

Group Health Plan, Inc.

Minnesota Supplement Report #1

STATEMENT OF REVENUE, EXPENSES AND NET INCOME

For the Year Ending December 31, 2015

Public Information, Minnesota Statutes § 62D.08

NAIC #	NAIC Description	1	2	3	4	5	6	7	8	9	10	11	12	13	14
As		NAIC Totals	Products	Products	Commercial	Choice	Medicare Cost	Options (MSHO)	(MA Only)	SNBC (Integrated)	Assistance	MNCare	Dental	Other:	Services Only
														Please Specify	
	1 Member Months	830,559	0	830,559	240,949	0	589,610	0	0	0	0	0	0	0	0
REVENUES:															
	2 Net Premium Income (including \$ non-health premium income)	473,232,000	0	473,232,000	77,155,000	0	390,459,000	0	0	0	0	0	5,618,000	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)	592,094,000	0	592,094,000	544,332,000	0	0	0	0	0	0	0	47,762,000	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)	64,933,000	0	64,933,000	64,933,000	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)	1,130,259,000	0	1,130,259,000	686,420,000	0	390,459,000	0	0	0	0	0	53,380,000	0	0
EXPENSES:															
	9 Hospital/medical benefits	792,132,000	0	792,132,000	513,027,000	0	279,105,000	0	0	0	0	0	0	0	0
	10 Other professional services	108,882,000	0	108,882,000	72,003,000	0	0	0	0	0	0	0	36,879,000	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	156,324,000	0	156,324,000	90,539,000	0	65,785,000	0	0	0	0	0	0	0	0
	14 Aggregate write-ins for other hospital and medical expenses	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)	1,057,338,000	0	1,057,338,000	675,569,000	0	344,890,000	0	0	0	0	0	36,879,000	0	0
LESS															
	17 Net reinsurance recoveries	4,352,000	0	4,352,000	4,352,000	0	0	0	0	0	0	0	0	0	0
	18 Total hospital and medical (Lines 16 minus 17)	1,052,986,000	0	1,052,986,000	671,217,000	0	344,890,000	0	0	0	0	0	36,879,000	0	0
	19 Non-health claims	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	20 Claims adjustment expenses	14,903,000	0	14,903,000	7,054,000	0	7,846,000	0	0	0	0	0	3,000	0	0
	21 General administrative expenses	54,294,000	0	54,294,000	28,411,000	0	21,371,000	0	0	0	0	0	4,512,000	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)	1,122,183,000	0	1,122,183,000	706,682,000	0	374,107,000	0	0	0	0	0	41,394,000	0	0
	24 Net underwriting gain or (loss)(Lines 8 minus 23)	8,076,000	0	8,076,000	(20,262,000)	0	16,352,000	0	0	0	0	0	11,986,000	0	0
	25 Net investment income earned	1,872,000	0	1,872,000	1,332,000	0	540,000	0	0	0	0	0	0	0	0
	26 Net realized capital gains or (losses)	2,141,000	0	2,141,000	1,533,000	0	608,000	0	0	0	0	0	0	0	0
	27 Net investment gains or (losses)(Lines 25 plus 26)	4,013,000	0	4,013,000	2,865,000	0	1,148,000	0	0	0	0	0	0	0	0
	28 Net gain or (loss) from assets or investments	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	12,089,000	0	12,089,000	(17,397,000)	0	17,500,000	0	0	0	0	0	11,986,000	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)	12,089,000	0	12,089,000	(17,397,000)	0	17,500,000	0	0	0	0	0	11,986,000	0	0

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	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	NAIC Totals	Products	Products	Commercial	Choice	Medicare Cost	Options (MSHO)	Health Options	Assistance	Assistance	MNCare	Dental	Other:	Services Only
													Please Specify	
DETAILS OF WRITE-INS														
OTHER HEALTH CARE RELATED REVENUES (Line 6)														
0601 Physician Affiliation Agreements	40,793,000	0	40,793,000	40,793,000	0	0	0	0	0	0	0	0	0	0
0602 Other Health Care Revenue	24,140,000	0	24,140,000	24,140,000	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)	64,933,000	0	64,933,000	64,933,000	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 2901 through 2939 plus 2998)	0	0	0	0	0	0	0	0	0	0	0	0	0	0