Minnesota is vying for a future as a federal medtech hub. Meet some of the innovators elevating the case.

ALSO INSIDE:
WHY ARE HOSPITALS LOSING MONEY?
A WORKFORCE CRISIS
CONCIERGE MEDICINE
Join the **Pinnacle of Innovation**

Unlock your potential in medical device design, development, and manufacturing with Cirtec.

Contribute to an organization pioneering groundbreaking advancements in Cardiology, Neurology, and Orthopedics. At Cirtec, innovation and collaboration are ingrained in our DNA.

Join The Journey | Visit Cirtecmed.com/careers
FEATURES

20 | Minnesota's Campaign for Medtech Prominence
The Twin Cities is in the running for millions of federal dollars as a newly designated “tech hub.” It could determine whether our longtime status as a medtech epicenter continues. By Dan Niepow

24 | Medtech's Next Gen
Meet five Minnesota entrepreneurs taking big swings at health care innovation that could improve disease detection and treatment. By Allison Kaplan

26 | The Growing Workforce Crisis
The industry looks to the future, struggling to find solutions to burnout and worker shortages. By Winter Keefer

30 | Hospitals Under Stress
Is the hospital revenue model weakening because of uncompensated care, low government reimbursement rates, or a lack of fiscal discipline? By Liz Fedor

AGENDA

5–13 | Whatever happened to concierge medicine? Herself Health attempts to drive better outcomes in elder medicine. St. Mary’s Medical Center brings a new look to downtown and to patient care in Duluth. The Meter: Health care and the Minnesota economy. Office Envy: Therapy suites.

VIEWPOINT

4 | Editor's Note
Leveraging Minnesota’s health care talent. By Allison Kaplan

14 | Guest Commentary
Navigating the world of family caregivers and the path to support. By Tia Newcomer

15 | Guest Commentary
How employers should think about delivering equitable health care access today. By Dave Dickey

16 | Performing Philanthropy
Community-based nonprofits focus on wellness and the whole person to improve health outcomes. By Sarah Lutman

18 | Working It
Facing the crisis in workplace mental health. By Linda L. Holstein

19 | Plattitudes
An amazing health care ecosystem can't take a generation off. By Adam Platt

64 | Open Letter
Inside the Governor's Task Force on Academic Health. By Vance Opperman

NOTABLE

36 | Best-in-Class Professionals
Recognizing emerging leaders and women in manufacturing.

INSIGHTS

44 | Health Care
These local health care organizations are leading the charge in pioneering real, structural change for a healthier Minnesota.

PLUS

48 | 2024 Meetings & Events Resource Guide
From AV to catering, connecting businesspeople to event professionals who deliver a wide range of experiences.
“Just do it. So many people think about doing something for so long ... you’re not going to get everything right, and it’s okay because you’ll learn from your mistakes.”

Kristen Denzer started Tierra Encantada, a Spanish immersion daycare that’s now franchising nationally. By All Means, episode 123. tcbmag.com/byallmeans

For more information and to register visit:
zm.umn.edu/1stTuesday

SPONSORS

TENNANT COMPANY

TWIN CITIES BUSINESS WELLS FARGO NERDERY.

McNamara Alumni Center University of Minnesota
Leveraging Minnesota’s Health Care Talent
WHAT’S ON THE MINDS AND AGENDAS OF EXECUTIVES AND ENTREPRENEURS?

The invitation encouraged dressing in plaid—in honor of Medtronic founder Earl Bakken, who famously wore a tartan jacket for his company’s annual holiday program. I’ve heard that in those early years, Bakken actually read Christmas stories to employees.

As Medtronic has grown, so, too, has its holiday program. I was one of a few journalists invited to the 64th annual event at its Fridley headquarters in early December. The soaring atrium was filled with researchers, staff, and executives flown in from around the world. The stage setup rivaled that of a news station, with multiple cameras, teleprompters and giant screens broadcasting live feeds from Medtronic offices across the globe. Chairman and CEO Geoff Martha, who joked that he evaluates each year based on how easily he can fit into his plaid sport coat, seamlessly shifted into talk show mode. He interviewed people who have recovered from injury or disease with the help of a Medtronic product—a pacemaker, a suturing device, a robotic assisted surgery. There were tears, there was awe. You could see the pride on employees’ faces. Sure, this was a highly produced infomercial, but it’s hard not to be inspired when you connect innovation with the humans it benefits.

We need more of this, and not just at internal company meetings. Martha knows it, which is why he’s leading the charge to secure a federal “tech hub” designation for Minnesota that would bring dollars and national attention (read all about it: “Minnesota’s Campaign for Medtech Prominence,” page 20).

And it’s why Twin Cities Business is doing something different this issue. Rather than bringing you the usual wide-ranging business news, we’re going all-in on the business of one of the most important industries in the region: health care. We’ve delved into some of the questions that keep surfacing in our editorial meetings—everything from hospital finances to the costs of health benefits to burnout among health care workers. We leveraged the expertise of many talented individuals working on these and other critical health matters in our community. You’ll see some of their names throughout these pages; there are many others who were equally generous with their insights and connections behind the scenes, like Jodi Hubler, Deb Hopp, Frank Jaskulke, April Prunty, and Eric Hoag. We’re also privileged to get a firsthand account of the work coming out of the Governor’s Task Force on Academic Health at the University of Minnesota from committee member (and TCB owner) Vance Opperman in his Open Letter, page 64.

Along with taking the pulse of Minnesota’s large health care organizations and speaking to their leaders about their priorities and concerns, we’ve been talking to many medtech entrepreneurs who see new possibilities and believe that this is the state to make it happen—if they can get more support.

“The Minnesota ecosystem has an amazing mix of entrepreneurs, large strategics, big health plans, amazing health care systems. To have that all in one state is phenomenal,” says Morgan Evans, serial medtech founder and investor who’s on our cover (“Medtech’s Next Gen,” page 24). “We need more early-stage funding and better connectivity so we can propel great innovations to market faster.”

Dr. Johnathon Aho is a surgeon and founder of Pneumeric, maker of the Capnospot, a device to treat collapsed lungs with more precision than the current standard in ERs and ambulances. The research and product development may actually have been the easy part; Aho says it’s the fundraising, marketing, hiring, and approval process that are really putting him to the test. “It’s exhausting,” he confessed, talking while he was on call at the Sanford Clinic in Luverne, Minn. I asked Aho what he’d change if he were in charge of all aspects of the innovation process. He said he’d create a consortium of Minnesota’s hospital systems to get more ideas funded, with a focus on patient benefit rather than the biggest returns. “Pneumeric isn’t going to be a billion-dollar market cap, but we might be a $100 million company,” Aho says. “Smaller companies don’t offer the big payoff for VCs, but they’re often the sure bets that create consistency.”

Brad Larmie echoed a similar concern. He’s the new executive director at St. Paul’s University Enterprise Labs, where there’s a waiting list of 25 life sciences-related startups in need of lab space. In Minnesota, he says, “We’re really good at science. We’re really good at growing big organizations. We need to create a stronger bridge between the people who have done it well and those who are trying to figure it out.”

Here’s hoping this issue can serve as a bridge builder. We welcome your ideas.
Pediatrician Michael Hobbs quit his job last April, leaving the independent practice Pediatric Services in St. Louis Park. His personal practice there included 2,000 patients. He now works out of a one-room office he subleases from an internal medicine doc in Edina. He has 225 patients. He has no receptionist. No nurses. No X-ray machine. He’s available to his patients 24/7 and returns calls himself.

“I’m happier, my patients are happier.”

Hobbs is on the not quite cutting edge of a medical movement called direct patient care (DPC), which is similar to the concierge medicine movement that began a couple decades ago. When mature, his new practice will be 15–20% the size of his old one. He expects to have a better work/life balance, offer better care, and give patients better access, all for a modest monthly fee of $75.

“The problem in medicine is, as we get bigger, the profession works toward what systems need rather than focusing on care,” Hobbs explains. “I wanted to be a small-town doc.”

Dr. Hobbs on a house call. What’s a house call?
That wistful vision of medicine passed into history in the Twin Cities between 1980 and 2000, by and large, as insurers and health systems sought greater control over what medicine cost and how it was practiced. Minnesotans under 40 probably can’t remember an era when doctors owned their practices and patients chose them based on reasons having nothing to do with care networks or insurance policies.

During the health maintenance organization (HMO) boom of the 1980s and 1990s, where corporate medical groups began to squeeze out independents, a new type of practice called concierge medicine emerged, designed for people who didn’t want an insurer telling them which doctors they could see. The docs who practiced it didn’t accept insurance—or the rules set by insurers. (Insurance still paid for diagnostic tests, medicines, and specialist referrals.) They charged patients an annual fee and limited the size of their practice, resulting in more time with patients.

Today concierge medicine is entrenched in places with high concentrations of the affluent and elderly, says Dr. Ben Bache-Wiig, former chief clinical officer for Allina Health, now executive medical director of St. Louis Park-based Lifespark, a home care company. “[Concierge] thrives in markets where dissatisfaction with access and time spent with providers is high,” he says.

Bache-Wiig says alternative models have not taken root in MSP, because a small number of companies (Allina, Park Nicollet, Fairview, North) control the care market, and insurers have found it difficult to streamline networks because they encompass so many area doctors. As a result, access is less of an issue here. Bache-Wiig says most Minnesotans who use concierge medicine do so as snowbirds in Florida, where many practices are closed to new Medicare patients.

One of the longest-standing concierge practitioners locally is Dr. Jason Reed. In 2003, after five years in his post-residency practice with Allina, he co-founded a concierge practice that also catered to executive medicine—comprehensive annual physicals for C-suite execs paid for by corporations. The practice, Reed had over 1,000 patients.

Hobbs and Reed affirm that neither expected to earn more money after leaving corporate medicine, and in Hobbs’ case, he expects to earn less. “Many doctors still live a philosophy of [service],” Reed says. “If I can see 15 people today with upper respiratory infections, that’s good service, but if I can reach one or two people on long-term lifestyle changes, that’s meaningful.”

Hobbs expects his practice to fill via word of mouth in a matter of months. His only regret at this point is the 1,600–1,800 patients he could not take along. “If every primary care doctor did what I’m doing, there wouldn’t be enough providers to see all the patients in an environment where there is already a shortage.” —Adam Platt
Three Things You May Not Know About Bridgewater Bank

From a vision to see banking differently to investing in trailblazers that are designing the future, learn why this local bank treats ideas as currency—and how the Twin Cities business scene is reaping the rewards.  

Bridgewater Bank is, quite literally, in the business of talking shop. When experienced visionaries and business leaders come through the doors looking to crunch numbers or explore new markets, the team of in-house experts at the full-service Twin Cities bank has a lot to say. They draw on a background built on entrepreneurial insights—something its client base can largely identify with.

1 Built by an entrepreneur, for entrepreneurs.
Bridgewater’s origin story is a lot like other entrepreneurial companies, where a founder took some risk and converted an idea into reality, says Nick Place, chief lending officer. Against the backdrop of an economic downturn, founder Jerry Baack teamed up with a few others to liquidate accounts and leverage assets to raise the necessary capital to get Bridgewater up and running. (Baack and team’s first rule of order for the bank-to-be? Get 125 entrepreneurs on board to invest.)

Place says it’s why the bank’s roster of employees know what it’s like to engage in a healthy amount of risk-taking for something you staunchly believe in. “As an entrepreneur and operator, we understand what our business owner clients go through and can relate with them on a level that many larger or older banks cannot,” he says. The money they lend and accounts they offer is on pace with the big players, meaning decisions are made locally and efficiently.

Since Bridgewater was founded and grown here with all seven branches conveniently located within the metro, these quick decisions, coupled with their insights into local market conditions, can be all the difference for clients winning or losing a deal.

2 Network means net worth.
One person’s high-stakes deal could be another’s first money memory. “From the checking account for my 9-year-old daughter to the large corporate relationship with hundreds of accounts and tens of millions on deposit, we get to know our clients, their businesses, and their families to not only provide them with resources and suggestions to make their banking better, but also get to know them on a personal level,” says Place. Technology advancements in the last ten years have really leveled the playing field for banks of all sizes. “This lets our more tech-savvy clients utilize these tools to self-service their banking [needs], but we also have top-notch customer service that our clients know they can rely on if they need to talk through something.”

With roots firmly planted in the Twin Cities comes another powerful benefit, says Place. “We have a large network of top people in each industry that we plug our clients into to help them improve their own businesses. These connections have allowed clients to find a new vendor, move locations, expand, hire new personnel, merge with another business, or just make great, lifelong friendships.”

3 Money in the bank is the lifeblood of the local business scene.
It’s been said that the foundation of a healthy local economy is a strong local lender. Over eighty percent of lending activity at Bridgewater takes place in the Twin Cities. “I always say that we’re a pretty simple bank—we take in local deposits and lend them into the local market,” says Place. These loans go on to support local businesses and construction projects which, in turn, employ thousands of people across the broader community. Building on the positive impact of these loans, the bank’s commitment extends beyond financial support.

“The majority of our charitable giving goes to help support affordable housing initiatives,” he says. “We really feel having a safe, stable place to call home is foundational in solving many problems facing our community.”

Where currency flows, so does opportunity.

>> BWBMN.com
WE GATHERED SOME STATS ABOUT THE MINNESOTA HEALTH CARE ECONOMY. YES, 1% OF THE STATE’S POPULATION ARE WORKING REGISTERED NURSES.

—Gene Rebeck

**HEALTH CARE AND THE MINNESOTA ECONOMY**

**Contribution to state GDP**

<table>
<thead>
<tr>
<th>Percentage of total state GDP</th>
<th>8.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source: U.S. Bureau of Economic Analysis (2022 data)</td>
<td></td>
</tr>
</tbody>
</table>

**Hospitals by Number of Beds**

<table>
<thead>
<tr>
<th>Beds</th>
<th>Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–49</td>
<td>93</td>
</tr>
<tr>
<td>50–99</td>
<td>20</td>
</tr>
<tr>
<td>100–199</td>
<td>11</td>
</tr>
<tr>
<td>200 or more</td>
<td>17</td>
</tr>
</tbody>
</table>

**Number of Hospitals in Minnesota**

<table>
<thead>
<tr>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td>88</td>
</tr>
</tbody>
</table>

**Health Care Professionals**

<table>
<thead>
<tr>
<th>Physicians, surgeons, osteopaths</th>
<th>Per 1,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>19,508</td>
<td>3.12</td>
</tr>
</tbody>
</table>

**RN’s**

<table>
<thead>
<tr>
<th>RN’s</th>
<th>Per 1,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>63,800</td>
<td>11.16</td>
</tr>
</tbody>
</table>

**Health Care Spending Per Capita (2020)**

<table>
<thead>
<tr>
<th>Health Care Spending Per Capita</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source: KFF</td>
<td>$10,846</td>
</tr>
</tbody>
</table>

**Life Expectancy**

<table>
<thead>
<tr>
<th>Life Expectancy</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source: National Center for Health Statistics (2020 data)</td>
<td>76.8</td>
<td>81.4</td>
</tr>
</tbody>
</table>

**SOURCES:**

- U.S. Bureau of Economic Analysis (2022 data)
- Minnesota Board of Medical Practice
- Association of American Medical Colleges State Physician Workforce Data Report, January 2022
- U.S. Bureau of Labor Statistics (2022 data)
- KFF
- National Center for Health Statistics (2020 data)
A VALUE PROPOSITION
HERSELF HEALTH ATTEMPTS TO DRIVE BETTER OUTCOMES IN ELDER MEDICINE.

We are currently in the era of the consumerization of health care, according to Kristen Helton, CEO of St. Paul-based Herself Health. “Patients and consumers have different expectations around services,” she says. “There is a swell of demand and impatience that the [health care] system isn’t moving quickly enough to meet.”

For Herself’s target audience—women over 65—the phenomenon is all too poignant. A market that Helton describes as at the “intersection of ageism and gender bias,” older women commonly see their health concerns dismissed, which can lead to poor outcomes. Herself’s proposition is a primary care option that follows a value-based care model.

Her goal is to “set the standard for high-quality, primary care—what the patient experience and expectation should be. Hopefully, it brings better care to women all across the region. It is very hard to deliver comprehensive care that is well suited for everyone,” Helton notes. “When you narrow your focus like we have, it just makes it that much easier to improve the experience and the outcomes.”

That notion of outcomes is core to the value-based care model. Traditional health care’s fee-for-service model incentivizes providers to minimize time with each patient in favor of seeing more patients. The value-based model aligns provider incentives with a focus on prevention and keeping the patient healthier. It is being tested in many settings across the country.

Herself’s model is “tiered by patient need,” Helton explains. The federal Centers for Medicare & Medicaid (CMS) establishes a “risk score,” representing the predicted cost of treating a patient compared to the average Medicare patient. Providers are paid a set amount for a specific set of services. This enables them to deliver services that may not be individually billable according to CMS—for instance, referring older patients with weak bones to an in-house program on fall risk and prevention. Herself Health is still in startup mode, having just reached the first anniversary of its St. Paul clinic. Since then, it’s launched two clinics in Minneapolis and is working on clinics four (Roseville) and five (south metro). It’s also operating some fee-for-service care to provide some revenue and financial stability.

Herself has so far raised funding that totaled $33 million in July and investor dollars are going into delivery of services, additional team members, and technology. Helton will not know if the model is economically viable for several years, she says. —Tina Nguyen

Improving the health of our members and communities since 1984.
Powered by the hardest working people in the industry, we de-complicate, advocate and always go the extra mile.

uccare.org
Licensed psychologist Christina Hansen Cohen needed an office. But like most white-collar professionals today, she didn’t need it full time; she sees patients in both Minnesota and Florida, and her therapy sessions mix in-person and telehealth.

She went looking for a space she could rent part time, but quickly realized that the typical co-working space wouldn’t meet the privacy needs required for mental health services. So she decided to build out Minnesota’s first co-working space for mental health professionals, Therapy Suites Inc. in Edina. It opened in April 2023.

Designed specifically for therapy, counseling, psychotherapy, play therapy, and psychological testing, Therapy Suites features nine HIPAA-compliant therapy rooms, two more soundproofed rooms designed for telehealth, two conference rooms, and a 100-person seminar room. Additional building amenities include an on-site gym, kitchen, and lounge. The 3,727-square-foot space is bright and inviting, with large windows and modern furniture.

Beyond aesthetics, Cohen prioritized inclusivity—gender-neutral bathrooms, handicap accessibility, furniture that is flexible, moveable, and can comfortably accommodate individuals up to 400 pounds.

“I really wanted an environment that was welcoming and friendly to all humans,” she says.

With flexibility in mind, Therapy Suites offers seven membership levels, ranging from a simple mailing address to part-time use of the private and telehealth offices to around-the-clock access to building amenities. Monthly packages range from $99 to $1,300. Nearly 30 private practitioners, including social workers, marriage and family therapists, and psychologists, are already using the space.

“We have learned, out of Covid, the joy of having flexibility in life,” Cohen says. “and this space felt like it was giving practitioners the best of both worlds.” —Fiona Hatch
GO TO SLEEP

You’d think working from home would make it more tempting to hit the snooze button, but Sarah Moe, CEO of Minneapolis-based Sleep Health Specialists, says we’ve hit a new level of exhaustion since 2020, as increased stress and anxiety interfere with sleep quality. Fatigue costs companies an average of $2,850 per employee annually due to absenteeism, lower productivity, and health issues, Moe says. And sleep deprivation can impair cognitive abilities, making it the No. 1 cause of workplace accidents. “Getting the sleep we need at night,” Moe says, “is vital to being our best selves during the workday.”

Moe offers these tips to employers:

1. **Offer sleep education.** Fitness incentives and healthy snacks are not enough; “Sleep is the third pillar of health, along with diet and exercise.”

2. **Normalize napping.** “The science behind a power nap has been proven to increase creativity and productivity. If you have a nursing room or wellness area, get a fan and a few eye masks, and allow your employees to rest when they need it. The work and culture will improve immediately.”

3. **Lead by example.** “If you are emailing your employees at 10:30 p.m., you are telling them that their time to rest and restore is something to be sacrificed. Allow your team to truly feel that their time is theirs. Power down and collaborate the next day.”

---

FROM THE EXPERT

**The Huberman Lab**

Neuroscientist and Stanford School of Medicine professor Andrew Huberman discusses science, health, and fitness on his popular podcast. “I love The Huberman Lab for its in-depth exploration of topics related to neuroscience, psychology, and human behavior. I’ve been losing sleep a lot lately and I often find helpful tips and strategies to improving my mental well-being and productivity.”

—ETHELIND KABA, EXECUTIVE DIRECTOR, ANN BANCROFT FOUNDATION

Get more tips and picks from the business leaders on the TCB 100 at tcbmag.com/tcb100reveal
VISITORS TO DULUTH CAN'T MISS IT: AN 18-STORY GLASS STRUCTURE LOOMING OVER DOWNTOWN, JUST OFF I-35. St. Mary's Medical Center, the primary hospital of Duluth-based Essentia Health, opened this past summer. At 344 beds, it's not quite on the scale of Mayo Clinic's Destination Medical Center project or any Twin Cities-metro hospital. But it will have a similar impact on the northern Minnesota health care market. TCB spoke to Jan Schade, senior vice president of operations at St. Mary's, about the game-changing structure.

“The biggest thing is that we are now able to provide patient-focused care with private rooms,” Schade says. The previous facility had double rooms with shared bathrooms. “Particularly during Covid, we struggled with maintaining proper air exchange for patients with respiratory infections,” she adds. Private rooms allow the hospital to change the airflow—it can close off a room, an entire floor, or the entire building.

The new St. Mary’s has incorporated sustainability elements, including LED lighting and water waste-reduction technologies. Windows have been designed to prevent bird strikes. It earned Best in Competition recognition at the 2023 International Interior Design Association Healthcare Design Awards.

Despite its eye-catching design, the new St. Mary’s is actually a little bit smaller than the hospital it replaced. “The actual number of functional beds is about the same,” Schade says. The old hospital had grown in stages and spurts. “Every floor was different; every layout was different,” she notes. In the new facility, every floor is laid out the same way. One advantage: The hospital can program robots to deliver equipment and supplies.

BY THE NUMBERS

• SQUARE FOOTAGE: 942,000
• NUMBER OF ROOMS: 342 single-occupancy
• NUMBER OF FLOORS: 18
• COST: $900 million
• PATIENT MARKET: West to Detroit Lakes, north to the border, east to Michigan’s Upper Peninsula, south to the Brainerd lakes

The new hospital provides a number of technology enhancements:
• Staff and providers use smartphones instead of pagers.
• Parents can watch on their devices as babies are treated in the neonatal ICU.
• Badges with wireless functionality allow staff to summon emergency help within seconds.
• Medical residents and nursing students can observe surgeries remotely, out of the way of the surgical team.

Essentia could have built its new hospital up over “the hill,” where the land is flatter and more hospitable to construction. Instead, it chose to stay downtown. With its challenging topography and massive amounts of subterranean rock, Schade notes, “it’s not easy to build on a hillside on the shore of Lake Superior.” —Gene Rebeck
Heart valve disease sometimes necessitates open-heart surgery, but Fridley-based CardioMech Inc. is working on an alternative, less invasive solution. The company, which was founded in Norway, has developed a catheter-based device specifically designed to treat “degenerative mitral regurgitation,” a prevalent disease where blood leaks between the heart’s chambers due to a faulty valve. CardioMech’s device is implanted in patients to stop leaks and “restore the native anatomy,” according to the company.

The device could be a game-changing option for patients who aren’t candidates for open-heart surgery, though CardioMech still needs to complete an early feasibility study for the FDA before it becomes widely available. “If the device works as I expect it to, this is going to be a disruptive first-line therapy,” says Rick Nehm, who signed on as CEO and invested in the company in late 2018.

In early January, CardioMech announced it landed $13 million in a fresh round of financing. The company’s ownership is still based in Norway, but its five full-time employees work in Fridley. Nehm, who previously worked for Boston Scientific, notes that CardioMech has an extensive Minnesota-based supply chain. —Dan Niepow

---

STRETCHING OUT

WOULD YOU PAY TO IMPROVE FLEXIBILITY? LIFE TIME IS BETTING ON IT.

Walk into the main exercise area at Life Time Fitness in St. Louis Park and you’re greeted by a cluster of massage tables sectioned off by rows of green plants. Trainers stretch gym-goers into acrobatic positions as curious onlookers wonder what the buzz is about. (We wonder if the high-traffic placement was intentional.) Research shows that stretching can improve flexibility, athletic performance, and range of joint motion, and can reduce risk of injury, especially as we age. But for many people it’s an afterthought.

“Human beings are extremely tight,” says John Oliver, a certified strength and conditioning specialist who helped develop LT’s dynamic stretching program, which launched at SLP in August and is now in more than 180 of the Chanhassen-based chain’s clubs nationwide. “We sit a lot, in cars, at desks, and we’ve figured out a way to compensate and hold our bodies in these positions where we tighten up—and that increases the chance of injuries.

“Stretching is great for everyone, but I’d say the demographic we’re seeing most is 45-plus, people who are active but more prone to injury.”

This 45-plus ball of knots left her free trial session feeling fantastic, in an almost post-massage-level haze. What does it cost to have someone help you loosen up? $60–$160 per 25- or 50-minute session, in addition to your monthly membership dues. —Lisa Rounds
Former first lady Rosalynn Carter said it best: “There are only four kinds of people in the world: those who have been caregivers, those who are currently caregivers, those who will be caregivers, and those who will need caregivers.”

You don’t often meet someone and hear the word “caregiver” as part of who they are. Yet there are an estimated 53 million family caregivers in the United States, and the number is expected to grow as the U.S. population ages. Family caregivers provide the overwhelming majority of long-term care in the U.S.

A family caregiver is defined by the nonprofit support organization Family Caregiver Alliance as an unpaid individual (usually a partner, family member, friend, or neighbor) involved in assisting someone with activities of daily living and medical tasks.

There are many reasons people might not identify as caregivers. It’s not a job title; some cultures or individuals don’t view this as a role that someone fills; some people don’t feel worthy of the label of caregiver. So if you don’t think of yourself as a caregiver, it’s hard to identify specific needs you might have as such, much less ask for help.

While family caregiving gets little recognition, it can be life-changing for both the caregiver and recipient. For the caregiver, it often begins with feeling overwhelmed. A recent CaringBridge survey reported that over 60% of caregivers called caregiving “stressful” and “very stressful,” while over 30% reported heavy financial strain.

Family caregivers have nonetheless become an important part of the health system. Primary care providers cite the benefits of working with family caregivers, reporting 88% better patient outcomes and 56% lower hospital readmission rates. And family caregivers often help older adults remain at home, avoiding the cost of hospitals and long-term care facilities, according to a report by the Center for Health Care Strategies Inc.

Those better outcomes come at a cost, however. Without support, caregiving takes a major personal and economic toll. According to the same report, six in 10 family caregivers report cutting work hours, taking leaves of absence, or receiving job performance warnings. And the toll on their physical and emotional health is real, with 20% reporting negative impacts to their physical health and 40% to their emotional health. In fact, long-term caregivers have a lower life expectancy, Susan W. Golden reported in a Stanford University working paper, “Landscape of Caregiving Innovations.”

So what can we do?

1. If you’re an employer, know your responsibilities. Encourage employees to learn about and use sick and safe leave as needed. In fact, the new Family Leave Act in Minnesota recognizes the need for caregiver leave, providing for up to 80 days, starting this year. Likewise, a national bipartisan bill, the Lowering Costs for Caregivers Act of 2023, would allow people to use their tax-free health savings accounts and flexible spending accounts on medical expenses for their parents, as well as spouses and dependents.

2. Know your personal rights. In the hospital setting, the CARE (Caregiver Advise, Record, Enable) Act requires hospitals to do three things:
   a. Ask patients if they have a family caregiver.
   b. Contact that person if/when the patient is to be discharged or transferred.
   c. Teach the family caregiver how to provide the care the patient will need after discharge.

3. Learn about caregiving legislation. In September 2022, the Department of Health and Human Services sent to Congress the federally mandated 2022 National Strategy to Support Family Caregivers. It includes nearly 350 actions the federal government is taking to support family caregivers, and more than 150 actions that can be adopted at other levels of government and across the private sector to begin to build a system that ensures the family caregivers have the resources they need to maintain their own health, well-being, and financial security while providing crucial support for others.

4. Lastly, as someone who was, is, will be, or will need a caregiver, start talking about caregiving. Identify your caregiving moments and openly share your own journey—the good, bad, and ugly. The more we are brave enough to talk about caregiving as openly as we talk about what we did over the weekend, the more we normalize this important role, in and out of the workplace.
A New Plan for Health Benefits

HOW EMPLOYERS SHOULD THINK ABOUT DELIVERING EQUITABLE HEALTH CARE ACCESS TODAY.

Dave Dickey

Dave Dickey is an employee benefit expert who leads North American health and benefits sales for WTW, a global health and benefits brokerage and consultancy. Before that, he was a serial entrepreneur as co-founder of Surest, Second Story Sales, TreeHouse Health, and RedBrick Health, and an early employee of Definity Health, all based in the Twin Cities.

“I’m not sure why they call it a health plan, because they don’t pay for health and it sure doesn’t seem like they have a plan.”

This was a memorable quote from an employee focus group we conducted when co-founding RedBrick Health, a digital platform designed to help people form healthier habits and make smarter health care decisions.

That was 2006. Sadly, the sentiment remains alive and well in 2024, with employees still frustrated with health care benefits and employers finding it difficult to offer health benefits that attract and retain top talent.

Employer-sponsored health benefits are a cornerstone of the American health care system, but this system faces significant challenges, impacting employers, employees, and the stability of the health care landscape itself. Understanding these challenges is crucial to forging new pathways toward sustainable and equitable health care access.

Rising costs

The most obvious challenge facing employers is ever-increasing cost. Premiums have been steadily rising, outpacing wages and inflation and putting a strain on both employers and employees. In 2024, my employer, WTW, expects most businesses will experience health care premium increases of 6% to 7.5%. The industry seems to agree that this health care trend will be at its highest levels in nearly a decade.

Costs are increasing due to improved technologies, hospital labor shortages (especially nurses), an aging population, and cost-shifting from the public sector to the private sector. However, more employers are also facing large increases because of an increased number of high-dollar claimants. Whether it is cancer, diabetes, obesity (driven by the explosion of demand for GLP-1 medications such as Ozempic), fertility, mental health, or rare genetic conditions, employers have seen an increase in costs to their health care plans.

Changing needs and shifting demographics

Employers are facing pressures from their boards of directors to align their pay and benefits with corporate objectives to be affordable and equitable for employees. Employers are facing pressures from employees, too. The workforce is changing, with demographics diversifying and employee needs evolving. Younger generations often prioritize flexibility and affordability. Meanwhile, the aging population requires specialized care and chronic disease management, adding further complexity to health care plans.

While some employers offer a diverse range of plans, many workers often face limited choices, with high out-of-pocket costs. Many employers opt for high-deductible health plans (HDHPs) to manage their own costs, shifting a greater financial burden onto employees. This trade-off can lead to deferred care, underutilization of preventive services, and ultimately, poorer health outcomes.

Innovation leads the way

Despite these challenges, there are glimmers of hope and opportunities for innovation. Several potential solutions have emerged, such as:

• "Rewards for value" plans: These plans have clearer breakdowns of costs and out-of-pocket expenses, empowering employees to make informed choices that reward them for selecting efficient (cost-effective) and high-quality providers and treatments.

• Value-based care models: Options exist for centers of excellence (COEs) and high-performance primary care models utilizing new forms of contracting, shifting from fee-for-service to value-based care models that pay for prevention, quality care, and stipulate outcome-based measures to incentivize better health and cost reduction.

• Employee well-being programs: Investing in preventive care and healthy lifestyle initiatives can lower health care costs and improve workforce productivity.

• Embracing technology: Integrating telemedicine, data analytics, and artificial intelligence can improve access, affordability, and care coordination.

• Risk mitigation tools like captives or stop-loss policies to protect the plan from high-cost claimants.

Looking ahead

Employers must function as stewards of employee health, fostering well-being, and aligning health care coverage with evolving needs. This requires collaboration, adaptability, and a commitment to innovation. By embracing new models, leveraging technology, and prioritizing value, employer-sponsored health benefits can evolve into a system that serves both employers and employees, contributing to a more equitable and accessible health care landscape in the years to come.
All Minnesotans do not have equal access to health care. Nor do all Minnesotans share the positive health outcomes that make our state rank among the healthiest in the United States.

Many rich data sources point to unacceptable disparities between health conditions and outcomes for whites compared with those of other racial and ethnic groups, between suburbs and urban core neighborhoods, and among rural, tribal, and urban populations.

You can look this up yourself. The Minnesota Department of Health maintains the Minnesota Center for Health Statistics, with data drawn from medical professionals.

In Hennepin County, the Shape survey that’s administered every four years asks residents to self-report their health status, including physical and mental health indicators. Minnesota Compass, the Wilder Foundation’s trove of demographic research and data, is another information-rich source for exploring our region’s health outcomes.

Whether you ask doctors to share data, or ask individuals—the patients themselves—the results are comparable. To be poor; to be American Indian, Black, Hispanic, or Asian; or to be female means that your health outcomes are worse than those of white male Minnesotans.

Reviewing only breast cancer data, for example, Black women in Minnesota have the highest rate of the most serious and deadly subtype, and Minnesota’s American Indian women have the highest mortality rate. Yet this is a cancer for which many women have access to

Going Upstream to Solve Health Disparities

COMMUNITY-BASED NONPROFITS FOCUS ON WELLNESS AND THE WHOLE PERSON TO IMPROVE HEALTH OUTCOMES.

Sarah Lutman is a St. Paul-based independent consultant and writer for clients in the cultural, media, and philanthropic sectors.

Sarah Lutman
@lutman_sarah

EMPOWERING
the next generation of health care.

Learn more about taking your health care career to the next level. Visit stkate.edu today.

Today’s solution for tomorrow’s provider practices

Navigating day-to-day business functions such as accounting, financial reporting, payroll processing, and managing cash flow is increasingly costly and complex for health care leaders.

EisnerAmper’s outsourced solutions can help you save time and keep your focus on patient-care outcomes.

Learn more at EisnerAmper.com/HCOoutsource
routine screening and early detection, increasing the likelihood that the disease can be successfully treated.

Fortunately, a strong cohort of nonprofits in our region are working to provide equitable access to health care in the form of neighborhood- and community-based health centers. The Minnesota Association of Community Health Centers has 17 members operating clinics in 80 locations across the state. In 2022 they served more than 160,000 patients, nearly half of whom were uninsured, and more than half of whom were people of color.

Many of these nonprofits focus on culturally responsive approaches that are welcoming to our region’s increasingly diverse population, offer an integrated set of services that include prevention, vaccinations, and wellness activities, and are located in neighborhoods designated as “medically underserved.”

A defining characteristic of these centers is that they are governed by their patients. At least 51% of their boards of directors are patient representatives. They also accept all forms of payment (including none), openly stating that no one will be turned away.

These centers also are increasingly going “upstream” to focus not only on treating diseases and conditions but also on activities that foster health and well-being. Commenting on their increased recognition of the importance of community-based nonprofits is Penny George, co-chair of the George Family Foundation.

The Minneapolis-based foundation focuses a portion of its grantmaking on whole-person health and well-being. “The health care system in this country is, unfortunately, really a sick-care system,” George says. “We need excellent disease care, of course—but equally important is care that helps us stay well or live optimally with chronic illness. There are leaders in medical systems who are committed to changing the current paradigm, including changing a financial model that incentivizes procedures, not health.

“In the meantime, however, there is a fundamental, unmet need—and community-based organizations are increasingly stepping up and refocusing their efforts to truly support whole-person health and well-being. This work is particularly important and needed for people with limited means or whose cultural, racial, or ethnic background is not well served by current systems.”

The George Family Foundation has pivoted toward greater financial support of nonprofits, “moved by the unique positioning of community organizations to ensure choice, expand access, and empower people to take charge of their own health and well-being.”

Which nonprofits are investing in health and well-being? George cites the YMCA of the North and its George Wellbeing initiative, the Cultural Wellness Center, Family Tree Clinic, the Irreducible Grace Foundation, and Annex Teen Clinic. They provide programs and services, from exercise, meditation, and nutrition activities to health screening, family planning services, mentoring, job training, and counseling.

Independent community-based, nonmedical nonprofits have long played a role in the health ecosystem. A growing spotlight on disparities in health outcomes has increased the recognition of their important role.

---

**WHERE INNOVATION Meets Compassion**

True healing goes beyond the latest medical technologies and cutting-edge treatments. Essentia Health is grateful for our remarkable colleagues who work tirelessly each day to provide award-winning, nationally recognized care for the communities we serve in Minnesota, Wisconsin, and North Dakota.

Essentia Health
EssentiaHealth.org

Nationally Recognized 5-Star Hospitals
ST. MARY’S MEDICAL CENTER
ESSENTIA HEALTH-DULUTH
ESSENTIA HEALTH-FARGO
Imagine having a mental health condition such as anxiety that stems from your job. It gets bad enough that you feel compelled to disclose your situation to your manager. Her first response is “I don’t like this mental health stuff.”

Of course, you, the employee, would rather be talking about anything other than your racing thoughts, chronic insomnia, and generalized fear.

To face such immediate rejection of the very notion of mental well-being in the workplace—not to speak of your own courageous but seemingly foolhardy decision to broach the topic—illustrates why many Americans are increasingly frustrated in their workplaces. They often encounter a perceived lack of support for, or even understanding of, their mental health.

Before the pandemic, employers who provided expanded therapy benefits, mindfulness programs, and the much-touted “mental health days” (no questions asked about your absence from work) could boast of their commitment to employee mental health.

According to recent research published in Harvard Business Review, however, those quick fixes are not enough to ameliorate serious mental health problems that workers feel forced to hide.

Mind Share Partners, a national nonprofit dedicated to “changing the culture of workplace mental health,” published its third Mental Health at Work Report in October. It surveyed 1,500 full-time U.S. workers in 2019, 2021, and 2023, on their experiences around mental health, stigma, and work.

Key to the importance of these findings is the insight into how the pandemic changed not only the obvious demand for remote work, but also an increasing employee expectation that employers would do something to make their jobs “healthier,” not just “better.”

The Mind Share Partners report noted the decline in how workers rated their personal mental well-being between 2019 and 2023.

In 2019, 78% gave ratings between 7 and 10 (highest). That rating dropped to 61% by 2023, with work itself, no matter the industry, cited as the most stressful factor in their lives—beyond finances, family, or community violence and disruption.

Of particular note was a reference to the World Health Organization’s definition of “burnout,” a common term mistakenly thought to be curable by taking time off or quitting rather than by changing the work environment itself.

Burnout, as described by the WHO, is “poorly managed workplace stress” caused by “unsustainable workloads, perceived lack of control, insufficient rewards of effort, lack of a supportive community, lack of fairness, and mismatched values and skills.”

Tackling the concept of an “unfair” workplace may best be left to union organizers. But enabling a sense of agency in team members with the goal of reducing stress should be achievable by virtually any employer, despite one unfortunate fact: the stigma of mental health issues.

Phrases like “You need to play hurt,” as if the employee were a pro football player, or “You knew this would be stressful going in,” (we warned you how much we value high achievers) are examples of common, if hackneyed, responses. Blame and responsibility lie with the worker, and success goes to the “toughest” among them.

Disclosing a diagnosis of depression has historically meant the worker is not only ill, but is destined to symbolize the bias (stigma) his company cannot overcome, namely, this person is weak.

In contrast, compare a reaction to disclosure of a cancer diagnosis to one of depression. With cancer—any kind of cancer—people tend to react to sharing of the news with empathy, because someone they know had it, died from it, or possibly overcame it. It really was not their fault, the thinking goes, even if, for example, the individual smoked for 40 years.

With a mental health disorder, the stigma permeates the cause, and is exacerbated by ignorance.

“I know people, especially younger people, who suffer from depression,” a manager might think. “But I can’t change what goes on in this employee’s head: only he can do that.”

On its website, Mind Share Partners offers a free 20-minute video and detailed worksheet on how best to “disclose a mental health challenge to your manager.” The nonprofit’s advice? Be prepared for one of three reactions to the news of your mental health problem: I don’t get it. I don’t like it. I don’t like you. And that’s just the start of the conversation.
To Our Health
AN AMAZING HEALTH CARE ECOSYSTEM CAN’T TAKE A GENERATION OFF.

Health care remains one of the great differentiators in this country. Between the well and the sick, the affluent and the poor, and strangely, between cities, often with little obvious reason. I am struck as I age, and more and more people I know are afflicted with serious medical conditions, how different outcomes and options are from place to place.

I grew up in a medically aware family. That’s a polite way of saying someone in our household spent an unhealthy amount of time preoccupied with disease processes and in doctors’ offices. I could tell you which hospitals in the Chicago area were worthy of your medical angst and which were glorified “butcher shops.” You pick up a lot when parental discussions float through the heating vents.

One of the things that I realized early on was that some places didn’t have the world-class medical care that was available where I lived. Florida was such a place, back in the day. When my 80-year-old granddad developed a challenging pneumonia in the late 1980s, the family medevaced him out of Sarasota. We have elderly relatives in Denver, a shining boomtown roughly the same size as MSP and serving a vast geographic part of the west. But Denver doesn’t have a single medical center or teaching hospital you might know by name. Finally, Asheville, North Carolina—a popular spot for retirees—recently had its sole hospital cited by the feds for sub-standard care after being sold to HCA Healthcare (a frequent corporate player in for-profit health care controversies).

Sure, if you live in one of the top five or 10 biggest metro areas, odds are you have an MD Anderson, a Sloan Kettering, a Johns Hopkins, a UCLA Medical Center. But after that, it’s idiosyncratic, and little thought about until you need it.

I don’t know why William Worrall Mayo moved to Rochester, but it worked out OK for Minnesota. But that was luck. Given Mayo Clinic’s proximity, it would seem to follow that the rest of the health care scene in MSP might resemble Denver. Instead, we have a teaching hospital at the University of Minnesota whose care, if not its hospital rooms, is among the nation’s best. There’s no reason why, after Mayo and the U were established, that Abbott Northwestern should be arguably the best non-academic hospital between Chicago and Seattle, but I can make a case.

I rarely write boosterish columns patting us collectively on the back for just being us, but the emphasis this region has made on growing and maintaining a top 10 health care ecosystem in a top 20 market is worthy of attention and continued “grinding,” as the kids say. From Medical Alley to the Destination Medical Center, health care may not attract the post-college creative class from the coasts, but it is an enduring annuity that pays off in economic impact and the caliber of scientific excellence in the state.

When a family member was diagnosed with two cancers in the same year—one quite rare—they made a trip to Mayo, but were fortunate enough to find comparable care at the U, 10 minutes from home. When someone I’m close to developed an eating disorder and required inpatient treatment, it was 10 minutes away, at HealthPartners’ Melrose Center. When someone else in my circle needed intensive outpatient mental health care, locally based Prairie Care came through at an exceptionally high standard. And most importantly, none of those folks had to endure weeks- or months-long waits for care because of shortages or rationing.

From Medical Alley to the Destination Medical Center, health care may not attract the post-college creative class from the coasts, but it is an enduring annuity that pays off in economic impact and the caliber of scientific excellence in the state.

As our owner Vance Opperman points out on the back page, health care is not a birthright—but it is a hallmark of this region and a reason it works and thrives. Mayo is an exceptional resource, but it is also 90 minutes from town, and the idea that we would let the U fall behind should simply be a nonstarter. Excellence is not optional in this arms race, and you can’t take a generation off. The best doctors and researchers go to the best institutions, which secures their future.

This is not to imply Minnesota’s health care ecosystem has figured out the nagging problems that dog American wellness: cost, equity, and access. We need far more mental health infrastructure and care. And the creeping arm of for-profit health care seems to be of questionable social value.

We’ve not figured out how to win sports championships, insulate ourselves from winter, or cook pasta al dente, but within the system that we’ve got, Minnesota, and the Twin Cities in particular, occupies an enviable niche. As you read the stories in this special issue, keep in mind: It was more than luck.
The Twin Cities metro has long prided itself on its outsized contributions to the medical device field, dating back to Medtronic founder Earl Bakken’s introduction of the world’s first wearable artificial pacemaker in the late 1950s. Present-day industry leaders are well aware that the standing isn’t permanent, however, especially as cities across the world invest in innovation.

Geoff Martha, who became CEO of medtech giant Medtronic in April 2020, has been pondering the competition for years. In the wake of Covid-19, he says, many governments around the world began thinking about health care less as an expense and more of an opportunity.

Without a concerted effort to maintain Minnesota’s status, “we could start to erode what we have,” he said in an interview at the company’s operational headquarters in Fridley in January. “Resting on our laurels would be an issue.”

That concern fueled his push for the Twin Cities to jump into a new government-sponsored effort to recognize tech hubs around the country. Formally announced this past May, the U.S. Commerce Department will choose among proposals from regions across the country to award funding. The competition was largely intended to boost the U.S. economy and bolster national security. Medical technology was one of 10 “key focus areas,” so it was a natural fit for Medtronic and a host of local industry partners. Results will be announced by spring.

The competition offers more than prestige and a bureaucratic nod; millions of dollars in federal funding are on the line, which project supporters say could be used to help build out and maintain the Twin Cities medtech industry. Pat Dillon, founder and president of nonprofit MNSBIR Inc., who’s helped field scores of applications for federal grants for Minnesota startups over the years, says it’s a chance to “bring back some of the funding [Minnesota sends] to Washington” in the form of tax dollars.

Other industry boosters maintain that the competition presents a chance to bring thousands of well-paying jobs to the region and would provide a shot in the arm for a once-dominant industry at risk of moving to other parts of the country or the world.

The Twin Cities metro has, of course, competed for the national spotlight with varying degrees of success over the years. There was the bid to host Super Bowl LII in 2018 (a win for Minneapolis), then, a similar bid for Amazon’s second headquarters, which ultimately went to Arlington, Virginia, in the Washington, D.C., suburbs (better luck next time).

But health care industry advocates and observers say that the proposal to make the Twin Cities a national medtech hub is unique because of the level of collaboration among parties often seen as competitors. Both Boston Scientific and Medtronic, for instance, are in the consortium; big insurers like Medica signed on alongside health care providers Allina Health System and HealthPartners. Proponents say they’re willing to put competition aside for the future of Minnesota.

“When we come together as a community, we have the ability to be formidable and seize these kinds of opportunities,” says Jodi Hubler, a longtime health care investor and executive who serves on the boards of several health care startups.

In October, the Twin Cities took a major step forward in the competition when it was selected as one of 31 finalists out of nearly 200 applicants across the country. Commerce Department officials said that the designation endorsed each region’s “strategy to supercharge their respective technological industry to create jobs and strengthen U.S. economic and national security.”

The economic development organization Greater MSP, which contributed to local bids for the Super Bowl and Amazon HQ2, authored the region’s initial tech hubs proposal, dubbed “Minnesota MedTech 3.0.” In a proposal that brought in voices across medtech and other sectors, the group said Minnesota would “lead a needed transformation to the third frontier of the world’s medical technology industry.”

The competition is part of the CHIPS and Science Act, signed into law in late 2022. That legislation was largely intended to help ramp up domestic semiconductor manufacturing, but it included other components designed to more broadly improve American competitiveness on the global stage.
"If we’re going to remain the leader, we need to step up our game and accelerate what we’re doing."

— Geoff Martha, Chairman and CEO, Medtronic
According to the Commerce Department, the federal government is slated to distribute $40 million to $70 million apiece to as many as 10 hubs. The 31 designated hubs have until Feb. 29 to turn in finalized proposals for a chance at those dollars.

The MedTech 3.0 bid faces stiff competition from other regions: a proposal from Colorado hawks quantum computing; another from Rhode Island and Massachusetts is tackling ocean robotics and sensors. A proposal dubbed the Wisconsin Biohealth Tech Hub is underway in our neighboring state with a focus on personalized medicine.

BACK TO MEDTRONIC
Greater MSP is coordinating the final bid with the help of industry partners. But everyone involved credits Medtronic for driving the collaborative campaign.

For years, the medical device giant had been asked by other companies and foreign governments to help stand up similar health care ecosystems in other parts of the world. Medtronic's Martha notes that places like Charlotte, North Carolina, and even Ireland, are actively investing in their health and tech industries.

"Other cities in the U.S. and other countries outside the U.S. are intentionally building up medtech hubs, which wasn't the case even five years ago," Martha says. "If we're going to remain the leader, we need to step up our game and accelerate what we're doing."

As a global company, Medtronic, which is legally headquartered in Ireland, could have taken up other proposals to build a hub pretty much anywhere in the world. But Martha views Minnesota's position as a matter of building "strength on strength" instead of starting from scratch elsewhere.

In 2022, well before the competition was announced, Martha approached Greater MSP board chair Tim Welsh about raising Minnesota's profile. His aim at the time was finding a way to build the medtech industry's "next frontier" in Minnesota, incorporating rapidly advancing technologies like artificial intelligence to stay on the leading edge.

"He saw the opportunity to create that here," says Peter Frosch, president and CEO of Greater MSP. "If we don't, someplace else will."

Martha asked Welsh if Greater MSP would help out. The answer was a fast yes.

In the months that followed, the nonprofit got to work, pulling together several industry leaders and convening a task force to find ways to strengthen the state's industry. When the Commerce Department formally announced the tech hubs competition and issued a notice of funding opportunity (NOFO), it was an ideal avenue for Martha's vision.

By mid-August, Greater MSP had convened a coalition of more than 20 medtech-affiliated organizations to apply for the tech hubs' designation. The bid had a distinct focus on "smart medtech"—that is, integrating artificial intelligence and machine learning into the health care space. Now, more than 150 individuals are working together to craft a final bid.

A HISTORY OF COLLABORATION
"[The] modern medtech industry was created in Minnesota and has thrived here," according to the initial proposal. "Breakthroughs in smart medtech are revolutionizing health care with integrated data, early-stage precise diagnosis, personalized treatment, in-home monitoring, and preventive care. Minnesota will lead this transformation because of our unrivaled medtech ecosystem and proven infrastructure for commercializing technologies that improve health outcomes."

Lofty goals, but industry advocates say they're achievable. Medical Alley Association is among the entities helping craft the MedTech 3.0 bid. The Golden Valley-based nonprofit, which bills itself as a "health tech" trade group these days, was established 40 years ago by Medtronic founder Earl Bakken, 3M exec Lee Berlin, and former Minnesota Gov. Rudy Perpich. It's the type of industry partnership that the MedTech 3.0 group is aiming to replicate in the modern era.

"When you look at the essence of what's going on in MedTech 3.0, it's a consortium, and we're one of the partners," says Roberta Dressen, Medical Alley's president and CEO. "It aims to make Minnesota a global leader in the space, particularly in the area of smart technology."

"WHEN WE COME TOGETHER AS A COMMUNITY, WE HAVE THE ABILITY TO BE FORMIDABLE AND SEIZE THESE KINDS OF OPPORTUNITIES."

—JOBI BUBLER, HEALTH CARE INVESTOR AND ADVISER
Throughout her career, Dressen has touched “pretty much every piece” of the health care sector, having worked at hospitals, health insurers, and medtech giants like Boston Scientific and Medtronic. That’s led her to jobs around the country and the world. But she says Minnesota’s medtech scene is notable for its level of intra-industry cooperation. It’s a “unique personality trait” that may serve the state well in the competition, she says. “There’s always been a sense of community, of giving back, and collaborating.”

Dr. David Ingham, Allina’s chief information officer, notes that his organization already has partnered with MedTech 3.0 members on various initiatives, such as the Northwest Metro Alliance with HealthPartners.

“As a care provider, employer, purchaser, investor and community partner, we work to improve health outcomes for all, create a diverse and inclusive culture, and invest in our communities,” he says. “Federal support is an important investment in developing technologies and care models to transform health care in Minnesota.”

But industry advocates say past performance doesn’t guarantee future results.

“One of the foundations of Minnesota’s economic strength and prosperity for the past two generations has been a growing medical technology sector,” says Greater MSP’s Frosch. “We invented that industry. We scaled here, so it makes sense that the next generation of medtech would be created here, but it’s not inevitable.”

If Minnesota isn’t chosen, Frosch says the effort won’t have been in vain. “We already won this designation,” Frosch says. “It matters not only because the ideas are cutting edge, but because the leaders and institutions have the power to realize this future. We’re not asking anyone for permission. We’re not waiting. We’re creating it.”

THE CAPITAL QUESTION

Whether folks in other regions consider the Twin Cities a hub for technology is an open question, though—ask anyone who’s tried to build a new business in Minnesota, where venture capital is far less plentiful than on the coasts. But the designation—and winning the final bid—could help bring more attention—and dollars—to the Twin Cities.

In the Midwest, willingness to invest “has always been a little bit more challenging than we like,” says Morgan Evans, a former Medtronic employee and serial entrepreneur who’s built six companies (for more on Evans, see “Medtech’s Next Gen,” page 25). “Anything that brings a little more attention to the startup and innovation ecosystem is going to be great for the whole community,” Evans says.

Amrinder Singh, another Medtronic veteran, is now partner at Minneapolis-based medtech investor Vensana Capital, which helped craft the MedTech 3.0 bid. He says he deliberately located his firm in the Twin Cities to help raise the region’s profile. “We feel there is such an opportunity to build companies here, and the last thing we want to see is a really good idea or team feel the need to relocate to Boston or the Bay Area.”

WHY AI?

Minnesota isn’t the only competition applicant with a marked focus on artificial intelligence, the hot topic in business and tech circles. A proposal from Birmingham, Alabama, seeks to build “equitable AI-driven biotechnology,” for instance.

It comes at a time when investors are still pouring billions of dollars into AI-based startups. Industry boosters say it’s the inevitable step forward in medicine. “We’re not replacing surgeons anytime soon,” Medtronic’s Martha says. “But surgeons that are using AI will replace ones that don’t, and that’s happening now.”

He also makes a distinction between buzzy “large language models” like ChatGPT, whose source data is something of a black box, and Medtronic’s own in-house programs with custom patient data.

Yet there’s still reason to proceed with caution. The mix of AI and health care is fraught with liabilities. Consider UnitedHealth Group, which was sued in late 2023 for allegedly using an artificial intelligence program to deny coverage for elderly patients. Given the liabilities, why venture forward?

As Martha sees it, we’re at an inflection point in medicine, where traditional practices of medicine are colliding with digital systems. AI and robotics are simply the next step.

“It’s creating a huge opportunity for us to build on what we have,” he says.

The Twin Cities’ bid also places a premium on equity, another topic du jour in business circles. Greater MSP tapped the Center for Economic Inclusion, a St. Paul-based nonprofit, to ensure that Minnesota’s “next frontier” of medtech is equitable across gender, race, and class. The idea is to avoid the pitfalls of inherent biases found in some AI-based technology.

“We have identified measures of economic inclusion that speak to the impact that these resources and strategies will have on building wealth, creating and providing family-sustaining jobs, and improving health outcomes for communities of color and indigenous communities, particularly those who are experiencing the greatest inequities,” says Andrea Ferstan, the center’s vice president of innovation, policy, and research.

In her view, it’s critical to bring in voices from Black, Indigenous, Latinx, and Asian communities to “ensure racially inclusive and responsive innovations.”

It’s largely undisputed that there have been demonstrable differences in health care for different population segments. A 2022 study from Harvard Medical School, for instance, found that Black, Hispanic, and Asian patients “received less supplemental oxygen than white patients” due to differences in pulse oximeter readings between skin tones.

Those are precisely the type of disparities that the center aims to help avoid in medtech’s next frontier.

Ultimately, though, the consortium agrees that advances in AI and machine learning are “not really a choice,” as Greater MSP’s Frosch puts it. It’s a matter of minimizing the downsides. “I have more trust and faith in the Minneapolis-St. Paul region and the leaders and institutions here to prioritize that and solve those problems actively than I would [in any] other regions or countries around the world.”

Dan Niepow is TCB’s digital editor.
MEDTECH’S NEXT GEN

MEET FIVE MINNESOTA ENTREPRENEURS TAKING BIG SWINGS AT HEALTH CARE INNOVATION THAT COULD IMPROVE DISEASE DETECTION AND TREATMENT.

By Allison Kaplan // Photographs by Nate Ryan

MORGAN EVANS // AGITATED SOLUTIONS (ASI)

A “bubble study” is administered after a suspected stroke. A solution containing tiny air bubbles is injected into a vein in the arm, and their path can help determine the likelihood of a future stroke. Currently, that solution is manually generated and requires two operators to perform. Evans’ St. Paul-based ASI is “reimagining bubble studies,” with a device that creates microbubbles for greater efficiency and accuracy. At the same time, Evans, a serial entrepreneur, is scaling Avio Medtech Consulting, which works with early-stage medtech startups.

MISSION: “To change the world by bringing revolutionary innovations to market efficiently and effectively.”

ONE TO WATCH: “One of the companies I co-founded is Moonshot Medical, a medical device incubator here in the Twin Cities. Moonshot has some really revolutionary technology it’s incubating. It’s still in stealth mode, but we’re taking some big swings that could save a lot of lives.”

PING YEH // VOCXI HEALTH

St. Paul-based Vocxi Health has developed a breath test to detect lung cancer (and other diseases). This innovation is 10 years in the making, involving doctors and researchers at Mayo Clinic and Boston Scientific. A serial medtech entrepreneur and advisor fluent in both science and business, Yeh came on as CEO to help Vocxi get ready to commercialize MyBreathPrint, a mobile breathing device that measures the volatile organic compound pattern of disease in breath for early, non-invasive cancer detection that is more cost-effective than a CT scan. Clinical testing is expected this year.

MISSION: A cancer survivor, “I’m paying forward my second opportunity at life to leverage technology to improve the lives of millions.”

TREND: “I’m generally excited about early disease detection or health management, as it will produce large gains on outcomes. It’s a lot easier to keep people healthy.”
Contrary to conventional thinking, recent scientific studies have found that cancer cells disseminate into the bloodstream before a tumor is discovered and can lie dormant for years. That revelation, and his father’s cancer diagnosis, propelled Parthasarathy to leave UnitedHealth Group, where he was deputy chief science officer, to work on early cancer detection. Founded in 2021, St. Paul-based Astrin has developed an AI-empowered 3D holographic imaging platform that analyzes individual blood cells with the goal of earlier detection—before a cancer spreads. A breast cancer trial starts this year. Astrin’s investors include former CEOs and board members from UHG and Labcorp.

**CHALLENGE:** “Cancer care is the largest block of spending for any payer across the globe, and it’s growing. Early detection saves lives and could significantly reduce the economic and societal burden.”

---

A licensed marriage and family therapist, Pash co-founded a practice in Mendota Heights where therapists could earn a steady paycheck but also have the flexibility to set their own hours. One location grew to several, and in 2022, she started franchising. Already, more than 200 Ellie locations are operating around the country and another 400-plus are in development. Ellie’s website matches clients with the right therapist and plan, offering a mix of in-person and telehealth.

**MISSION:** To destigmatize mental health care by building a national brand that is accessible and flexible.

**CHALLENGES:** “Archaic methods for accessing care, high-deductible health plans, and the debt fear that keeps people from seeking help.”

**TREND:** “I love the way we are using technology to get faster access to treatment for common conditions, including basic medication screenings for mental health.”

---

An estimated 13.5 million Americans are dealing with a serious wound—from surgery, disease, an ostomy bag—and often there’s no one coordinating care until the problem becomes a crisis. Ahmadi launched the Wound Co. in 2022 to fill that space, partnering with health care providers to deliver focused patient care through telehealth, AI diagnostics, and in-person care. Early data shows that Wound Co. patients heal 60% faster for a 15 to 20% reduction in cost.

**PROBLEM:** “Wound care claims total more than $100 billion annually. It is our company’s unapologetic belief that we should be spending half that, and achieve wound care that’s twice as good.”

**OPPORTUNITY:** Ahmadi calls the talent ecosystem in Minnesota “incredible.” But he raised most of his funding in San Francisco. “Big companies need to think smaller, more collaboratively. There are a lot of good companies out there that could participate in solutions.”
From the workers on a hospital floor to the patients those workers are treating, the state of Minnesota’s dwindling health care workforce is felt by all.

Stories from workers from across the health care sector demonstrate the impact of this shortage plainly. Clara Reed, a 26-year-old registered nurse, recalls the days she left work and sobbed in her car. On those days, “I had either too many patients, or my patients were too sick for the amount of patients I had. I just wasn’t able to give them everything that I knew that they needed,” she says.

Reed is among the newest generation in Minnesota’s health care workforce. She began her career at Abbott Northwestern Hospital in Minneapolis in 2019 and works in all three of Abbott’s ICUs, the ER, and on the hospital’s rapid response team. Over the past four years, she has seen many colleagues leave the profession.

Reed helps run a peer support group that meets with new workers at six weeks, three months, six months, and nine months into the job, where they discuss professional development, healthy work environments, and ways to develop resiliency.

“You feel so alone, especially in your first couple years of practice,” she says. “You always wonder, is everyone else going through this? Is everyone else having a hard time? Is anyone else getting bullied at work or feeling so overwhelmed by the end of the day?”

ALARMING METRICS

The state’s health care workforce is in a state of extreme flux. Reed is among a new generation of workers who stayed as many others left. While Covid expedited the hemorrhaging of workers from health care fields, shortages existed before the pandemic and have long been anticipated. Contributing factors include the state of the economy, burnout, and a generational shift as the baby boomer population ages.

These factors affect all levels of the health care ecosystem across the state and regions, from general care workers to specialized medical professionals, according to a December report by the Minnesota Department of Employment and Economic Development (DEED).

The overall supply of those licensed to be health care providers has steadily increased over the last decade, including during Covid years. But this rise in licensed pros is offset by a drop in the number of employees working in patient care. A DEED survey, for example, showed 92% of all physicians reported working in a position that involved patient care in 2019. By 2023 that number was down to 84%, a difference of roughly 2,000 physicians statewide.

This loss of younger qualified workers is a problem that snowballs. As Janette Dill, associate professor in the School of Public Health at the University of Minnesota explains, “If a worker who is inexperienced, hasn’t been out of their training for too long, and they go into
a workplace that is overloaded and doesn’t have proper resources—where they’re caring for too many patients and have these grinding workloads—they’re going to quit, right?”

Doctors and registered nurses aren’t the only ones who face this situation, Dill notes. Much of her research revolves around direct care workers, which include nursing assistants, home health aides, and home health workers. These workers make up the largest occupational group in Minnesota, with 8% of the state’s workers working as an aide or an assistant.

According to data evaluated by DEED, 124 new physician assistants entered the Minnesota workforce in 2022. But between job growth and turnover in the state’s health care system, an estimated 244 new PAs are needed annually from 2020 to 2030.

A limited number of slots, plus obstacles to education and certification make the situation worse, Dill says. In the future, she sees a need to further bolster two-year technical schools and other forms of education to help break down barriers for students who might not have the money and resources to attend a four-year college. She also advocates for loan repayment programs.

So what are the chances this workforce crisis will resolve itself? “I just keep thinking it depends on what happens in the economy. Right now, we still are in this place of burnout and shortage,” Dill says. “But I have a feeling if the economy takes a turn for the worse, a lot of these issues will go away” because, in health care, more prospective practitioners enter the workforce during hard times than boom times. She notes the rise in those seeking education and reentering their field following the Great Recession.

When the economy is strong, workers can find jobs elsewhere that might be less grueling with more consistent hours, she notes. But when the economy is in a downturn, people return to health care because it is considered a stable job. It’s an industry that never faces obsolescence.

MORE JOBS STAYING OPEN

This past year, worker vacancy rates across the state’s health care institutions were around 17%, says Joe Schindler, vice president of finance policy for the Minnesota Hospital Association. This was the second year in a row these rates were “well beyond what hospitals have ever seen in a normal year.”

For many years before 2023, more Minnesota health care workers left the workforce than entered it, according to data compiled by the Minnesota Hospital Association. While 2023 marked the first year this wasn’t the case, sheer numbers don’t capture the whole picture. The majority of exits in 2023 were full-time workers, while many entering health care jobs were part-time hires. Meanwhile, demands on the system have hit record highs.

In recent years, particularly throughout the onset of Covid, hospitals resorted to hiring more expensive contract health care workers, Schindler says, but institutions are trying to move away from that to cut costs. “In 2023, hospitals have worked very diligently to try and reduce their exposure to contract staffing because the costs are three to four times what they would pay an employee,” Schindler says. “This was the second year in a row these rates were ‘well beyond what hospitals have ever seen in a normal year.”

According to DEED, 124 new physician assistants entered the Minnesota workforce in 2022. But between job growth and turnover in the state’s health care system, an estimated 244 new PAs are needed annually from 2020 to 2030.

A limited number of slots, plus obstacles to education and certification make the situation worse, Dill says. In the future, she sees a need to further bolster two-year technical schools and other forms of education to help break down barriers for students who might not have the money and resources to attend a four-year college. She also advocates for loan repayment programs.

So what are the chances this workforce crisis will resolve itself? “I just keep thinking it depends on what happens in the economy. Right now, we still are in this place of burnout and shortage,” Dill says. "But I have a feeling if the economy takes a turn for the worse, a lot of these issues will go away” because, in health care, more prospective practitioners enter the workforce during hard times than boom times. She notes the rise in those seeking education and reentering their field following the Great Recession.

When the economy is strong, workers can find jobs elsewhere that might be less grueling with more consistent hours, she notes. But when the economy is in a downturn, people return to health care because it is considered a stable job. It’s an industry that never faces obsolescence.

MORE JOBS STAYING OPEN

This past year, worker vacancy rates across the state’s health care institutions were around 17%, says Joe Schindler, vice president of finance policy for the Minnesota Hospital Association. This was the second year in a row these rates were “well beyond what hospitals have ever seen in a normal year.”

For many years before 2023, more Minnesota health care workers left the workforce than entered it, according to data compiled by the Minnesota Hospital Association. While 2023 marked the first year this wasn’t the case, sheer numbers don’t capture the whole picture. The majority of exits in 2023 were full-time workers, while many entering health care jobs were part-time hires. Meanwhile, demands on the system have hit record highs.

In recent years, particularly throughout the onset of Covid, hospitals resorted to hiring more expensive contract health care workers, Schindler says, but institutions are trying to move away from that to cut costs. “In 2023, hospitals have worked very diligently to try and reduce their exposure to contract staffing because the costs are three to four times what they would pay an employee,” Schindler says. “This was the second year in a row these rates were “well beyond what hospitals have ever seen in a normal year.”

According to DEED, 124 new physician assistants entered the Minnesota workforce in 2022. But between job growth and turnover in the state’s health care system, an estimated 244 new PAs are needed annually from 2020 to 2030.

A limited number of slots, plus obstacles to education and certification make the situation worse, Dill says. In the future, she sees a need to further bolster two-year technical schools and other forms of education to help break down barriers for students who might not have the money and resources to attend a four-year college. She also advocates for loan repayment programs.

So what are the chances this workforce crisis will resolve itself? “I just keep thinking it depends on what happens in the economy. Right now, we still are in this place of burnout and shortage,” Dill says. "But I have a feeling if the economy takes a turn for the worse, a lot of these issues will go away” because, in health care, more prospective practitioners enter the workforce during hard times than boom times. She notes the rise in those seeking education and reentering their field following the Great Recession.

When the economy is strong, workers can find jobs elsewhere that might be less grueling with more consistent hours, she notes. But when the economy is in a downturn, people return to health care because it is considered a stable job. It’s an industry that never faces obsolescence.

MORE JOBS STAYING OPEN

This past year, worker vacancy rates across the state’s health care institutions were around 17%, says Joe Schindler, vice president of finance policy for the Minnesota Hospital Association. This was the second year in a row these rates were “well beyond what hospitals have ever seen in a normal year.”

For many years before 2023, more Minnesota health care workers left the workforce than entered it, according to data compiled by the Minnesota Hospital Association. While 2023 marked the first year this wasn’t the case, sheer numbers don’t capture the whole picture. The majority of exits in 2023 were full-time workers, while many entering health care jobs were part-time hires. Meanwhile, demands on the system have hit record highs.

In recent years, particularly throughout the onset of Covid, hospitals resorted to hiring more expensive contract health care workers, Schindler says, but institutions are trying to move away from that to cut costs. “In 2023, hospitals have worked very diligently to try and reduce their exposure to contract staffing because the costs are three to four times what they would pay an employee,” Schindler says. “This was the second year in a row these rates were “well beyond what hospitals have ever seen in a normal year.”

According to DEED, 124 new physician assistants entered the Minnesota workforce in 2022. But between job growth and turnover in the state’s health care system, an estimated 244 new PAs are needed annually from 2020 to 2030.

A limited number of slots, plus obstacles to education and certification make the situation worse, Dill says. In the future, she sees a need to further bolster two-year technical schools and other forms of education to help break down barriers for students who might not have the money and resources to attend a four-year college. She also advocates for loan repayment programs.

So what are the chances this workforce crisis will resolve itself? “I just keep thinking it depends on what happens in the economy. Right now, we still are in this place of burnout and shortage,” Dill says. "But I have a feeling if the economy takes a turn for the worse, a lot of these issues will go away” because, in health care, more prospective practitioners enter the workforce during hard times than boom times. She notes the rise in those seeking education and reentering their field following the Great Recession.

When the economy is strong, workers can find jobs elsewhere that might be less grueling with more consistent hours, she notes. But when the economy is in a downturn, people return to health care because it is considered a stable job. It’s an industry that never faces obsolescence.
ten take on the job of caretaker for their loved one—often without sufficient training or time to adequately provide this care.

This adds another burden for providers—to educate “civilians,” Rubesch notes. He recalls needing to teach families about warfarin levels (a commonly used blood thinner), important dietary information, or how to administer shots at home. “It’s hard as a nurse when I have increasing demands on my time at work and I have less and less time to sit with families to make sure they are set up for success when their loved one goes home,” he says.

Rubesch is part of what many call the “sandwich generation”—people who are caring for both aging parents and young children. His role as a health care provider doesn’t stop when he leaves work.

Moving forward, Rubesch wants prospective workers to know that health care is a lucrative career with many opportunities for growth. As a union officer, he thinks that organizing is the key to stabilizing the health care workforce. In October, hundreds of Allina doctors voted to unionize under Doctors Council SEIU Local 10MD. A group of advanced providers, mostly nurse practitioners and physician’s assistants, recently filed a petition to unionize with the Minnesota Nurses Association. This is a pivotal step in ensuring the stability and longevity of both the current and incoming workforce, Rubesch believes.

**MORAL INJURY**

In 2020, Jennifer Michelson, a career nurse, experienced the challenges from a new perspective when she became a patient. As she prepared for a double mastectomy, she learned that the hospital wanted to send her home the same day as the procedure.

Michelson, who was 60 at the time, knew she would likely need to stay overnight. According to a report by University of Michigan Medicine, post-mastectomy pain can be similar to that experienced after a limb amputation.

Michelson needed pain control to prevent nausea and an IV to stay hydrated in the hours that followed her surgery. “Being a nurse, I knew the language to help me stay in the hospital overnight…. They were saying, ‘We don’t have enough beds, so we will just send you home the same day.’ But I was able to stay. I needed to,” Michelson says.

She retired from United Hospital in St. Paul in 2023, two years earlier than planned. “It was not acceptable, the kind of patient care that [hospitals] were providing because we were so short-staffed.”

Michelson suggests that “burnout” does not sufficiently describe health care workers’ current challenges. The term doesn’t cover the gravity of what many frontline workers are facing, such as “moral injury,” a term used by organizations like the National Nurses Association, the National Institute for Health, and the National Center for PTSD. Moral injury occurs when people violate or witness the violation of deeply held values.

She talks about moments when health care workers are forced to send a patient home before they are ready, times when there aren’t enough beds or workers to care for them, or situations where there isn’t time or capacity for a health care worker to provide the standard of care a patient needs. “At some point, you say enough is enough. I can’t maintain my concept of what a good nurse is and what a good person is if I keep breaking my boundaries and standards just to maintain.”

Winter Keefer is TCB’s associate editor.
HOSPITALS UNDER STRESS

IS THE HOSPITAL REVENUE MODEL WEAKENING BECAUSE OF UNCOMPENSATED CARE, LOW GOVERNMENT REIMBURSEMENT RATES, OR A LACK OF FISCAL DISCIPLINE?

By Liz Fedor // Illustration by Chiara Vercesi

Rahul Koranne will return to the Minnesota State Capitol this month to plead for funding for Minnesota hospitals.

In the world of complex health care finance, Koranne, president and CEO of the Minnesota Hospital Association, wants state lawmakers to patch a hole in the hospital revenue model caused by a logjam of patients.

Koranne, a physician who’s worked for the association for nine years, says it’s exasperating for hospital leaders because they’re often having great difficulty discharging patients.

“We did an analysis of how many patients were stuck in a hospital [who] did not require acute care or a hospital level of care,” he says, referring to research done in late 2022. “There were thousands of patients that were not able to be discharged into a nursing home, a group home, or a mental health care facility.”

The patients were well enough to leave the hospital, but they couldn’t go home because they needed to move to another care facility for follow-up treatment or support. But in many cases, patients were forced to remain hospitalized because there wasn’t room for them in care facilities.

Various insurance systems refused to compensate hospitals for this type of care.

“Medicaid doesn’t pay for these patients,” Koranne says. “Medicare doesn’t pay for these patients. Commercial insurance doesn’t pay for these patients. So these thousands of patients are literally stuck in the hospital, the hospital is providing care to these patients, but nobody is paying for the care.”

In 2023, Gov. Tim Walz and the Minnesota Legislature funded a variety of new programs as a result of a budget surplus that exceeded $17 billion. Minnesota hospital leaders were seeking hundreds of millions of dollars to deal with the issue of uncompensated care.

“We got only $18 million,” Koranne says, and Minnesota’s Department of Human Services was charged with paying out that money to hospitals. The department sought documentation, and the not-for-profit hospitals produced records for the number of patient care days delivered with no reimbursement for the first five months of 2023.

That $18 million filled just a fraction of the hospitals’ needs, he says. The hospital association extrapolated what the annual need was based on the data from the January-to-May period. “When you do the math, [it was] $450 million.”

Koranne will make another attempt to secure funding in the new session. However, lawmakers will be working with a smaller surplus. In mid-January, Walz indicated that so much legislation was passed in 2023 that the 2024 session likely will have a relatively modest agenda. However, the governor does plan to push hard for a 2024 state infrastructure package. The session opens Feb. 12.

“The state Legislature made a generational investment in our schools and our educational system” in 2023, Koranne says. “We are hoping that in this upcoming legislative session, given that they still have some reserves, that they will make a generational investment in our hospitals, because hospitals are so important for communities.”

He wants funding for what he’s dubbed a rescue package. “It’s going to have to be hundreds of millions of dollars,” he says.
Koranne will be talking to politicians about a new set of financial data, which he released in mid-November. Collected from more than 70 hospitals in the state, the metrics detail a median operating margin of –2.7% for the first half of 2023 compared to –0.5% for the same period in 2022.

“We tried to make a loud noise when it dipped into a negative number at a negative half a percent,” Koranne says.

No Minnesota hospitals closed in 2022 or 2023, but several hospitals in other states have shut down in recent years. “That’s the reason for really turning up the volume on this alarm bell,” Koranne says. “We want to try to prevent that [in Minnesota] because it will be too late if a hospital announces a closure.”

In a September 2022 report, the American Hospital Association (AHA) announced that 136 rural hospitals closed in the U.S. between 2010 and 2021. Three factors cited were declining financial performance, geographic isolation, and low patient volumes.

“The bulk of rural hospital revenue comes from government payers, of which Medicare comprises nearly half,” the report says. “Yet both Medicare and Medicaid reimburse less than the cost of providing these services. This resulted in rural hospitals incurring $5.8 billion in Medicare underpayments and $1.2 billion in Medicaid underpayments in 2020.”

Koranne regularly travels around Minnesota to talk with hospital administrators. “We are already seeing reductions in services across the state due to financial strain,” he says. “We are working to pull every lever we can to at least bring government payers closer to being in alignment with the actual costs of providing care.”

REVENUE ISN’T THE ONLY PROBLEM
For the first half of 2023, Koranne says the hospital association’s survey shows that labor costs have increased by 7%, while supply and service costs jumped by 6%.

Koranne says he’s concerned that an increase in the proportion of Medicare and Medicaid patients could place health care facilities under greater financial pressure.

“Those programs continue to reimburse providers well below the actual cost of providing care, routinely underpaying an estimated 27% below cost for Medicaid, and 20% below cost for Medicare,” the hospital association said in November.

The federal Medicare program provides health insurance coverage for retirees and is supported by payroll taxes paid by employees and their employers. Medicaid provides health coverage for low-income Americans. Minnesota’s Medicaid program is called Medical Assistance.

Based on the recent collection of health care data from 70 or so Minnesota hospitals, Koranne says the ratio of Minnesota patients covered by Medicare or Medicaid has risen from 62% in 2022 to 64% in 2023.

“Reimbursement [for medical services] is fixed and set by the government,” Koranne says. “We are not like Target, or a device maker, or a grocery store. We can’t raise our prices.”

To respond to financial challenges, some health institutions are cutting programs and jobs. In August, Allina Health reported an operating loss of nearly $123 million for its second quarter. By late summer, it had cut more than 500 jobs.

In November, James Hereford, president and CEO of Fairview Health Services, reported a net operating loss of $315 million for 2022. He shared the financial data in an appearance before the Governor’s Task Force on Academic Health at the University of Minnesota. Fairview also cut hundreds of jobs last year.

PRIVATE VS. GOVERNMENT INSURANCE
Stephen Parente may be one of the few Minnesotans who understands the intricacies of health system business models and government health care reimbursement programs. He earned a Ph.D. in health finance and organization from Johns Hopkins University.

FINANCIAL SNAPSHOT OF TWIN CITIES AREA HOSPITALS
Financial performances for the largest health systems varied widely in 2021. This data was prepared by a health care consultant based on financial information provided in Medicare facility cost reports for 2021 operations.

<table>
<thead>
<tr>
<th>HOSPITAL/SYSTEM</th>
<th>NET PATIENT REVENUES</th>
<th>OPERATING EXPENSES</th>
<th>OPERATING NET</th>
<th>OTHER REVENUES</th>
<th>NET INCOME</th>
<th>MARGIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALLINA HEALTH</td>
<td>$3,010,824,589</td>
<td>$3,263,460,292</td>
<td>$(252,635,703)</td>
<td>$329,223,147</td>
<td>$76,587,446</td>
<td>2.5%</td>
</tr>
<tr>
<td>M HEALTH FAIRVIEW</td>
<td>$3,262,541,028</td>
<td>$3,588,636,771</td>
<td>$(326,095,743)</td>
<td>$126,062,796</td>
<td>$(10,240,693)</td>
<td>-0.3%</td>
</tr>
<tr>
<td>HEALTHPARTNERS</td>
<td>$2,041,471,828</td>
<td>$1,981,885,434</td>
<td>$59,586,394</td>
<td>$167,585,901</td>
<td>$221,295,304</td>
<td>10.8%</td>
</tr>
</tbody>
</table>

SOURCE: MINNESOTA HEALTH MARKET REVIEW 2022 BY ALLAN BAUMGARTEN
the patient’s body] they are going to be doing the surgery, so they’re going to need usually an MRI or a CAT scan.”

That “specialty combination” frequently subsidizes many other parts of a hospital’s operations that can be low margin, including pediatrics, OB-GYN, and sometimes psychiatry, Parente says.

He notes that economists and financial experts see similarities between the higher education and the health care revenue model. He points to the fact that many older adults are enrolled in Medicare Advantage plans, which are run by private insurers such as Humana and UnitedHealthcare.

“They have their own negotiated rates outside of Medicare of what they are paying for insurance,” Parente says. “People are choosing those plans, in part because they like some of the extra benefits they get for wellness and things like that that come along with them. They get pharmaceutical benefits as well.”

Medicare pays the insurance companies to cover people’s Medicare benefits when they have a Medicare Advantage plan.

RISING COSTS BAKED IN

Over the past 30 years, on average, health spending in Minnesota increased by 5.8% each year, according to Baumgarten.

He notes that economists and financial experts see similarities between the higher education and the health care revenue model. He points to the fact that many older adults are enrolled in Medicare Advantage plans, which are run by private insurers such as Humana and UnitedHealthcare.

“They have their own negotiated rates outside of Medicare of what they are paying for insurance,” Parente says. “People are choosing those plans, in part because they like some of the extra benefits they get for wellness and things like that that come along with them. They get pharmaceutical benefits as well.”

Medicare pays the insurance companies to cover people’s Medicare benefits when they have a Medicare Advantage plan.

THE CHALLENGE OF DEMOGRAPHICS

As many baby boomers enter Medicare coverage at age 65, that influx of older adults inevitably alters the patient mix at Minnesota hospitals and health systems.

Allan Baumgarten, a Minneapolis-based consultant on health care finance, does business analyses for clients such as health plans, providers, and government agencies. He’s seen a demographic shift over the last decade. In 2011, the percentage of in-patient days that were covered by Medicare or Medicaid in Twin Cities hospitals was 61%. That number had risen to 67.4% by 2021.

The total saw another boost in 2022, up to 69.4%. Baumgarten says the breakout was 41.7% of inpatient days covered by Medicare and 27.7% of inpatient days paid by Medicaid or the Children’s Health Insurance Program (CHIP).

“There is not agreement on this theory that Medicare and Medicaid are underpaying hospitals,” says Baumgarten, an attorney who has been producing the Minnesota Health Market Review annually since 1990. “It’s clear from data from Rand [Corp.] and others that the private payers are paying more,” he says. “But it’s not that clear that a hospital operating efficiently could not cover its costs and maybe even make money based only on Medicare rates—setting aside Medicaid.”

In his Minnesota Health Market Review 2022, he examines inpatient payer mix. In 2021, on an average day in Twin Cities hospitals, 73.3% of staffed inpatient beds were occupied.

“In 2021, Medicare, including Medicare Advantage plans and traditional Medicare, covered just under 40% of inpatient days, about the same as in the previous two years,” Baumgarten reported. “Medicare covered more than half of inpatient days at the HealthPartners hospitals, including 58.9% at Methodist Hospital. The Medicare share was lower at the Allina (44.1%) and Fairview hospitals (40.5%) and was only 32% at Hennepin Health.”

Like Baumgarten, Parente doubts that a higher concentration of Medicare patients in an aging society will jeopardize the durability of the health care revenue model. He points to the fact that many older adults are enrolled in Medicare Advantage plans, which are run by private insurers such as Humana and UnitedHealthcare.

“They have their own negotiated rates outside of Medicare of what they are paying for insurance,” Parente says. “People are choosing those plans, in part because they like some of the extra benefits they get for wellness and things like that that come along with them. They get pharmaceutical benefits as well.”

Medicare pays the insurance companies to cover people’s Medicare benefits when they have a Medicare Advantage plan.

MEDICARE POPULATION GROWS IN MINNESOTA HOSPITALS

By 2022, Medicare recipients accounted for nearly half of patient days in Minnesota hospitals. Between 2014 and 2022, the portion of Medicare patient days rose from 43.8% to 47.5%. Patients with private insurance has dropped to about one-fourth of the total. Low-income people, receiving Medical Assistance, comprise about one-fifth of the patient days.

<table>
<thead>
<tr>
<th>PAYER TYPE</th>
<th>2014</th>
<th>2018</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICARE PATIENT DAYS</td>
<td>43.8%</td>
<td>45.7%</td>
<td>47.5%</td>
</tr>
<tr>
<td>MEDICAL ASSISTANCE/medicaid patient days</td>
<td>19.3%</td>
<td>21.0%</td>
<td>20.9%</td>
</tr>
<tr>
<td>commercial insurers, nonprofit health plans</td>
<td>31.2%</td>
<td>27.7%</td>
<td>24.5%</td>
</tr>
<tr>
<td>patient days</td>
<td>5.8%</td>
<td>5.6%</td>
<td>7.0%</td>
</tr>
</tbody>
</table>

*Source: Minnesota Hospital Association; data is collected through the Minnesota Health Care Cost Information System.*

THE CHALLENGE OF DEMOGRAPHICS

As many baby boomers enter Medicare coverage at age 65, that influx of older adults inevitably alters the patient mix at Minnesota hospitals and health systems.

Allan Baumgarten, a Minneapolis-based consultant on health care finance, does business analyses for clients such as health plans, providers, and government agencies. He’s seen a demographic shift over the last decade. In 2011, the percentage of in-patient days that were covered by Medicare or Medicaid in Twin Cities hospitals was 61%. That number had risen to 67.4% by 2021.

The total saw another boost in 2022, up to 69.4%. Baumgarten says the breakout was 41.7% of inpatient days covered by Medicare and 27.7% of inpatient days paid by Medicaid or the Children’s Health Insurance Program (CHIP).

“There is not agreement on this theory that Medicare and Medicaid are underpaying hospitals,” says Baumgarten, an attorney who has been producing the Minnesota Health Market Review annually since 1990. “It’s clear from data from Rand [Corp.] and others that the private payers are paying more,” he says. “But it’s not that clear that a hospital operating efficiently could not cover its costs and maybe even make money based only on Medicare rates—setting aside Medicaid.”

In his Minnesota Health Market Review 2022, he examines inpatient payer mix. In 2021, on an average day in Twin Cities hospitals, 73.3% of staffed inpatient beds were occupied.

“In 2021, Medicare, including Medicare Advantage plans and traditional Medicare, covered just under 40% of inpatient days, about the same as in the previous two years," Baumgarten reported. "Medicare covered more than half of inpatient days at the HealthPartners hospitals, including 58.9% at Methodist Hospital. The Medicare share was lower at the Allina (44.1%) and Fairview hospitals (40.5%) and was only 32% at Hennepin Health.”

Like Baumgarten, Parente doubts that a higher concentration of Medicare patients in an aging society will jeopardize the durability of the health care revenue model. He points to the fact that many older adults are enrolled in Medicare Advantage plans, which are run by private insurers such as Humana and UnitedHealthcare.

“They have their own negotiated rates outside of Medicare of what they are paying for insurance," Parente says. “People are choosing those plans, in part because they like some of the extra benefits they get for wellness and things like that that come along with them. They get pharmaceutical benefits as well.”

Medicare pays the insurance companies to cover people's Medicare benefits when they have a Medicare Advantage plan.

RISING COSTS BAKED IN

Over the past 30 years, on average, health spending in Minnesota increased by 5.8% each year, according to Baumgarten.

He notes that economists and financial experts see similarities between the higher education and the health care revenue model. He points to the fact that many older adults are enrolled in Medicare Advantage plans, which are run by private insurers such as Humana and UnitedHealthcare.

“They have their own negotiated rates outside of Medicare of what they are paying for insurance," Parente says. “People are choosing those plans, in part because they like some of the extra benefits they get for wellness and things like that that come along with them. They get pharmaceutical benefits as well.”

Medicare pays the insurance companies to cover people's Medicare benefits when they have a Medicare Advantage plan.
tion and health care sectors in their appetites for increased spending.

“The fact that there is revenue available from student loans has meant that universities have raised tuition rates and spending without much restraint,” Baumgarten says. “It’s correct to say that hospitals also will raise spending beyond what is covered by the rates paid by Medicare and Medicaid.” Some hospitals are undisciplined in their spending because they know they can turn to private payers for additional revenue, he says.

The federal Centers for Medicare & Medicaid Services released a report in mid-December that showed U.S. health care spending increased by 4.1% in 2022 to reach $4.5 trillion. Health care comprises 17.3% of the nation’s gross domestic product.

In some instances, Baumgarten says that Minnesota hospitals take costly paths that he believes could have been avoided.

“The hospitals, when it came to negotiating new nurses’ contracts, were willing to take a strike” in 2022, he says. “They incurred the expense of bringing in temporary nurses during those strikes rather than being more responsive to the demands of the bargaining units of the labor unions.” In 2022, nurses struck 15 Minnesota hospitals, which was classified as the largest private-sector nurses’ strike in U.S. history.

ROLE OF INVESTMENTS

In 2022, Baumgarten says, stubborn inflation and higher labor costs reduced the net income of several hospitals and health systems. But he warns that it’s unwise to form any conclusions about health care finance by focusing on one year of performance.

“During the first year of Covid, there was a lot of angst or anxiety that hospitals would suffer mightily because they were suspending non-emergency surgeries,” he says. In addition, hospital leaders were worried in 2020 about the ad-
ditional expense for treating Covid-19 patients. "In 2019, and the year before that, the hospitals in Minnesota and in the other states that I study had very strong financial results, and so they came into 2020 with strong financial positions, which in a sense should be enough to weather a single down year," Baumgarten says. Also, he says, hospitals were the recipients of provider relief programs from the federal government, so they could address Covid-related financial impacts to their business models.

He observes that Minnesota hospitals entered 2022 in good financial shape, and that some health systems benefited from ongoing consolidation within the industry. He also suggests a portion of hospital system losses may be unrelated to patient care costs.

"For many of the systems reporting reduced profits or even losses in 2022, that is mostly the result of unrealized losses on the value of their investment portfolios, which are priced to market at the end of each quarter and the end of the fiscal year," he wrote in his market report. The national Health Affairs policy journal published an opinion piece in early 2023 in which the authors documented that 10 large, nonprofit health systems sustained major losses in the stock market in 2022. The authors concluded: "Wall Street losses should not impact private payers’ and taxpayers’ payments to hospitals. Asking these constituents to foot the bill for hospitals’ investment losses not only lacks justification but will insulate hospitals from the consequences of their investment decisions."

**STABILIZING HOSPITAL FINANCES**

While Baumgarten and Parente take the long view when assessing the sustainability of the business model for Minnesota hospitals, Koranne emphasizes that some hospitals have real-time struggles, and he's determined to press for state funding at the Minnesota Legislature.

In early 2024, Koranne says, hospitals are still housing patients who lack community placement options. "This discharge gridlock is causing problems for hospital and health system staffing, finances, and most importantly, making beds unavailable for new patients who need acute care."

He also says hospitals have become engulfed in housing teens who actually need non-hospital care. "Emergency departments are boarding adolescents with mental health and violent tendencies because other care settings are overly reliant on hospital resources and 24/7/365 capacity," he says. He emphasizes there's a lack of psychiatric residential treatment facilities that would be in the best position to provide intensive mental health services for teens.

The Minnesota Hospital Association will be urging legislators to provide reimbursement to hospitals for the delayed patient discharges and emergency room boarding. It also will be asking for increases in Medical Assistance rates, financial support for mental health initiatives, and funding for strategies to expand the health care workforce.

Recently, 1 in 6 health care jobs were open in Minnesota. Koranne worries because health systems lack staff they need to care for patients and many students are bypassing health careers. "The state has a responsibility to resuscitate the not-for-profit hospital and health care system," Koranne says. "Once we get stabilization, then we can turn to innovation."

Liz Fedor is TCB’s senior editor.
Best-in-Class Professionals

For rising stars, it doesn’t take long to make a lasting impression. TCB’s 18 emerging leaders are making waves—spearheading innovative new strategies, expanding programming for communities and fellow employees, and helping the overall growth of their organizations.

**METHODOLOGY:** The individuals featured did not pay to be included. Their profiles were drawn from nomination materials. This list is not comprehensive; it includes only people who were nominated and accepted after editorial review. To qualify for this list, individuals must be in their current role for at least a year and have shown the ability to effect change in their roles or areas of practice.

---

**EMILY AMBROSE**
Partner, Norton Rose Fulbright

Emily Ambrose joined Norton Rose Fulbright a year ago as senior counsel, overseeing a national practice focused on product liability, class action defense, and other complex litigation. In January, she was one of 49 lawyers worldwide to be promoted to partner at the firm. Over the past year, Ambrose served on the trial team for a high-profile case, which was tried to verdict in Illinois. Her expertise landed her praise from the opposing counsel, who commented that Ambrose is like “having four lawyers in one.” Ambrose also worked on a separate high-profile case where she argued an appeal at the 11th Circuit Court of Appeals in Georgia, leveraging her ability to develop innovative arguments. Since joining the firm, colleagues say she’s been instrumental in building the Minneapolis office and establishing local committees. Ambrose is passionate about elevating the profiles of women and attorneys from diverse backgrounds and has led and participated in several events that center on DEI.

---

**BRITTANY BARTH**
Finance business leader, PAR Systems

Brittany Barth has become the finance team’s go-to expert at PAR Systems, a Pohlad company. She’s often sought for her expertise in non-Minnesota markets. Currently, she leads the automation and critical handling solutions for the Shoreview-based company, which builds custom manufacturing solutions. In an industry where it’s easy for women to get lost in the shuffle, Barth serves as a mentor for the company’s Young Women in STEM, a group that has doubled in size within the year she became leader. She also makes time to be part of the Pohlad Co. DEI group and is involved in company events. Barth serves on The Journey School board, a St. Paul charter school serving mostly children of color.

---

**MADDY BEST**
Manufacturing process engineer, Post Consumer Brands

Results-focused, detail-oriented: Maddy Best identifies cost-saving projects, new equipment technologies, and operational practices to improve line performance at Post Consumer Brands, a Lakeville-based packaged foods company. A 2021 graduate of the University of Minnesota with a bachelor’s in bioproducts and biosystems engineering, she launched Post’s Early Career Professional group to provide a supportive experience for employees stepping into a new role or new stage of their career. Along the way, Best sought support and built a dedicated network for the group, while openly sharing her own experiences as a new employee. She’s involved in many projects supporting Post’s manufacturing plants including waste reduction, improving reliability, reducing downtime, ergonomic safety, and utility reduction.
EMERGING LEADERS

PETER BURG
Global channel and alliances director, AgileBlue

A commitment to innovation and natural leadership abilities have made Peter Burg a standout at AgileBlue, an AI-powered cybersecurity platform based in Ohio. Since joining a year ago remotely from Lakeville, Burg has been instrumental in forming key partnerships, expanding market reach, and achieving revenue growth—all contributing to the company’s expanded global footprint. He has an extensive background in the IT industry partnering with a range of businesses, from Fortune 500 to small and mid-sized companies across various industries such as health care, financial services, manufacturing, and government. “His ability to adapt to a rapidly evolving industry and to drive change in the face of challenges underscores his agility and resilience as a leader,” says Gillian Sweny, director of marketing at AgileBlue.

PETER CARLSEN
Superintendent, The Opus Group

Peter Carlsen manages daily on-site construction operations, safety, schedule, and quality control for The Opus Group, a commercial real estate company based in Minnetonka. Known for his attention to detail and ability to push schedules, Carlsen was chosen as lead superintendent for construction of a new facility in Cottage Grove for Renewal By Andersen. Despite the weather and other delays, Carlsen delivered the complex project on time. “As a superintendent, Peter is regularly praised by clients for his outstanding performance. Peter is also an accomplished user and proponent of construction technology, which positions him as a mentor to other field supervisors,” says Beth Duyvejonck, Opus regional vice president. Carlsen took on his current role in early 2023, just two years after being promoted to associate superintendent. Says Duyvejonck, “Peter showed he had what it took to lead.”

ADAM CHOE
General partner, Tundra Ventures

Adam Choe is driven by a deep passion for fostering early-stage ventures. Described by colleagues as a pillar in Minnesota’s startup ecosystem, Choe is currently spearheading a $20 million venture fund targeting nascent startups. In addition to his role at Minneapolis investment fund Tundra Ventures, he played a pivotal role in expanding gener8tor, a global venture capital firm, and was instrumental in creating Yonder, a University of Minnesota pediatric health care startup. Choe is involved with the Children’s Cancer Research Fund; Launch Minnesota; and Forge North; mentors founders and works with organizations including e-Fest, Minds Matter Twin Cities, and MedLabs Healthcare Accelerator Program. Choe is recognized by his colleagues for his seasoned expertise and innovative pursuits, which positively impact the startup ecosystem in Minnesota.

EMERGING LEADER FOR 2024

Congratulations Casey!

Congratulations on your recognition as Twin Cities Business Notable Emerging Leader for 2024. You’re an amazing woman and have done great things for this community. We’re proud to have you on our team.

Casey Merkwan
Community Marketing and Engagement Manager
Casey.Merkwan@oldnational.com
1601 Utica Ave S, Suite 1150, St. Louis Park

OLD NATIONAL BANK®

Member FDIC
As an account manager for Minneapolis-based talent firm 24 Seven, Rachael Found helps realize new opportunities for marketing and creative professionals around the country. She leads a team dedicated to several key accounts in the local market and provides mentorship and support for her teammates. Found manages a successful book of clients, which recently surpassed $1 million. She also lends her expertise to company growth and improvement. In 2023, Found led recruitment team training with a focus on consistent recruiting, screening, and improving the submission process. The firm recently implemented new systems and processes in the wake of its completed acquisition and merger of Antenna and Creatis in 2023, launched new partnered accounts between recruiters and the sales team, and rolled out new lead generation initiatives.

An integral leader at Gravie, Rebecca Krus Nash has helped the employer health benefits company grow from 120 employees to more than 500 in two years. Joining the Minneapolis company in 2022, she’s led the development and rollout of key initiatives such as compensation strategy, a talent development program, and recruiting and onboarding processes. Where many companies look at cost per hire as a key indicator, Nash and her team emphasize metrics such as quality of hire and turnover. She has helped champion trust and accountability, designing programs to support employees. Community-driven, Nash is the first development committee chair of Teach For America-Twin Cities, helping increase funding and spur transformation in the leadership development-focused nonprofit.

Natalie Hochhausen advises businesses and individuals on human resources and employment issues such as discrimination and harassment prevention, employment procedures and policies, and employment training at Fafinski Mark & Johnson. She works with a wide variety of clients, ranging from individual employees and small businesses to multinational corporations, large-scale manufacturers, and even the largest collegiate sports conference in the U.S. Hochhausen is one of the leaders of the Eden Prairie firm’s HR & Employment Practice Group, mentoring newer attorneys and educating clients on employment law aspects of business transactions. Before joining Fafinski Mark & Johnson four years ago, Hochhausen worked in-house with a major medical supply company. Colleagues at the firm say her practice has quickly taken off and she’s become a positive leadership force in the office.

Casey Merkwan serves on both the corporate communications team and the community marketing team at St. Louis Park-based Old National Bank (ONB). Her role includes developing and executing effective communication strategies internally and externally, along with employee engagement, larger sponsorships, and community outreach. In early 2023, Merkwan developed a sponsorship rubric to equitably vet hundreds of financial donation requests received across the bank’s seven-state footprint. She’s also led several campaigns over the years including Choose Your Charity in 2020, where ONB donated $170,000 through an online voting campaign that garnered more than a quarter-million votes from community members. She also serves on the board of BestPrep and the advisory council for PACER Center.

A trained obstetrics nurse, Shukri Jumale plays an integral role in the Midwest Fetal Care Center’s (a collaboration between Allina Health and Children’s Minnesota) fetal equity project, which aims to ensure access to the center’s care services for fetuses with complex medical conditions. In 2023, she helped conduct focus groups to learn why few Somali-American women were seeking care from MWFCC. She uncovered crucial information: Many women believed their religion forbade medical intervention for fetuses. After engaging Islamic scholars, she learned that Islamic parents can accept medical intervention if the fetus has an abnormality. Jumale is now helping share this information locally and nationally. As treasurer of the Minnesota Breastfeeding Coalition, she helped oversee a first-of-its-kind fatwa (a legal ruling on a point of Islamic law) supporting the use of donor breast milk for babies, which Islamic women had been hesitant to use.

Quincy Powe is passionate about amplifying the voices of young people, especially youths who have experienced challenges such as homelessness, poverty, engagement with the foster care system, and other barriers to success. Promoted to co-lead of Youthprise’s Twin Cities Opportunity Youth Network in 2022, Powe pushes for narrative shifts and policy changes that promote equity and access for marginalized and BIPOC youth. In 2023, he co-launched Youthprise’s policy-focused podcast, Pushing P3: Policy, Power, and Passion, and serves as moderator of the show, which broadcasts during Minnesota’s legislative session and provides real-time commentary on legislation that impacts youth. He serves as chair of advocacy and vice president for the Urban League Twin Cities Young Professionals. Powe also gave personal testimony as an unhoused youth, which was instrumental in passing the 2023 legislation for the Homeless Youth Stipend Pilot.
Christopher Rochester is working to change music education in Minnesota by creating and expanding equitable music programming. As creator and director of the Global Music Initiative (GMI) at the MacPhail Center for Music, Rochester works to diversify music education in the state by making instruction more representative and respectful of cultures and traditions. Based in Minneapolis, MacPhail is the largest community music school in the U.S. and the largest employer of musicians in the state. GMI reaches into communities, hosting concerts, workshops, and events celebrating musical diversity. GMI’s flagship artist-in-residence program brings musicians from around the world to immerse students in a diverse range of musical traditions. Since its 2021 inception, the program has reached more than 7,000 students in Minnesota.

Malik Rucker is the newly appointed executive director of V3 Sports, a nonprofit developing a new community-inspired health and wellness center to elevate the physical, emotional, and social well-being of North Minneapolis residents. He’s been instrumental in securing key partnerships and funding while creating more awareness of V3. As a fifth-generation North Minneapolis resident, Rucker works to ensure that community voices are reflected in the development of the V3 Center, which will bring fitness, educational programming, and community gathering opportunities when it opens this coming spring. Rucker is also an adviser for the Fund For Safe Communities at The Minneapolis Foundation, a board member with Minnesota Sports and Events Champions Council, and a community advisory board member for Blue Cross Blue Shield.

Sama Sandy is the head marketer at Horton Worldwide, a global leader in developing thermal control systems for trucks, construction, mining, and agriculture equipment, as well as generators. For the last three years, he’s overseen all creative, digital, communications, and day-to-day marketing operations for the Roseville-based company while managing a small team of marketers. Sandy has spearheaded many major initiatives, including the management and design for Horton’s first e-commerce platform, which launched in January, and corporate branding pieces like its Who We Are and Horton History on YouTube, as well as its first female engineer-led podcast, Between Two Fans. He also oversaw the creation of Horton’s new multilingual website, which launched in January.

CONGRATULATIONS

to one of our kid experts, Shukri Jumale, program manager at the Midwest Fetal Care Center (MWFCC), a collaboration between Allina Health and Children's Minnesota.

THANK YOU, SHUKRI, for your tenacity and dedication to improving health equity which has already led to significant results within the Somali American and Muslim communities in Minnesota and beyond.

CONGRATULATIONS

SAMA SANDY
2024 NOTABLE EMERGING LEADER

Sama Sandy brings 15 years of brand, creative, and digital marketing expertise as a creator of cool at Horton, a leader in creating engine cooling solutions.
AMY SCHILLING
Marketing manager, Knutson Construction
Amy Schilling has quickly risen through the ranks at Knutson Construction to lead the general contractor’s global marketing portfolio. As the Minneapolis-based company’s highest-ranking marketing employee, she oversees all aspects of marketing while ensuring comprehensive brand management and community outreach efforts. Since joining Knutson in 2014, Schilling has contributed to more than $1 billion in project awards, including the state’s largest K-12 referendum project, awarded this past spring. Colleagues say she’s consistently demonstrated an ability to navigate the challenges of the construction industry. Her ability to innovate has helped Knutson land work in new markets. Schilling is known to create a collaborative culture for her team, and beyond her department, she serves as a committee member and leadership panelist of Knutson’s Women’s Employee Resource Group.

SYDNEY SCHOEBERLE
Senior account executive, Bellmont Partners
Sydney Schoeberle excels at collaborating with clients on communications initiatives, a skill she discovered when she joined public relations and communications company Bellmont Partners in 2019. Three promotions later, she is now an integral part of the Minneapolis company’s Professional Services & Public Affairs practice group. She’s also half of the agency’s design team, with a knack for combining words, visuals, and client service. Schoeberle works closely with many clients who directly impact the community, such as the Minnesota Firefighter Initiative (MnFIRE). She and her team helped promote a MnFIRE campaign to pass the Hometown Heroes Assistance Program bill into law, the most comprehensive firefighter well-being legislation in the nation. The campaign included generating nearly 250 media stories. The Minnesota Legislature passed the bill in 2021, providing $8 million to bolster firefighter health.

GODSON SOWAH
Global account leader, Ernst & Young
Godson Sowah manages a team of 60 Minneapolis-based consulting professionals and 100-plus offshore resources to deliver more than $20 million in annual engagement revenues across multiple industries and services at Ernst & Young. He’s recognized by peers as a trusted adviser and thought leader, reflected in his appointment by two governors to the Minnesota Board of Accountancy where he serves as board secretary. He serves in national roles at the American Institute of Certified Public Accountants and the National Association of State Boards of Accountancy, working to address the major barriers in CPA including the digital divide for minority and low-income students. Sowah is also a senior adviser to the CPA Evolution Model Curriculum Task Forces, helping define the next generation of CPA licensure.
Best-in-Class Executives

From plastics to paper, textiles to sweets and snacks, this year’s Notable Women in Manufacturing drive results. Whatever their specific focus, the dozen professionals TCB is spotlighting prioritize optimization and innovation while taking the time to mentor the next generation of industry leaders.

**METHODOLOGY:** The individuals featured did not pay to be included. Their profiles were drawn from nomination materials. This list is not comprehensive; it includes only people who were nominated and accepted after editorial review. To qualify for this list, individuals must have at least five years of experience in their field and have shown the ability to effect change in their roles or areas of practice.

---

**ERICA AMEVO**  
Vice president of human resources, Uponor North America

Seasoned HR leader Erica Amevo has a track record of developing innovative strategies that support the people who work for Uponor North America, the Apple Valley-based plumbing and climate solutions company. Named vice president of human resources in December 2022, Amevo serves as a key member of Uponor’s senior management committee and its global HR leadership team, with headquarters in Finland. Post-Covid, Amevo built a “Flexible First” work model to improve hiring and retention. She implemented the company’s President’s Excellence Award to recognize high-performing employees. She brought greater DEI awareness through formal training and events and oversaw compensation analysis projects to ensure competitiveness in both the office and hourly employee groups. “What continues to set Erica apart is her ability to put herself in the shoes of others while fostering a team spirit that drives success,” says Courtney Hieb, corporate communications manager at Uponor.

**JULIE ANDERSON**  
Principal manufacturing engineer, Colder Products Co.

An experienced manufacturing and process development engineer, Julie Anderson has dedicated her career not only to improving manufacturing processes, but to uplifting the next generation of scientists, engineers, and manufacturing leaders. She mentors engineering students who intern at Arden Hills-based Colder Products Co. (CPC), a provider of quick disconnect couplings, fittings, and connectors for plastic tubing. She also volunteers with community STEM groups including She Engineers and FIRST Robotics. At CPC, she played a vital role in the development of aseptic connectors needed for the production of the Covid-19 vaccine. She also helped the company improve the manufacturing of one of its highest-volume biopharma connectors by decreasing in-process scrap by 90% and increasing equipment uptime by 20%.

**KEARA BAILEY**  
Operations manager, Softline Brand Partners

Keara Bailey is a respected leader at Softline Brand Partners, a Minneapolis-based manufacturer of soft goods including bags and leather accessories. She started in an entry-level position in 2016 and now manages several team members, overseeing a variety of tasks including scheduling, raw goods procurement, and customer service. Bailey singlehandedly manages the Love Your Melon account and has overseen the production of more than 1 million units for the beloved local brand. During the pandemic, she was also responsible for Softline’s face mask line. With an eye toward efficiency, Bailey championed 5S, a five-step methodology to create a more organized and productive workspace. She has developed and implemented client-specific documentation for quality assurance and quality control. She also created a manufacturing process for stamping multi-foil licensed products and launched the third-party logistics kitting division for subscription box customers.
Notables in Manufacturing

**Christine Lantinen**
Vice president, Maud Borup

Christine Lantinen is the sole owner of Maud Borup, a century-old candy manufacturer she bought in 2005. Under her leadership, the Plymouth company pivoted from direct-to-consumer to a B2B wholesale model, selling through retailers including Target, Macy’s, Whole Foods Market, Hy-Vee, and Neiman Marcus. Within the first year of Lantinen’s ownership, the company grew from $100,000 to more than $2 million in sales. From 2020-22, Maud Borup grew 117.5% and was recognized on Inc. 5000’s list of fastest-growing privately held companies in the U.S. Today, it’s grown to $50 million and is on track to double that in four years, making it one of the top five candy companies in Minnesota. Described by colleagues as a “leadership high-achiever,” Lantinen is committed to a healthy work-life balance while pushing partners and employees to reach their full potential.

**Brooke Lee**
CEO, Anchor Paper

Brooke Lee is a fourth-generation family owner of Anchor Paper, a more than century-old paper and packaging products distributor in St. Paul, where she has served as CEO for 10 years. A collaborative leader, Lee is known for her forward-thinking strategy and empathy. And she has the results to show for it: Anchor Paper has grown 34% during her tenure as CEO, even with paper (the company’s core product base) declining in demand 2-9% every year for more than a decade running. Under Lee’s leadership, the company has worked to bolster the paper side of the business as well as grow the packaging division share. Lee chairs the manufacturing committee for the Minnesota Chamber of Commerce and is board president of the Association of Independent Printing Paper Merchants, a secretary on the Minnehaha Academy Board of Trustees, and an executive committee member at St. Paul nonprofit Spare Key.

**Sthitie Bom**
Vice president, Seagate Technology

Sthitie Bom is considered a pioneer in the field of data and analytics, consistently driving transformative change in advanced manufacturing. Colleagues at Bloomington-based Seagate Technology say her visionary innovation and leadership have resulted in the delivery of AI-driven smart manufacturing solutions, collectively valued at nearly $100 million, over the past two years. What sets her apart is her commitment to leveraging Seagate’s success for a broader impact on the manufacturing industry. This includes spearheading a benchmarking session with manufacturers in Minnesota to facilitate discussions and the sharing of best practices, while striving to generate value and make significant improvements through cutting-edge cyber technologies. She initiated a coalition unifying semiconductor manufacturing companies, collectively representing 20% of the industry in the U.S. A sought-after speaker, she’s contributed to multiple studies led by the National Academy of Sciences.

**Steevie Brown**
Director of product making, Faribault Mill

Steevie Brown joined Faribault Mill three years ago and quickly made herself indispensable to the iconic textiles brand, which has led to multiple promotions. She oversees key parts of the production process and is always looking for new efficiencies such as yarn simplification, which reduced the amount of capital tied up in stock, reduced waste, and enabled Faribault to invest in other areas of business. She also helped improve loom efficiencies, enabling quick adaptation to changing market trends. She’s involved with vendor relationships and employee training as well. Inspired by her grandmother, a skilled weaver, Brown worked as a costume designer earlier in her career for regional theaters and studied product design. “Steevie is the key person in our entire organization who knows how to make our products in a way that makes them last for generations,” says Rick Dow, chief marketing officer at Faribault Mill.

**Reilly Goodwin**
Senior director of sustainability and ESG/vice president of the Tennant Foundation, Tennant Co.

Reilly Goodwin launched the Tennant Co.’s initiative “Thriving People, Healthy Planet” in early 2023. She outlined two pillars: positively impacting people and community through products and services and addressing climate change and global challenges. Ultimately, Goodwin aims to embed sustainable thinking across functions for the Eden Prairie-based cleaning solutions manufacturer. Goodwin and her team also crafted Tennant’s commitment to net-zero greenhouse gas emissions by 2040. And she’s worked with Tennant’s HR and DEI leaders to improve representation in the company. Although women have been hired and promoted at similar rates to their male counterparts, data showed they chose to leave Tennant at a higher rate. To address this, Tennant recently announced an initiative to improve the representation of women in leadership.

**Sthitie Bom**
Vice president, Seagate Technology

Lori Nickleson is a manufacturing operations manager at Andersen’s Bayport 100 Series plant, the window manufacturer’s fastest-growing line, due to its proprietary Fibrex material. She oversees nearly 500 employees, including line workers and managers, and is responsible for the plant’s daily operations. During the pandemic, Andersen experienced extended lead times because of unprecedented demand and supply chain disruptions; Nickleson worked to convert an existing line to create added capacity for mulls, a product experiencing extended lead time. She also added a third shift halfway through 2021, which added 160 employees. It has become key to the Bayport 100 Series’ success and a model for additional locations. Described by colleagues as a “people first” leader, Nickleson has a hand in many programs that build culture and inclusivity at the plant.
REBECCA SNELL
Senior production manager, Minnetronix Medical

With nearly three decades of experience as a manufacturing leader, Rebecca Snell supervises manufacturing for Minnetronix Medical’s new product introduction (NPI) business, leading processes and teams that are manufacturing complex medical devices to meet the pressing needs of patients. The NPI business produced more than 33,000 medical devices across 40 product lines last year, including a product that delivers more oxygen to premature newborns with underdeveloped lungs and another that diagnoses concussions by tracking eye movement. Under her leadership, the St. Paul med-tech company boosted employee retention to 90% in the NPI manufacturing function. Last year, Snell recruited and onboarded more than 50 manufacturing employees. She’s also responsible for redesigning processes on the line to meet demand, recently increasing the capacity of a key production line by 100%.

MAUREEN STEINWALL
Owner/president, Steinwall, Inc.

In the early 1980s, Maureen Steinwall worked in public accounting and operations management. When her father asked her how to go about selling his thermoplastic injection molding company, she responded, “You sell it to me.” In 1983, she joined Steinwall Inc. as vice president; two years later, she was named president following her father’s retirement. Although many of the company’s original employees left because they didn’t want to work for a woman, Steinwall remained steadfast in providing the best durable precision thermoplastic components possible. Today, the Coon Rapids company is 50 years old, with 177,000 square feet of manufacturing and warehouse space, $15 million in sales, and 130 employees. Steinwall also volunteers as president of the Plastics Hall of Fame.

ANGIE WORDELL
Executive vice president of operations, Graco

When she began her career at Minneapolis-based Graco in 1994, Angie Wordell was one of the few female manufacturing engineers. Through the years, she’s steadily risen in the ranks, becoming executive vice president of operations for the global manufacturer of fluid handling systems in 2018. Today, she oversees operational and manufacturing processes. She’s helped scale automation teams in each Graco factory to achieve quality, cost, ergonomic, and safety goals. Under her leadership, Graco produces at least 80% of its products in the U.S. and strives for zero cost changes year-over-year and less than 1% in warranty costs through quality improvements. Wordell is also a member of the Minneapolis Riverfront Partnership. She works with the Minnesota Private College Council to provide minority students with greater access to a college education and is a member of the Manufacturers Alliance for Productivity and Innovation.
A NEW ERA FOR THE METECH MARKET

Innovation in the medical device space has ushered in a transformative era that is redefining patient care, treatment efficacy, and health care accessibility. Medical devices have evolved from mere tools to intelligent, interconnected learning systems, thanks to component miniaturization, advanced materials, software, and algorithm development. This convergence of technologies has paved the way for a new era of precision medicine, where interventions are tailored to individual patient needs.

Modern device innovation is leading to smaller, smarter, and more minimally invasive solutions that provide advancements in memory, power management, and full-sensing solutions. Integrated sensors offer continuous monitoring, enabling real-time data for proactive health management. This shift facilitates non-invasive procedures, precise interventions, and personalized treatments.

The surge in innovation highlights the growing importance of medical device outsourcing partnerships, driven by the demand for quicker innovation timelines and the swift time-to-market facilitated by these collaborations. Strategic and vertically integrated outsourcing partners capitalize on their expertise in device design, supply chain management, and the evolution of advanced component technologies.

Spanning across designing, developing, and manufacturing cutting-edge devices for health care markets, Cirtec Medical leverages technology investments and strategic relationships to push the boundaries of medical device development and meet the evolving needs of customers, elevating their solutions and fast-tracking their market entry.
DAVID C. HERMAN
Chief Executive Officer, MD
Essentia Health

Small Towns, Big Needs
Health care hurdles are particularly pronounced in rural America where residents tend to be older, experience higher rates of chronic illness, travel further, and have less access to medical facilities. With a service area that is 84% rural, we navigate and experience these challenges daily. In fact, eight of Essentia’s 14 hospitals are designated as Critical Access Hospitals, located in communities with no other hospital nearby. Our emphasis on increasing access and prioritizing prevention is key to building healthier, happier communities.

Both hospitals and physician practices have had to get better and quicker at protecting the collectability of their current claims while ensuring significant focus is paid to their legacy accounts receivable (AR).

Optimizing your revenue cycle starts with an in-depth assessment comprised of evaluating your processes; determining the utilization of technology, staff, and claims count; understanding industry best practices; and creating, implementing, and tracking KPIs. Only with a true understanding of the factors that play into their unique revenue cycle is when providers can implement industry best practices, tighten controls, and strategically configure their AR systems to maximize their bottom line.

RCM assistance is a revenue-driving expense that can carry a noticeable return on investment of the professional fees. Now, more than ever, the crucial step is to take timely action to secure assistance, implement necessary changes for higher rates of clean claims, minimize ongoing account aging, and maximize revenue.

To learn more about EisnerAmper’s outsourced RCM services, visit eisneramper.com/revenue-cycle.

STEVEN BISCIELLO
Partner
EisnerAmper

CHRIS SCHULTZ
Partner
EisnerAmper

For Many Health Care Providers, it Pays to Outsource RCM
Effective revenue cycle management (RCM) is vital to keeping practices solvent in a post-COVID environment. As health care providers battle shortages in RCM talent, they’re forced to create more with less. That’s why it is imperative to optimize billing, decrease and overturn denials, and sustain successful operations—whether in an insourced or outsourced model.

Both hospitals and physician practices have had to get focusing on prevention and managing chronic conditions. For Medicare patients alone, we saved taxpayers nearly $60 million in health care costs over the past five years while improving care quality. This is evidenced by three of our hospitals earning five-star CMS ratings in 2023, and Essentia ranking atop the Minnesota Health Care Quality Report.

Increasing access is key. We make better use of our rural facilities through our innovative capacity command center that coordinates care systemwide, allowing us to serve hundreds of additional patients per year. These folks receive the right level of care closer to home, which opens beds in our larger hospitals for higher-acuity patients. Our community paramedics program brings preventive care to high-risk patients at home, keeping them safe and out of the hospital.

We are proud of these initiatives, showcasing the tireless efforts of our providers, nurses, and other staff as they lead the way in pioneering solutions in health care.

IN THE LAND OF 10,000 INNOVATIONS, MINNESOTA’S MEDTECH INDUSTRY HITS A HIGH NOTE
Despite notable challenges and volatility, Minnesota’s medical sector grew in the first part of the decade. Total employment grew from Q2 2019 to Q2 2023 across all segments of the sector. The state’s health care and social assistance industry added over 7,000 jobs in that time. Biopharma and medtech industries also expanded jobs, adding nearly 5,300 jobs since mid-2019. Current Employment Statistics data shows that Minnesota’s health care and social assistance saw particularly strong performance in the middle part of 2023. The industry was the largest contributor to job growth in the state through October 2023, expanding by 3.9% and adding 19,000 jobs since January on a seasonally adjusted basis.

SOURCE: MINNESOTA CHAMBER OF COMMERCE
Generic Drugs Are Currently in Jeopardy

Drug shortages are a looming health issue that will demand more attention in 2024. As it stands, the U.S. is currently experiencing a shortage of 150 drugs, most of which are generic medications—cheaper and equally effective alternatives to their brand-name counterparts. Maple Grove-based generics manufacturer Upsher-Smith has been consistently recognized in the pharmaceuticals industry for a reliable supply of products. But maintaining it will not be easy.

That’s because the generics market is facing a flurry of significant challenges: fierce global competition (mostly from offshore companies); compressed margins (profits for certain drugs are so low, some companies stop making the drugs altogether); and increased government regulations. Last spring, Minnesota passed a law that disproportionately impacts generic makers for the state’s definition of price gouging, while leaving the high cost of brand-name drugs unaffected. (This law is being challenged in court.)

The industry needs more communication and education to address this complex issue, but progress is being made: late last year, Upsher hosted several Minnesota legislators for an in-person conversation about generics, including some who had previously voted for the legislation.

This marks a positive step forward, illustrating a growing awareness and commitment to navigating the intricacies of the industry.

Our undergraduate nursing programs are specifically endorsed as holistic nursing programs, which means that [courses] like meditative and contemplative practices are integrated into the curriculum—to the benefit of caregivers as well as their patients.”

—SUZANNE LEHMAN, INTERIM DEAN OF SCHOOL OF NURSING, ST. CATHERINE UNIVERSITY

A Holistic Learning Culture for Health Care’s Next Gen

For St. Catherine University’s School of Nursing (SoN) and Henrietta Schmoll School of Health Sciences (HSSH), addressing the ongoing shortage of health care professionals begins in the classroom. Our undergraduate nursing programs are specifically endorsed as holistic nursing programs, which means that holistic content like meditative and contemplative practices are integrated into the curriculum—to the benefit of caregivers as well as their patients.

This integrated approach to health care equips students to better care for themselves as they move into their practice. In response to the challenges facing health care professionals, HSSH has also created a psychological skills training program that teaches stress management to help students confidently meet the demands of their studies and the workforce.

St. Kate’s equips students with an education that targets skills like stress management and finds innovative ways to enhance clinical experiences to graduate confident and resilient students into the workforce. We do that by making sure that our faculty are well-prepared, that we’re listening to our clinical partners and the communities we serve, and that we’re tuned into the changing health care landscape.

One of the keys to addressing this shortage is strong partnerships and conversations with local health care organizations. In addition to affiliation agreements with all major Twin Cities health systems, the SoN and HSSH maintain partnerships with local health care organizations, including the SMMART (St. Mary’s Medical and Rehabilitative Therapies) Clinic with the St. Mary’s Health Clinics and the Bear Care Health and Wellness Clinic. These opportunities allow students to provide care to underserved and insured patients while gaining clinical experience.

Through these partnerships, St. Kate’s identifies opportunities to share expertise and provide new pathways for those already in the workforce. Pairing students’ work experience with further education can reduce barriers like time and money and help them meet career goals. We’re committed to building degree programs that provide credit and advantages for students with prior experience in the health care world, especially with a non-degree credential.

It’s important to help current and future health care workers gain the experience and education they need to find the role that fits them best, so they can provide the best care possible.

“Insights” // HEALTH CARE
**AWARD | Law**

**Mary Frances Price**

Moss & Barnett elder law lawyer, Mary Frances Price, was selected to be the recipient of The Mary Alice Gooderl Award. This award is presented to acknowledge outstanding contributions to the field of Elder Law by members of the Minnesota State Bar Association (MSBA) Elder Law Section as exemplified by Mary Alice Gooderl, one of the founders of the MSBA Elder Law Section. The award was presented to Mary Frances on October 5, 2023, at the Minnesota Elder Law Institute.

**PROMOTION | Technology**

**Jessie LaDousa**

Clientek is proud to announce the appointment of Jesse LaDousa as Chief Executive Officer, effective January 1, 2024. Formerly serving as Chief Operating Officer, Jesse brings a wealth of experience in strategic leadership and operational efficiency. The organization is confident in Jesse's ability to lead the company into its next phase of growth while continuing to provide industry leading software solutions and consultancy to clients throughout the Twin Cities and around the world.

**NEW HIRE | Agriculture**

**Jamie Leifker**

Truterra, a leading agriculture sustainability business that offers consultation, tools and solutions for the ag and food value chain, announced Jamie Leifker as its next President. As a farmer and seasoned agronomy leader, Leifker is well positioned to continue Truterra's focus on ag sustainability and profitability for farmers. He brings 25+ years of experience in agriculture working to deliver data-driven products and services so farmers can be more profitable and sustainable.

**PROMOTION | Technology**

**Shane Oswald**

Clientek is excited to announce the promotion of Shane Oswald to Chief Operating Officer. After years of delivering successful projects and operational excellence, Shane has shown his competency for guiding the operations of the business. Founded in 1992, Clientek is a custom software development and consultancy firm headquartered in Minneapolis, MN. Clientek looks forward to Shane's continued contributions to organizational success.

**GENERAL NEWS | Workforce + Talent**

**MDA Leadership**

MDA Leadership, a premier leadership consulting firm, is excited to announce the appointment of SVP Sean Allen, M.B.A., M.S. Finance, Ph.D. as co-leader of the CEO and Board Services practice area with SVP Sharon Sackett, Ph.D. They will leverage their combined expertise to deliver the highest quality talent solutions to CEOs and Boards. CEO Scott Nelson explained, “Organizations are experiencing transformative shifts in their business and culture, requiring new leadership profiles for CEOs and their teams. As one the nation's most trusted strategic talent advisors, MDA is committed to providing organizations with exceptional CEO insights relative to dynamic success profiles, selection, development, and succession during times of transformation. Their impressive business and strategic acumen make them the ideal choice to lead this growing practice.” Visit mdaleadership.com.
2024 Meetings & Events Resource Guide

OUR ANNUAL RESOURCE GUIDE CONNECTS BUSINESSPEOPLE TO EVENT PROFESSIONALS WHO DELIVER A WIDE RANGE OF EXPERIENCES.

Following years of disruption, “refinement” is how Kalsey Beach describes the events industry now. “I feel 2023 was bringing the process back, and now we’re refining our process,” says Beach, the founder of Do Good Events.

The St. Louis Park-based company hosted 85 live, in-person events in 2023, with nearly 30,000 total attendees. And Beach looks to continue that pace in 2024.

In corporate events, it’s easy to fall into conventional methods: networking, a speaker, and some drinks. But Beach has started to notice a shift in what guests want and how companies leverage their events to make an impact.

“Let’s give people an experience they couldn’t have [anywhere else],” she says. “People are so protective of their time; it’s about making it worthwhile.”

Instead of an hour-long keynote, Beach suggests a 20-minute keynote followed by an engagement session. “We’re seeing a lot of our corporate events having the educational content but giving people a lot of time for interacting and to take action.”

Attendees are also looking for that extra spark or surprise—an event that can leave them with something to talk about the next day and a reason to return the next year. For example, Do Good hosted an event where organizers skipped the standard coffee station and instead took the time to gather everyone’s coffee order. The guests were then greeted at their seats with their favorite beverage. It’s thinking about everybody ahead of time, Beach says.

That kind of attention to detail is top of mind for event planners. That includes sustainability, newer technologies, and accessibility for guests. “We continue to crave that sense of community, but are also looking for that novelty to be surprised and delighted—to be able to just take that experience and depth to another level.”

The 2024 Meetings and Events Resource Guide contains listings chosen by the TCB editorial team. It is not a comprehensive guide. —Tina Nguyen

INDEX

50 Audiovisual Services // 52 Branded Merchandise & Awards
52 Trade Show & Exhibit Services // 54 Catering // 54 Entertainment
56 Off-Site Experiences // 59 Convention & Visitors Bureaus
60 Meeting & Event Planning // 62 Rental Services //
62 Transportation & Valet Services
Discover St. Louis Park

MINNESOTA’S SWEET SPOT
ST. LOUIS PARK & GOLDEN VALLEY

TRY OUR Virtual Getaway!

St. Louis Park & Golden Valley offer big city amenities with small town hospitality and charm, close to the heart of Minneapolis.

We invite you on an immersive digital experience. Watch our cities come to life through augmented reality!

HOW TO PLAY

1. Scan the QR code
2. Click the link on our website
3. Place the magazine on a flat surface
4. Aim your phone at the artwork
5. Have fun exploring
6. Enter to win prizes!

A SWEET Spot for Meetings

We’ll help you create the perfect meeting or event.

• Unique venues
• Room blocks
• Off-site entertainment
• Meeting incentives
• Transportation grant
• Free parking
• And more!

Our services are always complimentary!

DiscoverStLouisPark.com
AUDIOVISUAL SERVICES

**Allied Productions & Sales**
651-451-6846; alliedproductions.com
Audio, lighting, video, rigging, and staging.

**Alpha**
952-896-9898; alphax.us
Design, integration, support, and rental equipment services.

**Audio Video Electronics**
763-561-0435; audiovideoelectronics.com
Audio, visual, and lighting rental and control.

**AV Events**
952-544-5555; aeventsmn.com
AV product sales and rental; event production, meetings, staging, lighting.

**AV For You**
952-500-8839; avforyou.com
Audio-visual equipment rental.

**AVEX**
952-929-2879; avex.com
Event production; equipment rental and sales; creative services; technical support.

**AVI-SPL**
651-287-7000; avispl.com
Video conferencing services; AV tech; meeting coordination software; technical support.

**AVI Systems**
952-949-3700; avisystems.com
Planning, design, and installation of videoconferencing, video presentation, and broadcast systems.

**AVVR**
952-814-9898; avvr.com
Equipment rental for boardroom presentations, conferences, and trade shows.

**Big Event Productions**
612-623-7800; bigeventpros.com
AV support and staging for meetings and events; video, audio, lighting and projection, including technicians.

**CCG Productions**
info@creativegang.com; creativegang.com
2-D projection, 3-D animation, 3-D architectural mapping; hydro media/water screens, special effects, virtual environments, video production; AV gear and technicians.

**Cloverleaf Audio-Visual**
612-367-7711; cloverleafaudio.com
Facilities and services for audio recording and production and video production.

**Common World Productions**
651-582-0502; commonworld.com
Large-screen video, projection displays, equipment rental, and production crew.

**EMI Audio**
612-789-2496; emiaudio.com
Rental and sale of audio, lighting, and video products, design and installation, repair and field service.

**Encore Global**
866-351-1144; encoreglobal.com
Technology for in-person, virtual, and hybrid event planning.

**EPA Audio Visual**
763-477-6931; epaudio.com
AV systems integrator with equipment and design services for boardrooms, classrooms, videoconferencing, and digital signage.

**Eternal Systems**
612-987-8936; eternalsystems.com
Event stage, sound, and lighting production services.

**Event Sound & Lighting**
952-830-0506; eventsoundandlighting.com
Equipment rental, event production including technical support, recording services, on-site generator power.

**Feedback**
612-695-1688; feedback.video
Interactive audio experiences and visual media and equipment.

**IMAV: Professional Audio-Visual Services**
651-500-4154; imav.pro
Audio, lighting, and video services.

**InHouse Media**
612-541-4010; inhousegroup.com
Meeting and media production company that provides solutions for events, meetings, and media communications.

**iSpace Environments**
612-922-1300; ispaceenvironments.com
Office furniture and tech equipment; video conferencing and office displays.

**Leich**
612-353-0887; leichay.com
Event presentations; distributed audio and visual; interactive whiteboards; wire and cable.

**Mainstream Communications**
952-888-9000; mainstreamcom.net
Video production, event staging, intelligent lighting, large screen projection, sound reinforcement, and technician services.

**Maple Lane Media**
763-478-8184; mapelanemedia.com
Event presentations, internet streaming media, video production, and support services.

**Media Loft**
612-375-0186; media loft.com
Meeting production, including creative, speech writing, visual support, talent management, scenic, lighting and technical direction; video production, graphic design, 3D and motion graphics, video duplication.

**New Era Technology**
877-696-7720; neweratech.com
Telepresence, videoconferencing, audio-visual design and implementation, training, and support.

**Showcore**
651-994-1500; showcore.com
Staging, lighting, audio design, video projection, visual marketing, event broadcasting, and logistics.

**The Show Syndicate**
612-360-2930; theshowsyndicate.com
Projection, video, and graphics production.

**Slamhammer**
612-724-5395; slamhammer.com
Concert sound and lighting.

**Spye**
612-318-6388; spyeco.com
Audio-visual design and integration system.

**Studio 120**
800-759-0992; studio120.com
Audio-visual production studio; scripting, casting, shooting, and post-production services.

**VHC**
651-288-3855; vhccinc.com
Audio-visual stage production for live, virtual, and hybrid events.

**WAVS**
952-449-9287; wavsinc.com
Installation of audio systems; video projection and display; closed-circuit television in meeting and conference rooms.

**WNAV Audio Visual**
952-853-2270; wnav-video.com
Equipment rental; corporate meeting and event support; video production.

**Z Systems, Inc.**
952-974-3140; zsys.com
AV systems rentals, consulting, design, sales, installation, repair, maintenance, and training.

**Zunker Production Services**
612-801-4525; zunkerproductionservices.com
Event and stage design, technical specifying, technical direction, and production management.
Your RSVP for exclusive resort events, amenities, and guest only access – Join the party.

Book your group event by emailing lisa.filzen@pierbresort.com

800 W Railroad St, Duluth, MN 55802  PierBResort.com
BRANDED MERCHANDISE & AWARDS

ALTA Honors
763-537-3422; altahonors.com
Plaques, trophies, corporate awards, apparel, custom recognition programs, and speaker gifts.

Arthouse
612-321-0950; arthouseprint.com
Promotional products agency offering custom apparel and merchandise.

Bann Business Solutions
651-224-5135; bannbiz.com
Promotional merchandise, printing, graphics, and marketing.

Broadway Awards
763-533-0979; broadwayawards.net
Branded awards, employee gifts, trophies, and promotional products.

Brown & Bigelow
651-293-7000; brownandbigelow.com
Custom-branded apparel and promotional merchandise.

Chocolat Céleste
651-644-3823; chocolatceleste.com
Customizable chocolates.

Creative Resources
952-988-9407; acreativeresource.com
Full-service product marketing agency offering branded apparel and merchandise.

Dave Cowley Incentives
952-921-0906; davecowleyincentives.com
Recognition awards, sales incentives, corporate gifts, trade show displays and giveaways, branded merchandise.

High Five
952-746-0355; highfiveonline.com
Promotional merchandise, conference and meeting supplies, and displays.

Hillary's Hand Painted and Personalized Gifts
952-913-6365; hillarysgifts.com
Branded merchandise, gifts, food items, pins.

Innovative Marketing Consultants
952-292-1254; imcsuccess.com
Custom-branded apparel and promotional merchandise, desktop items, executive gifts, and food items.

June Co.
612-374-4013; junecostudio.com
Custom-branded apparel and promotional merchandise, plus marketing, branding design, and fulfillment services.

Kelly Promotions
952-888-1000; kellypromotions.com
Custom-branded apparel and promotional merchandise, signage, displays, and office supplies.

Laketown Chocolates
952-442-1020; laketownchocolates.com
Custom candy bars, chocolate coins, gift boxes and baskets, snack mix, coffee, and cocoa.

Lakeville Trophy
952-469-3232; lakevilleterophy.com
Awards, trophies, memorabilia, gifts, signs, and name tags.

Luxury Joy and Comfort
612-456-6545; luxuryjoyandcomfort.com
Custom gifts and branding for corporate companies.

Marudas Print Services and Promotional Products
651-697-7820; marudas.com
Custom-branded apparel and promotional merchandise, awards, incentives, and uniforms.

Merchology
855-214-8305; merchology.com
Corporate apparel and gifts with co-branded merchandise partners like Patagonia, Under Armour, and Carhartt.

Premium Waters
800-332-3332; premiumwaters.com
Bottled water with custom labels, water coolers, and coffee services.

Promotion Select
952-470-6166; promotionselect.com
Custom-branded apparel and promotional merchandise, signage, and displays.

Promowear
952-926-2320; promowearinc.com
Custom branded apparel and promotional merchandise and gifts.

Quality Resource Group
800-999-3468; quality-resource.com
Print and promotional products, design, production, online fulfillment, and distribution.

Realm Promotions
952-814-9000; realmpromotions.com
An array of promotional products and supplies.

Signature Concepts
952-935-9887; signatureconcepts.com
Custom-branded apparel and promotional merchandise.

Spartan Promotional Group
651-755-1333; spartanpromo.com
Custom-branded apparel and promotional merchandise.

Wholesale Imprints & Promotions
651-292-1185; wholesaleimprints.com
Custom-branded apparel and promotional merchandise.

TRADE SHOW & EXHIBIT SERVICES

Artec Displays
651-484-8474; artecinc.com
Budget Sign
651-645-2745; budgetsignshop.com
Cenaiko Expo
Minneapolis-St. Paul: 763-755-8111
Central MN: 320-774-1413
cenaikoexpo.com
CenterPoint
651-577-3600; centpoint.com
Chandler
651-389-5900; chandlerinc.com
Display Arts
763-537-0260; displayarts.com
Featherlite Exhibits
763-537-5533; featherlite.com
Freeman
888-508-5054; freeman.com
Graphic Exhibits
651-225-1678; graphicexhibitsinc.com
Nimlok North
651-647-0598; nimloknorthcom
NParallel
763-237-4800; nparallel.com
Showcraft
952-890-4200; showcraft.com
Skyline
651-234-6000; skyline.com
Star
763-561-4655; engagestar.com
Tad Creative Agency
612-280-3981; tadcreativeagency.com
Total Displays
952-941-4511; totaldisplays.com

PHOTOGRAPH BY CHOCOLAT CÉLESTE
CLASSIC SPACES, PRIME LOCATION

Now accepting reservations for corporate meetings, retreats, and events for groups of 10-200. Membership not required.
CATERING

A'BriTin Catering  
612-339-0222; abritincatering.com

Aesop's Table  
651-488-6591; aesopstable.com

Afro Deli Catering  
651-888-2168; afrodeli.com/catering

Black Woods Group Catering  
218-724-0000; blackwoodscatering.com

Boîte Ethiopian Catering  
651-330-2492; boleethiopiancuisine.com

Breaking Bread Catering  
612-529-9346; breakingbreadfoods.com

Broders’ Cucina Italiana  
612-925-3113; broders.com/catering

Buca di Beppo  
877-955-2822; bucadibeppo.com/catering

Buon Giorno  
651-905-1080; buongiornodeli.com

Catering by Kowalski’s  
651-313-6870; kowalskis.com

Taher Inc.  
952-945-0505; taher.com

Chef Jeff Catering  
763-321-4725; chef-jeff.com

Chowgirls Catering  
612-203-0786; chowgirls.net

Chuck Wagon Catering  
763-478-3619; chuckwagoncateringmn.com

Classic Catering  
612-869-0642; classiccateringmn.com

Cobble Social House  
612-345-5463; cobblesmpls.com

Cossetta Eventi  
651-224-8419; cossettaeventi.com

CRAVE Catering & Events  
952-562-3720; cravecateringmn.com

Create Catering  
612-441-0899; createcaters.com

D’Amico Catering  
612-238-4444; damicocatering.com

D. Brian’s Kitchen & Catering  
612-708-1320; dbrians.com/catering

The Deco Catering  
612-625-4477; decocatering.com

Catering by Deli Double  
952-936-0654; delidouble.com

Divine Swine Catering  
952-469-2636; divineswinecatering.com

Eat for Equity  
612-470-4328; eatforequity.org/catering

Elite Espresso Catering  
612-701-6969; elitespresso.com

Famous Dave’s Catering  
877-833-9355; famousdaves.com/catering

Fogo de Chão  
612-338-1344; fogocheao.com/catering

Fork & Flair Catering and Events  
763-230-7620; forkandflair.com

France 44 Catering  
612-278-4422; france44catering.com

French Meadow Bakery & Cafe  
612-767-344; frenchmeadowcafe.com
drop-off-catering

Fresco’s Foods  
952-239-0860; frescosfoodsmn.com

Green Mill Catering  
651-203-3100; greenmillcatering.com

HighTop Hospitality  
651-203-3100; hightophospitality.com

House of Gristle  
651-307-3102; houseofgristle.com

Just North of Memphis BBQ & Catering  
612-306-1432; justnorthofmemphis.com

Kane’s Catering  
612-482-9005; kanescatering.com

Kelber Catering  
612-335-6045; kelber.com

K’s Revolutionary Catering  
612-703-6470; kscatering.com

Lancer Catering  
651-493-2830; lancerhospitality.com/lancer-catering-minnesota

La Vita Espresso Coffee Shop and Coffee Cart Catering  
612-746-3975; coffeeshopcatering.com

Leeann Chin Corporate Delivery & Catering  
612-677-7777; leeanchin.com

Lisa’s Catering  
612-298-6886; lisascatering.com

Lunds & Byerlys Catering  
952-897-9800; lundsbyerlyscatering.com

Marna’s Catering  
612-715-0193; marnascatering.com

MHC Culinary Group  
651-726-1950; mhcculinarygroup.com

Milton’s  
763-535-9375; miltonsvvb.com

Mintahoe Catering & Events  
612-253-0255; mintahoe.com

Nelson Cheese & Deli  
St. Paul: 651-647-1288; nelsoncheese.net

Spring Lake Park: 763-780-2710; nelsoncheese.com

Nolo Donut Cart  
612-790-4431; facebook.com/nolodonutcart

Pimento Jamaican Kitchen  
612-345-5637; pimento.com

Sammy’s Avenue Eatery  
612-767-6278; sammysavenueeatery.com

Skinner’s Catering  
612-282-9228; skinnerincatering.com

Spirit of Asia  
612-478-9908; thespiritofasiacatering.com

Sterling Catering & Events  
612-999-6084; sterlingscateringandevents.com

Surdyk’s Catering  
612-331-3938; surdykcatering.com

Unique Dining Catering  
763-754-6621; udecatering.com

Vittles Catering & Deli  
612-644-7856; vittlescateringmn.com

Wells Catering  
612-712-0987; wellsincatering.com

ENTERTAINMENT

Ace High Casino, Inc.  
612-293-4444; acecatering.com

Traveling casino and carnival entertainment.

ARM Entertainment  
612-483-8754; armcatering.com

Entertainment agency specializing in rock music acts.

Belladiva  
612-260-0417; belladivamusic.com

Band covering a wide range of music.

PHOTOGRAPH BY BLACK WOODS GROUP CATERING
INNOVATIVE CUISINE & INCREDIBLE VENUES

The most impactful moments are made when gathered around the table

THOUGHTFUL EVENTS DESIGNED FOR DYNAMIC BUSINESSES
Client Gatherings | In-Office Catering | Celebratory Dinners | Milestone Events

D’AMICO CATERING

612.238.4444 • eventmanagers@damico.com • damicocatering.com • @damicocatering
The Birchwood String Quartet
952-906-3555; thebirchwoodstringquartet.com
String quartet offering a variety of musical styles.

David Farr
763-566-8597; davidfarr.com
Comedy-style, interactive magician.

Diane Martinson Music
952-920-3064; dianemusic.com
Vocalist for jazz, classical, swing, cabaret, and a variety of music.

Enticing Entertainment
612-254-2584; enticingentertainment.com
Acrobats, aerialists, contortionists, and other circus performers and dancers; customized performance design.

G.L. Berg Entertainment
612-361-6002; gilberg.com
Entertainment agency with a variety of performance artists and speakers.

Hondo Magic
612-867-0875; hondomagic.com
Professional magician, MC, speaker, entertainer, and auctioneer.

Instant Request Disc
Jockey Entertainment
952-934-6110; instantrequest.com
DJ and lighting professionals and services for rent.

Marsh Productions Entertainment Agency, Inc.
952-922-1800; marshproductions.com
Hundreds of bands and DJs, pianists, magicians, caricaturists, speakers, and other entertainers.

Midwest Sound DJ Entertainment
651-644-4111; midwestsound.com
Customizable DJ entertainment.

The Music Works, Inc.
651-464-7757; themusicworks.com
Entertainment agency for national recording artists, comedians, sports figures, reality stars, and other entertainers.

Peterson Music and Events
612-866-4348; petersonmusicandevevents.com
Live music, MC, video storytelling, live auction, and attendee participation.

RES Pyro
952-875-3113; respyro.com
Indoor and outdoor pyrotechnics, special effects, fireworks, streamers, and confetti.

Rock What You Got
612-351-8180; rockwhatyougotlive.com
A collective of female and non-binary performers in comedy, theater, and music.

Sassy Lassy Interactive Events
612-323-1582; sassylassyevents.com
Hosts group games and game shows, including tons of virtual options.

Scotty Reed Entertainment Agency
763-493-6333; scottyreed.com
Entertainment agency with 100 bands and solo performers.

Special Event Entertainment Services
612-588-9825; specialevententertainmentservices.com
Customized entertainment services and event production.

Spotlight Corporate Entertainment
612-373-9838; spotlightinc.com
Entertainment booking and production services with featured performance artists.

Synergy Dance Band
952-926-9927; janaandersonmusic.com
Band offering a variety of genres.

TR Entertainment & Productions
651-490-7781
facebook.com/TREntertainmentMN
Entertainment booking and production services with featured performance artists.

Xelias Aerial Arts Studio
612-353-6406; watchhumansfly.com
Aerial performance troupe; aerial circus classes also offered.

OFF-SITE EXPERIENCES

Allianz Field
St. Paul
612-928-2400; mnufc.com/stadium
Attend a Minnesota United soccer game or hold a private event in the brew hall, rooftop deck, lawn, or one of the various clubrooms.
Bad Axe Throwing  
Minneapolis  
844-818-0999; badaxethrowing.com  
Axe throwing; private lanes and coaches available.

Bauhaus Brew Labs  
Minneapolis  
612-276-6911; bauhausbrewlabs.com  
Brewery featuring rotating food trucks; private event bookings available.

Can Can Wonderland  
St. Paul  
651-925-2261; cancanwonderland.com  
Indoor artist-designed mini golf, vintage arcade games, stage for performances, food and full bar; private rentals available.

Chankaska Creek  
Kasota  
507-931-0089; chankaskawines.com  
Ranch, winery, and distillery experiences with event spaces, tours, and a tasting room.

Cooks of Crocus Hill  
St. Paul; Minneapolis  
651-228-1333; cooksofcrocushill.com  
Culinary and wine classes and experiences; private meeting spaces available.

Extreme Sandbox  
Hastings  
855-344-4386; extremesandbox.com  
Operate heavy equipment in a 10-acre sandbox; facility with private meeting space available.

FlannelJax’s  
St. Paul  
612-268-4800; flanneljaxs.com  
Ax-throwing and other lumberjack-themed games and activities.

Foci Minnesota Center for Glass Arts  
Minneapolis  
612-759-8476; mnglassart.org  
Glassblowing demonstrations and introductory classes.

Forgotten Star Brewing Co.  
Fridley  
763-657-7231; forgottenstarbrewing.com  
Dedicated indoor space with large group curling with tournament and bracket organization.

Game Show Battle Rooms  
Golden Valley  
612-440-6090; gameshowbattlerooms.com  
Team-building opportunities around adapted versions of TV game shows.

HHH Ranch  
Cannon Falls  
651-338-2792; hhhranch.net  
Dogsled rides and demonstrations, horse programs and trail rides; metro-area options.

Make Your Event a Success  
with our expert professionals and best-in-class tools and technology

vhcinc.com  651.288.3855  
Trusted by production and event professionals for more than 40 years
### MEETINGS & EVENTS // RESOURCE GUIDE

<table>
<thead>
<tr>
<th><strong>Human on a Stick</strong></th>
<th><strong>Mystic Lake Casino Hotel</strong></th>
<th><strong>Punch Bowl Social</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minneapolis; St. Paul</td>
<td>Prior Lake</td>
<td>Minneapolis</td>
</tr>
<tr>
<td>952-888-9200; humanonastick.com</td>
<td>800-262-7799; mysticlake.com</td>
<td>763-400-3865; punchbowlsocial.com</td>
</tr>
<tr>
<td>Segway tours; Minneapolis sites include the Stone Arch Bridge and riverfront; St. Paul sites include Summit Avenue and Cathedral Hill.</td>
<td>Minnesota’s largest casino offering gaming, entertainment, dining, and drinks, plus spa and hotel.</td>
<td>Restaurant and bar with bowling, billiards, table games, karaoke, a vintage arcade, and spaces for private events.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>iFLY</strong></th>
<th><strong>New Bohemia</strong></th>
<th><strong>REMS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minnetonka</td>
<td>Golden Valley; St. Paul</td>
<td>St. Louis Park</td>
</tr>
<tr>
<td>612-444-4359; iflyworld.com/minneapolis</td>
<td>763-544-1882; newbohemiapiausa.com</td>
<td>952-855-7592; rem5vr.com</td>
</tr>
<tr>
<td>Indoor skydiving facility offering team-building activities; private meeting space available.</td>
<td>Craft beer hall with 36 local and international craft beers and Minnesota-made sausages.</td>
<td>Virtual reality laboratory with an array of interactive experiences, plus food and beverages.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>La Doña Cervecería</strong></th>
<th><strong>Outback Team Building &amp; Training</strong></th>
<th><strong>Sisyphus Brewing</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minneapolis</td>
<td>Locations vary</td>
<td>Minneapolis</td>
</tr>
<tr>
<td>612-315-4613; dameladona.com</td>
<td>800-565-8735; outbackteambuilding.com</td>
<td>763-999-8040; sisyphusbrewing.com</td>
</tr>
<tr>
<td>Brewery with private and semi-private spaces; full venue rental and catering options; features outdoor patio, football field, and art exhibits.</td>
<td>Choose from a variety of indoor and outdoor corporate team-building activities and trainings.</td>
<td>Brewery; outdoor patio space and private event space available.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Lakes &amp; Legends Brewing Company</strong></th>
<th><strong>ProKART Indoor Racing</strong></th>
<th><strong>Surly Brewing</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minneapolis</td>
<td>Burnsville</td>
<td>Minneapolis</td>
</tr>
<tr>
<td>612-999-6020; lakesandlegends.com</td>
<td>952-808-7223; prokartindoor.com</td>
<td>763-999-8040; surlybrewing.com</td>
</tr>
<tr>
<td>Taproom and brewery with rotating food trucks; games available; private event booking available.</td>
<td>Go-kart racing track. Private track bookings and meeting spaces available.</td>
<td>Large multi-level beer hall and restaurant featuring a beer garden, brewery tours, and spaces for private events.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Lock &amp; Key Escape Rooms</strong></th>
<th><strong>Pristripes</strong></th>
<th><strong>Target Center</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minneapolis</td>
<td>Edina</td>
<td>Minneapolis</td>
</tr>
<tr>
<td>612-645-0539; lockandkeyescape.com</td>
<td>952-835-6440; pristripes.com</td>
<td>612-673-1300</td>
</tr>
<tr>
<td>Escape rooms; mobile games and escape room experiences; conference room space available.</td>
<td>Bowling, bocce ball, Italian cuisine and full bar; private and outdoor spaces.</td>
<td>Attend a Timberwolves or Lynx game or a concert; private meeting and event spaces available.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mission Manor</strong></th>
<th><strong>Pryes Brewing</strong></th>
<th><strong>Tattersall Distilling</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minneapolis</td>
<td>Minneapolis</td>
<td>Minneapolis</td>
</tr>
<tr>
<td>612-354-3088; missionmanor.com</td>
<td>612-787-7937; pryesbrewing.com</td>
<td>612-584-4152; tattersalldistilling.com</td>
</tr>
<tr>
<td>Escape rooms; entire venue and private room bookings available.</td>
<td>Taproom featuring food, tours; semi-private spaces available.</td>
<td>An award-winning distillery featuring a cocktail room, patio, and food truck.</td>
</tr>
</tbody>
</table>

---

**Eventlab**

**DéCOR & FLORAL**

**CUSTOM BUILD & DESIGN**

**EATING & ENTERTAINMENT**

**TRANSPORTATION**

**VENUE SELECTION**

**EVENT MANAGEMENT**

**BRANDING & GRAPHICS**

**TEAM BUILDING**

**LOCAL EXPERIENCES**

**DESTINATION MANAGEMENT**

**ON-SITE COORDINATION**

**EVENTLAB.NET**

952.224.8558
Topgolf
Brooklyn Center
763-201-9636; topgolf.com/us/minneapolis
Climate-controlled year-round golfing; event packages, private spaces available.

Trapped Puzzle Rooms
St. Paul; Minneapolis
651-760-3495; trappedpuzzlerooms.com
Escape rooms; custom offerings for corporate events.

Truck Park
St. Paul
651-340-8431; truckparkusa.com
Indoor food hall, plus cocktails, TVs, games, and live music.

Upstairs Circus
Minneapolis
612-216-2229; upstairscircus.com
Cocktails and DIY classes and projects ranging from leatherworking to jewelry making.

U.S. Bank Stadium
Minneapolis
612-777-8700; usbankstadium.com
Catch a Vikings game or concert; stadium available for rent to host private events on-field or in one of its several clubs or other spaces.

Utepils Brewing
Minneapolis
612-249-7800; utepilsbrewing.com
Brewery with a taproom and rotating food trucks; offers full taproom reservations.

Valleyfair
Shakopee
952-446-7600; valleyfair.com
Amusement park with rides, live shows, food/catered picnics; teambuilding and group activities offered.

Vertical Endeavors
St. Paul (two locations); Minneapolis; Bloomington; Duluth
651-776-1430; verticalendeavors.com
Indoor and outdoor rock climbing, yoga; group events, team-building.

Victoria Burrow
Victoria; Oakdale
952-206-5050; victoriaburrow.com
Restaurant and entertainment center with ax throwing, mini golf, bocce, darts, and arcade games.

Voxel Virtual Reality Parlour
St. Paul
612-787-7855; voxelvrp.com
Virtual reality attraction with team-building, custom experiences, plus mobile rental options.

Xcel Energy Center
St. Paul
651-265-4800; xcelenergycenter.com
Home of the Minnesota Wild; indoor arena with private seating available; arena tours.

Zero Hour Escape Rooms
Plymouth
763-270-0653; minneapolis.zerohourescaperooms.com
Escape rooms offering team-building, plus a conference room and large private spaces.

CONVENTION & VISITORS BUREAUS

Bloomington Convention & Visitors Bureau
info@bloomingtonmn.org
952-858-8500; bloomingtonmn.org

Burnsville Convention & Visitors Bureau
info@burnsvillemn.com
952-895-4690; burnsvillemn.com

Crookston Visitors Bureau
crookstoncvb@gmail.com
218-275-2466; crookstoncvb.com

Discover Stillwater
info@DiscoverStillwater.com
651-381-1977; discoverstillwater.com

Discover St. Louis Park
info@discoverstlouispark.com
952-426-3047; discoverstlouispark.com

Eagan Convention & Visitors Bureau
brent@eaganmn.com
651-675-5544; eaganmn.com

Experience Rochester
info@minnesotasrochester.com
507-288-4331; experiencerochestermn.com

Explore Edina
info@exploredadena.com
952-806-3064; exploredadena.com

Prepared with a Pinch of Passion and a Dash of Imagination

MINTAHOE
CATERING & EVENTS

Corporate Meetings
Weddings
Social Receptions
Galas
Rehearsal Dinners
Capacities from 20 - 2000
Venues Citywide

Main: 612.253.0255
Info@mintahoe.com
Mintahoe.com
### MEETINGS & EVENTS // RESOURCE GUIDE

**Twin Cities Premium Outlets** is a draw in Eagan

---

### MEETING & EVENT PLANNING

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meet Minneapolis</td>
<td><a href="mailto:info@minneapolis.org">info@minneapolis.org</a>, 612-767-8000; minneapolis.org</td>
</tr>
<tr>
<td>Visit Duluth</td>
<td><a href="mailto:cvb@visitduluth.com">cvb@visitduluth.com</a>, 218-722-4011; visitduluth.com</td>
</tr>
<tr>
<td>Visit Richfield</td>
<td><a href="mailto:hello@visitrichfield.com">hello@visitrichfield.com</a>, 612-558-1671; visitrichfield.com</td>
</tr>
<tr>
<td>Visit St. Paul</td>
<td><a href="mailto:info@visitstpaul.com">info@visitstpaul.com</a>, 651-265-4800; visitstpaul.com</td>
</tr>
<tr>
<td>Minnesota Association of Convention &amp; Visitors Bureaus</td>
<td>651-292-3923</td>
</tr>
<tr>
<td>For more convention and visitors bureaus across the state, visit Minnesotacvbs.com/members.</td>
<td></td>
</tr>
</tbody>
</table>

---

### Charities Review Council

- **Diversity, Equity & Inclusion Toolkit Overview**
  - **Thursday, February 1 | 10 a.m. - 11 a.m.**
  - Learn about our affordable and accessible, self-administered assessment tool with learning resources, guided reporting, and goal-setting at this first-Thursdays monthly webinar. [www.eventbrite.com/e/diversity-equity-inclusion-toolkit-an-overview-registration-110818338634](http://www.eventbrite.com/e/diversity-equity-inclusion-toolkit-an-overview-registration-110818338634)

### Greater Twin Cities United Way

- **Flavors of Our Community**
  - **March - April**
  - Help increase access to culturally specific foods at local food shelves. Learn how: [gtcuw.org](http://gtcuw.org)

### Union Gospel Mission Twin Cities

- **Annual Gala to End Homelessness**
  - **Friday, April 19, 6 p.m.**
  - Experience the inspiring journeys of individuals who have overcome homelessness at our annual gala, Celebration of Hope. [umgtc.org/COH24](http://umgtc.org/COH24)

### Tubman

- **15th Annual Starlight Soirée | May 3**
  - Join us at our event to support people experiencing violence, exploitation, and trauma on their journey from fear to freedom. [tubman.org/starlightsoiree](http://tubman.org/starlightsoiree)

---

**PHOTOGRAPHY BY EAGAN CONVENTION & VISITORS BUREAU**

**Twin Cities Premium Outlets** is a draw in Eagan

---

### boxed lunch, elevated

Order online at kowalskis.com or call 651-313-6870.
Do Good Events organized the Minnesota Zoo Foundation’s annual Beastly Bash in 2022.

PHOTOGRAPHY BY COPPERSMITH PHOTOGRAPHY

BOOK YOUR EVENT
IT HAPPENS AT
SAINT PAUL RIVERCENTRE
rivercentre.org

AMMY ZAROFF
EXPERIENCE PRODUCTION & STRATEGY

EXPERIENCES PRODUCED
FOR A FEELING, NOT A PHOTO

Intentional experiences for companies and non-profits that see the value in uniting their audiences. From leadership symposiums to business-wide summits and non-profit galas, gather in style to create a moment that makes people feel appreciated and celebrated.

AMYZAROFF.COM

Intentional experiences for companies and non-profits that see the value in uniting their audiences. From leadership symposiums to business-wide summits and non-profit galas, gather in style to create a moment that makes people feel appreciated and celebrated.

AMYZAROFF.COM

FEBRUARY/MARCH 2024 | TWIN CITIES BUSINESS

Carrousel Travel
612-866-2503; carrouseltravel.com

Cococo Events
612-325-4657; cococoevents.com

CRC Meeting & Golf Management
612-378-0591; crcmeetings.com

Creative Concepts
651-634-3600; creativeconceptsevents.com

Do Good Events
612-293-9420; dogoodevents.com

EDG Productions
612-564-3777; edgproductions.com

Ellis International
763-537-6977; ellisinternational.com

Event Architects
612-685-4552; eventarch.com

The Event Group Inc.
763-548-1300; plantoastound.com

Events by Lady K
612-516-5239; eventsbyladyk.com

Freestyle Productions
763-417-9575; freestyleproductions.com

HelmsBriscoe
480-718-1111; helmsbriscoe.com

Heroic Productions
952-224-9591; heroic-productions.com

Host a Toast
612-518-0958; hostatoast.co

Hire A Host
952-426-2004; hireahost.net

ICR Meeting & Golf Management
612-378-0591; crcmeetings.com

Jigsaw Unlimited
952-926-4411; jigsawunlimited.com

KOB Event Solutions
763-248-9552; kobeventsolutions.com

La Deux Say Events & Design
612-412-8894; ldseventsmn.com

Linda Dobson Events
651-433-3740; lindadobsonevents.com

Lithium Logistics Group
763-390-1380; lithiumlogistics.com

Live Spark
651-289-7375; live-spark.com

Linda Dobson Events
651-433-3740; lindadobsonevents.com

Lithium Logistics Group
763-390-1380; lithiumlogistics.com

Live Spark
651-289-7375; live-spark.com
MEETINGS & EVENTS // RESOURCE GUIDE

Lucent Blue Events 612-404-0350; lucent.blue

metroConnections 800-747-9687; metroconnections.com

North Star Events 763-300-1218; northstarEvents.co

One10 763-445-3000; one10marketing.com

One23 Events 651-342-0176; one23events.com

The Party Girl 612-888-7004; thepartygirl.us

Poppati Events Inc. 612-231-1393; poppati.com/contact-corporate

Prestige Global Meeting Source 612-767-8455; meetprestige.com

Rocket Science Events 651-261-5790; rocketscienceevents

SRO Productions Inc. 612-341-4110; sropro.com

The Stark Group Inc. 763-497-2067; starkgroupinc.com

Type A Events 612-295-4884; typeevents.com

Wendy Porter Events 612-310-7107, wendyporterEvents.com

RENTAL SERVICES

ABC Rentals & Mini-Storage 651-372-8462; abcRentalsInc.com

AV equipment, canopies, chairs, concessions, recreation items, tables, and food/beverage prep/service.

Alpha-Lit Twin Cities 612-309-9485; alphalitletters.com

Marquee letters and numbers.

Ancom 952-890-7570; ancom.org

Two-way radios and accessories.

Après Party and Tent Rental 952-942-3399; apresparty.com

Tents, tables, food/beverage service, chairs, décor, staging, flooring, and wares.

BearCom 800-541-9333; bearcom.com

Phone, radio, video, and wireless communications equipment.

BeThings 612-790-3308, bethingsrentals.com

Furniture, bars, and decorative accessories.

Biffs 952-403-1221; biffsonc.com

Portable restrooms, showers, hand-washing stations, and storage containers.

BMS Computer & AV Rentals/Sales 952-944-8835; bmsrentals.com

Computers, printers, copiers, wireless networks, tablets, AV equipment, staging, and lighting.

Broadway Party & Tent Rental 763-208-1357; broadwaypartyrental.com

Food/beverage prep/service, equipment, tables, chairs, AV equipment, wares, tents/canopies, games, and décor.

CaterRent 612-598-1188; caterrent.com

Food/beverage prep/service, concessions.

Collect ed & Co. 847-732-1987; collectedandcompany.com

Furniture, backdrops, rugs, décor.

Event Lab 952-224-8558; eventlab.net

Event design and décor; branding and graphics; music and entertainment.

Festivities 763-682-4846; festivitiesmn.com

Catering equipment, centerpieces, chairs, flooring, staging, games, linens, and tents.

Fun Jumps Entertainment 651-687-9959; funjumpsent.com

Inflatable games, tents, dunk tanks, concessions, tables, and chairs.

Hejny Rentals Inc. 651-770-3841; hejnyrental.com

Audio-visual equipment, canopies, food/beverage prep/service, games, tables, and chairs.

Jimmy's Johns ny 651-277-5912; jimmyjohnsny.com

Portable restrooms, sinks, and storage containers.

Linen Effects 612-355-2500; lineneffects.com

Furniture, wares, and décor.

Lulu Event Rentals 612-743-7710; luluEventRentals.com

Furniture, marquee letters, arbors, benches, and décor.

Minne Bar Go 218-343-4947; minnebargo.com

1960’s vintage camper turned into a mobile bar.

Next Event Planning & Rentals 612-437-6050; nextEventPlanning.com

Tents, furniture, wares, stages, flooring, lighting, and décor.

Perimeters Group 952-934-7339; perimetersGroup.com

Ceiling draping, canopies, backdrops, paper lanterns, and décor.

Rhino Communication Rentals 866-428-8608; rhinorentals.com

Two-way radios, audio accessories, and hotspots.

Rudy's Event Rentals 651-373-5501; rudySeventRentals.com

Wooden tables, furniture, bars, and décor.

Snapp Photo Booth 877-412-6684; snappPhotobooth.com

Traditional and open-air photo booths; mobile photo studio.

Style Society 612-259-8724; stylesocietymn.com

Furniture, rugs, and décor.

The Traveling Photo Booth 612-605-9203; thetravelingphotobooth.com

Vintage-inspired photo booth and photo stand rentals.

Twilight Zone Outdoor Cinema Services 612-562-1658; tzcinema.com

Inflatable outdoor movie screens, audio equipment, and projectors.

Ultimate Events 763-559-8368; use-mn.com

Tents, tables, chairs, china, linen, furniture, flooring, platforms/staging, and food prep/service.

Unique Party Rental 952-228-4954; uniquerent.org

Canopies, tents, inflatable games, chairs, tables, linens, and décor.

Upstream Tech Solutions 612-598-2401; upstreams.com

AV equipment, computers, monitors, tablets, kiosks, copiers, printers, mobile charging stations, and virtual reality equipment.

VIP Photo Booth 612-568-8463; vip-booths.com

Vintage-style, open-air, and green screen photo booths; slow-motion video booth.

TRANSPORTATION & VALET SERVICES

1st Class Transportation, LLC 612-315-7769; 1stclass-transportation.com

Party buses, sedans, limousines, and SUVs.

Accent Town Car & Limo Service 612-581-0190; mnlimoservice.com

Sedans, SUVs, limousines, sprinters, party buses, and coaches.

Aspen Limousine Service 612-590-8000; aspenlimo.net

Sedans, limousines, sprinters, buses, and SUVs.

Black Tie Limousine 952-967-8800; btlimo.com

SUVs, sedans, sprinters, and buses.

Carey Executive Transportation 800-336-4646; carey.com

Sedans, limousines, SUVs, vans, and buses.

Class A Valet 612-677-0071; classavaletparking.com

Valet parking services and parking lot management.

Classic Parking 763-574-0048; classicparkingvalet.com

Valet parking services.

Corporate Car and Coach 612-696-9029; rideWithCorpcar.com

Sedans, limousines, coaches, SUVs, vans, and sprinter shuttles.

Eclipse Transportation 651-293-1110; eclipsecars.com

Sedans, limousines, SUVs, and buses.

Elite Transportation and Limousine 612-589-8888; elitetransportations.com

Vans, SUVs, and sedans.

Empire Coaches 847-732-1997; collectedandcompany.com

Sedans, limousines, coaches, SUVs, vans, and limousines.

Executive Express 612-404-0350; lucent.blue

Shuttle vans.

Sedans, limousines, SUVs, and buses.
Executive Transportation
855-393-2227; executivecarusa.com
Limousines, sedans, and SUVs.

First Impressions Parking Solutions
612-913-6446
firstimpressionsparkingsolutions.com
Valet parking services.

Foley
952-288-9862; foleytrans.com
Sedans, SUVs, shuttles, and vans.

Holt-Peterson Bus
866-465-8287; holtbus.com
Coaches and passenger vans.

Jefferson Lines
858-800-8898
jeffersonlines.com
Charter buses.

Lorenz Bus Service
763-784-7196; lorenzbus.com
Buses, coaches, and shuttles.

Minnesota Coaches
651-437-9648; minnesotacoaches.com
Coaches.

Mpls Valet
612-309-8188; mplsvalet.com
Valet parking services.

Northfield Lines
651-203-8888; northfield-lines.com
Coaches, buses, and shuttles.

Piccadilly Valet
612-341-2600; piccadillyvalet.com
Valet services.

Premier Transportation
612-331-7433; premiertrans.com
Limousines, buses, sedans, coaches, and SUVs.

Renee’s Limousines
763-551-1919; reneeslimousines.com
Limousines, SUVs, sedans, buses, coaches, and trolleys.

Richfield Bus Co.
952-881-1111; richfieldbus.com
Mid-size and multi-passenger coaches, both vintage and standard. Vintage buses.

Star Transportation
507-281-0969; limostar.com
Limousines, SUVs, passenger vans, sedans, sprinters, coaches, and trolley rentals.

ExecuCar (Minneapolis)
651-770-5668
execucar.com/locations/minneapolis-car-service
Car service to and from the airport and around the Twin Cities. Coach, sprinter, and black car services.

Total Transportation
651-770-5668; totallimo.com
Sedans, SUVs, limousines, vans, coaches, sprinters, and custom specialty vehicles.

Troc's Bus Service
320-261-1202; trocesbus.com
Coaches and school buses.

Twin Cities Car Service
763-843-9414; twincitiescarservice.com
Sedans, SUVs, and vans.

Unparalleled Parking
651-300-1515; unparalleledparking.com
Valet parking services.

Uptown Valet
763-227-9002; uptownvalet.net
Valet parking services.

Valley Limo & Coach
952-894-6886; valleylimoandcoach.com
Limousines, coaches, sedans, and shuttles.

Vincent Chauffeured Transportation
651-226-2555; vctmn.com
SUVs, luxury sedans, and multi-passenger vehicles.

Voigt’s
800-468-6448; voigtbus.com
Charter, school, and shuttle buses.

MORE LISTINGS AT: TCBMAG.COM

Congratulations Finalists!

BOLD INSPIRATION
COMMUNITY PARTNERSHIP
TurnSign
SHElettaMakesMeLaugh.com
Matter

BOLDEST LEADER OF THE YEAR
Ronda Weizenegger
Mille Lacs Corporate Ventures
Micheal E. Jordan
UNRL
Michael Clements
National Rugby Football League

BOLDEST TRANSACTION OF THE YEAR
Ducu Capital
Innovative Office Solutions
Irish Titan

LARGE & ESTABLISHED
Wealth Enhancement Group
Marvin
Starkey

MIDDLE MARKET
Orange Tree Employment Screening
Roers Cos
On-Demand Group

SMALL & GROWING
Ostra Cybersecurity
Northern Diversified Solutions
CREE

These awards are A BIG DEAL!

Come to the BIG EVENT on February 27th!
Buy tickets at acg.org/minnesota/events
The Governor Appoints a Task Force

To: Chair Jan Malcolm
Task force on Academic Health at the University of Minnesota
Minnesota Department of Health

Dear Chair Malcolm:

Gov. Tim Walz, on Aug. 10, 2023, established a Task Force on Academic Health. He appointed you, a former state health commissioner, as chair. Great choice, because you are pleasantly persistent. The persistent quality has been much needed, as the task force drove to meet its deadline of Jan. 24. The task force itself consisted of a remarkable number of Minnesotans with deep experience, and in particular, as two non-voting members, former governors Tim Pawlenty and Mark Dayton.

The task force met nine times for three hours each, and all meetings were open to the public. The materials submitted to the task force are available online at health.state.mn.us (under Facilities). Why was a task force of this caliber needed?

Fairview Health Services purchased the University of Minnesota hospitals in 1997. Continuing to run the system became an intolerable financial drain on Fairview. Both the university and Fairview want a new agreement. At the same time, Sanford Health, headquartered in South Dakota, negotiated a sale agreement with Fairview. Ultimately, under legislative and attorney general pressure, this potential merger fell apart.

It became clear from a variety of presentations and viewpoints that a new arrangement and expansion of the University Academic Health Center (comprised of the U’s hospitals, clinics, and schools) would best serve the citizens of the state of Minnesota.

As this letter is being sent to you, the final language of the task force report is being drafted, and a new agreement between Fairview and the University of Minnesota has not been publicly announced. Nevertheless, the direction is clear.

A central task force recommendation is a legislative request for an additional $80 million annually to cover specifically enumerated programs. A second recommendation is for the Academic Health System to expand both geographically and demographically. Gov. Pawlenty was a persistent voice, urging the task force to make University of Minnesota health services of high quality available to all citizens of Minnesota. Finally, throughout the recommendations is the implicit assumption that following successful negotiations with Fairview, the University of Minnesota will reacquire ownership of its hospitals.

The task force recommendations represent a carefully designed road map for improving the delivery of medical care by the University of Minnesota. The final report is a great first step, but more steps are needed.

Hospital. Apart from upgrading the existing hospitals at the University of Minnesota, after ownership transfers back to the university, a new 21st century hospital (and infrastructure) will be required. The hesitancy of the task force to spell out the dollar amount of such an undertaking reflects the concern that other available medical facilities would be overlooked, and that “sticker shock” would prompt a negative public and legislative reaction. Most of the experts who have analyzed the need for a new hospital have said that the total cost would be in the $1 billion to $2 billion range (including all infrastructure). The editorial board of the Minneapolis newspaper noted that the bar had been set very high for new “competitive” hospitals by the University of Iowa when it announced a more than $1 billion project. The Mayo Clinic has announced a $5 billion expansion of its facilities in Rochester—fulfilling its promise when the state established the Destination Medical Center in 2013. The new hospital issue should be resolved quickly.

The State of Health. Let’s step back a bit and talk about the real opportunity health care offers to Minnesota. In 22 states, the biggest employer is Walmart; in Minnesota, the biggest employer is the Mayo Clinic. In fact, five of the 10 largest employers in Minnesota are health care-related. Most national rating groups rate Minnesota the third healthiest state in the country.

Senior citizens (65 and older) are one of the fastest-growing demographics in the U.S.; AARP projects they’ll outnumber people under age 18 by 2030. That’s already true in some Minnesota counties, according to the recent census. Seniors have a growing amount of disposable income, and they also have a growing need for medical services. A business strategist viewing the strengths of our state and the growth of this very large market would see a flashing opportunity—we should become the State of Health!

This is, unfortunately, the political season, and we have a state governor (Florida) saying that his state is where things go to die. Our governor and subsequent governors should state that Minnesota is where people come to live. Slogans are empty without real financial support. Consequently, if we are serious about grabbing this opportunity, a new funding commitment and governance structure will be needed. The example of the Destination Medical Center is instructive.

Working out the details of a statewide commitment to become the No. 1 medical destination will require a great deal more of expert input. The current task force has made the first step in that direction. We should now embark on that journey. I may write to you again.

Yours for the State of Health,

Vance K. Opperman
A task force member
Celebrating best-in-class at the Notable Alumni Event.


Visit tcbmag.com/notable to read about recent honorees or nominate a deserving individual for one of the 2024 categories.
SMARTER BUSINESS BANKING.

BANK WITH PURPOSE.

ALERUS.COM/BUSINESS

Member FDIC