## Sanford Health Plan of Minnesota Minnesota Supplement Report #1A

## REALLOCATION OF EXPENSES AND INVESTMENT INCOME For the Year Ending December 31, 2019

Public Information, Minnesota Statutes § 62D.08

For Dental: Please use "Explanations" tab to clarify any overlap reporting of Dental in other columns. 16 Direct Non-Claim Expenses Non MN products | Total MN products Line Total Commercial Medicare Medicare Medicare Medicare MSHO SNBC MA SNRC PMAP MSC+ MNCare Dental Other Admin Advantage Cost Supplement Part D only Integrated Services Employee benefit expenses 261,473,56 261,473,56 245,671,56 15,802,00 2 Sales expenses 3 General business/office expense 4 State premium taxes and assessments 144,360.59 144,360.59 137,841.11 6,519.48 Consulting and professional fees 92,960.7 92,960.7 87,261.17 5,699.60 6 Outsourced services 11,908.73 11,908.73 10,670.30 1,238.43 41,776.45 Other expenses 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 10 13 15 16 Line Reallocated Indirect Non-Claim Expenses Non MN products | Total MN products Medicare Medicare Medicare Medicare MSHO SNBC MA SNBC PMAP MSC+ MNCare Total Commercial Dental Other Admin Advantage Cost Supplement Part D only Integrated Services 9 Employee benefit expenses 62,335.43 62,335.43 58,477.70 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 Consulting and professional fees 27,038.55 27,038.55 25,365.25 1,673.30 42,651.57 42,651.57 2,639.52 14 Outsourced services 40,012.05 15 Other expenses 557.50 557.50 523.00 34.50 143,042,32 134,190,05 8.852.27 16 Total Indirect Expenses 143,042,32 13 16 Line Direct plus Indirect Non-Claim Expenses Non MN products Total MN products Medicare Medicare Medicare MSHO SNBC MA SNBC PMAP MSC+ MNCare Other Admin NAIC Total Commercial Medicare Advantage Cost Supplement Part D only Integrated Services 17 Employee 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 assessments 144,360,59 144,360,59 137,841.11 6,519,48 119.999.32 7,372.90 21 Consulting and professional fees 119.999.32 112,626.42 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 5 731 747 63 5 498 778 80 232 968 83 26 Revenues (Supp Report #1, Line 8) 5 731 747 63 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/(Loss) (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) (1,029,343.58)