

Medicare Advantage: Changes Improved Accuracy of Risk Adjustment for Certain Beneficiaries



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(Ezequiel Schuster)

MEDICARE ADVANTAGE: CHANGES IMPROVED ACCURACY OF RISK ADJUSTMENT FOR CERTAIN BENEFICIARIES

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CreateSpace Independent Publishing Platform. Paperback. Book Condition: New. This item is printed on demand. Paperback. 40 pages. Dimensions: 11.0in. x 8.5in. x 0.1in. The effect of CMSs revised community model on payment accuracy varied for the high-risk groups studied. Specifically, compared with the current community model, the revised community model slightly reduced the accuracy of MA payment adjustments for beneficiaries with multiple chronic conditions by 164, or about 1 percent of average actual expenditures. For beneficiaries with low income, the accuracy of the revised and the current community models was similar: estimates differed by 5, or less than 0.1 percent of average actual expenditures. For beneficiaries with dementia, the revised community model substantially improved the accuracy of MA payment adjustments by 2,674, or about 16 percent of average actual expenditures. Compared with the general new enrollee model, the C-SNP new enrollee model substantially improved the accuracy of MA payment adjustments for new enrollees with C-SNP conditions, but considerable inaccuracy in the models estimates remains for certain groups. The amount by which accuracy improved was similar across 14 severe or disabling chronic conditions: about 2,500. This reflects the design of the C-SNP new enrollee model, which increases expenditure estimates from the general new enrollee model by an amount that does not depend on beneficiaries medical conditions. However, the C-SNP new enrollee model still underestimated expenditures for C-SNP-eligible new enrollees, on average, by about 1,500 and by more than 15,000 for beneficiaries who had certain conditions, such as end-stage liver disease or stroke. The C-SNP new enrollee models results varied depending on the number of severe or disabling conditions the beneficiary had. Specifically, the model reduced the accuracy of estimated expenditures for new enrollees with only 1 severe or disabling condition by about 62 percent of average actual...



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