



## Chartbook Section 7: Health Plan Companies

# Section 7: Health Plan Companies - Overview

- Health Plan Market Size
- Reserves
- Appendix A: Health Plan Company Roll-Up
- Appendix B: Key Terms

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>)

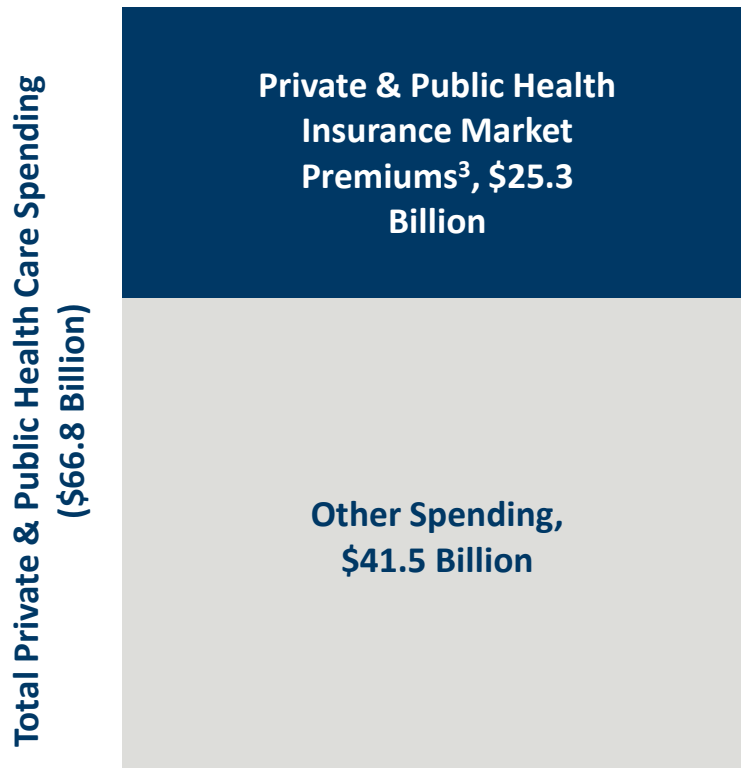
An accessible summary of the charts and graphs contained in this deck is available on the [MDH website](#) (<https://www.health.state.mn.us/data/economics/chartbook/summaries/section7summaries.html>). Direct links are listed on each page. Information on health plan company financials is included in the [Chartbook 7 Supplement](#) (<https://www.health.state.mn.us/data/economics/chartbook/docs/section7supp.pdf>).

Please contact the Health Economics Program at [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.

# Health Plan Market Size

Analysis of market share provides insight into relative market power and competitiveness of markets. It provides context for understanding pricing and profitability. Given available data, analysts may use premium and/or enrollee distributions to estimate market share.

# Background



Bar chart for illustrative purposes only.

- A portion (\$25.3 billion) of total private and public health care spending<sup>1</sup> (\$66.8 billion in 2022) is attributable to health insurance premiums.<sup>2,3</sup>
- These premiums, health plan company market share and reserves, are the focus of Chartbook 7.
- Other spending not accounted for within this Chartbook includes out-of-pocket spending, self-insured spending, other private spending, and other public spending.

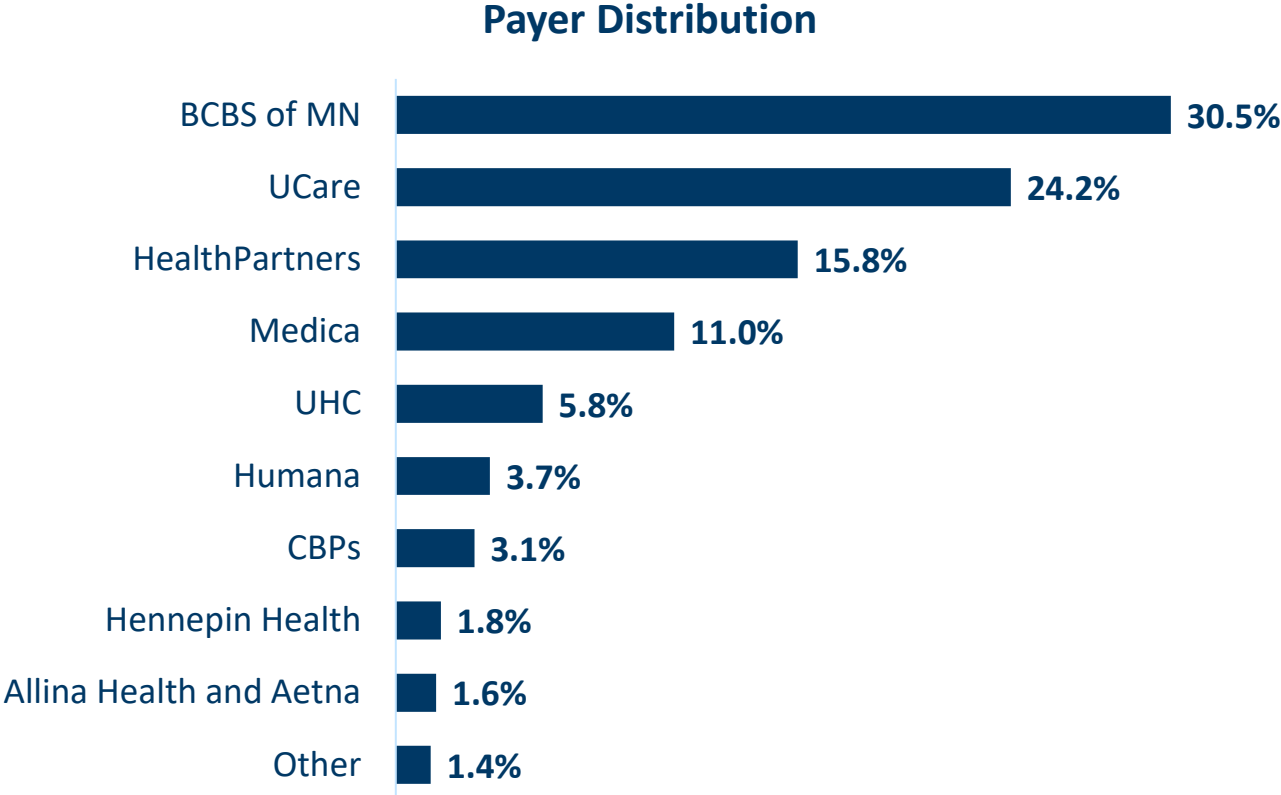
<sup>1</sup> Health care spending is the amount spent for Minnesota residents on medical care and prescription drug costs, public health and government administrative costs for those activities, administrative costs and profits (i.e., net cost of insurance) for health plan companies, health care spending related to COVID-19 pandemic support, and long-term care services.

<sup>2</sup> Premiums are the amount of money a business makes from all products and services the business sells, prior to any expenses (spending).

<sup>3</sup> These data represent private and public coverage purchased from health plans by employees and individuals; it excludes premiums from self-insured employer plans. It is a subset of all Minnesota health premiums in that they only include accident & health (including stand-alone Medicare Part D), Medicare Title XVIII, Medicaid, CHIP, and Federal Employee Health Benefits Plan premiums. For certain companies, premiums may include more than just major medical premiums (e.g., dental, vision).

# Minnesota Health Plan Company Market Share in the Private and Public Health Insurance Market, by Premium Revenue, 2022

- Total (private and public coverage) 2022 Minnesota premium revenue<sup>1</sup> represented more than **\$25.3 billion**. This excludes the self-insured population, estimated to have spending in excess of \$13.0 billion.
- BCBS of MN has the largest market share based on premiums, followed by UCare, HealthPartners, and Medica.



<sup>1</sup> These data represent private and public coverage purchased from health plans by employees and individuals; it excludes premiums from self-insured employer plans. It is a subset of all Minnesota health premiums in that they only include accident & health (including stand-alone Medicare Part D), Medicare Title XVIII, Medicaid, CHIP, and Federal Employee Health Benefits Plan premiums. For certain companies, premiums may include more than just major medical premiums (e.g., dental, vision).

Source: MDH Health Economics Program, analysis of the National Association of Insurance Commissioners (NAIC) Schedule T reporting for 2022 based on the Minnesota line item. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. PreferredOne, not shown, held 1.2% of the market share in 2022. County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. Appendix A includes detail on company roll-ups employed in this slide deck.

# Top 10 Health Plan Companies in the Private and Public Health Insurance Market by Premium Revenue, 2022

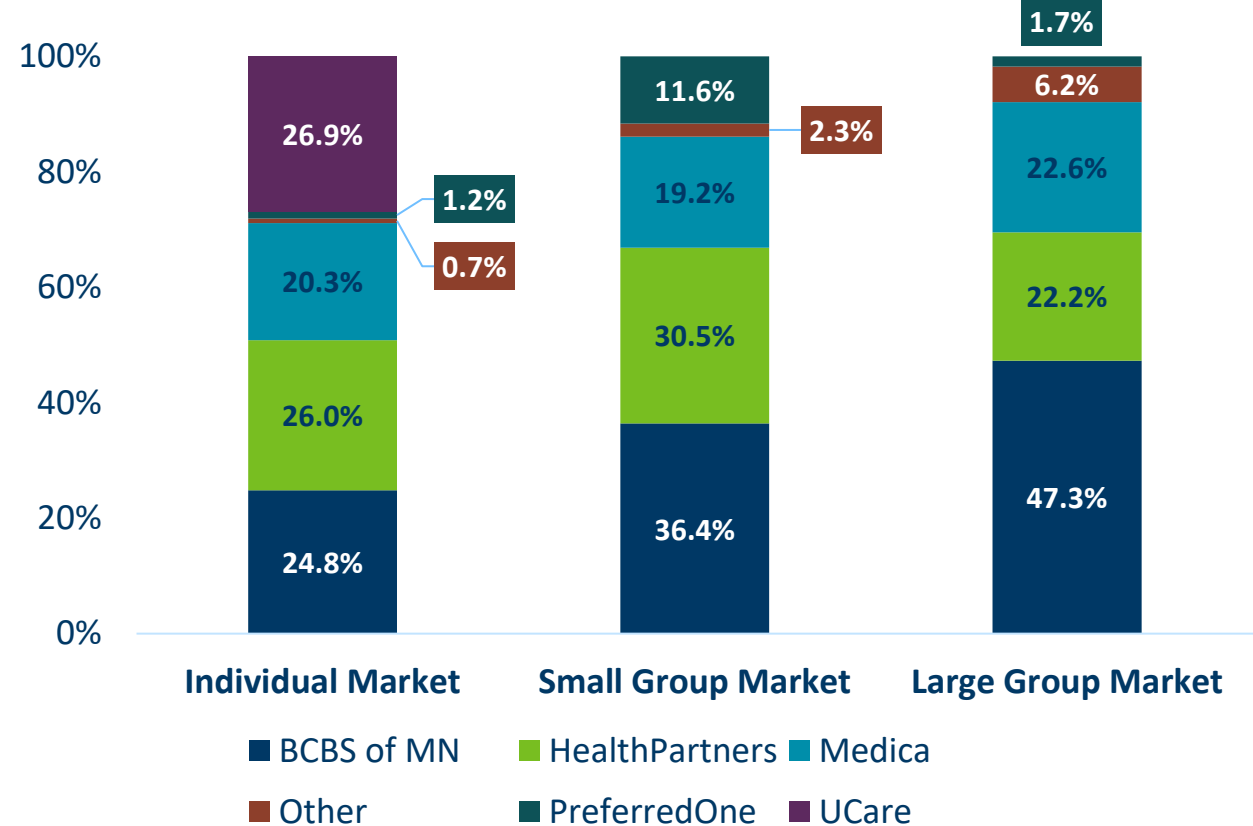
Health Plan Company	Total Premiums (\$ in millions)	Members as of December 31, 2022	Market Share (% Based on Premiums)
BCBS of MN	\$7,727	1,159,466	30.5%
UCare	\$6,131	652,313	24.2%
HealthPartners	\$4,008	Estimated 531,300	15.8%
Medica	\$2,774	270,898	11.0%
UHC	\$1,462	774,039	5.8%
Humana	\$938	142,681	3.7%
County Based Purchasers (CBPs)	\$782	97,171	3.1%
Hennepin Health	\$448	38,295	1.8%
Allina Health & Aetna	\$401	34,974	1.6%
PreferredOne	\$308	129,861	1.2%

Source: MDH Health Economics Program, analysis of NAIC Schedule T reporting for 2022 based on the Minnesota Line item; Exhibit of Premiums, Enrollment, and Utilization; Supplemental Health Care Exhibit – Other Indicators. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. These data represent private and public coverage purchased from health plans by employees and individuals; it excludes premiums from self-insured employer plans. It is a subset of all Minnesota health premiums in that they only include accident & health (including stand-alone Medicare Part D), Medicare Title XVIII, Medicaid, CHIP, and Federal Employee Health Benefits Plan premiums. For certain companies, premiums may include more than just major medical premiums (e.g., dental, vision). County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. MDH estimate of HealthPartners enrollment to avoid double-counting. Appendix A includes detail on company roll-ups employed in this slide deck.

# Minnesota Fully-Insured Commercial Market Share by Premium Revenue, 2022

- In 2022, BCBS of MN was the largest payer in the commercial fully insured market, by premium revenue, representing 41.1% of this market.
- The market share of BCBS of MN varies across the three market sectors: individual market (24.8%), small group market (36.4%), and large group market (47.3%).

Premiums Per Fully-Insured Commercial Market Segment (Premium Revenue=\$6.0 Billion)

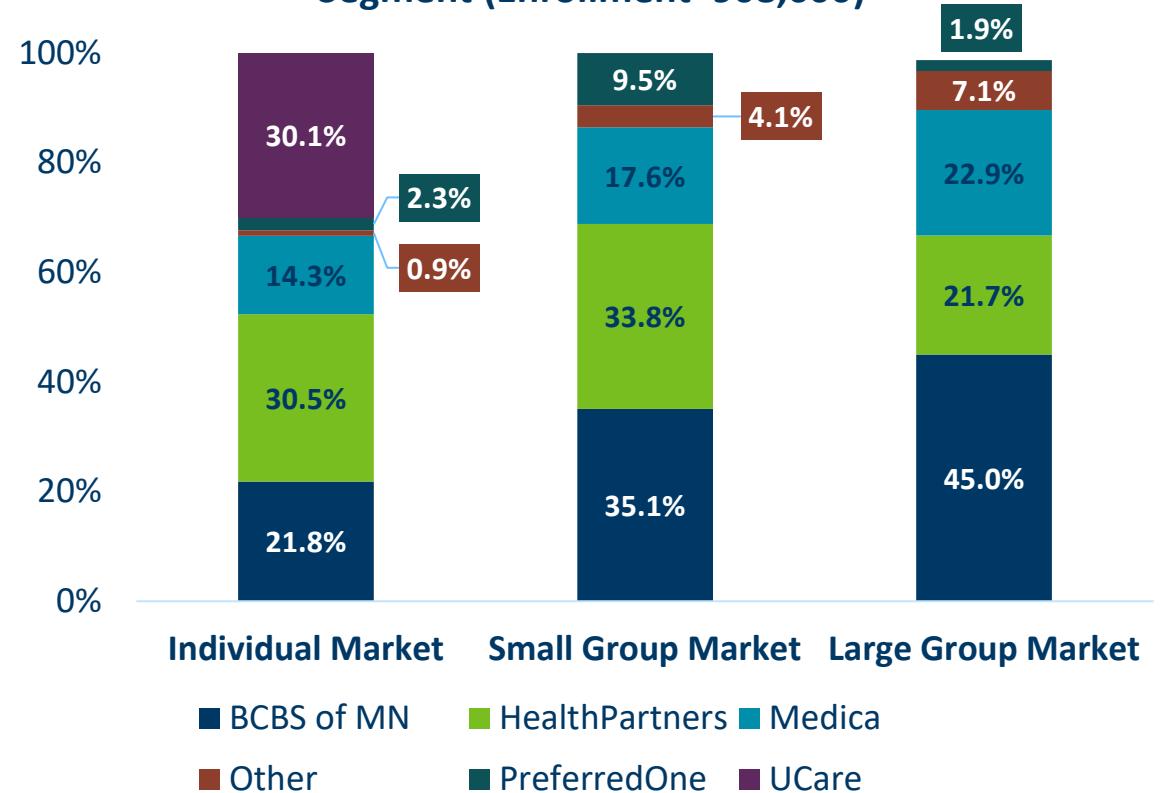


Source: MDH Health Economics Program, analysis of NAIC Supplemental Health Care Exhibit reporting for 2022 based on Health Premiums Earned (Part 2, line 1.11) for the individual, small group, and large group market segments. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. Appendix A includes detail on company roll-ups employed in this slide deck. The data source is based on state of situs and includes non-Minnesota residents in the small group and large group market segments. The below "Summary of Graph" contains the percentages held by each health plan company.

# Minnesota Fully-Insured Commercial Market Share by Enrollment, 2022

- Similar to premium revenues, BCBS of MN had the largest enrollment in fully-insured commercial plans (38.6%).
- BCBS of MN enrollment differs based on market segment: individual market (21.8%), small group market (35.1%), and large group market (45.0%).

Covered Lives Per Fully-Insured Commercial Market Segment (Enrollment=908,600)



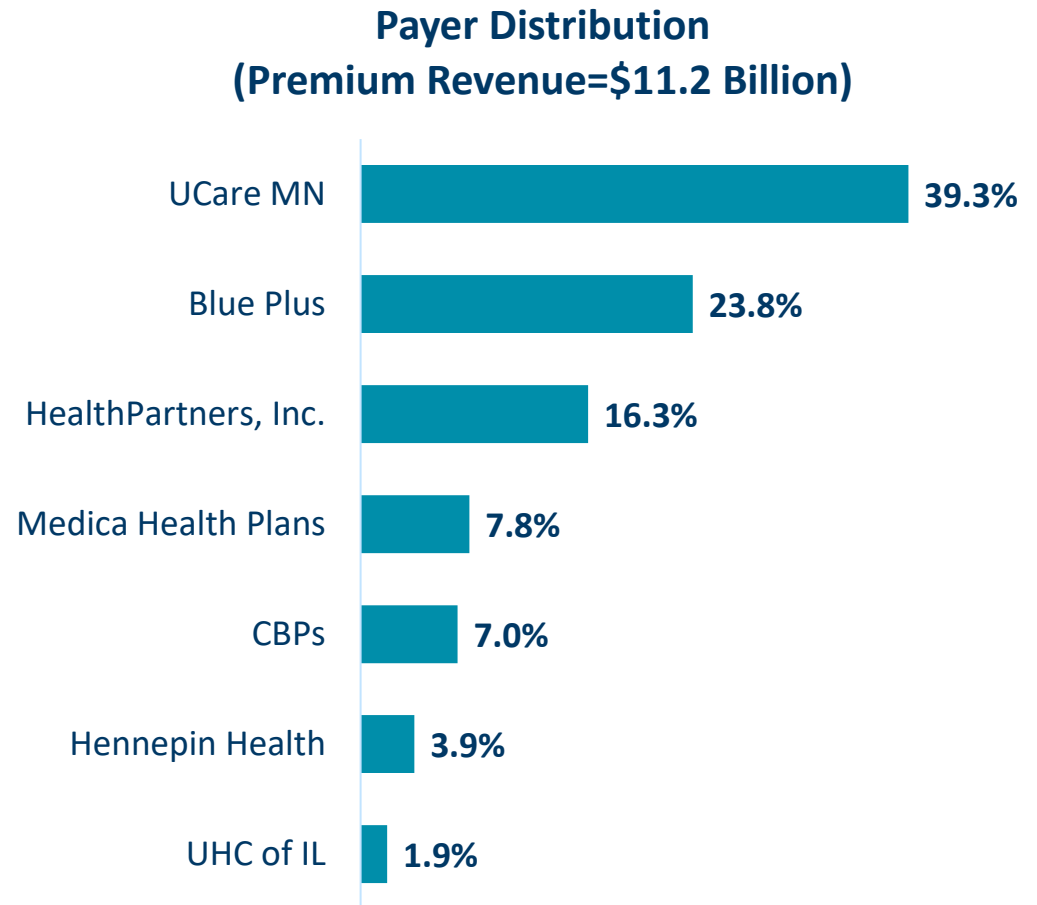
Source: MDH Health Economics Program, analysis of NAIC Supplemental Health Care Exhibit reporting for 2022 based covered lives as of December 31 for the individual, small group, and large group market segments. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. MDH has accounted for double-counting that otherwise occurs in HealthPartners data in the large group market. Appendix A includes detail on company roll-ups employed in this slide deck. The data source is based on state of situs and includes non-Minnesota residents in the small group and large group market segments. The below "Summary of Graph" contains the percentages held by each health plan company.

[Summary of Graph](#)



# Medical Assistance and MinnesotaCare Market Share by Premium Revenue, 2022

- Total 2022 Minnesota Medical Assistance and MinnesotaCare premium revenue represented more than **\$11.2 billion** of health plan company revenue.
- In 2022, UCare MN had the largest share of premium revenue from Medical Assistance and MinnesotaCare, followed by Blue Plus.
- UHC of IL, as the only for-profit health plan company offering state public program coverage, currently accounts for a small portion of overall premium revenue.

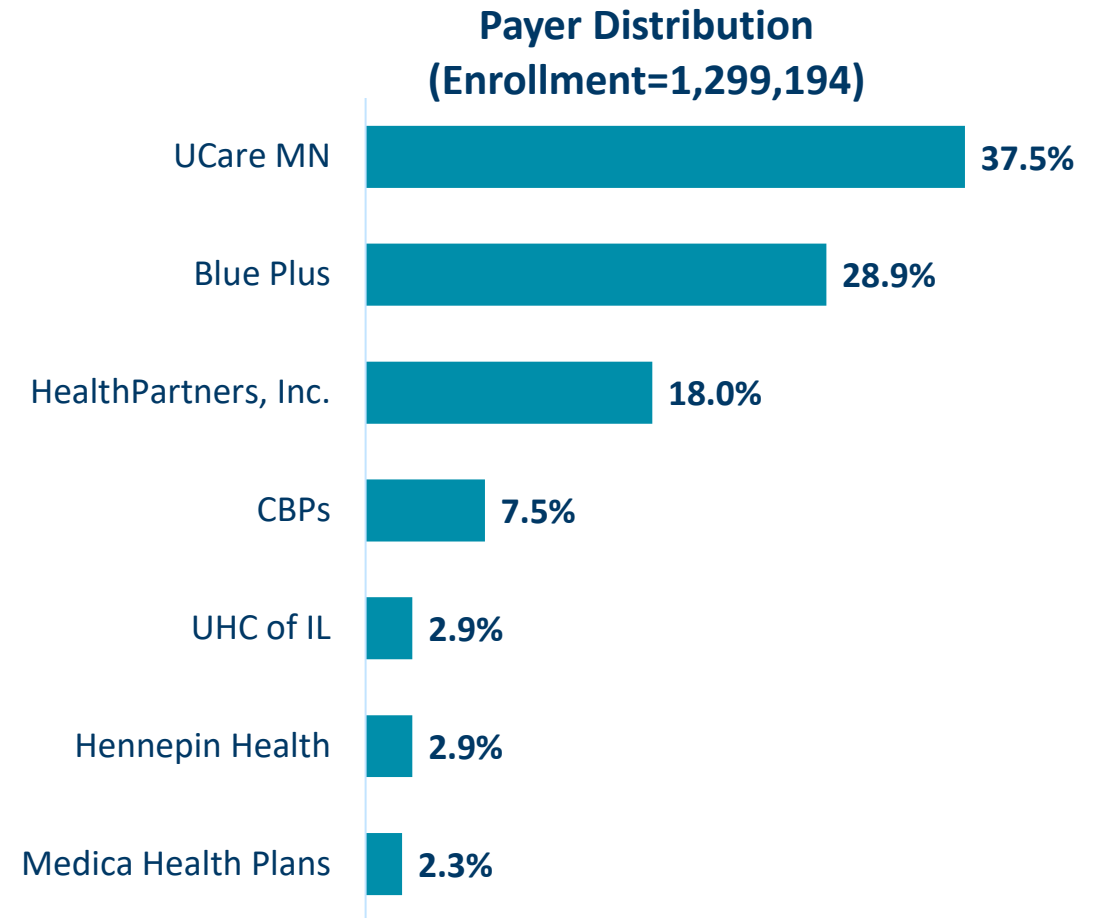


Source: MDH Health Economics Program, analysis of NAIC Schedule T reporting for 2022 based on the Minnesota Line item and includes health plan companies defined as “health” in Schedule T with a categorization of Medicaid Title XIX and CHIP Title XXI, with MDH imputation to include Minnesotans with a dual-Medicare/Medicaid plan. Medica Health Plans data based on MDH Supplement Report #1. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs. Names detailed in the bar chart are actual plan names providing coverage in this market segment. County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health.

[Summary of Graph](#)

# Medical Assistance and MinnesotaCare Market Share by Enrollment, 2022

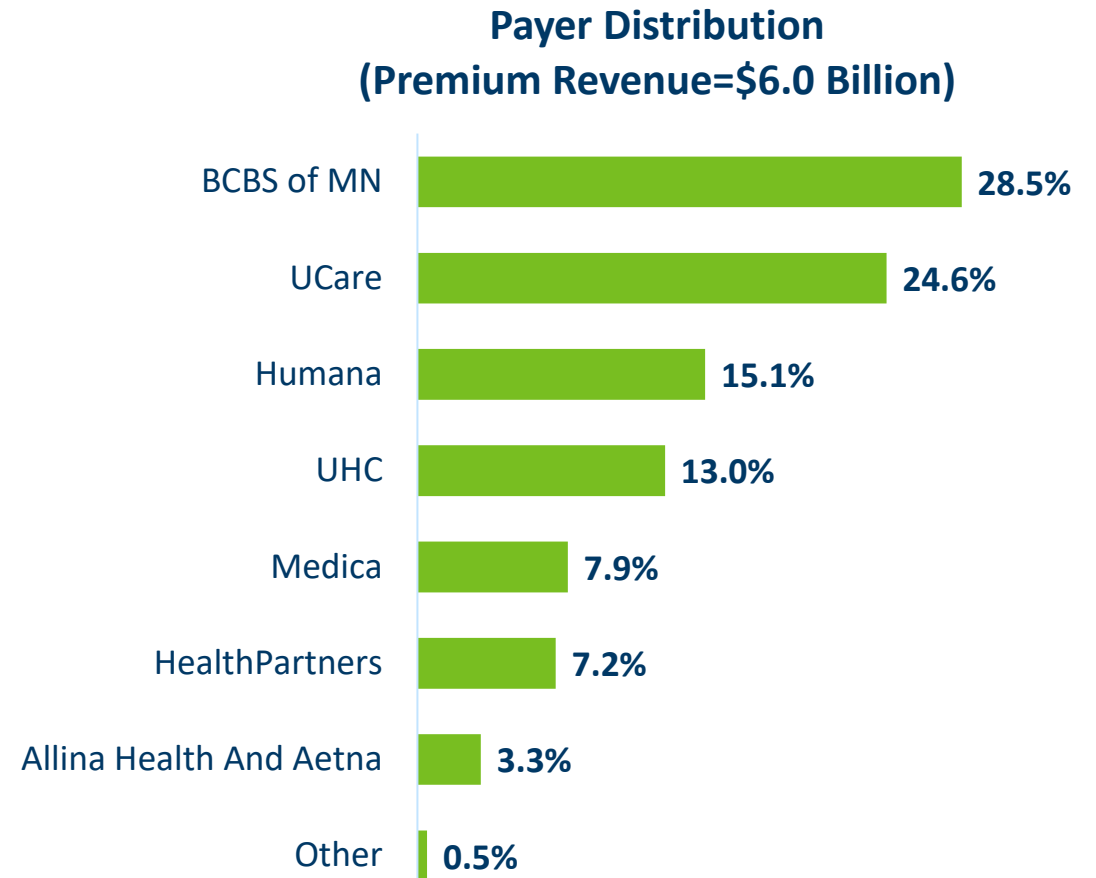
- Total 2022 Minnesota Medical Assistance and MinnesotaCare enrollment represented nearly **1.3 million** Minnesotans or 22.7% of the state's population.
- Similar to premium revenue, UCare accounted for the largest share of enrollment in this market.
- On an enrollment basis, County Based Purchasers (CBPs) and UHC of IL, represented a larger market share than they did for premium revenues.



Source: MDH Health Economics Program, analysis of Minnesota Department of Human Services, Managed Care Enrollment Figures based on December 2022. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs providing state public program coverage. This data includes Minnesotans with a dual-Medicare/Medicaid plan; data should not be combined with enrollment data on slide 12. Names detailed are actual plan names providing coverage in this market segment. County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. [Summary of Graph](#)

# Medicare Advantage/Medicare Cost Market Share by Premium Revenue, 2022

- In 2022, BCBS of MN had the largest premium revenue in Medicare Advantage/Cost Plans, followed by UCare.
- Several non-Minnesota domiciled companies make up a large portion of the Minnesota Medicare Advantage/Cost market space (e.g., Humana, UHC).

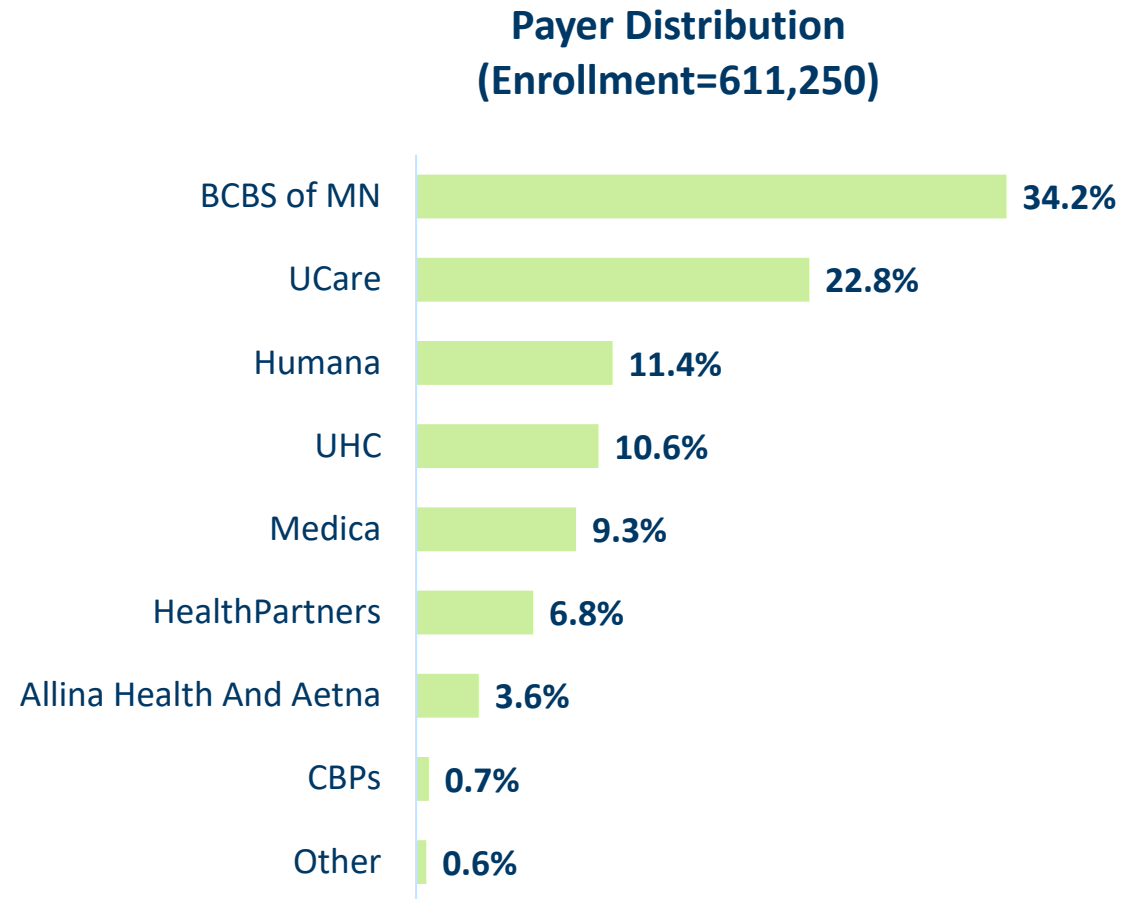


Source: MDH Health Economics Program, analysis of NAIC Schedule T reporting for 2022 based on the Minnesota Line item and includes health plan companies defined as “health” in Schedule T with a categorization of Medicare Title XVIII (i.e., private Medicare Advantage/Cost plans that may or may not have a prescription drug plan); excludes standalone Medicare Part D plans; with MDH imputation to exclude Minnesotans with a dual-Medicare/Medicaid plan. Medica Health Plans data based on MDH Supplement Report #1. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. Appendix A includes detail on company roll-ups employed in this slide deck.

[Summary of Graph](#)

# Medicare Advantage/Cost Market Share by Enrollment, 2022

- Similar to premium revenue, BCBS of MN had the largest enrollment of private Medicare plans in 2022.
- Companies otherwise had similar rankings between premiums and enrollment.

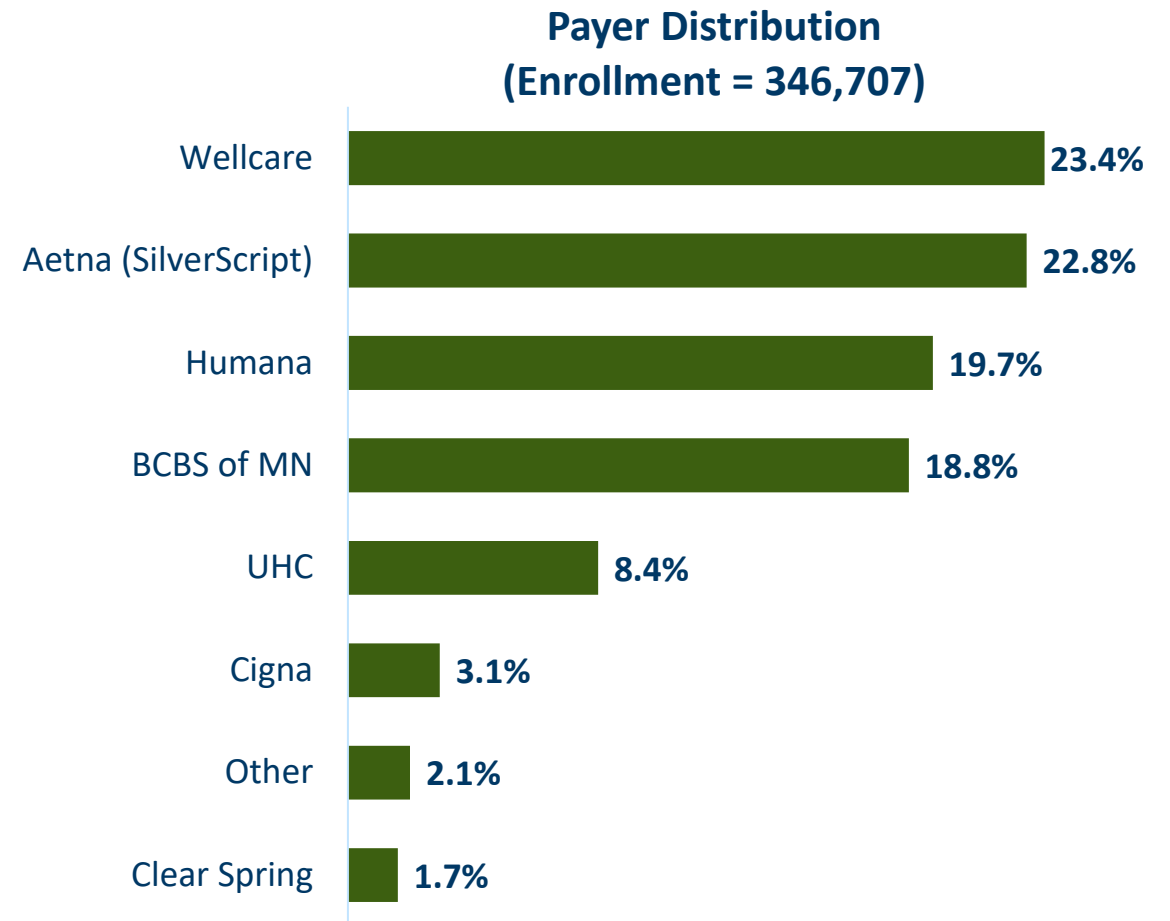


Source: MDH Health Economics Program, analysis of the CMS monthly SCC Enrollment Medicare Advantage file from December 2022. This data includes private Medicare Advantage/Cost plans that may or may not have a prescription drug plan; excludes standalone Medicare Part D plans. This data includes Minnesotans with a dual-Medicare/Medicaid plan; data should not be combined with enrollment data on slide 10. Data includes both Minnesota-domiciled and non-Minnesota-domiciled HMOs and health insurance companies. County Based Purchasers (CBPs) are IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. Appendix A includes detail on company roll-ups employed in this slide deck.

[Summary of Graph](#)

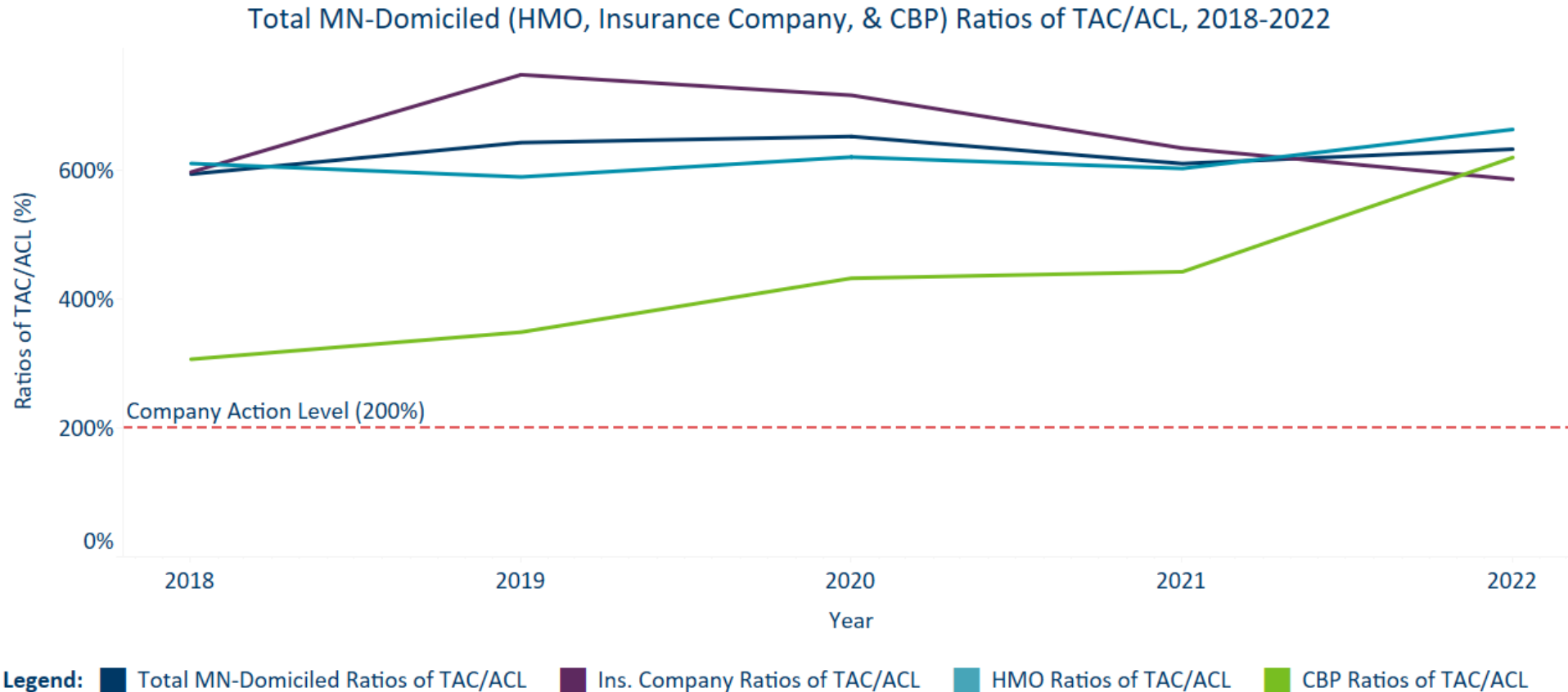
# Standalone Medicare Part D Market Share by Enrollment, 2022

- In December 2022, Wellcare had the greatest share of enrollees in standalone Medicare Part D plans, followed by SilverScript (owned by Aetna).
- The majority of standalone Medicare Part D payers are for-profit entities.



# Reserves

# Ratios of TAC/ACL by Minnesota-Domiciled Type of Insurance Company



Source: MDH Health Economics Program analysis of NAIC Five-Year Historical Data; MDH Managed Care HMO Minnesota Supplement Report #1.

This includes only Minnesota-domiciled HMOs, insurance companies, and CBPs. Group Health Plan, Inc. and HealthPartners Insurance Company data is excluded from the total roll-up to avoid double-counting that is contained in HealthPartners, Inc. Allina Health & Aetna Insurance Company data begins in 2018; Allina Health and Aetna Health Plan, Inc. data begins in 2022.

Total Adjusted Capital (TAC) is surplus or net worth adjusted for statutory accounting conventions. Authorized Control Level (ACL) is an amount calculated under the Risk Based Capital (RBC) framework and a floor that triggers companies and regulator responses to capitalization. Company Action Level is the product of 2.0 and the ACL.

[Summary of Graph](#)

# Additional Information from the Health Economics Program Available Online

- Health Economics Program Home Page ([www.health.state.mn.us/data/economics/index.html](http://www.health.state.mn.us/data/economics/index.html))
- Publications ([publications.web.health.state.mn.us](http://publications.web.health.state.mn.us))
- Health Care Market Statistics (Chartbook Updates) [www.health.state.mn.us/data/economics/chartbook/index.html](http://www.health.state.mn.us/data/economics/chartbook/index.html)
- Chartbook 7 Supplement (<https://www.health.state.mn.us/data/economics/chartbook/docs/section7supp.pdf>)

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 [health.hep@state.mn.us](mailto:health.hep@state.mn.us) if additional assistance is needed for accessing this information.



# Appendix A: Health Plan Company Roll-Up

# Health Plan Company Roll-Up

Within the Health Plan Market section, MDH combined a number of health plan companies that operate under common ownership. This slide outlines the most common health plan company combinations.

- **Allina Health and Aetna** – Aetna Life Insurance Company, Allina Health and Aetna Health Plan, Inc., Allina Health & Aetna Insurance Company.
- **BCBS of MN** – Blue Cross Blue Shield of Minnesota, HMO Minnesota dba Blue Plus. In certain other reporting this may also contain other Blues' affiliates (e.g., HCSC Insurance Services Company, Anthem, etc.).
- **County Based Purchasers (CBPs)** – IMCare (Itasca Medical Care), South Country Health Alliance (SCHA), PrimeWest Health.
- **HealthPartners** – Group Health Plan, Inc., HealthPartners, Inc., HealthPartners Insurance Company.
- **Humana** – Humana Insurance Company, Humana Wisconsin Health Organization Insurance Corporation.
- **Medica** – Medica Health Plans, Medica Insurance Company, Medica Community Health Plan.
- **Other** – this category includes other national health plan companies, Quartz Health Plan MN Corporation, and Sanford HealthPlan of MN (when applicable). For the fully-insured commercial market, this also includes applicable UHC companies.

# Health Plan Company Roll-Up, Continued

- **PreferredOne** – PreferredOne Community Health Plan (now known as UCare Community Health Plan), PreferredOne Insurance Company.
- **UCare** – UCare Minnesota, UCare Health, Inc.
- **UHC** – UnitedHealthcare Insurance Company, UnitedHealthcare of IL, Sierra Health and Life Insurance Company, Inc., Care Improvement Plus South Central Insurance Company, Golden Rule Insurance Company.

## Appendix B: Key Terms

# Key Terms

## Listed in alphabetical order

- **Affiliates** – health plan companies that are under the same health plan holding company.
- **Authorized Control Level (ACL)** – is an amount calculated under the Risk-Based Capital (RBC) framework and a floor that triggers health plan company and regulator responses to capitalization.
- **County Based Purchasers (CBPs)** – IMCare, South Country Health Alliance (SCHA), and PrimeWest Health. CBPs are health plans operated by a county or a group of counties that purchase health care services for certain residents enrolled in Medical Assistance and MinnesotaCare. The participating counties are primarily rural. Additional information is available on MDH's website: [www.health.state.mn.us/facilities/insurance/managedcare/planinfo/cbpinfo.html](http://www.health.state.mn.us/facilities/insurance/managedcare/planinfo/cbpinfo.html).
- **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 insurance companies** – health plan companies that provide comprehensive health insurance coverage to Minnesotans that are not health maintenance organizations.
- **Health Maintenance Organizations (HMOs)** – nonprofit and for-profit corporations which provide comprehensive health insurance coverage to Minnesotans. They also provide health care to state public program 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.

# Key Terms

## Listed in alphabetical order, continued

- **Individual (non-group) market** – a health insurance market where individuals purchase health insurance coverage directly; plans can cover one person (single coverage) or dependents (family coverage). Also referred to as non-group market, indicating that coverage is not obtained as part of an employer group.
- **Large group market** – health insurance coverage purchased for employees by employers with greater than 50 employees.
- **Market share** – the proportion of a market – measured by premium revenue or enrollment – held by a health plan company under common ownership.
- **Minnesota-domiciled** – a health plan company which is incorporated/organized in Minnesota.
- **NAIC** – National Association of Insurance Commissioners (NAIC). MDH uses annual reporting provided by the NAIC to complete many of these slides. Data from the NAIC is based on the state of domicile, meaning there are instances where data provided can include non-Minnesota residents.
- **Non-Minnesota domiciled** – a health plan company which is incorporated/organized outside of Minnesota.
- **Premium revenue (total premiums)** – the amount of money a business makes from all products and services the business sells, prior to any expenses.
- **Small group market** – health insurance coverage purchased for employees by employers with 2 to 50 employees.
- **Total Adjusted Capital (TAC)** – the surplus or net worth of a health plan company adjusted for statutory accounting conventions.