Itasca Medical Care

Minnesota Supplement Report #1

STATEMENT OF REVENUE, EXPENSES AND NET INCOME

For the year ending December 31, 2020

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
	As found on page 4 of the Annual Statement	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 SADP or embedded	Other: Please Specify	Administrative Services Only
1	Member Months (for Jan-Dec 2020)	102696								5035			87805	3152	6704			
REVENUES:																		
2	Net Premium Income (including $ non-health premium income)	66,350,157.00								15,374,347.00			43,634,716.00	3,416,340.00	3,924,754.00			
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)	$6,646.00	NR	NR	NR	NR	NR	NR	NR	$792.00	-	-	$5,013.00	$390.00	$451.00	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	TOTAL REVENUES (Lines 2 through 7)	$66,356,803.00	NR	NR	NR	NR	NR	NR	NR	$15,375,139.00	-	-	$43,639,729.00	$3,416,730.00	$3,926,205.00	NR	NR	NR
																For Dental: Please use "Explanations" tab to clarify any over		
EXPENSES:																		
9	Hospital/medical benefits	10,633,131.00								2,907,590.00			6,876,610.00	357,990.00	490,941.00			
10	Other professional services	21,538,060.00								7,922,644.00			10,445,419.00	2,740,732.00	429,265.00			
11	Outside referrals	10,273.00								3,086.00			6,035.00	720.00	432.00			
12	Emergency room and out-of-area	13,883,807.00								3,009,891.00			9,712,414.00	154,057.00	1,007,445.00			
13	Prescription drugs	11,374,704.00								688,553.00			8,982,716.00	148,191.00	1,555,244.00			
14	Aggregate write-ins for other hospital and medical expenses (Line 1499)	$994,120.00	NR	NR	NR	NR	NR	NR	NR	$298,589.00	NR	NR	$584,068.00	$69,693.00	$41,770.00	NR	NR	NR
15	Incentive Pool and Withhold Adjustments	94,215.00											87,927.00		6,288.00			
16	TOTAL EXPENSES (Lines 9 through 15)	$58,528,310.00	NR	NR	NR	NR	NR	NR	NR	$14,830,353.00	NR	NR	$36,695,189.00	$3,471,383.00	$3,531,385.00	NR	NR	NR
LESS																		
17	Net reinsurance recoveries	-								-			-	-	-			
18	Total hospital and medical (Lines 16 minus 17)	$58,528,310.00	NR	NR	NR	NR	NR	NR	NR	$14,830,353.00	NR	NR	$36,695,189.00	$3,471,383.00	$3,531,385.00	NR	NR	NR
19	Non-health claims																	
20	Claims adjustment expenses	3,357,399.00								758,870.00	-	-	2,225,886.00	172,850.00	199,793.00			
21	General administrative expenses	2,300,170.00								519,905.00	-	-	1,540,014.00	103,372.00	136,879.00			
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)	$64,185,879.00	NR	NR	NR	NR	NR	NR	NR	$16,109,128.00	-	-	$40,461,089.00	$3,747,605.00	$3,868,057.00	NR	NR	NR
24	Net underwriting gain or (loss)(Lines 8 minus 23)	$2,170,924.00	NR	NR	NR	NR	NR	NR	NR	($733,989.00)	-	-	$3,178,640.00	($330,875.00)	$57,148.00	NR	NR	NR
25	Net investment income earned	15,730.00								3,556.00	-	-	10,531.00	707.00	936.00			
26	Net realized capital gains or (losses)																	
27	Net investment gains or (losses)(Lines 25 plus 26)	$15,730.00	NR	NR	NR	NR	NR	NR	NR	$3,556.00	-	-	$10,531.00	$707.00	$936.00	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)	$2,186,654.00	NR	NR	NR	NR	NR	NR	NR	($730,433.00)	-	-	$3,189,171.00	($330,168.00)	$58,084.00	NR	NR	NR
31	Federal and foreign income taxes incurred																	
32	Net income (loss) (Lines 30 minus 31)	$2,186,654.00	NR	NR	NR	NR	NR	NR	NR	($730,433.00)	-	-	$3,189,171.00	($330,168.00)	$58,084.00	NR	NR	NR

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	DETAILS OF WRITE-INS	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	Other: Please Specify	Administrative Services Only
	OTHER HEALTH CARE RELATED REVENUES (Line 6)																	
0601	Misc Other Revenues	6,646.00								792.00	-	-	5,013.00	390.00	451.00			
0602																		
0603																		
0604																		
0605																		
0606																		
0607																		
0608																		
0609																		
0698	Summary of Remaining Write-Ins for Line 6 Overflow																	
0699	TOTALS (Lines 0601 through 0609 plus 0698) (Line 6 above)	$6,646.00	NR	NR	NR	NR	NR	NR	NR	$792.00	-	-	$5,013.00	$390.00	$451.00	NR	NR	NR
	OTHER NON-HEALTH REVENUES (Line 7)																	
0701																		
0702																		
0703																		
0798	Summary of Remaining Write-Ins for Line 7 Overflow																	
0799	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
	OTHER MEDICAL AND HOSPITAL EXPENSES (Line 14)																	
1401	Provider Settlements	994,120.00								298,589.00			584,068.00	69,693.00	41,770.00			
1402																		
1403																		
1404																		
1405																		
1406																		
1407																		
1408																		
1409																		
1498	Summary of Remaining Write-Ins for Line 14 Overflow																	
1499	TOTALS (Lines 1401 through 1409 plus 1498) (Line 14 above)	$994,120.00	NR	NR	NR	NR	NR	NR	NR	$298,589.00	NR	NR	$584,068.00	$69,693.00	$41,770.00	NR	NR	NR
	OTHER INCOME AND EXPENSES (Line 29)																	
	OTHER INCOME																	
2901																		
2902																		
2903																		
2904																		
2905																		

2918 Summary of Remaining Write-Ins for Other Income Overflow																	
2919 Subtotal of Other Income (Lines 2901 through 2918)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
OTHER EXPENSES																	
2921																	
2922																	
2923																	
2924																	
2925																	
2938 Summary of Remaining Write-Ins for Other Expenses Overflow																	
2939 Subtotal of Other Expenses (Lines 2921 through 2738)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
2999 TOTALS - (Lines 2919 minus 2939) (Line 29)	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR