

# Step-by-Step Guide to Understanding Medicare Advantage Activity in Your Market



ANNE TUMLINSON  
INNOVATIONS

*LeadingAge*<sup>®</sup>

*Center for Managed Care  
Solutions & Innovations*

## Step-by-Step Guide to Understanding Medicare Advantage Activity in Your Market

**How to Use This Document:** LeadingAge's Center for Managed Care Solutions & Innovations has prepared a toolkit of materials to help members engage Medicare Advantage plans on new opportunities around supplemental benefits. This document provides instructions for identifying how many Medicare eligible individuals are enrolled in Medicare Advantage and Special Needs Plans in your organization's market.

Once you know the plans in your market, you can assess which plans operate locally (e.g., community-based, hospital-led health plans) and target your outreach efforts more effectively.

### Overview of Step-by-Step Guide to Understanding Medicare Advantage Activity in Your Market:

This document provides directions on accessing Medicare Advantage (MA) data as reported by the Centers for Medicare & Medicaid Services (CMS):

1. Assessing the Opportunity: How many Medicare beneficiaries are enrolled in MA in my market and how many are my clients?
2. Prioritizing Outreach: Which plans are in my market and how many enrollees do they have?
3. MA Special Needs Plans: How many are in my market?
4. MA Health Plan Quality Ratings

## Assessing the Opportunity: How many Medicare beneficiaries are enrolled in MA in my market and how many are my clients?

### How much Medicare Advantage enrollment is in my area/county?

Asking this question first will help you decide if there are enough Medicare beneficiaries enrolled in MA plans (or a high enough MA plan penetration rate) to warrant your attention and potentially create new revenue for your organization through the supplemental benefits opportunities.

To access state and county level MA enrollment data for your market:

Navigate to the CMS MA State/County Penetration Data File: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/MA-State-County-Penetration.html>. CMS updates this information every month.

Once the Excel file is downloaded, 1) Select the top row of data and navigate to the “Data” tab on the top ribbon, 2) Select “Filter” to add a filter to the top row of data, 3) select your state(s) and then narrow the list by selecting the counties where you provide services.

The resulting view will show the number of MA enrollees in each county that is filtered into view.

The screenshot shows an Excel spreadsheet with a data table. The 'Data' tab is selected in the ribbon. A filter is applied to the 'State Name' column, showing a dropdown menu with 'Florida' selected. The data table contains columns for State No., County, FIPSST, FIPSCN, FIPS, SSAST, SSACNT, SSA, Eligible, Enrollee, and Penetration. The data is filtered to show only rows for Florida.

State No.	County	FIPSST	FIPSCN	FIPS	SSAST	SSACNT	SSA	Eligible	Enrollee	Penetration
1	Alabama	12001	10	0	10000	48,130	11,602	24.11%		
3	Alabama	12003	10	10	10010	5,375	1,512	28.13%		
5	Alabama	12005	10	20	10020	42,470	9,904	23.32%		
7	Alabama	12007	10	30	10030	6,258	1,922	30.71%		
9	Alabama	12009	10	40	10040	166,745	64,013	38.39%		
11	Alabama	12011	10	50	10050	353,580	185,629	52.50%		
13	Alabama	12013	10	60	10060	3,101	1,094	35.28%		
15	Alabama	12015	10	70	10070	76,179	26,293	34.51%		
17	Alabama	12017	10	80	10080	63,875	24,186	37.86%		
19	Alabama	12019	10	90	10090	46,951	12,631	26.90%		
21	Alabama	12021	10	100	10100	109,481	26,773	24.45%		
23	Alabama	12023	10	110	10110	17,462	5,199	29.77%		
27	Alabama	12027	10	130	10130	8,069	2,498	30.96%		
29	Alabama	12029	10	140	10140	4,585	1,505	32.82%		
31	Alabama	12031	10	150	10150	176,196	66,385	37.68%		
33	Alabama	12033	10	160	10160	75,097	24,352	32.43%		
35	Alabama	12035	10	170	10170	40,824	16,953	41.53%		
37	Alabama	12037	10	180	10180	3,372	1,073	31.82%		
39	Alabama	12039	10	190	10190	11,089	5,904	53.24%		
41	Alabama	12041	10	200	10200	4,460	1,235	27.69%		
43	Alabama	12043	10	210	10210	2,987	1,006	33.68%		
45	Alabama	12045	10	220	10220	4,322	1,030	23.83%		
47	Alabama	12047	10	230	10230	3,197	870	27.21%		
49	Alabama	12049	10	240	10240	4,951	1,664	33.61%		
51	Alabama	12051	10	250	10250	6,620	1,990	30.06%		
53	Alabama	12053	10	260	10260	65,238	33,707	51.67%		
55	Alabama	12055	10	270	10270	36,940	12,929	35.00%		
57	Alabama	12057	10	280	10280	254,447	121,674	47.82%		
59	Alabama	12059	10	290	10290	5,277	1,404	26.61%		
61	Alabama	12061	10	300	10300	57,005	15,604	27.37%		
63	Alabama	12063	10	310	10310	12,130	3,230	26.63%		
65	Alabama	12065	10	320	10320	3,894	1,806	46.38%		
67	Alabama	12067	10	330	10330	1,236	305	24.68%		
69	Alabama	12069	10	340	10340	114,707	43,137	37.61%		
71	Alabama	12071	10	350	10350	212,415	71,436	33.63%		

Note: The Excel file will open as a Comma Separated Values File “.csv;” however, to save any calculations done in the workbook, save as an Excel workbook “.xlsx” or “.xls.” CMS updates plan enrollment data monthly.

**Tip:** If fewer than 15% of Medicare beneficiaries in your county are enrolled in MA, then your organization may decide to not prioritize outreach to health plans—unless a significant number of your clients are enrolled in one or two plans. If 20-35% of Medicare beneficiaries are enrolled in MA, go to the next step to identify plans with the highest enrollment in your county and compare to the plans with the highest enrollment of your clients. If more than 35%, begin to prioritize outreach to MA plans in your market.

## Prioritizing Outreach: Which plans are in my market and how many enrollees do they have?

### Which plans are offered in my area/county?

MA plans must identify their geography as part of their bid each year by designating counties in which they will operate.

To prioritize which plans to start conversations with, look at the plans with the most enrolled individuals and compare to the plans and organizations that the individuals you serve are enrolled in. For example, if a number of the individuals you serve are enrolled in a Blue Cross Blue Shield plan, even if the plans have different names, then this is one of the Medicare Advantage Organizations (MAOs) that you should initiate discussions with.

To Identify the MA Plans in Your Market:

Navigate to the CMS MA Monthly Enrollment by State/County/Contract and choose the most recent month: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Monthly-MA-Enrollment-by-State-County-Contract.html>.

There are two options for files to download; both will work but choose the “Abridged Version,” as this version excludes plans that have fewer than 11 enrollees.

This Excel file, titled “SCC Enrollment,” includes information on which plans (by ID) are operating in each county and their enrollment.

Once the Excel file is downloaded: 1) Select the top row of data and navigate to the “Data” tab on the top ribbon; 2) Select “Filter” to add a filter to the top row of data; 3) select your state(s) and then narrow the list by selecting the counties that you provide services in. You can then apply addition filters to organize by enrollment (Column I) such as highest enrollment to lowest; or organization name (Column D).

The resulting rows of data will show all MA Plans and the enrollment count for each plan, by selected county. Note, if you do not download the abridged version, many counties may have “\*” for the enrollment number as CMS does not display enrollment counts below 11.

In the screenshot below, counties in FL have been filtered into view. The first row shows that WellCare of Florida, Inc., Contract H1032 in Alachua County has 712 enrollees and they offer another plan in the same county with 20 enrollees. However, in comparison, Humana offers three different plans in Alachua County with a combined enrollment of 4,845. Based upon total enrollment, you may choose to

reach out to Humana first; however, if most of your clients are enrolled in a WellCare plan, this would be your first priority.

Note: The Excel file will open as a Comma Separated Values File “.csv;” however, to save any calculations done in the workbook, save as an Excel workbook “.xlsx” or “.xls.”

AutoSave  Off File Home Insert Draw Page Layout Formulas **Data** Review View Help Search

SCC\_Enrollment\_MA\_Alt\_2019\_08 - Read-Only - Excel

Get Data: From Text/CSV, From Web, From Table/Range, Recent Sources, Existing Connections, Refresh All, Queries & Connections, Properties, Edit Links, Stocks, Geography, Sort, Filter, Clear, Reapply, Advanced Filter

A1: County

	A	B	C	D	E	F	G	H	I	J	K
1	County	State	Contract	Organization Name	Organiz	Plan Ty	SSA Cod	FIPS Co	Enrolle		
2811	Alachua	FL	H1032	WELLCARE OF FLORIDA, INC.	Local CCP	HMO/HM	10000	12001	712		
2812	Alachua	FL	H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	HMO/HM	10000	12001	1798		
2813	Alachua	FL	H1045	PREFERRED CARE PARTNERS, INC.	Local CCP	HMO/HM	10000	12001	959		
2814	Alachua	FL	H2001	SIERRA HEALTH AND LIFE INSURAN	Local CCP	Local PPO	10000	12001	466		
2815	Alachua	FL	H2406	UNITEDHEALTHCARE INSURANCE C	Local CCP	Local PPO	10000	12001	626		
2816	Alachua	FL	H4909	ANTHEM INSURANCE COMPANIES,	Local CCP	Local PPO	10000	12001	20		
2817	Alachua	FL	H5199	WELLCARE HEALTH INSURANCE OF	Local CCP	Local PPO	10000	12001	20		
2818	Alachua	FL	H5216	HUMANA INSURANCE COMPANY	Local CCP	Local PPO	10000	12001	2408		
2819	Alachua	FL	H5434	BLUE CROSS AND BLUE SHIELD OF	Local CCP	Local PPO	10000	12001	21		
2820	Alachua	FL	H5521	AETNA LIFE INSURANCE COMPANY	Local CCP	Local PPO	10000	12001	218		
2821	Alachua	FL	H9572	BCBS OF MICHIGAN MUTUAL INSU	Local CCP	Local PPO	10000	12001	42		
2822	Alachua	FL	R3332	BLUE CROSS AND BLUE SHIELD OF	Regional C	Regional P	10000	12001	1341		
2823	Alachua	FL	R5826	HUMANA INSURANCE COMPANY	Regional C	Regional P	10000	12001	639		
2824	Alachua	FL	R7444	UNITEDHEALTHCARE INSURANCE C	Regional C	Regional P	10000	12001	2266		
2825	Baker	FL	H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	HMO/HM	10010	12003	546		
2826	Baker	FL	H2001	SIERRA HEALTH AND LIFE INSURAN	Local CCP	Local PPO	10010	12003	31		
2827	Baker	FL	H2406	UNITEDHEALTHCARE INSURANCE C	Local CCP	Local PPO	10010	12003	144		
2828	Baker	FL	H5199	WELLCARE HEALTH INSURANCE OF	Local CCP	Local PPO	10010	12003	12		

## MA Special Needs Plans: How many are in my market?

### What are the Dual-Eligible Special Needs Plans (D-SNPs) in my market?

D-SNPs are a type of MA plan for special needs individuals that serves the population eligible for both Medicare and Medicaid. D-SNP plans may have more experience working with home care and non-medical providers because their dual eligible enrollees often receive these types of Medicaid benefits. You may already have relationships with these health plans through Medicaid.

You may also have clients who are enrolled in other types of SNPs including Chronic Condition and Institutional-Equivalent. (For more information on the different types of SNPs, see our MA and SNP 101 document in the LeadingAge Center for Managed Care Solutions & Innovations under the Managed Care / Payment Model Basics tab.)

To Identify the MA SNPs in Your Market:

Navigate to the CMS SNP Comprehensive Report: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Special-Needs-Plan-SNP-Data.html>.

Open the Excel file title "SNP\_2019\_08" (or the most recent date for which the data are available).

Once the Excel file is downloaded, 1) Select the top row of data (Row 17) and navigate to the "Data" tab on the top ribbon; 2) Select "Filter" to add a filter to the top row of data; 3) select your state(s) and then select from a narrowed list of geographic names (Column H). To narrow the type of SNP, filter column K.

AutoSave Off

File Home Insert Draw Page Layout Formulas **Data** Review View Help Search

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Stocks Geography Sort Filter Clear Reapply Advanced Text to Column

Get & Transform Data Queries & Connections Data Types Sort & Filter

L17 Specialty Diseases

**1** **2**

**Special Needs Plan Comprehensive Report**

**NOTES:**  
 4 Data is as of Aug. 2019  
 5 The data source for this report is the CMS Health Plan Management System.  
 6 Records with enrollment between 1 and 10 (inclusive) are set to blank in order to comply with privacy law requirements.  
 7 A record with fictitious contract number "Under-11" has been added for each SNP type, aggregating all records of that type with 1-10 enrollment.  
 8 Employer-only group plans are omitted from this report.

Aggregate Information				Under - 11		
SNP Type	Number of Contracts	Number of Plans	Sub Total Enrollment	SNP Type	Enrollment	Number of Plans
Chronic or Disabling Condition	56	129	358,557	Chronic or Disabling Cond	27	6
Dual-Eligible	208	480	2,644,406	Dual-Eligible	62	25
Institutional	57	125	92,385	Institutional	38	30
<b>Totals</b>	<b>321</b>	<b>734</b>	<b>3,095,348</b>	<b>Under - 11 Totals</b>	<b>127</b>	<b>61</b>

Contract Numbr	Contract Name	Organization Type	Plan ID	Segment	Plan Name	Plan Type	Plan Geographic Na	State(s)	Plan Enrollm	Special Needs Plan Type	Specialty Diseases
H1032	WELLCARE OF FLORIDA, INC.	Local CCP	184	0	WellCare Guardian (HMO SNP)	HMO	Select Counties				Cardio DIS CHF and Diabetes
H1032	WELLCARE OF FLORIDA, INC.	Local CCP	186	0	WellCare Guardian (HMO SNP)	HMO	Select Counties				Cardio DIS CHF and Diabetes
H1032	WELLCARE OF FLORIDA, INC.	Local CCP	203	0	WellCare Champion (HMO SNP)	HMO	Select Counties				Cardio DIS CHF and Diabetes
H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	121	0	Humana Gold Plus - Diabetes (HMO SNP)	HMO	Broward County				Diabetes Mellitus
H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	130	0	Humana Gold Plus - Diabetes (HMO SNP)	HMO	Palm Beach Co				Diabetes Mellitus
H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	156	0	Humana Gold Plus - Diabetes (HMO SNP)	HMO	Flagler and Vol				Diabetes Mellitus
H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	160	0	Humana Gold Plus - Diabetes (HMO SNP)	HMO	Tampa Metro Ar				Diabetes Mellitus
H1036	HUMANA MEDICAL PLAN, INC.	Local CCP	175	0	Humana Gold Plus - Diabetes (HMO SNP)	HMO	Jacksonville Ar				Diabetes Mellitus
H1045	PREFERRED CARE PARTNERS, INC.	Local CCP	018	0	Preferred Special Care Miami-Dade (HMO SNP)	HMO	Miami-Dade Co				Cardio DIS CHF and Diabetes
H3132	AHF MCO OF FLORIDA, INC.	Local CCP	001	0	PHP (HMO SNP)	HMO	Broward, Miami and Duval Counties, Florida				HIV Aids Disabling Condition

Filter by State(s):  
 (Select All)  
 Chronic or Disabling Condition  
 Dual-Eligible  
 Institutional

OK Cancel

## MA Health Plan Quality Ratings

### How are the MA plans in my area performing on quality?

Similar to nursing homes and home health providers, MA plans also have a 5-star rating system that looks at quality measures related to the MA plan and its enrollees' outcomes and perceptions.

CMS uses 34 measures, assigned different weights, to give each MA plan a weighted average overall star rating of 1 to 5 stars. Most plans receive a 4-star rating or higher, although only about a dozen receive a 5-star rating. There are financial incentives for plans receiving 3.5 stars or higher, including a bonus (an increase in the rate they get paid by CMS for MA contracts at 4 stars or higher) and a higher rebate share (for plans with 3.5 stars or higher), which means more dollars are available for supplemental benefits. Star ratings are assigned at the contract level (i.e., multiple plans can be under the same contract).

MA plans care about Star Ratings because they are displayed on Plan Compare when beneficiaries shop for plans. Star Ratings also affect plans' financial incentives. 5-star plans can advertise and enroll members all year long and are not limited to the open enrollment period.

Providers can also identify the key quality measures that they may be able to impact and help the plan improve, such as the measures that fall into the domain of managing chronic conditions, like medication review, functional status, diabetes care, and reducing risk of falls. With this information in hand, a provider can approach the plan highlighting the provider's ability and/or specific programs they have that may assist the plan in improving or maintaining their performance on these measures for those plan beneficiaries who are served by the provider.

To search for a plan's Star Ratings, navigate to the CMS Part C and D Performance Data webpage and download the "2019 Part C and D Medicare Star Ratings Data" file:

<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html>.

Once the file is downloaded, select the folder titled "2019 Star Ratings Spring Release (04\_2019)," or the most recent file relative to when you are checking this information. Open the file titled "2019\_ReportCard\_Master\_Table\_2019\_03\_26." Navigate to the fourth tab, "Summary Rating," to view the MAO's summary star rating.

Once on the correct tab, 1) Select the second row of data and navigate to the “Data” tab on the top ribbon, 2) Select “Filter” to add a filter to the top row of data (you may need to first select “Enable Editing” at the top of the document as it often opens in Protected View, which blocks your ability to use the filter function), 3) filter the data either by Contract Number or Contract Name to view the Contract Star Ratings.

The screenshot shows the Microsoft Excel interface with the 'Data' tab selected. A filter is applied to the 'Contract Number' column. The filter menu is open, displaying a list of contract numbers. The number 'H0062' is selected in the list. The spreadsheet data is as follows:

Contract Number	Organization Type	Organization Marketing Name	Contract Name	Parent Organization	2017 Disease	2019 Part C Summary	2019 Part D Summary	2019 Overall
DP	TEAMStar Medicare Part D Prescription Drug Program	IBT Voluntary Employee Benefits Trust	IBT Voluntary Employee Benefits Trust	IBT Voluntary Employee Benefits Trust	No	7	Not Applicable	6.5
DP	Pennsylvania Public School Employees Retirement System	Paers Hop Program	Commonwealth of PA Pub Schools Retirement System	Commonwealth of PA Pub Schools Retirement System	No	4	Not Applicable	4.5
DP	MISSOURI DEPARTMENT OF TRANSPORTATION	Modt/mshp Medical And Life Insurance Plan	Missouri Highways and Transportation Commission	Missouri Highways and Transportation Commission	No	1	Not Applicable	3
	Buckeye Health Plan - MyCare Ohio	Buckeye Community Health Plan, Inc.	Certene Corporation	Certene Corporation	No	0	Not enough data available	Not enough data available
	Humana	Cha Hmo, Inc.	Humana Inc.	Humana Inc.	Yes	0	3.5	4.5
	Allwell	Coordinated Care Of Washington, Inc.	Certene Corporation	Certene Corporation	No	0	Plan too new to be measured	Plan too new to be measured
	Allwell	Superior Healthplan Community Solutions, Inc.	Certene Corporation	Certene Corporation	No	1	Not enough data available	Not enough data available
	WellCare	Wellcare Health Insurance Of New York, Inc.	WellCare Health Plans, Inc.	WellCare Health Plans, Inc.	No	0	Plan too new to be measured	Plan too new to be measured
	Blue Advantage (PPO)	Blue Cross And Blue Shield Of Alabama	BlueCross BlueShield Of Alabama	BlueCross BlueShield Of Alabama	No	0	3.5	4
	Blue Cross and Blue Shield of Montana	Health Care Service Corporation	Health Care Service Corporation	Health Care Service Corporation	No	0	3	3.5
	WellCare	Wellcare Of Georgia, Inc.	WellCare Health Plans, Inc.	WellCare Health Plans, Inc.	No	0	Plan too new to be measured	Plan too new to be measured
	Commonwealth Care Alliance, Inc.	Commonwealth Care Alliance, Inc.	Commonwealth Care Alliance, Inc.	Commonwealth Care Alliance, Inc.	No	0	Not enough data available	Not enough data available
	Blue Shield of California Promise Health Plan	Care1st Health Plan	California Physicians' Service	California Physicians' Service	No	0	Not enough data available	Not enough data available
	VIVA Medicare	Viva Health, Inc.	UAB Health System	UAB Health System	Yes	0	4.5	4
	UnitedHealthcare	Unitedhealthcare Of The Midwest, Inc.	UnitedHealth Group, Inc.	UnitedHealth Group, Inc.	Yes	0	Plan too new to be measured	Plan too new to be measured
	WellCare	Wellcare Of Texas, Inc.	WellCare Health Plans, Inc.	WellCare Health Plans, Inc.	Yes	100	Not enough data available	2.5
	AmeriHealth Caritas VIP Care Plus	AmeriHealth Michigan, Inc.	Independence Health Group, Inc.	Independence Health Group, Inc.	No	0	Not enough data available	Not enough data available
	UnitedHealthcare	Unitedhealthcare Plan Of The River Valley, Inc.	UnitedHealth Group, Inc.	UnitedHealth Group, Inc.	Yes	0	3.5	4
	WellCare	Wellcare Health Insurance Company Of America	WellCare Health Plans, Inc.	WellCare Health Plans, Inc.	No	0	Plan too new to be measured	Plan too new to be measured
	UnitedHealthcare	Symphonix Health Insurance, Inc.	UnitedHealth Group, Inc.	UnitedHealth Group, Inc.	Yes	0	Plan too new to be measured	Plan too new to be measured
	IlliniCare Health	Illinicare Health Plan	Certene Corporation	Certene Corporation	No	0	Not enough data available	Not enough data available
	Humana	Humana Health Plan Of Ohio, Inc.	Humana Inc.	Humana Inc.	0	Plan too new to be measured	Plan too new to be measured	Plan too new to be measured
	UnitedHealthcare	Care Improvement Plus Wisconsin Insurance Company	UnitedHealth Group, Inc.	UnitedHealth Group, Inc.	Yes	0	4	5
	Blue Cross Blue Shield of Arizona Advantage	Medisun, Inc.	Vertage, LLC	Vertage, LLC	No	0	3	3
	UnitedHealthcare	Arizona Physicians Ipa, Inc.	UnitedHealth Group, Inc.	UnitedHealth Group, Inc.	Yes	0	3	3.5

To view the individual measure scores, navigate to the second tab in the Excel file, “Measure Stars”.