Medicare Advantage (MA) is a shining example of a successful public-private partnership meeting the needs of millions of older adults and Medicare beneficiaries with disabilities. Congress and CMS should take steps to ensure year-over-year stability in the MA program so it can continue being a high-value option for Medicare beneficiaries. As policymakers continue important health care reform discussions, they should look at MA as an example of how to provide affordable and stable health care coverage to Americans.

Fast facts about MA

28.5M Americans
(or 42%) have chosen to enroll in MA, in 2021. (Axios as of Jan. 2022)

96% of enrollees in MA have access to at least one $0 premium plan. (BMA 2021)

90% of MA plans offer wellness, dental, vision, or hearing coverage (over 65% of plans cover all four). (BMA 2021)

98% beneficiaries
The program is popular; 98% of MA beneficiaries are satisfied with their quality of care, according to a Morning Consult poll. (Morning Consult Poll 2020)

$1,640 less in total annual spend by MA beneficiaries than those in Traditional Fee-For-Service (FFS) Medicare. (ATI Data Brief 2021)

MA plans provide important benefits and cost protections not available in FFS Medicare:

- Integrated medical and drug benefit
- Vision, hearing, and dental benefits, as well as new supplemental benefits such as health and wellness programs, transportation, and meals.

Annual Maximum Out-of-Pocket (MOOP) Cost Protections
- 2022 MOOP of $7,550 (CMS 2021)
- 2021 weighted average MOOP is $5,091 for in-network services (KFF 2021)

Through our Aetna Medicare business, CVS Health offers a full range of products and services to meet the needs of Medicare beneficiaries: MA, Part D prescription drug plans and Medicare Supplement plans.
Aetna Medicare business by the numbers

84% of Medicare beneficiaries can choose a $0 premium Aetna MA plan. (CVSH 2021)

3 out of 4 Aetna MA members
76% of Aetna MA members are in plans rated 4.5 stars or higher for 2022—the highest percentage among national health insurers. (CVSH 2021)

40,000 members in a Medicare-Medicaid Plan (MMP)
138,000 members in a Dual-eligible Special Needs Plan (D-SNP)

6M members Part D prescription drug plan

1.3M members Growing Medigap business

3 Million MA members
1.9 Million in the individual market
1.1 Million in MA Employer Group Waiver Plan (EGWP) market

5.8M Veterans over the age of 65 have access to an Aetna Medicare Eagle MA plan.

MA provides value to diverse, lower-income communities

Minority beneficiaries in MA
(Avalere Dec. 2020)

MA
33%
FFS Medicare
16%

MA plans enrollment*
*of Medicare eligibles

53%
Latino beneficiaries
49%
Black beneficiaries

52.7%
MA beneficiaries
39.1%
FFS Medicare beneficiaries

Low-income beneficiaries are more likely to enroll in MA than higher-income beneficiaries. (ATI Data Brief 2021)

MA provides high quality care and performs better than FFS Medicare

Lower hospital utilization & spend
First year MA enrollees spent $95 less per member per month than those in FFS Medicare, corresponding to an overall reduction in inpatient stays. (JAMA 2021)

Supplemental benefits
in MA including home-based palliative care, in-home support and caregiver support grew by 43% for 2022. (Milliman 2021)

A comprehensive claims-based comparison on outcomes between MA and FFS Medicare beneficiaries with chronic conditions shows that despite having a higher proportion of beneficiaries with other clinical and social risk factors, MA beneficiaries achieved:

10% fewer inpatient hospital stays
15% lower combined medical and prescription drug costs
43% lower rate of potentially avoidable hospitalizations
52% higher rate of pneumonia vaccination
57% lower rate of avoidable hospitalizations for acute conditions for beneficiaries with major complex chronic conditions
41% higher primary care services for beneficiaries with major complex chronic conditions

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