

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
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**Centers for Medicare & Medicaid Services**

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**DATE:** July 11, 2018

**TO:** Medicare-Medicaid Plans operating in CY 2019 in California, Illinois, Massachusetts, Michigan, New York FIDA, New York FIDA IDD, Ohio, Rhode Island, South Carolina, and Texas

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**SUBJECT:** Proposed Update to MMP Medicare A/B Rate Methodology for CY 2019

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Under the Financial Alignment Initiative, CMS and participating states establish Medicare and Medicaid capitated payment rates for participating Medicare-Medicaid Plans (MMPs). Rates are based on estimates of what would have been spent per beneficiary in the payment year had each demonstration not existed. This memo describes proposed updates to the MMP Medicare A/B rate component beginning in CY 2019 to more accurately reflect Medicare A/B costs absent the demonstration. CMS is soliciting feedback from MMPs and other interested stakeholders on this proposed approach.

**Background**

CMS develops baseline spending (costs absent the demonstration) for Medicare Parts A and B services using estimates of what Medicare would have spent on behalf of MMP enrollees absent each demonstration. For non-ESRD beneficiaries, the Medicare baseline for A/B services is a blend of the Medicare Fee-for-Service (FFS) Standardized County Rates, with demonstration-specific adjustments, and the Medicare Advantage projected payment rates for each year, weighted by the proportion of the target population that would otherwise be enrolled in each program in the absence of the demonstration.

The proportions of the target population that would otherwise be enrolled in Medicare Advantage (MA) or Original Medicare have been (and continue to be for the CY 2018 MMP rates) based on an analysis of MA versus FFS enrollment prior to the demonstration among individuals *eligible* for each demonstration, at a county level. This approach applies to those MMPs operating in California, Illinois, Massachusetts, Michigan, New York FIDA, Ohio, and Texas. For those demonstrations in which there has historically been no passive enrollment of individuals from MA plans into the demonstration (New York FIDA IDD, South Carolina, and

Rhode Island) the MA rate component has been weighted as zero and the FFS rate component comprises the entirety of the Medicare A/B rate.

### **Approach**

As the capitated financial alignment model demonstrations mature and to ensure more accuracy in our rate setting, we are proposing to revise the approach to weighting the MA and FFS components of the Medicare A/B rate for non-ESRD beneficiaries beginning in CY 2019. This approach would also include updating the MA rate component itself.

Rather than continue using the historical MA versus FFS weighting prior to the demonstration of *demonstration-eligible beneficiaries*, we are proposing to re-base this weighting based on the pre-enrollment status of *actual MMP enrollees*. This approach would look at the beneficiaries in each demonstration, by county, in CY 2018 and assess whether they were in MA or Original Medicare FFS prior to enrolling in the demonstration. Based on the timing required to finalize Medicare rates for CY 2019, this approach would examine the pre-demonstration enrollment status of those MMP enrollees enrolled in each demonstration during the second quarter of CY 2018 (specifically, as of April 2018). This is the same data used to model the impact of this change, had it been implemented in CY 2018.

This update would change both: 1) the weighting of the MA and FFS components of the non-ESRD Medicare A/B rate at the county level; and 2) the MA plan payment data used to calculate the MA component of the rate, so both would be based on the status of actual MMP enrollees, rather than those eligible for each demonstration, prior to the demonstration start.

### **Analysis**

CMS conducted analysis, using enrollment information as of April 2018, to assess the potential rate impact of this change. This analysis shows the impact of this change on the CY 2018 Medicare A/B rates, were CMS to have implemented this change in CY 2018. To the extent this approach is implemented in CY 2019, the actual rate impact would vary, primarily due to updates in the MA and FFS components from CY 2018 to CY 2019, but we expect the FFS/MA weights would generally be consistent with those noted below as “Proposed FFS% / MA% Weights” in Table 1 and in the Appendix.

Two tables with findings are presented below, with the major findings as follows:

*MA/FFS Weighting:* On average, across all of the demonstrations, the FFS component is weighted higher in the current CY 2018 MMP rates than actual enrollment supports, though there are exceptions to this in a number of counties. That is, on average a higher percentage of MMP enrollees came from Medicare Advantage than we originally anticipated based on eligibility. Table 1 below shows the changes in the FFS vs MA weighting that will result if the proposal to base the weight on actual enrollment is implemented. Table A in the Appendix shows this information at the county level. The vast majority of counties analyzed (138, or 84%) have higher FFS weighting in the CY18 rates as compared to the enrollment analysis. Approximately

90% of individuals enrolled in an MMP in April 2018 were in a county with higher FFS weighting in the CY18 rates as compared to the enrollment analysis.

**Table 1. Current FFS% / MA% VS Proposed FFS% / MA%**

Demonstration	Current FFS% / MA% Weights*	Proposed FFS% / MA% Weights**
California	82% / 18%	64% / 36%
Illinois	97% / 3%	76% / 24%
Massachusetts	99% / 1%	91% / 9%
Michigan	87% / 13%	77% / 23%
New York FIDA	70% / 30%	34% / 66%
New York FIDA IDD	100% / 0%	92% / 8%
Ohio	83% / 17%	76% / 24%
Rhode Island	100% / 0%	97% / 3%
South Carolina	100% / 0%	87% / 13%
Texas	75% / 25%	73% / 27%

\*Weights based on pre-demonstration enrollment status among individuals *eligible* for each demonstration.

\*\*Weights based on April 2018 MMP enrollees' enrollment status prior to enrollment into the demonstration.

Enrollment excludes: individuals listed as residing in a county outside of the demonstration service area. State-level averages weighted by April 2018 MMP enrollment by county.

*Impact of Reweighting and MA Rate Component Update on Payment:* To assess the rate impact of this potential change, CMS modeled the impact of this reweighting on the CY 2018 Medicare A/B rates, had this change been implemented in CY 2018. **Note that CMS is not proposing any changes to the CY 2018 Medicare A/B rates.**

Reweighting the MA and FFS rate components, combined with updating the MA rate component to reflect actual MMP enrollment, results in an average CY 2018 Medicare A/B rate change between -1.88% to +1.69% across the 10 capitated model demonstrations. Approximately 40% of counties analyzed would have lower CY 2018 rates if the updated weighting was used, compared to the current CY 2018 rates. Approximately 68% of individuals enrolled in an MMP in April 2018 were in a county that would have had lower CY 2018 Medicare A/B rates if the updated weighting was used, compared to the current CY 2018 rates, with the average weighted change across all counties at -0.82%. (See Table 2 below summarizing results at state-level; county-level data are available in the Appendix).

**Table 2. Illustrative Scenario: Average Change in Medicare A/B Rate for CY 2018 Using Actual Enrollment versus Current Approach**

Demonstration	Current Approach	Proposed Approach Using Recent MMP Enrollment (Illustrative Scenario)	
	Weighted Average Medicare A/B Rate for CY 2018	Weighted Average Medicare A/B Rate for CY 2018	Percentage Change in CY 2018 Rates (Had Proposed Approach been Implemented in 2018)
California	\$856.32	\$840.98	-1.79%
Illinois	\$875.77	\$859.35	-1.88%
Massachusetts	\$849.29	\$848.11	-0.14%
Michigan	\$806.76	\$797.37	-1.16%
New York FIDA	\$855.60	\$839.93	-1.83%
New York FIDA IDD	\$914.42	\$909.93	-0.49%
Ohio	\$781.00	\$783.60	0.33%
Rhode Island	\$767.52	\$770.34	0.37%
South Carolina	\$756.74	\$769.50	1.69%
Texas	\$845.58	\$842.21	-0.40%

Note: **CMS is not proposing to change Medicare A/B rates for CY 2018.** The above table illustrates how the CY 2018 rates would have changed, as compared to paid CY 2018 rates, had the proposed approach been implemented in CY 2018. Data above is based on MMP enrollment by county as of April 2018. Analysis excludes: individuals listed as residing in a county outside of the demonstration service area. State-level averages are weighted by April 2018 MMP enrollment by county.

In addition to considering movement to this approach generally, we are also evaluating how to update the MA/FFS weighting in counties with very low MMP enrollment. We welcome feedback and input on approaches to this particular issue, such as whether a blend of the county-level weighting and the overall demonstration weighting is appropriate for counties with limited MMP enrollment below a specified threshold. CMS' proposed approach for counties with low MMP enrollment is to follow the same methodology as described above, while using the pre-demonstration eligibility weights for any counties in which there is currently no MMP enrollment.

To the extent CMS updates the methodology for determining the MA/FFS weighting of the Medicare A/B MMP rate as well as the MA component of the rate to reflect actual MMP enrollment for CY 2019, we would also anticipate taking the same approach in future rate years (for example, for CY 2020 rates looking at the pre-demonstration enrollment status of MMP enrollees enrolled in each demonstration as of spring 2019).

## **Comments**

CMS is soliciting feedback on our approach to revising the methodology for determining the MA and FFS weighting of the Medicare A/B MMP rate at a county level, as well as the data used to calculate the MA component of the rate, to reflect actual MMP enrollment. If you wish to submit comments, please submit them to the Medicare-Medicaid Coordination Office at [mmcocapsmodel@cms.hhs.gov](mailto:mmcocapsmodel@cms.hhs.gov) by 5:00 PM EST **August 13, 2018** with the subject heading “Proposed Updates to MMP Medicare A/B Rate Methodology for CY 2019”.

**APPENDIX –FFS/MA Weighting and Medicare A/B Rate Using Actual Enrollment Versus Current Approach, by Demonstration and County**

Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
CA	Los Angeles	87%	13%	\$898.51	66%	34%	\$878.26	-2.25%
CA	Orange	78%	22%	\$835.17	42%	58%	\$801.02	-4.09%
CA	Riverside	80%	20%	\$820.23	66%	34%	\$811.77	-1.03%
CA	San Bernardino	79%	21%	\$789.51	63%	37%	\$787.57	-0.25%
CA	San Diego	78%	22%	\$812.66	69%	31%	\$805.56	-0.87%
CA	San Mateo	38%	62%	\$812.30	34%	66%	\$811.63	-0.08%
CA	Santa Clara	99%	1%	\$835.25	93%	7%	\$829.07	-0.74%
IL	Champaign	95%	5%	\$728.64	82%	18%	\$732.05	0.47%
IL	Christian	100%	0%	\$806.40	100%	0%	\$806.55	0.02%
IL	Cook	96%	4%	\$895.54	74%	26%	\$876.51	-2.12%
IL	De Witt	96%	4%	\$797.59	85%	15%	\$789.78	-0.98%
IL	DuPage	98%	2%	\$843.87	77%	23%	\$831.65	-1.45%
IL	Ford	97%	3%	\$879.68	83%	17%	\$875.87	-0.43%
IL	Kane	96%	4%	\$841.62	75%	25%	\$829.81	-1.40%
IL	Kankakee	100%	0%	\$831.08	82%	18%	\$826.42	-0.56%
IL	Knox	95%	5%	\$771.55	84%	16%	\$767.75	-0.49%
IL	Lake	99%	1%	\$854.30	77%	23%	\$838.41	-1.86%
IL	Logan	98%	2%	\$806.36	100%	0%	\$806.90	0.07%
IL	Macon	100%	0%	\$758.50	100%	0%	\$758.50	0.00%
IL	McLean	96%	4%	\$704.20	84%	16%	\$709.11	0.70%
IL	Menard*	99%	1%	\$732.69	99%	1%	\$732.69	0.00%
IL	Peoria	98%	2%	\$736.99	86%	14%	\$742.54	0.75%
IL	Piatt*	100%	0%	\$885.94	100%	0%	\$885.94	0.00%
IL	Sangamon	99%	1%	\$724.46	100%	0%	\$724.01	-0.06%
IL	Stark	100%	0%	\$728.58	100%	0%	\$728.58	0.00%
IL	Tazewell	96%	4%	\$757.13	88%	12%	\$756.53	-0.08%
IL	Vermilion	95%	5%	\$782.52	76%	24%	\$776.01	-0.83%
IL	Will	97%	3%	\$896.51	74%	26%	\$876.59	-2.22%
MA	Essex	99%	1%	\$868.84	92%	8%	\$864.64	-0.48%
MA	Franklin	100%	0%	\$751.11	100%	0%	\$750.84	-0.04%

Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
MA	Hampden	99%	1%	\$767.40	89%	11%	\$772.78	0.70%
MA	Hampshire	99%	1%	\$783.83	100%	0%	\$783.55	-0.04%
MA	Middlesex	99%	1%	\$869.58	93%	7%	\$868.38	-0.14%
MA	Norfolk	99%	1%	\$922.66	93%	7%	\$920.65	-0.22%
MA	Plymouth	99%	1%	\$963.87	100%	0%	\$964.23	0.04%
MA	Suffolk	99%	1%	\$888.52	94%	6%	\$884.58	-0.44%
MA	Worcester	99%	1%	\$845.31	83%	17%	\$840.10	-0.62%
MI	Alger	94%	6%	\$820.93	90%	10%	\$820.19	-0.09%
MI	Baraga	96%	4%	\$923.36	89%	11%	\$920.52	-0.31%
MI	Barry	89%	11%	\$739.08	78%	22%	\$745.77	0.91%
MI	Berrien	98%	2%	\$751.51	93%	7%	\$752.74	0.16%
MI	Branch	99%	1%	\$783.22	95%	5%	\$783.72	0.06%
MI	Calhoun	98%	2%	\$752.57	92%	8%	\$754.93	0.31%
MI	Cass	99%	1%	\$786.15	94%	6%	\$788.42	0.29%
MI	Chippewa	96%	4%	\$816.97	93%	8%	\$816.03	-0.12%
MI	Delta	91%	9%	\$726.88	89%	11%	\$728.04	0.16%
MI	Dickinson	88%	12%	\$779.86	89%	11%	\$779.80	-0.01%
MI	Gogebic	91%	9%	\$767.43	88%	12%	\$768.18	0.10%
MI	Houghton	93%	7%	\$766.21	92%	8%	\$766.31	0.01%
MI	Iron	90%	10%	\$903.27	86%	14%	\$901.66	-0.18%
MI	Kalamazoo	78%	22%	\$736.89	82%	18%	\$730.45	-0.87%
MI	Keweenaw	91%	9%	\$815.14	93%	7%	\$814.52	-0.08%
MI	Luce	94%	6%	\$917.15	92%	8%	\$908.05	-0.99%
MI	Mackinac	98%	2%	\$881.07	92%	8%	\$878.05	-0.34%
MI	Macomb	89%	11%	\$818.87	74%	26%	\$808.70	-1.24%
MI	Marquette	91%	9%	\$722.54	89%	11%	\$724.14	0.22%
MI	Menominee	93%	7%	\$743.69	87%	13%	\$746.24	0.34%
MI	Ontonagon	95%	5%	\$806.81	89%	11%	\$805.91	-0.11%
MI	Schoolcraft	96%	4%	\$868.65	93%	7%	\$867.94	-0.08%
MI	St. Joseph	97%	3%	\$730.65	91%	9%	\$732.10	0.20%
MI	Van Buren	96%	4%	\$787.93	91%	9%	\$788.46	0.07%
MI	Wayne	82%	18%	\$832.97	69%	31%	\$817.69	-1.83%
NY FIDA	Bronx	49%	51%	\$894.21	28%	72%	\$878.85	-1.72%

Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
NY FIDA	Kings	81%	19%	\$837.27	37%	63%	\$819.45	-2.13%
NY FIDA	Nassau	86%	14%	\$907.33	25%	75%	\$873.26	-3.75%
NY FIDA	New York	64%	36%	\$836.81	34%	66%	\$828.48	-1.00%
NY FIDA	Queens	78%	22%	\$833.62	37%	63%	\$822.78	-1.30%
NY FIDA	Richmond	76%	24%	\$874.48	34%	66%	\$845.07	-3.36%
NY FIDA	Westchester	86%	14%	\$901.08	30%	70%	\$874.92	-2.90%
NY FIDA IDD	Bronx	100%	0%	\$938.26	67%	33%	\$915.22	-2.46%
NY FIDA IDD	Kings	100%	0%	\$862.13	81%	19%	\$853.63	-0.99%
NY FIDA IDD	Nassau	100%	0%	\$933.80	99%	1%	\$933.19	-0.07%
NY FIDA IDD	New York	100%	0%	\$865.61	91%	9%	\$861.58	-0.47%
NY FIDA IDD	Queens	100%	0%	\$857.15	80%	20%	\$847.61	-1.11%
NY FIDA IDD	Richmond	100%	0%	\$905.96	90%	10%	\$899.27	-0.74%
NY FIDA IDD	Rockland	100%	0%	\$948.44	98%	2%	\$947.00	-0.15%
NY FIDA IDD	Suffolk	100%	0%	\$949.89	95%	5%	\$948.32	-0.17%
NY FIDA IDD	Westchester	100%	0%	\$928.47	93%	7%	\$923.80	-0.50%
OH	Butler	80%	20%	\$811.97	74%	26%	\$814.06	0.26%
OH	Clark	76%	24%	\$794.12	73%	27%	\$795.36	0.16%
OH	Clermont	92%	8%	\$800.64	80%	20%	\$801.96	0.16%
OH	Clinton	96%	4%	\$795.63	88%	12%	\$797.15	0.19%
OH	Columbiana	93%	7%	\$757.23	81%	19%	\$761.36	0.55%
OH	Cuyahoga	84%	16%	\$773.08	75%	25%	\$775.98	0.38%
OH	Delaware	90%	10%	\$761.23	81%	19%	\$765.24	0.53%
OH	Franklin	84%	16%	\$793.08	78%	22%	\$794.83	0.22%
OH	Fulton	96%	4%	\$770.24	82%	18%	\$774.36	0.53%
OH	Geauga	95%	5%	\$739.44	84%	17%	\$745.98	0.88%
OH	Greene	80%	20%	\$790.72	77%	23%	\$791.81	0.14%
OH	Hamilton	74%	26%	\$799.80	76%	24%	\$799.12	-0.09%
OH	Lake	89%	11%	\$785.86	77%	23%	\$789.07	0.41%
OH	Lorain	93%	7%	\$811.76	79%	21%	\$808.29	-0.43%
OH	Lucas	89%	11%	\$788.19	82%	18%	\$788.68	0.06%
OH	Madison	81%	19%	\$788.78	78%	22%	\$790.08	0.16%
OH	Mahoning	77%	23%	\$772.55	72%	28%	\$775.08	0.33%
OH	Medina	90%	10%	\$760.57	72%	28%	\$768.39	1.03%



Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
OH	Montgomery	69%	31%	\$809.19	69%	31%	\$809.10	-0.01%
OH	Ottawa	94%	6%	\$840.91	77%	23%	\$836.51	-0.52%
OH	Pickaway	91%	9%	\$788.51	85%	15%	\$790.36	0.23%
OH	Portage	90%	10%	\$720.77	78%	22%	\$731.85	1.54%
OH	Stark	83%	17%	\$747.34	74%	26%	\$756.19	1.18%
OH	Summit	80%	20%	\$738.43	72%	28%	\$746.69	1.12%
OH	Trumbull	83%	17%	\$792.04	73%	27%	\$795.80	0.47%
OH	Union	89%	11%	\$791.49	76%	24%	\$794.26	0.35%
OH	Warren	82%	18%	\$808.50	70%	30%	\$809.31	0.10%
OH	Wayne	94%	6%	\$707.20	73%	27%	\$716.08	1.26%
OH	Wood	92%	8%	\$748.60	82%	18%	\$752.22	0.48%
RI	Bristol	100%	0%	\$750.71	97%	3%	\$753.06	0.31%
RI	Kent	100%	0%	\$797.23	96%	4%	\$799.25	0.25%
RI	Newport	100%	0%	\$804.79	99%	1%	\$804.98	0.02%
RI	Providence	100%	0%	\$759.79	96%	4%	\$762.98	0.42%
RI	Washington	100%	0%	\$773.47	97%	3%	\$775.81	0.30%
SC	Abbeville	100%	0%	\$844.87	70%	30%	\$834.68	-1.21%
SC	Aiken	100%	0%	\$745.11	100%	0%	\$752.88	1.04%
SC	Allendale	100%	0%	\$725.15	88%	12%	\$734.13	1.24%
SC	Anderson	100%	0%	\$807.87	86%	14%	\$813.41	0.69%
SC	Bamberg	100%	0%	\$781.71	82%	18%	\$786.00	0.55%
SC	Barnwell	100%	0%	\$783.76	87%	13%	\$790.48	0.86%
SC	Beaufort	100%	0%	\$820.77	94%	6%	\$826.03	0.64%
SC	Berkeley	100%	0%	\$786.51	91%	9%	\$796.03	1.21%
SC	Calhoun	100%	0%	\$801.36	100%	0%	\$809.71	1.04%
SC	Charleston	100%	0%	\$776.86	93%	7%	\$787.17	1.33%
SC	Cherokee	100%	0%	\$694.28	84%	16%	\$714.65	2.93%
SC	Chester	100%	0%	\$755.55	85%	15%	\$764.53	1.19%
SC	Chesterfield	100%	0%	\$710.75	93%	7%	\$720.61	1.39%
SC	Clarendon	100%	0%	\$738.63	92%	8%	\$747.54	1.21%
SC	Colleton	100%	0%	\$765.46	86%	14%	\$773.93	1.11%
SC	Darlington	100%	0%	\$779.94	100%	0%	\$788.07	1.04%
SC	Dillon	100%	0%	\$739.08	95%	5%	\$749.00	1.34%

Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
SC	Dorchester	100%	0%	\$796.75	92%	8%	\$803.62	0.86%
SC	Edgefield	100%	0%	\$765.00	100%	0%	\$772.96	1.04%
SC	Fairfield	100%	0%	\$735.42	83%	17%	\$750.94	2.11%
SC	Florence	100%	0%	\$759.40	96%	4%	\$767.25	1.03%
SC	Georgetown	100%	0%	\$799.63	94%	6%	\$804.06	0.55%
SC	Greenville	100%	0%	\$732.65	82%	18%	\$754.89	3.04%
SC	Greenwood	100%	0%	\$824.98	74%	26%	\$812.86	-1.47%
SC	Hampton	100%	0%	\$752.80	93%	7%	\$762.45	1.28%
SC	Horry	100%	0%	\$772.16	100%	0%	\$780.20	1.04%
SC	Jasper	100%	0%	\$823.23	91%	9%	\$829.20	0.73%
SC	Kershaw	100%	0%	\$763.85	85%	15%	\$775.60	1.54%
SC	Lancaster	100%	0%	\$792.54	100%	0%	\$800.79	1.04%
SC	Laurens	100%	0%	\$796.38	82%	18%	\$805.04	1.09%
SC	Lee	100%	0%	\$734.43	96%	4%	\$743.08	1.18%
SC	Lexington	100%	0%	\$765.92	84%	16%	\$782.89	2.22%
SC	Marion	100%	0%	\$732.92	98%	2%	\$741.10	1.12%
SC	Marlboro	100%	0%	\$703.65	95%	5%	\$714.71	1.57%
SC	McCormick	100%	0%	\$824.80	100%	0%	\$833.39	1.04%
SC	Newberry	100%	0%	\$781.38	82%	18%	\$785.01	0.46%
SC	Oconee	100%	0%	\$753.93	91%	9%	\$765.48	1.53%
SC	Orangeburg	100%	0%	\$742.57	92%	8%	\$752.75	1.37%
SC	Pickens	100%	0%	\$770.94	77%	23%	\$788.49	2.28%
SC	Richland	100%	0%	\$742.77	83%	17%	\$757.81	2.02%
SC	Saluda	100%	0%	\$784.73	82%	18%	\$797.87	1.67%
SC	Spartanburg	100%	0%	\$709.14	73%	27%	\$740.87	4.47%
SC	Sumter	100%	0%	\$727.08	100%	0%	\$734.65	1.04%
SC	Union	100%	0%	\$771.24	74%	26%	\$770.15	-0.14%
SC	Williamsburg	100%	0%	\$771.28	91%	9%	\$777.10	0.75%
SC	York	100%	0%	\$759.25	79%	21%	\$779.73	2.70%
TX	Bexar	75%	25%	\$785.03	72%	28%	\$786.11	0.14%
TX	Dallas	92%	8%	\$913.71	85%	15%	\$904.99	-0.95%
TX	El Paso	61%	39%	\$757.05	72%	28%	\$750.41	-0.88%
TX	Harris	59%	41%	\$918.14	62%	38%	\$918.47	0.04%

Demonstration	County	Current Approach			Proposed Approach (Illustrative Scenario)			% Change Medicare A/B Rate (Had Proposed Approach Been Implemented in CY 2018)
		FFS %	MA %	CY 2018 Medicare A/B Rate	FFS %	MA %	CY 2018 Medicare A/B Rate	
TX	Hidalgo	93%	7%	\$788.24	75%	25%	\$781.41	-0.87%
TX	Tarrant	75%	25%	\$859.22	79%	21%	\$857.47	-0.20%

**NOTE: CMS is not proposing to change Medicare A/B rates for CY 2018.** The above table illustrates how the CY 2018 rates would have changed, as compared to paid CY 2018 rates, had the proposed approach been implemented in CY 2018. Data above is based on MMP enrollment by county as of April 2018. Analysis excludes: individuals listed as residing in a county outside of the demonstration service area.

\*No current MMP enrollment. Rate and weighting is based on evaluation of demonstration eligible members only (consistent with approach for current CY 2018 Medicare A/B rates).