

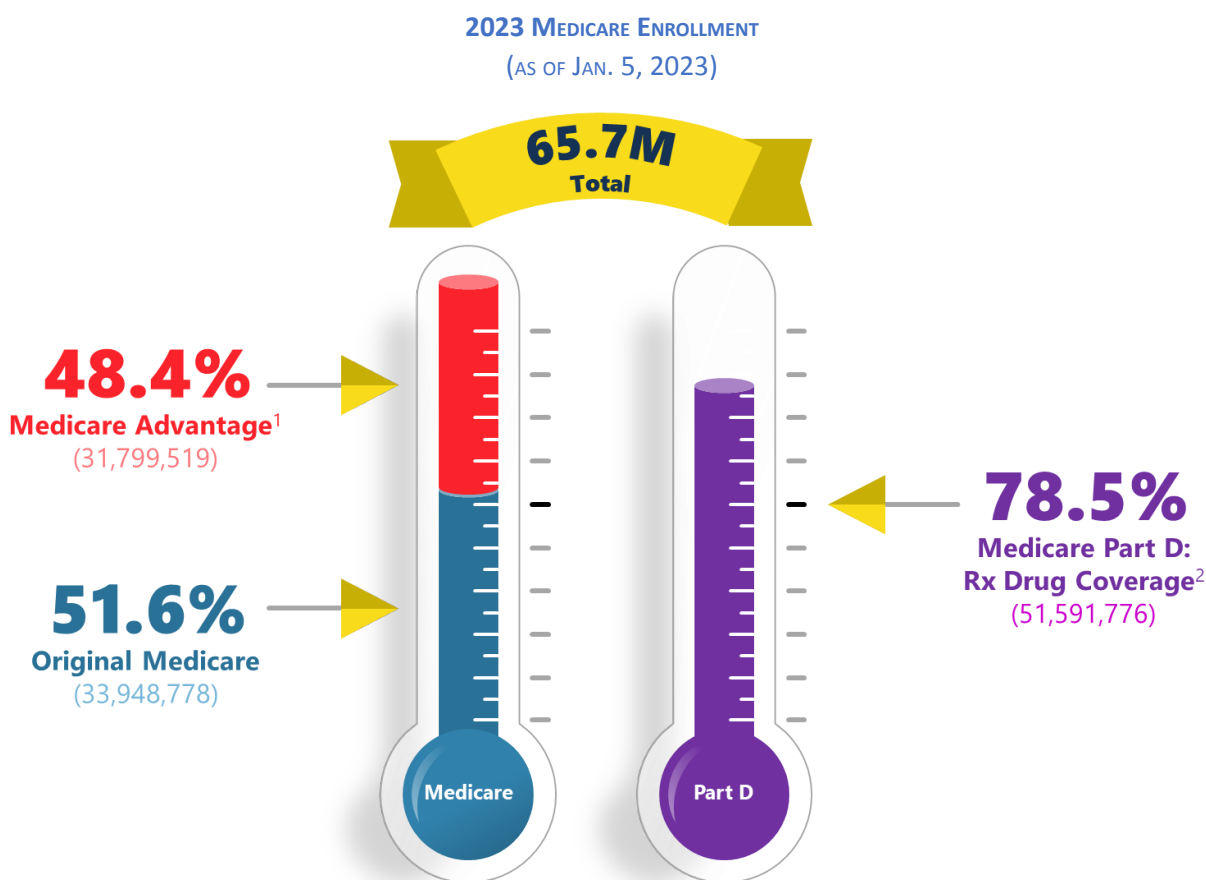
Proactive Pulse – Fall 2023

Agent Perspective: MA Plan Benefits that Drive Enrollment & Improvement Opportunities

Introduction

In September 2023, Proactive Worldwide surveyed Medicare-certified brokers to learn their perspective on which plan benefits drive enrollees' decision to select a MA carrier and which benefits enrollees would like to see included and/or enhanced as part of their plans. Insight obtained shed light on over 35 Medicare Advantage carriers.

As of January 2023, 65.7 million U.S. residents were enrolled in Medicare plans according to the Centers for Medicare & Medicaid Services ([CMS](#)). Of those, 48.4% were enrolled in Medicare Advantage (MA) plans with and without prescription drug coverage.



¹ Includes enrollment in MA plans with and without Rx drug coverage.

² Includes enrollment in stand-alone Rx drug plans as well as MA plans that offer Rx drug coverage.

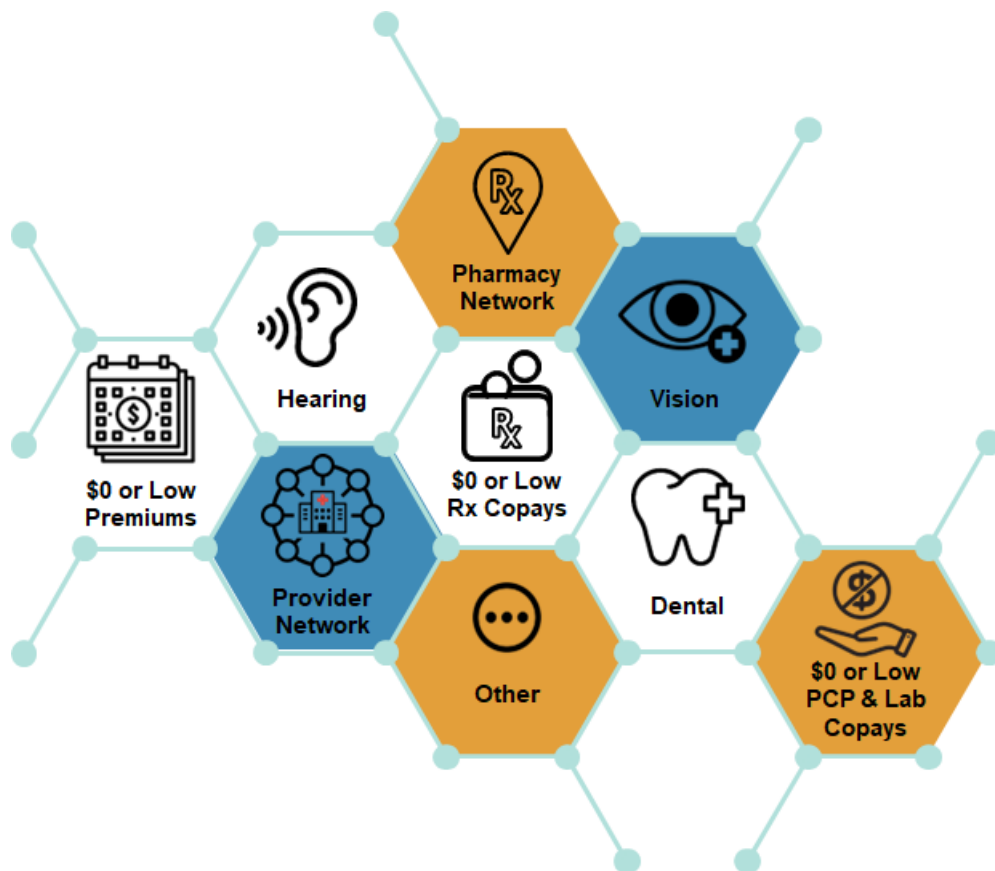
Enrollment in private, for-profit Part D or MA-PD plans remains the only option for drug coverage in the Medicare program.

In many instances, Medicare producers (a.k.a., agents, brokers) are trusted by clients to guide decisions that directly impact enrollees' financial and/or healthcare situations. Additionally, agents are often the final interaction individuals have before making a Medicare plan selection. Central to their role, agents foster client relationships that afford them unique insight into what enrollees look for in their Medicare plans.

Medicare Advantage Benefit Landscape

Nearly all Medicare Advantage carriers center their plans' messaging around the same eight benefits – which have remained largely unchanged for the past five years.

TOP PROMOTED MEDICARE ADVANTAGE PLAN BENEFITS



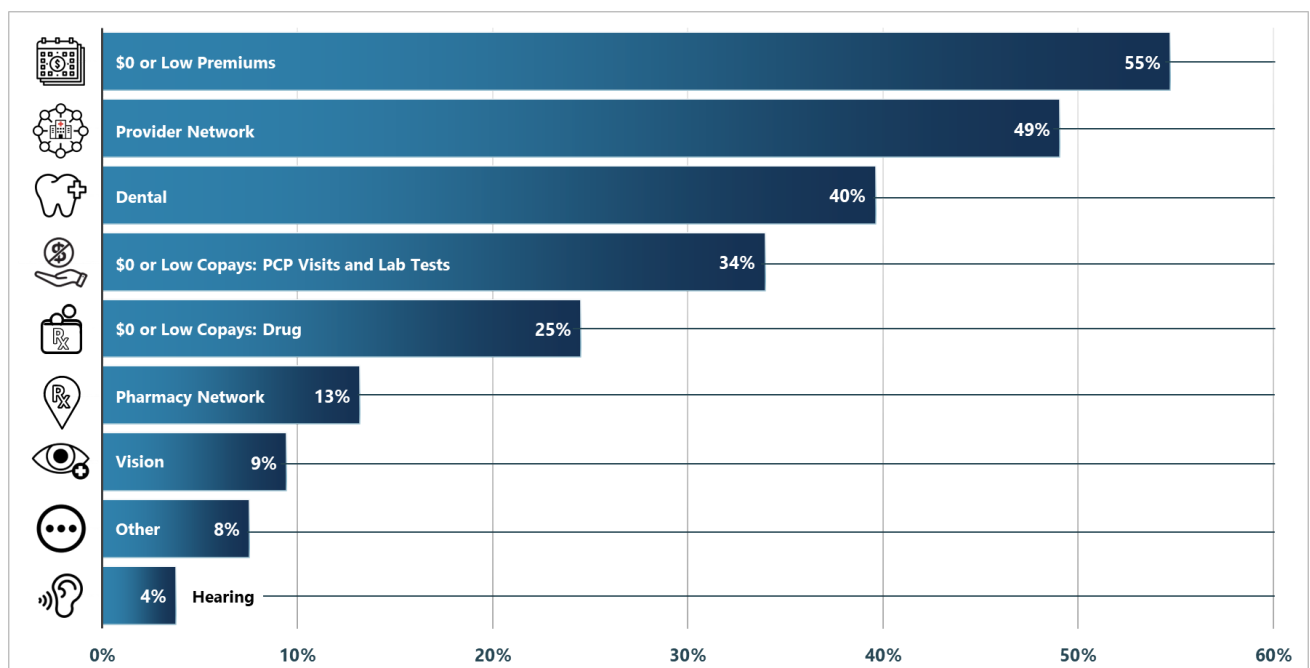
MA plan carriers have not changed the primary benefits they promote to enrollees over the last five years. Given that they all tout the same benefits, how can we know which benefits truly drive enrollees to select one provider's plan over another's plan?"

Agents are in the best position to assist in understanding which MA plan benefits matter most to decision-makers (i.e., enrollees). For that reason, we asked, "Thinking strictly of the Medicare Advantage plans that you promoted (or saw advertised), which *Top Two* plan benefits do you feel most impacted enrollees' decision to choose a plan? The following (most promoted) MA plan benefits were suggested for consideration:

- \$0/low monthly premiums
- Provider network
- Pharmacy network
- Dental coverage
- Vision coverage
- Hearing coverage
- Low copays for doctor visits and diagnostic tests
- \$0/low drug copays
- Other

With Medicare enrollees facing steep inflation and rumors of a looming recession, it may be no surprise that four of the Top 5 Medicare Advantage benefits have a direct impact on enrollees' financials.

AGENTS' PERSPECTIVES: TOP MEDICARE ADVANTAGE BENEFITS THAT MOST IMPACT PLAN SELECTION



\$0 or Low Monthly Premiums

Most agents agree that having as little out-of-pocket cost as possible is the most appealing benefit to MA enrollees.

With the cost of Original Medicare and prescription drug coverage on the rise, Medicare-eligible seniors continue to look for ways to safeguard their financial well-being. For Medicare Advantage enrollees who choose a plan with prescription drug coverage (i.e., MA-PD), the allure of a \$0 or low monthly premium is even more enticing.

The Kaiser Family Foundation ([KFF](#)) states that more than 7 in 10 (73%) enrollees in individual 2023 MA plans with prescription drug coverage (i.e., MA-PD) pay no premium other than the Medicare Part B premium – which remains a major selling point for beneficiaries.

Provider Networks

The size of MA provider networks for physicians and hospitals varies greatly both across counties and across plans in the same county. On average, MA networks included less than half (46%) of all physicians in a county.

Among the most valued relationships a Medicare beneficiary has is with his/her primary care provider. While provider network management is among the key elements that impact an MA plan's bottom line, the value of having a strong local provider network cannot be understated.

Dental

Over the past three to five years, MA plan providers have used dental coverage as a differentiator. Other than medical and prescription drug costs, dental is the third-largest expenditure related to enrollees' overall healthcare. According to the World Health Organization:

"Oral health is the state of the mouth, teeth, and orofacial structures that enable individuals to perform essential functions such as eating, breathing and speaking, and encompasses psychosocial dimensions such as self-confidence, well-being and the ability to socialize and work without pain, discomfort, and embarrassment."

Studies increasingly confirm that oral health is a key indicator of overall health, well-being, and quality of life. Although Medicare covers dental services that are an essential part of a medical procedure (e.g., jaw surgery), routine dental services (incl. exams, checkups, and cleanings), are not covered by Medicare. Beneficiaries must pay for these routine services directly out-of-pocket (OOP) or rely on dental coverage through private plans or Medicaid.

Lack of dental coverage can be a barrier to seeking dental care for beneficiaries. [CMS](#) estimates that more than half of all beneficiaries do not use any dental services in a given year. This is especially alarming as poor oral health is linked with respiratory disease, cardiovascular disease, and diabetes – among a growing number of chronic diseases.

Access to dental care

Fig. 4: Beneficiary was ever unable to access dental care, for any reason

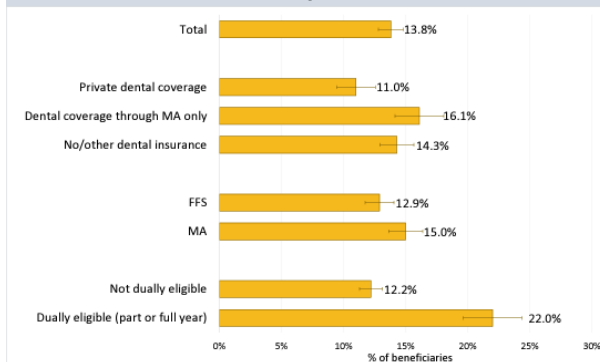
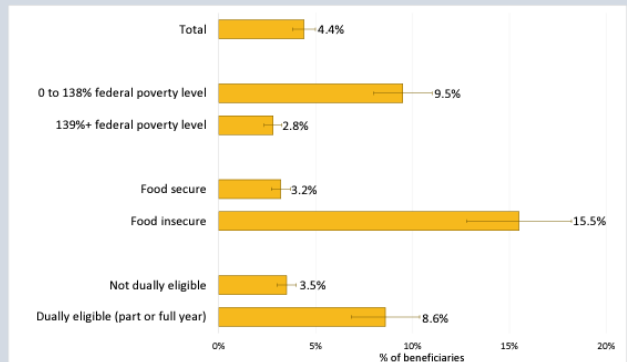


Fig. 5: Beneficiary was ever unable to access dental care, due to cost.



Source: CMS/MCBS Poster - Oral Health and Access to Dental Care Among Medicare Beneficiaries ([Link](#); also included in paragraph above)

Medicare plan providers are attempting to bridge the dental care gap. Medicare insurers are more frequently working with dental providers to share member data that could be used for future diagnostic and/or care strategies.

Copays for PCP Visits, Labs, and Prescription Drugs

Whether for PCP visits, diagnostics tests, or prescription drugs – copays have a direct impact on enrollees' financial situation. In addition to monthly premiums, visit- and drug-related copays are a major consideration for potential enrollees.

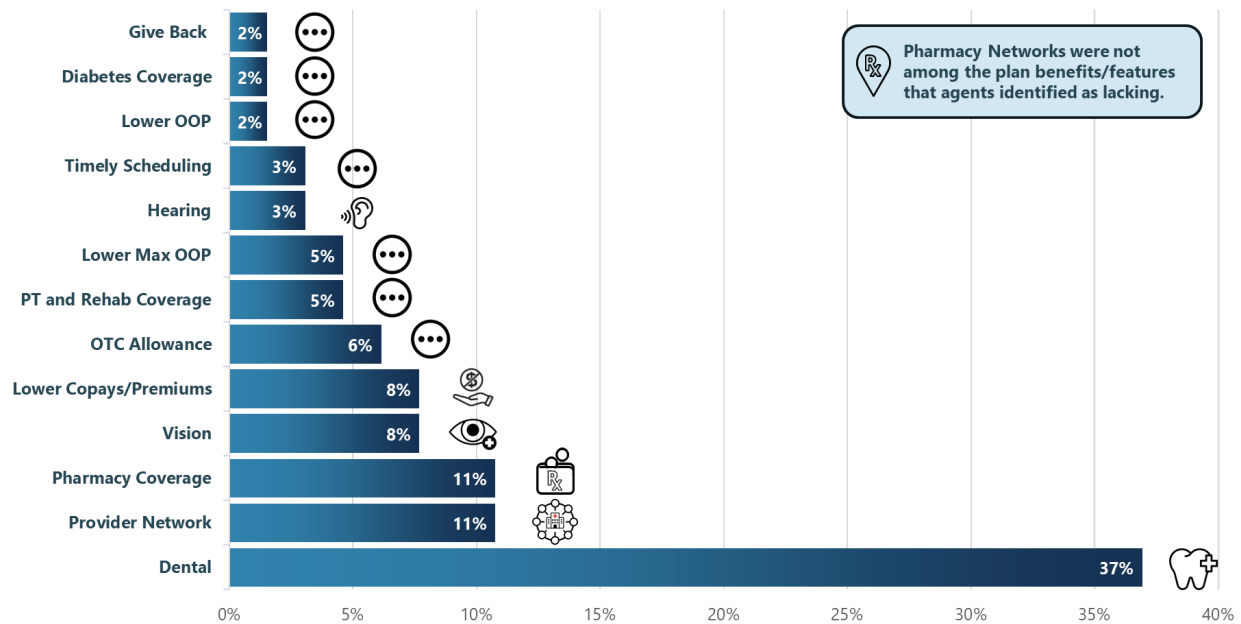
Vision and Hearing

Virtually all enrollees in individual Medicare Advantage plans (those generally available to Medicare beneficiaries) are in plans that provide access to eye exams and/or glasses (more than 99%), hearing exams and/or aids (99%), a fitness benefit (99%), and telehealth services (98%).

Where MA Plan Benefits Fall Short

Agents were also asked what their clients might like to see included or enhanced as part of their Medicare Advantage plans:

AGENTS' PERSPECTIVES: TOP MEDICARE ADVANTAGE BENEFITS TO ENHANCE FOR 2024



While a number of respondents believe MA plan providers could do better by expanding their provider networks, lowering monthly premiums, and lowering doctor/lab copays – dental remains a major deficiency among MA plan benefits in the eyes of agents and their clients.

When agents spoke in more detail about the struggles that potential MA enrollees have when selecting a plan, dental coverage and provider networks (i.e., the second- and third-most impactful plan benefits/features) were identified as opportunities for enhancement. Pharmacy coverage (i.e., Rx copays) and provider network enhancements were cited by at least 10% of agents as still missing the mark for enrollees’ needs. A summary of agents’ commentary is provided below:

AGENTS’ PERSPECTIVE: TOP MEDICARE ADVANTAGE BENEFITS TO ENHANCE FOR 2024 – QUOTES

Plan Benefit	Commentary
Dental	<ul style="list-style-type: none"> • <u>All</u> enrollees worry about dental. • Most MA enrollees would like enhanced dental coverage in the base plan. • Many agents (and clients) believe dental coverage should include: <ul style="list-style-type: none"> ○ Crowns and Bridges ○ Dentures ○ Implants ○ Root canals • Seniors want to have more providers in their dental networks. <ul style="list-style-type: none"> ○ Clients are looking for more access to PPO dental providers. • MA enrollees want better dental coverage. Dental benefits across the board are weak. <ul style="list-style-type: none"> ○ Oral hygiene is as important for seniors as when they were working. • The maximum benefits for dental are extremely low and the OOPs are insulting. Benefits are really limited to preventative care and minor procedures. Seniors do not have minor procedures. They need coverage for

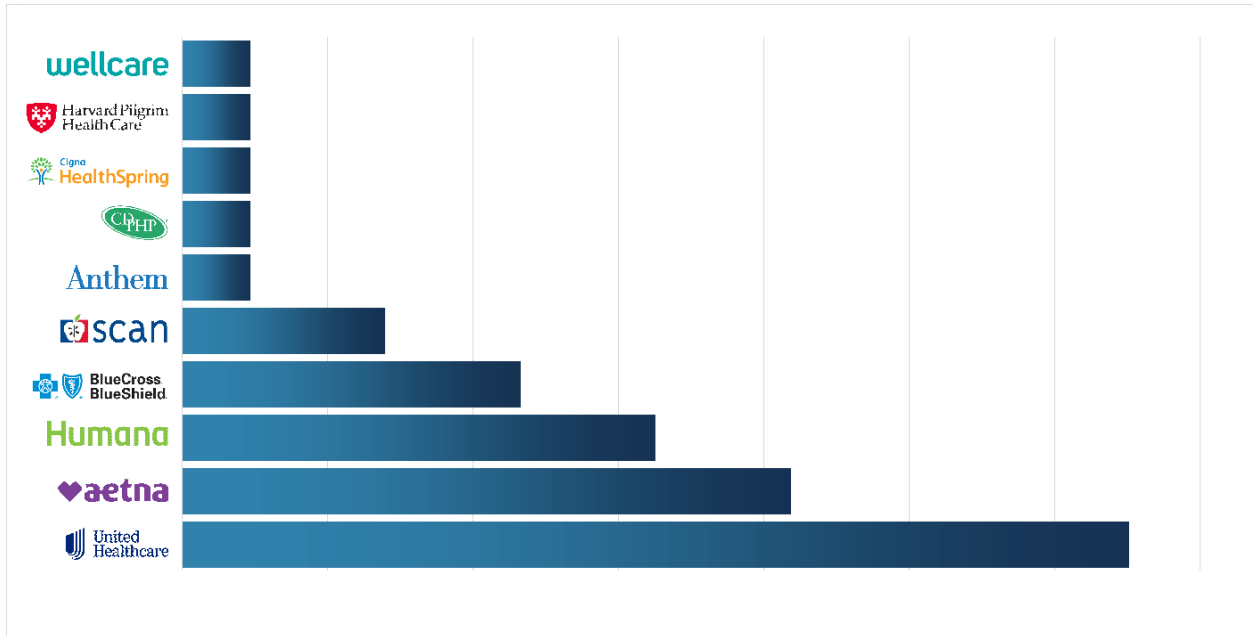
	<p>root canals, crowns, and even implants. Right now, the burden really falls on the senior population. You can't have proper nutrition if chewing is an issue.</p> <ul style="list-style-type: none"> • Dental coverage can be a 'make or break' plan feature for enrollees. It's one of the benefits where a plan provider can stand apart and show enrollees it understands the reality of being a senior and being unable to cover the costs of dental care – a basic health right. What's the benefit of giving a food allowance to members who can't eat? • Dental plan benefits aren't clear. There needs to be more clarity around dental coverage - in a more simplified way of communicating what is and what is not included. • Similar to allowances for hearing aids, maybe an allowance could be used for major dental work (e.g., crowns, dentures, root canal, etc.)
<i>Provider Network</i>	<ul style="list-style-type: none"> • Medicare beneficiaries want timely appointment scheduling with their doctor as well as specialists. The wait times just to see a doctor can be several months out and that's unacceptable. Provider availability is a major complaint with Medicare Advantage enrollees – especially as the year-end approaches. • Most Medicare Advantage clients are fairly healthy – no major chronic medical issues. On the other hand, participants want to know that if a problem arises, they will have the best care possible. Hence, the network concern is of great significance. • More out-of-state coverage is needed. Grandparents visit their children and grandchildren in other states and visit for longer periods. Limiting out-of-state access only to emergency situations is seen as a major disadvantage for MA plans. Plans that have better geographic coverage for traveling seniors are important. What if half the year is spent in CA and the other half is spent in AZ? The benefits are starting to catch up, but more can be done with access to care when traveling. • Medicare clients are looking for as much coverage as they can get and at a network that can provide it. Networks are horrible for all the Medicare insurers. The provider network needs to be expanded so there are no waiting periods. With the restrictive networks, there are a lot of complaints about wait times to see doctors. • MA enrollees want the flexibility to see any doctor and without additional OOP costs.
<i>Monthly Premiums</i>	<ul style="list-style-type: none"> • Most plans have \$0 copays and \$0 premiums with good networks. These have to be maintained just to have a chance of being chosen. The more financial burden that falls on the enrollee, the less likely they are to choose it.
<i>Provider and Lab Copays</i>	<ul style="list-style-type: none"> • MA beneficiaries want lower doctor and diagnostic test copays.

	<ul style="list-style-type: none"> Seniors naturally have higher doctor demands as well as diagnostic labs or screenings. They want lower co-pays for MRIs/CTs, diagnostic tests (e.g., blood, cancer screenings, etc.), and physical therapy too. The nickels and dimes add up.
<i>Physical Therapy Copays</i>	<ul style="list-style-type: none"> Enrollees are looking for plans that have lower copays for benefits like physical therapy (PT), occupational therapy (OT), and speech therapy (ST). Enhanced rehab and PT benefits are needed. If you replace a hip and PT is not adhered to because of copays or other obstacles, the recovery will be plagued with challenges, pain, etc. \$30-\$40 copays for PT (and other therapy) make it cost-prohibitive for many people to go to cardiac rehab, etc. <ul style="list-style-type: none"> Clients don't find this out until it's too late and they need the benefit. Perhaps a separate monthly max for therapy would work better. We have received complaints; clients have asked to drop Advantage plans in favor of Original Medicare because of the plans' severe restrictions on PT and rehab care.
<i>Other</i>	<ul style="list-style-type: none"> Lower OOPs and MOOP Timely Scheduling A larger yearly cap on benefits (Higher maximum benefits)
<i>OTC and SDOH Allowances</i>	<ul style="list-style-type: none"> Increase over-the-counter allowance (OTC coverage) and for food. Increase the allowances for groceries, rent, and utilities.
<i>Part B Buy Back</i>	<ul style="list-style-type: none"> Increased give-back
<i>Prescription Drug Copays</i>	<ul style="list-style-type: none"> Lower Rx co-pays for branded drugs Lower pharmacy costs Lower Part B drug copays

Top Medicare Advantage Carriers

Brokers were then asked their opinion on which insurance carrier offered the best overall Medicare Advantage plans. Although several insurance carriers rose to the top, the Top 5 Medicare Advantage plan carriers accounted for a combined 88% of brokers' selections.

AGENTS' PERSPECTIVES: BEST MEDICARE ADVANTAGE CARRIERS

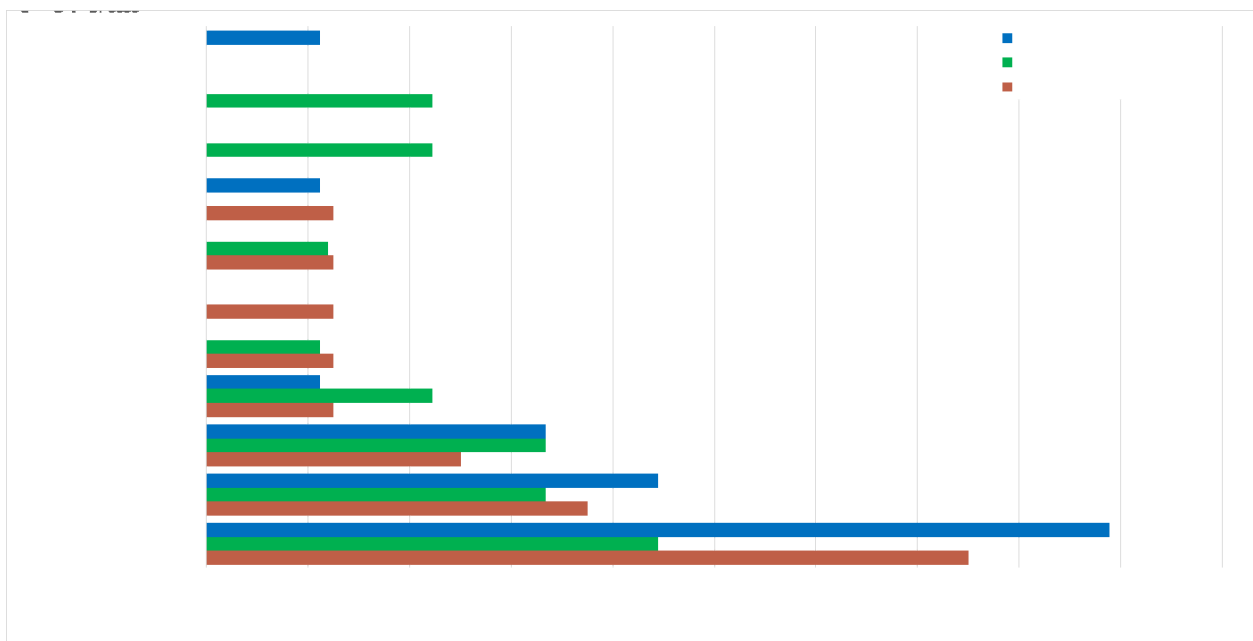


While four of the Top 5 MA plan carriers serve members nationwide, SCAN Health Plan (i.e., a regional carrier) was also highly commended by brokers. Based in California, SCAN Health Plan serves Medicare beneficiaries in its home state, Arizona, Texas, and Nevada.

Insurance Carrier Benchmarks

When brokers were asked to elaborate on their choices for best MA plan carriers, provider networks, costs (e.g., copays, premiums, etc.), and depth of coverage were the most common reasons cited.

BROKERS' PERSPECTIVE: KEY ATTRIBUTES OF THE TOP 3 MEDICARE ADVANTAGE INSURANCE CARRIERS



For the top two most-promoted and most-important MA benefits in plan selection (i.e., \$0/low premiums, and strong provider network), UHC outperformed Aetna and Humana. Conversely, UHC's dental benefits were not seen as a strength compared to its competitors.

Agents that identified Humana as having the best overall Medicare Advantage plans stated the company outperformed its competitors in prescription drug benefits, plan/coverage variety, and low OOPs. The table below includes agents' select quotes as to why the Top 3 were chosen as having the best overall MA plans.

AGENTS' PERSPECTIVES: DIFFERENTIATORS OF THE TOP 3 MEDICARE ADVANTAGE CARRIER

<i>Carriers</i>	<i>Select Broker Quotes</i>
<i>UnitedHealthcare</i>	<ul style="list-style-type: none"> • UnitedHealthcare (UHC) has great plan premiums and benefit coverage. • UHC offers the best price options and the best doctor network here in FL. • UHC offers plans with most doctors and hospitals. It has \$0 premiums, \$0 copays, and even a rebate plan. • UHC's over-the-counter benefit is the most generous of all the MA plan carriers. • UHC offers affordable MA benefits in addition to sufficient customer service. • UHC has the largest provider networks and ancillary benefits. • UHC has a large provider network and low copays. • UHC's plans have the broadest benefits, and its provider network coverage is hands-down Number 1. • Lowest OOP cost for 100-day SNF stay.
<i>Aetna</i>	<ul style="list-style-type: none"> • Aetna has wider networks (Network Coverage) and pays more attention to out-of-pocket expenses. • Aetna has good dental coverage, a large provider network, and low copays. • Aetna is aggressive in improving benefits every year. • The Aetna plans seem to offer the best network of doctors and hospitals at a given price when compared to other carriers. • Aetna offers the best MA benefits; it also has the best customer service for its Medicare members. • Aetna's plans have the highest maximum benefits and a wide provider network. • Aetna's \$0 dollar PPO plans are a big deal. • Great local provider network, great hearing benefits, and low copays.
<i>Humana</i>	<ul style="list-style-type: none"> • Humana has several MA plans to choose from and it has all the hospitals in its network UHC doesn't have all hospitals. Other plans don't have equal benefit structure and cost. • Humana's plans have the lowest OOPs and high dental plan options. • Humana offers the best bang for the buck. It has good prescription benefits and ancillary benefits. Its \$0 premiums are also important.

	<ul style="list-style-type: none"> ● Humana has the lowest maximum OOP, a \$0 premium, and a decent provider network. ● Humana offers several plan designs and premium options – almost like a cafeteria approach - to fit different types of Medicare members. ● I sell in multiple states and overall Humana comes out with a high ranking in many states. The doctor network is usually good and the drug benefits are OK. ● All around, Humana’s plans have good provider networks and additional benefits.
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Conclusions

Ultimately, financial concerns significantly influence enrollees’ MA plan selections. At a minimum, \$0/low monthly premiums and a strong provider network are required for a plan to be considered – as are low prescription drug costs. MA insurers that meet enrollees’ basic requirements will be considered, but those that best demonstrate an understanding of the 65+ population are most likely to be selected.

Agents perceived UnitedHealthcare (a.k.a., AARP), Aetna, and Humana as offering the best overall MA plans to potential enrollees. Each has a significant provider network, \$0 or low premiums, and extra benefits (e.g., hearing coverage, OTC allowance, etc.).

Dental benefits remain a major concern for the Medicare population and were identified as lacking. While agents identified Aetna and Humana for having strong dental benefits, it remains the plan benefit that agents (and their clients) most want to be expanded for the 2024 plan year.

In the coming years (i.e., post-2024), enrollment in Medicare Advantage is projected to exceed Original Medicare enrollment. This, no doubt, has to do with the quantity and quality of MA plan benefits that better meet the needs of those on Medicare.

Conclusions

With insights provided by an unbiased panel of non-captive agents, the Fall 2023 edition of Proactive Pulse accomplished the following:

- Confirmed that the Top 8 plan benefits promoted to potential Medicare Advantage enrollees have a substantial impact on which plans are chosen.
- Identified that monthly premiums, provider networks, and dental benefits most impact enrollees’ plan selections.
- Discovered that dental coverage, provider networks, and pharmacy drug copays represent areas of desired enhancement by MA enrollees.
 - These benefit categories also provide insurers opportunities to stand apart and differentiate their plans.
- Identified UnitedHealthcare, Aetna, and Humana as having the best overall Medicare Advantage plans.

About Proactive



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