

January 27, 2016

The Honorable Sylvia M. Burwell
Secretary of Health and Human Services
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Burwell:

On behalf of the undersigned patient-centered organizations, as you contemplate the 2017 Advance Notice and Call Letter, we ask that you provide security and stability to over 17 million seniors and individuals with disabilities who have selected the Medicare Advantage (MA) program as their health plan of choice. MA is improving the health care system for today's seniors as 11,000 new seniors become eligible for Medicare every day.

MA incentivizes care coordination and disease management emphasizing value, not volume. This framework is the driving force behind incentivizing a more personalized and integrated health care delivery system. MA offers a robust set of programs, activities, and clinical interventions specifically designed to address beneficiaries' health and needs. This includes identifying and resolving medication adherence issues; transportation services to ensure beneficiaries can access the care they need; and social and behavioral services. Furthermore, MA beneficiaries are receiving coordinated quality care through 24 hour nurse hotlines and remote monitoring tools that seamlessly exchange data between patients and providers. MA plans also offer in home clinical visits with licensed clinicians that coordinate beneficiary care and work to manage acute and chronic conditions. A December 2015 *Health Affairs* study found that primary care in-home visits improve care for study participants by reducing hospital admissions by 14%, lowering the risk of admission to nursing homes, and increasing office visits by 2% to 6%.

MA's predictable coverage and protection from unexpected expenses is also important to beneficiaries. This includes reduced premiums for Part B and Part D, out of pocket maximums, and reduced cost sharing on medical and pharmacy benefits. Millions of low-income and minority seniors, as well as seniors with multiple chronic conditions depend on MA for affordable, high-quality health care coverage. In fact, 37% of MA beneficiaries have annual incomes at or below \$20,000.

MA is incentivizing high quality care that seniors depend on and are highly satisfied with. On behalf of the 17 million seniors who have elected a MA plan, we urge you to implement policies that provide security and stability for the MA program.

Sincerely,

American Association of Nurse Practitioners
American Medical Group Association
American Nurses Association

American Society of Nephrology
Area Agency on Aging, West Palm
Association for Behavioral Health & Wellness
Council on Aging of Southwestern Ohio
Florida Health Networks
Healthways
Mercy Health
National Association of Nutrition & Aging Programs Services
National Black Nurses Association
National Caucus and Center on Black Aging
National Hispanic Council on Aging
Partnership to Fight Chronic Disease
Population Health Alliance
Senior Resource Alliance, Inc.
Summa Health