<u>Sanford Health</u> Minnesota Supplement Report #1A

REALLOCATION OF EXPENSES AND INVESTMENT INCOME

For the Year Ending December 31, 2021 Public Information, Minnesota Statutes § 62D.08

For Dental: Please use "Explanations" tab to clarify any overlap reporting of Dental in oth

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		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line	Direct Non-Claim Expenses	Total	Non MN products	Total MN products	Commercial	Medicare Advantage	Medicare Cost	Medicare Supplement	Medicare Part D	MSHO	SNBC MA only	SNBC Integrated	PMAP	MSC+	MNCare	Dental	Other	Admin Services
1	Employee benefit expenses	-		-														
2	Sales expenses	324,212.11		324,212.11	319,316.11			4,896.00										
3	General business/office expense	-		-														
4	State premium taxes and assessments	208,925.82		208,925.82	205,217.54			3,708.28										
5	Consulting and professional fees	73,753.90		73,753.90	71,635.26			2,118.64										
6	Outsourced services	-		-														
7	Other expenses	16,659.00		16,659.00	16,364.40			294.60										
8	Total Direct Expenses	623,550.83	-	623,550.83	612,533.31	-	-	11,017.52	-		-	-	-	-	-	-	-	-
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line	Reallocated Indirect Non-Claim Expenses	Total	Non MN	Total MN	Commercial	Medicare	Medicare	Medicare	Medicare	MSHO	SNBC MA	SNBC	PMAP	MSC+	MNCare	Dental	Other	Admin
			products	products		Advantage	Cost	Supplement	Part D		only	Integrated						Services
9	Employee benefit expenses	122,936.80		122,936.80	113,342.98	6,241.67		3,352.15										
10	Sales expenses	916.15		916.15	862.18	28.47		25.50										
11	General business/office expense	27,723.88		27,723.88	16,821.14	10,405.25		497.49										
12	State premium taxes and assessments	194.58		194.58	188.99			5.59										
13	Consulting and professional fees	20,663.48		20,663.48	13,360.69	6,907.65		395.14										
14	Outsourced services	87,757.76		87,757.76	87,158.76	(1,978.75)		2,577.75										
15	Other expenses	3,577.69		3,577.69	3,407.74	69.16		100.79										
16	Total Indirect Expenses	263,770.34	-	263,770.34	235,142.48	21,673.45	1	6,954.41		1	-	-	-	-	-	-	-	-
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Line	Direct plus Indirect Non-Claim Expenses	NAIC Total	Non MN	Total MN	Commercial	Medicare	Medicare	Medicare	Medicare	MSHO	SNBC MA	SNBC	PMAP	MSC+	MNCare	Dental	Other	Admin
			products	products		Advantage	Cost	Supplement	Part D		only	Integrated						Services
17	Employee benefit expenses	122,936.80	-	122,936.80	113,342.98	6,241.67	-	3,352.15	-	-	-	-	-	-	-	-	-	-
18	Sales expenses	325,128.26	-	325,128.26	320,178.29	28.47	-	4,921.50	-		-	-	-	-	-	-	-	-
19	General business/office expense	27,723.88	-	27,723.88	16,821.14	10,405.25	-	497.49	-	-	-	-	-	-	-	-	-	-
20	State premium taxes and assessments	209,120.40	-	209,120.40	205,406.53	-	-	3,713.87	-		-	-	-	-	-	-	-	-
21	Consulting and professional fees	94,417.38	-	94,417.38	84,995.95	6,907.65	-	2,513.78	-	-	-	-	-	-	-	-	-	-
22	Outsourced services	87,757.76	-	87,757.76	87,158.76	(1,978.75)	-	2,577.75	-	-	-	-	-	-	-	-	-	-
23	Other expenses	20,236.69	-	20,236.69	19,772.14	69.16	-	395.39	-	-	-	-	-	-	-	-	-	-
24	Total Non-Claim Expenses = Sum of Lines 17 to 23	887,321.17	-	887,321.17	847,675.79	21,673.45		17,971.93	-	-	-	-	-	-	-	-	-	-
25	Claims Adjustment Expenses	315,346.02		315,346.02		20.67		8,736.73										
26	Revenues (Supp Report #1, Line 8)	11,208,222.81		11,208,222.81	11,009,520.18			198,702.63			1							
27	Incurred Claims (Supp Report #1, Line 18 + Line 22)	11,134,916.17		11,134,916.17	10,965,462.33			169,453.84										
28	Net Investment Gain/(Loss) (Allocated)	(3,159.62)		(3,159.62)	(3,159.62)													
29	Aggregate Write Ins for Other Income or (Expenses)	-		-														
30	Federal and Foreign Income Taxes Incurred	-		-														
31	Net Income = Lines 26+28+29-24-25-27-30	(1,132,520.17)	-	(1,132,520.17)	(1,113,366.18)	(21,694.12)	-	2,540.13	-	-	-	-	-		-	-	-	-