

Table 132. Health maintenance organizations (HMOs) and enrollment, according to model type, geographic region, and Federal program: United States, selected years 1976–2002

[Data are based on a census of health maintenance organizations]

<i>Plans and enrollment</i>	1976	1980	1990	1995	1997	1998	1999	2000	2001	2002
Plans										
All plans	174	235	572	562	652	651	643	568	541	500
Model type:¹										
Individual practice association ²	41	97	360	332	284	317	309	278	257	229
Group ³	122	138	212	108	98	116	123	101	104	100
Mixed	---	---	---	122	258	212	208	188	180	171
Geographic region:										
Northeast	29	55	115	100	110	107	110	98	96	87
Midwest	52	72	160	157	184	185	179	161	190	140
South	23	45	176	196	236	237	239	203	158	178
West	70	63	121	109	121	122	115	106	97	95
Enrollment¹										
Number of persons in millions										
Total	6.0	9.1	33.0	50.9	66.8	76.6	81.3	80.9	79.5	76.1
Model type:¹										
Individual practice association ²	0.4	1.7	13.7	20.1	26.7	32.6	32.8	33.4	33.1	31.6
Group ³	5.6	7.4	19.3	13.3	11.0	13.8	15.9	15.2	15.6	15.0
Mixed	---	---	---	17.6	29.0	30.1	32.6	32.3	30.9	29.6
Federal program:⁴										
Medicaid ⁵	---	0.3	1.2	3.5	5.6	7.8	10.4	10.8	11.4	12.8
Medicare	---	0.4	1.8	2.9	4.8	5.7	6.5	6.6	6.1	5.4
Percent of HMO enrollees										
Model type:¹										
Individual practice association ²	6.6	18.7	41.6	39.4	39.9	42.6	40.3	41.3	41.6	41.5
Group ³	93.4	81.3	58.4	26.0	16.5	18.0	19.6	18.9	19.5	19.4
Mixed	---	---	---	34.5	43.4	39.2	40.1	39.9	38.8	38.8
Federal program:⁴										
Medicaid ⁵	---	2.9	3.5	6.9	8.2	10.2	12.7	13.3	14.3	16.9
Medicare	---	4.3	5.4	5.7	7.2	7.4	8.0	8.1	7.7	7.1
Percent of population enrolled in HMOs										
Total	2.8	4.0	13.4	19.4	25.2	28.6	30.1	30.0	28.3	26.4
Geographic region:										
Northeast	2.0	3.1	14.6	24.4	32.4	37.8	36.7	36.5	35.1	33.4
Midwest	1.5	2.8	12.6	16.4	19.5	22.7	23.3	23.2	21.7	20.6
South	0.4	0.8	7.1	12.4	17.9	21.0	23.9	22.6	21.0	19.8
West	9.7	12.2	23.2	28.6	36.4	39.1	41.4	41.7	40.7	38.2

--- Data not available.

¹Enrollment or number of plans may not equal total because some plans did not report these characteristics.

²An HMO operating under an individual practice association model contracts with an association of physicians from various settings (a mixture of solo and group practices) to provide health services.

³Group includes staff, group, and network model types. See Appendix II, Health maintenance organization.

⁴Federal program enrollment in HMOs refers to enrollment by Medicaid or Medicare beneficiaries, where the Medicaid or Medicare program contracts directly with the HMO to pay the appropriate annual premium.

⁵Data for 1990 and later include enrollment in managed care health insuring organizations.

NOTES: Data as of June 30 in 1976–80, and January 1 from 1990 onwards. Open-ended enrollment in HMO plans, amounting to 8 million on Jan. 1, 2002, is included from 1994 onwards. See Appendix II, Health maintenance organization. HMOs in Guam are included starting in 1994; HMOs in Puerto Rico, starting in 1998. In 2002 HMO enrollment in Guam was 34,000 and in Puerto Rico, 1,825,000. Data for additional years are available (see Appendix III).

SOURCES: The InterStudy Edge, 1990, vol. 2; Competitive Edge, vols. 1–12, 1991–2002; Excelsior, Minnesota (Copyrights 1985–2002: Used with the permission of InterStudy); Office of Health Maintenance Organizations: Summary of the National HMO census of prepaid plans—June 1976 and National HMO Census 1980. Public Health Service. Washington. U.S. Government Printing Office. DHHS Pub. No. (PHS) 80–50159; InterStudy: National HMO Census: Annual Report on the Growth of HMOs in the U.S., 1984–1985 Editions; Population estimates used for calculations from the U.S. Bureau of the Census at www.census.gov.