## SANFORD HEALTH PLAN OF MINNESOTA

Minnesota Supplement Report #1A

## REALLOCATION OF EXPENSES AND INVESTMENT INCOME

For the Year Ending December 31, 2016 Public Information, Minnesota Statutes § 62D.08

		1	2	3	4	5	6	7	8	9	10	11	12	13	14
Line	Direct Non-Claim Expenses	Total	Non MN	Total MN	Commercial	M+C	Medicare	MSHO	SNBC MA	SNBC	PMAP	MNCare	Dental	Other	Admin
1	Employee benefit expenses	-												-	
2	Sales expenses	69,432.30		69,432.30	41,838.97									27,593.33	
3	General business/office expense	35,420.67		35,420.67	26,780.53									8,640.14	
4	State premium taxes and assessments	74,554.16		74,554.16	70,542.45									4,011.71	
5	Consulting and professional fees	102,695.63		102,695.63	77,645.17									25,050.46	
6	Outsourced services	1,253.01		1,253.01	-									1,253.01	
7	Other expenses	4,459.51		4,459.51	4,459.51									-	
8	Total Direct Expenses	287,815.28	-	287,815.28	221,266.63	-	-	-	-	-	-	-	-	66,548.65	
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		- 1	2	1	4	-	-	-	0	0	10	11	12	12	1.4

		1	2	3	4	5	6	7	8	9	10	11	12	13	14
Line	Reallocated Indirect Non-Claim Expenses	Total	Non MN	Total MN	Commercial	M+C	Medicare	MSHO	SNBC MA	SNBC	PMAP	MNCare	Dental	Other	Admin
9	Employee benefit expenses	14,758.92		14,758.92	11,158.79									3,600.13	
10	Sales expenses	-		-	-									-	
11	General business/office expense	1,114.90		1,114.90	842.94									271.96	
12	State premium taxes and assessments	-		-	-									-	
13	Consulting and professional fees	2,477.57		2,477.57	1,873.22									604.35	
14	Outsourced services	12,651.65		12,651.65	9,565.54									3,086.11	
15	Other expenses	404.57		404.57	305.88									98.69	
16	Total Indirect Expenses	31,407.61	-	31,407.61	23,746.38	-	-	-	-	-	-	-	-	7,661.23	-

		1	2	3	4	5	6	7	8	9	10	11	12	13	14
Line	Direct plus Indirect Non-Claim Expenses	NAIC Total	Non MN	Total MN	Commercial	M+C	Medicare	MSHO	SNBC MA	SNBC	PMAP	MNCare	Dental	Other	Admin
17	Employee benefit expenses	14,758.92	-	14,758.92	11,158.79	-	-	-	-	-	-	-	-	3,600.13	-
18	Sales expenses	69,432.30	-	69,432.30	41,838.97	-	-	-	-	-	-	-	-	27,593.33	-
19	General business/office expense	36,535.57	-	36,535.57	27,623.48	-	-	-	-	-	-	-	-	8,912.09	-
20	State premium taxes and assessments	74,554.16	-	74,554.16	70,542.45	-	-	-	-	-	-	-	-	4,011.71	-
21	Consulting and professional fees	105,173.20	-	105,173.20	79,518.39	-	-	ı	-	-	-	-	-	25,654.81	-
22	Outsourced services	13,904.66	-	13,904.66	9,565.54	-	-	-	-	-	-	-	-	4,339.12	-
23	Other expenses	4,864.08	-	4,864.08	4,765.39	-	-	-	-	-	-	-	-	98.69	-
24	Total Non-Claim Expenses = Sum of Lines 17 to 23	319,222.89	-	319,222.89	245,013.01	-	-	1	-	-	-	-	-	74,209.88	-
25	Claims Adjustment Expenses	46,431.14		46,431.14	46,431.14										
26	Revenues (Supp Report #1, Line 8)	2,427,505.45		2,427,505.45	2,105,082.59									322,422.86	
27	Incurred Claims (Supp Report #1, Line 18 + Line 22)	2,272,091.38		2,272,091.38	1,948,457.41									323,633.97	
28	Net Investment Gain/(Loss) (Allocated)	(3,866.70)		(3,866.70)	(3,866.70)										
29	Aggregate Write Ins for Other Income or (Expenses)	-		1		-							·		
30	Federal and Foreign Income Taxes Incurred	-		ı											
31	Net Income = Lines 26+28+29-24-25-27-30	(214,106,66)	_	(214,106,66)	(138,685,67)	-	-	-	-	-	-	-	-	(75,420,99)	_