

# *New England Knowledge Sharing: The NESCSO Perspective*

# *New England States Consortium Systems Organization*

NESC (New England States Consortium)

+ SO (Systems Organization)

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NESCSO

# About Us

- NESCSO is a not for profit 501c (3) corporation which became operational May 2000
- NESCSO serves the policy/system needs and requests of the New England States Consortium
- Governed by a Board of Directors designated by the New England States Consortium of Human Services/Medicaid Commissioners and the University of Massachusetts Medical School
- Funding

# Operational Services

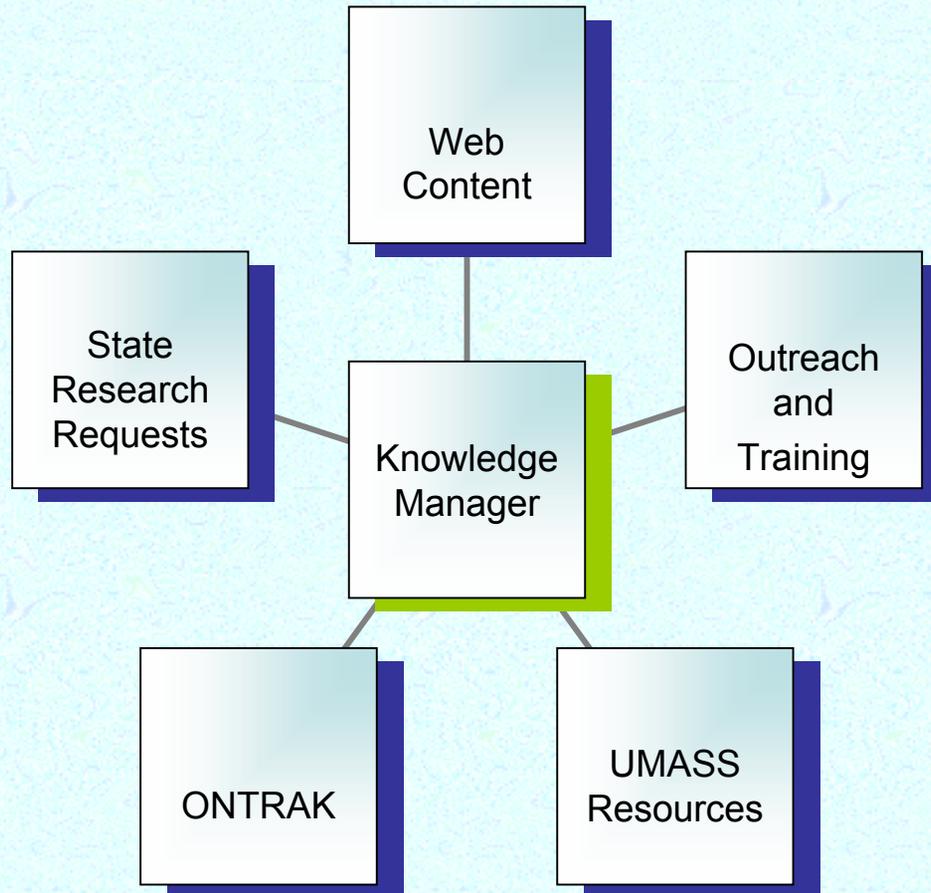
## Project Related Services:

- Planning and Strategy Sessions – Assists in coordinating and managing multi-state collaborative activities and initiates topical case studies
- Solution Evaluation and Demonstration – The research, assessment and testing function of the organization
- Consulting Services – A listing of pre-qualified consultants available on a need basis to members, as determined by the Board

## Knowledge Access Services:

- Information Clearinghouse – The knowledge exchange forum, providing the facility to store and distribute information required by Consortium members
- ONTRAK – Web-based project management tool

# *Tools for Collaboration*



# *Recent NESCSO Initiatives*

- *Consortium Briefings*
- Project Coordination for the New England Partnership
- Pharmacy Pricing Comparison
- Multi-state HIPAA Translator Purchase
- *ONTRAK*
- Demographic analyses of New England States

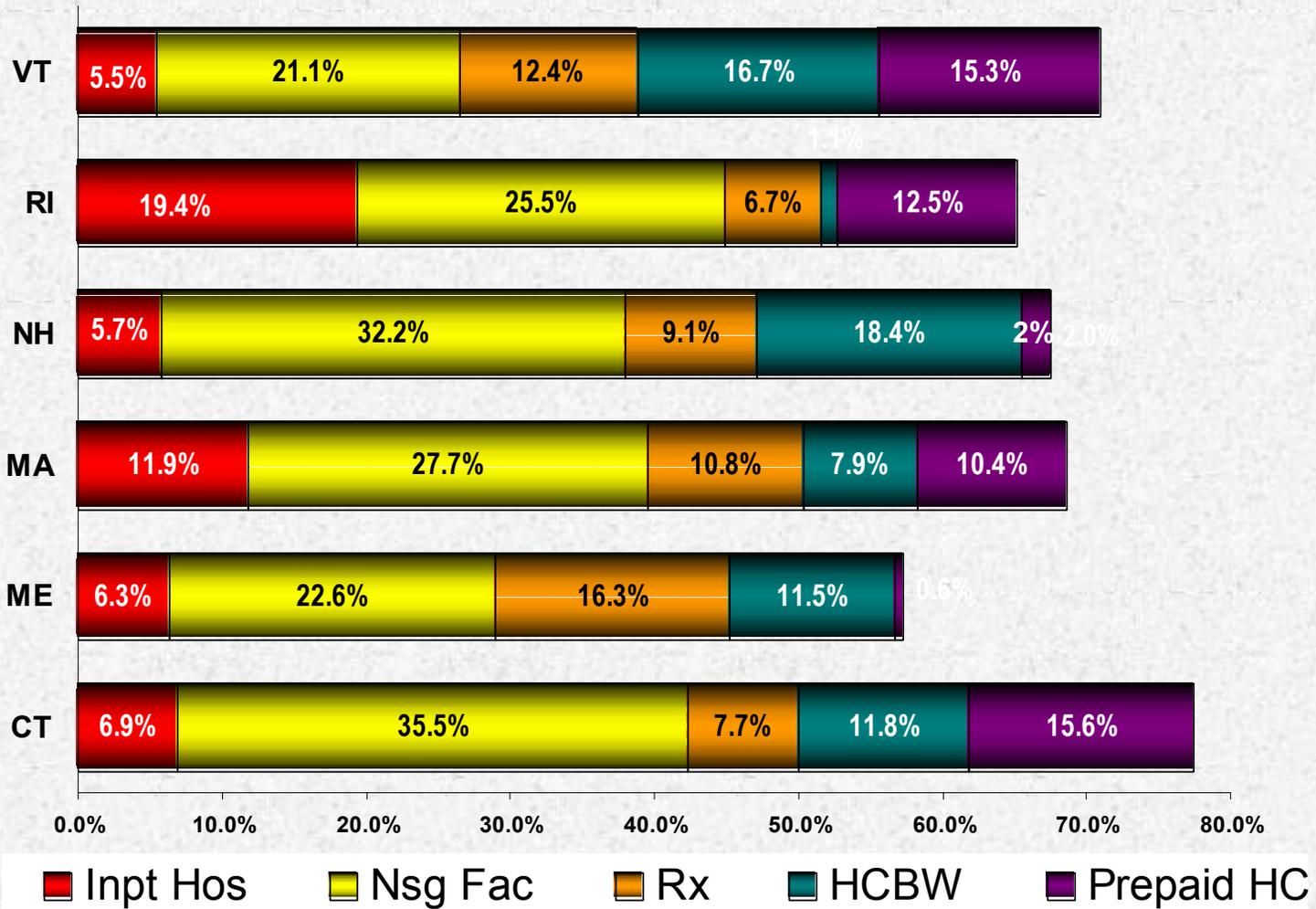
# ONTRAK

- ONTRAK, NESCSO's Web-Based Project Tracking System

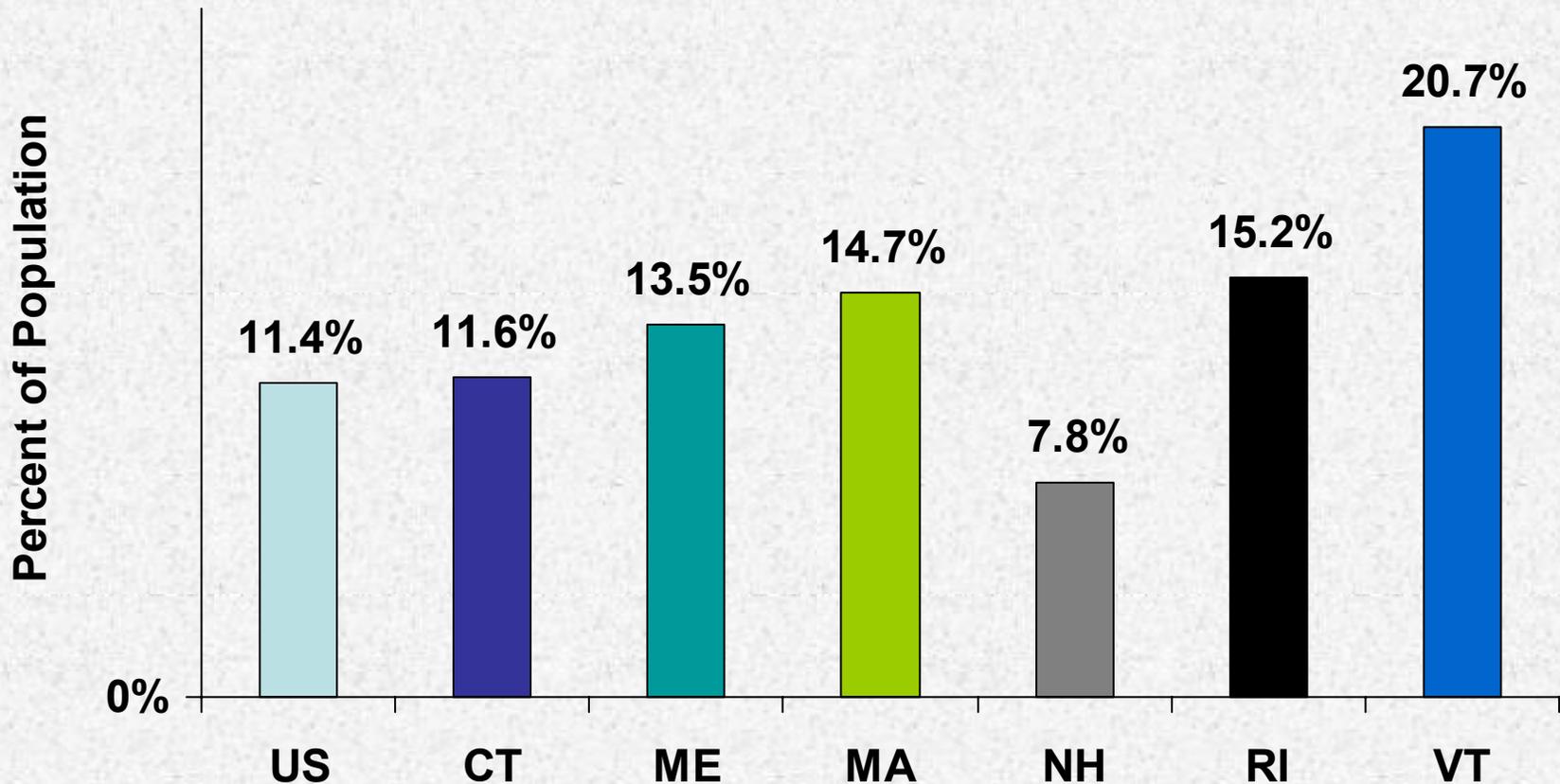
# *New England Demographics Study Methodology*

- Census Data from 1998 through 2025
- 2082 Reports from CMS 1998
  - *Medicaid Expenditures*
  - *Recipients*
  - *Level of Care*
- Demographic Cohorts include:
  - *Sex*
  - *Race (White, Black, Hispanic, Asian, American Indian)*
  - *Age (<1, 1-5, 6-14, 15-20, 21-44, 45-64, 75-84 and 85+)*

# How New England Spent 1998 Medicaid Dollars



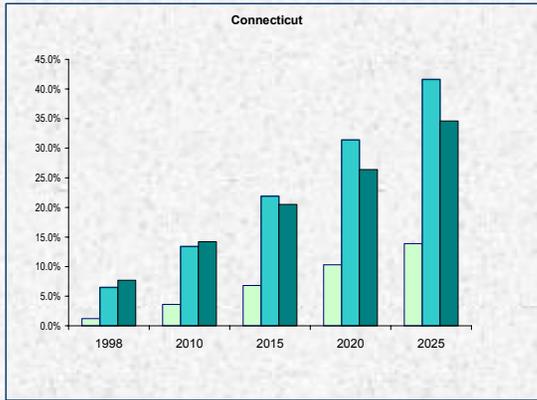
# *New England Medicaid Recipients 1998 Comparison to US*



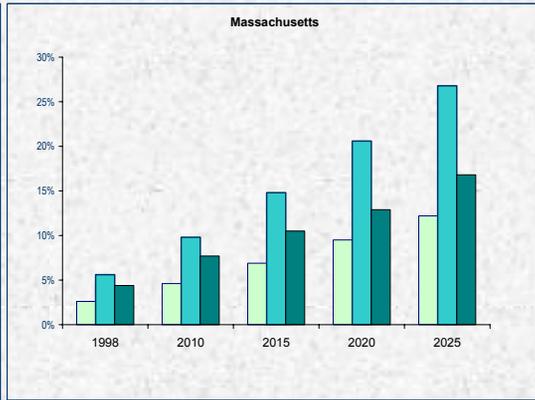
# 1998 Census, Recipient, and Expenditure Comparison

Census
  Recipients
  Expenditures

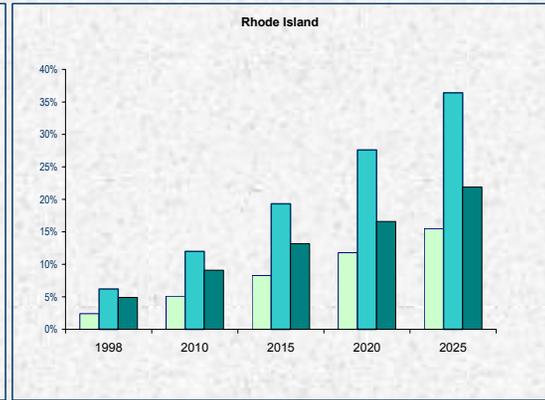
## Connecticut



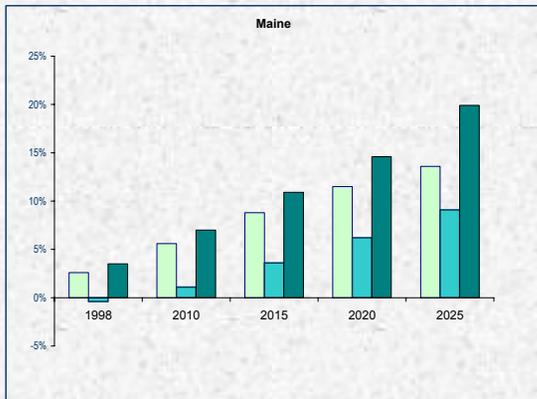
## Massachusetts



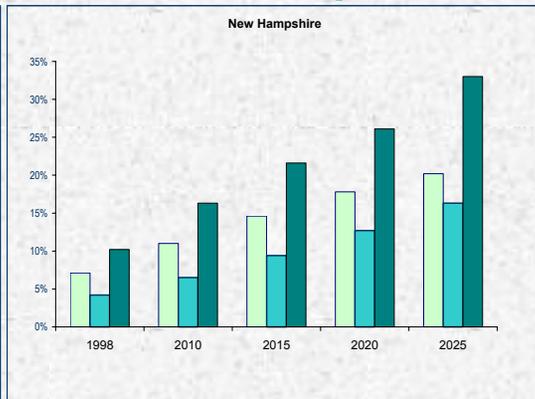
## Rhode Island



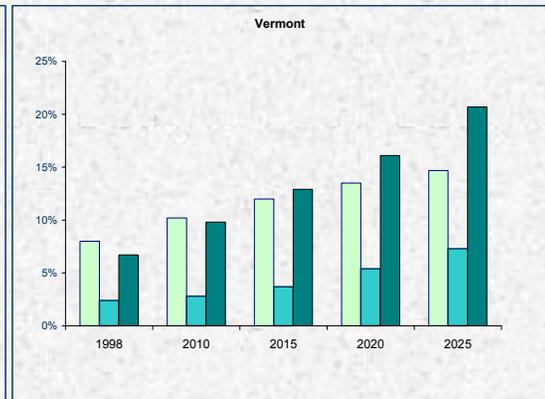
## Maine



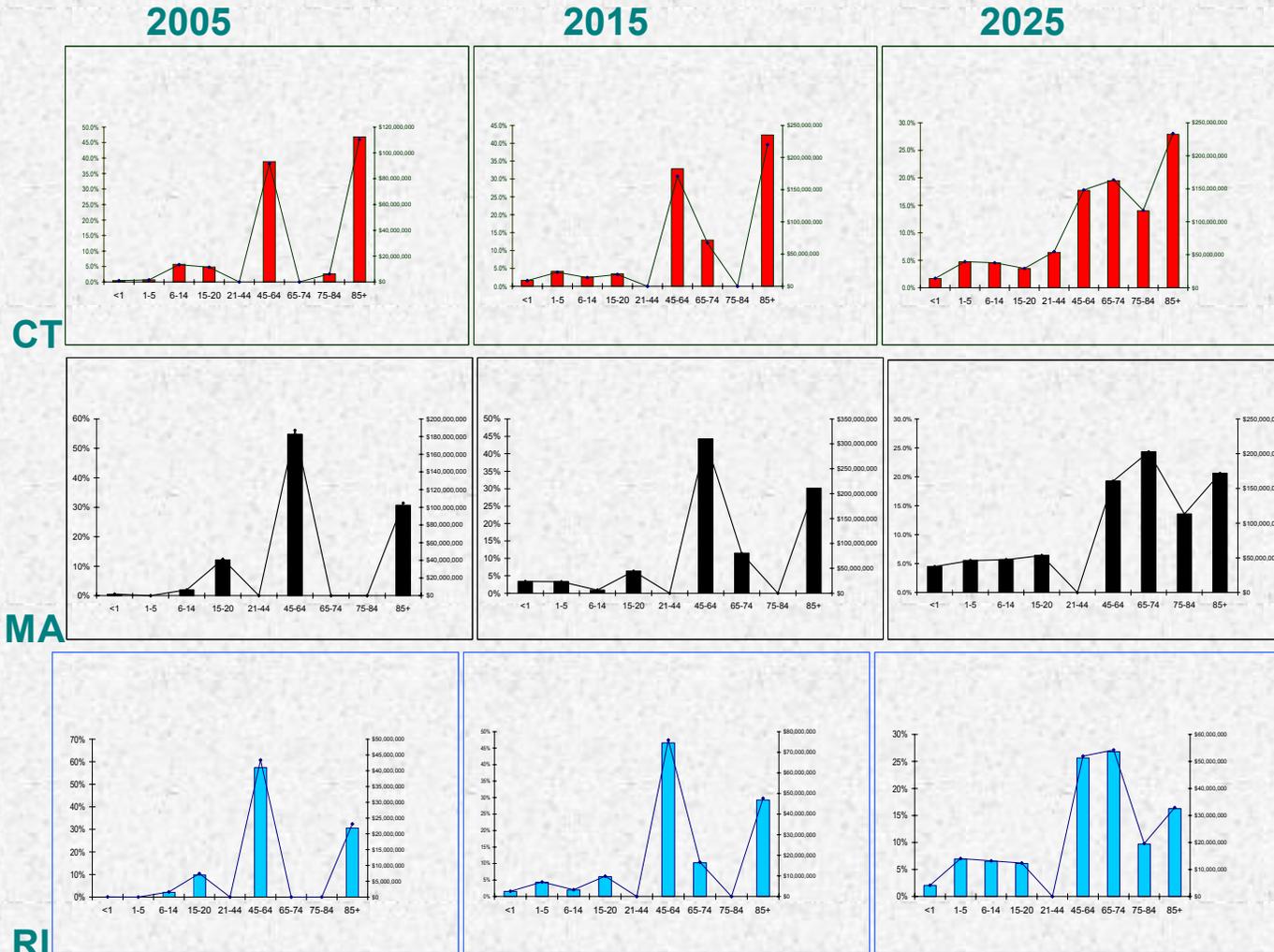
## New Hampshire



## Vermont



# Projected Expenditure Increases by Age Over Time



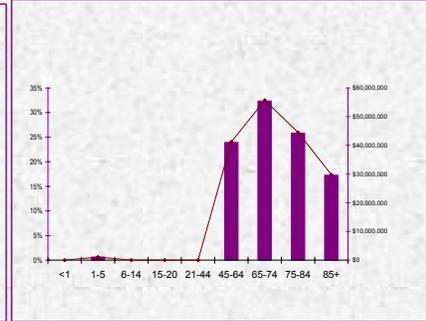
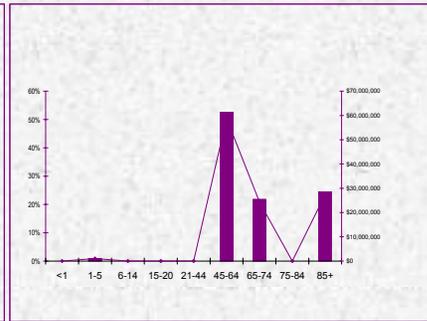
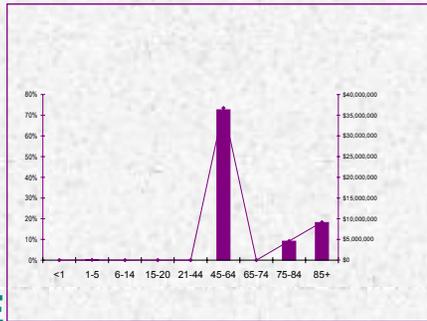
# Projected Expenditure Increases by Age Over Time

2005

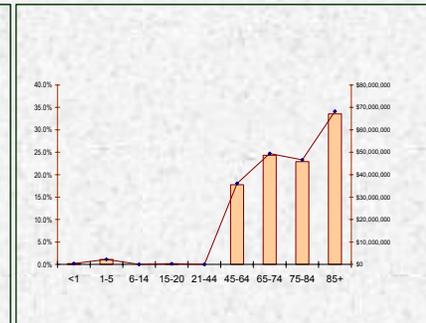
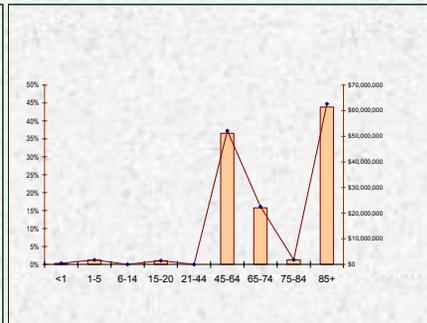
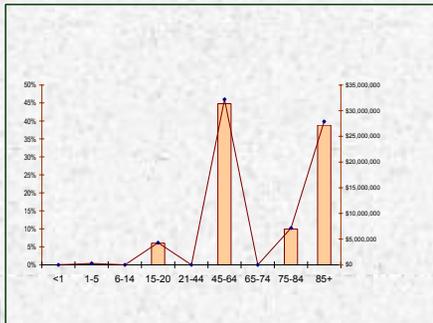
2015

2025

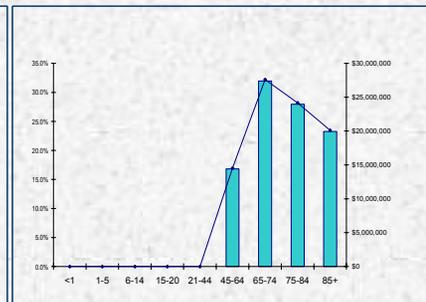
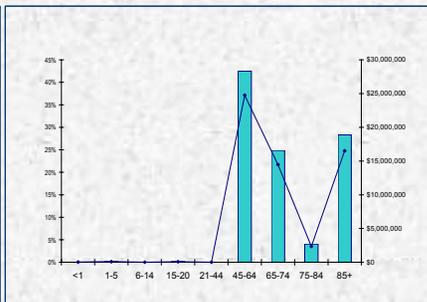
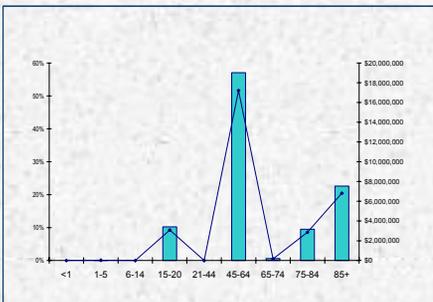
ME



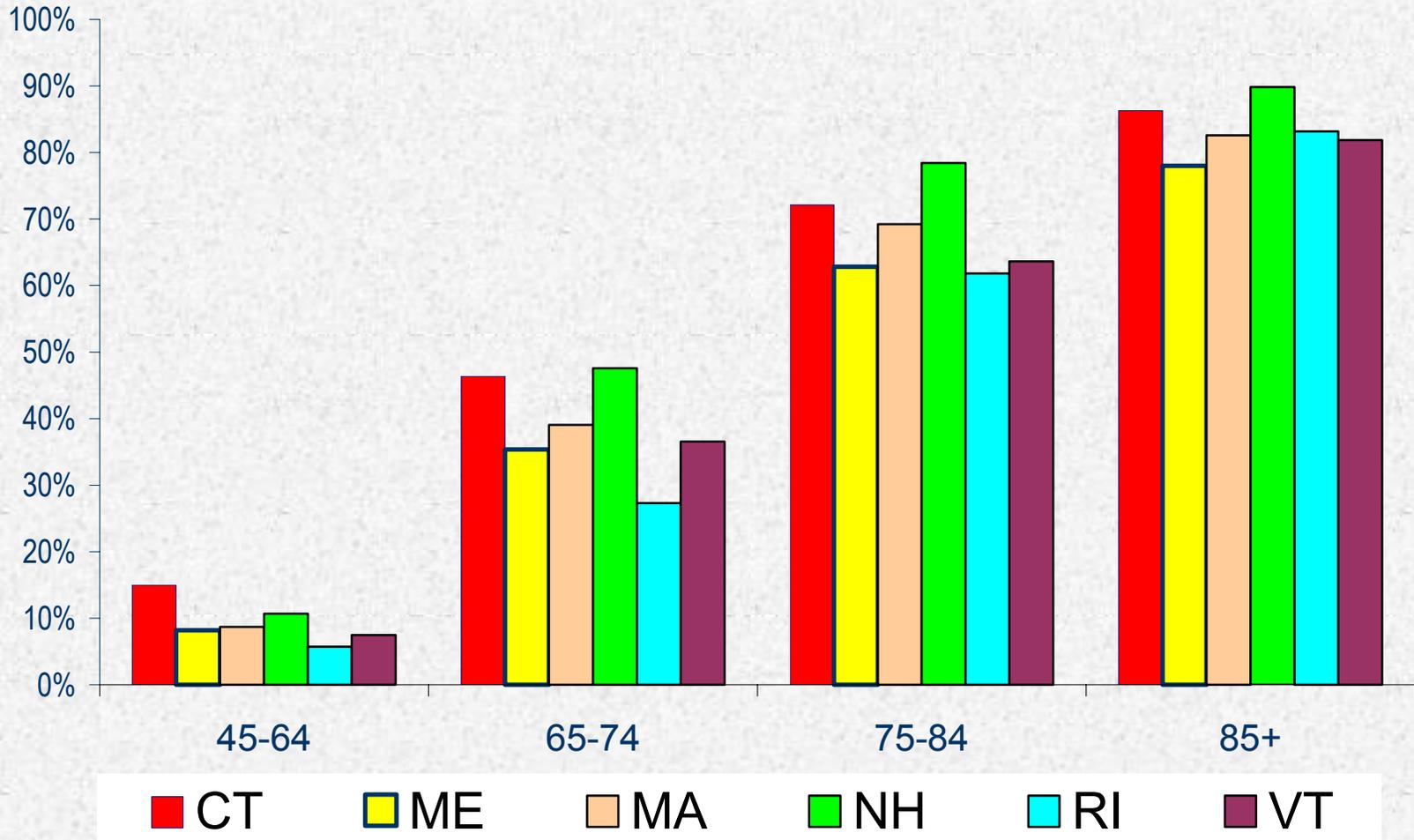
NH



VT



# 1998 Nursing Facility Expenditures



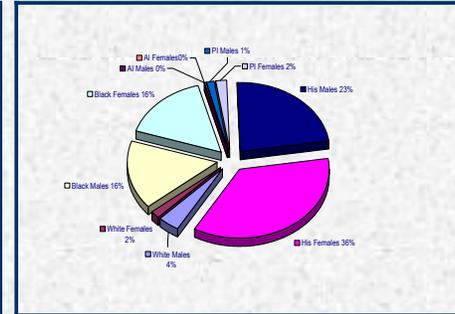
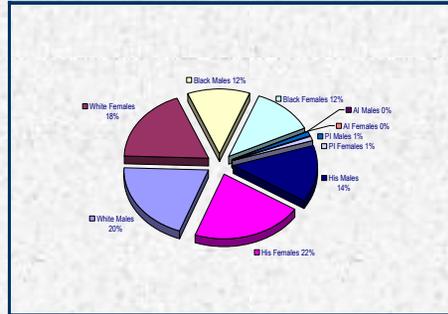
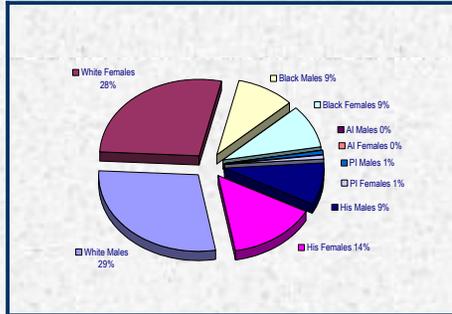
# Race Statistics 45-64 Year Old Age Group

2005

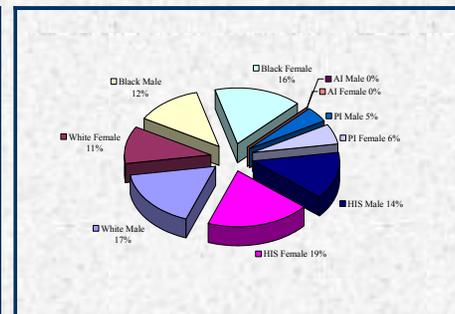
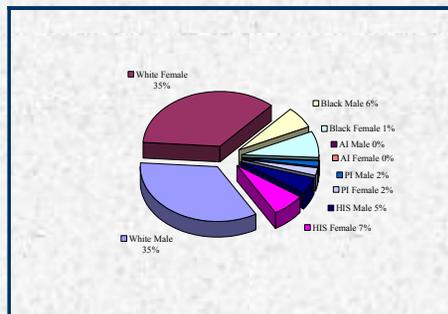
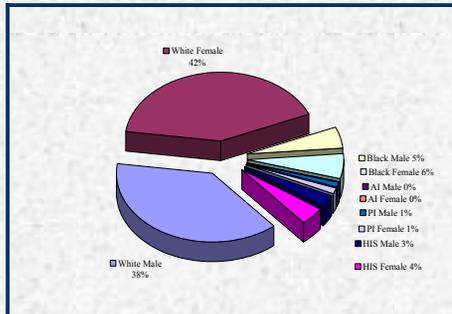
2015

2025

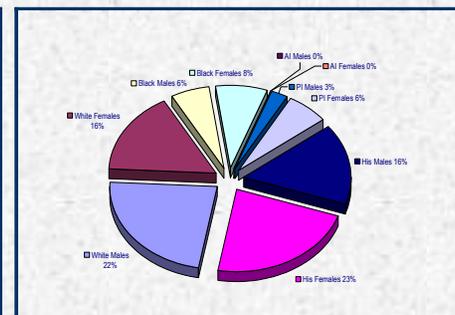
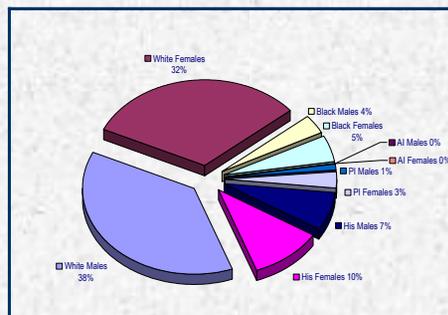
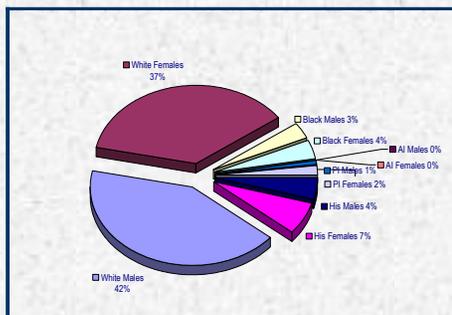
CT



MA



RI



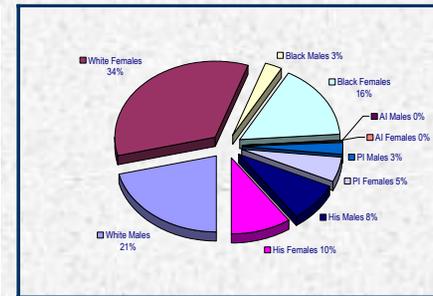
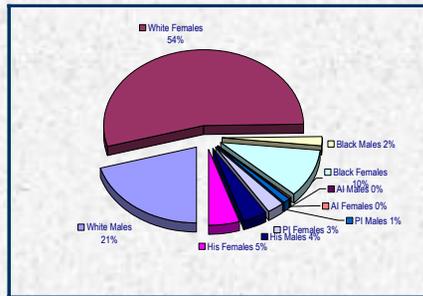
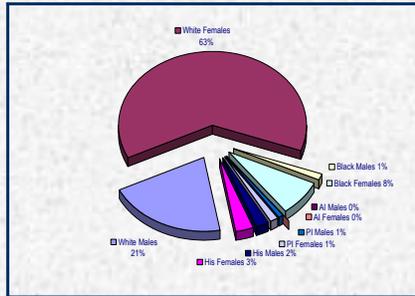
# Race Statistics 85+ Year Old Age Group

2005

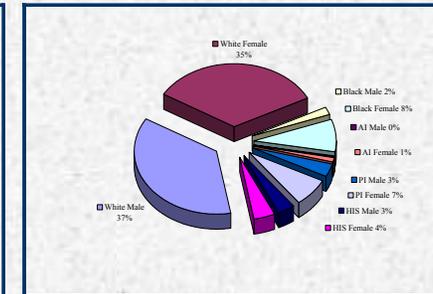
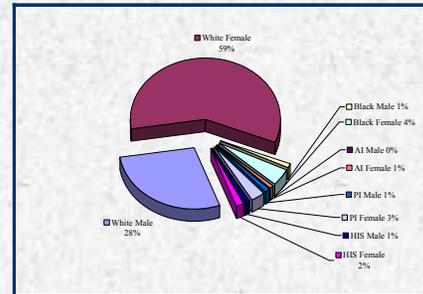
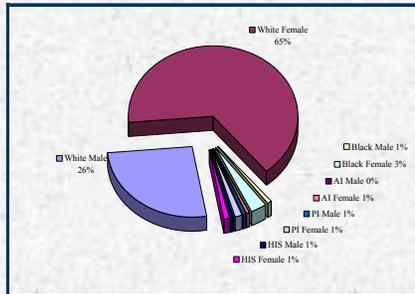
2015

2025

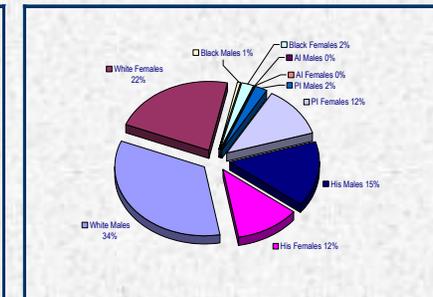
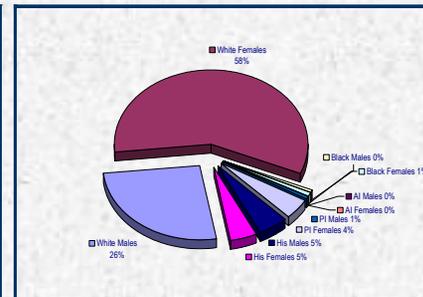
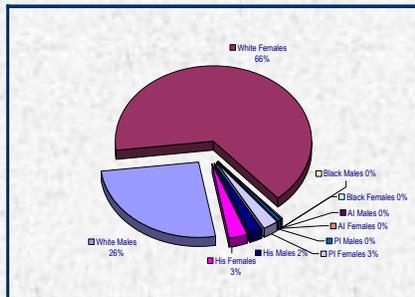
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# State Ranking by Per Capitas

## Recipient Per-capita by Age Cohort

	<1	1-5	6-14	15-20	21-44	45-64	65-74	75-84	85+	Average Per Capita
<b>Connecticut</b>	\$3,303	\$1,715	\$1,307	\$2,103	\$6,223	\$13,705	\$12,954	\$19,804	\$27,067	\$9,798
<b>New Hampshire</b>	\$2,150	\$1,410	\$2,551	\$3,744	\$7,327	\$13,933	\$12,789	\$17,674	\$21,869	\$9,272
<b>Rhode Island</b>	\$2,892	\$1,941	\$1,730	\$2,853	\$6,018	\$13,455	\$11,679	\$15,831	\$18,764	\$8,351
<b>Massachusetts</b>	\$3,369	\$1,563	\$1,619	\$2,440	\$4,973	\$8,737	\$8,435	\$12,686	\$14,768	\$6,510
<b>Maine</b>	\$1,702	\$1,395	\$2,106	\$3,157	\$4,552	\$7,247	\$6,176	\$9,225	\$13,994	\$5,506
<b>Vermont</b>	\$1,811	\$988	\$1,421	\$2,411	\$2,627	\$4,746	\$4,381	\$6,067	\$10,933	\$3,932

## Per-capita Ranking by Age Cohort (1=most expensive)

	<1	1-5	6-14	15-20	21-44	45-64	65-74	75-84	85+	Rank Order
<b>Connecticut</b>	2	2	6	6	2	2	1	1	1	1
<b>New Hampshire</b>	4	4	1	1	1	1	2	2	2	2
<b>Rhode Island</b>	3	1	3	3	3	3	3	3	3	3
<b>Massachusetts</b>	1	3	4	4	4	4	4	4	4	4
<b>Maine</b>	6	5	2	2	5	5	5	5	5	5
<b>Vermont</b>	5	6	5	5	6	6	6	6	6	6

## Percentage of Overall Expenditures by Age Cohort (1998)

	<1	1-5	6-14	15-20	21-44	45-64	65-74	75-84	85+
<b>Connecticut</b>	1.5%	4.4%	4.9%	3.4%	24.2%	18.2%	8.7%	14.5%	20.2%
<b>New Hampshire</b>	0.9%	3.9%	10.3%	6.1%	24.3%	16.1%	7.4%	12.4%	18.6%
<b>Rhode Island</b>	1.4%	5.3%	6.5%	4.2%	24.6%	19.6%	8.8%	13.0%	16.6%
<b>Massachusetts</b>	2.7%	4.3%	6.3%	4.2%	26.5%	19.7%	7.8%	12.2%	16.3%
<b>Maine</b>	1.0%	4.2%	10.4%	8.0%	26.0%	18.0%	7.8%	10.9%	13.7%
<b>Vermont</b>	1.2%	4.4%	10.8%	8.6%	26.9%	18.1%	7.4%	10.2%	12.3%

# *Next Steps*

- RFI Completed for Regional Database for New England Disease Management and Decision Support and Cross Border Program Integrity
- Continued Proactive Initiatives to Assist Member States in Future Medicaid Policy and Programs under Budget Deficit Conditions