

# Chartbook Section 7

## Health Plans

## Section 7: Health Plans

- Health plan market shares
  - Fully-insured market in total
  - Small group and individual market
- Health Plan Medical Loss Ratios
- HMO financial statistics
  - Net income & margins
  - Reserves
- HMO enrollment statistics

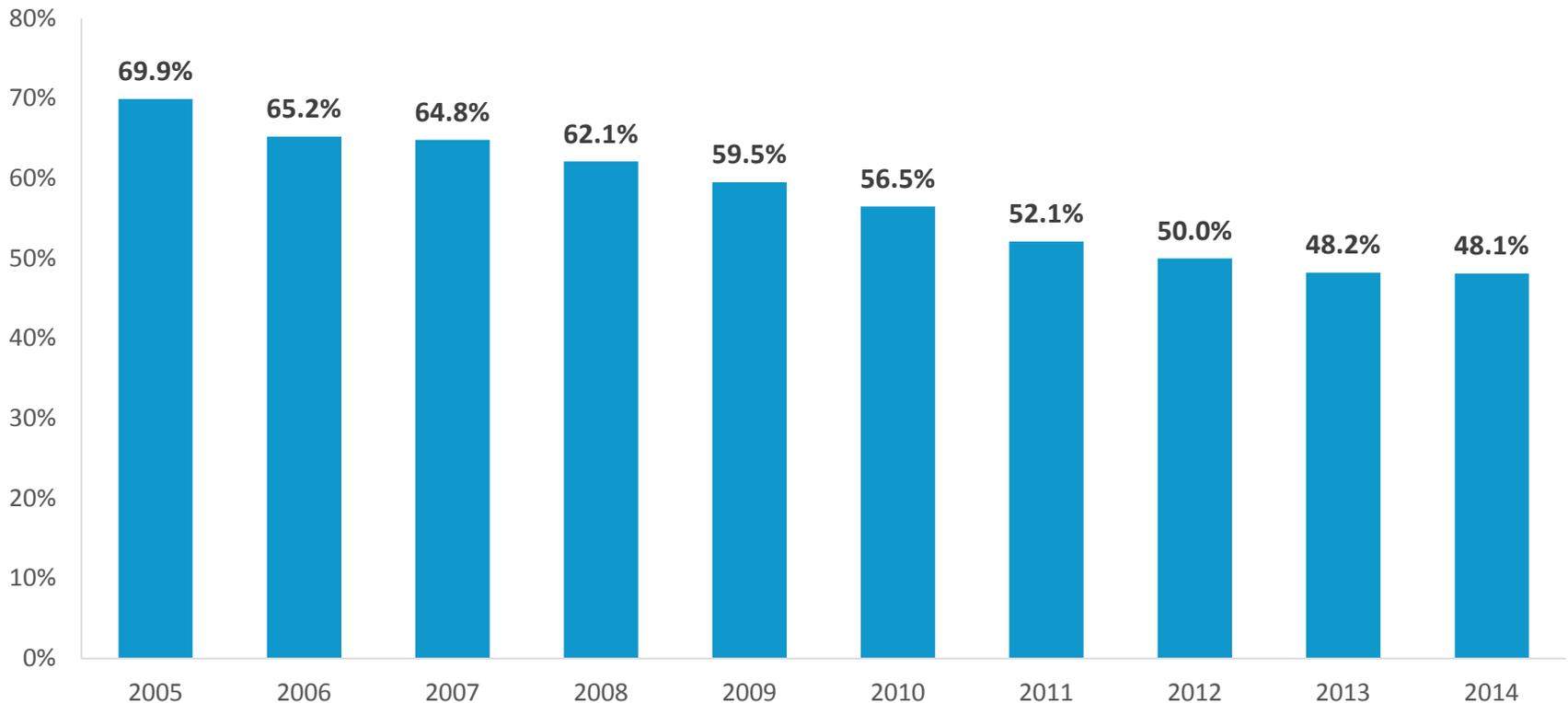
A summary of the charts and graphs contained within is provided at [Chartbook Summaries – Section 7](#). Direct links are listed on each page. Please contact the Health Economics Program at 651-201-3550 or [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.

# HEALTH PLAN MARKET SHARES

(INCLUDES HMO AND NON-HMO HEALTH PLANS)

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# Market Share of Minnesota Non-Profit Health Plans 2005 to 2014



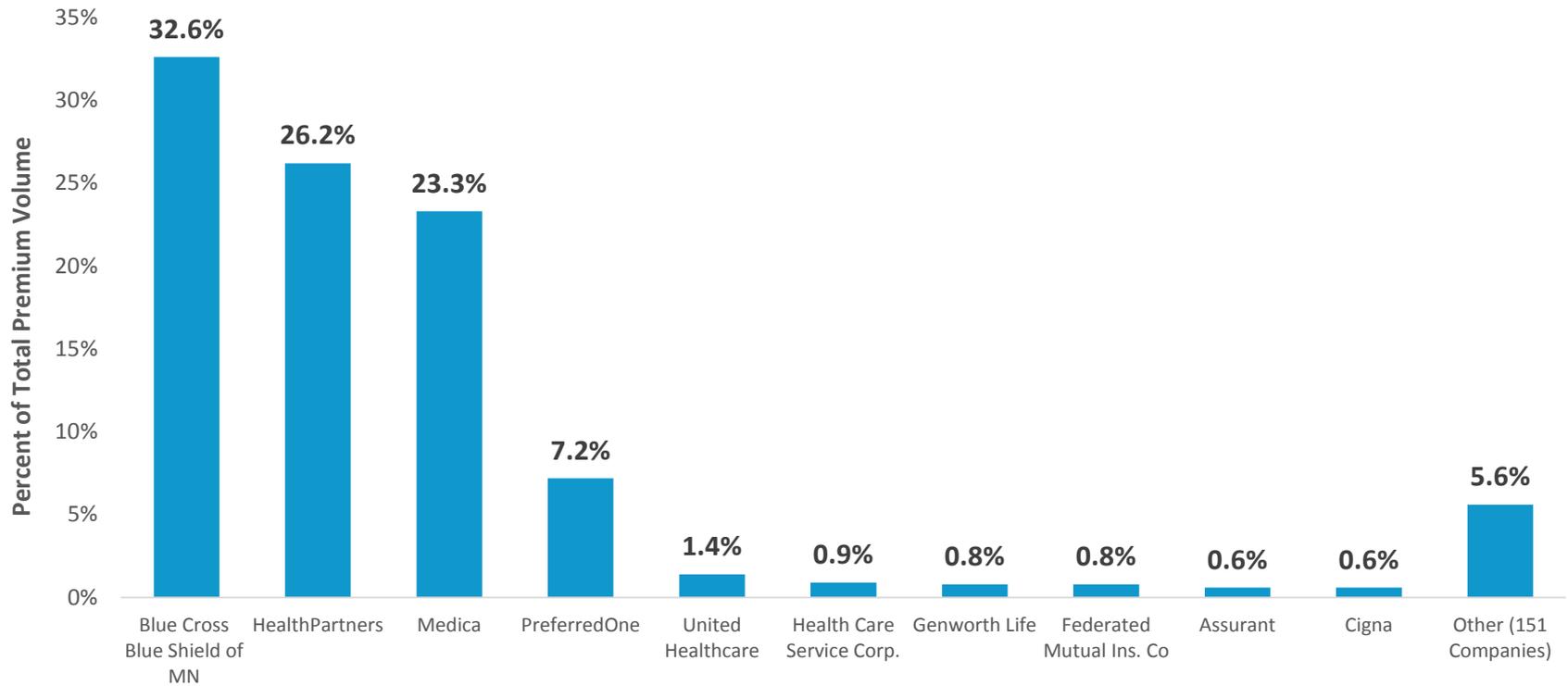
Fully insured market only, market share based on premium volume.

Source: MDH Health Economics Program, analysis of MCHA Premium Database for 2014.

[Summary of graph](#)

# Health Plan Market Shares: Total Fully-Insured Private Market, 2014

(Premium Volume: \$6.7 billion)



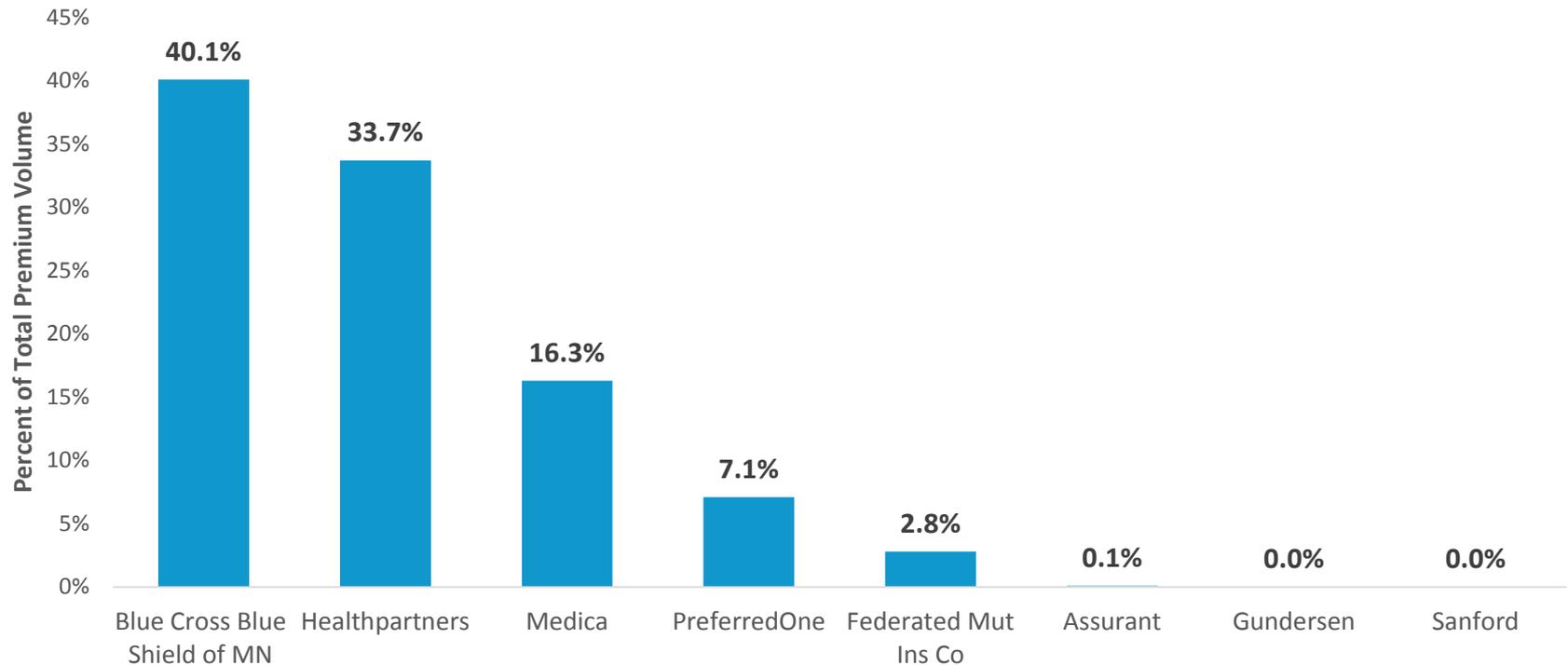
Companies with common ownership were treated as one entity. For example, Blue Cross Blue Shield of Minnesota includes BCBSMN and Blue Plus. Fully insured market only, market share based on premium volume.

Source: MDH Health Economics Program, analysis of MCHA Premium Database for 2014.

[Summary of graph](#)

# Health Plan Market Shares: Small Group Market, 2014

(Premium Volume in 2014: \$1.26 Billion)

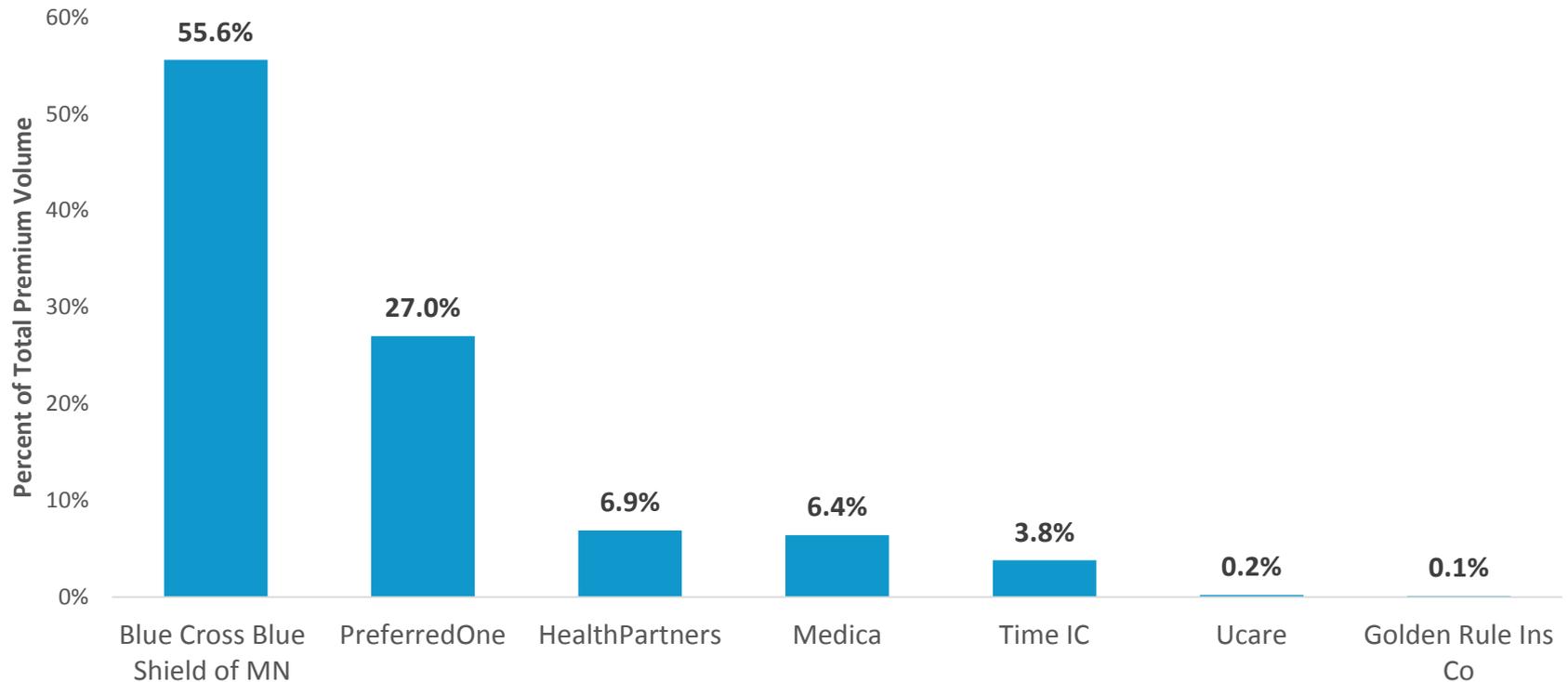


Note: Companies with common ownership were treated as one entity. Market shares based on premium volume; fully insured market only.  
Source: National Association of Insurance Commissioners, Supplemental Health Care Exhibit.

[Summary of graph](#)

# Health Plan Market Shares: Individual Market, 2014

(Premium Volume in 2014: \$999 Million)



Note: Companies with common ownership were treated as one entity. Market shares based on premium volume; fully insured market only.  
Source: National Association of Insurance Commissioners, Supplemental Health Care Exhibit.

[Summary of graph](#)

# HEALTH PLAN MEDICAL LOSS RATIOS

(HMO AND NON-HMO CARRIERS WITH \$2 MILLION OR MORE IN PREMIUM REVENUE)

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# Medical Loss Ratio in the Individual Market, 2014

(Carriers with \$2 million or more in Premium Revenue)

	Net Premium <sup>1</sup>	Claims Expense				MLR <sup>2</sup>
		Incurred Claims	Quality Improvement	Fraud	Total	
BCBSM	\$546,178,106	\$679,570,644	\$2,537,269	\$84,108	\$682,192,021	123.4%
PreferredOne IC	\$269,311,391	\$291,828,334	\$2,616,004	\$114,597	\$294,558,935	110.8%
Medica IC	\$50,531,905	\$60,604,746	\$425,012	\$0	\$61,029,758	128.7%
HealthPartners IC	\$46,430,000	\$44,536,000	\$830,000	\$0	\$45,366,000	106.6%
Time IC	\$35,551,942	\$30,467,770	\$351,248	\$18,227	\$30,837,245	93.7%
Group Health Plan Inc.	\$12,753,000	\$14,026,000	\$168,000	\$0	\$14,194,000	117.0%
Medica Health Plans of WI	\$10,935,291	\$11,036,448	\$49,428	\$0	\$11,085,876	107.5%
HealthPartners Inc.	\$9,449,000	\$11,189,000	\$73,000	\$0	\$11,262,000	126.4%
Ucare	\$2,464,136	\$2,516,947	\$104,513	\$0	\$2,621,460	106.4%
Medica Health Plans	\$2,453,132	\$4,134,359	\$8,222	\$0	\$4,142,581	176.1%
<b>Total</b>	<b>\$986,057,903</b>	<b>\$1,149,910,248</b>	<b>\$7,162,696</b>	<b>\$216,932</b>	<b>\$1,157,289,876</b>	<b>118.4%</b>

Source: MDH Health Economics Program analysis of data from National Association of Insurance Commissioners (NAIC), Supplementary Health Care Exhibit—Part 1; Note 1: premiums exclude taxes and fees. Note 2: Beginning in 2012, federal law requires insurance companies that don't include certain small and new companies to issue rebates to consumers for an MLR under 80% in the individual market for the prior year.

# Medical Loss Ratio in the Small Group Market, 2014

(Carriers with \$2 million or more in Premium Revenue)

	Net Premium <sup>1</sup>	Claims Expense				MLR <sup>2</sup>
		Incurred Claims	Quality Improvement	Fraud	Total	
BCBSM	\$498,117,479	\$406,054,732	\$2,762,980	\$59,759	\$408,877,471	86.5%
HealthPartners Inc.	\$345,634,000	\$298,410,000	\$3,949,000	\$0	\$302,359,000	92.6%
Medica IC	\$205,535,267	\$171,496,997	\$1,772,087	\$0	\$173,269,084	89.7%
HealthPartners IC	\$80,231,000	\$70,962,000	\$753,000	\$0	\$71,715,000	95.5%
PreferredOne IC	\$55,514,574	\$52,238,085	\$566,080	\$15,290	\$52,819,455	98.5%
Federated Mutual IC	\$35,069,221	\$24,571,304	\$0	\$0	\$24,571,304	74.1%
PreferredOne Health Plan	\$33,666,623	\$32,369,730	\$317,285	\$13,510	\$32,700,525	102.5%
<b>Total</b>	<b>\$1,253,768,164</b>	<b>\$1,056,102,848</b>	<b>\$10,120,432</b>	<b>\$88,559</b>	<b>\$1,066,311,839</b>	<b>89.9%</b>

Source: MDH Health Economics Program analysis of data from National Association of Insurance Commissioners (NAIC), Supplementary Health Care Exhibit—Part 1 ; Note 1: premiums exclude taxes and fees.

Note 2: Beginning in 2012, federal law requires insurance companies that don't include certain small and new companies to issue rebates to consumers for an MLR under 80% in the small group market for the prior year.

# Medical Loss Ratio in the Large Group Market, 2014

(Carriers with \$2 million or more in Premium Revenue)

	Net Premium <sup>1</sup>	Claims Expense				MLR <sup>2</sup>
		Incurred Claims	Quality Improvement	Fraud	Total	
BCBSM	\$1,065,825,108	\$927,961,719	\$5,639,467	\$159,336	\$933,760,522	91.3%
Medica IC	\$656,309,682	\$573,602,271	\$5,310,222	\$0	\$578,912,493	94.3%
HealthPartners IC	\$610,651,000	\$493,332,000	\$5,665,000	\$0	\$498,997,000	88.7%
HealthPartners Inc.	\$287,804,000	\$235,487,000	\$1,901,000	\$0	\$237,388,000	86.9%
PreferredOne IC	\$86,108,980	\$75,651,539	\$828,870	\$31,059	\$76,511,468	94.1%
Group Health Plan Inc.	\$44,364,000	\$43,686,000	\$371,000	\$0	\$44,057,000	101.5%
PreferredOne Health Plan	\$23,634,951	\$20,300,344	\$165,861	\$9,514	\$20,475,719	91.4%
Blue Plus	\$16,632,035	\$13,492,117	\$106,641	\$2,133	\$13,600,891	83.2%
Federated Mutual IC	\$15,645,173	\$13,302,746	\$0	\$0	\$13,302,746	90.0%
Cigna Health & Life IC	\$5,657,695	\$5,000,089	\$10,894	\$0	\$5,010,983	95.9%
Medica Health Plans	\$2,323,448	\$3,702,818	\$16,589	\$0	\$3,719,407	229.4%
<b>Total</b>	<b>\$2,814,956,072</b>	<b>\$2,405,518,643</b>	<b>\$20,015,544</b>	<b>\$202,042</b>	<b>\$2,425,736,229</b>	<b>91.3%</b>

Source: MDH Health Economics Program analysis of data from National Association of Insurance Commissioners (NAIC), Supplementary Health Care Exhibit—Part 1; Note 1: premiums exclude taxes and fees.

Note 2: Beginning in 2012, federal law requires insurance companies that don't include certain small and new companies to issue rebates to consumers for an MLR under 85% in the large group market for the prior year.

# HMO FINANCIAL STATISTICS

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Health Maintenance Organizations (HMO) are non-profit corporations which provide comprehensive health insurance coverage to Minnesotans. They also provide health care to state public programs enrollees through contracts with the Minnesota Department of Human Services and to Medicare beneficiaries through contracts with the Center for Medicare and Medicaid Services. HMOs are licensed pursuant to Minnesota Statutes, chapter 62D and Minnesota Rules, part 4685.

# Summary of HMO Financial Trends, 2009 to 2014

	2009	2010	2011	2012	2013	2014
<b>Net Income (\$ millions)</b>	\$175.5	\$250.6	\$233.7	\$250.3	\$226.1	\$300.8
<b>Total Revenue (\$ millions)</b>	\$6,490.6	\$6,954.5	\$6,971.7	\$7,326.8	\$7,746.9	\$8,243.9
<b>Operating Income as % of Revenue</b>	1.9%	2.6%	2.3%	2.4%	2.2%	2.8%
<b>Net Income as % of Revenue</b>	2.7%	3.6%	3.4%	3.4%	2.9%	3.6%
<b>Net Income per Member Month</b>	\$16.30	\$22.75	\$21.84	\$23.75	\$21.00	\$24.64

Minnesota products only. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

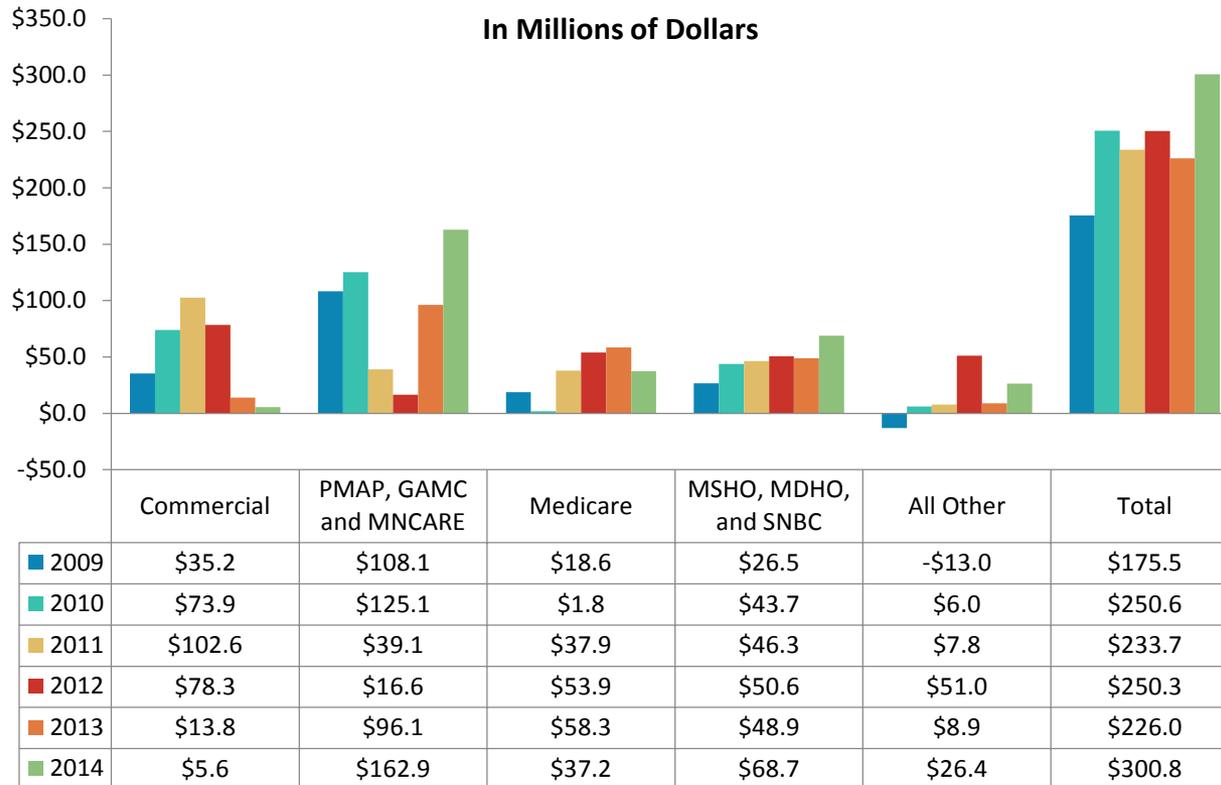
# Net Income and Profitability by HMO, 2014

	Net Income (millions)	Total Revenue (millions)	Net Income as % of Revenue
Blue Plus	\$85.7	\$820.4	10.4%
Group Health	\$41.7	\$1,088.6	3.8%
HealthPartners	\$16.8	\$1,350.2	1.2%
Gundersen Lutheran	\$0.1	\$4.1	1.6%
Medica	\$51.8	\$1,709.6	3.0%
Metropolitan Health Plan	-\$0.3	\$158.2	-0.2%
PreferredOne	-\$2.8	\$57.4	-4.9%
Sanford	\$0.0	\$2.2	-2.3%
UCare	\$107.8	\$3,053.3	3.5%
<b>All HMOs</b>	<b>\$300.8</b>	<b>\$8,243.9</b>	<b>3.6%</b>

Minnesota products only. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

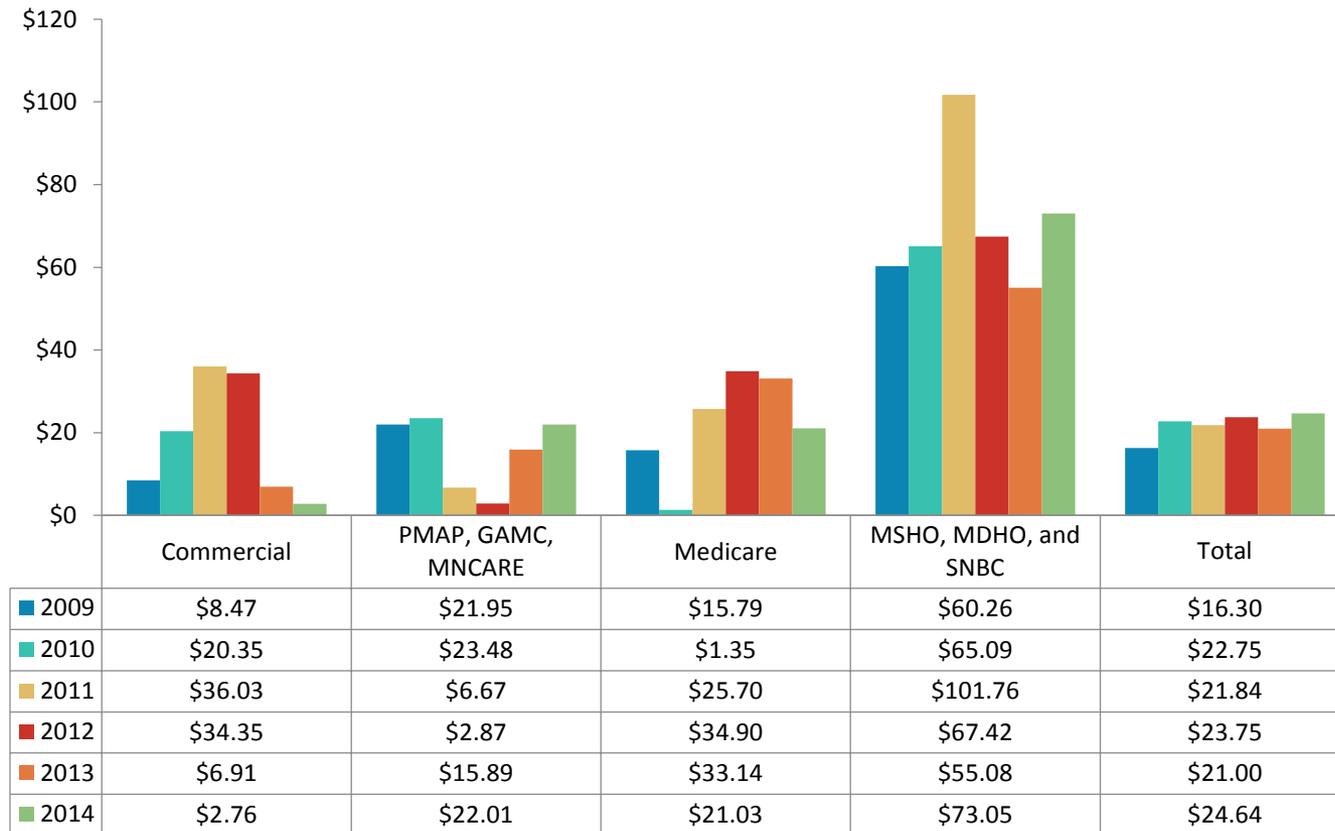
Source: MDH Health Economics Program analysis of HMO annual reports.

# Minnesota HMO Net Income by Product Line, 2009 to 2014



PMAP is Prepaid Medical Assistance Program; GAMC is General Assistance Medical Care; MSHO is Minnesota Senior Health Options, SNBC is Special Needs Basic Care, and MDHO is Minnesota Disability Health Options; All Other includes: Medicare Supplemental, Dental. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated. Source: MDH Health Economics Program analysis of HMO annual reports.

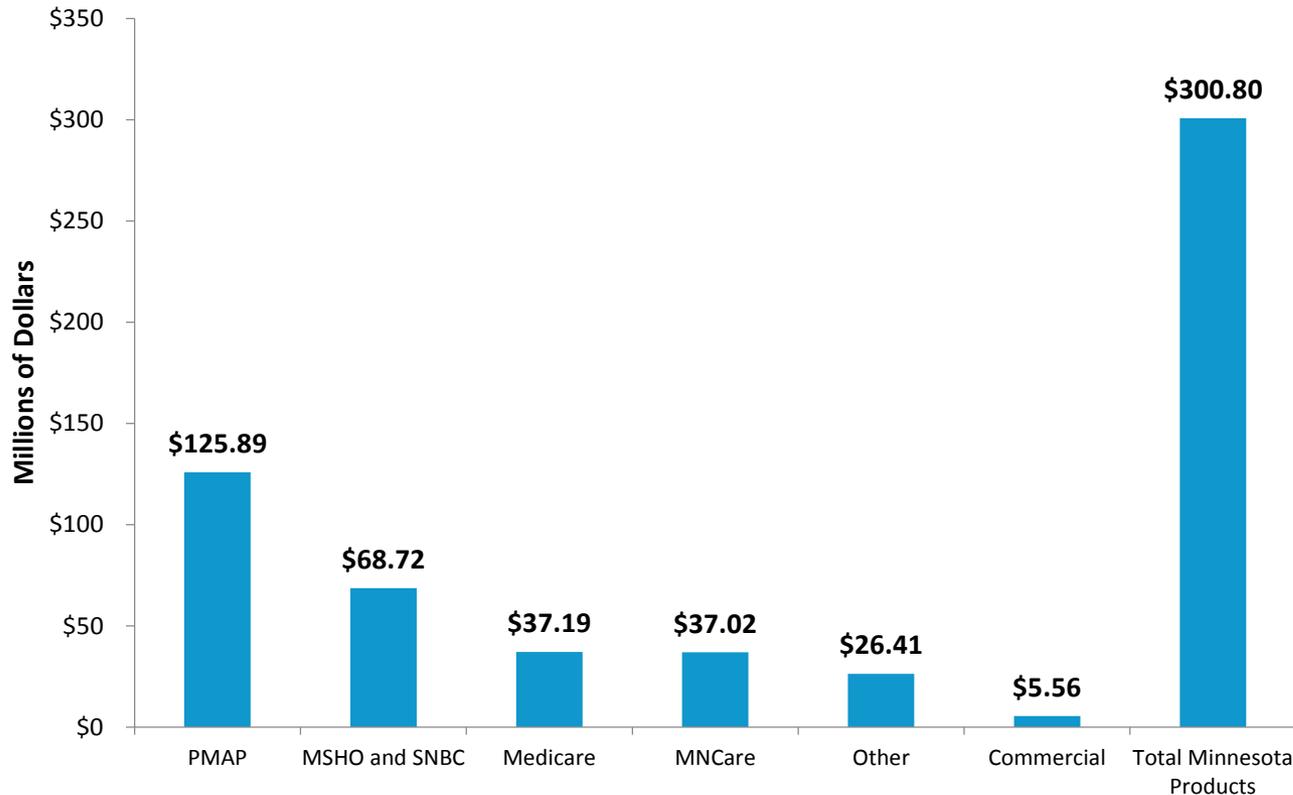
# Minnesota HMO Net Income per Member Month by Product Line, 2009 to 2014



PMAP is Prepaid Medical Assistance Program; PGAMC is General Assistance Medical Care; MSHO is Minnesota Senior Health Options; and MDHO is Minnesota Disability Health Options. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

# Minnesota HMO Net Income by Product Line, 2014

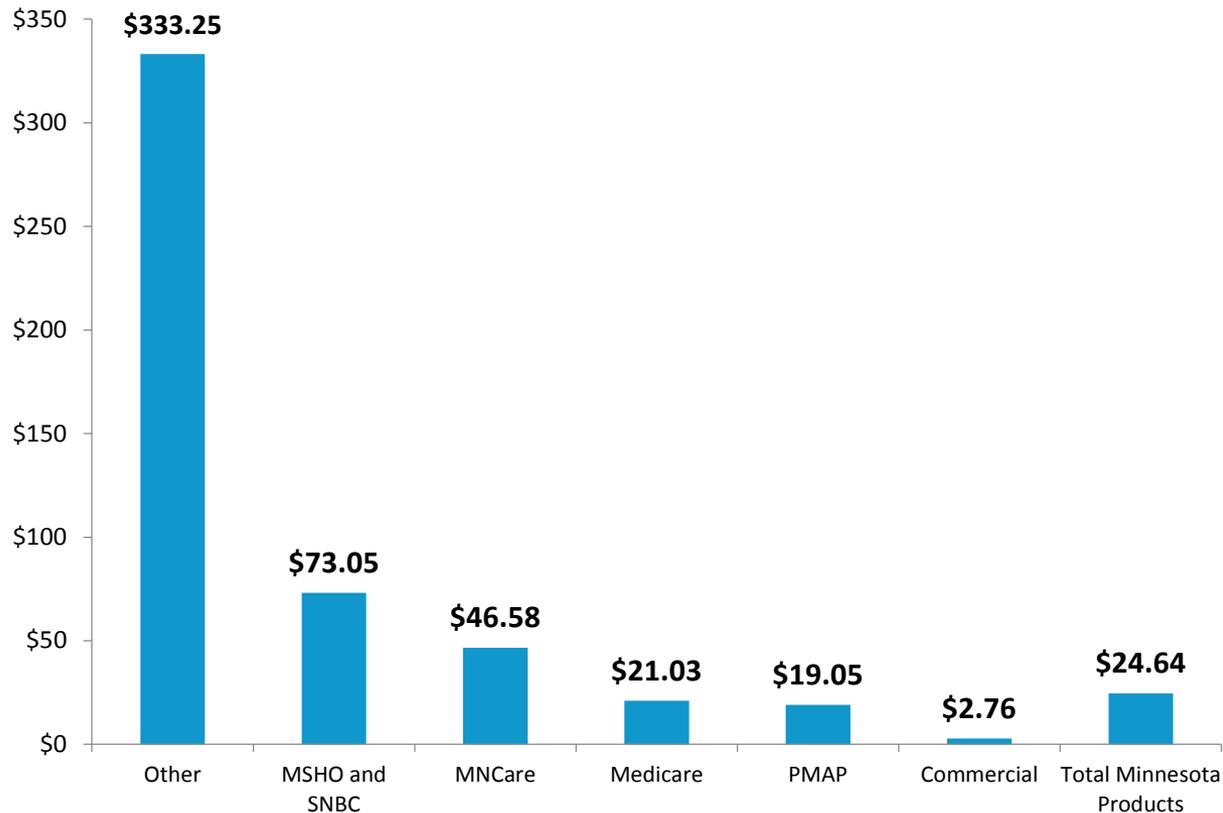


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Source: MDH Health Economics Program analysis of HMO annual reports.

[Summary of graph](#)

# Minnesota HMO Net Income per Member Month by Product Line, 2014



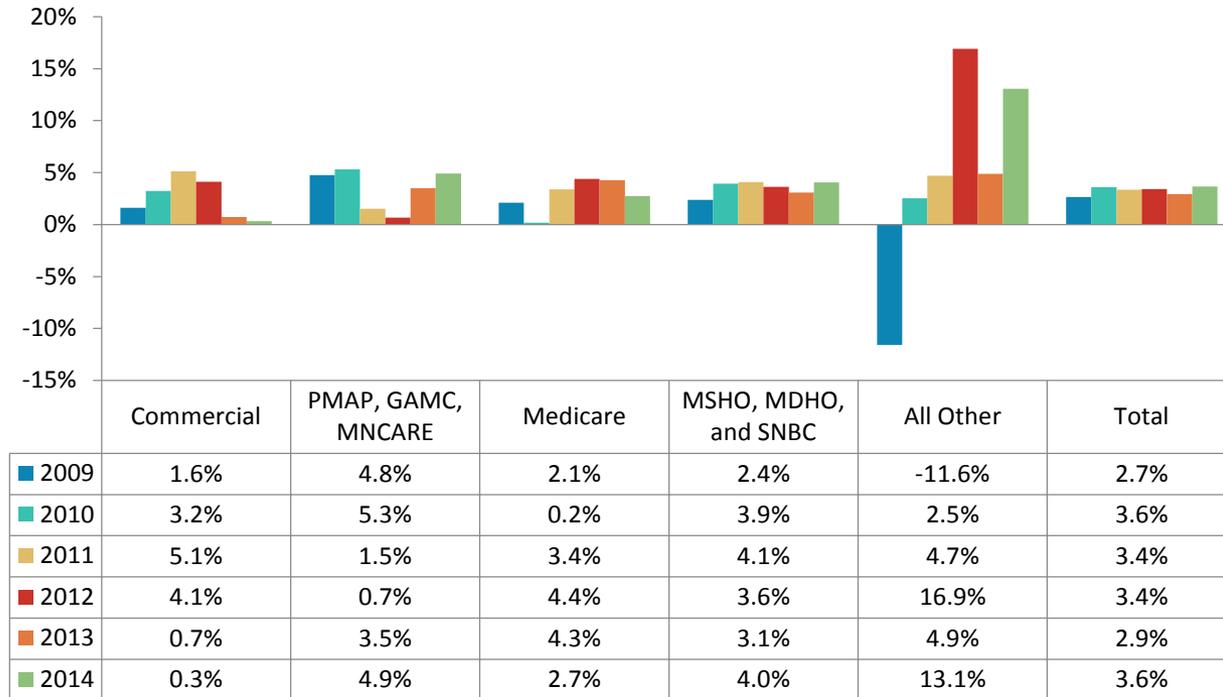
PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options; SNBC is Special Needs Basic Care; All Other includes: Medicare Supplemental, and Dental. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

[Summary of graph](#)

# Minnesota HMO Profitability by Product Line, 2009 to 2014

## Net Income as % of Revenue



PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options; MDHO is Minnesota Disability Health Options; SNBC is Special Needs Basic Care; All Other includes: Medicare Supplemental, and Dental. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, resulting in HMOs returning a total of nearly \$200 million returned to the state and federal government in 2015. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

# Sources of HMO Net Income, 2009 to 2014

In Millions of Dollars	2009	2010	2011	2012	2013	2014
<b><u>Sources of Net Income:</u></b>						
Net underwriting gain/loss	\$123.1	\$181.4	\$161.6	\$174.9	\$173.0	\$231.6
Investment Income	\$52.4	\$69.4	\$44.5	\$39.9	\$39.4	\$52.4
Other	\$0.0	-\$0.2	\$27.5	\$35.5	\$13.7	\$16.8
<b>Net Income</b>	<b>\$175.5</b>	<b>\$250.6</b>	<b>\$233.7</b>	<b>\$250.3</b>	<b>\$226.0</b>	<b>\$300.8</b>
<b>Investment income as % of net income</b>	<b>29.8%</b>	<b>27.7%</b>	<b>19.1%</b>	<b>16.0%</b>	<b>17.4%</b>	<b>17.4%</b>

Minnesota products only. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

# Investment Income as a Percent of Net Income by HMO, 2014

	Investment Income (millions)	Net Income (millions)	Investment Income as % of Net Income
Blue Plus	\$16.9	\$85.7	19.7%
Group Health	\$2.6	\$41.7	6.2%
HealthPartners	\$6.0	\$16.8	35.4%
Gundersen	\$0.0	\$0.1	1.1%
Medica	\$14.3	\$51.8	27.5%
Metropolitan Health Plan	\$0.8	-\$0.3	-285.4%
PreferredOne	\$0.2	-\$2.8	-5.5%
Sanford	\$0.0	\$0.0	3.6%
UCare	\$11.7	\$107.8	10.8%
<b>All HMOs</b>	<b>\$52.4</b>	<b>\$300.8</b>	<b>17.4%</b>

At the end of 2013, DHS and the HMOs agreed to contracts based on the projected health care needs of new enrollees in Medical Assistance and MNCare in 2014. Capitation payments from DHS to HMOs for 2014 enrollees in Medical Assistance and MinnesotaCare were based on projected health care needs (risk scores) of enrollees. In 2015, the payments from 2014 were adjusted based on the actual risk score of enrollees, which were lower than projected, resulting in nearly \$200 million returned to the state and federal government in 2015 as a settle-up. This adjustment is likely not included in 2014 financial statements, thus revenues may be slightly overstated.

Source: MDH Health Economics Program analysis of HMO annual reports.

# Reserves, Medical Expenses, and Regulatory Minimum Level by HMO, 2014

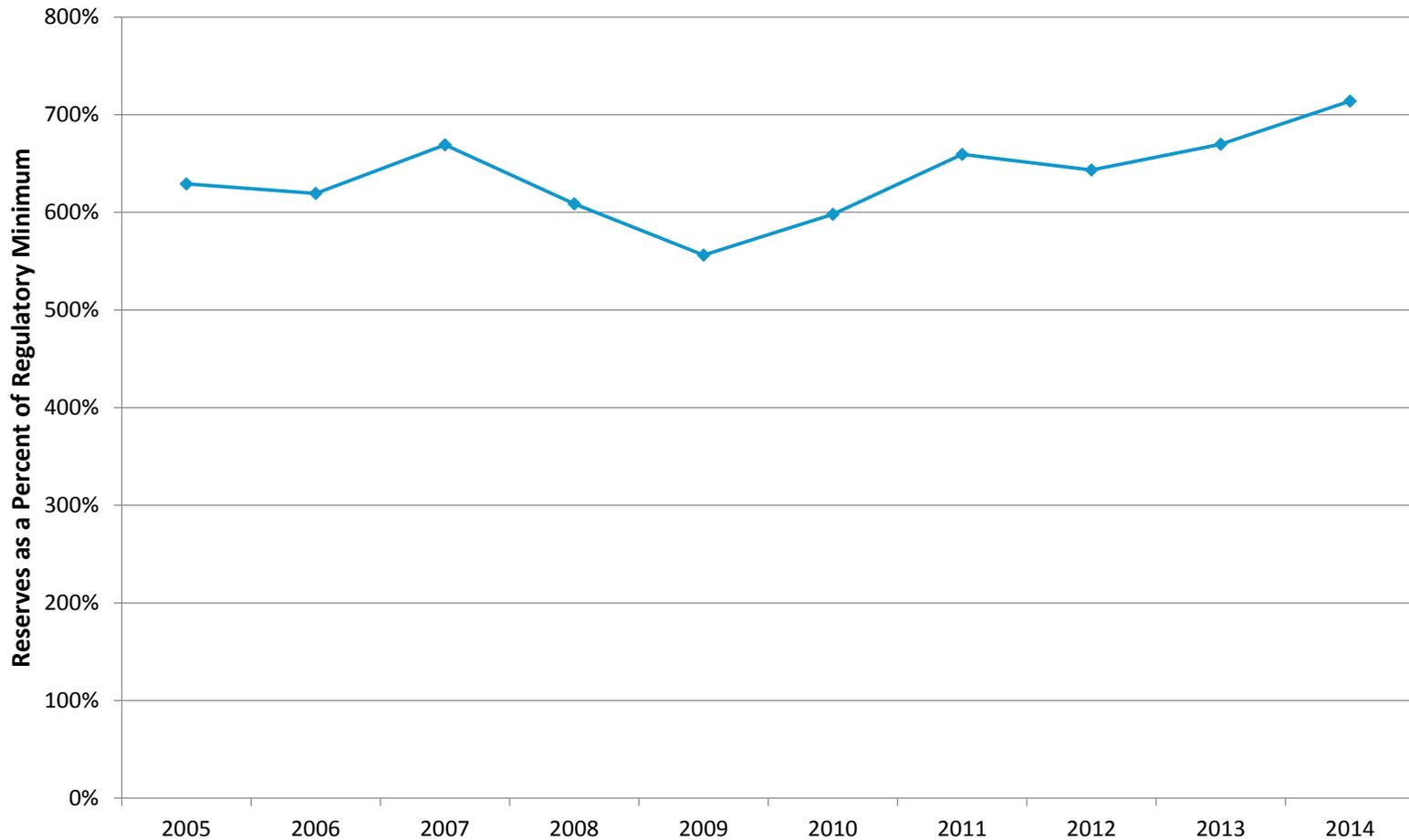
	Reserves (millions)	Total Expenses <sup>1</sup> (millions)	Reserves as % of Total Expenses	Reserves as % of Regulatory Level <sup>2</sup>
Blue Plus	\$530.6	\$689.6	76.9%	1704.0%
Group Health <sup>1</sup>	\$188.4	\$984.7	19.1%	804.1%
Gundersen	\$1.5	\$3.8	40.5%	236.9%
HealthPartners	\$908.6	\$1,212.6	74.9%	614.5%
Medica	\$460.1	\$1,301.2	35.4%	736.6%
Metropolitan Health Plan	\$28.5	\$134.9	21.1%	500.3%
PreferredOne	\$4.8	\$52.5	9.2%	180.5%
Sanford	\$1.2	\$1.8	69.8%	388.5%
UCare	\$536.4	\$2,729.4	19.7%	498.7%
<b>All HMOs</b>	<b>\$2,660.3</b>	<b>\$7,110.6</b>	<b>37.4%</b>	<b>714.0%</b>

<sup>1</sup>Fee-for-service revenue earned was subtracted from expenses to approximate member only expenses.

<sup>2</sup>“Regulatory level” is the authorized control level; total expenses is from line 16 of HMO Minnesota Supplement Report #1. Minnesota products only.

Source: MDH Health Economics Program analysis of HMO annual reports.

# Total Minnesota HMO Reserves Relative to Regulatory Minimum Levels, 2005 to 2014



Source: MDH Health Economics Program analysis of HMO annual reports.

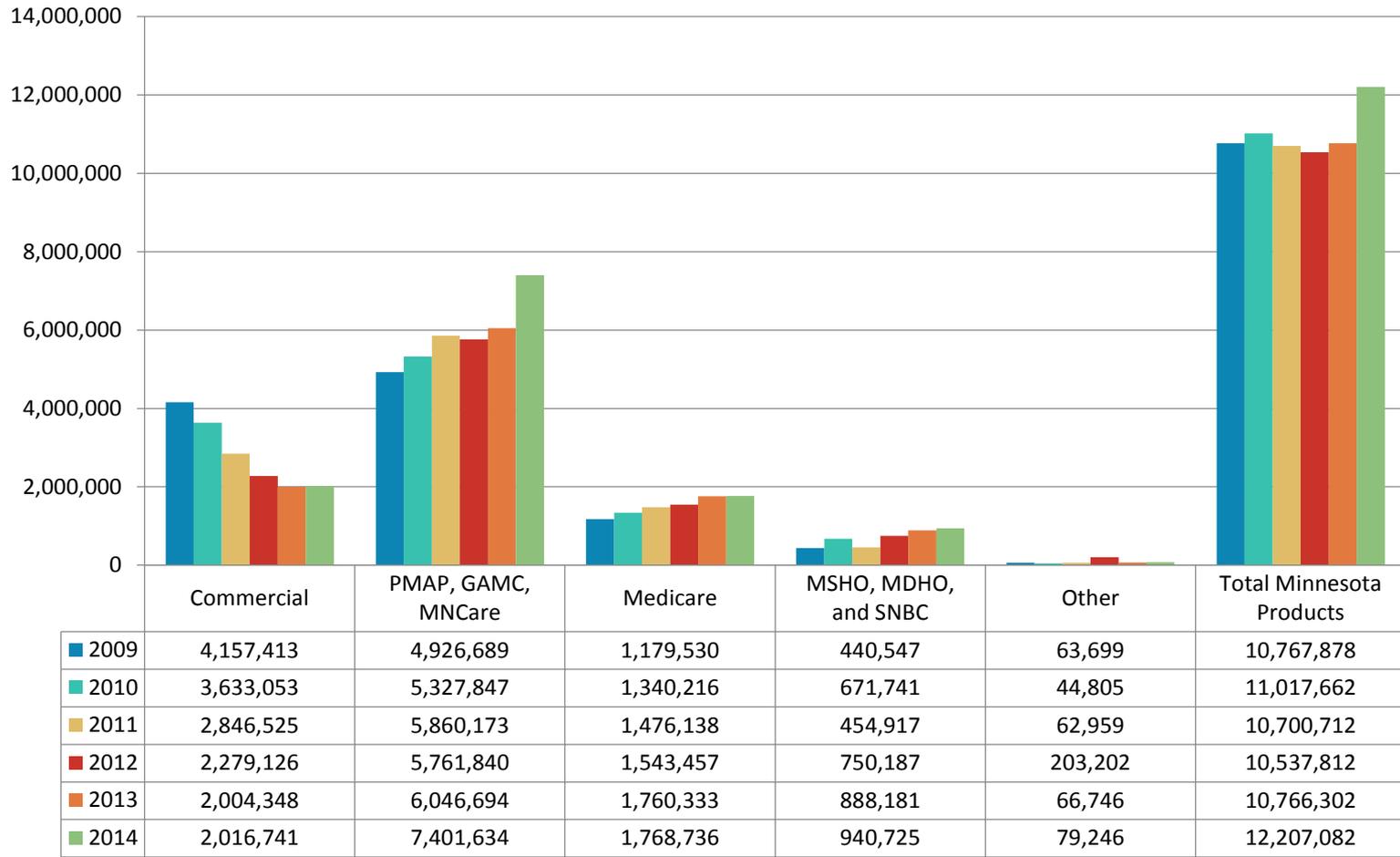
[Summary of graph](#)

# HMO ENROLLMENT STATISTICS

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# Minnesota HMO Member Months by Product Line, 2009 to 2014



Enrollment figures are as of December 31<sup>st</sup> of each year.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options; MDHO is Minnesota Disability Health Options; SNBC is Special Needs Basic Care; All Other includes: Medicare Supplemental, and Dental.

Source: MDH Health Economics Program analysis of HMO annual reports.

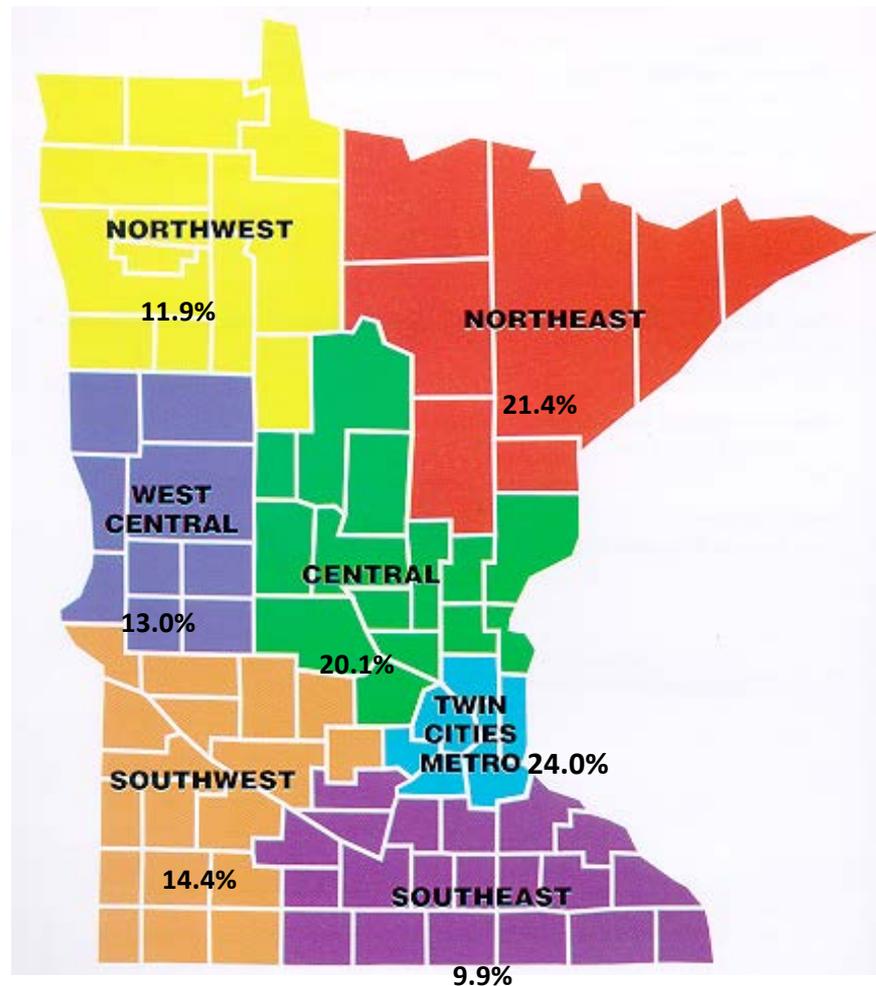
# Distribution of Minnesota HMO Enrollment by Region, 2014

	Northwest	Northeast	West Central	Central	Southwest	Southeast	Twin Cities	Statewide
BluePlus	1,890	1,642	12,527	16,813	23,301	16,447	35,140	107,760
GroupHealth	370	2,187	587	4,801	389	1,517	49,545	59,396
Gundersen	0	0	0	0	0	796	0	796
HealthPartners	1,874	582	482	33,943	2,280	2,545	213,078	254,784
Medica	3,374	22,463	10,388	23,211	582	3,708	119,548	183,274
Metropolitan Health Plan	0	0	1	5	1	0	13,283	13,290
PreferredOne	567	163	609	2,381	248	1,199	5,139	10,306
Sanford	0	0	0	0	443	13	1	457
Ucare	12,123	29,697	4,725	52,476	12,806	64,745	270,048	446,620
<b>All HMOs</b>	<b>20,198</b>	<b>56,734</b>	<b>29,319</b>	<b>133,630</b>	<b>40,050</b>	<b>90,970</b>	<b>705,782</b>	<b>1,076,683</b>

# Minnesota HMO Enrollment as Percent of Regional Population, 2014

	Northwest	Northeast	West Central	Central	Southwest	Southeast	Twin Cities	Statewide
BluePlus	1.1%	0.6%	5.6%	2.5%	8.4%	1.8%	1.2%	2.0%
GroupHealth	0.2%	0.8%	0.3%	0.7%	0.1%	0.2%	1.7%	1.1%
Gundersen	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
HealthPartners	1.1%	0.2%	0.2%	5.1%	0.8%	0.3%	7.3%	4.7%
Medica	2.0%	8.5%	4.6%	3.5%	0.2%	0.4%	4.1%	3.4%
Metropolitan Health Plan	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%	0.2%
PreferredOne	0.3%	0.1%	0.3%	0.4%	0.1%	0.1%	0.2%	0.2%
Sanford	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%
Ucare	7.1%	11.2%	2.1%	7.9%	4.6%	7.1%	9.2%	8.2%
<b>All HMOs</b>	<b>11.9%</b>	<b>21.4%</b>	<b>13.0%</b>	<b>20.1%</b>	<b>14.4%</b>	<b>9.9%</b>	<b>24.0%</b>	<b>19.7%</b>

# Minnesota HMO Enrollment as Percent of Regional Population, 2014

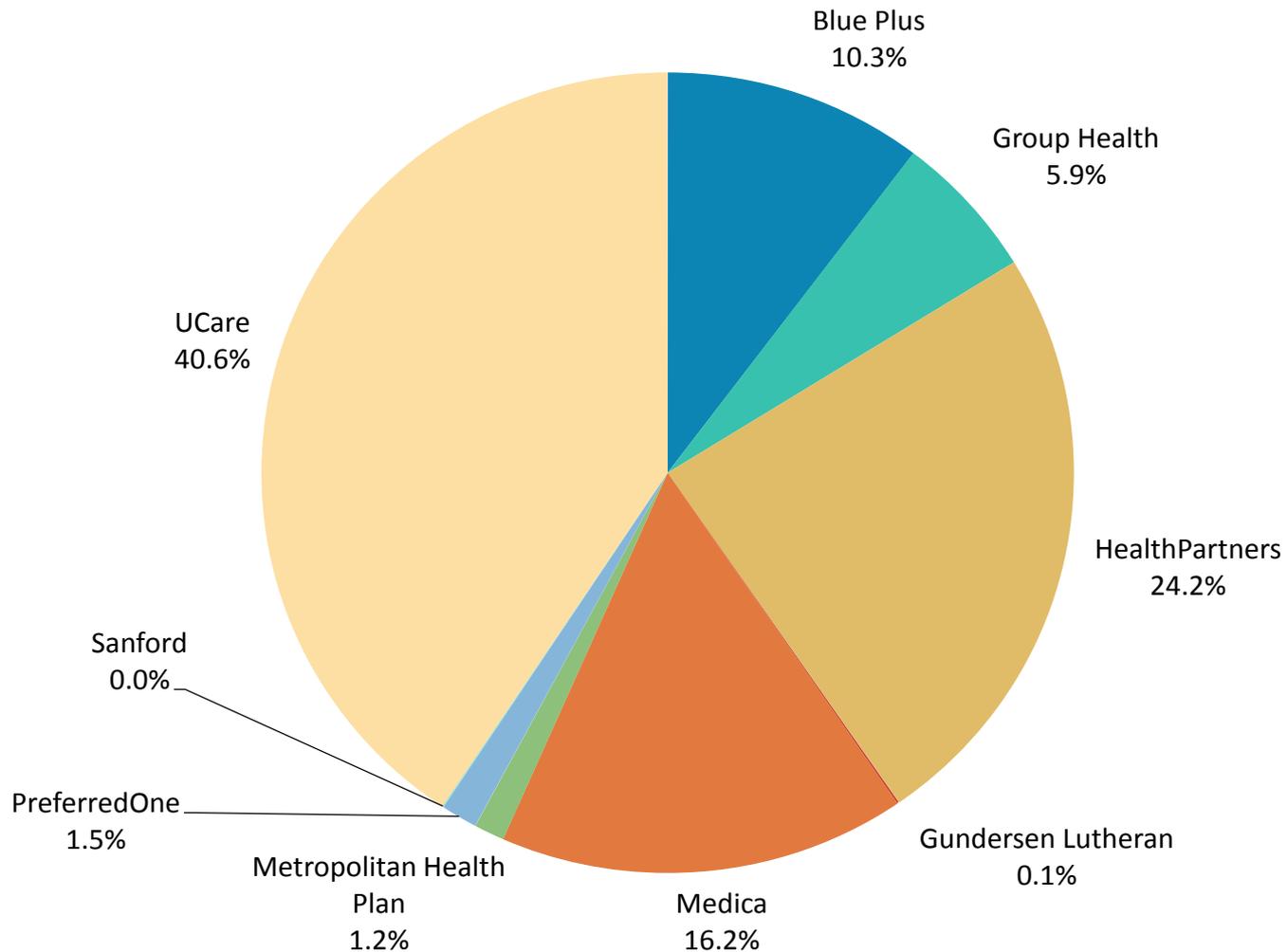


Enrollment figures are as of December 31<sup>st</sup> of each year.

Source: MDH Health Economics Program analysis of HMO annual reports; U.S. Census Bureau.

[Summary of map](#)

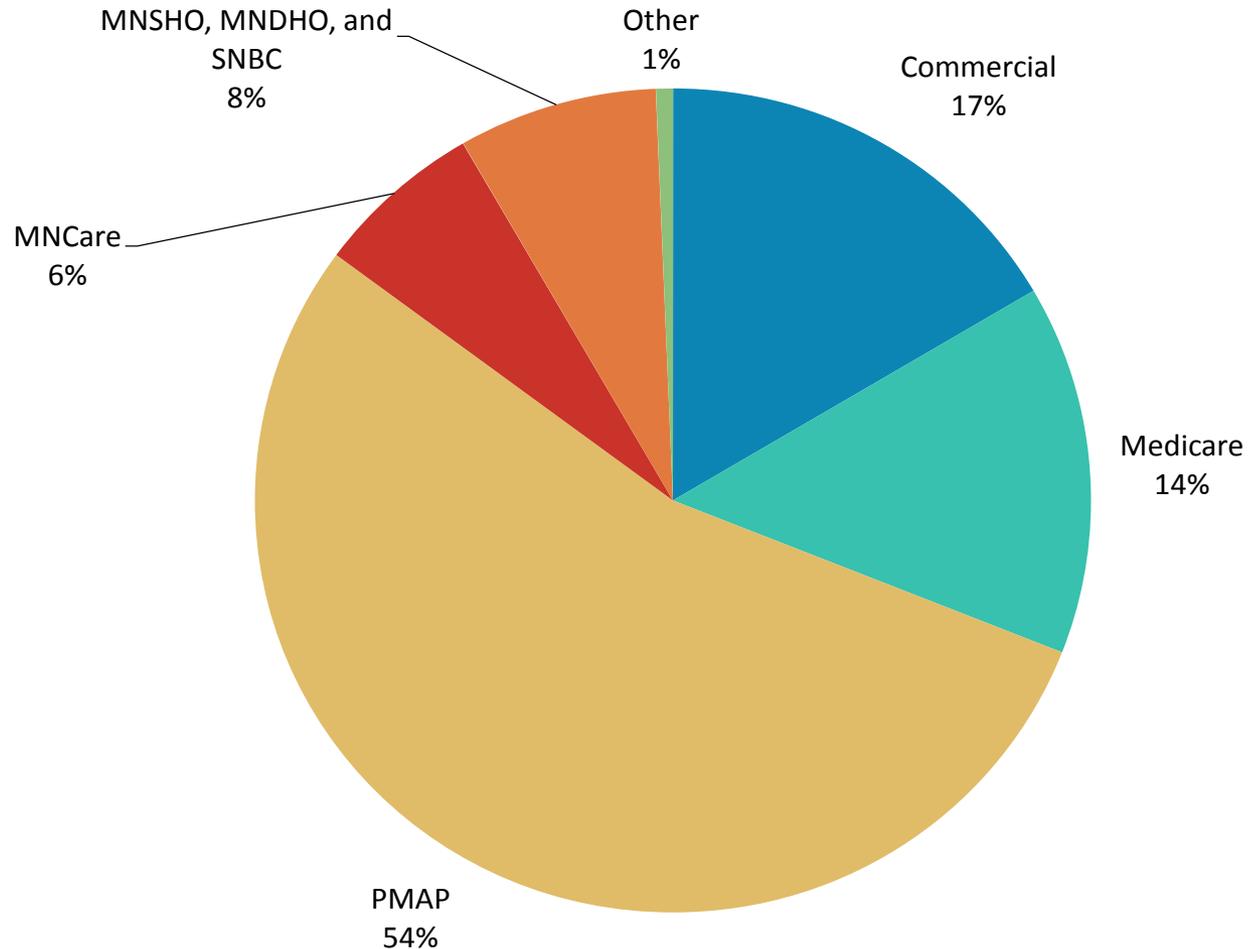
# Minnesota HMO Member Months by Firm, 2014



Source: MDH Health Economics Program analysis of Minnesota Supplement # 1 available April 1<sup>st</sup> of the following calendar year.

[Summary of chart](#)

# Minnesota HMO Member Months by Product Line, 2014

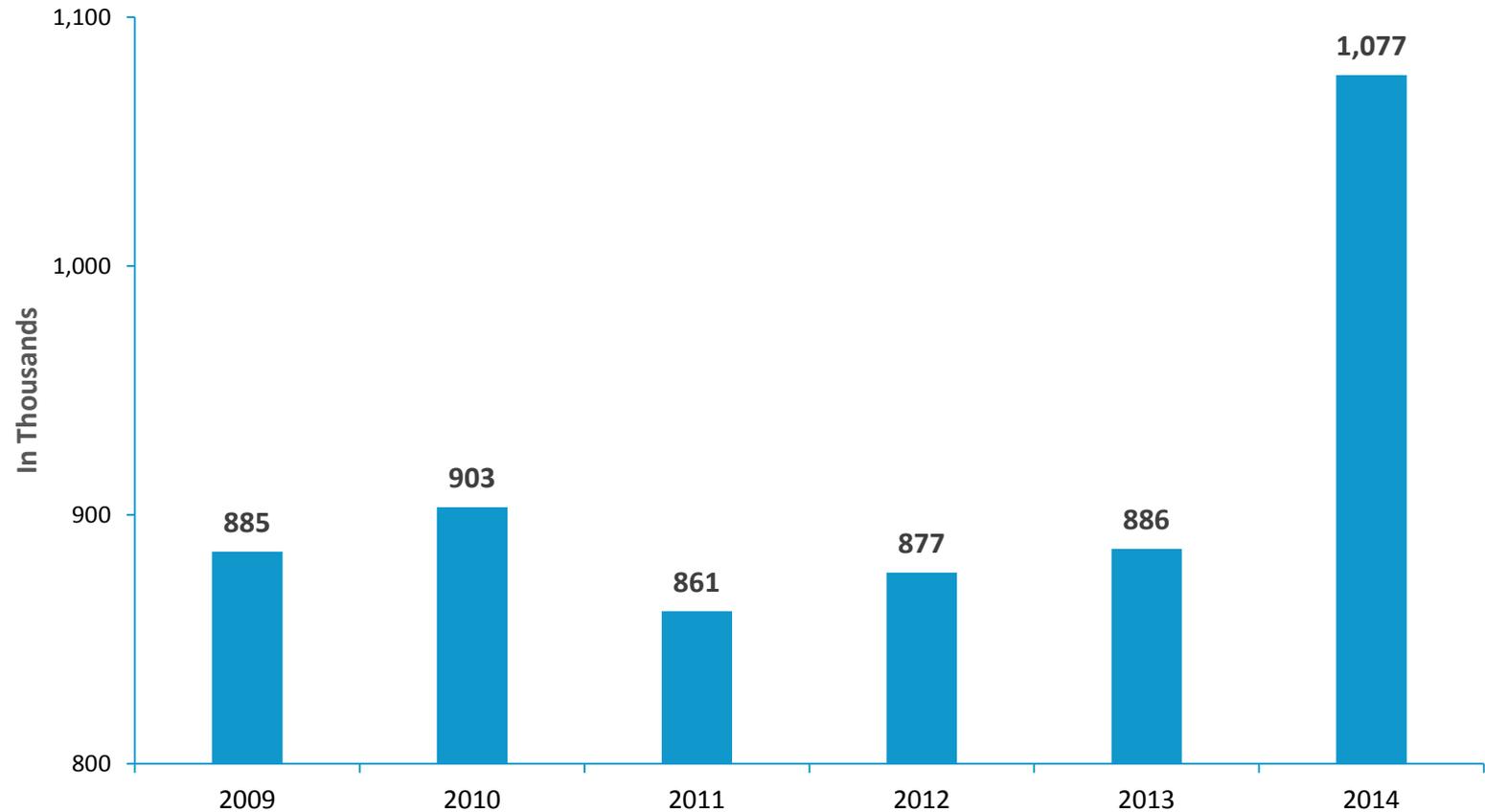


Source: MDH Health Economics Program analysis of Minnesota Supplement # 1 available April 1<sup>st</sup> of the following calendar year.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options; MDHO is Minnesota Disability Health Options; SNBC is Special Needs Basic Care.

[Summary of chart](#)

# Total Minnesota HMO Enrollment 2009 to 2014



Enrollment figures are as of December 31<sup>st</sup> of each year.  
Source: MDH Health Economics Program analysis of HMO annual reports.  
[Summary of graph](#)

# Minnesota HMO Market Penetration, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Total HMO Enrollment	885,242	903,085	861,319	876,860	886,381	1,076,683
Minnesota Population	5,281,203	5,310,337	5,347,108	5,379,646	5,420,380	5,457,173
HMO Enrollment as of December 31 <sup>st</sup> Percent of Population, by Type of Product						
Commercial	6.0%	5.2%	4.0%	3.2%	2.9%	3.0%
Public	10.7%	11.8%	12.1%	13.1%	13.4%	16.7%
<b>All Products</b>	<b>16.8%</b>	<b>17.0%</b>	<b>16.1%</b>	<b>16.3%</b>	<b>16.4%</b>	<b>19.7%</b>

# HMO Enrollment in Minnesota by Product Line, 2009 to 2014

	2009	2010	2011	2012	2013	2014
<b>Commercial</b>	318,285	278,485	212,905	172,226	159,627	163,777
<b>Public Programs</b>						
Medicare Advantage	63,017	74,571	82,944	86,268	100,880	99,484
Other Medicare	77,954	93,486	77,860	110,323	118,661	126,541
PMAP	286,744	305,578	367,290	389,496	376,538	610,650
GAMC	19,406	0	0	0	0	0
MNCare	119,836	150,965	120,320	118,547	130,675	76,231
<b>Public Programs, Total</b>	566,957	624,600	648,414	704,634	726,754	912,906
<b>All Products</b>	<b>885,242</b>	<b>903,085</b>	<b>861,319</b>	<b>876,860</b>	<b>886,381</b>	<b>1,076,683</b>

Enrollment figures are as of December 31<sup>st</sup> of each year.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options

Source: MDH Health Economics Program analysis of HMO annual reports

# Rates of Enrollment Growth for Minnesota HMOs by Product Line, 2009 to 2014

	2009	2010	2011	2012	2013	2014
<b>Commercial</b>	(11.7%)	(12.5%)	(23.5%)	(19.1%)	(7.3%)	2.6%
<b>Public Programs</b>						
Medicare Advantage	24.1%	18.3%	11.2%	4.0%	16.9%	(1.4%)
Other Medicare	3.7%	19.9%	(16.7%)	41.7%	7.6%	6.6%
PMAP	12.4%	6.6%	20.2%	6.0%	(3.3%)	62.2%
GAMC	19.7%	(100.0%)				
MNCare	12.8%	26.0%	(20.3%)	(1.5%)	10.2%	(41.7%)
<b>Public Programs, Total</b>	12.6%	10.2%	3.8%	8.7%	3.1%	25.6%
<b>All Products</b>	<b>2.4%</b>	<b>2.0%</b>	<b>(4.6%)</b>	<b>1.8%</b>	<b>1.1%</b>	<b>21.5%</b>

Enrollment figures are as of December 31<sup>st</sup> of each year.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options

Source: MDH Health Economics Program analysis of HMO annual reports

# HMO Enrollment in Minnesota by Firm, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	136,210	176,357	201,754	207,096	228,228	230,331
First Plan	11,130	0	0	0	0	0
Group Health	51,334	48,626	50,827	51,397	53,874	59,396
Gundersen				33	430	796
HealthPartners	286,953	265,930	227,872	225,421	215,547	254,784
Medica	171,445	192,087	176,692	138,526	141,302	183,274
Metropolitan Health Plan	18,662	18,112	19,009	10,105	10,344	13,290
PreferredOne	37,596	37,440	21,633	15,429	15,475	10,306
Sanford	965	813	899	750	616	457
UCare	172,259	194,251	215,915	302,017	310,546	446,620
<b>All HMOs</b>	<b>885,242</b>	<b>903,085</b>	<b>861,319</b>	<b>876,860</b>	<b>886,381</b>	<b>1,076,683</b>
<b>Change from previous year</b>	2.4%	2.0%	(4.6%)	1.8%	1.1%	21.5%

# Commercial Enrollment in Minnesota HMOs, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	16,302	11,114	9,661	4,998	3,084	2,771
First Plan	618	0	0	0	0	0
Group Health	15,030	11,121	10,151	8,884	7,950	12,107
Gundersen				33	64	203
HealthPartners	226,436	201,758	157,709	141,152	131,648	136,984
Medica	21,620	16,585	13,160	1,257	1,022	555
Metropolitan Health Plan	0	0	0	0	0	0
PreferredOne	37,596	37,440	21,633	15,429	15,475	10,306
Sanford	683	467	591	473	384	280
UCare	0	0	0	0	0	571
<b>All HMOs</b>	<b>318,285</b>	<b>278,485</b>	<b>212,905</b>	<b>172,226</b>	<b>159,627</b>	<b>163,777</b>
<b>Change from previous year</b>	<b>(11.7%)</b>	<b>(12.5%)</b>	<b>(23.5%)</b>	<b>(19.1%)</b>	<b>(7.3%)</b>	<b>2.6%</b>

# Medicare Advantage Enrollment in Minnesota HMOs, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	0	0	0	0	11,193	8,339
First Plan	0	0	0	0	0	0
Group Health	0	0	0	0	0	0
Gundersen				0	366	593
HealthPartners	839	503	16	31	31	42
Medica	0	0	0	0	0	0
Metropolitan Health Plan	218	46	0	0	0	0
PreferredOne	0	0	0	0	0	0
Sanford	0	0	308	0	0	0
UCare	61,960	74,022	82,620	86,237	89,290	90,510
<b>All HMOs</b>	<b>63,017</b>	<b>74,571</b>	<b>82,944</b>	<b>86,268</b>	<b>100,880</b>	<b>99,484</b>
<b>Change from previous year</b>	24.1%	18.3%	11.2%	4.0%	16.9%	(1.4%)

# Other Medicare Enrollment in Minnesota HMOs, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	9,622	9,875	9,422	8,878	8,415	7,960
First Plan	1,263	0	0	0	0	0
Group Health	36,304	37,505	40,676	42,513	45,924	47,289
Gundersen				0	0	0
HealthPartners	4,424	4,611	4,604	4,769	4,768	4,826
Medica	14,341	30,462	12,562	25,686	27,907	32,377
Metropolitan Health Plan	1,015	1,161	1,286	3,373	3,514	3,296
PreferredOne	0	0	0	0	0	0
Sanford	282	346	0	277	232	177
UCare	10,703	9,526	9,310	24,827	27,901	30,616
<b>All HMOs</b>	<b>77,954</b>	<b>93,486</b>	<b>77,860</b>	<b>110,323</b>	<b>118,661</b>	<b>126,541</b>
<b>Change from previous year</b>	3.7%	19.9%	(16.7%)	41.7%	7.6%	6.6%

Enrollment figures are as of December 31<sup>st</sup> of each year.

Other Medicare includes Medicare Cost, Minnesota Senior Health Options, Minnesota Disability Health Options, MN Senior Care Plus, and Special Needs Basic Care

Source: MDH Health Economics Program analysis of HMO annual reports

# PMAP Enrollment in Minnesota HMOs, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	61,445	66,983	82,200	78,279	72,058	77,902
First Plan	5,334	0	0	0	0	0
Group Health	0	0	0	0	0	0
Gundersen				0	0	0
HealthPartners	36,325	38,933	49,508	60,953	58,456	103,420
Medica	97,039	103,288	117,697	86,521	85,429	130,050
Metropolitan Health Plan	13,537	14,176	16,207	6,732	6,830	9,994
PreferredOne	0	0	0	0	0	0
Sanford	0	0	0	0	0	0
UCare	73,064	82,198	101,678	157,011	153,765	289,284
<b>All HMOs</b>	<b>286,744</b>	<b>305,578</b>	<b>367,290</b>	<b>389,496</b>	<b>376,538</b>	<b>610,650</b>
<b>Change from previous year</b>	12.4%	6.6%	20.2%	6.0%	(3.3%)	62.2%

Enrollment figures are as of December 31<sup>st</sup> of each year.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options

Source: MDH Health Economics Program Analysis of HMO Annual Report

# MNCare Enrollment in Minnesota HMOs, 2009 to 2014

	2009	2010	2011	2012	2013	2014
Blue Plus	45,164	57,854	47,189	41,027	43,497	10,788
First Plan	3,417	0	0	0	0	0
Group Health	0	0	0	0	0	0
Gundersen				0	0	0
HealthPartners	15,191	20,125	16,035	18,516	20,644	9,512
Medica	32,103	41,752	33,273	25,062	26,944	20,292
Metropolitan Health Plan	2,202	2,729	1,516	0	0	0
PreferredOne	0	0	0	0	0	0
Sanford	0	0	0	0	0	0
UCare	21,759	28,505	22,307	33,942	39,590	35,639
<b>All HMOs</b>	<b>119,836</b>	<b>150,965</b>	<b>120,320</b>	<b>118,547</b>	<b>130,675</b>	<b>76,231</b>
<b>Change from previous year</b>	12.8%	26.0%	(20.3%)	(1.5%)	10.2%	(41.7%)

# Distribution of Minnesota HMO Enrollment by Product Line, 2014

	Commercial	Medicare Advantage	Other Medicare	PMAP	MNCare	All Products
BluePlus	2,771	8,339	7,960	77,902	10,788	107,760
GroupHealth	12,107	0	47,289	0	0	59,396
Gundersen	203	593	0	0	0	796
HealthPartners	136,984	42	4,826	103,420	9,512	254,784
Medica	555	0	32,377	130,050	20,292	183,274
Metropolitan Health Plan	0	0	3,296	9,994	0	13,290
PreferredOne	10,306	0	0	0	0	10,306
Sanford	280	0	177	0	0	457
Ucare	571	90,510	30,616	289,284	35,639	446,620
<b>All HMOs</b>	<b>163,777</b>	<b>99,484</b>	<b>126,541</b>	<b>610,650</b>	<b>76,231</b>	<b>1,076,683</b>

Enrollment figures are as of December 31st of each year.

Other Medicare includes Medicare Cost, Minnesota Senior Health Options, Minnesota Disability Health Options, MN Senior Care Plus, and Special Needs Basic Care

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options

Source: MDH Health Economics Program analysis of HMO annual reports

# Minnesota HMO Enrollment by Firm and Age, 2014

	<15	15-29	30-44	45-54	55-64	65+	Total
BluePlus	12.0%	10.2%	9.4%	8.4%	8.3%	8.7%	<b>9.9%</b>
Group Health	0.3%	0.9%	1.0%	2.3%	7.8%	24.4%	<b>5.6%</b>
Gundersen	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	<b>0.1%</b>
HealthPartners	24.7%	27.8%	31.4%	34.5%	29.0%	3.8%	<b>24.2%</b>
Medica	19.7%	18.1%	18.0%	18.6%	18.5%	8.2%	<b>16.9%</b>
Metropolitan Health Plan	0.0%	1.7%	2.1%	2.5%	2.2%	0.5%	<b>1.2%</b>
PreferredOne	0.7%	1.2%	1.4%	1.8%	1.5%	0.1%	<b>1.0%</b>
Sanford	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	<b>0.0%</b>
UCare	42.7%	40.1%	36.7%	31.9%	32.6%	53.9%	<b>41.1%</b>
<b>All HMOs</b>	<b>100.0%</b>						

Includes health plan members that are non-Minnesota residents.  
 Enrollment figures are as of December 31<sup>st</sup> of each year.  
 Source: MDH Health Economics Program analysis of HMO annual reports.

# Distribution of Total Minnesota HMO Enrollment by Product Line and Age, 2014

	<15	15-29	30-44	45-54	55-64	65+	Total
Commercial	18.6%	21.3%	23.6%	18.6%	15.6%	2.3%	<b>100.0%</b>
Medicare Advantage	0.0%	0.0%	0.1%	0.5%	2.2%	97.1%	<b>100.0%</b>
Other Medicare	0.0%	4.8%	8.9%	9.7%	13.8%	62.7%	<b>100.0%</b>
PMAP	42.6%	25.3%	17.4%	8.2%	5.8%	0.7%	<b>100.0%</b>
MNCare	1.5%	25.1%	32.0%	18.9%	19.7%	2.7%	<b>100.0%</b>
<b>Total</b>	<b>27.0%</b>	<b>19.9%</b>	<b>16.8%</b>	<b>10.1%</b>	<b>8.9%</b>	<b>17.3%</b>	<b>100.0%</b>

Includes health plan members that are non-Minnesota residents.

PMAP is Prepaid Medical Assistance Program; MSHO is Minnesota Senior Health Options

Enrollment figures are as of December 31<sup>st</sup> of each year.

Source: MDH Health Economics Program analysis of HMO annual reports

# Additional Information from the Health Economics Program Available Online

- Health Economics Program Home Page
  - [Health Economics Program Home Page](#)
- Publications
  - [Health Economics Program Publications](#)
- Health Care Market Statistics (Presentation Slide Decks)
  - [Health Economics Program Chartbook Homepage](#)
- Interactive Health Insurance Statistics
  - [Interactive Health Insurance Statistics](#)

A summary of the charts and graphs contained within is provided at [Chartbook Summaries – Section 7](#). Direct links are listed on each page. Please contact the Health Economics Program at 651-201-3550 or [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.