



Abt Associates Inc.

Cambridge, MA
Lexington, MA
Hadley, MA
Bethesda, MD
Washington, DC
Chicago, IL
Cairo, Egypt
Johannesburg, South Africa

Abt Associates Inc.
55 Wheeler Street
Cambridge, MA 02138

**Involuntary
Disenrollment from
Medicare+Choice
Managed Care Plans:
Experiences of
Beneficiaries in Six
Communities**

HSRE Working Paper 15

Abstract

May, 2002

Prepared by
Andrea Hassol, M.S.P.H.
Oren Grad, M.D., Ph.D.

**Involuntary Disenrollment from Medicare+Choice Managed Care Plans:
Experiences of Beneficiaries in Six Communities**

Andrea Hassol, M.S.P.H. and Oren Grad, M.D., Ph.D.

Keywords: Involuntary Disenrollment, National Medicare Education Program,
Information, Satisfaction.

Word Count (excluding tables): 3,799

Authors Information:

Andrea Hassol M.S.P.H.
Associate
Abt Associates Inc.
55 Wheeler St.
Cambridge, MA 02138
(617) 349-2488 voice
(617) 492-5219 fax
andrea_hassol@abtassoc.com

Oren Grad M.D., Ph.D.
Senior Scientist
Abt Associates Inc.
55 Wheeler St.
Cambridge, MA 02138
(617) 349-2504 voice
(617) 492-5219 fax
oren_grad@abtassoc.com

Reprint Requests to Andrea Hassol.

This work was conducted under contract to the Centers for Medicare and Medicaid Services.
Contract # CMS-95-0062.

Involuntary Disenrollment from Medicare+Choice Managed Care Plans: Experiences of Beneficiaries in Six Communities

Abstract: We examined the experience of Medicare beneficiaries whose health plans discontinued Medicare contracting (involuntary disenrollees) in six communities around the country in 2001. The focus was on the role of information in the insurance transition process, and particularly the role of the public information efforts of CMS' National Medicare Education Program (NMEP). Few involuntary disenrollees made much use of these "official" information resources (Medicare handbook, helpline, insurance counselors), and there was little correlation between use of these resources and beneficiary choice of replacement insurance or satisfaction with the transition process. Minorities appeared more likely than whites to have adverse experiences or outcomes in connection with involuntary disenrollment. Finally, variation across communities was pervasive in both the mechanics and the outcomes of the transition process, reflecting the fundamentally local character of markets for Medicare supplemental coverage.