

**Itasca Medical Care**  
**Minnesota Supplement Report #1**  
**STATEMENT OF REVENUE, EXPENSES AND NET INCOME**  
**For the year ending December 31, 2021**  
**Public Information, Minnesota Statutes § 62D.08**

NAIC #	NAIC Description	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
		NAIC Totals	Non-Minnesota Products (Eliminations)	Total Minnesota Products	Commercial	Medicare Advantage	Medicare Cost	Medicare Supplement	Stand Alone Medicare Part D	Minnesota Senior Health Options (MSHO)	SNBC (MA Only)	SNBC (Integrated)	Prepaid Medical Assistance Program (PMAP)	MSC+	MNCare	Dental	Please Specify if SAMP or embedded	Other:	Administrative Services Only
1	Member Months for (Jan-Dec 2021)	114298		114298															
As found on page 4 of the Annual Statement																			
<b>REVENUES:</b>																			
2	Net Premium Income (including \$ non-health premium income)	76,274,067.00		76,274,067.00						14,793,552.00			53,067,974.00	4,270,504.00	4,142,037.00				
3	Change in unearned premium reserves and serve for rate credits	-		-															
4	Fee-for-service (net of \$ medical expenses)	-		-															
5	Risk revenue	-		-															
6	Aggregate write-ins for other health care related revenues (Line 699)	\$18,382.00	NR	\$18,382.00	NR	NR	NR	NR	NR	\$1,848.00	NR	NR	\$14,279.00	\$1,142.00	\$1,113.00	NR	NR	NR	
7	Aggregate write-ins for other non-health revenues (Line 799)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	
8	<b>TOTAL REVENUES (Lines 2 through 7)</b>	<b>\$76,292,449.00</b>	<b>NR</b>	<b>\$76,292,449.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>\$14,795,400.00</b>	<b>NR</b>	<b>NR</b>	<b>\$53,082,253.00</b>	<b>\$4,271,646.00</b>	<b>\$4,143,150.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	
For Dental: Please use "Explanations" tab to clarify any over																			
<b>EXPENSES:</b>																			
9	Hospital/medical benefits	13,789,176.00		13,789,176.00						3,554,354.00			9,284,572.00	351,457.00	598,793.00				
10	Other professional services	23,275,608.00		23,275,608.00						7,376,192.00			12,312,843.00	3,152,386.00	434,187.00				
11	Outside referrals	11,425.00		11,425.00						2,883.00			7,531.00	751.00	480.00				
12	Emergency room and out-of-area	18,119,843.00		18,119,843.00						2,999,048.00			13,786,600.00	149,759.00	1,184,226.00				
13	Prescription drugs	12,090,312.00		12,090,312.00						447,726.00			9,832,576.00	61,278.00	1,748,732.00				
14	Aggregate write-ins for other hospital and medical expenses (Line 1499)	\$660,747.00	NR	\$660,747.00	NR	NR	NR	NR	NR	\$166,701.00	NR	NR	\$423,980.00	\$43,437.00	\$26,629.00	NR	NR	NR	
15	Incentive Pool and Withhold Adjustments	338.00		338.00									318.00	20.00					
16	<b>TOTAL EXPENSES (Lines 9 through 15)</b>	<b>\$67,947,249.00</b>	<b>NR</b>	<b>\$67,947,249.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>\$14,546,904.00</b>	<b>NR</b>	<b>NR</b>	<b>\$45,648,220.00</b>	<b>\$3,759,068.00</b>	<b>\$3,993,057.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	
<b>LESS:</b>																			
17	Net reinsurance recoveries																		
18	Total hospital and medical (Lines 16 minus 17)	\$67,947,249.00	NR	\$67,947,249.00	NR	NR	NR	NR	NR	\$14,546,904.00	NR	NR	\$45,648,220.00	\$3,759,068.00	\$3,993,057.00	NR	NR	NR	
19	Non-health claims	-		-															
20	Claims adjustment expenses	3,788,478.00		3,788,478.00						731,886.00			2,639,571.00	211,082.00	205,839.00				
21	General administrative expenses	2,247,285.00		2,247,285.00						434,206.00			1,965,766.00	125,212.00	122,101.00				
22	Increase in reserves for life, accident and health contracts (including \$ increase in reserves for life only)	-		-															
23	Total underwriting deductions (Lines 18 through 22)	\$73,983,012.00	NR	\$73,983,012.00	NR	NR	NR	NR	NR	\$15,713,096.00	NR	NR	\$49,853,557.00	\$4,095,362.00	\$4,320,997.00	NR	NR	NR	
24	Net underwriting gain or (loss) (Lines 8 minus 23)	\$2,309,437.00	NR	\$2,309,437.00	NR	NR	NR	NR	NR	(\$11,696.00)	NR	NR	\$3,228,696.00	\$176,284.00	(\$177,947.00)	NR	NR	NR	
25	Net investment income earned	16,793.00		16,793.00						3,245.00			11,699.00	936.00	913.00				
26	Net realized capital gains or (losses)	-		-															
27	Net investment gains or (losses) (Lines 25 plus 26)	\$16,793.00	NR	\$16,793.00	NR	NR	NR	NR	NR	\$3,245.00	NR	NR	\$11,699.00	\$936.00	\$913.00	NR	NR	NR	
28	Net gain or (loss) from agents' or premium balances charged off	-		-															
29	Aggregate write-ins for other income or expenses (Line 2999)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	
30	Net income or (loss) before federal income taxes (Lines 24 plus 27 plus 28 plus 29)	\$2,326,230.00	NR	\$2,326,230.00	NR	NR	NR	NR	NR	(\$914,451.00)	NR	NR	\$3,240,395.00	\$177,220.00	(\$176,934.00)	NR	NR	NR	
31	Federal and foreign income taxes incurred	-		-															
32	<b>Net income (loss) (Lines 30 minus 31)</b>	<b>\$2,326,230.00</b>	<b>NR</b>	<b>\$2,326,230.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>(\$914,451.00)</b>	<b>NR</b>	<b>NR</b>	<b>\$3,240,395.00</b>	<b>\$177,220.00</b>	<b>(\$176,934.00)</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	

DETAILS OF WRITE-INS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	NAIC Totals	Non-Minnesota Products (Eliminations)	Total Minnesota Products	Commercial	Medicare Advantage	Medicare Cost	Medicare Supplement	Medicare Part D	Minnesota Senior Health Options (MSHO)	SNBC (MA Only)	SNBC (Integrated)	Prepaid Medical Assistance Program (PMAP)	MSC+	MNCare	Dental	Please Specify	Administrative Services Only
<b>OTHER HEALTH CARE RELATED REVENUES (Line 6)</b>																	
0601	Misc. Other Revenues	18,382.00		18,382.00					1,848.00			14,279.00	1,142.00	1,113.00			
0602																	
0603																	
0604																	
0605																	
0606																	
0607																	
0608																	
0609																	
0699	<b>TOTALS (Lines 0601 through 0609 plus 0698) (Line 6 above)</b>	<b>\$18,382.00</b>	<b>NR</b>	<b>\$18,382.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>\$1,848.00</b>	<b>NR</b>	<b>NR</b>	<b>\$14,279.00</b>	<b>\$1,142.00</b>	<b>\$1,113.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>
<b>OTHER NON-HEALTH REVENUES (Line 7)</b>																	
0701																	
0702																	
0703																	
0798	Summary of Remaining Write-Ins for Line 7 Overflow																
0799	<b>TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>
<b>OTHER MEDICAL AND HOSPITAL EXPENSES (Line 14)</b>																	
1401	Provider Settlement Payments	660,747.00		660,747.00					166,701.00			423,980.00	43,437.00	26,629.00			
1402																	
1403																	
1404																	
1405																	
1406																	
1407																	
1408																	
1409																	
1498	Summary of Remaining Write-Ins for Line 14 Overflow																
1499	<b>TOTALS (Lines 1401 through 1409 plus 1498) (Line 14 above)</b>	<b>\$660,747.00</b>	<b>NR</b>	<b>\$660,747.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>\$166,701.00</b>	<b>NR</b>	<b>NR</b>	<b>\$423,980.00</b>	<b>\$43,437.00</b>	<b>\$26,629.00</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>
<b>OTHER INCOME AND EXPENSES (Line 29)</b>																	
<b>OTHER INCOME</b>																	
2901																	
2902																	
2903																	
2904																	
2905																	
2918	Summary of Remaining Write-Ins for Other Income Overflow																
2919	<b>Subtotal of Other Income (Lines 2901 through 2918)</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>	<b>NR</b>
<b>OTHER EXPENSES</b>																	

