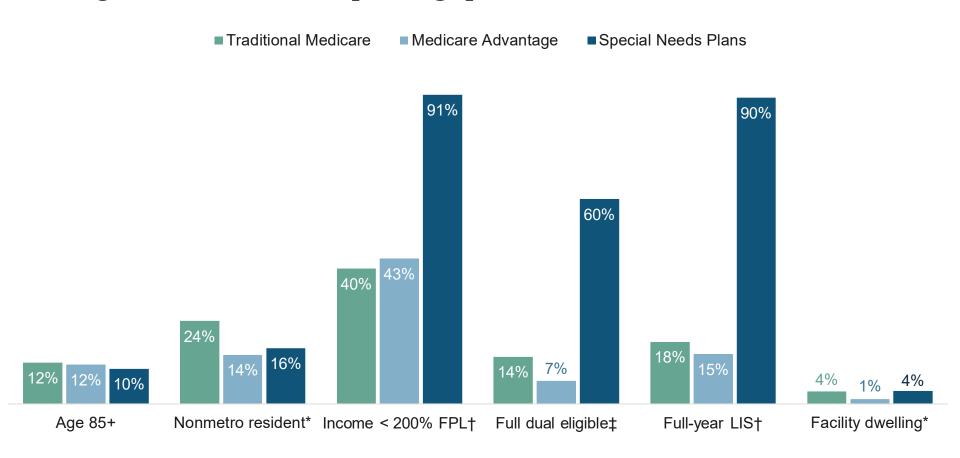
EXHIBIT 1

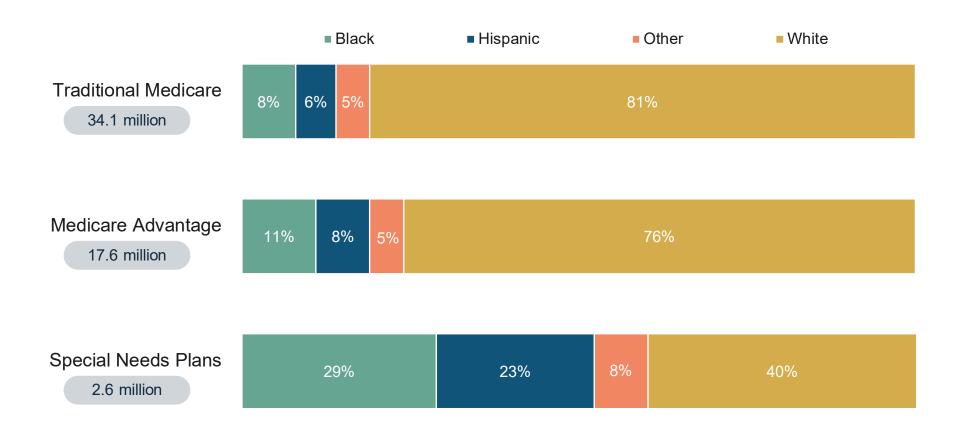
Beneficiaries in traditional Medicare are similar to Medicare Advantage enrollees across age and income, after separating Special Needs Plans.



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). FPL = federal poverty level; LIS = Low Income Subsidy; * = differences between traditional Medicare and Medicare Advantage are significant, p<.05; † = differences between SNPs and other types of Medicare coverage are significant, p<.05; † = differences between all three Medicare coverage types are significant, p<.05. Facility-dwelling beneficiaries include respondents who lived in a long-term-care or residential facility for a full year. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS. Data represent weighted counts of beneficiaries, with approximately 34.1 million beneficiaries in traditional Medicare, 17.6 million beneficiaries in Medicare Advantage, and 2.6 million beneficiaries in SNPs.



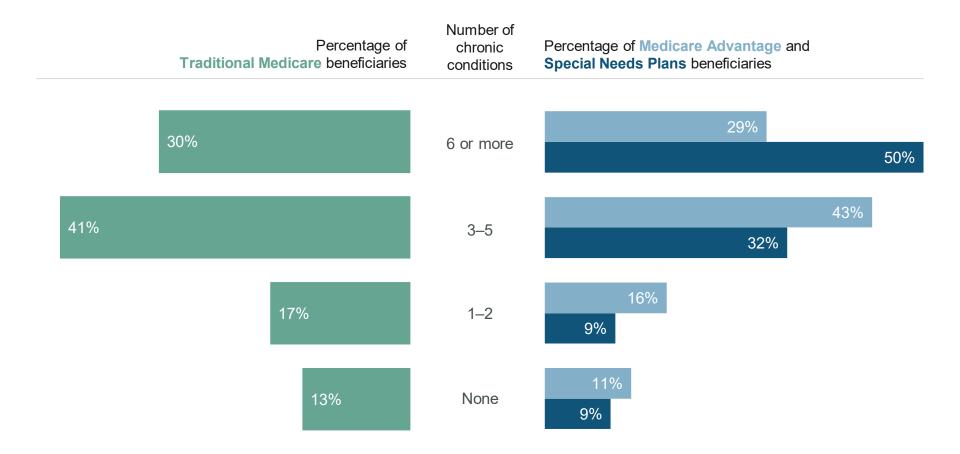
Beneficiaries in traditional Medicare and Medicare Advantage enrollees have similar racial/ethnic distributions, after separating Special Needs Plans.



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Differences in the proportion of Black beneficiaries who receive benefits from each of the three Medicare coverage types are significantly different, p<.05; differences between the proportion of both Hispanic and white beneficiaries in SNPs and that in other Medicare coverage types are significantly different, p<.05. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS.



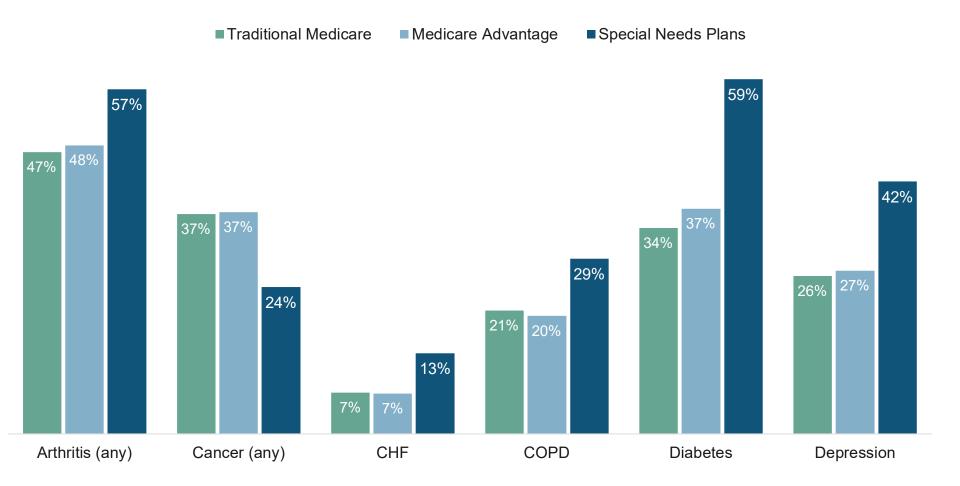
Beneficiaries in traditional Medicare and Medicare Advantage enrollees have similar counts of chronic conditions, after separating Special Needs Plans.



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Differences in the proportion of SNP beneficiaries in each chronic condition category (1 to 2, 3 to 5, and 6 or more chronic conditions) are significantly different, p<.05, than the proportion in traditional Medicare Advantage. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS.



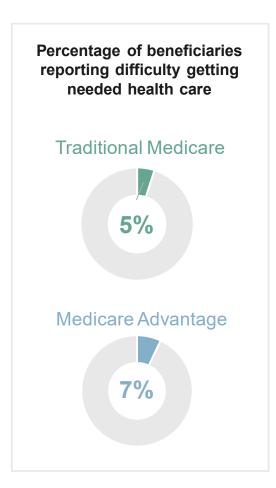
The prevalence of many chronic conditions is similar for beneficiaries in traditional Medicare and Medicare Advantage enrollees, after separating Special Needs Plans.

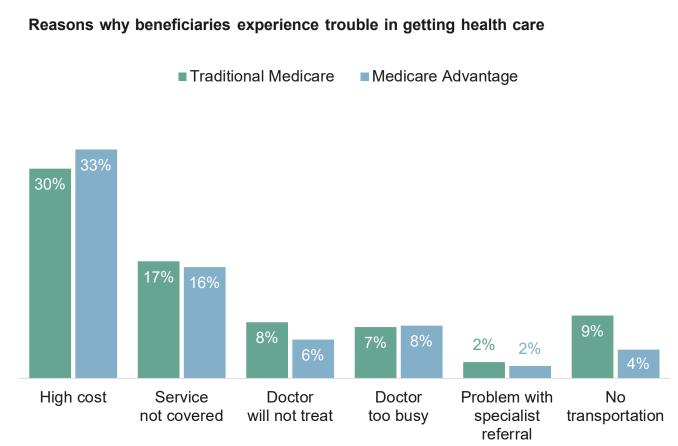


Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). CHF = congestive heart failure; COPD = chronic obstructive pulmonary disease, emphysema, and/or asthma. Across all listed chronic conditions, differences between SNPs and other types of Medicare coverage are significantly different, p<.05. Data represent community-dwelling beneficiaries. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS.



Among Medicare beneficiaries who report difficulty obtaining care, one-third identified high costs as the source of difficulty.



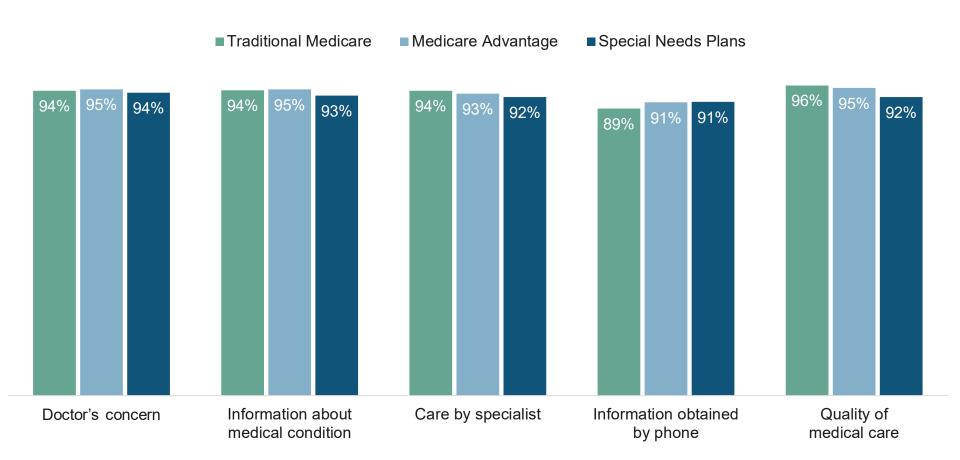


Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Data represent community-dwelling beneficiaries. Data for beneficiaries in SNPs are not reported as these data do not meet reliability thresholds. Only respondents who reported that they experienced difficulty in obtaining needed care are included in these data. None of the differences between traditional Medicare, Medicare Advantage plans, and Special Needs Plans are statistically significant.



Satisfaction with the quality of care is similar for beneficiaries in traditional Medicare and Medicare Advantage enrollees.

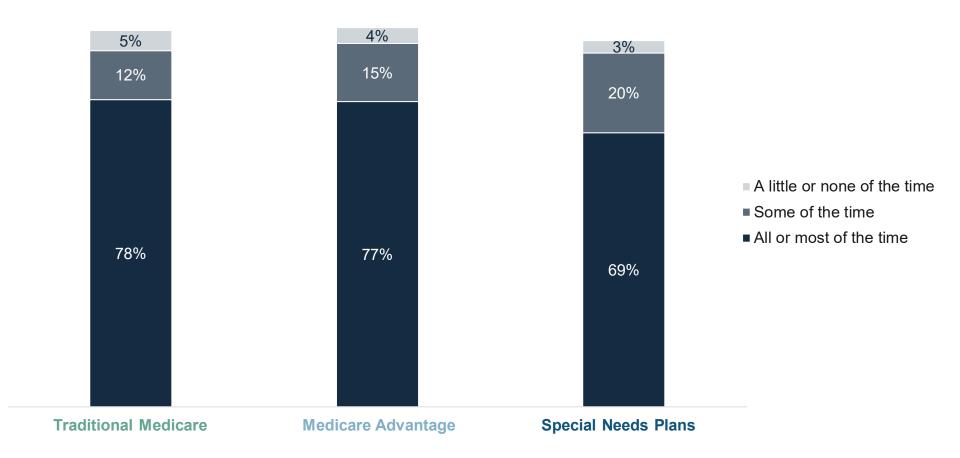
Satisfaction with selected aspects of care



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Data represent community-dwelling beneficiaries. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS. Data represent weighted counts of beneficiaries, with approximately 34.1 million beneficiaries in traditional Medicare, 17.6 million beneficiaries in Medicare Advantage, and 2.6 million beneficiaries in SNPs.



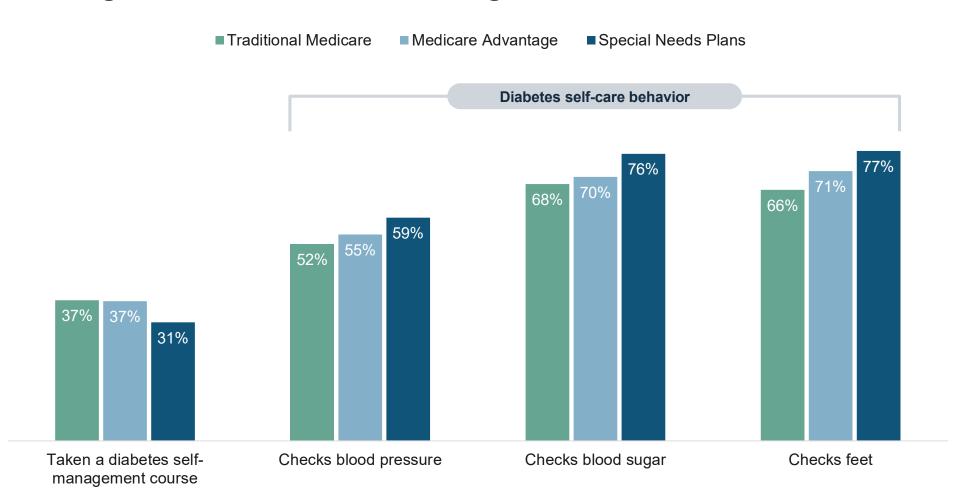
Among Medicare beneficiaries with diabetes, more than three of four report their blood sugar is under control all or most of the time.



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Data represent community-dwelling beneficiaries who reported having ever had diabetes. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS.



About one-third of beneficiaries with diabetes in traditional Medicare and Medicare Advantage have taken a diabetes self-management course.



Notes: Medicare Advantage plans as shown do not include Special Needs Plans (SNPs). Data represent community-dwelling beneficiaries who reported having ever had diabetes. Beneficiaries in SNPs were determined using plan identifiers reported in the MCBS.

