<u>Group Health Plan, Inc.</u> 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	30,491,000	0	30,491,000	19,365,000	0	9,172,000	0	0	0	0	0	1,954,000	0	0
2	Sales expenses	341,000	0	341,000	216,000	0	103,000	0	0	0	0	0	22,000	0	0
3	General business/office expense	12,963,000	0	12,963,000	8,233,000	0	3,899,000	0	0	0	0	0	831,000	0	0
4	State premium taxes and assessments	10,821,000	0	10,821,000	4,049,000	0	5,370,000	0	0	0	0	0	1,402,000	0	0
5	Consulting and professional fees	1,410,000	0	1,410,000	896,000	0	424,000	0	0	0	0	0	90,000	0	0
6	Outsourced services	2,297,000	0	2,297,000	1,459,000	0	691,000	0	0	0	0	0	147,000	0	0
7	Other expenses	3,157,000	0	3,157,000	2,005,000	0	950,000	0	0	0	0	0	202,000	0	0
8	Total Direct 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

		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	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
10	Sales expenses	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
11	General business/office expense	0	0	0	0	0	0	C) 0	0	0	0	0	0	0
12	State premium taxes and assessments	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
13	Consulting and professional fees	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
14	Outsourced services	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
15	Other expenses	0	0	0	0	0	0	C) 0	0	0	0	0	0	0
16	Total Indirect Expenses	0	0	0	0	0	0	0	0	0	0	0	0	0	0

		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	30,491,000	0	30,491,000	19,365,000	0	9,172,000	0	0	0	0	0	1,954,000	0	0
18	Sales expenses	341,000	0	341,000	216,000	0	103,000	0	0	0	0	0	22,000	0	0
19	General business/office expense	12,963,000	0	12,963,000	8,233,000	0	3,899,000	0	0	0	0	0	831,000	0	0
20	State premium taxes and assessments	10,821,000	0	10,821,000	4,049,000	0	5,370,000	0	0	0	0	0	1,402,000	0	0
21	Consulting and professional fees	1,410,000	0	1,410,000	896,000	0	424,000	0	0	0	0	0	90,000	0	0
22	Outsourced services	2,297,000	0	2,297,000	1,459,000	0	691,000	0	0	0	0	0	147,000	0	0
23	Other expenses	3,157,000	0	3,157,000	2,005,000	0	950,000	0	0	0	0	0	202,000	0	0
24	Total Non-Claim Expenses = Sum of Lines 17 to 23	61,480,000	0	61,480,000	36,223,000	0	20,609,000	0	0	0	0	0	4,648,000	0	0
25	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
26	Revenues (Supp Report #1, Line 8)	1,262,925,000		1,262,925,000	784,607,000	0	428,000,000	0	0	0	0	0	50,318,000	0	0
27	Incurred Claims (Supp Report #1, Line 18 + Line 22)	1,213,523,000		1,213,523,000	798,414,000	0	367,189,000	0	0	0	0	0	47,920,000	0	0
28	Net Investment Gain/(Loss) (Allocated)	15,088,000		15,088,000	12,153,000	0	2,935,000	0	0	0	0	0	0	0	0
29	Aggregate Write Ins for Other Income or (Expenses)	0		0	0	0	0	0	0	0	0	0	0	0	0
30	Federal and Foreign Income Taxes Incurred	0		0	0	0	0	0	0	0	0	0	0	0	0
31	Net Income = Lines 26+28+29-24-25-27-30	(13,852,000)	0	(13,852,000)	(45,912,000)	0	34,310,000	0	0	0	0	0	(2,250,000)	0	0