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The Economic Contribution of University of Utah Health

University of Utah Health strengthens Utah's economy and helps people live healthier lives through patient care, workforce training, research, and community engagement.

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The Economic Contribution of University of Utah Health

Analysis in Brief

University of Utah Health (U of U Health) drives economic activity in Utah while playing a central role in Utah's health care system. As the state's only academic health system, it provides patient care, workforce training, research, and community engagement that support Utahns' health and the state's economy. The estimates presented in this analysis focus on U of U Health's direct spending on clinical operations, health education, research, and related activities, as well as the associated ripple effects. Direct spending includes operations and capital and construction activity.

U of U Health also generates substantial long-term value by improving population health, strengthening the health care workforce, advancing medical innovation, and supporting community well-being. This report highlights these broader societal benefits but excludes them from the economic contribution estimates.

Key Findings

- **Employment** – U of U Health serves as a major employer in the state, providing nearly 31,000 jobs in FY 2024 across its hospitals and clinics, health-related schools and colleges, and component units. The University of Utah, including U of U Health, employs the second largest workforce in the state. When considering indirect and induced effects, U of U Health supports nearly 70,000 jobs in Utah, representing 2.9% of jobs statewide.
- **Economic Activity** – U of U Health supported $5.6 billion in earnings, $7.6 billion in gross domestic product (GDP), and $13.7 billion in output (total sales) in Utah in FY 2024. This accounts for about 3.6% of earnings, 2.7% of GDP, and 2.7% of total output statewide.
- **Patient Care** – U of U Health provided approximately 2.5 million patient visits in FY 2024, serving patients across Utah and the Mountain West. Its clinical operations improve access to high-quality and specialized care while generating significant economic activity.
- **Education** – As an academic health system, U of U Health plays a central role in preparing Utah's health care workforce. The system trains approximately two-thirds of the state's physicians and educates thousands of students across its health sciences programs each year, supporting the state's growing demand for health professionals and scientists.
- **Research** – U of U Health conducts leading research that advances knowledge and improves health and societal outcomes. It received $492 million in research funding in FY 2024, most of which came from federal sources and brought new resources into Utah. This funding supports high-skilled jobs and contributes to innovation in areas such as cancer, genetics, neuroscience, and population health.
- **Community Engagement** – U of U Health expands access to care and strengthens community health through initiatives that address mental health needs, prevent chronic disease, and serve underserved populations. U of U Health provided $118 million in charitable care in FY 2024.

University of Utah Health Statewide Economic Contribution, FY 2024

Percent of State Total

Note: Includes direct, indirect, and induced effects.
Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Top 10 Employers in Utah, FY 2024

Rank	Company	Industry	Average Employment
1	Intermountain Health	Health Care and Social Assistance	40,000+
2	**University of Utah** (Including Hospital and Component Units)	**Higher Education and Health Care**	**40,000+**
3	State of Utah	State Govt.	20,000-24,999
4	Walmart	Retail Trade	20,000-24,999
5	Brigham Young University	Higher Education	15,000-19,999
6	Hill Air Force Base	Federal Govt.	10,000-14,999
7	Davis County School District	Public Education	10,000-14,999
8	Utah State University	Higher Education	10,000-14,999
9	Smith's Food and Drug Centers	Retail Trade	10,000-14,999
10	Alpine School District	Public Education	7,000-9,999

Note: University of Utah employment includes campus, hospitals and clinics, and component units. Component units include University of Utah Research Foundation (UURF), ARUP Laboratories, Inc. (ARUP), University of Utah Health Plans (UUHP), Community Nursing Services (CNS), and the George S. and Dolores Doré Eccles Endowment for Medical School Excellence (EMSE).
Source: Utah Department of Workforce Services

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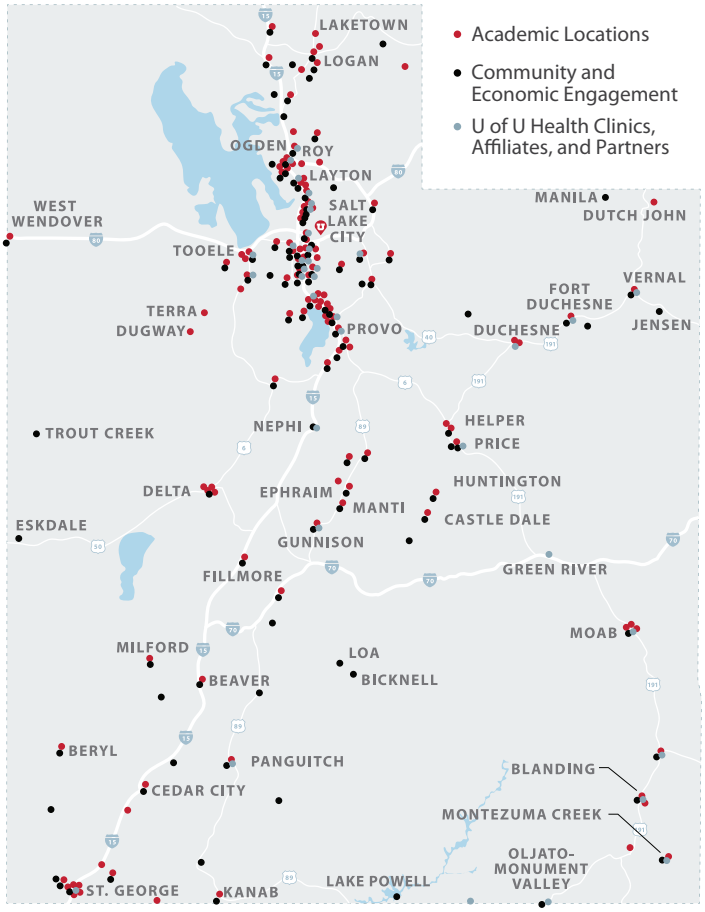
Overview

University of Utah Health (U of U Health) serves as the state's only academic health system, providing patient care, workforce training, research, and community engagement that improve health outcomes across Utah and the Mountain West. Its integrated network of hospitals, clinics, health sciences programs, institutes, and centers supports these interconnected missions. U of U Health's clinical, academic, and outreach presence extends across communities throughout Utah, reaching urban and rural populations (Figure 1).

Beyond its statewide footprint, U of U Health acts as a regional center for the Mountain West, providing specialized and complex care to patients from neighboring states. Its network of clinical partnerships, outreach programs, and telehealth services connect patients across a multi-state region to health care.

While U of U Health's patient care, education, research, and community engagement activities generate significant long-term value by improving population health, strengthening the health care workforce, and advancing innovation, the economic contribution results presented in this report do not reflect these broader societal benefits. The estimates focus solely on the short-term, measurable effects of U of U Health-related spending. This includes activity associated with clinical operations, health sciences education, research activity, and related functions, and does not fully reflect the broader societal benefits described throughout this report.

Figure 1: University of Utah Health Affiliated Facilities, 2025



Source: University of Utah Health

Statement of Methods

To support transparency and clarity, this report defines the scope, direct expenditures, modeling approach, and multipliers used in the analysis. The following statement summarizes these elements, with additional detail provided in Appendix B.[1]

Geographic Scope – This report covers University of Utah Health's economic contribution in the state of Utah.

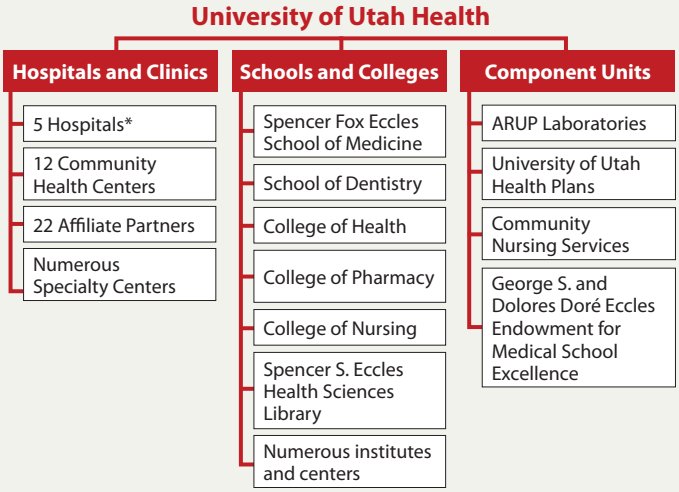
Units of Analysis – This study evaluates economic activity for two major categories:

1. ***Operations:*** Ongoing expenditures for hospitals and clinics, health schools and colleges, and component units (shown separately).
2. ***Capital and Construction:*** Average annual construction and capital expenditures for hospitals and clinics, schools and colleges, and component units in aggregate.

The report distinguishes results between hospitals and clinics, schools and colleges, and component units.

1. ***Hospitals and Clinics:*** This category includes operations, construction, and capital investment associated with patient services at University of Utah Health. Major activities include the operation of U of U Health's hospitals, clinics, and medical group.
2. ***Schools and Colleges:*** This category includes the operations, construction, and capital investments associated with U of U Health education, research, and student services. U of U Health includes five schools and colleges: Spencer Fox Eccles School of Medicine, School of Dentistry, College of Health, College of Pharmacy, and College of Nursing along with the Spencer S. Eccles Health Sciences Library and numerous institutes and centers. The report includes the full operations of U of U Health's schools and colleges, including faculty, staff, and related activities that support education, research, and clinical care throughout the health system.
3. ***Component Units:*** This category includes the operations, construction, and capital investments of four component units: ARUP Laboratories, Inc. (ARUP), University of Utah Health Plans (UUHP), Community Nursing Services (CNS), and the George S. and Dolores Doré Eccles Endowment for Medical School Excellence (EMSE).

Figure 2: U of U Health Structure and Component Parts



*A new hospital and health campus in West Valley City and a new Huntsman Cancer Institute location in Vineyard are currently under construction.
Source: Kem C. Gardner Policy Institute and University of Utah Health

Table 1: University of Utah Health Economic Analysis Direct Expenditures, FY 2024

Dollars in Millions

	Operations		Construction & Capital	Total
	Personnel	Non-Personnel		
Hospitals & Clinics	$1,531	$1,632	$188	$3,351
Schools & Colleges	$1,268	$248	$1	$1,517
Component Units	$482	$1,015	$69	$1,566
Total	**$3,281**	**$2,895**	**$258**	**$6,434**

Note: Some construction and capital spending breakouts unavailable for schools & colleges.
Source: Kem C. Gardner Policy Institute analysis of University of Utah data

Year of Analysis – This study analyzes economic activity produced during U of U Health's 2024 fiscal year (July 1, 2023–June 30, 2024). The report expresses amounts in 2024 dollars.

Model and Multipliers – This study uses the 2023 version of IMPLAN and its associated multipliers for the state of Utah and the Greater Salt Lake Region, the most recent model available at the time of analysis.[2]

Direct Expenditures – U of U Health spent $6.2 billion on operations in FY 2024 with an additional $258 million on construction and capital (5-year average inflation-adjusted to 2024 dollars). This analysis estimates the contribution of this spending in-state and its subsequent effects.

Inflation Adjustment – The analysis adjusts inputs for inflation using the Consumer Price Index (CPI) for All Urban Consumers: All Items in U.S. City Average.

Economic Terms

Economic contribution: Contributions capture the extent of all university spending within the study region (regardless of the origin of funds) and show its reach and magnitude in the region. This study highlights U of U Health's economic contributions from operations, construction, and capital spending. Including all spending enables reasonable comparisons with similar studies from other higher education institutions.

Economic impact: Impact studies measure changes in the size and structure of a region's economy when buyers purchase goods and services within the region with out-of-region or "new" money. This includes money generated outside the region and can also result from "import substitution," where residents would have to import goods and services if an industry did not exist locally. Impact analyses attempt to measure what portion of the contribution would not exist if the institution did not exist.

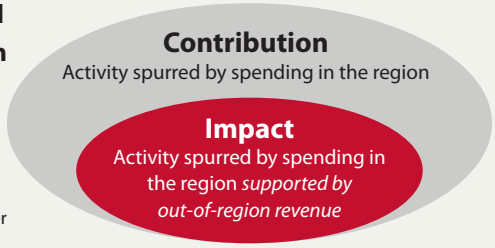
Appendix A provides an economic impact analysis of University of Utah Health operations, capital, and construction spending in addition to nonresident student and visitor spending. Direct spending by the university also generates economic effects that ripple through the economy, creating additional economic activity. The analysis estimates this through:

- **Direct effects:** Generated by spending on wages of University of Utah Health employees and direct purchases from vendors within the study region.
- **Indirect effects:** Produced when U of U Health's local suppliers hire employees and make purchases from other local vendors.
- **Induced effects:** Occur when employees of U of U Health and its suppliers spend their wages in the local economy.

The analysis estimates economic effects through four measures: jobs, earnings, gross domestic product (GDP), and output. These measures capture different aspects of the economy and should not be summed.

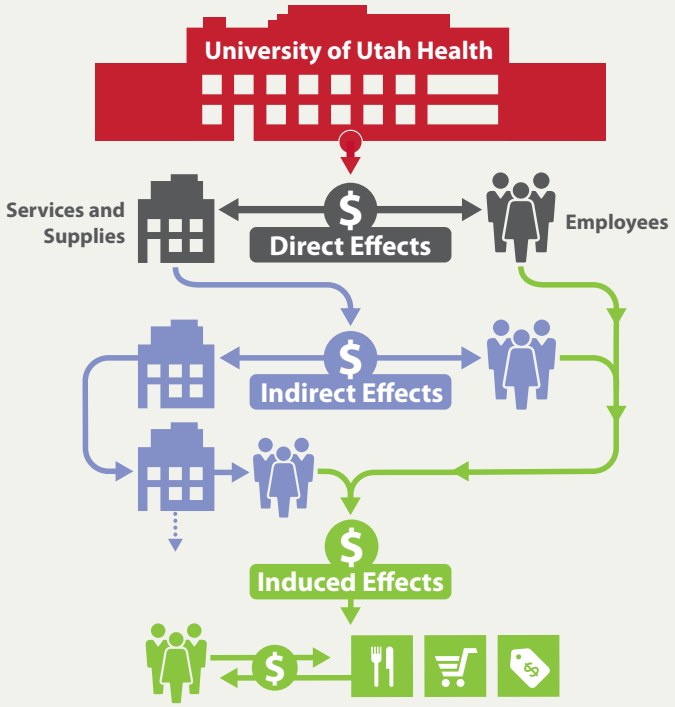
- **Jobs:** The annual average number of full-time and part-time jobs (not workers) counted equally, including wage and salary and self-employed positions.
- **Earnings:** The total of wage and salary disbursements, employer-paid benefits and payroll taxes, and self-employment income.
- **GDP:** The market value of all goods and services produced in Utah capturing only the "value added" by labor and capital, avoiding double-counting intermediate sales. GDP provides the most common measure of total economic activity in a region and equals total output less the value of intermediate inputs purchased to produce that output.
- **Output:** The gross value of all transactions in a region's economy, representing total industry sales and reflecting both final purchases and intermediate inputs resulting in double-counting of some intermediate purchases.

Figure 4: Visual Representation of Economic Contribution and Impact



Source: Kem C. Gardner Policy Institute

Figure 5: Economic Flow of Direct, Indirect, and Induced Economic Effects



Source: Kem C. Gardner Policy Institute

Economic Analysis

U of U Health serves as a major employer in the state, providing nearly 31,000 jobs in FY 2024 across its hospitals and clinics, health-related schools and colleges, and component units. The University of Utah, including U of U Health, employs the second largest workforce in the state (Table 2). Considered separately, U of U Health would remain the second largest employer in Utah.

U of U Health's economic contribution includes two main drivers: operations and capital and construction expenditures. Their FY 2024 contributions totaled 68,480 direct and indirect jobs, $5.6 billion in earnings, $7.6 billion in gross domestic product (GDP), and $13.7 billion in output in Utah (Table 3, Figure 3).

Operational Expenditures

Operational spending accounts for more than 90% of U of U Health's economic contribution. U of U Health spent $6.2 billion in FY 2024—approximately $3.3 billion on payroll and $2.9 billion on goods and services—to support a wide range of operational activities including patient care, public service, research, and health-related instruction and student services. This spending supports 66,583 jobs, $5.5 billion in earnings, $7.3 billion in GDP, and $13.3 billion in output statewide (Table 4).

Capital and Construction Expenditures

U of U Health's construction and capital spending also drive economic contribution. Examples of major construction projects in the last five years include the Spencer Fox Eccles School of Medicine, the James Levoy Sorenson Center for Medical Innovation, and the Kathryn F. Kirk Center for Comprehensive Cancer Care & Women's Cancers at Huntsman Cancer Institute. U of U Health's capital investments include laboratory equipment, medical equipment, computers and electronics, and other equipment and supplies. Because construction projects and capital purchases often extend over multiple years and vary annually, the analysis uses a 5-year average of annual expenditures (FY 2020 to FY 2024).

U of U Health's average annual spending on capital and construction totaled an estimated $257 million, with $56 million spent on capital investments and $201 million spent on construction. This spending supports 1,896 jobs, $137 million in earnings, $251 million in GDP, and $421 million in output (Table 5).

Student and Visitor Spending

U of U Health's student and visitor spending also contribute to Utah's economy. A portion of students enrolled in its schools and colleges come from out of state, bringing new dollars into the region as they spend money on housing, groceries, dining,

Table 2: Top 10 Employers in Utah, FY 2024

Rank	Company	Industry	Average Employment
1	Intermountain Health	Health Care and Social Assistance	40,000+
2	**University of Utah** (Including Hospital and Component Units)	**Higher Education and Health Care**	**40,000+**
3	State of Utah	State Govt.	20,000-24,999
4	Walmart	Retail Trade	20,000-24,999
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7	Davis County School District	Public Education	10,000-14,999
8	Utah State University	Higher Education	10,000-14,999
9	Smith's Food and Drug Centers	Retail Trade	10,000-14,999
10	Alpine School District	Public Education	7,000-9,999

Note: University of Utah employment includes campus, hospitals and clinics, and component units. Component units include University of Utah Research Foundation (UURF), ARUP Laboratories, Inc. (ARUP), University of Utah Health Plans (UUHP), Community Nursing Services (CNS), and the George S. and Dolores Doré Eccles Endowment for Medical School Excellence (EMSE).
Source: Utah Department of Workforce Services

Figure 3: University of Utah Health Statewide Economic Contribution, FY 2024

Percent of State Total

Note: Includes direct, indirect, and induced effects.
Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Table 3: University of Utah Health Statewide Economic Contribution, FY 2024

Dollars in Millions

	Jobs	Earnings	GDP	Output
Hospitals & Clinics	**36,066**	**$2,767**	**$3,743**	**$6,993**
Direct	15,733	$1,531	$1,531	$3,163
Indirect & Induced	20,333	$1,236	$2,212	$3,830
Schools & Colleges	**16,710**	**$1,713**	**$2,129**	**$2,957**
Direct	9,196	$1,268	$1,268	$1,516
Indirect & Induced	7,514	$445	$861	$1,441
Component Units	**15,703**	**$1,153**	**$1,726**	**$3,759**
Direct	5,720	$482	$482	$1,497
Indirect & Induced	9,983	$671	$1,244	$2,262
Total	**68,480**	**$5,633**	**$7,598**	**$13,709**
Direct	30,649	$3,281	$3,281	$6,177
Indirect & Induced	37,831	$2,352	$4,317	$7,532

Note: The indirect and induced effects include jobs, earnings, and GDP associated with direct spending on construction and capital.
Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Table 4: University of Utah Health Operations Spending Statewide Economic Contribution, FY 2024

Dollars in Millions

	Jobs	Earnings	GDP	Output
Hospitals & Clinics	**34,685**	**$2,668**	**$3,563**	**$6,692**
Direct	15,733	$1,531	$1,531	$3,163
Indirect & Induced	18,952	$1,137	$2,032	$3,529
Schools & Colleges	**16,702**	**$1,712**	**$2,128**	**$2,955**
Direct	9,196	$1,268	$1,268	$1,516
Indirect & Induced	7,506	$444	$860	$1,439
Component Units	**15,196**	**$1,116**	**$1,657**	**$3,642**
Direct	5,720	$483	$483	$1,498
Indirect & Induced	9,476	$633	$1,174	$2,144
Total	**66,583**	**$5,496**	**$7,347**	**$13,288**
Direct	30,649	$3,281	$3,281	$6,177
Indirect & Induced	35,934	$2,215	$4,066	$7,111

Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Table 5: University of Utah Health Construction and Capital Spending Statewide Economic Contribution, FY 2024

Dollars in Millions

	Jobs	Earnings	GDP	Output
Total	**1,896**	**$137**	**$251**	**$421**

Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

transportation, entertainment, and recreation.

Out-of-state patients and their visitors further add to this impact. U of U Health serves as a regional center providing care to patients from across the Mountain West, including Idaho, Wyoming, Montana, and parts of Colorado and Nevada. These patients and their accompanying visitors generate additional economic activity through spending on lodging, food, and other local goods and services. Visitors to out-of-state students contribute in similar ways.

Because the economic contribution estimates in this report do not include student or visitor spending, the estimates likely understate the total impact of U of U Health on Utah's economy.

Societal Benefits

University of Utah Health generates societal benefits that extend beyond its measurable economic contributions. Central to its mission, these impacts reflect U of U Health's role as a large health care system and the state's only academic medical center. While not exhaustive, this section highlights how U of U Health benefits society through four key areas: expanding access to care, training the health care workforce, advancing research and innovation, and strengthening community health and well-being.

Expanding Access to Care

University of Utah Health plays a critical role in expanding access to high-quality health care across Utah and the broader Mountain West. As an academic health center, U of U Health provides comprehensive and specialized care not widely available elsewhere in the region. The system reduces geographic, financial, and social barriers to care through investments in facilities, technology, and community-based care.

Regional Care

U of U Health serves patients from across Utah and neighboring states, including Idaho, Wyoming, Montana, and parts of Colorado and Nevada. With approximately 2.5 million total patient visits in FY 2024, the system serves many Utah residents and functions as a regional referral hub for complex and specialized care. This is particularly important in the Mountain West, where access to advanced medical services can be limited by distance and provider availability.[3]

University of Utah Health Vision, Mission, and Values

Vision:

A patient-centered health care organization distinguished by collaboration, excellence, leadership, and respect.

Mission:

University of Utah Health serves the people of Utah and beyond by continually improving individual and community health and quality of life. This is achieved through excellence in patient care, education, and research. Each is vital to our mission, and each makes the others stronger.

- We provide compassionate care without compromise.
- We educate scientists and health care professionals for the future.
- We engage in research to advance knowledge and well-being.

Values:

- Compassion
- Collaboration
- Innovation
- Responsibility
- Integrity
- Quality
- Trust

Underserved Community Access

U of U Health expands access to underserved areas through new facilities and targeted investments. The development of a new hospital and health campus in West Valley City will increase access to comprehensive care in one of Utah's most underserved communities. In addition, community clinics such as South Main Clinic utilize a multidisciplinary care team to provide primary, pediatric, dental, and behavioral health services to underserved populations as well as partner with local organizations to provide social supports and resources. U of U Health also opened West High School Clinic in 2024, providing students ages 12 to 19 with a range of health care services onsite, which reduces the need to miss classes for appointments.[4]

Telehealth and Innovative Care Delivery

Telehealth and virtual care services extend access to patients regardless of location. U of U Health's virtual urgent care platform allows patients to connect with providers seven days a week for non-emergency conditions, reducing the need for travel and improving timely access to care.[5] These services prove particularly valuable for rural communities and individuals with limited mobility or transportation options.

Charitable Care and Financial Assistance

U of U Health works to reduce financial barriers by providing financial assistance and uncompensated care to those in need. In FY 2024, the system delivered approximately $118 million in uncompensated care. These programs support access for low-income and uninsured patients while reinforcing U of U Health's mission to serve all Utahns.[6]

Training Utah's Health Workforce

U of U Health educates and trains physicians, nurses, pharmacists, dentists, and other health professionals who support care delivery across the state. Through classroom instruction, clinical training, research experiences, and hands-on learning in real-world settings, U of U Health prepares graduates to meet current and future health care needs in both urban and rural communities while also developing the next generation of scientists and researchers who contribute to innovation and discovery.

Table 6: U of U Health Graduates, 2024

School or College	Graduates
College of Health	543
School of Medicine	389
College of Nursing	336
College of Pharmacy	57
School of Dentistry	51
Total	**1,376**

Source: University of Utah 2025 Health System Summary

Health Professional Education

University of Utah Health includes five schools and colleges—the College of Health, College of Nursing, College of Pharmacy, Spencer Fox Eccles School of Medicine, and School of Dentistry. Together, these programs enrolled 6,360 students in health-related degree and certificate programs and awarded 1,376 degrees in 2024 (Table 6). These graduates enter a range of health and scientific professions.

Graduate Medical Education and Advanced Training

Graduate medical education and advanced training represent an important component of U of U Health's mission. Medical students, residents, fellows, and postdoctoral researchers receive hands-on training in clinical, academic, and research settings throughout Utah. Clinical trainees develop practical skills through supervised experiences in hospitals, clinics, and community-based settings while contributing to patient care. Training in diverse environments, including rural and underserved communities, exposes future providers to a wide range of patient needs and care settings. Postdoctoral researchers work alongside faculty mentors to advance scientific discovery, develop independent research programs, and prepare for leadership roles in academia, industry, and health sciences research. Together, these training experiences help develop the next generation of health care professionals and researchers.

Statewide Workforce Needs

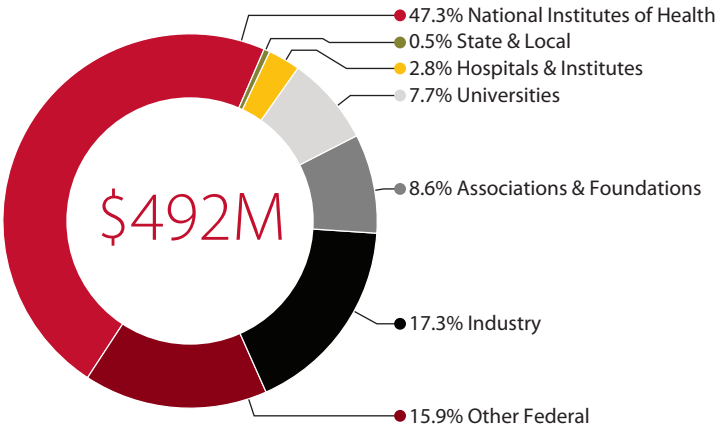
U of U Health trains approximately two-thirds of Utah's physicians, making it a key pipeline for the state's health care workforce. The university also prepares many of the state's nurses, pharmacists, therapists, and other health professionals for clinical work.[7] Health care remains one of the fastest-growing industries in Utah and the nation, with demand expected to rise as the population grows and ages. The Spencer Fox Eccles School of Medicine recently expanded its statewide training capacity through its St. George campus, providing additional opportunities for medical students to train in southern Utah and strengthening the pipeline of future physicians serving the region.

By training residents and fellows in Utah, U of U Health helps retain physicians in the state and supports access to care across its communities.[8] Training experiences in rural and community-based settings further expose providers to underserved populations and can increase the likelihood that they practice in these areas.[9]

Advancing Research and Innovation

University of Utah Health advances research and innovation that improves patient outcomes, informs clinical practice, and strengthens Utah's position as a leader in health sciences. As an academic health system, it integrates research with patient care, accelerating the translation of discoveries into clinical practice. This work advances knowledge, innovates new treatments and technologies, leads to new products and businesses, and contributes to better health and societal outcomes.

Figure 6: University of Utah Health Research Funding, FY 2024



Source: University of Utah Health

Basic, Translational, and Clinical Research

University of Utah Health received $492 million in research funding in FY 2024. Most of this funding comes from federal sources, bringing new money to Utah's economy. Research at U of U Health spans a wide range of fields, including cancer, genetics, biochemistry, neuroscience, cardiovascular disease, population health, and precision medicine. Faculty and researchers conduct basic, translational, and clinical research, working to better understand disease and develop more effective methods of diagnosis, treatment, and prevention.[10] By connecting scientific discovery with patient care, U of U Health helps ensure that new knowledge leads to tangible improvements in health outcomes.

Research Institutes and Centers

U of U Health supports more than 25 research institutes and centers. These centers bring together researchers, clinicians, and community partners to address complex health challenges and translate research into improved patient care and public health outcomes.[11]

Huntsman Cancer Institute, for example, serves as Utah's official cancer center and the only National Cancer Institute–designated Comprehensive Cancer Center in the Mountain West. Huntsman Cancer Institute leads the nation in inherited cancer gene discovery and supports more than 300 active clinical trials. These trials provide patients with access to newly discovered treatments and contribute to advancements in cancer prevention, diagnosis, and care.[12]

Health Data and Innovation

U of U Health leverages unique data resources and advanced technologies to support health care innovation. The Utah Population Database links multi-generational demographic and health data from more than 11 million individuals, enabling researchers to study genetic, environmental, and population health trends.[13] These capabilities support breakthroughs in disease discovery and prevention, personalized approaches to treatment, and understanding effects of environment on health.

Strengthening Community Health and Well-Being

University of Utah Health supports community health and well-being across Utah through outreach, partnerships, and public health initiatives that extend beyond traditional clinical care. These efforts focus on prevention, early intervention, and addressing the broader social and environmental factors that influence health. By working with communities across the state, U of U Health helps improve health outcomes, reduce disparities, and strengthen quality of life for Utahns.

Initiatives and Partnerships

U of U Health collaborates with local and state partners, nonprofit organizations, and community groups to address health challenges. These efforts include initiatives focused on mental health, substance use, chronic disease prevention, and access to timely care. Through these partnerships, U of U Health supports coordinated, community-based approaches to improving population health and addressing the causes of poor health outcomes.[14]

Mental Health Care

The Huntsman Mental Health Institute plays a leading role in advancing mental health care, research, and community-based services. For example, the institute supports initiatives that expand access to mental health services, strengthen crisis response systems, and promote early intervention and awareness.[15]

Huntsman Mental Health Institute also provides counseling through the SafeUT platform, offering real-time mental health support to students, parents, and school staff across Utah's K–12 schools and higher education institutions. Additional platforms extend similar support to frontline workers, including health care providers, law enforcement, and members of the Utah National Guard and their families. These efforts help address growing mental health needs while strengthening the state's capacity to respond to behavioral health challenges.[16]

Outreach and Preventive Care

U of U Health extends care beyond traditional clinical settings through outreach programs designed to reach underserved populations. The Wellness Bus provides preventive screenings, health education, and referrals to social services in communities with limited access to care. Similarly, Huntsman Cancer Institute's mobile screening and outreach programs bring cancer prevention, screening, and education services directly to communities across Utah. These efforts support the early detection and management of chronic disease, improve long-term health outcomes, and reduce strain on the broader health system.[17]

Appendix A: Impact Analysis

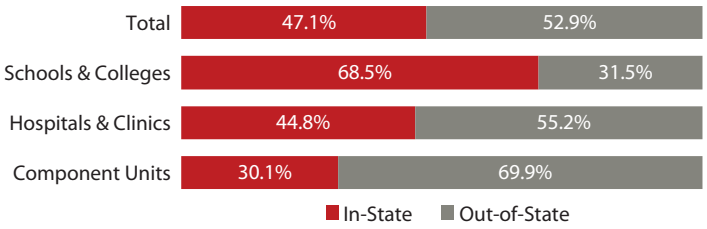
Many university "economic impact studies" capture activity beyond a true economic impact, incorrectly labeling economic contributions as "impacts."[18] Because of this, the results of the economic contribution analysis presented in the main body of the report are likely best suited for comparison with other studies. The economic impact analysis results presented here in Appendix A illustrate the net-new economic activity attributable to University of Utah Health.

Economic impact refers to the portion of the economic contribution financed by out-of-region revenue. In other words, economic impacts occur when purchasers spend "new money" from outside the regional economy within the region. That is, U of U Health's economic impact represents the piece of the Utah economy that would not exist without U of U Health. It assumes that without U of U Health, the revenue it currently brings in from outside Utah would not be a part of the state's economy.

More than half of all University of Utah Health revenue represents new money to Utah's economy. This includes 55.2% of hospitals and clinics' revenue, 31.5% of schools and colleges' revenue, and 69.9% of component unit revenue (Figure 7). Hospitals and clinics account for nearly half of U of U Health's total out-of-state revenue, driven primarily by out-of-state patient care, Medicare, and the federally funded portion of Medicaid. More than 40% of U of U Health's external revenue comes from component units, largely ARUP Laboratories. U of U Health also receives out-of-state revenue from federal and nonfederal grants, tuition and fees from out-of-state students and in-state students receiving federal aid, and donor gifts (Figure 8).

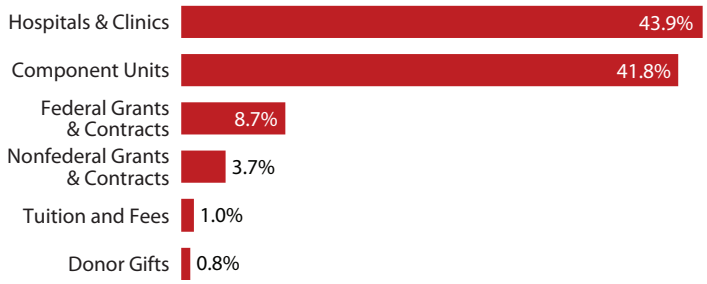
Similar to the economic contribution analysis, U of U Health's total economic impact derives from two different types of spending: its out-of-state financed operations and construction and capital spending. This economic impact totals 36,207 jobs, $2.9 billion in earnings, $3.9 billion in GDP, and $7.3 billion in output (Table 7).

Figure 7: University of Utah Health Revenue by Origin, FY 2024



Source: Kem C. Gardner Institute analysis of University of Utah data

Figure 8: University of Utah Out-of-State Revenue by Source, FY 2024



Source: Kem C. Gardner Policy Institute analysis of University of Utah Data

Table 7: University of Utah Health Statewide Economic Impact, FY 2024

Dollars in Millions

	Jobs	Earnings	GDP	Output
Hospitals & Clinics	**19,898**	**$1,526**	**$2,065**	**$3,858**
Direct	8,680	$844	$844	$1,745
Indirect & Induced	11,218	$682	$1,221	$2,113
Schools & Colleges	**5,259**	**$539**	**$670**	**$931**
Direct	2,894	$399	$399	$477
Indirect & Induced	2,365	$140	$271	$453
Component Units	**11,050**	**$815**	**$1,181**	**$2,488**
Direct	4,529	$383	$383	$1,047
Indirect & Induced	6,520	$432	$798	$1,441
Total	**36,207**	**$2,880**	**$3,916**	**$7,277**
Direct	16,104	$1,627	$1,627	$3,270
Indirect & Induced	20,103	$1,254	$2,289	$4,007

Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Appendix B: Methods

Model Construction

The economic contribution and impact analyses use a custom, multi-regional, 528-sector economic model for Utah. Built using IMPLAN's 2023 database, the model uses input-output (I-O) and social account matrix (SAM) frameworks to estimate how activity in one industry affects the entire economy. While analysts widely use IMPLAN, REMI PI+, and RIMS II for economic impact and contribution analyses, they most commonly utilize IMPLAN to estimate university contributions and impacts. As with any economic model, the accuracy of IMPLAN results depends on the fidelity of model assumptions and the quality of input data.

IMPLAN operates under key I-O model assumptions:

1. *Constant returns to scale* – Inputs per unit of output remain constant.
2. *Fixed input and technology structure* – The mix of inputs and technology necessary to produce a unit of output does not vary.
3. *Zero supply constraints* – Access to in-region and out-of-region raw materials and labor is unlimited.
4. *Fixed output mix* – An industry will produce the same mix of outputs at any level of production.
5. *Static model* – Prices and industry relationships do not change.

Input Data and Geographic Scope

The report's economic contribution and impact analyses use University of Utah Health FY 2024 revenue and expenditure data. This study measures U of U Health's contribution to and impact on the state of Utah.

Measuring Economic Effects

The study utilizes multi-regional input-output (MRIO) analysis, inputting direct spending in Utah's Greater Salt Lake Region (Box Elder, Cache, Davis, Juab, Morgan, Rich, Salt Lake, Summit, Tooele, Utah, Wasatch, and Weber counties) and measuring effects on the region and the rest of the state. Summing these produces the total effects on Utah as reported.

Operations

The study employs an industry impact analysis technique to measure the economic contribution of university operations broken out by campus, hospitals and clinics, and component units. The operations analysis includes:

- *Direct jobs* – Average annual jobs.
- *Direct earnings* – Total payroll expenditures (wages, salaries, benefits, and payroll taxes).
- *Intermediate inputs* – Non-payroll operational spending (excluding capital, construction, scholarship spending, out-of-state travel expenses, and debt payments).
- *Output* – The sum of total labor income, intermediate inputs, taxes on production and imports (TOPI), and other property income (OPI).

Given the University of Utah's status as a state entity, the analysis sets TOPI and OPI at zero. This results in direct earnings equaling direct GDP. Direct payroll models labor income that results in induced effects while intermediate inputs model intermediate demand changes that spur additional induced and indirect effects. The analysis models U of U Health's schools and colleges' spending with a custom spending pattern aligned to actual University of Utah campus expenditures (Table 8). The analysis includes all in-state travel expenses, with 50% allocated to hotels, 25% to ground transportation, and 25% to restaurants. For out-of-state travel and unknown travel, the analysis allocates 40% of total expenses to air transportation (80%) and ground transportation (20%), assuming the hotel and restaurant spending occurred primarily out-of-state.

The report models hospital and clinic spending using IMPLAN Industry 472 (Hospitals), and component units in their applicable industries: ARUP Laboratories in Industry 469 (Medical and Diagnostic Laboratories); Community Nursing Services (CNS) in Industry 470 (Home Health Care Services); the George S. and Dolores Doré Eccles Endowment for Medical School Excellence (EMSE) in Industry 504 (Grantmaking, Giving, and Social Advocacy Organizations); and University of Utah Health Plans (UUHP) in Industry 426 (Insurance Carriers).

The University of Utah provided the revenue data used to estimate the economic impact (Appendix A). Economic impacts measure the economic activity of spending supported by out-of-region revenue. For statewide impacts, this analysis adjusts all inputs based on the share of out-of-state revenue.

Table 8: University of Utah Campus Spending Pattern, FY 2024

IMPLAN Commodity Code	IMPLAN Commodity Category	Share of Spending
3034	Electricity	2.9%
3043	Natural gas distribution	1.1%
3044	Water, sewage, and other systems	1.4%
3055	Maintained and repaired nonresidential structures	5.9%
3145	Printing support services	0.5%
3287	Electronic computers	1.0%
3306	Analytical laboratory instruments	7.0%
3324	Automobiles and light duty motor vehicles	0.4%
3367	Office supplies (except paper)	0.8%
3374	All other miscellaneous manufactured products	7.2%
3396	Air transportation services	1.8%
3399	Truck transportation services	0.1%
3400	Transit and ground passenger transportation services	0.5%
3407	Books	1.9%
3410	Software publishers	2.7%
3415	Wired telecommunications	3.7%
3426	Other insurance	2.4%
3430	Tenant-occupied real estate services	0.9%
3432	Automotive equipment rental and leasing services	0.1%
3435	Commercial and industrial machinery and equipment rental and leasing services	1.1%
3436	Leasing of nonfinancial intangible assets	0.02%
3443	Other computer-related services, including facilities management services	2.4%
3444	Management consulting services	0.1%
3446	Scientific research and development services	10.5%
3447	Advertising, public relations, and related services	2.3%
3450	All other miscellaneous professional, scientific, and technical services	1.4%
3458	Services to buildings	0.2%
3460	Other support services	20.1%
3464	Other educational services	16.3%
3489	Hotels and motel services, including casino hotels	0.2%
3493	All other food and drinking place services	2.1%
3505	Business and professional services	0.8%
3508	U.S. Postal delivery services	0.1%

Source: Kem C. Gardner Policy Institute analysis of University of Utah data using IMPLAN 2023

Construction and Capital

Due to the multi-year and variable nature of construction projects and capital purchases, the analysis models these purchases using a 5-year average of expenditures, adjusted to FY 2024 dollars. This analysis models construction expenditures for buildings as industry output in IMPLAN 48: construction of new educational and vocational structures. It models construction expenditures related to structure improvements as IMPLAN 55: maintenance and repair construction.

The analysis models capital expenditures as commodity output events. While the University of Utah provided total capital expenditures, detailed capital expenditure data were not available. The analysis estimates capital expenditure categories using IMPLAN Furniture, Fixtures, and Equipment (FF&E) investment patterns adjusted where specific information was known. The analysis modeled hospital and clinic spending using Industry 622H (Hospitals); ARUP Laboratories using Industry 5412 (Miscellaneous Professional, Scientific, and Technical Services); Community Nursing Services (CNS) using Industry 6210 (Ambulatory Health Care Services); and University of Utah Health Plans (UUHP) using Industry 524A (Insurance Carriers). Due to insufficient data, the analysis excluded schools and colleges' capital spending. The analysis then adjusted inputs based on U of U Health's out-of-state revenue shares to estimate statewide economic impacts.

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