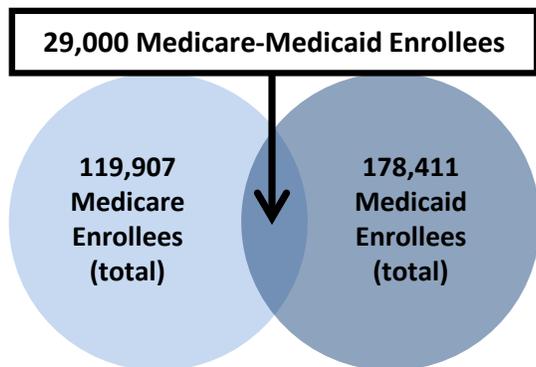


## Medicare-Medicaid Enrollee Information State of Vermont, 2009

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

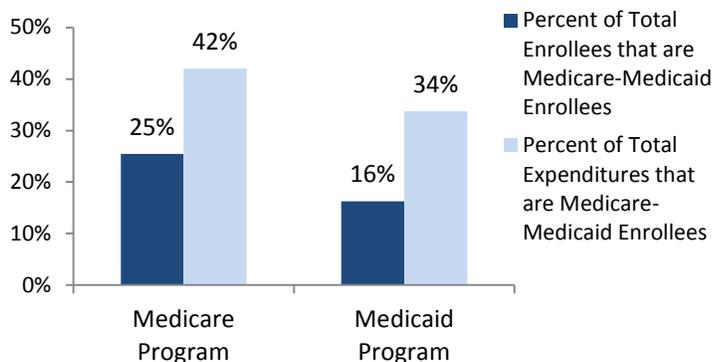


In the State of Vermont, in 2009:

- There were 29,000 persons dually enrolled in Medicare & Medicaid at any given point in time over the year.
  - 25% 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: Vermont, 2009

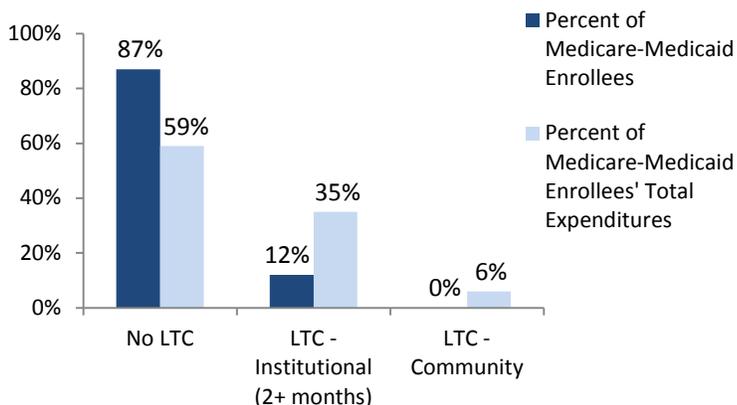


In the State of Vermont, in 2009:

- Medicare-Medicaid enrollees made up 25% of the Medicare population and 42% of Total Medicare expenditures.
- Medicare-Medicaid enrollees made up 16% of State Medicaid enrollees and 34% 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: Vermont, 2009^



In the State of Vermont, in 2009:

- Institutional LTC appears to have been driving much of the high FFS costs attributable to Medicare-Medicaid enrollees. Specifically, the 12% of Medicare-Medicaid enrollees who resided in a LTC facility paid for by Medicare or Medicaid for two or more months accounted for 35% of total Medicare-Medicaid enrollee FFS expenditures.

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

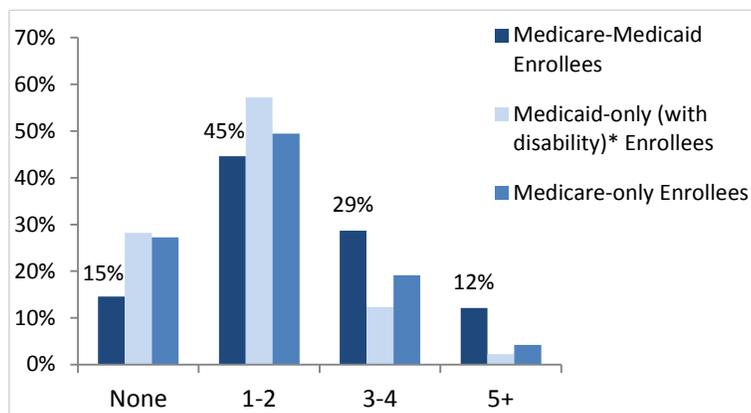
Data Source for Figures 1-2: 2009 CMS Chronic Condition Warehouse (& Medicare Modernization Act data)

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



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

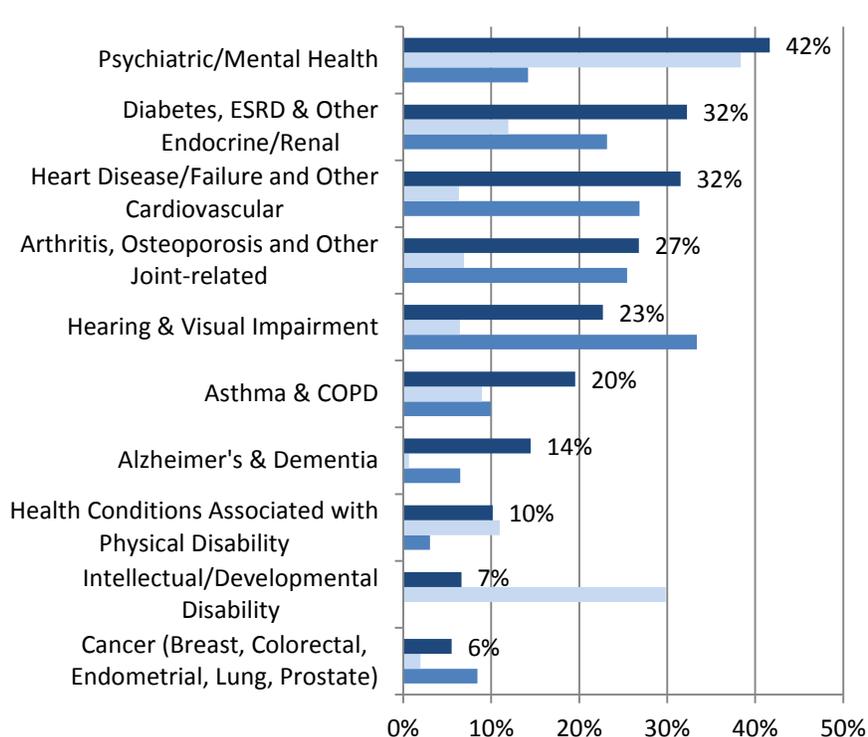
**Figure 4. Number of Chronic Conditions by Enrollment Type, FFS Enrollees only: Vermont, 2009<sup>^</sup>**



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

- Out of 24 chronic health conditions studied, 41% of Medicare-Medicaid FFS enrollees had three or more chronic health conditions.
- This compares to 23% of Medicare-only FFS enrollees and 14% of Medicaid-only FFS enrollees (with disability) having three or more conditions.

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



- Medicare-Medicaid Enrollees
- Medicaid-only (with disability)\* Enrollees
- Medicare-only Enrollees

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

- 42% had a psychiatric (i.e., mental health) disorder;
- 32% had diabetes, ESRD or another endocrine or renal disorder; and
- 32% had heart disease/failure or another cardiovascular –related disorder (excluding hypertension).

<sup>^</sup>**Note:** In the State of Vermont, all Medicare-Medicaid enrollees were included in the analysis for Figures 3-5 because zero percent were enrolled exclusively in Medicare and Medicaid managed care.

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

