### I. POPULATION AND CHILD HEALTH DATA

<table>
<thead>
<tr>
<th></th>
<th>VERMONT</th>
<th>NEW ENGLAND REGION*</th>
<th>UNITED STATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population, 1996</td>
<td>591,839</td>
<td>13,373,397</td>
<td>265,253,529</td>
</tr>
<tr>
<td>% Under Age 1</td>
<td>29.0%</td>
<td>27.8%</td>
<td>30.2%</td>
</tr>
<tr>
<td>% Under Age 6</td>
<td>7.6%</td>
<td>8.0%</td>
<td>8.8%</td>
</tr>
<tr>
<td>% Infants</td>
<td>1.3%</td>
<td>1.3%</td>
<td>1.4%</td>
</tr>
<tr>
<td>% Age 1 Through 5</td>
<td>6.4%</td>
<td>6.7%</td>
<td>7.4%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>21.4%</td>
<td>19.8%</td>
<td>21.4%</td>
</tr>
<tr>
<td>% Age 21 and Older</td>
<td>71.0%</td>
<td>72.2%</td>
<td>69.8%</td>
</tr>
</tbody>
</table>

#### Infant Mortality, Low Birth Weight and Prenatal Care, 1995

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>White</th>
<th>Other</th>
<th>Total</th>
<th>White</th>
<th>Other</th>
<th>Total</th>
<th>White</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant Mortality per 1,000 Live Births</td>
<td>6.0%</td>
<td>6.2%</td>
<td>na</td>
<td>6.0%</td>
<td>5.6%</td>
<td>9.0%</td>
<td>7.6%</td>
<td>6.3%</td>
<td>12.6%</td>
</tr>
<tr>
<td>Neonatal Mortality</td>
<td>4.3%</td>
<td>4.4%</td>
<td>na</td>
<td>4.3%</td>
<td>4.0%</td>
<td>6.5%</td>
<td>4.9%</td>
<td>4.1%</td>
<td>8.1%</td>
</tr>
<tr>
<td>Postneonatal Mortality</td>
<td>1.7%</td>
<td>1.8%</td>
<td>na</td>
<td>1.7%</td>
<td>1.6%</td>
<td>2.5%</td>
<td>2.7%</td>
<td>2.2%</td>
<td>4.5%</td>
</tr>
</tbody>
</table>

| Low Birth Weight Infants | Under 2500 Grams | 5.4% | 5.4% | 4.1% | 6.5% | 6.0% | 10.2% | 7.3% | 6.2% | 11.6% |
| Under 1500 Grams        | 0.8% | 0.8% | na   | 1.2% | 1.0% | 2.4% | 1.4% | 1.1% | 2.5%  |

| Not Receiving Prenatal Care | In First Trimester | 12.7% | 12.5% | 23.7% | 11.1% | 9.8% | 20.8% | 18.7% | 16.4% | 27.8% |
|                            | Until Third Trimester or Not At All | 1.9% | 1.9% | 1.9% | 2.0% | 1.7% | 4.3% | 4.2% | 3.5% | 7.0% |

### II. MEDICAID ENROLLEES, RECIPIENTS, AND EXPENDITURES, FY 1996

#### A. Federal Medical Assistance Percentage (FMAP) and AFDC Income Thresholds

<table>
<thead>
<tr>
<th></th>
<th>FY96, FY98 and Enhanced FMAP~</th>
<th>AFDC Income Threshold (%Poverty) For a Family of 3, 1996</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$7,658 ( 59.0% of $12,980 )</td>
<td>$7,464 ( 57.5% of $12,980 )</td>
</tr>
<tr>
<td></td>
<td>Enrollees</td>
<td>Recipients</td>
</tr>
<tr>
<td>Total, FY1996</td>
<td>111,477</td>
<td>102,220</td>
</tr>
<tr>
<td>% Under Age 21</td>
<td>55.2%</td>
<td>54.6%</td>
</tr>
<tr>
<td>% Under Age 6</td>
<td>19.6%</td>
<td>19.1%</td>
</tr>
<tr>
<td>% Infants</td>
<td>3.3%</td>
<td>2.7%</td>
</tr>
<tr>
<td>% Age 1 Through 5</td>
<td>16.3%</td>
<td>16.4%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>35.6%</td>
<td>35.4%</td>
</tr>
<tr>
<td>% Age 21 and Older</td>
<td>44.8%</td>
<td>45.4%</td>
</tr>
</tbody>
</table>

#### B. Enrollees, Recipients, and Expenditures**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Enrollees</th>
<th>Recipients</th>
<th>Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$7,658</td>
<td>111,477</td>
<td>102,220</td>
<td>$302 M</td>
</tr>
<tr>
<td>% Under Age 21</td>
<td>55.2%</td>
<td>54.6%</td>
<td>22.9%</td>
<td>15.0%</td>
</tr>
<tr>
<td>% Under Age 6</td>
<td>19.6%</td>
<td>19.1%</td>
<td>4.7%</td>
<td>5.6%</td>
</tr>
<tr>
<td>% Infants</td>
<td>3.3%</td>
<td>2.7%</td>
<td>1.1%</td>
<td>2.3%</td>
</tr>
<tr>
<td>% Age 1 Through 5</td>
<td>16.3%</td>
<td>16.4%</td>
<td>3.6%</td>
<td>3.3%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>35.6%</td>
<td>35.4%</td>
<td>18.2%</td>
<td>9.4%</td>
</tr>
<tr>
<td>% Age 21 and Older</td>
<td>44.8%</td>
<td>45.4%</td>
<td>77.1%</td>
<td>85.0%</td>
</tr>
</tbody>
</table>

Note: ‘na’ Data unavailable. ~ Includes CT, MA, ME, NH, RI & VT. * Region and US estimates of FY96 FMAPs are weighted by FY96 expenditures. FY98 and Enhanced FMAPS are unweighted averages.

# Enrollee data are not available for NE. Recipient and Expenditures by Age data for AZ are from FY95 and not included in regional and US estimates. ^ Does not include HI children enrolled in managed care.

** Does not include Disproportionate Share Hospital (DSH) payments. FY96 DSH payments to Vermont were $21,929,496.

CT, MD, OH and SC data are from state fiscal year 1995. IL and OK data are estimates. HI, KS, KY, NJ, PA and VA data are from 1994. DC and ME data are unavailable. Regional and US estimates do not include the last 8 states.
### II. CONTINUED

#### C. Expenditures by Age, FY 1996

<table>
<thead>
<tr>
<th></th>
<th>Vermont</th>
<th>Vermont</th>
<th>Vermont</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Per Enrollee</td>
<td>Per Recipient</td>
<td>Per Enrollee</td>
</tr>
<tr>
<td>All Ages</td>
<td>$2,709</td>
<td>$2,954</td>
<td>$4,598</td>
</tr>
<tr>
<td>Children Under Age 21</td>
<td>$1,121</td>
<td>$1,272</td>
<td>$1,306</td>
</tr>
<tr>
<td>Under Age 6</td>
<td>$646</td>
<td>$743</td>
<td>$1,059</td>
</tr>
<tr>
<td>Infants</td>
<td>$887</td>
<td>$1,206</td>
<td>$2,229</td>
</tr>
<tr>
<td>Age 1 Through 5</td>
<td>$598</td>
<td>$667</td>
<td>$779</td>
</tr>
<tr>
<td>Age 6 Through 20</td>
<td>$1,382</td>
<td>$1,558</td>
<td>$1,518</td>
</tr>
<tr>
<td>Adults</td>
<td>$4,659</td>
<td>$5,150</td>
<td>$8,285</td>
</tr>
</tbody>
</table>

#### D. Percent Enrollees, Recipients, and Expenditures($) by Eligibility Category, FY 1996

<table>
<thead>
<tr>
<th></th>
<th>Enrollees</th>
<th>Recipients</th>
<th>Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Vermont</td>
<td>Vermont</td>
<td>Vermont</td>
</tr>
<tr>
<td>Children Under Age 21</td>
<td>53.3%</td>
<td>52.6%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Categorically Needy - Cash</td>
<td>15.9%</td>
<td>16.2%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Categorically Needy - Noncash</td>
<td>1.9%</td>
<td>1.8%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Medically Needy</td>
<td>6.8%</td>
<td>6.6%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Expansions*</td>
<td>28.7%</td>
<td>28.1%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Adults</td>
<td>18.9%</td>
<td>18.7%</td>
<td>8.7%</td>
</tr>
<tr>
<td>Categorically Needy - Cash</td>
<td>7.6%</td>
<td>7.8%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Categorically Needy - Noncash</td>
<td>2.1%</td>
<td>2.0%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Medically Needy</td>
<td>4.5%</td>
<td>4.2%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Expansions*</td>
<td>4.7%</td>
<td>4.7%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Blind and Disabled</td>
<td>14.0%</td>
<td>15.1%</td>
<td>44.3%</td>
</tr>
<tr>
<td>Aged</td>
<td>9.0%</td>
<td>10.2%</td>
<td>28.9%</td>
</tr>
<tr>
<td>Other Title XIX (mostly children)</td>
<td>4.8%</td>
<td>3.4%</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

#### E. Enrollees, Recipients, and Expenditures ($Million) by Race and Age, FY 1996

<table>
<thead>
<tr>
<th></th>
<th>Enrollees</th>
<th>Recipients</th>
<th>Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Vermont</td>
<td>Vermont</td>
<td>Vermont</td>
</tr>
<tr>
<td>Total Under Age 21</td>
<td>61,559</td>
<td>54,226</td>
<td>$696 M</td>
</tr>
<tr>
<td>% Age 0 Through 5</td>
<td>35.5%</td>
<td>35.1%</td>
<td>20.5%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>64.5%</td>
<td>64.9%</td>
<td>79.5%</td>
</tr>
<tr>
<td>% Non-hispanic White</td>
<td>98.6%</td>
<td>98.7%</td>
<td>98.7%</td>
</tr>
<tr>
<td>% Age 0 Through 5</td>
<td>35.5%</td>
<td>35.1%</td>
<td>20.4%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>64.5%</td>
<td>64.9%</td>
<td>79.6%</td>
</tr>
<tr>
<td>% Non-hispanic Black</td>
<td>0.7%</td>
<td>0.6%</td>
<td>0.8%</td>
</tr>
<tr>
<td>% Age 0 Through 5</td>
<td>39.1%</td>
<td>40.2%</td>
<td>32.8%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>60.9%</td>
<td>59.8%</td>
<td>67.2%</td>
</tr>
<tr>
<td>% Hispanic</td>
<td>2.0%</td>
<td>2.0%</td>
<td>0.2%</td>
</tr>
<tr>
<td>% Age 0 Through 5</td>
<td>27.9%</td>
<td>28.9%</td>
<td>7.8%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>72.1%</td>
<td>71.1%</td>
<td>92.2%</td>
</tr>
<tr>
<td>% Other</td>
<td>0.5%</td>
<td>0.5%</td>
<td>0.4%</td>
</tr>
<tr>
<td>% Age 0 Through 5</td>
<td>31.7%</td>
<td>34.8%</td>
<td>30.4%</td>
</tr>
<tr>
<td>% Age 6 Through 20</td>
<td>68.3%</td>
<td>65.2%</td>
<td>69.6%</td>
</tr>
</tbody>
</table>

Note: * Includes recipients made eligible through Medicaid expansions. "na" Data unavailable.

# Enrollee data are not available for NE. Recipient and expenditures by age data for AZ are from FY95 and not included in regional and US estimates. Enrollees and recipients with missing age data are not included in the percents. Managed care enrollees, service recipients and expenditure data are not included for HI since the state does not report managed care data on the HCFA2082.
### II. CONTINUED

#### #F. Expenditures by Age and Type of Service

<table>
<thead>
<tr>
<th>Service</th>
<th>CHILDREN Under 21</th>
<th>ADULTS</th>
<th>CHILDREN Under 21</th>
<th>ADULTS</th>
<th>CHILDREN Under 21</th>
<th>ADULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Cost</td>
<td>Average %Use+</td>
<td></td>
<td>Average Cost</td>
<td>Average %Use+</td>
<td>Average Cost</td>
<td>Average %Use+</td>
</tr>
<tr>
<td>Physician Services</td>
<td>$129</td>
<td>53.6%</td>
<td>$326</td>
<td>75.1%</td>
<td>$226</td>
<td>53.8%</td>
</tr>
<tr>
<td>Dental Services</td>
<td>$178</td>
<td>47.9%</td>
<td>$162</td>
<td>28.1%</td>
<td>$159</td>
<td>37.7%</td>
</tr>
<tr>
<td>Other Practitioners</td>
<td>$439</td>
<td>12.6%</td>
<td>$144</td>
<td>23.1%</td>
<td>$506</td>
<td>10.3%</td>
</tr>
<tr>
<td>EPSDT*</td>
<td>$114</td>
<td>65.1%</td>
<td>$69</td>
<td>1.3%</td>
<td>$86</td>
<td>29.3%</td>
</tr>
<tr>
<td>Family Planning Services</td>
<td>$110</td>
<td>4.5%</td>
<td>$117</td>
<td>12.4%</td>
<td>$119</td>
<td>4.3%</td>
</tr>
<tr>
<td>Rural Health Clinics</td>
<td>$182</td>
<td>12.6%</td>
<td>$202</td>
<td>12.8%</td>
<td>$210</td>
<td>3.2%</td>
</tr>
<tr>
<td>Other Clinics</td>
<td>$684</td>
<td>11.2%</td>
<td>$1,019</td>
<td>16.9%</td>
<td>$868</td>
<td>13.4%</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
<td>$247</td>
<td>37.6%</td>
<td>$473</td>
<td>59.0%</td>
<td>$391</td>
<td>43.9%</td>
</tr>
<tr>
<td>Inpatient Hospital</td>
<td>$3,922</td>
<td>3.3%</td>
<td>$2,954</td>
<td>15.1%</td>
<td>$5,352</td>
<td>8.2%</td>
</tr>
<tr>
<td>Nursing Home/Intermediate Care</td>
<td>$49,502</td>
<td>0.0%</td>
<td>$17,804</td>
<td>8.8%</td>
<td>$52,830</td>
<td>0.1%</td>
</tr>
<tr>
<td>Mental/Psychiatric Hospital Care</td>
<td>$21,633</td>
<td>0.2%</td>
<td>$5,887</td>
<td>0.1%</td>
<td>$30,136</td>
<td>0.4%</td>
</tr>
<tr>
<td>Home Health Care</td>
<td>$4,829</td>
<td>2.7%</td>
<td>$15,342</td>
<td>7.4%</td>
<td>$3,703</td>
<td>3.2%</td>
</tr>
<tr>
<td>Lab and X-Ray</td>
<td>$37</td>
<td>42.7%</td>
<td>$116</td>
<td>38.1%</td>
<td>$42</td>
<td>16.7%</td>
</tr>
<tr>
<td>Drug</td>
<td>$133</td>
<td>69.6%</td>
<td>$826</td>
<td>83.8%</td>
<td>$144</td>
<td>60.7%</td>
</tr>
<tr>
<td>Other Services</td>
<td>$1,504</td>
<td>24.6%</td>
<td>$1,156</td>
<td>39.1%</td>
<td>$1,266</td>
<td>27.5%</td>
</tr>
</tbody>
</table>

### #G. Average Cost per User of Service and Percent of Recipients Using Each Service

<table>
<thead>
<tr>
<th>Service</th>
<th>Average Cost</th>
<th>%Use+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Services</td>
<td>$129</td>
<td>53.6%</td>
</tr>
<tr>
<td>Dental Services</td>
<td>$178</td>
<td>47.9%</td>
</tr>
<tr>
<td>Other Practitioners</td>
<td>$439</td>
<td>12.6%</td>
</tr>
<tr>
<td>EPSDT*</td>
<td>$114</td>
<td>65.1%</td>
</tr>
<tr>
<td>Family Planning Services</td>
<td>$110</td>
<td>4.5%</td>
</tr>
<tr>
<td>Rural Health Clinics</td>
<td>$182</td>
<td>12.6%</td>
</tr>
<tr>
<td>Other Clinics</td>
<td>$684</td>
<td>11.2%</td>
</tr>
<tr>
<td>Outpatient Hospital</td>
<td>$247</td>
<td>37.6%</td>
</tr>
<tr>
<td>Inpatient Hospital</td>
<td>$3,922</td>
<td>3.3%</td>
</tr>
<tr>
<td>Nursing Home/Intermediate Care</td>
<td>$49,502</td>
<td>0.0%</td>
</tr>
<tr>
<td>Mental/Psychiatric Hospital Care</td>
<td>$21,633</td>
<td>0.2%</td>
</tr>
<tr>
<td>Home Health Care</td>
<td>$4,829</td>
<td>2.7%</td>
</tr>
<tr>
<td>Lab and X-Ray</td>
<td>$37</td>
<td>42.7%</td>
</tr>
<tr>
<td>Drug</td>
<td>$133</td>
<td>69.6%</td>
</tr>
<tr>
<td>Other Services</td>
<td>$1,504</td>
<td>24.6%</td>
</tr>
</tbody>
</table>

Note: 'na' Data unavailable. 'NA' Not applicable. # Recipient and expenditures by type of service data for AZ and GA are from FY95 and not included in regional and US estimates. Managed care service utilization and expenditure data are not included for HI since the state does not report managed care data on the HCFA2082. ^ EPSDT services are known to be under-reported in many states due to complexities in the reporting process.

* When less than 0.05% of expenditures is accounted for by a type of service, it is rounded to 0.0%. + Percents do not sum to 100 because recipients use many services; when less than 0.05% use a service, it is rounded to 0.0%. 
III. TITLE XIX AND TITLE XXI PROGRAM ELIGIBILITY BASED ON FAMILY INCOME AS A PERCENTAGE OF THE FEDERAL POVERTY LEVEL (FPL), JUNE 1998

[Total Number of States with Expansions or Medically Needy Program in Brackets]

A. Title XIX Medicaid Eligibility and Expansions [44]

By federal mandate, all states must cover pregnant women and children to age 6 to 133% of the Federal Poverty Level (FPL) and children through age 14 up to 100% FPL, as of October 1, 1997.

In addition, 1996 federal welfare legislation requires states to use the AFDC income eligibility levels in effect as of July 16, 1996 to determine Medicaid eligibility. This establishes a state specific minimum eligibility level for poor children ages 15 through 18.

Vermont expanded its Title XIX portion of Dr Dinosaur, Vermont’s Medicaid program, to 225% FPL for pregnant women, infants and children through age 18. The Medically Needy [34] were covered to 81% FPL in 1997. As of June 10, 1998, Vermont implemented a Section 1115 Waiver.

B. Title XXI SCHIP/Medicaid Program Eligibility:

Vermont submitted a plan for the creation of a state program. Federally legislated maximum Title XXI SCHIP/Medicaid program eligibility for Vermont is 275% FPL for all infants and children through age 18. As of June 26, 1998, 42 states and the District of Columbia submitted their Title XXI/SCHIP plans and HCFA approved 22 of the submitted plans.

---

Analysis of the 1994 - 1997 March Current Population Surveys and 1998 Census Bureau projections of child population revealed an estimated 15K uninsured children under age 19, of whom 8.0K are unenrolled Medicaid eligibles, 1.6K* are federally legislated Title XXI/SCHIP eligibles--. Full implementation of and maximum enrollment into both Title XIX and Title XXI programs would reduce Vermont’s uninsured child population to 5.1K*, or 3.2% of the state’s 159K children under age 19.

---

* Standard error is greater than 20%. This estimate is unreliable due to small sample size.
REFERENCES


ORDERING INFORMATION

Complete sets of the state reports can be purchased by contacting the American Academy of Pediatrics, Department of Research, 141 Northwest Point Blvd., PO. Box 927, Elk Grove Village, Illinois, 60007; (800) 433-9016, extension 7627 or (847) 228-5005. Contact Beth Yudkowsky, Division of Health Policy Research, with comments about the report; contact Jean Cilik, Division of State Government and Chapters Affairs, for Medicaid questions and advocacy advice. The Medicaid State Reports, FY 1996 will also be made available on the Research page of the AAP Web site at http://www.aap.org.