OPPORTUNITY DATA · METHODOLOGY NOTE

Healthcare Pathways

Sources, scope, and interpretive notes for opportunitydata.org/healthcare-pathways.html

Wage data

All wages are national, cross-industry annual percentiles (10th, 25th, median, 75th, 90th) from the U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics (bls.gov/oes), May 2025 release, retrieved through the BLS Public Data API in June 2026. National employment counts come from the same release. OEWS measures wage and salary employment at establishments; self-employed and independent-contractor workers are not captured.

Graduate earnings (PSEO)

The graduate trajectory chart uses U.S. Census Bureau Post-Secondary Employment Outcomes (lehd.ces.census.gov/data/pseo_experimental.html), all-institutions release. Rows are taken at aggregation level 42 (institution × 4-digit CIP × credential level, pooled graduation cohorts), industry-all. Each plotted point is the national median of institution-level median earnings at years 1, 5, and 10 after exit. Program families: CIP 51.38 (Registered Nursing, associate and bachelor's), 51.39 (Practical Nursing and Nursing Assistants, certificate), 51.08 (Allied Health and Medical Assisting Services, certificate), 51.10 (Clinical/Medical Laboratory Science, certificate), 51.09 (Allied Health Diagnostic, Intervention, and Treatment, associate), and 51.26 (Health Aides/Attendants/Orderlies, certificate).

Three PSEO caveats. First, coverage and units: only the roughly 25 states with Census data-sharing agreements appear (California, the highest-paying RN state, is absent), and earnings are inflation-adjusted to 2023 dollars using the CPI-U per the PSEO data notices, roughly two years behind the May 2025 OEWS reference. Second, resolution: PSEO publishes at the 4-digit CIP level, so CIP 51.39 mixes practical nursing and nursing assistant certificates in one series; that line understates LPN programs and overstates CNA programs. Third, thin cells: the ADN series covers 36 institutions and the health aide series 14 (4 at year 10), because community college programs are hit hardest by Census privacy suppression.

OEWS and PSEO also measure different quantities. OEWS annual wages are hourly wages annualized to a 2,080-hour full-time year; PSEO records actual annual earnings, including part-time, per-diem, and partial-year work. And the two populations differ in seniority: OEWS describes the full occupational stock (median RN age 50 per the 2024 National Nursing Workforce Survey), while PSEO cohorts are at most ten years past graduation. Gaps between the two sources should not be read as one of them being wrong.

Credential-to-occupation mapping

Each credential on the page is mapped to one Standard Occupational Classification (SOC) series. Two mappings are imperfect and worth knowing about. BLS does not publish a separate patient care technician series, so PCT figures duplicate the nursing assistant occupation. Home health aide figures use the combined home health and personal care aides group, which includes personal care aides and pulls that median down.

CREDENTIAL	SOC SERIES	OCCUPATION TITLE
CNA	31-1131	Nursing Assistants
HHA	31-1120	Home Health and Personal Care Aides (broad group)
PCT	31-1131	Nursing Assistants (no separate PCT series)
Medical Assistant	31-9092	Medical Assistants
Phlebotomist	31-9097	Phlebotomists
LPN / LVN	29-2061	Licensed Practical and Licensed Vocational Nurses
Registered Nurse	29-1141	Registered Nurses
Nurse Practitioner	29-1171	Nurse Practitioners
Surgical Tech	29-2055	Surgical Technologists
Radiologic Tech	29-2034	Radiologic Technologists and Technicians
Sonographer	29-2032	Diagnostic Medical Sonographers

Training durations

Training-hour and duration ranges are compiled from federal minimums (CMS conditions of participation for HHA; OBRA-87, codified at 42 CFR 483.152, for the 75-hour CNA floor), state nursing board requirements for LPN and RN licensure, and accrediting body standards (CAAHEP and ABHES for medical assisting, ARRT for radiography, NBSTSA for surgical technology, ARDMS for sonography). State requirements vary widely above the federal floors; California, for example, requires 160 CNA hours (60 theory, 100 clinical) per the California Department of Public Health, while Maine's approved-program minimum is 130 hours.

The track taxonomy

Tracks are defined by licensure connectivity, not by employer or wage level. Two credentials sit in the same track when a state licensure or registry pathway treats one as standing toward the other. By that test, Nursing is the only stackable track: CNA experience is accepted toward LPN admission, and LPN-to-RN and RN-to-NP bridges are standard offerings. The three Technologist credentials share a wage tier but have no cross-acceptance, so the page shows them as parallel endpoints rather than rungs.

The Workforce Pell window

The 150-to-599 clock-hour, 8-to-15-week eligibility window comes from the One Big Beautiful Bill Act (Public Law 119-21) and the U.S. Department of Education's final rule (Federal Register, May 19, 2026), effective July 1, 2026.

Limitations

Percentile spreads are cross-sectional, not longitudinal. The distance between a rung's 10th and 90th percentile mixes geography, work setting, shift differentials, and seniority, so it is a rough proxy for an individual's wage growth, not a measured career trajectory. Medians describe the whole occupation, including experienced workers; first-year wages for new graduates typically sit below the medians

shown, especially in nursing.

Citation

Rowe, Benazir. *Healthcare Pathways: How Entry-Level Credentials Ladder (or Don't).* Opportunity Data, June 2026. opportunitydata.org/healthcare-pathways.html.

Methodology note version 1.0 · June 2026 · Benazir Rowe, PhD · Opportunity Data