Sanford Health Plan of Minnesota
Minnesota Supplement Report $\# 1 \mathrm{~A}$
reallocation of expenses and investment income
For the Year Ending December 31, 2019
Pubbic Information, Minnesta Statutes $\$ 6$ 2D.0

|  |  | 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 | Medicare Supdement <br> Supplement | $\begin{gathered} \hline \text { Medicare } \\ \text { Part } \mathbf{D} \end{gathered}$ | MSHO | $\begin{gathered} \hline \text { SNBC MA } \\ \text { only } \\ \hline \end{gathered}$ | $\begin{gathered} \text { SNBC } \\ \text { Integrated } \\ \hline \end{gathered}$ | PMAP | MSC+ | MNCare | Dental | Other | $\begin{gathered} \text { Admin } \\ \text { Services } \end{gathered}$ |
| 1 | Employe benefit expenses |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 | Sales expenses | 261,473.56 |  | 261,473.56 | 245,671.56 |  |  |  |  |  |  |  |  |  |  |  | 15,802.00 |  |
| 3 | General business office expense |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 | State premium taxes and assessments | 144,360.59 |  | 144,360.59 | 137,841.11 |  |  |  |  |  |  |  |  |  |  |  | 6,519,48 |  |
| 5 | Consulting and professional fees | 92,960.77 |  | 92,960.77 | 87,261.17 |  |  |  |  |  |  |  |  |  |  |  | 5,699.60 |  |
| 6 | Outsourced services | 11,908.73 |  | 11,908.73 | 10,670.30 |  |  |  |  |  |  |  |  |  |  |  | 1,238.43 |  |
| 7 | Other expenses | 41,776.45 |  | 41,776.45 | 40,165.62 |  |  |  |  |  |  |  |  |  |  |  | 1,610.83 |  |
| 8 | Total Direct Expenses | 552,480.10 |  | 552,480.10 | 521,609.76 |  |  |  |  |  |  |  |  |  |  |  | 30,870.34 |  |


|  |  |  |  |  | 4 |  |  |  |  |  |  |  |  |  | 14 |  | 16 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line | Reallocated Indirect Non-Claim Expenses | Total | Non MN products | Total MN products | Commercial | Medicare Advantage | $\begin{gathered} \text { Medicare } \\ \text { Cost } \end{gathered}$ | Medicare Supplement | Medicare Part D | MSHO | SNBCMA only | $\underset{\text { Integrated }}{\mathrm{SNBC}}$ | PMAP | MSC+ | NCare | ental | Othe | $\begin{gathered} \text { Admin } \\ \text { Serrices } \end{gathered}$ |
| 9 | Employee benefit expenses | 62,335.43 |  | 62,335.43 | 58,477.76 |  |  |  |  |  |  |  |  |  |  |  | 3,857.67 |  |
| 10 | Sales expenses |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 | General business office expense | 10,459.27 |  | 10,459.27 | 9,811.99 |  |  |  |  |  |  |  |  |  |  |  | 647.28 |  |
| 12 | State premium taxes and assessments |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 | Consulting and professional fees | 27,038.55 |  | 27,038.55 | 25,365.25 |  |  |  |  |  |  |  |  |  |  |  | 1,673.30 |  |
| 14 | Outsourced services | 42,651.57 |  | 42,651.57 | 40,012.05 |  |  |  |  |  |  |  |  |  |  |  | 2,639.52 |  |
| 15 | Other expenses | 557.50 |  | 557.50 | 523.00 |  |  |  |  |  |  |  |  |  |  |  | 34.50 |  |
| 16 | Total Indirect Expenses | 143,042.32 | . | 143,042.32 | 134,190.05 | - |  |  |  |  | . | - | . |  |  |  | 8,852.27 |  |


|  |  | 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 Advantage | $\begin{gathered} \text { Medicare } \\ \text { Cost } \end{gathered}$ | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Medicare } \\ \text { Supplement } \end{array} \\ \hline \end{array}$ | $\begin{gathered} \text { Medicare } \\ \text { Part D } \end{gathered}$ | msHo | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { SNBC MA } \\ \text { only } \end{array} \\ \hline \end{array}$ | $\begin{array}{\|c\|} \hline \text { SNBC } \\ \text { Integrated } \end{array}$ | PMAP | MSC+ | MNCare | Dental | Other | $\begin{gathered} \text { Admin } \\ \text { Services } \end{gathered}$ |
| 17 | Employe benefit expenses | 62,335.43 |  | 62,335.43 | 58,477.76 |  |  |  |  |  |  |  |  |  |  |  | 3,857.67 |  |
| 18 | Sales expenses | 261,473.56 |  | 261,473.56 | 245,671.56 |  |  |  |  |  |  |  |  |  |  |  | 15,802.00 |  |
| 19 | General business office expense | 10,459.27 |  | 10,459.27 | 9,811.99 |  |  |  |  |  |  |  |  |  |  |  | 647.28 |  |
| 20 | State premium taxes and a ssessments | 144,360.59 |  | 144,360.59 | 137,841.11 |  |  |  |  |  |  |  |  |  |  |  | 6,519,48 |  |
| 21 | Consulting and professional fees | 119,999.32 |  | 119,999.32 | 112,626.42 |  |  |  |  |  |  |  |  |  |  |  | 7,372.90 |  |
| 22 | Outsourced services | 54,560.30 |  | 54,560.30 | 50,682.35 |  |  |  |  |  |  |  |  |  |  |  | 3,877.95 |  |
| 23 | Other expenses | 42,333.95 |  | 42,333.95 | 40,688.62 |  |  |  |  |  |  |  |  |  |  |  | 1,645,33 |  |
| 24 | Total Non-Claim Expenses = Sum of Lines 17 to 23 | 695,522.42 |  | 695,522.42 | 655,799.81 | - |  |  |  |  | - |  |  |  |  |  | 39,722.61 |  |
| 25 | Claims Adjustment Expenses | 221,774.67 |  | 221,774.67 | 210,904,20 |  |  |  |  |  |  |  |  |  |  |  | 10,870.47 |  |
| 26 | Revenues (Supp Report \#1, Line 8) | 5,73, ,777,63 |  | 5,731,747.63 | 5,488,78.80 |  |  |  |  |  |  |  |  |  |  |  | 232,968.83 |  |
| 27 | Incurred Claims (Supp Report \#1, Line $18+$ Line 22) | 5,843,905.82 |  | 5,843,905.82 | 5,680,100.75 |  |  |  |  |  |  |  |  |  |  |  | 163,805.07 |  |
| 28 | Net Investment Gain(LLoss) (Allocated) | 18,682.38 |  | 18,682.38 | 18,682.38 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 29 | Aggregate Write Ins for Other Income or (Expenses) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 30 | Federal and Foreign Income Taxes Incurred |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 31 | Net Income $=$ Lines $26+28+29-24-25-27-30$ | (1,010,772.90) |  | (1,010,72.90) | (1,029,343.58) |  |  |  |  |  |  |  |  |  |  |  | 18,570.68 |  |

