MEDICARE ADVANTAGE

Higher Standards, Quality Coverage

Congress created Medicare Advantage (MA) in 2003 to provide America's seniors a convenient, coordinated option for their health coverage and to drive greater value and accountability in the Medicare program. Today, the evidence is clear: MA is working, providing exceptional coverage and care for **nearly 28 million seniors**.[1] The program provides all the benefits of traditional Medicare, plus enhanced benefits, high value coverage, better health outcomes, greater transparency and superior customer experience – all at a lower price.

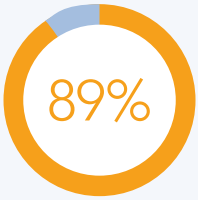
Aligning incentives around caring for people

MA prioritizes quality over volume of care – encouraging more effective, coordinated and managed health care, unlike the fragmented, fee-for-service Medicare model.

MA utilizes the CMS Star Ratings system to measure and publicly report plan performance – providing complete transparency.

MA is the only government health program that measures and rewards quality coverage and care.

MA plans are rated on a 5 star scale – helping seniors shop for quality coverage.



In 2022, 89% of all MA enrollees were in plans rated 4 stars or higher. That is an increase of 63% since 2012 when the star ratings program began.[2]

Seniors are more satisfied with their MA plans compared to those in traditional Medicare (99% to 85%, respectively).[3,4]

98% of MA enrollees stay in the program from one year to the next.[5]

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1 "Medicare Monthly Enrollment – October, 2021," CMS Data, Oct. 2021, https://achp.pub/Medicare-Enrollment-Oct-21.
2. "Fact Sheet - 2022 Part C and D Star Ratings," CMS, Oct. 2021, https://achp.pub/Star-Rating-FS-2021.
3 "Seniors' Experiences With Medicare Advantage Amidst COVID-19." Morning Consult, on behalf of Better Medicare Alliance. May 16-18, 2020. http://achp.pub/MA-Approval-2020
4 "The Exciting News in Medicare Is Happening at the Kitchen Table-Not on the Debate Stage," McKinsey, November 27, 2019, http://mck.co/3ni8fGq.
5 Gretchen Jacobson et al., "Medicare Advantage Plan Switching: Exception or Norm?" Kaiser Family Foundation. September 2016. http://bit.ly/2ZA9OYo.

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Improving health outcomes for seniors

MA outperforms traditional Medicare on health outcomes and keeps seniors healthy.

MA has a 57% lower rate of avoidable hospitalizations for beneficiaries with major complex conditions compared to fee-for-service Medicare.[6]

MA plans spend on average 21.4% more on preventive services than traditional Medicare, keeping beneficiaries healthy and out of the hospital.[7]

MA enrollees are 13.4% more likely to be screened for breast cancer compared to those in traditional Medicare.[7]

MA plans outperform fee-for-service Medicare on all 16 clinical quality measures, including prescription drug adherence and access to medications.[6]

MA provides a better patient experience, outperforming fee-for-service Medicare on measures such as getting appointments and care quickly, personal rating of health care quality and personal rating of a drug plan.[6]

For more information about Medicare Advantage, please contact Tricia Guay at **tguay@achp.org**.

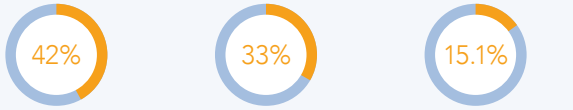
Managing chronic conditions for healthier lives

MA plans help seniors with chronic and complex conditions effectively manage their care – **seniors in MA plans are 73% less likely to have serious complications from diabetes** compared to those in traditional Medicare.[7]

MA plans may provide new supplemental benefits not offered in traditional Medicare, such as adult day care, in-home and caregiver support, and additional benefits for the chronically ill.[8]

For chronically ill seniors, MA plans offer special, supplemental benefits for healthy food, non-medical transportation, indoor air quality equipment and structural home modifications, among others, none of which are provided by fee-for-service Medicare.[9]

MA dual eligible seniors, who receive benefits through both Medicare and Medicaid, saw their doctors more often, were hospitalized less frequently, and made fewer visits to the ER than dual eligible seniors in traditional Medicare.[7]



42% fewer ER visits

33% fewer hospitalizations

15.1% lower re-admission rates

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6. "Positive Outcomes for High- Need, High-Cost Beneficiaries in Medicare Advantage Compared to Traditional Fee-For-Service Medicare," Avalere Health for Better Medicare Alliance, Dec. 2020. http://achp.pub/35dl90T
7. "Medicare Advantage Achieves Better Health Outcomes and Lower Utilization of High-Cost Services Compared to Fee-for-Service Medicare," Avalere Health, July 2018, http://bit.ly/31SD0Hq.
8. "2019 Medicare Advantage and Part D Prescription Drug Program Landscape", CMS, Sept. 2018. https://go.cms.gov/2Zls4uR
9. "Implementing Supplemental Benefits for Chronically Ill Enrollees", CMS, April 2019. https://go.cms.gov/2NG9FMH