

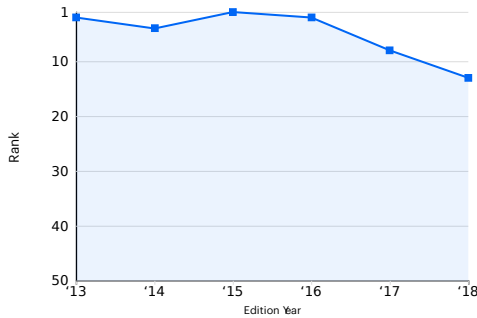


## Vermont

**OVERALL - SENIOR RANK: 13** | **CHANGE: ▼ 5**

**DETERMINANTS RANK: 16**

**OUTCOMES RANK: 10**



Rank Based On: Weighted sum of the number of standard deviations each core measure is from the national average

### STRENGTHS

- Low percentage of ICU use
- Low prevalence of smoking
- High home-delivered meals rate

### CHALLENGES

- High prevalence of falls
- High prevalence of excessive drinking
- Low percentage of hospice care use

### HIGHLIGHTS

- In the past year, food insecurity decreased 20% from 15.4% to 12.3% of adults aged 60+
- In the past year, home health care workers decreased 6% from 172.3 to 161.8 aides per 1,000 adults aged 75+
- In the past three years, SNAP reach decreased 30% from 136.8 to 95.2 participants per 100 adults aged 60+ in poverty
- In the past five years, flu vaccination coverage decreased 10% from 65.4% to 59.0% of adults aged 65+
- In the past four years, full-mouth teeth extractions decreased 14% from 17.5% to 15.1% of adults aged 65+
- In the past four years, suicide increased 11% from 19.4 to 21.6 deaths per 100,000 adults aged 65+

**WEBSITE: [www.healthvermont.gov](http://www.healthvermont.gov)**

Measure	Rating	2018 Value	2018 Rank
<b>BEHAVIORS</b>			
Dental Visit (Percentage of adults aged 65+)	++++	71.0%	12
Excessive Drinking (Percentage of adults aged 65+)	+	8.8%	46
Obesity (Percentage of adults aged 65+)	++++	25.9%	14
Pain Management (Percentage of adults aged 65+ with arthritis)	++	51.7%	35
Physical Inactivity (Percentage of adults aged 65+ in fair or better health)	++++	28.0%	20
Smoking (Percentage of adults aged 65+)	+++++	7.0%	6
<b>Behaviors * (All Behaviors-Seniors)</b>	<b>++++</b>	<b>0.048</b>	<b>19</b>
<b>COMMUNITY &amp; ENVIRONMENT</b>			
Nursing Home Quality (Percentage of beds rated four- or five-stars)	+++	48.3%	29
Poverty (Percentage of adults aged 65+)	+++	8.7%	27
Volunteerism (Percentage of adults aged 65+)	+++++	34.2%	8
<b>Community &amp; Environment - Macro * (Community &amp; Environment - Macro - Seniors)</b>	<b>++++</b>	<b>0.057</b>	<b>16</b>
Community Support (Dollars per adult aged 60+ in poverty)	+++++	\$1,527	5
Food Insecurity (Percentage of adults aged 60+)	++++	12.3%	14
Home-delivered Meals (Meals per 100 adults aged 60+ with independent living difficulty)	+++++	25.2	4
<b>Community &amp; Environment - Micro * (Community &amp; Environment - Micro - Seniors)</b>	<b>+++++</b>	<b>0.136</b>	<b>5</b>
<b>Community &amp; Environment Total * (All Community &amp; Environment measures-Seniors)</b>	<b>+++++</b>	<b>0.193</b>	<b>6</b>
<b>POLICY</b>			
Geriatrician Shortfall (Percentage of geriatricians needed)	+++	67.3%	22
Health Care Associated Infection (HAI) Policies (Percentage of policies in place)	+	16.7%	42
Low-care Nursing Home Residents (Percentage of residents)	++++	9.0%	15
Prescription Drug Coverage (Percentage of Medicare enrollees aged 65+)	+++	85%	25
SNAP Reach (Participants per 100 adults aged 60+ living in poverty)	+++++	95.2	8
<b>Policy * (All Policy measures-Senior)</b>	<b>++++</b>	<b>-0.013</b>	<b>20</b>
<b>CLINICAL CARE</b>			
Dedicated Health Care Provider (Percentage of adults aged 65+)	++	94.3%	31
Diabetes Management (Percentage of Medicare enrollees aged 65 to 75)	+	69.6%	46
Flu Vaccine (Percentage of adults aged 65+)	+++	59.0%	25
Health Screenings (Percentage of seniors with recommended screenings)	+++	72.9%	23
Home Health Care (Number of workers per 1,000 adults aged 75+)	+++++	161.8	7
Hospice Care (Percentage of Medicare decedents aged 65+)	+	37.0%	46
Hospital Deaths (Percentage of Medicare decedents aged 65+)	+	23.9%	43
Hospital Readmissions (Percentage of hospitalized Medicare enrollees aged 65+)	+++++	13.8%	10
Preventable Hospitalizations (Discharges per 1,000 Medicare enrollees aged 65+)	++++	39.4	11
<b>Clinical Care * (All Clinical Care measures--Seniors)</b>	<b>++</b>	<b>-0.026</b>	<b>34</b>
<b>ALL DETERMINANTS</b>			
<b>All Determinants * (All Determinants)</b>	<b>++++</b>	<b>0.201</b>	<b>16</b>
<b>OUTCOMES</b>			
Able-bodied (Percentage of adults aged 65+)	+++++	68.9%	2
Early Death (Deaths per 100,000 adults aged 65 to 74)	+++++	1,560	7
Falls (Percentage of adults aged 65+)	+	35.3%	49
Frequent Mental Distress (Percentage of adults aged 65+)	+++	7.1%	23
High Health Status-Senior (Percentage of adults aged 65+)	+++++	52.0%	1
Hip Fractures (Hospitalizations per 1,000 Medicare enrollees aged 65+)	+++++	4.6	4
ICU Use (Percentage of Medicare decedents aged 65+)	+++++	4.4%	1
Teeth Extractions (Percentage of adults aged 65+)	+++	15.1%	29
<b>All Outcomes * (All Outcomes)</b>	<b>+++++</b>	<b>0.166</b>	<b>10</b>
<b>OVERALL</b>			
<b>Overall * (Overall)</b>	<b>++++</b>	<b>0.366</b>	<b>13</b>

RATING RANK
+++++ 1 - 10
++++ 11 - 20
+++ 21 - 30
++ 31 - 40
+ 41 - 50

\* Value indicates z score. Negative scores are below US value; positive scores are above US value. For complete definitions of measures including data sources and years, see "[Appendix: Core Measures](#)".

- Data Unavailable

## SUPPLEMENTAL MEASURES

Measure	Rating	2018 Value	2018 Rank
Cognitive Difficulty (Percentage of adults aged 65+)	+++++	6.3%	3
Depression (Percentage of adults aged 65+)	++	16.1%	37
Education (Percentage of adults aged 65+)	+++++	34.5%	2

RATING RANK					
+++++	1 - 10	Overuse--PSA Test (Percentage of male Medicare enrollees aged 75+)	+++++	9.7%	2
++++	11 - 20	Poor Mental Health Days (Mean number of days)	++++	2.3	18
+++	21 - 30	Isolation (Percentile of mean z scores for six social isolation risk factors in adults 65+)	++++	32	17
++	31 - 40	Suicide (Deaths per 100,000 adults aged 65+)	+	21.6	41
+	41 - 50				

• Data Unavailable

## Dental Visit - Seniors



**71.0%** ▼

SINCE 2017, DENTAL VISIT\*  
**DECREASED 1.3% FROM 71.9% TO 71.0%**

\* Percentage of adults aged 65+

## Teeth Extractions - Seniors



**15.1%** ▼

SINCE 2017, TEETH EXTRACTIONS\*  
**DECREASED 10.7% FROM 16.9% TO 15.1%**

\* Percentage of adults aged 65+

## Home Health Care



**161.8** ▼

SINCE 2017, HOME HEALTH CARE \*  
**DECREASED 6.1% FROM 172.3 TO 161.8**

\* Number of workers per 1,000 adults aged 75+

## Nursing Home Quality



**48.3%** ▼

SINCE 2017, NURSING HOME QUALITY\*  
**DECREASED 12.3% FROM 55.1% TO 48.3%**

\* Percentage of beds rated four- or five-stars

## Food Insecurity - Seniors



**12.3%** ▼

SINCE 2017, FOOD INSECURITY\*  
**DECREASED 20.1% FROM 15.4% TO 12.3%**

\* Percentage of adults aged 60+

## Suicide - Senior



**21.6** ▼

SINCE 2017, SUICIDE\* **DECREASED 1.8% FROM 22.0 TO 21.6**

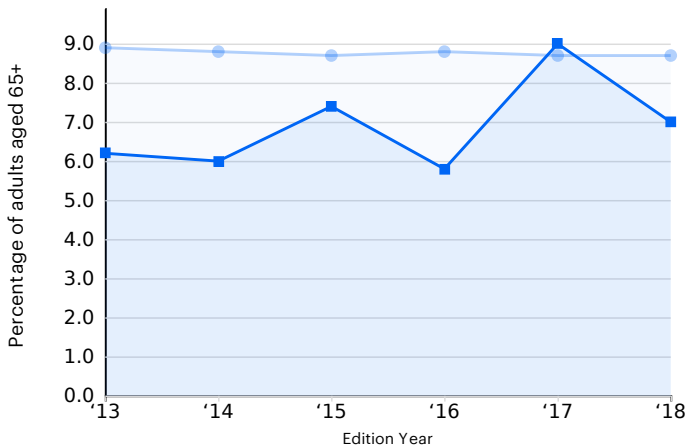
\* Deaths per 100,000 adults aged 65+



## Top 5 States



## Smoking - Seniors



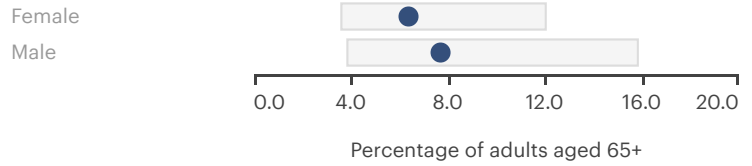
Percentage of adults aged 65 and older who are smokers (reported smoking at least 100 cigarettes in their lifetime and currently smoke every or some days)

■ Vermont ● United States

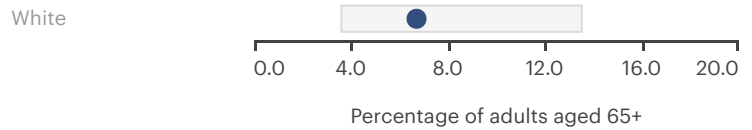
Smoking is the leading cause of preventable death in the United States. It is estimated that there are 4.2 million smokers aged 65 and older in the nation. Smoking damages nearly every organ in the body and causes diseases such as cataracts, respiratory disease, heart disease, stroke and cancer. It is also associated with accelerated cognitive decline, dementia and early cognitive impairment. Cessation, even in senior smokers, can have profound benefits on current health and long-term outcomes. For example, the risk of dying of lung cancer drops by half 10 years after cessation.

Range of Values for all States (light grey box) VT Value (dark blue circle)

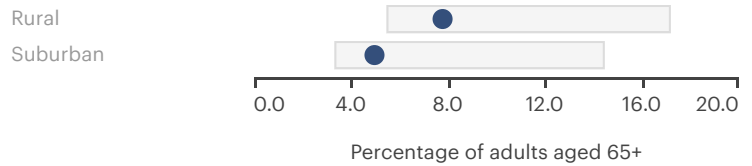
### GENDER



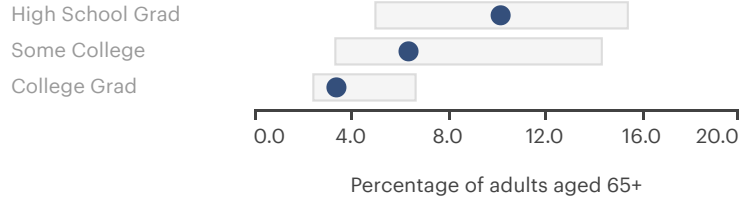
### RACE/ETHNICITY



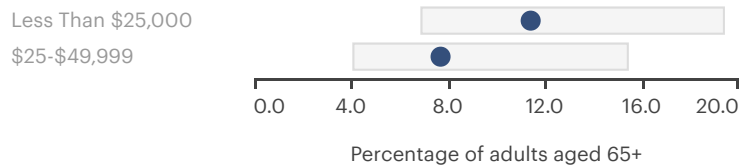
### URBANICITY



### EDUCATION

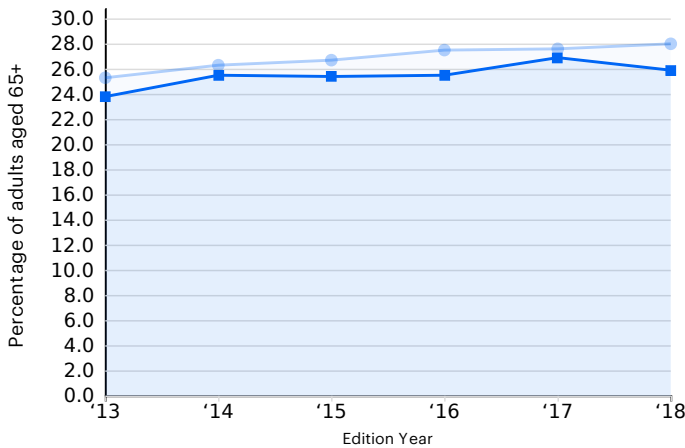


### INCOME



Data suppression rules are as defined by the original source.  
Race and ethnicity populations are as defined by the original source.

## Obesity - Seniors



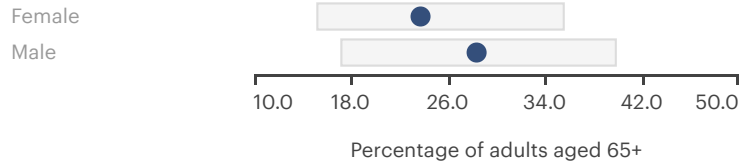
Percentage of adults aged 65 and older with a body mass index of 30.0 or higher based on reported height and weight

■ Vermont ● United States

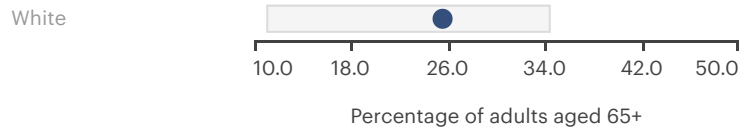
Obesity is the leading cause of preventable life-years lost among Americans — surpassing tobacco use, high blood pressure and high cholesterol. There is a stronger relationship between obesity and mortality risk among older age groups. Adults with obesity, compared with adults at a healthy weight, are at a higher risk of developing serious health conditions including cognitive decline, chronic conditions and certain cancers. Contributing factors for obesity include behaviors such as poor diet and physical inactivity, social and physical environments, genetics and medical history. Growing evidence illustrates the importance of the built environment and community design in promoting a healthy lifestyle.

Range of Values for all States VT Value

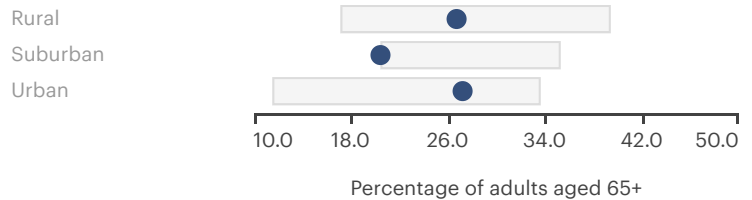
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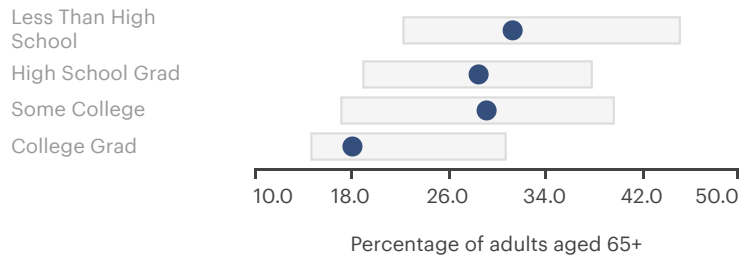
### RACE/ETHNICITY



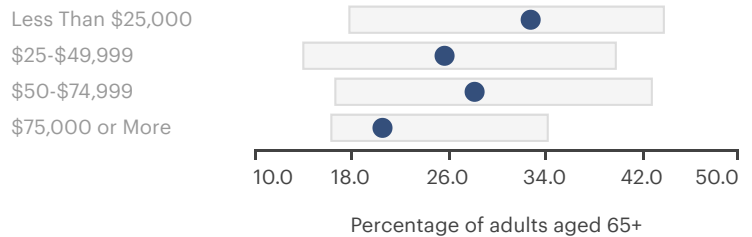
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### EDUCATION

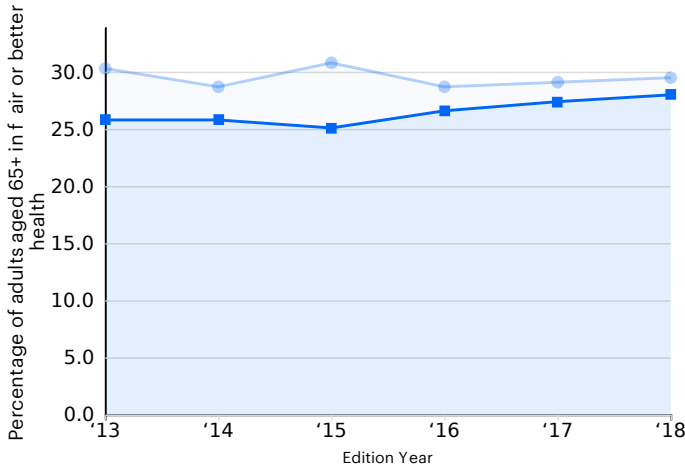


### INCOME



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## Physical Inactivity - Seniors



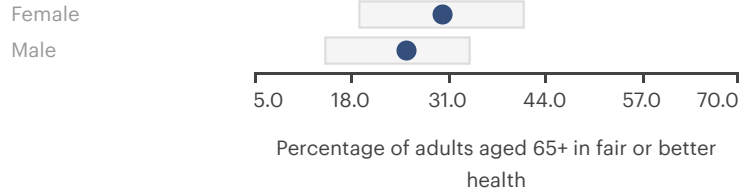
**■** Percentage of adults aged 65 and older in fair or better health who reported doing no physical activity or exercise other than their regular job in the past 30 days

**■** Vermont      **●** United States

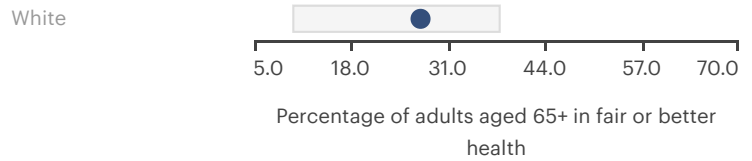
Physical activity is an integral part of healthy aging. The Centers for Disease Control and Prevention estimate that only 16 percent of adults aged 65 and older met aerobic and muscle-strengthening guidelines in 2011 — the lowest of any age group. Physical inactivity increases the risk of cardiovascular disease, cancer, diabetes, hypertension, obesity and premature death. Increasing physical activity, especially from an absence, prevents and helps manage numerous chronic diseases. Even moderate increases in physical activity can greatly reduce risk of adverse health outcomes. Growing evidence illustrates the importance of the built environment and community design to promote physical activity for seniors.

**▭** Range of Values for all States      **●** VT Value

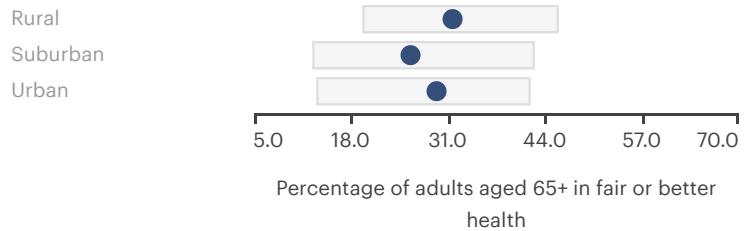
### GENDER



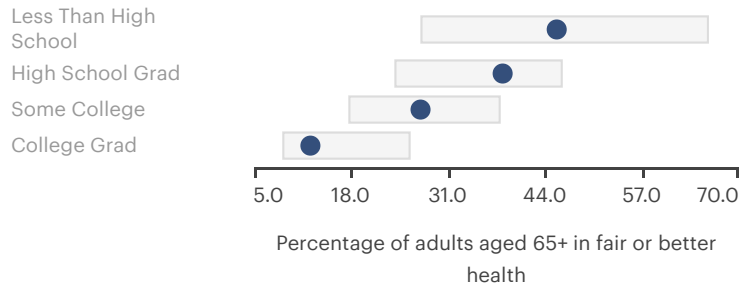
### RACE/ETHNICITY



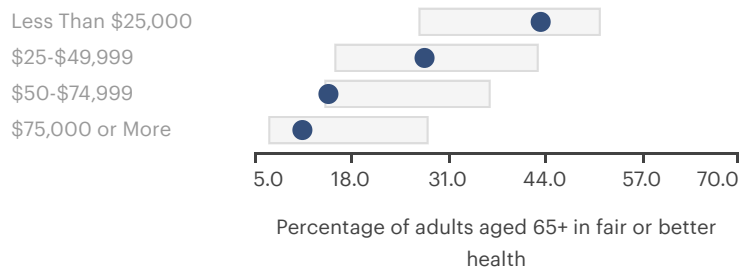
### URBANICITY



### EDUCATION

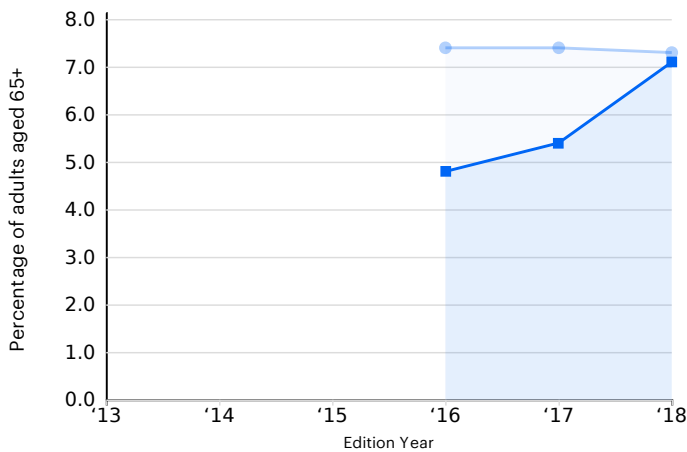


### INCOME



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## Frequent Mental Distress - Seniors



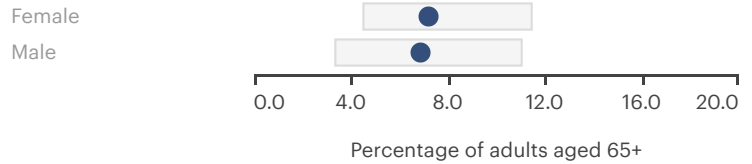
**■** Percentage of adults aged 65 and older who reported their mental health was not good 14 or more days in the past 30 days

**■** Vermont      **●** United States

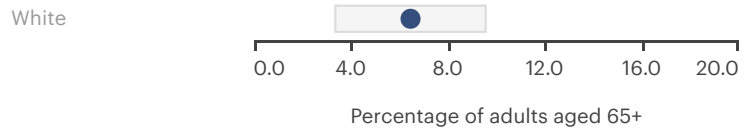
Frequent mental distress is characterized by 14 or more days of self-reported poor mental health in the past month and emphasizes the burden of severe mental health issues in a population. Older adults with FMD are more likely to engage in behaviors that contribute to poor health such as smoking, physical inactivity and poor diet. Activity limitations due to physical, mental or emotional problems, as well as avoidance of medical care due to cost are associated with frequent mental distress among older adults. Chronic and severe mental health episodes are treatable and may be preventable through simple, cost-effective and time-efficient screening procedures, early interventions and quality care.

**■** Range of Values for all States      **●** VT Value

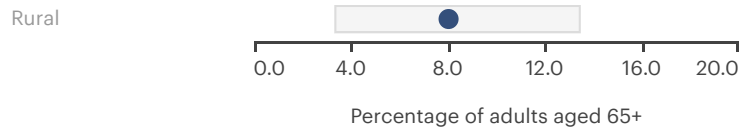
### GENDER



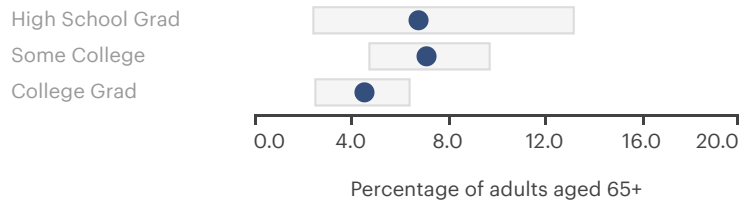
### RACE/ETHNICITY



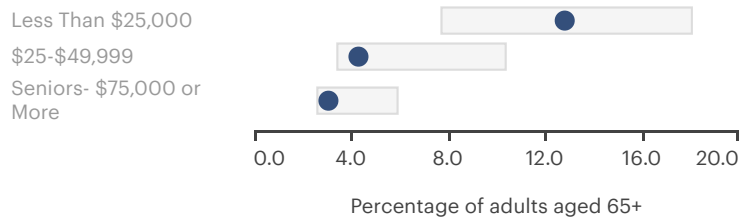
### URBANICITY



### EDUCATION



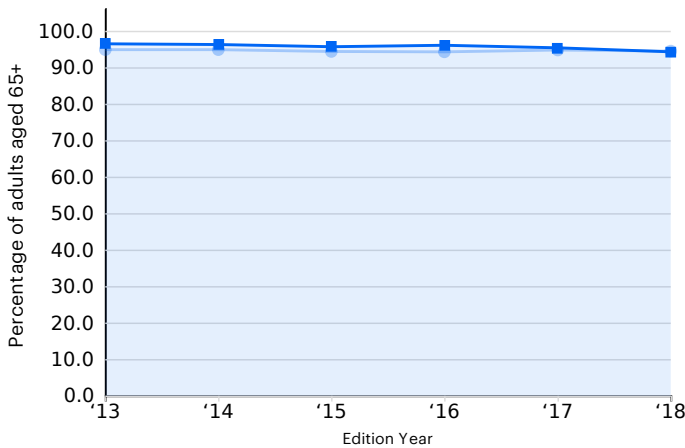
### INCOME



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## Dedicated Health Care Provider - Seniors



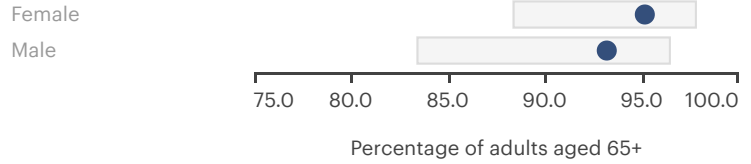
Percentage of adults aged 65 and older who reported having one or more people they think of as their personal doctor or health care provider

■ Vermont ● United States

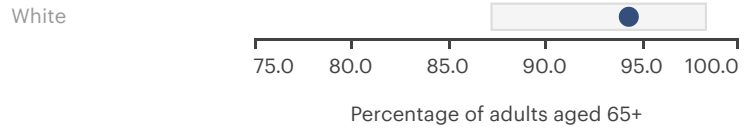
Seniors with a dedicated health care provider are better positioned to receive care that can prevent, detect and manage health conditions. Having a regular health care provider is associated with lower health care costs, and improvements in overall health status and chronic care management. Adults without a dedicated health care provider are more likely to visit the emergency department for non-urgent or avoidable problems. An estimated \$13.7 million was spent on emergency department services for adults aged 65 and older in 2013. Barriers to obtaining a dedicated health care provider include limited access, financial constraints, limited transportation and a lack of knowledge of available services and providers.



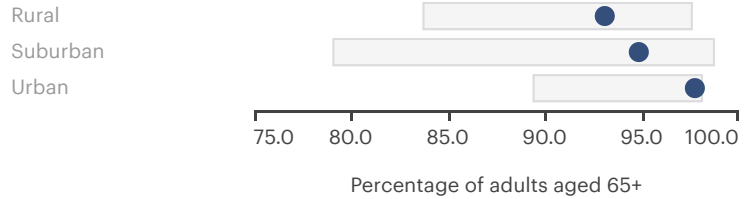
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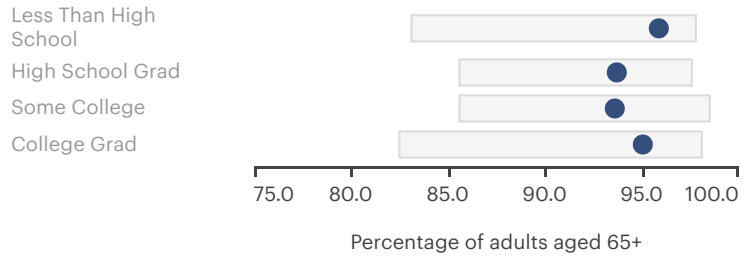
### RACE/ETHNICITY



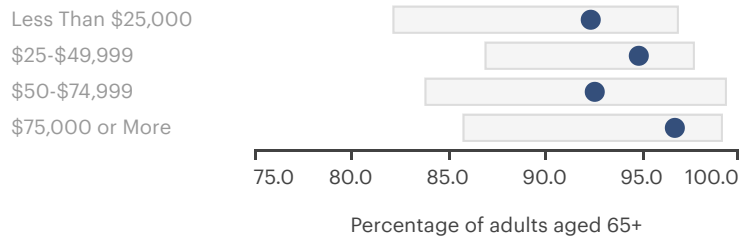
### URBANICITY



### EDUCATION

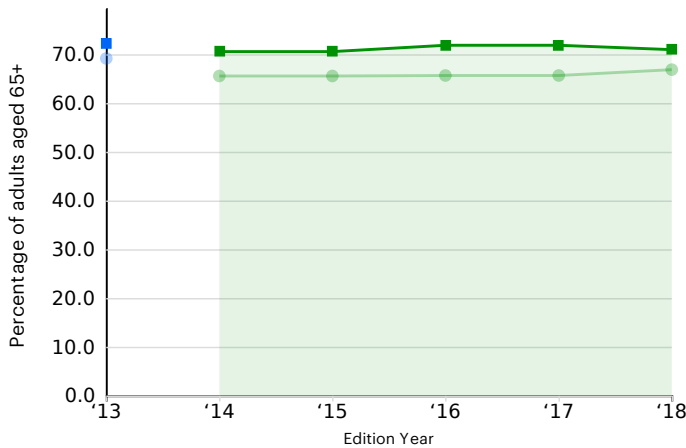


### INCOME



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## Dental Visit - Seniors



**■** Percentage of adults aged 65 years and older who reported visiting the dentist or dental clinic within the past year (pre-2011 BRFSS methodology)

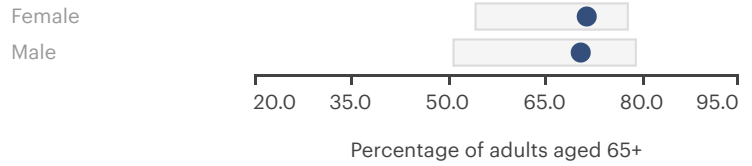
**■** Percentage of adults aged 65 and older who reported visiting a dental health professional within the past year

**■** Vermont      **●** United States

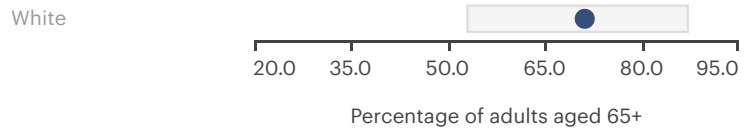
Oral health naturally declines with age, and problems arise if routine care is not maintained. Poor oral health can have a large impact on quality of life by negatively affecting the ability to chew, speak and interact socially, in addition to increasing the risk for certain diseases such as diabetes and oral cancer. Most individuals lose dental insurance coverage when they retire, and Medicare generally does not cover dental care. This means the majority of seniors pay out-of-pocket for most or all dental expenses, which impacts dental care use. Older adults who use preventive dental care may reduce their dental bills and out-of-pocket payments.

**■** Range of Values for all States      **●** VT Value

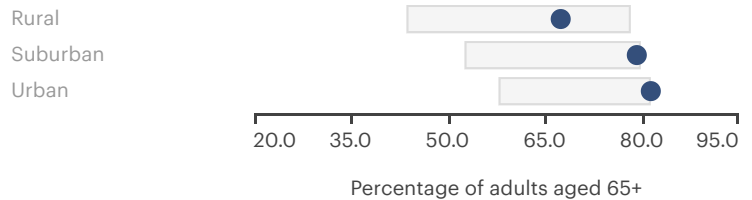
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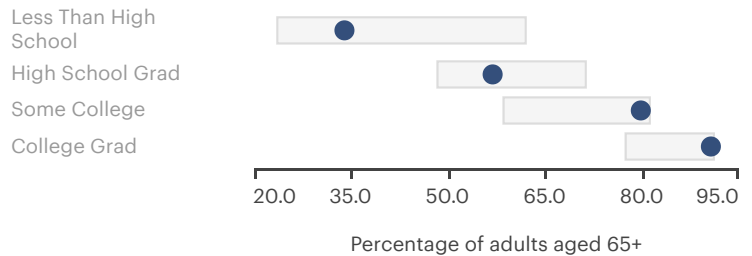
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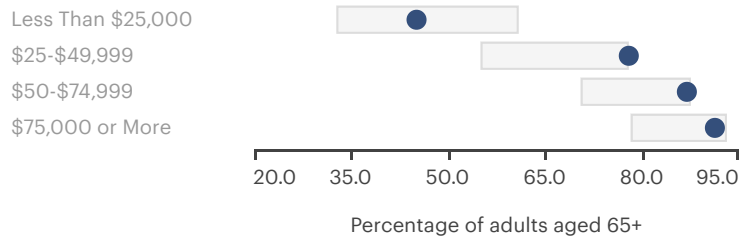
### URBANICITY



### EDUCATION

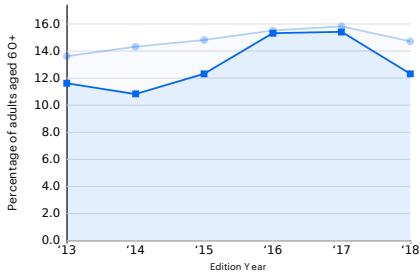


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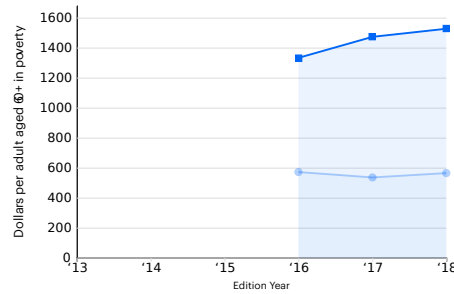
### Trend: Food Insecurity - Seniors, Vermont, United States



Percentage of adults aged 60 and older who faced the threat of hunger in the past 12 months

■ Vermont ● United States

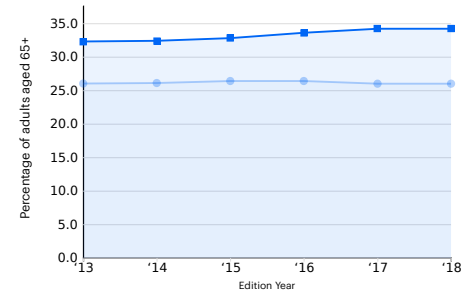
### Trend: Community Support, Vermont, United States



Expenditures captured by the Administration on Aging per adult aged 60 and older living in poverty

■ Vermont ● United States

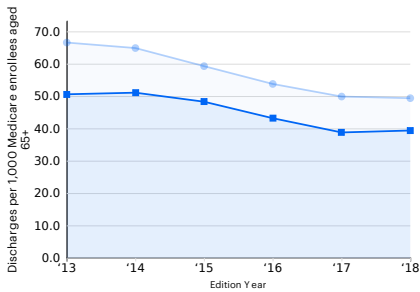
### Trend: Volunteerism, Vermont, United States



Percentage of adults aged 65 and older who reported volunteering in the past 12 months

■ Vermont ● United States

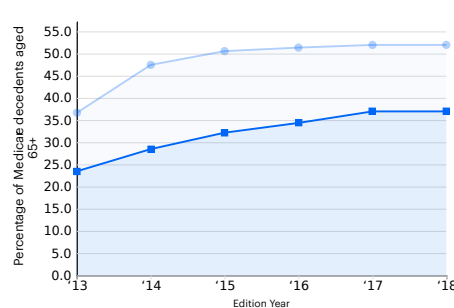
### Trend: Preventable Hospitalizations - Seniors, Vermont, United States



Number of discharges for ambulatory care-sensitive conditions per 1,000 Medicare enrollees aged 65 and older

■ Vermont ● United States

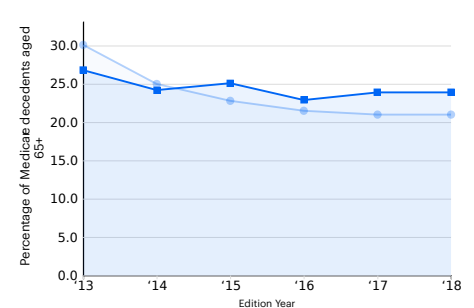
### Trend: Hospice Care, Vermont, United States



Percentage of Medicare decedents aged 65 and older who were enrolled in hospice during the last six months of life after diagnosis of a condition with a high probability of death

■ Vermont ● United States

### Trend: Hospital Deaths, Vermont, United States



Percentage of deaths occurring in a hospital among chronically ill Medicare decedents aged 65 and older

■ Vermont ● United States