<u>Humana Wisconsin Health Organization Insurance Corporat</u> Minnesota Supplement Report #1A REALLOCATION OF EXPENSES AND INVESTMENT INCOME For the Year Ending December 31, 2022 Public Information, Minnesota Statutes § 62D.08

		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	Medicare	Medicare	Medicare	MSHO	SNBC MA	SNBC	PMAP	MSC+	MNCare	Dental	Other	Admin
	•					Advantage	Cost	Supplement	Part D		only	Integrated						Services
1	Employee benefit expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
2	Sales expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
3	General business/office expense	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
4	State premium taxes and assessments	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
5	Consulting and professional fees	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
6	Outsourced services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
7	Other expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8	Total Direct Expenses	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	

		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 products	Total MN products	Commercial	Medicare	Medicare	Medicare	Medicare	MSHO	SNBC MA	SNBC	PMAP	MSC+	MNCare	Dental	Other	Admin
						Advantage	Cost	Supplement	Part D		only	Integrated						Services
9	Employee benefit expenses	15,059,163	15,059,163	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10	Sales expenses	117,123,345	115,299,226	1,824,119	-	1,824,119	-	-	-	-	-	-	-	-	-	-	-	-
11	General business/office expense	25,895,746	25,718,967	176,778	-	176,778	-	-	-	-	-	-	-	-	-	-	-	-
12	State premium taxes and assessments	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
13	Consulting and professional fees	36,740,022	36,489,215	250,807	-	250,807	-	-	-	-	-	-	-	-	-	-	-	-
14	Outsourced services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15	Other expenses	293,984,061	292,898,934	1,085,126	-	1,085,126	-	-	-	-	-	-	-	-	-	-	-	-
16	Total Indirect Expenses	488,802,336	485,465,506	3,336,830	-	3,336,830	-	-	-	-	-	-	-	-	-	-	-	-

For Dental: Please use "Explanations" tab to clarify any overlap reporting of Dental in other columns.

		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 products	Total MN products	Commercial	Medicare	Medicare	Medicare	Medicare	MSHO	SNBC MA	SNBC	PMAP	MSC+	MNCare	Dental	Other	Admin
						Advantage	Cost	Supplement	Part D		only	Integrated						Services
17	Employee benefit expenses	15,059,163	15,059,163	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18	Sales expenses	117,123,345	115,299,226	1,824,119	-	1,824,119	-	-	-	-	-	-	-	-	-	-	-	-
19	General business/office expense	25,895,746	25,718,967	176,778	-	176,778	-	-	-	-	-	-	-	-	-	-	-	-
20	State premium taxes and assessments	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
21	Consulting and professional fees	36,740,022	36,489,215	250,807	-	250,807	-	-	-	-	-	-	-	-	-	-	-	-
22	Outsourced services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
23	Other expenses	293,984,061	292,898,934	1,085,126	-	1,085,126	-	-	-	-	-	-	-	-	-	-	-	-
24	Total Non-Claim Expenses = Sum of Lines 17 to 23	488,802,336	485,465,506	3,336,830	-	3,336,830	-	-	-	-	-	-	-	-	-	-	-	-
25	Claims Adjustment Expenses	159,527,710	158,629,525	898,185	-	898,185	-	-	-	-	-	-	-	-	-	-	-	-
26	Revenues (Supp Report #1, Line 8)	5,590,307,920	5,557,501,285	32,806,635	-	32,806,635	-	-	-	-	-	-	-	-	-	-	-	-
27	Incurred Claims (Supp Report #1, Line 18 + Line 22)	4,767,669,469	4,736,922,646	30,746,823	-	30,746,823	-	-	-	-	-	-	-	-	-	-	-	-
28	Net Investment Gain/(Loss) (Allocated)	29,075,101	29,072,121	2,980	-	2,980	-	-	-	-	-	-	-	-	-	-	-	-
29	Aggregate Write Ins for Other Income or (Expenses)	54	54	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
30	Federal and Foreign Income Taxes Incurred	43,058,648	42,597,859	460,788	-	460,788	-	-	-	-	-	-	-	-	-	-	-	-
31	Net Income = Lines 26+28+29-24-25-27-30	160,324,911	162,957,923	(2,633,012)	-	(2,633,012)	-	-	-	-	-	-	-		-	-	-	-