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*(Prof. Kip Spinka IV)*

## MEDICARE ADVANTAGE: INCREASED SPENDING RELATIVE TO MEDICARE FEE-FOR-SERVICE MAY NOT ALWAYS REDUCE BENEFICIARY OUT-OF-POCKET COSTS: GAO-08-



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Bibliogov, United States, 2013. Paperback. Book Condition: New. 246 x 189 mm. Language: English . Brand New Book \*\*\*\*\* Print on Demand \*\*\*\*\*.In 2006, the federal government spent about \$59 billion on Medicare Advantage (MA) plans, an alternative to the original Medicare fee-for-service (FFS) program. Although health plans were originally envisioned in the 1980s as a potential source of Medicare savings, such plans have generally increased program spending. Payments to MA plans have been estimated to be 12 percent greater than what Medicare would have spent in 2006 had MA beneficiaries been enrolled in Medicare FFS. Some policymakers are concerned about the cost of the MA program and its contribution to overall spending on the Medicare program, which already faces serious long-term financial challenges. MA plans receive a per member per month (PMPM) payment to provide services covered under Medicare FFS. Almost all MA plans receive an additional Medicare payment, known as a rebate. Plans use rebates and sometimes additional beneficiary premiums to fund benefits not covered under Medicare FFS, reduce premiums, or reduce beneficiary cost sharing. This report examines for 2007 (1) MA plans projected rebate allocations; (2) additional benefits MA plans commonly covered and their costs; (3) MA plans projected cost sharing; and (4) MA plans allocation of projected revenues and expenses. GAO analyzed data on MA plans projected revenues and covered benefits for the most common types of MA plans, accounting for 71 percent of all beneficiaries in MA plans.

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