

## **Medicaid Program Enrollment and Expenditures Report**

### **Q3 SFY 2019**

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**Quarterly Report to the General Assembly  
Pursuant to 33 V.S.A. § 1901f**

**Al Gobeille, Secretary**  
Vermont Agency of Human Services

**Cory Gustafson, Commissioner**  
Department of Vermont Health Access

June 1, 2019



## Key Terms

**Caseload** – Average monthly member enrollment

**MEG** – Medicaid Eligibility Group

**ABD Adult** – Beneficiaries age 19 or older; categorized as aged, blind, disabled, and/or medically needy

**ABD Dual** – Beneficiaries eligible for both Medicare and Medicaid; categorized as aged, blind, disabled, and/or medically needy

**General Adult** – Beneficiaries age 19 or older; pregnant women or parents/caretaker relatives of minor children receiving cash assistance and those receiving transitional Medicaid after the receipt of cash assistance

**New Adult Childless** - Beneficiaries age 19 or older and under 65; who are at or below 133% of the FPL who do not have dependent children

**New Adult w/Child** - Beneficiaries age 19 or older and under 65; who are at or below 133% of the FPL who have dependent children

**BD Child** – Beneficiaries under age 19; categorized as blind, disabled, and/or medically needy

**General Child** – Beneficiaries under age 19, and below the protected income level, categorized as those eligible for cash assistance including Reach Up (Title V) and foster care payments (Title IV-E)

**Underinsured Child** – Beneficiaries under age 19 or under with household income 237-312% FPL with other (primary) insurance

**CHIP** – Children's Health Insurance Program – Beneficiaries under age 19 with household income 237-312% FPL with no other insurance

**Sunsetted Programs** - Expenditures still being incurred for programs no longer active such as VHAP, VHAP ESI, and Catamount.

**Vermont Premium Assistance** - Individuals enrolled in qualified health plans (QHP) with incomes at or below 300% FPL

**Vermont Cost Sharing** - Individuals enrolled in qualified health plans (QHP) with incomes at or below 300% FPL

**Pharmacy Only** – Assistance to help pay for prescription medicines based on income, disability status, and age

**Choices for Care - Traditional** - Vermont's Long Term Care Medicaid Program; for Vermonters in nursing homes, home-based settings, and/or enhanced residential care (ERC)

**Choices for Care - Acute** - Long Term Care Medicaid for Vermonters who would otherwise qualify for Choices for Care - Traditional, but who are currently receiving a lower level of care

**PMPM** – Per Member Per Month

**The Department of Vermont Health Access**  
**Caseload and Expenditure Report**  
**All AHS and AOE YTD SFY'19**

Medicaid Eligibility Group	SFY'19 BAA			SFY'19 Actuals Thru March 31, 2019			% of Expenses to Budget Line Item
	Caseload	Budget	PMPM	Caseload	Expenses	PMPM	
ABD Adult	6,250	\$ 146,702,165	\$ 1,956.03	6,489	\$ 105,595,983	\$ 1,808.09	71.98%
ABD Dual	17,742	\$ 242,706,736	\$ 1,139.98	17,622	\$ 165,652,545	\$ 1,044.49	68.25%
General Adult	12,958	\$ 88,656,569	\$ 570.15	10,594	\$ 57,079,910	\$ 598.68	64.38%
New Adult Childless	39,248	\$ 227,769,694	\$ 483.61	37,952	\$ 172,323,110	\$ 504.51	75.66%
New Adult w/Child	18,813	\$ 87,998,161	\$ 389.79	18,954	\$ 69,477,985	\$ 407.29	78.95%
BD Child	2,166	\$ 64,844,308	\$ 2,494.78	2,067	\$ 42,241,342	\$ 2,270.19	65.14%
General Child	59,811	\$ 332,852,007	\$ 463.76	58,846	\$ 240,620,573	\$ 454.34	72.29%
Underinsured Child	584	\$ 1,469,272	\$ 209.66	557	\$ 1,019,212	\$ 203.31	69.37%
CHIP	4,697	\$ 12,551,135	\$ 222.68	4,508	\$ 9,215,748	\$ 227.12	73.43%
Sunsetted Programs	-	\$ -		-	\$ 884,846		
Vermont Premium Assistance	19,085	\$ 6,614,098	\$ 28.88	17,163	\$ 4,588,094	\$ 29.70	69.37%
Vermont Cost Sharing	5,309	\$ 1,520,434	\$ 23.87	5,239	\$ 1,180,416	\$ 25.03	77.64%
Pharmacy Only	10,497	\$ 11,278,883	\$ 89.54	10,441	\$ 7,457,165	\$ 79.36	66.12%
Choices for Care - Traditional	4,390	\$ 209,074,560	\$ 3,968.77	4,284	\$ 151,089,078	\$ 3,918.79	72.27%
Choices for Care - Acute	4,390	\$ 31,288,498	\$ 593.94	4,284	\$ 25,092,835	\$ 650.83	80.20%
<b>Total Medicaid</b>	<b>196,241</b>	<b>\$ 1,465,326,521</b>	<b>\$ 622.25</b>	<b>189,477</b>	<b>\$ 1,053,518,841</b>	<b>\$ 617.79</b>	<b>71.90%</b>

**The Department of Vermont Health Access**  
**Caseload and Expenditure Report**  
**All AHS YTD SFY'19**

Medicaid Eligibility Group	SFY'19 BAA			SFY'19 Actuals Thru March 31, 2019			% of Expenses to Budget Line Item
	Caseload	Budget	PMPM	Caseload	Expenses	PMPM	
ABD Adult	6,250	\$ 146,644,178	\$ 1,955.26	6,489	\$ 104,734,173	\$ 1,793.33	71.42%
ABD Dual	17,742	\$ 245,148,578	\$ 1,151.45	17,622	\$ 165,542,381	\$ 1,043.80	67.53%
General Adult	12,958	\$ 88,621,911	\$ 569.93	10,594	\$ 56,899,380	\$ 596.79	64.20%
New Adult Childless	39,248	\$ 228,050,283	\$ 484.21	37,952	\$ 172,272,633	\$ 504.36	75.54%
New Adult w/Child	18,813	\$ 88,060,301	\$ 390.07	18,954	\$ 69,476,942	\$ 407.28	78.90%
BD Child	2,166	\$ 49,597,023	\$ 1,908.16	2,067	\$ 32,558,601	\$ 1,749.80	65.65%
General Child	59,811	\$ 296,053,250	\$ 412.48	58,846	\$ 215,712,547	\$ 407.30	72.86%
Underinsured Child	584	\$ 1,078,976	\$ 153.96	557	\$ 803,531	\$ 160.29	74.47%
CHIP	4,697	\$ 10,740,115	\$ 190.55	4,508	\$ 8,103,877	\$ 199.72	75.45%
Sunsetted Programs	-	\$ -		-	\$ 884,846		
Vermont Premium Assistance	19,085	\$ 6,614,098	\$ 28.88	17,163	\$ 4,588,094	\$ 29.70	69.37%
Vermont Cost Sharing	5,309	\$ 1,520,434	\$ 23.87	5,239	\$ 1,180,416	\$ 25.03	77.64%
Pharmacy Only	10,497	\$ 11,278,883	\$ 89.54	10,441	\$ 7,457,165	\$ 79.36	66.12%
Choices for Care - Traditional	4,390	\$ 209,074,560	\$ 3,968.77	4,284	\$ 151,089,078	\$ 3,918.79	72.27%
Choices for Care - Acute	4,390	\$ 32,083,931	\$ 609.03	4,284	\$ 25,092,835	\$ 650.83	78.21%
<b>Total Medicaid</b>	<b>196,241</b>	<b>\$ 1,414,566,521</b>	<b>\$ 600.69</b>	<b>189,477</b>	<b>\$ 1,016,396,499</b>	<b>\$ 596.02</b>	<b>71.85%</b>

**The Department of Vermont Health Access**  
**Caseload and Expenditure Report**  
**DVHA Only YTD SFY'19**

Medicaid Eligibility Group	SFY'19 BAA			SFY'19 Actuals Thru March 31, 2019			% of Expenses to Budget Line Item
	Caseload	Budget	PMPM	Caseload	Expenses	PMPM	
ABD Adult	6,250	\$ 57,191,818	\$ 762.56	6,489	\$ 45,774,347	\$ 783.78	80.04%
ABD Dual	17,742	\$ 57,507,834	\$ 270.11	17,622	\$ 42,496,299	\$ 267.95	73.90%
General Adult	12,958	\$ 75,554,021	\$ 485.89	10,594	\$ 48,749,849	\$ 511.31	64.52%
New Adult Childless	39,248	\$ 202,267,933	\$ 429.47	37,952	\$ 153,909,121	\$ 450.60	76.09%
New Adult w/Child	18,813	\$ 81,007,952	\$ 358.83	18,954	\$ 64,671,411	\$ 379.11	79.83%
BD Child	2,166	\$ 20,395,140	\$ 784.67	2,067	\$ 15,471,913	\$ 831.51	75.86%
General Child	59,811	\$ 155,918,142	\$ 217.24	58,846	\$ 122,783,803	\$ 231.84	78.75%
Underinsured Child	584	\$ 502,278	\$ 71.67	557	\$ 358,640	\$ 71.54	71.40%
CHIP	4,697	\$ 8,362,970	\$ 148.37	4,508	\$ 6,812,246	\$ 167.89	81.46%
Sunsetted Programs	-	\$ -		-	\$ 884,846		
Vermont Premium Assistance	19,085	\$ 6,614,098	\$ 28.88	17,163	\$ 4,588,094	\$ 29.70	69.37%
Vermont Cost Sharing	5,309	\$ 1,520,434	\$ 23.87	5,239	\$ 1,180,416	\$ 25.03	77.64%
Pharmacy Only	10,497	\$ 11,278,883	\$ 89.54	10,441	\$ 7,457,165	\$ 79.36	66.12%
Choices for Care - Traditional	4,390	\$ 209,074,560	\$ 3,968.77	4,284	\$ 151,089,078	\$ 3,918.79	72.27%
Choices for Care - Acute	4,390	\$ 28,306,765	\$ 537.33	4,284	\$ 23,373,425	\$ 606.24	82.57%
<b>Total Medicaid</b>	<b>196,241</b>	<b>\$ 915,502,828</b>	<b>\$ 388.77</b>	<b>189,477</b>	<b>\$ 689,600,652</b>	<b>\$ 404.39</b>	<b>75.32%</b>