

Group Health Plan, Inc.
Minnesota Supplement Report #1
STATEMENT OF REVENUE, EXPENSES AND NET INCOME
For the Year Ending December 31, 2016
Public Information, Minnesota Statutes § 62D.08

| NAIC # | NAIC Description | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|------------------|--|---------------|---------------------------------------|--------------------------|--------------|-------------------|---------------|---------------------------------|----------------|-------------------|---|--------|-------------|----------------|------------------------------|
| | As found on page 4 of the Annual Statement | | | | | | | | | | | | | Other: | |
| | | NAIC Totals | Non-Minnesota Products (Eliminations) | Total Minnesota Products | Commercial | Medicare + Choice | Medicare Cost | MN Senior Health Options (MSHO) | SNBC (MA Only) | SNBC (Integrated) | Prepaid Medical Assistance Program (PMAP) | MNCare | Dental | Please Specify | Administrative Services Only |
| 1 | Member Months | 944,025 | 0 | 944,025 | 324,156 | 0 | 619,869 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| REVENUES: | | | | | | | | | | | | | | | |
| 2 | Net Premium Income (including \$ non-health premium income) | 536,188,000 | 0 | 536,188,000 | 102,413,000 | 0 | 428,000,000 | 0 | 0 | 0 | 0 | 0 | 5,775,000 | 0 | 0 |
| 3 | Change in unearned premium reserves and serve for rate credits | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 | Fee-for-service (net of \$ medical expenses) | 669,680,000 | 0 | 669,680,000 | 625,137,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 44,543,000 | 0 | 0 |
| 5 | Risk revenue | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 | Aggregate write-ins for other health care related revenues (Line 699) | 57,057,000 | 0 | 57,057,000 | 57,057,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7 | Aggregate write-ins for other non-health revenues (Line 799) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | TOTAL REVENUES (Lines 2 through 7) | 1,262,925,000 | 0 | 1,262,925,000 | 784,607,000 | 0 | 428,000,000 | 0 | 0 | 0 | 0 | 0 | 50,318,000 | 0 | 0 |
| EXPENSES: | | | | | | | | | | | | | | | |
| 9 | Hospital/medical benefits | 927,096,000 | 0 | 927,096,000 | 628,255,000 | 0 | 298,841,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 | Other professional services | 120,207,000 | 0 | 120,207,000 | 72,287,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 47,920,000 | 0 | 0 |
| 11 | Outside referrals | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12 | Emergency room and out-of-area | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13 | Prescription drugs | 169,783,000 | 0 | 169,783,000 | 101,435,000 | 0 | 68,348,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 14 | Aggregate write-ins for other hospital and medical expenses (Line 1499) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15 | Incentive Pool and Withhold Adjustments | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 16 | TOTAL EXPENSES (Lines 9 through 15) | 1,217,086,000 | 0 | 1,217,086,000 | 801,977,000 | 0 | 367,189,000 | 0 | 0 | 0 | 0 | 0 | 47,920,000 | 0 | 0 |
| LESS | | | | | | | | | | | | | | | |
| 17 | Net reinsurance recoveries | 3,563,000 | 0 | 3,563,000 | 3,563,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 | Total hospital and medical (Lines 16 minus 17) | 1,213,523,000 | 0 | 1,213,523,000 | 798,414,000 | 0 | 367,189,000 | 0 | 0 | 0 | 0 | 0 | 47,920,000 | 0 | 0 |
| 19 | Non-health claims | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 20 | Claims adjustment expenses | 16,862,000 | 0 | 16,862,000 | 8,035,000 | 0 | 8,827,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 21 | General administrative expenses | 61,480,000 | 0 | 61,480,000 | 36,223,000 | 0 | 20,609,000 | 0 | 0 | 0 | 0 | 0 | 4,648,000 | 0 | 0 |
| 22 | Increase in reserves for life, accident and health contracts (including \$ increase in reserves for life only) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 23 | Total underwriting deductions (Lines 18 through 22) | 1,291,865,000 | 0 | 1,291,865,000 | 842,672,000 | 0 | 396,625,000 | 0 | 0 | 0 | 0 | 0 | 52,568,000 | 0 | 0 |
| 24 | Net underwriting gain or (loss)(Lines 8 minus 23) | (28,940,000) | 0 | (28,940,000) | (58,065,000) | 0 | 31,375,000 | 0 | 0 | 0 | 0 | 0 | (2,250,000) | 0 | 0 |
| 25 | Net investment income earned | 2,543,000 | 0 | 2,543,000 | 2,048,000 | 0 | 495,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 26 | Net realized capital gains or (losses) | 12,545,000 | 0 | 12,545,000 | 10,105,000 | 0 | 2,440,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 27 | Net investment gains or (losses)(Lines 25 plus 26) | 15,088,000 | 0 | 15,088,000 | 12,153,000 | 0 | 2,935,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 28 | Net gain or (loss) from agents' or premium balances charged off | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 29 | Aggregate write-ins for other income or expenses (Line 2999) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 30 | Net income or (loss) before federal income taxes (Lines 24 plus 27 plus 28 plus 29) | (13,852,000) | 0 | (13,852,000) | (45,912,000) | 0 | 34,310,000 | 0 | 0 | 0 | 0 | 0 | (2,250,000) | 0 | 0 |
| 31 | Federal and foreign income taxes incurred | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 32 | Net income (loss) (Lines 30 minus 31) | (13,852,000) | 0 | (13,852,000) | (45,912,000) | 0 | 34,310,000 | 0 | 0 | 0 | 0 | 0 | (2,250,000) | 0 | 0 |

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| DETAILS OF WRITE-INS | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|---|-------------|---------------------------------------|--------------------------|------------|-------------------|---------------|---------------------------------|-------------------------------------|--|---|--------|--------|--------------------------|------------------------------|
| | NAIC Totals | Non-Minnesota Products (Eliminations) | Total Minnesota Products | Commercial | Medicare + Choice | Medicare Cost | MN Senior Health Options (MSHO) | MN Disability Health Options (MDHO) | General Assistance Medical Care (GAMC) | Prepaid Medical Assistance Program (PMAP) | MNCare | Dental | Other: Please Specify | Administrative Services Only |
| OTHER HEALTH CARE RELATED REVENUES (Line 6) | | | | | | | | | | | | | | |
| 0601 Physician Affiliation Agreements | 42,711,000 | 0 | 42,711,000 | 42,711,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0602 Other Health Care Revenue | 14,346,000 | 0 | 14,346,000 | 14,346,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0603 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0604 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0605 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0606 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0607 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0608 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0609 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0698 Summary of Remaining Write-Ins for Line 6 Overflow | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0699 TOTALS (Lines 0601 through 0609 plus 0698) (Line 6 above) | 57,057,000 | 0 | 57,057,000 | 57,057,000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OTHER NON-HEALTH REVENUES (Line 7) | | | | | | | | | | | | | | |
| 0701 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0702 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0703 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0798 Summary of Remaining Write-Ins for Line 7 Overflow | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0799 TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OTHER MEDICAL AND HOSPITAL EXPENSES (Line 14) | | | | | | | | | | | | | | |
| 1401 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1402 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1403 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1404 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1405 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1406 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1407 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1408 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1409 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1498 Summary of Remaining Write-Ins for Line 14 Overflow | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1499 TOTALS (Lines 1401 through 1409 plus 1498) (Line 14 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OTHER INCOME AND EXPENSES (Line 29) | | | | | | | | | | | | | | |
| OTHER INCOME | | | | | | | | | | | | | | |
| 2901 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2902 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2903 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2904 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2905 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2918 Summary of Remaining Write-Ins for Other Income Overflow | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2919 Subtotal of Other Income (Lines 2901 through 2918) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| OTHER EXPENSES | | | | | | | | | | | | | | |
| 2921 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2922 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2923 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2924 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2925 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2938 Summary of Remaining Write-Ins for Other Expenses Overflow | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2939 Subtotal of Other Expenses (Lines 2921 through 2938) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2999 TOTALS - (Lines 2919 minus 2939) (Line 29) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |