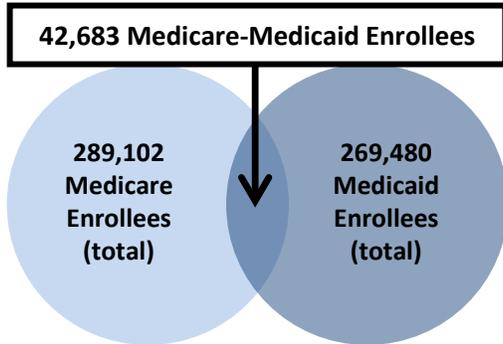


# Medicare-Medicaid Enrollee Information State of Nebraska, 2009

Figure 1. Total Medicare, Medicaid, and Medicare-Medicaid Dually Enrolled Populations: Nebraska, 2009

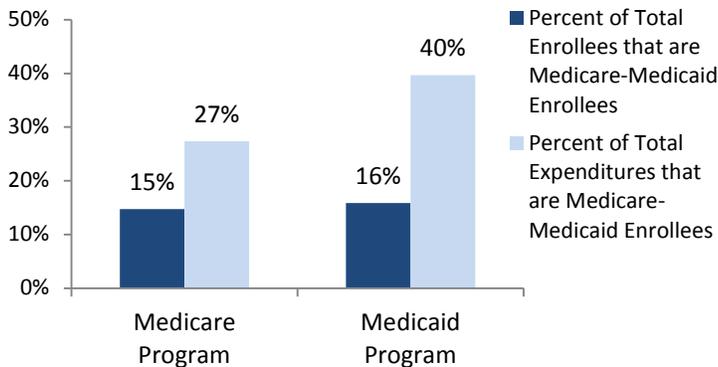


In the State of Nebraska, in 2009:

- There were 42,683 persons dually enrolled in Medicare & Medicaid at any given point in time over the year.
  - 15% of Medicare Enrollees were co-enrolled in Medicaid.
  - 16% of Medicaid Enrollees were co-enrolled in Medicare.

\* Includes Medicaid-expansion Children's Health Insurance Program (CHIP)

Figure 2. Medicare-Medicaid Enrollees' Percentage of Total Medicare & Medicaid Enrollees and their Relative Share of Program Expenditures: Nebraska, 2009

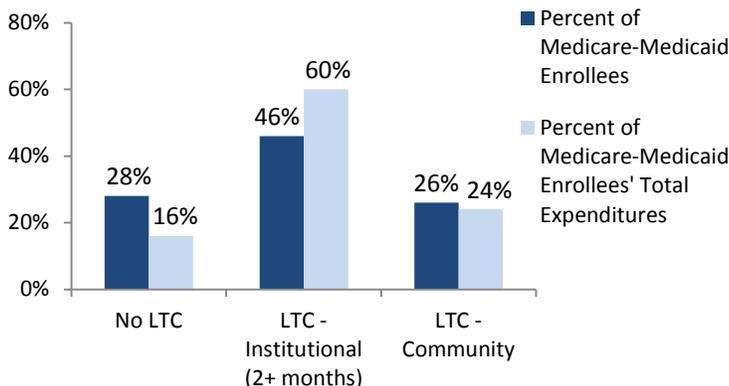


In the State of Nebraska, in 2009:

- Medicare-Medicaid enrollees made up 15% of the Medicare population and 27% of Total Medicare expenditures.
- Medicare-Medicaid enrollees made up 16% of State Medicaid enrollees and 40% of Medicaid expenditures.

*The following figures are based on data for Fee-For-Service (FFS) enrollees only.*

Figure 3. Among Full and Partial Benefit Medicare-Medicaid Enrollees, the Proportion Enrolled in FFS Long-Term Care (LTC), Paid for by Medicare or Medicaid, and their Relative Share of FFS Program Expenditures: Nebraska, 2009^



In the State of Nebraska, in 2009:

- Institutional LTC appears to have been driving much of the high FFS costs attributable to Medicare-Medicaid enrollees. Specifically, the 46% of Medicare-Medicaid enrollees who resided in a LTC facility paid for by Medicare or Medicaid for two or more months accounted for 60% of total Medicare-Medicaid enrollee FFS expenditures.



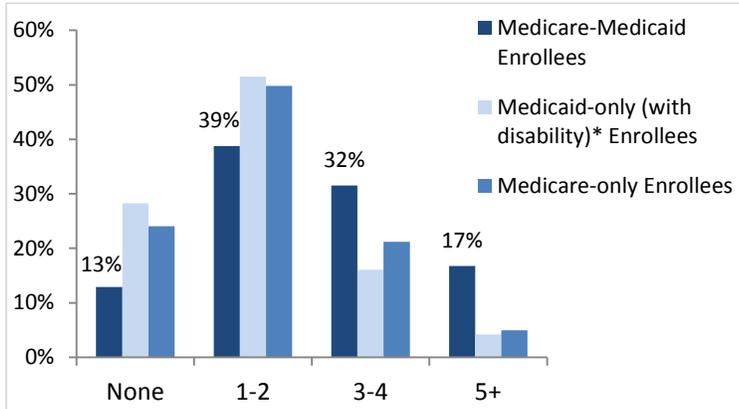
Centers for Medicare & Medicaid Services/Medicare-Medicaid Coordination Office

Data Source for Figures 1-2: 2009 CMS Chronic Condition Warehouse (& Medicare Modernization Act data)

Data Source for Figures 3-5: 2009 CMS MIMLEADS (Medicare-Medicaid Linked Enrollee Analytic Data Source)

## Medicare-Medicaid Enrollee Information State of Nebraska, 2009

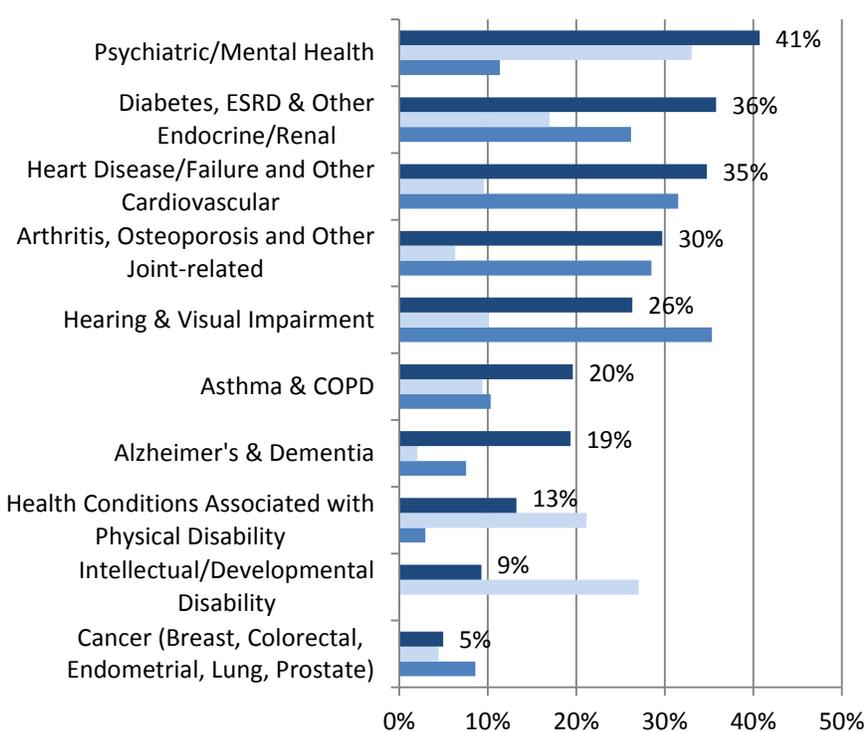
**Figure 4. Number of Chronic Conditions by Enrollment Type, FFS Enrollees only: Nebraska, 2009<sup>^</sup>**



**In the State of Nebraska, in 2009:**

- Out of 24 chronic health conditions studied, 49% of Medicare-Medicaid FFS enrollees had three or more chronic health conditions.
- This compares to 26% of Medicare-only FFS enrollees and 20% of Medicaid-only FFS enrollees (with disability) having three or more conditions.

**Figure 5. Health Condition Categories by Enrollment Type, FFS Enrollees only: Nebraska, 2009<sup>^</sup>**



**In the State of Nebraska, in 2009, among Medicare-Medicaid FFS enrollees:**

- 41% had a psychiatric (i.e., mental health) disorder;
- 36% had diabetes, ESRD or another endocrine or renal disorder; and
- 35% had heart disease/failure or another cardiovascular-related disorder (excluding hypertension).

<sup>^</sup>**Note:** These analyses were performed using FFS data and therefore may or may not be relevant to the entire State's total FFS and managed care enrolled Medicare-Medicaid population. On average, only 4% of all Medicare-Medicaid enrollees in the State of Nebraska were enrolled exclusively in managed care.

<sup>\*</sup>**Note:** This Medicaid-only comparison group includes only those Medicaid enrollees who qualified for Medicaid based on disability.



Centers for Medicare & Medicaid Services/Medicare-Medicaid Coordination Office

Data Source for Figures 1-2: 2009 CMS Chronic Condition Warehouse (& Medicare Modernization Act data)

Data Source for Figures 3-5: 2009 CMS MIMLEADS (Medicare-Medicaid Linked Enrollee Analytic Data Source)