



January 11, 2022

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Administrator Brooks-LaSure:

On behalf of the National Hispanic Medical Association, the National Medical Association, and the Asian & Pacific Islander American Health Forum (APIAHF), we write to express our strong support of Medicare Advantage (MA) and the over 27 million beneficiaries who rely on MA for affordable, high-quality, and coordinated health care. We represent a diverse community of physicians, care providers, and beneficiaries focused on addressing health disparities to improve the health of minority populations and underserved communities.

Our members and communities have seen first-hand MA's commitment to improving seniors' health through its comprehensive benefits and services that address physical, behavioral, and environmental needs to improve health outcomes. Collectively, our organizations share in the Administration's goal to improve health equity, and believe MA is critical to achieving that goal. Specifically, we ask that the Administration implement a stable rate and policy environment for 2023.

MA serves 43% of the Medicare population and provides care to a diverse and complex population of seniors. MA beneficiaries are proportionally lower income, have more chronic conditions, and higher rates of social-risk factors compared to Medicare FFS. Since 2013, Medicare Advantage has grown 111 percent and 125 percent, respectively among minority and dual-eligible beneficiaries. In fact, 33 percent of beneficiaries enrolled in MA identify as a racial or ethnic minority, compared to 16 percent in Medicare Fee-For-Service (FFS). The growing diversity of MA enrollees underscore the importance of protecting proven coverage options, like MA, that address the unique needs of a diverse beneficiary population, improve health outcomes, and advance health equity.

MA's coordinated clinical model of care focuses on improving health outcomes so that seniors can live healthier lives. Research demonstrates that MA beneficiaries experienced 33 percent fewer emergency room visits compared to seniors enrolled in Medicare FFS. Seniors also rely on the supplemental benefits not offered in Medicare FFS aimed at addressing social determinants of health to address health disparities. These benefits include telehealth services, transportation, meal services and delivery, in-home care, and other wellness benefits.

To build on the progress already made to improve health outcomes and advance health equity for seniors in MA, we must protect MA from any payment reductions or policies that would negatively impact seniors in MA through increased out-of-pocket costs or a reduction in vital benefits such as in-home care.

We are committed to supporting the stability of MA for our members and the health of the senior population we serve, and we urge the Administration to ensure stability in the upcoming MA payment and policy setting process for 2023.

Sincerely,



Elena Rios, MD, MSPH, MACP
President and CEO, National Hispanic Medical Association



Martin Hamlette
Executive Director, National Medical Association



Juliet Choi
President and CEO, Asian & Pacific Islander American Health Forum