

Supplemental Online Content

Nguyen KH, Oh EG, Meyers DJ, et al. Medicare Advantage enrollment among beneficiaries with end-stage renal disease in the first year of the 21st Century Cures Act. *JAMA*. Published March 14, 2023. doi:10.1001/jama.2023.1426

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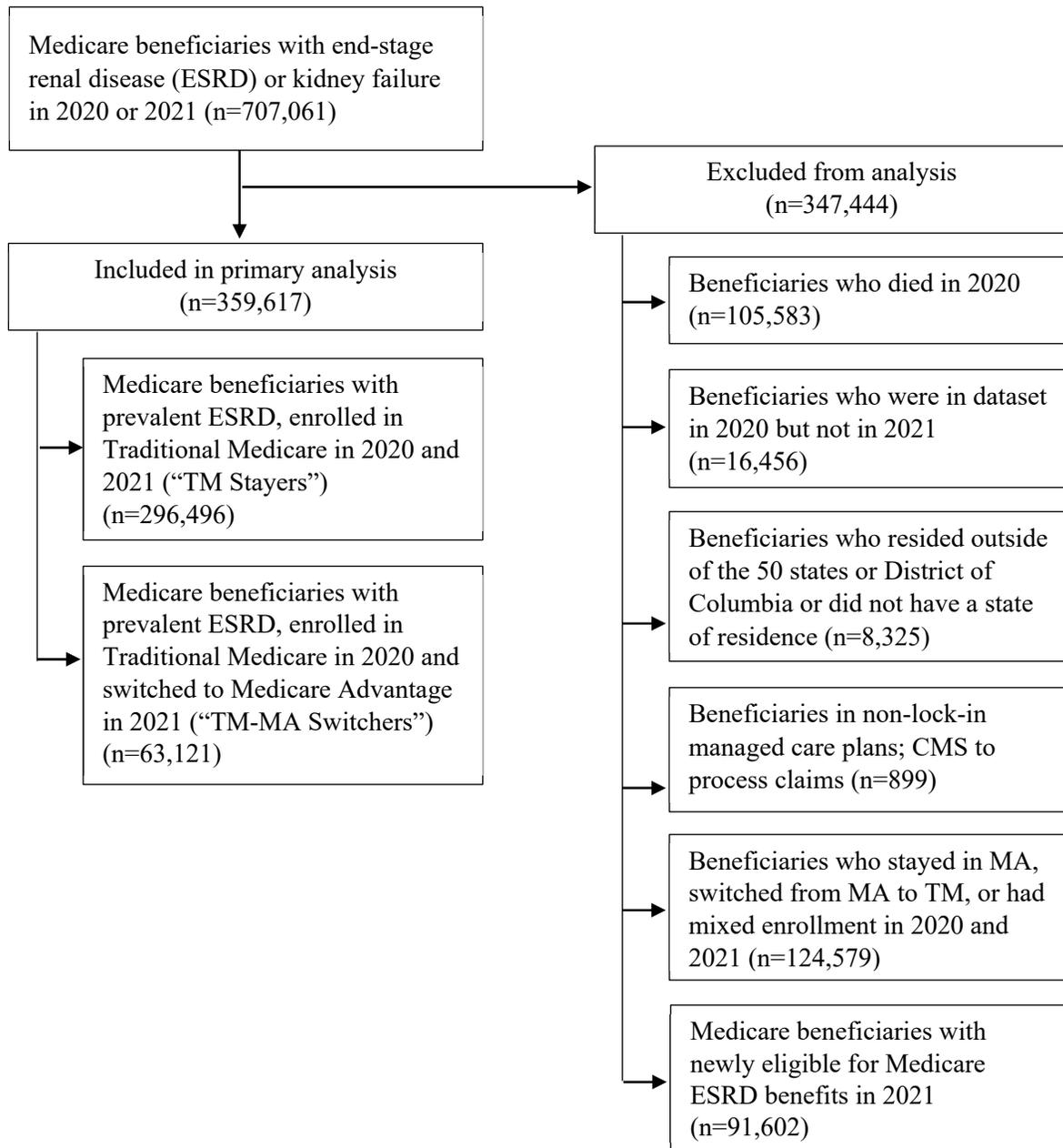
This supplemental material has been provided by the authors to give readers additional information about their work.

eTable 1. Data Sources and Measure Definitions

Data Source	Characteristics	Notes
Medicare Master Beneficiary Summary File (MBSF)	Months of Traditional Medicare Enrollment	
	Age	
	Sex	
	Race or Ethnicity	
	Reason for Current Medicare Entitlement	
	Dual Medicare-Medicaid Coverage	Defined as having dual Medicare-Medicaid coverage for at least one month in the year
	Part D Cost Sharing Coverage	
	County-Level Proportion of Female Beneficiaries	
	County-Level Proportion of White Beneficiaries	
	County-Level Proportion of Black Beneficiaries	
	County-Level Proportion of Hispanic Beneficiaries	
	County-Level Proportion of Dual Beneficiaries	
	County-Level MA Penetration Rate	Defined as county-level proportion of all Medicare beneficiaries enrolled in MA.
MBSF Chronic Conditions Segment	Number of Chronic Conditions (Ever)	Chronic conditions (ever) include diagnosis of any of the following: acute myocardial infarction (AMI); arthritis; brain damage; breast cancer, prostate cancer or other cancers; heart failure; chronic kidney disease; chronic obstructive pulmonary disease (COPD); cirrhosis; cystic fibrosis; depression or bipolar disorder; diabetes; drug or alcohol dependence; HIV/AIDS; hip fracture; ischemic heart disease; leukemia; multiple sclerosis; muscular dystrophy; obesity; pressure ulcers; spinal cord injury; and vascular disease. Chronic conditions (2020) includes the previous list and adds Parkinson’s disease, urologic cancer, and pneumonia.
	Number of Chronic Conditions (2020)	
MBSF Cost and Utilization Segment	Prescription Drugs (Part B and Part D)	All costs reflect payments made in 2020 (paid by Medicare, the beneficiary, and other primary payers). Outpatient costs and utilization includes ambulatory surgical centers, dialysis, evaluation and management, hospital outpatient, other carrier, and MD office visits.
	Outpatient Costs	
	Dialysis Costs	
	Inpatient Hospitalizations	
	Post-Acute Care	
	Hospital Stays	
CMS Dialysis Facility Compare	County-Level Number of Dialysis Facilities	
CMS Medicare Advantage (MA) service area file	Plan Type	
	Multi-state	
	Parent Organization	

Plan premium information file	Enrollment in MA Contracts with >0% Special Needs Plan	
MA star ratings data table	Medicare Advantage Star Rating	
MA plan directory	For Profit	
	Contract Age	
System affiliation file	Integrated system	
Ideon	Dialysis Facility Network Breadth in 2020	Defined as the proportion of dialysis facilities located in each MA contract's service area that were included in that contract's network
	Non-Narrow Dialysis Facility Networks in 2020	Narrow networks are defined as those that included less than or equal to 25% of available dialysis facilities in a given contract's service area.

eFigure 1. Study Flow Chart: Medicare Beneficiaries with Prevalent Kidney Failure in 2020



Notes. All patients in the study sample have kidney failure per the Centers for Medicare and Medicaid Services' (CMS) criteria, which can include long-term dialysis or kidney transplant recipients. Study flow chart focuses on the main analytic sample, Medicare beneficiaries with prevalent ESRD who were either TM stayers or TM-MA switchers (n= 359,616 individuals). Per guidance from the Research Data Assistance Center, beneficiaries with HMO_Indicator values '1' (Non lock-in, CMS to process provider claims) were excluded from the analysis due to concerns that not all claims may be observed for these beneficiaries.

eTable 2. Relative Changes in Medicare Advantage Enrollment, Overall and by Race/Ethnicity and Dual Medicare-Medicaid Enrollment, Between December 2020 and December 2021

	Proportion Enrolled in MA in December 2020, %	Proportion Enrolled in MA in December 2021, %	Absolute Change (Percentage Points)	Relative Change (%)
Overall, %	24.8	37.4	12.6	50.8%
Race or Ethnicity, %				
Non-Hispanic White	23.6	32.0	8.4	35.5%
Black	24.8	42.9	18.1	72.8%
Hispanic	28.9	41.8	13.0	44.8%
Asian or Pacific Islander	26.4	35.3	8.8	33.4%
American Indian or Alaska Native	8.2	18.9	10.7	130.8%
Other or Unknown	18.9	27.0	8.1	42.9%
Dual, %	23.9	41.5	17.6	73.6%
Non-Dual, %	25.5	33.9	8.4	32.9%

Notes. Analyses use data from Medicare Master Beneficiary Summary File (MBSF), 2020 and 2021. Race or ethnicity are from the Medicare Beneficiary Summary (MBSF) which relies on an algorithm developed by the Research Triangle Institute (RTI) to classify beneficiaries as Hispanic or Asian/Pacific Islander based on data from the Social Security Administration or if they have a first or last name that RTI determined was likely Hispanic or Asian in origin. Dual-eligibility was defined as having dual Medicare-Medicaid coverage for at least one month in the year. The numerator is the monthly number of all Medicare beneficiaries with end-stage renal disease (ESRD) enrolled in a Medicare Advantage (MA) plan. The denominator is monthly number of all Medicare beneficiaries with ESRD. For estimates stratified by race/ethnicity, the numerator is the race/ethnicity-specific monthly number of all Medicare beneficiaries with ESRD enrolled in an MA plan and denominator is monthly number of all Medicare beneficiaries with ESRD from each racial/ethnic group. For estimates stratified by dual Medicare-Medicaid coverage, the numerator is the monthly number of all Medicare beneficiaries with ESRD enrolled in an MA plan who had dual Medicare-Medicaid coverage for at least one month in a calendar year and the denominator is monthly number of all Medicare beneficiaries with ESRD with dual Medicare-Medicaid coverage for at least one month in a calendar year.

eTable 3. Medicare Beneficiaries with ESRD Overall and by Race, Ethnicity, and Dual Eligibility, 2019-2021

Month	Overall	American Indian/ Alaska Native	Asian or Pacific Islander	Black	Hispanic	White	Non-Dual	Dual
Jan-19	390,734	5,051	20,621	141,017	69,496	144,162	212,097	178,637
Feb-19	392,861	5,078	20,738	141,748	69,943	144,854	213,144	179,717
Mar-19	395,148	5,102	20,857	142,509	70,410	145,640	214,273	180,875
Apr-19	397,561	5,133	20,979	143,308	70,948	146,446	215,463	182,098
May-19	399,753	5,155	21,108	144,068	71,373	147,181	216,561	183,192
Jun-19	402,152	5,176	21,209	144,910	71,903	147,958	217,820	184,332
Jul-19	404,409	5,202	21,331	145,651	72,364	148,699	219,075	185,334
Aug-19	406,595	5,229	21,443	146,382	72,805	149,445	220,213	186,382
Sep-19	408,732	5,252	21,522	147,084	73,286	150,148	221,411	187,321
Oct-19	410,758	5,259	21,608	147,730	73,741	150,843	222,585	188,173
Nov-19	412,844	5,270	21,697	148,400	74,169	151,578	223,818	189,026
Dec-19	414,725	5,285	21,781	149,027	74,544	152,240	224,997	189,728
Jan-20	472,234	5,903	24,460	164,606	81,904	182,524	258,464	213,770
Feb-20	474,575	5,921	24,577	165,383	82,387	183,322	259,627	214,948
Mar-20	477,062	5,949	24,710	166,187	82,926	184,152	260,924	216,138
Apr-20	479,454	5,972	24,821	167,002	83,482	184,903	262,059	217,395
May-20	481,729	5,997	24,941	167,758	83,957	185,683	263,186	218,543
Jun-20	484,082	6,021	25,047	168,551	84,422	186,524	264,400	219,682
Jul-20	486,119	6,036	25,130	169,265	84,800	187,231	265,467	220,652
Aug-20	488,283	6,053	25,227	170,015	85,275	187,926	266,585	221,698
Sep-20	490,664	6,066	25,336	170,816	85,734	188,767	267,916	222,748
Oct-20	492,770	6,076	25,439	171,550	86,187	189,446	269,056	223,714
Nov-20	494,680	6,100	25,535	172,129	86,578	190,135	270,158	224,522
Dec-20	496,551	6,117	25,598	172,766	86,974	190,760	271,246	225,305
Jan-21	556,266	6,701	28,093	187,715	94,601	223,444	302,679	253,587
Feb-21	546,456	6,530	27,627	185,112	92,834	218,731	297,258	249,198
Mar-21	539,525	6,412	27,326	183,288	91,761	215,106	293,327	246,198
Apr-21	533,265	6,327	27,076	181,592	90,910	211,746	289,681	243,584
May-21	527,326	6,251	26,885	179,911	90,190	208,501	286,293	241,033
Jun-21	521,536	6,175	26,597	178,420	89,521	205,241	282,975	238,561
Jul-21	515,964	6,104	26,392	176,971	88,873	202,073	279,728	236,236
Aug-21	509,684	6,017	26,135	175,162	88,095	198,740	276,187	233,497
Sep-21	502,248	5,925	25,807	172,974	87,072	195,002	272,157	230,091
Oct-21	494,500	5,810	25,495	170,738	86,074	191,015	267,961	226,539
Nov-21	486,868	5,703	25,167	168,711	85,119	186,920	263,779	223,089
Dec-21	479,131	5,607	24,871	166,664	84,033	182,839	259,554	219,577

eTable 4. Annual Changes in Medicare Advantage Enrollment, 2019-2021

	Change in MA Enrollment from December 2019 to December 2020 (95% CI)	Change in MA Enrollment from December 2020 to December 2021 (95% CI)	Difference in enrollment growth in 2021 compared to 2020
Overall	2.8 (2.7, 3.0)***	12.6 (12.4, 12.9)***	9.8
Stratified by Race or Ethnicity			
American Indian or Alaska Native	1.6 (0.6, 2.5)**	10.7 (9.5, 12.0)***	9.1
Asian or Pacific Islander	2.8 (2.0, 3.6)***	8.8 (8.0, 9.6)***	6.0
Black or African American	3.1 (2.8, 3.4)***	18.1 (17.8, 18.4)***	15.0
Hispanic	2.9 (2.4, 3.3)***	13.0 (12.5, 13.4)***	10.1
White	2.8 (2.6, 3.1)***	8.4 (8.1, 8.7)***	5.6
Non-Dual	2.3 (2.1, 2.6)***	8.4 (8.2, 8.6)***	6.1
Dual	3.5 (3.2, 3.7)***	17.6 (17.3, 17.8)***	14.1

Notes. *p<0.05, **p<0.01, ***p<0.001. Changes measured in percentage point terms. Difference in enrollment growth in 2021 compared to 2020 subtracts “Change in MA enrolment from December 2019 to December 2020” from “Change in MA enrollment from December 2020 to December 2021”

eTable 5. Within-Year Changes in Medicare Advantage Enrollment, 2019-2021

	Change in MA Enrollment from January 2019 to December 2019 (95% CI)	Change in MA Enrollment from January 2020 to December 2020 (95% CI)	Change in MA Enrollment from January 2021 to December 2021 (95% CI)
Overall	-0.6 (-0.8, -0.4)***	-0.3 (-0.5, -0.1)***	3.3 (3.1, 3.5)***
Stratified by Race or Ethnicity			
American Indian or Alaska Native	-0.1 (-1.1, 0.8)	0.2 (-0.8, 1.2)	4.5 (3.2, 5.8)***
Asian or Pacific Islander	-0.2 (-1.0, 0.6)	0.1 (-0.6, 0.9)	2.3 (1.5, 3.1)***
Black or African American	-0.5 (-0.8, -0.2)***	-0.2 (-0.5, 0.1)	5.1 (4.7, 5.4)***
Hispanic	-0.3 (-0.8, 0.1)	-0.3 (-0.8, 0.1)	3.4 (2.9, 3.8)***
White	-0.7 (-1.0, -0.4)***	-0.5 (-0.7, -0.2)**	1.5 (1.2, 1.8)***
Non-Dual	-0.9 (-1.1, -0.6)***	-0.7 (-1.0, -0.5)***	0.6 (0.4, 0.9)***
Dual	-0.2 (-0.4, 0.1)	0.2 (-0.0, 0.4)	6.4 (6.1, 6.6)***

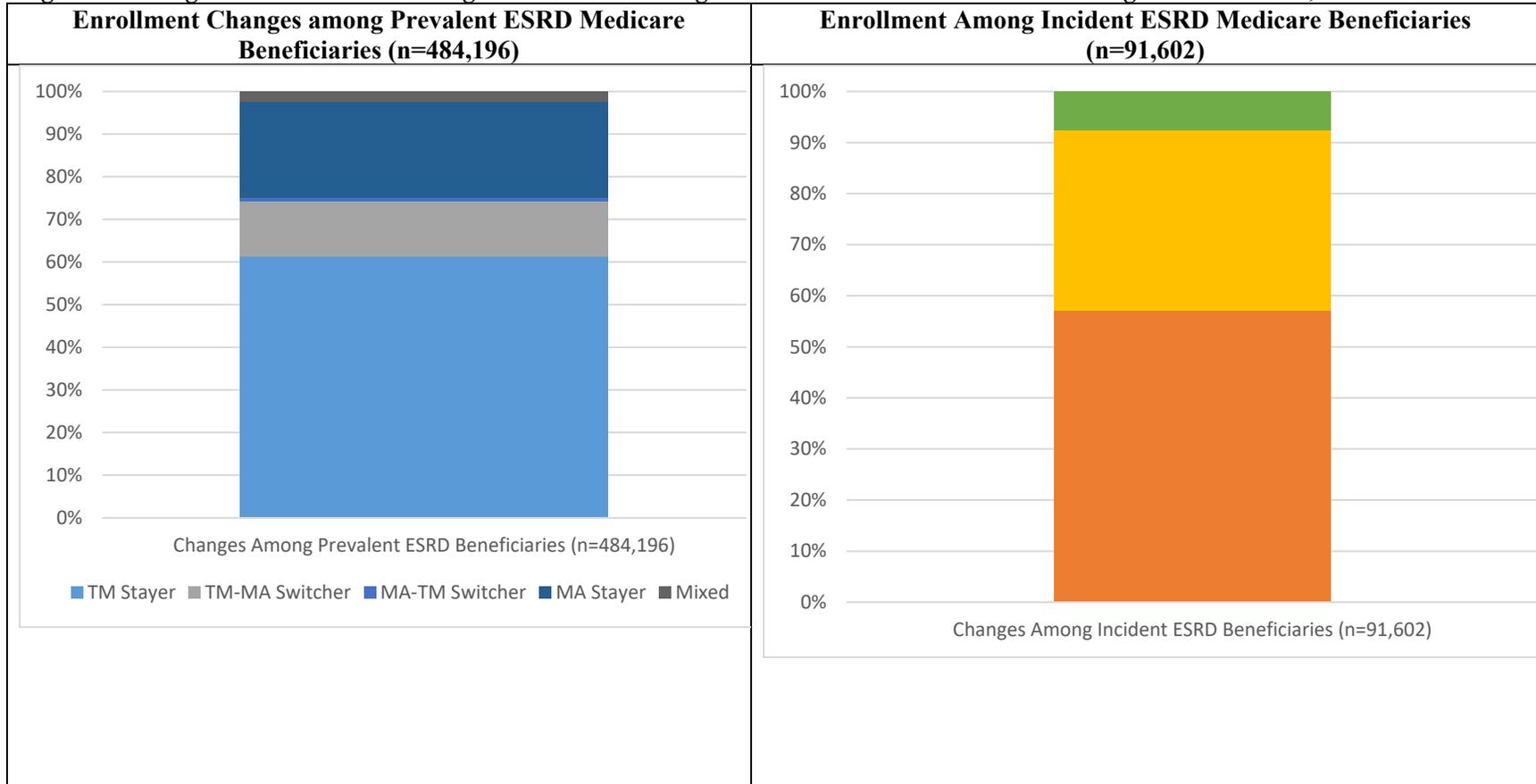
Notes. *p<0.05, **p<0.01, ***p<0.001. Changes measured in percentage point terms.

eTable 6. Changes in Composition of Medicare Beneficiaries with End-Stage Renal Disease Between 2020 and 2021

	2020 (n=604,757)	2021 (n=575,804)	Unadjusted Difference (95% CI)
Age, Mean (SD)	64.38 (14.32)	64.72 (14.18)	0.34 (0.29, 0.40)***
Sex, %			
Male	57.9	57.8	-0.08 (-0.3, 0.1)
Female	42.1	42.2	0.08 (-0.1, 0.3)
Race or Ethnicity%			
Non-Hispanic White	47.3	46.9	-0.38 (-0.56, -0.20)***
Black	34.0	34.0	-0.01 (-0.18, 0.16)
Hispanic	7.9	7.7	-0.19 (-2.84, -0.09)***
Asian or Pacific Islander	4.2	4.1	-0.02 (-0.09, 0.05)
American Indian or Alaska Native	1.3	1.2	-0.08 (-0.12, -0.04)***
Other Race	3.0	3.5	0.48 (0.42, 0.55)****
Unknown Race	2.3	2.5	0.19 (0.14, 0.25)****
Reason for Current Medicare Entitlement, %			
Old Age and Survivors Insurance	54.5	55.7	1.19 (1.01, 1.37)***
Disability Insurance Benefits	25.1	25.7	0.59 (0.43, 0.75)***
End-Stage Renal Disease (ESRD)	16.8	15.5	-1.25 (-1.39, -1.12)***
Both Disability Insurance Benefits and ESRD	3.7	3.1	-0.53 (-0.59, -0.46)***
Dual Medicare-Medicaid Coverage, %			
Never Dual	54.6	54.3	-0.25 (-0.43, -0.07)*
Dual 1-11 Months	13.4	11.4	-1.93 (-2.03, -1.81)***
Dual 12 Months	32.1	34.2	2.18 (2.01, 2.35)***
Part D Coverage			
No Part D Coverage	19.5	17.4	-2.13 (-2.27, -1.99)***
Part D Coverage 1-11 Months	18.5	19.5	0.98 (0.84, 1.12)***
Part D Coverage 12 Months	62.0	63.1	1.15 (0.97, 1.32)***
Medicare Coverage Type			
Traditional Medicare all year	74.0	61.2	-12.80 (-12.97, -12.63)***
Medicare Advantage all year	19.4	25.9	6.56 (6.41, 6.71)***
Mixed coverage	6.6	12.8	6.24 (6.13, 6.34)***

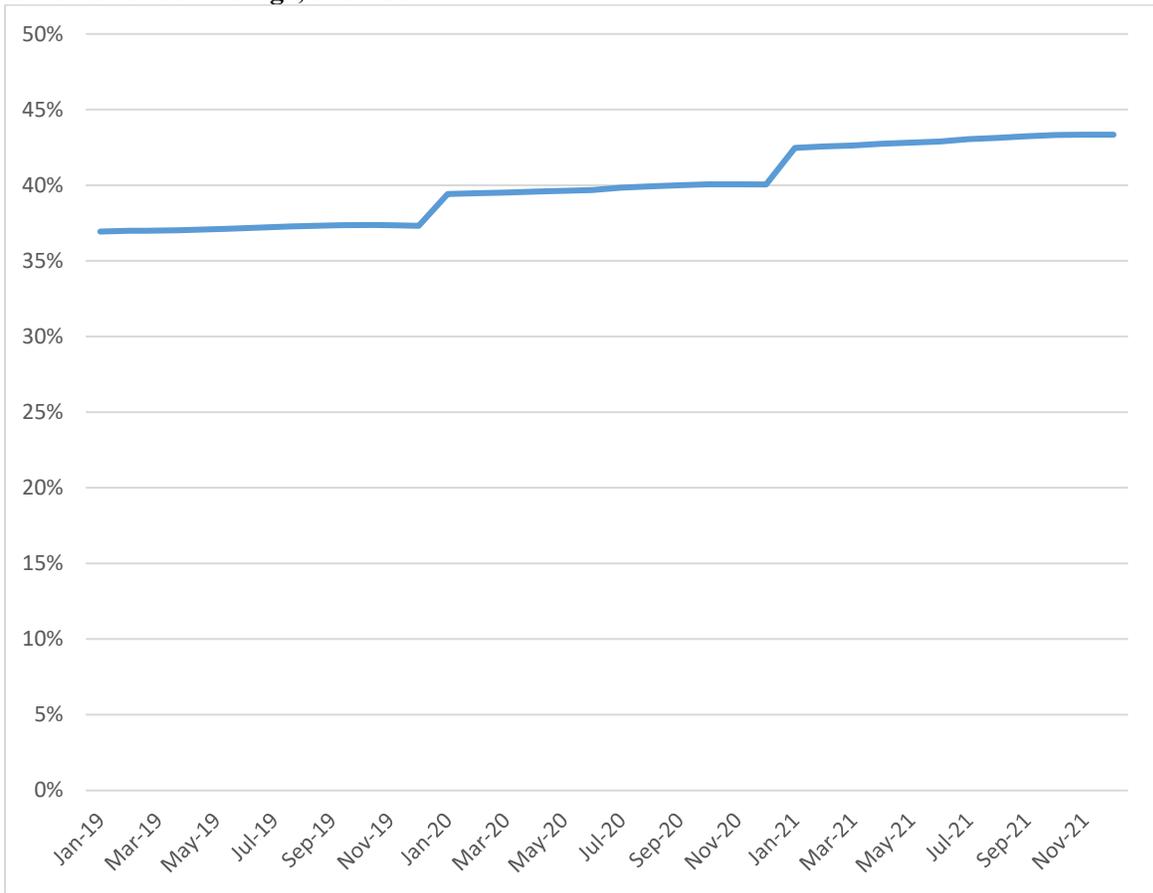
Notes. *p<0.05, **p<0.01, ***p<0.001. Samples include individuals who died in 2020 or 2021. Analyses use data from Medicare Master Beneficiary Summary File (MBSF), 2020 and 2021. Race or ethnicity are from the Medicare Beneficiary Summary (MBSF) which relies on an algorithm developed by the Research Triangle Institute (RTI) to classify beneficiaries as Hispanic or Asian/Pacific Islander based on data from the Social Security Administration or if they have a first or last name that RTI determined was likely Hispanic or Asian in origin.

eFigure 2. Changes in Medicare Advantage Enrollment Among Medicare Beneficiaries with End-Stage Renal Disease, 2020-21



Notes. Analyses use data from Medicare Master Beneficiary Summary File (MBSF), 2020 and 2021. TM stayer refers to being only enrolled in TM in 2020 and 2021. TM-MA switching refers to being enrolled only in TM in 2020 and in MA in 2021. MA-TM switching refers to being enrolled in MA for at least one month in 2020 and only in TM in 2021. MA stayer refers to being only enrolled in MA in 2020 and 2021. Mixed refers to having both TM and MA in 2020 and 2021. Among beneficiaries with incident ESRD in 2021, Incident TM refers to only having TM in 2021, Incident MA refers to only having MA in 2021, and Incident Mixed refers to having both TM and MA in 2021.

eFigure 3. Proportion of Medicare Beneficiaries without End Stage Renal Disease (ESRD) Enrolled in Medicare Advantage, 2019-21



Notes. Analyses use data from Medicare Master Beneficiary Summary File (MBSF). The numerator is the monthly number of all Medicare beneficiaries without end-stage renal disease (ESRD) enrolled in a Medicare Advantage (MA) plan. The denominator is monthly number of all Medicare beneficiaries without ESRD.

eTable 7. Relative Changes in Medicare Advantage Enrollment Among Medicare Beneficiaries With No Diagnosis of End-Stage Renal Disease

	Proportion Enrolled in MA in December 2020, %	Proportion Enrolled in MA in December 2021, %	Absolute Change (Percentage Points)	Relative Change (%)
Overall, %	40.1	43.3	3.3	8.2%

Notes. Analyses use data from Medicare Master Beneficiary Summary File (MBSF). The numerator is the monthly number of all Medicare beneficiaries without end-stage renal disease (ESRD) enrolled in a Medicare Advantage (MA) plan. The denominator is monthly number of all Medicare beneficiaries without ESRD.

eTable 8. Utilization and Costs of Medicare Beneficiaries with Prevalent End-Stage Renal Disease (ESRD) Based on Changes in Enrollment, 2020

	TM Stayer (n=296,496)	TM-MA Switcher (n=63,121)	P-value
Annual Events in 2020 (n), Mean(SD)			
Ambulatory surgical center	0.3 (1.1)	0.4 (1.2)	<0.001
Dialysis	11.7 (9.1)	12.5 (8.0)	<0.001
Evaluation and management	28.1 (53.2)	27.0 (47.4)	<0.001
Other Part B carrier	13.5 (67.9)	12.7 (64.3)	0.008
MD office (E&M) Part B	9.2 (8.7)	8.4 (8.0)	<0.001
Acute inpatient stays	1.1 (1.8)	1.3 (2.0)	<0.001
Hospital outpatient stays	1.3 (2.7)	1.7 (4.0)	<0.001
Part B Drug	6.1 (14.2)	4.5 (11.2)	<0.001
Part D Drug	51.6 (42.8)	48.6 (40.2)	<0.001
Skilled nursing facility stays per 100 beneficiaries	17.9 (62.9)	13.4 (52.7)	<0.001
30-day hospital readmissions	0.3 (1.1)	0.4 (1.2)	<0.001
Home health visits	7.8 (24.3)	7.8 (24.1)	0.45
Payments in 2020 (\$), Mean(SD)			
<i>Acute Inpatient Care</i>			
Medicare	19,829 (37,471)	20,355 (35,974)	0.001
Beneficiary	1,037 (2,193)	1,113 (2,213)	<0.001
Other Primary Payer	1,150 (13,877)	612 (9,390)	<0.001
<i>Ambulatory Surgery Center</i>			
Medicare	452 (1,885)	595 (2,235)	<0.001
Beneficiary	115 (479)	152 (569)	<0.001
Other Primary Payer	6 (193)	5 (157)	0.083
<i>Dialysis</i>			
Medicare	2,064 (1,094)	2,234 (933)	<0.001
Beneficiary	550 (291)	596 (251)	<0.001
Other Primary Payer	22 (252)	13 (163)	<0.001
<i>Evaluation and Management (E&M)</i>			
Medicare	2,402 (4,469)	2,316 (3,982)	<0.001
Beneficiary	596 (1,099)	575 (980)	<0.001
Other Primary Payer	23 (397)	14 (212)	<0.001
<i>Home Health</i>			
Medicare	1,665 (4,177)	1,674 (4,075)	0.611
Other Primary Payer	2 (67)	1 (55)	0.066
<i>Hospital Outpatient</i>			
Medicare	32,226 (20,821)	34,039 (18,090)	<0.001

Beneficiary	7,945 (4,598)	8,410 (3,945)	<0.001
Other Primary Payer	343 (3,657)	208 (3,767)	<0.001
<i>Other Inpatient</i>			
Medicare	1,945 (10,865)	1,827 (9,619)	0.012
Beneficiary	91 (1,362)	75 (1,127)	0.006
Other Primary Payer	49 (2,927)	22 (1,587)	0.024
<i>Other Part B Carrier</i>			
Medicare	1,445 (6,716)	1,367 (6,274)	0.008
Beneficiary	366 (1,701)	347 (1,590)	0.012
Other Primary Payer	6 (345)	4 (179)	0.377
<i>MD Office (E&M) Part B</i>			
Medicare	650 (654)	581 (574)	<0.001
Beneficiary	203 (190)	180 (169)	<0.001
Other Primary Payer	19 (158)	9 (102)	<0.001
<i>Part B Drug</i>			
Medicare	1,197 (9,706)	808 (7,756)	<0.001
Beneficiary	306 (2,446)	205 (1,929)	<0.001
Other Primary Payer	23 (970)	6 (224)	<0.001
<i>Part D</i>			
Medicare	8,788 (20,031)	9,742 (18,714)	<0.001
Beneficiary	571 (1,790)	263 (879)	<0.001
<i>Part D Total (Gross) Prescription Costs</i>	9,660 (20,570)	10,095 (18,838)	<0.001
<i>Skilled Nursing Facility</i>			
Medicare	2,677 (10,345)	1,850 (7,962)	<0.001
Beneficiary	542 (2,440)	370 (1,957)	<0.001
Other Primary Payer	5 (285)	4 (284)	0.471

Notes. TM = Traditional Medicare; MA = Medicare Advantage; E&M = Evaluation and Management. Sample is limited to individuals who had only Traditional Medicare in 2020. TM Stayer indicates a beneficiary was enrolled only in TM in 2020 and 2021. TM-MA switcher indicates a beneficiary was enrolled only in TM in 2020 and only in MA in 2021. Analyses use data from Medicare Master Beneficiary Summary File (MBSF) and Costs and Use segment. “Other Primary Payer” could include Veterans Affairs or TRICARE paid for services on behalf of the beneficiary. “Evaluation and Management” can include hospital, emergency room, home or nursing home visit, specialist, or consultation visits. Statistical differences across two groups using t-tests. Estimates are standardized and weighted by months enrolled in Medicare Part A (inpatient care, skilled nursing facilities, and home health), Medicare Part B (ambulatory surgical center, dialysis, E&M, hospital outpatient, other Part B carrier, MD office, and Part B drugs), and Part D (Part D prescription drug costs)

eTable 9. Alternative Specification of Traditional Medicare to Medicare Advantage Switching

	TM Stayer (n=296,525)	TM-MA Switcher (n=63,159)
Beneficiary Characteristics		
Age, Mean (SD)	62.1 (14.9)	58.6 (12.4)
Sex, %		
Male	59.2	57.5
Female	40.8	42.5
Race or Ethnicity%		
White	47.9	31.0
Black	31.8	51.0
Hispanic	8.1	9.2
Asian or Pacific Islander	4.5	3.1
American Indian or Alaska Native	1.7	1.0
Other or Unknown	6.1	4.7
Reason for Current Medicare Entitlement, %		
Old Age and Survivors Insurance	47.9	32.3
Disability Insurance Benefits	25.8	38.6
End-Stage Renal Disease (ESRD)	22.6	23.3
Both Disability Insurance Benefits and ESRD	3.6	5.9
≥1 Month Dual Medicare-Medicaid Coverage, %	42.2	63.0
≥1 Month Part D Coverage, %	71.4	83.9
≥1 Month Eligible for Part D Low-Income Subsidy, %	46.0	69.5
County-Level Characteristics		
MA Penetration Rate in 2021 (%), Mean(SD)	43.6 (13.5)	46.4 (11.5)
Number of Dialysis Facilities in 2020, Median(IQR)	11 (3-30)	11 (3-31)
Number of DaVita-Owned Facilities in 2020, Median(IQR)	4 (1-12)	4 (1-12)
Number of Fresenius-Owned Facilities in 2020, Median(IQR)	3 (1-8)	4 (1-9)
Proportion of Female Beneficiaries (%), Mean(SD)	54.5 (1.5)	54.7 (1.5)
Proportion of White Beneficiaries (%), Mean(SD)	68.0 (20.7)	64.7 (20.5)
Proportion of Black Beneficiaries (%), Mean(SD)	14.4 (15.2)	18.4 (16.4)
Proportion of Hispanic Beneficiaries (%), Mean(SD)	10.0 (15.2)	10.4 (15.6)
Proportion of Dual Beneficiaries (%), Mean (SD)	20.9 (8.7)	21.9 (8.9)

Notes. TM = Traditional Medicare; MA = Medicare Advantage; HMO = Health Maintenance Organization; POS = Point of Service; PPO = Preferred Provider Organization; MSA = Medical Savings Account; PACE = Program of All-inclusive Care for the Elderly; PFFS = Private Fee-for-Service. TM Stayer indicates a beneficiary was enrolled only in TM in 2020 and 2021. TM-MA switcher indicates a beneficiary was enrolled only in TM in 2020 and only in MA in 2021 or who switched from MA to TM in 2020 and were continuously enrolled in 2021. $p < 0.001$ for all comparisons using Pearson's chi-square tests (categorical variables) or t-tests (continuous variables). Analyses use data from Medicare Master Beneficiary Summary File (MBSF). MA penetration rate is defined as the county-level proportion of all Medicare beneficiaries enrolled in MA. Dual-eligibility was defined as having dual Medicare-Medicaid coverage for at least one month in the year. Dialysis facility network breadth is defined as the proportion of dialysis facilities located in each MA contract's service area that were included in that contract's

network. Narrow networks are defined as those that included less than or equal to 25% of available dialysis facilities in a given contract's service area.

eTable 10. Enrollment in Medicare Parts B and D

	TM Stayer (n=296,496)	TM-MA Switcher (n=63,121)
Part B Enrollment in 2020	281,793(95.0%)	62,147 (98.5%)
Part D Enrollment in 2020	211,609 (70.9%)	52,964 (83.9%)

Notes. TM = Traditional Medicare; MA = Medicare Advantage. TM Stayer indicates a beneficiary was enrolled only in TM in 2020 and 2021. TM-MA switcher indicates a beneficiary was enrolled in TM in 2020 and only MA in 2021 or who switched from MA to TM in 2020 and were continuously enrolled in 2021. Part B or Part D enrollment refers to at least one month of enrollment in 2020.