

Itasca Medical Care
Minnesota Supplement Report #1A
REALLOCATION OF EXPENSES AND INVESTMENT INCOME
For the Year Ending December 31, 2020
Public Information, Minnesota Statutes § 62D.08

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

Line	Direct Non-Claim Expenses	1 Total	2 Non MN products	3 Total MN products	4 Commercial	5 Medicare Advantage	6 Medicare Cost	7 Medicare Supplement	8 Medicare Part D	9 MSHO	10 SNBC MA only	11 SNBC Integrated	12 PMAP	13 MSC+	14 MNCare	15 Dental	16 Other	17 Admin Services
1	Employee benefit expenses	617632		617632						139603			413518	27757	36754			
2	Sales expenses	0		0						0			0	0	0			
3	General business/office expense	166823		166823						37707			111692	7497	9927			
4	State premium taxes and assessments	0		0						0			0	0	0			
5	Consulting and professional fees	401187		401187						90680			268603	18030	23874			
6	Outsourced services	326970		326970						73905			218913	14695	19457			
7	Other expenses	20834		20834						4709			13949	936	1240			
8	Total Direct Expenses	1533446	0	1533446	0	0	0	0	0	346604	0	0	1026675	68915	91252	0	0	0

Line	Reallocated Indirect Non-Claim Expenses	1 Total	2 Non MN products	3 Total MN products	4 Commercial	5 Medicare Advantage	6 Medicare Cost	7 Medicare Supplement	8 Medicare Part D	9 MSHO	10 SNBC MA only	11 SNBC Integrated	12 PMAP	13 MSC+	14 MNCare	15 Dental	16 Other	17 Admin Services
9	Employee benefit expenses	308815		308815						69801			206759	13878	18377			
10	Sales expenses	0		0						0			0	0	0			
11	General business/office expense	83411		83411						18853			55845	3749	4964			
12	State premium taxes and assessments	0		0						0			0	0	0			
13	Consulting and professional fees	200594		200594						45340			134302	9015	11937			
14	Outsourced services	163486		163486						36952			109458	7347	9729			
15	Other expenses	10418		10418						2355			6975	468	620			
16	Total Indirect Expenses	766724	0	766724	0	0	0	0	0	173301	0	0	513339	34457	45627	0	0	0

Line	Direct plus Indirect Non-Claim Expenses	1 NAIC Total	2 Non MN products	3 Total MN products	4 Commercial	5 Medicare Advantage	6 Medicare Cost	7 Medicare Supplement	8 Medicare Part D	9 MSHO	10 SNBC MA only	11 SNBC Integrated	12 PMAP	13 MSC+	14 MNCare	15 Dental	16 Other	17 Admin Services
17	Employee benefit expenses	926447	0	926447	0	0	0	0	0	209404	0	0	620277	41635	55131	0	0	0
18	Sales expenses	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	General business/office expense	250234	0	250234	0	0	0	0	0	56560	0	0	167537	11246	14891	0	0	0
20	State premium taxes and assessments	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Consulting and professional fees	601781	0	601781	0	0	0	0	0	136020	0	0	402905	27045	35811	0	0	0
22	Outsourced services	490456	0	490456	0	0	0	0	0	110857	0	0	328371	22042	29186	0	0	0
23	Other expenses	31252	0	31252	0	0	0	0	0	7064	0	0	20924	1404	1860	0	0	0
24	Total Non-Claim Expenses = Sum of Lines 17 to 23	2300170	0	2300170	0	0	0	0	0	519905	0	0	1540014	103372	136879	0	0	0
25	Claims Adjustment Expenses	3357399		3357399						758870	0	0	2225886	172850	199793			
26	Revenues (Supp Report #1, Line 8)	66356803		66356803						15375139			43639729	3416730	3925205			
27	Incurred Claims (Supp Report #1, Line 18 + Line 22)	58528310		58528310						14830353			36695189	3471383	3531385			
28	Net Investment Gain/(Loss) (Allocated)	15730		15730						3556			10531	707	936			
29	Aggregate Write Ins for Other Income or (Expenses)	0		0						0			0	0	0			
30	Federal and Foreign Income Taxes Incurred	0		0						0			0	0	0			
31	Net Income = Lines 26+28+29-24-25-27-30	2186654	0	2186654	0	0	0	0	0	-730433	0	0	3189171		58084	0	0	0