

Analysis for ACAP Weighted Average Projected Medicare Advantage Benchmarks as a Percent of 2010 Local FFS Rates

Organization	Contract ID	February 2010 MA Enrollment (Excluding Cost)	2010 Benchmark as a Percent of 2010 Local FFS	2011 Benchmark as a Percent of 2010 Local FFS	2012 Benchmark as a Percent of 2010 Local FFS		2013 Benchmark as a Percent of 2010 Local FFS		2014 Benchmark as a Percent of 2010 Local FFS		2015 Benchmark as a Percent of 2010 Local FFS		Current Star Rating
					Without a Quality Bonus	With a Quality Bonus	Without a Quality Bonus	With a Quality Bonus	Without a Quality Bonus	With a Quality Bonus	Without a Quality Bonus	With a Quality Bonus	
Affinity Health System	H5991	2,061	112.3%	112.3%	108.1%	109.8%	104.6%	107.7%	101.0%	106.0%	97.4%	102.2%	3.5 out of 5 stars
Alameda JPA	H7292	1,763	116.0%	116.0%	112.1%	113.8%	108.5%	111.8%	104.9%	110.2%	101.3%	106.4%	Not enough data
CalOptima	H5433	10,168	105.8%	105.8%	102.9%	104.5%	100.1%	103.1%	97.2%	102.1%	94.4%	99.1%	3 out of 5 stars
CareOregon	H5859	5,838	132.5%	132.5%	128.2%	132.0%	124.6%	131.9%	121.5%	132.2%	118.3%	129.8%	3 out of 5 stars
CareSource	H6178	586	111.4%	111.4%	107.5%	109.7%	104.3%	108.6%	101.2%	108.0%	98.2%	104.9%	Not enough data
Colorado Access Health Plan	H0621	3,297	111.4%	111.4%	107.8%	109.6%	104.8%	108.3%	102.1%	107.6%	99.5%	104.9%	3 out of 5 stars
Commonwealth Care Alliance	H2225	2,235	114.4%	114.4%	109.8%	111.4%	105.8%	109.0%	101.9%	106.9%	98.0%	102.9%	4 out of 5 stars
Community Choice Michigan	H0141	176	106.4%	106.4%	102.5%	104.0%	99.4%	102.4%	96.5%	101.3%	93.6%	98.3%	Not enough data
Community Health Plan of Washington	H5826	4,511	120.0%	120.0%	116.6%	119.0%	113.8%	118.3%	111.8%	118.7%	109.8%	116.7%	3 out of 5 stars
Contra Costa Health Plan	H5895	132	119.8%	119.8%	115.4%	117.1%	111.2%	114.5%	107.0%	112.3%	102.7%	107.9%	Not enough data
Denver Health Medical Plan	H5608	2,813	111.6%	111.6%	107.4%	109.1%	103.8%	107.0%	100.7%	105.8%	97.6%	102.6%	3 out of 5 stars
Health Plan of San Mateo	H5428	7,728	108.8%	108.8%	104.2%	105.8%	100.3%	103.3%	96.9%	101.7%	93.4%	98.1%	2.5 out of 5 stars
Health Plus NY	H6264	566	110.4%	110.4%	106.6%	108.2%	103.3%	106.4%	100.0%	105.0%	96.7%	101.6%	Too new to be measured
IEHP Access	H5640	3,008	115.3%	115.3%	111.4%	113.1%	107.9%	111.2%	104.4%	109.7%	100.9%	106.0%	2.5 out of 5 stars
L.A. Care Health Plan	H2643	690	106.8%	106.8%	104.3%	105.8%	102.2%	105.3%	100.1%	105.1%	98.1%	103.0%	Not enough data
Metropolitan Health Plan	H2457	728	104.9%	104.9%	101.1%	102.6%	97.8%	100.7%	95.1%	99.9%	92.5%	97.2%	Not enough data
Metropolitan Health Plan	H5750	153	105.1%	105.1%	101.3%	102.8%	98.0%	100.9%	95.2%	99.9%	92.5%	97.1%	Not enough data
Metropolitan Jewish Health System	H3347	11,941	109.0%	109.0%	105.4%	106.9%	102.3%	105.4%	99.3%	104.3%	96.3%	101.1%	Not enough data
Metropolitan Jewish Health System	H9101	3,656	109.0%	109.0%	105.3%	106.9%	102.3%	105.4%	99.3%	104.3%	96.3%	101.1%	3 out of 5 stars
UPH/MIHS Ventures	H7352	1,506	112.6%	112.6%	109.5%	111.8%	106.9%	111.3%	104.2%	111.0%	101.6%	108.7%	Not enough data
UPMC Health Plan	H3907	86,012	107.5%	107.5%	103.7%	105.4%	100.7%	103.9%	98.2%	103.4%	95.8%	100.9%	3.5 out of 5 stars
VNS Choice	H5549	4,071	111.3%	111.3%	107.2%	108.8%	103.8%	107.0%	100.4%	105.4%	97.0%	101.9%	2.5 out of 5 stars
ACAP Overall Weighted Average		153,639	109.6%	109.6%	105.9%	107.6%	102.8%	106.2%	100.0%	105.4%	97.3%	102.7%	
ACAP Weighted Average w/out UPMC		67,627	112.4%	112.4%	108.6%	110.5%	105.4%	109.0%	102.3%	108.0%	99.3%	104.9%	
Weighted Average Nationally		10,417,992	117.1%	117.1%	113.1%	115.3%	109.7%	113.8%	106.7%	113.2%	103.7%	110.2%	

Data Sources

CMS Enrollment Data by County and Contract (February 2010) - <http://www.cms.gov/MCRAdvPartDEnrolData/MMAESCC/list.asp#TopOfPage>

CMS 2010 Star Rating information - www.medicare.gov

Medicare Advantage Ratebooks for 2010 and 2011 - http://www.cms.gov/MedicareAdvSpecRateStats/11_Ratebook.asp#TopOfPage

Analysis for ACAP

Weighted Average Projected Medicare Advantage Benchmarks as a Percent of 2010 Local FFS Rates

Methodology Information

Benchmarks for 2011 will be frozen at the 2010 level. The benchmarks for later years are shown in the table in 2010 dollars for comparison, but they will increase each year to reflect increases in underlying FFS costs. Depending on the size of the reduction in benchmarks, counties have either a 2-year, 4-year, or 6-year transition to fully phased-in new benchmarks. The table does not show benchmarks for 2016 and 2017 for those counties that fall into the 6-year transition.

These numbers include the following:

- The IME phase-out which was passed as part of MIPPA 2008 and continues into the future
- The adjustments to FFS payment rates (95%-115%) by county payment quartiles
- The 5% quality bonus phased in beginning in 2012
- The separate 5% urban floor/low FFS quality bonus phased-in beginning in 2012
- Caps reflecting the provision that new benchmarks, including quality bonuses, may not be larger than current law benchmarks
- Phase-in of transitions between current payment and future payments as noted above

These numbers do not include the following:

- Changes to rebate percentages based on CMS star ratings phased in beginning in 2012
- Coding intensity adjustments
- Medicare as Secondary Payer (MSP) adjustments
- FFS Normalization adjustments

The analysis reflects the following assumptions:

- The determination of county transition amounts is done before application of quality bonuses
- Counties do not change payment quartiles over time
- Counties do not change MA penetration rate over time
- Counties do not change underlying FFS rates in comparison to the national average over time
- Counties do not change "urban floor" status over time