

Appendix Table 1a: Unadjusted expenditures by Year and Switching Status

Non-institutionalized Duals

	Stay in TM in next Year			Switch to HMO in Next Year		
	N	Mean	SD	N	Mean	SD
2001	380,492	7,277	14,437	2,732	6,925	14,772
2002	395,135	8,376	16,866	3,023	7,881	15,810
2003	412,942	8,969	17,326	5,216	7,653	16,084
2004	404,749	9,214	17,675	12,546	8,225	16,357
2005	389,618	9,574	18,379	39,323	7,973	15,659
2006	375,952	9,756	18,745	28,342	8,885	16,522
2007	367,100	9,953	19,349	23,563	8,722	16,203
2008	408,096	10,357	19,788	20,555	8,865	17,365
2009	419,309	10,803	20,709	18,297	9,527	17,780
2010	427,833	10,665	20,520	18,567	9,052	17,715

\*2007\$ The following types of beneficiaries were excluded from the sample: Beneficiaries whose original eligibility was attributable to disability, ESRD, or Alzheimer's; newly eligible beneficiaries (since no prior claims information was available); beneficiaries who did not have 12 months of continuous enrollment in TM, both Parts A and B, in the prior year; the institutionalized; and dual eligibles. In addition, beneficiaries who switched into cost MA plans or special needs plans were excluded.

Appendix Table 1b: Unadjusted Risk Scores\* by Year and Switching Status

Non-institutionalized Duals

	Stay in TM in next Year			Switch to HMO in Next Year		
	N	Mean	SD	N	Mean	SD
2001	380,492	1.2801	0.9305	2,732	1.184	0.848
2002	395,135	1.3362	0.9960	3,023	1.211	0.897
2003	412,942	1.3731	1.0317	5,216	1.191	0.926
2004	404,749	1.3772	1.0385	12,546	1.253	0.931
2005	389,618	1.3979	1.0533	39,323	1.277	0.938
2006	375,952	1.4243	1.0818	28,342	1.342	0.989
2007	367,100	1.4336	1.0814	23,563	1.322	0.981
2008	408,096	1.4099	1.0215	20,555	1.284	0.922
2009	419,309	1.4403	1.0304	18,297	1.299	0.943
2010	427,833	1.3692	0.9835	18,567	1.228	0.888

\* Risk scores are computed using the 2007 CMS-HCC model.

Appendix Table 2a: Unadjusted expenditures\* by Year and Switching Status

Institutionalized

	Stay in TM in next Year			Switch to HMO in Next Year		
	N	Mean	SD	N	Mean	SD
2001	421,423	21,860	30,161	2,748	23,305	28,939
2002	423,218	17,899	27,276	2,469	20,997	28,985
2003	345,235	19,144	28,250	2,384	20,662	30,462
2004	356,336	19,949	29,052	3,819	21,077	30,964
2005	351,318	20,738	29,846	9,952	18,285	27,269
2006	345,477	20,996	30,421	8,070	20,755	30,130
2007	340,690	21,491	30,918	8,636	20,910	29,790
2008	334,485	22,264	31,560	6,161	20,742	28,957
2009	336,523	23,393	33,289	6,192	23,283	32,872
2010	341,551	23,560	33,600	5,151	23,015	32,490

\*2007\$. The following types of beneficiaries were excluded from the sample: Beneficiaries whose original eligibility was attributable to disability, ESRD, or Alzheimer's; newly eligible beneficiaries (since no prior claims information was available); beneficiaries who did not have 12 months of continuous enrollment in TM, both Parts A and B, in the prior year. In addition, beneficiaries who switched into cost MA plans or special needs plans were excluded.

Appendix Table 2b: Institutionalized: Unadjusted Risk Scores by Year and Switching Status

Institutionalized

	Stay in TM in next Year			Switch to HMO in Next Year		
	N	Mean	SD	N	Mean	SD
2001	421,423	1.797	1.050	2,748	1.815	1.018
2002	423,218	1.720	0.999	2,469	1.780	0.991
2003	345,235	1.751	1.031	2,384	1.731	0.975
2004	356,336	1.753	1.036	3,819	1.747	0.989
2005	351,318	1.774	1.057	9,952	1.717	0.977
2006	345,477	1.793	1.068	8,070	1.800	1.047
2007	340,690	1.801	1.072	8,636	1.786	1.026
2008	334,485	1.751	0.987	6,161	1.717	0.921
2009	336,523	1.767	0.984	6,192	1.768	0.951
2010	341,551	1.687	0.946	5,151	1.702	0.922

Risk scores are computed using the 2007 CMS-HCC model.

Appendix Table 3a: Unadjusted expenditures by Year and Switching Status, Non-Institutionalized, Non-Duals\*

	Stay in TM in next Year			Switch to MA-HMO's in Next Year		
	N	Mean \$	SD	N	Mean \$	SD
2001	3,731,431	5,325	11,144	23,966	3,714	8,691
2002	3,851,378	6,001	13,034	24,988	4,033	9,725
2003	3,971,622	6,358	13,433	37,727	4,210	9,524
2004	3,927,310	6,651	13,837	58,207	4,657	10,288
2005	3,789,618	6,871	14,169	87,142	4,766	10,257
2006	3,687,693	6,958	14,406	53,373	5,279	11,456
2007	3,610,107	7,016	14,527	70,898	5,389	11,705
2008	3,531,134	7,015	14,670	74,039	4,940	10,973
2009	3,537,119	7,263	15,349	85,114	5,662	12,796

\*2007\$ The following types of beneficiaries were excluded from the sample: Beneficiaries whose original eligibility was attributable to disability, ESRD, or Alzheimer's; newly eligible beneficiaries (since no prior claims information was available); beneficiaries who did not have 12 months of continuous enrollment in TM, both Parts A and B, in the prior year; the institutionalized; and dual eligibles. In addition, beneficiaries who switched into PFFS, cost MA plans or special needs plans were excluded. MA-PPO enrollees are included. 2010 values are not shown in this table because we are unable to identify the type of MA plan that was chosen in 2010.

Appendix Table 3b: Unadjusted Risk Scores\* by Year and Switching Status, Non-Institutionalized, Non-Duals

	Stay in TM in next Year			Switch to MA-HMO's in Next Year		
	N	Mean Score	SD	N	Mean Score	SD
2001	3,731,431	0.922	0.760	23,966	0.786	0.658
2002	3,851,378	0.953	0.817	24,988	0.806	0.689
2003	3,971,622	0.976	0.844	37,727	0.817	0.695
2004	3,927,310	0.983	0.852	58,207	0.860	0.737
2005	3,789,618	1.000	0.868	87,142	0.872	0.735
2006	3,687,693	1.018	0.886	53,373	0.897	0.785
2007	3,610,107	1.023	0.881	70,898	0.901	0.779
2008	3,531,134	1.004	0.829	74,039	0.850	0.702
2009	3,537,119	1.010	0.838	85,114	0.891	0.751

\*Risk scores are computed using the 2007 CMS-HCC model.

Appendix Table 4a: Unadjusted expenditures by Year and Switching Status, Non-Institutionalized, Non-Duals\*

	Stay in TM in next Year			Switch to MA-PFFS in Next Year		
	N	Mean \$	SD	N	Mean \$	SD
2001	3,731,431	5,325	11,144	596	4,764	9,445
2002	3,851,378	6,001	13,034	1,141	3,416	7,155
2003	3,971,622	6,358	13,433	4,071	3,934	8,345
2004	3,927,310	6,651	13,837	18,986	4,286	9,323
2005	3,789,618	6,871	14,169	73,088	4,668	10,153
2006	3,687,693	6,958	14,406	108,380	5,982	12,175
2007	3,610,107	7,016	14,527	85,829	6,180	12,621
2008	3,531,134	7,015	14,670	52,816	5,982	12,739
2009	3,537,119	7,263	15,349	26,502	6,143	13,253

\*2007\$. The following types of beneficiaries were excluded from the sample: Beneficiaries whose original eligibility was attributable to disability ,ESRD, or Alzheimer's; newly eligible beneficiaries (since no prior claims information was available); beneficiaries who did not have 12 months of continuous enrollment in TM, both Parts A and B, in the prior year; the institutionalized; and dual eligibles. In addition, beneficiaries who switched into cost MA plans or special needs plans were excluded. 2010 values are not shown in this table because we are unable to identify the type of MA plan that was chosen in 2010.

Appendix Table 4b: Unadjusted Risk Scores\* by Year and Switching Status Non-Institutionalized, Non-Duals

	Stay in TM in next Year			Switch to MA-PFFS in Next Year		
	N	Mean Score	SD	N	Mean Score	SD
2001	3,731,431	0.922	0.760	596	0.8728	0.6707
2002	3,851,378	0.953	0.817	1,141	0.7611	0.6425
2003	3,971,622	0.976	0.844	4,071	0.7346	0.5912
2004	3,927,310	0.983	0.852	18,986	0.7849	0.6379
2005	3,789,618	1.000	0.868	73,088	0.8308	0.6918
2006	3,687,693	1.018	0.886	108,380	0.9416	0.8072
2007	3,610,107	1.023	0.881	85,829	0.9849	0.8379
2008	3,531,134	1.004	0.829	52,816	0.9286	0.7666
2009	3,537,119	1.010	0.838	26,502	0.9221	0.7565

\*Risk scores are computed using the 2007 CMS-HCC model.