

Health Sector Economic IndicatorsSM

Insights from Monthly National Health Spending Data Through November 2016

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SPENDING BRIEF

January 13, 2017

Health spending growth rate has been revised downward; continues gradual decline

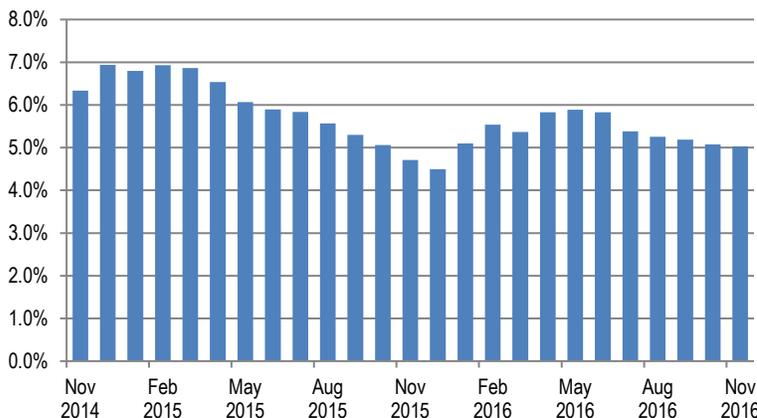
HIGHLIGHTS

- ▲ At \$3.43 trillion (seasonally adjusted annual rate), national health spending¹ in November 2016 was 5.0% higher than health spending in November 2015.
- ▲ The October 2016 nominal gross domestic product (GDP) growth over a 12-month period was 3.0%. (November data are not yet available.)
- ▲ The health spending share of GDP was 18.3% in October, rounding to the all-time high of 18.3% seen in May and June 2016.
- ▲ The health spending share of potential GDP (PGDP) was 17.9% in October and is gradually approaching the health spending share of GDP as the economy approaches full employment.²
- ▲ Spending in November 2016, year over year, increased in all major categories. Hospital care grew the fastest, at 5.8%. Dental care grew at a 3.0% rate, the slowest among the major categories.

HEALTH SPENDING

In November 2016, health spending reached a seasonally adjusted annual rate (SAAR) of \$3.43 trillion, slightly above its October value of \$3.42 trillion. October's health spending accounted for 18.3% of GDP, essentially equal to its all-time high first seen in May and June of 2016. (November GDP data are not yet available.) As a share of PGDP, October's spending was at 17.9%, equal to its September value. Year over year, health spending in November grew by 5.0%, down slightly from 5.1% in October (Exhibit 1). (Exhibits 7 and 8 show long-term comparisons.)

Exhibit 1. Year-over-Year Growth Rates in Health Spending



Source: Altarum monthly national health spending estimates.
Note: This exhibit compares a given month's health spending with that of the same month from the previous year.

National Health Spending and GDP*

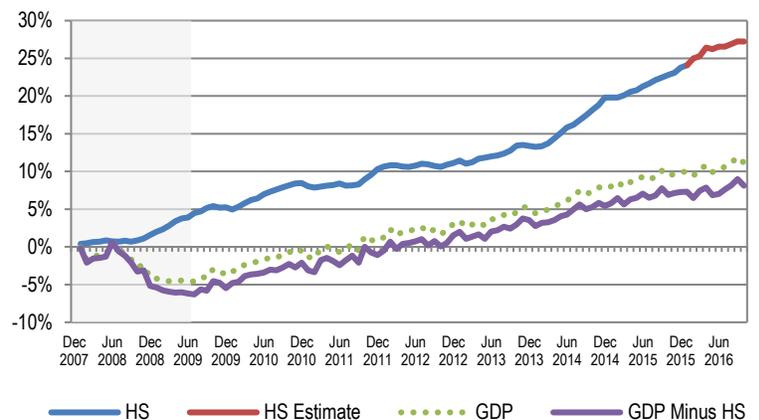
	Nov 2014	Nov 2015	Oct 2016	Nov 2016
GDP	17.74	18.23	18.73	**
National Health Spending	3.12	3.26	3.42	3.43
Health Spending Share of GDP	17.6%	17.9%	18.3%	**
Health Spending Share of PGDP	17.2%	17.6%	17.9%	**
Growth from Prior 12 Months				
Health Spending	6.3%	4.7%	5.1%	5.0%
GDP	4.1%	2.8%	3.0%	**
Health Spending Minus GDP	2.3%	2.0%	2.0%	**
Health Spending Minus PGDP	3.2%	2.1%	2.0%	**

Source: Altarum Institute monthly health spending estimates (see Methods on page 4). Monthly GDP is from Macroeconomic Advisers and Altarum estimates. 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.

Since the start of the recession in December 2007, real health spending (using the GDP deflator) through October 2016 has increased by 27.2% (an annual rate of 2.8%). Real GDP, excluding health spending, fell by more than 6% in mid-2009 and is now 8.1% above its December 2007 level. Including health care, real GDP in October was 11.1% above its pre-recession level (Exhibit 2).

Exhibit 2. Health Spending and GDP: Cumulative Percentage Change (Constant Dollars) Since December 2007



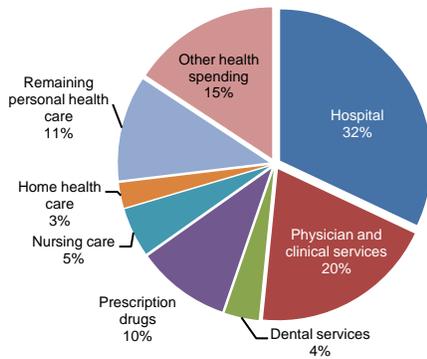
Source: "Health spending" (HS) consists of Altarum monthly estimates that match the government's official National Health Expenditure Accounts (NHEA). "HS estimates" are Altarum estimates designed to be consistent with future NHEA values. Monthly GDP is from Macroeconomic Advisers and Altarum estimates.
Note: Shading indicates the recession period.

HEALTH CARE SPENDING BY CATEGORY

In November 2016:

- ▲ Hospital spending was \$1.11 trillion (SAAR) and represented 32% of total health spending (Exhibits 3 and 5).
- ▲ Physician and clinical services spending was \$681 billion, representing 20% of total health spending.
- ▲ Prescription drug spending was \$346 billion, 10% of total health spending.
- ▲ Nursing home care and home health care spending combined were \$263 billion, 8% of total health spending.
- ▲ Spending on personal health care goods and services accounted for 85% of total health spending. Other major components include public health, research, construction, and net cost of private insurance.

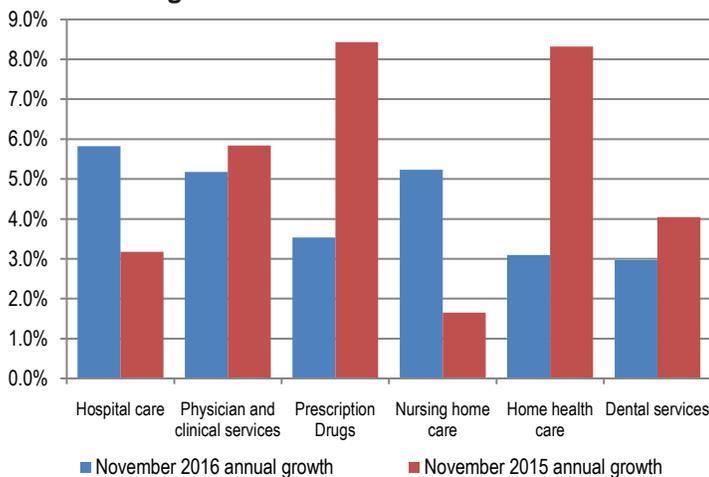
Exhibit 3. Health Spending by Category, November 2016



Source: Altarum monthly national health spending estimates.
 Note: See Exhibit 5 for a complete list of spending categories.

Growth over the past 12 months: Hospital care grew most rapidly among the major categories at 5.8%. Expenditures for dental services grew the slowest among major categories, at 3.0%. For the preceding 12-month period ending November 2015, prescription drug spending showed the highest growth among the major categories, at 8.4%, and nursing home care was lowest, at 1.7% (Exhibits 4 and 6).

Exhibit 4. Health Spending Year-over-Year Growth for Selected Categories



Source: Altarum monthly national health spending estimates.

DISCUSSION

As happens once per quarter, this month’s spending brief incorporates newly released data from the U.S. Census Bureau. Our spending estimates for the first 11 months of 2016 are based largely on the U.S. Bureau of Economic Analysis (BEA) December 22 release of personal income and outlay data. (We adjust the BEA data and supplement them with other data to make them consistent with the official NHEA that are now available through 2015.) BEA’s December release incorporates results from the Census Bureau’s Quarterly Services Survey (QSS) for the third quarter of 2016, which was released on December 8. Incorporation of these latest BEA data resulted in a small downward revision to our estimate of year-over-year growth in national health spending in the third quarter from 5.6% (our December estimate) to 5.3% (our current estimate). Year-over-year spending growth for October now stands at 5.1% after a downward revision from 5.5%. Our initial estimate of spending growth for November is 5.0%. The October and November estimates are preliminary pending release of the QSS for the fourth quarter, which will occur in March.

This reduction in third quarter spending growth has slightly increased the estimated magnitude of the previously observed deceleration in spending over the past several months: Since May 2016, spending growth has declined gradually from a rate of 5.9% to its current rate of 5.0%. However, with year-to-date spending growth standing at 5.4% through November, it appears that national health spending for all of 2016 will show somewhat higher growth than the 4.8% that had been predicted by CMS in July of last year.³

¹ Altarum’s monthly estimates of national health spending are intended to approximate the official NHEA produced annually by the Centers for Medicare & Medicaid Services (CMS). Our estimates match NHEA values that are currently available through 2015 and NHEA projections for 2016.

² For further discussion of PGDP, see our blog at <http://altarum.org/health-policy-blog/the-case-for-tracking-health-spending-as-a-share-of-potential-gdp>.

³ <http://content.healthaffairs.org/content/early/2016/07/12/hlthaff.2016.0459.full>.

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Altarum Institute is a 501(c)(3) nonprofit health care research and consulting organization. Altarum integrates independent research and client-centered consulting to deliver comprehensive, system-based solutions that improve health and health care.

The Center for Sustainable Health Spending (CSHS) was launched in 2011 to lead Altarum’s research on the cost growth trends and key drivers of U.S. health spending and to formulate policy strategies to help bend the cost growth curve.

The Health Sector Economic IndicatorsSM reports are a monthly publication of CSHS and provide an analysis of health spending, employment, and prices. For more information, contact **Charles Roehrig, PhD**, at 734-302-4600 or charles.roehrig@altarum.org. George Miller, PhD (principal author), Paul Hughes-Cromwick, Ani Turner, and Matt Daly, PhD, contributed to this brief. Media Contact: Ken Schwartz, 202-772-5062, ken.schwartz@altarum.org. For more information, visit <http://www.altarum.org/cshs>.

DETAILED HEALTH SPENDING

Exhibit 5. Monthly National Spending Estimates by Detailed Category

Levels (in billions of dollars)	Nov 2013	Nov 2014	Nov 2015	Nov 2016
GDP	\$17,052.1	\$17,743.2	\$18,231.7	**
National health spending	\$2,931.0	\$3,116.7	\$3,263.6	\$3,427.9
Personal health care	\$2,481.5	\$2,641.1	\$2,767.2	\$2,907.6
Hospital expenditures	\$962.6	\$1,013.9	\$1,046.1	\$1,106.9
Physician and clinical expenditures	\$573.7	\$612.2	\$647.9	\$681.5
Other professional services expenditures	\$79.4	\$86.8	\$90.3	\$96.6
Dental services expenditures	\$111.3	\$115.7	\$120.4	\$124.0
Other health, residential, and personal care expenditures	\$146.0	\$155.8	\$167.0	\$174.2
Home health care expenditures	\$80.0	\$85.0	\$92.1	\$94.9
Nursing care facilities and continuing care retirement communities	\$151.9	\$157.4	\$160.0	\$168.4
Prescription drug expenditures	\$274.4	\$308.2	\$334.1	\$345.9
Durable medical equipment expenditures	\$45.7	\$48.1	\$49.4	\$52.2
Nondurable medical products expenditures	\$56.4	\$58.0	\$59.9	\$62.9
Administration and net cost of health insurance expenditures	\$219.6	\$244.7	\$257.5	\$271.2
Public health activity	\$78.1	\$79.5	\$82.1	\$86.5
Research	\$46.1	\$46.0	\$47.1	\$48.5
Structures and equipment	\$105.8	\$105.4	\$109.7	\$114.2
National health spending share of GDP	17.2%	17.6%	17.9%	**
National health spending share of PGDP	16.7%	17.2%	17.6%	**

Source: Altarum monthly national health spending estimates. The monthly GDP is from Macroeconomic Advisers and Altarum estimates.

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

** Data are not yet available.

Exhibit 6. National Health Spending 12-Month Growth Rates by Detailed Category

Growth Rates	Nov 2014	Nov 2015	Nov 2016
GDP	4.1%	2.8%	**
National health spending	6.3%	4.7%	5.0%
Personal health care	6.4%	4.8%	5.1%
Hospital expenditures	5.3%	3.2%	5.8%
Physician and clinical expenditures	6.7%	5.8%	5.2%
Other professional services expenditures	9.3%	4.0%	7.0%
Dental services expenditures	4.0%	4.0%	3.0%
Other health, residential, and personal care expenditures	6.7%	7.2%	4.3%
Home health care expenditures	6.3%	8.3%	3.1%
Nursing care facilities and continuing care retirement communities	3.6%	1.7%	5.2%
Prescription drug expenditures	12.3%	8.4%	3.5%
Durable medical equipment expenditures	5.3%	2.6%	5.8%
Nondurable medical products expenditures	2.9%	3.2%	5.1%
Administration and net cost of health insurance expenditures	11.4%	5.2%	5.3%
Public health activity	1.9%	3.3%	5.4%
Research	-0.1%	2.4%	2.9%
Structures and equipment	-0.4%	4.1%	4.1%
National health spending minus GDP	2.3%	2.0%	**
National health spending minus PGDP	3.2%	2.1%	**

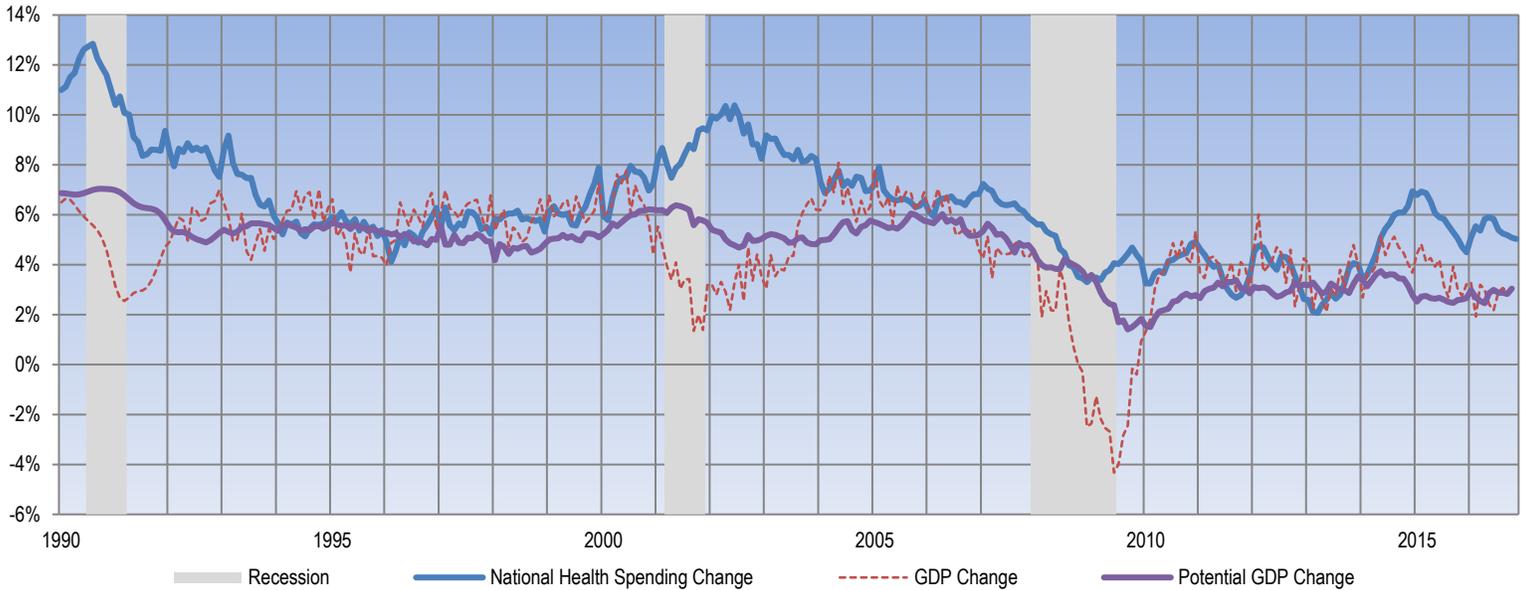
Source: Computed from Exhibit 5.

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

** Data are not yet available.

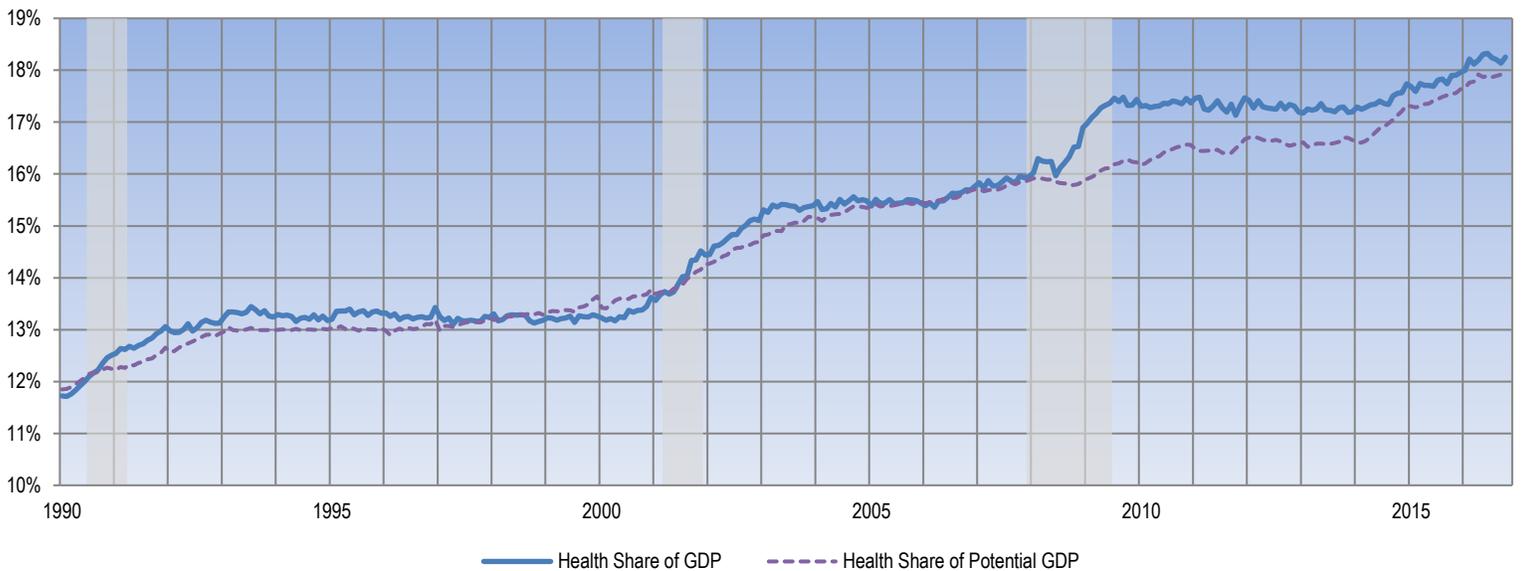
TIME SERIES TRACKER

Exhibit 7. Year-over-Year Percentage Change in Spending and GDP



Source: Altarum monthly national health spending estimates. Monthly GDP is from Macroeconomic Advisers and Altarum estimates.
 Note: Lightly shaded bars denote recession periods.

Exhibit 8. Monthly Health Spending as a Percentage of Monthly GDP



Source: Altarum monthly national health spending estimates. Monthly GDP is from Macroeconomic Advisers and Altarum estimates. 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 (<http://www.bea.gov/iTable/iTable.cfm?ReqID=12&step=1>) and CMS annual NHE estimates (1990–2015) and projections (2016) (<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/index.html>). 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 2015 are based on NHEA actuals and ensure that monthly estimates sum exactly to NHEA annual amounts. The 2015 ratios are used to adjust BEA spending for months in 2016.