

Table 13.11
Access to Medicare+Choice (M+C)/Medicare Advantage (MA) Coordinated Care Plans (CCPs),
Private Fee-for-Service (PFFS) Plans, or Preferred Provider Organization (PPO)
Demonstration Projects, Rural Areas, by Type of Coverage: Calendar Years 1999-2005

| Year | Any M+C/MA CCP, PFFS Plan, or PPO Demo Plan | Any M+C/MA CCP Plan | Any Zero Premium Plan | Any Plan with Drug Coverage |
|-------------------|---|------------------------|--------------------------|--------------------------------|
| Percent | | | | |
| 1999 | --- | 23 | 14 | 19 |
| 2000 | 62 | 21 | 9 | 16 |
| 2001 ¹ | 60 | 14 | 4 | 8 |
| 2002 | 59 | 13 | 2 | 9 |
| 2003 | 59 | 13 | 2 | 8 |
| 2004 ² | 62 | 15 | 13 | 26 |
| 2005 ² | 97 | 40 | 54 | 94 |

¹Includes 53 counties, with 99,000 beneficiaries, where PFFS became available in December 2001.

²The 2004 and 2005 data reflect the reclassification of the metropolitan statistical area (MSA) status of a number of counties. There was a net reduction in the number of Medicare beneficiaries residing in non-MSA (rural) counties of about one million. About 1.5 million beneficiaries were in the counties changing from non-MSA to MSA status, and about half a million beneficiaries were in counties that changed from MSA status to non-MSA status (generally because of being assigned to the new category of micropolitan areas).

NOTES: The 2005 data are as of October 2005. In all years, only plans available to all Medicare beneficiaries in a county are included. That is, plans such as those available only to members of an employer group, or special needs plans (available as of 2005), are excluded.

SOURCES: Centers for Medicare & Medicaid Services, Office of Research, Development, and Information: Analysis of Health Plan Management System data and M+C rates; MedPAC Annual Reports 1999 and 2000.