Overview: Analysis of Medicare Advantage Enrollee Demographics, Utilization, Spending, and Quality Compared to FFS Medicare Among Enrollees with Chronic Conditions

Updated data from Avalere Health explores beneficiary health outcomes and demographic characteristics of the Medicare Advantage (MA) program. Avalere's analysis compared clinical characteristics, utilization, spending on healthcare, and quality of outcomes in two sample populations of beneficiaries in MA and Fee-for-Service (FFS) Medicare with at least one of three highly prevalent and clinically related chronic conditions: hypertension, hyperlipidemia, and diabetes.

Key Findings:



MA serves a higher proportion of beneficiaries with clinical and social risk factors than FFS.



MA serves a higher percentage of beneficiaries who identify as a racial or ethnic minority than FFS (28.1% in MA vs. 12.8% in FFS).



Regardless of condition, MA beneficiaries in the chronic condition subgroups spend less overall on healthcare than FFS beneficiaries.



MA beneficiaries in the study had lower utilization rates of high-cost services such as inpatient stays and ER visits than FFS beneficiaries.

While additional research is necessary to explore the factors driving differences between MA and FFS, the findings suggest that demographic differences between these Medicare populations exist, and that **spending on care is lower in MA and outcomes on select quality measures are comparable to FFS**.

Read Avalere's full report on this BMA-commissioned analysis here.

