Economic Impact of Healthcare: OBBBA

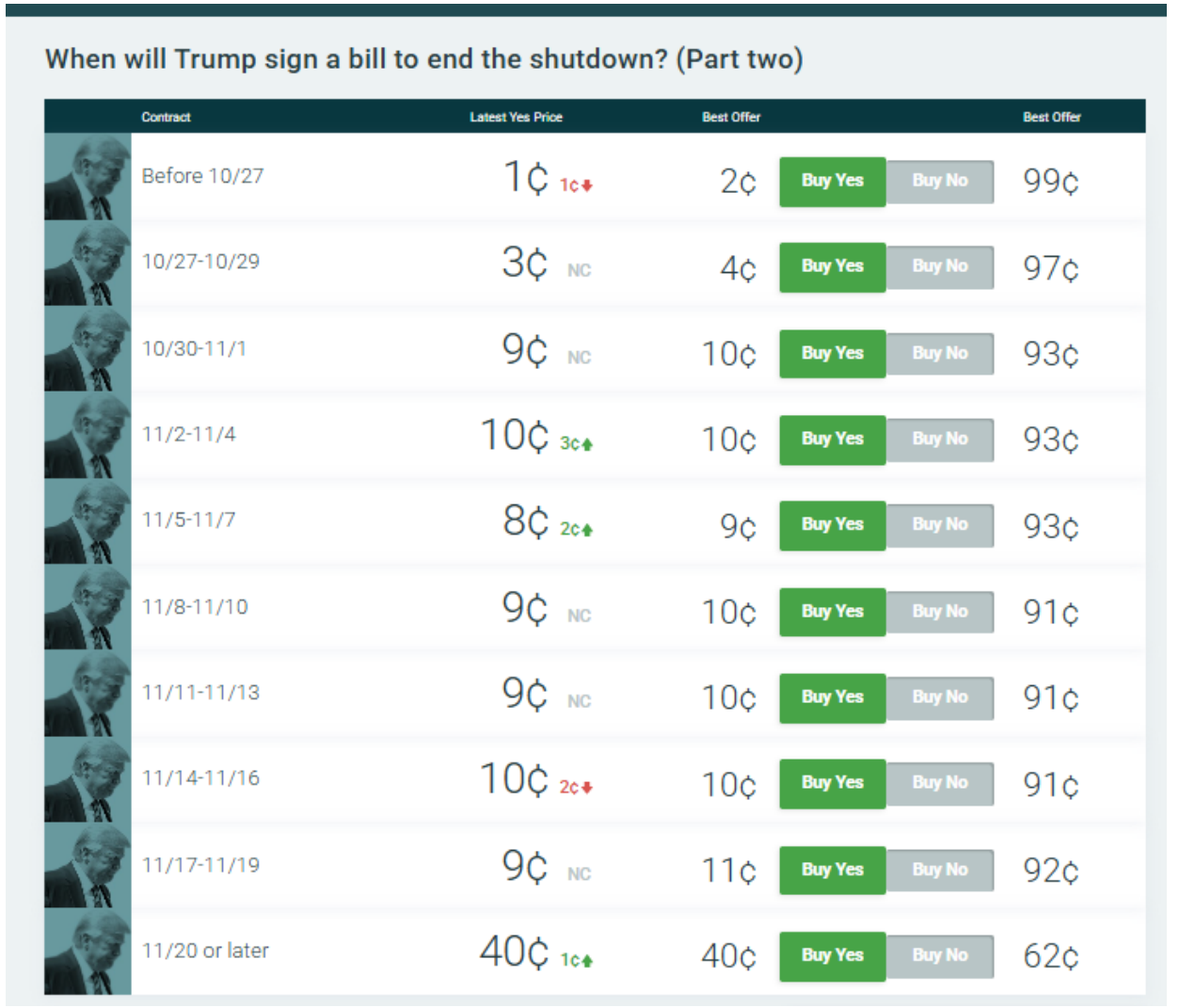
Jim Lee

Adam Carlson

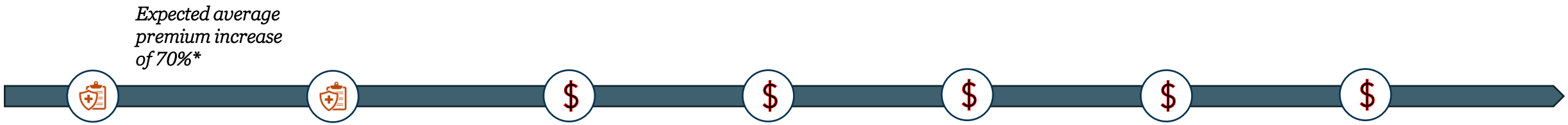
Government Shutdown

- House Republicans passed a “clean CR” in September
  - No plans to return
- Senate Republicans continuing to vote on “clean CRs”
- Congressional Democrats insisting on continuation of Enhanced Premium Tax Credits, cancelling OBBBA cuts

Government Shutdown



OBBBA Timeline



Jan. 1, 2026

Enhanced Premium Tax Credits End

Jan. 1, 2027

Community Engagement Requirements Begin

Twice Annual Eligibility Checks for HMP

Oct. 1, 2027

Tax Limit Drops from 6.0% to 5.5%

Oct. 1, 2028

Tax Limit Drops from 5.5% to 5.0%

SDPs Drop by 10% Until They Reach Medicare

Oct. 1, 2029

Tax Limit Drops from 5.0% to 4.5%

SDPs Drop by 20% Until They Reach Medicare

Oct. 1, 2030

Tax Limit Drops from 4.5% to 4.0%

SDPs Drop by 30% Until They Reach Medicare

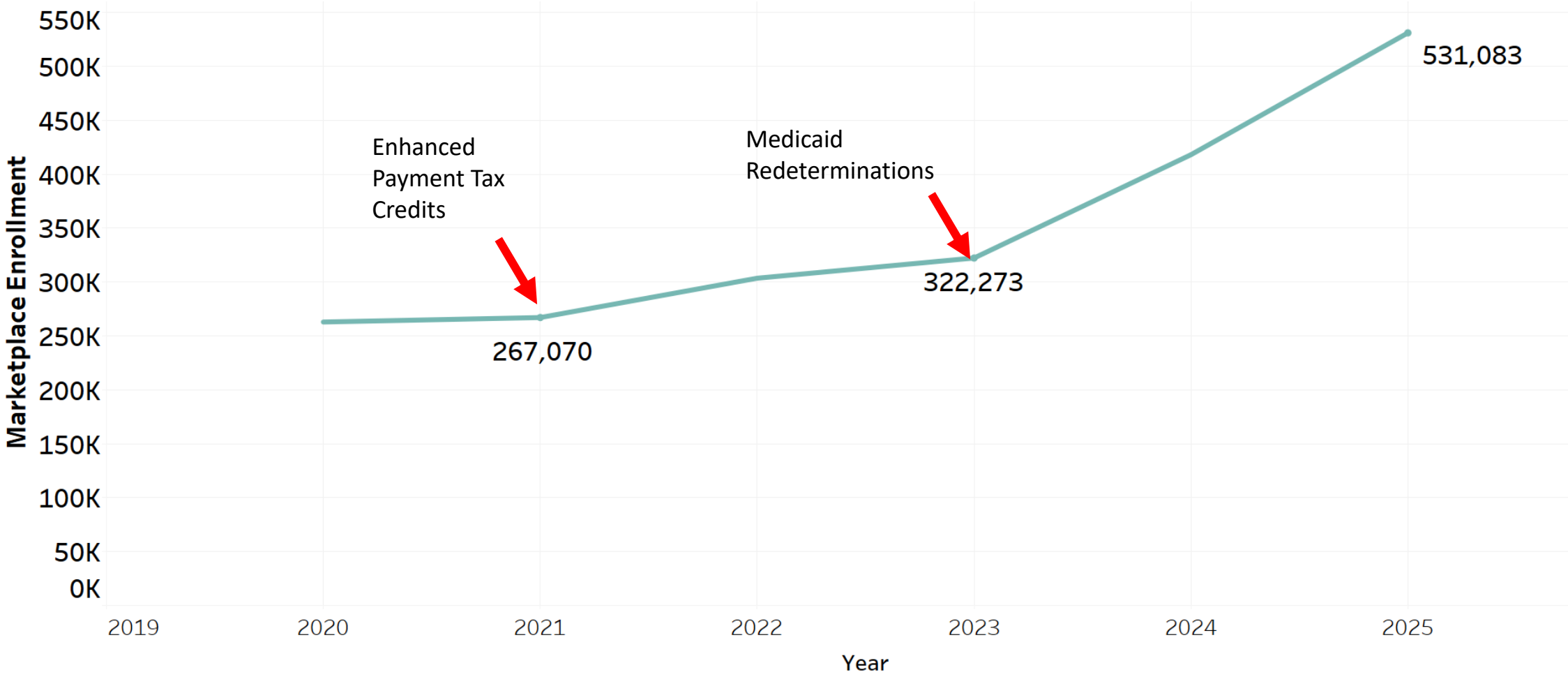
Oct. 1, 2031

Tax Limit Drops from 4.0% to 3.5%

SDPs Drop by 40% Until They Reach Medicare

* Kaiser Family Foundation Analysis

ACA Marketplace Enrollment

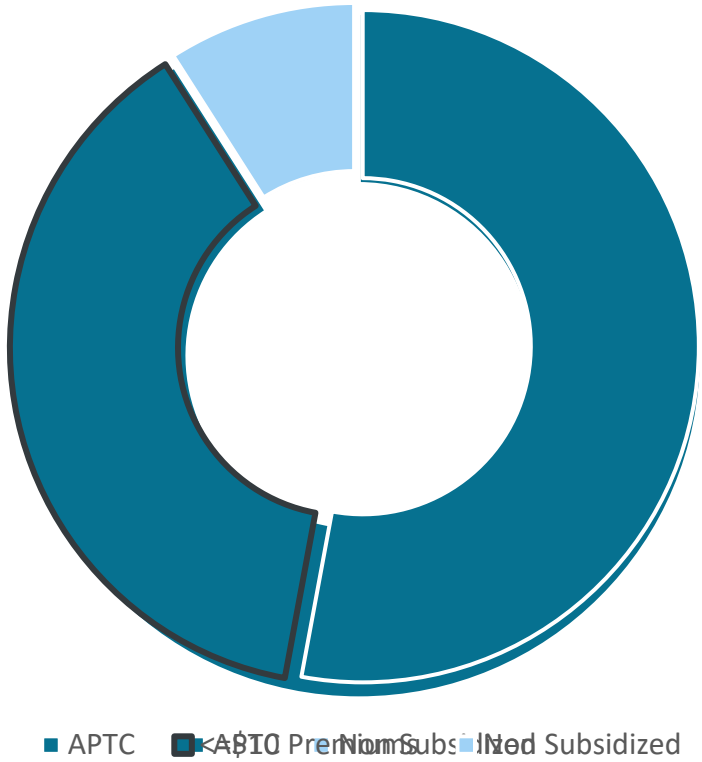


ACA Marketplace Insurance Enrollment

531,000 Enrollees in Michigan

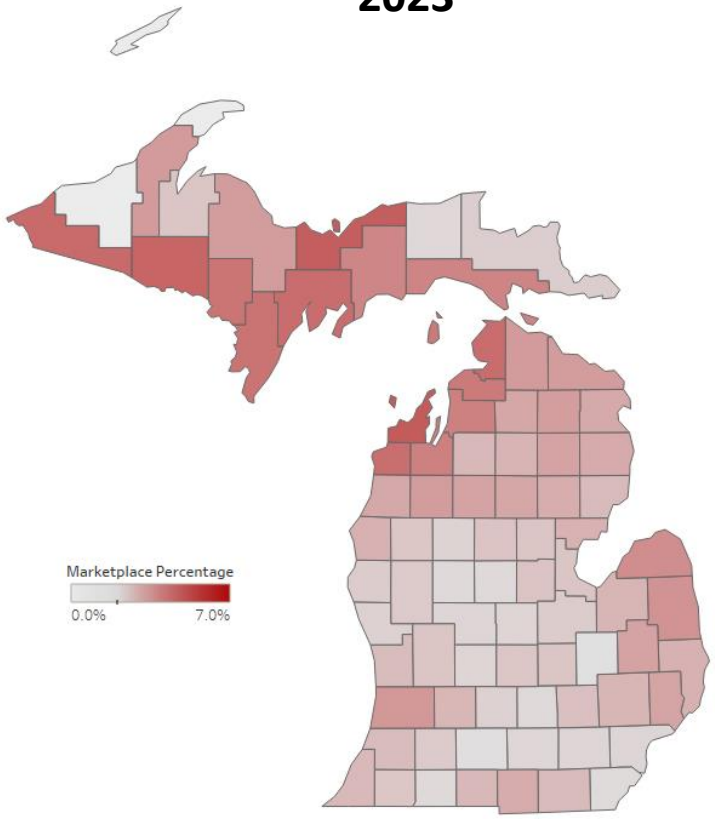
90% receive Tax Credits

41% ≤ $10 Premium

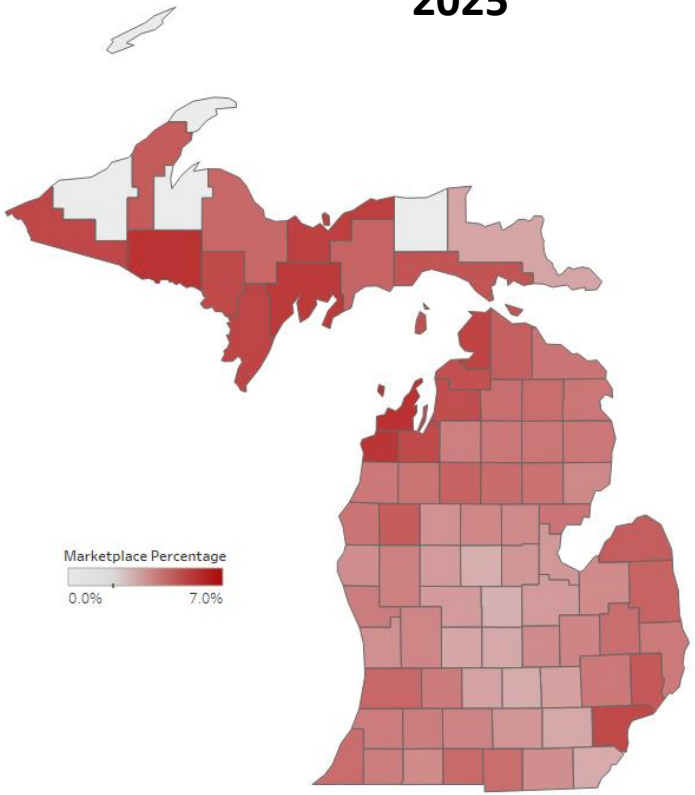


% of Population Using ACA Subsidies

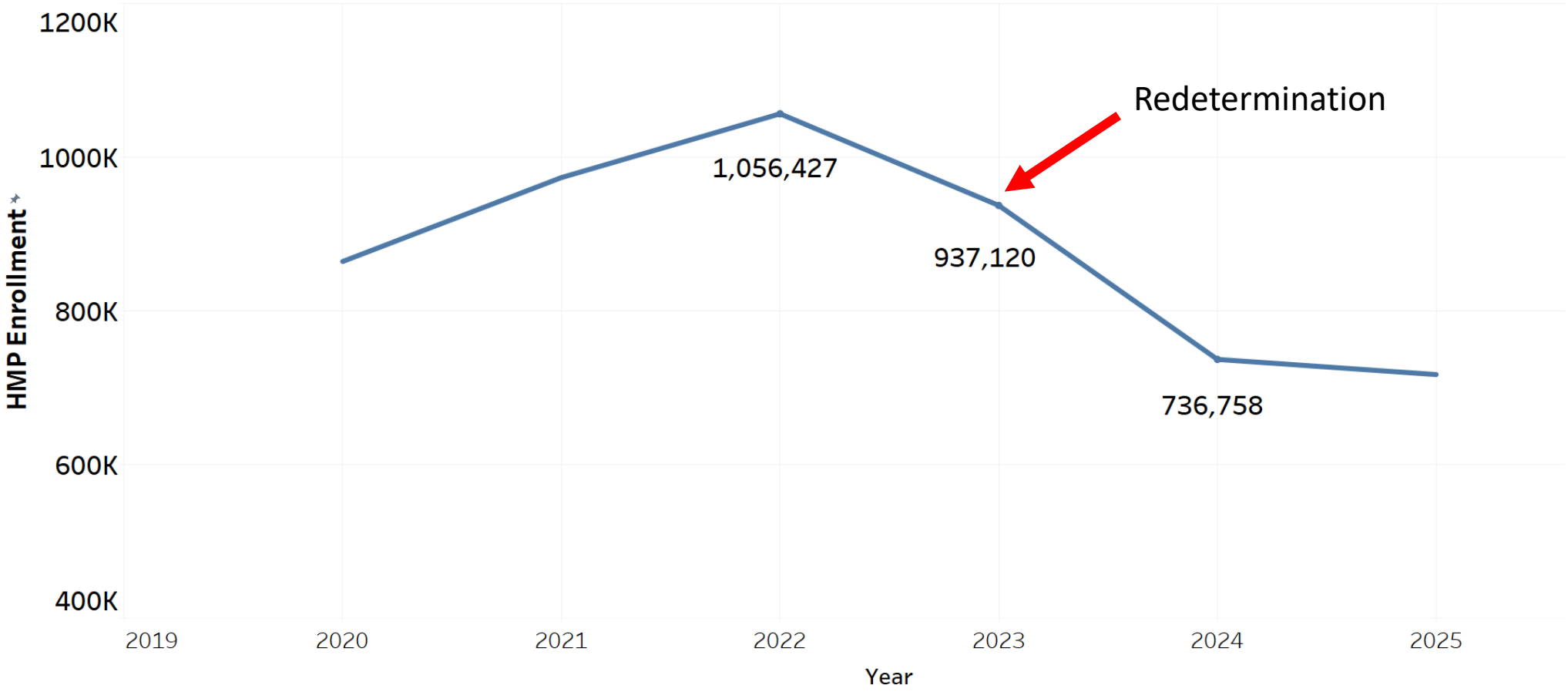
2023



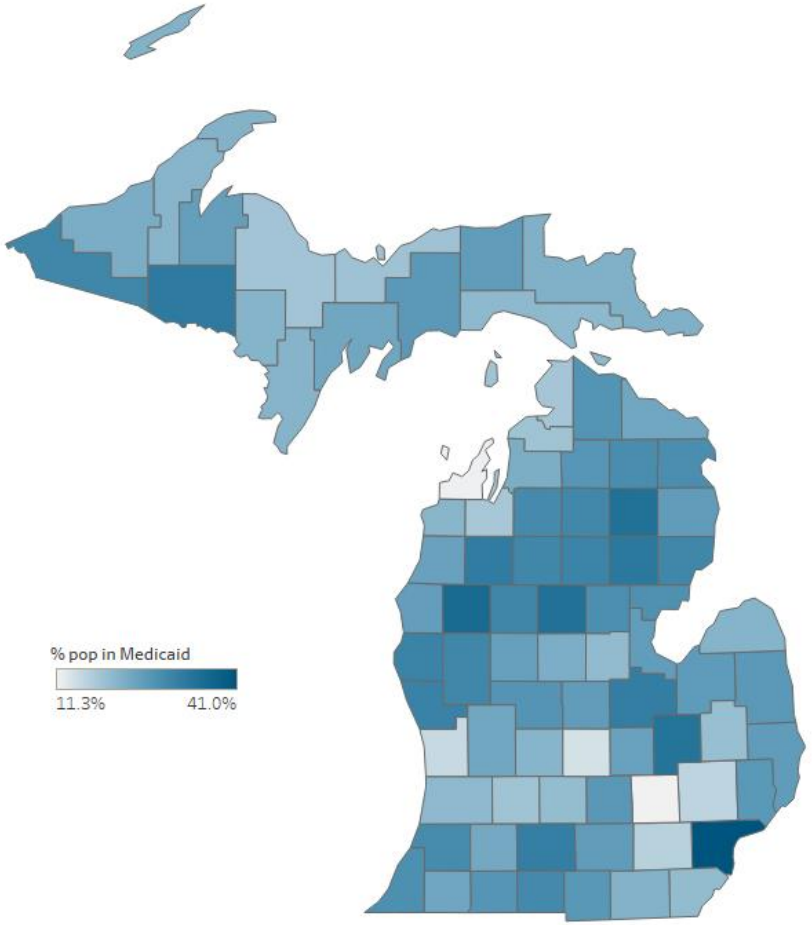
2025



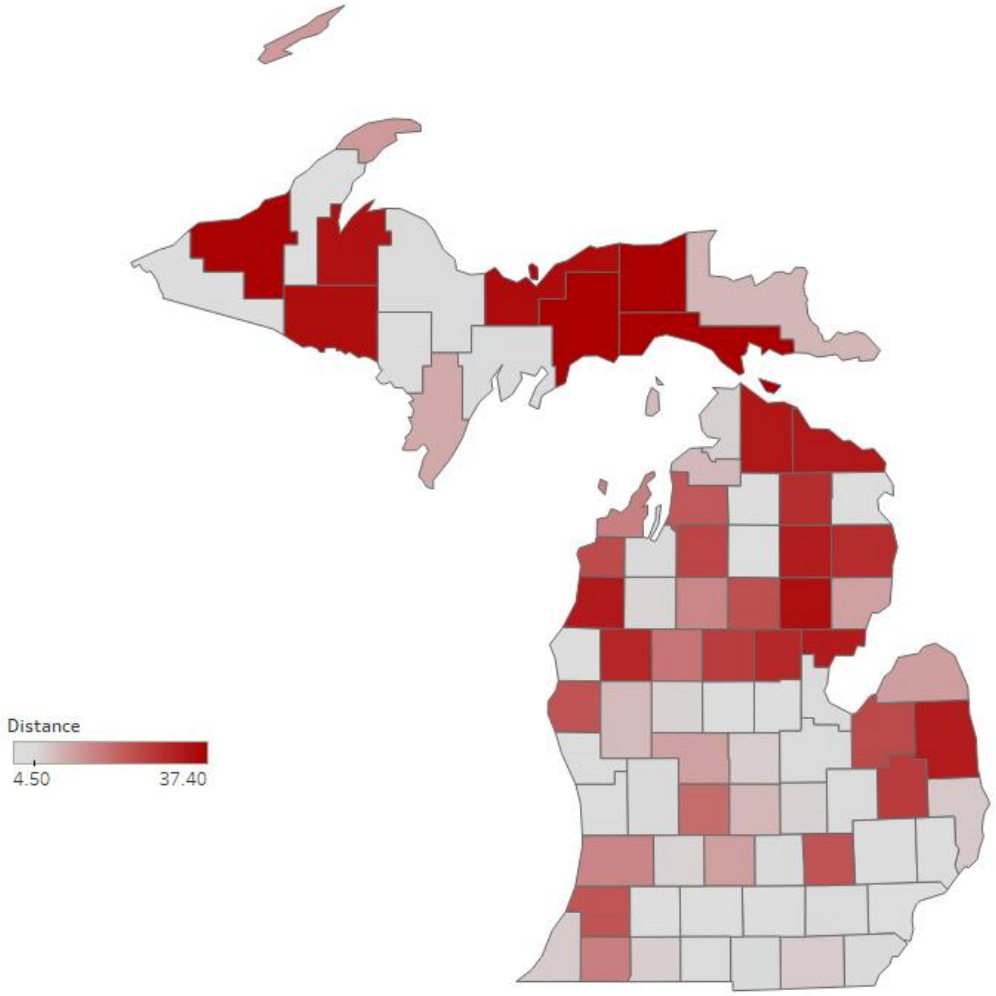
HMP Enrollment



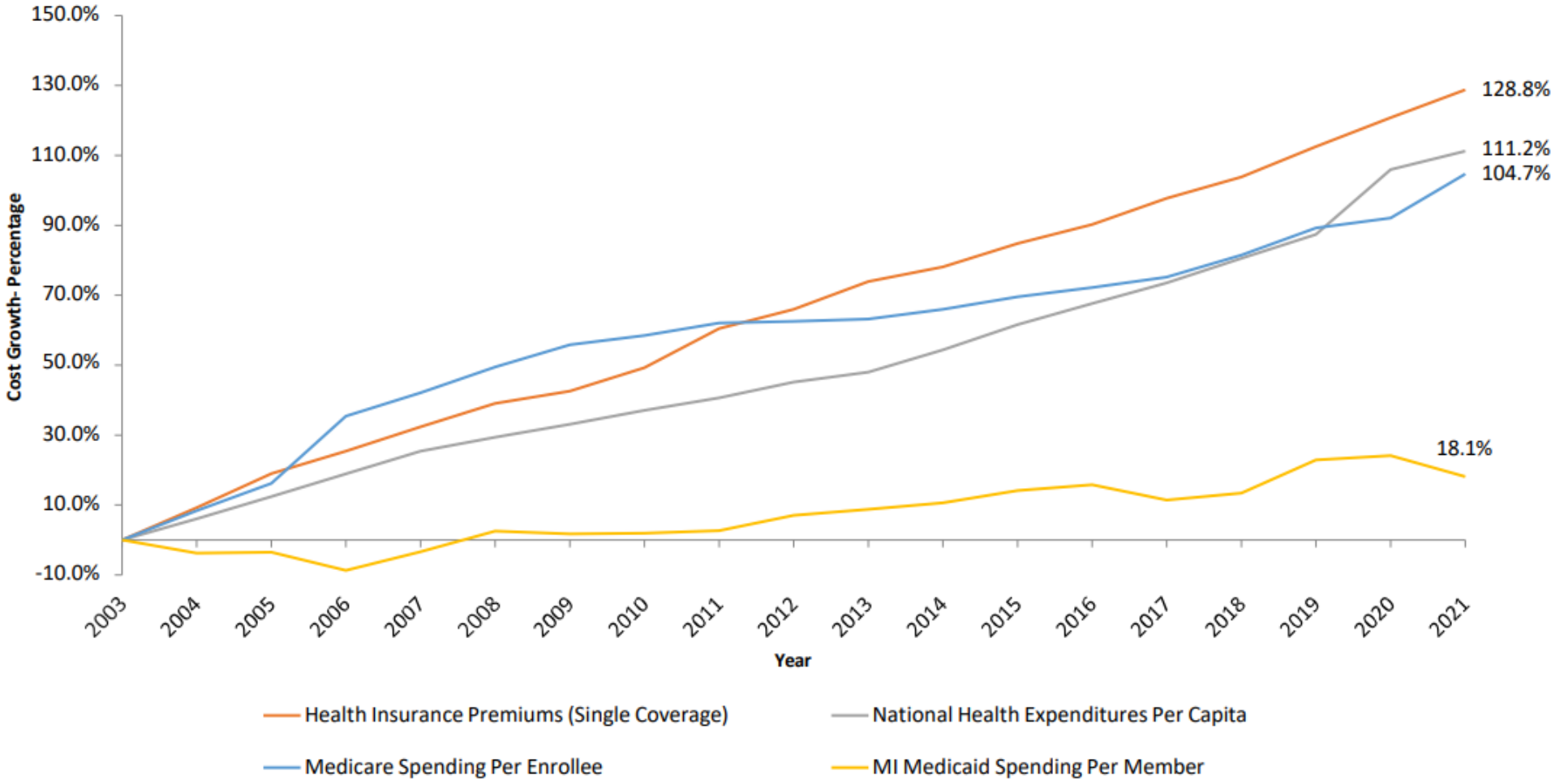
% of Population Enrolled in Medicaid



Distance to Maternity Care



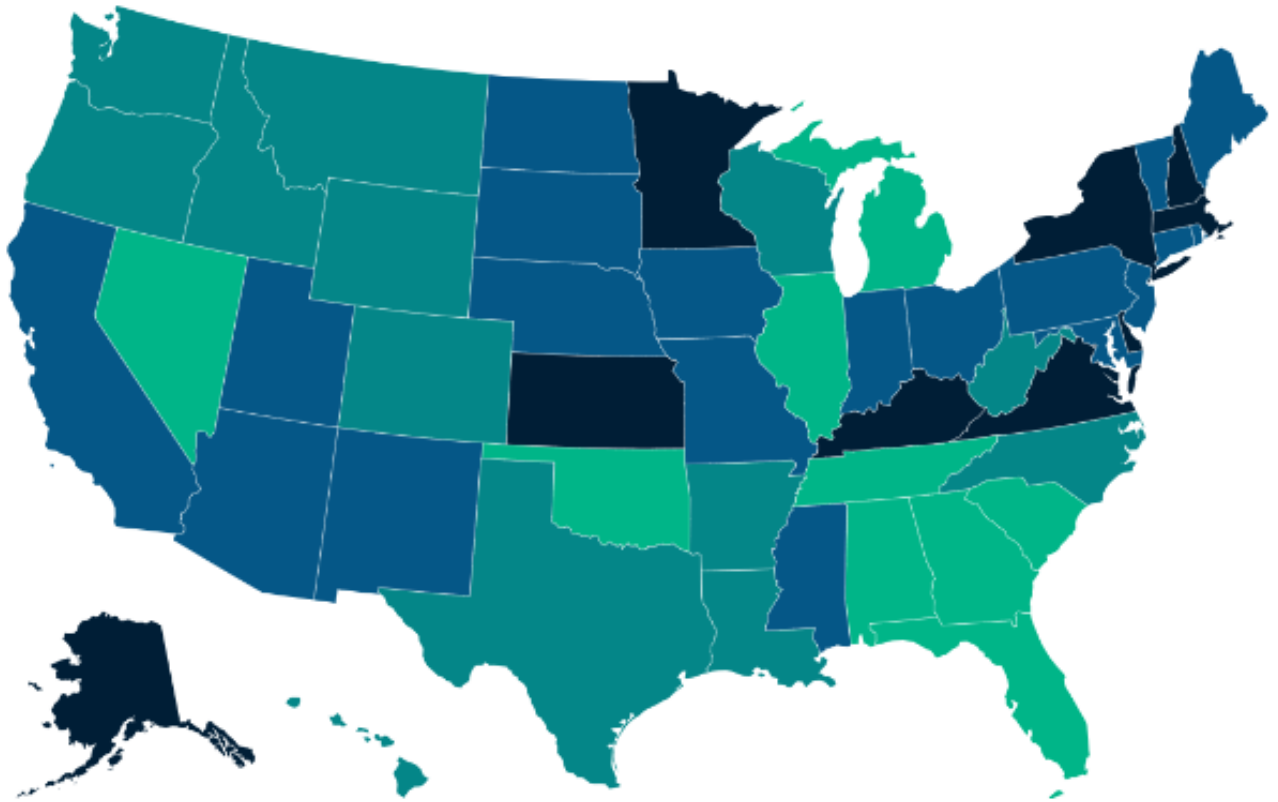
Medicaid is Cost Effective



Michigan Spends Less per Medicaid Enrollee

Medicaid Spending Per Enrollee Ranged From Under $5,000 to Over $12,000

< $6,000 (9 states) $6,000 - $7,500 (13 states) $7,500 - $9,000 (19 states) > $9,000 (10 states)



Note: National per-enrollee spending for full-benefit Medicaid enrollees was $7,593. Data include full-benefit enrollees who were enrolled in at least one month of Medicaid in 2021. They may not have actually used any services during this period, but they are reported as enrolled in the program. Washington D.C. (not reflected in the figure) spent $12,425 per enrollee, the highest across all states. Spending data in 2021 for Mississippi and West Virginia was unusable according to the DQ Atlas, so 2020 data was used instead.

Source: KFF analysis of the T-MSIS Research Identifiable Files, CY 2021 • Get the data • Download PNG

KFF

Healthcare Economic Impact

THE
ECONOMIC IMPACT
OF HEALTHCARE IN MICHIGAN

Statewide

Direct Jobs	592,790
Indirect & Induced Jobs	471,084
Total Jobs	1,063,874
Direct Wages & Salaries	$49,168,701,015
Indirect & Induced Wages and Salaries	$29,939,558,048
Total Wages & Salaries	$79,108,259,063
Federal, State & Local Tax Revenue	$23,575,049,591
Total Value Added by Healthcare	$106,368,742,769

The healthcare sector includes hospitals, offices of healthcare providers (physicians, dentists and other healthcare providers), nursing and residential care facilities (nursing, community care and residential mental health/substance abuse facilities), other ambulatory services (outpatient care centers, medical and diagnostic laboratories, and other ambulatory healthcare services), and home health services. The information presented here was compiled using IMPLAN® cloud software and 2023 data, along with 2023 data from the American Hospital Association Annual Survey (the most recent data available).

TWENTIETH EDITION • SPRING 2025

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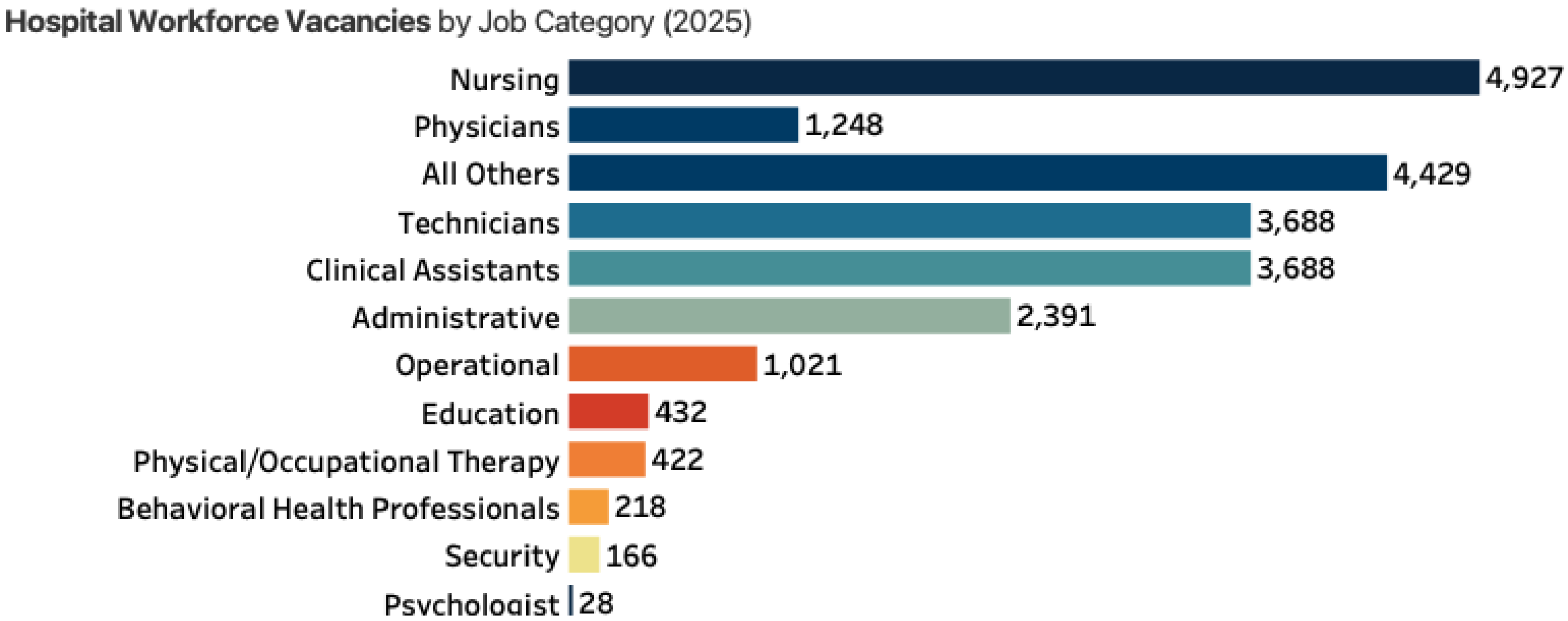
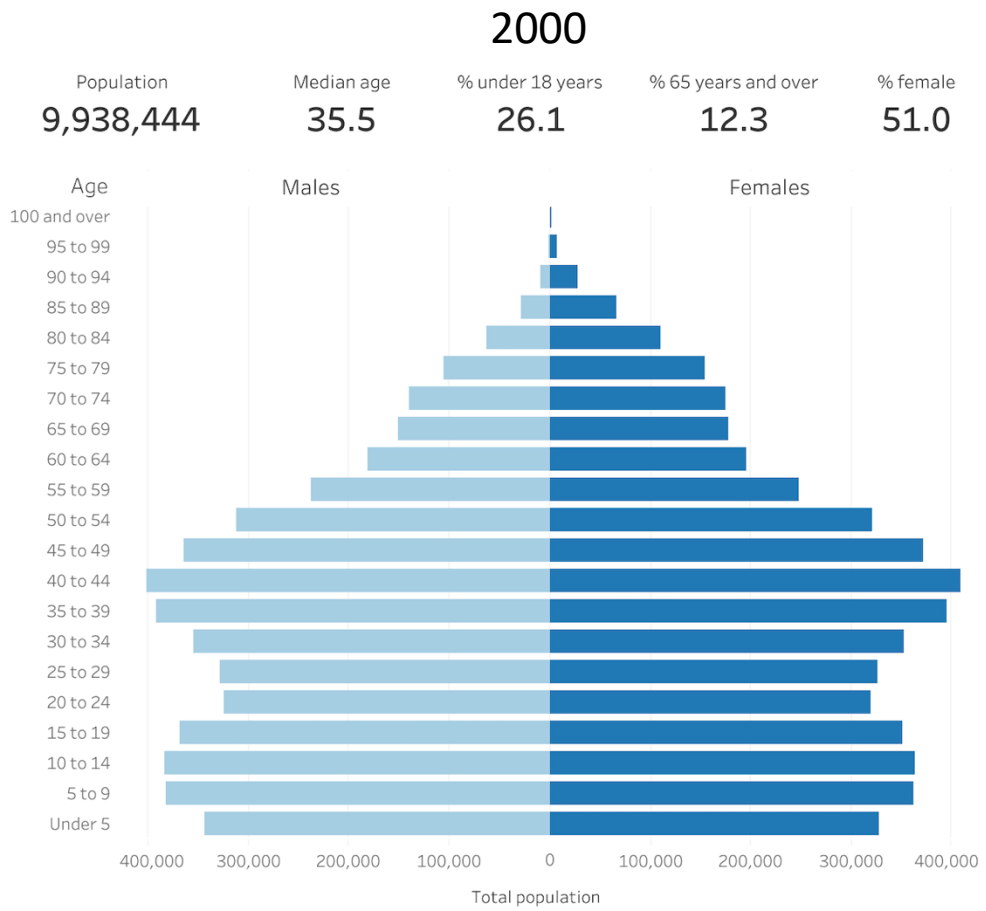
Workforce

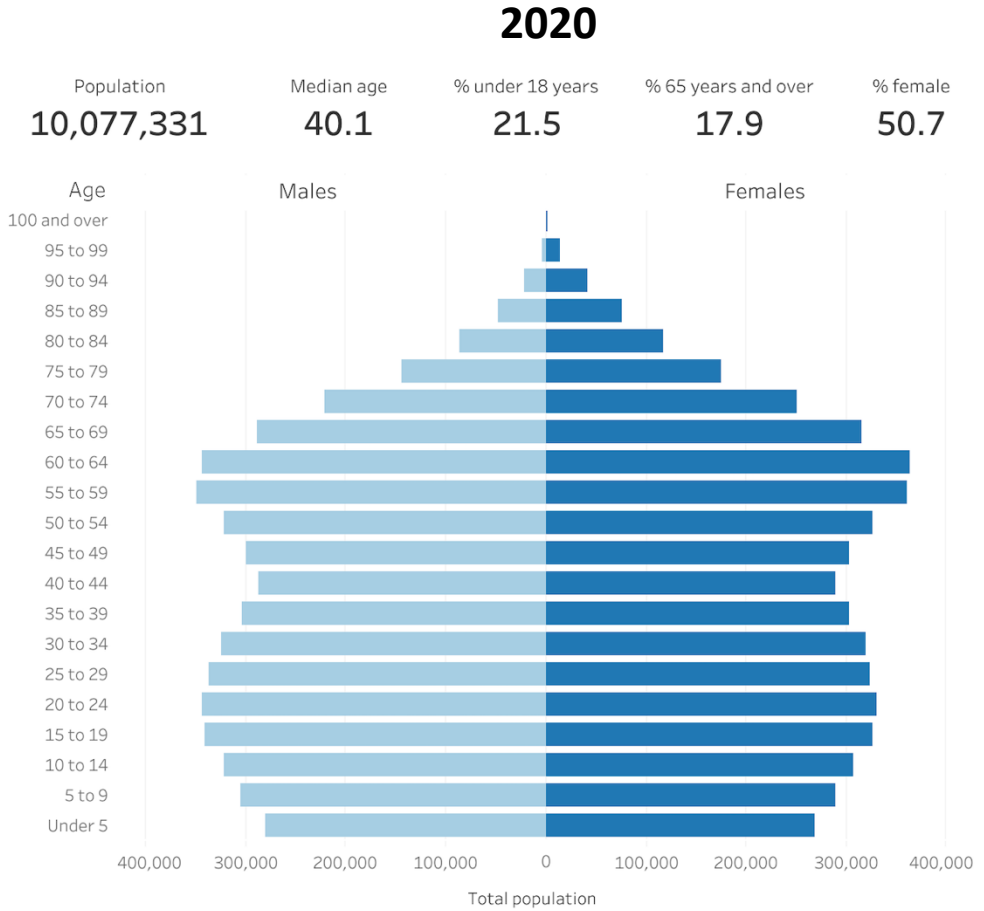

Hospital Workforce Vacancies by Job Category (2025)
Nursing
4,927
Physicians
1,248
All Others
4,429
Technicians
3,688
Clinical Assistants
3,688
Administrative
2,391
Operational
1,021
Education
432
Physical/Occupational Therapy
422
Behavioral Health Professionals
218
Security
166
Psychologist
28

Workforce

	2024	2025
RNs Employed	62,985	64,525
RN Left Org	9,289	9,104
RN Turnover %	14.7%	14.1%
All Open Positions	19,192	23,034
Total Employees Hired	61,576	58,354

Michigan Population Change

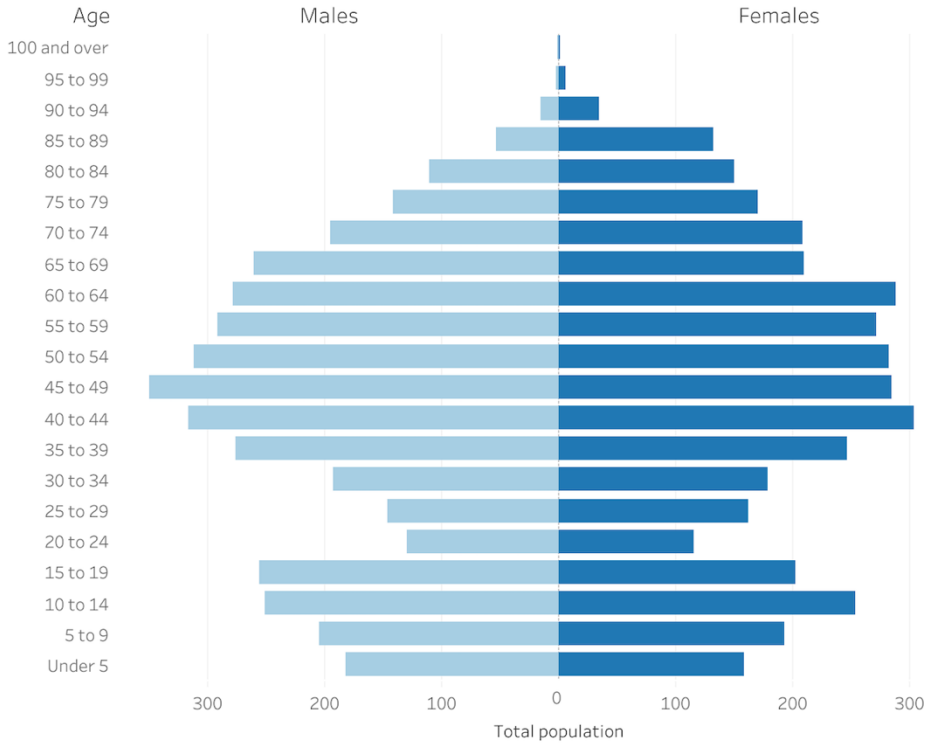


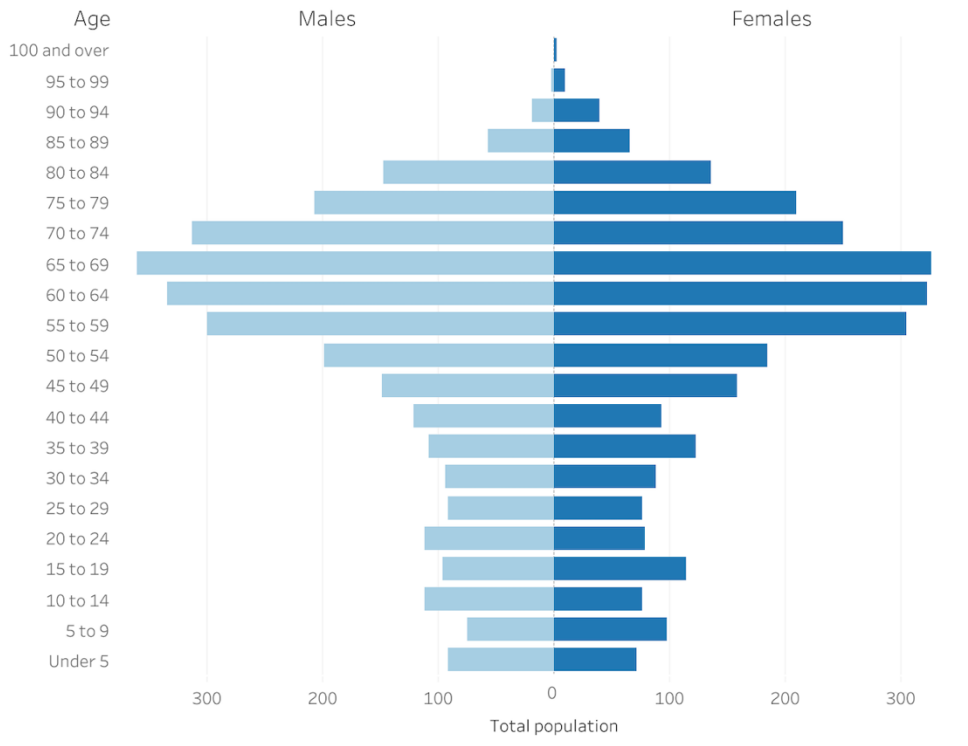


Ontonagon County

2000

Population	Median age	% under 18 years	% 65 years and over	% female
7,818	45.9	20.2	21.6	49.3



2020

Population	Median age	% under 18 years	% 65 years and over	% female
5,816	59.1	11.5	36.9	48.7