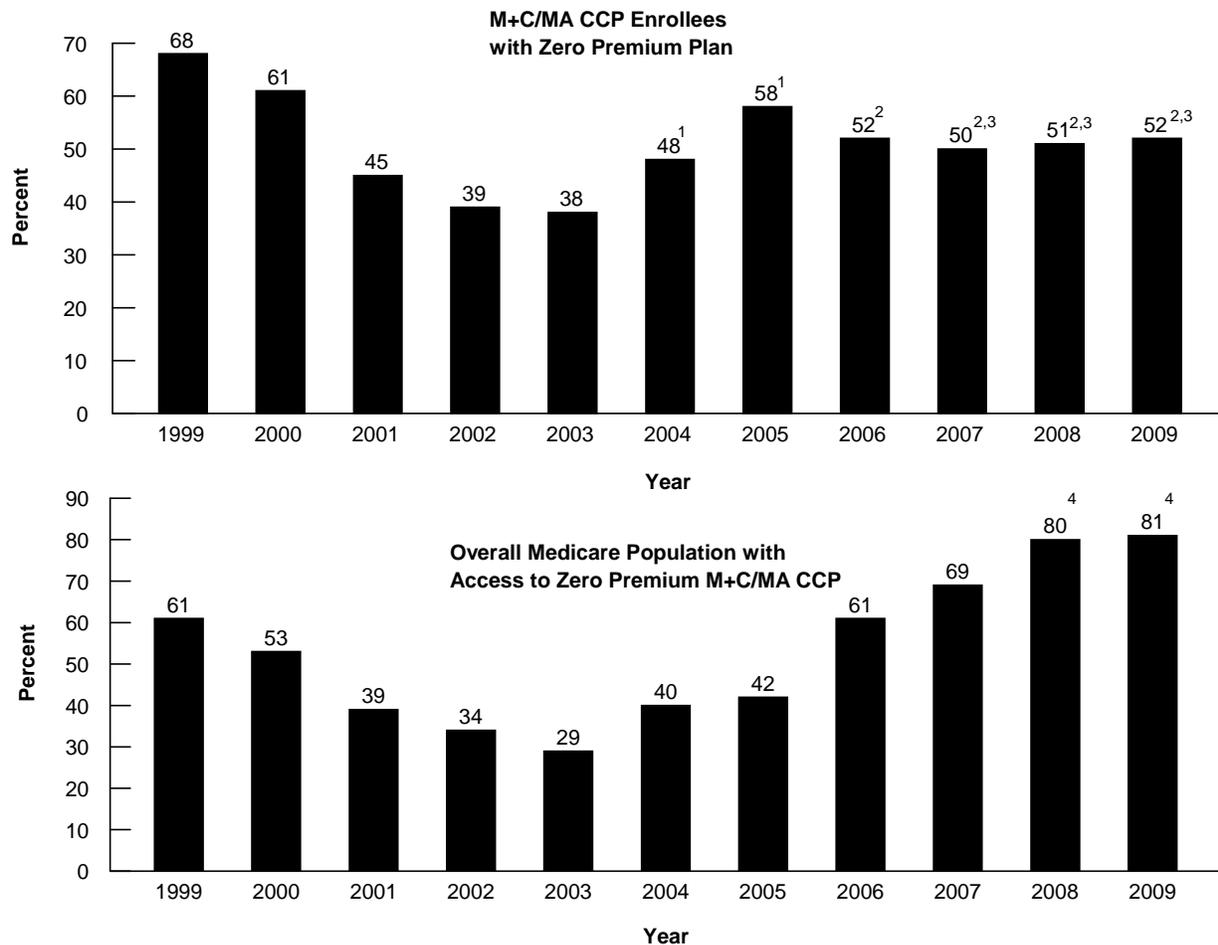


Figure 12.9
Changes in Access to or Coverage Under a Zero Premium Plan: Calendar Years 1999-2009



¹ Prior to 2004, enrollees in managed care plans were assigned to the zero premium category if a zero premium plan was offered in the county of residence, regardless of actual plan's premium. Beginning 2004, categorization is based on premium of plan in which the beneficiary is enrolled, thus depressing the trend based on the prior methodology.

² For 2006-2009, premium categorization combines the Part C and Part D premium. Analysis only covers selected CCP types. Enrollee coverage is percent of actual CCP enrollment with zero premium.

³ For 2007-2009 the Part B only plans were excluded from the computation of the Medicare population access (since no new Part B enrollees are allowed and consequently access to new enrollees is not provided). The effect of this exclusion was negligible since there are so few Part B only enrollees.

⁴ Eligibles consist of all December Part D eligibles (Part A or Part B eligibles) that reside in the 50 states, the District of Columbia, or the protectorates. Eligibles with miscoded counties were excluded.

NOTES: M+C is Medicare+Choice. MA is Medicare Advantage. CCP is coordinated care plan. The 2005 data are as of March 2005. The 2006-2009 data are as of December of that year.

SOURCES: Centers for Medicare & Medicaid Services, Center for Drug and Health Plan Choice: Analysis of submitted bids from the Health Plan Management System (HPMS); data development by the Office of Research, Development, and Information.