1.45	0.60	1.04	0.52	1.16	1.11	1.15	0.51
Physician Assistant	1.13	0.95	0.91	0.93	1.03	1.48	1.06	1.26	0.68
Medicine Group	0.88	1.35	0.67	1.02	0.61	1.20	1.11	1.17	0.54

■ Low Under-Distribution (0.95-0.75) ■ No Maldistribution (0.95-1.05) ■ Low Over-Distribution (1.05-1.25)
■ Medium Under-Distribution (0.75-0.50) ■ Medium Over-Distribution (1.25-1.50)
■ High Under-Distribution (0.50 or less) ■ High Over-Distribution (1.50 or more)

Overall, Medicine licenses are fairly well distributed across the state, though there is an extremely high ratio of Naturopathic Doctors in the San Diego Area. The San Joaquin Valley Region has the lowest distribution index across all Medicine license types; the value of 0.54 indicates that the share of the state’s Medicine licenses is nearly half that of the San Joaquin Valley Region’s population, though this is mostly being driven by a low rate of Naturopathic Doctors in the region.

Figure E-16: Supply Projections: Medicine



To project supply for the Medicine workforce, each license type within the group was individually modelled with a 95% confidence interval. Active license counts for each month from September 2022 to November 2025 were used to predict the monthly supply of active licenses each month from December 2025 to November 2027. The table below lists the count of active licenses for September of each year.

On average, the Medicine workforce is expected to grow 0.6% by the end of 2027. Every license type within the group is expected to increase over the next three years, with the greatest growth occurring in Osteopathic Physicians and Surgeons who have a projected growth rate of 12% by 2027. These metrics combined with Retirement estimates (see [Figure E-5: Retirement Estimates: Medicine](#)) will be crucial for calculating more accurate supply and demand projections for each license type in our modeling data.

Table E-16: Supply Projections: Medicine

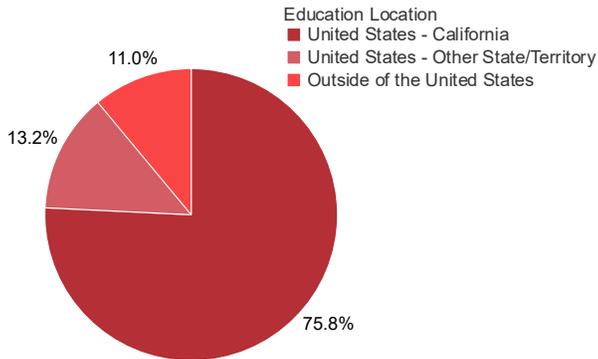
License Types	2022	2023	2024	2025	2026	2027
Naturopathic Doctor	793	794	828	837	850	864
Osteopathic Physician and Surgeon	9,747	10,843	11,530	11,962	12,669	13,399
Physician and Surgeon	123,242	126,399	129,638	129,724	128,555	127,449
Physician Assistant	13,764	14,515	15,403	16,399	17,257	18,130
Medicine Group	147,546	152,551	157,399	158,922	159,331	159,842

Note: Cells shaded in light blue are predictions based on the Workforce Supply Model (see Figure E-16).

Section F: Nursing, All Figures

This section focuses on licenses issued by the California Board of Registered Nursing (Registered Nurse, Public Health Nurse) and Board of Vocational Nursing and Psychiatric Technicians (Vocational Nurse).

Figure F-1: Education Location: Nursing



Nearly 90% of Nursing licensees completed their education in the U.S., with over 75% receiving their initial qualifying degree within California. 11% reported receiving their initial qualifying degree outside the U.S., the highest of all health workforce Groups. Notable license types within the Nursing workforce include Registered Nurses with just under 70% receiving their initial qualifying degree in California and 14.1% receiving their initial qualifying degree from somewhere outside the U.S.

Table F-1: Education Location: Nursing

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Public Health Nurse	93.2%	5.1%	1.7%
Registered Nurse	69.2%	16.8%	14.1%
Vocational Nurse	92.5%	3.4%	4.0%
Nursing Group	75.8%	13.2%	11.0%

Figure F-2: Employment Status: Nursing

Over 92% of Nursing licensees are actively working or seeking work, while just under two percent are actively working in a different field and just under four percent are already retired. Notable license types within the Nursing workforce include Vocational Nurses with 3.2% actively working in a different field, and over six percent of Public Health Nurses reporting already being retired despite their active license status. These metrics will be used in the future to calculate more accurate supply data for each license type.

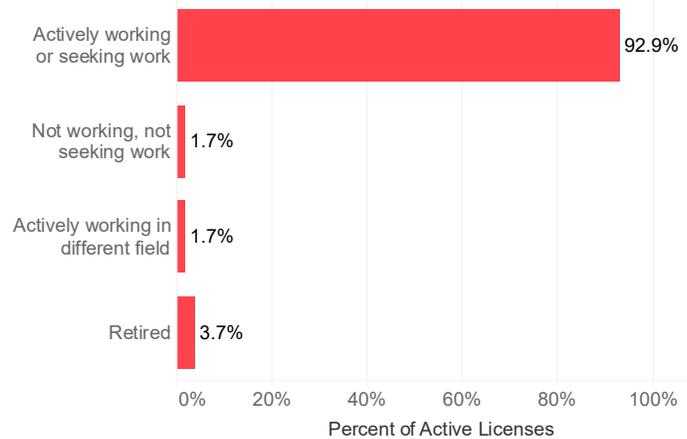
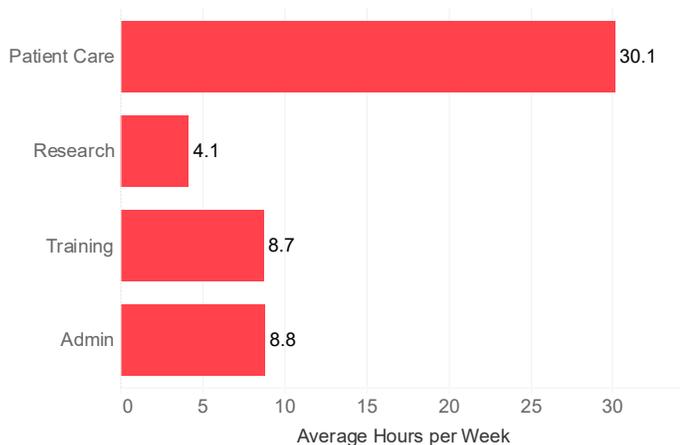


Table F-2: Employment Status: Nursing

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Public Health Nurse	89.9%	2.1%	1.4%	6.6%
Registered Nurse	93.1%	1.7%	1.3%	3.9%
Vocational Nurse	94.0%	1.4%	3.2%	1.3%
Nursing Group	92.9%	1.7%	1.7%	3.7%

Figure F-3: Full-Time Equivalent Metrics: Nursing



Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Nursing licensees spend the highest number of hours per week on Patient Care (30.1 hours), and the least amount of time per week on Research (4.1 hours). Notable license types within the Nursing workforce include Public Health Nurses, who reported spending the least amount of time on Patient Care at only 26.5 hours per week, and Vocational Nurses who reported the highest amounts of time per week on Training (11.3 hours) and Admin (11.6 hours).

Table F-3: Full-Time Equivalent Metrics: Nursing

License Name	Patient Care	Research	Training	Admin
Public Health Nurse	26.5	4.1	8.4	10.0
Registered Nurse	30.4	3.6	8.2	8.0
Vocational Nurse	31.0	6.6	11.3	11.6
Nursing Group	30.1	4.1	8.7	8.8

Figure F-4: Retirement Estimates: Nursing

Among Nursing licensees who reported actively working in a position that required their license, or were actively seeking work in their field, 71.5% estimated retiring in 11 or more years, and 4.9% estimated retiring within the next two years, the highest rate among all health workforce groups. Of note are Public Health Nurses and Registered Nurses, with 16% estimating retiring within the next five years, and over 30% estimating retiring in the next 10 years. The higher rate among Public Health Nurses may be partly attributable to age, as more than 25% are over 50 years old (see [Table F-5: Age Distribution: Nursing](#)). However, the factors contributing to the speed of retirement estimates in Registered Nurses remains unclear. These metrics will be crucial for calculating more accurate supply and demand models for each license type.

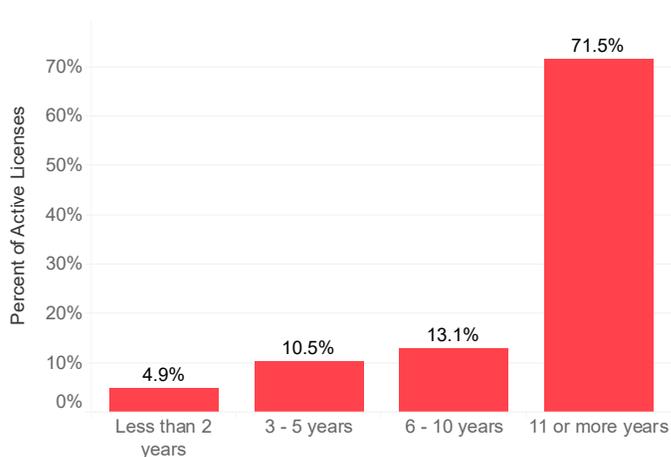
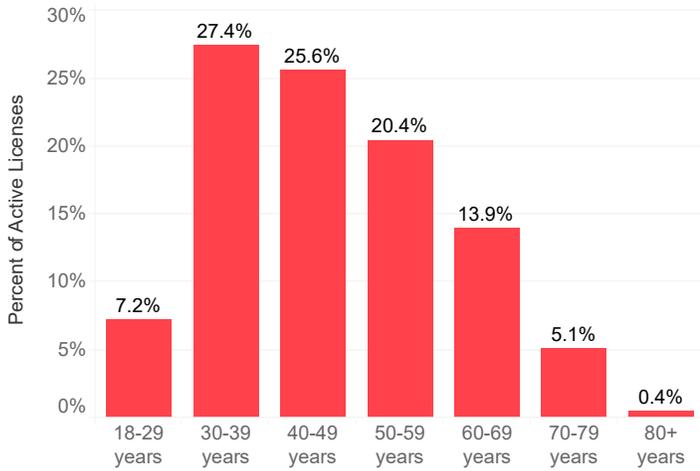


Table F-4: Retirement Estimates: Nursing

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Public Health Nurse	6.7%	12.7%	13.8%	66.9%
Registered Nurse	5.2%	10.8%	13.4%	70.6%
Vocational Nurse	2.6%	7.8%	11.1%	78.5%
Nursing Group	4.9%	10.5%	13.1%	71.5%

Figure F-5: Age Distribution: Nursing



Overall, just over 73% of Nursing licensees are between the ages of 30 and 59 years old, with 7.2% under the age of thirty, and 19.4% over the age of 59. License types with younger licensees include Vocational Nurses with nearly 40% of licensees under the age of 40. License types with older licensees include Public Health Nurses with more than 25% over the age of 59.

Table F-5: Age Distribution: Nursing

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Public Health Nurse	5.2%	23.8%	26.0%	19.7%	16.9%	7.6%	0.8%
Registered Nurse	7.0%	27.2%	25.3%	20.8%	14.1%	5.2%	0.5%
Vocational Nurse	9.3%	30.3%	26.6%	19.0%	11.6%	3.1%	0.2%
Nursing Group	7.2%	27.4%	25.6%	20.4%	13.9%	5.1%	0.4%

Figure F-6: Race/Ethnicity: Nursing

Across the Nursing workforce, Hispanic, Any Race and American Indian, Non-Hispanic licensees are the most underrepresented when compared to California's population, with no license types at or above the population average for Hispanic, Any Race or Multiracial, Non-Hispanic and only Vocational Nurses at or above the population average for American Indian, Non-Hispanic. Conversely, Asian, Non-Hispanic licensees are the most well represented with all three license types at or above the population average. White, Non-Hispanic licensees are equally represented in the Nursing workforce on average but are underrepresented amongst Vocational Nurses.

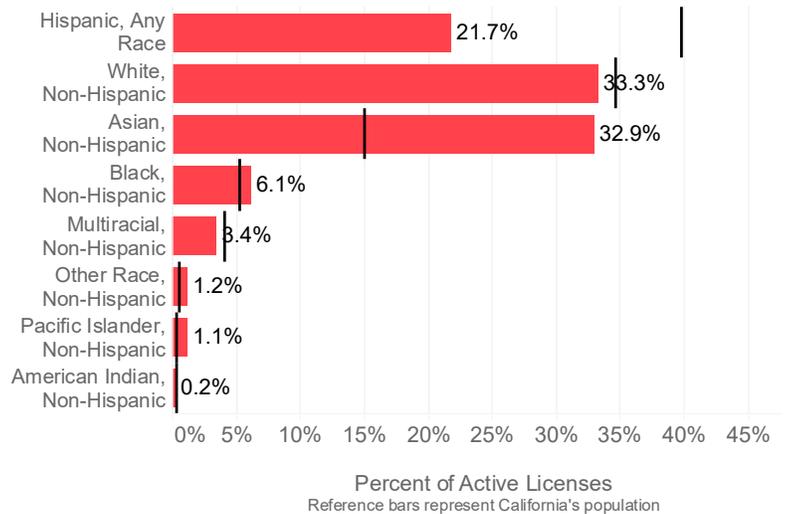
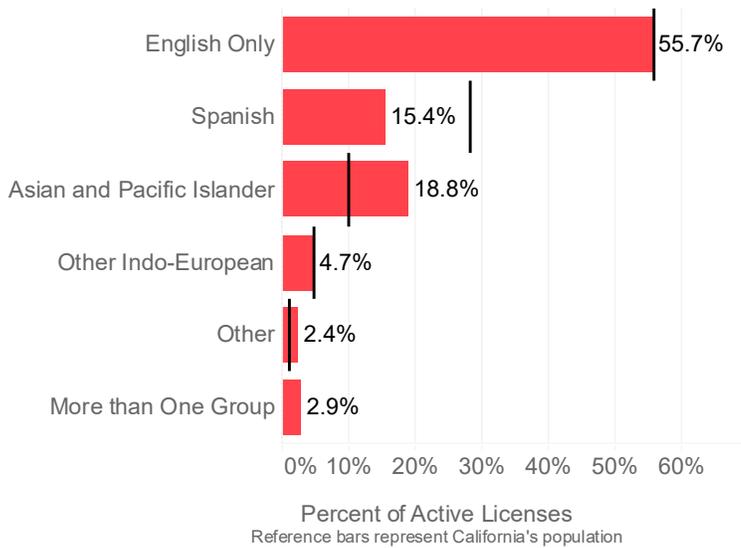


Table F-6: Race/Ethnicity: Nursing

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Public Health Nurse	21.0%	38.2%	27.8%	6.8%	3.9%	1.1%	0.9%	0.2%
Registered Nurse	18.1%	36.7%	34.4%	5.0%	3.4%	1.2%	1.1%	0.2%
Vocational Nurse	36.7%	16.8%	29.8%	10.3%	3.3%	1.3%	1.5%	0.3%
Nursing Group	21.7%	33.3%	32.9%	6.1%	3.4%	1.2%	1.1%	0.2%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

NH = Non-Hispanic

Figure F-7: Languages Spoken: Nursing



On average, Spanish is the most underrepresented language in the Nursing workforce when compared to California's population, with no license types at or above the population average. Conversely, Asian and Pacific Islander languages are represented well above the population average overall and have the highest average of any health workforce group with all three license types well above the population average. Other languages are also represented well above the population average overall and are above the population average for all three individual license types. Other Indo-European languages are equally represented compared to the population.

Table F-7: Languages Spoken: Nursing

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Public Health Nurse	62.1%	16.3%	12.5%	4.0%	2.4%	2.7%
Registered Nurse	57.3%	12.8%	19.8%	4.8%	2.4%	3.0%
Vocational Nurse	45.7%	25.4%	18.6%	4.8%	2.6%	2.9%
Nursing Group	55.7%	15.4%	18.8%	4.7%	2.4%	2.9%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Figure F-8: Sexual Orientation: Nursing

As a group, the majority (95.6%) of Nursing licensees reported identifying as Straight or Heterosexual, and 2.3% reported identifying as Gay or Lesbian. Licensees identifying as Bisexual were just below the health workforce average at 1.3%, and licensees identifying as Other were nearly even with the health workforce average at 0.8%. Within the Nursing workforce, all three license types reported identifying as Gay or Lesbian or Bisexual below the workforce average, and only one reported identifying as Other at or above the workforce average.

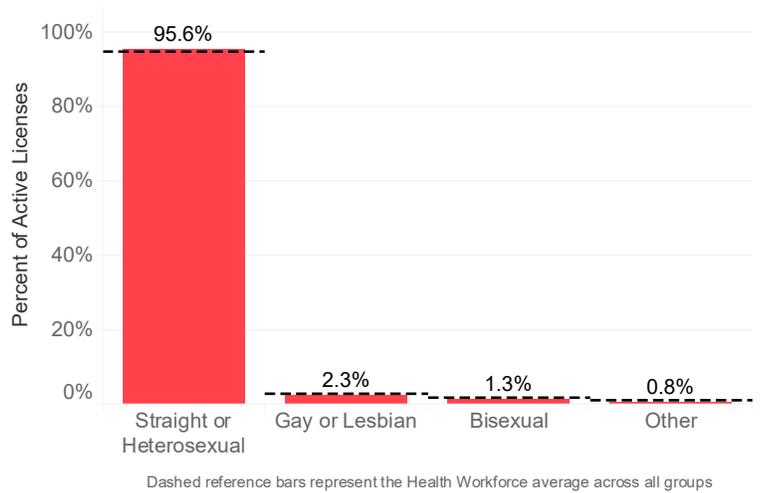
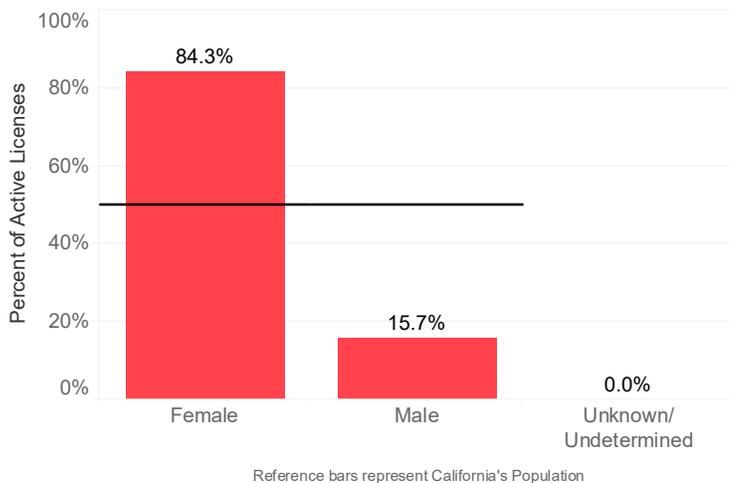


Table F-8: Sexual Orientation: Nursing

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Public Health Nurse	95.5%	2.4%	1.4%	0.6%
Registered Nurse	95.5%	2.5%	1.3%	0.7%
Vocational Nurse	96.0%	1.7%	1.2%	1.1%
Nursing Group	95.6%	2.3%	1.3%	0.8%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Figure F-9: Sex at Birth: Nursing



As a group, the majority (84.3%) of Nursing licensees reported identifying as Female, and nearly 16% reported identifying as Male. Less than 0.1% of licensees identified as Unknown/Undetermined. Sexes were very similarly distributed across all three license types within the Nursing group, with only a slight increase in licensees identifying as Female vs Male at birth for Public Health Nurses. All three license types were above the health workforce average for licensees identifying as Female at birth and below the health workforce average for those identifying as Male at birth.

Table F-9: Sex at Birth: Nursing

License Name	Female	Male	Unknown/Undetermined
Public Health Nurse	88.6%	11.4%	0.1%
Registered Nurse	83.8%	16.2%	0.0%
Vocational Nurse	83.8%	16.1%	0.1%
Nursing Group	84.3%	15.7%	0.0%
California's Population	50.0%	50.0%	N/A

Figure F-10: Gender Identity: Nursing

As a group, the majority (84.2%) of Nursing licensees reported identifying as Female, and 15.6% reported identifying as Male. Licensees identifying as Transgender or not identifying as Male, Female or Transgender were even at 0.1% each. Gender Identities were very similarly distributed across all three license types within the Nursing group, with only a slight increase in licensees identifying as Female vs Male for Public Health Nurses. All three license types were above the health workforce average for licensees identifying as Female, below the health workforce average for those identifying as Male, or not identifying as Male, Female or Transgender, and just at the health workforce average for licensees identifying as Transgender.

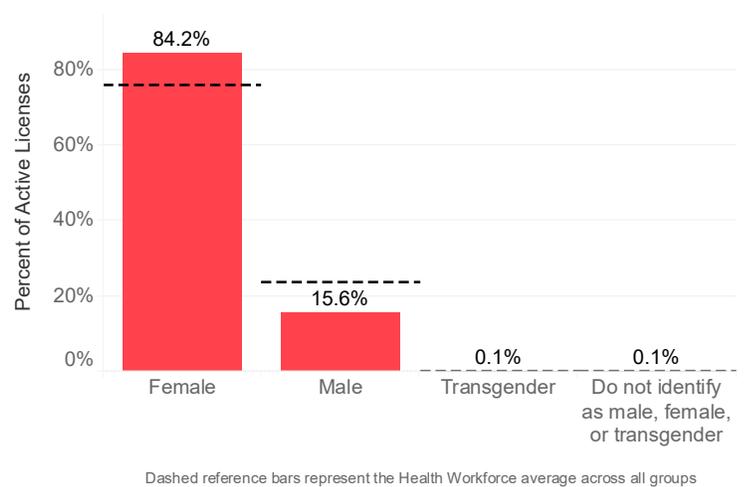
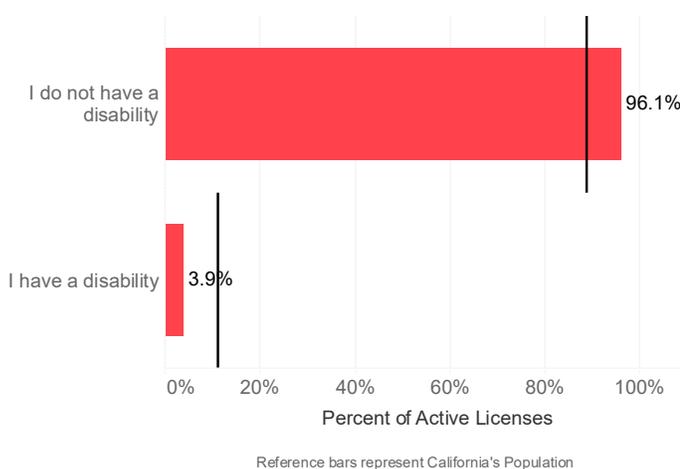


Table F-10: Gender Identity: Nursing

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Public Health Nurse	88.5%	11.3%	0.1%	0.2%
Registered Nurse	83.7%	16.1%	0.1%	0.1%
Vocational Nurse	83.8%	16.0%	0.1%	0.1%
Nursing Group	84.2%	15.6%	0.1%	0.1%
Health Workforce Average	75.9%	23.8%	0.1%	0.1%

Figure F-11: Disability Status: Nursing



On average, 96.1% of Nursing licensees did not identify as having a disability, while 3.9% reported having a disability. Within the Nursing workforce, Public Health Nurses reported the highest rates of having a disability at 5.1%, while Vocational Nurses reported the lowest rate at 3.6%.

Table F-11: Disability Status: Nursing

License Name	I do not have a disability	I have a disability
Public Health Nurse	94.9%	5.1%
Registered Nurse	96.3%	3.7%
Vocational Nurse	96.4%	3.6%
Nursing Group	96.1%	3.9%
California's Population	88.7%	11.3%

Figure F-12: Active Licenses: Nursing

As a group, the Los Angeles County Region has the highest total number of Nursing licenses in the state while the Northern & Sierra Region has the fewest. Within the Nursing workforce, Registered Nurses make up more than 72% of all active Nursing licenses and are the largest of any license type across the health workforce at 437,899 active licenses. Public Health Nurses make up the smallest portion of the Nursing workforce at just over seven percent. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure F-14: Distribution Index: Nursing](#)).

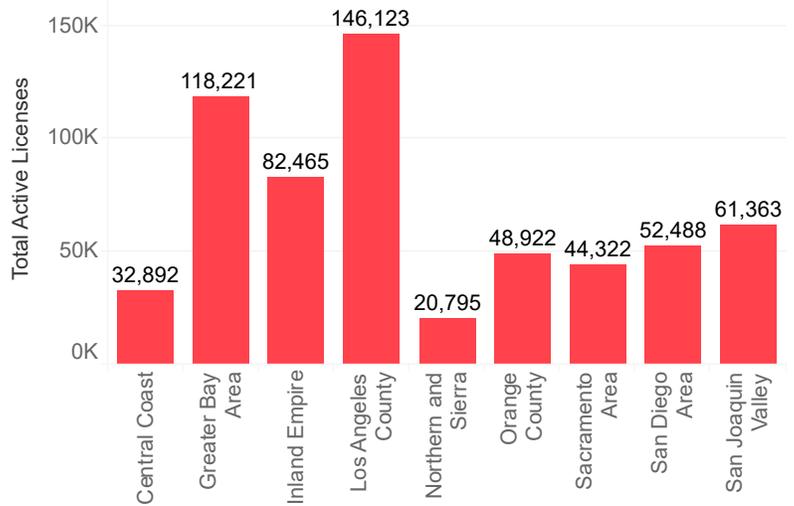


Table F-12: Active Licenses: Nursing

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Public Health Nurse	3,374	13,485	7,271	14,456	2,137	5,250	4,355	4,423	4,906
Registered Nurse	24,899	89,198	55,520	98,859	14,975	36,361	34,433	40,993	42,661
Vocational Nurse	4,619	15,538	19,674	32,808	3,683	7,311	5,534	7,072	13,796
Nursing Group	32,892	118,221	82,465	146,123	20,795	48,922	44,322	52,488	61,363

Figure F-13: New Licenses: Nursing



On average, there were 3,055 new active Nursing licenses issued per month from October 2024 to September 2025. Within the Nursing workforce, Registered Nurses make up the largest portion by total volume with an average of 1,839 new active licenses issued per month, while Public Health Nurses had the highest average issue rate relative to their total volume at just under one percent. Future work will aim to use this information in conjunction with education pipeline data to better understand potential workforce supply trends.

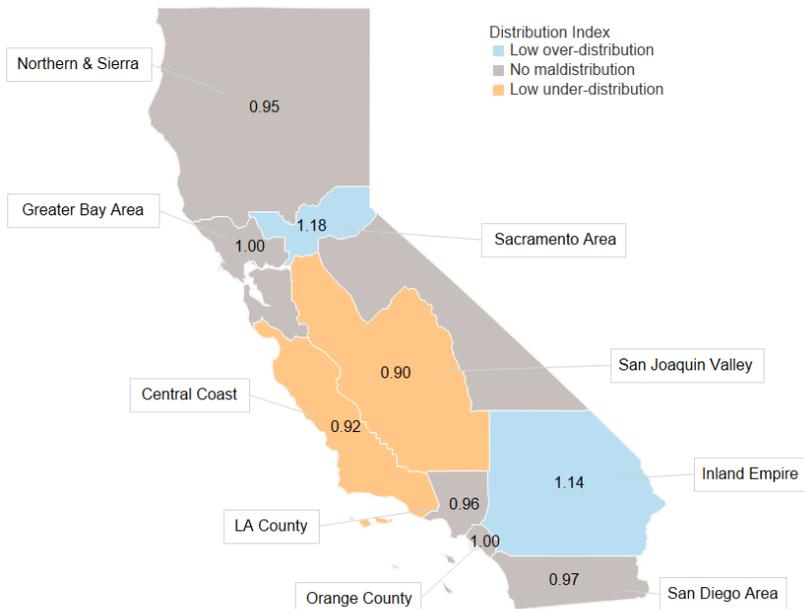
Table F-13: New Licenses: Nursing

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Public Health Nurse	508	311	448	467	404	367	421	588	544	640	704	570
Registered Nurse	1,523	1,189	1,127	1,919	2,648	1,414	1,200	1,241	2,465	4,015	1,563	1,759
Vocational Nurse	810	532	677	795	593	644	886	644	753	789	710	788
Nursing Group	2,841	2,032	2,252	3,181	3,645	2,425	2,507	2,473	3,762	5,444	2,977	3,117

Figure F-14: Distribution Index: Nursing

The distribution index describes the magnitude of difference between a region’s share of the state’s licenses and its share of the state’s population. A distribution index of 1 indicates the region has an equal share of the state’s licenses and population (e.g., 10% of the state’s licenses and 10% of the state’s population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state’s licenses and 10% of the state’s population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution.

Note: These distribution indexes reflect the distribution of active licenses, not the distribution of providers as presented in [Section B: Model Projections, Nursing](#).



While Los Angeles County region has the highest total count of active Nursing licenses by volume, the Sacramento Area region has the highest distribution of active licenses compared to the population. Similarly, while Northern & Sierra region has the lowest total count of active Nursing licenses by volume, San Joaquin Valley has the lowest distribution of active licenses compared to the population. As a group, the Nursing workforce is the most well distributed of all health workforce groups.

Table F-14: Distribution Index: Nursing

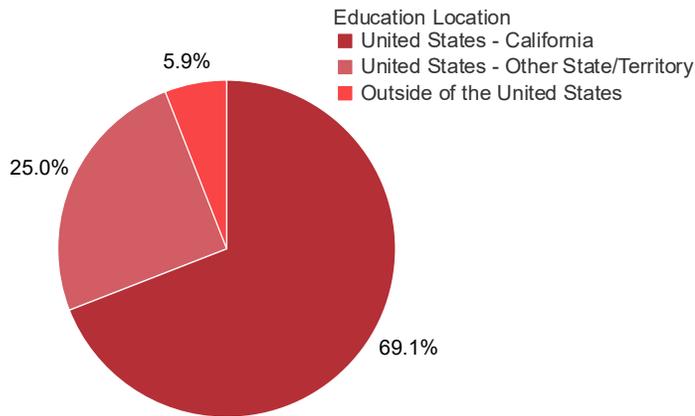
License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Public Health Nurse	0.96	1.17	1.03	0.97	1.00	1.09	1.18	0.83	0.74
Registered Nurse	0.97	1.05	1.07	0.90	0.95	1.03	1.27	1.05	0.87
Vocational Nurse	0.71	0.73	1.51	1.19	0.93	0.83	0.81	0.72	1.12
Nursing Group	0.92	1.00	1.14	0.96	0.95	1.00	1.18	0.97	0.90

■ Low Under-Distribution (0.95-0.75) ■ No Maldistribution (0.95-1.05) ■ Low Over-Distribution (1.05-1.25)
■ Medium Under-Distribution (0.75-0.50) ■ Medium Over-Distribution (1.25-1.50)
■ High Under-Distribution (0.50 or less) ■ High Over-Distribution (1.50 or more)

Section G: Advanced Practice Nursing, All Figures

This section focuses on licenses issued by the California Board of Registered Nursing (Clinical Nurse Specialist, Nurse Anesthetist, Nurse Midwife, Nurse Practitioner) and the Medical Board of California (Licensed Midwife).

Figure G-1: Education Location: Advanced Practice Nursing



Nearly 95% of Advanced Practice Nursing licensees completed their education in the U.S., but only 69.1% received their initial qualifying degree within California. Notable license types within the Advanced Practice Nursing workforce include Nurse Anesthetists with over 42% receiving their initial qualifying degree outside California, and Nurse Practitioners and Clinical Nurse Specialists with at least five percent receiving their initial qualifying degree from somewhere outside the U.S.

Table G-1: Education Location: Advanced Practice Nursing

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Clinical Nurse Specialist	74.9%	19.3%	5.7%
Nurse Anesthetist	55.3%	42.4%	2.4%
Nurse Midwife	58.8%	38.4%	2.8%
Nurse Practitioner	70.0%	23.7%	6.3%
Advanced Practice Group	69.1%	25.0%	6%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-2: Employment Status: Advanced Practice Nursing

Over 95% of Advanced Practice Nursing licensees are actively working or seeking work, while one percent are working in a different field and 2.5% have already retired. Notable license types within the Advanced Practice Nursing workforce include Nurse Midwives with over three percent reporting not working and not seeking work, and over five percent of Clinical Nurse Specialists and Nurse Midwives reporting already being retired despite their active license status. These metrics will be used in the future to calculate more accurate supply data for each license type.

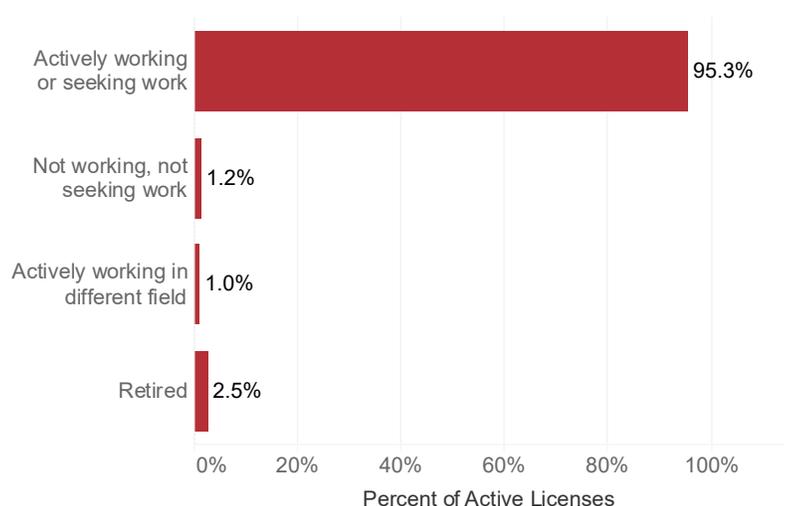
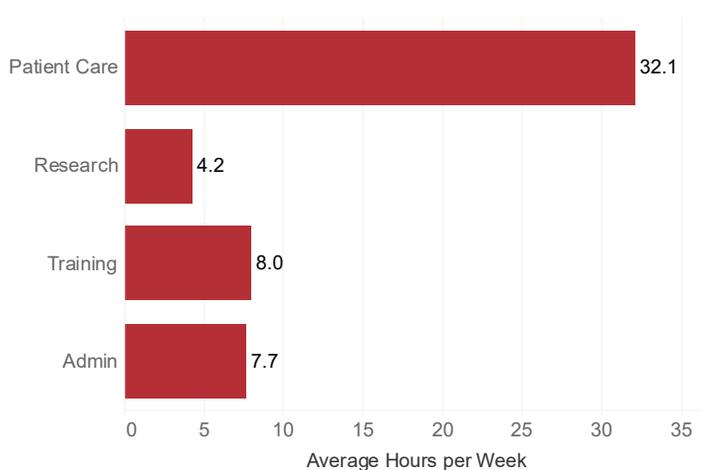


Table G-2: Employment Status: Advanced Practice Nursing

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Clinical Nurse Specialist	89.9%	1.7%	1.1%	7.4%
Nurse Midwife	90.3%	3.7%	1.0%	5.1%
Nurse Practitioner	95.7%	1.1%	1.1%	2.1%
Nurse Anesthetist	98.4%	0.7%	0.3%	0.6%
Advanced Practice Group	95.3%	1.2%	1.0%	2.5%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-3: Full-Time Equivalent Metrics: Advanced Practice Nursing



Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Advanced Practice Nursing licensees spend the highest number of hours per week on Patient Care (32.1 hours), and the least amount of time per week on Research (4.2 hours). Notable license types within the Advanced Practice Nursing workforce include Clinical Nurse Specialists, who reported spending the least amount of time on Patient Care at only 18.9 hours per week, and Nurse Anesthetists with the highest amounts of time per week on Patient Care at 35.7 hours. Clinical

Nurse Specialists also reported the highest amounts of time per week on Research (5.6), Training (11.0) and Admin (13.3). These metrics will be used in the future to calculate more accurate supply and demand modeling.

Table G-3: Full-Time Equivalent Metrics: Advanced Practice Nursing

License Name	Patient Care	Research	Training	Admin
Clinical Nurse Specialist	18.9	5.6	11.0	13.3
Nurse Anesthetist	35.7	1.8	6.4	3.6
Nurse Midwife	30.6	1.6	6.3	5.1
Nurse Practitioner	32.9	4.4	7.9	7.7
Advanced Practice Group	32.1	4.2	8.0	7.7

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-4: Retirement Estimates: Advanced Practice Nursing

Among Advanced Practice Nursing licensees who reported actively working in a position that required their license, or were actively seeking work in their field, 72.3% estimated retiring in 11 or more years, and 4.1% estimated retiring within the next two years. Of note are Clinical Nurse Specialists, with nearly 30% estimating retirement in the next five years, and nearly 50% estimating retiring within the next 10 years. Almost 22% of Nurse Midwives also estimate retirement within the next five years. These metrics will be crucial for calculating more accurate supply and demand models for each license type. In addition, this information may be useful in helping to identify which areas are in most need of funding to maintain the supply of Advanced Practice Nursing licensees across the state.

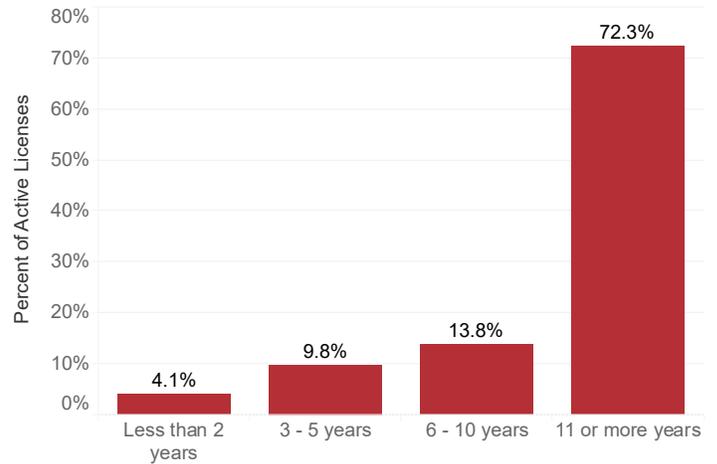


Table G-4: Retirement Estimates: Advanced Practice Nursing

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Clinical Nurse Specialist	9.8%	19.9%	19.1%	51.3%
Nurse Anesthetist	4.3%	9.7%	14.5%	71.5%
Nurse Midwife	7.1%	14.5%	16.4%	62.0%
Nurse Practitioner	3.5%	8.9%	13.2%	74.4%
Advanced Practice Group	4.1%	9.8%	13.8%	72.3%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-5: Age Distribution: Advanced Practice Nursing

Overall, 80% of Advanced Practice Nursing licensees are between the ages of 30 and 59 years old, the highest across all health workforce groups, with only 1.8% under the age of thirty, and 17.4% over the age of 59. License types with younger licensees include Nurse Practitioners and Nurse Anesthetists with over 32% of licensees under the age of 40. License types with older licensees include Clinical Nurse Specialists with more than 35% over the age of 59.

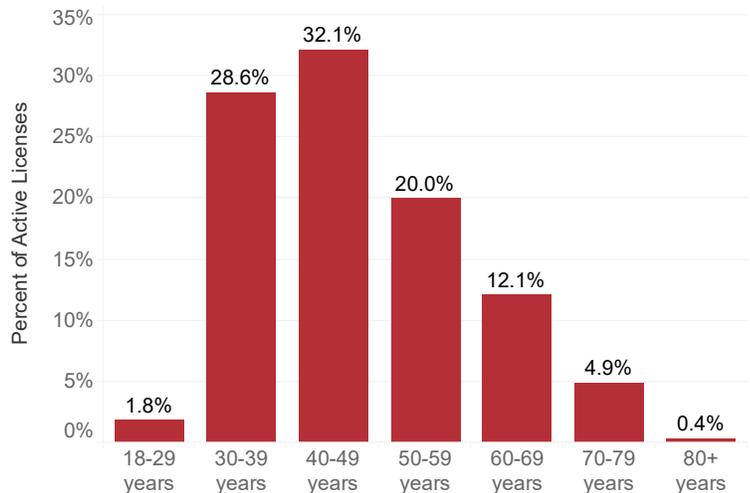
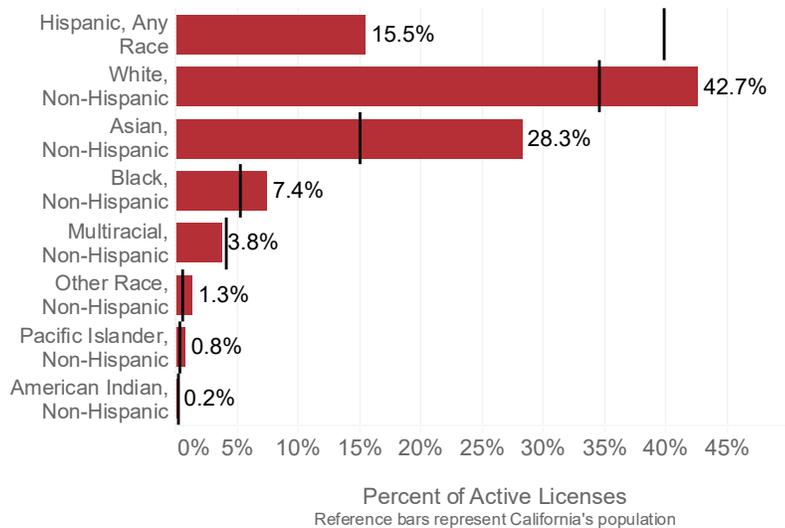


Table G-5: Age Distribution: Advanced Practice Nursing

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Clinical Nurse Specialist	0.3%	10.1%	29.2%	24.9%	22.9%	11.7%	1.0%
Licensed Midwife	1.3%	24.9%	33.5%	26.2%	11.6%	2.6%	0.0%
Nurse Anesthetist	0.9%	32.4%	34.8%	18.5%	10.4%	2.9%	0.2%
Nurse Midwife	1.2%	23.1%	28.5%	20.2%	17.8%	8.5%	0.8%
Nurse Practitioner	2.0%	30.0%	32.3%	19.7%	11.2%	4.4%	0.3%
Advanced Practice Group	1.8%	28.6%	32.1%	20.0%	12.1%	4.9%	0.4%

Figure G-6: Race/Ethnicity: Advanced Practice Nursing



Across the Advanced Practice Nursing workforce, Hispanic, Any Race licensees are the most underrepresented when compared to California’s population, with no license types at or above the population average. In addition, though American Indian, Non-Hispanic licensees are nearly equally represented in the workforce, this is driven by Nurse Midwives, which is the only license above the statewide population. Conversely, White, Non-Hispanic and Other, Non-Hispanic licensees are the most well represented with all four license types at or above the population

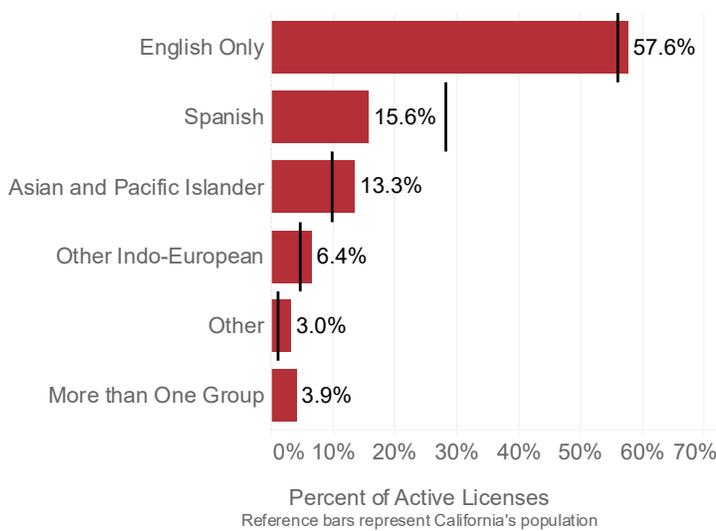
average. Asian, Non-Hispanic are well represented on average but are underrepresented amongst Nurse Midwives.

Table G-6: Race/Ethnicity: Advanced Practice Nursing

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Clinical Nurse Specialist	12.4%	54.3%	21.5%	5.8%	3.5%	1.4%	1.0%	0.2%
Nurse Anesthetist	12.6%	51.2%	24.7%	4.7%	4.4%	1.2%	1.0%	0.1%
Nurse Midwife	13.5%	67.7%	6.0%	6.4%	5.0%	1.0%	0.1%	0.4%
Nurse Practitioner	16.0%	40.2%	29.9%	7.8%	3.7%	1.3%	0.8%	0.2%
Advanced Practice Group	15.5%	42.7%	28.3%	7.4%	3.8%	1.3%	0.8%	0.2%
California’s Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals. NH = Non-Hispanic

Figure G-7: Languages Spoken: Advanced Practice Nursing



On average, Spanish is the most underrepresented language in the Advanced Practice Nursing workforce when compared to California's population, with only one license type at or above the population average. Asian and Pacific Islander languages are represented well above the population average overall, however this is largely driven by the high rates among Nurse Practitioners and Clinical Nurse Specialists, as these languages are below the population average for the other two license types within the group. Similarly, Other Indo-European languages are represented well above the population average overall but are below the population average for three of the individual license types within the group. Other

languages are represented well above the population average overall and are above the population average for all four license types included in the Advanced Practice Nursing group.

Table G-7: Languages Spoken: Advanced Practice Nursing

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Clinical Nurse Specialist	71.0%	10.8%	10.7%	3.1%	2.1%	2.3%
Nurse Anesthetist	72.2%	11.4%	8.1%	3.7%	1.9%	2.7%
Nurse Midwife	59.5%	29.2%	2.5%	2.7%	2.0%	4.2%
Nurse Practitioner	55.5%	15.8%	14.3%	7.0%	3.2%	4.1%
Advanced Practice Group	57.6%	15.6%	13.3%	6.4%	3.0%	3.9%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-8: Sexual Orientation: Advanced Practice Nursing

As a group, the majority (94.5%) of Advanced Practice Nursing licensees reported identifying as Straight or Heterosexual, and 3.3% reported identifying as Gay or Lesbian. Licensees identifying as Bisexual were even with the health workforce average at 1.6%, and licensees identifying as Other were just under the health workforce average at 0.6%. Within the Nursing workforce, all four license types reported identifying as Gay or Lesbian above the workforce average, but only half report identifying as Bisexual or Other at or above the workforce average. Notably, Nurse Midwives reported above averages rates for all three minority Sexual Orientations.

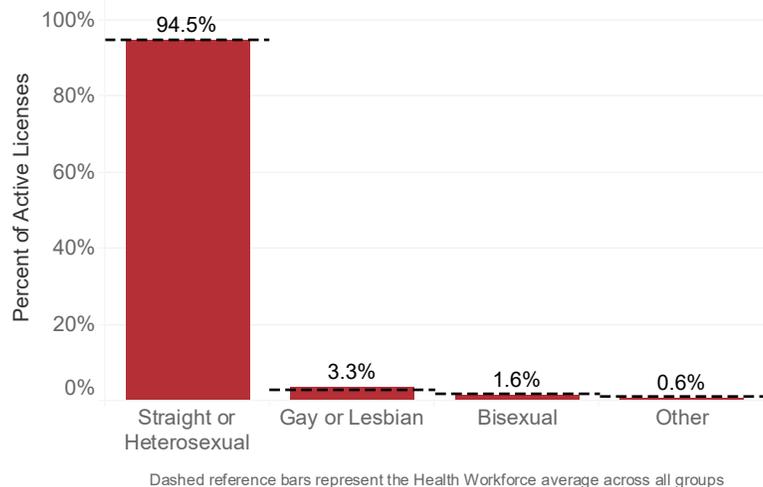
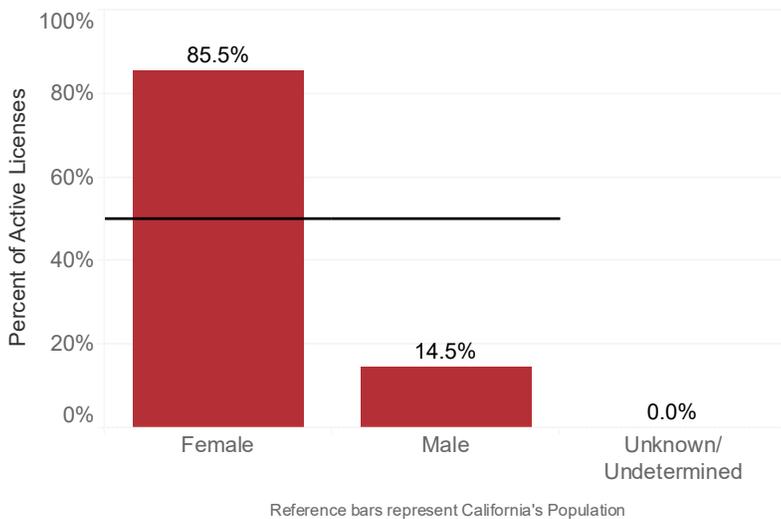


Table G-8: Sexual Orientation: Advanced Practice Nursing

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Clinical Nurse Specialist	94.1%	4.0%	1.2%	0.8%
Nurse Anesthetist	92.8%	5.8%	1.0%	0.3%
Nurse Midwife	88.0%	3.9%	6.2%	1.9%
Nurse Practitioner	94.8%	3.1%	1.5%	0.6%
Advanced Practice Group	94.5%	3.3%	1.6%	0.6%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-9: Sex at Birth: Advanced Practice Nursing



As a group, the majority (85.5%) of Advanced Practice Nursing licensees reported identifying as Female, the highest of any health workforce group, and only 14.5% reported identifying as Male, the lowest of any health workforce group. Less than 1% of licensees selected Unknown/Undetermined. Notably, there is wide variation in the distribution of responses to sex at birth among the license types within the Advanced Practice Nursing group; while less than one percent of Nurse Midwives were assigned Male at birth, the lowest of any license type within the health workforce, over 40% of Nurse Anesthetists were Male at birth.

Table G-9: Sex at Birth: Advanced Practice Nursing

License Name	Female	Male	Unknown/Undetermined
Clinical Nurse Specialist	91.1%	8.9%	0.0%
Nurse Anesthetist	57.9%	42.0%	0.1%
Nurse Midwife	99.3%	0.7%	0.0%
Nurse Practitioner	86.4%	13.6%	0.0%
Advanced Practice Group	85.5%	14.5%	0.0%
California's Population	50.0%	50.0%	N/A

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-10: Gender Identity: Advanced Practice Nursing

As a group, the majority (85.3%) of Advanced Practice Nursing licensees reported identifying as Female, the highest of any health workforce group, and only 14.4% reported identifying as Male, the lowest of any health workforce group. Licensees identifying as Transgender or not identifying as Male, Female or Transgender were even with the health workforce average at 0.1% and 0.2% respectively. Notably, there is wide variation in the distribution of Gender Identities among the license types within the Advanced Practice Nursing group; while less than one percent of Nurse Midwives identify as Male, the lowest of any license type within the health workforce, over 40% of Nurse Anesthetists identify as Male.

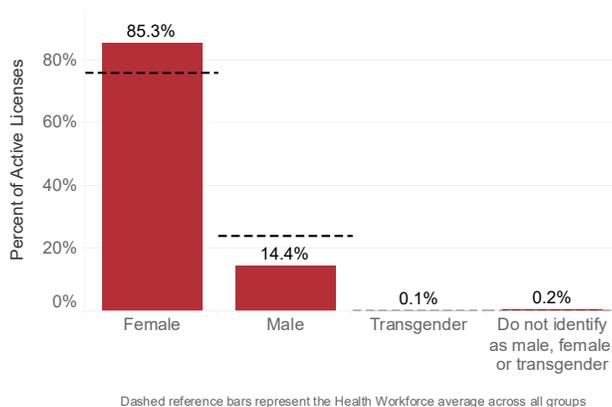
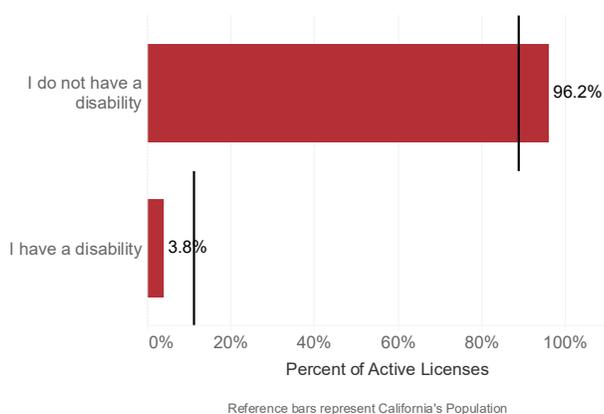


Table G-10: Gender Identity: Advanced Practice Nursing

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Clinical Nurse Specialist	90.9%	8.9%	0.1%	0.1%
Nurse Anesthetist	58.2%	41.6%	0.1%	0.1%
Nurse Midwife	98.4%	0.7%	0.3%	0.7%
Nurse Practitioner	86.1%	13.6%	0.1%	0.2%
Advanced Practice Group	85.3%	14.4%	0.1%	0.2%
Health Workforce Average	75.9%	23.8%	0.1%	0.1%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-11: Disability Status Advanced Practice Nursing



On average, 96.2% of Advanced Practice Nursing licensees did not identify as having a disability, while 3.8% reported having a disability. Within the Advanced Practice Nursing workforce, over five percent of Clinical Nurse Specialists and Nurse Midwives reported having a disability, while Nurse Anesthetists reported the lowest rate at 2.4%.

Table G-11: Disability Status Advanced Practice Nursing

License Name	I do not have a disability	I have a disability
Clinical Nurse Specialist	94.9%	5.1%
Nurse Anesthetist	97.6%	2.4%
Nurse Midwife	94.6%	5.4%
Nurse Practitioner	96.2%	3.8%
Advanced Practice Group	96.2%	3.8%
California's Population	88.7%	11.3%

Note: Licensed Midwives are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Figure G-12: Active Licenses: Advanced Practice Nursing

As a group, the Los Angeles County Region has the highest total number of Advanced Practice Nursing licenses in the state while the Northern & Sierra Region has the fewest. Within the Advanced Practice Nursing workforce, Nurse Practitioners make up the largest portion at over 83% of all active Advanced Practice Nursing licenses, while Licensed Midwives make up the smallest portion at one percent. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure G-14: Distribution Index: Advanced Practice Nursing](#)).

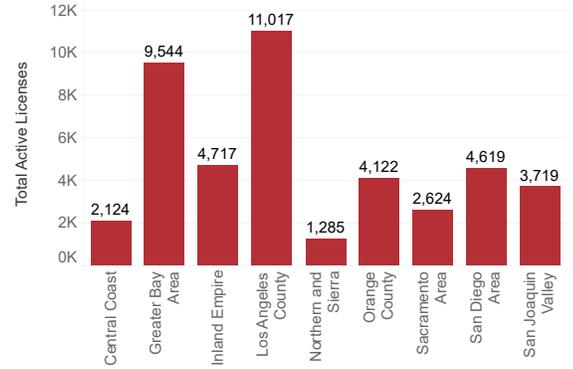
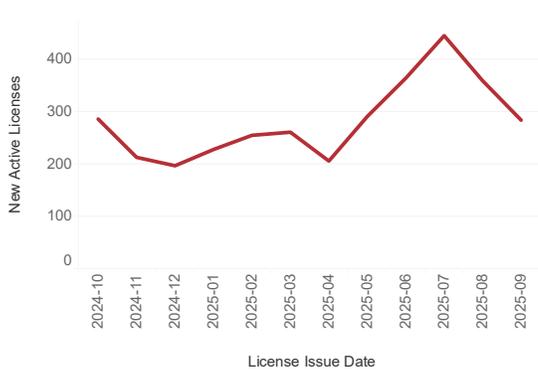


Table G-12: Active Licenses: Advanced Practice Nursing

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Clinical Nurse Specialist	119	963	204	540	22	180	158	463	150
Licensed Midwife	65	97	37	66	58	21	35	56	17
Nurse Anesthetist	91	516	326	603	67	253	250	271	235
Nurse Midwife	100	427	80	208	69	100	85	164	67
Nurse Practitioner	1,749	7,541	4,070	9,600	1,069	3,568	2,096	3,665	3,250
Advanced Practice Group	2,124	9,544	4,717	11,017	1,285	4,122	2,624	4,619	3,719

Figure G-13: New Licenses: Advanced Practice Nursing



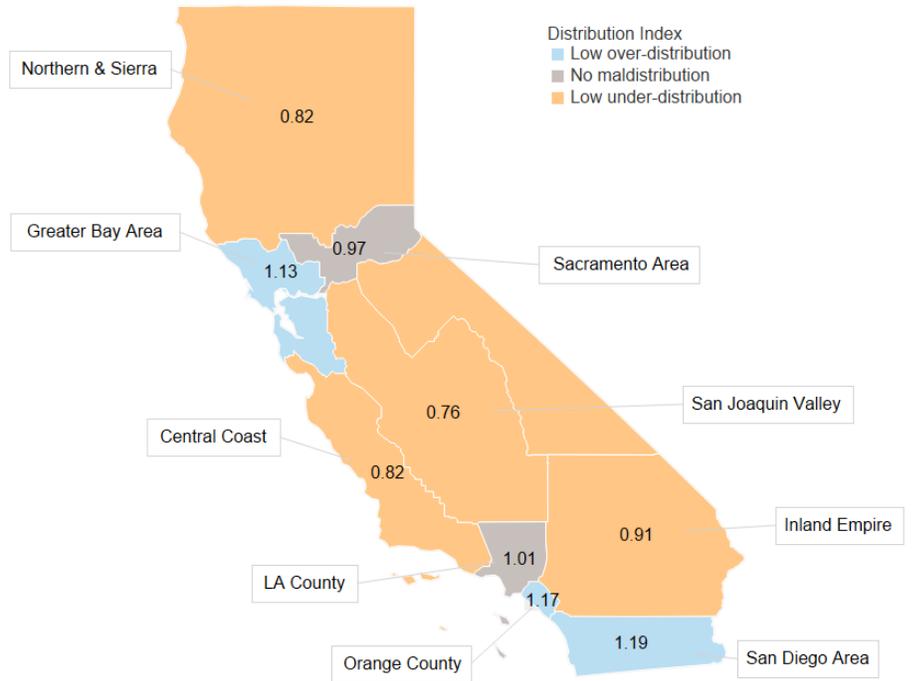
On average, there were 282 new active Advanced Practice Nursing licenses issued per month from October 2024 to September 2025. Within the Advanced Practice Nursing workforce, Nurse Practitioners make up the largest portion by total volume with an average of 257 new active licenses issued per month and have the highest average issue rate relative to their total volume at 0.7%. Future work will aim to use this information in conjunction with education pipeline data to better understand potential workforce supply trends.

Table G-13: New Licenses: Advanced Practice Nursing

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Clinical Nurse Specialist	4	4	2	4	6	5	9	8	4	8	11	5
Licensed Midwife	2	6	0	2	2	4	0	2	6	3	0	0
Nurse Anesthetist	17	4	1	14	13	8	8	4	29	8	11	31
Nurse Midwife	4	1	5	4	4	4	5	3	1	8	8	8
Nurse Practitioner	259	198	189	204	230	240	184	274	324	418	329	240
Advanced Practice Group	286	213	197	228	255	261	206	291	364	445	359	284

Figure G-14: Distribution Index: Advanced Practice Nursing

The distribution index describes the magnitude of difference between a region’s share of the state’s licenses and its share of the state’s population. A distribution index of 1 indicates the region has an equal share of the state’s licenses and population (e.g., 10% of the state’s licenses and 10% of the state’s population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state’s licenses and 10% of the state’s population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution. Note: These distribution indexes reflect the distribution of active licenses, not the distribution of providers as presented in [Section B: Model Projections, Nursing](#).



While the Los Angeles County region has the highest total count of active Advanced Practice Nursing licenses by volume, the San Diego Area region has the highest distribution of active licenses compared to the population. Similarly, while the Northern & Sierra region has the lowest total count of active licenses by volume, the San Joaquin Valley has the lowest distribution of active Advanced Practice Nursing licenses compared to the population. Specifically, the region has half the amount of Clinical Nurse Specialists and Nurse Midwives, as well as less than a third the amount of Licensed Midwives they should have based on their population size.

Table G-14: Distribution Index: Advanced Practice Nursing

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Clinical Nurse Specialist	0.72	1.78	0.61	0.77	0.22	0.80	0.91	1.86	0.48
Licensed Midwife	2.44	1.11	0.69	0.58	3.58	0.58	1.25	1.39	0.34
Nurse Anesthetist	0.59	1.02	1.05	0.92	0.72	1.20	1.55	1.17	0.81
Nurse Midwife	1.31	1.70	0.52	0.64	1.48	0.96	1.06	1.42	0.46
Nurse Practitioner	0.81	1.06	0.94	1.05	0.81	1.21	0.93	1.13	0.79
Advanced Practice Group	0.82	1.13	0.91	1.01	0.82	1.17	0.97	1.19	0.76

Low Under-Distribution (0.95-0.75)
 No Maldistribution (0.95-1.05)
 Low Over-Distribution (1.05-1.25)

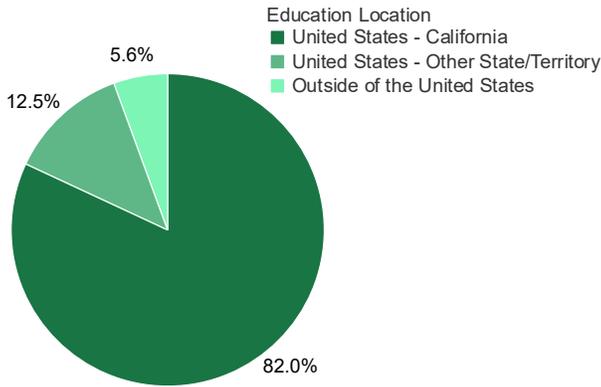
Medium Under-Distribution (0.75-0.50)
 Medium Over-Distribution (1.25-1.50)

High Under-Distribution (0.50 or less)
 High Over-Distribution (1.50 or more)

Section H: Oral Health, All Figures

This section focuses on licenses issued by the Dental Board of California (Dentist) and the Dental Hygiene Board of California (Orthodontic Assistant, RDA in Extended Functions, RDH Alternative Practice, RDH in Extended Functions, Registered Dental Assistant, Registered Dental Hygienist).

Figure H-1: Education Location: Oral Health



Nearly 95% of Oral Health licensees completed their education in the U.S., with 82% receiving their initial qualifying degree within California. Notable license types within the Oral Health workforce include Dentists with only 66.4% receiving their initial qualifying degree in California, and 10.7% receiving their initial qualifying degree from outside the U.S.

Table H-1: Education Location: Oral Health

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Dental Sedation Assistant	94.0%	0.0%	6.0%
Dentist	66.4%	22.9%	10.7%
Orthodontic Assistant	94.5%	2.4%	3.1%
RDA In Extended Functions	94.3%	2.3%	3.4%
RDH Alternative Practice	89.3%	10.4%	0.3%
RDH Extended Function	92.3%	7.7%	0.0%
Registered Dental Assistant	95.0%	2.1%	2.9%
Registered Dental Hygienist	88.5%	11.0%	0.5%
Oral Health Group	82.0%	12.5%	5.6%

Figure H-2: Residency Location: Oral Health

Dentists are the only license type within the Oral Health workforce that requires residency. Just over 90% of those licensees reported completing their residency within the U.S., with 69.1% completing their residency somewhere in California. Just over nine percent reported completing their residency somewhere outside the U.S., the highest of all residency-required license types in the health workforce.

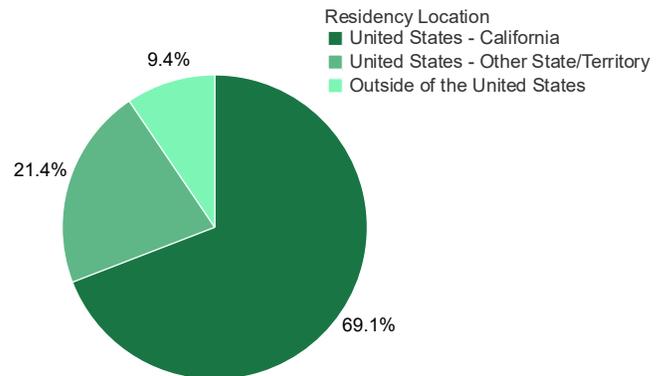
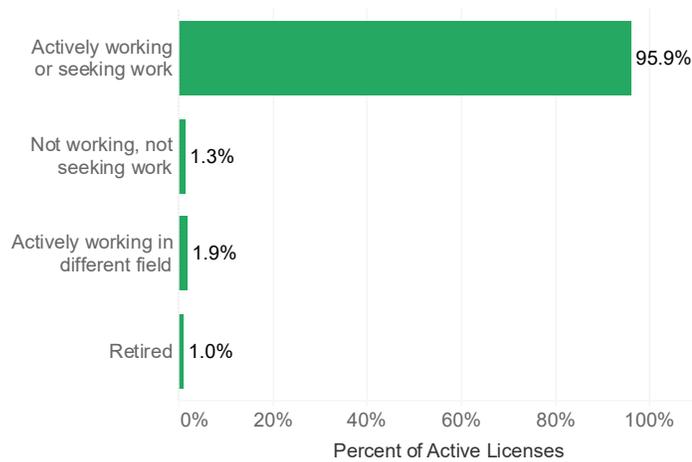


Table H-2: Residency Location: Oral Health

License Name	U.S. - CA	U.S. - Other	Outside U.S.
Dentist	69.1%	21.4%	9.4%
Oral Health Group	69.1%	21.4%	9.4%

Figure H-3: Employment Status: Oral Health



Over 95% of Oral Health licensees are actively working or seeking work, while just under two percent are working in a different field and only one percent have already retired, the lowest of all health workforce groups. Notable license types within the Oral Health workforce include Dental Sedation Assistants and RDHs Alternative Practice with over four percent actively working in a different field, and over two percent of RDHs Alternative Practice and Registered Dental Hygienists reporting not working or seeking work despite their active license status. These metrics will be used in the future to calculate more accurate supply data for each license type.

Table H-3: Employment Status: Oral Health

License Name	Actively working or seeking work	Not working, not seeking work	Actively working in different field	Retired
Dentist	97.3%	0.8%	0.4%	1.5%
RDH Alternative Practice	92.5%	2.4%	4.5%	0.6%
Registered Dental Hygienist	95.1%	2.3%	1.8%	0.8%
RDA In Extended Functions	95.9%	1.0%	2.2%	0.9%
Registered Dental Assistant	94.6%	1.4%	3.5%	0.4%
Orthodontic Assistant	96.5%	0.7%	2.5%	0.3%
RDH Extended Function	100.0%	0.0%	0.0%	0.0%
Dental Sedation Assistant	92.5%	1.9%	5.7%	0.0%
Oral Health Group	95.9%	1.3%	1.9%	1.0%

Figure H-4: Full-Time Equivalent Metrics: Oral Health

Full Time Equivalent (FTE) metrics were calculated for licensees that reported they were actively working in a position that required their license. On average, Oral Health licensees spend the highest number of hours per week on Patient Care (30.4 hours), and the least amount of time per week on Research (3.5 hours). Notable license types within the Oral Health workforce include RDHs Alternative Practice, who reported spending the least amount of time on Patient Care at only 26.2 hours per week, and Dental Sedation Assistants who reported the highest amounts of time per week on Training (17 hours) and Admin (16.4 hours). These metrics will be used in the future to calculate more accurate supply and demand modeling.

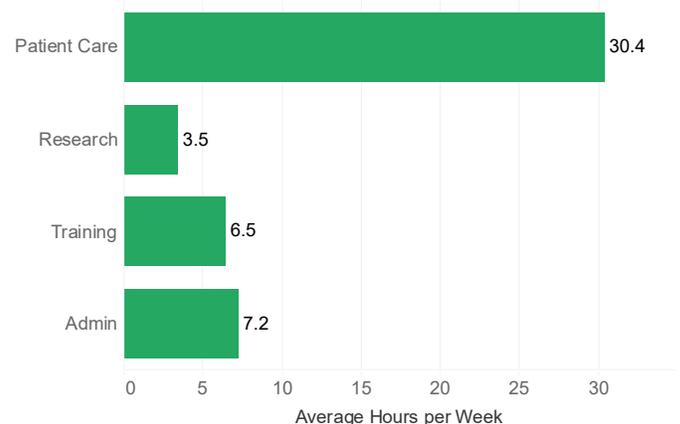
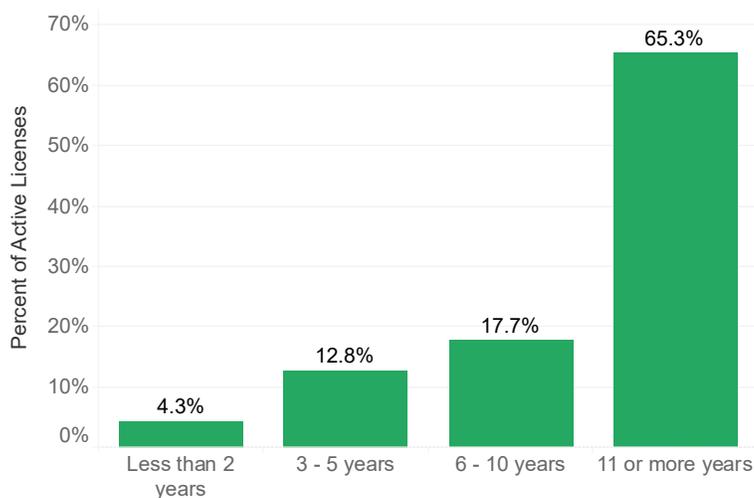


Table H-4: Full-Time Equivalent Metrics: Oral Health

License Name	Patient Care	Research	Training	Admin
Dental Sedation Assistant	37.0	9.8	17.0	16.4
Dentist	31.8	1.9	5.1	7.2
Orthodontic Assistant	30.7	5.9	8.9	8.5
RDA In Extended Functions	31.2	5.1	8.4	7.6
RDH Alternative Practice	26.2	3.3	5.6	5.9
RDH Extended Function	43.9	2.4	6.4	3.4
Registered Dental Assistant	29.9	5.8	9.2	9.8
Registered Dental Hygienist	28.4	2.5	4.4	3.1

Figure H-5: Retirement Estimates: Oral Health



Among Oral Health licensees who reported actively working in a position that required their license, or were actively seeking work in their field, only 65.3% estimated retiring in 11 or more years, the lowest across all health workforce groups, and 4.3% estimated retiring within the next two years. Of note are Dentists, with over 20% estimating retiring in the next five years, and over 40% estimating retiring in the next 10 years. These metrics will be crucial for calculating more accurate supply and demand models for each license type. In addition, this information may be useful in helping to identify which areas are in most need of funding to maintain the supply of Oral Health licensees across the state.

Table H-5: Retirement Estimates: Oral Health

License Name	0-2 years	3 - 5 years	6 - 10 years	11+ years
Dental Sedation Assistant	0.0%	10.5%	18.6%	70.9%
Dentist	6.2%	16.1%	20.7%	57.0%
Orthodontic Assistant	0.9%	7.7%	12.6%	78.8%
RDA In Extended Functions	2.1%	9.6%	16.7%	71.6%
RDH Alternative Practice	3.6%	11.5%	20.1%	64.7%
RDH Extended Function	0.0%	16.7%	16.7%	66.7%
Registered Dental Assistant	2.3%	9.2%	14.3%	74.1%
Registered Dental Hygienist	4.0%	12.6%	17.3%	66.1%
Oral Health Group	4.3%	12.8%	17.7%	65.3%

Figure H-6: Age Distribution: Oral Health

Overall, nearly 72% of Oral Health licensees are between the ages of 30 and 59 years old, with 7.3% under the age of thirty, and 20.8% over the age of 59. License types with younger licensees include Orthodontic Assistants and Registered Dental Assistants with over 40% of licensees under the age of 40. License types with older licensees include RDH Extended Functions with 100% of licensees aged 50 or older, and 56% of all Dentist licensees.

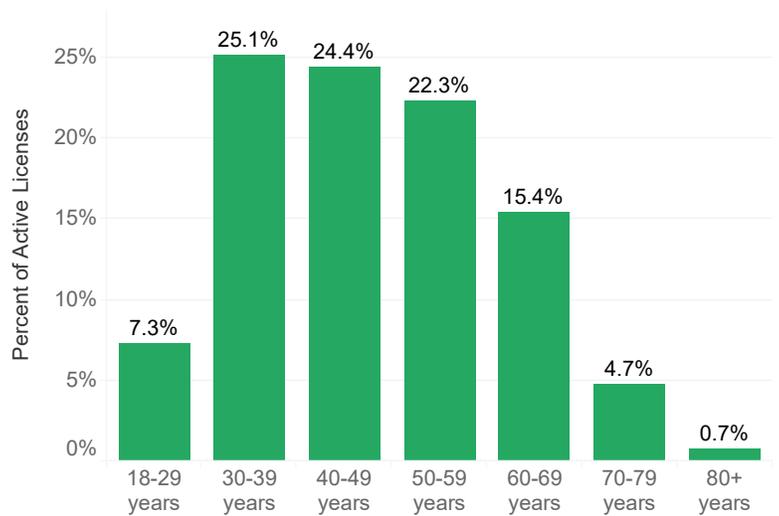
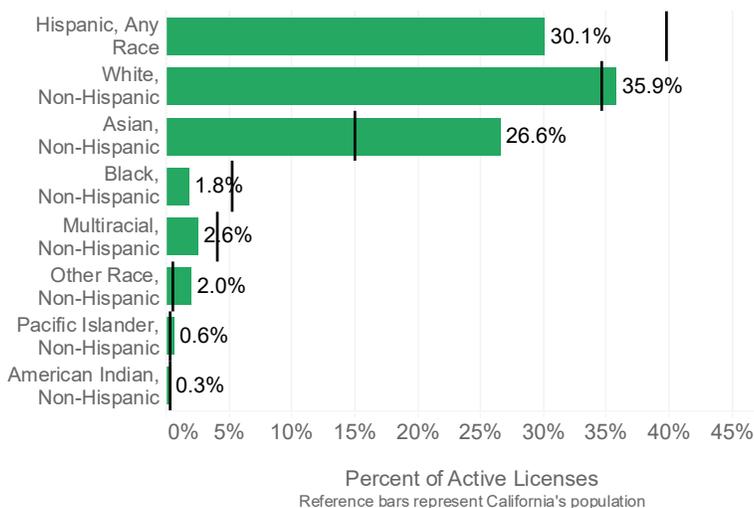


Table H-6: Age Distribution: Oral Health

License Name	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
Dental Sedation Assistant	0.0%	38.0%	22.0%	26.0%	14.0%	0.0%	0.0%
Dentist	1.8%	20.1%	22.1%	24.7%	20.7%	9.0%	1.6%
Orthodontic Assistant	11.6%	34.5%	27.5%	18.1%	7.4%	0.8%	0.1%
RDA In Extended Functions	5.2%	26.3%	29.4%	26.0%	12.1%	1.0%	0.0%
RDH Alternative Practice	0.4%	18.6%	31.6%	28.7%	16.9%	3.6%	0.1%
RDH Extended Function	0.0%	0.0%	0.0%	53.8%	38.5%	7.7%	0.0%
Registered Dental Assistant	14.9%	28.0%	24.5%	20.8%	10.9%	1.0%	0.0%
Registered Dental Hygienist	5.9%	29.7%	27.3%	19.8%	13.6%	3.4%	0.2%
Oral Health Group	7.3%	25.1%	24.4%	22.3%	15.4%	4.7%	0.7%

Figure H-7: Race/Ethnicity: Oral Health



Across the Oral Health workforce, Hispanic, Any Race and Black, Non-Hispanic licensees are the most underrepresented when compared to California's population, with only one license type at or above the population average for Black, Non-Hispanic. In addition, no license types are at or above the population average for Multiracial, Non-Hispanic. Though Hispanic, Any Race licensees are underrepresented in the Oral Health workforce on average, they make up 48% or more of licensees for half of the license types included in this group. Conversely, American Indian, Non-Hispanic licensees are equally

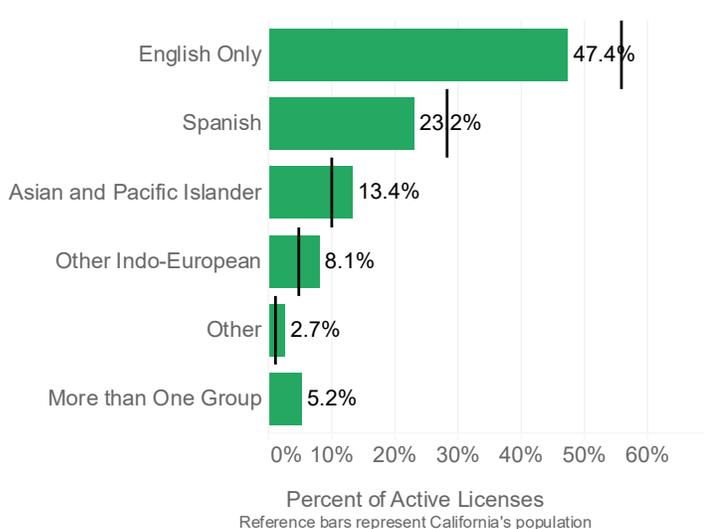
represented in the Oral Health workforce on average but are underrepresented in half of the license types within the group.

Table H-7: Race/Ethnicity: Oral Health

License Name	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	Pacific Islander, NH	American Indian, NH
Dental Sedation Assistant	35.8%	40.6%	12.3%	5.7%	3.8%	1.9%	0.0%	0.0%
Dentist	9.4%	39.1%	43.9%	1.6%	2.3%	2.9%	0.5%	0.2%
Orthodontic Assistant	59.8%	22.3%	11.1%	1.7%	3.1%	0.9%	1.0%	0.2%
RDA In Extended Functions	48.1%	33.6%	10.8%	1.8%	2.4%	1.8%	0.9%	0.6%
RDH Alternative Practice	27.5%	43.8%	19.5%	2.8%	3.6%	1.8%	0.6%	0.5%
RDH Extended Function	50.0%	23.1%	26.9%	0.0%	0.0%	0.0%	0.0%	0.0%
Registered Dental Assistant	54.2%	25.0%	13.5%	2.4%	2.4%	1.3%	0.7%	0.5%
Registered Dental Hygienist	23.8%	49.2%	19.8%	1.2%	3.4%	1.8%	0.6%	0.3%
Oral Health Group	30.1%	35.9%	26.6%	1.8%	2.6%	2.0%	0.6%	0.3%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

NH = Non-Hispanic

Figure H-8: Languages Spoken: Oral Health



As a group, the Oral Health workforce is the most diverse linguistically, with the lowest rates of licensees speaking English Only in the health workforce and the highest rates of Spanish speaking licensees. However, Spanish is still underrepresented in the Oral Health workforce when compared to California's population, with half of the included license types at or below the population average. Asian and Pacific Islander languages are represented well above the population average overall, but this is largely driven by the high rates among Dentists and RDH Extended Functions, as these languages are at or below the population average for the other six license types within the group. Similarly, Other Indo-European languages are also

represented above the population average in the Oral Health workforce overall, largely driven by the high rates among Dentists, Dental Sedation Assistants, and RDH Alternative Practices. Within the Oral Health workforce, Other languages were not reported by any licensee for two of the of the individual license types in the group.

Table H-8: Languages Spoken: Oral Health

License Name	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
Dental Sedation Assistant	54.7%	25.5%	6.6%	7.5%	0.0%	5.7%
Dentist	41.3%	11.1%	19.6%	13.9%	4.1%	10.1%
Orthodontic Assistant	42.6%	43.8%	7.9%	2.6%	1.5%	1.6%
RDA In Extended Functions	47.7%	35.6%	7.9%	4.5%	2.0%	2.2%
RDH Alternative Practice	53.3%	21.3%	9.7%	9.6%	2.1%	4.0%
RDH Extended Function	53.8%	30.8%	15.4%	0.0%	0.0%	0.0%
Registered Dental Assistant	45.0%	39.5%	9.3%	3.0%	1.5%	1.8%
Registered Dental Hygienist	63.4%	15.8%	9.6%	6.4%	2.3%	2.4%
Oral Health Group	47.4%	23.2%	13.4%	8.1%	2.7%	5.2%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Figure H-9: Sexual Orientation: Oral Health

As a group, the majority (97.6%) of Oral Health licensees reported identifying as Straight or Heterosexual, the highest of any health workforce group, and just over one percent reported identifying as Gay or Lesbian, the lowest of any health workforce group. Licensees identifying as Bisexual and Other were nearly even at just under one percent each, both below the health workforce average. Within the Oral Health workforce, not a single license type met the workforce average for Bisexual individuals (1.6%), and only Dental Sedation Assistants reported identifying as Gay or Lesbian at or above the workforce average. Notably, while Dental Sedation Assistants reported one of the highest rates for Gay or Lesbian of any license type in the health workforce, they did not report any individuals identifying as Bisexual or Other.

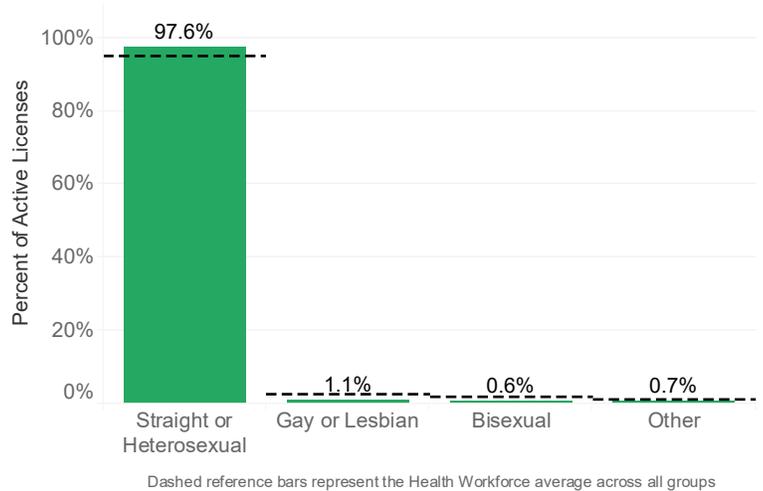
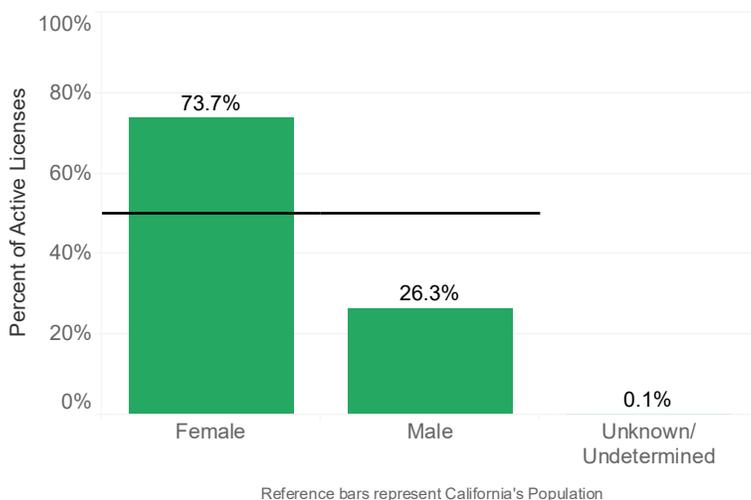


Table H-9: Sexual Orientation: Oral Health

License Name	Straight or Heterosexual	Gay or Lesbian	Bisexual	Other
Dental Sedation Assistant	96.2%	3.8%	0.0%	0.0%
Dentist	98.3%	1.0%	0.3%	0.4%
Orthodontic Assistant	96.2%	2.1%	0.6%	1.0%
RDA In Extended Functions	96.7%	1.6%	0.6%	1.1%
RDH Alternative Practice	97.9%	0.7%	0.8%	0.5%
RDH Extended Function	100.0%	0.0%	0.0%	0.0%
Registered Dental Assistant	96.6%	1.3%	1.0%	1.2%
Registered Dental Hygienist	98.0%	0.9%	0.6%	0.4%
Oral Health Group	97.6%	1.1%	0.6%	0.7%
Health Workforce Average	94.8%	2.7%	1.6%	0.9%

Figure H-10: Sex at Birth: Oral Health



As a group, the majority (73.7%) of Oral Health licensees reported being identified as Female at birth, and 26.3% reported being identified as Male. Less than one percent of licensees (0.1%) reporting having an Unknown/Undetermined sex at birth. Notably, while the number of licensees assigned Male at birth is above state population for Oral Health as a group, this is driven by the high rate of Dental licensees assigned as Male; 86% or more of all other license types within the Oral Health group were Female at birth, well above California's population.

Table H-10: Sex at Birth: Oral Health

License Name	Female	Male	Unknown/Undetermined
Dental Sedation Assistant	86.3%	13.7%	0.0%
Dentist	44.2%	55.8%	0.1%
Orthodontic Assistant	88.4%	11.6%	0.0%
RDA In Extended Functions	89.9%	10.1%	0.1%
RDH Alternative Practice	91.4%	8.4%	0.2%
RDH Extended Function	92.3%	7.7%	0.0%
Registered Dental Assistant	93.1%	6.8%	0.1%
Registered Dental Hygienist	93.8%	6.1%	0.0%
Oral Health Group	73.7%	26.3%	0.1%
California's Population	50.0%	50.0%	N/A

Figure H-11: Gender Identity: Oral Health

As a group, the majority (73.6%) of Oral Health licensees reported identifying as Female, and 26.2% reported identifying as Male. Licensees identifying as Transgender or not identifying as Male, Female or Transgender were even at 0.1% each. Notably, while the number of licensees identifying as Male is above the workforce average for Oral Health as a group, this is driven by the high rate of Dental licensees identifying as Male; 86% or more of all other license types within the Oral Health group identified as Female, well above the health workforce average.

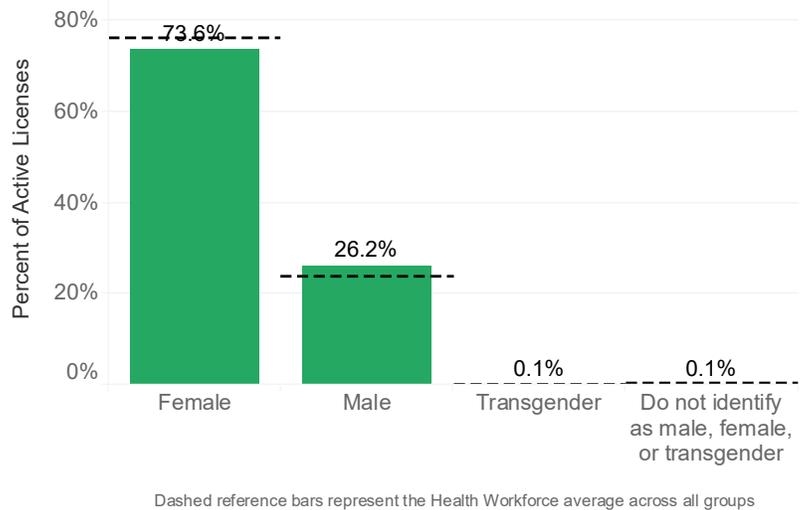
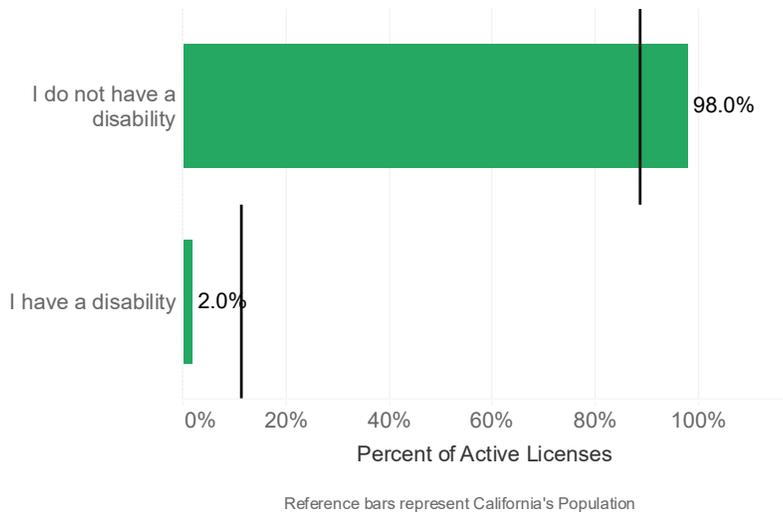


Table H-11: Gender Identity: Oral Health

License Name	Female	Male	Transgender	Do not identify as male, female, or transgender
Dental Sedation Assistant	86.0%	14.0%	0.0%	0.0%
Dentist	44.2%	55.7%	0.0%	0.1%
Orthodontic Assistant	88.1%	11.9%	0.0%	0.0%
RDA In Extended Functions	89.9%	9.9%	0.1%	0.1%
RDH Alternative Practice	92.1%	7.8%	0.0%	0.2%
RDH Extended Function	92.3%	7.7%	0.0%	0.0%
Registered Dental Assistant	93.0%	6.8%	0.1%	0.1%
Registered Dental Hygienist	93.8%	6.1%	0.1%	0.0%
Oral Health Group	73.6%	26.2%	0.1%	0.1%
Health Workforce Average	75.9%	23.8%	0.1%	0.1%

Figure H-12: Disability Status: Oral Health



On average, 98% of Oral Health licensees did not identify as having a disability, while 2% reported having a disability. Within the Oral Health workforce, over 27% of RDH Extended Functions and over four percent of RDH Alternative Practices reported having a disability. Notably, the percentage of RDH Extended Function licensees with disabilities increased 16% compared to 2024.

Table H-12: Disability Status: Oral Health

License Name	I do not have a disability	I have a disability
Dental Sedation Assistant	98.0%	0.2%
Dentist	98.1%	1.9%
Orthodontic Assistant	98.2%	1.8%
RDA In Extended Functions	97.8%	2.2%
RDH Alternative Practice	95.7%	4.3%
RDH Extended Function	72.7%	27.3%
Registered Dental Assistant	98.3%	1.7%
Registered Dental Hygienist	97.6%	2.4%
Oral Health Group	98.0%	2.0%
California's Population	88.7%	11.3%

Figure H-13: Active Licenses: Oral Health

As a group, the Greater Bay Area has the highest total number of Oral Health licenses in the state while the Northern & Sierra Region has the fewest. Within the Oral Health workforce, Dentists and Registered Dental Assistants make up nearly 74% of all active Oral Health licenses, at 39.5% and 34.0% respectively. RDH Extended Functions make up the smallest portion of the Oral Health workforce at less than 0.1%. For detailed metrics on how the distribution of these active licenses compares to the population (see [Figure H-15: Distribution Index: Oral Health](#)).

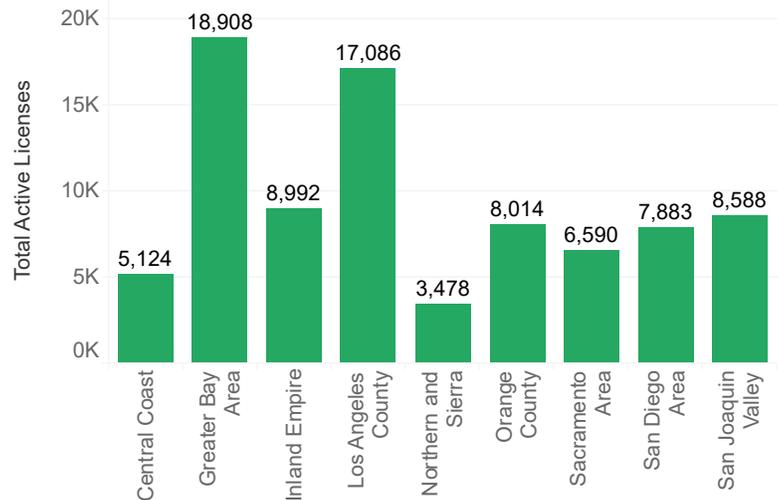


Table H-13: Active Licenses: Oral Health

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Dental Sedation Assistant	5	20	2	6	3	5	2	3	9
Dentist	1,647	8,064	2,756	8,685	704	4,391	2,022	2,996	2,151
Orthodontic Assistant	110	264	287	452	54	101	184	142	254
RDA In Extended Functions	190	370	232	262	228	102	329	193	347
RDH Alternative Practice	48	146	89	192	59	64	51	63	83
RDH Extended Function	0	6	1	2	2	0	1	0	1
Registered Dental Assistant	1,752	6,355	3,666	4,592	1,565	1,657	2,471	2,714	4,034
Registered Dental Hygienist	1,372	3,683	1,959	2,895	863	1,694	1,530	1,772	1,709
Oral Health Group	5,124	18,908	8,992	17,086	3,478	8,014	6,590	7,883	8,588

Figure H-14: New Licenses: Oral Health



On average, there were 395 new active Oral Health licenses issued per month from October 2024 to September 2025. Within the Oral Health workforce, Registered Dental Assistants make up the largest portion by total volume with an average of 185 new active licenses issued per month, while Orthodontic Assistants had the highest average issue rate relative to their total volume at 1%. Future work will aim to use this information in conjunction with education pipeline data to better understand potential workforce supply trends.

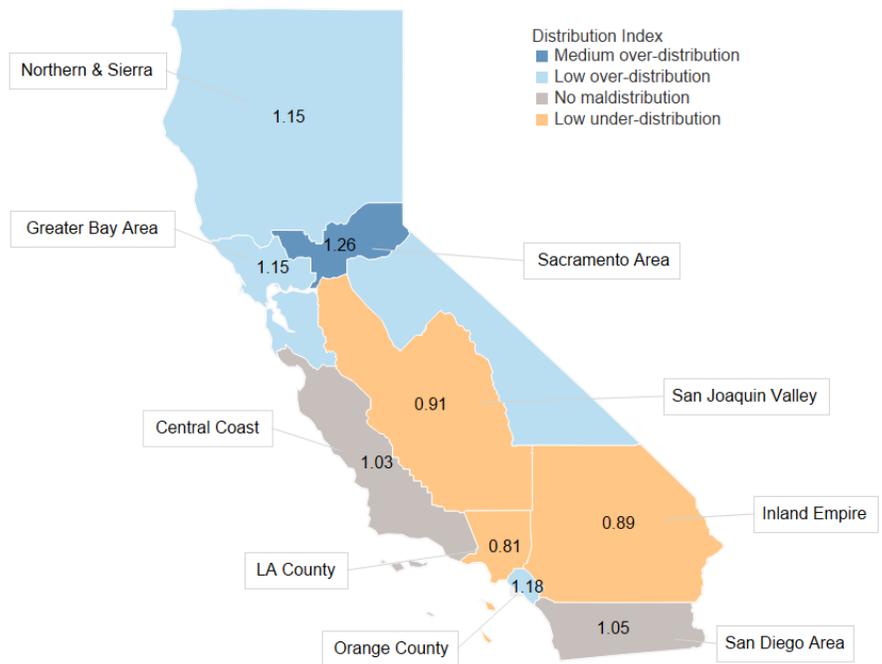
Table H-14: New Licenses: Oral Health

License Name	2024-10	2024-11	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09
Dental Sedation Assistant	0	1	1	0	0	1	0	0	0	0	0	0
Dentist	95	60	49	55	43	45	61	92	245	278	123	66
Orthodontic Assistant	16	30	15	14	14	22	9	30	23	23	14	16
RDA In Extended Functions	17	18	11	26	6	4	7	20	20	24	40	11
RDH Alternative Practice	4	5	3	8	6	3	4	4	8	9	6	9
Registered Dental Assistant	290	163	188	233	121	164	145	162	175	211	208	158
Registered Dental Hygienist	21	56	56	62	20	29	61	33	153	152	101	58
Oral Health Group	443	333	323	398	210	268	287	341	624	697	492	318

Note: RDH Extended Function Licenses were not included as the license is no longer being distributed.

Figure H-15: Distribution Index: Oral Health

The distribution index describes the magnitude of difference between a region's share of the state's licenses and its share of the state's population. A distribution index of 1 indicates the region has an equal share of the state's licenses and population (e.g., 10% of the state's licenses and 10% of the state's population). A distribution index below 1 indicates a smaller share of licenses than population (e.g., 5% of the state's licenses and 10% of the state's population), and a distribution index greater than 1 indicates the opposite. The further away the index is from 1, the greater the maldistribution.



While the Greater Bay Area region has the highest total count of active Oral Health licenses by volume, the Sacramento Area region has the highest distribution of active licenses compared to the population. Similarly, while the Northern & Sierra region has the lowest total count of active Oral Health licenses by volume, the Los Angeles County region has the lowest distribution of active Oral Health licenses compared to the population. Specifically, the region has less than half the amount of Dental Sedation Assistants and RDA in Extended Functions they should have based on their population size. Three regions do not have any active RDH Extended Function licenses at all.

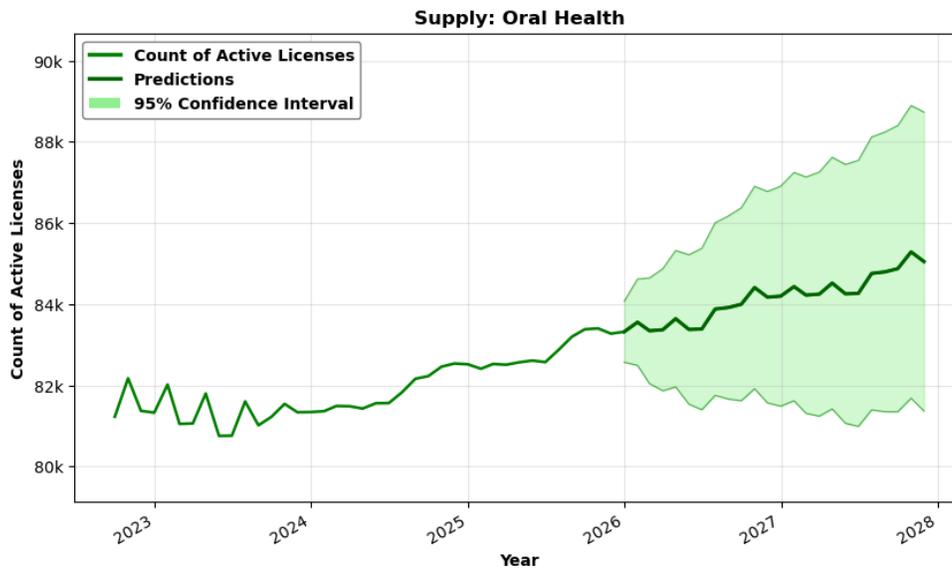
Table H-15: Distribution Index: Oral Health

License Name	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley
Dental Sedation Assistant	1.54	1.88	0.31	0.44	1.52	1.13	0.59	0.61	1.46
Dentist	0.84	1.25	0.69	1.04	0.59	1.63	0.98	1.01	0.58
Orthodontic Assistant	1.01	0.74	1.31	0.98	0.81	0.68	1.61	0.86	1.23
RDA In Extended Functions	1.43	0.85	0.87	0.47	2.82	0.56	2.36	0.96	1.38
RDH Alternative Practice	1.03	0.95	0.94	0.97	2.07	1.00	1.04	0.89	0.93
RDH Extended Function	0.00	2.38	0.65	0.62	4.29	0.00	1.24	0.00	0.69
Registered Dental Assistant	1.03	1.14	1.07	0.64	1.51	0.72	1.39	1.06	1.25
Registered Dental Hygienist	1.33	1.09	0.94	0.66	1.38	1.21	1.42	1.14	0.88
Oral Health Group	1.03	1.15	0.89	0.81	1.15	1.18	1.26	1.05	0.91

Low Under-Distribution (0.95-0.75)
 No Maldistribution (0.95-1.05)
 Low Over-Distribution (1.05-1.25)

High Under-Distribution (0.50 or less)
 Medium Over-Distribution (1.25-1.50)
 High Over-Distribution (1.50 or more)

Figure H-16: Supply Projections: Oral Health



To project supply for the Oral Health workforce, each license type within the group was individually modelled with a 95% confidence interval. Active license counts for each month from September 2022 to November 2025 were used to predict the monthly supply of active licenses each month from December 2025 to November 2027. The table below lists the count of active licenses for September of each year.

On average, the Oral Health workforce is expected to grow 1.8% by 2027. Nearly every license type within the group is expected to increase over the next three years, with the greatest growth occurring in Dentists who have a projected growth rate of 2.7% by 2027. These metrics combined with Retirement estimates (see [Figure H-5: Retirement Estimates: Oral Health](#)) will be crucial for calculating more accurate supply and demand projections for each license type in our modeling data.

Table H-16: Supply Projections: Oral Health

License Type*	2022	2023	2024	2025	2026	2027
Dentist	34,794	34,925	35,325	35,887	36,308	36,869
Registered Dental Assistant	28,593	28,327	28,757	29,106	29,205	29,377
Registered Dental Hygienist	17,842	17,972	18,146	18,389	18,485	18,630
Oral Health Group	81,229	81,224	82,228	83,382	83,998	84,876

Note: Cells shaded in light green are predictions based on the Workforce Supply Model (see Figure H-16).

*HCAI is currently working on a methodology for Oral Health supply and demand. To maintain consistency with that future model, we have only included the three license types listed here.

Section I: Wellness Coaches, All Figures

California Health and Safety Code [Section 127825](#) established a new category of behavioral health professional as part of the Children and Youth Behavioral Health Initiative, the Certified Wellness Coach (CWC). The Department of Health Care Access and Information (HCAI) was tasked to design and implement a sufficient and diverse CWC workforce that provides effective prevention and early intervention behavioral health services for California’s children and youth. With a focus on underserved communities, HCAI is conducting the following activities:

1. Partner with and fund California colleges and universities to create undergraduate education curriculum and attract diverse candidates.
2. Offer scholarships with service obligations to select associate and bachelor’s students.
3. Design and implement certification, including education and minimum field/work experience requirements.
4. Conduct comprehensive marketing campaign and stakeholder outreach.
5. Offer employer support grants to organizations in high-need communities.
6. Partner with the Department of Health Care Services and the Department of Managed Health Care to establish a sustainable funding mechanism.

This entry-level behavioral health profession provides career opportunities for individuals with undergraduate degrees. Those with associates degrees and a minimum number of field experience hours are eligible to apply to attain a Certified Wellness Coach I certification, and those with bachelor’s degrees are eligible to apply to attain a Certified Wellness Coach II certification. For those with fewer field experience hours who still meet the degree requirements, HCAI created the Registered-Certified Wellness Coach (R-CWC) designation. These certified individuals are eligible to provide services as a CWC, with the registered designation denoting to employers that these are less experienced Coaches who may require additional support once in the field.

For more information on Wellness Coach pathway requirements, scholarship information, and more, see HCAI’s [Certified Wellness Coach homepage](#).

Figure I-1: Pathway: Wellness Coaches

HCAI designed two pathways to Wellness Coach certification: the Education Pathway, focused on competencies gained from specific degree programs, and the Workforce Pathway, focused on competencies gained from work experience.

Over 80% of Wellness Coaches to date were certified through the Workforce Pathway. CWCIs were more likely to pursue a Workforce Pathway (90.1%) than CWCIIIs (81.2%). In addition, more than 96% of both R-type licenses indicated they were certified through the Education Pathway.

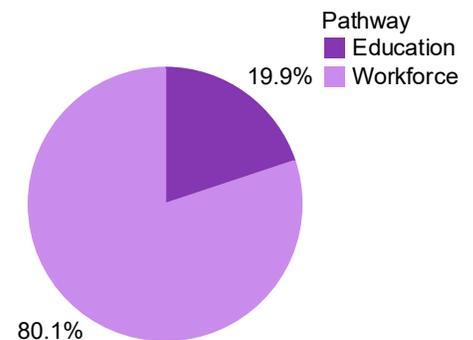
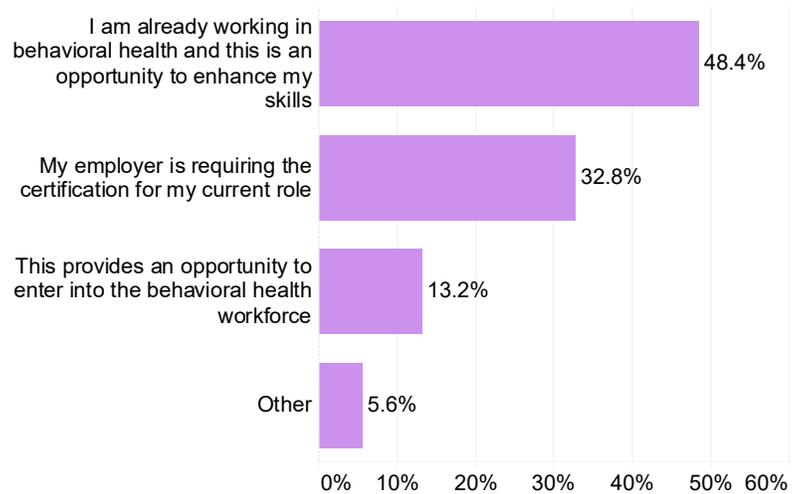


Table I-1: Pathway: Wellness Coaches

Credential	Education	Workforce
R-CWCI	98.0%	2.0%
R-CWCII	96.1%	3.9%
CWCI	9.9%	90.1%
CWCII	18.8%	81.2%
Wellness Coach Group	19.9%	80.1%

Figure I-2: Application Reason: Wellness Coaches

When asked for a reason for applying to be a Wellness Coach, nearly 50% reported they were already working in behavioral health and wanted to enhance their skills while 13.2% indicated they were using this certification as an opportunity to enter the Behavioral Health workforce. CWCII were slightly more likely to already be in the Behavioral Health workforce (51%) than CWCI (43%).

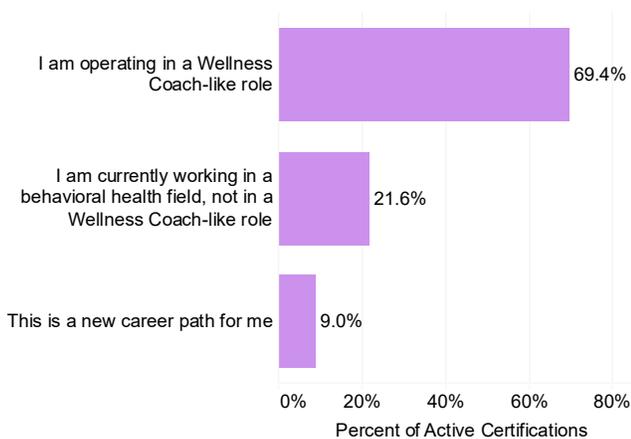


The CYBHI Multi-Payer School-Linked Fee Schedule Program creates a sustainable reimbursement pathway for Local Educational Agencies and public Institutions of Higher Education to receive funding for behavioral health services rendered at a school or school-linked site via Medi-Cal and commercial insurance. As more organizations adopt the Fee Schedule Program, HCAI anticipates that more employers will require their eligible employees to get certified.

Table I-2: Application Reason: Wellness Coaches

Credential	I am already working in behavioral health and this is an opportunity to enhance my skills	My employer is requiring the certification for my current role	This provides an opportunity to enter into the behavioral health workforce	Other
R-CWCI	29.7%	37.0%	27.4%	5.9%
R-CWCII	37.8%	42.4%	14.8%	4.9%
CWCI	43.0%	34.3%	16.7%	6.0%
CWCII	51.0%	31.8%	11.8%	5.4%
Wellness Coach Group	48.4%	32.8%	13.2%	5.6%

Figure I-3: Current Role: Wellness Coaches



Nearly 70% of Wellness Coaches reported they were already operating in a Wellness Coach-like role and just over eight percent indicated the career was totally new for them. Registered certificate holders were more likely (22% or higher) to indicate this was a new career path compared with full coaches (CWCI: 12.4%; CWCII: 7.1%).

HCAI anticipates more new entries into this field as more partnerships are developed with Institutions of Higher Education, and as Wellness Coach Scholarship Program awardees complete their degrees, get certified, and seek employment.

Table I-3: Current Role: Wellness Coaches

Credential	I am operating in a Wellness Coach-like role	I am currently working in a behavioral health field, not in a Wellness Coach-like role	This is a new career path for me
R-CWCI	55.2%	20.4%	24.4%
R-CWCII	56.5%	20.7%	22.8%
CWCI	64.0%	23.6%	12.4%
CWCII	72.0%	21.0%	7.1%
Wellness Coach Group	69.4%	21.6%	9.0%

Figure I-4: Age Distribution: Wellness Coaches

Overall, the majority of Certified Wellness Coaches are under the age of 60, with just under 68% between the ages of 30 and 59 years old and 28.5% under the age of 30. Just under four percent are over the age of 59, making Certified Wellness Coaches younger on average than any of the licensed health workforce groups. This trend is more apparent when looking at the registered certificate holders, none of which are over the age of 59.

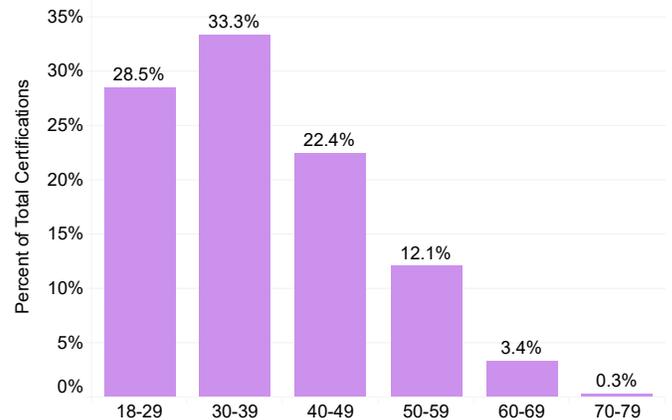
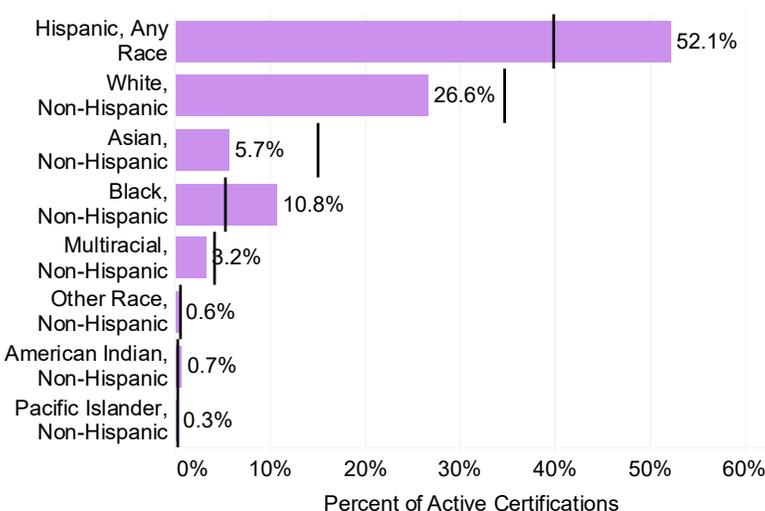


Table I-4: Age Distribution: Wellness Coaches

Credential	18-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years
R-CWCI	64.7%	19.6%	7.8%	7.8%	0.0%	0.0%
R-CWCII	74.5%	15.7%	5.9%	3.9%	0.0%	0.0%
CWCI	30.8%	33.8%	21.7%	11.3%	2.3%	0.2%
CWCII	25.4%	34.1%	23.6%	12.7%	3.9%	0.4%
Wellness Coach Group	28.5%	33.3%	22.4%	12.1%	3.4%	0.3%

Figure I-5: Race/Ethnicity: Wellness Coaches



Wellness Coaches are very diverse, with more than 52% of Coaches identifying as Hispanic, Any Race and 10.8% identifying as Black, Non-Hispanic; both represent a larger proportion than any health workforce group identifying as these races. In contrast, Asian, Non-Hispanic individuals are the most underrepresented among Wellness Coaches (5.7%) when compared to California's population (15.1%).

Table I-5: Race/Ethnicity: Wellness Coaches

Credential	Hispanic, Any Race	White, NH	Asian, NH	Black, NH	Multiracial, NH	Other Race, NH	American Indian, NH	Pacific Islander, NH
R-CWCI	40.2%	35.8%	13.8%	10.3%	0.0%	0.0%	0.0%	0.0%
R-CWCII	59.1%	19.0%	5.9%	10.0%	5.1%	0.0%	1.0%	0.0%
CWCI	46.5%	29.7%	6.4%	10.2%	4.5%	0.6%	1.6%	0.6%
CWCII	53.9%	25.8%	5.3%	11.0%	2.8%	0.7%	0.4%	0.2%
Wellness Coach Group	52.1%	26.6%	5.7%	10.8%	3.2%	0.6%	0.7%	0.3%
California's Population	39.8%	34.6%	15.1%	5.3%	4.1%	0.5%	0.3%	0.3%

Figure I-6: Languages Spoken: Wellness Coaches

Spanish is very well represented by the Wellness Coaches compared to California's population, with 37.9% of Coaches indicating they can provide services in Spanish compared with 28.2% of the statewide population. The Wellness Coaches are the only group discussed in this report to meet the population threshold for Spanish speakers.

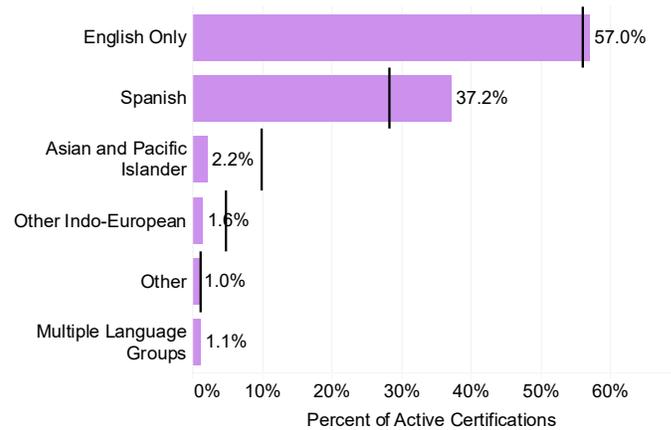
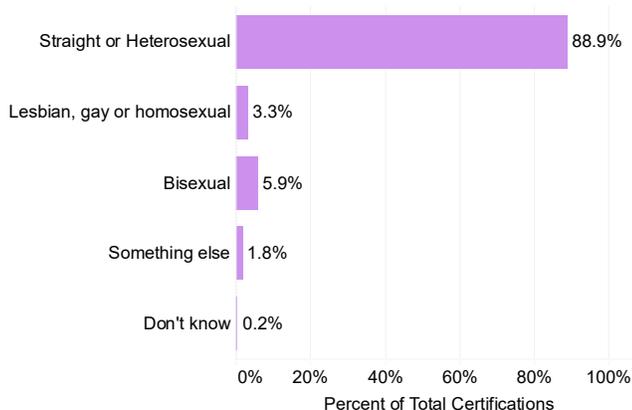


Table I-6: Languages Spoken: Wellness Coaches

Credential	English Only	Spanish	Asian and Pacific Islander	Other Indo-European	Other	Multiple Census Language Groups
R-CWCI	60.8%	19.6%	11.8%	3.9%	2.0%	2.0%
R-CWCII	51.1%	42.1%	1.0%	2.0%	2.9%	1.0%
CWCI	60.7%	32.6%	1.8%	2.2%	0.9%	1.8%
CWCII	55.9%	38.8%	2.2%	1.3%	0.9%	0.9%
Wellness Coach Group	57.0%	37.2%	2.2%	1.6%	1.0%	1.1%
California's Population	56.1%	28.2%	9.9%	4.6%	1.1%	N/A

Figure I-7: Sexual Orientation: Wellness Coaches



As a group, the majority (88.9%) of Wellness Coaches reported identifying as straight or heterosexual. Additionally, 3.3% reported identifying as lesbian, gay, or homosexual, 5.9% identified as bisexual, 1.8% identified as something else, and 0.2% indicated they didn't know.

Table I-7: Sexual Orientation: Wellness Coaches

Credential	Straight or Heterosexual	Lesbian, gay or homosexual	Bisexual	Something else	Don't know
R-CWCI	75.0%	4.4%	16.4%	2.2%	2.0%
R-CWCII	87.1%	2.2%	9.5%	1.2%	0.0%
CWCI	87.0%	3.3%	6.8%	2.6%	0.2%
CWCII	89.8%	3.3%	5.2%	1.5%	0.1%
Wellness Coach Group	88.9%	3.3%	5.9%	1.8%	0.2%

Figure I-8: Sex at Birth: Wellness Coaches

As a group, the majority (82.5%) of Wellness Coaches reported identifying as Female, and 17.4% reported identifying as Male. Less than 0.1% of licensees identified as Unknown/Undetermined. Rates of sex at birth are consistent across all certificate levels.

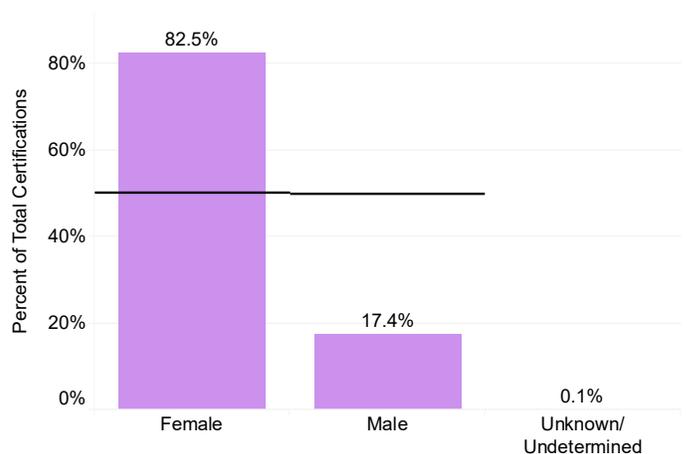
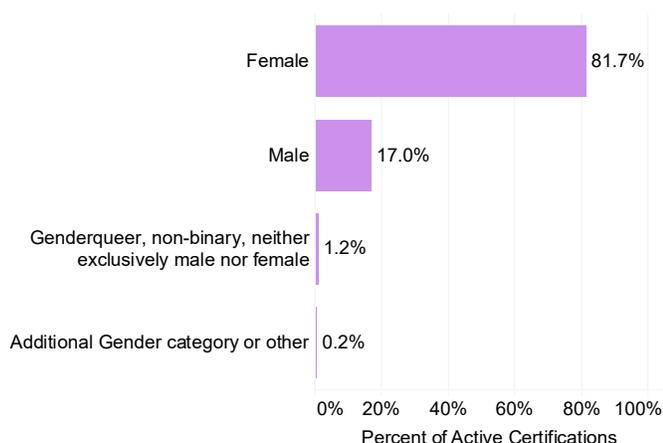


Table I-8: Sex at Birth: Wellness Coaches

Credential	Female	Male	Unknown/Undetermined
R-CWCI	86.3%	13.7%	0.0%
R-CWCII	86.0%	14.0%	0.0%
CWCI	82.2%	17.7%	0.1%
CWCII	82.4%	17.5%	0.0%
Wellness Coach Group	82.5%	17.4%	0.1%

Figure I-9: Gender Identity: Wellness Coaches



As a group, the majority (81.7%) of Wellness Coaches reported identifying as female, and 17% reported identifying as male. Just over one percent of coaches identified as genderqueer, non-binary, neither exclusively male nor female and 0.2% identified as an additional gender category.

Table I-9: Gender Identity: Wellness Coaches

Credential	Female	Male	Genderqueer, non-binary, neither exclusively male nor female	Additional Gender category or other
R-CWCI	86.0%	14.0%	0.0%	0.0%
R-CWCII	85.1%	13.9%	0.0%	1.0%
CWCI	81.0%	17.3%	1.3%	0.5%
CWCII	81.7%	17.1%	1.2%	0.1%
Wellness Coach Group	81.7%	17.0%	1.2%	0.2%

Figure I-10: Disability Status: Wellness Coaches

On average, 93.3% of Wellness Coach licensees did not identify as having a disability, while 6.3% reported having a disability. Individuals with a registered CWCII had the highest rates of disability (11.5%) compared with the other certificate levels.

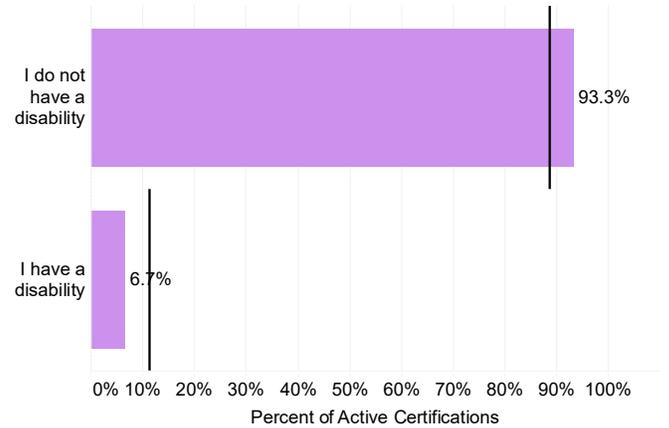
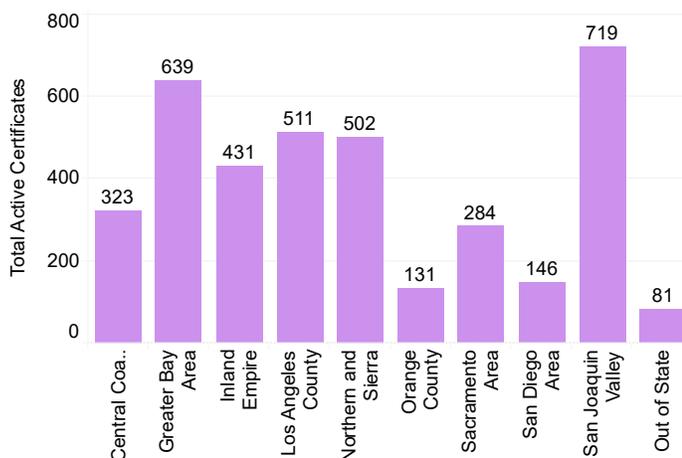


Table I-10: Disability Status: Wellness Coaches

Credential	I do not have a disability	I have a disability
R-CWCI	95.9%	4.1%
R-CWCII	88.5%	11.5%
CWCI	91.8%	8.2%
CWCII	93.9%	6.1%
Wellness Coach Group	93.3%	6.7%
California's Population	88.7%	11.3%

Figure I-11: Active Certifications: Wellness Coaches



As a group, the San Joaquin Valley region has the highest total number of Wellness Coaches in the state while the Orange County region has the least. Within Wellness Coaches, CWCII's make up more than 70% of all certifications.

Table I-11: Active Certifications: Wellness Coaches

Credential	Central Coast	Greater Bay Area	Inland Empire	Los Angeles County	Northern & Sierra	Orange County	Sacramento Area	San Diego Area	San Joaquin Valley	Out of State
R-CWCI	6	5	4	9	7	3	14	0	3	0
R-CWCII	12	18	18	24	5	5	7	1	12	0
CWCI	50	173	83	90	184	41	75	37	116	28
CWCII	255	443	326	388	306	82	188	108	588	53
Wellness Coach Group	323	639	431	511	502	131	284	146	719	81

Figure I-12: New Certificates: Wellness Coaches

On average, there were 248 new Wellness Coach certificates issued per month from December 2024 to December 2025, which represents a 313% increase from 2024, which showed 60 new certificates per month, on average.

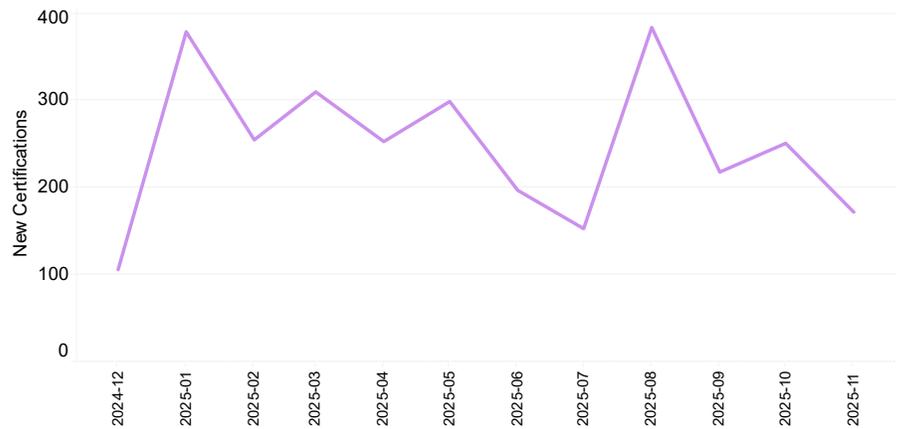
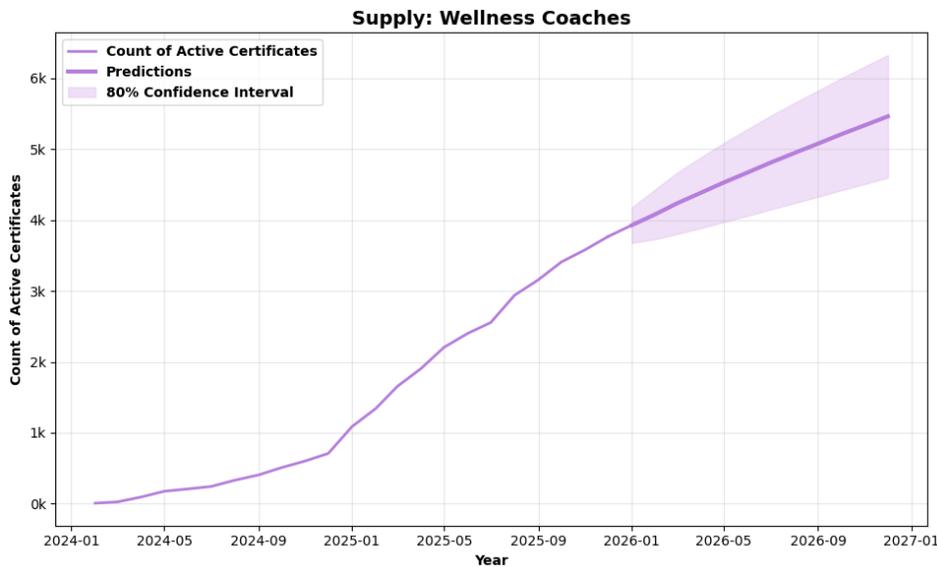


Table I-12: New Certificates: Wellness Coaches

Credential	2024-12	2025-01	2025-02	2025-03	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11
R-CWCI	0	1	0	2	0	1	1	4	2	8	13	6
R-CWCII	1	6	1	2	2	7	8	9	10	18	16	9
CWCI	18	79	35	73	66	84	71	49	88	50	65	50
CWCII	87	293	219	233	185	207	117	91	284	142	157	107
Wellness Coach Group	106	379	255	310	253	299	197	153	384	218	251	172

Figure I-13: Supply Projections: Wellness Coaches



To project supply for Certified Wellness Coaches, a time series model with an 80% confidence interval was used (see [Health Workforce Group Projection Models](#) section for the full methodology). Active certificate counts for each month from January 2024 to December 2025 were used to predict the monthly supply of certificates each month from January 2026 to December 2026. The table below lists the total certificate counts from the last month in each quarter from 2024 Q1 to 2025 Q4.

Last year, this report projected there would be 1,155 active Certified Wellness Coaches by the end of 2025. As of December 2025, there are 3,767 active certified Wellness Coaches (see [Figure I-11: Active Certifications: Wellness Coaches](#)). On average, the number of Coaches is expected to grow an additional 45% by the end of 2026.

Table I-13: Supply Projections: Wellness Coaches

	2024 Q1	2024 Q2	2025 Q3	2025 Q4	2025 Q1	2025 Q2	2025 Q3	2025 Q4	2026 Q1	2026 Q2	2026 Q3	2026 Q4
Wellness Coach Group	26	209	406	709	1,653	2,402	3,157	3,767	4,235	4,670	5,077	5,461

Note: Cells shaded in light purple are predictions based on the Workforce Supply Model (see Figure I-13).

TECHNICAL APPENDIX

Active Licenses: Counts for Active licenses include those in a “CLEAR”, “Curr LimtdPract”, “CurrTmp FamSupp”, “Current”, “CurrentProbatr”, “Military-Active”, “Military–Active”, “PROBATION OR PRACTICE RESTRICTION”, “VALID - PAID RENEWAL”, or “VALID - PAID RENEWAL FEE” status on November 3rd, 2024. Licenses in any other status were considered Inactive and excluded from this report.

Age: DCA provides HCAI with the date of birth of licensees. For this report, age is calculated as the difference between October 3rd, 2025, and the licensee's date of birth. Licensees with a missing date of birth, or a resulting age under 18 or over 100 were excluded.

California vs. Out of State: HCAI geocodes all licensee’s public address of record. Any license or Wellness Coach certificate with a resulting state field equal to California is considered “In State”, all other values are considered “Out of State”.

California Population: This report uses population estimates and projections from the Department of Finance, specifically the county population projections ([P-2A](#)) for 2025.

Region	Population (2025)	Percent of Total
Central Coast	2,310,606	5.9%
Greater Bay Area	7,597,391	19.4%
Inland Empire	4,657,734	11.9%
Los Angeles County	9,807,291	25.0%
Northern & Sierra	1,407,267	3.6%
Orange County	3,154,492	8.0%
Sacramento Area	2,424,418	6.2%
San Diego Area	3,488,748	8.9%
San Joaquin Valley	4,384,412	11.2%
Grand Total	39,232,359	100.0%

Census Language Categories: HCAI collects detailed languages spoken to provide services to clients through the workforce survey. Data are summarized using high-level groups based on the U.S. Census Bureau’s Four Group Classification to allow for comparison with the population. The categories “English Only” and “Multiple Census Language Groups” were added to accurately capture workforce responses.

Language Group	Detailed Languages
Asian and Pacific Islander	Chinese, Hmong, Ilocano, Samoan, Hawaiian, or other Austronesian languages, Japanese, Khmer, Korean, Other languages of Asia, Tagalog, Thai, Lao, or other Tai-Kadai languages, Vietnamese
English Only	English, no other selection
Spanish	Spanish
Other Indo-European	Armenian, Bengali, French, German, Greek, Gujarati, Hindi, Italian, Indo-European, Nepali, Marathi, or other Indic languages, Other Indo-European languages, Persian, Polish, Portuguese, Punjabi, Russian, Serbo-Croatian, Telugu, Ukrainian or other Slavic languages, Urdu, Yiddish, Pennsylvania Dutch, or other West Germanic languages

Other	Amharic, Somali, or other Afro-Asiatic languages, Arabic, Hebrew, Navajo, Other and unspecified languages, Swahili or other languages of Central, Eastern and Southern Africa, Yoruba, Twi, Igbo, or other languages of Western Africa, Other, American Sign Language, Other Sign Language, Sign Language
Multiple Census Language Groups	More than one selection from two or more of the language groups above

Languages Spoken by California’s Population: This Report uses population estimates from the U.S. Census Bureau’s [DP-02 ACS Selected Social Characteristics 2023 5-year estimates](#).

Census Language Group	Population 5 years old and over	Percent of Total
Asian and Pacific Islander	3,688,508	10.0%
English Only	20,713,291	55.9%
Other Indo-European	421,079	1.1%
Other	1,759,489	4.8%
Spanish	10,446,277	28.2%
Total Population	37,028,644	100.0%

Note: The U.S. Census Bureau does not provide information on individuals who speak multiple census language groups.

New licenses: The count of licenses in an “active” status with an issue date between October 2024 and September 2025.

Percent Surveyed: The percentage of licenses that were in an active status on October 3rd, 2025 and had completed the HCAI Licensure Renewal Survey.

Workforce Group	License Name	Percent Active Licenses Surveyed	Count of Surveys
Advanced Practice Nursing	Clinical Nurse Specialist	99.90%	2,796
	Nurse Anesthetist	99.10%	2,589
	Nurse Midwife	98.80%	1,284
	Nurse Practitioner	99.10%	36,268
	Total	98.60%	43,170
Allied Health	Advanced Practice Pharmacist	80.90%	1,141
	Audiologist	74.50%	1,197
	Chiropractor	60.90%	6,523
	Doctor Of Podiatric Medicine	94.30%	1,970
	Hearing Aid Dispenser	78.20%	877
	Hearing Aid Dispenser - Trainee	51.00%	74
	Licensed Acupuncturist	88.90%	8,522
	Occupational Therapist	91.60%	13,970
	Occupational Therapy Assistant	89.80%	3,645
	Optometrist	93.70%	6,984
	Pharmacy Technician	69.10%	43,385
	Physical Therapist	86.40%	23,857
	Physical Therapist Assistant	84.00%	7,422

	Registered Contact Lens Dispenser	78.90%	1,130
	Registered Pharmacist	75.80%	31,071
	Registered Psychological Testing Technician	23.50%	23
	Registered Spectacle Lens Dispenser	80.80%	2,689
	Respiratory Care Practitioner	90.20%	18,210
	Speech Pathologist	75.20%	13,744
	Speech-Language Pathology Assistant	67.10%	3,517
	Total	78.30%	190,282
Behavioral Health	Associate Clinical Social Worker	78.20%	13,648
	Associate Marriage and Family Therapist	74.60%	11,911
	Associate Professional Clinical Counselor	68.00%	3,883
	Licensed Clinical Social Worker	98.20%	33,868
	Licensed Educational Psychologist	80.70%	1,395
	Licensed Marriage and Family Therapist	98.90%	46,341
	Licensed Professional Clinical Counselor	94.50%	4,256
	Psychiatric Mental Health Nurse	95.20%	159
	Psychiatric Technician	95.70%	7,930
	Psychologist	89.30%	17,222
	Registered Psychological Associate	67.10%	1,160
	Total	90.80%	141,773
Medicine	Naturopathic Doctor	93.00%	778
	Osteopathic Physician and Surgeon	85.10%	10,179
	Physician And Surgeon	87.00%	112,896
	Physician Assistant	88.60%	14,536
	Total	87.10%	138,389
Nursing	Public Health Nurse	91.30%	54,440
	Registered Nurse	92.30%	404,227
	Vocational Nurse	87.80%	96,637
	Total	91.40%	555,304
Oral Health	Dental Sedation Assistant	90.90%	50
	Dentist	95.40%	31,877
	Orthodontic Assistant	86.50%	1,599
	RDA In Extended Functions	89.10%	2,007
	RDH Alternative Practice	87.20%	693
	RDH Extended Function	100.00%	13
	Registered Dental Assistant	90.60%	26,094
	Registered Dental Hygienist	92.60%	16,184
	Total	92.70%	78,517
Total Health Workforce		88.70%	1,147,435

Note: Licensed Midwives, Polysomnographic Technologists, Polysomnographic Technicians, and Polysomnographic Trainees are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.

Race/Ethnicity Categories: HCAI collects detailed race and ethnicity information through the workforce survey but summarizes the data using high-level groups that maximize compatibility with other demographic data. The following table summarizes the top-level combinations of race and ethnicity used in this report. To improve readability, HCAI will occasionally truncate the "Non-Hispanic" portion of the categories (e.g., "Asian, Non-Hispanic" may be referred to as "Asian, NH").

		Ethnicity	
		Hispanic	Non-Hispanic
Race	Multiple Races	Hispanic, Any Race	Multiracial, Non-Hispanic
	White	Hispanic, Any Race	White, Non-Hispanic
	Asian	Hispanic, Any Race	Asian, Non-Hispanic
	Black	Hispanic, Any Race	Black, Non-Hispanic
	American Indian	Hispanic, Any Race	American Indian, Non-Hispanic
	Pacific Islander	Hispanic, Any Race	Pacific Islander, Non-Hispanic
	Other	Hispanic, Any Race	Other Race, Non-Hispanic

Race/Ethnicity of California's Population: This report uses population estimates from the U.S. Census Bureau's [DP-05 ACS Demographic and Housing Estimates 2024 ACS 5-year estimates](#).

Race/Ethnicity	Population	Percent of Total
American Indian, Non-Hispanic	107,379	0.27%
Asian, Non-Hispanic	5,906,995	15.05%
Black, Non-Hispanic	2,076,395	5.29%
Hispanic, Any Race	15,630,830	39.83%
Multiracial, Non-Hispanic	1,605,204	4.09%
Other Race, Non-Hispanic	209,918	0.53%
Pacific Islander, Non-Hispanic	132,838	0.34%
White, Non-Hispanic	13,573,226	34.59%
Total	39,242,785	100.0%

Region: HCAI geocodes all licensees' public address of record. Unknown or Out of State counties are excluded, and valid California counties are grouped into one of the following nine regions:

Region	Counties
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara, Santa Cruz, Ventura
Greater Bay Area	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, Sonoma
Inland Empire	Riverside, San Bernardino
Los Angeles County	Los Angeles
Northern & Sierra	Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Inyo, Lake, Lassen, Mariposa, Mendocino, Modoc, Mono, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yuba
Orange County	Orange
Sacramento Area	El Dorado, Placer, Sacramento, Yolo
San Diego Area	Imperial, San Diego
San Joaquin Valley	Fresno, Kern, Kings, Madera, Merced, San Joaquin, Stanislaus, Tulare

Please note that the address of record is not necessarily the same as a practice location; however, analysis shows the address of record county matches the primary practice county approximately 82% of the time and the regions match approximately 91% of the time.

Survey Response Rates: The workforce survey is administered at the time of electronic licensure renewal. Licensees can decline to answer questions, and some questions are skipped for certain license types, so the response rates vary by license type and question. Response rates below are presented at the group level to ensure data de-identification guidelines. The average response rates for each question across all license types within each health workforce group are listed in the following table for all active in-state licenses:

Question	Advanced Practice Nursing	Allied Health	Behavioral Health	Medicine	Nursing	Oral Health	Total Health Workforce
Education Location	93.8%	95.0%	94.5%	88.8%	93.7%	92.3%	93.3%
Residency*	N/A	91.3%	N/A	88.5%	N/A	69.7%	84.7%
Employment Status	91.1%	91.8%	89.1%	88.2%	90.7%	89.2%	90.3%
Patient Activity	88.1%	87.9%	85.9%	79.9%	87.6%	86.3%	86.5%
Research Activity	84.7%	84.9%	83.3%	74.6%	83.6%	80.2%	82.5%
Training Activity	84.8%	84.9%	83.4%	73.4%	83.8%	80.3%	82.5%
Administrative Activity	85.0%	85.1%	83.8%	75.4%	83.9%	80.9%	82.9%
Retirement Estimate	78.0%	74.9%	73.5%	71.3%	76.7%	69.2%	74.9%
Race & Ethnicity	85.3%	88.0%	86.7%	75.2%	86.3%	84.2%	85.1%
Language(s) Spoken	91.2%	93.3%	92.0%	84.7%	91.9%	90.7%	91.2%
Sexual Orientation	79.2%	79.8%	77.3%	62.8%	81.0%	77.9%	77.9%
Gender Identity	87.7%	89.8%	87.1%	84.6%	89.1%	88.0%	88.3%
Disability Status	80.0%	82.5%	74.9%	73.8%	80.4%	78.8%	79.1%
*Residency question not asked for all license types Note: Licensed Midwives, Polysomnographic Technologists, Polysomnographic Technicians, and Polysomnographic Trainees are excluded from survey-based data tables due to insufficient sample sizes resulting from a lack of online licensure renewals.							

Survey Response Weighting: Response rates from the renewal survey vary by profession, so HCAI utilizes a cell-based weighting methodology to adjust for any difference between the respondents (sample) and the complete universe of active licenses (population). HCAI compares the distribution of each license type by region and decade of birth (e.g., seven percent of all license type A are in Region X and born in the 1980s) to the distribution of the sample (e.g., 10% of license type A responses are in Region X and born in the 1980s). Dividing the population by the sample (e.g., 7/10) creates the group weight (0.7), which is used to adjust the weight of survey responses from licensees in that group. A weight below one indicates that the group is overrepresented in the sample compared to the population. Conversely, a weight above one indicates that the group is underrepresented in the sample. When counting the number of responses for each group, any Decline to State, or Not Asked responses are excluded. Because individuals can choose to decline different questions, each question has its own unique response weight for every group.