

WAGES OF DIRECT CARE WORKERS CONTINUE TO BE LOWER IN MOST STATES RELATIVE TO OTHER ENTRY-LEVEL JOBS

KEY POINTS

- In 2023, home health aides (HHAs) and personal care aides (PCAs) earned lower wages than other entry-level workers in all 50 states and the District of Columbia (DC), with an average median wage of \$15.18 per hour and a wage gap of \$3.73 between these workers and workers in other entry-level jobs.
- In 2023, certified nursing assistants (CNAs) earned lower wages than entry-level workers in 36 states and DC, with an average median wage of \$18.58 per hour and a wage gap of \$0.33 between these workers and workers in other entry-level jobs.
- The COVID-19 pandemic impacted direct care worker (DCW) wages through changes to policies and secular trends. Between 2019 and 2023, with more public attention focused on the protection of workers and more states supporting workforce development initiatives, most states experienced decreases in the wage gaps between DCWs and workers in other entry-level jobs.

BACKGROUND

Direct care workers (DCWs) play an essential role in the health and well-being of over 20 million Americans who receive long-term services and supports. DCWs include home care and home health aides (HHAs), personal care aides (PCAs), and certified nursing assistants (CNAs). DCWs assist older adults and persons with disabilities with activities of daily living across various settings including nursing facilities, hospitals, facilities for persons with intellectual and developmental disabilities, community-based residential settings, and non-residential day programs.¹⁻³ Additionally, a growing number of DCWs work directly for consumers and their families in private homes.

Between 2009 and 2019, the direct care workforce grew from 3 million to 4.6 million in reaction to a growing aging population and an increase in the number of people living longer with disabilities and chronic conditions.¹ This sector is projected to add more new jobs than any other occupation in the United States between 2019 and 2029.⁴ However, the increase in the number of workers has not kept up with demand, worsening existing worker shortages. For example, a recent study found that the growth of the home care workforce slowed between 2013 and 2019, while growth in the number of home and community-based services (HCBS) recipients increased.⁵ As a result, the number of home care workers per 100 service recipients declined by 11.6% between 2013 and 2019.⁵

Low wages are significant contributors to worker shortages because wages for DCWs are lower compared with entry-level positions in other industries with similar requirements.⁶ This makes it harder for DCW positions to be competitive compared with other entry-level positions such as customer service representatives, janitors, and retail salespersons.⁷⁻⁹ In 2023, national median pay was \$16.12 per hour (\$33,530 per year) for HHAs and PCAs¹⁰ and \$18.33 per hour (\$38,130 per year) for CNAs.¹¹ About one-half of DCWs live below 200% of the federal poverty level and rely on public assistance.¹²

Many DCWs are lost to other sectors that offer similar wages but more flexible schedules, more hours, and other benefits.¹ Our recent research, which compared the wages of DCWs with wages of other entry-level workers in 2019, found that median wages of HHAs and PCAs were lower than the wages of other entry-level jobs in all states and the District of Columbia (DC), with an average difference of \$3.15 per hour.⁶ As a percentage of wages of other entry-level jobs, wages of HHAs and PCAs in 2019 were 78%, meaning that these DCWs made \$0.78 for every \$1.00 made by other entry-level workers. Similarly, median wages of CNAs were lower than the median wages of other entry-level jobs in 40 states and DC. In 2019, CNAs made, on average, \$0.95 for every \$1.00 made by other entry-level workers.

Low wages for DCWs are a longstanding problem, and states have tried to address this issue by implementing policies aimed at improving DCW wages. For example, between 2010 and 2018, wage pass-throughs were the most commonly implemented policies and were used in 16 states and DC.¹³ Wage pass-throughs allocate increases in state Medicaid funds directly toward DCW compensation. A handful of states implemented other types of compensation policies during this time period, including wage floor policies that dictate the minimum allowable starting wage for DCWs. Tying DCW wage increases to completion of various certifications or training programs has also been tried in a few states. Results of our prior analysis revealed that most states that implemented compensation policies saw decreases in the wage gaps between DCWs and workers in other entry-level jobs.¹³ However, in most cases the magnitude of these wage changes was not sufficient to make a meaningful impact.

The COVID-19 pandemic has highlighted the essential contributions of DCWs and has further exacerbated persistent challenges: low pay, high turnover, and a high demand for home care services amidst a shrinking pool of workers.¹⁴ At the start of the pandemic, many states did not categorize home care workers as “essential workers,” which hindered workers’ access to personal protective equipment and COVID-19 testing and vaccinations.¹⁴ This lack of support led to many DCWs leaving their jobs due fear of exposure to the virus. Other social stressors, such as loss of childcare and transportation, further worsened DCW staffing shortages.¹⁴

To address the DCW shortages, federal and state governments implemented changes to policies and regulations at the beginning of the COVID-19 pandemic. For example, some states used funds from the Coronavirus Aid, Relief, and Economic Security Act or other state funding to increase Medicaid payment rates to home care agencies with an intention to provide workers with add-on pay, hazard pay, and retainer payments.¹⁴ Some agencies were able to use federal assistance funding from the Paycheck Protection Program or the Families First Coronavirus Relief Act to pay for worker bonuses, childcare, and paid leave.¹⁴ In 2021, the American Rescue Plan Act (ARPA) of 2021 included a provision for a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for Medicaid HCBS that states could use for DCW recruitment, retention, and training initiatives.¹⁵ Following 2020, the most significant change in Medicare SNF rate policy was the implementation of the Patient Driven Payment Model (PDPM) in October 1, 2019, which shifted the payment structure from volume-based services to a patient-centered model, leading to a potential increase in payments for more complex patients. In turn, this potential increase in Medicare payment may have freed up financial resources that could have been reallocated to staffing needs, including wage increases for CNAs. It is not clear that these efforts were enough to make up for overall wage increases in the entry-level job market. During this same time period, overall labor market tightness led to rapid wage increases at the bottom of the wage distribution.¹⁶

This brief presents results of a descriptive analysis that builds on our prior work to assess the extent of the wage gap between DCWs and other entry-level workers. The prior analysis examined the wage gap during the pre-pandemic period (2019) and the current analysis compares state-level median wages of DCWs with median wages of workers employed in other entry-level jobs in the post-pandemic period (2023). We also examined changes in the wage gap between wages of workers in other entry-level jobs and DCWs between 2019 and 2023.

DATA & METHODS

We used state-level wage data from the U.S. Bureau of Labor Statistics (BLS) Occupational Employment and Wage Statistics (OEWS) program to obtain hourly median wage estimates for DCWs and other entry-level jobs in 2019 and 2023.¹⁷ The OEWS data are released annually in May and include national and state-level wage estimates for approximately 830 occupations categorized based on the Standard Occupational Classification system. OEWS estimates are produced from a sample of approximately 1.1 million employers who were surveyed over a 3-year period.

We identified other entry-level jobs in the OEWS data using the 2019 and 2023 definitions from the U.S. Department of Labor Occupational Information Network (O*NET) OnLine.¹⁸ Other entry-level jobs include job zone 1 (little or no preparation needed) and job zone 2 (some preparation needed). O*NET categorizes HHAs and PCAs as job zone 2 (some preparation needed) and CNAs as job zone 3 (medium preparation needed). Therefore, the wages of DCWs should be comparable to the wages of other entry-level workers due to the similar levels of education, experience, and training required by these occupations. We compared wages of both HHAs and PCAs and CNAs with wages of workers in job zones 1 and 2.

The list of occupations in job zones 1 and 2 varied between 2019 and 2023. We manually reviewed and revised the occupation codes included in our analyses to maintain consistency in our comparison group between analysis years. We revised the list of occupations in each job zone as follows:

- Dropped occupations that moved from job zone 3 in 2019 to job zone 2 in 2023.
- Dropped occupations that moved from job zone 2 in 2019 to job zone 3 in 2023.
- Dropped occupations that were unique to 2019 or 2023.
- Revised occupations that were coded or grouped differently in 2019 versus 2023.

HHAs and PCAs are usually employed by different types of employers, work in different settings, and have different training requirements than CNAs. Therefore, we examined state-level median hourly wages separately for: (1) HHAs and PCAs; and (2) CNAs. For each state, we also calculated an average of median hourly wages of other entry-level jobs weighted by the number of people employed by each job. We compared median hourly wages of the two categories of DCWs with the weighted average of median hourly wages of other entry-level jobs by state in 2019 and 2023. We used the annual Consumer Price Index to inflate 2019 wages to 2023 dollars.¹⁹

We normalized wages of HHAs and PCAs and CNAs relative to wages of other entry-level jobs to facilitate comparisons between wages of these workers. We calculated normalized wages by dividing the median wage of HHAs and PCAs or CNAs by the weighted average of median wages of other entry-level jobs. The normalized wage reflects the fraction of wages of other entry-level jobs earned by HHAs and PCAs or CNAs. This measure allows us to express wages of DCWs as a percentage of wages of other entry-level jobs.

We also calculated the difference, or wage gap, expressed in dollars by subtracting the median wage of HHAs and PCAs or CNAs from the average of median wages of other entry-level workers. A positive wage gap indicates that other entry-level workers had higher median wages than DCWs. A negative wage gap indicates that other entry-level workers had lower median wages than DCWs.

We conducted a descriptive analysis to assess the change in the wage gap between DCWs and other entry-level workers between 2019 and 2023. We determined the change in wage gap from 2019 to 2023 for DCWs compared with other entry-level jobs by subtracting the 2019 wage gap from the 2023 wage gap. A negative change in wage gap indicates that the difference between wages of DCWs and other entry-level jobs decreased

from 2019 to 2023 (a favorable result). A positive change in wage gap indicates that the difference between wages of DCWs and other entry-level jobs increased from 2019 to 2023 (an unfavorable result).

FINDINGS

In 2023, the average of median wages across all states and DC was \$15.18 per hour for HHAs and PCAs and \$18.58 per hour for CNAs (**Tables A1** and **A2**). Wages for DCWs and other entry-level jobs varied across states. Louisiana had the lowest median hourly wages for DCWs (\$10.00 for HHAs and PCAs and \$13.98 for CNAs). Washington had the highest median hourly wage for HHAs and PCAs (\$20.35) and Oregon had the highest median hourly wage for CNAs (\$22.24). Workers in other entry-level jobs had an average median wage of \$18.81 ranging from \$15.67 in Mississippi to \$22.52 in Washington.

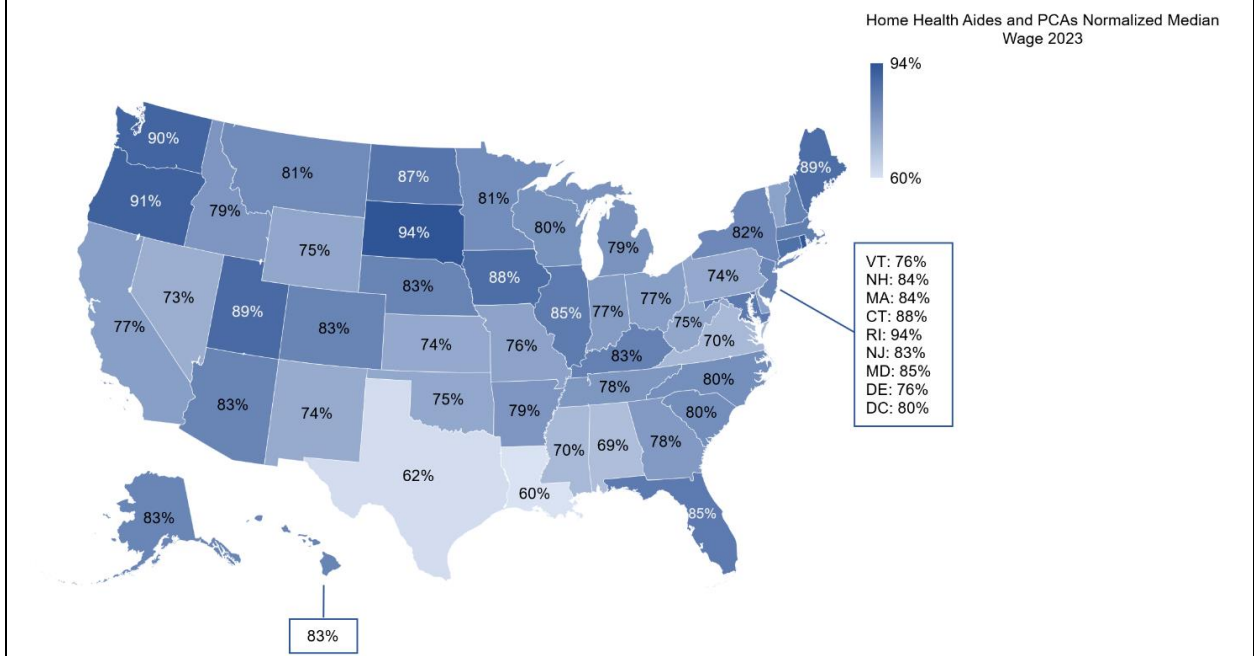
In 2023, median wages of HHAs and PCAs were lower than the median wages of other entry-level jobs in all states and DC, with an average wage gap of \$3.73 per hour--which ranged from \$0.98 in South Dakota to \$6.77 in Texas (**Table A1**). Wages of HHAs and PCAs were, on average, 80% of wages of other entry-level workers, meaning that these DCWs made \$0.80 for every \$1.00 made by other entry-level workers. The wages of HHAs and PCAs as a percentage of wages of other entry-level jobs varied across states from 60% in Louisiana to 94% in South Dakota (**Figure 1**).

Median wages of CNAs were lower than the median wages of other entry-level jobs in 36 states and DC, with an average difference of \$0.33 per hour in 2023 (**Table A2**). This wage gap ranged from -\$1.94 in Nevada (indicating that CNAs in this state had higher wages than other entry-level workers) to \$2.63 in Louisiana. Wages of CNAs were 98% of wages of other entry-level workers, meaning that these DCWs made \$0.98 for every \$1.00 made by other entry-level workers. The wages of CNAs as a percentage of wages of other entry-level jobs varied across states from 84% in Louisiana to 111% in Nevada (**Figure 2**).

From 2019 to 2023, the wage gap between HHAs and PCAs and other entry-level workers decreased in 33 states and DC and increased in 17 states, with an average change in wage gap of -\$0.35 (**Figure 3** and **Table A1**). Hawaii had the highest decrease in wage gap (-\$3.18) between HHAs and PCAs and other entry-level jobs. In 2019, the median wage for HHAs and PCAs in Hawaii was \$15.45 per hour, compared with \$22.18 per hour for other entry-level jobs--translating to a wage gap of \$6.73. In 2023, the median wage for HHAs and PCAs in Hawaii was \$17.26 per hour, compared to \$20.81 per hour for other entry-level jobs--a gap of \$3.55. Vermont had the highest increase in wage gap (\$2.74) between HHAs and PCAs and other entry-level jobs. In 2019, the median wage for HHAs and PCAs in Vermont was \$17.15 per hour, compared to \$19.38 per hour for other entry-level jobs--a gap of \$2.23. In 2023, the median wage for HHAs and PCAs in Vermont was \$15.54 per hour, compared to \$20.51 per hour for other entry-level jobs--a gap of \$4.97.

From 2019 to 2023, the wage gap between CNAs and other entry-level workers decreased in 42 states and DC and increased in eight states, with an average change in wage gap of -\$0.91 (**Figure 4** and **Table A2**). DC had the highest decrease in wage gap (-\$3.74) between CNAs and other entry-level jobs. In 2019, the median wage for CNAs in DC was \$18.80 per hour, compared with \$22.56 per hour for other entry-level jobs--a wage gap of \$3.76. In 2023, the median wage for CNAs in DC was \$22.22 per hour, compared to \$22.24 per hour for other entry-level jobs--a gap of \$0.02. New York had the highest increase in wage gap (\$0.83) between CNAs and other entry-level jobs. In 2019, the median wage for CNAs in New York was \$22.11 per hour, compared to \$20.60 per hour for other entry-level jobs--a gap of -\$1.51. In 2023, the median wage for CNAs in New York was \$22.06 per hour, compared to \$21.38 per hour for other entry-level jobs--a wage gap of -\$0.68. Notably, New York (\$0.83) and Alaska (\$0.28) were the only states where the wage gaps increased from 2019 to 2023, but the median wages for CNAs remained higher than the median wages for other entry-level jobs.

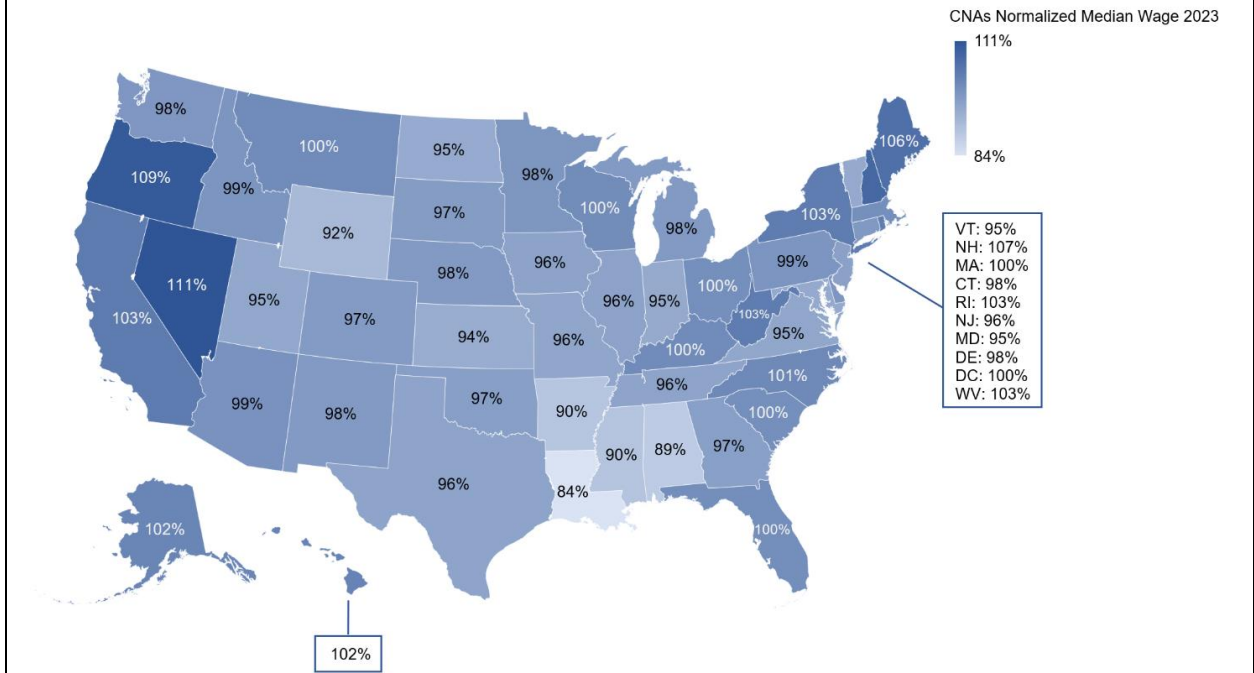
Figure 1. Median Hourly Wages of HHAs and PCAs as a Percentage of Average Median Wages of Other Entry-Level Jobs in 2023



Notes: State-level median wages were obtained from the U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics program for the May 2023 reference period. DCW wages were normalized relative to wages of other entry-level jobs to reflect the fraction of the wages of other entry-level jobs made by DCWs. For example, a value 80% indicates that DCWs made 80% of wages made by other entry-level jobs or, in other words, DCWs make \$0.80 for every \$1.00 made by other entry-level workers.

DCW = direct care worker; HHA = home health aide; PCA = personal care aide.

Figure 2. Median Hourly Wages of CNAs as a Percentage of Average Median Wages of Other Entry-Level Jobs in 2023



Note: State-level median wages were obtained from the U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics program for the May 2023 reference period. DCW wages were normalized relative to wages of other entry-level jobs to reflect the fraction of the wages of other entry-level jobs made by DCWs. For example, a value 80% indicates that DCWs made 80% of wages made by other entry-level jobs or, in other words, DCWs make \$0.80 for every \$1.00 made by other entry-level workers.

CNA = certified nursing assistant; DCW = direct care worker.

Figure 3. Change in Wage Gaps from 2019-2023 by State and DC for HHAs and PCAs Compared with Other Entry-Level Jobs (2023\$)

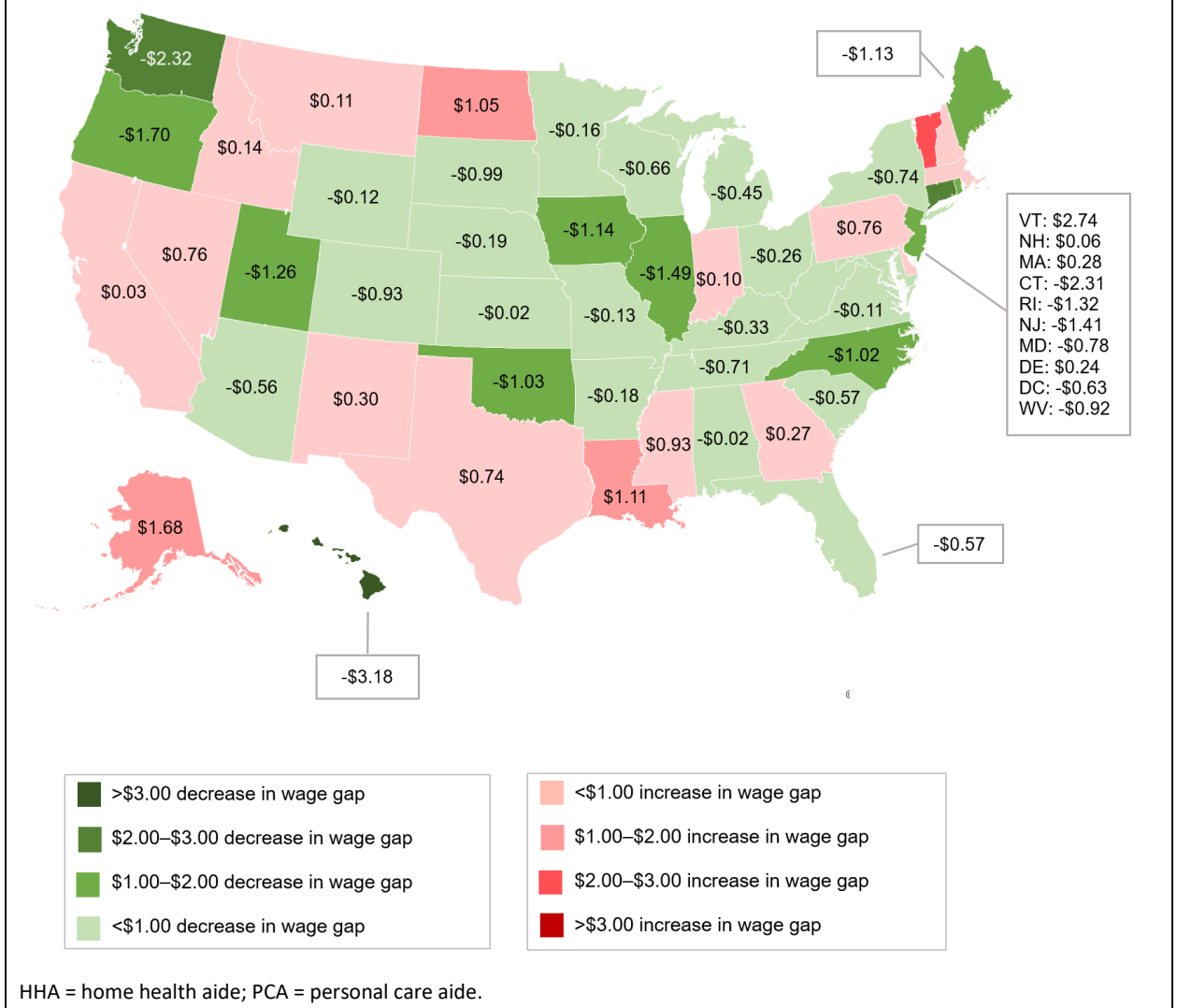
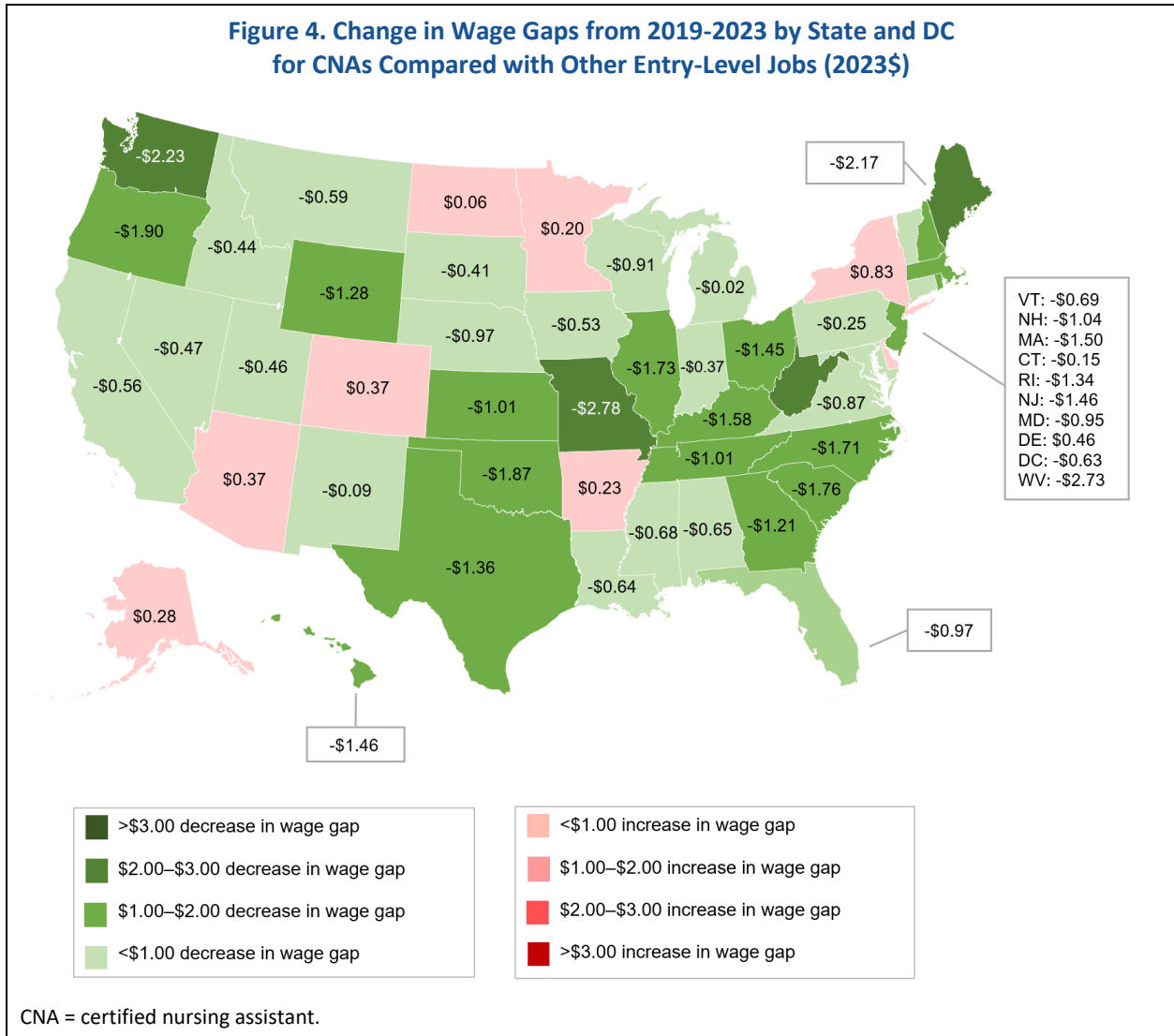


Figure 4. Change in Wage Gaps from 2019-2023 by State and DC for CNAs Compared with Other Entry-Level Jobs (2023\$)



DISCUSSION

This study builds on our previous research to assess the state-level wage gaps between DCWs and other entry-level jobs. We extend our prior work by assessing the DCW wage gap in each state during the post-pandemic period (2023) and examining the changes in wage gaps between 2019 and 2023. Despite the recent efforts to improve DCW compensation, wages (in real terms) of HHAs and PCAs decreased between 2019 and 2023 in nine states. Despite a reduction in the wage gap in 33 states and DC, HHAs and PCAs continued to have an average median wage that was \$3.73 lower than the average of median wages of other entry-level workers in 2023, making \$0.80 for every \$1.00 made by other entry-level workers. CNAs experienced a larger reduction in the wage gap, which decreased to \$0.33, on average, by 2023, with wage gaps decreasing in 42 states and DC.

HHAs and PCAs typically have similar job duties to CNAs, both providing personal care to patients with a focus on daily living needs. However, differences in the types of employers, places of work, and required training contribute to the wage differences between these types of workers.³ HHAs and PCAs are typically employed by home care agencies and work in private homes. CNAs, on the other hand, work in a wide range of facilities, including nursing homes and hospitals. Additionally, although the requirements vary by state, CNAs are typically mandated to complete official training and certifications. HHAs and, especially, PCAs do not often have the same level of training requirements.^{1,3} Given the differences in required knowledge and training,

O*NET categorizes HHAs and PCAs as job zone 2 (some preparation needed) and CNAs as job zone 3 (medium preparation needed). Yet, we found that in most cases, DCWs earned less than workers in jobs that require less education, experience, and training (i.e., job zones 1 and 2). Furthermore, the wage gap between CNAs and other entry-level workers decreased between 2019 and 2023 in 42 states and DC but still remained positive, on average, even though CNAs are categorized by O*NET as job zone 3 and we compared their wages to job zones 1 and 2.

The COVID-19 pandemic impacted DCW wages through changes to policies and secular trends, such as demand for workers and wage increases among low-wage workers in many industries. For HHAs and PCAs, the wage gap changes over the 4-year period (between 2019 and 2023) were similar to the changes during the 10-year period prior to that (between 2009 and 2019). In both time periods, the wage gap between HHAs and PCAs and other entry-level workers in states that implemented DCW compensation policies decreased by \$0.35 (adjusted to 2023 dollars).¹³ For CNAs, the changes in wage gap we observed during the 2019-2023 period were slightly higher than the changes during the 2009-2019 period.¹³ We found that the CNA wage gap decreased by \$0.91 between 2019 and 2023, compared with a \$0.68 (adjusted to 2023 dollars) decrease between 2009 and 2019.¹³ This larger reduction in wage gaps for CNAs compared with HHAs and PCAs might have been driven by the differences in work settings between these DCWs. During the COVID-19 pandemic, more public attention was focused on protections of CNAs because many work in nursing homes compared with home and community-based workers.

One major concern about the latest COVID-related changes to policies aimed at improving DCW wages is that these initiatives are temporary, and it is unclear how this workforce will be affected once the funding to support workforce development initiatives ends. For example, the ARPA funding to increase HCBS FMAP was approved until March 2022 and the Centers for Medicare & Medicaid Services expects states to expend the funds by March 2025.²⁰ States will likely need to identify additional sources of funding to maintain and sustain their workforce development initiatives.

Results of this analysis indicate that despite the rising demand for services, DCWs continue to earn poverty-level low wages. Between 2019 and 2023, the wage gap increased in 17 states for HHAs and PCAs and in 8 states for CNAs. Almost one-half of the direct care workforce (45%) live below the federal 200% poverty level and about one-half (47%) rely on public assistance.¹² They typically work inconsistent or part-time hours for multiple employers.¹² DCWs are predominately female (86%) and persons of color (59%), and many of them are immigrants (26%); thus, gender and racial equity continue to be central concerns among this workforce.¹ Furthermore, additional competitive disadvantages for DCWs include health and injury risks, training/certification/costs borne to workers, lack of insurance and other benefits, and limited career growth opportunities.

We did not observe any patterns in the relationship between the wage gap in 2019 and the change in the wage gap between 2019 and 2023 for HHAs and PCAs. For example, South Dakota and North Dakota had the lowest wage gap in 2019 (\$1.97 and \$1.70, respectively) and the wage gap decreased in South Dakota (by \$0.99) but increased in North Dakota (by \$1.05). For CNAs, there appears to be a relationship in that states with higher wage gaps in 2019 experienced larger reductions between 2019 and 2023 (correlation coefficient of 0.66).

LIMITATIONS

Several limitations should be considered when interpreting results of this analysis. First, results presented in this brief are based on a descriptive analysis. Second, the analysis was based on BLS OEWS data for reference periods of May 2019 and May 2023. BLS OEWS estimates for a given reference period are based on a survey of six semiannual panels for 3 consecutive years. For example, the May 2019 employment and wage estimates were calculated using data collected in the May 2019, November 2018, May 2018, November 2017, May 2017,

and November 2016 semiannual panels. Similarly, the May 2023 employment and wage estimates were calculated using data collected between November 2020 and May 2023. Given that the data from each reference period span a 3-year period, changes in wages that may follow implementation of a compensation policy will be reflected in the OEWS estimates gradually rather than immediately. As a result, the impact of a policy that was implemented in 2021 may not yet be fully reflected in the BLS OEWS wage data from the May 2023 reference period. This may be especially challenging for policies that adjust reimbursement rates to increase DCW wages because reimbursement mechanisms may be slow to adapt to the current market making it difficult for organizations to be responsive. Further, there are policy initiatives underway to raise DCW compensation for which it may be too early to see impacts. The Medicaid Access Rule, finalized by CMS in 2024, includes a provision that requires at least 80% of Medicaid payments for certain services to be spent on direct care workers: homemaker services, home health aide services, and personal care services. The rule includes a provision that states must report annually on the percentage of payments spent on direct care workers.²¹ Additionally, in response to workforce shortages, rising costs associated with providing long-term care, and the COVID-19 pandemic, most states have increased Medicaid rates for long-term care through the Medicaid state plan amendment process to secure rate increases for providers offering long-term care services in 2022 and 2023.²²

CONCLUSION

Results of this descriptive analysis indicate that most states experienced decreases in the wage gaps between DCWs and workers in other entry-level jobs between 2019 and 2023. However, the impacts of the COVID-related policies to improve DCW workforce shortages may not have been sufficient to make a meaningful impact on wages.







ADDITIONAL TABLES

Table A1. Median Wages (2023\$) of HHAs and PCAs and Other Entry-Level Jobs by State and DC in 2019 and 2023								
State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b	
	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a		
Alabama	\$10.98	\$16.13	\$5.15	\$11.45	\$16.58	\$5.13	-\$0.02	⇓
Alaska	\$19.58	\$21.63	\$2.05	\$17.81	\$21.54	\$3.73	\$1.68	⇑
Arizona	\$14.33	\$18.21	\$3.88	\$16.01	\$19.34	\$3.33	-\$0.56	⇓
Arkansas	\$12.45	\$16.21	\$3.76	\$13.20	\$16.78	\$3.58	-\$0.18	⇓
California	\$14.99	\$19.85	\$4.86	\$16.12	\$21.01	\$4.89	\$0.03	⇑
Colorado	\$14.95	\$19.48	\$4.54	\$17.37	\$20.98	\$3.61	-\$0.93	⇓
Connecticut	\$15.22	\$19.99	\$4.77	\$17.63	\$20.10	\$2.47	-\$2.31	⇓
Delaware	\$13.47	\$17.72	\$4.25	\$14.18	\$18.67	\$4.49	\$0.24	⇑
District of Columbia	\$17.47	\$22.56	\$5.08	\$17.79	\$22.24	\$4.45	-\$0.63	⇓
Florida	\$13.37	\$16.54	\$3.16	\$14.92	\$17.51	\$2.59	-\$0.57	⇓
Georgia	\$12.99	\$16.56	\$3.57	\$13.43	\$17.27	\$3.84	\$0.27	⇑
Hawaii	\$15.45	\$22.18	\$6.73	\$17.26	\$20.81	\$3.55	-\$3.18	⇓
Idaho	\$13.28	\$16.99	\$3.71	\$14.24	\$18.09	\$3.85	\$0.14	⇑
Illinois	\$14.60	\$19.02	\$4.42	\$16.84	\$19.78	\$2.94	-\$1.49	⇓
Indiana	\$13.48	\$17.61	\$4.13	\$14.44	\$18.68	\$4.24	\$0.10	⇑
Iowa	\$14.95	\$18.23	\$3.29	\$16.52	\$18.67	\$2.15	-\$1.14	⇓
Kansas	\$12.90	\$17.58	\$4.69	\$13.43	\$18.09	\$4.66	-\$0.02	⇓
Kentucky	\$13.73	\$16.94	\$3.21	\$14.60	\$17.49	\$2.89	-\$0.33	⇓
Louisiana	\$10.76	\$16.25	\$5.49	\$10.00	\$16.61	\$6.61	\$1.11	⇑
Maine	\$15.09	\$18.47	\$3.39	\$17.39	\$19.64	\$2.25	-\$1.13	⇓
Maryland	\$15.34	\$18.99	\$3.65	\$16.72	\$19.59	\$2.87	-\$0.78	⇓
Massachusetts	\$17.89	\$20.96	\$3.07	\$18.00	\$21.34	\$3.34	\$0.28	⇑
Michigan	\$13.80	\$18.09	\$4.29	\$14.84	\$18.68	\$3.84	-\$0.45	⇓
Minnesota	\$16.08	\$20.17	\$4.10	\$16.56	\$20.50	\$3.94	-\$0.16	⇓

Table A1. (continued)



State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b	
	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a		
Mississippi	\$11.74	\$15.50	\$3.76	\$10.97	\$15.67	\$4.70	\$0.93	⬆️
Missouri	\$13.23	\$17.80	\$4.57	\$13.80	\$18.24	\$4.44	-\$0.13	⬆️
Montana	\$14.45	\$17.74	\$3.30	\$14.78	\$18.19	\$3.41	\$0.11	⬆️
Nebraska	\$14.77	\$18.14	\$3.37	\$15.31	\$18.49	\$3.18	-\$0.19	⬆️
Nevada	\$13.63	\$17.88	\$4.24	\$13.34	\$18.35	\$5.01	\$0.76	⬆️
New Hampshire	\$15.34	\$18.47	\$3.13	\$16.55	\$19.74	\$3.19	\$0.06	⬆️
New Jersey	\$14.55	\$19.56	\$5.00	\$17.07	\$20.67	\$3.60	-\$1.41	⬆️
New Mexico	\$12.38	\$16.68	\$4.29	\$12.83	\$17.42	\$4.59	\$0.30	⬆️
New York	\$15.99	\$20.60	\$4.60	\$17.52	\$21.38	\$3.86	-\$0.74	⬆️
North Carolina	\$12.29	\$16.69	\$4.40	\$13.81	\$17.19	\$3.38	-\$1.02	⬆️
North Dakota	\$18.99	\$20.69	\$1.70	\$17.89	\$20.64	\$2.75	\$1.05	⬆️
Ohio	\$13.21	\$17.75	\$4.54	\$14.08	\$18.36	\$4.28	-\$0.26	⬆️
Oklahoma	\$11.55	\$16.80	\$5.25	\$12.33	\$16.55	\$4.22	-\$1.03	⬆️
Oregon	\$16.05	\$19.58	\$3.52	\$18.50	\$20.32	\$1.82	-\$1.70	⬆️
Pennsylvania	\$14.29	\$18.38	\$4.09	\$13.94	\$18.78	\$4.84	\$0.76	⬆️
Rhode Island	\$16.50	\$18.99	\$2.50	\$18.25	\$19.43	\$1.18	-\$1.32	⬆️
South Carolina	\$12.57	\$16.47	\$3.90	\$13.62	\$16.94	\$3.32	-\$0.57	⬆️
South Dakota	\$14.89	\$16.86	\$1.97	\$16.68	\$17.66	\$0.98	-\$0.99	⬆️
Tennessee	\$12.45	\$16.96	\$4.51	\$13.77	\$17.57	\$3.80	-\$0.71	⬆️
Texas	\$11.54	\$17.56	\$6.02	\$10.83	\$17.60	\$6.77	\$0.74	⬆️
Utah	\$14.56	\$17.83	\$3.27	\$16.84	\$18.85	\$2.01	-\$1.26	⬆️
Vermont	\$17.15	\$19.38	\$2.23	\$15.54	\$20.51	\$4.97	\$2.74	⬆️
Virginia	\$12.09	\$17.74	\$5.65	\$13.01	\$18.55	\$5.54	-\$0.11	⬆️
Washington	\$17.17	\$21.66	\$4.49	\$20.35	\$22.52	\$2.17	-\$2.32	⬆️
West Virginia	\$11.70	\$16.81	\$5.11	\$12.34	\$16.53	\$4.19	-\$0.92	⬆️

Table A1. (continued)

State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b
	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a	Median Wage of HHAs and PCAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- HHAs/PCAs) ^a	
Wisconsin	\$14.06	\$18.64	\$4.58	\$15.30	\$19.22	\$3.92	-\$0.66 
Wyoming	\$15.58	\$20.58	\$5.00	\$14.33	\$19.22	\$4.89	-\$0.12 
Mean	\$14.31	\$18.39	\$4.08	\$15.18	\$18.91	\$3.73	-\$0.35 
Median	\$14.33 (Arizona)	\$18.09 (Michigan)	\$4.24 (Nevada)	\$14.92 (Florida)	\$18.68 (Michigan)	\$3.80 (Tennessee)	-\$0.26 (Ohio) 
Min	\$10.76 (Louisiana)	\$15.50 (Mississippi)	\$1.70 (North Dakota)	\$10.00 (Louisiana)	\$15.67 (Mississippi)	\$0.98 (South Dakota)	-\$3.18 (Hawaii) 
Max	\$19.58 (Alaska)	\$22.56 (District of Columbia)	\$6.73 (Hawaii)	\$20.35 (Washington)	\$22.52 (Washington)	\$6.77 (Texas)	\$2.74 (Vermont) 

Notes:

State-level median wages were obtained from the U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics program for reference periods of May 2019 and May 2023. All wages are expressed in 2023 dollars (2023\$).

- a. In the wage gap columns, a negative value indicates that HHAs and PCAs had a higher median wage than the average median wage of other entry-level jobs. A positive value indicates that HHAs and PCAs had a lower median wage than the average median wage of other entry-level jobs.
- b. In the change in wage gap column, a negative value or the  symbol indicate that the wage gap between HHAs and PCAs and other entry-level jobs decreased from 2019 to 2023. A positive value or the  symbol indicate that the wage gap between HHAs and PCAs and other entry-level jobs increased from 2019 to 2023.

HHA = home health aide; PCA = personal care aide.

Table A2. Median Wages (2023\$) of CNAs and Other Entry-Level Jobs by State and DC in 2019 and 2023

State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b	
	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a		
Alabama	\$13.59	\$16.13	\$2.54	\$14.69	\$16.58	\$1.89	-\$0.65	⇓
Alaska	\$22.24	\$21.63	-\$0.61	\$21.87	\$21.54	-\$0.33	\$0.28	⇓
Arizona	\$18.44	\$18.21	-\$0.23	\$19.19	\$19.34	\$0.15	\$0.37	⇓
Arkansas	\$14.68	\$16.21	\$1.53	\$15.02	\$16.78	\$1.76	\$0.23	⇓
California	\$20.00	\$19.85	-\$0.15	\$21.72	\$21.01	-\$0.71	-\$0.56	⇓
Colorado	\$19.31	\$19.48	\$0.18	\$20.44	\$20.98	\$0.54	\$0.37	⇓
Connecticut	\$19.40	\$19.99	\$0.59	\$19.66	\$20.10	\$0.44	-\$0.15	⇓
Delaware	\$17.89	\$17.72	-\$0.17	\$18.38	\$18.67	\$0.29	\$0.46	⇓
District of Columbia	\$18.80	\$22.56	\$3.76	\$22.22	\$22.24	\$0.02	-\$3.74	⇓
Florida	\$15.53	\$16.54	\$1.01	\$17.47	\$17.51	\$0.04	-\$0.97	⇓
Georgia	\$14.78	\$16.56	\$1.78	\$16.69	\$17.27	\$0.58	-\$1.21	⇓
Hawaii	\$21.10	\$22.18	\$1.08	\$21.19	\$20.81	-\$0.38	-\$1.46	⇓
Idaho	\$16.32	\$16.99	\$0.67	\$17.85	\$18.09	\$0.24	-\$0.44	⇓
Illinois	\$16.51	\$19.02	\$2.52	\$18.99	\$19.78	\$0.79	-\$1.73	⇓
Indiana	\$16.26	\$17.61	\$1.35	\$17.69	\$18.68	\$0.99	-\$0.37	⇓
Iowa	\$16.98	\$18.23	\$1.25	\$17.95	\$18.67	\$0.72	-\$0.53	⇓
Kansas	\$15.52	\$17.58	\$2.06	\$17.04	\$18.09	\$1.05	-\$1.01	⇓
Kentucky	\$15.43	\$16.94	\$1.51	\$17.56	\$17.49	-\$0.07	-\$1.58	⇓
Louisiana	\$12.99	\$16.25	\$3.26	\$13.98	\$16.61	\$2.63	-\$0.64	⇓
Maine	\$17.39	\$18.47	\$1.09	\$20.73	\$19.64	-\$1.09	-\$2.17	⇓
Maryland	\$17.91	\$18.99	\$1.08	\$18.57	\$19.59	\$1.02	-\$0.05	⇓
Massachusetts	\$19.37	\$20.96	\$1.59	\$21.25	\$21.34	\$0.09	-\$1.50	⇓
Michigan	\$17.63	\$18.09	\$0.47	\$18.24	\$18.68	\$0.44	-\$0.02	⇓
Minnesota	\$20.05	\$20.17	\$0.13	\$20.17	\$20.50	\$0.33	\$0.20	⇓
Mississippi	\$13.24	\$15.50	\$2.26	\$14.09	\$15.67	\$1.58	-\$0.68	⇓

Table A2. (continued)

State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b	
	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a		
Missouri	\$14.21	\$17.80	\$3.60	\$17.43	\$18.24	\$0.81	-\$2.78	⇓
Montana	\$17.21	\$17.74	\$0.53	\$18.25	\$18.19	-\$0.06	-\$0.59	⇓
Nebraska	\$16.72	\$18.14	\$1.41	\$18.05	\$18.49	\$0.44	-\$0.97	⇓
Nevada	\$19.36	\$17.88	-\$1.48	\$20.29	\$18.35	-\$1.94	-\$0.47	⇓
New Hampshire	\$18.82	\$18.47	-\$0.35	\$21.13	\$19.74	-\$1.39	-\$1.04	⇓
New Jersey	\$17.37	\$19.56	\$2.19	\$19.93	\$20.67	\$0.74	-\$1.46	⇓
New Mexico	\$16.19	\$16.68	\$0.49	\$17.02	\$17.42	\$0.40	-\$0.09	⇓
New York	\$22.11	\$20.60	-\$1.51	\$22.06	\$21.38	-\$0.68	\$0.83	⇑
North Carolina	\$15.10	\$16.69	\$1.59	\$17.31	\$17.19	-\$0.12	-\$1.71	⇓
North Dakota	\$19.64	\$20.69	\$1.05	\$19.54	\$20.64	\$1.10	\$0.06	⇑
Ohio	\$16.22	\$17.75	\$1.53	\$18.28	\$18.36	\$0.08	-\$1.45	⇓
Oklahoma	\$14.40	\$16.80	\$2.40	\$16.02	\$16.55	\$0.53	-\$1.87	⇓
Oregon	\$19.59	\$19.58	-\$0.01	\$22.24	\$20.32	-\$1.92	-\$1.90	⇓
Pennsylvania	\$17.88	\$18.38	\$0.50	\$18.53	\$18.78	\$0.25	-\$0.25	⇓
Rhode Island	\$18.22	\$18.99	\$0.77	\$20.00	\$19.43	-\$0.57	-\$1.34	⇓
South Carolina	\$14.64	\$16.47	\$1.83	\$16.87	\$16.94	\$0.07	-\$1.76	⇓
South Dakota	\$15.96	\$16.86	\$0.90	\$17.17	\$17.66	\$0.49	-\$0.41	⇓
Tennessee	\$15.23	\$16.96	\$1.73	\$16.85	\$17.57	\$0.72	-\$1.01	⇓
Texas	\$15.48	\$17.56	\$2.08	\$16.88	\$17.60	\$0.72	-\$1.36	⇓
Utah	\$16.45	\$17.83	\$1.39	\$17.92	\$18.85	\$0.93	-\$0.46	⇓
Vermont	\$17.63	\$19.38	\$1.75	\$19.45	\$20.51	\$1.06	-\$0.69	⇓
Virginia	\$16.02	\$17.74	\$1.72	\$17.70	\$18.55	\$0.85	-\$0.87	⇓
Washington	\$19.03	\$21.66	\$2.63	\$22.12	\$22.52	\$0.40	-\$2.23	⇓
West Virginia	\$14.61	\$16.81	\$2.20	\$17.06	\$16.53	-\$0.53	-\$2.73	⇓
Wisconsin	\$17.75	\$18.64	\$0.89	\$19.24	\$19.22	-\$0.02	-\$0.91	⇓

Table A2. (continued)

State	Wages in 2019			Wages in 2023			Change in Wage Gap from 2019 to 2023 ^b
	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a	Median Wage of CNAs	Average of Median Wages of Other Entry-Level Jobs	Wage Gap (Other Entry-Level Jobs -- CNAs) ^a	
Wyoming	\$17.73	\$20.58	\$2.85	\$17.65	\$19.22	\$1.57	-\$1.28
Mean	\$17.15	\$18.39	\$1.24	\$18.58	\$18.91	\$0.33	-\$0.91
Median	\$17.21 (Montana)	\$18.09 (Michigan)	\$1.35 (Indiana)	\$18.25 (Montana)	\$18.68 (Michigan)	\$0.40 (Washington)	-\$0.87 (Virginia)
Min	\$12.99 (Louisiana)	\$15.50 (Mississippi)	-\$1.51 (New York)	\$13.98 (Louisiana)	\$15.67 (Mississippi)	-\$1.94 (Nevada)	-\$3.74 (District of Columbia)
Max	\$22.24 (Alaska)	\$22.56 (District of Columbia)	\$3.76 (District of Columbia)	\$22.24 (Oregon)	\$22.52 (Washington)	\$2.63 (Louisiana)	\$0.83 (New York)

Notes:

State-level median wages were obtained from the U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics program for reference periods of May 2019 and May 2023. All wages are expressed in 2023 dollars (2023\$).

- a. In the wage gap columns, a negative value indicates that CNAs had a higher median wage than the average median wage of other entry-level jobs. A positive value indicates that CNAs had a lower median wage than the average median wage of other entry-level jobs.
- b. In the change in wage gap column, a negative value or the symbol indicate that the wage gap between CNAs and other entry-level jobs decreased from 2019 to 2023. A positive value or the symbol indicate that the wage gap between CNAs and other entry-level jobs increased from 2019 to 2023.

CNA = certified nursing assistant.

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