Humana Wisconsin Health Organization Insurance Corporat Minnesota Supplement Report #1 STATEMENT OF REVENUE, EXPENSES AND NET INCOME

For the year ending December 31, 2022 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 | 1 |
|---|---------------|-------------------------|-----------------|------------|-------------|---------------|--|--|--|--|------------------|--|-------------|--------|--|----------------|----------------|---------------------------------------|
| As found on page 4 of the Annual Statement | | | | | İ | i | i | i | i | İ | i | i e | | | Dental | Other: | | 1 |
| | | | | | | | | | Minnesota Senior | · | | Prepaid Medical | | | Please specify if | | | 1 |
| | | Non-Minnesota | Total Minnesota | | Medicare | | Medicare | Stand Alone | Health Options | | | Assistance | | | SADP or | | Administrative | 1 |
| | NAIC Totals | Products (Eliminations) | Products | Commercial | Advantage | Medicare Cost | Supplement | Medicare Part D | (MSHO) | SNBC (MA Only) | SNBC (Integrated |) Program (PMAP) | MSC+ | MNCare | embedded | Please Specify | Services Only | 1 |
| 1 Member Months (for Jan-Dec 2019) | 4,938,695 | 4,906,489 | 32,206 | - | 32,206 | - | - | | - | - | - | - | - | - | - | | - | 1 |
| | | | | | | | | | | | | | | | | | | i |
| REVENUES: | F F00 007 000 | 5 557 504 005 | 00 000 005 | | 00 000 005 | | | | | | | | | | | | | 1 |
| 2 Net Premium Income (including \$ non-health premium income) | 5,590,307,920 | 5,557,501,285 | 32,806,635 | - | 32,806,635 | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 3 Change in unearned premium reserves and serve for rate credits | - | - | - | - | - | - | <u> </u> | - | - | - | - | <u> </u> | - | - | - | | - | 1 |
| 4 Fee-for-service (net of \$ medical expenses) 5 Risk revenue | - | - | - | - | - | - | - | - | - | - | - | | - | - | - | | - | 1 |
| 6 Aggregate write-ins for other health care related revenues (Line 699) | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | NR | - | 1 |
| 7 Aggregate write-ins for other non-health revenues (Line 799) | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | - | NR NR | - | 1 |
| 8 TOTAL REVENUES (Lines 2 through 7) | 5,590,307,920 | 5.557.501.285 | 32.806.635 | - | | | | | - | | - | - | - | | | NR NR | - | 1 |
| 6 TOTAL REVENUES (Lines 2 tillough 1) | 5,590,307,920 | 5,557,501,265 | 32,000,033 | - | 32,000,033 | - | - | | | - | _ | - | - | - | For Dontal: Please | | | rlap reporting of Dental in other col |
| | | | | | | | | | | | | | | | Tor Derital. Ficase | I | I | lap reporting or bentar in other cor |
| EXPENSES: | | | | | | | | | | | | | | | | | | 1 |
| 9 Hospital/medical benefits | 4,241,769,892 | 4.213.560.345 | 28.209.547 | - | 28.209.547 | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 10 Other professional services | 44.964.445 | 44,652,125 | 312,320 | - | 312,320 | - | | | | - | | | | | | | | 1 |
| 11 Outside referrals | | | | - | - 012,020 | - | | 1 | | | | | | | | | _ | 1 |
| 12 Emergency room and out-of-area | 117.510.143 | 116.557.006 | 953.136 | _ | 953.136 | - | 1 | | <u> </u> | <u> </u> | <u> </u> | | _ | | | | | 1 |
| 13 Prescription drugs | 289.137.948 | 288.158.447 | 979.501 | - | 979.501 | | t . | . | | t . | | . | <u> </u> | | . | | | 1 |
| 14 Aggregate write-ins for other hospital and medical expenses (Line 1499) | - | 200,100,111 | - | - | - | - | - | - | - | - | - | - | - | - | - | NR NR | - | 1 |
| 15 Incentive Pool and Withhold Adjustments | 78,512,959 | 78,220,641 | 292.318 | - | 292,318 | - | - | | - | - | - | - | - | - | - | | - | 1 |
| 16 TOTAL EXPENSES (Lines 9 through 15) | 4,771,895,387 | 4.741.148.564 | 30,746,823 | - | 30,746,823 | - | _ | - | - | _ | - | - | - | - | _ | NR | - | 1 |
| | | | | | | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | | | | | | 1 |
| LESS | | | | | | | | | | | | | | | | | | 1 |
| 17 Net reinsurance recoveries | - | - | | - | - | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 18 Total hospital and medical (Lines 16 minus 17) | 4,771,895,387 | 4,741,148,564 | 30,746,823 | - | 30,746,823 | - | - | - | - | - | - | - | - | - | - | NR | - | 1 |
| 19 Non-health claims | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 20 Claims adjustment expenses | 159,527,710 | 158,629,525 | 898,185 | - | 898,185 | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 21 General administrative expenses | 488,802,336 | 485,465,506 | 3,336,830 | - | 3,336,830 | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 22 Increase in reserves for life, accident and health contracts (including \$ increase in reserves for life only) | (4,225,918) | (4,225,918) | - | - | - | - | - | - | - | - | - | - | - | - | - | | - | |
| 23 Total underwriting deductions (Lines 18 through 22) | 5.415.999.516 | 5.381.017.677 | 34.981.839 | - | 34.981.839 | - | - | - | - | - | - | - | - | - | - | NR | - | |
| 24 Net underwriting gain or (loss)(Lines 8 minus 23) | 174,308,404 | 176,483,607 | (2,175,203) | - | (2,175,203) | - | - | - | - | - | - | - | - | - | - | NR | - | 1 |
| 25 Net investment income earned | 32,529,860 | 32,526,880 | 2,980 | - | 2,980 | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 26 Net realized capital gains or (losses) | (3,454,759) | (3,454,759) | - | - | - | - | - | - | - | - | - | - | - | - | - | | - | |
| 27 Net investment gains or (losses)(Lines 25 plus 26) | 29,075,101 | 29,072,121 | 2,980 | - | 2,980 | - | - | - | - | - | - | - | - | - | - | NR | - | |
| 28 Net gain or (loss) from agents' or premium balances charged off | - | | - | | - | | | | | | | | | | | | | 1 |
| 29 Aggregate write-ins for other income or expenses (Line 2999) | 54 | 54 | - | - | (1) | - | - | - | - | - | - | - | - | - | - | NR | - | 1 |
| 30 Net income or (loss) before federal income taxes | 203,383,559 | 205,555,783 | (2,172,224) | | (2,172,225) | - | | | | | | | | | | NR | | 1 |
| (Lines 24 plus 27 plus 28 plus 29) | | 7 7 | | _ | | | | | | | | , | , | , | | INIX | - | 1 |
| 31 Federal and foreign income taxes incurred | 43,058,648 | 42,597,859 | 460,788 | - | (460,788) | - | - | - | - | - | - | - | - | - | - | | - | 1 |
| 32 Net income (loss) (Lines 30 minus 31) | 160,324,911 | 162,957,923 | (2,633,012) | - | (1,711,436) | - | - | - | - | - | - | - | - | - | - | NR | - | 1 |

| | | 1 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 |
|--|-------------|------------------------|-----------------|------------|-----------|---------------|------------|-----------------|-----------------|----------------|-------------------|-----------------|------|--------|--------|----------------|---------------|
| | | | | | | | | | Minnesota Senio | | | Prepaid Medical | | | | Other: | 4 |
| TAILS OF WRITE-INS | | Non-Minnesota | Total Minnesota | | Medicare | | Medicare | | Health Options | | | Assistance | | | | | Administrativ |
| | NAIC Totals | Products (Eliminations | | Commercial | Advantage | Medicare Cost | Supplement | Medicare Part D | | SNBC (MA Only) | SNBC (Integrated) | Program (PMAP) | MSC+ | MNCare | Dental | Please Specify | Services Onl |
| HER HEALTH CARE RELATED REVENUES (Line 6) | | | | | | | | | | | | | | | | | |
| 0601 | | | | | | | | | | | | | | | | | |
| 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) | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | NR | - |
| IER NON-HEALTH REVENUES (Line 7) | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | 4 |
| 0701 0702 | | | | | | | | | | | | | | | | | 4 |
| 0702 | | | | | | | | | | | | | | | | | 4 |
| 0798 Summary of Remaining Write-Ins for Line 7 Overflow | | | | | | | | | | | | | | | | | 4 |
| 0799 TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above) | - | | | - | - | - | - | | _ | - | - | - | - | - | - | NR | - |
| 0799 TO THE (Emission of a modely) of the place of the file of the | | | 1 | | | | | | | | | _ | | | | INIX | |
| HER MEDICAL AND HOSPITAL EXPENSES (Line 14) | | | | | | | | | | | | | | | | | |
| 1401 | | | | | | | | | | | | | | | | | |
| 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) | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | NR | - |
| HER INCOME AND EXPENSES (Line 29) | | | | | | | | | | | | | | | | | |
| HER INCOME AND EXPENSES (LINE 29) | | | | | | | | | | | | | | | | | |
| | 5/ | | | | | | | | | | | | | | | | 4 |
| 2901 Miscellaneous Income | 54 | 4 54 | - | - | (1 | - | - | - | - | - | - | - | - | - | - | | - |
| 2902 2903 | | | | | | | | | | | | | | | | | 4 |
| 2903 2904 | | | | | | | l | | | | | | | | | | 4 |
| 2904 | | | | | | | | | | | | | | | | | 4 |
| | | | | | | | | | | | | | | | | | 4 |
| 2918 Summary of Remaining Write-Ins for Other Income Overflow | | | - | - | - | - | - | - | - | - | - | - | - | - | - | | - |
| 2919 Subtotal of Other Income (Lines 2901 through 2918) | 54 | 4 54 | - | | (1 | - | - | | | - | - | - | - | - | - | NR | - |
| HER EXPENSES | | | | | | | | | | | | | | | | | |
| 2921 | | | | | | | | | | | | | | | | | A |

| 2922 | | | | | | | | | | | | | | | | | |
|---|----|----|---|---|-----|---|---|---|---|---|---|---|---|---|---|----|---|
| 2923 | | | | | | | | | | | | | | | | | |
| 2924 | | | | | | | | | | | | | | | | | |
| 2925 | | | | | | | | | | | | | | | | | |
| 2938 Summary of Remaining Write-Ins for Other Expenses Overflow | - | | - | - | - | - | - | - | - | - | - | - | - | - | - | | - |
| 2939 Subtotal of Other Expenses (Lines 2921 through 2738) | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | NR | - |
| 2999 TOTALS - (Lines 2919 minus 2939) (Line 29) | 54 | 54 | | - | (1) | - | | - | - | - | - | - | - | - | - | NR | - |









