

Table 12.3
Medicare Risk/Medicare+Choice/Medicare
Advantage Contracts: Calendar Years 1987-2008

| Year | Risk Contracts |
|------|----------------|
| 1987 | 161 |
| 1988 | 154 |
| 1989 | 131 |
| 1990 | 96 |
| 1991 | 93 |
| 1992 | 95 |
| 1993 | 109 |
| 1994 | 154 |
| 1995 | 183 |
| 1996 | 241 |
| 1997 | 307 |
| 1998 | 346 |
| 1999 | 309 |
| 2000 | 266 |
| 2001 | 179 |
| 2002 | 155 |
| 2003 | 151 |
| 2004 | 154 |
| 2005 | 302 |
| 2006 | 367 |
| 2007 | 408 |
| 2008 | 509 |

NOTE: Data are as of December of each year. For all years, only active RISK contracts, including Local Coordinated Care Plans (CCP), Preferred Provider Organizations (PPO), and Provider Sponsored Organizations (PSO).

All other organization types, Private Fee-for-Service plans (PFFS), Program of All-Inclusive Care for the Elderly (PACE), COST, PPO, PPO DEMO, and Regional PPO (RPPO) are excluded.

SOURCE: Centers for Medicare & Medicaid Services, Center for Drug and Health Plan Choice: Data from the Medicare Managed Care Contract (MMCC) Summary reports, 1987-2008; data development by the Office of Research, Development, and Information.