

Spotlight on Health

Analysis of COVID-19 Impact on Medicare Advantage and Fee-for-Service Beneficiaries

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Methodology

- Analyzed the **Medicare Current Beneficiary Survey (MCBS) COVID-19 Fall Supplement Public Use File, released in January 2021**
 - A nationally representative, cross-sectional telephone survey of Medicare beneficiaries during 2020
- Produced a comparative analysis of COVID-19 experience for Medicare beneficiaries in Medicare Advantage (MA) compared to those in Fee-for-Service (FFS)
 - Analyzed full dual eligibles and other beneficiaries (combining partial duals and non-dual eligibles)
- Focused on the differential impacts of COVID-19 such as forgone care, preventative behaviors, and impacts on daily life on seniors in Traditional Medicare FFS and Medicare Advantage enrollees

Funding for this analysis was provided by America's Health Insurance Plans

Dual Eligible Beneficiaries

Dual eligibles in Medicare Advantage are more vulnerable but experienced fewer care disruptions during COVID-19

Medicare Advantage (MA) plans enroll higher risk dual eligible beneficiaries, compared to duals in fee-for-service (FFS)

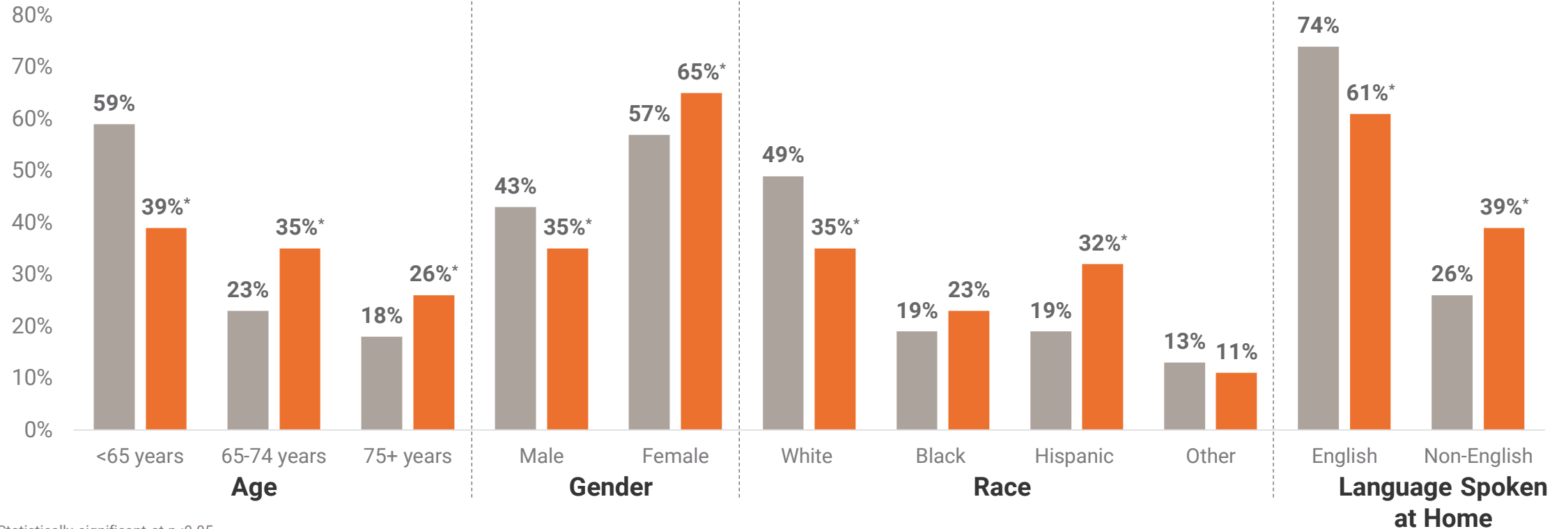
- Duals in MA tend to be older and have more chronic conditions compared to FFS
- Duals in MA are also more likely to be Black or Hispanic and speak another language at home
- COVID-19 highlights unmet social needs for duals enrolled in MA

However, duals in MA experienced less foregone care than those in FFS

- Duals in MA were less likely to have difficulty accessing routine and urgent care
- Duals in MA were more likely to be offered telehealth visits during COVID-19

Compared with FFS, duals in Medicare Advantage tend to be older and more racially/ethnically diverse

Medicare FFS Dual Eligibles
 Medicare Advantage Dual Eligibles

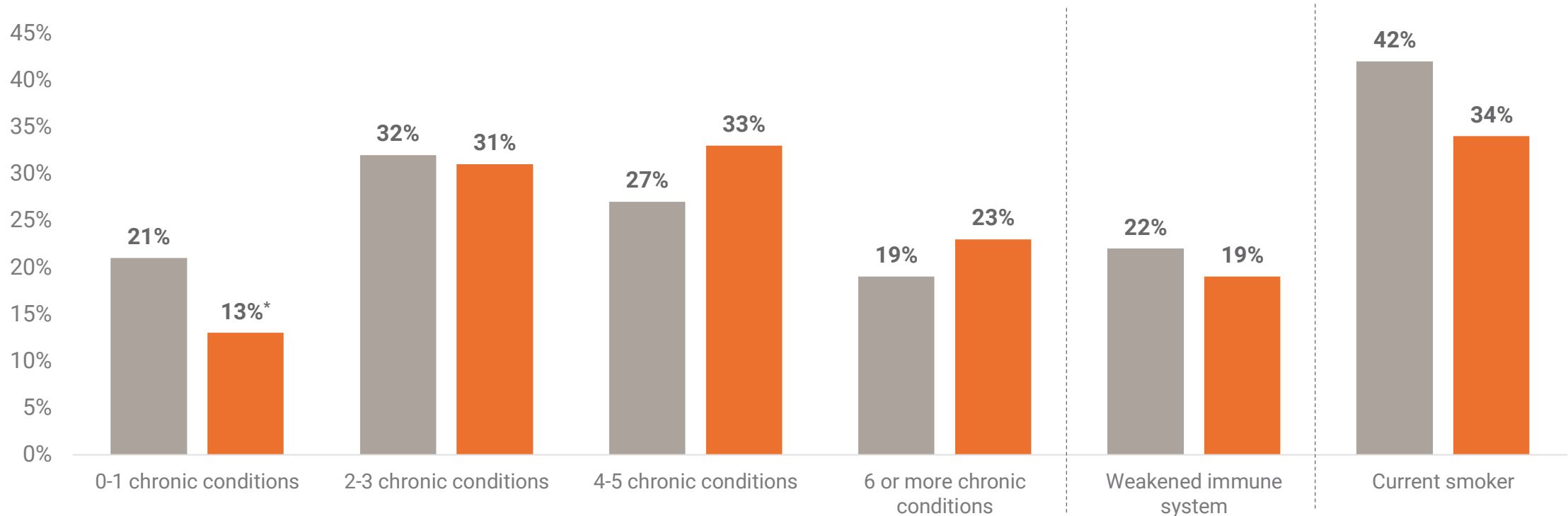


* Statistically significant at p<0.05

Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.

Medicare Advantage duals report having more chronic conditions, compared to FFS duals

Medicare FFS Dual Eligibles
Medicare Advantage Dual Eligibles

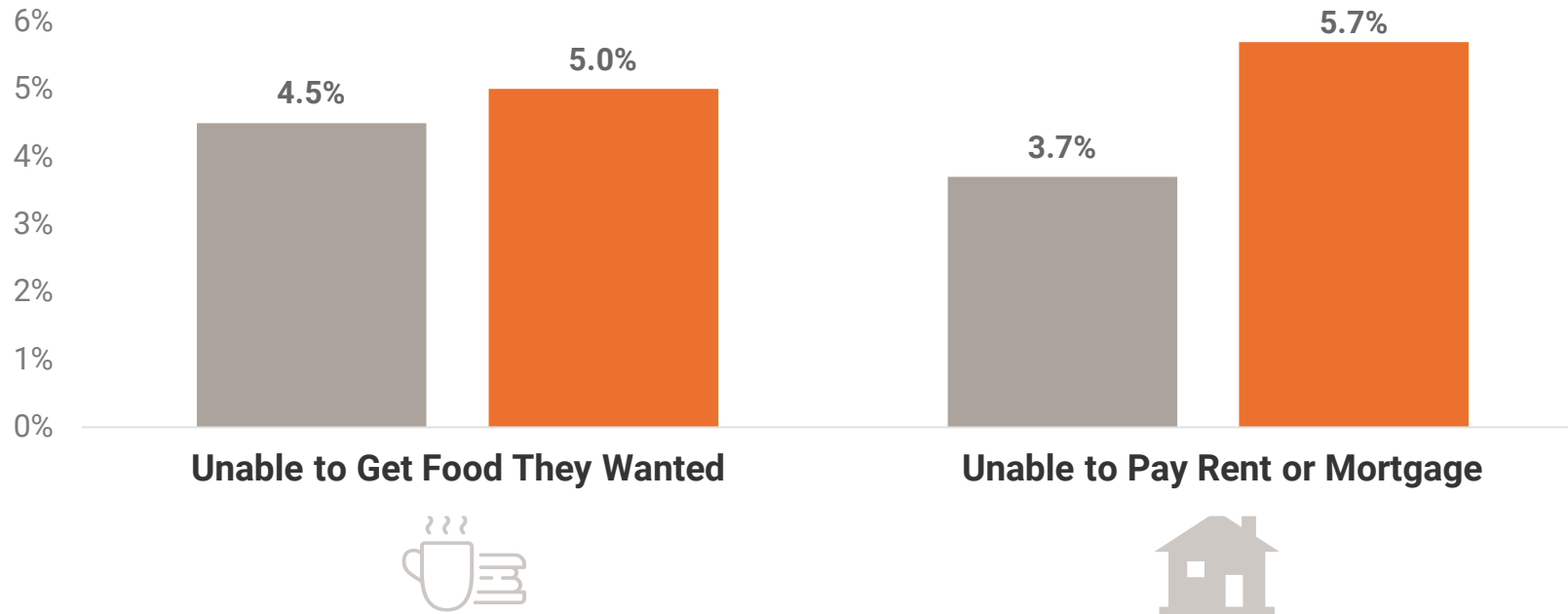


* Statistically significant at p<0.05

Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.

In addition to poor health, full duals have social risk factors that impact their health during COVID

Medicare FFS Dual Eligibles
Medicare Advantage Dual Eligibles



Medicare Advantage plans have flexibility to offer supplemental benefits that address social needs

* Statistically significant at p<0.05

Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.

Social Isolation

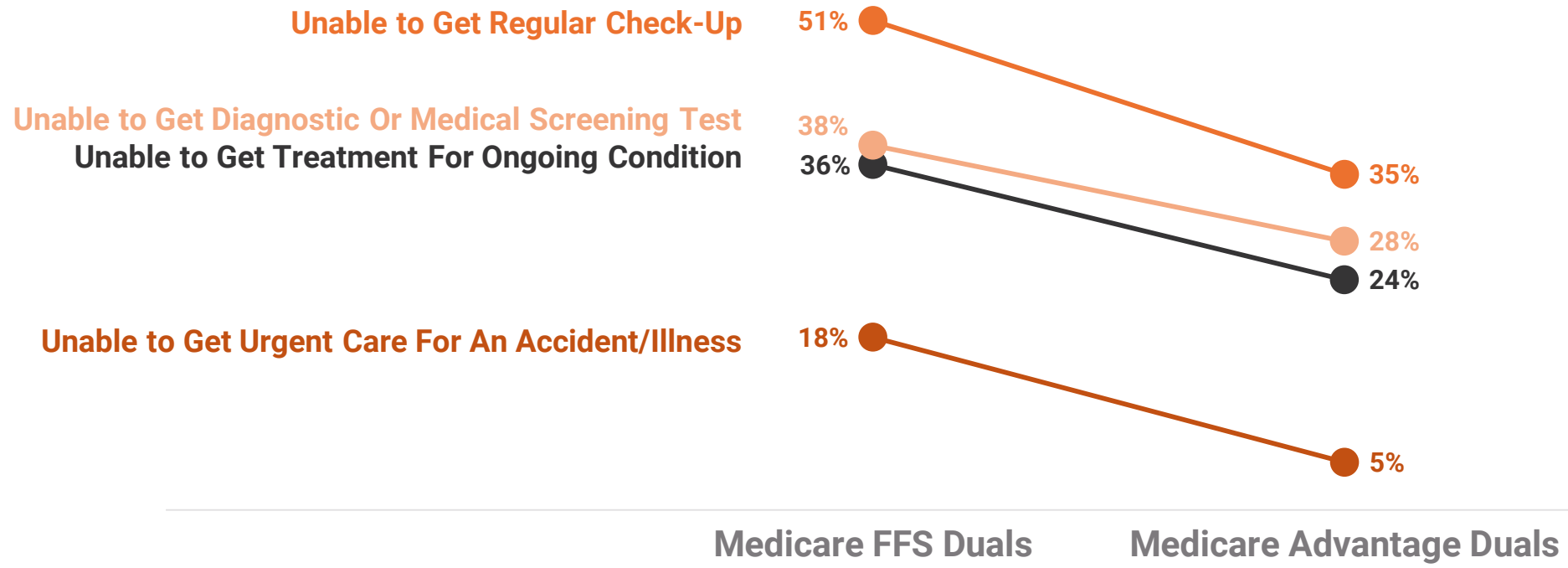
Full dual Medicare FFS beneficiaries (32.8%)* reported **feeling less socially connected to family and friends** during the pandemic compared to full dual Medicare Advantage beneficiaries (23.1%)

*Statistically significant at $p < 0.05$

Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.

Full-duals enrolled in Medicare Advantage reported fewer disruptions in regular care than their FFS counterparts

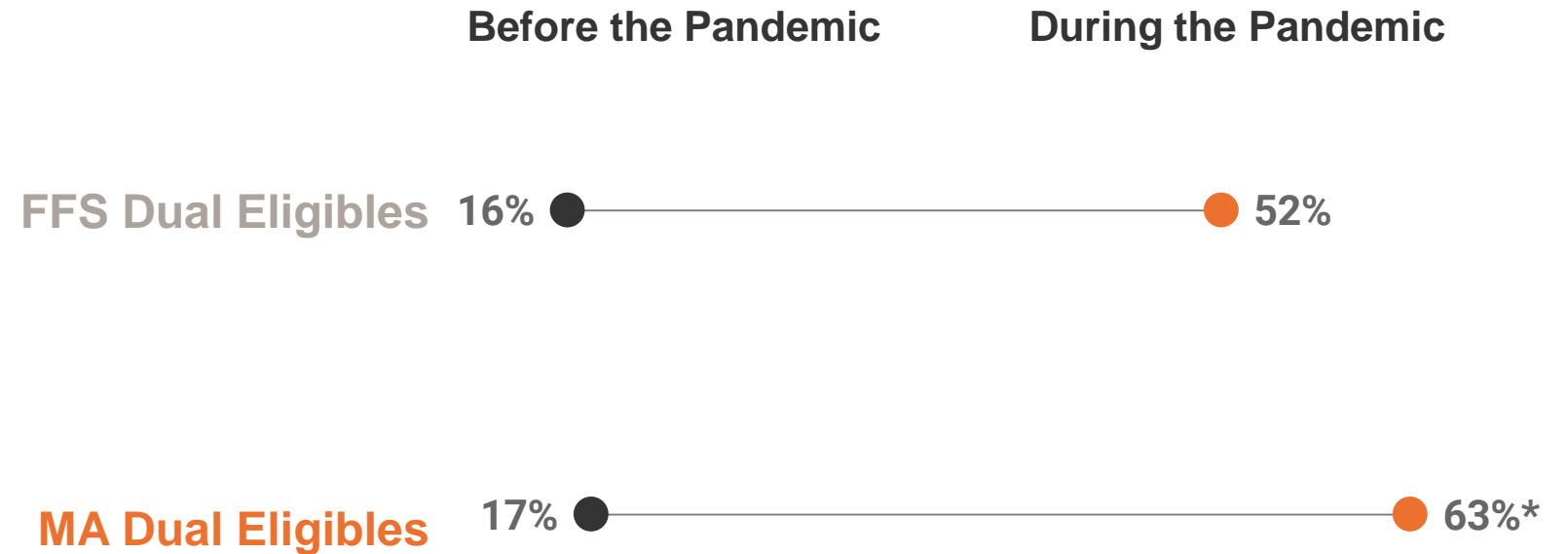
Among those who reported foregone care in 2020:



• Statistically significant at p<0.05
 Responses reported for beneficiaries who reported any foregone care.
 Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.

Access to telemedicine increased exponentially during the COVID-19 pandemic

Medicare Advantage dual eligible beneficiaries were significantly more likely to report that their provider offered telemedicine visits during the pandemic, compared to FFS duals



* Statistically significant at p<0.05
 Source: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Medicare Current Beneficiary Survey, COVID-19 Fall Supplement Public Use File, 2020.