

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 103  
(A-24)

Introduced by: Oklahoma

Subject: Medicare Advantage Plans

Referred to: Reference Committee A

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1 Whereas, 52% of Medicare beneficiaries are now enrolled in Medicare Advantage (MA) plans,  
2 with an anticipated growth to 70% within a years; and  
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4 Whereas, a former Center for Medicare and Medicaid Services (CMS) administrator stated  
5 recently in a national publication that, "I think MA growth should be slowed or stopped, at least  
6 until we end the extraordinarily high subsidies for MA plans, which are unfair to traditional  
7 Medicare and burdensome to the treasury and many beneficiaries."<sup>1</sup>; and  
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9 Whereas, it is anticipated that MA plans, in 2024 will receive \$88 billion more than what is spent  
10 for the same number of patient in traditional Medicare; and  
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12 Whereas, it is anticipated that MA plans, in 2024 will receive \$88 billion more than what is spent  
13 for the same number of patient in traditional Medicare; and  
14

15 Whereas, the amount that an MA plan gets is adjusted for the number of codes for diagnoses  
16 that a beneficiary has; and  
17

18 Whereas, providers and physicians are rewarded in any MA plans for upcoming, or they receive  
19 a percentage of the insurance premium the MA collects from CMS or, they are employed by the  
20 MA; and  
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22 Whereas, this ends up being a transfer of funds out of the healthcare arena into the private  
23 sector, which goes to profit for the MA, or for stock buybacks, or for higher compensation for the  
24 MA executives, and activities that don't benefit beneficiaries; therefore be it  
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26 RESOLVED, that our American Medical Association urge the United States Congress and  
27 Center for Medicare and Medicaid Services to take steps to end the upcoding for Medicare  
28 Advantage plans that results in high subsidies which are unfair to traditional Medicare and  
29 burdensome to the public treasury and many beneficiaries (New HOD Policy); and be it further  
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31 RESOLVED, that our AMA encourages Center for Medicare and Medicaid Services to improve  
32 the attractiveness of traditional Medicare so that the option remains robust and available giving  
33 beneficiaries greater traditional choices for this option and to seek better care for themselves.  
34 (New HOD Policy)  
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Fiscal Note: Modest - between \$1,000 - \$5,000

Received: 4/22/2024

**REFERENCES**

1. <https://www.medpagetoday.com/special-reports/exclusives/108980>