



## Chartbook Section 7: Health Plan Companies

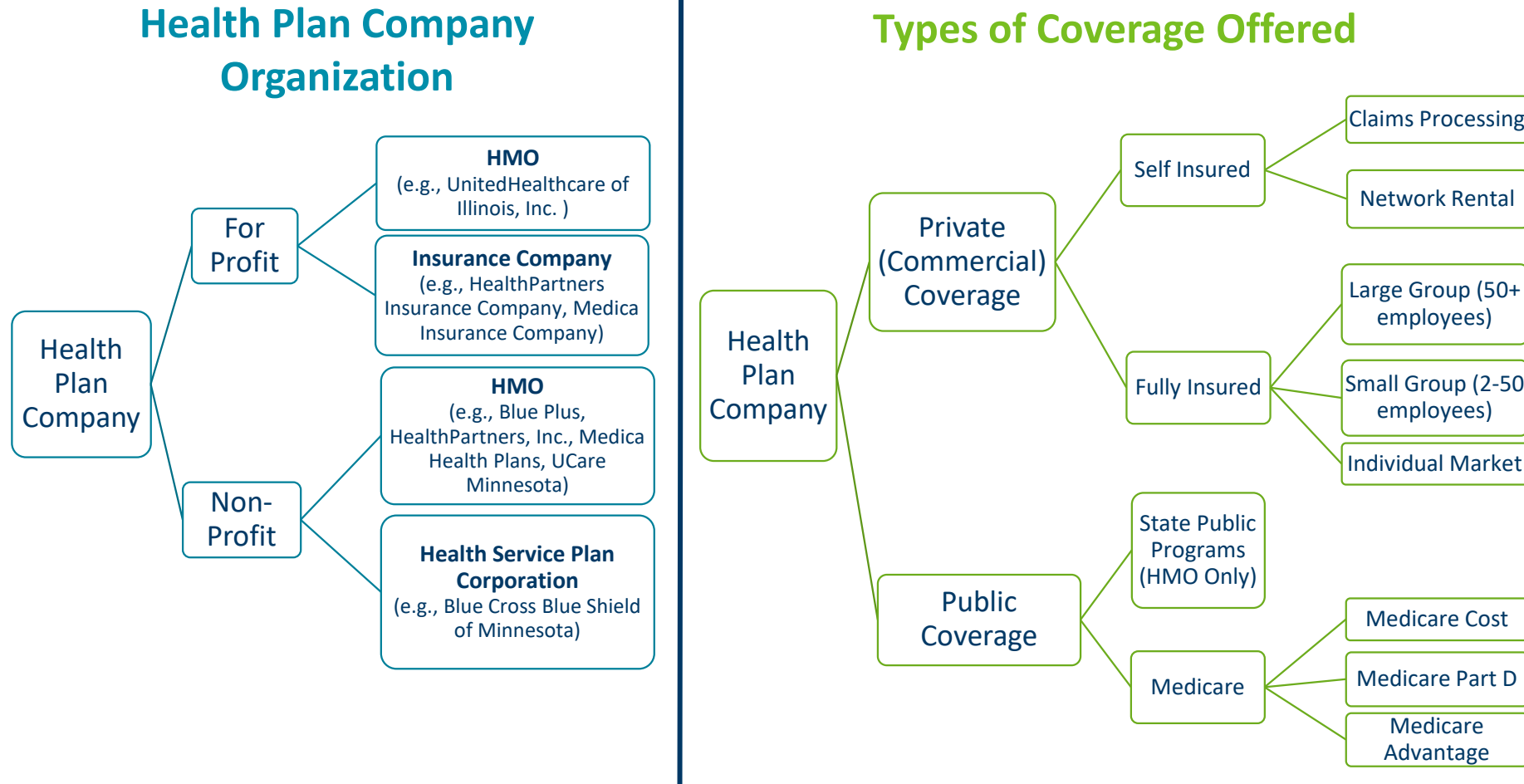
# Section 7: Health Plan Companies

- Private health plan company market shares
- HMO financial statistics
  - Net income & margins
  - Reserves
- HMO enrollment statistics

This slide deck is part Minnesota's Health Care Markets Chartbook, an annual review of key metrics in health care access, coverage, market competition and health care costs ([MN Statutes, Section 144.70](#); <https://www.revisor.mn.gov/statutes/cite/144.70>)

A summary of the charts and graphs contained within is provided on the [MDH website \(http://www.health.state.mn.us/data/economics/chartbook/summaries/section7summaries.html\)](http://www.health.state.mn.us/data/economics/chartbook/summaries/section7summaries.html). Direct links are listed on each page. Please contact the Health Economics Program at 651-201-4520 or [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.

# Ways to Describe Health Plan Companies and Coverage Types



Figures are for illustration purposes only and do not include all health plan companies and all types of public and private coverage. [Summary of Diagrams](#)

# Key Terms

Listed in the order they are used in the chartbook

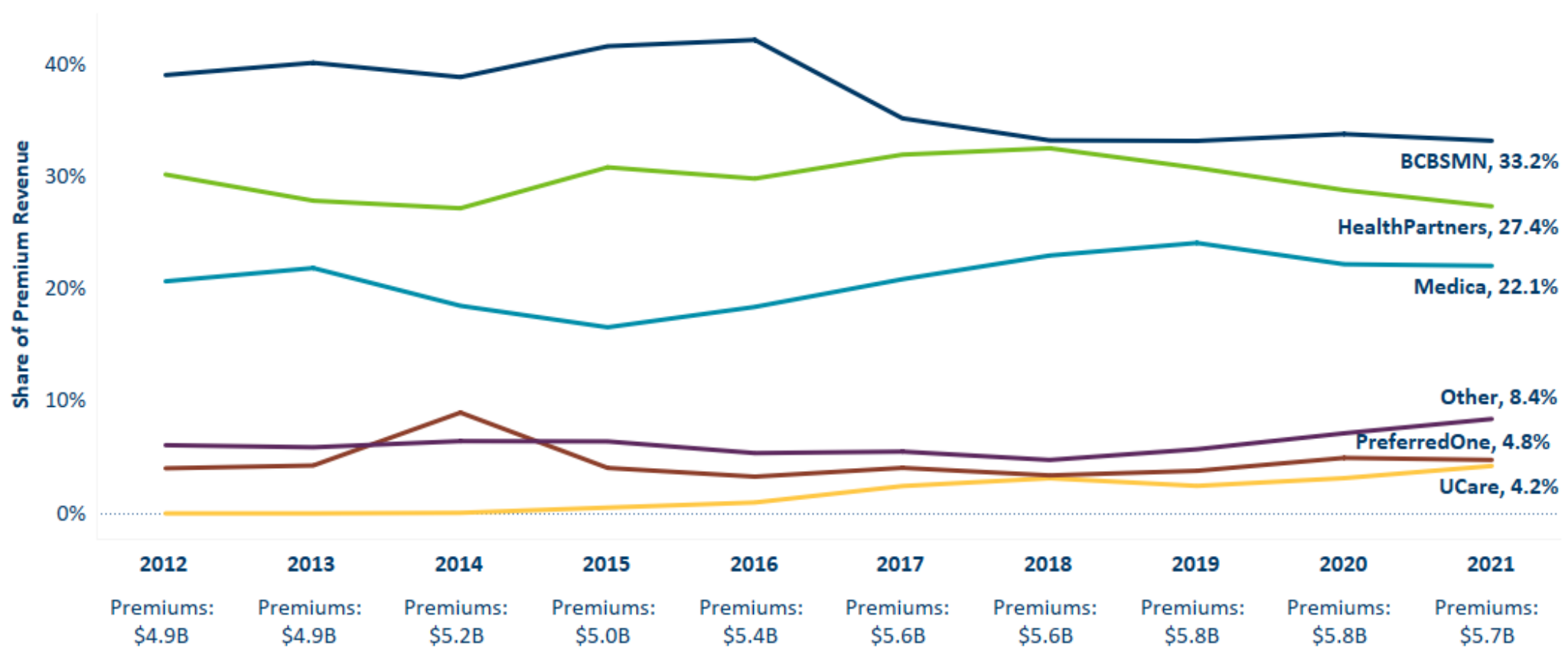
- **Fully-insured plan** – Employer health insurance coverage where the health insurance company takes on the risk of medical bills for employees and their dependents (employer purchases plan from insurance company).
- **Health Maintenance Organizations (HMO)** – corporations which provide comprehensive 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.
- **Market share** – the allocation of revenues by source of coverage, health plan company market share, HMO status, and non-profit status. Data is based on the fully insured private (commercial) market.
- **Net income** – The amount of money a business has after all expenses (including non-operating expenses) have been paid; this can also be used as an indicator of a business' profitability.
- **Operating income** – The amount of money a business has after all operating expenses have been paid.
- **Premiums** – the amount paid for health insurance each month.
- **Product Lines** – these are the different types of health insurance provided by public programs.
  - **PMAP** – Prepaid Medical Assistance Program
  - **MSC+** – Minnesota Senior Care Plus. MSC+ data prior to 2017 was not consistently broken out by health plan companies prior to 2017 and is included in the MSC+ category, as able.
  - **MSHO** – Minnesota Senior Health Options
  - **SNBC** – Special Needs Basic Care
  - **Medicare** – Medicare Choice, Medicare Cost, and Medicare Advantage plans
  - **All Other** – Medicare Part D (standalone), Medicare Supplement and Select products. Net income and profitability also include Dental product financial reporting.
- **Total Revenue** – the amount of money a business makes from all products and services the business sells, prior to any expenses.

# Health Plan Companies: Market Share

(includes HMO and non-HMO health plan companies)

Information contained in this section illustrates the allocation of revenues by source of coverage, health plan company market share, HMO status, and non-profit status. Data is based on the fully insured private (commercial) market.

# Health Plan Company Market Shares: Fully Insured Private Market

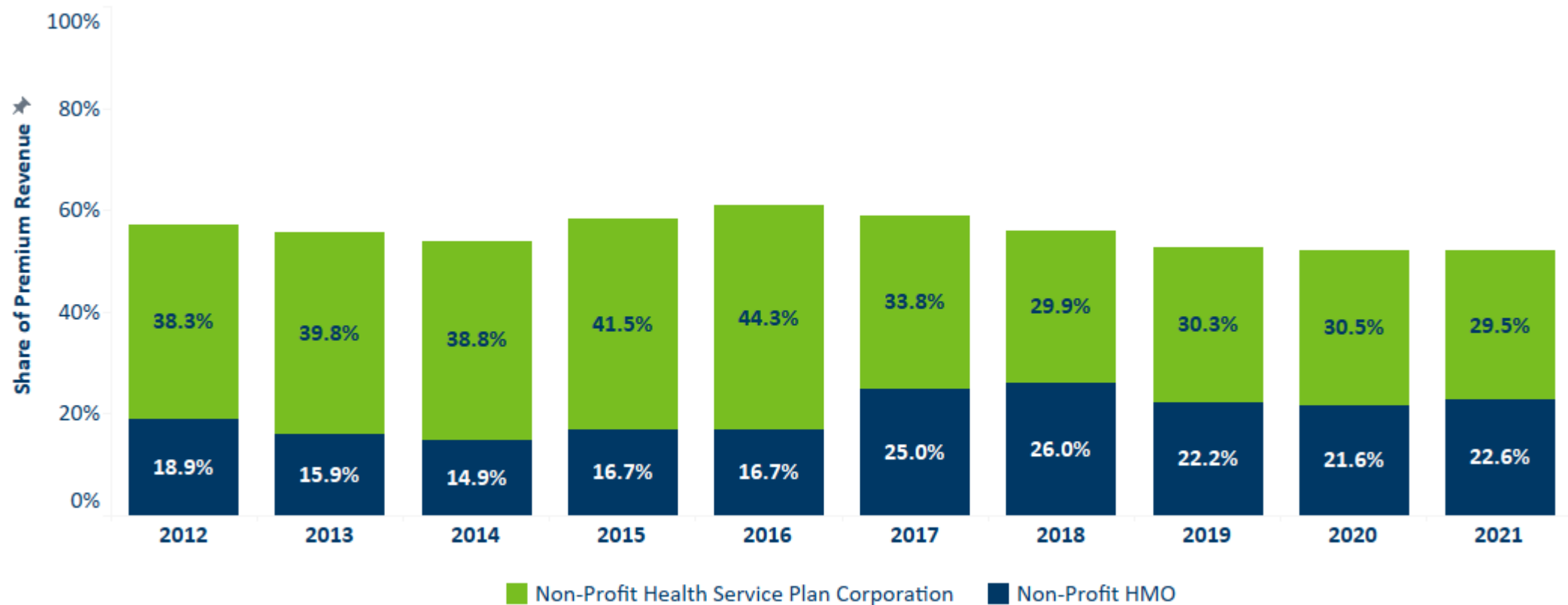


Companies with common ownership were treated as one entity. For example, BCBSMN includes Blue Cross Blue Shield of MN and Blue Plus. Fully insured private (commercial) market only, market share based on medical premium volume only; it does not include dental premium volume. Market shares for small group and individual markets are available in [Health Care Markets Chartbook Section 4 \(https://www.health.state.mn.us/data/economics/chartbook/docs/section4.pdf\)](https://www.health.state.mn.us/data/economics/chartbook/docs/section4.pdf). UCare entered the private market in 2014.

Source: MDH Health Economics Program, analysis of Health Plan Financial and Statistical Reports which covers health plan companies with over \$3 million in annual premium revenue, as well as non-profit health plan companies. Data as of March 8, 2023.

[Summary of Graph](#)

# Market Share of Minnesota Non-Profit Health Plan Companies and HMOs: Fully Insured Private Market



Fully insured private (commercial) market only, market share based on medical premium volume only; it does not include dental premium volume. Non-profit health plan companies include both non-profit HMOs and non-profit health service plan companies, which pay a 1.0% premium tax. HMOs are licensed pursuant to Minnesota Statutes, chapter 62D and Minnesota Rules, part 4685.

Source: MDH Health Economics Program, analysis of Health Plan Financial and Statistical Reports which covers health plan companies with over \$3 million in annual premium revenue, as well as non-profit health plan companies. Data as of March 8, 2023.

[Summary of Graph](#)

# HMO Financial Statistics

Health Maintenance Organizations (HMO) are corporations which provide comprehensive health insurance coverage to Minnesotans. HMOs deliver services for a majority of 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 (CMS). Comprehensive financial reporting, summarized in this section and collected pursuant to Minnesota Statutes, chapter 62D and Minnesota Rules, part 4685, provides transparency for state policymakers, regulators and consumers.

Unless stated, information presented in this section does not include County Based Purchasers (CBPs) established under Minnesota Statutes, chapter 256B.292 and data is based on fully insured HMOs. Data includes all product lines unless otherwise noted.



# Summary of HMO Financial Trends, Total Business

	2018	2019	2020	2021	2022
<b>Net Income (\$ in millions)</b>	\$260.7M	(\$64.1M)	\$291.0M	\$259.3M	\$668.8M
<b>Total Revenue (\$ in millions)</b>	\$10,337.8M	\$10,645.3M	\$11,375.9M	\$13,235.3M	\$15,215.4M
<b>Operating Income as % of Revenue</b>	1.7%	-1.6%	1.8%	0.8%	4.1%
<b>Net Income as % of Revenue</b>	2.5%	-0.6%	2.6%	2.0%	4.4%
<b>Net Income per Member Month</b>	\$16.78	(\$3.88)	\$17.77	\$14.16	\$34.59

Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income and Revenue. Calculations for operating income and net income as % of revenue are not rounded.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

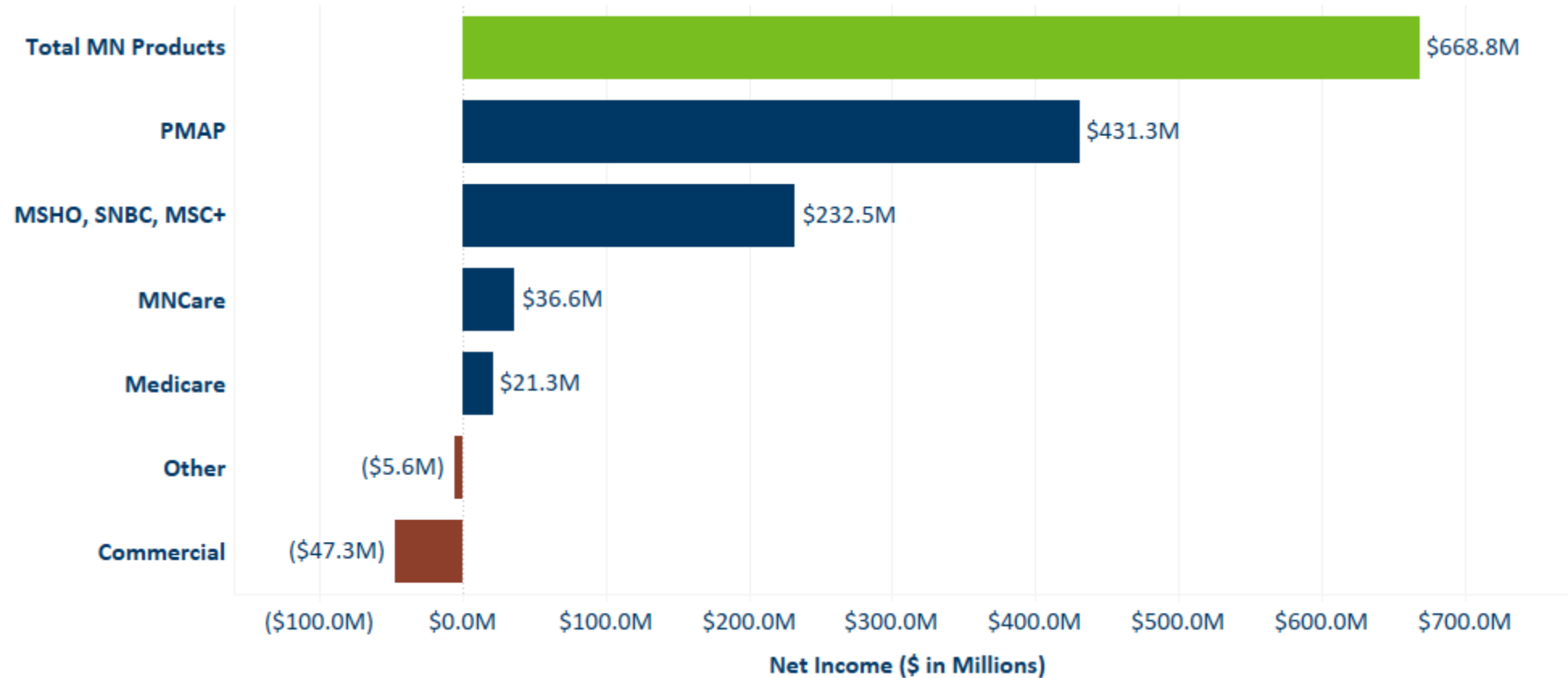
# Net Income and Profitability by HMO, 2022

	Net Income (\$ in millions)	Total Revenue (\$ in millions)	Net Income as % of Revenue
<b>Blue Plus</b>	\$177.8M	\$2,978.0M	6.0%
<b>Group Health</b>	(\$92.8M)	\$1,200.6M	-7.7%
<b>HealthPartners, Inc.</b>	\$150.0M	\$2,932.0M	5.1%
<b>Hennepin Health</b>	\$17.8M	\$444.3M	4.0%
<b>Humana Wisconsin</b>	(\$1.7M)	\$32.8M	-5.2%
<b>Medica Community Health Plans</b>	(\$0.5M)	(\$0.2M)	209.9%
<b>Medica Health Plans</b>	\$72.5M	\$1,300.5M	5.6%
<b>Quartz</b>	\$0.0M	\$38.8M	0.1%
<b>Sanford</b>	(\$4.2M)	\$16.3M	-25.6%
<b>UCare</b>	\$327.7M	\$6,075.5M	5.4%
<b>UnitedHealthcare of Illinois</b>	\$22.2M	\$196.7M	11.3%
<b>All HMOs</b>	<b>\$668.8M</b>	<b>\$15,215.4M</b>	<b>4.4%</b>

Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income and Revenue. Health plan companies are ordered alphabetically. Medica Community Health Plans has no membership. Calculations for net income as % of revenue are not rounded.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

# Minnesota HMO Net Income by Product Line, 2022

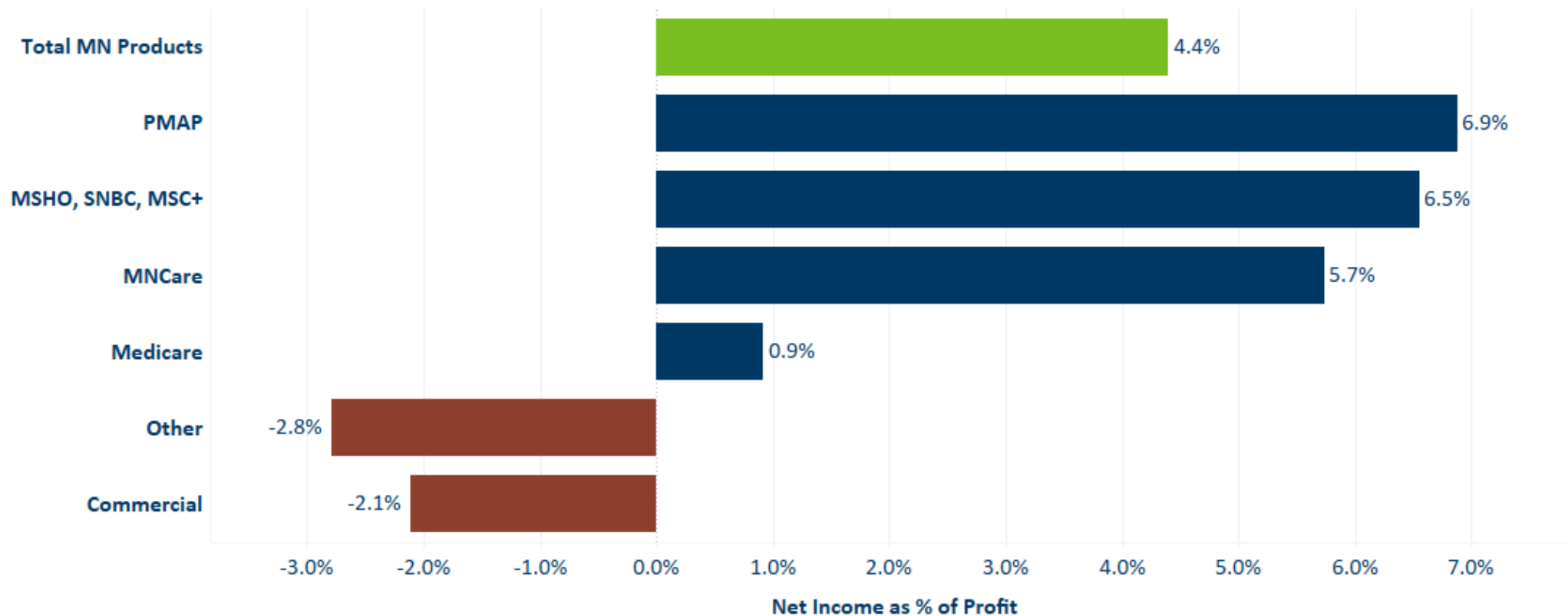


Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income and Revenue. The total includes “other” coverage (standalone Medicare Part D, Medicare Supplement, Medicare Select, Risk Corridor, and Dental). Key terms are included on slide 4. Product lines are in order of net income. Product lines are in order of net income.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

[Summary of Graph](#)

# Minnesota HMO Profitability by Product Line, 2022

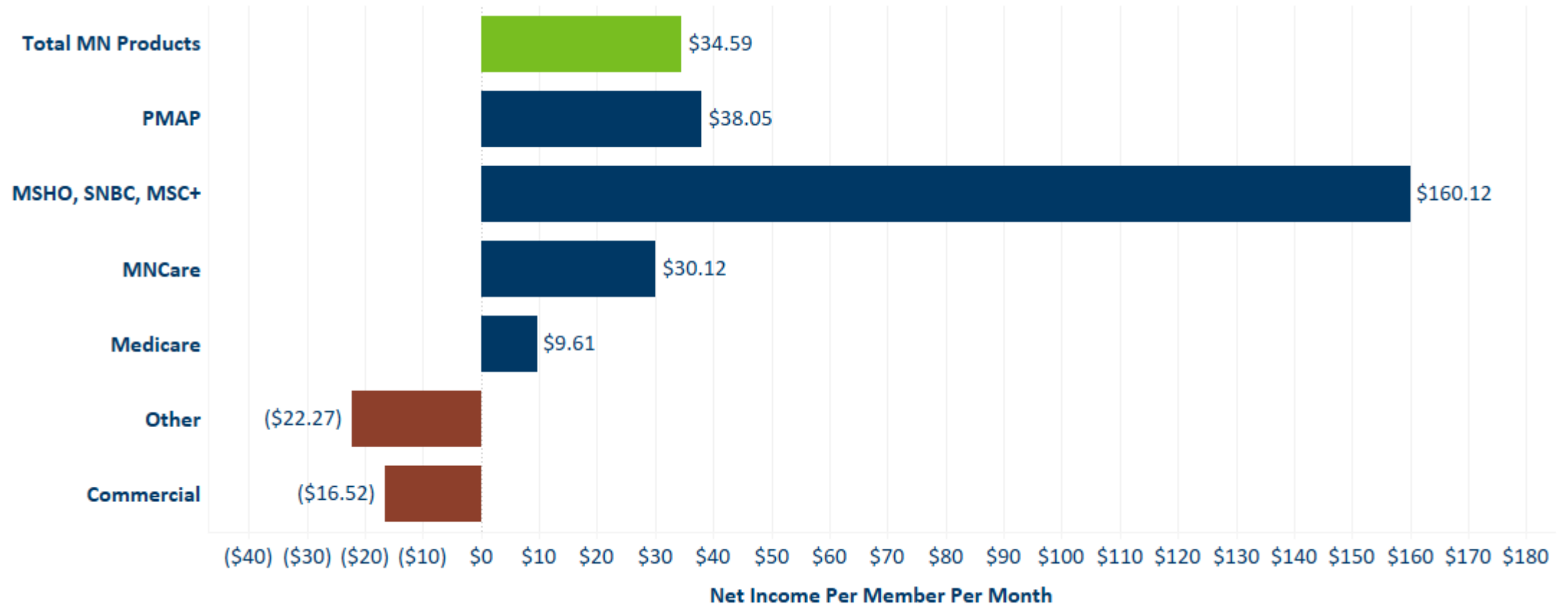


Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income and Revenue. The total includes "other" coverage (standalone Medicare Part D, Medicare Supplement, Medicare Select, Risk Corridor, and Dental). Key terms are included on slide 4. Product lines are in order of net income.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

[Summary of Graph](#)

# Minnesota HMO Net Income per Member Month by Product Line, 2022



Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income and Revenue. The total includes "other" coverage (standalone Medicare Part D, Medicare Supplement, Medicare Select, Risk Corridor, and Dental). Key terms are included on slide 4. Product lines are in order of net income.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

[Summary of Graph](#)

# Sources of HMO Net Income

	2018	2019	2020	2021	2022
<b><u>Sources of Net Income (\$ in millions):</u></b>					
<b>Net underwriting gain/loss</b>	\$180.1M	(\$167.3M)	\$208.4M	\$107.6M	\$617.5M
<b>Investment Income</b>	\$81.5M	\$83.5M	\$59.3M	\$73.9M	\$82.0M
<b>Other</b>	(\$0.9M)	\$19.6M	\$23.3M	\$77.8M	(\$30.7M)
<b>Net Income</b>	\$260.7M	(\$64.1M)	\$291.0M	\$259.3M	\$668.8M
<b>Investment income as % of net income<sup>1</sup></b>	31.3%		20.4%	28.5%	12.3%

<sup>1</sup> Investment income as a percent of net income is not listed when HMOs have a negative net income and a positive investment income. Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income (all sources and investments). Calculations for investment income as % of revenue are not rounded.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

# Investment Income as a Percent of Net Income by HMO, 2022

	Investment Income (\$ in millions)	Net Income (\$ in millions)	Investment Income as % of Net Income <sup>1</sup>
Blue Plus	\$28.6M	\$177.8M	16.1%
Group Health	\$7.6M	(\$92.8M)	
HealthPartners, Inc.	\$7.7M	\$150.0M	5.1%
Hennepin Health	(\$5.6M)	\$17.8M	
Humana Wisconsin	\$0.0M	(\$1.7M)	
Medica Community Health Plans	\$0.0M	(\$0.5M)	0.0%
Medica Health Plans	\$15.5M	\$72.5M	21.3%
Quartz	\$0.1M	\$0.0M	320.9%
Sanford	\$0.0M	(\$4.2M)	
UCare	\$27.0M	\$327.7M	8.2%
UnitedHealthcare of Illinois	\$1.1M	\$22.2M	5.0%
<b>All HMOs</b>	<b>\$82.0M</b>	<b>\$668.8M</b>	<b>12.3%</b>

<sup>1</sup> Investment income as a percent of net income is not listed for HMOs that have a negative net income and a positive investment income.

Minnesota products only. Excludes Administrative Services, Foundation, and Business Development Net Income (all sources and investments). Calculations for investment income as % of revenue are not rounded.

Source: MDH Health Economics Program analysis of Minnesota Supplement #1 HMO report.

# Reserves



# Reserves, Medical Expenses, and Regulatory Minimum Level by HMO, 2022<sup>1-3</sup>

	Reserves (\$ in millions) <sup>2</sup>	Total Expenses (\$ in millions)	Reserves as % of Total Expenses	Ratio Above Company Action Level <sup>3</sup>
BluePlus	\$894.4M	\$2,475.9M	36.1%	4.5
Group Health <sup>1</sup>	\$81.4M	\$417.5M	19.5%	1.2
Hennepin Health	\$61.8M	\$381.8M	16.2%	2.0
HealthPartners, Inc. <sup>1</sup>	\$1,063.4M	\$2,594.7M	41.0%	2.8
Medica Health Plans	\$617.2M	\$1,148.5M	53.7%	6.2
Quartz	\$5.9M	\$36.1M	16.4%	2.7
Sanford <sup>1</sup>	\$4.8M	\$16.0M	29.8%	2.3
UCare	\$1,125.3M	\$5,228.0M	21.5%	2.7
<b>All HMOs</b>	<b>\$3,854.3M</b>	<b>\$12,298.6M</b>	<b>31.3%</b>	<b>3.2</b>

<sup>1</sup> When applicable, fee-for-service revenue earned was subtracted from expenses to approximate member only expenses for these health plan companies.

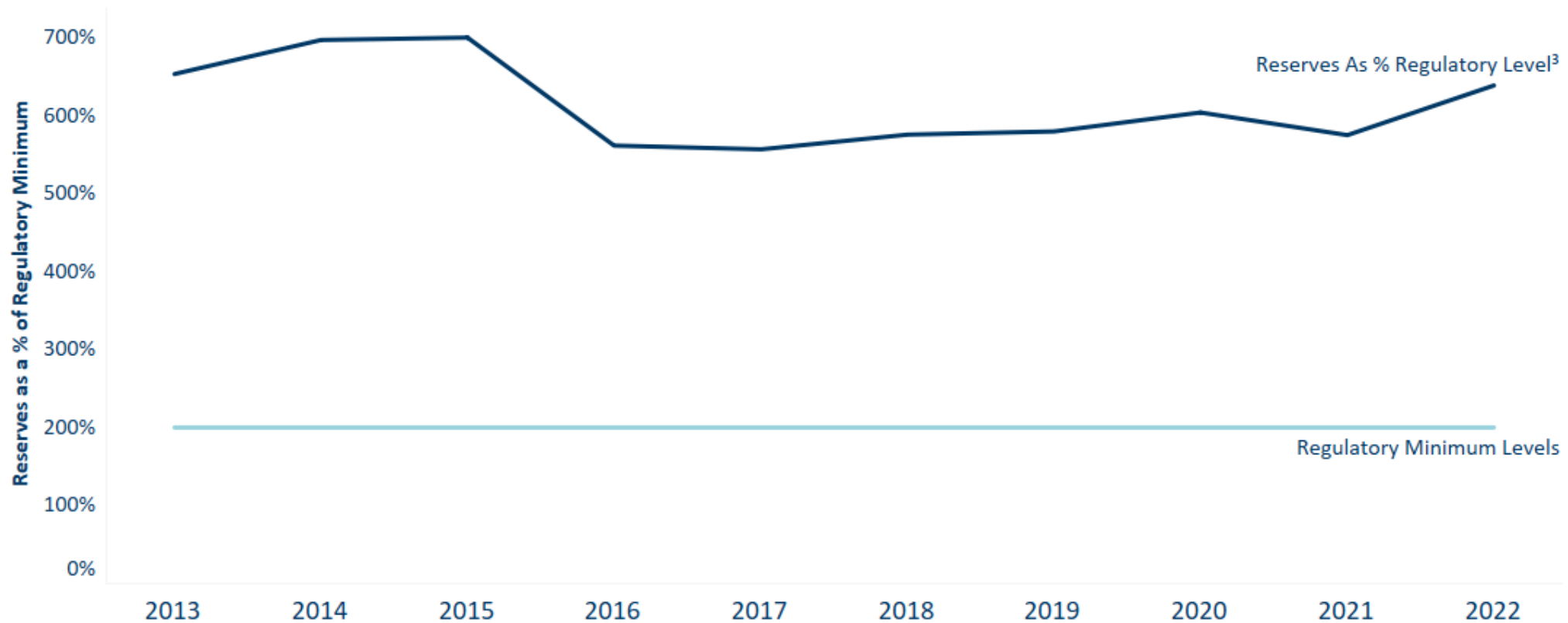
<sup>2</sup> Reserve minimums are based financial solvency of entire organization; therefore, the calculation includes non-Minnesota business.

<sup>3</sup> Company Action Level is defined at 200%. For more information, see Minnesota Statutes Chapter 60A.50.

Health plan companies are ordered alphabetically. Percentage calculations are not rounded.

Source: MDH Health Economics Program analysis of data from National Association of Insurance Commissioners (NAIC). Only health plan companies that are domiciled within Minnesota. PreferredOne Community Health Plan ceased prior to December 31, 2021 and therefore had no expenses. Medica Community Health Plan reserve data was not available on a Minnesota-specific basis after 2017.

# Total Minnesota HMO Reserves Relative to Regulatory Minimum Levels<sup>1-2</sup>



<sup>1</sup>The Regulatory Minimum Levels are otherwise known as the Company Action Level and is defined at 200%. There are currently no maximum levels. For more information, see Minnesota Statutes Chapter 60A.50.

<sup>2</sup>Reserve minimums are based financial solvency of entire organization; therefore, the calculation includes non-Minnesota business.

<sup>3</sup>“Regulatory level” is the authorized control level; total expenses is from line 16 of HMO Minnesota Supplement Report #1 and includes Administrative Services’ Expenses, as applicable.

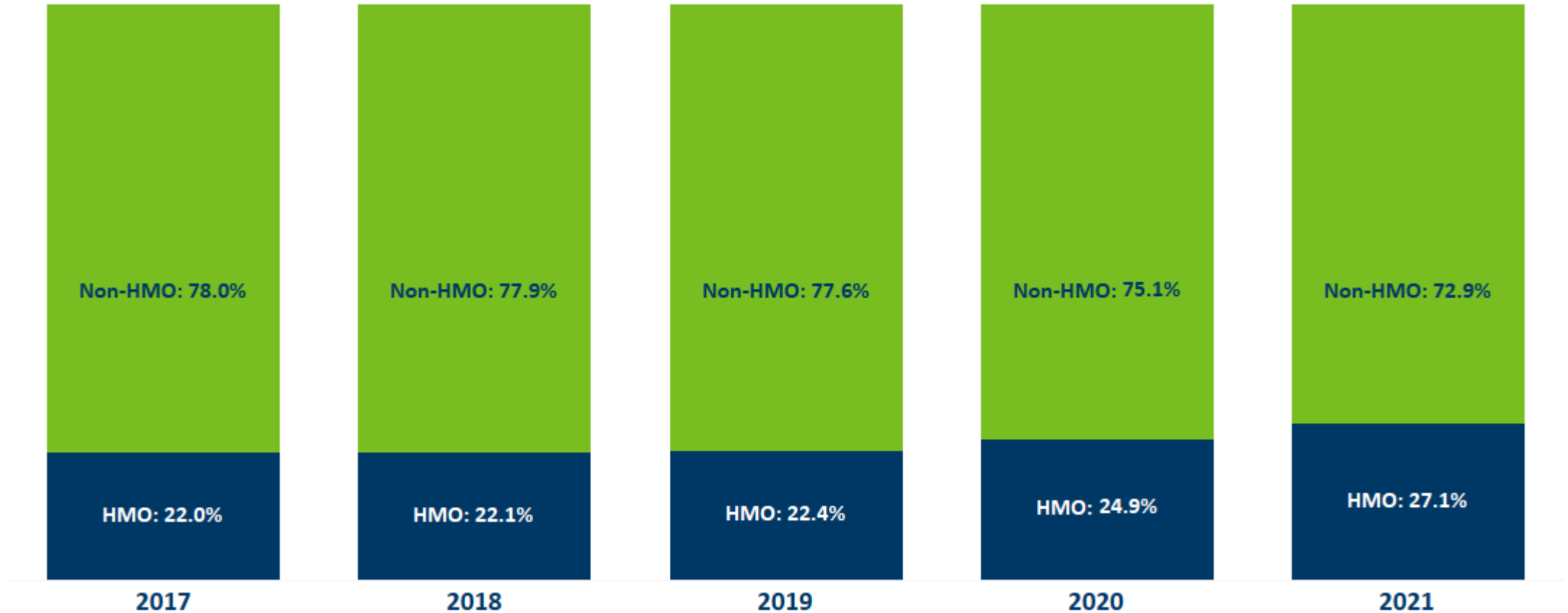
Source: MDH Health Economics Program analysis of data from National Association of Insurance Commissioners (NAIC). Only health plan companies that are domiciled within Minnesota. PreferredOne Community Health Plan ceased prior to December 31, 2021 and therefore had no expenses. Medica Community Health Plan reserve data was not available on a Minnesota-specific basis after 2017.

# HMO Enrollment

Health Maintenance Organizations (HMO) are 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.

Unless stated, information presented in this section **does not** include County Based Purchasers (CBPs) established under Minnesota Statutes, chapter 256B.292 and data is based on fully insured HMOs. Data includes all product lines unless otherwise noted.

# Share of Total Minnesota HMO Enrollment

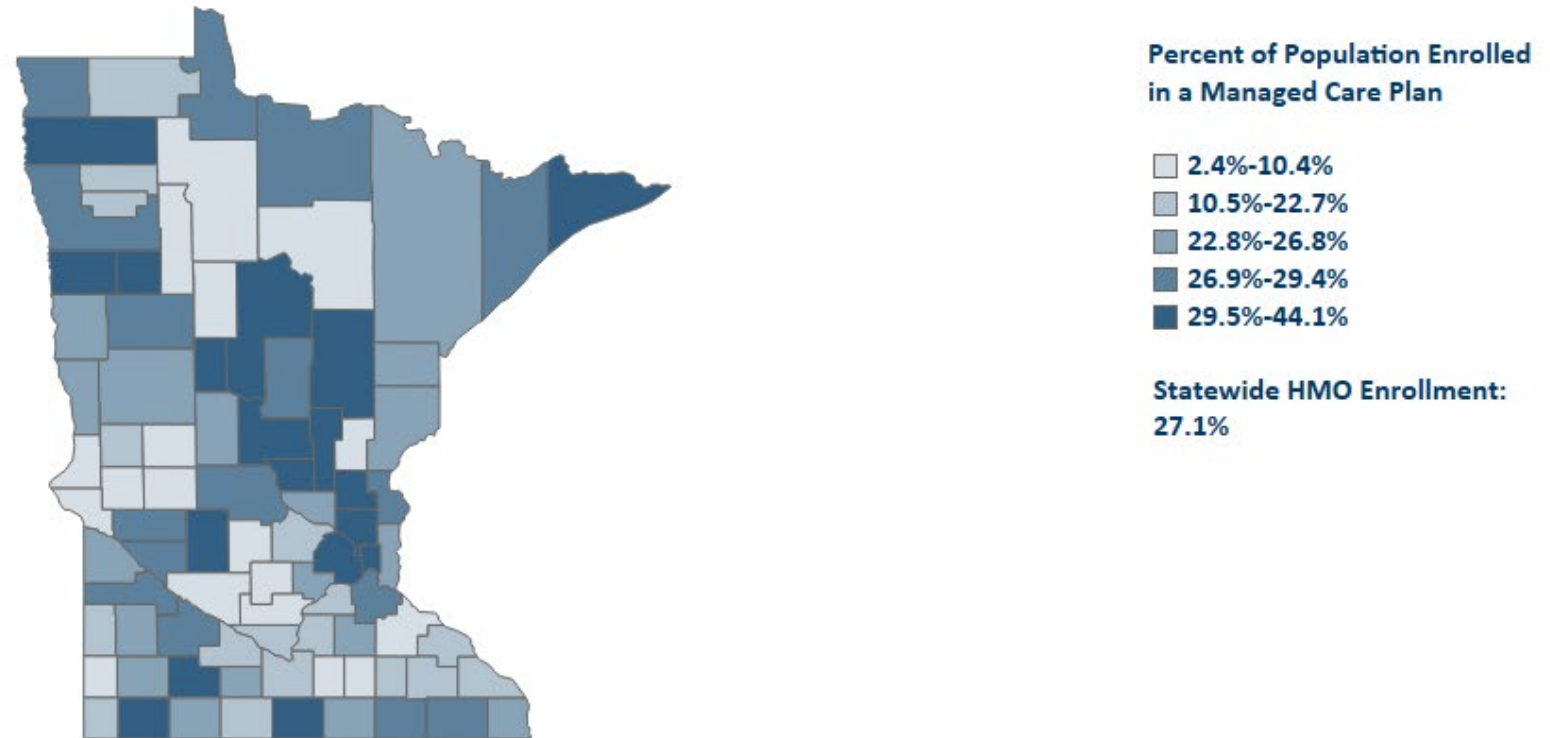


Enrollment figures are as of December 31st of each year for Minnesota residents; excludes residents with an unknown county of residence. Data includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, HMO enrollment may be overstated.

Source: MDH Health Economics Program analysis of MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report; U.S. Census Bureau, Annual Estimates of the Resident Population for Counties in Minnesota: April 1, 2020 to July 1, 2021, (CO-EST2021-POP-27).

[Summary of Graph](#)

# Minnesota's Percent of Population Enrolled in an HMO, by County, 2021



Enrollment figures are as of December 31st of each year for Minnesota residents; ranges are based on quintiles; excludes residents with an unknown county of residence. Data includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, HMO enrollment may be overstated.

Source: MDH Health Economics Program analysis of MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report; U.S. Census Bureau, Annual Estimates of the Resident Population for Counties in Minnesota: April 1, 2020 to July 1, 2021, (CO-EST2021-POP-27); map shapefile from 2021 Mapbox @OpenStreetMap.

[Summary of Graph](#)

# Minnesota HMO Enrollment by Region, 2021

	Central	Twin Cities	Northeast	Northwest	South Central	Southeast	Southwest	West Central	Statewide
<b>Blue Plus</b>	107,276	187,528	30,656	22,798	20,742	35,287	35,684	34,468	474,439
<b>Group Health</b>	6,533	44,624	885	28	1,225	191	725	684	54,895
<b>HealthPartners, Inc.</b>	37,379	273,651	7,769	1,320	3,401	1,127	1,082	3,370	329,099
<b>Hennepin Health</b>	94	36,140	34	10	<10	31	14	11	36,340
<b>Medica Health Plans</b>	8,519	48,568	1,439	1,302	1,588	2,852	1,479	2,201	67,948
<b>Quartz</b>	<10	<10	<10		<10	4,675			4,684
<b>Sanford</b>	<10	<10	<10	497	10	<10	847	821	2,192
<b>UCare</b>	51,358	388,393	34,731	3,167	21,753	55,878	15,670	5,550	576,500
<b>UnitedHealthcare of Illinois</b>	138	688	<10		<10	11			847
<b>All HMOs</b>	<b>211,306</b>	<b>979,601</b>	<b>75,521</b>	<b>29,122</b>	<b>48,735</b>	<b>100,053</b>	<b>55,501</b>	<b>47,105</b>	<b>1,546,944</b>

Enrollment figures are as of December 31st of each year for Minnesota residents; excludes residents with an unknown county of residence. Data includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, HMO enrollment may be overstated.

Source: MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report.

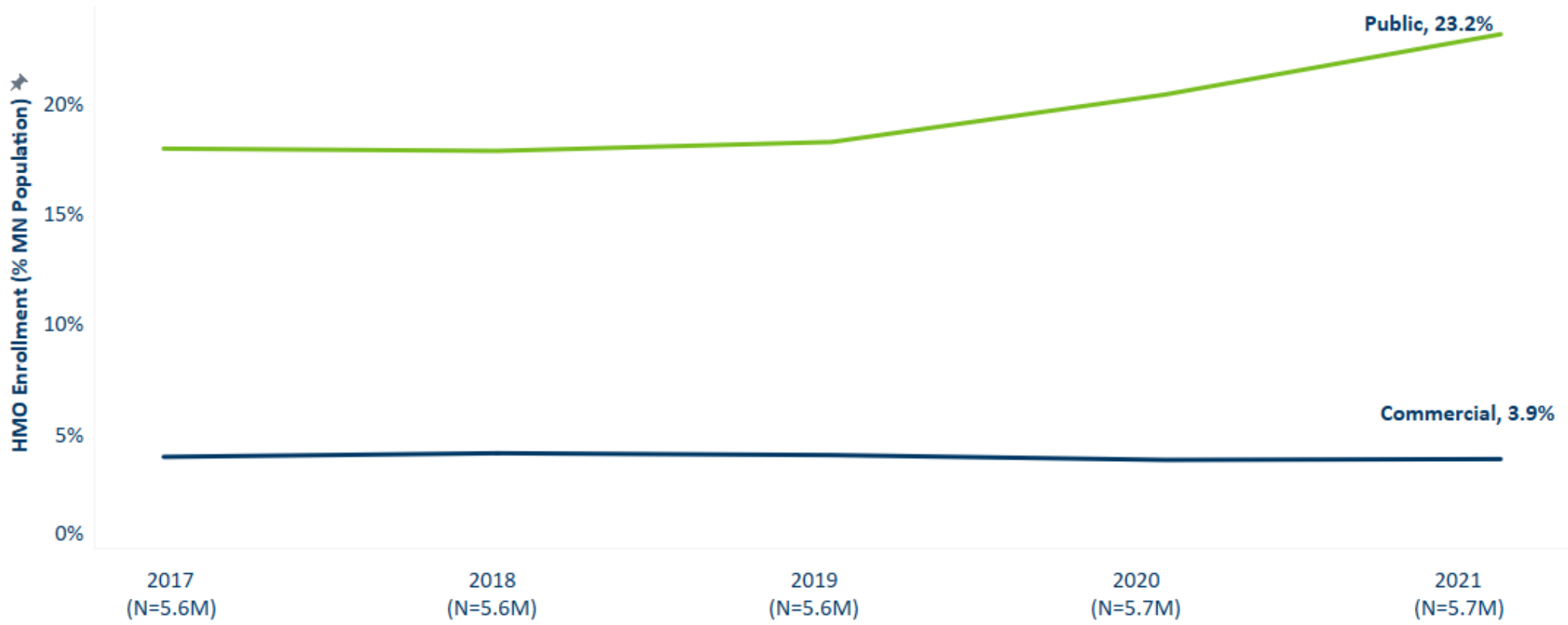
# Distribution of HMO Enrollment by Region, 2021

	Central	Twin Cities	Northeast	Northwest	South Central	Southeast	Southwest	West Central	Statewide
<b>Blue Plus</b>	13.6%	5.9%	9.4%	13.5%	7.0%	6.8%	16.3%	14.5%	8.3%
<b>Group Health</b>	0.8%	1.4%	0.3%	0.0%	0.4%	0.0%	0.3%	0.3%	1.0%
<b>HealthPartners, Inc.</b>	4.7%	8.7%	2.4%	0.8%	1.1%	0.2%	0.5%	1.4%	5.8%
<b>Hennepin Health</b>	0.0%	1.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%
<b>Medica Health Plans</b>	1.1%	1.5%	0.4%	0.8%	0.5%	0.5%	0.7%	0.9%	1.2%
<b>Quartz</b>	0.0%	0.0%	0.0%	0.0%	0.0%	0.9%	0.0%	0.0%	0.1%
<b>Sanford</b>	0.0%	0.0%	0.0%	0.3%	0.0%	0.0%	0.4%	0.3%	0.0%
<b>UCare</b>	6.5%	12.3%	10.7%	1.9%	7.3%	10.8%	7.2%	2.3%	10.1%
<b>UnitedHealthcare of Illinois</b>	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>All HMOs</b>	<b>26.8%</b>	<b>31.1%</b>	<b>23.2%</b>	<b>17.2%</b>	<b>16.4%</b>	<b>19.3%</b>	<b>25.4%</b>	<b>19.9%</b>	<b>27.1%</b>

Enrollment figures are as of December 31st of each year for Minnesota residents; excludes residents with an unknown county of residence. Data includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, HMO enrollment may be overstated.

Source: MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report.

# Minnesota HMO Market Penetration



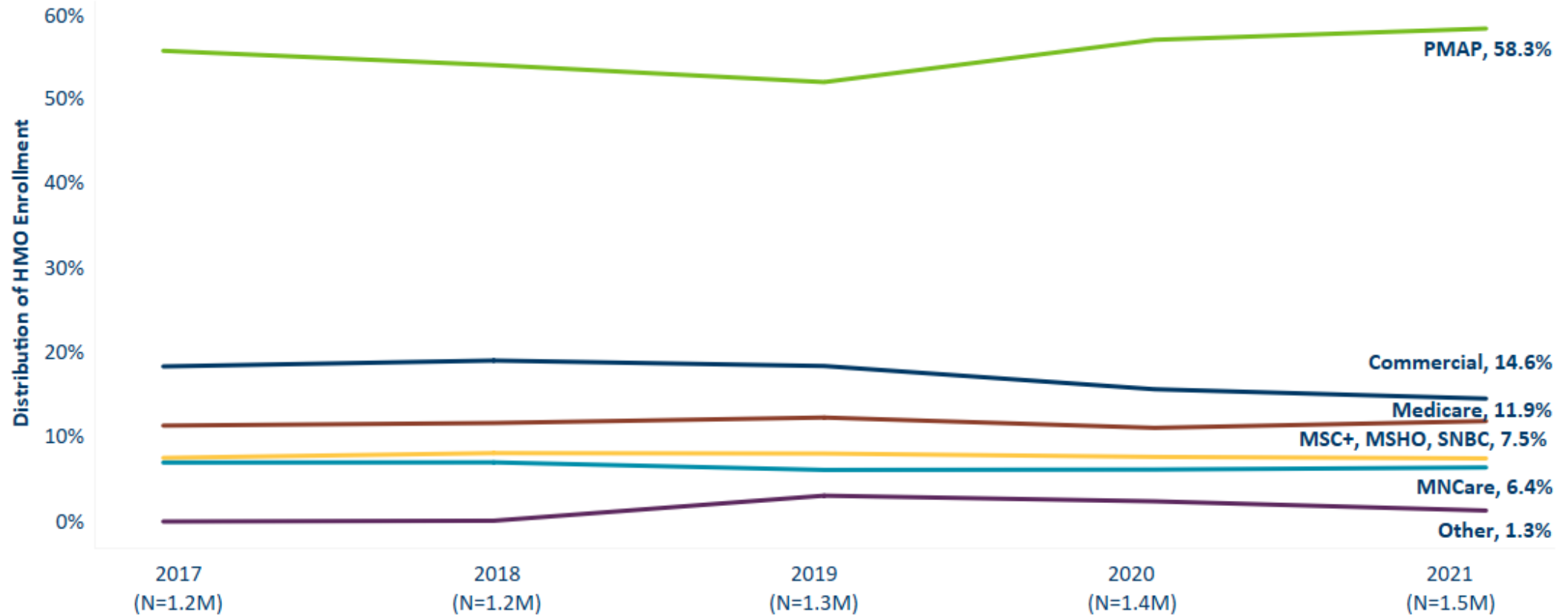
Enrollment figures are as of December 31st of each year; excludes residents with an unknown county of residence. Medica no longer accepted enrollment for Medical Assistance/MinnesotaCare Families and Children effective May 1, 2017. All Other is excluded from this graph and represents between 0.0% to 3.1% each year.

Source: MDH Health Economics Program analysis of MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report; U.S. Census Bureau, Annual Estimates of the Resident Population for Counties in Minnesota: April 1, 2020 to July 1, 2021, (CO-EST2021-POP-27).

[Summary of Graph](#)



# Distribution of Minnesota HMO Enrollment by Product Line



Enrollment is based on total member months. Minnesota products only. MSC+ data prior to 2017 was not consistently broken out by health plan companies and is included in the MSC+ category, as able. Key terms are included on slide 4. "All Other" enrollment includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, enrollment may not be unique between product lines.

Source: MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report.

[Summary of Graph](#)

# Distribution of Minnesota HMO Enrollment by Product Line, 2021

	Commercial	PMAP	MNCare	Medicare	MSC+, MSHO, and SNBC	All Products
<b>Blue Plus</b>	37,529	389,415	34,281		13,204	474,439
<b>Group Health</b>	53,471			1,424		54,895
<b>HealthPartners, Inc.</b>	79,751	165,408	25,893	35,450	16,127	329,099
<b>Hennepin Health</b>		31,790	2,353		2,197	36,340
<b>Medica Health Plans</b>	<10			27,592	26,497	67,948
<b>Quartz</b>	1,836			2,848		4,684
<b>Sanford</b>	2,134					2,192
<b>UCare</b>	49,649	315,626	36,679	116,711	57,824	576,500
<b>UnitedHealthcare of Illinois</b>	847					847
<b>All HMOs</b>	<b>225,219</b>	<b>902,239</b>	<b>99,206</b>	<b>184,025</b>	<b>115,849</b>	<b>1,546,944</b>

Enrollment figures are as of December 31st of each year; excludes residents with an unknown county of residence. Minnesota products only. All Other is excluded from this representation. "All Products" enrollment includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, HMO "All Products" enrollment may be overstated.

Source: MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report.

# Distribution of Total Minnesota HMO Enrollment by Product Line and Age, 2021

	<18	18-34	35-49	50-64	65+	Total
<b>Commercial</b>	<b>16.2%</b>	<b>22.3%</b>	<b>22.7%</b>	<b>36.6%</b>	<b>2.1%</b>	<b>100.0%</b>
<b>Public Programs</b>	<b>32.8%</b>	<b>22.3%</b>	<b>14.6%</b>	<b>11.4%</b>	<b>18.9%</b>	<b>100.0%</b>
PMAP	47.3%	26.9%	15.8%	10.0%	0.0%	100.0%
MNCare	1.3%	34.5%	31.2%	27.6%	5.4%	100.0%
MSC+, MSHO, and SNBC	0.0%	12.6%	13.6%	23.6%	50.2%	100.0%
Medicare	0.0%	0.0%	0.3%	2.3%	97.4%	100.0%
<b>All Other</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.3%</b>	<b>2.5%</b>	<b>97.1%</b>	<b>100.0%</b>
<b>Total HMO Enrollment</b>	<b>29.8%</b>	<b>22.0%</b>	<b>15.6%</b>	<b>15.1%</b>	<b>17.6%</b>	<b>100.0%</b>

Enrollment figures are as of December 31st of each year. Includes health plan company members that are non-Minnesota residents, unless all enrollment across all product lines is “out of state”. “Total HMO Enrollment” enrollment includes all HMO reported enrollment, even for program types which may not be primary medical coverage (e.g., standalone Part D, Medicare Supplement, and Medicare Select). As such, “Total HMO Enrollment” enrollment may be overstated.

Source: MDH Health Economics Program analysis of Minnesota Supplement #6 HMO report.

# Additional Information from the Health Economics Program Available Online

- Health Economics Program Home Page  
(<https://www.health.state.mn.us/healthconomics>)
- Publications (<https://heppublications.web.health.state.mn.us/>)
- Health Care Market Statistics (Chartbook Updates)  
(<https://www.health.state.mn.us/data/economics/chartbook/index.html>)

A summary of the charts and graphs contained within is provided at [Chartbook Summaries – Section 7](https://www.health.state.mn.us/data/economics/chartbook/summaries/section7summaries.html) (<https://www.health.state.mn.us/data/economics/chartbook/summaries/section7summaries.html>). Direct links are listed on each page. Please contact the Health Economics Program at 651-201-4520 or [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.

# Appendix: Minnesota Counties and Regions Used in the Geographic Analysis



Source: Minnesota Department of Health, regional map based on State Community Health Services Advisory Committee (SCHSAC) regions.  
[Summary of image](#)