

# 2018 Vermont Health Care Expenditure Analysis

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Date July 8, 2020



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# 2018 Vermont Health Care Expenditure Analysis-Intro



The *Vermont Health Care Expenditure Analysis (VHCEA)* is required under 18 V.S.A. §9375a § 9383.

Since 1991, the Board has been tasked with developing an annual expenditure analysis, as well as estimates of future health care spending.

This report:

- ✔ Examines trends in spending and sources of funds, analyzes broad sectors including hospitals, physician services, mental health, home health, and pharmacy. It also analyzes payers including Medicare, Medicaid, commercial plans, self-insured employers, and health maintenance organizations;
- ✔ Quantifies total spending for all health care services provided in Vermont for residents and non-residents, and for services provided to Vermonters regardless of site of service; and
- ✔ Compares Vermont data to national data reflected in the National Health Accounts published by the Centers for Medicare & Medicaid Services (CMS).

# 2018 Vermont Health Care Expenditure Analysis-Summary



## Vermont resident health care spending:

- † Total spending for Vermont residents receiving health care services both in- and out-of-state **increased 1.9% in 2018**. This was lower than the 3.7% increase in 2017 and the average annual increase of 3.4% for the period 2013 through 2018.
- † Commercial insurance spending increased 1.7%, mainly due to increases in Hospitals, Drugs & Supplies and Other Unclassified.
- † Medicare spending increased 5.1% as a result of increases in utilization for Home Health, Nursing Homes, Hospitals, Physicians and Drugs & Supplies.
- † Medicaid spending increased 1.1%, mainly due to increases in Mental Health & Other Government Activities, Other Professionals and Home Health.

## Vermont has seen a payer shift over time for health care services:

- † For the period 2010 through 2018, the percentage of total resident costs paid by commercial insurers decreased from 38% to 33%, and out-of-pocket spending decreased from 14% to 13%. In contrast, Medicaid grew from 24% to 27%, and Medicare increased from 19% to 24%.

This symbol is used when a slide is prepared from Vermont resident analysis data.



# 2018 Vermont Health Care Expenditure Analysis-Summary



## Vermont compared to United States:

- † Vermont expenditures are compared to U.S. health consumption spending.
- † For 2018, Vermont increased 1.9% from 2017, U.S. health consumption spending increased 4.8%. Vermont was lower than the 3.7% increase in 2017 while U.S. spending was higher than the 4.0% increase in 2017.
- † Per person spending (per capita) in Vermont was \$9,995 an increase of 1.4% over 2017. This is lower than the U.S. per person amount of \$10,640.
- † Vermont's health share of Gross Domestic Product is 18.8% compared to the U.S. of 16.9%.

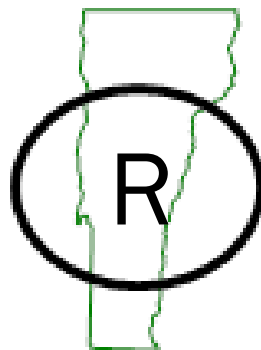
## Vermont providers health care revenues received:

- † Health care service revenues received by Vermont providers for in- and out-of-state patients increased 3.2% in 2018 and an average annual increase of 3.4% for the period 2013 through 2018.
- † Growth reported in revenues for Hospitals increased 3.5%; this category includes revenues for hospital-employed physicians.
- † Revenues increased 11.0% for Other Licensed Professionals, 9.5% for Home Health Care, 3.2% for Independent Physicians, for 2.2% Vision & DME, and 1.0% for Drugs & Supplies. These increases were offset by a decline of 2.3% for Nursing Homes.

This symbol is used when a slide is prepared from Vermont provider analysis data.



# 2018 Vermont Resident Analysis



# Vermont Resident Analysis

## Relationship to Total Cost of Care



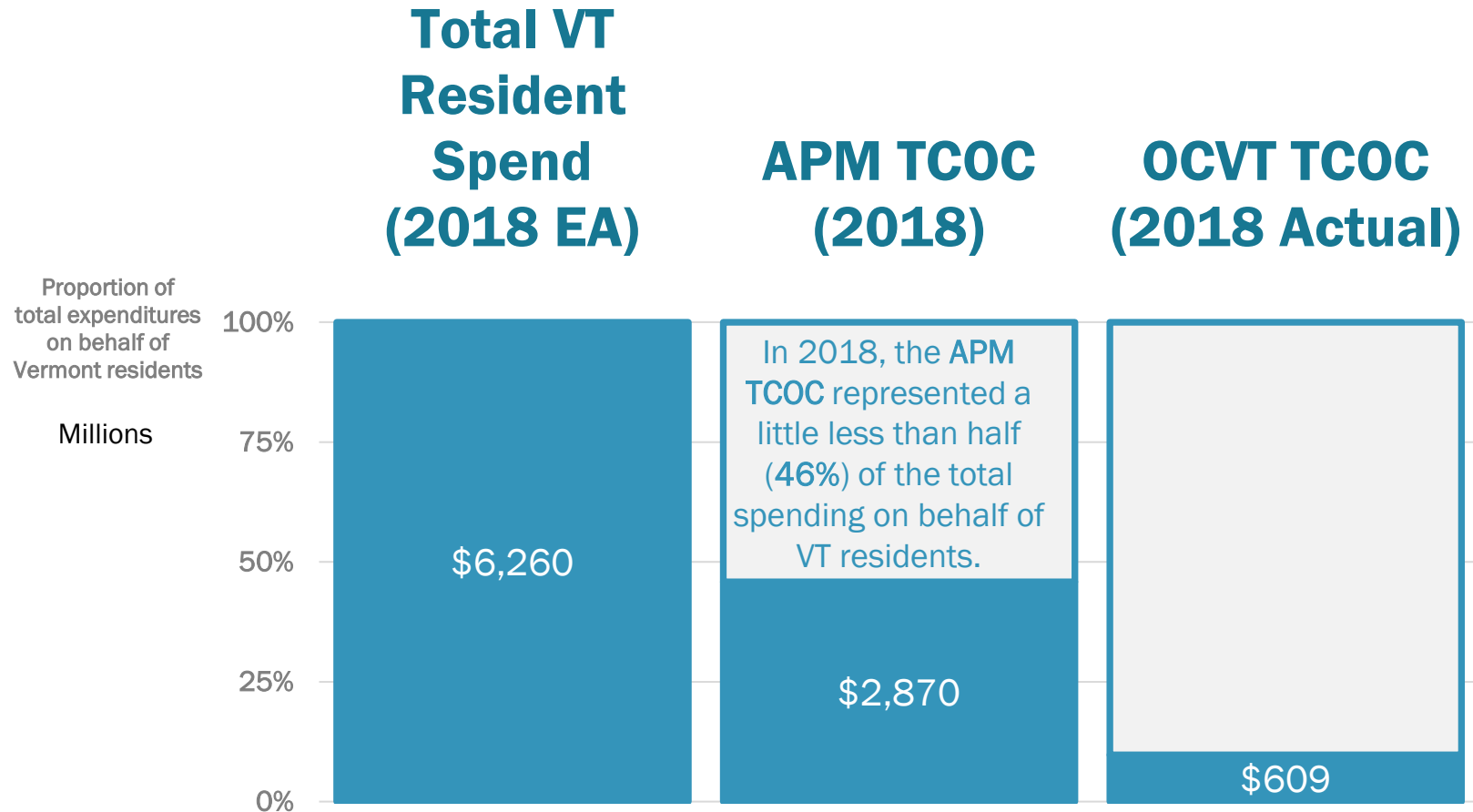
- † The VHCEA measures expenditures at a broader, comprehensive level compared to the Total Cost of Care (TCOC) as described in the All-Payer Accountable Care Organization (ACO) Model Agreement\*.
- † The VHCEA's resident analysis estimates all Vermont residents
  - † The TCOC is a subset of the VHCEA resident analysis, excluding certain populations such as Vermont residents without insurance or covered by the Federal Employee Health Benefits Plan.
- † The VHCEA's provider analysis estimates includes all populations receiving services in Vermont, regardless of their residence.
  - † The TCOC focuses on Vermont residents.
- † The VHCEA Resident and Provider Analyses estimates total expenditures.
  - † The TCOC is limited to claim payments for the types of services covered by traditional Medicare or non-claims payments related to direct medical care (e.g., care management, capitation).
- † The TCOC does not include retail pharmacy.

\*Note: The All-Payer Accountable Care Organization (ACO) Model Agreement is between Vermont and the federal Centers for Medicare and Medicaid Services (CMS).



# 2018 Vermont Health Care Expenditure Analysis-TCOC

Comparing Expenditure Measures (in millions)





# Vermont Resident Health Care Expenditures 2013-2018

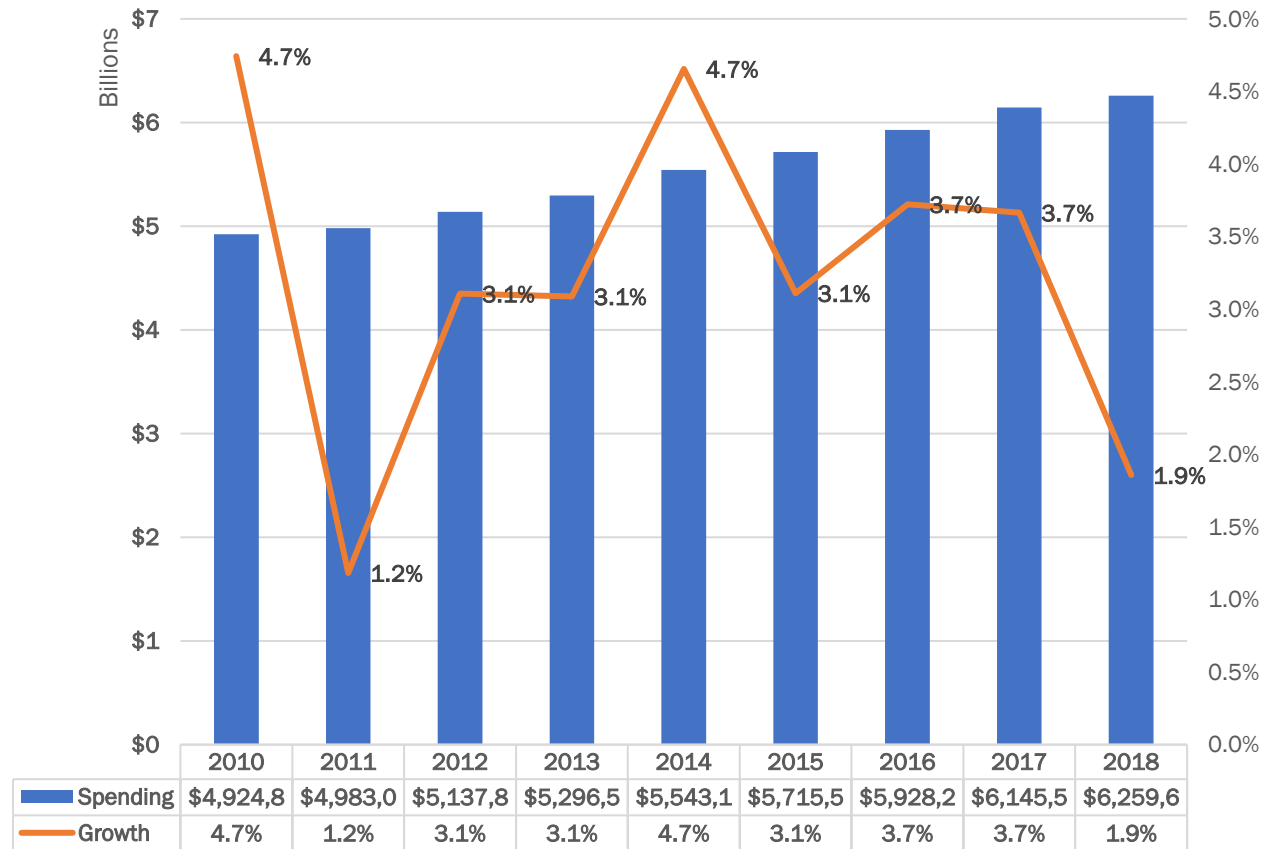


Payers	2013	2014	2015	2016	2017	2018	2017-2018 Annual Change	2017-2018 Annual Change	2013-2018 Average Annual Change
Out-of-Pocket	\$722	\$722	\$735	\$762	\$761	\$784	\$23	3.0%	1.7%
Commercial	\$1,892	\$1,920	\$1,846	\$1,971	\$2,021	\$2,054	\$33	1.7%	1.7%
Medicare	\$1,120	\$1,195	\$1,280	\$1,301	\$1,443	\$1,516	\$73	5.1%	6.2%
Medicaid	\$1,379	\$1,490	\$1,631	\$1,661	\$1,657	\$1,676	\$18	1.1%	4.0%
Other Government	\$183	\$216	\$223	\$233	\$264	\$230	(\$34)	-12.8%	4.7%
Total Resident Expenditures	\$5,297	\$5,543	\$5,716	\$5,928	\$6,146	\$6,260	\$114	1.9%	3.4%
Annual Percent Change	3.1%	4.7%	3.1%	3.7%	3.7%	1.9%			

Providers & Facilities	2013	2014	2015	2016	2017	2018	2017-2018 Annual Change	2017-2018 Annual Change	2013-2018 Average Annual Change
Hospitals	\$2,005	\$2,050	\$2,161	\$2,075	\$2,235	\$2,270	\$35	1.6%	2.5%
Physicians	\$711	\$739	\$765	\$882	\$924	\$938	\$14	1.6%	5.7%
Dentists	\$222	\$233	\$237	\$244	\$146	\$148	\$2	1.4%	-7.8%
Other Professionals	\$168	\$195	\$210	\$196	\$234	\$237	\$3	1.1%	7.1%
Home Health Care	\$104	\$111	\$122	\$142	\$101	\$127	\$26	25.9%	4.1%
Drugs & Supplies	\$638	\$683	\$788	\$773	\$758	\$799	\$41	5.4%	4.6%
Vision & DME	\$119	\$121	\$123	\$119	\$157	\$113	(\$44)	-27.9%	-1.0%
Nursing Homes	\$285	\$283	\$276	\$292	\$302	\$314	\$12	4.1%	2.0%
Other Unclassified	\$50	\$67	\$78	\$72	\$77	\$86	\$9	11.3%	11.4%
Admin & Net Cost of Health Insurance	\$354	\$356	\$206	\$366	\$416	\$402	(\$13)	-3.2%	2.6%
Mental Health & Other Govt Activities	\$641	\$705	\$751	\$766	\$797	\$825	\$29	3.6%	5.2%
Total Resident Expenditures	\$5,297	\$5,543	\$5,716	\$5,928	\$6,146	\$6,260	\$114	1.9%	3.4%
Annual Percent Change	3.1%	4.7%	3.1%	3.7%	3.7%	1.9%			

# Vermont Resident Health Care Spending 2010-2018

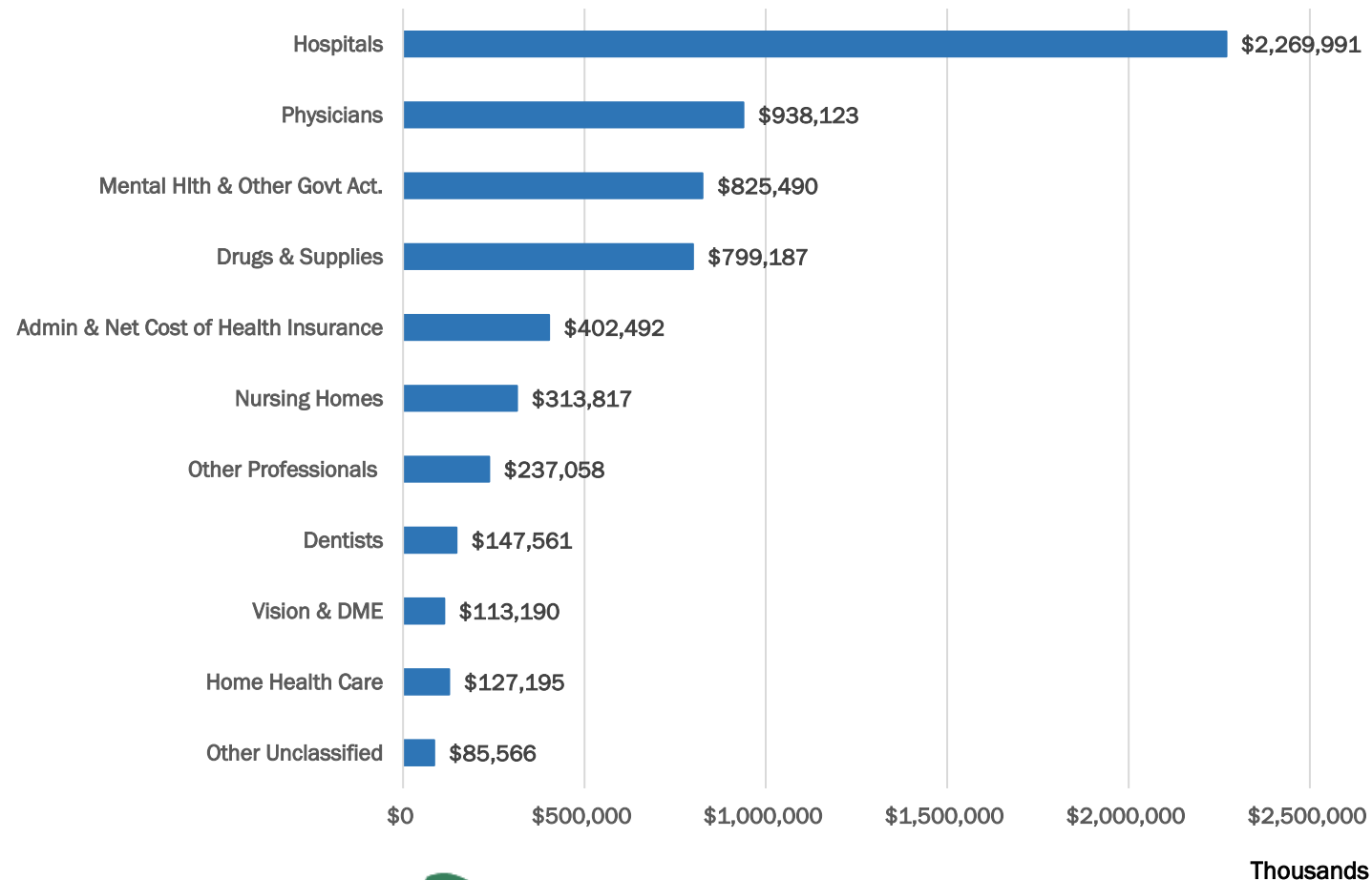
Spending increased from \$4.9 billion in 2010 to \$6.3 billion in 2018, an average annual increase of 3.0%. The increase from 2017 to 2018 was 1.9%.



# Vermont Resident Health Care Spending for 2018



In- and Out-of-State Spending on Services by Provider Category: (\$6.3 billion)

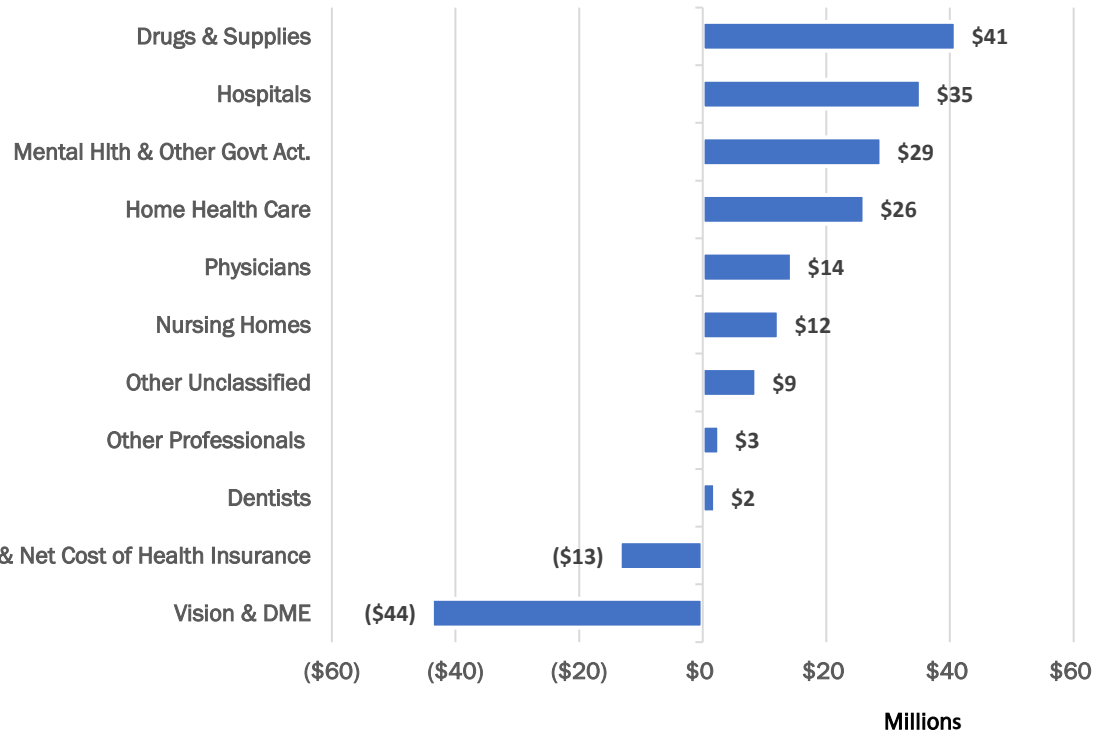


# Vermont Resident Health Care Spending Increased \$114.1 million from 2017 to 2018



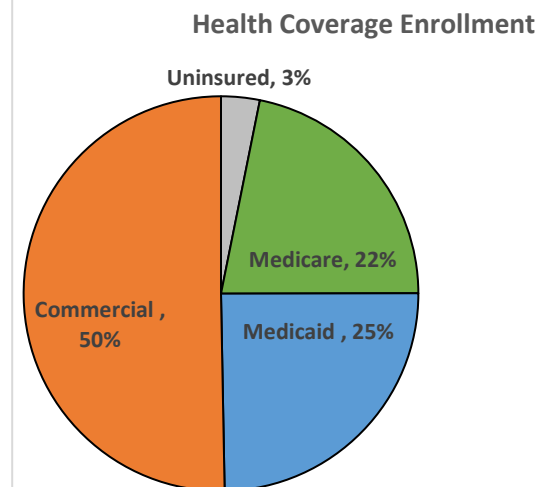
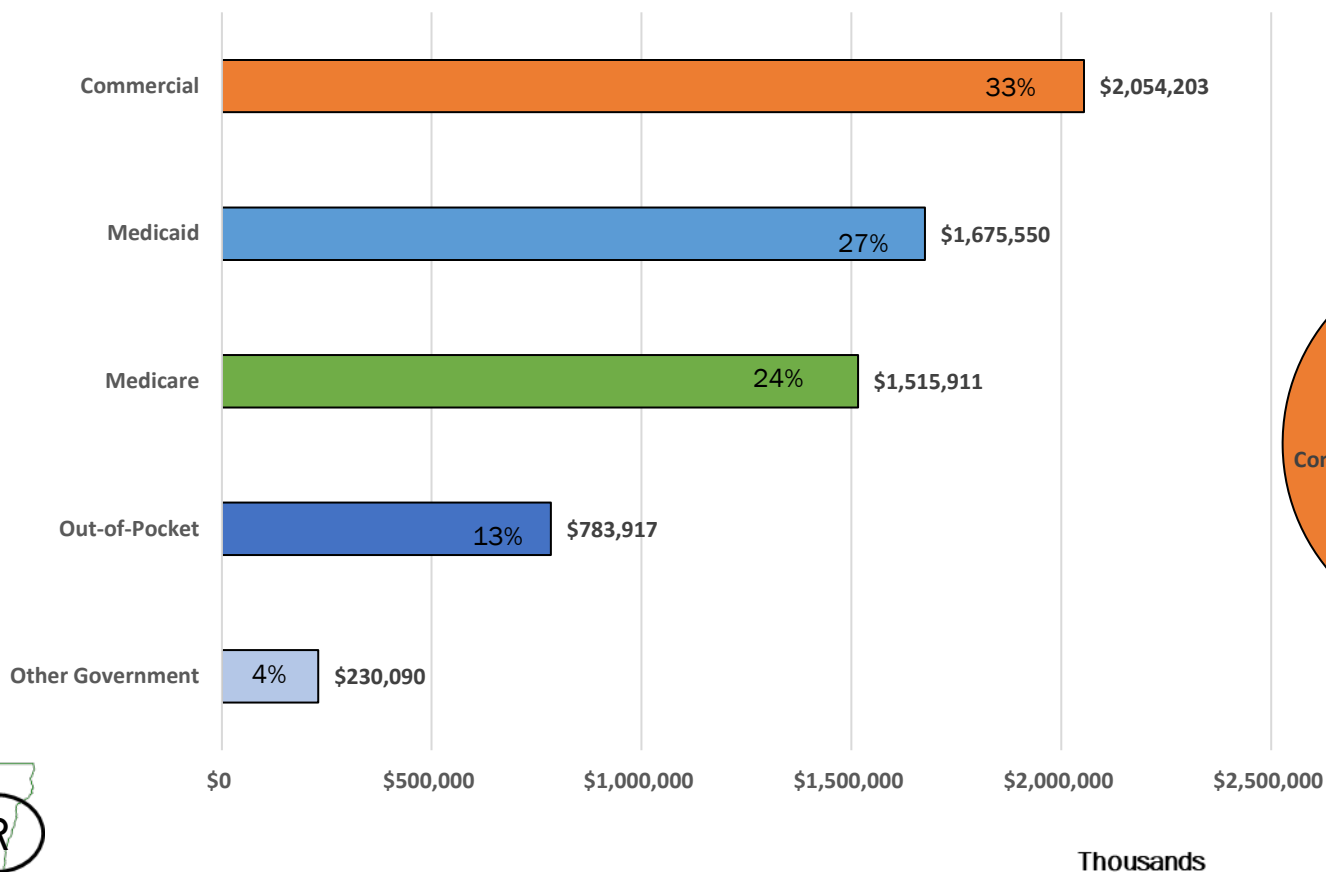
Provider categories and payer types with the largest increases included:

- Drugs and Supplies reported in Commercial Insurance and Out-of-Pocket.
- Hospitals showed increases in Commercial Insurance and Out-of-Pocket.
- Mental Health & Other Government Activities (such as Mental Health Clinics, Home & Community Based Services) reported increases in Medicaid
- Home Health Care increased in Medicare.
- Physicians increased in Medicare and Out-of-Pocket.



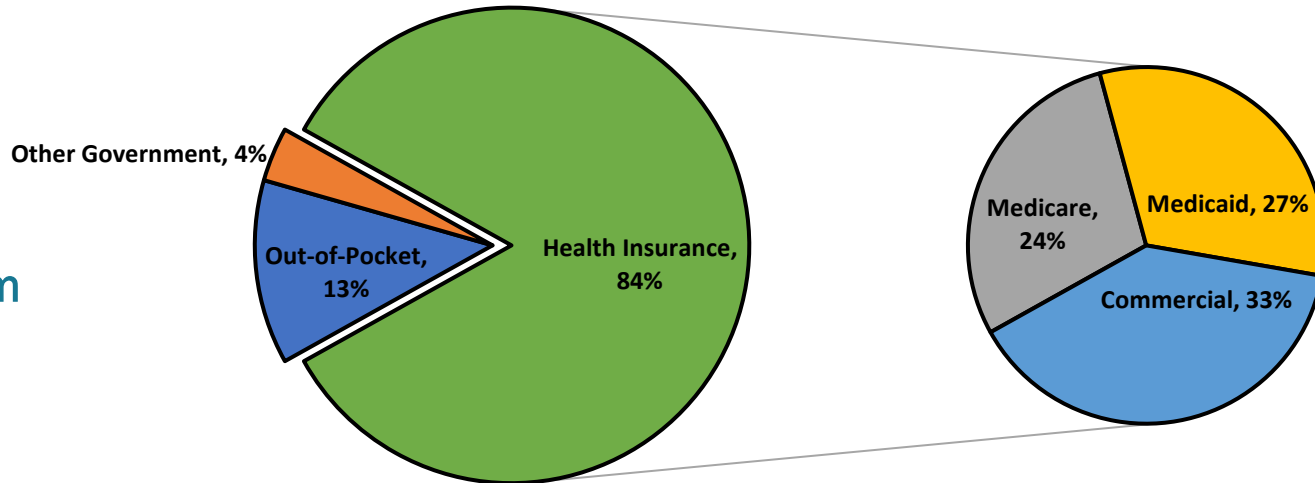
# Vermont Resident Health Care Spending for 2018

In- and Out-of-State Spending on Services by Payer:  
(\$6.3 billion) an increase of 1.9% from 2017

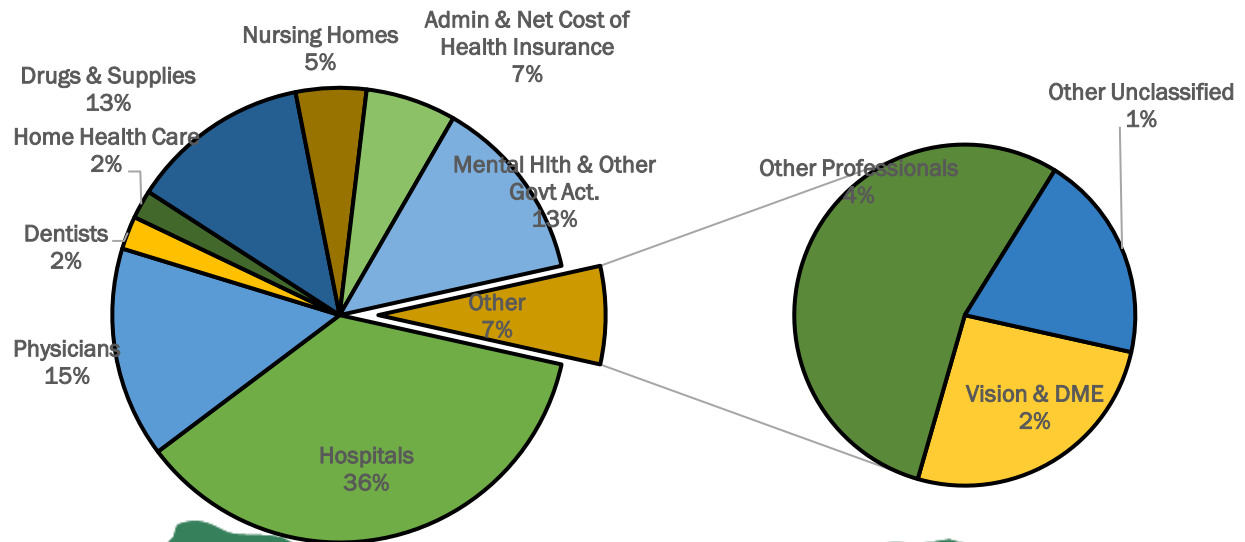


# Vermont Resident Health Care Spending for 2018 - \$6.3 Billion

## Where It Came From



## Where It Went




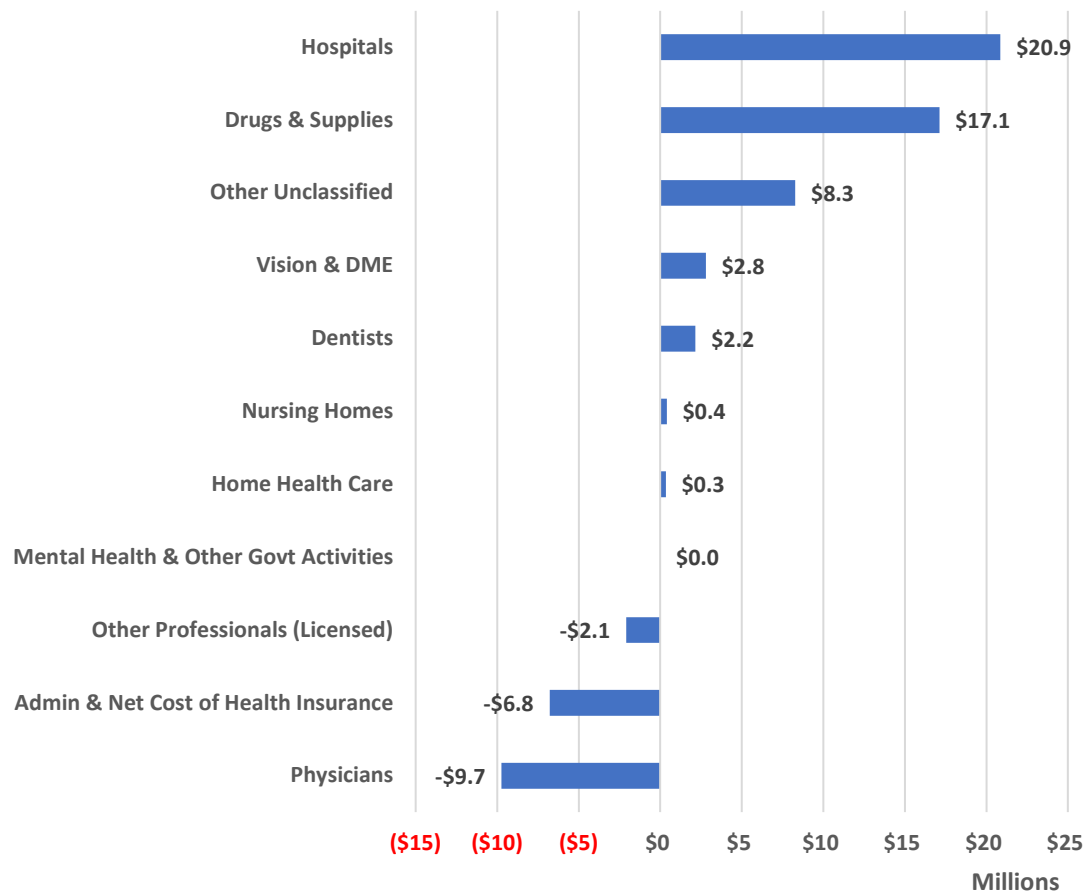
# Vermont Resident Health Care Spending - Commercial Insurance

↑ Commercial Insurance spending increased by \$33.4 million, 1.7% to a total of \$2.1 billion, mainly caused by increases in Hospitals, Drugs & Supplies and Other Unclassified.

↓ Decreases were reported in Physicians, Admin. & Net Cost of Health Insurance and Other Professionals.

- In-state spending for commercially-insured residents remained between 75% and 76%.

 Commercial insurance enrollment decreased to 314,989, or -2.3%, from 2017



# Vermont Resident Health Care Spending - Medicare

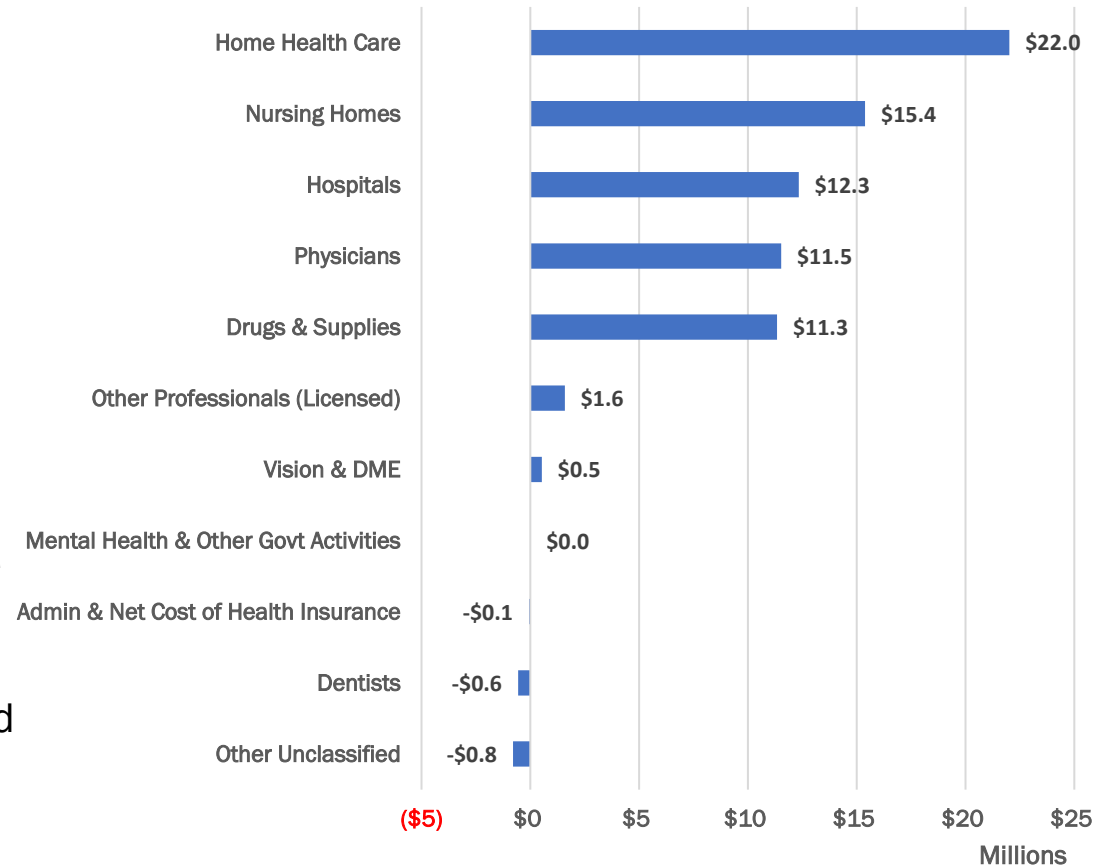
↑ Medicare increased by \$73.3 million, 5.1% to a total of \$1.5 billion, mainly caused by increases in Home Health, Nursing Homes, Hospitals, Physicians and Drugs & Supplies.

↓ Decreases were reported in, Other Unclassified, Dentists, and Admin. & Net Cost of Health Insurance.

- In-state spending for Medicare beneficiaries increased from 68% in 2017 to 73% in 2018.



Medicare enrollment increased to 136,567, or 2.0%, from 2017.





# Vermont Resident Health Care Spending - Medicaid

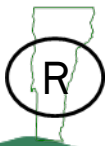
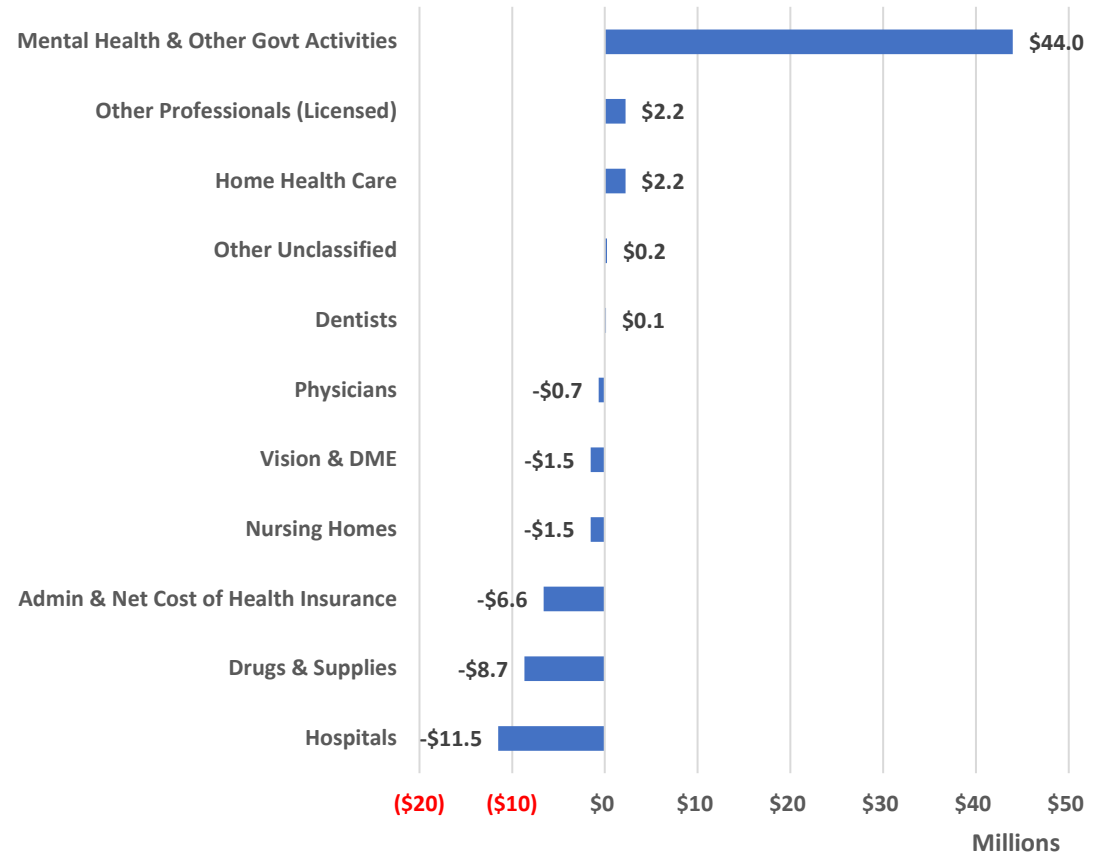
↑ Medicaid increased by \$18.3 million, 1.1% to a total of \$1.7 billion, mainly caused by increases in the categories of: Mental Health & Other Government Activities, Other Professionals, Home Health.

↓ Spending decreased the most in Hospitals, Drugs & Supplies (net of rebates), Admin. & Net Cost of Health Insurance.

- In-state spending for Medicaid beneficiaries remained between 85% and 86%.



Medicaid enrollment increased to 154,943 or 3.0% from 2017.

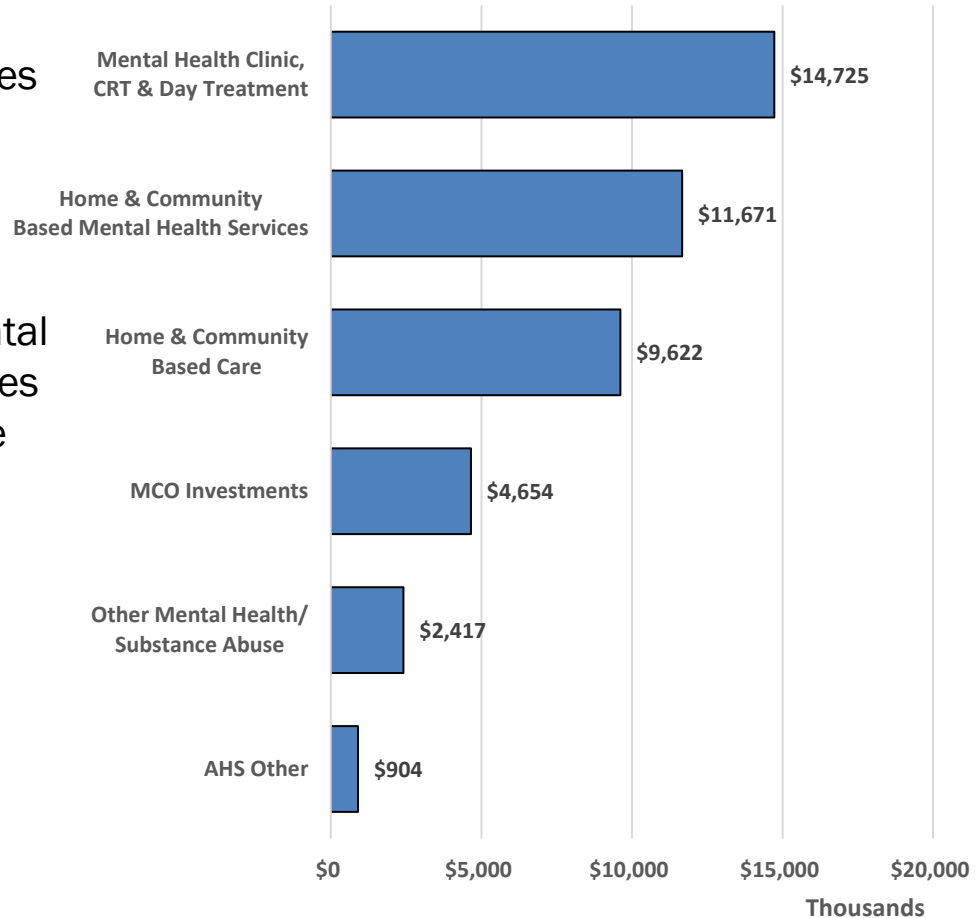


# Vermont Resident

## Health Care Spending – Mental Health & Other Government Activities

The Medicaid increases in Mental Health & Other Government Activities include the following:

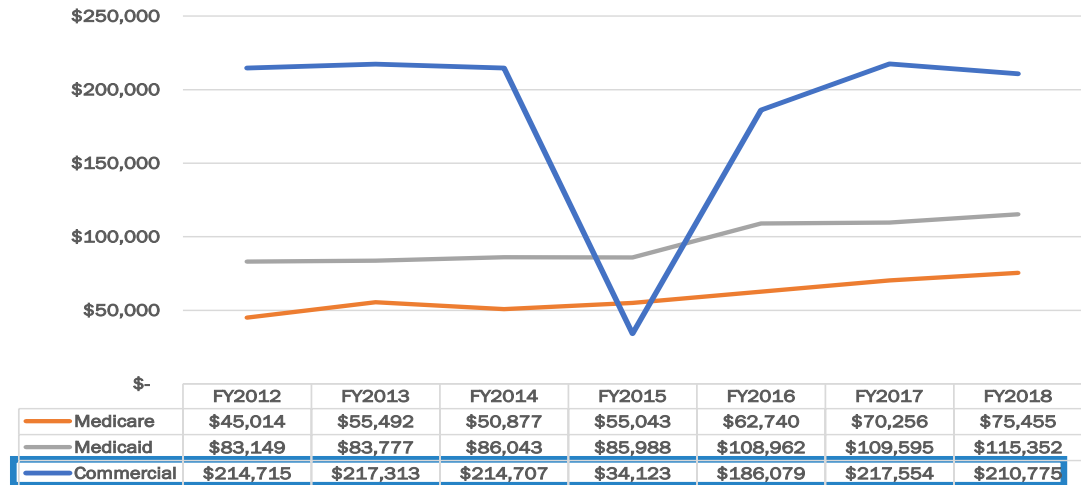
- Mental Health Clinics
- Community Rehab Treatment
- Day Treatment
- Home & Community Based Mental Health and Development Services
- Home & Community Based Care such as Aged and Disabled, Enhanced Residential Care, Assistive Community Care
- Managed Care Organization Investments
- Other Mental Health and Substance Abuse Services
- And Miscellaneous Other AHS services.



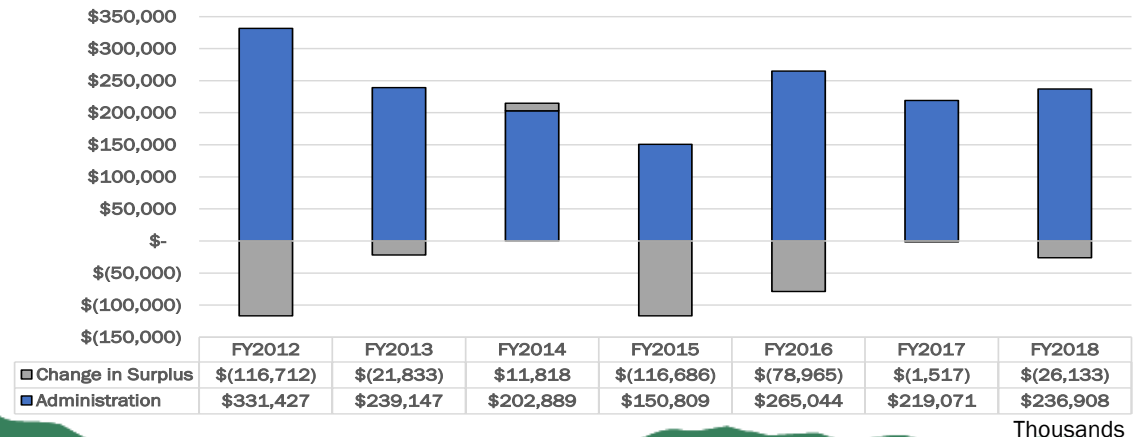
# Vermont Resident Health Care Analysis

- **Net Cost of Health Insurance** is the difference between premiums earned and benefits incurred. It consists of items such as premium taxes, administrative costs, net additions to reserves, and profits or losses.
- The change in spending for Administration & Net Cost of Health Insurance is **one of the major factors in growth swings in total spending by payer**, particularly for Commercial Insurance, due to the ACA fees payable to the federal government every other year.
- Commercial Insurance has **two components** in this category: Administration and Change in Surplus. Medicare and Medicaid have the Administration component only.

Administration & Net Cost of Health Insurance Trend

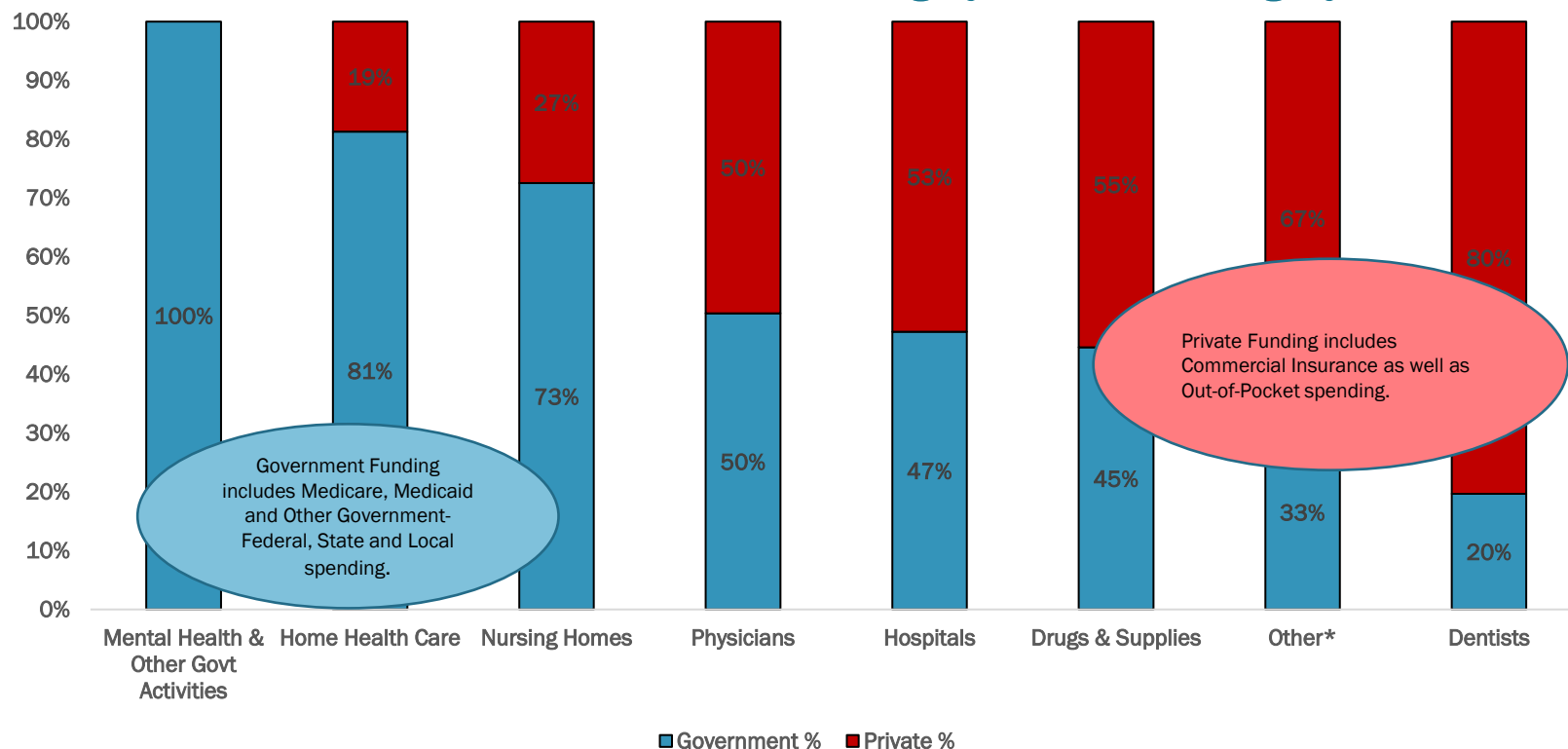


Commercial Trend Components of Administration & Net Cost of Health Insurance



# Vermont Resident Health Care Analysis

## Government vs. Private Funding by Provider Category



\*"Other" includes services rendered by other professionals, durable medical equipment suppliers, vision providers, and other miscellaneous providers.

# Vermont Resident Health Care Analysis National Health Expenditures

Measures annual expenditures

Health care and services  
Public health activities  
Government  
administrations  
Net cost of health  
insurance  
Health Care Investments

Data

Type of expenditure  
Source of Funding  
Sponsor (private,  
governments or  
household)

State Health Expenditures

Every 5 years  
Primary source is the  
Economic Census  
Estimates provider and  
resident expenditures



# Vermont Resident Health Care Analysis

## National Health Expenditures (NHE)

### Health Consumption Expenditures (HCE)\*

Investments  
in Research,  
Structures &  
Equipment

### Person Health Care (PHC)

Administration  
& Net cost of  
insurance

Public Health  
Activity

Hospitals

Professional  
Services

Home Health

Nursing Care  
Facilities

Rx, DME,  
Supplies

Physicians  
Other  
Professionals  
Dental

\*HCE-comparable to Vermont Expenditure Analysis



# Vermont Resident Health Care Analysis

## VHCEA Results Compared to CMS NHC Results

	NHE	HCE	PHC
Total Spend CMS (millions)	\$3,649,388	<b>\$3,475,024</b>	\$3,075,464
Total Spend Annual % Change 2017-2018 (CMS)	4.7%	<b>4.8%</b>	4.1%
Total Spend Vermont Exp. Analysis (millions)		<b>\$6,260</b>	
Total Spend Annual % Change 2017-2018 (VT)		<b>1.9%</b>	
Per Capita Spend CMS	\$11,174	<b>\$10,640</b>	\$9,417
Per Capita Spend Annual % Chg 2017- 2017 (CMS)	4.1%	<b>4.1%</b>	3.5%
Per Capita Spend Vermont Exp. Analysis		<b>\$9,995</b>	
Per Capita Spend Annual % Chg 2017 - 2018 (VT)		<b>1.4%</b>	
Share of Gross State/Domestic Product (CMS)	17.7%	<b>16.9%</b>	14.9%
Share of Gross State/Domestic Product (VT)		<b>18.8%</b>	

National Health Expenditures (NHE) includes categories of spending that Vermont does not record. These include Research, Structures and Equipment.

Health Consumption Expenditures (HCE) is a subset of the NHE and has the array of categories of service most comparable to Vermont Expenditure Analysis.

Personal Health Care (PHC) is a subset of the HCE spending as it does not include Government Administration, Net Cost of Health Insurance and Government Public Health Activities.

# Vermont Resident Health Care Analysis

## History of VHCEA Results Compared to CMS NHC Results

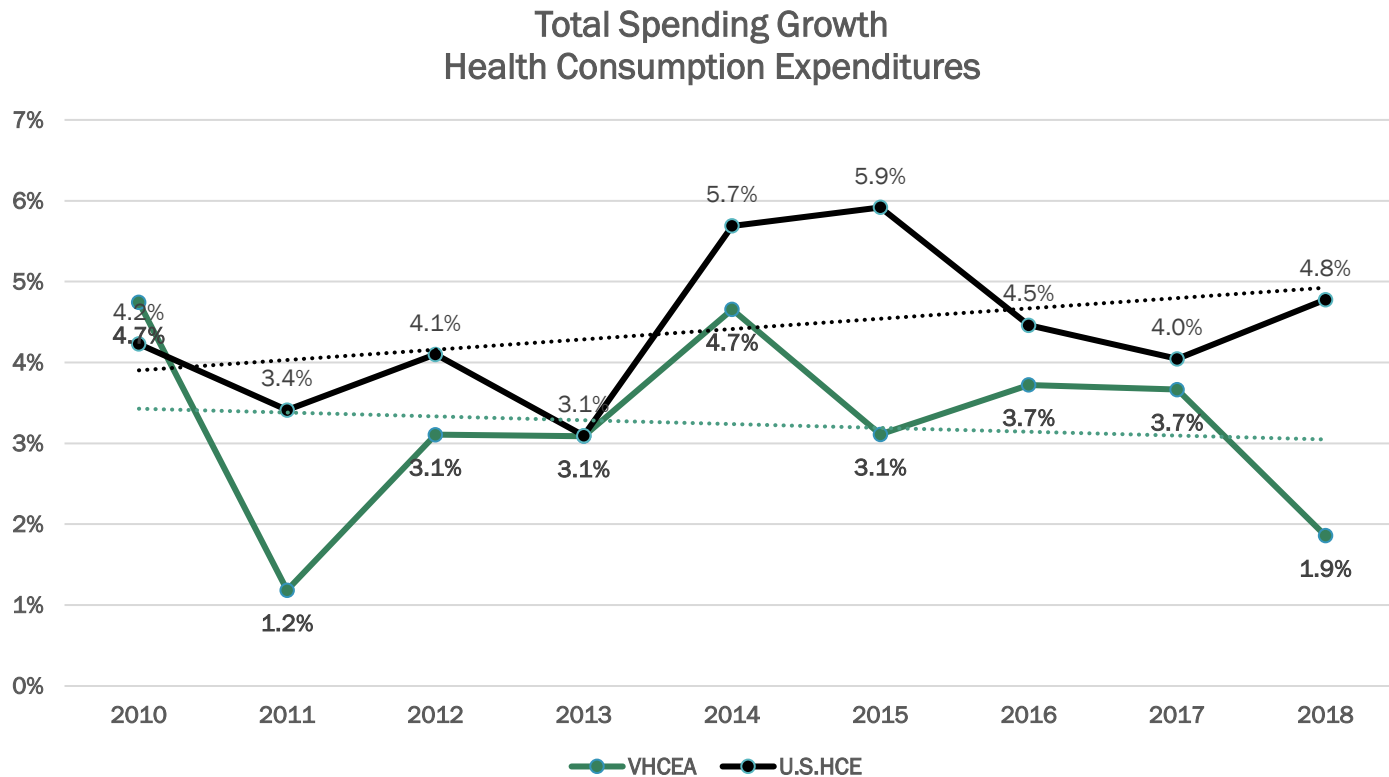
	2010	2011	2012	2013	2014	2015	2016	2017	2018
Vermont Population	625,741	626,431	626,011	626,630	626,562	626,042	624,594	623,657	626,299
Vt Per Capita - Health Expenditures									
Vt Per Capita - Health Consumption Expenditures	\$7,870	\$7,955	\$8,207	\$8,452	\$8,847	\$9,130	\$9,491	\$9,854	\$9,995
Vt Per Capita - Personal Health Care	\$6,338	\$6,513	\$6,714	\$6,865	\$7,154	\$7,602	\$7,679	\$7,910	\$8,034

U.S. Population (in millions)	308.9	311	313.3	315.5	317.9	320.1	322.5	324.6	326.6
U.S. Per Capita	\$8,413	\$8,647	\$8,928	\$9,125	\$9,534	\$10,015	\$10,375	\$10,734	\$11,174
U.S. Per Capita - Health Consumption Expenditures	\$7,951	\$8,167	\$8,439	\$8,640	\$9,063	\$9,533	\$9,884	\$10,217	\$10,640
U.S. Per Capita - Personal Health Care	\$7,109	\$7,312	\$7,555	\$7,723	\$8,057	\$8,490	\$8,801	\$9,102	\$9,417



# Vermont Resident Health Care Analysis - Spending Growth

## VHCEA Results Compared to CMS NHC Results

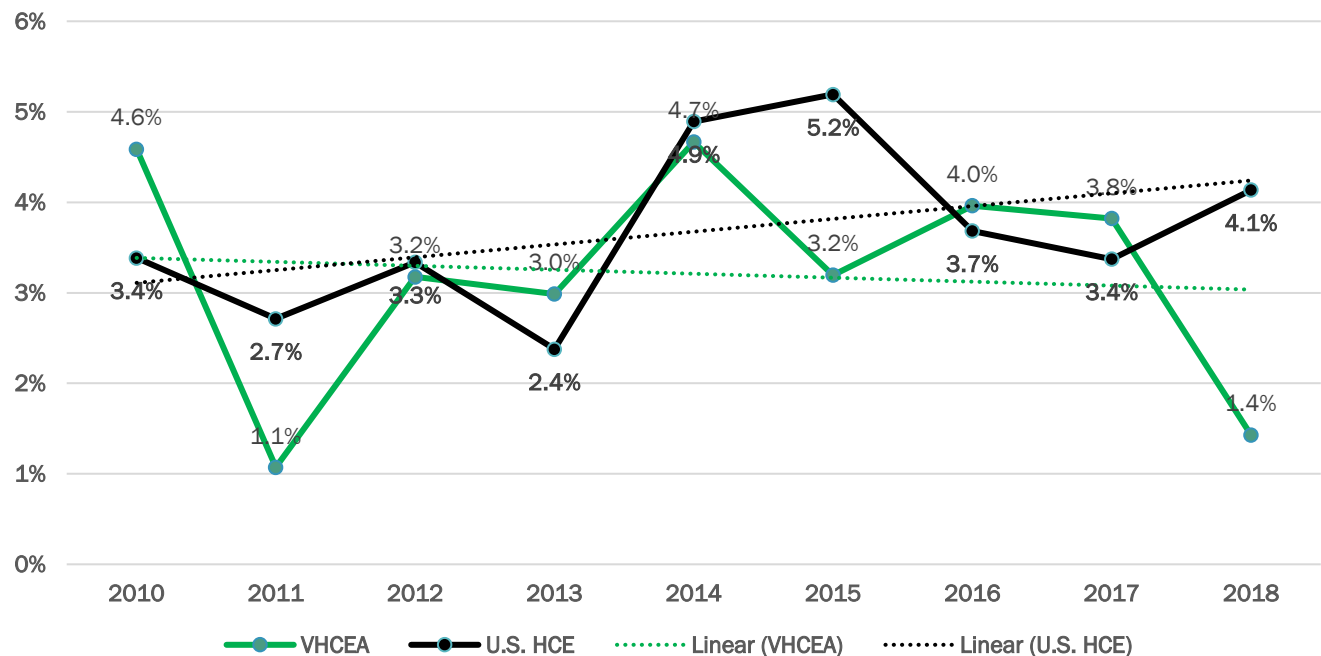


# Vermont Resident Health Care Analysis - per Capita

## VHCEA Results Compared to CMS NHC Results

As of 2018, Vermont's per Capita growth was less than the 3.0% average annual increase for the period 2010-2018. The U.S. per Capita was more than the 3.7% average annual increase for the same period.

Per Capita Growth (per person)  
Health Consumption Expenditures

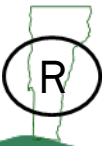
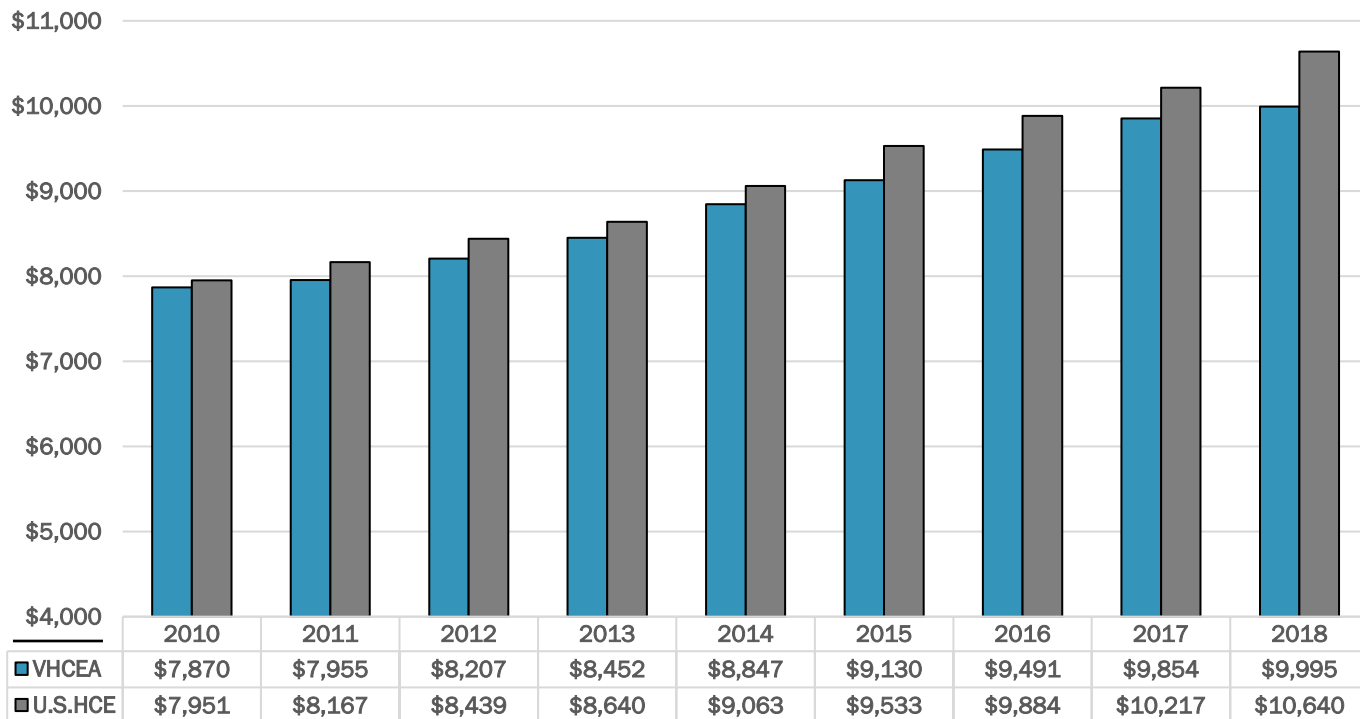


# Vermont Resident Health Care Analysis – per Capita



## VHCEA Results Compared to CMS NHC Results

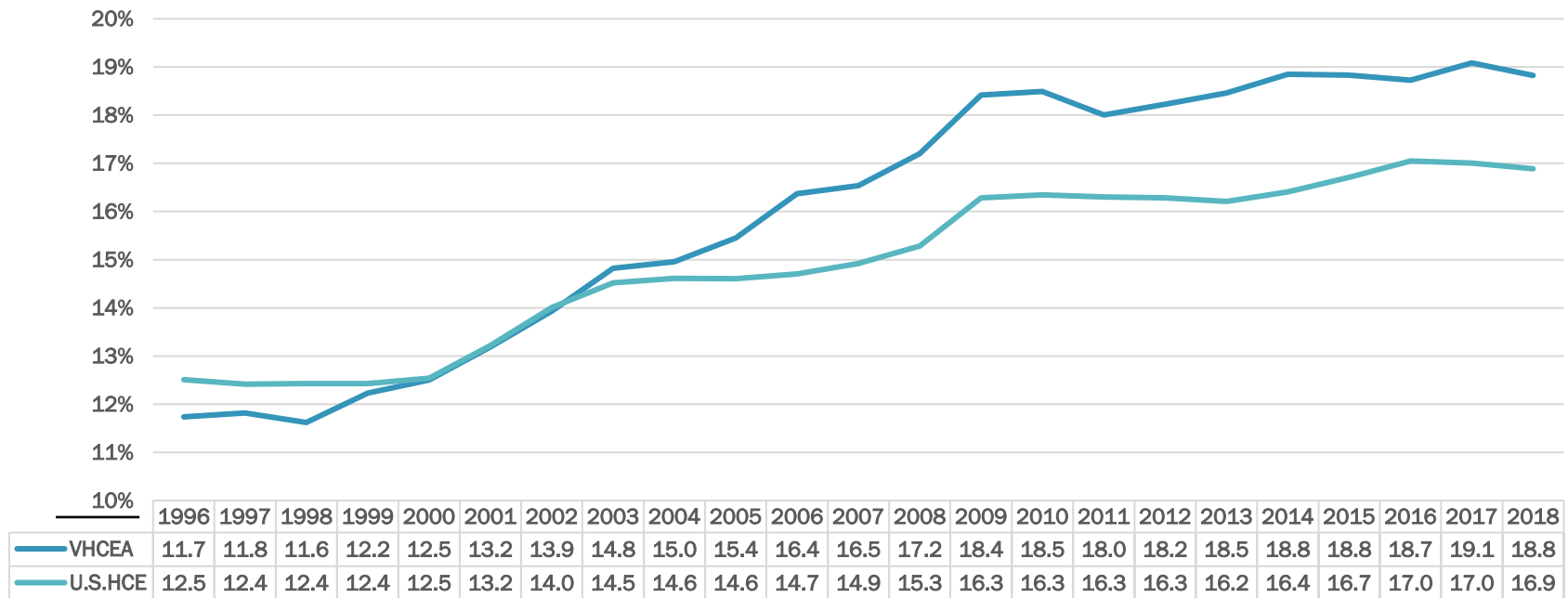
Per Capita (per person)  
Health Consumption Expenditures



# Vermont Resident Health Care Analysis - % of GSP

## VHCEA Results Compared to CMS NHC Results

Health Care Share of GSP-Annual Growth



**Note:** Gross State Product (GSP) is a measurement of the economic output of a state. It is the sum of all value added by industries within the state and serves as a counterpart to the Gross Domestic Product (GDP), which measures national economic output.



# 2018 Vermont Provider Analysis

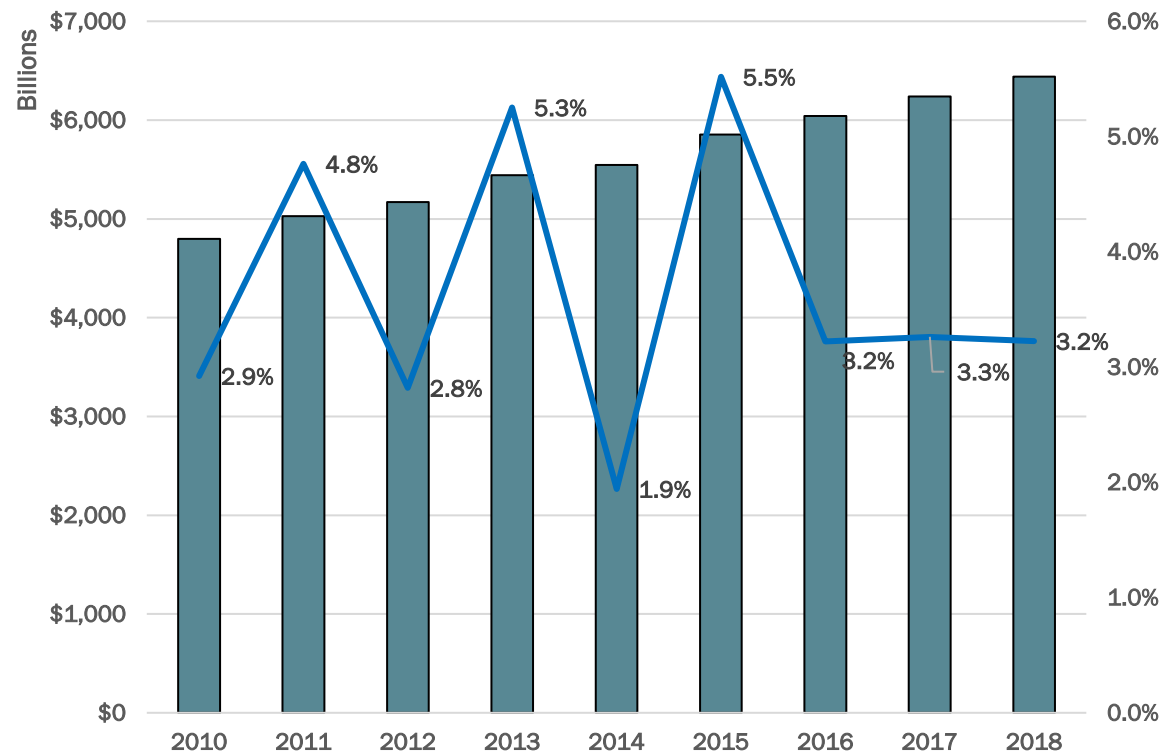


# Vermont Provider Health Care Revenues 2013-2018

Payers	2013	2014	2015	2016	2017	2018	2017-2018 Annual Change	2017-2018 Annual Change	2013-2018 Annual Change
Out-of-Pocket	\$765	\$734	\$731	\$768	\$718	\$755	\$38	5.2%	-0.3%
Commercial	\$1,838	\$1,819	\$1,979	\$2,001	\$2,134	\$2,162	\$27	1.3%	3.3%
Medicare	\$1,229	\$1,324	\$1,384	\$1,454	\$1,536	\$1,626	\$90	5.8%	5.8%
Medicaid	\$1,361	\$1,389	\$1,462	\$1,508	\$1,505	\$1,558	\$53	3.5%	2.7%
Other Government	\$248	\$281	\$297	\$309	\$345	\$338	(\$7)	-1.9%	6.4%
Total Provider Revenues	\$5,441	\$5,546	\$5,853	\$6,041	\$6,238	\$6,439	\$201	3.2%	3.4%
Annual Percent Change	5.3%	1.9%	5.5%	3.2%	3.3%	3.2%			
Providers & Facilities	2013	2014	2015	2016	2017	2018	2017-2018 Annual Change	2017-2018 Annual Change	2013-2018 Annual Change
Hospitals	\$2,456	\$2,547	\$2,698	\$2,819	\$2,909	\$3,010	\$101	3.5%	4.2%
Physicians	\$527	\$414	\$434	\$422	\$446	\$460	\$14	3.2%	-2.7%
Dentists	\$261	\$262	\$272	\$285	\$296	\$297	\$1	0.2%	2.6%
Other Professionals	\$244	\$251	\$305	\$319	\$331	\$367	\$37	11.0%	8.5%
Home Health Care	\$119	\$128	\$135	\$141	\$152	\$166	\$14	9.5%	6.9%
Drugs & Supplies	\$761	\$817	\$880	\$896	\$888	\$897	\$9	1.0%	3.3%
Vision & DME	\$135	\$117	\$85	\$88	\$110	\$112	\$2	2.2%	-3.7%
Nursing Homes	\$264	\$271	\$259	\$270	\$277	\$271	(\$6)	-2.3%	0.5%
Other Unclassified	\$34	\$34	\$34	\$34	\$34	\$34	\$0	0.0%	0.1%
Mental Health & Other Govt Activities	\$641	\$705	\$751	\$766	\$797	\$825	\$29	3.6%	5.2%
Total Provider Revenues	\$5,441	\$5,546	\$5,853	\$6,041	\$6,238	\$6,439	\$201	3.2%	3.4%
Annual Percent Change	5.3%	1.9%	5.5%	3.2%	3.3%	3.2%			

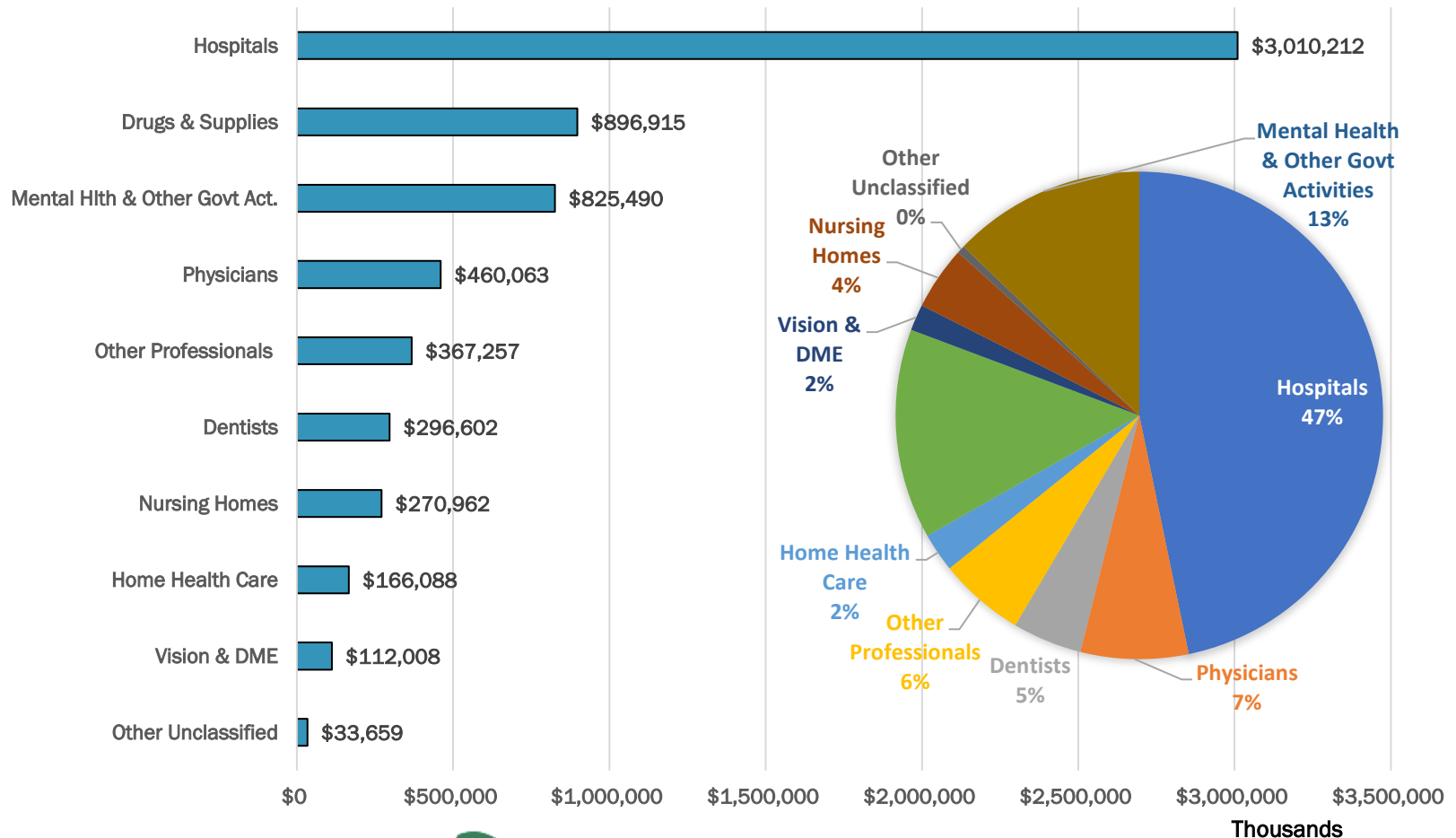
# Vermont Provider Health Care Revenues 2010-2018

Revenues increased from \$4.8 billion in 2010 to \$6.4 billion in 2018, an average annual increase of 3.7%. The increase from 2017 to 2018 was 3.2%.



# Vermont Provider Health Care Revenues

In- and Out-of-State Revenues for Patients Receiving Services by Provider Category: (\$6.4 billion)



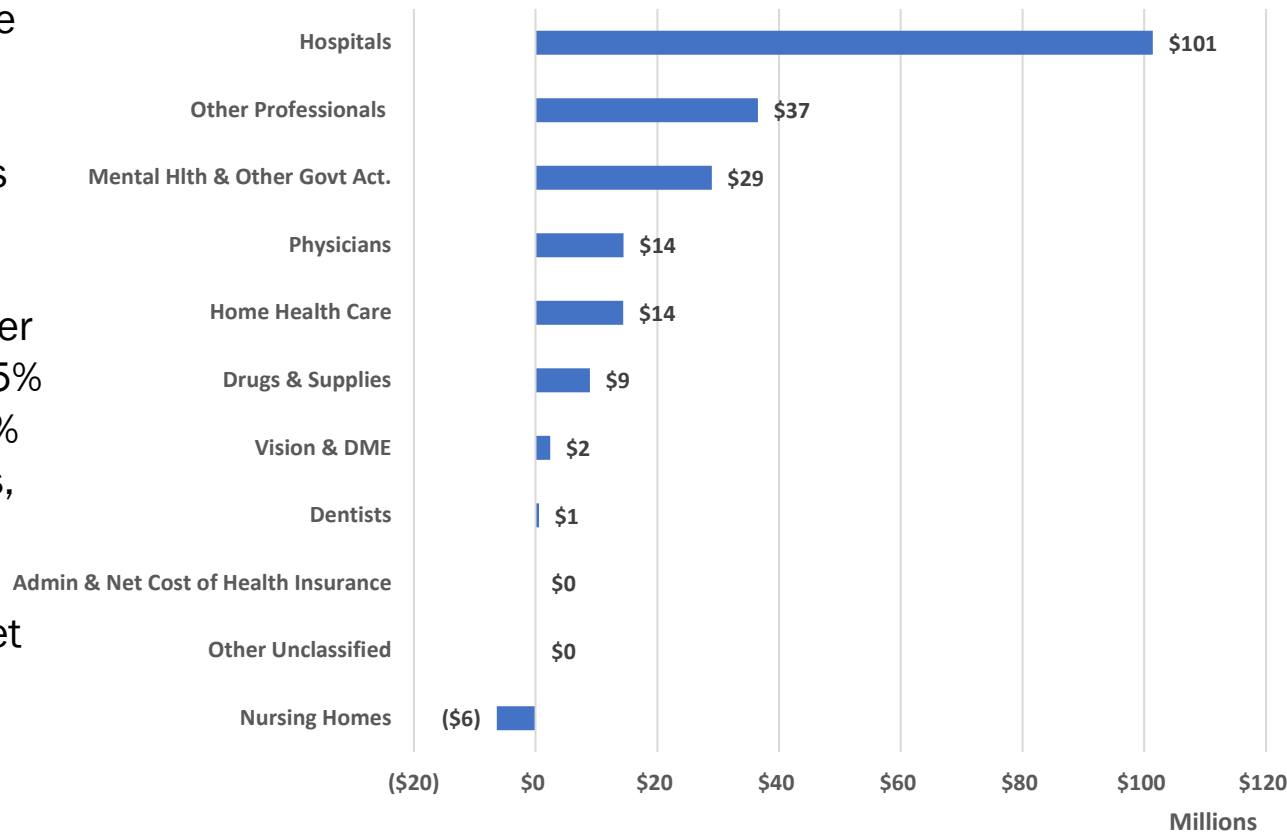


# Vermont Provider Health Care Revenues



Health care service revenues received by Vermont providers for in- and out-of-state patients increased 3.2%

Provider categories with the largest increases included: 3.5% for Hospitals; this category includes revenues for hospital-employed physicians. Increases of 11.0% for Other Licensed Professionals, 9.5% for Home Health Care, 3.2% for Independent Physicians, 2.2% Vision & DME s, and 1.0% for Drugs & Supplies. These increases were offset by a decline of 2.3% for Nursing Homes.

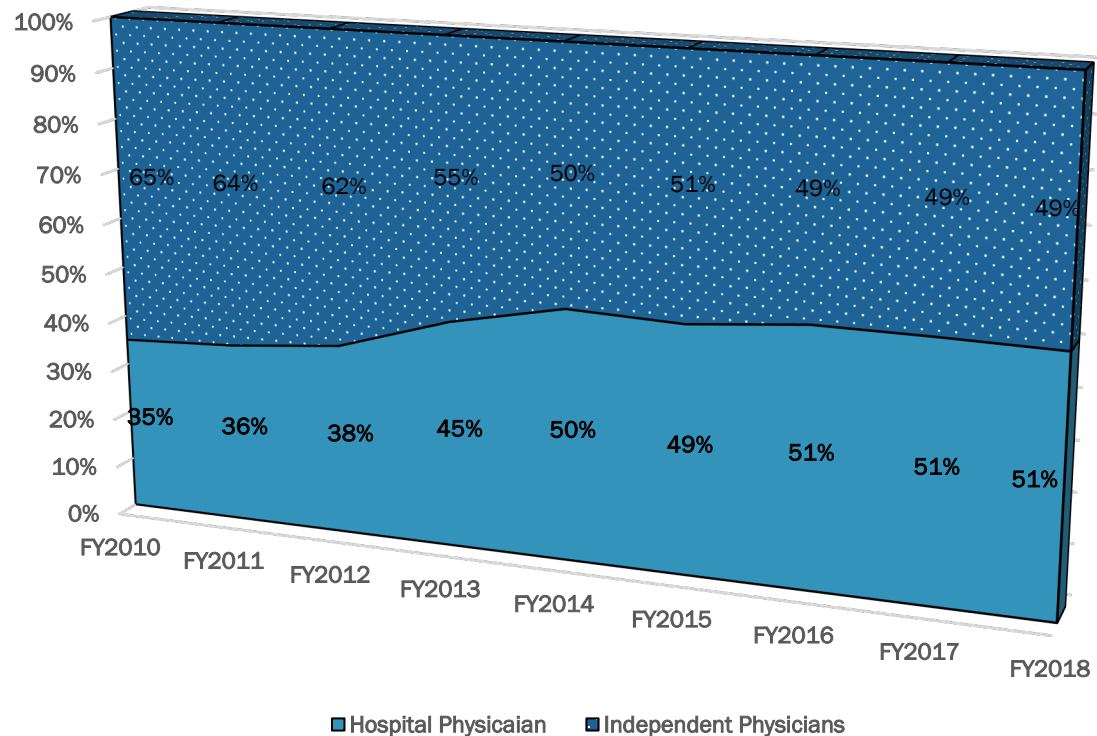


# Vermont Provider Health Care Revenues

The 2018 Physician census reported 2,473 or 1,368 FTE physicians practicing in Vermont\* of which 1,132 FTEs or 82% were employed by community hospitals excluding locum tenens.

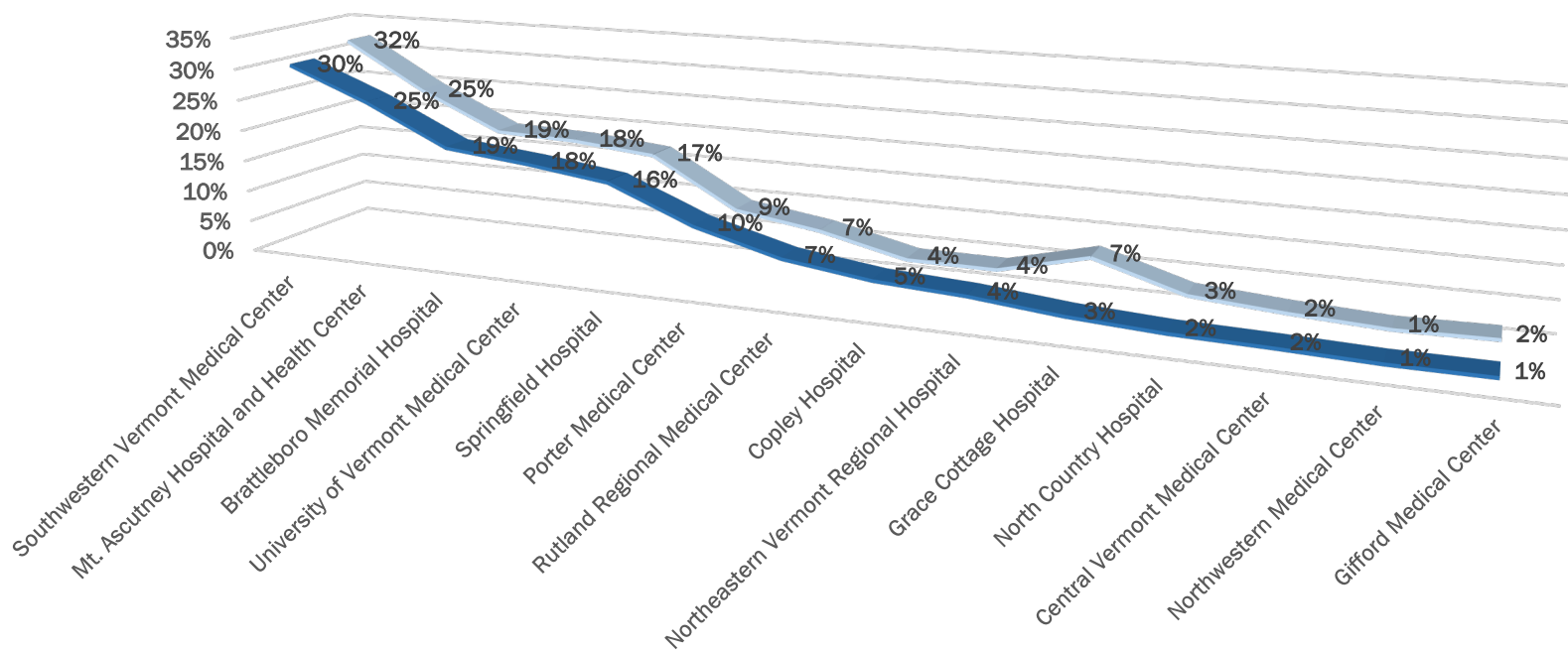
Hospital's Physician Revenues increased from 35% in 2010 to 51% in 2018.

\*Note: Per the VT Dept. of Health's 2018 Physician Census report



# Vermont Provider Health Care Revenues

Total Percent of Out of State Residents to Total Inpatient Discharges is 13%



2017-2018 Percent of Out of State Residents to Total Inpatient Discharges

■ 2018 ■ 2017

**Source:** 2018 Vermont Uniform Hospital Discharge Data Set. Does not include newborns.

**Notes:** All figures exclude discharges from the VA hospital and records with missing charges.

Vermont residents use hospitals in other states but reporting on those discharges is currently unavailable.

# Comparative Summary of 2018 Expenditure Analyses

## Resident and Provider Analyses by Payer Type and Provider Category

All dollar amounts are reported in thousands

	Resident*	Provider**
<b>Payers</b>	(Reported by Payers)	(Reported by Providers)
Out of Pocket	\$783,917	\$755,463
Commercial	\$2,054,203	\$2,161,539
Medicare	\$1,515,911	\$1,625,993
Medicaid	\$1,675,550	\$1,557,962
Other Government - Federal	\$230,090	\$338,298
<b>Total</b>	<b>\$6,259,671</b>	<b>\$6,439,255</b>

<b>Provider Services</b>		
Hospitals	\$2,269,991	\$3,010,212
Hospitals-Only	\$2,269,991	\$2,537,775
Hospital-Physicians	\$0	\$472,437
Physicians	\$938,123	\$460,063
Dentists	\$147,561	\$296,602
Other Professionals	\$237,058	\$367,257
Home Health Care	\$127,195	\$166,088
Drugs & Supplies	\$799,187	\$896,915
Vision & DME	\$113,190	\$112,008
Nursing Home	\$313,817	\$270,962
Other Unclassified	\$85,566	\$33,659
Admin and Net Cost Ins	\$402,492	\$0
Mental Health & Other Government Activities	\$825,490	\$825,490
<b>Total</b>	<b>\$6,259,671</b>	<b>\$6,439,255</b>

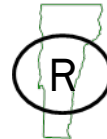
Annual percent change 2017-2018

1.9%

3.2%

Note: n.a. means Not available

Note: \*In/Out migration-Resident includes out of state care by residents. \*\*Provider includes out of state patients treated.



# Vermont Resident Analysis Projections

Vermont  
Health Care  
Expenditure  
Analysis      Projection      Projection



All dollar amounts are reported in thousands

Payers <sup>2</sup>	2018	2019	2020	2018-2019 % change	2019-2020 % change
<b>Out of Pocket</b>	\$783,917	\$800,770	\$821,489	2.1%	2.6%
<b>Commercial</b>	\$2,054,203	\$2,128,730	\$2,187,981	3.6%	2.8%
<b>Medicare</b>	\$1,515,911	\$1,567,673	\$1,667,028	3.4%	6.3%
<b>Medicaid</b>	\$1,675,550	\$1,733,278	\$1,763,611	3.4%	1.8%
<b>Other Government</b>	\$230,090	\$232,644	\$218,438	1.1%	-6.1%
<b>Total</b>	\$6,259,671	\$6,463,095	\$6,658,548	3.2%	3.0%
Providers & Facilities <sup>1</sup>	2018	2019	2020	2018-2019 % change	2019-2020 % change
<b>Hospitals</b>	\$2,269,991	\$2,307,687	\$2,345,076	1.7%	1.6%
<b>Physicians</b>	\$938,123	\$1,004,354	\$1,047,284	7.1%	4.3%
<b>Dentists</b>	\$147,561	\$125,992	\$117,210	-14.6%	-7.0%
<b>Other Professionals</b>	\$237,058	\$246,673	\$253,046	4.1%	2.6%
<b>Home Health Care</b>	\$127,195	\$128,830	\$145,478	1.3%	12.9%
<b>Drugs &amp; Supplies</b>	\$799,187	\$803,052	\$826,433	0.5%	2.9%
<b>Vision &amp; DME</b>	\$113,190	\$110,180	\$92,298	-2.7%	-16.2%
<b>Nursing Homes</b>	\$313,817	\$327,536	\$341,375	4.4%	4.2%
<b>Other Unclassified</b>	\$85,566	\$88,375	\$94,747	3.3%	7.2%
<b>Admin &amp; Net Cost of Health Insurance</b>	\$402,492	\$503,320	\$564,204	25.1%	12.1%
<b>Mental Health &amp; Other Govt Activities</b>	\$825,490	\$817,098	\$831,397	-1.0%	1.8%
<b>Total</b>	\$6,259,671	\$6,463,096	\$6,658,548	3.2%	3.0%

## Notes:

- Expenditures represent the amount of spending and expected spending by each Provider sector.
- Projections are primarily based on Vermont Payer trends when available.



# Vermont Provider Analysis Projections

Vermont  
Health Care  
Expenditure  
Analysis      Projection      Projection



All dollar amounts are reported in thousands

Payers	2018	2019 <sup>2</sup>	2020 <sup>2</sup>	2018-2019 % change <sup>2</sup>	2019-2020 % change <sup>2</sup>
<b>Out of Pocket</b>	\$755,463	\$790,683	\$822,294	4.7%	4.0%
<b>Commercial</b>	\$2,161,539	\$2,266,614	\$2,356,725	4.9%	4.0%
<b>Medicare</b>	\$1,625,993	\$1,705,034	\$1,772,819	4.9%	4.0%
<b>Medicaid</b>	\$1,557,962	\$1,564,102	\$1,577,598	0.4%	0.9%
<b>Other Government</b>	\$338,298	\$319,433	\$333,800	-5.6%	4.5%
<b>Total</b>	\$6,439,255	\$6,645,866	\$6,863,236	3.2%	3.3%
Providers & Facilities <sup>1</sup>	2018	2019 <sup>2</sup>	2020 <sup>2</sup>	2018-2019 % change <sup>2</sup>	2019-2020 % change <sup>2</sup>
<b>Hospitals<sup>3,4</sup></b>	\$3,010,212	\$3,150,551	\$3,276,508	4.7%	4.0%
<b>Physicians<sup>4</sup></b>	\$460,063	\$480,172	\$498,453	4.4%	3.8%
<b>Dentists</b>	\$296,602	\$310,382	\$324,381	4.6%	4.5%
<b>Other Professionals</b>	\$367,257	\$386,344	\$405,785	5.2%	5.0%
<b>Home Health Care</b>	\$166,088	\$179,968	\$196,025	8.4%	8.9%
<b>Drugs &amp; Supplies</b>	\$896,915	\$897,178	\$901,796	0.0%	0.5%
<b>Vision &amp; DME</b>	\$112,008	\$118,945	\$126,493	6.2%	6.3%
<b>Nursing Homes</b>	\$270,962	\$271,570	\$268,739	0.2%	-1.0%
<b>Other Unclassified</b>	\$33,659	\$33,659	\$33,659	0.0%	0.0%
<b>Mental Health &amp; Other Govt Activities</b>	\$825,490	\$817,098	\$831,397	-1.0%	1.8%
<b>Total</b>	\$6,439,255	\$6,645,866	\$6,863,236	3.2%	3.3%

**Notes:**

1. The amount of revenues earned and expected to be collected by each Provider sector.
2. Except for community hospitals, projections are primarily based on National Health Expenditure (NHE), and Vermont trends when available.
3. Projected 2019 and approved 2020 community hospital budgets are included in the forecast.
4. The community hospital amounts include physician practice expenditures reflective of any hospital's physician practice acquisitions.



# Appendix

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# 2018 Vermont Resident Analysis



All dollar amounts are reported in thousands

PROVIDERS & FACILITIES	Percent of Total	Total	Out-of-Pocket	Commercial	Medicare	Medicaid	Other Government - Federal	Other Government - State & Local
<b>Hospitals</b>	36.3%	\$2,269,991	\$212,066	\$986,170	\$648,945	\$306,726	\$116,028	\$56
<b>Community Hospital</b>	34.0%	\$2,130,803	\$210,577	\$970,656	\$642,768	\$306,726	\$19	\$56
Inpatient	15.0%	\$941,894	\$88,339	\$319,251	\$359,390	\$174,910	\$0	\$4
Inpatient-Physician	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Outpatient-Physician	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Outpatient & ER	19.0%	\$1,188,909	\$122,238	\$651,405	\$283,378	\$131,817	\$19	\$52
<b>Veterans Hosp</b>	1.9%	\$121,463	\$0	\$5,454	\$0	\$0	\$116,009	\$0
<b>Psych Hosp - State</b>	0.1%	\$3,483	\$51	\$2,252	\$1,180	\$0	\$0	\$0
<b>Psych Hosp - Private</b>	0.2%	\$14,242	\$1,437	\$7,808	\$4,997	\$0	\$0	\$0
<b>Physicians</b>	15.0%	\$938,123	\$161,230	\$304,654	\$256,251	\$189,741	\$26,008	\$239
<b>Office of Physicians</b>	10.6%	\$665,500	\$114,037	\$195,632	\$190,170	\$139,414	\$26,008	\$239
<b>Ambulatory Clinics</b>	4.0%	\$251,985	\$46,685	\$108,144	\$60,008	\$37,148	\$0	\$0
CMHCs	0.0%	\$53	\$11	\$42	\$0	\$0	\$0	\$0
Other Ambulatory Clinics	4.0%	\$251,932	\$46,673	\$108,102	\$60,008	\$37,148	\$0	\$0
<b>Labs</b>	0.3%	\$20,638	\$508	\$879	\$6,073	\$13,178	\$0	\$0
<b>Dentists</b>	2.4%	\$147,561	\$34,607	\$83,939	\$1,225	\$27,567	\$0	\$222
<b>Other Professionals (Licensed)</b>	3.8%	\$237,058	\$41,454	\$114,223	\$38,625	\$42,756	\$0	\$0
Chiropractic	0.2%	\$15,304	\$4,236	\$7,915	\$1,892	\$1,260	\$0	\$0
Physical Therapy	0.6%	\$39,679	\$7,510	\$14,800	\$9,575	\$7,793	\$0	\$0
Podiatrist	0.1%	\$4,436	\$1,126	\$1,610	\$1,494	\$206	\$0	\$0
Psychological	1.2%	\$73,325	\$8,640	\$29,669	\$7,163	\$27,853	\$0	\$0
Optometrists	0.2%	\$11,361	\$3,013	\$2,844	\$3,335	\$2,169	\$0	\$0
Other (Professional)	1.5%	\$92,953	\$16,930	\$57,384	\$15,165	\$3,475	\$0	\$0
<b>Home Health Care</b>	2.0%	\$127,195	\$17,480	\$6,363	\$67,248	\$31,895	\$2,611	\$1,600
<b>Drugs &amp; Supplies</b>	12.8%	\$799,187	\$159,612	\$283,420	\$295,834	\$60,883	(\$1,965)	\$1,402
Rx	11.7%	\$734,238	\$130,864	\$282,473	\$267,048	\$54,416	(\$1,965)	\$1,402
Other Supplies	1.0%	\$64,949	\$28,749	\$947	\$28,786	\$6,467	\$0	\$0
<b>Vision &amp; DME</b>	1.8%	\$113,190	\$67,677	\$22,219	\$16,265	\$7,029	\$0	\$0
<b>Nursing Homes</b>	5.0%	\$313,817	\$76,773	\$9,476	\$92,182	\$123,605	\$0	\$11,781
<b>Other Unclassified</b>	1.4%	\$85,566	\$13,018	\$32,964	\$16,367	\$7,269	\$0	\$15,948
<b>Mental Health &amp; Other Govt Activities</b>	13.2%	\$825,490	\$0	\$0	\$0	\$769,331	\$19,859	\$36,300
<b>Admin &amp; Net Cost of Health Insurance</b>	6.4%	\$402,492	\$0	\$210,775	\$82,969	\$108,748	\$0	\$0
Administration	6.8%	\$428,625	\$0	\$236,908	\$82,969	\$108,748	\$0	\$0
Change in Surplus	-0.4%	(\$26,133)	\$0	(\$26,133)	\$0	\$0	\$0	\$0
<b>TOTAL VERMONT EXPENDITURES</b>	<b>100.0%</b>	<b>\$6,259,671</b>	<b>\$783,917</b>	<b>\$2,054,203</b>	<b>\$1,515,911</b>	<b>\$1,675,550</b>	<b>\$162,542</b>	<b>\$67,548</b>
<b>Percent of total expenditures</b>		<b>100.0%</b>	<b>12.5%</b>	<b>32.8%</b>	<b>24.2%</b>	<b>26.8%</b>	<b>2.6%</b>	<b>1.1%</b>

Note: All physician spending including hospital physicians in the Resident Analysis are shown in the physician service category



	Payer reported data
	Allocations estimated from VT specific data
	Amounts imputed from National Health Expenditures or other indirect sources



# 2018 Vermont Resident Analysis

## Commercial Insurance



All dollar amounts are reported in thousands

PROVIDERS & FACILITIES	Percent of Total	Total	Self-Insured	BCBSVT	TVHP	MVP	Workers Comp	Other Private
<b>Hospitals</b>	48.0%	\$986,170	\$560,959	\$202,587	\$16,162	\$65,411	\$8,618	\$132,433
<b>Community Hospital</b>	47.3%	\$970,656	\$551,029	\$201,152	\$16,051	\$63,001	\$8,618	\$130,805
Inpatient	15.5%	\$319,251	\$180,757	\$67,090	\$4,713	\$19,017	\$4,149	\$43,525
Inpatient-Physician	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Outpatient-Physician	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Outpatient & ER	31.7%	\$651,405	\$370,272	\$134,062	\$11,338	\$43,984	\$4,469	\$87,280
<b>Veterans Hosp</b>	0.3%	\$5,454	\$4,446	\$651	\$28	\$0	\$0	\$329
<b>Psych Hosp - State</b>	0.1%	\$2,252	\$1,899	\$133	\$23	\$0	\$0	\$196
<b>Psych Hosp - Private</b>	0.4%	\$7,808	\$3,584	\$650	\$60	\$2,410	\$0	\$1,103
<b>Physicians</b>	14.8%	\$304,654	\$148,042	\$54,277	\$4,650	\$26,197	\$34,259	\$37,228
<b>Office of Physicians</b>	9.5%	\$195,632	\$87,091	\$25,772	\$1,964	\$26,197	\$31,972	\$22,637
<b>Ambulatory Clinics</b>	5.3%	\$108,144	\$60,799	\$28,392	\$2,681	\$0	\$1,737	\$14,534
CMHCs	0.0%	\$42	\$40	\$0	\$0	\$0	\$0	\$1
Other Ambulatory Clinics	5.3%	\$108,102	\$60,759	\$28,392	\$2,680	\$0	\$1,737	\$14,534
<b>Labs</b>	0.0%	\$879	\$152	\$113	\$6	\$0	\$550	\$57
<b>Dentists</b>	4.1%	\$83,939	\$54,316	\$976	\$24	\$217	\$228	\$28,179
<b>Other Professionals (Licensed)</b>	5.6%	\$114,223	\$72,528	\$21,375	\$1,906	\$1,669	\$3,533	\$13,211
Chiropractic	0.4%	\$7,915	\$5,152	\$1,230	\$108	\$107	\$582	\$737
Physical Therapy	0.7%	\$14,800	\$9,646	\$2,642	\$374	\$495	\$0	\$1,644
Podiatrist	0.1%	\$1,610	\$998	\$282	\$29	\$115	\$0	\$187
Psychological	1.4%	\$29,669	\$17,633	\$7,453	\$358	\$228	\$0	\$3,997
Optometrists	0.1%	\$2,844	\$2,019	\$431	\$167	\$0	\$0	\$227
Other (Professional)	2.8%	\$57,384	\$37,081	\$9,338	\$871	\$724	\$2,950	\$6,420
<b>Home Health Care</b>	0.3%	\$6,363	\$3,955	\$1,309	\$55	\$254	\$0	\$790
<b>Drugs &amp; Supplies</b>	13.8%	\$283,420	\$138,799	\$70,602	\$2,426	\$23,218	\$3,117	\$45,258
Rx	13.8%	\$282,473	\$137,937	\$70,551	\$2,402	\$23,218	\$3,117	\$45,246
Other Supplies	0.0%	\$947	\$862	\$51	\$23	\$0	\$0	\$12
<b>Vision &amp; DME</b>	1.1%	\$22,219	\$15,262	\$2,967	\$364	\$461	\$692	\$2,473
<b>Nursing Home</b>	0.5%	\$9,476	\$7,414	\$1,188	\$260	\$66	\$0	\$548
<b>Other Unclassified</b>	1.6%	\$32,964	\$31,216	\$57	\$1	\$0	\$0	\$1,691
<b>Mental Health &amp; Other Govt Activities</b>	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Admin and Net Cost of Health Insurance</b>	10.3%	\$210,775	\$55,848	\$31,175	\$4,666	\$2,043	\$65,406	\$51,637
Administration	11.5%	\$236,908	\$53,125	\$47,257	\$5,961	\$17,462	\$65,406	\$47,698
Change in Surplus	-1.3%	(\$26,133)	\$2,722	(\$16,082)	(\$1,295)	(\$15,419)	\$0	\$3,940
<b>TOTAL VERMONT EXPENDITURES</b>	<b>100.0%</b>	<b>\$2,054,203</b>	<b>\$1,088,339</b>	<b>\$386,513</b>	<b>\$30,514</b>	<b>\$119,536</b>	<b>\$115,853</b>	<b>\$313,449</b>
<b>Percent of total expenditures</b>		<b>100.0%</b>	<b>53.0%</b>	<b>18.8%</b>	<b>1.5%</b>	<b>5.8%</b>	<b>5.6%</b>	<b>15.3%</b>

Note: All physician spending including hospital physicians in the Resident Analysis are shown in the physician service category



	Payer reported data
	Allocations estimated from VT specific data
	Amounts imputed from National Health Expenditures or other indirect sources

# 2018 Vermont Provider Analysis



All dollar amounts are reported in thousands

PROVIDERS & FACILITIES	Percent of Total	Total	Out-of-Pocket	Commercial	Medicare	Medicaid	Other Government - Federal	Other Government - State & Local
<b>Hospitals</b>	46.7%	\$3,010,212	\$252,405	\$1,281,789	\$898,198	\$361,817	\$211,303	\$4,700
<b>Community Hospital</b>	41.8%	\$2,692,137	\$248,760	\$1,250,085	\$878,139	\$315,153	\$0	\$0
Inpatient	14.6%	\$939,143	\$71,831	\$364,232	\$386,557	\$116,523	\$0	\$0
Inpatient-Physician	2.4%	\$154,136	\$16,597	\$73,112	\$42,619	\$21,808	\$0	\$0
Outpatient-Physician	4.9%	\$318,301	\$30,092	\$132,577	\$99,940	\$55,692	\$0	\$0
Outpatient & ER	19.9%	\$1,280,556	\$130,240	\$680,164	\$349,023	\$121,129	\$0	\$0
<b>Veterans Hosp</b>	3.5%	\$227,199	\$3,020	\$13,252	\$0	\$0	\$210,926	\$0
<b>Psych Hosp - State</b>	0.3%	\$22,399	\$0	\$0	\$1,225	\$21,174	\$0	\$0
<b>Psych Hosp - Private</b>	1.1%	\$68,477	\$625	\$18,452	\$18,833	\$25,490	\$377	\$4,700
<b>Physicians</b>	7.1%	\$460,063	\$60,576	\$170,766	\$138,825	\$75,471	\$14,294	\$131
<b>Office of Physicians</b>	6.8%	\$438,954	\$58,161	\$163,527	\$133,374	\$69,544	\$14,218	\$131
<b>Ambulatory Clinics</b>	0.2%	\$15,406	\$2,090	\$5,790	\$4,707	\$2,819	\$0	\$0
CMHCs	0.0%	\$278	\$36	\$101	\$0	\$141	\$0	\$0
Other Ambulatory Clinics	0.2%	\$15,128	\$2,054	\$5,689	\$4,707	\$2,678	\$0	\$0
<b>Labs</b>	0.1%	\$5,702	\$325	\$1,448	\$744	\$3,108	\$77	\$1
<b>Dentists</b>	4.6%	\$296,602	\$69,561	\$168,720	\$2,463	\$55,411	\$0	\$447
<b>Other Professionals (Licensed)</b>	5.7%	\$367,257	\$70,197	\$176,126	\$66,590	\$54,344	\$0	\$0
Chiropractic	0.5%	\$30,380	\$8,409	\$15,713	\$3,756	\$2,502	\$0	\$0
Physical Therapy	1.1%	\$72,949	\$13,807	\$27,210	\$17,604	\$14,327	\$0	\$0
Podiatrist	0.0%	\$2,432	\$617	\$883	\$819	\$113	\$0	\$0
Psychological	0.9%	\$60,941	\$7,181	\$24,658	\$5,954	\$23,149	\$0	\$0
Optometrists	0.7%	\$44,000	\$11,670	\$11,014	\$12,916	\$8,400	\$0	\$0
Other (Professional)	2.4%	\$156,553	\$28,513	\$96,647	\$25,541	\$5,852	\$0	\$0
<b>Home Health Care</b>	2.6%	\$166,088	\$3,137	\$17,646	\$95,633	\$45,461	\$2,611	\$1,600
<b>Drugs &amp; Supplies</b>	13.9%	\$896,915	\$179,130	\$318,078	\$332,010	\$68,328	(\$2,205)	\$1,574
Rx	12.5%	\$804,306	\$160,635	\$285,235	\$297,729	\$61,273	(\$1,977)	\$1,411
Other Supplies	1.4%	\$92,609	\$18,496	\$32,842	\$34,281	\$7,055	(\$228)	\$162
<b>Vision &amp; DME</b>	1.7%	\$112,008	\$66,970	\$21,987	\$16,095	\$6,955	\$0	\$0
<b>Nursing Homes</b>	4.2%	\$270,962	\$38,933	\$3,771	\$76,179	\$120,343	\$19,172	\$12,565
<b>Other Unclassified</b>	0.5%	\$33,659	\$14,555	\$2,656	\$0	\$500	\$0	\$15,948
<b>Mental Health &amp; Other Govt Activities</b>	12.8%	\$825,490	\$0	\$0	\$0	\$769,331	\$19,859	\$36,300
<b>Admin &amp; Net Cost of Health Insurance</b>	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Administration	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Change in Surplus	0.0%	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>TOTAL VERMONT EXPENDITURES</b>	<b>100.0%</b>	<b>\$6,439,255</b>	<b>\$755,463</b>	<b>\$2,161,539</b>	<b>\$1,625,993</b>	<b>\$1,557,962</b>	<b>\$265,035</b>	<b>\$73,264</b>
<b>Percent of total expenditures</b>		<b>100.0%</b>	<b>11.7%</b>	<b>33.6%</b>	<b>25.3%</b>	<b>24.2%</b>	<b>4.1%</b>	<b>1.1%</b>

Note: All physician spending including hospital physicians in the Resident Analysis are shown in the physician service category

	Provider reported data
	Allocations estimated from VT specific data
	Amounts imputed from National Health Expenditures or other indirect sources

## Health Insurance Coverage Profile Vermont Residents 2014-2018



Category	2014	2015	2016	2017	2018	% 2017-2018
<b>Commercial Insured Market</b>						
<b>Insured Plans</b>						
Individual	32,041	29,547	32,721	32,112	31,476	
Small Employer	37,231	36,656	42,938	42,568	41,588	
<b>Merged Market</b>	<b>69,272</b>	<b>66,203</b>	<b>75,659</b>	<b>74,680</b>	<b>73,064</b>	<b>-2.2%</b>
Large Employer	47,400	40,190	19,472	17,608	21,348	
Association	39,758	39,410	0	2	3	
<b>Large Group Market</b>	<b>87,158</b>	<b>79,600</b>	<b>19,472</b>	<b>17,610</b>	<b>21,351</b>	<b>21.2%</b>
<b>Insured Market Subtotal</b>	<b>156,430</b>	<b>145,803</b>	<b>95,131</b>	<b>92,290</b>	<b>94,415</b>	<b>2.3%</b>
<b>Self-Insured Employer Plans</b>						
Self-insured Employer Plans	137,327	126,568	168,838	182,972	176,905	
Federal Employee Plan	14,535	14,666	14,685	14,604	14,634	
Military	18,578	18,578	18,578	16,900	16,900	
<b>Self Insured Market Subtotal</b>	<b>170,440</b>	<b>159,812</b>	<b>202,101</b>	<b>214,476</b>	<b>208,439</b>	<b>-2.8%</b>
VT residents covered by insurers outside VT	25,143	20,077	18,276	15,540	12,135	
Catamount Health	0	0				
<b>Other</b>	<b>25,143</b>	<b>20,077</b>	<b>18,276</b>	<b>15,540</b>	<b>12,135</b>	<b>-21.9%</b>
<b>Commercial Insured Market</b>	<b>352,013</b>	<b>325,692</b>	<b>315,508</b>	<b>322,306</b>	<b>314,989</b>	<b>-2.3%</b>
<b>Government Coverage</b>						
Medicaid	146,273	161,097	157,112	150,375	154,943	3.0%
Medicare	115,649	119,477	131,344	133,915	136,567	2.0%
<b>Government Coverage</b>	<b>261,922</b>	<b>280,574</b>	<b>288,456</b>	<b>284,290</b>	<b>291,510</b>	<b>2.5%</b>
<b>Uninsured</b>						
<b>Uninsured</b>	<b>26,071</b>	<b>26,071</b>	<b>28,541</b>	<b>19,800</b>	<b>19,800</b>	<b>0.0%</b>
<b>Total of Assigned Lives</b>	<b>640,006</b>	<b>632,337</b>	<b>632,505</b>	<b>626,396</b>	<b>626,299</b>	<b>-1.0%</b>
Duplicated Count	-13,444	-6,295	-7,911	-2,739	0	
<b>Total Vermont Population</b>	<b>626,562</b>	<b>626,042</b>	<b>624,594</b>	<b>623,657</b>	<b>626,299</b>	<b>0.4%</b>

ASSR

VHHIS

VHCURES

DVHA

TDI & VHCURES

VHHIS

Enrollees maybe accounted for across multiple payer types causing a “duplicated count” adjustment to be recognized.  
VHCURES has aided in the validation of these enrollment counts.

**\*Resources:**

Annual Statement Supplement Report (ASSR)  
Vermont Household Health Insurance Survey (VHHIS)  
Vermont Healthcare Claims Uniform Reporting and Evaluation System (VHCURES)  
Department of Vermont Health Access (DVHA)  
The Dartmouth Institute for Health Policy and Clinical Practice (TDI)

# Methodologies, Technical Notes, and Sources\*

- † [Expenditure Analysis Manual](#)
- † [NHE, Health Consumption Expenditures](#)
- † [US Comparisons: National Health Expenditure Data \(NHE\), the Centers for Medicare and Medicaid Services](#)
- † [US Dept. of Labor, Bureau of Labor Statistics](#)
- † [VT Dept. of Labor](#)
- † [GSP refers to the US Bureau of Economic Analysis](#)-Gross State Product (GSP), or Gross Regional Product (GRP), and is a measurement of the economic output of a state. The sum of all value added by industries within the state and serves as a counterpart to the Gross Domestic Product (GDP).
- † [VT Household Health Insurance Survey](#) aids in enrollment calculations and out-of-pocket calculations.
- † [Vermont Healthcare Claims Uniform Reporting and Evaluation System \(VHCURES\)](#) payer data is used to supplement source data and is also used to test for reasonableness and trends in payers' aggregate reports.

\*Click on the source to follow the link to the website.

# Methodologies, Technical Notes, and Sources

- Commercial payers' "Spending" is defined as earned premiums.
- 2017 Expenditure Analysis was revised with updated 2017 Medicare data, and Out-of-Pocket was adjusted accordingly.
- The Out-of-Pocket (OOP) methodology primarily uses Vermont data, with allocations using Medicare claims expenditures from VHCURES, The Vermont Household Health Insurance Survey, 2018 U.S. Census data (latest available), and the NHE are used to help estimate out-of-pocket costs for unique provider populations and services.

# Tableau-Interactive Visualization

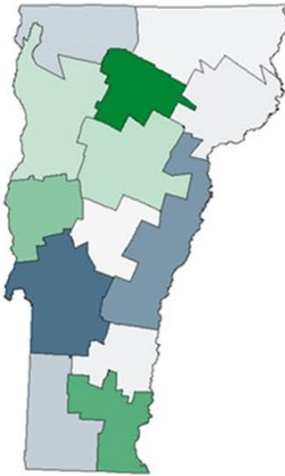
## BROWSING INFORMATION:

\* To view different analyses select from tabs above

\* The visualizations are not compatible with  
Microsoft Edge or  
MS Internet Explorer

For optimal viewing please use the latest version of the following browsers :

- Google Chrome
- Firefox
- Safari



## 2018 Vermont Health Care Expenditure Analysis Interactive Visualization

### Resident Spending Perspectives

\*To view different analyses select tabs above

Published July 2020



# Tableau-Interactive Visualization

## Data Sources & Definitions



### Population Description

The Resident Expenditure Analysis reports how much payers (e.g., Medicare, Medicaid, commercial insurers) spend on health care services for Vermont Residents, regardless of where services were provided (within VT or elsewhere).

Out-of-state residents are not included in the analysis:

Population	Location Of Care	
VT Residents	In Vermont	Included
	Outside of Vermont	Included
Out of State Residents	In Vermont	Not Included
	Outside of Vermont	Not Included

### Payers, Providers and Reporting Methodology

**Payers** are required to report spending for VT residents and are requested to show spending in defined **provider service categories** to allow for standardized reporting. Spending is defined as all claims paid by each payer and administrative costs. For this report payers and providers are defined by the following categories:

**Payer Categories** (may be grouped in some visualizations; check notes on each dashboard)

- Out-of-Pocket (OOP) - monies paid by the insured, such as co-pays
- Commercial Insurance - e.g.: Blue-Cross/Blue-Shield, Cigna, MVP, etc.
- Medicare
- Vermont Medicaid
- Other Government - Federal, State & Local
- Workers Compensation

**Provider Service Categories** (may be grouped in some visualizations; check notes on each dashboard)

- |                             |   |
|-----------------------------|---|
| a. Hospitals                | g. Vision Products & DME                  |
| b. Physician Services       | h. Nursing Home Care                      |
| c. Dental Services          | i. Other/Unclassified                     |
| d. Other Professional Svcs. | j. Admin/Net Cost of Health Insurance     |
| e. Home Health Care         | k. Mental Health & Other Govt. Activities |
| f. Drugs & Supplies         |   |

### VT Resident Analysis Data Sources

To develop the Resident Expenditure Analysis requires collecting enrollment from disparate payer sources and is used to provide a summary of the health care coverage of all Vermonters

#### Data Sources:

- Annual Statement Supplemental Reports (ASSR)  
Source: Green Mt. Care Board (GMCB)
- VT Health Care Uniform Reporting and Evaluation System (VHCURES)  
Source: Green Mt. Care Board (GMCB)
- Medicare Data  
Source (prior to 2016): Dartmouth Institute for Health Policy & Clinical Practice (TDI)  
(2016 and after): VHCURES
- Vermont Household Health Insurance Survey (VHHIS)  
Source: Vermont Dept of Health (VDH)
- Medicaid, State and Federal Data  
Source: Vermont Agency of Human Services (VAHS)
- Workers Compensation Data  
Source: Department of Financial Regulation (DFR)

[Click Here to Access the 2018 Expenditure Analysis Report](#)

Please Note that the full report includes both the  
I. Resident Analysis (Vermont Payers) - included in this analysis  
II. Provider Analysis (Vermont Providers) - not included in this analysis

[Click Here to Access the Expenditure Analysis Manual](#)

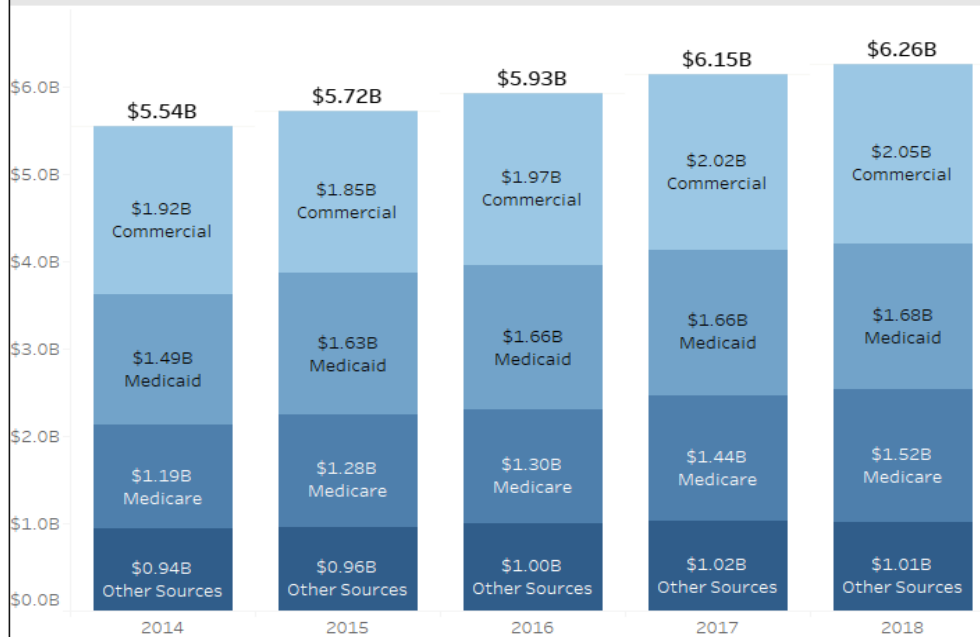
The manual provides a comprehensive and detailed explanation of all definitions and analytical methodologies. Please Note that only Section I. Resident Analysis (Vermont Payers, pages 1 through 12) is relevant to this analysis

# Visualization-Examples

Annual Percent  
Change in Total  
Resident Spend:  
(from previous year)

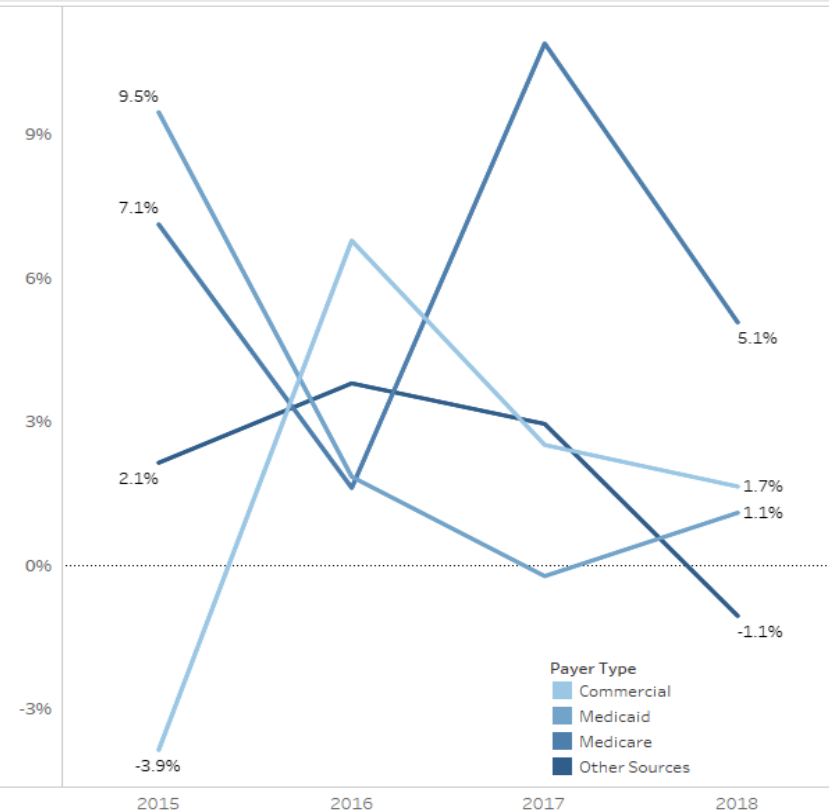
2015	2016	2017	2018
3.11%	3.72%	3.66%	1.86%

Annual Resident Spend by Major Payer Groups  
(select to highlight, hold ctrl to select multiple payers)



*Commercial contains: Commercial Insurers, Self-Insured & Workers' Compensation*  
*Other Sources contains: Out-of-Pocket, Other Federal, State & Local*

Percent Difference in Expenditures from Previous Year  
by Major Payer Groups



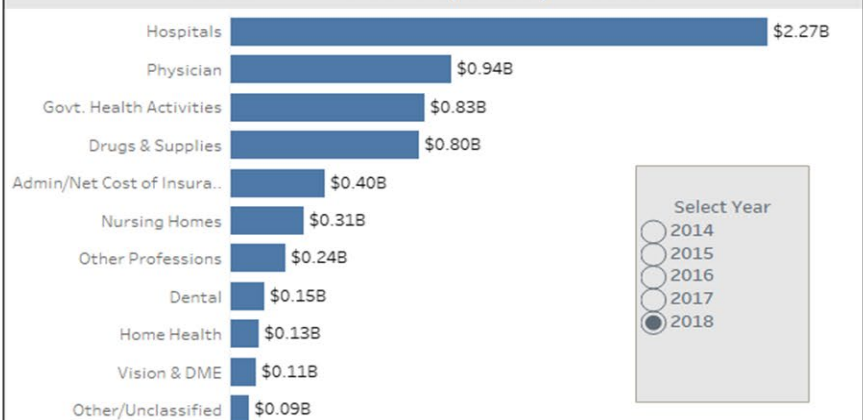


# Visualization-Examples

Proportion of VT Resident Spend by Provider and Year

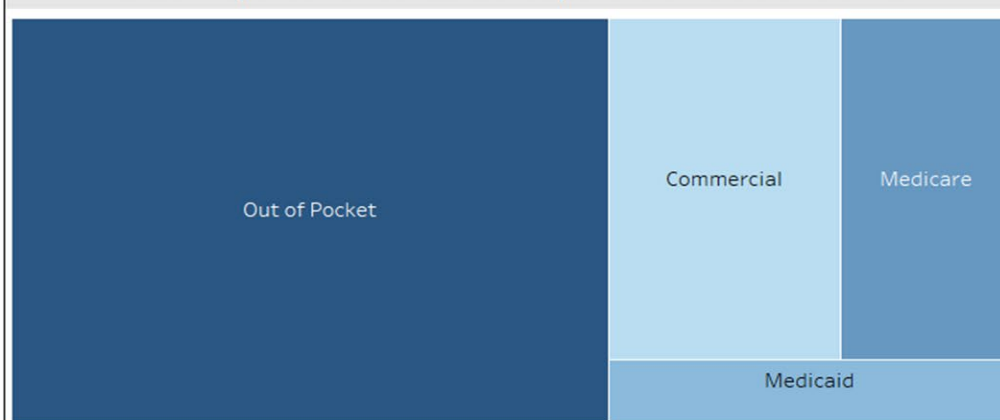
	2014	2015	2016	2017	2018
Hospitals	37.0%	37.8%	35.0%	36.4%	36.3%
Physician	13.3%	13.4%	14.9%	15.0%	15.0%
Govt. Health Activities	12.7%	13.1%	12.9%	13.0%	13.2%
Drugs & Supplies	12.3%	13.8%	13.0%	12.3%	12.8%
Admin/Net Cost of Insurance	6.4%	3.6%	6.2%	6.8%	6.4%
Nursing Homes	5.1%	4.8%	4.9%	4.9%	5.0%
Dental	4.2%	4.1%	4.1%	2.4%	2.4%
Vision & DME	2.2%	2.1%	2.0%	2.6%	1.8%
Home Health	2.0%	2.1%	2.4%	1.6%	2.0%
Other/Unclassified	1.2%	1.4%	1.2%	1.3%	1.4%
Other Professions	3.5%	3.7%	3.3%	3.8%	3.8%

2018 VT Resident Spend by Provider



Commercial contains: Commercial Insurers, Self-Insured & Workers' Compensation;

2018 Proportion of VT Resident Spend within: Vision & DME



Other Sources contains: Other Federal, State & Local

# Acknowledgements



- The Green Mountain Care Board wants to thank the many representatives of government, the staff of the Agency of Human Services, commercial insurers, and the health care provider community for their valuable time and assistance that enabled us to produce this report. The Board also thanks its teams of Data and Analytics and Health System Finance and other staff, and all others who provided data and feedback.
- If you have questions about this report, please contact Lori Perry at (802) 828-2177.