

Table 12.4
Risk/Local Coordinated Care Plans (CCP) Contracts Non-Renewals,
by Percent of Plans: Calendar Years 1986-2009

Year	Non-Renewals Percent
1986	5
1987	18
1988	22
1989	29
1990	15
1991	13
1992	8
1993	4
1994	1
1995	0
1996	1
1997	3
1998	13
1999	13
2000	25
2001	13
2002	6
2003	4
2004	2
2005	1
2006	4
2007	3
2008	3
2009	8

NOTES: The percentages in the table only refer to Local CCP non-renewals and terminations including conversion to cost plans; however, service area reductions are not included. Local CCP includes Health Maintenance Organizations (HMO), Preferred Provider Organizations (PPO), and Provider Sponsored Organizations (PSO) but excludes Regional PPO and Private Fee For Service plans (PFFS). The 1989 figure includes 29 plans with no enrollees. The data for 1999 are based on the number of plans as of August 1999; for other years the data are as of December. The data for 2000 and 2001 are adjusted for contract consolidations (23 in 2001; 3 in 2002). The data for 2002 include one Medicare+Choice alternative payment demonstration project. The data for 2009 reflects approximately 20 consolidations. That is, if an entire contract consolidated (and hence did not reappear in 2010) that consolidated contract did not count in either the denominator (the number of plans) or numerator (the number of terminations).

SOURCE: Centers for Medicare & Medicaid Services, Center for Drug and Health Plan Choice: Analysis of Health Plan Management System (HPMS) Non-Renewal Reports, 1986-2009; data development by the Office of Research, Development, and Information.