

Medicaid

STATE REPORTS – FY 1998

Vermont

 Division of
Health Policy Research

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Medicaid State Report

VERMONT, FY 1998 (October 1, 1997 - September 30, 1998)



I. MEDICAID ENROLLEES AND EXPENDITURES				VERMONT			NEW ENGLAND REGION~			UNITED STATES		
A. Federal Medical Assistance Percentage (FMAP)*		62.2% (FY98)	62.2% (FY00)	73.6% (Enhanced)		55.2% (FY98)	55.4% (FY00)	68.8% (Enhanced)		60.7% (FY98)	60.7% (FY00)	72.5% (Enhanced)
B. Total Medicaid Managed Care Enrollment, 06/30/1998 (% of Total Medicaid Enrollment)		52,153 (48.3% of 107,976 **)			904,036 (56.2% of 1,609,878)			15,760,205 (52.5% of 30,009,674)				
C. Percent of Births Paid for by Medicaid, 1997***		32%			23%			35%				
D. FY 1998 and FY 1994-98 Averaged DSH^ Payment		\$22 M		\$23 M		\$1,196 M		\$1,191 M		\$14,958 M		\$14,276 M
E. Enrollees, by Age, FY 1998#		<u>Enrollees</u>		<u>Percent</u>		<u>Enrollees</u>		<u>Percent</u>		<u>Enrollees</u>		<u>Percent</u>
All Enrollees		131,639		100.0%		1,930,631		100.0%		40,377,603		100.0%
Children Under Age 21		62,282		47.3%		1,072,838		55.6%		22,331,022		56.4%
Under Age 6		19,711		15.0%		533,536		27.6%		9,220,363		22.8%
<i>Infants</i>		2,840		2.2%		260,991		13.5%		2,014,962		5.0%
<i>Age 1 Through 5</i>		16,871		12.8%		272,545		14.1%		7,205,401		17.8%
Age 6 Through 20		42,571		32.3%		539,302		27.9%		13,110,659		32.5%
F. Percent Enrollees and Expenditures^^ by Eligibility Category, FY 1998##		<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>		<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>		<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>
All Enrollees		131,639	\$351 M	\$2,669		1,930,631	\$9,654 M	\$5,000		40,377,603	\$142,058 M	\$3,518
Children^^^		45.3%	20.1%	\$1,181		49.2%	13.3%	\$1,348		50.6%	16.4%	\$1,130
Categorically Needy - Cash		11.0%	6.4%	\$1,534		18.8%	5.2%	\$1,390		18.4%	6.0%	\$1,137
Categorically Needy - Noncash		20.8%	5.6%	\$721		14.5%	3.5%	\$1,194		17.4%	4.6%	\$910
Medically Needy		3.1%	1.4%	\$1,223		7.5%	1.6%	\$1,077		4.5%	1.7%	\$1,294
Other		10.4%	6.7%	\$1,717		8.4%	3.0%	\$1,763		10.2%	4.2%	\$1,418
Adults		30.4%	13.4%	\$1,169		20.9%	7.9%	\$1,875		21.8%	10.7%	\$1,704
Categorically Needy - Cash		5.0%	3.7%	\$1,955		9.1%	3.5%	\$1,947		8.8%	4.5%	\$1,796
Categorically Needy - Noncash		19.5%	7.5%	\$1,029		2.7%	0.8%	\$1,462		5.6%	3.2%	\$1,987
Medically Needy		3.2%	1.2%	\$1,009		4.5%	1.7%	\$1,918		2.6%	1.3%	\$1,717
Other		2.7%	0.9%	\$899		4.6%	1.8%	\$1,937		4.8%	1.6%	\$1,199
Blind and Disabled		12.4%	38.8%	\$8,303		18.2%	43.7%	\$11,954		17.5%	43.6%	\$8,680
Aged		11.9%	27.8%	\$6,227		11.7%	35.2%	\$14,984		10.2%	29.3%	\$9,968

Notes: ~ Includes DC, DE, FL, GA, MD, NC, SC, VA & WV. * Regional and US averages of FY98 FMAP are weighted by FY98 expenditures. FY00 and Enhanced FMAPs are unweighted. ** Enrollment on 06/30/98 was 82.0% of total annual enrollment state reported to HCFA on Form 2082 for FY 1998. *** Data for GA and MT are from 1996 and not included in regional and state averages. Data unavailable for DC, HI and VA. ^ Disproportionate Share Hospital Payments. # Age breakdowns for OK are from FY 1996 and not included in regional and US averages. ## Eligibility category breakdowns for HI and OK are from FY 1996 and not included in regional and US averages. ^^ Includes Medicaid vendor payments, health plan premiums, capitation and HMO payments reported by the states to HCFA on Form HCFA-2082. ^^ As defined by HCFA based on age and other factors. 'na' Data unavailable. 'NA' Not Applicable.

I. CONTINUED	VERMONT				NEW ENGLAND REGION				UNITED STATES			
	<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>	
G. Payments by Age and Type of Service#												
Physician Services	0.5%	1.3%	0.8%	1.5%	1.5%	1.8%	0.8%	1.5%	1.5%	1.8%	0.8%	1.5%
Dental Services	1.5%	0.6%	0.4%	0.3%	0.4%	0.2%	0.4%	0.3%	0.4%	0.2%	0.4%	0.2%
Other Practitioners	0.9%	0.4%	0.3%	0.1%	0.3%	0.2%	0.3%	0.1%	0.2%	0.2%	0.3%	0.2%
EPSDT*	0.5%	0.1%	0.1%	0.0%	0.1%	0.1%	0.1%	0.0%	0.9%	0.1%	0.1%	0.1%
Family Planning Services	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.1%
Clinic Services	0.5%	0.6%	0.6%	0.9%	0.6%	1.1%	0.6%	0.9%	0.9%	1.1%	0.9%	1.1%
Outpatient Hospital	0.6%	1.6%	1.0%	1.7%	1.0%	1.8%	1.0%	1.7%	1.3%	1.8%	1.3%	1.8%
Inpatient Hospital	1.5%	2.4%	2.5%	5.2%	2.5%	6.4%	2.5%	5.2%	5.1%	6.4%	5.1%	6.4%
Nursing Home/Intermediate Care	0.2%	20.9%	0.2%	31.2%	0.2%	24.5%	0.2%	31.2%	0.6%	24.5%	0.6%	24.5%
Mental Health Facility Services	0.3%	0.2%	0.8%	0.6%	0.8%	1.3%	0.8%	0.6%	0.8%	1.3%	0.8%	1.3%
Personal Care / Home Health Services	1.1%	1.3%	1.2%	3.3%	1.2%	4.7%	1.2%	3.3%	2.1%	4.7%	2.1%	4.7%
Lab and X-Ray	0.1%	0.2%	0.0%	0.1%	0.0%	0.3%	0.1%	0.1%	0.2%	0.3%	0.2%	0.3%
Prescribed Drugs	0.9%	8.8%	0.8%	6.2%	0.8%	6.1%	0.8%	6.2%	1.2%	6.1%	1.2%	6.1%
Prepaid Health Care	6.1%	4.8%	5.9%	2.5%	5.9%	4.3%	5.9%	2.5%	6.2%	4.3%	6.2%	4.3%
Primary Care Case Management Services	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%
Other Services**	10.1%	13.3%	2.7%	3.2%	2.7%	2.0%	3.2%	2.7%	1.6%	2.0%	1.6%	2.0%
Reporting Variance~	0.1%	18.4%	0.0%	21.0%	0.0%	20.0%	21.0%	0.0%	0.2%	20.0%	0.2%	20.0%
All Services	25.1%	74.9%	17.6%	82.4%	17.6%	76.7%	82.4%	17.6%	23.3%	76.7%	23.3%	76.7%
H. Average Payments per User of Service and Percent of Enrollees Using Each Service#												
	<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>	
	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+
Physician Services	\$109	28.1%	\$250	26.7%	\$247	29.9%	\$399	29.9%	\$242	39.3%	\$384	37.8%
Dental Services	\$190	44.3%	\$204	15.0%	\$170	23.1%	\$209	17.6%	\$172	13.7%	\$204	7.7%
Other Practitioners	\$596	8.4%	\$169	11.1%	\$460	6.5%	\$90	18.2%	\$179	6.7%	\$110	13.2%
EPSDT*	\$93	30.8%	\$78	5.6%	\$74	11.5%	\$54	2.2%	\$224	26.1%	\$308	3.5%
Family Planning Services	\$123	4.8%	\$126	4.4%	\$115	2.9%	\$132	4.0%	\$159	2.6%	\$141	3.3%
Clinic Services	\$223	12.9%	\$304	9.8%	\$675	8.3%	\$1,010	10.6%	\$469	11.4%	\$874	9.7%
Outpatient Hospital	\$224	16.2%	\$426	19.3%	\$418	21.6%	\$634	30.8%	\$333	24.7%	\$582	24.6%
Inpatient Hospital	\$4,402	1.9%	\$2,398	5.0%	\$6,339	3.6%	\$5,447	10.7%	\$4,826	6.5%	\$4,807	10.5%
Nursing Home/Intermediate Care	\$56,698	0.0%	\$19,590	5.4%	\$47,481	0.0%	\$22,737	15.4%	\$63,002	0.1%	\$21,867	8.9%
Mental Health Facility Services	\$9,053	0.2%	\$7,385	0.1%	\$40,347	0.2%	\$32,060	0.2%	\$18,105	0.3%	\$28,065	0.4%
Personal Care / Home Health Services	\$1,042	6.1%	\$1,089	5.9%	\$2,300	4.6%	\$4,016	9.4%	\$1,752	7.3%	\$3,125	11.9%
Lab and X-Ray	\$35	17.0%	\$99	9.8%	\$43	8.3%	\$98	12.9%	\$66	17.6%	\$119	18.7%
Prescribed Drugs	\$157	34.0%	\$1,140	39.1%	\$206	35.6%	\$1,346	51.8%	\$188	41.0%	\$1,205	40.3%
Prepaid Health Care	\$577	59.1%	\$1,165	20.9%	\$741	71.6%	\$1,028	27.6%	\$771	50.0%	\$1,286	26.5%
Primary Care Case Management Services	NA	0.0%	NA	0.0%	\$34	14.8%	\$39	6.5%	\$28	12.2%	\$43	4.2%
Other Services**	\$2,318	24.5%	\$2,954	22.8%	\$1,546	15.9%	\$1,174	30.5%	\$799	12.2%	\$799	19.6%
All Services	\$1,535	92.0%	\$4,038	93.8%	\$1,898	83.3%	\$9,585	96.7%	\$1,571	92.3%	\$6,493	93.7%

Notes: When less than 0.05% of expenditures is accounted for by a type of service, it is rounded to 0.0%. # Data for HI and OK are from FY 1996. Breakdowns by Type of Service for NE are from FY 1997. These are not included in regional and US totals. DSH payments not included. * EPSDT services are known to be under-reported on the HCFA2082 in many states due to complexities in the reporting process. EPSDT participation rate for Vermont in 1997 was 60% according to the HCFA416. ** Include Home and Community Waiver, and any other medical or remedial care recognized under state law and specified by the Secretary, including but not limited to transportation, physical and occupational therapy, dentures, prosthetic devices, rehabilitative and hospice services. ~ A positive variance reflects expenditures not reported as any service type. A negative variance indicates that expenditures for all service types sum to exceed total expenditures state reported for age group. +Percents may sum to exceed 100 since enrollees may use multiple services. 'na' Data unavailable. 'NA' Not applicable.

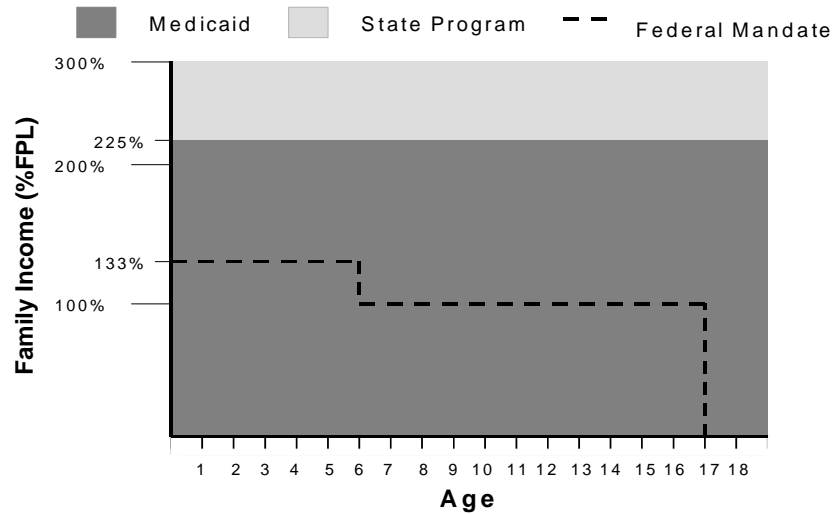
I. CONTINUED	VERMONT		NEW ENGLAND REGION		UNITED STATES	
	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>
I. Enrollees Under Age 21, by Race and Age, FY 1998#						
Non-hispanic White	61,478	98.7%	482,893	45.0%	8,942,666	40.0%
Ages 0 Through 5	19,487	31.7%	232,119	48.1%	3,674,647	41.1%
Ages 6 Through 20	41,991	68.3%	250,774	51.9%	5,268,019	57.6%
Non-hispanic Black	413	0.7%	141,551	13.2%	6,572,457	29.4%
Ages 0 Through 5	118	28.6%	62,930	44.5%	2,493,510	37.9%
Ages 6 Through 20	295	71.4%	78,621	55.5%	4,078,947	62.1%
Hispanic	102	0.2%	196,236	18.3%	4,814,500	21.6%
Ages 0 Through 5	26	25.5%	92,809	47.3%	2,211,872	45.9%
Ages 6 Through 20	76	74.5%	103,427	52.7%	2,602,628	54.1%
Other	289	0.5%	252,158	23.5%	2,001,399	9.0%
Ages 0 Through 5	80	27.7%	145,678	57.8%	840,334	42.0%
Ages 6 Through 20	209	72.3%	106,480	42.2%	1,161,065	58.0%

II. POPULATION AND CHILD HEALTH DATA

A. Total Population, 1998	604,979	100.0%	13,481,173	100.0%	270,002,354	100.0%
Under Age 21	175,640	29.0%	3,790,807	28.1%	81,664,866	30.2%
Under Age 6	45,466	7.5%	1,055,754	7.8%	23,078,513	8.5%
Infants	7,542	1.2%	176,175	1.3%	3,800,560	1.4%
Age 1 Through 5	37,924	6.3%	879,579	6.5%	19,277,953	7.1%
Age 6 Through 20	130,174	21.5%	2,735,053	20.3%	58,586,353	21.7%
Age 21 and Older	429,339	71.0%	9,690,366	71.9%	188,337,488	69.8%
B. Infant Mortality, Low Birth Weight and Prenatal Care, 1997	<u>Total</u>	<u>White</u>	<u>Other</u>	<u>Total</u>	<u>White</u>	<u>Other</u>
Infant Mortality per 1,000 Live Births	6.1	6.1	na	5.8	5.4	8.4
Neonatal Mortality	4.2	4.3	na	4.4	4.2	6.2
Postneonatal Mortality	na	na	na	1.4	1.3	2.1
% Low Birth Weight Infants Under 2500 Grams	6.5	6.5	4.7	7.0	6.5	10.2
Under 1500 Grams	1.4	1.4	0.0	1.4	1.2	2.4
% Not Receiving Prenatal Care						
In First Trimester	12.6	12.5	22.0	11.0	9.9	18.9
Until Third Trimester or Not At All	2.0	2.0	3.7	2.4	2.1	4.5
C. Pediatrician and Other Child Health Physician Ratios, 1998	<u>Total</u>	<u>% Child Population</u> ⁺	<u>Total</u>	<u>% Child Population</u> ⁺	<u>Total</u>	<u>% Child Population</u> ⁺
<i>Children living in Health Service Areas* with:</i>						
Fewer than 55 Pediatricians per 100K Children ~	47,862	32%	499,891	16%	34,317,300	50%
Fewer than 82 Child Health Physician per 100K Children ~	16,675	11%	636,670	20%	34,202,498	50%

Notes: # Race categories may be inconsistent across state. Maine, for example, reported all enrollees as 'Other'. # Data for OK are from FY1996 and not included in regional and state totals. * Counties are grouped into Health Service Areas(HSAs, developed by the National Center for Health Statistics) based on commuting patterns within and across counties. ~ Median ratio for US. + Percents less than 0.5% are rounded to 0%. 'na' Data unavailable.

III. MEDICAID AND SCHIP PROGRAM ELIGIBILITY BASED ON FAMILY INCOME AS A PERCENTAGE OF THE FEDERAL POVERTY LEVEL (%FPL), June 2000



A. Title XIX Medicaid Eligibility and Expansions

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 16 up to 100% FPL, as of October 1, 1999. 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 17 through 18 (59% FPL for Vermont, an equivalent of \$8,348 for a family of 3 in 2000).

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 were covered up to 110% FPL in 1998. As of 1998, there were a total of 41 states with Title XIX Medicaid expansions and 38 states covered the Medically Needy.

An estimated 62% of 11K uninsured children under age 19 in Vermont were Medicaid eligible but unenrolled during 1998. Reports of children's health insurance status and Medicaid and SCHIP eligibility of uninsured children in the states can be downloaded from ["http://www.aap.org/advocacy/schipef.htm"](http://www.aap.org/advocacy/schipef.htm).

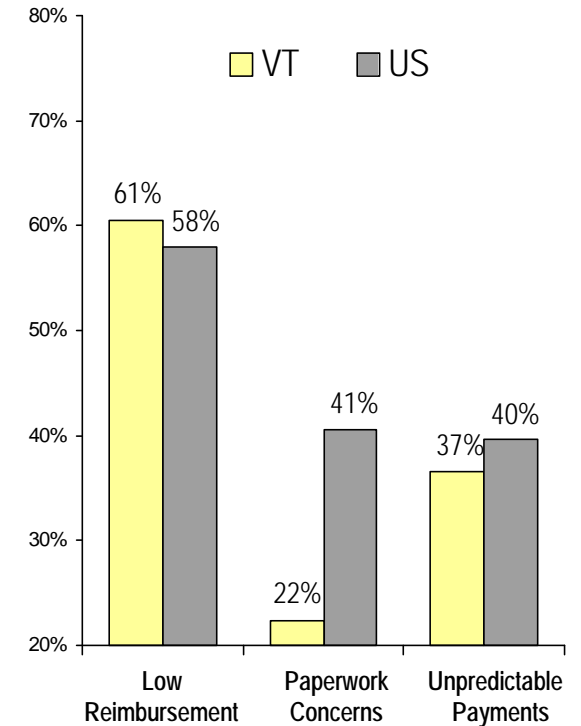
B. Title XXI Medicaid/SCHIP Program Eligibility

Vermont's Title XXI state program covers infants and children through age 18 to 300% FPL.

More information about SCHIP activities in the states, including the SCHIP Update, are available from reports published by the AAP's Department of Chapter and State Affairs, available at ["http://www.aap.org/advocacy/schip.htm"](http://www.aap.org/advocacy/schip.htm). An information clearinghouse on SCHIP program evaluation can be accessed at ["http://www.aap.org/advocacy/evaluation.htm"](http://www.aap.org/advocacy/evaluation.htm).

IV. BARRIERS TO PEDIATRICIAN PARTICIPATION IN MEDICAID, AAP SURVEY, 2000

Percent Pediatricians Rating Reason "Very Important" for Limiting Medicaid Participation



A survey sent to a random sample of 13,000 Fellows of the American Academy of Pediatrics in early 2000 found that low reimbursement, paperwork concerns, and unpredictable payments were the top 3 reasons pediatricians cited for limiting participation in the Medicaid program. Complete state reports of this survey and other studies conducted by the AAP Division of Health Policy Research can be accessed from the AAP Research page at ["http://www.aap.org/research"](http://www.aap.org/research).

REFERENCES:

- I A. Title XIX Federal Medicaid Assistance Percentages, Fiscal Years 1998. Health Care Financing Administration (HCFA)/Medicaid Bureau. Available at <http://www.hcfa.gov/medicaid/ofs%2Dffp.htm> . Federal medical assistance percentages and enhanced Federal medical assistance percentages, effective October 1, 1999-September 30, 2000 (Fiscal year 2000). Secretary of Health and Human Services. Available at <http://aspe.os.dhhs.gov/health/fmap00.htm> .
- I B. Medicaid Managed Care Enrollment, June 30, 1998. Health Care Financing Administration. Available at <http://www.hcfa.gov/medicaid/mcsten98.htm> .
- I C. Medicaid Births as a Percentage of Total Births, 1996 and 1997. National Governors' Association Center for Best Practices, January 2000. Available at <http://www.nga.org/Pubs/IssueBriefs/2000/000120MCHUpdate.asp> .
- I D. Financial Management Report for FY 1998. HCFA Medicaid Professional /Technical Information. Downloadable from <http://www.hcfa.gov/medicaid/ofs-64.htm> .
- I E-I. Medicaid Statistical File, FY 1996 -1998. Health Care Financing Administration.

- II A. Population Estimates for the US and States by Single Year of Age and Sex: July 1, 1998. Population Division, US Census Bureau. Downloadable from <http://www.census.gov/population/estimates/state/stats/st-99-11.txt>.
- II B. National Vital Statistics Report, Vol. 47, No. 18, April 29, 1999. National Vital Statistics Report, Vol. 47, No. 19, June 30, 1999. National Vital Statistics Report, Vol. 48, No. 3, March 28, 2000. National Center for Health Statistics, Centers for Disease Control and Prevention. Additional statistics provided by staff from the NCHS Mortality and Natality Statistics Branches.
- II C. Physician Workforce Ratios for Child Health, 1998. American Academy of Pediatrics, 2000.

- III A-B. "Medicaid and SCHIP Income Eligibility Guidelines for Children" and "Title XXI Medicaid Expansion Population and Date of Implementation", reports published by the Department of Chapter and State Affairs, American Academy of Pediatrics, August 2000. Medically Needy Income Limits and Resource Limits for Aged, Blind, and Disabled People. The Urban Institute, October 1998. Downloadable from <http://newfederalism.urban.org/pdf/discussion99-09.pdf>. American Academy of Pediatrics analysis of 1999 March Demographic File, Current Population Survey.

- IV. 2000 Pediatrician Participation Survey. American Academy of Pediatrics, 2000.

Medicaid State Reports, FY 1994 through 1998, are available in Adobe Acrobat PDF format on the Research page of the AAP Web site, at <http://www.aap.org/research/medicaid.htm>. Contact Suk-fong Tang, PhD, Division of Health Policy Research, with comments about the report; contact Dan Walter, Department of Chapter and State Affairs, for Medicaid questions and advocacy advice.