

June 23, 2022

National health spending is declining as a percent of GDP

HIGHLIGHTS

- ▲ National health spending in April 2022 grew by 6.5%, year over year. In the absence of federal government support in 2021 and 2022, health spending would have grown by 5.5%.
- ▲ GDP in April 2022 was 9.7% higher than in April 2021 as GDP growth continues to outpace health spending growth. The difference in growth is largely attributable to the recent high rate of inflation, which has not yet had a major impact on health spending.
- ▲ In April 2022, health spending accounted for 18.1% of GDP but this share has been declining steadily over the past several months. It was 18.7% of GDP in December 2021.

National Health Spending and GDP*

	Apr 2020	Apr 2021	Mar 2022	Apr 2022
GDP	18.51	22.60	24.56	24.80
National Health Spending (HS)	4.40	4.22	4.46	4.49
HS Share of GDP	23.7%	18.7%	18.2%	18.1%
HS Share of PGDP	20.2%	18.4%	17.9%	17.9%
Growth from Prior 12 Months				
HS	18.1%	-4.0%	5.3%	6.5%
GDP	-12.7%	22.1%	9.7%	9.7%
HS minus GDP	30.8%	-26.1%	-4.4%	-3.2%
HS minus PGDP	15.7%	-9.7%	-4.2%	-2.9%

Source: Altarum monthly health spending estimates (see Methods box below). Monthly GDP is from IHS Markit. PGDP, defined as what GDP would be at full employment, is from the quarterly Congressional Budget Office estimates, converted to monthly by Altarum.

* Spending is in trillions of dollars at a seasonally adjusted annual rate (SAAR).

Altarum is a nonprofit research and consulting organization that creates and implements solutions to advance health among at-risk and disenfranchised populations. Since 2011, Altarum has researched cost growth trends and key drivers of U.S. health spending and formulated policy strategies to help bend the cost growth curve. This work was made possible through generous support from the Robert Wood Johnson Foundation.

The Health Sector Economic IndicatorsSM reports are a monthly publication of Altarum and provide an analysis of health spending, employment, and prices. For more information, contact Ani Turner at ani.turner@altarum.org. George Miller, PhD (principal author), Ani Turner, Corwin Rhyon, and Matt Daly, PhD, contributed to this brief. Media Contact: press@altarum.org. For more information, visit <http://altarum.org/solution/health-sector-spending>.



DISCUSSION

At \$4.49 trillion, national health spending in April 2022 was 6.5% higher than in April 2021, while GDP grew over this same time period by 9.7%. This difference in growth rates is largely attributable to the recent high rate of inflation, which has not yet had a major impact on health spending. As a result, health spending has been declining as a percent of GDP in recent months. In the absence of COVID-related federal government support, health spending in April 2022 would have grown at a lower rate of 5.5%, largely because of an increase in April 2022 of federal support of public health via the Public Health and Social Services (PHSS) Emergency Fund.

Exhibit 1 shows our current estimate of the trajectory of growth in national health spending since the start of 2020 with and without COVID-related federal government support to providers and public health activities. Because much of this government support was not associated with actual consumption of health care goods and services, the trajectory without government support provides a better indication of expenditures used to provide personal health care. The exhibit illustrates the extent to which GDP growth since before the pandemic-induced recession has outpaced health spending: As of April 2022, GDP was 13.9% higher than in January 2020, while health spending grew by 11.3% and would have grown by 7.8% in the absence of the federal government support.

Exhibit 1. Percent Change in National Health Spending and GDP Since January 2020

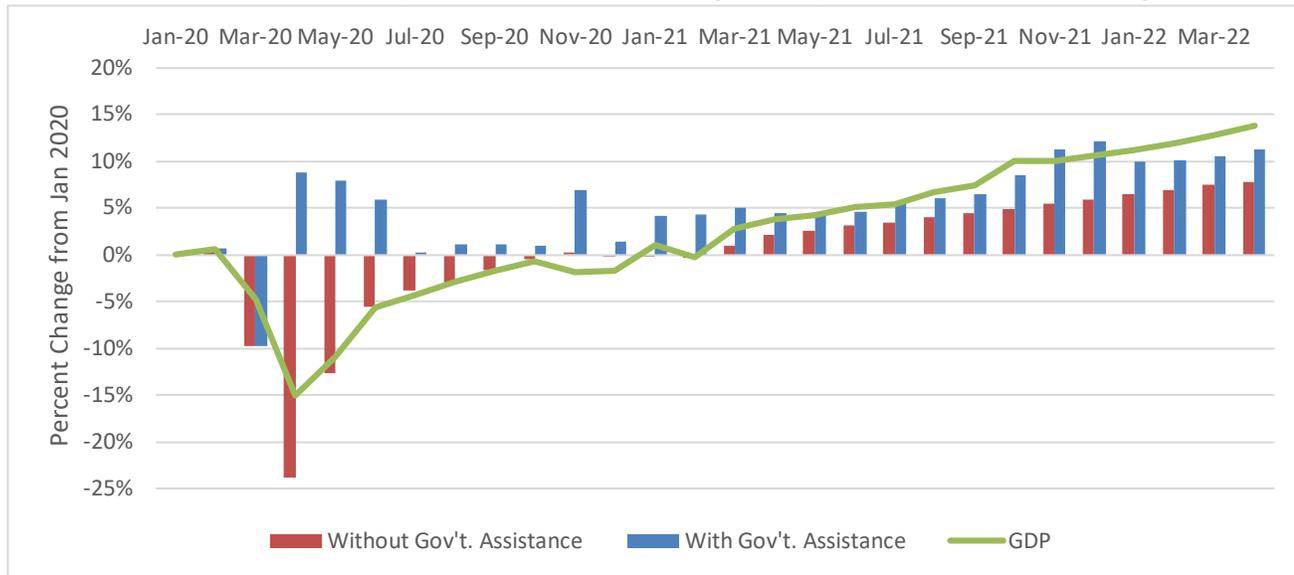


Exhibit 2 shows how spending growth among major categories has varied since January 2020, both with and without the government spending increase. With the decline in federal government support, the curves tend to converge in more recent months. Since January 2020, hospital spending has increased the most among the categories shown, at 8.5%, while spending on dental services remains 0.8% below its January 2020 level. During the same period, retail spending on prescription drugs, which did not receive significant federal support during the pandemic, grew by 10.0% (data not shown).



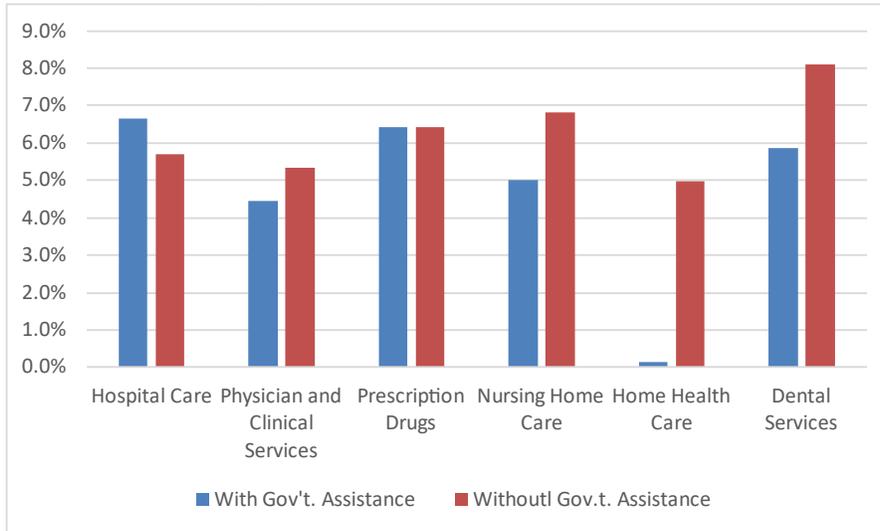
Exhibit 2. Percent Change in Spending Since January 2020, by Major Category



Exhibit 3 indicates the growth in spending by major categories over the past year, with and without the impact of federal government support. Since April 2021, hospital spending with government assistance grew the fastest, at 6.6%, while home health care grew the slowest, at 0.1%. However, the pattern of government support (as best we have been able to capture it from data published by the federal government) distorts the growth rates in the portion of spending actually used to provide clinical services. For example, the near-zero year-over-year increase in spending on home health care in April 2022 is the result of a significant influx of Paycheck Protection Program (PPP) funding in April 2021 that was not repeated in April 2022. The values for growth rates in the absence of government support provide a clearer picture of the growth in spending for personal health care; all of these rates fell between 5.0% and 8.1% from April 2021 to April 2022. Overall, personal health care spending growth for this period was 5.4% absent government support. For comparison, pre-pandemic growth in spending on personal health care for all of 2019 was a slightly more modest 4.4%.



Exhibit 3. Health Care Spending 12-Month Growth for Selected Categories





DETAILED HEALTH SPENDING

Exhibit 4. Monthly National Spending Estimates by Detailed Category

Levels (in billions of dollars)	Apr 2019	Apr 2020	Apr 2021	Apr 2022
GDP	\$21,203.5	\$18,512.2	\$22,604.2	\$24,801.8
National Health Spending	\$3,723.3	\$4,396.0	\$4,218.9	\$4,494.8
Personal health care	\$3,230.4	\$3,603.4	\$3,624.7	\$3,804.8
Hospital care	\$1,189.9	\$1,201.0	\$1,317.4	\$1,405.0
Physician and clinical services	\$758.9	\$825.0	\$841.7	\$879.2
Other professional services	\$110.0	\$148.0	\$124.6	\$128.2
Dental services	\$142.0	\$140.0	\$164.6	\$174.2
Other personal health care	\$274.3	\$371.8	\$359.7	\$362.4
Home health care	\$112.7	\$162.2	\$123.0	\$123.2
Nursing home care	\$173.8	\$303.0	\$181.5	\$190.5
Prescription Drugs	\$331.7	\$333.6	\$364.3	\$387.7
Durable medical equipment	\$56.6	\$40.6	\$58.5	\$61.1
Nondurable medical products	\$80.5	\$78.2	\$89.4	\$93.2
Program administration and net cost of private health insurance	\$193.7	\$204.2	\$215.6	\$228.4
Government public health activities	\$103.6	\$397.6	\$173.5	\$240.3
Research	\$55.6	\$59.0	\$64.7	\$69.6
Structures and equipment	\$139.9	\$131.7	\$140.4	\$151.7
HS Share of GDP	17.6%	23.7%	18.7%	18.1%
HS Share of PGDP	17.5%	20.2%	18.4%	17.9%

Source: Altarum monthly national health spending estimates. The monthly GDP is from IHS Markit.

Note: Spending is expressed in billions of dollars at a SAAR.

Exhibit 5. National Health Spending 12-Month Growth Rates by Detailed Category

Growth Rates	Apr 2020	Apr 2021	Apr 2022
GDP	-12.7%	22.1%	9.7%
National Health Spending	18.1%	-4.0%	6.5%
Personal health care	11.5%	0.6%	5.0%
Hospital care	0.9%	9.7%	6.6%
Physician and clinical services	8.7%	2.0%	4.5%
Other professional services	34.6%	-15.8%	2.9%
Dental services	-1.4%	17.6%	5.9%
Other personal health care	35.6%	-3.2%	0.8%
Home health care	43.8%	-24.2%	0.1%
Nursing home care	74.3%	-40.1%	5.0%
Prescription Drugs	0.6%	9.2%	6.4%
Durable medical equipment	-28.3%	44.2%	4.4%
Nondurable medical products	-2.8%	14.2%	4.3%
Program administration and net cost of private health insurance	5.4%	5.6%	6.0%
Government public health activities	283.6%	-56.4%	38.5%
Research	6.3%	9.7%	7.5%
Structures and equipment	-5.9%	6.6%	8.1%
HS Minus GDP	30.8%	-26.1%	-3.2%
HS Minus PGDP	15.7%	-9.7%	-2.9%

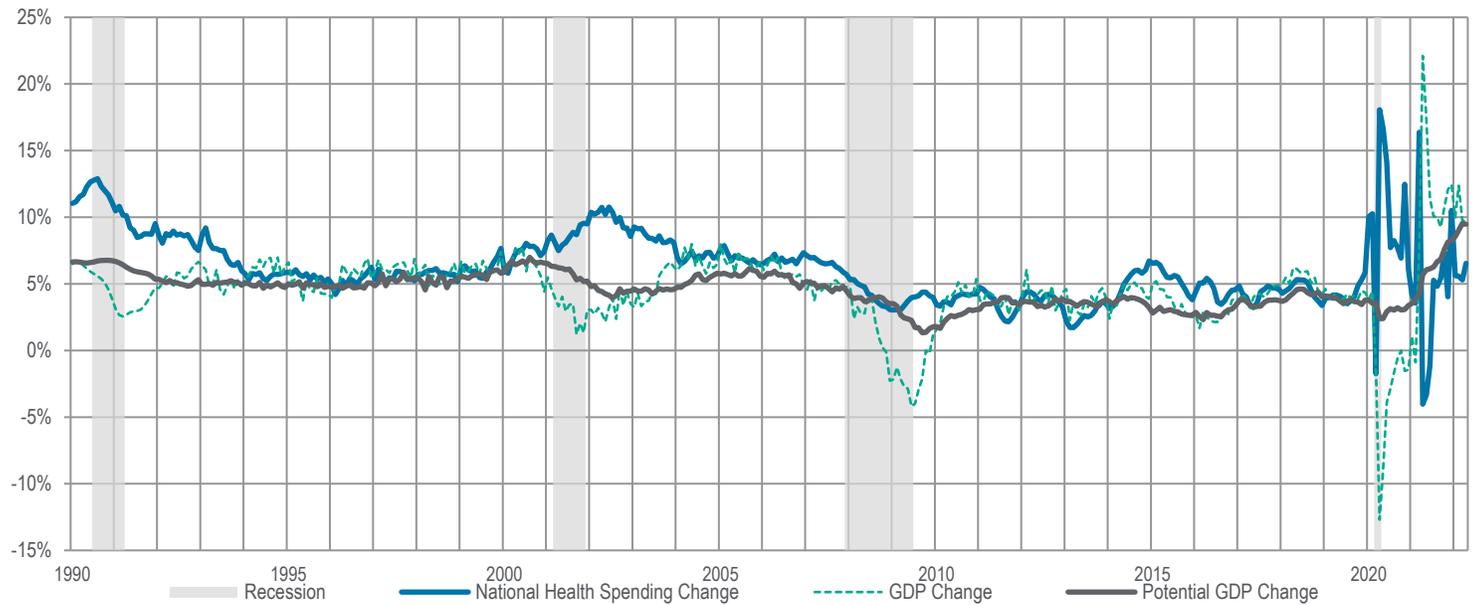
Source: Computed from Exhibit 2.

Note: This exhibit compares monthly national health spending to that of the same month from the previous year.



TIME SERIES TRACKER

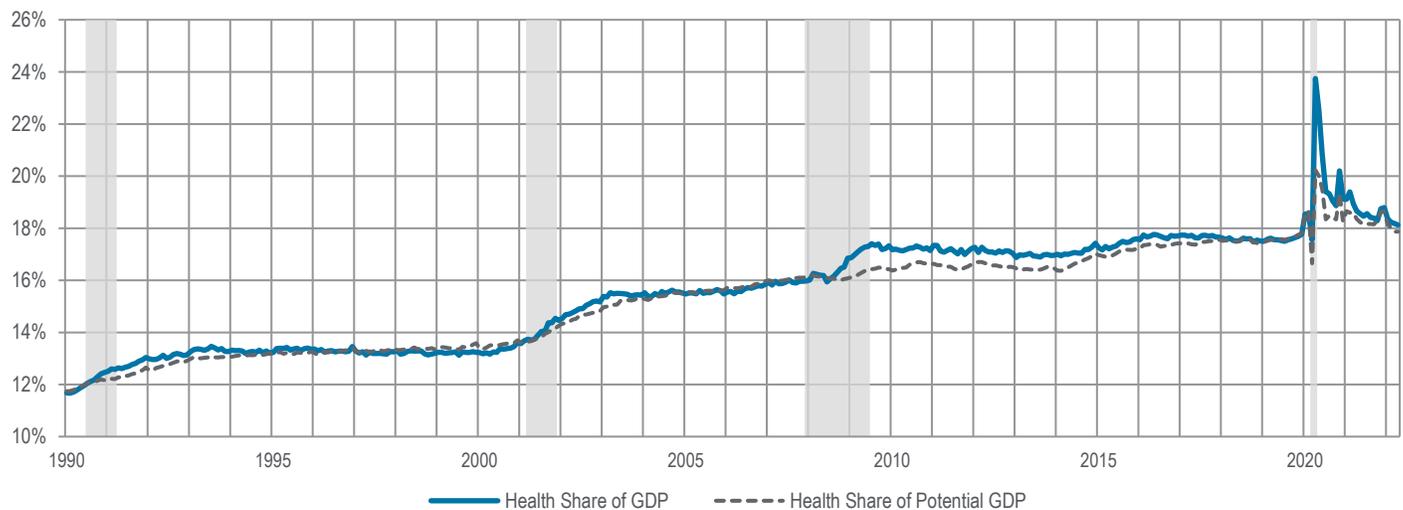
Exhibit 6. Year-over-Year Percentage Change in Spending and GDP



Source: Altarum monthly national health spending estimates. The monthly GDP is from IHS Markit.

Note: Lightly shaded bars denote recession periods.

Exhibit 7. Monthly Health Spending as a Percentage of Monthly GDP



Source: Altarum monthly national health spending estimates. Monthly GDP is from IHS Markit. PGDP is from the U.S. Congressional Budget Office and has been converted to monthly estimates. Note: Lightly shaded bars denote recession periods.

Methods. Altarum’s estimates are based on [BEA monthly health spending](#) and [CMS annual NHE estimates \(1990–2020\) and projections \(2021\)](#). BEA spending categories are matched to NHEA components by using information presented in the following: Hartman, M. B., Kornfeld, R. J., & Catlin, A. C. (2010, September). A reconciliation of health care expenditures in the National Health Expenditures Accounts and in gross domestic product. *Survey of Current Business*, 90(9), 42–52. For all NHEA personal health care categories except “other health, residential, and personal care,” monthly estimates are based on BEA spending adjusted to NHEA by using annual ratios. For the remaining categories, national health spending estimates and projections are allocated across months by using a simple trend. Annual ratio adjustments through 2021 are based on NHEA actuals (through 2020) and projections (for 2021) and ensure that monthly estimates sum exactly to NHEA annual amounts. The 2021 ratios are used to adjust BEA spending for months in 2022.

June 23, 2022

Health care price growth stays tempered despite economywide inflation

HIGHLIGHTS

- ▲ Growth in the overall Health Care Price Index (HCPI) remained the same in May (2.0% year over year) as the slightly revised April data, slowing somewhat from the 2.4% health care price growth seen a year earlier.
- ▲ Economywide inflation trends were mixed this month as CPI growth increased to 8.6%, but PPI growth declined very slightly to 10.8%. Services CPI (excluding healthcare) increased to 6.0% growth in May, up from 5.6% last month, but still well below commodities inflation, which was at 13.0% year over year.
- ▲ Among major health care categories, physician services and prescription drug prices increased the least in March (0.4% and 1.9% year over year respectively), while dental care services increased the fastest at 2.7%.
- ▲ Growth in prices paid by the two major public payers (Medicare and Medicaid) diverged in newly updated data for much of 2022—Medicare price growth has slowed to just 0.2% year over year, while Medicaid price growth has accelerated, now matching private insurance price growth for health services at 3.0%.
- ▲ Growth in our implicit measure of utilization for April ticked up slightly to 3.0%, led by hospital services and prescription drug utilization, each rising at 4.7%.

	May 2020	May 2021	April 2022	May 2022
Health Care Price Index (HCPI)	2.7%	2.4%	2.0%	2.0%
GDP Deflator (GDPD)	0.4%	4.1%	7.2%	**
HCPI - GDPD	2.3%	-1.7%	-5.3%	**
<i>Addendum</i>				
Personal health care spending	10.0%	1.5%	5.0%	**
Health care utilization	7.3%	-1.0%	3.0%	**
Medical Consumer Price Index (MCPI)	4.9%	0.9%	3.2%	3.7%
Consumer Price Index – all items (CPI)	0.1%	5.0%	8.3%	8.6%
Producer Price Index – Final Demand (PPI)	-1.1%	7.0%	10.9%	10.8%

Source: Altarum analysis of U.S. Bureau of Labor Statistics (BLS) data. HCPI is a composite price index designed to measure overall price changes for personal health care spending and is patterned after the price index developed by the Centers for Medicare & Medicaid Services (CMS). Details are provided below. Numbers may not subtract properly due to rounding. **Data not available

Altarum is a nonprofit research and consulting organization that creates and implements solutions to advance health among at-risk and disenfranchised populations. Since 2011, Altarum has researched cost growth trends and key drivers of U.S. health spending and formulated policy strategies to help bend the cost growth curve. This work was made possible through generous support from the Robert Wood Johnson Foundation.

The Health Sector Economic IndicatorsSM reports are a monthly publication of Altarum and provide an analysis of health spending, employment, and prices. For more information, contact Ani Turner at ani.turner@altarum.org. Corwin Rhyan (principal author), Ani Turner, George Miller, PhD, and Matt Daly, PhD, contributed to this brief. Media Contact: press@altarum.org. For more information, visit <http://altarum.org/solution/health-sector-spending>.



DISCUSSION

Growth in the overall Health Care Price Index (HCPI) remained at 2.0% year over year in May, after April data were revised slightly upward to the same rate (Exhibit 1). After steadily rising over the past two years, economywide inflation as measured by GDP Deflator growth has declined for the first time in new April data, falling just barely from 7.3 to 7.2%, potentially indicating a peak in overall economywide price increases. Based on CPI data for April, it appears this flattening in overall price growth was linked to commodities, which declined 1.2 percentage points from March (Exhibit 4). Meanwhile, services prices outside of health care continue to increase, reaching 6.0% in May.

Health care price growth across all categories remains well below other goods and services, with HCPI increasing only 2.0% in May, 6.6 percentage points less than overall CPI (Highlights Table). The gap between economywide and health care prices continues to increase, yet at some point we do expect health care prices will follow suit as [new contracted rates](#) begin to take effect. With health care being a majority services sector, we expect growth in other economywide services may foretell potential future growth for HCPI in upcoming months.

Physician and clinical services prices increased at the slowest rate among major health care sectors in May, at only 0.4%, while dental services increased the fastest at 2.7% (Exhibit 3). Prescription drug price growth appears to have leveled off, reaching 1.9% in May, after accelerating from negative growth for much of 2021. Among different payers, we see a new picture this month in diverging Medicare and Medicaid price growth, based on slightly revised 2022 data (Exhibit 7). While private insurance price growth for all health care services remains the fastest among the three major payers, as of May, it has now been matched by Medicaid price growth at 3.0% year over year. Conversely, Medicare price growth has remained slow, at 0.2%, having fallen significantly since the 2020/2021 period.

As for our implicit measure of overall health care utilization for April 2022, we find that it grew by 3.0% year over year (Exhibit 8). Hospital care and prescription drug utilization growth were the fastest among the major categories at 4.7%,

Exhibit 2. Year-over-Year Price Growth for Selected Categories

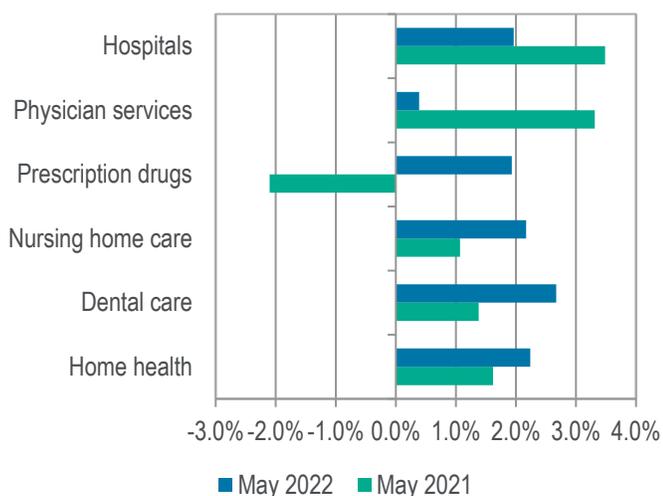


Exhibit 1. Year-over-Year Growth in HCPI & GDPD



Source: Altarum analysis of monthly BLS price data and monthly GDPD data published by Macroeconomic Advisers.

while nursing home and home health care utilization growth were the slowest at 2.6% and -2.2% respectively. Use of physician and clinical services has jumped in recent months, accelerating from near zero growth in November 2021 to the above average 4.1% in April. Overall utilization increases appear to have moderated over recent months and are closer to the historical average following the massive 2020 and 2021 disruptions in health care spending. Looking forward we expect utilization growth will be affected by slowly increasing health care prices and a potentially cooling economy, which has the potential to decrease the demand for some health care services. The size and duration of this utilization slowdown likely depends on other broad economic factors.



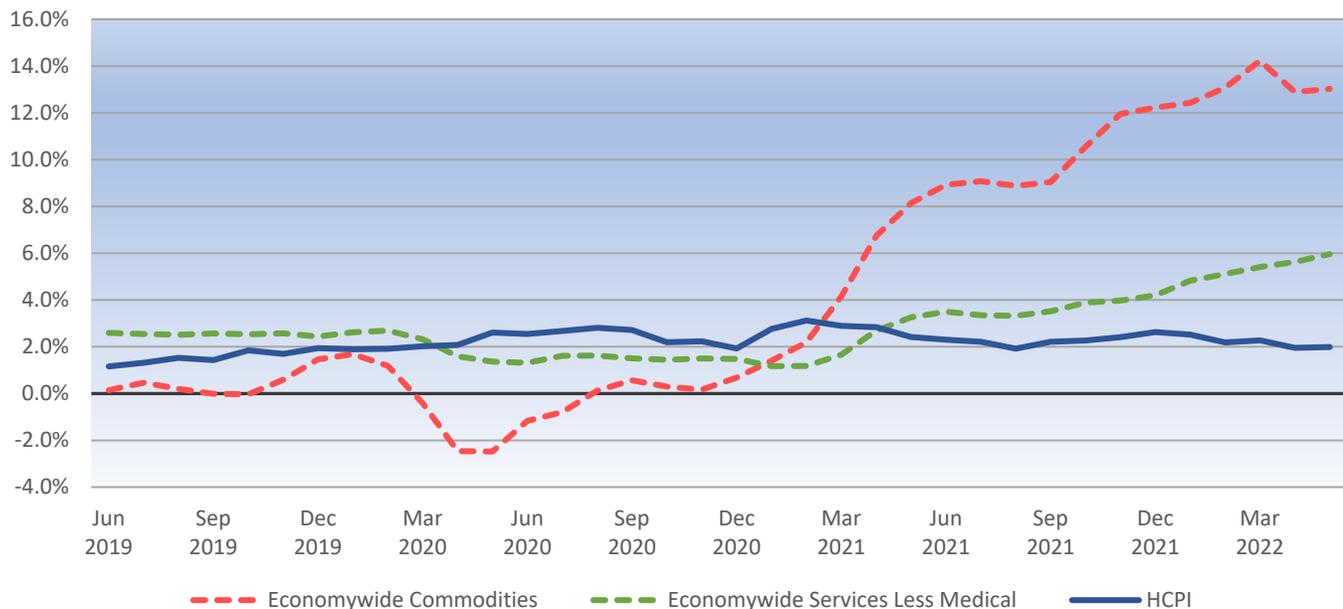
PRICE GROWTH BY DETAILED CATEGORIES

Exhibit 3. Annualized % Change in Prices for Major Components of National Health Expenditures

	Ending May 2020	Ending May 2021	Ending May 2022
Health Care Price Index (HCPI)	2.7%	2.4%	2.0%
Hospital care	3.3%	3.5%	2.0%
Physician and clinical services	1.1%	3.3%	0.4%
Prescription drugs	1.3%	-2.1%	1.9%
Nursing home care	4.7%	1.1%	2.2%
Dental Services	3.9%	1.4%	2.7%
Home health care	3.6%	1.6%	2.2%
Other professional services	1.0%	2.6%	4.5%
Other personal health care	2.9%	5.3%	3.8%
Other nondurable medical products	-0.5%	-0.3%	3.2%
Durable medical equipment	-0.3%	-2.4%	2.9%

Source: Altarum analysis of monthly BLS data.

Exhibit 4. Year-over-Year Percentage Change in Health Prices Compared with Economywide Commodities vs. Economywide Services



Methods. Altarum’s estimates for the monthly HCPI, a price index for personal health care spending within the National Health Expenditure Accounts, are essentially monthly versions of the annual index developed by the CMS National Health Statistics Group (NHSG). The advantages of this measure over the medical care component of the CPI are well documented. Information on the CMS index is presented in the following source: U.S. Department of Health and Human Services. (2019). *National Health Expenditure Accounts: Methodology Paper, 2018—Definitions, Sources, and Methods*. Washington, DC: Centers for Medicare & Medicaid Services. Retrieved from <http://www.cms.gov/files/document/definitions-sources-and-methods.pdf>. The HCPI is calculated by using BLS data on PPIs for hospital, physician, nursing home, and home health components and CPIs for prescription drugs and other remaining items. Following NHSG, we use the GDPD rather than the CPI as our measure of economy-wide inflation. While this brief focuses on prices, it also incorporates data from our spending brief and shows the power of looking at prices and spending together. In particular, it reveals the striking role of utilization in health spending growth trends.

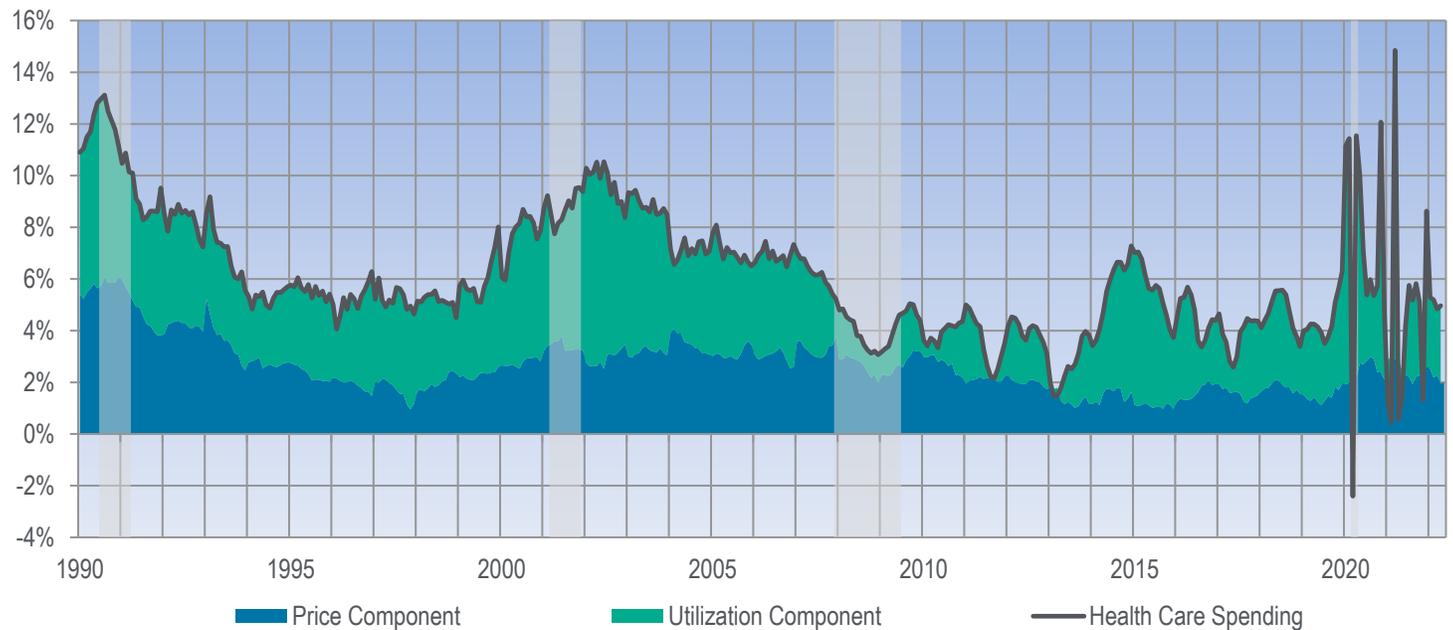


TIME SERIES TRACKER

Exhibit 5. Year-over-Year Percentage Change in Health Prices Compared with the GDP Deflator



Exhibit 6. Personal Health Care Spending Growth by Price and Utilization Components

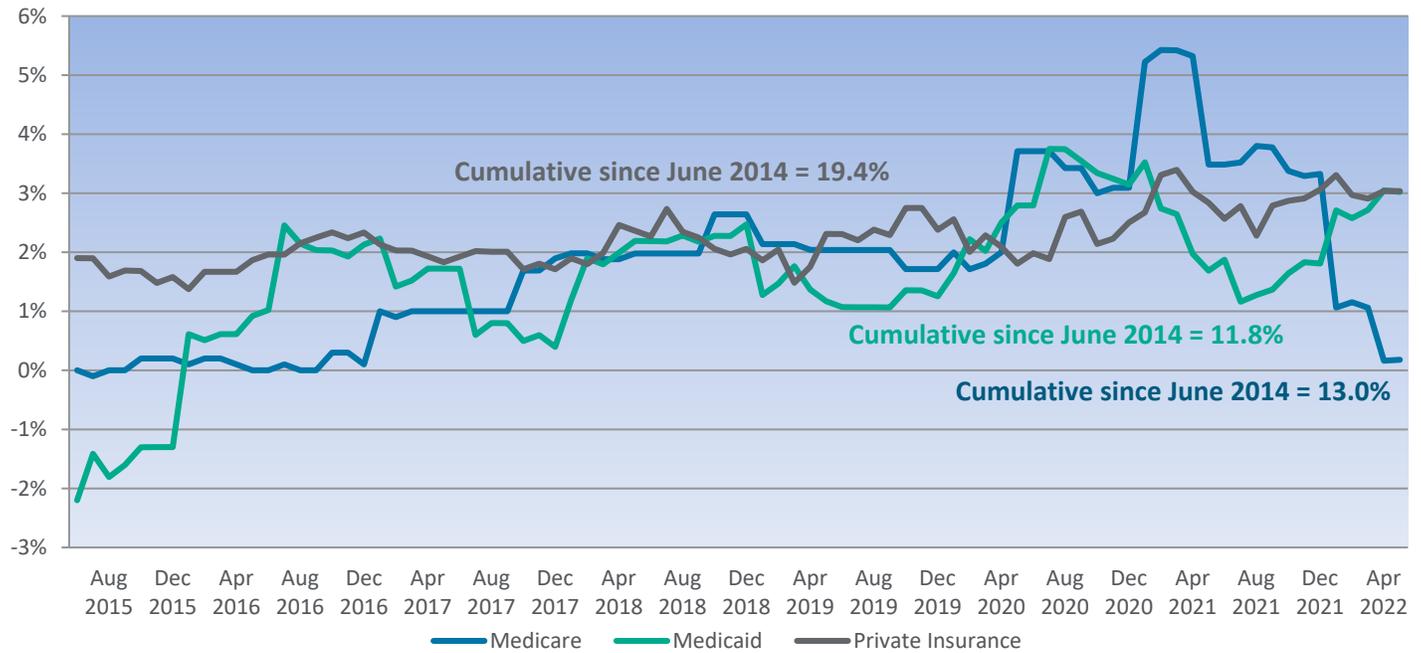


Source: Altarum monthly national health spending and price index estimates.

Note: Lightly shaded bars denote recession periods. (The [2020 recession timing](#) was announced by NBER on July 19th, 2021)



Exhibit 7. Year-over-Year Change in Health care Services Price Growth by Payer



Source: Altarum analysis of monthly BLS data.

Exhibit 8. Implicit Health Care Utilization Growth by Major Components of NHE, Year-over-year

	April 2022	3-Month Moving Average	12-Month Moving Average
Total health care	3.0%	2.9%	2.5%
Hospital care	4.7%	5.1%	3.3%
Physician and clinical services	4.1%	3.3%	3.0%
Prescription drugs	4.7%	5.9%	7.0%
Nursing home care	2.6%	3.7%	-0.2%
Dental Services	3.8%	-0.5%	11.8%
Home health care	-2.2%	-1.5%	-2.1%
Other professional services	-1.2%	-2.6%	3.6%
Other personal health care	-3.0%	-3.8%	-5.8%
Other nondurable medical products	1.2%	2.4%	2.8%
Durable medical equipment	1.5%	3.0%	3.4%

Source: Altarum analysis of monthly BLS data combined with Altarum HSEI spending data.

Note: Beginning in March 2021, we slightly updated the computation of estimated implicit utilization shown in Exhibit 8 to be more consistent with our spending data. Previous iterations calculated implicit utilization growth (U) as spending growth (S) net of price growth (P) and population growth (Pop): $U = S - P - Pop$. New data (from March 2021 onward) now include population growth in utilization, with the new measure calculated as: $U = S - P$. This approach is an approximation, ignoring the interaction term between spending and prices growth ($S*P$); however, as long as the two growth rates are small, this term is insignificant.

June 23, 2022

Health employment continues moderate growth, still below pre-pandemic peak

HIGHLIGHTS

- ▲ Health care employment grew by 28,300 jobs in May 2022. In a departure from the typical pattern of employment shifting from inpatient and residential care to ambulatory settings, most of the gains in May were in hospitals (16,300 jobs), nursing and residential care showed positive growth (5,600 jobs), and ambulatory care employment grew only modestly (6,400 jobs).
- ▲ More than two years since the start of the pandemic, the level of health employment is 222,000 jobs (1.3%) below the pre-pandemic peak. Employment in ambulatory settings is now 242,000 jobs (3.1%) above where it was in February 2020, while hospital employment remains 75,000 jobs (1.4%) below February 2020 and nursing and residential care employment is down by 390,000 jobs (11.6% decline).
- ▲ The economy added 390,000 jobs in May. Through the first five months of 2022, the economy added an average of 488,000 jobs per month. Total employment is now less than one million jobs and a half a percent below where it was in February 2020, while the unemployment rate remains at 3.6%.
- ▲ Wage data are consistent with a tight labor market overall and in health care in particular. Average hourly earnings in health care grew 6.9% year over year in April 2022 (the most recent industry-level data). Earnings across all private sector jobs grew 5.5% year over year in April and 5.2% in May 2022.

Cyclical Employment Big Picture

Seasonally Adjusted	February 2020 (peak)	May 2021	Apr 2022	May 2022
Total Employment (000)	152,504	145,141	151,292	151,682
Non-Health Employment (000)	136,014	129,123	135,052	135,414
Health Employment (000)	16,491	16,018	16,240	16,268
Health Share of Total Employment	10.81%	11.04%	10.73%	10.73%
Unemployment Rate	3.5%	5.8%	3.6%	3.6%

Source: Altarum analysis of Bureau of Labor Statistics (BLS) data. Health care employment is private only.

Altarum is a nonprofit research and consulting organization that creates and implements solutions to advance health among at-risk and disenfranchised populations. Since 2011, Altarum has researched cost growth trends and key drivers of U.S. health spending and formulated policy strategies to help bend the cost growth curve. This work was made possible through generous support from the Robert Wood Johnson Foundation.

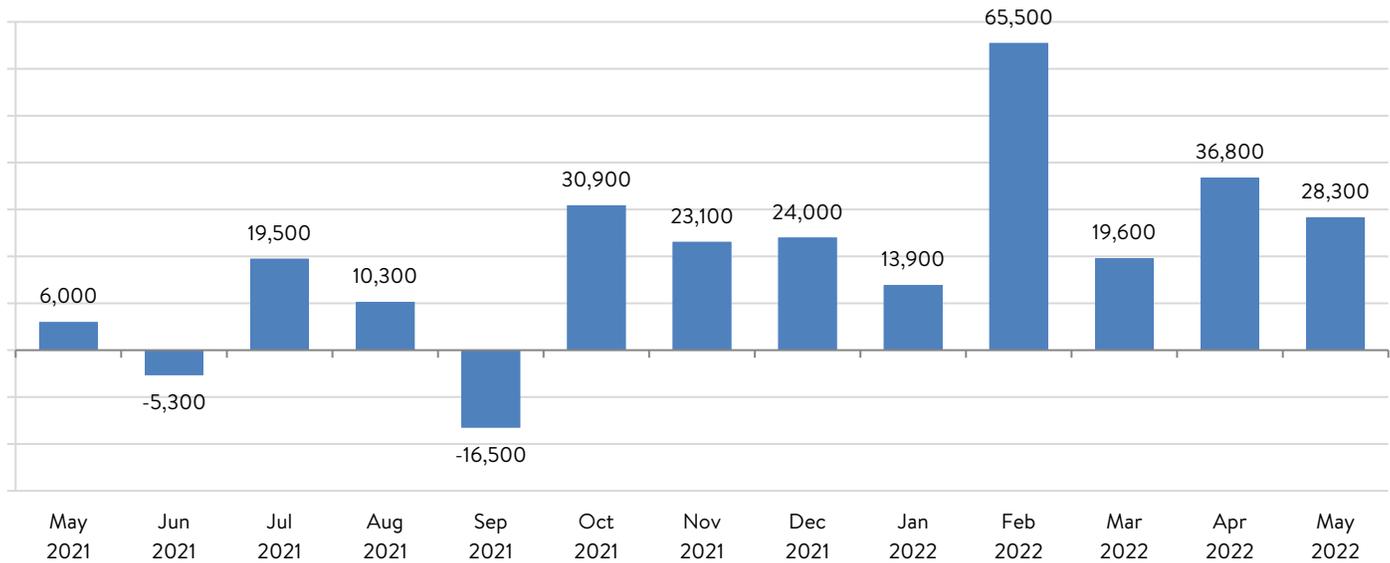
The Health Sector Economic IndicatorsSM (HSEI) reports are a monthly publication of Altarum providing analyses of health spending, employment, and prices. For more information, contact Ani Turner at ani.turner@altarum.org. Ani Turner (principal author), Corwin Rhyan, George Miller, PhD, and Matt Daly, PhD, contributed to this brief. Media Contact: press@altarum.org. For more information, visit <http://altarum.org/solution/health-sector-spending>.



DISCUSSION

Health care employment grew by 28,300 jobs in May, and revisions to March and April were minimal. Health care has added 164,000 jobs through the first five months of 2022, averaging 32,800 new jobs per month, somewhat faster than the 26,000 per month pace of the last quarter of 2021 (Exhibit 1).

Exhibit 1. Month-over-month Change in Health Care Employment, Seasonally Adjusted

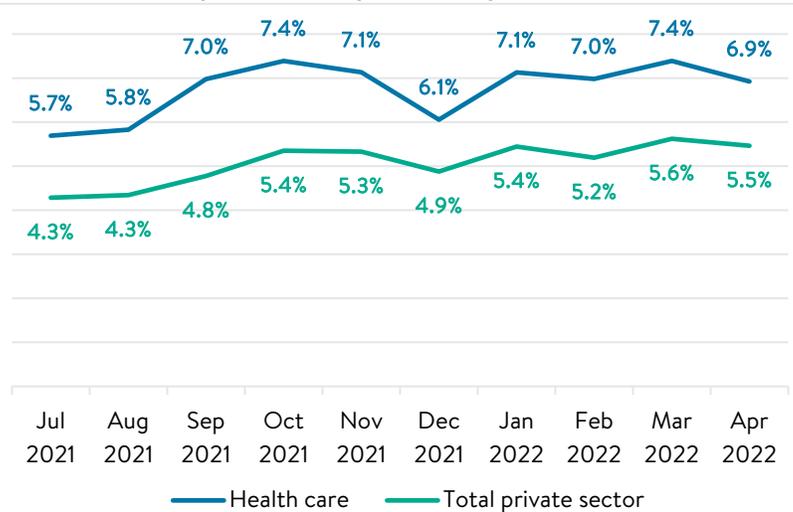


Source: Altarum analysis of monthly BLS Current Employment Statistics data.

The economy added 390,000 jobs in May. Through the first five months of 2022, the economy has added an average of 488,000 jobs per month, a slight tapering from the 524,000 per month added in 2021. Total employment is now less than one million jobs and a half a percent below where it was in February 2020. In fact, about 200,000 of the roughly 800,000 jobs below the peak are in health care; the remaining 600,000 are elsewhere in the economy. At the current pace of job growth, the economy will return to the pre-pandemic level of employment in two to three months. The unemployment rate remained at 3.6% for the third month in a row, very close to the pre-pandemic rate of 3.5%, which was a 50-year low.

Health care wages have been growing even faster than overall wages, especially since mid-2021 (Exhibit 2). Private sector earnings grew an average of 5.4% year over year in the first four months of 2022, while health sector earnings are averaging 7.1% growth over the same period. The April reading of 6.9% earnings growth is a drop from March growth of 7.4%, but it is too soon to say health care wage growth is moderating.

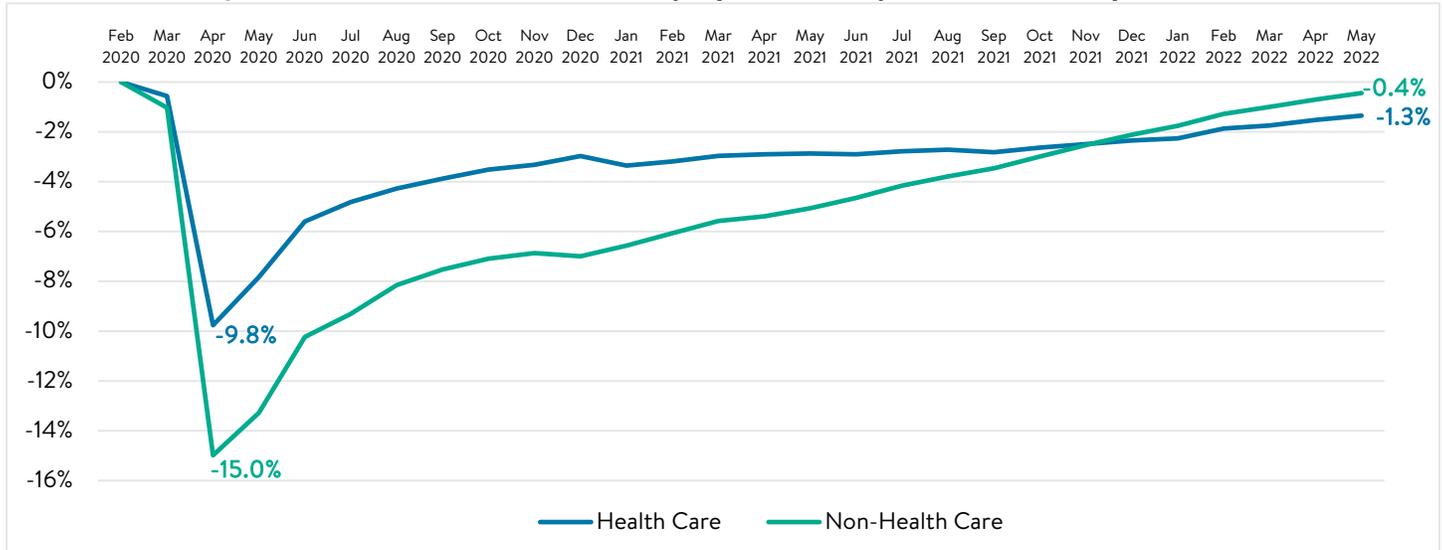
Exhibit 2. Change in Average Earnings, Year over Year





More than two years since the start of the pandemic, total nonfarm employment is half a percent below where it was in February 2020. Health care jobs are a bit further behind than non-health jobs, with health jobs 1.3% below the pre-pandemic peak while non-health jobs are 0.4% below the peak (Exhibit 3).

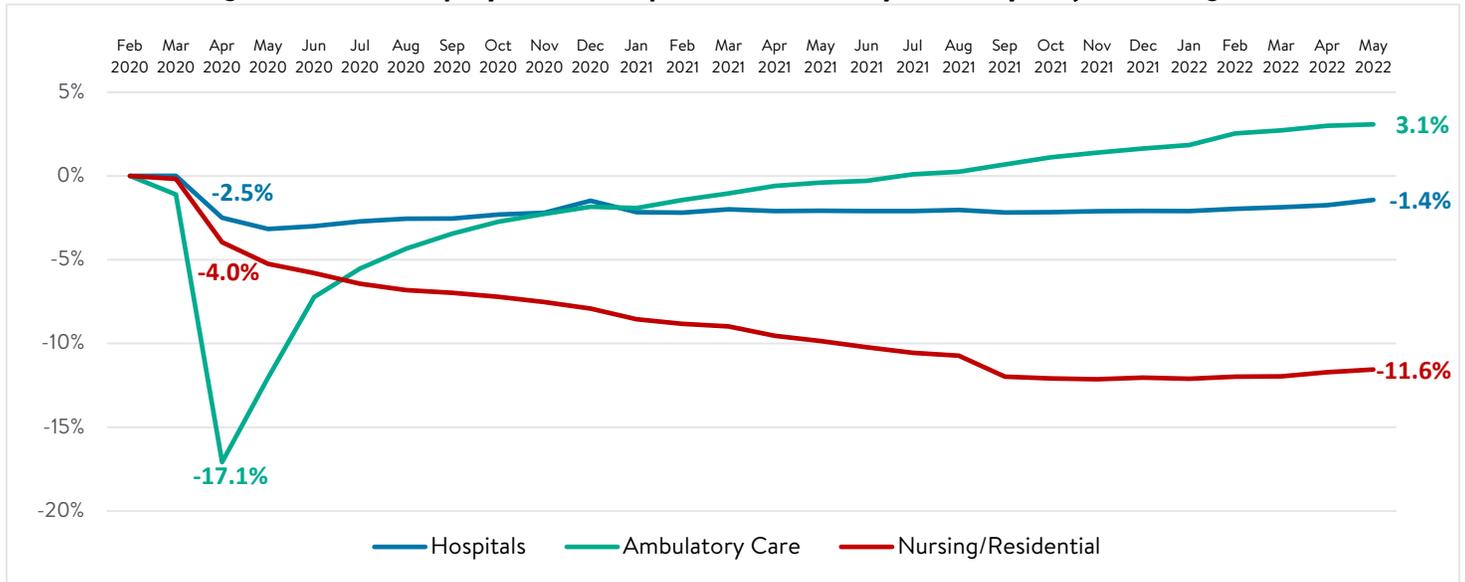
Exhibit 3. Change in Health and Non-Health Employment Compared to February 2020



Source: Altarum analysis of monthly BLS Current Employment Statistics data.

While health care employment remains below the level of two years ago, there are important differences in trends by setting of care. Employment in ambulatory care settings has grown steadily since falling sharply early in the pandemic and is now 242,400 jobs (3.1%) above the level of February 2020 (Exhibit 4). Hospital employment remains 74,900 jobs (1.4%) below the level of February 2020, while nursing and residential care employment is 390,100 jobs (11.6%) below the level of February 2020.

Exhibit 4. Change in Health Employment Compared to February 2020 by Major Setting of Care



Source: Altarum analysis of monthly BLS Current Employment Statistics data.



DETAILED HEALTH CARE EMPLOYMENT

Exhibit 5. Employment Data by Sector, Seasonally Adjusted

Employment (in thousands)	May 2022	April 2022	May 2021	May 2020	February 2020
Non-Health Care	135,414	135,052	129,123	117,956	136,014
Health Care	16,268	16,240	16,018	15,200	16,491
Ambulatory Health Care Services	8,120	8,114	7,846	6,930	7,878
Offices of Physicians	2,818	2,812	2,729	2,492	2,728
Offices of Dentists	1,026	1,025	990	685	994
Offices of Other Health Care Practitioners	1,070	1,074	1,001	831	1,004
Outpatient Care Centers	1,015	1,014	994	925	997
Medical and Diagnostic Labs	317	315	306	263	287
Home Health Care Services	1,559	1,558	1,515	1,440	1,549
Other Ambulatory	316	316	312	295	319
Hospitals	5,161	5,144	5,127	5,070	5,236
Nursing and Residential Care Facilities	2,987	2,982	3,045	3,200	3,377
Nursing Care Facilities	1,348	1,347	1,384	1,508	1,585
Other Nursing and Residential	1,639	1,635	1,661	1,692	1,792
Health Share of Employment	10.73%	10.73%	11.04%	11.41%	10.81%

Source: Altarum analysis of BLS Current Employment Statistics data. February 2020 displayed as month of pre-pandemic peak employment.

Exhibit 6. Change in Employment Data by Sector, Seasonally Adjusted

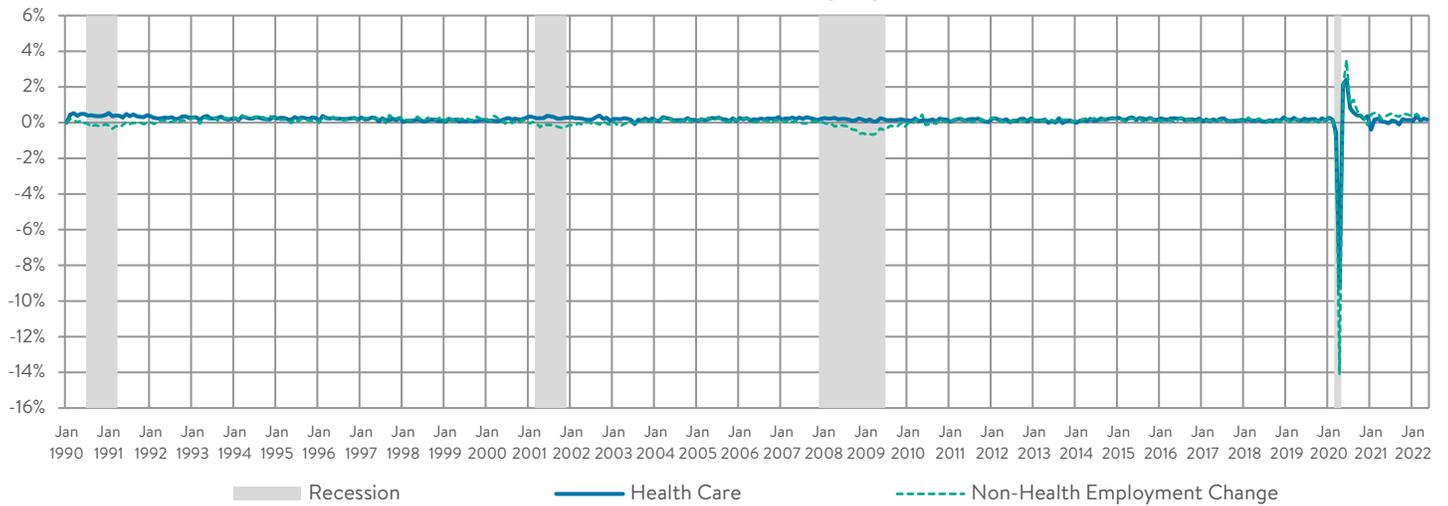
Employment Change (in thousands)	One Month	12 Months	24 Months	Since Feb 2020
Non-Health Care	361.7	6,290.9	17,458.6	-599.4
Health Care	28.3	250.1	1,068.4	-222.6
Ambulatory Health Care Services	6.4	273.9	1,190.5	242.4
Offices of Physicians	5.8	88.9	326.0	89.9
Offices of Dentists	0.9	35.8	340.9	31.9
Offices of Other Health Care Practitioners	-3.9	68.6	238.9	65.4
Outpatient Care Centers	1.1	21.4	90.6	17.9
Medical and Diagnostic Labs	1.4	10.5	53.1	29.2
Home Health Care Services	0.7	44.0	119.4	10.5
Other Ambulatory	0.4	4.9	21.7	-2.2
Hospitals	16.3	33.6	90.8	-74.9
Nursing and Residential Care Facilities	5.6	-57.4	-212.9	-390.1
Nursing Care Facilities	1.3	-35.6	-159.9	-236.7
Other Nursing and Residential	4.3	-21.8	-53.0	-153.4
Annualized Percent Change	One Month	12 Months	24 Months	Since Feb 2020
Non-Health Care	3.3%	4.9%	7.1%	-0.2%
Health Care	2.1%	1.6%	3.5%	-0.6%
Ambulatory Health Care Services	1.0%	3.5%	8.2%	1.4%
Offices of Physicians	2.5%	3.3%	6.3%	1.5%
Offices of Dentists	1.1%	3.6%	22.4%	1.4%
Offices of Other Health Care Practitioners	-4.3%	6.9%	13.5%	2.8%
Outpatient Care Centers	1.3%	2.2%	4.8%	0.8%
Medical and Diagnostic Labs	5.5%	3.4%	9.6%	4.4%
Home Health Care Services	0.5%	2.9%	4.1%	0.3%
Other Ambulatory	1.5%	1.6%	3.6%	-0.3%
Hospitals	3.9%	0.7%	0.9%	-0.6%
Nursing and Residential Care Facilities	2.3%	-1.9%	-3.4%	-5.3%
Nursing Care Facilities	1.2%	-2.6%	-5.5%	-6.9%
Other Nursing and Residential	3.2%	-1.3%	-1.6%	-3.9%

Source: Altarum analysis of BLS Current Employment Statistics data. Change since February 2020 represents comparison to pre-pandemic peak employment.



TIME SERIES TRACKER

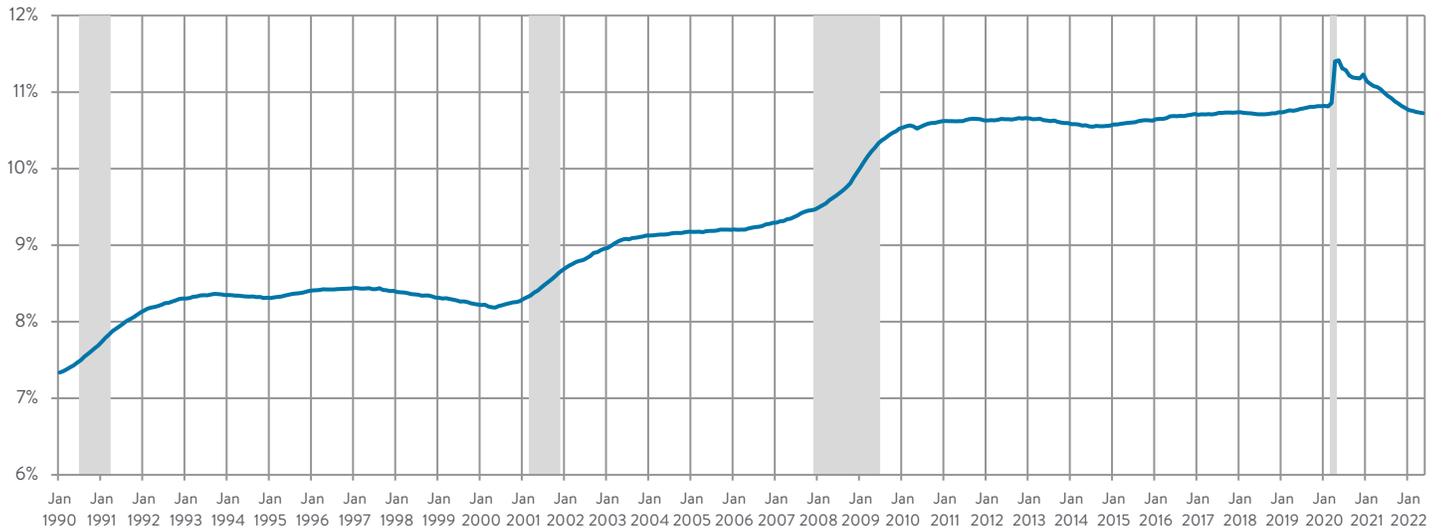
Exhibit 7. Twelve-month Percent Change in Health Care Employment



Source: Altarum analysis of BLS data.

Note: Lightly shaded bars denote recession periods.

Exhibit 8. Health Care Share of Total Employment



Source: Altarum analysis of BLS data.

Note: Lightly shaded bars denote recession periods.