Homework 4

Research in Health Economics, Spring 2025

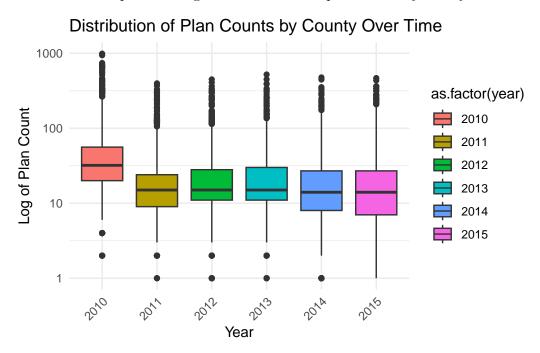
Lisbeth Vargas

The following is my submission for Homework 4-1. Note that the setup and analysis for these responses are in a seperate R script. The GitHub repository for this work is available here.

This assignment presented particular challenges as my laptop broke last week, and I had to navigate many issues with GitHub. I apologize for the delay, but I just got it working (yay!). My future submissions will be more refined.

Summarize the Data

Question 1. Remove all SNPs, 800-series plans, and prescription drug only plans. Provide a box and whisker plot showing the distribution of plan counts by county over time.

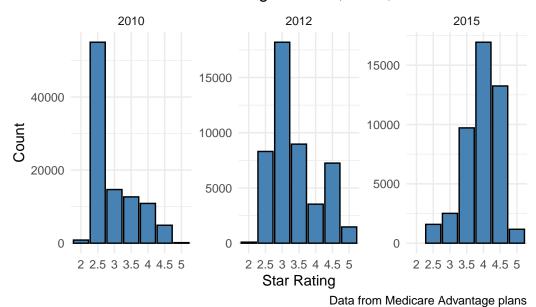


Do you think that the number of plans is sufficient, too few, or too many? The middle 50%

of data indicates that the number of plans may be insufficient for coverage in certain counties. Whiskers suggest that there is significant variation in the number of plans between counties; some counties have too many plans while others have too few. It appears that the variation between counties is increasing, leading to greater disparity over time.

Question 2. Provide bar graphs showing the distribution of star ratings in 2010, 2012, and 2015.

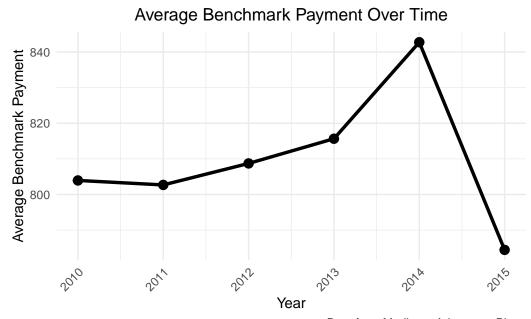
Distribution of Star Ratings in 2010, 2012, and 2015



How has this distribution changed over time? There is a noticeable shift toward the right,

meaning more plans now receive ratings of 3 or higher. This means that Medicare Advantage plans have improved in quality over time, likely in response to quality incentive programs.

Question 3. Plot the average benchmark payment over time from 2010 through 2015.

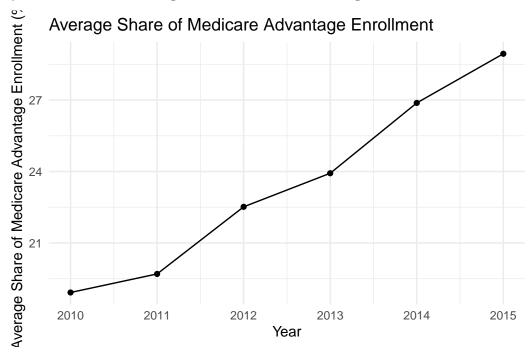


Data from Medicare Advantage Plans

How much has the average benchmark payment risen over the years? Average benchmark

payments increased steadily until 2015, where they faced a signficant drop. This reflects several of the provisions of the Affordable Care Act including, but not limited to, reduced pyaments, the star ratings system, and adjustments in how bids were structured.

Question 4. Plot the average share of Medicare Advantage over time from 2010 through 2015.



Has Medicare Advantage increased or decreased in popularity? How does this share correlate with benchmark payments? The popularity of Medicare Advantage has increased stedily over

time – more eligible beneficiaries are choosing Medicare Advantage plans. There appears to be a positive relationship between MA enrollment and benchmark payments, as benchmark payments must increase to cover all beneficiaries in a plan. This suggests that higher benchmark payments attract more enrollees, with increased enrollment leading to better payments.