Market Meltdown: The IRA's Impact on Medicare

EXAMPLE A PROVINCIL FOR AFFORDABLE HEALTH CLAIM FORM HEALTH COVERAGE HEALTH CLAIM FORM EMBER TO ATTACH ORIGINAL RECEIPTS/ITEMIZED B EMBER TO ATTACH ORIGINAL RECEIPTS/ITEMIZED B EXAMPLE A PROOF OF Claim must be submitted within 90 data

About Us

CAHC is a non-profit, non-partisan coalition that was founded in 2001 to ensure all Americans have reprace access to affordable coverage

We support market-based reforms that expand coverage options, lower costs, and create better value for patients and taxpayers

We believe:

- 1. All Americans Should Have Access to Affordable Coverage
- 2. Consumers Need Lower Premiums and Outof-Pocket Costs
- 3. Patients Want More Choices and More Transparency

Our membership represents a broad range of interests – small and large employers, insurers, manufacturers, patient groups, and physician organizations





HEALTH COVERAGE

BRINGING DOWN THE COST OF HEALTH CARE FOR ALL AMERICANS

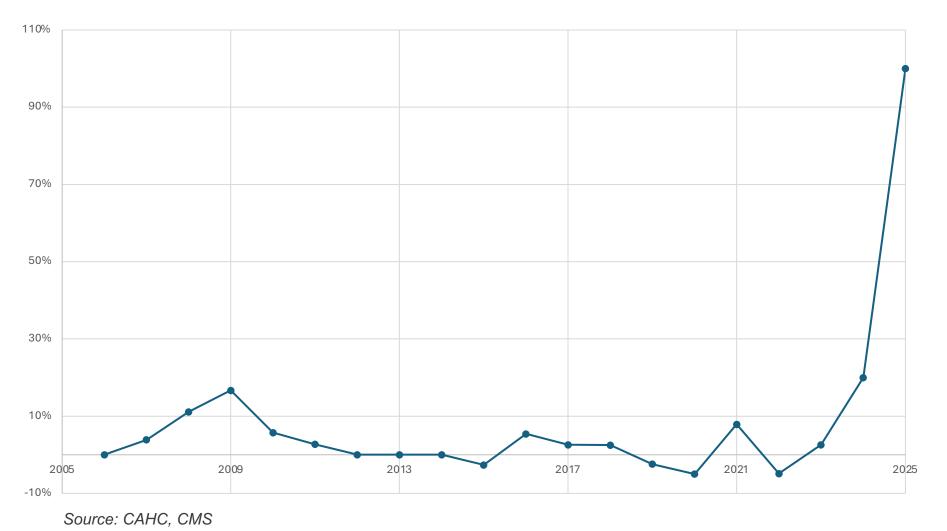
The Medicare Prescription Drug Program (Part D)

- Medicare beneficiaries love Part D for consistently delivering secure drug coverage with low premiums
- The IRA radically rewrote Part D:
 - Government price controls on drugs
 - $_{\circ}~$ Changed benefits that are disrupting the market
- The authors of the law claimed they capped growth in premiums to no more than 6 percent
 - $_{\circ}~$ In 2024, average premiums for Part D plans are up by 21 percent
 - $_{\circ}~$ Heading into 2025, plan premiums are expected to double
- Get ready! Most Medicare beneficiaries will learn about higher premiums and reduced benefits in late September and early October 2024



Medicare Part D Premiums

Percentage Increase in Average Monthly Part D Premium



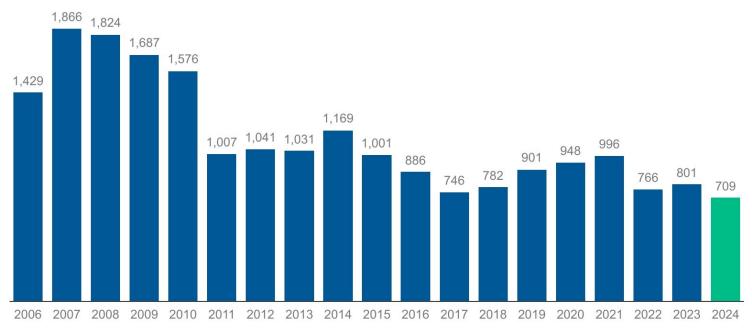


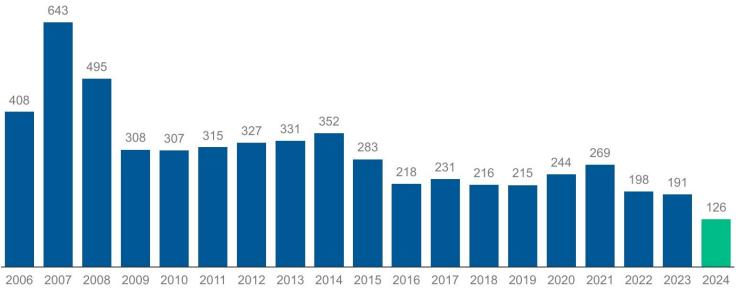
Part D Plan Choices

STANDALONE PART D PLANS

Fewest number of Part D plans ever –

- Almost 100 less than 2023
- 50% reduction in choices compared to the first year of the program





Source: Kaiser Family Foundation, CMS

LOW INCOME SUBSIDY PLANS

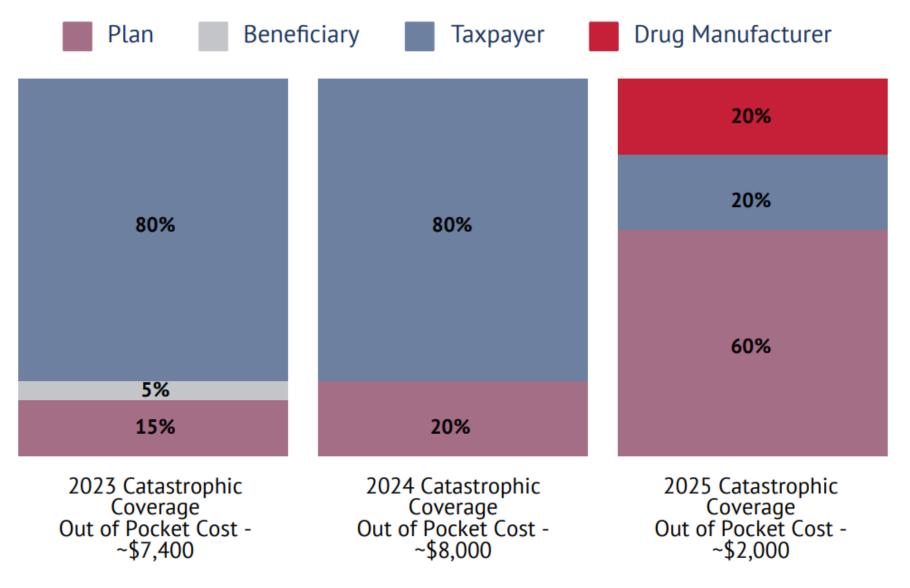
Seniors now have the least number of low-income plan choices

- 2024: 34% reduction in plans
- Seniors have access to just 3 premium free "benchmark" plans



Changes to Who Pays What After the Out-of-Pocket Limit

The IRA establishes a lower annual out-of-pocket threshold of \$2,000 in 2025 and changes the liability of taxpayers, beneficiaries, plans and manufacturers over time.



Timing for 2024-25 Medicare Changes

February - April	July	Sept	October - December
•		•	
MA Rate Notice, Part D Benefits	Medicare Part D Base Premium Announced	MFP Prices Announced	Beneficiary Plan Shopping
 Implements IRA benefit redesign - \$2,000 OOP cap and insurance risk 		 Price controls announced for 10 Products in Part D 	 ANOCs sent around 10/1
	 Double or triple premiums expected 		 Plan shopping starts 10/1
reshufflingAdjusts payments to MA plans.			 Beneficiaries sign up for coverage between 10/15 – 12
			• Likely:
Medicare Prescription Payment			– Doubling of premiums
Plan Guidance			-Reduced plan choices
 Implements IRA patient smoothing program 			-Tighter formularies
			-More utilization managemer
			–More cost sharing
Part C and D Policy Rule			
 Reduced resources for enrollment activities 			



What's Next for Medicare?

- While many of the benefit redesign changes will help millions of people, the realworld impact is resulting in higher cost for drugs
- Ultimately, Congress must step in to address the deeply flawed Part D provisions of the IRA
 - Stop the raid on Medicare
 - Fire the bureaucrats
 - Replace drug price controls with mandatory discounts, competitive reforms
 - Adjust risk corridors to limit premium increases
 - Eliminate the fallback plan option
- Congress must reaffirm its commitment to America's seniors by doing all it can to mitigate market disruption being caused by IRA.



"Hurricane IRA"

(Coming October 2024)

Craig J. Ritter CEO, Ritter Insurance Marketing Managing Partner, Integrity July 10th, 2024



Ritter, a Field Marketing Organization (FMO)

- Wholesaler of Medicare Products to support Retail Agents
- Assist Insurance agents in enrolling their Medicare beneficiary clients in plans to best meet their needs
- Who do you call?
 - When Medicare Beneficiaries have questions, they call their agent
 - When agents have questions, they call their FMO



Medicare Advantage versus Part D Growth

- Individual Medicare Advantage Membership
 - 2023: 25,521,645¹ enrollees
 - 2024: 27,707,771² enrollees (up 8.6%)
- Individual Stand-Alone Part D Membership
 - 2023: 18,640,586¹ enrollees
 - 2024: 18,067,871² enrollees (down 3.1%)
- Why is this happening?
 - The difference in how these plans are funded
 - Changes in plan design drives increases in Part D Benchmark Premiums
 - 2023 Part D Benchmark: \$34.71³
 - 2024 Part D Benchmark: \$64.28⁴ (Increase of 85.2%)

Takeaways From the Past Year in Medicare

- Stand-Alone Part D Market
 - Part D market experienced radical disruption in 2024
 - Absolute change in Top 5 Stand-Alone Part D plans' membership YoY
 - 2022-23: 1,015,731
 - 2023-24: 3,303,769 (225% Increase)
 - Two Individual Part D Plans dominated the market
 - Seven in ten Medicare Beneficiaries don't shop Part D Plans⁵
 - Many were highly motivated to switch, often encouraged by their Agent
 - Medicare Beneficiaries without an Agent may not have switched
- Medicare Advantage Consolidation
 - Largest 2% of MAO's added 1,475,234 (Average: 245,872/MAO)
 - Next 98% of MAO's added 548,838 (Average: 1,841/MAO)



The Future of Stand-Alone Part D Market

- Another major increase in Part D Benchmark
 - CMS will publish the benchmark Part D rate in 3-4 weeks
 - Recall, 2024 benchmark increased 85% to \$64.28/month
 - Due to IRA changes in 2025, "whisper" number is \$100/month to \$120/month
- How would this impact Part D?
 - Premiums and Benefits
 - Risk Pool
 - Administrative Cost Increases
- Bottom Line
 - Medicare Beneficiaries with Part D may be shocked with premium increases
 - Medicare Beneficiaries' likelihood of being in "right" plan is extremely low
 - Medicare Beneficiaries may not have expert support to navigate the change



The Future of Medicare Advantage Market

- Headwinds Going into 2025
 - IRA
 - Utilization⁶
 - Reimbursement⁶
- Expected Result for Medicare Beneficiaries
 - Degraded benefits
 - Plan terminations^{7, 8}
 - Less support for agents



Footnotes

1. <u>https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/mcradvpartdenroldata/monthly/monthly-enrollment-plan-2023-01</u>

2. <u>https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/mcradvpartdenroldata/monthly/contract-summary-2024-01</u>

3. <u>https://www.cms.gov/files/document/july-29-2022-parts-c-d-announcement-pdf.pdf</u>

4. <u>https://www.cms.gov/files/document/july-31-2023-parts-c-d-announcement-pdf.pdf</u>

5. <u>https://www.kff.org/medicare/issue-brief/a-relatively-small-share-of-medicare-beneficiaries-</u> <u>compared-plans-during-a-recent-open-enrollment-period/</u>

6. <u>https://www.healthcaredive.com/news/humana-cvs-medicare-advantage-benefit-plan-cuts-2025-unitedhealth/716764/</u>

7. <u>https://seekingalpha.com/article/4685749-humana-inc-hum-q1-2024-earnings-call-transcript</u>

8. <u>https://seekingalpha.com/article/4688045-cvs-health-corporation-cvs-q1-2024-earnings-call-transcript</u>

