

STATE OF MINNESOTA

DEPARTMENT OF COMMERCE

ST. PAUL, MINNESOTA

REPORT OF EXAMINATION

OF

HENNEPIN HEALTH

MINNEAPOLIS, MINNESOTA

NAIC # 52627

AS OF

DECEMBER 31, 2017



Protecting, Maintaining and Improving the Health of All Minnesotans

The attached report of an examination made of the condition and affairs as of December 31, 2017, of:

Hennepin Health
NAIC #52627
400 South 4th Street, Suite 201
Minneapolis, Minnesota 55415

was recently completed by duly qualified examiners of the State of Minnesota.

Due consideration has been given to the comments of the examiners regarding the operations of Hennepin Health, and their financial condition, as reflected in this report. This report is hereby, as of this date, approved, adopted, filed and made an official record of this Department.

Jan K. Malcolm Commissioner

By: Marie Dotseth, M.H.A., Assistant Commissioner

Dated: _____5/3/2019



Pursuant to the authority vested in the Commissioner of Commerce of the State of Minnesota, Steve Kelley, being first duly sworn, upon his oath, deposes and says that a comprehensive examination was made of the affairs and financial condition of

Hennepin Health
NAIC #52627
400 South 4th Street, Suite 201
Minneapolis, Minnesota 55415

a Health Maintenance Organization (HMO) authorized under the laws of the State of Minnesota. That, to the best of his information, knowledge, and belief, the attached Report of Examination describes the affairs and financial condition of the above-named company as of December 31, 2017, as determined by a comprehensive examination made in accordance with Minnesota Statutes Section 62D.14. The examination was completed by duly qualified examiners of the State of Minnesota representing the Midwestern Zone (III) of the National Association of Insurance Commissioners.

Due consideration has been given to the comments of the examiners regarding the operations of the above-named company and its financial condition, as reflected in this Report of Examination.

This Report of Examination is hereby, as of this date, approved, adopted, filed and made an official record of this Department.

Steve Kelley Commissioner

By: Grace Arnold

Deputy Commissioner

Dated: <u>582019</u>

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February 20, 2019

The Honorable Jan K. Malcolm Commissioner of Health State of Minnesota Department of Health 625 Robert St. N PO Box 64975 St. Paul, MN 55164-0975 The Honorable Steve Kelley Commissioner of Commerce State of Minnesota Department of Commerce 85 7th Place East, Suite 280 St. Paul, Minnesota 55101-2198

Dear Honorable Commissioners:

Pursuant to your instructions and the statutory requirements of the State of Minnesota, a comprehensive examination has been made of the affairs and financial condition of:

Hennepin Health
NAIC #52627
400 South 4th Street, Suite 201
Minneapolis, Minnesota 55415

hereinafter referred to as the "Company." Such Report of Examination is herewith respectfully submitted.

SCOPE OF EXAMINATION

We have performed our full-scope risk-focused statutory financial condition examination of Hennepin Health (Company) pursuant to the Minnesota Department of Commerce (Commerce) Examination Order #18-006. The examination was conducted on behalf of the State of Minnesota Department of Health by the State of Minnesota Department of Commerce (hereinafter referred to as "Commerce"), observing the guidelines and procedures in the NAIC Financial Condition Examiners Handbook (hereinafter referred to as the Handbook). Pursuant to Minnesota Statutes §62D.24 Health and Commerce have entered into an Interagency Agreement whereby Commerce conducts a financial examination of Health Maintenance Organizations on behalf of Health. The last examination was completed as of December 31, 2014. This examination covers the period of January 1, 2015, through December 31, 2017, including any material transactions and/or events occurring subsequent to the examination date.

We conducted our examination in accordance with the National Association of Insurance Commissioners (NAIC) *Financial Condition Examiners Handbook* (Handbook) as adopted by the NAIC, along with specific procedures defined by Commerce. The Handbook requires that we plan and perform the examination to evaluate the financial condition, assess corporate governance, identify current and prospective risks of the Company and evaluate system controls and procedures used to mitigate those risks. An examination also includes identifying and evaluating significant risks that could cause an insurer's surplus to be materially misstated both currently and prospectively.

All accounts and activities of the Company were considered in accordance with the risk-focused examination process. This included assessing significant estimates made by management and evaluating management's compliance with Statutory Accounting Principles. The examination does not attest to the fair presentation of the financial statements included herein. If during the course of the examination, an adjustment was identified, the impact of such adjustment is documented separately following the Company's financial statements presented within this Report of Examination.

This Report of Examination includes significant findings of fact and general information about the insurer and its financial condition. There may be other items identified during the examination that, due to their nature (e.g., subjective conclusions, proprietary information, etc.), are not included within the Report of Examination but were separately communicated to other regulators and/or the Company.

RSM US LLP, an independent Certified Public Accountant (CPA), audited the Company's statutory financial statements annually, for the years 2015 through 2017. Among the procedures incorporated into this examination was a review of the annual audit work papers prepared by the CPA. Certain work papers developed by RSM US LLP were relied upon by the examiners and were incorporated into the examiners' work papers.

STATUS OF SIGNIFICANT FINDINGS FROM PRIOR EXAMINATION

The prior examination of the Company resulted in no adverse regulatory findings, with no recommendations included in the Report of Examination as of December 31, 2014.

SUMMARY OF SIGNIFICANT FINDINGS

There were no material adverse findings, significant non-compliance findings or material changes to the financial statements as a result of examination procedures performed.

COMPANY HISTORY

The Minnesota Department of Health issued Hennepin County, Minnesota (hereinafter referred to as the County) a certificate of authority on October 19, 1983, in accordance with Minnesota Statutes, section 62D, to operate a health maintenance organization (hereinafter referred to as an HMO). The County, a metropolitan governmental unit of the State of Minnesota, subsequently created Hennepin Health (then named Metropolitan Health Plan) as an enterprise fund within its governmental system which commenced business as an HMO on June 1, 1984. There is no separate legal entity for the HMO except as part of Hennepin County. The name was changed from Metropolitan Health Plan to Hennepin Health on September 2, 2016, to associate the HMO with the Hennepin Healthcare System brand name.

MANAGEMENT AND CONTROL

CORPORATE GOVERNANCE

Corporate governance is the set of processes, customs, policies, laws, and institutions affecting the way a corporation is directed, administered or controlled. The Board of Directors and management are the principal players in the Company's corporate governance and are tasked with an organization's risk management activities and with establishing a controlled environment. The control environment represents an organization's first line of defense to mitigate all risks, including the risk of financial reporting errors.

Corporate governance is facilitated by the Company's Board of Directors, who are responsible for the control and management of the affairs, property, and interests of the Company. The Board appoints executive officers to conduct the day-to-day operations of the Company.

COMMISSIONERS

The Hennepin County Board of Commissioners, which consisted of the following individuals at December 31, 2017, governs Hennepin Health:

Name and Location	First Elected	Principal Occupation
Mike Opat Robbinsdale, MN	1992	County Commissioner
Linda Higgins Minneapolis, MN	2012	County Commissioner
Marion Greene Minneapolis, MN	2014	County Commissioner, Board Chair
Peter McLaughlin Minneapolis, MN	1991	County Commissioner
Debbie Goettel Richfield, MN	2016	County Commissioner
Jan Callison Minnetonka, MN	2008	County Commissioner
Jeff Johnson Plymouth, MN	2009	County Commissioner

OFFICERS

In accordance with the Company's bylaws, the board of commissioners appointed the following officers who were serving as of December 31, 2017:

Name	<u>Title</u>
Shannon Mayer*	Chief Executive Officer
Abdirahman Abdi	Chief Financial Officer
Marc Manley, MD	Medical Director
Mary Rowan	Director of Operations
Hillary Hume	Director of Clinical Innovation

^{*}Ms. Mayer resigned effective April 20, 2018, and was immediately replaced by Anne Kanyusik Yoakum, former Chief Compliance Officer, as Interim Chief Executive Officer. The County Board of Commissioners approved Ms. Yoakum's permanent appointment on October 28, 2018.

TERRITORY AND PLAN OF OPERATION

Hennepin Health provides healthcare services to eligible Minnesota Medicaid recipients in an Accountable Care Organization (ACO) capacity. Through a collaboration agreement with Hennepin Healthcare System, Inc., also known as Hennepin County Medical Center (HCMC), Hennepin County Human Services and Public Health Department (HSPHD), and NorthPoint Health & Wellness Clinic (collectively referred to as the ACO Partners) members are provided with both health and social services.

As the HMO, Hennepin Health provides comprehensive coverage to enrolled recipients and their dependents who are eligible for state-funded health programs including Prepaid Medical Assistant Program (PMAP), MinnesotaCare (MNCare) and Special Needs Basic Care (SNBC). Funding is provided through capitation payments received through a contract with the State of Minnesota's Department of Human Services (DHS). The PMAP/MNCare contract includes a risk-sharing arrangement between the ACO Partners and Hennepin Health.

REINSURANCE

Reinsurance coverage for inpatient claims is provided under a reinsurance agreement with a major international carrier whose fees are charged at a fixed rate per member, per month. The Company retains the first \$400,000 of risk per each PMAP-Adults without children and SNBC Medicare member and \$350,000 per each PMAP-Families with children and MNCare member per year. The reinsurer covers a scheduled percentage of the excess risk to a lifetime maximum of \$2,000,000 per member.

FINANCIAL STATEMENTS

The examination does not attest to the fair presentation of the financial statements included herein. If during the course of the examination, an adjustment was identified, the impact of such adjustment is documented separately following the Company's financial statements. Financial statements, as reported and filed by the Company with Commerce are reflected in the following:

(Note: Failure of the columns to add to the totals reflected in this Report of Examination is due to rounding.)

HENNEPIN HEALTH ASSETS AS OF DECEMBER 31, 2017

	Nonadmitted		Net Admitted		
		Assets	Assets		Assets
Real estate - properties occupied by the company	\$	1,166,163	\$ -	\$	1,166,163
Cash and short-term investments		85,429,218	-		85,429,218
Cash and invested assets		86,595,381	-		86,595,381
Premiums and considerations:					
Uncollected premiums and agents' balances in the					
course of collection		17,688,769	-		17,688,769
Amounts recoverable from reinsurers		65,397			65,397
Furniture and equipment		665,575	-		665,575
Health care and other amounts receivable		1,724,471	1,145,371		579,100
Prepaid expense	_	19,451	 19,451		-
TOTAL	\$	106,759,044	\$ 1,164,822	\$	105,594,222

HENNEPIN HEALTH LIABILITIES, SURPLUS, AND OTHER FUNDS AS OF DECEMBER 31, 2017

Claims unpaid	\$ 31,214,159
Accrued medical incentive pool and bonus amounts	11,836,234
Unpaid claims adjustment expenses	1,135,000
Premiums received in advance	17,941,158
General expenses due or accrued	3,667,283
Total liabilities	65,793,834
Unassigned funds	39,800,388
TOTAL	\$ 105,594,222

HENNEPIN HEALTH STATEMENT OF OPERATIONS FOR THE YEAR ENDED DECEMBER 31, 2017

Member Months	307,304
Net premium income	\$ 231,463,693
Hospital and Medical	
Hospital/medical benefits	127,310,261
Other professional services	10,464,214
Emergency room and out-of-area	13,688,004
Prescription drugs	30,248,882
Other hospital and medical	5,596,636
Incentive pool, withhold adjustments and bonus amounts	12,304,861
Subtotal	199,612,858
Less:	
Net reinsurance recoveries	65,397
Total Hospital and Medical	199,547,461
Claims adjustment expenses, including \$5,878,930 cost containment	13,842,223
General administrative expenses	13,948,523
Total Underwriting Deductions	227,338,207
Net underwriting gain	4,125,486
Net investment income earned	648,044
Net investment gains	648,044
NET INCOME	\$ 4,773,530

HENNEPIN HEALTH CAPITAL AND SURPLUS AS OF DECEMBER 31, 2017

Capital and surplus, December 31, 2016		\$ 34,566,999
Netincome	\$ 4,773,530	
Change in nonadmitted assets	459,859	
Change in surplus as regards policyholders for the year		5,233,389
Capital and surplus, December 31, 2017		\$ 39,800,388

COMMENTS ON FINANCIAL STATEMENT ITEMS

No examination adjustments to the financial statements or commentary were deemed necessary as a result of the examination.

Per examination findings, the Company met the minimum surplus requirements pursuant to Minnesota Statutes, Chapter 62D as of December 31, 2017.

SUBSEQUENT EVENTS

There were no matters or events identified subsequent to December 31, 2017, through the date of this report that would materially affect the financial statements or operations of the Company.

ACKNOWLEDGMENTS

In addition to the undersigned, representatives of INS Services, Inc. also participated in this examination.

Respectfully submitted,

Cheryl Plozizka

Cheryl Plozizka, CPA, CFE, ARM-E

Examiner-in-Charge

INS Regulatory Insurance Services, Inc.

Representing the State of Minnesota,

Department of Commerce