



# HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023  
OF THE CONDITION AND AFFAIRS OF THE  
**UnitedHealthcare of New England, Inc.**

NAIC Group Code 0707 0707 NAIC Company Code 95149 Employer's ID Number 05-0413469  
(Current) (Prior)

Organized under the Laws of Rhode Island, State of Domicile or Port of Entry RI

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [ ] No [ X ]

Incorporated/Organized 11/14/1984 Commenced Business 12/27/1984

Statutory Home Office 475 Kilvert Street, Suite 310 Warwick, RI, US 02886-1392  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 9800 Health Care Lane, MN006-W500  
(Street and Number)  
Minnetonka, MN, US 55343 952-912-6815  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 9800 Health Care Lane, MN006-W500 Minnetonka, MN, US 55343  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 9800 Health Care Lane, MN006-W500  
(Street and Number)  
Minnetonka, MN, US 55343 952-912-6815  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.unitedhealthcare.com

Statutory Statement Contact Kuldeep Badana 91-120-671-2481  
(Name) (Area Code) (Telephone Number)  
kuldeep\_badana@optum.com 952-931-4651  
(E-mail Address) (FAX Number)

### OFFICERS

Chief Executive Officer Michael Alexander Florczyk # Chief Financial Officer Richard Michael Hersch #  
 President Timothy Callahan Archer # Secretary Bryn Searns #

**OTHER**

Peter Marshall Gill, Treasurer Heather Anastasia Lang, Assistant Secretary Jessica Leigh Zuba, Assistant Secretary  
Nyle Brent Cottingham, Vice President Michael Alexander Florczyk, Vice President, Medicaid Operations

**DIRECTORS OR TRUSTEES**

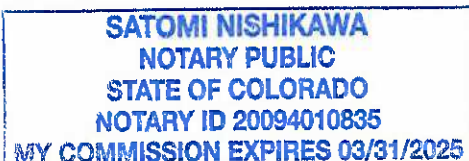
Timothy Callahan Archer # Michael Alexander Florczyk Mary Rachel Snyder

State of Colorado State of \_\_\_\_\_ State of \_\_\_\_\_  
 County of Denver County of \_\_\_\_\_ County of \_\_\_\_\_

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

|   |  |  |
|---|--|--|
| <p><u>Bryn Searns</u><br/>Bryn Searns<br/>Secretary</p> <p>Subscribed and sworn to before me this<br/><u>23<sup>rd</sup></u> day of <u>January</u>, <u>2024</u></p> | <p><u>Timothy Callahan Archer</u><br/>Timothy Callahan Archer<br/>President</p> <p>Subscribed and sworn to before me this<br/>_____ day of _____</p> | <p><u>Richard Michael Hersch</u><br/>Richard Michael Hersch<br/>Chief Financial Officer</p> <p>Subscribed and sworn to before me this<br/>_____ day of _____</p> |
|---|--|--|

- a. Is this an original filing?..... Yes [ X ] No [ ]
- b. If no,
1. State the amendment number.....
  2. Date filed.....
  3. Number of pages attached.....





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### OFFICERS

|   |   |
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| Chief Executive Officer <u>Michael Alexander Florczyk #</u> | Chief Financial Officer <u>Richard Michael Hersch #</u> |
| President <u>Timothy Callahan Archer #</u>                  | Secretary <u>Bryn Searns #</u>                          |

**OTHER**


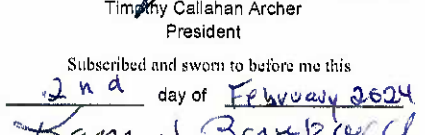
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| <u>Peter Marshall Gill, Treasurer</u>        | <u>Heather Anastasia Lang, Assistant Secretary</u>                     | <u>Jessica Leigh Zuba, Assistant Secretary</u> |
| <u>Nyle Brent Cottingham, Vice President</u> | <u>Michael Alexander Florczyk, Vice President, Medicaid Operations</u> |  |

### DIRECTORS OR TRUSTEES

|                                  |                                   |                           |
|----------------------------------|-----------------------------------|---------------------------|
| <u>Timothy Callahan Archer #</u> | <u>Michael Alexander Florczyk</u> | <u>Mary Rachel Snyder</u> |
|----------------------------------|-----------------------------------|---------------------------|

State of \_\_\_\_\_ State of CONNECTICUT State of \_\_\_\_\_  
 County of \_\_\_\_\_ County of HARTFORD County of \_\_\_\_\_

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|  |  |   |
|--|--|---|
| <br>_____<br>Bryn Searns<br>Secretary<br>Subscribed and sworn to before me this _____ day of _____ | <br>_____<br>Timothy Callahan Archer<br>President<br>Subscribed and sworn to before me this <u>2nd</u> day of <u>February 2024</u><br><u>Karen J. Bancroft</u><br>Notary Public<br>MCE 613012027 | _____<br>Richard Michael Hersch<br>Chief Financial Officer<br>Subscribed and sworn to before me this _____ day of _____ |
|--|--|---|

- a. Is this an original filing?..... Yes [ X ] No [ ]
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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UnitedHealthcare of New England, Inc.

**ASSETS**

|  | Current Year |                         |   | Prior Year                  |
|--|--------------|-------------------------|---|-----------------------------|
|  | 1<br>Assets  | 2<br>Nonadmitted Assets | 3<br>Net Admitted Assets<br>(Cols. 1 - 2) | 4<br>Net Admitted<br>Assets |
| 1. Bonds (Schedule D) .....  | 263,882,093  | 0                       | 263,882,093                               | 256,600,661                 |
| 2. Stocks (Schedule D):  |              |                         |   |                             |
| 2.1 Preferred stocks .....   | 0            | 0                       | 0   | 0                           |
| 2.2 Common stocks .....  | 0            | 0                       | 0   | 0                           |
| 3. Mortgage loans on real estate (Schedule B):   |              |                         |   |                             |
| 3.1 First liens .....  | 0            | 0                       | 0   | 0                           |
| 3.2 Other than first liens .....   | 0            | 0                       | 0   | 0                           |
| 4. Real estate (Schedule A):   |              |                         |   |                             |
| 4.1 Properties occupied by the company (less \$ .....0 encumbrances) .....   | 0            | 0                       | 0   | 0                           |
| 4.2 Properties held for the production of income (less \$ .....0 encumbrances) .....   | 0            | 0                       | 0   | 0                           |
| 4.3 Properties held for sale (less \$ .....0 encumbrances) .....   | 0            | 0                       | 0   | 0                           |
| 5. Cash (\$ .....(21,721), Schedule E - Part 1), cash equivalents (\$ .....175,074,835, Schedule E - Part 2) and short-term investments (\$ .....0, Schedule DA) ..... | 175,053,114  | 0                       | 175,053,114                               | 142,575,805                 |
| 6. Contract loans, (including \$ .....0 premium notes) .....   | 0            | 0                       | 0   | 0                           |
| 7. Derivatives (Schedule DB) .....   | 0            | 0                       | 0   | 0                           |
| 8. Other invested assets (Schedule BA) .....   | 0            | 0                       | 0   | 0                           |
| 9. Receivables for securities .....  | 0            | 0                       | 0   | 0                           |
| 10. Securities lending reinvested collateral assets (Schedule DL) .....  | 0            | 0                       | 0   | 0                           |
| 11. Aggregate write-ins for invested assets .....  | 0            | 0                       | 0   | 0                           |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) .....  | 438,935,207  | 0                       | 438,935,207                               | 399,176,466                 |
| 13. Title plants less \$ .....0 charged off (for Title insurers only) .....  | 0            | 0                       | 0   | 0                           |
| 14. Investment income due and accrued .....  | 1,900,626    | 0                       | 1,900,626                                 | 1,750,862                   |
| 15. Premiums and considerations:   |              |                         |   |                             |
| 15.1 Uncollected premiums and agents' balances in the course of collection .....   | 3,449,036    | 42,177                  | 3,406,859                                 | 13,894,082                  |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ .....0 earned but unbilled premiums) .....                 | 0            | 0                       | 0   | 0                           |
| 15.3 Accrued retrospective premiums (\$ .....3,106,045) and contracts subject to redetermination (\$ .....5,229,635) .....   | 8,702,633    | 0                       | 8,702,633                                 | 6,724,621                   |
| 16. Reinsurance:   |              |                         |   |                             |
| 16.1 Amounts recoverable from reinsurers .....   | 180,949      | 0                       | 180,949                                   | 228,136                     |
| 16.2 Funds held by or deposited with reinsured companies .....   | 0            | 0                       | 0   | 0                           |
| 16.3 Other amounts receivable under reinsurance contracts .....  | 40,733       | 0                       | 40,733                                    | 75,701                      |
| 17. Amounts receivable relating to uninsured plans .....   | 463,023      | 0                       | 463,023                                   | 3,112,576                   |
| 18.1 Current federal and foreign income tax recoverable and interest thereon .....   | 9,978,261    | 0                       | 9,978,261                                 | 918,497                     |
| 18.2 Net deferred tax asset .....  | 3,743,326    | 0                       | 3,743,326                                 | 3,288,733                   |
| 19. Guaranty funds receivable or on deposit .....  | 0            | 0                       | 0   | 0                           |
| 20. Electronic data processing equipment and software .....  | 0            | 0                       | 0   | 0                           |
| 21. Furniture and equipment, including health care delivery assets (\$ .....0) .....   | 0            | 0                       | 0   | 0                           |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates .....   | 0            | 0                       | 0   | 0                           |
| 23. Receivables from parent, subsidiaries and affiliates .....   | 3,831,523    | 0                       | 3,831,523                                 | 16,490,844                  |
| 24. Health care (\$ .....4,634,132) and other amounts receivable .....   | 10,799,975   | 6,165,843               | 4,634,132                                 | 3,242,336                   |
| 25. Aggregate write-ins for other than invested assets .....   | 4,628,092    | 27,036                  | 4,601,056                                 | 1,737,698                   |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....   | 486,653,384  | 6,235,056               | 480,418,328                               | 450,640,552                 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....  | 0            | 0                       | 0   | 0                           |
| 28. Total (Lines 26 and 27)  | 486,653,384  | 6,235,056               | 480,418,328                               | 450,640,552                 |
| <b>DETAILS OF WRITE-INS</b>  |              |                         |   |                             |
| 1101. ....   |              |                         |   |                             |
| 1102. ....   |              |                         |   |                             |
| 1103. ....   |              |                         |   |                             |
| 1198. Summary of remaining write-ins for Line 11 from overflow page .....  | 0            | 0                       | 0   | 0                           |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)   | 0            | 0                       | 0   | 0                           |
| 2501. State Taxes Receivable .....   | 3,588,897    | 0                       | 3,588,897                                 | 1,737,698                   |
| 2502. Prepaid Premium Taxes .....  | 1,012,159    | 0                       | 1,012,159                                 | 0                           |
| 2503. Miscellaneous Current Assets .....   | 26,375       | 26,375                  | 0   | 0                           |
| 2598. Summary of remaining write-ins for Line 25 from overflow page .....  | 661          | 661                     | 0   | 0                           |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)   | 4,628,092    | 27,036                  | 4,601,056                                 | 1,737,698                   |

**LIABILITIES, CAPITAL AND SURPLUS**

|   | Current Year |                |             | Prior Year  |
|---|--------------|----------------|-------------|-------------|
|   | 1<br>Covered | 2<br>Uncovered | 3<br>Total  | 4<br>Total  |
| 1. Claims unpaid (less \$ ..... 1,610,445 reinsurance ceded) .....  | 47,046,323   | 0              | 47,046,323  | 39,553,757  |
| 2. Accrued medical incentive pool and bonus amounts .....   | 28,332,802   | 0              | 28,332,802  | 11,816,001  |
| 3. Unpaid claims adjustment expenses.....   | 400,006      | 0              | 400,006     | 343,133     |
| 4. Aggregate health policy reserves, including the liability of<br>\$ .....0 for medical loss ratio rebate per the Public<br>Health Service Act .....             | 96,128,695   | 0              | 96,128,695  | 110,624,017 |
| 5. Aggregate life policy reserves.....  | 0            | 0              | 0           | 0           |
| 6. Property/casualty unearned premium reserves.....   | 0            | 0              | 0           | 0           |
| 7. Aggregate health claim reserves.....   | 504,109      | 0              | 504,109     | 758,423     |
| 8. Premiums received in advance.....  | 53,636,824   | 0              | 53,636,824  | 59,938,787  |
| 9. General expenses due or accrued.....   | 453,284      | 0              | 453,284     | 1,236,698   |
| 10.1 Current federal and foreign income tax payable and interest thereon<br>(including \$ .....0 on realized capital gains (losses)) .....                        | 0            | 0              | 0           | 0           |
| 10.2 Net deferred tax liability.....  | 0            | 0              | 0           | 0           |
| 11. Ceded reinsurance premiums payable.....   | 37,793       | 0              | 37,793      | 390,595     |
| 12. Amounts withheld or retained for the account of others.....   | 0            | 0              | 0           | 0           |
| 13. Remittances and items not allocated.....  | 325          | 0              | 325         | 1,567       |
| 14. Borrowed money (including \$ .....0 current) and<br>interest thereon \$ .....0 (including<br>\$ .....0 current).....  | 0            | 0              | 0           | 0           |
| 15. Amounts due to parent, subsidiaries and affiliates.....   | 0            | 0              | 0           | 0           |
| 16. Derivatives.....  | 0            | 0              | 0           | 0           |
| 17. Payable for securities.....   | 0            | 0              | 0           | 889,781     |
| 18. Payable for securities lending .....  | 0            | 0              | 0           | 0           |
| 19. Funds held under reinsurance treaties (with \$ .....0<br>authorized reinsurers, \$ .....0 unauthorized<br>reinsurers and \$ .....0 certified reinsurers)..... | 0            | 0              | 0           | 0           |
| 20. Reinsurance in unauthorized and certified (\$ .....0 )<br>companies .....   | 0            | 0              | 0           | 0           |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates .....   | 0            | 0              | 0           | 0           |
| 22. Liability for amounts held under uninsured plans.....   | 1,055,524    | 0              | 1,055,524   | 1,461,819   |
| 23. Aggregate write-ins for other liabilities (including \$ ..... 22,316,467<br>current).....   | 22,316,467   | 0              | 22,316,467  | 12,214      |
| 24. Total liabilities (Lines 1 to 23).....  | 249,912,152  | 0              | 249,912,152 | 227,026,792 |
| 25. Aggregate write-ins for special surplus funds.....  | XXX          | XXX            | 0           | 0           |
| 26. Common capital stock.....   | XXX          | XXX            | 5,862,835   | 5,862,835   |
| 27. Preferred capital stock.....  | XXX          | XXX            | 0           | 0           |
| 28. Gross paid in and contributed surplus.....  | XXX          | XXX            | 12,000,000  | 12,000,000  |
| 29. Surplus notes.....  | XXX          | XXX            | 0           | 0           |
| 30. Aggregate write-ins for other than special surplus funds.....   | XXX          | XXX            | 0           | 0           |
| 31. Unassigned funds (surplus).....   | XXX          | XXX            | 212,643,328 | 205,750,925 |
| 32. Less treasury stock, at cost:   |              |                |             |             |
| 32.1 .....0 shares common (value included in Line 26<br>\$ .....0 ).....  | XXX          | XXX            | 0           | 0           |
| 32.2 .....0 shares preferred (value included in Line 27<br>\$ .....0 ).....   | XXX          | XXX            | 0           | 0           |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32).....   | XXX          | XXX            | 230,506,163 | 223,613,760 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33)  | XXX          | XXX            | 480,418,315 | 450,640,552 |
| <b>DETAILS OF WRITE-INS</b>   |              |                |             |             |
| 2301. Dividends declared payable .....  | 22,300,000   | 0              | 22,300,000  | 12,214      |
| 2302. Unclaimed Property .....  | 16,467       | 0              | 16,467      | 0           |
| 2303. ....  |              |                |             |             |
| 2398. Summary of remaining write-ins for Line 23 from overflow page .....   | 0            | 0              | 0           | 0           |
| 2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)  | 22,316,467   | 0              | 22,316,467  | 12,214      |
| 2501. ....  | XXX          | XXX            |             |             |
| 2502. ....  | XXX          | XXX            |             |             |
| 2503. ....  | XXX          | XXX            |             |             |
| 2598. Summary of remaining write-ins for Line 25 from overflow page .....   | XXX          | XXX            | 0           | 0           |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)  | XXX          | XXX            | 0           | 0           |
| 3001. ....  | XXX          | XXX            |             |             |
| 3002. ....  | XXX          | XXX            |             |             |
| 3003. ....  | XXX          | XXX            |             |             |
| 3098. Summary of remaining write-ins for Line 30 from overflow page .....   | XXX          | XXX            | 0           | 0           |
| 3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)  | XXX          | XXX            | 0           | 0           |

**STATEMENT OF REVENUE AND EXPENSES**

|  | Current Year   |             | Prior Year   |
|--|----------------|-------------|--------------|
|  | 1<br>Uncovered | 2<br>Total  | 3<br>Total   |
| 1. Member Months.....  | XXX            | 1,221,560   | 1,198,845    |
| 2. Net premium income ( including \$ .....0 non-health premium income) .....   | XXX            | 686,158,208 | 693,793,695  |
| 3. Change in unearned premium reserves and reserve for rate credits .....  | XXX            | 17,165,462  | (37,231,722) |
| 4. Fee-for-service (net of \$ .....0 medical expenses) .....   | XXX            | 0           | 0            |
| 5. Risk revenue .....  | XXX            | 0           | 0            |
| 6. Aggregate write-ins for other health care related revenues .....  | XXX            | 0           | 0            |
| 7. Aggregate write-ins for other non-health revenues .....   | XXX            | 0           | 0            |
| 8. Total revenues (Lines 2 to 7) .....   | XXX            | 703,323,670 | 656,561,973  |
| <b>Hospital and Medical:</b>   |                |             |              |
| 9. Hospital/medical benefits .....   | 0              | 463,404,780 | 413,547,611  |
| 10. Other professional services .....  | 0              | 256,960     | 216,291      |
| 11. Outside referrals .....  | 0              | 0           | 0            |
| 12. Emergency room and out-of-area .....   | 0              | 0           | 0            |
| 13. Prescription drugs .....   | 0              | 130,239,926 | 133,336,944  |
| 14. Aggregate write-ins for other hospital and medical.....  | 0              | 0           | 0            |
| 15. Incentive pool, withhold adjustments and bonus amounts .....   | 0              | 39,306,599  | 22,694,029   |
| 16. Subtotal (Lines 9 to 15) .....   | 0              | 633,208,265 | 569,794,875  |
| <b>Less:</b>   |                |             |              |
| 17. Net reinsurance recoveries .....   | 0              | 4,316,558   | 5,909,362    |
| 18. Total hospital and medical (Lines 16 minus 17) .....   | 0              | 628,891,707 | 563,885,513  |
| 19. Non-health claims (net) .....  | 0              | 0           | 0            |
| 20. Claims adjustment expenses, including \$ ..... 15,188,641 cost containment expenses ....   | 0              | 19,243,445  | 16,616,318   |
| 21. General administrative expenses .....  | 0              | 31,582,189  | 34,440,176   |
| 22. Increase in reserves for life and accident and health contracts (including \$ .....0 increase in reserves for life only) .....                     | 0              | 0           | 0            |
| 23. Total underwriting deductions (Lines 18 through 22).....   | 0              | 679,717,341 | 614,942,007  |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) .....   | XXX            | 23,606,329  | 41,619,966   |
| 25. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....   | 0              | 15,565,555  | 8,002,031    |
| 26. Net realized capital gains (losses) less capital gains tax of \$ .....103,772 .....  | 0              | 390,379     | 213,064      |
| 27. Net investment gains (losses) (Lines 25 plus 26) .....   | 0              | 15,955,934  | 8,215,095    |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... 61,533 ) (amount charged off \$ ..... (2,087) )] ..... | 0              | 59,446      | (98,526)     |
| 29. Aggregate write-ins for other income or expenses .....   | 0              | 0           | 0            |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....                    | XXX            | 39,621,709  | 49,736,535   |
| 31. Federal and foreign income taxes incurred .....  | XXX            | 7,910,172   | 10,061,523   |
| 32. Net income (loss) (Lines 30 minus 31) .....  | XXX            | 31,711,537  | 39,675,012   |
| <b>DETAILS OF WRITE-INS</b>  |                |             |              |
| 0601. ....   | XXX            |             |              |
| 0602. ....   | XXX            |             |              |
| 0603. ....   | XXX            |             |              |
| 0698. Summary of remaining write-ins for Line 6 from overflow page .....   | XXX            | 0           | 0            |
| 0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above) .....  | XXX            | 0           | 0            |
| 0701. ....   | XXX            |             |              |
| 0702. ....   | XXX            |             |              |
| 0703. ....   | XXX            |             |              |
| 0798. Summary of remaining write-ins for Line 7 from overflow page .....   | XXX            | 0           | 0            |
| 0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above) .....  | XXX            | 0           | 0            |
| 1401. ....   |                |             |              |
| 1402. ....   |                |             |              |
| 1403. ....   |                |             |              |
| 1498. Summary of remaining write-ins for Line 14 from overflow page .....  | 0              | 0           | 0            |
| 1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) .....   | 0              | 0           | 0            |
| 2901. ....   |                |             |              |
| 2902. ....   |                |             |              |
| 2903. ....   |                |             |              |
| 2998. Summary of remaining write-ins for Line 29 from overflow page .....  | 0              | 0           | 0            |
| 2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above) .....   | 0              | 0           | 0            |

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

|   | 1<br>Current Year | 2<br>Prior Year |
|---|-------------------|-----------------|
| <b>CAPITAL AND SURPLUS ACCOUNT</b>  |                   |                 |
| 33. Capital and surplus prior reporting year.....   | 223,613,760       | 206,184,444     |
| 34. Net income or (loss) from Line 32 .....   | 31,711,537        | 39,675,012      |
| 35. Change in valuation basis of aggregate policy and claim reserves .....                    | 0                 | 0               |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....0 ..... | 0                 | (110,811)       |
| 37. Change in net unrealized foreign exchange capital gain or (loss) .....                    | 0                 | 0               |
| 38. Change in net deferred income tax .....   | 454,593           | 203,665         |
| 39. Change in nonadmitted assets .....  | (2,973,727)       | (1,738,550)     |
| 40. Change in unauthorized and certified reinsurance .....                                    | 0                 | 0               |
| 41. Change in treasury stock .....  | 0                 | 0               |
| 42. Change in surplus notes .....   | 0                 | 0               |
| 43. Cumulative effect of changes in accounting principles.....                                | 0                 | 0               |
| 44. Capital Changes:  |                   |                 |
| 44.1 Paid in .....  | 0                 | 0               |
| 44.2 Transferred from surplus (Stock Dividend).....   | 0                 | 0               |
| 44.3 Transferred to surplus.....  | 0                 | 0               |
| 45. Surplus adjustments:  |                   |                 |
| 45.1 Paid in .....  | 0                 | 0               |
| 45.2 Transferred to capital (Stock Dividend) .....  | 0                 | 0               |
| 45.3 Transferred from capital .....   | 0                 | 0               |
| 46. Dividends to stockholders .....   | (22,300,000)      | (20,600,000)    |
| 47. Aggregate write-ins for gains or (losses) in surplus .....                                | 0                 | 0               |
| 48. Net change in capital and surplus (Lines 34 to 47) .....                                  | 6,892,403         | 17,429,316      |
| 49. Capital and surplus end of reporting period (Line 33 plus 48)                             | 230,506,163       | 223,613,760     |
| <b>DETAILS OF WRITE-INS</b>   |                   |                 |
| 4701. ....  |                   |                 |
| 4702. ....  |                   |                 |
| 4703. ....  |                   |                 |
| 4798. Summary of remaining write-ins for Line 47 from overflow page .....                     | 0                 | 0               |
| 4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)                                  | 0                 | 0               |

## CASH FLOW

|   | 1            | 2            |
|---|--------------|--------------|
|   | Current Year | Prior Year   |
| <b>Cash from Operations</b>   |              |              |
| 1. Premiums collected net of reinsurance .....  | 690,650,018  | 748,238,927  |
| 2. Net investment income .....  | 16,624,732   | 9,280,155    |
| 3. Miscellaneous income .....   | 0            | 0            |
| 4. Total (Lines 1 through 3) .....  | 707,274,750  | 757,519,082  |
| 5. Benefit and loss related payments .....  | 609,395,685  | 628,887,420  |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....                    | 0            | 0            |
| 7. Commissions, expenses paid and aggregate write-ins for deductions .....                                      | 52,121,018   | 46,572,746   |
| 8. Dividends paid to policyholders .....  | 0            | 0            |
| 9. Federal and foreign income taxes paid (recovered) net of \$ .....0 tax on capital gains (losses) .....       | 17,073,708   | 10,124,630   |
| 10. Total (Lines 5 through 9) .....   | 678,590,411  | 685,584,796  |
| 11. Net cash from operations (Line 4 minus Line 10) .....   | 28,684,339   | 71,934,286   |
| <b>Cash from Investments</b>  |              |              |
| 12. Proceeds from investments sold, matured or repaid:  |              |              |
| 12.1 Bonds .....  | 42,581,844   | 29,136,239   |
| 12.2 Stocks .....   | 0            | 0            |
| 12.3 Mortgage loans .....   | 0            | 0            |
| 12.4 Real estate .....  | 0            | 0            |
| 12.5 Other invested assets .....  | 0            | 0            |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....                           | 0            | 0            |
| 12.7 Miscellaneous proceeds .....   | 0            | 889,781      |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) .....   | 42,581,844   | 30,026,020   |
| 13. Cost of investments acquired (long-term only):  |              |              |
| 13.1 Bonds .....  | 50,559,464   | 34,949,178   |
| 13.2 Stocks .....   | 0            | 0            |
| 13.3 Mortgage loans .....   | 0            | 0            |
| 13.4 Real estate .....  | 0            | 0            |
| 13.5 Other invested assets .....  | 0            | 0            |
| 13.6 Miscellaneous applications .....   | 889,781      | 0            |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) .....  | 51,449,245   | 34,949,178   |
| 14. Net increase/(decrease) in contract loans and premium notes .....   | 0            | 0            |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....                                   | (8,867,401)  | (4,923,158)  |
| <b>Cash from Financing and Miscellaneous Sources</b>  |              |              |
| 16. Cash provided (applied):  |              |              |
| 16.1 Surplus notes, capital notes .....   | 0            | 0            |
| 16.2 Capital and paid in surplus, less treasury stock .....   | 0            | 0            |
| 16.3 Borrowed funds .....   | 0            | 0            |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities .....                               | 0            | 0            |
| 16.5 Dividends to stockholders .....  | 0            | 20,600,000   |
| 16.6 Other cash provided (applied) .....  | 12,660,368   | (14,803,072) |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) ..... | 12,660,368   | (35,403,072) |
| <b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>                                      |              |              |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....       | 32,477,306   | 31,608,056   |
| 19. Cash, cash equivalents and short-term investments:  |              |              |
| 19.1 Beginning of year .....  | 142,575,805  | 110,967,749  |
| 19.2 End of year (Line 18 plus Line 19.1) .....   | 175,053,111  | 142,575,805  |
| <b>Note: Supplemental disclosures of cash flow information for non-cash transactions:</b>                       |              |              |
| 20.0001. Dividend declared and unpaid .....   | 22,300,000   | 0            |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UnitedHealthcare of New England, Inc.

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS**

|   | 1<br>Total  | Comprehensive<br>(Hospital & Medical) |            | 4<br>Medicare<br>Supplement | 5<br>Vision Only | 6<br>Dental Only | 7<br>Federal<br>Employees Health<br>Benefits Plan | 8<br>Title XVIII<br>Medicare | 9<br>Title XIX<br>Medicaid | 10<br>Credit A&H | 11<br>Disability<br>Income | 12<br>Long-Term<br>Care | 13<br>Other Health | 14<br>Other<br>Non-Health |
|---|-------------|---------------------------------------|------------|-----------------------------|------------------|------------------|---|------------------------------|----------------------------|------------------|----------------------------|-------------------------|--------------------|---------------------------|
|   |             | 2<br>Individual                       | 3<br>Group |                             |                  |                  |   |                              |                            |                  |                            |                         |                    |                           |
| 1. Net premium income   | 686,158,208 | 34,391                                | 1,715,116  | 0                           | 0                | 0                | 0   | 16,063,165                   | 668,345,536                | 0                | 0                          | 0                       | 0                  | 0                         |
| 2. Change in unearned premium reserves and reserve for rate credit  | 17,165,462  | 0                                     | 22,700     | 0                           | 0                | 0                | 0   | 245,647                      | 16,897,115                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 3. Fee-for-service (net of \$ medical expenses)   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 4. Risk revenue   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 5. Aggregate write-ins for other health care related revenues   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 6. Aggregate write-ins for other non-health care related revenues   | 0           | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | 0                         |
| 7. Total revenues (Lines 1 to 6)  | 703,323,670 | 34,391                                | 1,737,816  | 0                           | 0                | 0                | 0   | 16,308,812                   | 685,242,651                | 0                | 0                          | 0                       | 0                  | 0                         |
| 8. Hospital/medical benefits  | 463,404,780 | 100,497                               | 3,391,366  | 0                           | 0                | 0                | 0   | 12,886,563                   | 447,026,354                | 0                | 0                          | 0                       | 0                  | XXX                       |
| 9. Other professional services  | 256,960     | 0                                     | 2,957      | 0                           | 0                | 0                | 0   | 254,003                      | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 10. Outside referrals   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 11. Emergency room and out-of-area  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 12. Prescription drugs  | 130,239,926 | (975)                                 | 1,086,131  | 0                           | 0                | 0                | 0   | 990,896                      | 128,163,874                | 0                | 0                          | 0                       | 0                  | XXX                       |
| 13. Aggregate write-ins for other hospital and medical incentive pool, withhold adjustments and bonus amounts | 39,306,599  | (1,418)                               | (20,356)   | 0                           | 0                | 0                | 0   | 42,871                       | 39,285,502                 | 0                | 0                          | 0                       | 0                  | XXX                       |
| 15. Subtotal (Lines 8 to 14)  | 633,208,265 | 98,104                                | 4,460,098  | 0                           | 0                | 0                | 0   | 14,174,333                   | 614,475,730                | 0                | 0                          | 0                       | 0                  | XXX                       |
| 16. Net reinsurance recoveries  | 4,316,558   | 58,884                                | 2,805,747  | 0                           | 0                | 0                | 0   | 0                            | 1,451,927                  | 0                | 0                          | 0                       | 0                  | XXX                       |
| 17. Total medical and hospital (Lines 15 minus 16)  | 628,891,707 | 39,220                                | 1,654,351  | 0                           | 0                | 0                | 0   | 14,174,333                   | 613,023,803                | 0                | 0                          | 0                       | 0                  | XXX                       |
| 18. Non-health claims (net)   | 0           | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | 0                         |
| 19. Claims adjustment expenses including \$ 15,188,641 cost containment expenses                              | 19,243,445  | 965                                   | 48,100     | 0                           | 0                | 0                | 0   | 450,495                      | 18,743,885                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 20. General administrative expenses   | 31,582,189  | 1,583                                 | 78,943     | 0                           | 0                | 0                | 0   | 739,348                      | 30,762,315                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 21. Increase in reserves for accident and health contracts  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 22. Increase in reserves for life contracts   | 0           | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | 0                         |
| 23. Total underwriting deductions (Lines 17 to 22)  | 679,717,341 | 41,768                                | 1,781,394  | 0                           | 0                | 0                | 0   | 15,364,176                   | 662,530,003                | 0                | 0                          | 0                       | 0                  | 0                         |
| 24. Net underwriting gain or (loss) (Line 7 minus Line 23)  | 23,606,329  | (7,377)                               | (43,578)   | 0                           | 0                | 0                | 0   | 944,636                      | 22,712,648                 | 0                | 0                          | 0                       | 0                  | 0                         |
| DETAILS OF WRITE-INS  |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    |                           |
| 0501.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 0502.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 0503.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 0598. Summary of remaining write-ins for Line 5 from overflow page  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 0601.   |             | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | XXX                       |
| 0602.   |             | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | XXX                       |
| 0603.   |             | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | XXX                       |
| 0698. Summary of remaining write-ins for Line 6 from overflow page  | 0           | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | 0                         |
| 0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)  | 0           | XXX                                   | XXX        | XXX                         | XXX              | XXX              | XXX   | XXX                          | XXX                        | XXX              | XXX                        | XXX                     | XXX                | 0                         |
| 1301.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 1302.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 1303.   |             |                                       |            |                             |                  |                  |   |                              |                            |                  |                            |                         |                    | XXX                       |
| 1398. Summary of remaining write-ins for Line 13 from overflow page   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0   | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | XXX                       |



**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 1 - PREMIUMS**

| Line of Business   | 1<br>Direct Business | 2<br>Reinsurance Assumed | 3<br>Reinsurance Ceded | 4<br>Net Premium Income<br>(Cols. 1 + 2 - 3) |
|--|----------------------|--------------------------|------------------------|--|
| 1. Comprehensive (hospital and medical) individual ..... | 86,627               | 0                        | 52,236                 | 34,391                                       |
| 2. Comprehensive (hospital and medical) group .....      | 4,332,129            | 0                        | 2,617,013              | 1,715,116                                    |
| 3. Medicare Supplement .....                             | 0                    | 0                        | 0                      | 0  |
| 4. Vision only .....                                     | 0                    | 0                        | 0                      | 0  |
| 5. Dental only .....                                     | 0                    | 0                        | 0                      | 0  |
| 6. Federal Employees Health Benefits Plan .....          | 0                    | 0                        | 0                      | 0  |
| 7. Title XVIII - Medicare .....                          | 16,079,485           | 0                        | 16,321                 | 16,063,164                                   |
| 8. Title XIX - Medicaid .....                            | 670,527,497          | 0                        | 2,181,960              | 668,345,537                                  |
| 9. Credit A&H .....                                      | 0                    | 0                        | 0                      | 0  |
| 10. Disability Income .....                              | 0                    | 0                        | 0                      | 0  |
| 11. Long-Term Care .....                                 | 0                    | 0                        | 0                      | 0  |
| 12. Other health .....                                   | 0                    | 0                        | 0                      | 0  |
| 13. Health subtotal (Lines 1 through 12) .....           | 691,025,738          | 0                        | 4,867,530              | 686,158,208                                  |
| 14. Life .....   | 0                    | 0                        | 0                      | 0  |
| 15. Property/casualty .....                              | 0                    | 0                        | 0                      | 0  |
| 16. Totals (Lines 13 to 15)                              | 691,025,738          | 0                        | 4,867,530              | 686,158,208                                  |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UnitedHealthcare of New England, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2 - CLAIMS INCURRED DURING THE YEAR**

|  | 1<br>Total  | Comprehensive<br>(Hospital & Medical) |            | 4<br>Medicare<br>Supplement | 5<br>Vision Only | 6<br>Dental Only | 7<br>Federal<br>Employees<br>Health<br>Benefits Plan | 8<br>Title XVIII<br>Medicare | 9<br>Title XIX<br>Medicaid | 10<br>Credit A&H | 11<br>Disability<br>Income | 12<br>Long-Term<br>Care | 13<br>Other Health | 14<br>Other<br>Non-Health |
|--|-------------|---------------------------------------|------------|-----------------------------|------------------|------------------|--|------------------------------|----------------------------|------------------|----------------------------|-------------------------|--------------------|---------------------------|
|  |             | 2<br>Individual                       | 3<br>Group |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 1. Payments during the year:                                     |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 1.1 Direct   | 589,465,626 | 73,457                                | 4,524,056  | 0                           | 0                | 0                | 0  | 13,585,296                   | 571,282,817                | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.2 Reinsurance assumed  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.3 Reinsurance ceded  | 2,872,801   | 40,517                                | 2,757,897  | 0                           | 0                | 0                | 0  | 0                            | 74,387                     | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.4 Net  | 586,592,825 | 32,940                                | 1,766,159  | 0                           | 0                | 0                | 0  | 13,585,296                   | 571,208,430                | 0                | 0                          | 0                       | 0                  | 0                         |
| 2. Paid medical incentive pools and bonuses                      | 22,802,861  | 0                                     | 22         | 0                           | 0                | 0                | 0  | 24,173                       | 22,778,666                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 3. Claim liability December 31, current year from Part 2A:       |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 3.1 Direct   | 48,656,768  | 31,653                                | 562,788    | 0                           | 0                | 0                | 0  | 1,803,150                    | 46,259,177                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.2 Reinsurance assumed  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.3 Reinsurance ceded  | 1,610,445   | (16,620)                              | 249,455    | 0                           | 0                | 0                | 0  | 70                           | 1,377,540                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.4 Net  | 47,046,323  | 48,273                                | 313,333    | 0                           | 0                | 0                | 0  | 1,803,080                    | 44,881,637                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 4. Claim reserve December 31, current year from Part 2D:         |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 4.1 Direct   | 511,828     | 1,007                                 | 11,857     | 0                           | 0                | 0                | 0  | 5,992                        | 492,972                    | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.2 Reinsurance assumed  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.3 Reinsurance ceded  | 7,719       | (1,232)                               | 8,951      | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.4 Net  | 504,109     | 2,239                                 | 2,906      | 0                           | 0                | 0                | 0  | 5,992                        | 492,972                    | 0                | 0                          | 0                       | 0                  | 0                         |
| 5. Accrued medical incentive pools and bonuses, current year     | 28,332,802  | 660                                   | 5,168      | 0                           | 0                | 0                | 0  | 148,515                      | 28,178,459                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 6. Net health care receivables (a)                               | 4,306,220   | (520)                                 | 150,232    | 0                           | 0                | 0                | 0  | 142,743                      | 4,013,765                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 7. Amounts recoverable from reinsurers December 31, current year | 180,947     | 6,070                                 | 174,947    | 0                           | 0                | 0                | 0  | (70)                         | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 8. Claim liability December 31, prior year from Part 2A:         |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 8.1 Direct   | 39,665,474  | 0                                     | 471,069    | 0                           | 0                | 0                | 0  | 913,547                      | 38,280,858                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 8.2 Reinsurance assumed  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 8.3 Reinsurance ceded  | 111,717     | 0                                     | 111,647    | 0                           | 0                | 0                | 0  | 70                           | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 8.4 Net  | 39,553,757  | 0                                     | 359,422    | 0                           | 0                | 0                | 0  | 913,477                      | 38,280,858                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 9. Claim reserve December 31, prior year from Part 2D:           |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 9.1 Direct   | 760,861     | 0                                     | 4,063      | 0                           | 0                | 0                | 0  | 206,684                      | 550,114                    | 0                | 0                          | 0                       | 0                  | 0                         |
| 9.2 Reinsurance assumed  | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 9.3 Reinsurance ceded  | 2,438       | 0                                     | 2,438      | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 9.4 Net  | 758,423     | 0                                     | 1,625      | 0                           | 0                | 0                | 0  | 206,684                      | 550,114                    | 0                | 0                          | 0                       | 0                  | 0                         |
| 10. Accrued medical incentive pools and bonuses, prior year      | 11,816,001  | 0                                     | 14,559     | 0                           | 0                | 0                | 0  | 129,819                      | 11,671,623                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 11. Amounts recoverable from reinsurers December 31, prior year  | 228,136     | 0                                     | 228,206    | 0                           | 0                | 0                | 0  | (70)                         | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 12. Incurred Benefits:   |             |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 12.1 Direct  | 593,901,667 | 106,637                               | 4,473,337  | 0                           | 0                | 0                | 0  | 14,131,464                   | 575,190,229                | 0                | 0                          | 0                       | 0                  | 0                         |
| 12.2 Reinsurance assumed   | 0           | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 12.3 Reinsurance ceded   | 4,329,621   | 28,735                                | 2,848,959  | 0                           | 0                | 0                | 0  | 0                            | 1,451,927                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 12.4 Net   | 589,572,046 | 77,902                                | 1,624,378  | 0                           | 0                | 0                | 0  | 14,131,464                   | 573,738,302                | 0                | 0                          | 0                       | 0                  | 0                         |
| 13. Incurred medical incentive pools and bonuses                 | 39,319,662  | 660                                   | (9,369)    | 0                           | 0                | 0                | 0  | 42,869                       | 39,285,502                 | 0                | 0                          | 0                       | 0                  | 0                         |

(a) Excludes \$ ..... 192 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UnitedHealthcare of New England, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR**

|  | 1<br>Total | Comprehensive<br>(Hospital & Medical) |            | 4<br>Medicare<br>Supplement | 5<br>Vision Only | 6<br>Dental Only | 7<br>Federal<br>Employees<br>Health<br>Benefits Plan | 8<br>Title XVIII<br>Medicare | 9<br>Title XIX<br>Medicaid | 10<br>Credit A&H | 11<br>Disability<br>Income | 12<br>Long-Term<br>Care | 13<br>Other Health | 14<br>Other<br>Non-Health |
|--|------------|---------------------------------------|------------|-----------------------------|------------------|------------------|--|------------------------------|----------------------------|------------------|----------------------------|-------------------------|--------------------|---------------------------|
|  |            | 2<br>Individual                       | 3<br>Group |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 1. Reported in Process of Adjustment:                    |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 1.1 Direct .....   | 9,990,000  | 5,505                                 | 186,592    | 0                           | 0                | 0                | 0  | 302,703                      | 9,495,200                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.2 Reinsurance assumed .....                            | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.3 Reinsurance ceded .....                              | (137,636)  | 3,182                                 | (140,888)  | 0                           | 0                | 0                | 0  | 70                           | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 1.4 Net .....  | 10,127,636 | 2,323                                 | 327,480    | 0                           | 0                | 0                | 0  | 302,633                      | 9,495,200                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 2. Incurred but Unreported:                              |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 2.1 Direct .....   | 38,640,556 | 26,148                                | 376,196    | 0                           | 0                | 0                | 0  | 1,474,235                    | 36,763,977                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 2.2 Reinsurance assumed .....                            | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 2.3 Reinsurance ceded .....                              | 1,748,081  | (19,802)                              | 390,343    | 0                           | 0                | 0                | 0  | 0                            | 1,377,540                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 2.4 Net .....  | 36,892,475 | 45,950                                | (14,147)   | 0                           | 0                | 0                | 0  | 1,474,235                    | 35,386,437                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 3. Amounts Withheld from Paid Claims<br>and Capitations: |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 3.1 Direct .....   | 26,212     | 0                                     | 0          | 0                           | 0                | 0                | 0  | 26,212                       | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.2 Reinsurance assumed .....                            | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.3 Reinsurance ceded .....                              | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 3.4 Net .....  | 26,212     | 0                                     | 0          | 0                           | 0                | 0                | 0  | 26,212                       | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 4. TOTALS:   |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |                    |                           |
| 4.1 Direct .....   | 48,656,768 | 31,653                                | 562,788    | 0                           | 0                | 0                | 0  | 1,803,150                    | 46,259,177                 | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.2 Reinsurance assumed .....                            | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.3 Reinsurance ceded .....                              | 1,610,445  | (16,620)                              | 249,455    | 0                           | 0                | 0                | 0  | 70                           | 1,377,540                  | 0                | 0                          | 0                       | 0                  | 0                         |
| 4.4 Net .....  | 47,046,323 | 48,273                                | 313,333    | 0                           | 0                | 0                | 0  | 1,803,080                    | 44,881,637                 | 0                | 0                          | 0                       | 0                  | 0                         |

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE**

| Line of Business   | Claims Paid During the Year                                 |                                       | Claim Reserve and Claim Liability<br>December 31 of Current Year |                                       | 5<br>Claims Incurred<br>In Prior Years<br>(Columns 1 + 3) | 6<br>Estimated Claim<br>Reserve and Claim<br>Liability<br>December 31 of<br>Prior Year |
|--|---|---------------------------------------|--|---------------------------------------|---|--|
|  | 1   | 2                                     | 3  | 4                                     |   |  |
|  | On Claims Incurred<br>Prior to January 1<br>of Current Year | On Claims Incurred<br>During the Year | On Claims Unpaid<br>December 31 of<br>Prior Year                 | On Claims Incurred<br>During the Year |   |  |
| 1. Comprehensive (hospital and medical) individual ..... | 167   | 29,194                                | 36,730   | 13,784                                | 36,897  | 0  |
| 2. Comprehensive (hospital and medical) group .....      | 29,886  | 1,787,041                             | 12,286   | 303,950                               | 42,172  | 361,046  |
| 3. Medicare Supplement .....                             | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 4. Vision Only .....                                     | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 5. Dental Only .....                                     | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 6. Federal Employees Health Benefits Plan .....          | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 7. Title XVIII - Medicare .....                          | 68,719  | 13,516,577                            | (7,693)  | 1,816,765                             | 61,026  | 1,120,162  |
| 8. Title XIX - Medicaid .....                            | 36,150,721  | 535,057,708                           | 2,000,725  | 43,373,885                            | 38,151,446  | 38,830,972   |
| 9. Credit A&H .....                                      | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 10. Disability Income .....                              | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 11. Long-Term Care .....                                 | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 12. Other health .....                                   | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 13. Health subtotal (Lines 1 to 12) .....                | 36,249,493  | 550,390,520                           | 2,042,048  | 45,508,384                            | 38,291,541  | 40,312,180   |
| 14. Health care receivables (a) .....                    | 2,956,847   | 7,538,885                             | 0  | 304,052                               | 2,956,847   | 6,493,564  |
| 15. Other non-health .....                               | 0   | 0                                     | 0  | 0                                     | 0   | 0  |
| 16. Medical incentive pools and bonus amounts .....      | 22,721,151  | 81,710                                | 8,872,526  | 19,460,276                            | 31,593,677  | 11,816,001   |
| 17. Totals (Lines 13 - 14 + 15 + 16)                     | 56,013,797  | 542,933,345                           | 10,914,574   | 64,664,608                            | 66,928,371  | 45,634,617   |

(a) Excludes \$ ..... 192 loans or advances to providers not yet expensed.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
(\$000 Omitted)**

**Section A - Paid Health Claims - Comprehensive (Hospital & Medical)**

| Year in Which Losses Were Incurred |             | Cumulative Net Amounts Paid |           |           |           |           |
|------------------------------------|-------------|-----------------------------|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019                   | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | (110)                       | (99)      | (106)     | (107)     | (104)     |
| 2.                                 | 2019 .....  | 1,934                       | 1,821     | 1,820     | 1,820     | 1,820     |
| 3.                                 | 2020 .....  | XXX                         | 1,817     | 1,637     | 1,637     | 1,641     |
| 4.                                 | 2021 .....  | XXX                         | XXX       | 1,564     | 1,495     | 1,498     |
| 5.                                 | 2022 .....  | XXX                         | XXX       | XXX       | 1,462     | 1,256     |
| 6.                                 | 2023 .....  | XXX                         | XXX       | XXX       | XXX       | 1,995     |

**Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)**

| Year in Which Losses Were Incurred |             | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year |           |           |           |           |
|------------------------------------|-------------|--|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019  | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | (98)   | (99)      | (106)     | (107)     | (104)     |
| 2.                                 | 2019 .....  | 2,319  | 1,842     | 1,820     | 1,820     | 1,820     |
| 3.                                 | 2020 .....  | XXX  | 2,114     | 1,660     | 1,637     | 1,641     |
| 4.                                 | 2021 .....  | XXX  | XXX       | 1,840     | 1,502     | 1,498     |
| 5.                                 | 2022 .....  | XXX  | XXX       | XXX       | 1,830     | 1,307     |
| 6.                                 | 2023 .....  | XXX  | XXX       | XXX       | XXX       | 2,317     |

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)**

| Years in which Premiums were Earned and Claims were Incurred | 1<br>Premiums Earned | 2<br>Claims Payment | 3<br>Claim Adjustment Expense Payments | 4<br>(Col. 3/2) Percent | 5<br>Claim and Claim Adjustment Expense Payments (Col. 2 + 3) | 6<br>(Col. 5/1) Percent | 7<br>Claims Unpaid | 8<br>Unpaid Claims Adjustment Expenses | 9<br>Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8) | 10<br>(Col. 9/1) Percent |
|--|----------------------|---------------------|--|-------------------------|---|-------------------------|--------------------|--|---|--------------------------|
| 1. 2019 .....  | 2,545                | 1,820               | 317                                    | 17.4                    | 2,137   | 84.0                    | 0                  | 0                                      | 2,137   | 84.0                     |
| 2. 2020 .....  | 2,515                | 1,641               | 298                                    | 18.2                    | 1,939   | 77.1                    | 0                  | 0                                      | 1,939   | 77.1                     |
| 3. 2021 .....  | 2,075                | 1,498               | 402                                    | 26.8                    | 1,900   | 91.6                    | 0                  | 0                                      | 1,900   | 91.6                     |
| 4. 2022 .....  | 2,205                | 1,256               | 247                                    | 19.7                    | 1,503   | 68.2                    | 51                 | 0                                      | 1,554   | 70.5                     |
| 5. 2023 .....  | 1,772                | 1,995               | 44                                     | 2.2                     | 2,039   | 115.1                   | 322                | (3)                                    | 2,358   | 133.1                    |

12.HM

## UNDERWRITING AND INVESTMENT EXHIBIT

### PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

#### Section A - Paid Health Claims - Title XVIII

| Year in Which Losses Were Incurred |             | Cumulative Net Amounts Paid |           |           |           |           |
|------------------------------------|-------------|-----------------------------|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019                   | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | 55,065                      | 54,359    | 54,118    | 54,090    | 54,093    |
| 2.                                 | 2019 .....  | 579,095                     | 643,632   | 643,636   | 643,486   | 643,485   |
| 3.                                 | 2020 .....  | XXX                         | 605,101   | 683,687   | 684,026   | 684,020   |
| 4.                                 | 2021 .....  | XXX                         | XXX       | 728,243   | 799,980   | 800,000   |
| 5.                                 | 2022 .....  | XXX                         | XXX       | XXX       | 0         | (1)       |
| 6.                                 | 2023 .....  | XXX                         | XXX       | XXX       | XXX       | 13,598    |

#### Section B - Incurred Health Claims - Title XVIII

| Year in Which Losses Were Incurred |             | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year |           |           |           |           |
|------------------------------------|-------------|--|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019  | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | 57,108   | 54,357    | 54,118    | 54,090    | 54,093    |
| 2.                                 | 2019 .....  | 669,533  | 643,852   | 643,636   | 643,486   | 643,485   |
| 3.                                 | 2020 .....  | XXX  | 716,927   | 683,693   | 684,026   | 684,020   |
| 4.                                 | 2021 .....  | XXX  | XXX       | 834,393   | 801,230   | 800,000   |
| 5.                                 | 2022 .....  | XXX  | XXX       | XXX       | 0         | 1         |
| 6.                                 | 2023 .....  | XXX  | XXX       | XXX       | XXX       | 15,554    |

#### Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

| Years in which<br>Premiums were Earned and Claims<br>were Incurred | 1<br>Premiums Earned | 2<br>Claims Payment | 3<br>Claim Adjustment<br>Expense Payments | 4<br>(Col. 3/2)<br>Percent | 5<br>Claim and Claim<br>Adjustment Expense<br>Payments<br>(Col. 2 + 3) | 6<br>(Col. 5/1)<br>Percent | 7<br>Claims Unpaid | 8<br>Unpaid Claims<br>Adjustment<br>Expenses | 9<br>Total Claims and<br>Claims Adjustment<br>Expense Incurred<br>(Col. 5+7+8) | 10<br>(Col. 9/1)<br>Percent |
|--|----------------------|---------------------|---|----------------------------|--|----------------------------|--------------------|--|--|-----------------------------|
| 1. 2019 .....  | 788,396              | 643,485             | 33,440                                    | 5.2                        | 676,925  | 85.9                       | 0                  | 0  | 676,925  | 85.9                        |
| 2. 2020 .....  | 877,530              | 684,020             | 32,390                                    | 4.7                        | 716,410  | 81.6                       | 0                  | 0  | 716,410  | 81.6                        |
| 3. 2021 .....  | 949,219              | 800,000             | 30,658                                    | 3.8                        | 830,658  | 87.5                       | 0                  | 0  | 830,658  | 87.5                        |
| 4. 2022 .....  | 1,972                | (1)                 | 738                                       | (73,800.0)                 | 737  | 37.4                       | 2                  | 0  | 739  | 37.5                        |
| 5. 2023 .....  | 16,309               | 13,598              | 392                                       | 2.9                        | 13,990   | 85.8                       | 1,956              | 20   | 15,966   | 97.9                        |

## UNDERWRITING AND INVESTMENT EXHIBIT

### PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

#### Section A - Paid Health Claims - Title XIX

| Year in Which Losses Were Incurred | Cumulative Net Amounts Paid |           |           |           |           |
|------------------------------------|-----------------------------|-----------|-----------|-----------|-----------|
|                                    | 1<br>2019                   | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1. Prior .....                     | 24,935                      | 25,059    | 24,997    | 24,838    | 24,936    |
| 2. 2019 .....                      | 428,148                     | 470,465   | 477,378   | 477,322   | 477,322   |
| 3. 2020 .....                      | XXX                         | 437,128   | 489,716   | 481,235   | 483,914   |
| 4. 2021 .....                      | XXX                         | XXX       | 521,429   | 563,368   | 564,605   |
| 5. 2022 .....                      | XXX                         | XXX       | XXX       | 522,351   | 577,296   |
| 6. 2023 .....                      | XXX                         | XXX       | XXX       | XXX       | 535,058   |

#### Section B - Incurred Health Claims - Title XIX

| Year in Which Losses Were Incurred | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year |           |           |           |           |
|------------------------------------|--|-----------|-----------|-----------|-----------|
|                                    | 1<br>2019  | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1. Prior .....                     | 31,534   | 25,059    | 24,997    | 24,838    | 24,936    |
| 2. 2019 .....                      | 480,043  | 478,877   | 477,378   | 477,322   | 477,322   |
| 3. 2020 .....                      | XXX  | 492,766   | 492,841   | 481,235   | 483,914   |
| 4. 2021 .....                      | XXX  | XXX       | 554,060   | 567,677   | 564,605   |
| 5. 2022 .....                      | XXX  | XXX       | XXX       | 568,544   | 588,158   |
| 6. 2023 .....                      | XXX  | XXX       | XXX       | XXX       | 597,749   |

#### Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

| Years in which Premiums were Earned and Claims were Incurred | 1<br>Premiums Earned | 2<br>Claims Payment | 3<br>Claim Adjustment Expense Payments | 4<br>(Col. 3/2)<br>Percent | 5<br>Claim and Claim Adjustment Expense Payments (Col. 2 + 3) | 6<br>(Col. 5/1)<br>Percent | 7<br>Claims Unpaid | 8<br>Unpaid Claims Adjustment Expenses | 9<br>Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8) | 10<br>(Col. 9/1)<br>Percent |
|--|----------------------|---------------------|--|----------------------------|---|----------------------------|--------------------|--|---|-----------------------------|
| 1. 2019 .....  | 514,288              | 477,322             | 22,922                                 | 4.8                        | 500,244   | 97.3                       | 0                  | 0                                      | 500,244   | 97.3                        |
| 2. 2020 .....  | 553,607              | 483,914             | 19,233                                 | 4.0                        | 503,147   | 90.9                       | 0                  | 0                                      | 503,147   | 90.9                        |
| 3. 2021 .....  | 633,094              | 564,605             | 19,588                                 | 3.5                        | 584,193   | 92.3                       | 0                  | 0                                      | 584,193   | 92.3                        |
| 4. 2022 .....  | 652,385              | 577,296             | 15,943                                 | 2.8                        | 593,239   | 90.9                       | 10,862             | 58                                     | 604,159   | 92.6                        |
| 5. 2023 .....  | 685,243              | 535,058             | 16,092                                 | 3.0                        | 551,150   | 80.4                       | 62,691             | 325                                    | 614,166   | 89.6                        |

## UNDERWRITING AND INVESTMENT EXHIBIT

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**  
(\$000 Omitted)

**Section A - Paid Health Claims - Grand Total**

| Year in Which Losses Were Incurred |             | Cumulative Net Amounts Paid |           |           |           |           |
|------------------------------------|-------------|-----------------------------|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019                   | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | 79,890                      | 79,319    | 79,009    | 78,821    | 78,925    |
| 2.                                 | 2019 .....  | 1,009,177                   | 1,115,918 | 1,122,834 | 1,122,628 | 1,122,627 |
| 3.                                 | 2020 .....  | XXX                         | 1,044,046 | 1,175,040 | 1,166,898 | 1,169,575 |
| 4.                                 | 2021 .....  | XXX                         | XXX       | 1,251,236 | 1,364,843 | 1,366,103 |
| 5.                                 | 2022 .....  | XXX                         | XXX       | XXX       | 523,813   | 578,551   |
| 6.                                 | 2023 .....  | XXX                         | XXX       | XXX       | XXX       | 550,651   |

**Section B - Incurred Health Claims - Grand Total**

| Year in Which Losses Were Incurred |             | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year |           |           |           |           |
|------------------------------------|-------------|--|-----------|-----------|-----------|-----------|
|                                    |             | 1<br>2019  | 2<br>2020 | 3<br>2021 | 4<br>2022 | 5<br>2023 |
| 1.                                 | Prior ..... | 88,544   | 79,317    | 79,009    | 78,821    | 78,925    |
| 2.                                 | 2019 .....  | 1,151,895  | 1,124,571 | 1,122,834 | 1,122,628 | 1,122,627 |
| 3.                                 | 2020 .....  | XXX  | 1,211,807 | 1,178,194 | 1,166,898 | 1,169,575 |
| 4.                                 | 2021 .....  | XXX  | XXX       | 1,390,293 | 1,370,409 | 1,366,103 |
| 5.                                 | 2022 .....  | XXX  | XXX       | XXX       | 570,374   | 589,466   |
| 6.                                 | 2023 .....  | XXX  | XXX       | XXX       | XXX       | 615,620   |

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total**

| Years in which<br>Premiums were Earned and Claims<br>were Incurred | 1<br>Premiums Earned | 2<br>Claims Payment | 3<br>Claim Adjustment<br>Expense Payments | 4<br>(Col. 3/2)<br>Percent | 5<br>Claim and Claim<br>Adjustment Expense<br>Payments<br>(Col. 2 + 3) | 6<br>(Col. 5/1)<br>Percent | 7<br>Claims Unpaid | 8<br>Unpaid Claims<br>Adjustment<br>Expenses | 9<br>Total Claims and<br>Claims Adjustment<br>Expense Incurred<br>(Col. 5+7+8) | 10<br>(Col. 9/1)<br>Percent |
|--|----------------------|---------------------|---|----------------------------|--|----------------------------|--------------------|--|--|-----------------------------|
| 1. 2019 .....  | 1,305,229            | 1,122,627           | 56,679                                    | 5.0                        | 1,179,306  | 90.4                       | 0                  | 0  | 1,179,306  | 90.4                        |
| 2. 2020 .....  | 1,433,652            | 1,169,575           | 51,921                                    | 4.4                        | 1,221,496  | 85.2                       | 0                  | 0  | 1,221,496  | 85.2                        |
| 3. 2021 .....  | 1,584,388            | 1,366,103           | 50,648                                    | 3.7                        | 1,416,751  | 89.4                       | 0                  | 0  | 1,416,751  | 89.4                        |
| 4. 2022 .....  | 656,562              | 578,551             | 16,928                                    | 2.9                        | 595,479  | 90.7                       | 10,915             | 58   | 606,452  | 92.4                        |
| 5. 2023 .....  | 703,324              | 550,651             | 16,528                                    | 3.0                        | 567,179  | 80.6                       | 64,969             | 342  | 632,490  | 89.9                        |



**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY**

|  | 1<br>Total | Comprehensive<br>(Hospital & Medical) |            | 4<br>Medicare<br>Supplement | 5<br>Vision Only | 6<br>Dental Only | 7<br>Federal<br>Employees<br>Health<br>Benefits Plan | 8<br>Title XVIII<br>Medicare | 9<br>Title XIX<br>Medicaid | 10<br>Credit A&H | 11<br>Disability<br>Income | 12<br>Long-Term<br>Care | 13<br>Other |
|--|------------|---------------------------------------|------------|-----------------------------|------------------|------------------|--|------------------------------|----------------------------|------------------|----------------------------|-------------------------|-------------|
|  |            | 2<br>Individual                       | 3<br>Group |                             |                  |                  |  |                              |                            |                  |                            |                         |             |
| 1. Unearned premium reserves .....   | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 2. Additional policy reserves (a) .....  | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 3. Reserve for future contingent benefits .....  | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 4. Reserve for rate credits or experience rating refunds<br>(including \$ .....0 for investment income) .. | 94,673,315 | (36)                                  | 36         | 0                           | 0                | 0                | 0  | 0                            | 94,673,315                 | 0                | 0                          | 0                       | 0           |
| 5. Aggregate write-ins for other policy reserves .....   | 1,455,380  | 0                                     | 1,039,079  | 0                           | 0                | 0                | 0  | 416,301                      | 0                          | 0                | 0                          | 0                       | 0           |
| 6. Totals (gross) .....  | 96,128,695 | (36)                                  | 1,039,115  | 0                           | 0                | 0                | 0  | 416,301                      | 94,673,315                 | 0                | 0                          | 0                       | 0           |
| 7. Reinsurance ceded .....   | 0          | (22)                                  | 22         | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 8. Totals (Net)(Page 3, Line 4) .....  | 96,128,695 | (14)                                  | 1,039,093  | 0                           | 0                | 0                | 0  | 416,301                      | 94,673,315                 | 0                | 0                          | 0                       | 0           |
| 9. Present value of amounts not yet due on claims .....  | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 10. Reserve for future contingent benefits .....   | 511,828    | 1,007                                 | 11,857     | 0                           | 0                | 0                | 0  | 5,992                        | 492,972                    | 0                | 0                          | 0                       | 0           |
| 11. Aggregate write-ins for other claim reserves .....   | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 12. Totals (gross) .....   | 511,828    | 1,007                                 | 11,857     | 0                           | 0                | 0                | 0  | 5,992                        | 492,972                    | 0                | 0                          | 0                       | 0           |
| 13. Reinsurance ceded .....  | 7,719      | (1,232)                               | 8,951      | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 14. Totals (Net)(Page 3, Line 7)   | 504,109    | 2,239                                 | 2,906      | 0                           | 0                | 0                | 0  | 5,992                        | 492,972                    | 0                | 0                          | 0                       | 0           |
| DETAILS OF WRITE-INS   |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |             |
| 0501. CMS Risk Adjustment Factor Payable .....   | 416,301    | 0                                     | 0          | 0                           | 0                | 0                | 0  | 416,301                      | 0                          | 0                | 0                          | 0                       | 0           |
| 0502. Risk Adjustment Data Validation Payable .....  | 1,002,884  | 0                                     | 1,002,884  | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 0503. High-Cost Risk Pool Payable .....  | 36,195     | 0                                     | 36,195     | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 0598. Summary of remaining write-ins for Line 5 from overflow<br>page.....                                 | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)   | 1,455,380  | 0                                     | 1,039,079  | 0                           | 0                | 0                | 0  | 416,301                      | 0                          | 0                | 0                          | 0                       | 0           |
| 1101. ....   |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |             |
| 1102. ....   |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |             |
| 1103. ....   |            |                                       |            |                             |                  |                  |  |                              |                            |                  |                            |                         |             |
| 1198. Summary of remaining write-ins for Line 11 from overflow<br>page .....                               | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |
| 1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)  | 0          | 0                                     | 0          | 0                           | 0                | 0                | 0  | 0                            | 0                          | 0                | 0                          | 0                       | 0           |

(a) Includes \$ .....0 premium deficiency reserve.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 3 - ANALYSIS OF EXPENSES**

|   | Claim Adjustment Expenses            |  | 3<br>General<br>Administrative<br>Expenses | 4<br>Investment<br>Expenses | 5<br>Total     |
|---|--------------------------------------|--|--|-----------------------------|----------------|
|   | 1<br>Cost<br>Containment<br>Expenses | 2<br>Other Claim<br>Adjustment<br>Expenses |  |                             |                |
| 1. Rent (\$ .....0 for occupancy of own building) .....                   | 406,442                              | 100,660                                    | 528,780                                    | 0                           | 1,035,882      |
| 2. Salary, wages and other benefits .....                                 | 7,828,931                            | 1,938,926                                  | 10,185,425                                 | 0                           | 19,953,282     |
| 3. Commissions (less \$ .....0 ceded plus \$ .....0 assumed) .....        | 0                                    | 0  | 483,947                                    | 0                           | 483,947        |
| 4. Legal fees and expenses .....  | 104,859                              | 25,970                                     | 136,422                                    | 0                           | 267,251        |
| 5. Certifications and accreditation fees .....                            | 0                                    | 0  | 0  | 0                           | 0              |
| 6. Auditing, actuarial and other consulting services ...                  | 760,076                              | 188,242                                    | 1,027,088                                  | 0                           | 1,975,406      |
| 7. Traveling expenses .....   | 138,260                              | 34,242                                     | 179,876                                    | 0                           | 352,378        |
| 8. Marketing and advertising .....  | 414,254                              | 102,595                                    | 538,943                                    | 0                           | 1,055,792      |
| 9. Postage, express and telephone .....                                   | 353,486                              | 87,545                                     | 459,884                                    | 0                           | 900,915        |
| 10. Printing and office supplies .....                                    | 523,142                              | 129,562                                    | 680,607                                    | 0                           | 1,333,311      |
| 11. Occupancy, depreciation and amortization .....                        | 170,553                              | 42,240                                     | 221,890                                    | 0                           | 434,683        |
| 12. Equipment .....   | 63,135                               | 15,636                                     | 82,139                                     | 0                           | 160,910        |
| 13. Cost or depreciation of EDP equipment and software .....              | 811,631                              | 201,010                                    | 1,055,930                                  | 0                           | 2,068,571      |
| 14. Outsourced services including EDP, claims, and other services .....   | 1,373,497                            | 656,438                                    | 860,094                                    | 0                           | 2,890,029      |
| 15. Boards, bureaus and association fees .....                            | 12,407                               | 3,073                                      | 16,141                                     | 0                           | 31,621         |
| 16. Insurance, except on real estate .....                                | 153,286                              | 37,963                                     | 199,425                                    | 0                           | 390,674        |
| 17. Collection and bank service charges .....                             | 42,523                               | 10,531                                     | 55,322                                     | 0                           | 108,376        |
| 18. Group service and administration fees .....                           | 141,868                              | 35,135                                     | 38,274                                     | 0                           | 215,277        |
| 19. Reimbursements by uninsured plans .....                               | 0                                    | 0  | (913,226)                                  | 0                           | (913,226)      |
| 20. Reimbursements from fiscal intermediaries .....                       | 0                                    | 0  | 0  | 0                           | 0              |
| 21. Real estate expenses .....  | 0                                    | 0  | 0  | 0                           | 0              |
| 22. Real estate taxes .....   | 11,696                               | 2,525                                      | 33,488                                     | 0                           | 47,709         |
| 23. Taxes, licenses and fees:   |                                      |  |  |                             |                |
| 23.1 State and local insurance taxes .....                                | 0                                    | 0  | (67,741)                                   | 0                           | (67,741)       |
| 23.2 State premium taxes .....  | 0                                    | 0  | 13,463,861                                 | 0                           | 13,463,861     |
| 23.3 Regulatory authority licenses and fees .....                         | 0                                    | 0  | 128,515                                    | 0                           | 128,515        |
| 23.4 Payroll taxes .....  | 295,245                              | 61,738                                     | 716,514                                    | 0                           | 1,073,497      |
| 23.5 Other (excluding federal income and real estate taxes) .....         | 0                                    | 0  | 0  | 0                           | 0              |
| 24. Investment expenses not included elsewhere .....                      | 0                                    | 0  | 0  | 174,704                     | 174,704        |
| 25. Aggregate write-ins for expenses .....                                | 1,583,350                            | 380,773                                    | 1,470,591                                  | 0                           | 3,434,714      |
| 26. Total expenses incurred (Lines 1 to 25) .....                         | 15,188,641                           | 4,054,804                                  | 31,582,189                                 | 174,704                     | (a) 51,000,338 |
| 27. Less expenses unpaid December 31, current year .....                  | 315,721                              | 84,285                                     | 348,057                                    | 105,227                     | 853,290        |
| 28. Add expenses unpaid December 31, prior year .....                     | 273,205                              | 69,928                                     | 1,150,064                                  | 86,634                      | 1,579,831      |
| 29. Amounts receivable relating to uninsured plans, prior year .....      | 0                                    | 0  | 3,112,576                                  | 0                           | 3,112,576      |
| 30. Amounts receivable relating to uninsured plans, current year .....    | 0                                    | 0  | 463,023                                    | 0                           | 463,023        |
| 31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)      | 15,146,125                           | 4,040,447                                  | 29,734,643                                 | 156,111                     | 49,077,326     |
| <b>DETAILS OF WRITE-INS</b>   |                                      |  |  |                             |                |
| 2501. Sundry General Expenses .....                                       | 1,286,362                            | 307,473                                    | 1,619,316                                  | 0                           | 3,213,151      |
| 2502. Professional Fees/Consulting .....                                  | 181,911                              | 45,052                                     | 236,666                                    | 0                           | 463,629        |
| 2503. Information Technology .....  | 93,513                               | 23,160                                     | 121,661                                    | 0                           | 238,334        |
| 2598. Summary of remaining write-ins for Line 25 from overflow page ..... | 21,564                               | 5,088                                      | (507,052)                                  | 0                           | (480,400)      |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)              | 1,583,350                            | 380,773                                    | 1,470,591                                  | 0                           | 3,434,714      |

(a) Includes management fees of \$ ..... 28,886,534 to affiliates and \$ ..... 0 to non-affiliates.

**EXHIBIT OF NET INVESTMENT INCOME**

|   | 1                     | 2                  |
|---|-----------------------|--------------------|
|   | Collected During Year | Earned During Year |
| 1. U.S. government bonds .....  | (a) ..... 462,152     | ..... 505,852      |
| 1.1 Bonds exempt from U.S. tax .....  | (a) ..... 0           | ..... 0            |
| 1.2 Other bonds (unaffiliated) .....  | (a) ..... 6,458,001   | ..... 6,553,638    |
| 1.3 Bonds of affiliates .....   | (a) ..... 0           | ..... 0            |
| 2.1 Preferred stocks (unaffiliated) .....                                     | (b) ..... 0           | ..... 0            |
| 2.11 Preferred stocks of affiliates .....                                     | (b) ..... 0           | ..... 0            |
| 2.2 Common stocks (unaffiliated) .....  | ..... 0               | ..... 0            |
| 2.21 Common stocks of affiliates .....  | ..... 0               | ..... 0            |
| 3. Mortgage loans .....   | (c) ..... 0           | ..... 0            |
| 4. Real estate .....  | (d) ..... 0           | ..... 0            |
| 5. Contract Loans .....   | ..... 0               | ..... 0            |
| 6. Cash, cash equivalents and short-term investments .....                    | (e) ..... 8,680,768   | ..... 8,680,769    |
| 7. Derivative instruments .....   | (f) ..... 0           | ..... 0            |
| 8. Other invested assets .....  | ..... 0               | ..... 0            |
| 9. Aggregate write-ins for investment income .....                            | ..... 0               | ..... 0            |
| 10. Total gross investment income .....                                       | 15,600,921            | 15,740,259         |
| 11. Investment expenses .....   |                       | (g) ..... 174,704  |
| 12. Investment taxes, licenses and fees, excluding federal income taxes ..... |                       | (g) ..... 0        |
| 13. Interest expense .....  |                       | (h) ..... 0        |
| 14. Depreciation on real estate and other invested assets .....               |                       | (i) ..... 0        |
| 15. Aggregate write-ins for deductions from investment income .....           |                       | ..... 0            |
| 16. Total deductions (Lines 11 through 15) .....                              |                       | ..... 174,704      |
| 17. Net investment income (Line 10 minus Line 16) .....                       |                       | 15,565,555         |
| <b>DETAILS OF WRITE-INS</b>   |                       |                    |
| 0901. ....  |                       |                    |
| 0902. ....  |                       |                    |
| 0903. ....  |                       |                    |
| 0998. Summary of remaining write-ins for Line 9 from overflow page .....      | 0                     | 0                  |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....           | 0                     | 0                  |
| 1501. ....  |                       |                    |
| 1502. ....  |                       |                    |
| 1503. ....  |                       |                    |
| 1598. Summary of remaining write-ins for Line 15 from overflow page .....     |                       | 0                  |
| 1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....          |                       | 0                  |

- (a) Includes \$ .....225,852 accrual of discount less \$ ..... 1,416,200 amortization of premium and less \$ ..... 142,690 paid for accrued interest on purchases.
- (b) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... 0 paid for accrued dividends on purchases.
- (c) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... 0 paid for accrued interest on purchases.
- (d) Includes \$ ..... 0 for company's occupancy of its own buildings; and excludes \$ ..... 0 interest on encumbrances.
- (e) Includes \$ ..... 115,380 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... 0 paid for accrued interest on purchases.
- (f) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium.
- (g) Includes \$ ..... 0 investment expenses and \$ ..... 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ ..... 0 interest on surplus notes and \$ ..... 0 interest on capital notes.
- (i) Includes \$ .....0 depreciation on real estate and \$ .....0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

|   | 1  | 2                             | 3  | 4  | 5   |
|---|--|-------------------------------|--|--|---|
|   | Realized Gain (Loss)<br>On Sales or Maturity | Other Realized<br>Adjustments | Total Realized Capital<br>Gain (Loss)<br>(Columns 1 + 2) | Change in<br>Unrealized Capital<br>Gain (Loss) | Change in Unrealized<br>Foreign Exchange<br>Capital Gain (Loss) |
| 1. U.S. Government bonds .....  | 18,831                                       | 0                             | 18,831   | 0  | 0   |
| 1.1 Bonds exempt from U.S. tax .....  | 0  | 0                             | 0  | 0  | 0   |
| 1.2 Other bonds (unaffiliated) .....  | 475,320                                      | 0                             | 475,320  | 0  | 0   |
| 1.3 Bonds of affiliates .....   | 0  | 0                             | 0  | 0  | 0   |
| 2.1 Preferred stocks (unaffiliated) .....                                   | 0  | 0                             | 0  | 0  | 0   |
| 2.11 Preferred stocks of affiliates .....                                   | 0  | 0                             | 0  | 0  | 0   |
| 2.2 Common stocks (unaffiliated) .....                                      | 0  | 0                             | 0  | 0  | 0   |
| 2.21 Common stocks of affiliates .....                                      | 0  | 0                             | 0  | 0  | 0   |
| 3. Mortgage loans .....   | 0  | 0                             | 0  | 0  | 0   |
| 4. Real estate .....  | 0  | 0                             | 0  | 0  | 0   |
| 5. Contract loans .....   | 0  | 0                             | 0  | 0  | 0   |
| 6. Cash, cash equivalents and short-term investments .....                  | 0  | 0                             | 0  | 0  | 0   |
| 7. Derivative instruments .....   | 0  | 0                             | 0  | 0  | 0   |
| 8. Other invested assets .....  | 0  | 0                             | 0  | 0  | 0   |
| 9. Aggregate write-ins for capital gains (losses) .....                     | 0  | 0                             | 0  | 0  | 0   |
| 10. Total capital gains (losses) .....                                      | 494,151                                      | 0                             | 494,151  | 0  | 0   |
| <b>DETAILS OF WRITE-INS</b>   |  |                               |  |  |   |
| 0901. ....  |  |                               |  |  |   |
| 0902. ....  |  |                               |  |  |   |
| 0903. ....  |  |                               |  |  |   |
| 0998. Summary of remaining write-ins for Line 9 from<br>overflow page ..... | 0  | 0                             | 0  | 0  | 0   |
| 0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9,<br>above) .....      | 0  | 0                             | 0  | 0  | 0   |

**EXHIBIT OF NON-ADMITTED ASSETS**

|   | 1  | 2                                      | 3  |
|---|--|--|--|
|   | Current Year Total<br>Nonadmitted Assets | Prior Year Total<br>Nonadmitted Assets | Change in Total<br>Nonadmitted Assets<br>(Col. 2 - Col. 1) |
| 1. Bonds (Schedule D) .....   | 0  | 0                                      | 0  |
| 2. Stocks (Schedule D):   |  |  |  |
| 2.1 Preferred stocks .....  | 0  | 0                                      | 0  |
| 2.2 Common stocks .....   | 0  | 0                                      | 0  |
| 3. Mortgage loans on real estate (Schedule B):  |  |  |  |
| 3.1 First liens .....   | 0  | 0                                      | 0  |
| 3.2 Other than first liens.....   | 0  | 0                                      | 0  |
| 4. Real estate (Schedule A):  |  |  |  |
| 4.1 Properties occupied by the company .....  | 0  | 0                                      | 0  |
| 4.2 Properties held for the production of income.....   | 0  | 0                                      | 0  |
| 4.3 Properties held for sale .....  | 0  | 0                                      | 0  |
| 5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments<br>(Schedule DA) ..... | 0  | 0                                      | 0  |
| 6. Contract loans .....   | 0  | 0                                      | 0  |
| 7. Derivatives (Schedule DB) .....  | 0  | 0                                      | 0  |
| 8. Other invested assets (Schedule BA) .....  | 0  | 0                                      | 0  |
| 9. Receivables for securities .....   | 0  | 0                                      | 0  |
| 10. Securities lending reinvested collateral assets (Schedule DL) .....   | 0  | 0                                      | 0  |
| 11. Aggregate write-ins for invested assets .....   | 0  | 0                                      | 0  |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) .....   | 0  | 0                                      | 0  |
| 13. Title plants (for Title insurers only) .....  | 0  | 0                                      | 0  |
| 14. Investment income due and accrued .....   | 0  | 0                                      | 0  |
| 15. Premiums and considerations:  |  |  |  |
| 15.1 Uncollected premiums and agents' balances in the course of collection .....  | 42,177                                   | 9,401                                  | (32,776)   |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..                        | 0  | 0                                      | 0  |
| 15.3 Accrued retrospective premiums and contracts subject to redetermination .....                                      | 0  | 0                                      | 0  |
| 16. Reinsurance:  |  |  |  |
| 16.1 Amounts recoverable from reinsurers .....  | 0  | 0                                      | 0  |
| 16.2 Funds held by or deposited with reinsured companies .....  | 0  | 0                                      | 0  |
| 16.3 Other amounts receivable under reinsurance contracts .....   | 0  | 0                                      | 0  |
| 17. Amounts receivable relating to uninsured plans .....  | 0  | 0                                      | 0  |
| 18.1 Current federal and foreign income tax recoverable and interest thereon .....                                      | 0  | 0                                      | 0  |
| 18.2 Net deferred tax asset .....   | 0  | 0                                      | 0  |
| 19. Guaranty funds receivable or on deposit .....   | 0  | 0                                      | 0  |
| 20. Electronic data processing equipment and software .....   | 0  | 0                                      | 0  |
| 21. Furniture and equipment, including health care delivery assets .....  | 0  | 0                                      | 0  |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates .....  | 0  | 0                                      | 0  |
| 23. Receivable from parent, subsidiaries and affiliates .....   | 0  | 0                                      | 0  |
| 24. Health care and other amounts receivable .....  | 6,165,843                                | 3,251,229                              | (2,914,614)  |
| 25. Aggregate write-ins for other than invested assets .....  | 27,036                                   | 699                                    | (26,337)   |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts<br>(Lines 12 to 25) ..... | 6,235,056                                | 3,261,329                              | (2,973,727)  |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....                                       | 0  | 0                                      | 0  |
| 28. Total (Lines 26 and 27)   | 6,235,056                                | 3,261,329                              | (2,973,727)  |
| <b>DETAILS OF WRITE-INS</b>   |  |  |  |
| 1101. ....  |  |  |  |
| 1102. ....  |  |  |  |
| 1103. ....  |  |  |  |
| 1198. Summary of remaining write-ins for Line 11 from overflow page .....   | 0  | 0                                      | 0  |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)  | 0  | 0                                      | 0  |
| 2501. Miscellaneous Current Assets .....  | 26,375                                   | 0                                      | (26,375)   |
| 2502. Miscellaneous Receivables .....   | 461                                      | 0                                      | (461)  |
| 2503. Prepaid Commissions .....   | 200                                      | 0                                      | (200)  |
| 2598. Summary of remaining write-ins for Line 25 from overflow page .....   | 0  | 699                                    | 699  |
| 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)  | 27,036                                   | 699                                    | (26,337)   |

**EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY**

| Source of Enrollment   | Total Members at End of |                    |                     |                    |                   | 6<br>Current Year<br>Member Months |
|--|-------------------------|--------------------|---------------------|--------------------|-------------------|------------------------------------|
|  | 1<br>Prior Year         | 2<br>First Quarter | 3<br>Second Quarter | 4<br>Third Quarter | 5<br>Current Year |                                    |
| 1. Health Maintenance Organizations .....                                | 100,989                 | 103,080            | 103,903             | 101,163            | 95,355            | 1,221,560                          |
| 2. Provider Service Organizations .....                                  | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 3. Preferred Provider Organizations .....                                | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 4. Point of Service .....  | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 5. Indemnity Only .....  | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 6. Aggregate write-ins for other lines of business.....                  | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 7. Total   | 100,989                 | 103,080            | 103,903             | 101,163            | 95,355            | 1,221,560                          |
| <b>DETAILS OF WRITE-INS</b>  |                         |                    |                     |                    |                   |                                    |
| 0601. ....   |                         |                    |                     |                    |                   |                                    |
| 0602. ....   |                         |                    |                     |                    |                   |                                    |
| 0603. ....   |                         |                    |                     |                    |                   |                                    |
| 0698. Summary of remaining write-ins for Line 6 from overflow page ..... | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |
| 0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)             | 0                       | 0                  | 0                   | 0                  | 0                 | 0                                  |

**UNITEDHEALTHCARE OF NEW ENGLAND, INC.****NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS  
AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022****1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN****Organization and Operation**

UnitedHealthcare of New England, Inc. (the "Company"), licensed as a health maintenance organization, offers its enrollees a variety of managed care programs and products through contractual arrangements with health care providers. The Company is a wholly owned subsidiary of United HealthCare Services, Inc. a management corporation that provides services to the Company under the terms of a management agreement (the "Agreement"). United HealthCare Services, Inc. is a wholly owned subsidiary of UnitedHealth Group Incorporated. UnitedHealth Group Incorporated is a publicly held company trading on the New York Stock Exchange.

The Company was incorporated on November 14, 1984, as a health maintenance organization and operations commenced in December, 1984. The Company is certified as a health maintenance organization in six states. The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees.

The Company offers comprehensive commercial products to individual and employer groups. Each contract outlines the coverage provided and renewal provisions. Effective January 1, 2022, the Company began offering comprehensive commercial products in the State of Maine.

The Company has a contract with the State of Rhode Island and Providence Plantations, Department of Human Services, to provide health care services to Medicaid eligible beneficiaries in Rhode Island. The current contract is effective through June 30, 2024, and is subject to annual renewal provisions thereafter.

Effective January 1, 2022, the Company novated its Centers for Medicare and Medicaid Services ("CMS") contracts to affiliate, UnitedHealthcare of Wisconsin, Inc.

Effective January 1, 2023, the Company has a contract with the State of Rhode Island and Human Services Commission to provide Medicare services to Medicaid members who are dually eligible for Medicare.

**A. Accounting Practices**

The statutory basis financial statements (herein referred to as "financial statements") are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Business Regulation.

The Rhode Island Department of Business Regulation recognizes only statutory accounting practices, prescribed or permitted by the State of Rhode Island, for determining and reporting the financial condition and results of operations of a health maintenance organization, for determining its solvency under Rhode Island Insurance Law. The State of Rhode Island prescribes the use of the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures manual ("NAIC SAP") in effect for the accounting periods covered in the financial statements.

No significant differences exist between the practices prescribed or permitted by the State of Rhode Island and the NAIC SAP which materially affect the statutory basis net income (loss) and capital and surplus, as illustrated in the table below:

|   | SSAP # | F/S Page # | FS Line # | December 31,<br>2023  | December 31,<br>2022  |
|---|--------|------------|-----------|-----------------------|-----------------------|
| <b>Net Income (Loss)</b>  |        |            |           |                       |                       |
| (1) Company state basis (Page 4, Line 32, Columns 2 & 3)  | XXX    | XXX        | XXX       | \$ 31,711,537         | \$ 39,675,012         |
| (2) State prescribed practices that are an increase/(decrease) from NAIC SAP:<br>Not Applicable |        |            |           | —                     | —                     |
| (3) State permitted practices that are an increase/(decrease) from NAIC SAP:<br>Not Applicable  |        |            |           | —                     | —                     |
| (4) NAIC SAP (1 - 2 - 3 = 4)  | XXX    | XXX        | XXX       | <u>\$ 31,711,537</u>  | <u>\$ 39,675,012</u>  |
| <b>Capital and Surplus</b>  |        |            |           |                       |                       |
| (5) Company state basis (Page 3, Line 33, Columns 3 & 4)  | XXX    | XXX        | XXX       | \$ 230,506,163        | \$ 223,613,760        |
| (6) State prescribed practices that are an increase/(decrease) from NAIC SAP:<br>Not Applicable |        |            |           | —                     | —                     |
| (7) State permitted practices that are an increase/(decrease) from NAIC SAP:<br>Not Applicable  |        |            |           | —                     | —                     |
| (8) NAIC SAP (5 - 6 - 7 = 8)  | XXX    | XXX        | XXX       | <u>\$ 230,506,163</u> | <u>\$ 223,613,760</u> |

**B. Use of Estimates in the Preparation of the Financial Statements**

The preparation of these financial statements in conformity with the NAIC Annual Statement Instructions and the NAIC SAP include certain amounts that are based on the Company's estimates and judgments. These estimates require the Company to apply complex assumptions and judgments, often because the Company must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to hospital and medical benefits, claims unpaid, aggregate health policy reserves (including medical loss ratio ("MLR") rebates), aggregate health claim reserves, risk corridor, and risk adjustment estimates. The Company adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of net income (loss) in the period in which the estimate is adjusted.

**C. Accounting Policy**

**Basis of Presentation** — The Company prepares its financial statements on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Business Regulation. These statutory practices differ from accounting principles generally accepted in the United States of America ("GAAP").

Accounting policy disclosures that are required by the NAIC Annual Statement instructions are as follows:

- (1–2) Bonds are stated at book/adjusted carrying value if they meet NAIC designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of three or higher. The Company does not have any mandatory convertible securities or Securities Valuation Office of the NAIC ("SVO") identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds are valued and reported using market prices published by the SVO in accordance with the NAIC Valuation of Securities manual prepared by the SVO or an external pricing service;
- (3–4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;
- (6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets;
- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;
- (8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;
- (9) The Company holds no derivatives;
- (10) Premium Deficiency Reserves ("PDR") (inclusive of conversion reserves) and the related expenses are recognized when it is probable that expected future health care expenses, claims adjustment expenses ("CAE"), direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the financial statements. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, CAE and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as an increase in reserves for life and accident and health contracts in the financial statements in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the PDR calculation (see Note 30);
- (11) CAE are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc., in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and United HealthCare Services, Inc. is performed to determine the allocation between CAE and general administrative expenses ("GAE") to be reported in the financial statements. It is the responsibility of United HealthCare Services, Inc. to pay CAE in the event the Company ceases operations. The Company has recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in unpaid CAE in the financial statements. Management believes the amount of the liability for unpaid CAE as of December 31, 2023 is adequate to cover the Company's cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified;
- (12) The Company does not carry any fixed assets in the financial statements;

- (13) Health care and other amounts receivable consist of pharmacy rebates receivable estimated based on the most currently available data from the Company's claims processing systems and from data provided by the Company's affiliated pharmaceutical benefit manager, OptumRx, Inc. Health care and other amounts receivable also include receivables for capitation arrangements, amounts due to the Company for provider advances and claim overpayments to providers, hospitals and other health care organizations risk share receivables and State stop loss receivables. Health care and other amounts receivable are considered nonadmitted assets under the NAIC SAP if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the financial statements (see Note 28).

The Company has also deemed the following to be significant accounting policies:

## **ASSETS**

### ***Cash and Invested Assets***

- Bonds include securities with a maturity of greater than one year at the time of purchase;
- Cash equivalents include securities that have original maturity dates of three months or less from the date of acquisition. Cash equivalents also consist of the Company's share of a qualified cash pool sponsored and administered by United HealthCare Services, Inc. The investment pool is recorded at cost or book/adjusted carrying value depending on the composition of the underlying securities. Interest income from the pool accrues daily to participating members based upon ownership percentage. Cash equivalents, excluding money-market funds, are reported at cost or book/adjusted carrying value depending on the nature of the underlying security, which approximates fair value. Money-market funds are reported at fair value or net asset value ("NAV") as a practical expedient;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. These gains and losses are reported as net realized capital gains (losses) less capital gains tax in the financial statements;
- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in net realized capital gains (losses) less taxes, in the financial statements. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for loan-backed securities for periods subsequent to the loss recognition (see Note 5).

## **OTHER ASSETS**

- **Premiums and Considerations** — The Company reports uncollected premium balances from its insured members, groups, CMS, and State Medicaid agency as premiums and considerations in the financial statements. Uncollected premium balances that are over 90 days past due, with the exception of amounts due from government insured plans, are considered nonadmitted assets. In addition to those balances, current balances are also considered nonadmitted if the corresponding balance greater than 90 days past due is deemed more than inconsequential. Premiums and considerations also include amounts for commercial risk adjustment receivables as defined in Section 1343 of the Affordable Care Act ("ACA"), CMS risk corridor receivables, Medicaid performance guarantee receivables and the Rhode Island risk share program's estimated accrued retrospective premiums. The Company has a risk share arrangement with the Rhode Island Executive Office of Health and Human Services ("EOHHS");

Premium adjustments for the CMS risk corridor, and Rhode Island risk share programs are accounted for as premium adjustments subject to retrospectively rated features (see Note 24). Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and Medicaid pay for performance programs are accounted for as premium adjustments subject to redetermination (see Note 24).

## **LIABILITIES**

- **Claims Unpaid and Aggregate Health Claim Reserves** — Claims unpaid and aggregate health claim reserves include claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied, centrally controlled, and automated. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The Company estimates such liabilities for physician, hospital, and other medical cost disputes based upon an analysis of potential outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. The Company did not change actuarial methods during 2023 and 2022. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of December 31, 2023; however, actual payments may differ from those established estimates.



The Company contracts with hospitals, physicians, and other providers of health care under capitated or discounted fee for service arrangements, including a hospital per diem to provide medical care services to enrollees. Some of these contracts are with related parties (see Note 10). Capitated providers are at risk for the cost of medical care services provided to the Company's enrollees; however, the Company is ultimately responsible for the provision of services to its enrollees should the capitated provider be unable to provide the contracted services.

- **Accrued Medical Incentive Pool and Bonus Amounts** — The Company has agreements with certain provider groups that provide for the establishment of a pool which includes monthly premiums payable and the disbursement of funds for medical services. Any surplus in the pool is shared by the Company and the provider group based upon a predetermined risk-sharing percentage and the liability is included in accrued medical incentive pool and bonus amounts in the financial statements. The Company also has incentive and bonus arrangements with providers that are based on quality, utilization, and/or various health outcome measures. The estimated amount due to providers that meet the established metrics is included in accrued medical incentive pool and bonus amounts in the financial statements.
- **Aggregate Health Policy Reserves** — The Company establishes a liability, net of ceded reinsurance, for estimated accrued retrospective and redetermination premiums due from the Company based on the actuarial method and assumptions for each respective contract. Aggregate health policy reserves include commercial risk adjustment payables as defined in Section 1343 of the ACA, CMS risk adjustment payables for the Medicare Plans, estimated MLR rebates payable on the comprehensive commercial and Medicare Plans, and the Rhode Island risk share program's with EOHHS. Premium adjustments for the estimated MLR rebates are accounted for as premium adjustments subject to retrospectively rated features (see Note 24).

Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and EOHHS risk adjustment are accounted for as premium adjustments subject to redetermination (see Note 24).

- **Aggregate write-ins for other liabilities** — The Company recorded a liability for dividend declared to its parent which remained unpaid as of December 31, 2023 (see Note 13).

#### **CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS**

- **Restricted Cash Reserves** — The Company is in compliance with various states regulatory deposit requirements as of December 31, 2023 and 2022, respectively, for qualification purposes as a domestic and foreign insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).
- **Minimum Capital and Surplus** — Under the laws of the State of Rhode Island, the Rhode Island Department of Business Regulation requires the Company to maintain a minimum capital and surplus equal to \$2,500,000.

Risk-based capital ("RBC") is a regulatory tool for measuring the minimum amount of capital appropriate for a health maintenance organization to support its overall business operations in consideration of its size and risk profile. The Company has an arrangement with the State to maintain above 275% of the RBC Authorized Control Level. Under the laws of the State of Massachusetts, the Division of Insurance requires the company to maintain a minimum capital and surplus equal to \$1,000,000 or 2% of the first \$150,000,000 annual premium revenue and 1% of annual premium revenue in excess of \$150,000,000 or an amount equal to the sum of 3 months uncovered health care expenditures as reported on the most recent financial statement filed with the commissioner or an amount equal to the sum of 8 percent of annual health care expenditures except those paid on a capitated basis or managed hospital payment basis as reported on the most recent financial statement filed with the commissioner; and 4 percent of annual hospital expenditures paid on a managed hospital payment basis as reported on the most recent financial statement filed with the commissioner.

The Company is also subject to minimum capital and surplus requirements in other states where it is licensed to do business.

The Company is in compliance with the minimum required capital and surplus amounts where it is licensed to do business, as of December 31, 2023 and 2022.

#### **STATEMENTS OF OPERATIONS**

- **Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits** — Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. Net premium income is shown net of reinsurance premiums paid and reinsurance premiums incurred but not paid in the financial statements. The corresponding change in unearned premium from year to year is reflected as a change in unearned premium reserves and reserve for rate credits in the financial statements.

Comprehensive commercial health plans with MLRs on fully insured products, as calculated under the definitions in the ACA and implementing regulations, that fall below certain targets are required to rebate ratable portions of premiums annually. The Company classifies changes to the estimated rebates and retrospective premium adjustments as change in unearned premium reserves and reserve for rate credits in the financial statements (see Note 24). In addition, pursuant to Section 1343 of the ACA, the Company records premium adjustments for changes to the commercial risk adjustment balances which are reflected in change in unearned premium

reserves and reserve for rate credits and net premium income, respectively, in the financial statements (see Note 24).

The Medicaid plan is subject to experience rated rebates, including MLRs and risk corridor programs, risk adjustment program, and performance guarantees based on various utilization measures. The Company records premium adjustments for the changes to the estimates for experience rated rebates and risk corridor programs which are reflected in change in unearned premium reserves and reserve for rate credits and for the risk adjustment program and performance guarantees which are reflected in net premium income in the financial statements (see Note 24). Net premium income also includes amounts paid by State and Federal governments on a per member basis in exchange for the provision and administration of medical benefits under the Medicaid, home nursing risk-sharing payments, high-dollar risk pool payments, and maternity payments. Premiums are contractual and are recognized in the coverage period in which members are entitled to receive services, except in the case of maternity payments. Maternity income is billed on contractual rates and recognized as income as each birth case is identified by the Company.

- **Total Hospital and Medical Expenses** — Total hospital and medical expenses include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

Total hospital and medical expenses also include amounts incurred for incentive pool, withhold adjustments, and bonus amounts that are based on the underlying contractual provisions with the respective providers. In addition, adjustments to claims unpaid estimates and aggregate health claim reserves are reflected in the period once the change in estimate is identified and included in total hospital and medical expenses in the financial statements.

- **General Administrative Expenses** — General expenses that have been paid as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general administrative expenses. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to United HealthCare Services, Inc. in exchange for administrative and management services. Costs for items not included within the scope of the Agreement are directly expensed as incurred. State income taxes are also a component of GAE. A detailed review of the administrative expenses of the Company and United HealthCare Services, Inc. is performed to determine the allocation between CAE and GAE to be reported in the financial statements.

#### **OTHER**

- **Vulnerability Due to Certain Concentrations** — The Company is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of the Company's existing products in new markets and offerings of new products, both of which may restrict the Company's ability to expand its business.

The Company has no commercial customers that individually exceed 10% of total direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, for the years ended December 31, 2023 and 2022.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from members and CMS related to the Medicare Plans as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 2% and 0% as of December 31, 2023 and (3)% and (9)% as of December 31, 2022, respectively.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from the State of Rhode Island, Department of Human Services, as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 97% and 97% as of December 31, 2023 and 102% and 66% as of December 31, 2022, respectively.

#### **Recently Issued Accounting Standards**

In May 2023, the NAIC revised Statement of Statutory Accounting Principles ("SSAP") No. 34, *Investment Income Due or Accrued* for the updated presentation of investment income (see Note 7), effective for annual 2023. The Company adopted the revision on the effective date.

The Company reviewed all other recently issued guidance in 2023 and 2022 that has been adopted for 2023 or subsequent years' implementation and has determined that none of the items would have a significant impact to the financial statements.

#### **D. Going Concern**

The Company has the ability and will continue to operate for a period of time sufficient to carry out its commitments, obligations and business objectives.

#### **2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS**

No changes in accounting principles or corrections of errors have been recorded during the years ended December 31, 2023 and 2022.

#### **3. BUSINESS COMBINATIONS AND GOODWILL**

**A–E.** The Company was not party to a business combination during the years ended December 31, 2023 and 2022 and does not carry goodwill in its financial statements.

**4. DISCONTINUED OPERATIONS****A. Discontinued Operation Disposed of or Classified as Held for Sale**

(1–4) The Company did not have any discontinued operations disposed of or classified as held for sale during 2023 and 2022.

**B. Change in Plan of Sale of Discontinued Operation — Not applicable.****C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.****D. Equity Interest Retained in the Discontinued Operation after Disposal — Not applicable.****5. INVESTMENTS**

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were \$493,788 and \$0, respectively, for 2023 and nil for 2022. The net realized gains and losses are included in net realized capital gains (losses) less taxes in the financial statements. Total proceeds on the sale of long-term investments were \$14,125,738 and \$0 in 2023 and 2022 respectively.

As of December 31, 2023 and 2022, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of \$175,053,114 and \$142,575,805 respectively, are disclosed in the table below:

| 2023                                  |                                 |  |   |   |                       |
|---------------------------------------|---------------------------------|--|---|---|-----------------------|
|                                       | Book/Adjusted<br>Carrying Value | Gross<br>Unrecognized<br>Unrealized<br>Gains | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>< 1 Year | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>> 1 Year | Fair<br>Value         |
| U.S. government and agency securities | \$ 67,177,679                   | \$ 85,575                                    | \$ 100,829  | \$ 4,556,069  | \$ 62,606,356         |
| State and agency municipal securities | 28,288,185                      | 70,004                                       | 113,686   | 401,911   | 27,842,592            |
| City and county municipal securities  | 27,289,842                      | 129,734                                      | 11,117  | 721,259   | 26,687,200            |
| Corporate debt securities             | 141,126,374                     | 294,297                                      | 34,971  | 13,164,979  | 128,220,721           |
| Total bonds                           | <u>\$ 263,882,080</u>           | <u>\$ 579,610</u>                            | <u>\$ 260,603</u>   | <u>\$ 18,844,218</u>                                      | <u>\$ 245,356,869</u> |

| 2023               |                                 |  |   |   |                       |
|--------------------|---------------------------------|--|---|---|-----------------------|
|                    | Book/Adjusted<br>Carrying Value | Gross<br>Unrecognized<br>Unrealized<br>Gains | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>< 1 Year | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>> 1 Year | Fair<br>Value         |
| Less than one year | \$ 13,133,745                   | \$ 91  | \$ 84   | \$ 153,692  | \$ 12,980,060         |
| One to five years  | 68,528,923                      | 48,855                                       | 12,664  | 3,267,235   | 65,297,879            |
| Five to ten years  | 99,763,139                      | 311,202                                      | 165,774   | 8,735,474   | 91,173,093            |
| Over ten years     | 82,456,273                      | 219,462                                      | 82,081  | 6,687,817   | 75,905,837            |
| Total bonds        | <u>\$ 263,882,080</u>           | <u>\$ 579,610</u>                            | <u>\$ 260,603</u>   | <u>\$ 18,844,218</u>                                      | <u>\$ 245,356,869</u> |

| 2022                                  |                                 |  |   |   |                       |
|---------------------------------------|---------------------------------|--|---|---|-----------------------|
|                                       | Book/Adjusted<br>Carrying Value | Gross<br>Unrecognized<br>Unrealized<br>Gains | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>< 1 Year | Gross<br>Unrecognized<br>Unrealized<br>Losses<br>> 1 Year | Fair<br>Value         |
| U.S. government and agency securities | \$ 57,637,585                   | \$ 40,555                                    | \$ 2,956,266  | \$ 2,608,217  | \$ 52,113,657         |
| State and agency municipal securities | 29,244,641                      | 116,023                                      | 581,123   | 99,334  | 28,680,207            |
| City and county municipal securities  | 23,567,962                      | 36,833                                       | 406,187   | 664,411   | 22,534,197            |
| Corporate debt securities             | 146,150,473                     | 46,948                                       | 4,691,684   | 12,942,928  | 128,562,809           |
| Total bonds                           | <u>\$ 256,600,661</u>           | <u>\$ 240,359</u>                            | <u>\$ 8,635,260</u>                                       | <u>\$ 16,314,890</u>                                      | <u>\$ 231,890,870</u> |

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of \$85,493,507 and fair value of \$78,842,462.

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2023 and 2022:

|                                       | 2023                 |                                      |                       |                                      |                       |                                      |
|---------------------------------------|----------------------|--------------------------------------|-----------------------|--------------------------------------|-----------------------|--------------------------------------|
|                                       | < 1 Year             |                                      | > 1 Year              |                                      | Total                 |                                      |
|                                       | Fair Value           | Gross Unrecognized Unrealized Losses | Fair Value            | Gross Unrecognized Unrealized Losses | Fair Value            | Gross Unrecognized Unrealized Losses |
| U.S. government and agency securities | \$ 8,800,239         | \$ 100,829                           | \$ 42,929,004         | \$ 4,556,069                         | \$ 51,729,243         | \$ 4,656,898                         |
| State and agency municipal securities | 7,401,905            | 113,686                              | 11,428,691            | 401,911                              | 18,830,596            | 515,597                              |
| City and county municipal securities  | 4,570,325            | 11,117                               | 11,654,142            | 721,259                              | 16,224,467            | 732,376                              |
| Corporate debt securities             | 3,017,129            | 34,971                               | 107,963,348           | 13,164,979                           | 110,980,477           | 13,199,950                           |
| Total bonds                           | <u>\$ 23,789,598</u> | <u>\$ 260,603</u>                    | <u>\$ 173,975,185</u> | <u>\$ 18,844,218</u>                 | <u>\$ 197,764,783</u> | <u>\$ 19,104,821</u>                 |

|                                       | 2022                  |                                      |                      |                                      |                       |                                      |
|---------------------------------------|-----------------------|--------------------------------------|----------------------|--------------------------------------|-----------------------|--------------------------------------|
|                                       | < 1 Year              |                                      | > 1 Year             |                                      | Total                 |                                      |
|                                       | Fair Value            | Gross Unrecognized Unrealized Losses | Fair Value           | Gross Unrecognized Unrealized Losses | Fair Value            | Gross Unrecognized Unrealized Losses |
| U.S. government and agency securities | \$ 34,028,147         | \$ 2,956,266                         | \$ 16,432,989        | \$ 2,608,217                         | \$ 50,461,136         | \$ 5,564,483                         |
| State and agency municipal securities | 19,347,542            | 581,123                              | 300,666              | 99,334                               | 19,648,208            | 680,457                              |
| City and county municipal securities  | 12,459,708            | 406,187                              | 2,496,126            | 664,411                              | 14,955,834            | 1,070,598                            |
| Corporate debt securities             | 60,030,595            | 4,691,684                            | 66,683,138           | 12,942,928                           | 126,713,733           | 17,634,612                           |
| Total bonds                           | <u>\$ 125,865,992</u> | <u>\$ 8,635,260</u>                  | <u>\$ 85,912,919</u> | <u>\$ 16,314,890</u>                 | <u>\$ 211,778,911</u> | <u>\$ 24,950,150</u>                 |

The unrecognized unrealized losses on investments in U.S. government and agency securities, State and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2023 and 2022, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the State and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an other-than-temporary impairment ("OTTI"), such as the length of time and extent to which fair value has been less than cost, the financial condition, and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company's intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of these reviews, no OTTI was recorded by the Company as of December 31, 2023 and 2022, respectively.

**A-C.** The Company has no mortgage loans, real estate loans, restructured debt, or reverse mortgages. The Company also has no real estate property occupied by the Company, real estate property held for the production of income, or real estate property held for sale.

#### **D. Loan-Backed Securities**

- (1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.
- (2) The Company did not recognize any OTTI on loan-backed securities as of December 31, 2023.
- (3) The Company did not have any loan-backed securities with OTTI to report by CUSIP as of December 31, 2023 or 2022.

- (4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of December 31, 2023 and 2022:

|  | <b>2023</b>  |
|--|--------------|
| The aggregate amount of unrealized losses:                             |              |
| 1. Less than 12 months   | \$ 30,200    |
| 2. 12 months or longer   | 6,818,177    |
| The aggregate related fair value of securities with unrealized losses: |              |
| 1. Less than 12 months   | 4,629,541    |
| 2. 12 months or longer   | 55,142,529   |
|  | <b>2022</b>  |
| The aggregate amount of unrealized losses:                             |              |
| 1. Less than 12 months   | \$ 3,426,118 |
| 2. 12 months or longer   | 4,898,154    |
| The aggregate related fair value of securities with unrealized losses: |              |
| 1. Less than 12 months   | 41,903,559   |
| 2. 12 months or longer   | 26,161,939   |

- (5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principal and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows and the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of December 31, 2023, the unrealized loss on any security that the Company classified as intent to sell was not material to the Company's investment portfolio. Any other securities in an unrealized loss position as of December 31, 2023, the Company considers to be temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions** — Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.
- J. Real Estate** — Not applicable.
- K. Low-Income Housing Tax Credits** — Not applicable.

**L. Restricted Assets —**

(1) Restricted assets, including pledged securities as of December 31, 2023 and 2022, are presented below:

| Restricted Asset Category  | 1   | 2   | 3                                | 4   | 5  | 6   | 7  |
|--|---|---|----------------------------------|---|--|---|--|
|  | Total Gross (Admitted & Nonadmitted) Restricted From Current Year | Total Gross (Admitted & Nonadmitted) Restricted From Prior Year | Increase/ (Decrease) (1 Minus 2) | Total Current Year Nonadmitted Restricted | Total Current Year Admitted Restricted (1 minus 4) | Gross (Admitted & Nonadmitted) Restricted to Total Assets (a) | Admitted Restricted to Total Admitted Assets (b) |
| a. Subject to contractual obligation for which liability is not shown            | \$ —  | \$ —  | \$ —                             | \$ —                                      | \$ —   | —%  | —%   |
| b. Collateral held under security lending agreements                             | —   | —   | —                                | —   | —  | —%  | —%   |
| c. Subject to repurchase agreements  | —   | —   | —                                | —   | —  | —%  | —%   |
| d. Subject to reverse repurchase agreements                                      | —   | —   | —                                | —   | —  | —%  | —%   |
| e. Subject to dollar repurchase agreements                                       | —   | —   | —                                | —   | —  | —%  | —%   |
| f. Subject to dollar reverse repurchase agreements                               | —   | —   | —                                | —   | —  | —%  | —%   |
| g. Placed under option contracts   | —   | —   | —                                | —   | —  | —%  | —%   |
| h. Letter stock or securities restricted as to sale—excluding FHLB capital stock | —   | —   | —                                | —   | —  | —%  | —%   |
| i. FHLB capital stock  | —   | —   | —                                | —   | —  | —%  | —%   |
| j. On deposit with states  | 1,491,526   | 3,382,338   | (1,890,812)                      | —   | 1,491,526  | <1%   | <1%  |
| k. On deposit with other regulatory bodies                                       | —   | —   | —                                | —   | —  | —%  | —%   |
| l. Pledged as collateral to FHLB (including assets backing funding agreements)   | —   | —   | —                                | —   | —  | —%  | —%   |
| m. Pledged as collateral not captured in other categories                        | —   | —   | —                                | —   | —  | —%  | —%   |
| n. Other restricted assets   | —   | —   | —                                | —   | —  | —%  | —%   |
| <b>o. Total restricted assets</b>  | <b>\$ 1,491,526</b>   | <b>\$ 3,382,338</b>   | <b>\$ (1,890,812)</b>            | <b>\$ —</b>                               | <b>\$ 1,491,526</b>                                | <b>&lt;1%</b>   | <b>&lt;1%</b>                                    |

(a) Column 1 divided by Asset Page, Column 1, Line 28

(b) Column 5 divided by Asset Page, Column 3, Line 28

(2–4) The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2023 or 2022.

**M. Working Capital Finance Investments —** Not applicable.

**N. Offsetting and Netting of Assets and Liabilities**

The Company does not have any offsetting or netting of assets and liabilities as it relates to derivatives, repurchase and reverse repurchase agreements, and securities borrowing and securities lending activities.

**O. 5GI Securities**

The Company does not have any investments with an NAIC designation of 5GI as of December 31, 2023 and 2022.

**P. Short Sales —** Not applicable.

**Q. Prepayment Penalty and Acceleration Fees**

The Company does not have any prepayment penalty and acceleration fees as of December 31, 2023.

**R. Reporting Entity’s Share of Cash Pool by Asset Type**

The Company’s investment in the qualified cash pool is reported in cash equivalents. The Company’s investment in the qualified cash pool is \$160,985,013 and \$126,425,395 as of December 31, 2023 and 2022, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of December 31, 2023:

| Asset Type                 | Percent Share |
|----------------------------|---------------|
| (1) Cash                   | 8%            |
| (2) Cash Equivalents       | 59%           |
| (3) Short-Term Investments | 33%           |
| (4) Total                  | 100%          |

**6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES**

**A–B.** The Company has no investments in joint ventures, partnerships, or limited liability companies that exceed 10% of admitted assets and did not recognize any impairment write-down for its investments in joint ventures, partnerships, and limited liability companies during the statement periods.

**7. INVESTMENT INCOME**

- A.** The Company excludes all investment income due and accrued amounts that are over 90 days past due from the financial statements.
- B.** There were no investment income amounts excluded from the financial statements.
- C.** The following table illustrates the gross interest income due and accrued, nonadmitted interest income due and accrued, and admitted interest income due and accrued amounts as of December 31, 2023 and 2022:

|                                  |    | <b>2023</b> |
|----------------------------------|----|-------------|
| Interest Income Due And Accrued: |    |             |
| 1. Gross                         | \$ | 1,900,626   |
| 2. Nonadmitted                   |    | —           |
| 3. Admitted                      |    | 1,900,626   |

|                                  |    | <b>2022</b> |
|----------------------------------|----|-------------|
| Interest Income Due And Accrued: |    |             |
| 1. Gross                         | \$ | 1,750,862   |
| 2. Nonadmitted                   |    | —           |
| 3. Admitted                      |    | 1,750,862   |

- D.** The Company has no aggregated deferred interest as of December 31, 2023 or 2022.
- E.** The Company has no paid-in-kind interest as of December 31, 2023 or 2022.

**8. DERIVATIVE INSTRUMENTS**

**A–B.** The Company has no derivative instruments.

**9. INCOME TAXES**

On August 16, 2022, the U.S. government enacted the Inflation Reduction Act. Included in the Inflation Reduction Act was a new corporate alternative minimum tax ("CAMT"). The CAMT is calculated as 15% of adjusted financial statement income and applies only to corporations with average annual adjusted financial statement income in excess of \$1 billion for three prior taxable years. The applicability of the CAMT is determined on a tax-controlled group basis.

The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group which constitutes a controlled group. The controlled group's expected federal income tax will exceed the CAMT and therefore the Company does not expect to be subject to the minimum tax.

The controlled group has not made any material modifications to the methodology used to project the CAMT.

**A. Deferred Tax Asset/Liability**

- (1)** The components of the net deferred tax asset/(liability) at December 31, 2023 and 2022 are as follows:

|  | <b>2023</b>         |                |                            | <b>2022</b>         |                |                            | <b>Change</b>                   |                                |                            |
|--|---------------------|----------------|----------------------------|---------------------|----------------|----------------------------|---------------------------------|--------------------------------|----------------------------|
|  | <b>1</b>            | <b>2</b>       | <b>3</b>                   | <b>4</b>            | <b>5</b>       | <b>6</b>                   | <b>7</b>                        | <b>8</b>                       | <b>9</b>                   |
|  | <b>Ordinary</b>     | <b>Capital</b> | <b>(Col 1+2)<br/>Total</b> | <b>Ordinary</b>     | <b>Capital</b> | <b>(Col 4+5)<br/>Total</b> | <b>(Col 1 - 4)<br/>Ordinary</b> | <b>(Col 2 - 5)<br/>Capital</b> | <b>(Col 7+8)<br/>Total</b> |
| (a) Gross deferred tax assets  | \$ 4,467,245        | \$ —           | \$ 4,467,245               | \$ 3,347,449        | \$ —           | \$ 3,347,449               | \$ 1,119,796                    | \$ —                           | \$ 1,119,796               |
| (b) Statutory valuation allowance adjustments                              | —                   | —              | —                          | —                   | —              | —                          | —                               | —                              | —                          |
| (c) Adjusted gross deferred tax assets (1a - 1b)                           | 4,467,245           | —              | 4,467,245                  | 3,347,449           | —              | 3,347,449                  | 1,119,796                       | —                              | 1,119,796                  |
| (d) Deferred tax assets nonadmitted  | —                   | —              | —                          | —                   | —              | —                          | —                               | —                              | —                          |
| (e) Subtotal net admitted deferred tax asset (1c - 1d)                     | 4,467,245           | —              | 4,467,245                  | 3,347,449           | —              | 3,347,449                  | 1,119,796                       | —                              | 1,119,796                  |
| (f) Deferred tax liabilities   | 723,919             | —              | 723,919                    | 58,716              | —              | 58,716                     | 665,203                         | —                              | 665,203                    |
| (g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f) | <u>\$ 3,743,326</u> | <u>\$ —</u>    | <u>\$ 3,743,326</u>        | <u>\$ 3,288,733</u> | <u>\$ —</u>    | <u>\$ 3,288,733</u>        | <u>\$ 454,593</u>               | <u>\$ —</u>                    | <u>\$ 454,593</u>          |

(2) The components of the adjusted gross deferred tax assets admissibility calculation under SSAP No. 101, *Income Taxes*, are as follows:

|   | 2023                |             |                     | 2022                |             |                     | Change               |                     |                     |
|---|---------------------|-------------|---------------------|---------------------|-------------|---------------------|----------------------|---------------------|---------------------|
|   | 1                   | 2           | 3                   | 4                   | 5           | 6                   | 7                    | 8                   | 9                   |
| Admission Calculation Components SSAP No. 101   | Ordinary            | Capital     | (Col 1 + 2) Total   | Ordinary            | Capital     | (Col 4 + 5) Total   | (Col 1 - 4) Ordinary | (Col 2 - 5) Capital | (Col 7 + 8) Total   |
| (a) Federal income taxes paid in prior years recoverable through loss carrybacks  | \$ 4,467,245        | \$ —        | \$ 4,467,245        | \$ 3,347,449        | \$ —        | \$ 3,347,449        | \$ 1,119,796         | \$ —                | \$ 1,119,796        |
| (b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below) | —                   | —           | —                   | —                   | —           | —                   | —                    | —                   | —                   |
| 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date  | —                   | —           | —                   | —                   | —           | —                   | —                    | —                   | —                   |
| 2. Adjusted gross deferred tax assets allowed per limitation threshold  | XXX                 | XXX         | 34,014,426          | XXX                 | XXX         | 33,048,754          | XXX                  | XXX                 | 965,672             |
| (c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities  | —                   | —           | —                   | —                   | —           | —                   | —                    | —                   | —                   |
| (d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))  | <u>\$ 4,467,245</u> | <u>\$ —</u> | <u>\$ 4,467,245</u> | <u>\$ 3,347,449</u> | <u>\$ —</u> | <u>\$ 3,347,449</u> | <u>\$ 1,119,796</u>  | <u>\$ —</u>         | <u>\$ 1,119,796</u> |

(3) The ratio percentage and adjusted capital and surplus used to determine the recovery period and threshold limitations for the admissibility calculation are presented below:

|  | 2023           | 2022           |
|--|----------------|----------------|
| (a) Ratio percentage used to determine recovery period and threshold limitation amount                                 | >300%          | >300%          |
| (b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above | \$ 226,762,837 | \$ 220,325,027 |

(4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2023 and 2022 is presented below:

| Impact of Tax-Planning Strategies  | 2023         |         | 2022         |         | Change               |                     |
|--|--------------|---------|--------------|---------|----------------------|---------------------|
|  | 1            | 2       | 3            | 4       | 5                    | 6                   |
|  | Ordinary     | Capital | Ordinary     | Capital | (Col 1 - 3) Ordinary | (Col 2 - 4) Capital |
| (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage. |              |         |              |         |                      |                     |
| 1. Adjusted gross DTAs amount from Note 9A1(c)   | \$ 4,467,245 | \$ —    | \$ 3,347,449 | \$ —    | \$ 1,119,796         | \$ —                |
| 2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies                    | — %          | — %     | — %          | — %     | — %                  | — %                 |
| 3. Net admitted adjusted gross DTAs amount from Note 9A1(e)  | \$ 4,467,245 | \$ —    | \$ 3,347,449 | \$ —    | \$ 1,119,796         | \$ —                |
| 4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies   | — %          | — %     | — %          | — %     | — %                  | — %                 |
| (b) Does the Company's tax-planning strategies include the use of reinsurance?   |              |         | Yes          |         | No                   | X                   |

**B. Unrecognized Deferred Tax Liabilities**

(1-4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2023 and 2022.



**C. Significant Components of Income Taxes**

(1) The current federal income taxes incurred for the years ended December 31, 2023 and 2022 are as follows:

|   | 1                   | 2                    | 3                     |
|---|---------------------|----------------------|-----------------------|
|   | 2023                | 2022                 | (Col 1 - 2)<br>Change |
| 1. Current income tax   |                     |                      |                       |
| (a) Federal   | \$ 7,910,172        | \$ 10,061,523        | \$ (2,151,351)        |
| (b) Foreign   | —                   | —                    | —                     |
| (c) Subtotal (1a+1b)  | 7,910,172           | 10,061,523           | (2,151,351)           |
| (d) Federal income tax on net capital gains (losses)              | 103,772             | 56,637               | 47,135                |
| (e) Utilization of capital loss carryforwards                     | —                   | —                    | —                     |
| (f) Other   | —                   | —                    | —                     |
| (g) Total federal and foreign income taxes incurred (1c+1d+1e+1f) | <u>\$ 8,013,944</u> | <u>\$ 10,118,160</u> | <u>\$ (2,104,216)</u> |

(2-4) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2023 and 2022, are as follows:

|  | 1                   | 2                   | 3                     |
|--|---------------------|---------------------|-----------------------|
|  | 2023                | 2022                | (Col 1 - 2)<br>Change |
| 2. Deferred tax assets:                                    |                     |                     |                       |
| (a) Ordinary:  |                     |                     |                       |
| (1) Discounting of unpaid losses                           | \$ 219,962          | \$ 145,164          | \$ 74,798             |
| (2) Unearned premium reserve                               | 2,252,747           | 2,517,429           | (264,682)             |
| (3) Policyholder reserves                                  | —                   | —                   | —                     |
| (4) Investments  | —                   | —                   | —                     |
| (5) Deferred acquisition costs                             | —                   | —                   | —                     |
| (6) Policyholder dividends accrual                         | —                   | —                   | —                     |
| (7) Fixed assets   | —                   | —                   | —                     |
| (8) Compensation and benefits accrual                      | —                   | —                   | —                     |
| (9) Pension accrual  | —                   | —                   | —                     |
| (10) Receivables — nonadmitted                             | 1,994,094           | 684,733             | 1,309,361             |
| (11) Net operating loss carryforward                       | —                   | —                   | —                     |
| (12) Tax credit carryforward                               | —                   | —                   | —                     |
| (13) Other   | 442                 | 123                 | 319                   |
| (99) Subtotal (sum of 2a1 through 2a13)                    | 4,467,245           | 3,347,449           | 1,119,796             |
| (b) Statutory valuation allowance adjustment               | —                   | —                   | —                     |
| (c) Nonadmitted  | —                   | —                   | —                     |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) | 4,467,245           | 3,347,449           | 1,119,796             |
| (e) Capital:   |                     |                     |                       |
| (1) Investments  | —                   | —                   | —                     |
| (2) Net capital loss carryforward                          | —                   | —                   | —                     |
| (3) Real estate  | —                   | —                   | —                     |
| (4) Other  | —                   | —                   | —                     |
| (99) Subtotal (2e1+2e2+2e3+2e4)                            | —                   | —                   | —                     |
| (f) Statutory valuation allowance adjustment               | —                   | —                   | —                     |
| (g) Nonadmitted  | —                   | —                   | —                     |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g)  | —                   | —                   | —                     |
| (i) Admitted deferred tax assets (2d + 2h)                 | 4,467,245           | 3,347,449           | 1,119,796             |
| 3. Deferred tax liabilities:                               |                     |                     |                       |
| (a) Ordinary:  |                     |                     |                       |
| (1) Investments  | —                   | —                   | —                     |
| (2) Fixed assets   | —                   | —                   | —                     |
| (3) Deferred and uncollected premium                       | —                   | —                   | —                     |
| (4) Policyholder reserves                                  | —                   | —                   | —                     |
| (5) Other  | 723,919             | 58,716              | 665,203               |
| (99) Subtotal (3a1+3a2+3a3+3a4+3a5)                        | 723,919             | 58,716              | 665,203               |
| (b) Capital:   |                     |                     |                       |
| (1) Investments  | —                   | —                   | —                     |
| (2) Real estate  | —                   | —                   | —                     |
| (3) Other  | —                   | —                   | —                     |
| (99) Subtotal (3b1+3b2+3b3)                                | —                   | —                   | —                     |
| (c) Deferred tax liabilities (3a99 + 3b99)                 | 723,919             | 58,716              | 665,203               |
| 4. Net deferred tax assets/liabilities (2i - 3c)           | <u>\$ 3,743,326</u> | <u>\$ 3,288,733</u> | <u>\$ 454,593</u>     |

The Company assessed the potential realization of the gross deferred tax asset and as a result no statutory valuation allowance was required and no allowance was established as of December 31, 2023 and 2022.

- D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income after capital gains tax and before federal income taxes. A summarization of the significant items causing this difference as of December 31, 2023 and 2022 is as follows:

|   | 2023                |                    | 2022                |                    |
|---|---------------------|--------------------|---------------------|--------------------|
|   | Amount              | Effective Tax Rate | Amount              | Effective Tax Rate |
| Tax provision at the federal statutory rate | \$ 8,342,351        | 21 %               | \$ 10,456,566       | 21 %               |
| Tax-exempt interest                         | (190,722)           | <(1)               | (176,976)           | —                  |
| Tax effect of nonadmitted assets            | (624,483)           | (2)                | (365,095)           | —                  |
| Prior year true-up                          | 32,205              | <1                 | —                   | —                  |
| Total statutory income taxes                | <u>\$ 7,559,351</u> | <u>19 %</u>        | <u>\$ 9,914,495</u> | <u>21 %</u>        |
| Federal income taxes incurred               | \$ 7,910,172        | 21 %               | \$ 10,061,523       | 21 %               |
| Capital gains tax                           | 103,772             | <1                 | 56,637              | —                  |
| Change in net deferred income tax           | (454,593)           | (1)                | (203,665)           | —                  |
| Total statutory income taxes                | <u>\$ 7,559,351</u> | <u>19 %</u>        | <u>\$ 9,914,495</u> | <u>21 %</u>        |

- E. At December 31, 2023, the Company had no net operating loss carryforwards.

Current federal income taxes recoverable of \$9,978,261 and \$918,497 as of December 31, 2023 and 2022, respectively, are included in the financial statements. Federal income taxes paid, net of refunds were \$17,073,708 and \$10,124,630 in 2023 and 2022, respectively.

Federal income taxes incurred of \$7,981,740 and \$10,182,707 for 2023 and 2022, respectively, are available for recoupment in the event of future net losses.

The Company has not admitted any aggregate amounts of deposits that are included within Section 6603 (“Deposits made to suspend running of interest on potential underpayments, etc.”) of the Internal Revenue Service (“IRS”) Code.

- F. The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group Incorporated. The entities included within the consolidated return are included in the NAIC Statutory Statement Schedule Y - Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group Incorporated pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal return of UnitedHealth Group Incorporated. UnitedHealth Group Incorporated currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The U.S. IRS has completed exams on UnitedHealth Group Incorporated’s consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group Incorporated’s 2017 through 2020 tax returns are under review by the IRS under its Compliance Assurance Program. With the exception of a few states, UnitedHealth Group Incorporated is no longer subject to income tax examinations prior to the 2014 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2015 and forward.
- G. **Tax Contingencies** — Not applicable.
- H. **Repatriation Transition Tax** — Not applicable.
- I. **Alternative Minimum Tax Credit** — Not applicable.

## 10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

- A–B. In the ordinary course of business, the Company contracts with several affiliates to provide a wide variety of services to the Company’s members. These agreements are filed with and approved by the Rhode Island Department of Business Regulation according to Management’s understanding of the current requirements and standards. Within the confines of the applicable filed and approved agreements (including subsequent amendments thereto), the amount and types of services provided by these affiliated entities can change year over year.

United HealthCare Services, Inc. maintains a private short-term investment pool in which affiliated companies may participate (see Note 1). At December 31, 2023 and 2022, the Company’s portion was \$160,985,013 and \$126,425,395, respectively and is included in cash equivalents in the financial statements.

The Company has a tax-sharing agreement with UnitedHealth Group Incorporated (see Note 9).

The Company declared dividend of \$22,300,000 on December 4, 2023, to its parent which remained unpaid as of December 31, 2023. The Company paid dividend \$20,600,000 in 2022, to its parent (see Note 13).

The Company held a \$50,000,000 subordinated revolving credit agreement with UnitedHealth Group Incorporated at an interest rate of London InterBank Offered Rate (“LIBOR”) plus a margin of 0.50%. This credit agreement was subordinate to the extent it did not conflict with any credit facility held by either party. This agreement was terminated effective December 31, 2022, due to the elimination of LIBOR as an interest rate benchmark in 2023. No amounts were outstanding under the line of credit as

of December 31, 2022. This agreement was replaced with a new agreement, which was effective as of January 1, 2023.

Effective January 1, 2023, the Company entered into a new subordinated revolving credit agreement with United HealthCare Services, Inc. at an interest rate of Fed Funds Target rate – Upper Bound plus 50 basis points. The Company’s subordinated credit agreement value is below the holding company threshold of the lesser of 3% of admitted assets or 25% of capital and surplus. This agreement has replaced the previous agreement, which was held to an interest rate of London InterBank Offered Rate plus a margin of 50 basis points.

Effective April 1, 2023, the Company entered into a new subordinated revolving credit agreement with United HealthCare Services Inc. at an interest rate of Fed Funds Target rate – Upper Bound plus 50 basis point. The Company’s subordinated credit agreement limit equals \$50,000,000. This agreement has been approved by the Rhode Island Department of Business Regulation and has replaced the previous agreement, which was held to the holding company threshold of the lesser of 3% of admitted assets or 25% of capital and surplus.

The Company has entered into reinsurance agreements with an affiliated entity (see Note 23).

- C. The Company has no material related party transactions that meet the disclosure requirements pursuant to SSAP No. 25, Affiliates and Other Related Parties (“SSAP No. 25”) that are not included in NAIC Statutory Statement Schedule Y—Part 2 Summary Of Insurer’s Transactions With Any Affiliates.
- D. At December 31, 2023 and 2022, the Company reported \$3,831,523 and \$16,490,844, respectively, as receivables from parent, subsidiaries and affiliates, which are included in the financial statements. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.
- E. The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month; (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in GAE, CAE, and hospital and medical expenses in the financial statements. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2023 and 2022, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

|                                  | <b>2023</b>    |    | <b>2022</b> |
|----------------------------------|----------------|----|-------------|
| OptumRx Inc.                     | \$ 136,656,574 | \$ | 138,262,350 |
| United Behavioral Health         | 120,865,317    |    | 107,418,076 |
| United HealthCare Services, Inc. | 30,342,017     |    | 29,921,034  |

OptumRx Inc. provides services that may include, but are not limited to, administrative services related to pharmacy management and pharmacy claims processing for enrollees, manufacturer rebate administration, pharmacy incentive services, specialty drug pharmacy services, durable medical equipment services including orthotics and prosthetics and personal health products catalogues showing the healthcare products and benefit credits enrollees needed to redeem the respective products.

United Behavioral Health provides services related to mental health and substance abuse treatment.

United HealthCare Services, Inc. provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for United HealthCare Services, Inc. to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, treasury and investment functions, claims adjudication and payment, benefit administration, disease management, health care decision support, medical management, credentialing, preventative health services, utilization management reporting and expenses incurred for new business that will be effective in the subsequent year.

The Company has premium payments that are received and claim payments and direct expenses such as broker commissions, Rhode Island Department of Business Regulation exam fees, ACA assessments and premium taxes that are processed and paid by an affiliated UnitedHealth Group Incorporated entity. Premiums, claims, and direct expenses applicable to the Company are settled at regular intervals throughout the month via the intercompany settlement process and any amounts outstanding are reflected in receivables from parent, subsidiaries, and affiliates and payable amounts due to parent, subsidiaries, and affiliates, in the financial statements.

- F. The Company’s parent provides a guarantee to the Company to provide the necessary capital contributions so the Company does not fall below the 275% RBC Authorized Control Level as required by the State.
- G. The Company is part of an insurance holding company system with UnitedHealth Group Incorporated as the ultimate parent. Management believes that the Company’s transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.
- H. The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.
- I. The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.
- J. The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.

- K. The Company does not have any investments in foreign insurance subsidiaries.
- L. The Company does not hold any investments in a downstream noninsurance holding company.
- M. The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.
- N. The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.
- O. The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships, and limited liability companies in which the Company's share of losses exceeds the investment.

**11. DEBT**

- A–B. The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2023 and 2022.

**12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS**

- A–I. The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, or compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of United HealthCare Services, Inc., which provides services to the Company under the terms of the Agreement (see Note 10).

**13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS**

- A–B. The Company has 100 shares authorized and 10 shares issued and outstanding of no par value common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, United HealthCare Services, Inc.
- C. Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Rhode Island Department of Business Regulation.
- D. On December 4, 2023, the Company declared an ordinary cash dividend of \$22,300,000 to United HealthCare Service, Inc., which remains unpaid as of December 31, 2023. The dividend required no approval and is reported as an accrued liability and as a reduction to unassigned funds (surplus) in the financial statements. The dividend was paid on January 2, 2024. The Company also paid a ordinary cash dividend of \$20,600,000 in 2022 which required no approval and was recorded as a reduction to unassigned funds (surplus) in the financial statements.
- E. The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- F. There are no restrictions placed on the Company's unassigned funds (surplus).
- G. The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- H. The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- I. The Company does not have any special surplus funds.
- J. The portion of unassigned funds (surplus), excluding the net income (loss), and dividends, represented (or reduced) by each item below is as follows:

|  | <b>2023</b> |                    | <b>2022</b>        |
|--|-------------|--------------------|--------------------|
| Unrealized capital gains (losses) on investments | \$          | —                  | \$ 153,352         |
| Net deferred income taxes                        |             | 3,743,326          | 3,288,733          |
| Nonadmitted assets                               |             | <u>(6,235,056)</u> | <u>(3,261,329)</u> |
| Total  | <u>\$</u>   | <u>(2,491,730)</u> | <u>\$ 180,756</u>  |

- K–M. The Company does not have any outstanding surplus notes and has never been a party to a quasi-reorganization.

**14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS**

**A. Contingent Commitments**

The Company has no contingent commitments.

**B. Assessments**

The Company is not aware of any guaranty fund assessments or premium tax offsets, potential or accrued, that could have a material financial effect on the operations of the entity.

**C. Gain Contingencies**

The Company is not aware of any gain contingencies that should be disclosed in the financial statements.

**D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits — Not applicable.**

**E. Joint and Several Liabilities — Not applicable.**

**F. All Other Contingencies**

The Company's business is regulated at the federal, state, and local levels. The laws and rules governing the Company's business and interpretations of those laws and rules are subject to frequent change. Broad latitude is given to the agencies administering those regulations. Further, the Company must obtain and maintain regulatory approvals to market and sell many of its products.

The Company has been, or is currently involved, in various governmental investigations, audits and reviews. These include routine, regular, and special investigations, audits and reviews by CMS, State insurance and health and welfare departments and other governmental authorities. The Company cannot reasonably estimate the range of loss, if any, that may result from any material government investigations, audits and reviews in which it is currently involved given the inherent difficulty in predicting regulatory action, fines and penalties, if any, and the various remedies and levels of judicial review available to the Company in the event of an adverse finding.

Because of the nature of its businesses, the Company is frequently made party to a variety of legal actions and regulatory inquiries, including class actions and suits brought by members, care providers, consumer advocacy organizations, customers, and regulators, relating to the Company's businesses, including management and administration of health benefit plans and other services.

The Company records liabilities for its estimates of probable costs resulting from these matters where appropriate. Estimates of costs resulting from legal and regulatory matters involving the Company are inherently difficult to predict, particularly where the matters involve: indeterminate claims for monetary damages or may involve fines, penalties or punitive damages; present novel legal theories or represent a shift in regulatory policy; involve a large number of claimants or regulatory bodies; are in the early stages of the proceedings; or could result in a change in business practices. Accordingly, the Company is often unable to estimate the losses or ranges of losses for those matters where there is a reasonable possibility, or it is probable that a loss may be incurred. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect on the financial statements of the Company.

The Company routinely evaluates the collectability of all receivable amounts included in the financial statements. Impairment reserves are established for those amounts where collectability is uncertain. Based on the Company's past experience, exposure related to uncollectible balances and the potential of loss for those balances not currently reserved for is not material to the Company's statutory basis financial condition.

There are no other assets that the Company considers to be impaired at December 31, 2023 and 2022, except as disclosed in Note 5.

**15. LEASES**

**A–B.** According to the Agreement between the Company and United HealthCare Services, Inc. (see Note 10), operating leases for the rental of office facilities and equipment are the responsibility of United HealthCare Services, Inc. Fees associated with the lease agreements are included as a component of the Company's management fee.

**16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK**

**(1–4)** The Company does not hold any financial instruments with off-balance-sheet risk or have any concentrations of credit risk.

**17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES**

**A–C.** The Company did not participate in any transfer of receivables, financial assets, or wash sales.

**18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS**

**A–B.** The Company has no operations from Administrative Services Only Contracts or Administrative Services Contracts in 2023 and 2022.

**C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract**

The Medicare Part D program is a partially insured plan. The Company recorded a receivable of \$463,023 and \$2,518,735 at December 31, 2023 and 2022, respectively, for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a payable of \$127,228 and \$536,619 at December 31, 2023 and 2022, respectively, for the Medicare Part D coverage gap discount program. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively, in the financial statements.

The Company's Medicaid contract with the State includes provisions for various types of enhanced payments to participating providers. Funds are received from the State and the Company subsequently disburses these funds to providers as directed by the State. There is no risk to the Company as a result of these pass-through payments. The Company recorded a receivable of \$0 and \$593,841 as of December 31, 2023 and December 31, 2022, respectively and also a payable of \$928,296 and \$925,200 as of December 31, 2023 and 2022, respectively. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans in the financial statements for the additional pass-through payments to be made to providers.

#### **19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS**

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2023 and 2022.

#### **20. FAIR VALUE MEASUREMENTS**

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

*Level 1* — Quoted (unadjusted) prices for identical assets in active markets.

*Level 2* — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets;
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.);
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.);
- Inputs that are derived principally from or corroborated by other observable market data.

*Level 3* — Unobservable inputs that cannot be corroborated by observable market data.

The estimated fair values of bonds and cash equivalents (collectively "investment holdings") are based on quoted market prices, where available. The Company obtains one price for each security primarily from a third-party pricing service ("pricing service"), which generally uses quoted prices or other observable inputs for the determination of fair value. The pricing service normally derives the security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, non-binding broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds. As the Company is responsible for the determination of fair value, it performs quarterly analyses on the prices received from the pricing service to determine whether the prices are reasonable estimates of fair value. Specifically, the Company compares the prices received from the pricing service to a secondary pricing source, prices reported by its custodian, its investment consultant, and third-party investment advisors. Additionally, the Company compares changes in the reported market values and returns to relevant market indices to test the reasonableness of the reported prices. The Company's internal price verification procedures and review of fair value methodology documentation provided by independent pricing services have not historically resulted in an adjustment in the prices obtained from the pricing service.

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest-level input that is significant to the fair value measurement in its entirety. The Company's assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

**A. Fair Value**

**(1) Fair Value Measurements at Reporting Date**

The following tables present information about the Company's financial assets that are measured and reported at fair value at December 31, 2023 and 2022, in the financial statements according to the valuation techniques the Company used to determine their fair values:

| Description for Each Class of Asset or Liability | December 31, 2023     |             |             |                       |                       |
|--|-----------------------|-------------|-------------|-----------------------|-----------------------|
|  | (Level 1)             | (Level 2)   | (Level 3)   | Net Asset Value (NAV) | Total                 |
| a. Assets at fair value:                         |                       |             |             |                       |                       |
| Perpetual preferred stock:                       |                       |             |             |                       |                       |
| Industrial and misc                              | \$ —                  | \$ —        | \$ —        | \$ —                  | \$ —                  |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total perpetual preferred stocks                 | —                     | —           | —           | —                     | —                     |
| Bonds:   |                       |             |             |                       |                       |
| U.S. governments                                 | —                     | —           | —           | —                     | —                     |
| Industrial and misc                              | —                     | —           | —           | —                     | —                     |
| Hybrid securities                                | —                     | —           | —           | —                     | —                     |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total bonds                                      | —                     | —           | —           | —                     | —                     |
| Common stock:                                    |                       |             |             |                       |                       |
| Industrial and misc                              | —                     | —           | —           | —                     | —                     |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total common stock                               | —                     | —           | —           | —                     | —                     |
| Derivative assets:                               |                       |             |             |                       |                       |
| Interest rate contracts                          | —                     | —           | —           | —                     | —                     |
| Foreign exchange contracts                       | —                     | —           | —           | —                     | —                     |
| Credit contracts                                 | —                     | —           | —           | —                     | —                     |
| Commodity futures contracts                      | —                     | —           | —           | —                     | —                     |
| Commodity forward contracts                      | —                     | —           | —           | —                     | —                     |
| Total derivatives                                | —                     | —           | —           | —                     | —                     |
| Money-market funds                               | 12,891,563            | —           | —           | —                     | 12,891,563            |
| Qualified cash pool                              | 160,985,013           | —           | —           | —                     | 160,985,013           |
| Separate account assets                          | —                     | —           | —           | —                     | —                     |
| Total assets at fair value/NAV                   | <u>\$ 173,876,576</u> | <u>\$ —</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ 173,876,576</u> |
| b. Liabilities at fair value:                    |                       |             |             |                       |                       |
| Derivative liabilities                           | \$ —                  | \$ —        | \$ —        | \$ —                  | \$ —                  |
| Total liabilities at fair value                  | <u>\$ —</u>           | <u>\$ —</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ —</u>           |



| Description for Each Class of Asset or Liability | December 31, 2022     |             |             |                       |                       |
|--|-----------------------|-------------|-------------|-----------------------|-----------------------|
|  | (Level 1)             | (Level 2)   | (Level 3)   | Net Asset Value (NAV) | Total                 |
| a. Assets at fair value:                         |                       |             |             |                       |                       |
| Perpetual preferred stock:                       |                       |             |             |                       |                       |
| Industrial and misc                              | \$ —                  | \$ —        | \$ —        | \$ —                  | \$ —                  |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total perpetual preferred stocks                 | —                     | —           | —           | —                     | —                     |
| Bonds:   |                       |             |             |                       |                       |
| U.S. governments                                 | —                     | —           | —           | —                     | —                     |
| Industrial and misc                              | —                     | —           | —           | —                     | —                     |
| Hybrid securities                                | —                     | —           | —           | —                     | —                     |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total bonds                                      | —                     | —           | —           | —                     | —                     |
| Common stock:                                    |                       |             |             |                       |                       |
| Industrial and misc                              | —                     | —           | —           | —                     | —                     |
| Parent, subsidiaries, and affiliates             | —                     | —           | —           | —                     | —                     |
| Total common stock                               | —                     | —           | —           | —                     | —                     |
| Derivative assets:                               |                       |             |             |                       |                       |
| Interest rate contracts                          | —                     | —           | —           | —                     | —                     |
| Foreign exchange contracts                       | —                     | —           | —           | —                     | —                     |
| Credit contracts                                 | —                     | —           | —           | —                     | —                     |
| Commodity futures contracts                      | —                     | —           | —           | —                     | —                     |
| Commodity forward contracts                      | —                     | —           | —           | —                     | —                     |
| Total derivatives                                | —                     | —           | —           | —                     | —                     |
| Money-market funds                               | 16,258,915            | —           | —           | —                     | 16,258,915            |
| Qualified cash pool                              | 126,425,395           | —           | —           | —                     | 126,425,395           |
| Separate account assets                          | —                     | —           | —           | —                     | —                     |
| Total assets at fair value/NAV                   | <u>\$ 142,684,310</u> | <u>\$ —</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ 142,684,310</u> |
| b. Liabilities at fair value:                    |                       |             |             |                       |                       |
| Derivative liabilities                           | \$ —                  | \$ —        | \$ —        | \$ —                  | \$ —                  |
| Total liabilities at fair value                  | <u>\$ —</u>           | <u>\$ —</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ —</u>           |

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.
- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2023 or 2022.
- (4) The Company has no investments reported with a fair value hierarchy of Level 2 or Level 3 and therefore has no valuation technique to disclose.
- (5) The Company has no derivative assets and liabilities to disclose.

**B. Fair Value Combination — Not applicable.**

**C. Aggregate Fair Value Hierarchy**

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2023 and 2022 is presented in the table below:

| December 31, 2023                     |                       |                       |                       |                       |             |                       |                                  |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------|-----------------------|----------------------------------|
| Type of Financial Instrument          | Aggregate Fair Value  | Admitted Assets       | (Level 1)             | (Level 2)             | (Level 3)   | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
| U.S. government and agency securities | \$ 62,606,356         | \$ 67,177,678         | \$ 15,030,520         | \$ 47,575,836         | \$ —        | \$ —                  | \$ —                             |
| State and agency municipal securities | 27,842,592            | 28,288,185            | —                     | 27,842,592            | —           | —                     | —                                |
| City and county municipal securities  | 26,687,200            | 27,289,842            | —                     | 26,687,200            | —           | —                     | —                                |
| Corporate debt securities             | 128,220,721           | 141,126,375           | —                     | 128,220,721           | —           | —                     | —                                |
| Cash equivalents                      | 175,074,835           | 175,074,835           | 175,074,835           | —                     | —           | —                     | —                                |
| Total bonds and cash equivalents      | <u>\$ 420,431,704</u> | <u>\$ 438,956,915</u> | <u>\$ 190,105,355</u> | <u>\$ 230,326,349</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ —</u>                      |

| December 31, 2022                     |                       |                       |                       |                       |             |                       |                                  |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------|-----------------------|----------------------------------|
| Type of Financial Instrument          | Aggregate Fair Value  | Admitted Assets       | (Level 1)             | (Level 2)             | (Level 3)   | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
| U.S. government and agency securities | \$ 52,113,657         | \$ 57,637,585         | \$ 11,633,824         | \$ 40,479,833         | \$ —        | \$ —                  | \$ —                             |
| State and agency municipal securities | 28,680,207            | 29,244,641            | —                     | 28,680,207            | —           | —                     | —                                |
| City and county municipal securities  | 22,534,197            | 23,567,962            | —                     | 22,534,197            | —           | —                     | —                                |
| Corporate debt securities             | 128,562,809           | 146,150,473           | —                     | 128,562,809           | —           | —                     | —                                |
| Cash equivalents                      | 142,684,310           | 142,684,310           | 142,684,310           | —                     | —           | —                     | —                                |
| Total bonds and cash equivalents      | <u>\$ 374,575,180</u> | <u>\$ 399,284,971</u> | <u>\$ 154,318,134</u> | <u>\$ 220,257,046</u> | <u>\$ —</u> | <u>\$ —</u>           | <u>\$ —</u>                      |

**D. Not Practicable to Estimate Fair Value** — Not applicable.

**E. Investments Measured Using the NAV Practical Expedient** — Not applicable.

**21. OTHER ITEMS****A. Unusual or Infrequent Items**

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2023 and 2022.

**B. Troubled Debt Restructuring: Debtors**

The Company has no troubled debt restructurings as of December 31, 2023 and 2022.

**C. Other Disclosures**

The Company does not have any amounts not recorded in the financial statements that represent segregated funds held for others. The Company also does not have any exposures related to forward commitments that are not derivative instruments.

**D. Business Interruption Insurance Recoveries**

The Company has not received any business interruption insurance recoveries during 2023 and 2022.

**E. State Transferable and Non-transferable Tax Credits**

The Company has no transferable or non-transferable state tax credits.

**F. Sub-Prime Mortgage-Related Risk Exposure**

(1) The investment policy for the Company limits investments in loan-backed securities, which includes sub-prime issuers. Further, the policy limits investments in private-issuer mortgage securities to 10% of the portfolio, which also includes sub-prime issuers. The exposure to unrealized losses on sub-prime issuers is due to changes in market prices. There are no realized losses due to not receiving anticipated cash flows. The investments covered have an NAIC designation of 1 or 2.

(2) The Company has no direct exposure through investments in sub-prime mortgage loans.

(3) The Company has no direct exposure through other investments.

(4) The Company has no underwriting exposure to sub-prime mortgage risk through mortgage guaranty or financial guaranty insurance coverage.

**G. Retained Assets**

The Company does not have any retained asset accounts for beneficiaries.

**H. Insurance-Linked Securities Contracts**

As of December 31, 2023, the Company is not aware of any possible proceeds of insurance-linked securities.

**I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy — Not applicable.**

**22. EVENTS SUBSEQUENT**

Subsequent events have been evaluated through March 1, 2024 which is the date these financial statements were available for issuance.

**TYPE I — Recognized Subsequent Events**

Any material Type I events subsequent to December 31, 2023, have been recognized in the financial statements and corresponding disclosures.

**TYPE II — Non-Recognized Subsequent Events**

There are no material non-recognized Type II events that require disclosure.

**23. REINSURANCE**

**Reinsurance Agreements** — In the normal course of business, the Company seeks to reduce potential losses that may arise from catastrophic events that cause unfavorable underwriting results by reinsuring certain levels of such risk with affiliated and other nonaffiliated reinsurers. The Company remains primarily liable as the direct insurer on all risks reinsured.

The Company has a reinsurance agreement with UnitedHealthcare Insurance Company, an affiliate of the Company, through which 60% of earned comprehensive commercial member premiums, hospital and medical expenses, and operating expenses are transferred to UnitedHealthcare Insurance Company. Reinsurance premiums of \$2,663,251 and \$3,371,883 for the years ended December 31, 2023 and 2022, respectively, were netted against net premium income in the financial statements. Reinsurance recoveries of \$2,541,864 and \$1,841,547 for the years ended December 31, 2023 and 2022, respectively, are included in net reinsurance recoveries in the financial statements. The Company transferred GAE and CAE of \$611,108 and \$426,573 in 2023 and 2022, respectively, to UnitedHealthcare Insurance Company, under this agreement. The Company recorded receivables related to changes in reserve estimates that includes changes related to medical loss ratio rebates of \$(82,143) and \$114,155 in 2023 and 2022, respectively, which are netted against claims unpaid within the financial statements. The Company recorded paid claim receivables related to this agreement, including payments made for the medical loss ratio rebates of \$180,949 and \$228,136 in 2023 and 2022, respectively, which are included in amounts recoverable from reinsurers within the financial statements. The Company recorded ceded reserves for provider incentives of \$8,743 and \$21,839 in 2023 and 2022, respectively, which is included in accrued medical incentive pool and bonus amounts in the financial statements. The agreement also provides insolvency-only protection for its enrollees. Fees related to this agreement, which are calculated based on a percentage of earned premiums, of \$699,117 and \$666,433 in 2023 and 2022, respectively, are netted against net premium income in the financial statements. This agreement also provides for reserve cap protection. Reinsurance contracts do not relieve the Company from its obligations to policyholders. Failure of reinsurers to honor their obligations could result in losses to the Company.

The Company also has a reinsurance agreement for its Medicaid product with UnitedHealthcare Insurance Company. Under the provisions of the contract, the reinsurer indemnifies the Company for 80% of all eligible inpatient services in excess of \$300,000 per Medicaid member during each contract year. The Company ceded premiums of \$1,505,163 in 2023 and \$1,488,014 in 2022 to UnitedHealthcare Insurance Company under this agreement. Reinsurance recoveries of \$1,451,927 and \$4,067,815 as of December 31, 2023 and 2022, respectively, are included in net reinsurance recoveries in the financial statements.

The Company recorded receivables related to changes in reserve estimates that includes changes related to medical loss ratio rebates of \$1,377,540 and \$0 in 2023 and 2022, respectively, which are netted against claims unpaid within the financial statements.

The effect of both internal and external reinsurance agreements outlined above on net premium income, hospital and medical expenses, GAE and CAE is presented below:

|  | 2023                  | 2022                  |
|--|-----------------------|-----------------------|
| Premiums:  |                       |                       |
| Direct   | \$ 691,025,739        | \$ 699,320,025        |
| Ceded  | 4,867,531             | 5,526,330             |
| Net premium income   | <u>\$ 686,158,208</u> | <u>\$ 693,793,695</u> |
| Hospital and medical expenses:                                     |                       |                       |
| Direct   | \$ 633,208,265        | \$ 569,794,875        |
| Ceded  | 4,316,558             | 5,909,362             |
| Net hospital and medical expenses                                  | <u>\$ 628,891,707</u> | <u>\$ 563,885,513</u> |
| General Administrative Expenses and Claims Adjustment Expenses:    |                       |                       |
| Direct   | \$ 51,436,742         | \$ 51,483,067         |
| Ceded  | 611,108               | 426,573               |
| Net General Administrative Expenses and Claims Adjustment Expenses | <u>\$ 50,825,634</u>  | <u>\$ 51,056,494</u>  |

The Company recognized reinsurance recoveries related to internal and external reinsurance agreements of \$4,316,558 and \$5,909,362 in 2023 and 2022, respectively, which are recorded as net reinsurance recoveries in the financial statements. In addition, reinsurance recoverables related to internal reinsurance agreements of \$180,949 and \$228,136 for paid losses are recorded as amounts recoverable from reinsurers and \$1,610,445 and \$111,717 for unpaid losses are recorded as a reduction to claims unpaid in 2023 and 2022, respectively, in the financial statements.

**A. Ceded Reinsurance Report**

**Section 1 — General Interrogatories**

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?  
Yes ( ) No (X)
- (2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or any other person not primarily engaged in the insurance business?  
Yes ( ) No (X)

**Section 2 — Ceded Reinsurance Report — Part A**

- (1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?  
Yes ( ) No (X)
- (2) Does the reporting entity have any reinsurance agreements in effect that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?  
Yes ( ) No (X)

**Section 3 — Ceded Reinsurance Report — Part B**

- (1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.  
  
The Company estimates there should be no aggregate reduction in surplus for termination of all reinsurance agreements as of December 31, 2023.
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?  
Yes ( ) No (X)

**B. Uncollectible Reinsurance** — During 2023 and 2022, there were no uncollectible reinsurance recoverables.

**C. Commutation of Ceded Reinsurance** — There was no commutation of reinsurance in 2023 or 2022.

**D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation** — Not applicable.

**E. Reinsurance Credit**

- (1) The Company has no ceding reinsurance contracts subject to Appendix A-791 – *Life and Health Reinsurance Agreements* (“A-791”) that includes a provision which limits the reinsurer’s assumption of significant risk.
- (2) The Company has no ceding reinsurance contracts not subject to A-791, for which reinsurance accounting was applied and which include a provision that limits the reinsurer’s assumption of risk.
- (3) The Company’s reinsurance contracts do not contain features which result in delays in payment in form or in fact.
- (4) The Company has not reflected a reinsurance accounting credit for any assumption reinsurance contracts not subject to Appendix A-791 and not yearly renewable term, which meet the risk transfer requirements of SSAP No. 61R, *Life, Deposit-Type, and Accident and Health Reinsurance* (“SSAP No. 61R”).
- (5) The Company did not cede any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract during the period covered by these financial statements, for which the statutory accounting treatment and GAAP accounting treatment were not the same.

- (6) The Company's ceded reinsurance contracts which are not subject to A-791 and not yearly renewable term reinsurance, are treated the same for GAAP and statutory accounting principles.

**24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION**

- A. The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.
- B. Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations and aggregate health policy reserves in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.
- C. Pursuant to the ACA, the Company's commercial is subject to retrospectively rated features based on the actual MLR experienced on the commercial of business and redetermination features for premium adjustments for changes to each member's health scores based on guidelines determined by the ACA. The total amount of direct premiums written for which a portion is subject to the retrospectively rated and redetermination features are \$4,418,756 and \$5,603,980 for commercial and representing <1% and <1% for commercial of total direct premiums written as of December 31, 2023 and December 31, 2022, respectively.

CMS has released the final Medicaid Managed Care Rule which is subject to each State's administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum medical loss ratio requirement. Pursuant to the regulations, premiums associated with the Company's Medicaid line of business is subject to retrospectively rated features based on the actual MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$670,527,497 and \$716,195,709, representing 97% and 102% of total direct premiums written as of December 31, 2023 and December 31, 2022, respectively.

- D. The Company is required to maintain specific minimum medical loss ratios on the comprehensive commercial lines of business. Effective January 1, 2022, the Company novated its Medicare contract (see Note 1) and is no longer subject to minimum medical loss ratios requirements. Prior to the novation, the Company was required to maintain specific minimum medical loss ratios on the Medicare line of business.

The following table discloses the minimum MLR rebate liability for the comprehensive commercial and Medicare lines of business which is included in aggregate health policy reserves in the financial statements for the years ended December 31, 2023 and 2022:

|   | 1          | 2                    | 3                    | 4                             | 5          |
|---|------------|----------------------|----------------------|-------------------------------|------------|
|   | Individual | Small Group Employer | Large Group Employer | Other Categories with Rebates | Total      |
| Prior reporting year                    |            |                      |                      |                               |            |
| (1) Medical loss ratio rebates incurred | \$ —       | \$ 56,751            | \$ —                 | \$ —                          | \$ 56,751  |
| (2) Medical loss ratio rebates paid     | —          | —                    | —                    | 25,373,835                    | 25,373,835 |
| (3) Medical loss rebates unpaid         | —          | 56,751               | —                    | —                             | 56,751     |
| (4) Plus reinsurance assumed amounts    | XXX        | XXX                  | XXX                  | XXX                           | —          |
| (5) Less reinsurance ceded amounts      | XXX        | XXX                  | XXX                  | XXX                           | 34,051     |
| (6) Rebates unpaid net of reinsurance   | XXX        | XXX                  | XXX                  | XXX                           | 22,700     |
| Current reporting year-to-date          |            |                      |                      |                               |            |
| (7) Medical loss ratio rebates incurred | —          | (56,751)             | —                    | —                             | (56,751)   |
| (8) Medical loss ratio rebates paid     | —          | —                    | —                    | —                             | —          |
| (9) Medical loss rebates unpaid         | —          | —                    | —                    | —                             | —          |
| (10) Plus reinsurance assumed amounts   | XXX        | XXX                  | XXX                  | XXX                           | —          |
| (11) Less reinsurance ceded amounts     | XXX        | XXX                  | XXX                  | XXX                           | —          |
| (12) Rebates unpaid net of reinsurance  | XXX        | XXX                  | XXX                  | XXX                           | —          |

**E. Risk-Sharing Provisions of the Affordable Care Act**

- (1) The Company has accident and health insurance premiums in 2023 and 2022 subject to the risk-sharing provisions of the ACA.

The ACA imposed fees and premium stabilization provisions on health insurance issuers offering comprehensive commercial health insurance. The three premium stabilization programs are commonly referred to as the 3Rs — risk adjustment, reinsurance, and risk corridors.

**Risk Adjustment** — The risk adjustment program is a permanent program designed to mitigate the potential impact of adverse selection that generally applies to non-grandfathered individual and small group plans inside and outside of exchanges. The program helps to stabilize market premiums by transferring funds from plans with relatively low-risk enrollees to plans with relatively high-risk enrollees. The data used by CMS to determine the risk adjustment transfer amount is subject to audits along with the true-up to the final CMS report, which may result in a material change to arrive at the final risk adjustment amount from the initial risk adjustment estimate recorded. Premium adjustments pursuant to the risk adjustment program are accounted for as premium subject to redetermination and user fees are accounted for as assessments.

**Reinsurance and Risk Corridors** — The transitional reinsurance program and risk corridors program were temporary programs which expired at the end of 2016. The Company received \$763 from CMS for the settlement of the temporary ACA risk corridor program and the amounts were received in 2020. The details of the years impacted and the amounts received from CMS for settlement of the temporary ACA risk corridor program are included in Note 24E(5) below.

- (2) The following table presents the current year impact of risk-sharing provisions of the ACA on assets, liabilities, and operations:

| <b>a. Permanent ACA Risk Adjustment Program</b>  | <b>December 31, 2023</b> |
|--|--------------------------|
| <u>Assets</u>  |                          |
| 1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)                   | \$ 276,606               |
| <u>Liabilities</u>   |                          |
| 2. Risk adjustment user fees payable for ACA Risk Adjustment   | 2,265                    |
| 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)                       | 1,039,079                |
| <u>Operations (Revenue &amp; Expense)</u>  |                          |
| 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment | (1,579,775)              |
| 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)   | 2,363                    |
| <br>   |                          |
| <b>b. Transitional ACA Reinsurance Program</b>   |                          |
| <u>Assets</u>  |                          |
| 1. Amounts recoverable for claims paid due to ACA Reinsurance  | \$ —                     |
| 2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)                                 | —                        |
| 3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance                            | —                        |
| <u>Liabilities</u>   |                          |
| 4. Liabilities for contributions payable due to ACA Reinsurance — not reported as ceded premium                    | —                        |
| 5. Ceded reinsurance premiums payable due to ACA Reinsurance   | —                        |
| 6. Liability for amounts held under uninsured plans contributions for ACA Reinsurance                              | —                        |
| <u>Operations (Revenue &amp; Expense)</u>  |                          |
| 7. Ceded reinsurance premiums due to ACA Reinsurance   | —                        |
| 8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments                  | —                        |
| 9. ACA Reinsurance contributions — not reported as ceded premium   | —                        |
| <br>   |                          |
| <b>c. Temporary ACA Risk Corridors Program</b>   |                          |
| <u>Assets</u>  |                          |
| 1. Accrued retrospective premium due to ACA Risk Corridors   | \$ —                     |
| <u>Liabilities</u>   |                          |
| 2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors                          | —                        |
| <u>Operations (Revenue &amp; Expense)</u>  |                          |
| 3. Effect of ACA Risk Corridors on net premium income (paid/received)  | —                        |
| 4. Effect of ACA Risk Corridors on change in reserves for rate credits   | —                        |

(3) The following table is a rollforward of the prior year ACA risk-sharing provisions for asset and liability balances, along with reasons for adjustments to prior year balances:

|   | Accrued During the Prior Year on Business Written before December 31 of the Prior Year |             | Received or Paid as of the Current Year on Business Written before December 31 of the Prior Year |              | Differences |            | Adjustments  |              | Unsettled Balances as of the Reporting Date |            |           |
|---|--|-------------|--|--------------|-------------|------------|--------------|--------------|---|------------|-----------|
|   | 1  | 2           | 3  | 4            | 5           | 6          | 7            | 8            | 9   | 10         |           |
|   | Receivable   | (Payable)   | Receivable   | (Payable)    | Receivable  | (Payable)  | Receivable   | (Payable)    | Ref   | Receivable | (Payable) |
| a. Permanent ACA Risk Adjustment Program  |  |             |  |              |             |            |              |              |   |            |           |
| 1. Premium adjustment receivable (including high risk pool payments)                          | \$ 1,133,110   | \$ —        | \$ 528,062   | \$ —         | \$ 605,048  | \$ —       | \$ (514,597) | \$ —         | A   | \$ 90,451  | \$ —      |
| 2. Premium adjustment (payable) (including high risk pool premium)                            | —  | (90,071)    | —  | (302,324)    | —           | 212,253    | —            | (212,253)    | B   | —          | —         |
| 3. Subtotal ACA Permanent Risk Adjustment Program   | 1,133,110  | (90,071)    | 528,062  | (302,324)    | 605,048     | 212,253    | (514,597)    | (212,253)    |   | 90,451     | —         |
| b. Transitional ACA Reinsurance Program   |  |             |  |              |             |            |              |              |   |            |           |
| 1. Amounts recoverable for claims paid  | —  | —           | —  | —            | —           | —          | —            | —            | C   | —          | —         |
| 2. Amounts recoverable for claims unpaid (contra liability)                                   | —  | —           | —  | —            | —           | —          | —            | —            | D   | —          | —         |
| 3. Amounts receivable relating to uninsured plans   | —  | —           | —  | —            | —           | —          | —            | —            | E   | —          | —         |
| 4. Liabilities for contributions payable due to ACA Reinsurance—not reported as ceded premium | —  | —           | —  | —            | —           | —          | —            | —            | F   | —          | —         |
| 5. Ceded reinsurance premiums payable   | —  | —           | —  | —            | —           | —          | —            | —            | G   | —          | —         |
| 6. Liability for amounts held under uninsured plans   | —  | —           | —  | —            | —           | —          | —            | —            | H   | —          | —         |
| 7. Subtotal ACA Transitional Reinsurance Program  | —  | —           | —  | —            | —           | —          | —            | —            |   | —          | —         |
| c. Temporary ACA Risk Corridors Program   |  |             |  |              |             |            |              |              |   |            |           |
| 1. Accrued retrospective premium  | —  | —           | —  | —            | —           | —          | —            | —            | I   | —          | —         |
| 2. Reserve for rate credits or policy experience rating refunds                               | —  | —           | —  | —            | —           | —          | —            | —            | J   | —          | —         |
| 3. Subtotal ACA Risk Corridors Program  | —  | —           | —  | —            | —           | —          | —            | —            |   | —          | —         |
| d. Total for ACA Risk-Sharing Provisions  | \$ 1,133,110   | \$ (90,071) | \$ 528,062   | \$ (302,324) | \$ 605,048  | \$ 212,253 | \$ (514,597) | \$ (212,253) |   | \$ 90,451  | \$ —      |

Explanation of Adjustments

- A. The risk adjustment receivable as of December 31, 2022 utilized paid claims through October 31, 2022. As of the Reporting Date, the risk adjustment receivable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for Benefit Year 2022 dated June 30, 2023. The risk adjustment receivable was further adjusted based on CMS' Summary Report of 2021 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment State Transfers.
- B. The risk adjustment payable as of December 31, 2022 utilized paid claims through October 31, 2022. As of the Reporting Date, the risk adjustment payable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for Benefit Year 2022 dated June 30, 2023. The risk adjustment payable was further adjusted based on CMS' Summary Report of 2021 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment State Transfers.
- C. N/A
- D. N/A
- E. N/A
- F. N/A
- G. N/A
- H. N/A
- I. N/A
- J. N/A

(4) The Company does not have any risk corridor receivables or payables to present in the table below:

| Risk Corridors Program Year:                                    | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year |           | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year |           | Differences                                |  | Adjustments            |                        | Ref | Unsettled Balances as of the Reporting Date     |   |
|---|--|-----------|--|-----------|--|--|------------------------|------------------------|-----|---|---|
|   | 1  | 2         | 3  | 4         | Prior Year Accrued Less Payments (Col 1-3) | Prior Year Accrued Less Payments (Col 2-4) | To Prior Year Balances | To Prior Year Balances |     | Cumulative Balance from Prior Years (Col 1-3+7) | Cumulative Balance from Prior Years (Col 2-4+8) |
|   | Receivable   | (Payable) | Receivable   | (Payable) | Receivable                                 | (Payable)                                  | Receivable             | (Payable)              |     | 9   | 10  |
| a. 2014   |  |           |  |           |  |  |                        |                        |     |   |   |
| 1. Accrued retrospective premium                                | \$ —   | \$ —      | \$ —   | \$ —      | \$ —                                       | \$ —                                       | \$ —                   | \$ —                   | A   | \$ —  | \$ —  |
| 2. Reserve for rate credits or policy experience rating refunds | —  | —         | —  | —         | —  | —  | —                      | —                      | B   | —   | —   |
| b. 2015   |  |           |  |           |  |  |                        |                        |     |   |   |
| 1. Accrued retrospective premium                                | —  | —         | —  | —         | —  | —  | —                      | —                      | C   | —   | —   |
| 2. Reserve for rate credits or policy experience rating refunds | —  | —         | —  | —         | —  | —  | —                      | —                      | D   | —   | —   |
| c. 2016   |  |           |  |           |  |  |                        |                        |     |   |   |
| 1. Accrued retrospective premium                                | —  | —         | —  | —         | —  | —  | —                      | —                      | E   | —   | —   |
| 2. Reserve for rate credits or policy experience rating refunds | —  | —         | —  | —         | —  | —  | —                      | —                      | F   | —   | —   |
| d. Total for Risk Corridors                                     | \$ —   | \$ —      | \$ —   | \$ —      | \$ —                                       | \$ —                                       | \$ —                   | \$ —                   |     | \$ —  | \$ —  |

Explanation of Adjustments

- A. N/A
- B. N/A
- C. N/A
- D. N/A
- E. N/A
- F. N/A

(5) The following table discloses ACA risk corridor receivable balances by risk corridor program year:

| Risk Corridors Program Year: | 1   | 2   | 3                         | 4   | 5                  | 6                          |
|------------------------------|---|---|---------------------------|---|--------------------|----------------------------|
|                              | Estimated Amount to be Filed or Final Amount Filed with CMS | Non-Accrued Amounts for Impairment or Other Reasons | Amounts received from CMS | Asset Balance (Gross of Non-Admissions) (1 - 2 - 3) | Nonadmitted Amount | Net Admitted Asset (4 - 5) |
| a. 2014                      | \$ 763  | \$ —  | \$ 763                    | \$ —  | \$ —               | \$ —                       |
| b. 2015                      | —   | —   | —                         | —   | —                  | —                          |
| c. 2016                      | —   | —   | —                         | —   | —                  | —                          |
| d. Total (a+b+c)             | \$ 763  | \$ —  | \$ 763                    | \$ —  | \$ —               | \$ —                       |



**25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES**

- A. Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the financial statements. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, health care and other amounts receivable (excluding provider loans and advances not yet expensed) and reinsurance recoverables for the years ended December 31, 2023 and 2022:

|   | <b>2023</b>                         |                                    |                       |
|---|-------------------------------------|------------------------------------|-----------------------|
|   | <b>Current Year Incurred Claims</b> | <b>Prior Years Incurred Claims</b> | <b>Total</b>          |
| Beginning of year claim reserve   | \$ —                                | \$ (52,128,181)                    | \$ (52,128,181)       |
| Paid claims — net of health care receivables* and reinsurance recoveries collected                                      | 550,651,051                         | 58,744,634                         | 609,395,685           |
| End of year claim reserve   | <u>64,968,659</u>                   | <u>10,914,575</u>                  | <u>75,883,234</u>     |
| Incurred claims excluding the change in health care receivables and reinsurance recoveries collected as presented below | 615,619,710                         | 17,531,028                         | 633,150,738           |
| Beginning of year health care receivables* and reinsurance recoveries collected   | —                                   | 6,721,701                          | 6,721,701             |
| End of year health care receivables* and reinsurance recoverables   | <u>(8,021,759)</u>                  | <u>(2,958,973)</u>                 | <u>(10,980,732)</u>   |
| Total incurred claims   | <u>\$ 607,597,951</u>               | <u>\$ 21,293,756</u>               | <u>\$ 628,891,707</u> |

\*Health care receivables excludes provider loans and advances not yet expensed of \$192 and \$0 for 2023 and 2022, respectively.

|   | <b>2022</b>                         |                                    |                       |
|---|-------------------------------------|------------------------------------|-----------------------|
|   | <b>Current Year Incurred Claims</b> | <b>Prior Years Incurred Claims</b> | <b>Total</b>          |
| Beginning of year claim reserve   | \$ —                                | \$ (142,213,353)                   | \$ (142,213,353)      |
| Paid claims — net of health care receivables and reinsurance recoveries collected                               | 523,812,584                         | 105,074,836                        | 628,887,420           |
| End of year claim reserve   | <u>46,561,269</u>                   | <u>5,566,912</u>                   | <u>52,128,181</u>     |
| Incurred claims excluding the change in health care receivables and reinsurance recoverables as presented below | 570,373,853                         | (31,571,605)                       | 538,802,248           |
| Beginning of year health care receivables and reinsurance recoverables  | —                                   | 31,804,966                         | 31,804,966            |
| End of year health care receivables and reinsurance recoverables  | <u>(5,671,747)</u>                  | <u>(1,049,954)</u>                 | <u>(6,721,701)</u>    |
| Total incurred claims   | <u>\$ 564,702,106</u>               | <u>\$ (816,593)</u>                | <u>\$ 563,885,513</u> |

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, net of health care and other amounts receivable, and reinsurance recoverables as of December 31, 2022 was \$45,406,480. As of December 31, 2023, \$58,744,634 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care and other amounts receivable (excluding provider loans and advances not yet expensed) and reinsurance recoverables are now \$7,955,602, as a result of re-estimation of unpaid claims. Therefore, there has been \$21,293,756 unfavorable prior year development since December 31, 2022 to December 31, 2023. The primary drivers consist of \$19,879,229 unfavorable development in Medicaid risk share and unfavorable development of \$4,362,896 in retroactivity for inpatient, outpatient, physician, and pharmacy claims offset by favorable development as a result of a change in the provision for adverse deviations in experience of \$2,937,754.

At December 31, 2022, the Company recorded \$816,593 of favorable development. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of \$7,740,349 and by favorable development of \$7,416,677 in retroactivity for inpatient, outpatient, physician, and pharmacy claims, offset by unfavorable change of \$14,210,301 in risk share activity. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for MLR rebates and retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the financial statements.

The Company incurred CAE of \$19,243,445 and \$16,616,318 in 2023 and 2022, respectively. These costs are included in the management service fees paid by the Company to United HealthCare Services, Inc. as a part of the Agreement (see Note 10). The following table discloses paid CAE, incurred CAE, and the balance in unpaid CAE reserve for 2023 and 2022:

|  | <b>2023</b>          | <b>2022</b>          |
|--|----------------------|----------------------|
| Total claims adjustment expenses                     | \$ 19,243,445        | \$ 16,616,318        |
| Less: current year unpaid claims adjustment expenses | (400,006)            | (343,133)            |
| Add: prior year unpaid claims adjustment expenses    | 343,133              | 1,006,386            |
|  | <u>19,186,572</u>    | <u>17,279,571</u>    |
| Total claims adjustment expenses paid                | <u>\$ 19,186,572</u> | <u>\$ 17,279,571</u> |

- B.** The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid CAE in 2023.

## 26. INTERCOMPANY POOLING ARRANGEMENTS

- A–G.** The Company did not have any intercompany pooling arrangements in 2023 or 2022.

## 27. STRUCTURED SETTLEMENTS

- A–B.** The Company did not have structured settlements in 2023 or 2022.

## 28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

- A.** Pharmacy rebates receivable are recorded when reasonably estimated or billed by the affiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions.

The Company evaluates admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has nonadmitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of SSAP No. 84, *Health Care and Government Insured Plan Receivables* (“SSAP No. 84”) from the financial statements.

For each pharmaceutical management agreement for which a portion of the total pharmacy rebates receivable can be admitted based on the admissibility criteria of SSAP No. 84, the pharmacy rebate transaction history is summarized as follows:

| Quarter    | Estimated Pharmacy Rebates as Reported on Financial Statements | Pharmacy Rebates as Billed or Otherwise Confirmed | Actual Rebates Received within 90 Days of Billing | Actual Rebates Received within 91 to 180 Days of Billing | Actual Rebates Received More than 180 Days After Billing |
|------------|--|---|---|--|--|
| 12/31/2023 | \$ 2,488,841   | \$ 820,254  | \$ —  | \$ —   | \$ —   |
| 9/30/2023  | 2,647,513  | 2,550,556   | 1,315,833   | —  | —  |
| 6/30/2023  | 2,497,319  | 2,457,390   | 1,101,784   | 1,249,513  | —  |
| 3/31/2023  | 2,301,835  | 2,203,831   | 745,653   | 1,276,879  | 6,241  |
| 12/31/2022 | 1,790,090  | 1,821,472   | 649,604   | 869,341  | 94,146   |
| 9/30/2022  | 1,790,092  | 1,760,067   | 857,457   | 901,617  | (43,978)   |
| 6/30/2022  | 1,723,360  | 1,722,580   | 961,451   | 743,642  | 2,171  |
| 3/31/2022  | 1,516,792  | 1,590,504   | 628,585   | 735,128  | 168,266  |
| 12/31/2021 | 20,706,827   | 20,152,075  | 16,906,528  | 2,980,550  | 247,464  |
| 9/30/2021  | 20,335,866   | 20,321,728  | 18,595,084  | 1,173,350  | 533,521  |
| 6/30/2021  | 20,430,061   | 20,180,084  | 17,829,519  | 2,026,728  | 314,732  |
| 3/31/2021  | 20,367,318   | 19,827,619  | 15,853,091  | 3,217,838  | 751,127  |

Of the amount reported as health care and other amounts receivable, \$3,675,408 and \$2,761,671 relate to pharmacy rebates receivable as of December 31, 2023 and 2022, respectively. This change is primarily due to increased membership.

- B.** The Company also admitted \$958,532 and \$480,665 of provider receivables resulting from claim overpayments and capitation arrangements and \$192 and \$0 resulting from provider advances as of December 31, 2023 and December 31, 2022, respectively, which are included in health care and other amounts receivable in the financial statements.

## 29. PARTICIPATING POLICIES

The Company did not have any participating contracts in 2023 or 2022.

**30. PREMIUM DEFICIENCY RESERVES**

The Company has not recorded any PDR as of December 31, 2023 or 2022. The analysis of PDR was completed as of December 31, 2023 and 2022. The Company did consider anticipated investment income when calculating the PDR.

The following table summarizes the Company's PDR as of December 31, 2023 and 2022:

|  | <b>2023</b>   |
|--|---|
| 1. Liability carried for premium deficiency reserves               | \$ —  |
| 2. Date of the most recent evaluation of this liability            | <u>12/31/2023</u>   |
| 3. Was anticipated investment income utilized in this calculation? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|  | <b>2022</b>   |
| 1. Liability carried for premium deficiency reserves               | \$ —  |
| 2. Date of the most recent evaluation of this liability            | <u>12/31/2022</u>   |
| 3. Was anticipated investment income utilized in this calculation? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

**31. ANTICIPATED SALVAGE AND SUBROGATION**

Due to the type of business being written, the Company has no salvage. As of December 31, 2023 and 2022, the Company had no specific accruals established for outstanding subrogation, as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid and aggregate health claim reserves.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? ..... Yes [ X ] No [ ] N/A [ ]
- 1.3 State Regulating? ..... Rhode Island
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [ X ] No [ ]
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. .... 0000731766
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2018
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2018
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 06/11/2020
- 3.4 By what department or departments?  
Rhode Island Department of Business Regulation .....
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [ X ]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ ] No [ ] N/A [ X ]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business? ..... Yes [ ] No [ X ]  
4.12 renewals? ..... Yes [ ] No [ X ]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business? ..... Yes [ ] No [ X ]  
4.22 renewals? ..... Yes [ ] No [ X ]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]  
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1<br>Name of Entity | 2<br>NAIC Company Code | 3<br>State of Domicile |
|---------------------|------------------------|------------------------|
|                     |                        |                        |

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 6.2 If yes, give full information: .....
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? ..... Yes [ ] No [ X ]
- 7.2 If yes,  
7.21 State the percentage of foreign control; ..... 0.0 %  
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

| 1<br>Nationality | 2<br>Type of Entity |
|------------------|---------------------|
|                  |                     |

**GENERAL INTERROGATORIES**

- 8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ X ] No [ ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| 1<br>Affiliate Name   | 2<br>Location (City, State) | 3<br>FRB | 4<br>OCC | 5<br>FDIC | 6<br>SEC |
|-----------------------|-----------------------------|----------|----------|-----------|----------|
| Optum Bank, Inc. .... | Salt Lake City, UT .....    | NO       | NO       | YES       | NO       |

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? ..... Yes [ ] No [ X ]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? ..... Yes [ ] No [ X ] N/A [ ]
- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
Deloitte & Touche LLP, Minneapolis, MN. ....
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:  
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:  
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]
- 10.6 If the response to 10.5 is no or n/a, please explain.  
.....
- 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
Gary A. Iannone, Vice President of Actuarial Services of United HealthCare Services Inc., an affiliate of UnitedHealthcare of New England, Inc., 185 Asylum Street, Hartford, CT 06103 .....
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]
  - 12.11 Name of real estate holding company ...
  - 12.12 Number of parcels involved ..... 0
  - 12.13 Total book/adjusted carrying value ..... \$ .....0
- 12.2 If yes, provide explanation  
.....
- 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]
- 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]
  - a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - c. Compliance with applicable governmental laws, rules and regulations;
  - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:  
.....
- 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ X ] No [ ]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).  
The UHG Code of Conduct was refreshed in 2023 to include an updated letter from the CEO, a letter from the UHG Chief Compliance Officer, add Inclusion as a Core Value as well as our Quality Belief, and add new Q&As on a variety of topics. ....
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).  
.....

**GENERAL INTERROGATORIES**

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

| 1<br>American Bankers Association (ABA) Routing Number | 2<br>Issuing or Confirming Bank Name | 3<br>Circumstances That Can Trigger the Letter of Credit | 4<br>Amount |
|--|--------------------------------------|--|-------------|
|  |                                      |  |             |

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers.....\$ .....0
  - 20.12 To stockholders not officers.....\$ .....0
  - 20.13 Trustees, supreme or grand (Fraternal Only) .....\$ .....0
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers.....\$ .....0
  - 20.22 To stockholders not officers.....\$ .....0
  - 20.23 Trustees, supreme or grand (Fraternal Only) .....\$ .....0
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others.....\$ .....0
  - 21.22 Borrowed from others.....\$ .....0
  - 21.23 Leased from others .....\$ .....0
  - 21.24 Other .....\$ .....0
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ X ] No [ ]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$ ..... 419
  - 22.22 Amount paid as expenses .....\$ ..... 24,308
  - 22.23 Other amounts paid .....\$ .....0
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ X ] No [ ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....\$ ..... 3,831,523
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? ..... Yes [ ] No [ X ]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

| Name of Third-Party | Is the Third-Party Agent a Related Party (Yes/No) |
|---------------------|---|
|                     |   |

**INVESTMENT**

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [ X ] No [ ]

**GENERAL INTERROGATORIES**

- 25.02 If no, give full and complete information, relating thereto  
.....
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)  
.....
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. .... \$ .....0
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. .... \$ .....0
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. .... \$ .....0
- 25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ .....0
- 25.093 Total payable for securities lending reported on the liability page. .... \$ .....0
- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). .... Yes [ X ] No [ ]
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements ..... \$ .....0
- 26.22 Subject to reverse repurchase agreements ..... \$ .....0
- 26.23 Subject to dollar repurchase agreements ..... \$ .....0
- 26.24 Subject to reverse dollar repurchase agreements ..... \$ .....0
- 26.25 Placed under option agreements ..... \$ .....0
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock ..... \$ .....0
- 26.27 FHLB Capital Stock ..... \$ .....0
- 26.28 On deposit with states ..... \$ ..... 1,491,526
- 26.29 On deposit with other regulatory bodies ..... \$ .....0
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB ..... \$ .....0
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements ..... \$ .....0
- 26.32 Other ..... \$ .....0

26.3 For category (26.26) provide the following:

| 1<br>Nature of Restriction | 2<br>Description | 3<br>Amount |
|----------------------------|------------------|-------------|
| .....                      | .....            | .....       |

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ ]  
If no, attach a description with this statement.

**LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:**

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? ..... Yes [ ] No [ ]
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 ..... Yes [ ] No [ ]
- 27.42 Permitted accounting practice ..... Yes [ ] No [ ]
- 27.43 Other accounting guidance ..... Yes [ ] No [ ]
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: ..... Yes [ ] No [ ]
- The reporting entity has obtained explicit approval from the domiciliary state.
  - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
  - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
  - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? ..... Yes [ ] No [ X ]
- 28.2 If yes, state the amount thereof at December 31 of the current year. .... \$ .....0
29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [ X ] No [ ]

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1<br>Name of Custodian(s)     | 2<br>Custodian's Address  |
|-------------------------------|---|
| Bank of New York Mellon ..... | Global Liquidity Services, 1 Wall St, 14th Floor, New York NY 10286 ..... |
| Northern Trust .....          | 50 S. LaSalle, Chicago, IL 60675 .....                                    |

**GENERAL INTERROGATORIES**

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

| 1<br>Name(s) | 2<br>Location(s) | 3<br>Complete Explanation(s) |
|--------------|------------------|------------------------------|
| .....        | .....            | .....                        |

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [ ] No [ X ]

29.04 If yes, give full and complete information relating thereto:

| 1<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>Reason |
|--------------------|--------------------|---------------------|-------------|
| .....              | .....              | .....               | .....       |

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

| 1<br>Name of Firm or Individual              | 2<br>Affiliation |
|--|------------------|
| Internally Managed .....                     | I.....           |
| DWS Investment Management Americas Inc. .... | U.....           |
| BlackRock Financial Management, Inc .....    | U.....           |

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

| 1<br>Central Registration Depository Number | 2<br>Name of Firm or Individual              | 3<br>Legal Entity Identifier (LEI) | 4<br>Registered With | 5<br>Investment Management Agreement (IMA) Filed |
|---|--|------------------------------------|----------------------|--|
| 107105 .....                                | BlackRock Financial Management, Inc .....    | 549300LVXY1VJKE13M84 .....         | SEC .....            | NO.....  |
| 104518 .....                                | DWS Investment Management Americas Inc. .... | CZ83K4EEEX8QVCT3B128 .....         | SEC .....            | NO.....  |

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? ..... Yes [ ] No [ X ]

30.2 If yes, complete the following schedule:

| 1<br>CUSIP #    | 2<br>Name of Mutual Fund | 3<br>Book/Adjusted Carrying Value |
|-----------------|--------------------------|-----------------------------------|
| 30.2999 - Total |                          | 0                                 |

30.3 For each mutual fund listed in the table above, complete the following schedule:

| 1<br>Name of Mutual Fund (from above table) | 2<br>Name of Significant Holding of the Mutual Fund | 3<br>Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding | 4<br>Date of Valuation |
|---|---|---|------------------------|
| .....                                       | .....   | .....   | .....                  |



**GENERAL INTERROGATORIES**

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

|                             | 1                             | 2           | 3  |
|-----------------------------|-------------------------------|-------------|--|
|                             | Statement (Admitted)<br>Value | Fair Value  | Excess of Statement<br>over Fair Value (-), or<br>Fair Value over<br>Statement (+) |
| 31.1 Bonds .....            | 265,080,339                   | 246,555,128 | (18,525,211)   |
| 31.2 Preferred stocks ..... | 0                             | 0           | 0  |
| 31.3 Totals                 | 265,080,339                   | 246,555,128 | (18,525,211)   |

31.4 Describe the sources or methods utilized in determining the fair values:

For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ ] No [ X ]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ ] No [ ]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
N/A .....

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]

33.2 If no, list exceptions:  
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  
 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
 b. Issuer or obligor is current on all contracted interest and principal payments.  
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
 Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  
 a. The security was purchased prior to January 1, 2018.  
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
 c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
 d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.  
 Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:  
 a. The shares were purchased prior to January 1, 2019.  
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
 c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  
 d. The fund only or predominantly holds bonds in its portfolio.  
 e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  
 Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:  
 a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.  
 b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.  
 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.  
 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.  
 Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ..... Yes [ ] No [ ] N/A [ X ]

## GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? ..... Yes [ ] No [ X ]

38.2 If the response to 38.1 is yes, on what schedule are they reported?  
.....

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? ..... Yes [ ] No [ X ]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?  
 39.21 Held directly ..... Yes [ ] No [ X ]  
 39.22 Immediately converted to U.S. dollars ..... Yes [ ] No [ X ]

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

| 1<br>Name of Cryptocurrency | 2<br>Immediately<br>Converted to USD,<br>Directly Held, or Both | 3<br>Accepted for<br>Payment of<br>Premiums |
|-----------------------------|---|---|
|                             |   |   |

### OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... \$ ..... 38,231

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

| 1<br>Name                  | 2<br>Amount Paid |
|----------------------------|------------------|
| Gorman Actuarial Inc. .... | 2,360            |
| Oliver Wyman .....         | 35,871           |

41.1 Amount of payments for legal expenses, if any? ..... \$ ..... 0

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

| 1<br>Name | 2<br>Amount Paid |
|-----------|------------------|
|           |                  |

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? ..... \$ ..... 0

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

| 1<br>Name | 2<br>Amount Paid |
|-----------|------------------|
|           |                  |

# GENERAL INTERROGATORIES

## PART 2 - HEALTH INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U.S. business only. .... \$ 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ 0

1.31 Reason for excluding  
.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above ..... \$ 0

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. .... \$ 0

1.6 Individual policies: Most current three years:

1.61 Total premium earned ..... \$ 0

1.62 Total incurred claims ..... \$ 0

1.63 Number of covered lives ..... 0

All years prior to most current three years:

1.64 Total premium earned ..... \$ 0

1.65 Total incurred claims ..... \$ 0

1.66 Number of covered lives ..... 0

1.7 Group policies: Most current three years:

1.71 Total premium earned ..... \$ 0

1.72 Total incurred claims ..... \$ 0

1.73 Number of covered lives ..... 0

All years prior to most current three years:

1.74 Total premium earned ..... \$ 0

1.75 Total incurred claims ..... \$ 0

1.76 Number of covered lives ..... 0

2. Health Test:

|                                   | 1<br>Current Year | 2<br>Prior Year |
|-----------------------------------|-------------------|-----------------|
| 2.1 Premium Numerator .....       | 686,158,208       | 693,793,695     |
| 2.2 Premium Denominator .....     | 686,158,208       | 693,793,695     |
| 2.3 Premium Ratio (2.1/2.2) ..... | 1.000             | 1.000           |
| 2.4 Reserve Numerator .....       | 172,011,929       | 162,752,198     |
| 2.5 Reserve Denominator .....     | 172,011,929       | 162,752,198     |
| 2.6 Reserve Ratio (2.4/2.5) ..... | 1.000             | 1.000           |

3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? ..... Yes [ ] No [ X ]

3.2 If yes, give particulars:  
.....

4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? ..... Yes [ X ] No [ ]

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? ..... Yes [ ] No [ ]

5.1 Does the reporting entity have stop-loss reinsurance? ..... Yes [ X ] No [ ]

5.2 If no, explain:  
.....

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical ..... \$ 0

5.32 Medical Only ..... \$ 0

5.33 Medicare Supplement ..... \$ 0

5.34 Dental & Vision ..... \$ 0

5.35 Other Limited Benefit Plan ..... \$ 0

5.36 Other ..... \$ 0

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:  
Hold harmless clauses in provider agreements and continuation of coverage endorsements in reinsurance agreements. ....

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? ..... Yes [ X ] No [ ]

7.2 If no, give details  
.....

8. Provide the following information regarding participating providers: 8.1 Number of providers at start of reporting year ..... 148,942

8.2 Number of providers at end of reporting year ..... 113,507

9.1 Does the reporting entity have business subject to premium rate guarantees? ..... Yes [ ] No [ X ]

9.2 If yes, direct premium earned: 9.21 Business with rate guarantees between 15-36 months.. \$..... 0

9.22 Business with rate guarantees over 36 months ..... \$..... 0

**GENERAL INTERROGATORIES**

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? ..... Yes  No
- 10.2 If yes:
- 10.21 Maximum amount payable bonuses.....\$ .....28,332,802
  - 10.22 Amount actually paid for year bonuses.....\$ .....22,649,584
  - 10.23 Maximum amount payable withholds.....\$ .....26,212
  - 10.24 Amount actually paid for year withholds.....\$ .....3,924

- 11.1 Is the reporting entity organized as:
- 11.12 A Medical Group/Staff Model, ..... Yes  No
  - 11.13 An Individual Practice Association (IPA), or, ..... Yes  No
  - 11.14 A Mixed Model (combination of above)? .... Yes  No

- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes  No
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus. .... Rhode Island
- 11.4 If yes, show the amount required. .... \$ 9,070,861
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes  No

11.6 If the amount is calculated, show the calculation  
 The Rhode Island Department of Business Regulation holds UnitedHealthCare of New England, Inc. to 275% of RBC ACL. ....

12. List service areas in which reporting entity is licensed to operate:

| 1<br>Name of Service Area   |
|---|
| UnitedHealthcare of New England, Inc. is licensed statewide in Massachusetts for the commercial line of business. Additionally, the Medicare and Retirement line of business is licensed to operate in Bristol, Essex, Hampden, Middlesex, Norfolk, Plymouth, and Suffolk counties. ....  |
| UnitedHealthcare of New England, Inc. is licensed statewide in Rhode Island for all lines of business. ....   |
| UnitedHealthcare of New England, Inc. is licensed in Carroll, Cheshire, Coos, Grafton, Hillsborough, Rockingham, Strafford and Sullivan Counties in New Hampshire for Medicare and Retirement line of business. ....  |
| UnitedHealthcare of New England, Inc. is licensed in Allegheny, Beaver, Berks, Bucks, Butler, Chester, Clarion, Crawford, Erie, Fayette, Forest, Greene, Jefferson, Lawrence, Lehigh, Mercer, Northampton, Venango, Warren, Washington, Westmoreland and York Counties in Pennsylvania for Medicare and Retirement line of business. .... |
| UnitedHealthcare of New England, Inc. is licensed in Addison, Bennington, Chittenden, Lamoille, Orange, Rutland, Washington, Windham and Windsor Counties in Vermont for Medicare and Retirement line of business. ....   |
| UnitedHealthcare of New England, Inc. is licensed statewide in Maine for the commercial line of business. ....  |

- 13.1 Do you act as a custodian for health savings accounts? ..... Yes  No
- 13.2 If yes, please provide the amount of custodial funds held as of the reporting date. .... \$ 0
- 13.3 Do you act as an administrator for health savings accounts? ..... Yes  No
- 13.4 If yes, please provide the balance of funds administered as of the reporting date. .... \$ 0
- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes  No  N/A
- 14.2 If the answer to 14.1 is yes, please provide the following:

| 1<br>Company Name | 2<br>NAIC Company Code | 3<br>Domiciliary Jurisdiction | 4<br>Reserve Credit | Assets Supporting Reserve Credit |                       |            |
|-------------------|------------------------|-------------------------------|---------------------|----------------------------------|-----------------------|------------|
|                   |                        |                               |                     | 5<br>Letters of Credit           | 6<br>Trust Agreements | 7<br>Other |
|                   |                        |                               |                     |                                  |                       |            |

15. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):
- 15.1 Direct Premium Written ..... \$ .....0
  - 15.2 Total Incurred Claims ..... \$ .....0
  - 15.3 Number of Covered Lives ..... 0

| *Ordinary Life Insurance Includes   |
|---|
| Term(whether full underwriting, limited underwriting, jet issue, "short form app")        |
| Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app") |
| Variable Life (with or without secondary gurarantee)                                      |
| Universal Life (with or without secondary gurarantee)                                     |
| Variable Universal Life (with or without secondary gurarantee)                            |

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes  No
- 16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes  No

**FIVE-YEAR HISTORICAL DATA**

|  | 1<br>2023   | 2<br>2022   | 3<br>2021     | 4<br>2020     | 5<br>2019     |
|--|-------------|-------------|---------------|---------------|---------------|
| <b>Balance Sheet</b> (Pages 2 and 3)   |             |             |               |               |               |
| 1. Total admitted assets (Page 2, Line 28) .....   | 480,418,328 | 450,640,552 | 492,033,121   | 473,586,044   | 374,470,564   |
| 2. Total liabilities (Page 3, Line 24) .....   | 249,912,152 | 227,026,792 | 285,848,677   | 269,174,406   | 211,308,782   |
| 3. Statutory minimum capital and surplus requirement .....   | 9,070,861   | 61,527,012  | 91,857,873    | 500,000       | 500,000       |
| 4. Total capital and surplus (Page 3, Line 33) .....   | 230,506,163 | 223,613,760 | 206,184,444   | 204,411,638   | 163,161,782   |
| <b>Income Statement</b> (Page 4)   |             |             |               |               |               |
| 5. Total revenues (Line 8) .....   | 703,323,670 | 656,561,973 | 1,584,388,273 | 1,433,651,095 | 1,305,229,228 |
| 6. Total medical and hospital expenses (Line 18) .....   | 628,891,707 | 563,885,513 | 1,350,274,816 | 1,187,529,163 | 1,114,259,126 |
| 7. Claims adjustment expenses (Line 20) .....  | 19,243,445  | 16,616,318  | 55,244,420    | 51,311,487    | 57,155,750    |
| 8. Total administrative expenses (Line 21) .....   | 31,582,189  | 34,440,176  | 100,187,979   | 130,670,055   | 96,447,132    |
| 9. Net underwriting gain (loss) (Line 24) .....  | 23,606,329  | 41,619,966  | 78,681,058    | 64,140,390    | 37,367,220    |
| 10. Net investment gain (loss) (Line 27) .....   | 15,955,934  | 8,215,095   | 6,596,627     | 5,573,583     | 7,185,935     |
| 11. Total other income (Lines 28 plus 29) .....  | 59,446      | (98,526)    | (312,281)     | (347,376)     | (442,023)     |
| 12. Net income or (loss) (Line 32) .....   | 31,711,537  | 39,675,012  | 67,172,242    | 49,489,810    | 35,131,050    |
| <b>Cash Flow</b> (Page 6)  |             |             |               |               |               |
| 13. Net cash from operations (Line 11) .....   | 28,684,339  | 71,934,286  | 82,781,185    | 112,070,371   | 28,603,208    |
| <b>Risk-Based Capital Analysis</b>   |             |             |               |               |               |
| 14. Total adjusted capital .....   | 230,506,163 | 223,613,760 | 206,184,444   | 204,411,638   | 163,161,782   |
| 15. Authorized control level risk-based capital .....  | 3,383,825   | 3,309,866   | 33,402,863    | 39,155,808    | 43,037,032    |
| <b>Enrollment</b> (Exhibit 1)  |             |             |               |               |               |
| 16. Total members at end of period (Column 5, Line 7) .....  | 95,355      | 100,989     | 180,005       | 172,670       | 155,497       |
| 17. Total members months (Column 6, Line 7) .....  | 1,221,560   | 1,198,845   | 2,141,709     | 1,984,860     | 1,895,030     |
| <b>Operating Percentage</b> (Page 4)<br>(Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0            |             |             |               |               |               |
| 18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5) .....                                      | 100.0       | 100.0       | 100.0         | 100.0         | 100.0         |
| 19. Total hospital and medical plus other non-health (Lines 18 plus Line 19) .....                           | 89.4        | 85.9        | 85.2          | 82.8          | 85.4          |
| 20. Cost containment expenses .....  | 2.2         | 2.0         | 2.7           | 2.7           | 3.0           |
| 21. Other claims adjustment expenses .....   | 0.6         | 0.5         | 0.8           | 0.9           | 1.4           |
| 22. Total underwriting deductions (Line 23) .....  | 96.6        | 93.7        | 95.0          | 95.5          | 97.1          |
| 23. Total underwriting gain (loss) (Line 24) .....   | 3.4         | 6.3         | 5.0           | 4.5           | 2.9           |
| <b>Unpaid Claims Analysis</b><br>(U&I Exhibit, Part 2B)  |             |             |               |               |               |
| 24. Total claims incurred for prior years (Line 17, Col. 5) .....  | 66,928,371  | 109,762,372 | 140,651,686   | 113,554,421   | 80,304,218    |
| 25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)] .....                                | 45,634,617  | 110,578,965 | 149,258,834   | 111,880,618   | 87,241,400    |
| <b>Investments In Parent, Subsidiaries and Affiliates</b>  |             |             |               |               |               |
| 26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1) .....   | 0           | 0           | 0             | 0             | 0             |
| 27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1) .....                                      | 0           | 0           | 0             | 0             | 0             |
| 28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1) .....   | 0           | 0           | 0             | 0             | 0             |
| 29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) ..... | 0           | 0           | 0             | 0             | 0             |
| 30. Affiliated mortgage loans on real estate .....   | 0           | 0           | 0             | 0             | 0             |
| 31. All other affiliated .....   | 0           | 0           | 0             | 0             | 0             |
| 32. Total of above Lines 26 to 31 .....  | 0           | 0           | 0             | 0             | 0             |
| 33. Total investment in parent included in Lines 26 to 31 above .....  | 0           | 0           | 0             | 0             | 0             |

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? Yes [ ] No [ ]  
 If no, please explain: .....

**SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS**

**Allocated by States and Territories**

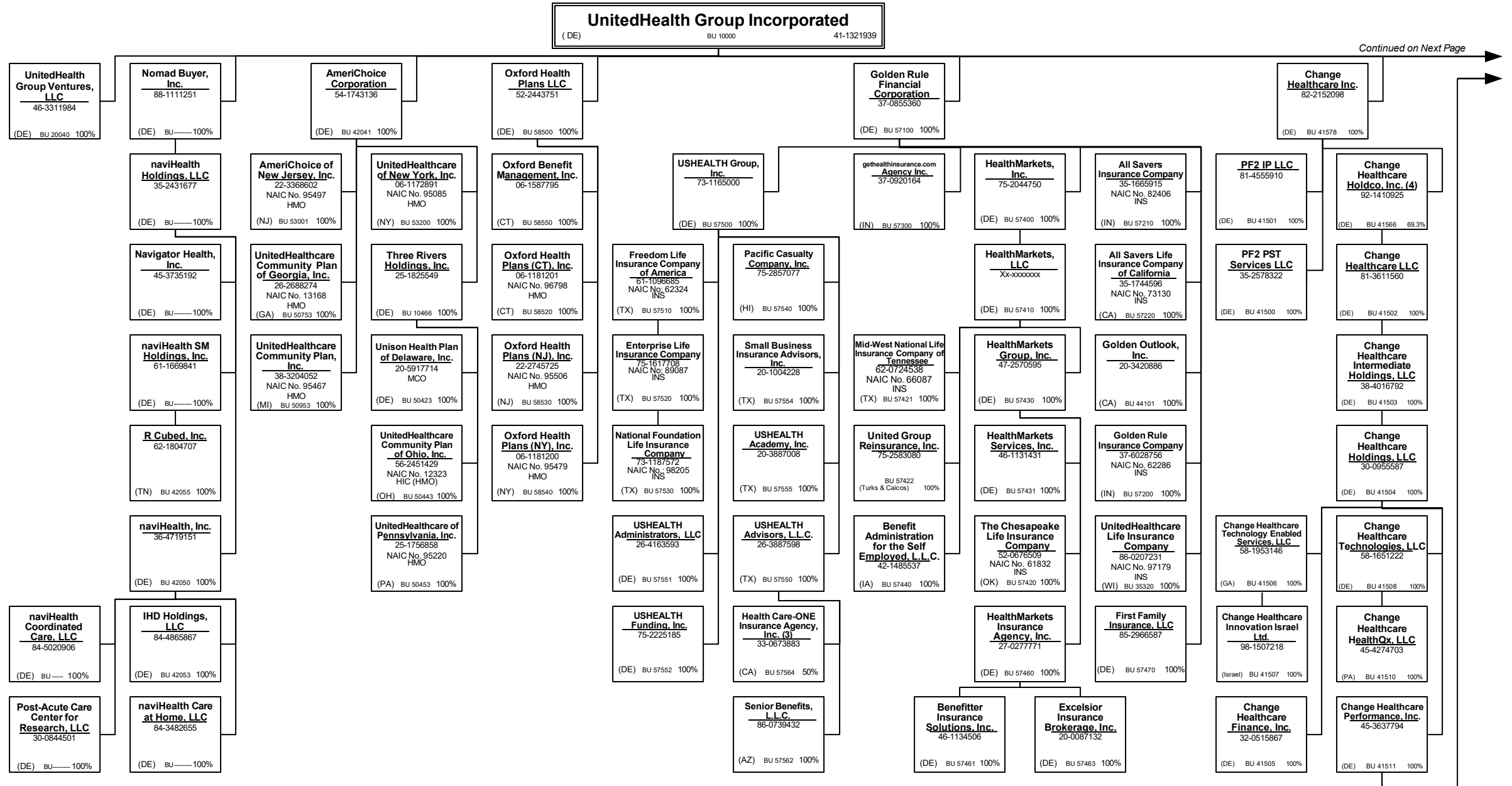
| States, etc.   | 1<br>Active Status (a) | Direct Business Only              |                           |                         |                     |   |   |                                 |                                |                              |
|--|------------------------|-----------------------------------|---------------------------|-------------------------|---------------------|---|---|---------------------------------|--------------------------------|------------------------------|
|  |                        | 2<br>Accident and Health Premiums | 3<br>Medicare Title XVIII | 4<br>Medicaid Title XIX | 5<br>CHIP Title XXI | 6<br>Federal Employees Health Benefits Program Premiums | 7<br>Life and Annuity Premiums & Other Considerations | 8<br>Property/Casualty Premiums | 9<br>Total Columns 2 Through 8 | 10<br>Deposit-Type Contracts |
| 1. Alabama   | AL                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 2. Alaska  | AK                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 3. Arizona   | AZ                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 4. Arkansas  | AR                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 5. California  | CA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 6. Colorado  | CO                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 7. Connecticut   | CT                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 8. Delaware  | DE                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 9. District of Columbia  | DC                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 10. Florida  | FL                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 11. Georgia  | GA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 12. Hawaii   | HI                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 13. Idaho  | ID                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 14. Illinois   | IL                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 15. Indiana  | IN                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 16. Iowa   | IA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 17. Kansas   | KS                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 18. Kentucky   | KY                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 19. Louisiana  | LA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 20. Maine  | ME                     | L                                 | 1,690,539                 | 0                       | 0                   | 0   | 0   | 0                               | 1,690,539                      | 0                            |
| 21. Maryland   | MD                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 22. Massachusetts  | MA                     | L                                 | 0                         | 873,196                 | 0                   | 0   | 0   | 0                               | 873,196                        | 0                            |
| 23. Michigan   | MI                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 24. Minnesota  | MN                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 25. Mississippi  | MS                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 26. Missouri   | MO                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 27. Montana  | MT                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 28. Nebraska   | NE                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 29. Nevada   | NV                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 30. New Hampshire  | NH                     | L                                 | 0                         | (136,519)               | 0                   | 0   | 0   | 0                               | (136,519)                      | 0                            |
| 31. New Jersey   | NJ                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 32. New Mexico   | NM                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 33. New York   | NY                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 34. North Carolina   | NC                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 35. North Dakota   | ND                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 36. Ohio   | OH                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 37. Oklahoma   | OK                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 38. Oregon   | OR                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 39. Pennsylvania   | PA                     | L                                 | 0                         | (981,078)               | 0                   | 0   | 0   | 0                               | (981,078)                      | 0                            |
| 40. Rhode Island   | RI                     | L                                 | 2,728,217                 | 16,072,379              | 670,527,497         | 0   | 0   | 0                               | 689,328,093                    | 0                            |
| 41. South Carolina   | SC                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 42. South Dakota   | SD                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 43. Tennessee  | TN                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 44. Texas  | TX                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 45. Utah   | UT                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 46. Vermont  | VT                     | L                                 | 0                         | 251,507                 | 0                   | 0   | 0   | 0                               | 251,507                        | 0                            |
| 47. Virginia   | VA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 48. Washington   | WA                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 49. West Virginia  | WV                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 50. Wisconsin  | WI                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 51. Wyoming  | WY                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 52. American Samoa   | AS                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 53. Guam   | GU                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 54. Puerto Rico  | PR                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 55. U.S. Virgin Islands  | VI                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 56. Northern Mariana Islands   | MP                     | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 57. Canada   | CAN                    | .N                                | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 58. Aggregate Other Aliens   | OT                     | .XXX                              | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 59. Subtotal   | .XXX                   | 4,418,756                         | 16,079,485                | 670,527,497             | 0                   | 0   | 0   | 0                               | 691,025,738                    | 0                            |
| 60. Reporting Entity Contributions for Employee Benefit Plans        | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 61. Totals (Direct Business)   | .XXX                   | 4,418,756                         | 16,079,485                | 670,527,497             | 0                   | 0   | 0   | 0                               | 691,025,738                    | 0                            |
| DETAILS OF WRITE-INS   |                        |                                   |                           |                         |                     |   |   |                                 |                                |                              |
| 58001.   | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 58002.   | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 58003.   | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |
| 58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)  | .XXX                   | 0                                 | 0                         | 0                       | 0                   | 0   | 0   | 0                               | 0                              | 0                            |

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 6
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. .... 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N - None of the above - Not allowed to write business in the state..... 51

(b) Explanation of basis of allocation by states, premiums by state, etc.  
 Premiums are allocated by state based on geographic market.

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



Continued on Next Page

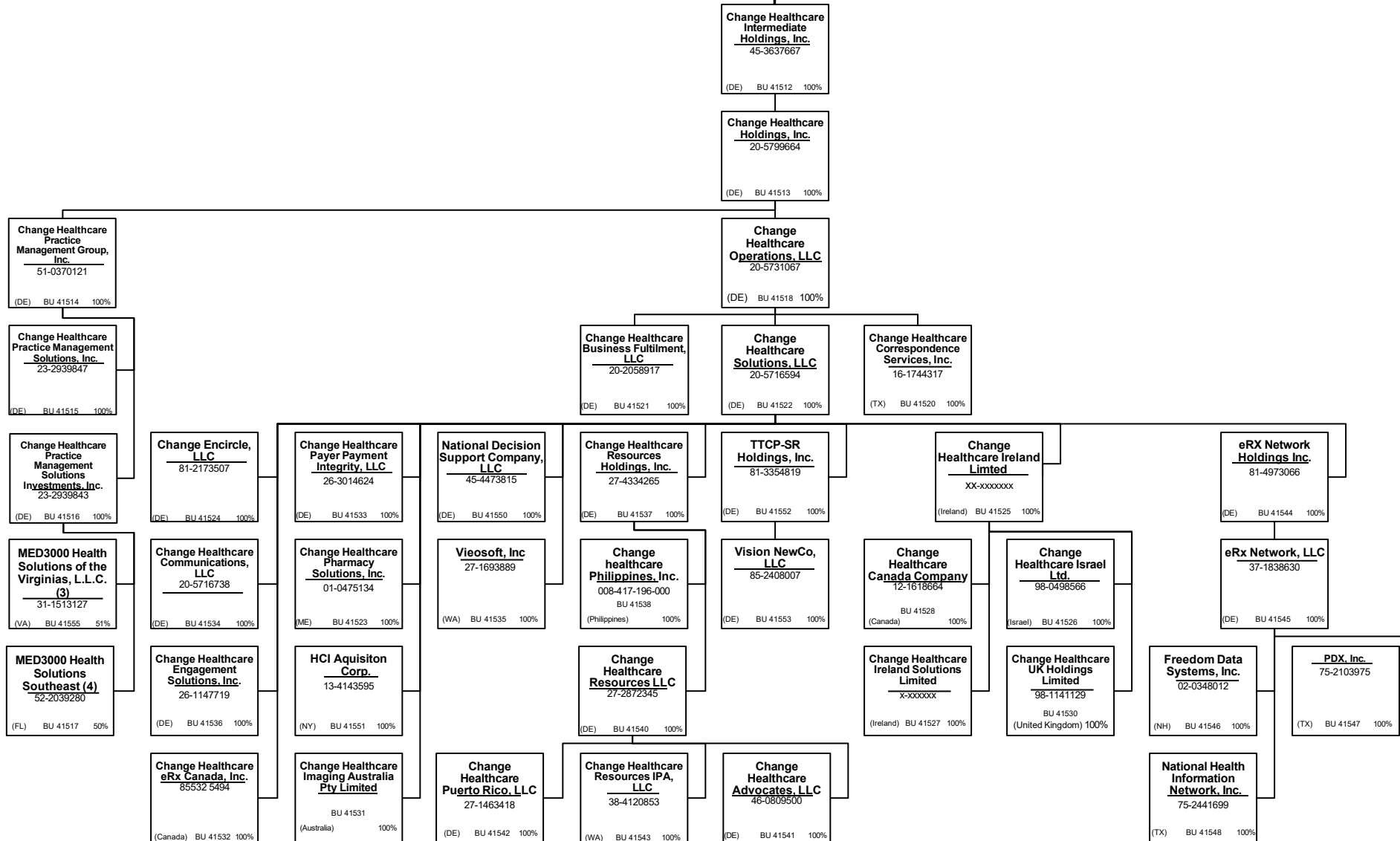
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU----- 100%

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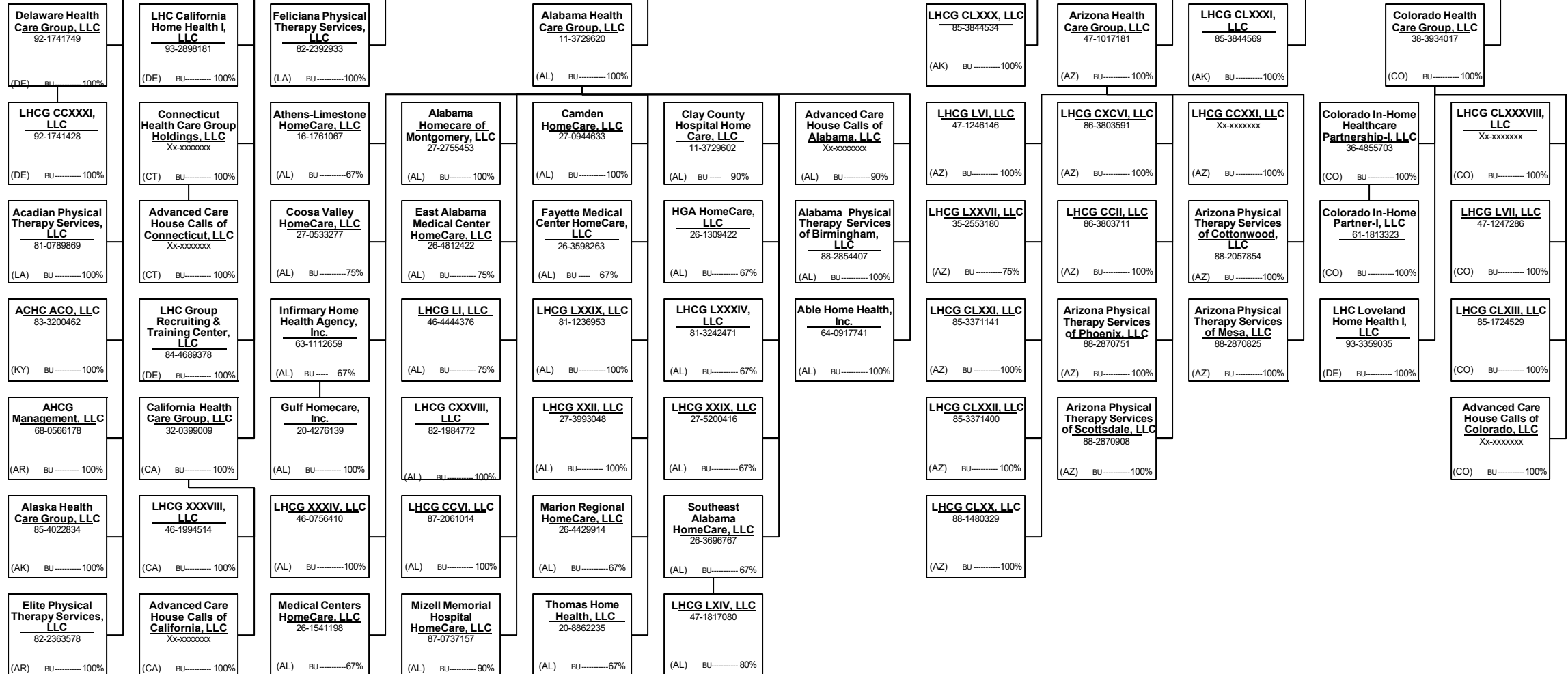
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%



**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Arkansas Health Care Group, LLC**  
 54-2078932  
 (AR) BU 100%

**Indiana Health Care Group, LLC**  
 27-5130167  
 (IN) BU 100%

**Kentucky Health Care Group, LLC**  
 51-0588603  
 (KY) BU 100%

**LHC Home Health Care Group of Michigan, LLC**  
 Xx-xxxxxx  
 (MI) BU 100%

**Arkansas HomeCare of Forrest City, LLC**  
 06-1778265  
 (AR) BU 100%

**Arkansas HomeCare of Fulton, LLC**  
 33-1154428  
 (AR) BU 100%

**Arkansas HomeCare of Hot Springs, LLC**  
 20-3552602  
 (AR) BU 100%

**Arkansas Physical Therapy Services of Conway, LLC**  
 84-4642424  
 (AR) BU 100%

**CMC Home Health and Hospice, LLC**  
 26-2688869  
 (AR) BU 100%

**Dallas County Medical Center HomeCare, LLC**  
 34-2013785  
 (AR) BU 100%

**LHCG LXXXIII, LLC**  
 81-2227463  
 (AR) BU 100%

**LHCG CXCXVII, LLC**  
 86-3859120  
 (IN) BU 100%

**Kentucky Home Health Care, LLC**  
 46-4950585  
 (KY) BU 100%

**Kentucky HomeCare of Henderson, LLC**  
 26-4812417  
 (KY) BU 100%

**LHCG XLVI, LLC**  
 46-2509580  
 (KY) BU 100%

**Advanced Care House Calls of Michigan, LLC**  
 Xx-xxxxxx  
 (MI) BU 100%

**Arkansas Physical Therapy Services of Rogers, LLC**  
 88-2072782  
 (AR) BU 100%

**LHCG XLII, LLC**  
 30-0760667  
 (AR) BU 100%

**LHCG CIV, LLC**  
 82-1639945  
 (AR) BU 100%

**Hospice of Central Arkansas, LLC (3)**  
 26-4310419  
 (AR) BU 67%

**Jefferson Regional HomeCare, LLC (3)**  
 26-1806757  
 (AR) BU 67%

**LHCG CLXVII, LLC**  
 85-4059504  
 (AR) BU 100%

**Eureka Springs Hospital HomeCare, LLC**  
 72-1587844  
 (AR) BU 100%

**Illinois Health Care Group, LLC**  
 46-1708167  
 (IL) BU 100%

**Kentucky LV, LLC**  
 46-4923653  
 (KY) BU 100%

**LHCG LXX, LLC**  
 47-5067719  
 (KY) BU 100%

**LHCG XXIII, LLC**  
 27-4100261  
 (KY) BU 75%

**LHC HomeCare - Lifeline, LLC**  
 51-0588604  
 (KY) BU 100%

**Arkansas Healthcare Partners, LLC**  
 81-3695165  
 (AR) BU 100%

**East Arkansas Health Holdings, LLC**  
 47-2142765  
 (AR) BU 100%

**LHCG CV, LLC**  
 82-1661632  
 (AR) BU 100%

**LHCG CII, LLC**  
 82-1487800  
 (AR) BU 100%

**LHCG CLXVII, LLC**  
 85-3678555  
 (AR) BU 100%

**Eureka Springs Hospital Hospice, LLC**  
 72-1587845  
 (AR) BU 100%

**LHCG XXXVII, LLC**  
 30-0760684  
 (IL) BU 100%

**Lifeline HomeCare of Salem, LLC**  
 27-3468680  
 (KY) BU 100%

**LHCG LXXI, LLC**  
 47-5393382  
 (KY) BU 100%

**Kentucky Physical Therapy Services at Richmond Place, LLC**  
 93-4405730  
 (KY) BU 100%

**Lifeline Home Health Care of Bowling Green, LLC**  
 51-0588592  
 (KY) BU 100%

**LHCG LXXXV, LLC**  
 36-4847404  
 (AZ) BU 100%

**Arkansas Home Health Providers-III, LLC**  
 47-1716449  
 (AR) BU 100%

**Arkansas Home Hospice, LLC**  
 47-1783912  
 (AR) BU 100%

**Mena Medical Center Home Health, LLC**  
 47-0944781  
 (AR) BU 100%

**Mena Medical Center Hospice, LLC**  
 72-1586356  
 (AR) BU 100%

**LHCG CXXXX, LLC**  
 83-2298550  
 (AR) BU 100%

**Patient's Choice Hospice, LLC**  
 06-1778268  
 (AR) BU 100%

**Advanced Care House Calls of Illinois, LLC**  
 Xx-xxxxxx  
 (IL) BU 100%

**Lifeline Home Health Care of Fulton, LLC**  
 20-6826388  
 (KY) BU 100%

**Lifeline Home Health Care of Hopkinsville, LLC**  
 51-0588601  
 (KY) BU 100%

**Kentucky Physical Therapy Services of Lexington, LLC**  
 93-4383947  
 (KY) BU 100%

**Lifeline Home Health Care of Lexington, LLC**  
 51-0588599  
 (KY) BU 100%

**OHP, LLC**  
 81-3653042  
 (OK) BU 100%

**Arkansas Home Health Providers-III, LLC**  
 47-1783912  
 (AR) BU 100%

**Arkansas Extended Care, LLC**  
 47-1770024  
 (AR) BU 100%

**Southwest Arkansas HomeCare, LLC**  
 26-0274543  
 (AR) BU 67%

**LHCG LXVIII, LLC**  
 47-4518424  
 (AR) BU 100%

**Northeast Arkansas Partnership, LLC**  
 35-2647028  
 (AR) BU 60%

**Illinois Home Health Care, LLC**  
 46-4924177  
 (IL) BU 100%

**Lifeline Rockcastle Home Health, LLC**  
 27-3468870  
 (KY) BU 75%

**Gamma Acquisition Inc.**  
 20-0146314  
 (DE) BU 100%

**Lifeline Private Duty Services of Kentucky, LLC**  
 51-0588602  
 (KY) BU 100%

**Summit Properties - Muskogee, LLC**  
 32-0469351  
 (OK) BU 100%

**Arkansas Nursing Providers, LLC**  
 47-1808550  
 (AR) BU 67%

**LHCG CXXV, LLC**  
 82-2441720  
 (AR) BU 100%

**LHCG LXXXVI, LLC**  
 36-4847423  
 (AR) BU 100%

**LHCG CXXXI, LLC**  
 32-0565293  
 (AR) BU 100%

**LHCG CXXXII, LLC**  
 83-2810275  
 (AR) BU 100%

**Illinois LIV, LLC**  
 38-3925282  
 (IL) BU 00%

**Kentucky In-Home Partner-II, LLC**  
 82-3982951  
 (KY) BU 100%

**Twin Lakes Home Health Agency, LLC**  
 27-1000828  
 (KY) BU 75%

**Lifeline Home Health Care of Somerset, LLC**  
 51-0588594  
 (KY) BU 100%

**Lifeline Home Health Care of Russellville, LLC**  
 51-0588600  
 (KY) BU 100%

40.3

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Georgia Health Care Group, LLC**  
 04-3826206  
 (GA) BU 100%

**LHC Health Care Group of Florida, LLC**  
 20-3840328  
 (FL) BU 100%

**LHCG CCXXVII, LLC**  
 88-3285752  
 (GA) BU 100%

**Georgia HomeCare of Harris, LLC**  
 38-3749123  
 (GA) BU 100%

**LHCG LXXIV, LLC**  
 81-1105754  
 (GA) BU 100%

**LHCG XL, LLC**  
 46-2509518  
 (GA) BU 100%

**Northwest Georgia Home Health, LLC**  
 27-1803583  
 (GA) BU 75%

**LHCG CCXXVI, LLC**  
 88-3281766  
 (GA) BU 100%

**Advanced Care House Calls of Florida, LLC**  
 30-1111990  
 (FL) BU 100%

**Florida Physical Therapy Services of Miramar, LLC**  
 85-2890611  
 (FL) BU 100%

**Florida Physical Therapy Services of Panama City, LLC**  
 85-2890874  
 (FL) BU 100%

**LHCG XIX, LLC**  
 27-3529253  
 (FL) BU 75%

**Munroe Regional HomeCare, LLC**  
 77-0670885  
 (FL) BU 51%

**Florida Physical Therapy Services of Orlando, LLC**  
 87-2819939  
 (FL) BU 100%

**Atlantic Homecare, Inc.**  
 58-1811794  
 (GA) BU 100%

**Eastern Georgia Partnership, LLC**  
 85-2462743  
 (GA) BU 75%

**LHCG CLVIII, LLC**  
 84-4811662  
 (GA) BU 100%

**Halcyon Healthcare, LLC**  
 27-4237248  
 (DE) BU 100%

**Advanced Care House Calls of Georgia, LLC**  
 Xx-xxxxxx  
 (GA) BU 100%

**Floyd HomeCare, LLC**  
 37-1533134  
 (GA) BU 75%

**Central Florida Partnership, LLC**  
 84-4741808  
 (FL) BU 60%

**Florida Physical Therapy Services of Sarasota II, LLC**  
 85-4184074  
 (FL) BU 100%

**LHCG CCX, LLC**  
 87-2695298  
 (FL) BU 100%

**Florida Physical Therapy Services of Pensacola, LLC**  
 38-4077716  
 (FL) BU 100%

**Lifeline Home Health Care of Lady Lake, LLC**  
 314-1975227  
 (FL) BU 100%

**Florida Physical Therapy Services of Sun City, LLC**  
 88-2870661  
 (FL) BU 100%

**Atlantic Homeaid, Inc.**  
 58-1863635  
 (GA) BU 100%

**Augusta Home Care Services LLC**  
 26-3389004  
 (DE) BU 100%

**LHCG LXXV, LLC**  
 Xx-xxxxxx  
 (GA) BU 100%

**Altus Hospice of Georgia, LLC**  
 45-3437288  
 (DE) BU 100%

**Community Hospice, LLC**  
 20-0896023  
 (MS) BU 100%

**LHCG CCXXVIII, LLC**  
 88-3303273  
 (GA) BU 100%

**Bayfront HMA Home Health LLC**  
 46-1642468  
 (FL) BU 100%

**LHCG CLIII, LLC**  
 84-4776234  
 (FL) BU 100%

**Florida Physical Therapy Services of Ormond Beach, LLC**  
 87-2820055  
 (FL) BU 100%

**LHCG LXXXII, LLC**  
 61-1788793  
 (FL) BU 75%

**Florida Physical Therapy Services of Fort Myers, LLC**  
 86-3177130  
 (FL) BU 100%

**Florida Physical Therapy Services of Ocala, LLC**  
 88-2854101  
 (FL) BU 75%

**Ware Visiting Nurse Services, Inc.**  
 58-1811796  
 (GA) BU 100%

**LHCG CLXIV, LLC**  
 85-2474241  
 (GA) BU 100%

**Northeast Georgia Home Health II, LLC**  
 88-4214089  
 (GA) BU 100%

**Cornerstone Palliative and Hospice, LLC**  
 45-4845966  
 (MS) BU 67%

**Covenant Palliative and Hospice, LLC**  
 45-4845621  
 (MS) BU 100%

**LHCG CLIV, LLC**  
 84-4776384  
 (FL) BU 100%

**LHCG CLV, LLC**  
 84-4829877  
 (FL) BU 100%

**Florida Physical Therapy Services of Sarasota, LLC**  
 85-3733455  
 (FL) BU 100%

**Suncoast Healthcare Partnership, LLC**  
 Xx-xxxxxx  
 (FL) BU 60%

**Florida Physical Therapy Services of Gainesville, LLC**  
 86-1936043  
 (FL) BU 100%

**Lifeline Home Health Care of Lakeland, LLC**  
 14-1975232  
 (FL) BU 51%

**Chesterfield Visiting Nurses Services, Inc.**  
 57-0876493  
 (SC) BU 100%

**LHCG CLXV, LLC**  
 85-2474342  
 (GA) BU 100%

**Southern Georgia Partnership, LLC**  
 88-0998884  
 (GA) BU 75%

**Compassionate Hospice of Georgia, Inc.**  
 45-3245661  
 (DE) BU 100%

**Grace Hospice, LLC**  
 20-3301932  
 (GA) BU 100%

**LHCG CLVI, LLC**  
 84-4829979  
 (FL) BU 100%

**LHCG CLVII, LLC**  
 85-0778549  
 (FL) BU 100%

**Suncoast Partnership-I, LLC**  
 Xx-xxxxxx  
 (FL) BU 100%

**Suncoast Partnership-II, LLC**  
 Xx-xxxxxx  
 (FL) BU 100%

**Suncoast Partnership-III, LLC**  
 Xx-xxxxxx  
 (FL) BU 600%

**Lifeline Home Health Care of Marathon, LLC**  
 14-1975234  
 (FL) BU 100%

**Florence Visiting Nurses Services, Inc.**  
 57-0876491  
 (SC) BU 100%

**LHCG CLXVI, LLC**  
 85-2501394  
 (SC) BU 100%

**LHCG CCXXII, LLC**  
 88-0998942  
 (GA) BU 100%

**Compassionate Healthcare Management Group, Inc.**  
 20-4591877  
 (GA) BU 100%

**Halcyon Hospice of Aiken, LLC**  
 27-0380864  
 (FL) BU 100%

**LHCG CLX, LLC**  
 85-0792455  
 (FL) BU 100%

**Suncoast Partner-I, LLC**  
 Xx-xxxxxx  
 (FL) BU 100%

**Suncoast Partner-II, LLC**  
 Xx-xxxxxx  
 (FL) BU 100%

**Suncoast Partner-III, LLC**  
 Xx-xxxxxx  
 (FL) BU 100%

**Lifeline Home Health Care of Port Charlotte, LLC**  
 14-1975231  
 (FL) BU 100%

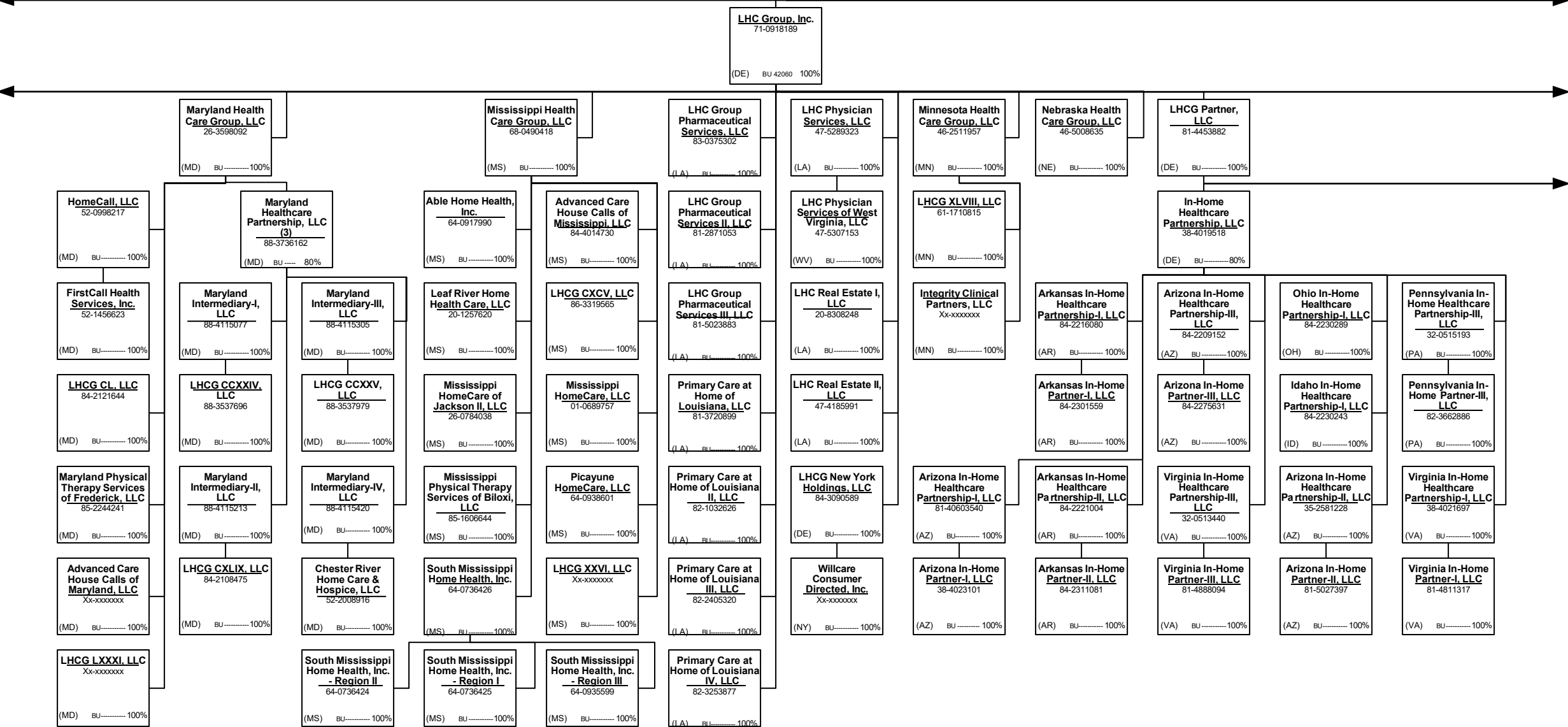
40.4

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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40.5

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

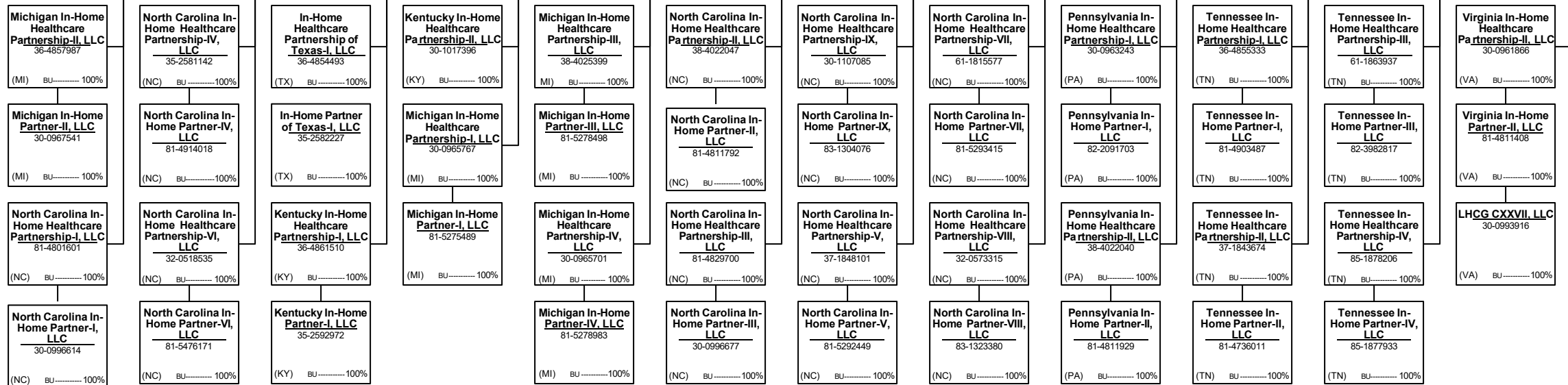
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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU-----100%

**LHCG Partner, LLC**  
 81-4453882  
 (DE) BU-----100%

**In-Home Healthcare Partnership, LLC**  
 38-4019518  
 (DE) BU-----80%



40.6

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

Continued from Previous Page

Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU----- 100%

**LHCG Partner, LLC**  
 81-4453882  
 (DE) BU----- 100%

**LHCG Partner II, LLC**  
 82-1485228  
 (TX) BU----- 100%

**In-Home Healthcare Partnership II, LLC**  
 84-3322624  
 (DE) BU----- 80%

**In-Home Healthcare Partnership, LLC**  
 38-4019518  
 (DE) BU----- 80%

**Southwest Post-Acute Care Partnership, LLC**  
 61-1846018  
 (TX) BU----- 60%

**Virginia In-Home Healthcare Partnership-IX, LLC**  
 32-0516972  
 (VA) BU----- 100%

**Virginia In-Home Healthcare Partnership-VII, LLC**  
 37-1844686  
 (VA) BU----- 100%

**Virginia In-Home Healthcare Partnership-XI, LLC**  
 36-4908131  
 (VA) BU----- 100%

**Louisiana In-Home Healthcare Partnership-II, LLC**  
 36-4886826  
 (LA) BU----- 100%

**Virginia In-Home Healthcare Partnership-VI, LLC**  
 37-1843673  
 (VA) BU----- 100%

**Virginia In-Home Healthcare Partnership-IV, LLC**  
 61-1810641  
 (VA) BU----- 100%

**GSHS Home Health, LLC**  
 16-1727633  
 (TX) BU----- 100%

**LHCG CCXIII, LLC**  
 87-3155545  
 (LA) BU----- 100%

**LHCG CIX, LLC**  
 82-2084222  
 (LA) BU----- 100%

**LHCG CLI, LLC**  
 85-1221268  
 (TX) BU----- 100%

**LHCG CVI, LLC**  
 82-2020284  
 (LA) BU----- 100%

**LHCG CVII, LLC**  
 82-2044952  
 (LA) BU----- 100%

**Virginia In-Home Partner-IX, LLC**  
 81-5294732  
 (VA) BU----- 100%

**Virginia In-Home Partner-VII, LLC**  
 81-4888210  
 (VA) BU----- 100%

**Virginia In-Home Partner-XI, LLC**  
 83-2040583  
 (VA) BU----- 100%

**Louisiana In-Home Partner-II, LLC**  
 35-2616195  
 (LA) BU----- 100%

**Virginia In-Home Partner-VI, LLC**  
 81-4737281  
 (VA) BU----- 100%

**Virginia In-Home Partner-IV, LLC**  
 32-0516324  
 (VA) BU----- 100%

**LHCG CXII, LLC**  
 82-2146037  
 (TX) BU----- 100%

**LHCG CXIII, LLC**  
 82-2159030  
 (TX) BU----- 100%

**LHCG CXIV, LLC**  
 82-2174970  
 (TX) BU----- 100%

**LHCG CXIX, LLC**  
 82-1978232  
 (AR) BU----- 100%

**LHCG CX, LLC**  
 82-2098229  
 (LA) BU----- 100%

**LHCG CCXVI, LLC**  
 88-0582397  
 (LA) BU----- 100%

**Virginia In-Home Healthcare Partnership-V, LLC**  
 38-4020777  
 (VA) BU----- 100%

**Virginia In-Home Healthcare Partnership-VIII, LLC**  
 61-1814029  
 (VA) BU----- 100%

**Virginia In-Home Healthcare Partnership-XII, LLC**  
 86-2505437  
 (VA) BU----- 100%

**Louisiana In-Home Healthcare Partnership-III, LLC**  
 35-2614777  
 (LA) BU----- 100%

**Virginia In-Home Healthcare Partnership-X, LLC**  
 32-0580044  
 (VA) BU----- 100%

**LHCG CXV, LLC**  
 82-2187727  
 (TX) BU----- 100%

**LHCG CXVI, LLC**  
 82-2206275  
 (TX) BU----- 100%

**LHCG CXVII, LLC**  
 82-2217874  
 (TX) BU----- 100%

**LHCG CXVIII, LLC**  
 82-1999959  
 (AR) BU----- 100%

**LHCG CCIII, LLC**  
 87-0969466  
 (LA) BU----- 100%

**LHCG CXI, LLC**  
 82-2140184  
 (TX) BU----- 100%

**Virginia In-Home Partner-V, LLC**  
 81-4737123  
 (VA) BU----- 100%

**Virginia In-Home Partner-VIII, LLC**  
 81-5294131  
 (VA) BU----- 100%

**Virginia In-Home Partner-XII, LLC**  
 86-2445798  
 (VA) BU----- 100%

**Louisiana In-Home Partner-III, LLC**  
 82-4146470  
 (LA) BU----- 100%

**Virginia In-Home Partner-X, LLC**  
 83-2555935  
 (VA) BU----- 100%

**LHCG CXX, LLC**  
 82-2117095  
 (LA) BU----- 100%

**LHCG CXXI, LLC**  
 82-2231824  
 (TX) BU----- 100%

**LHCG CXXII, LLC**  
 82-2469676  
 (TX) BU----- 100%

**LHCG CXXIII, LLC**  
 82-2301047  
 (GA) BU----- 100%

**LHCG CXXXIII, LLC**  
 32-0540219  
 (TX) BU----- 100%

**LHCG CVIII, LLC**  
 82-1666299  
 (LA) BU----- 100%

**LHCG CXXIV, LLC**  
 82-2261569  
 (TX) BU----- 100%

**LHCG CXXX, LLC**  
 82-2276690  
 (TX) BU----- 100%

**Marshall HomeCare, LLC**  
 02-0732705  
 (TX) BU----- 100%

**Texas Health Care Group of Texarkana, LLC**  
 41-2076211  
 (TX) BU----- 100%

**LHCG CCXXXII, LLC**  
 82-2244399  
 (TX) BU----- 100%

40.7

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

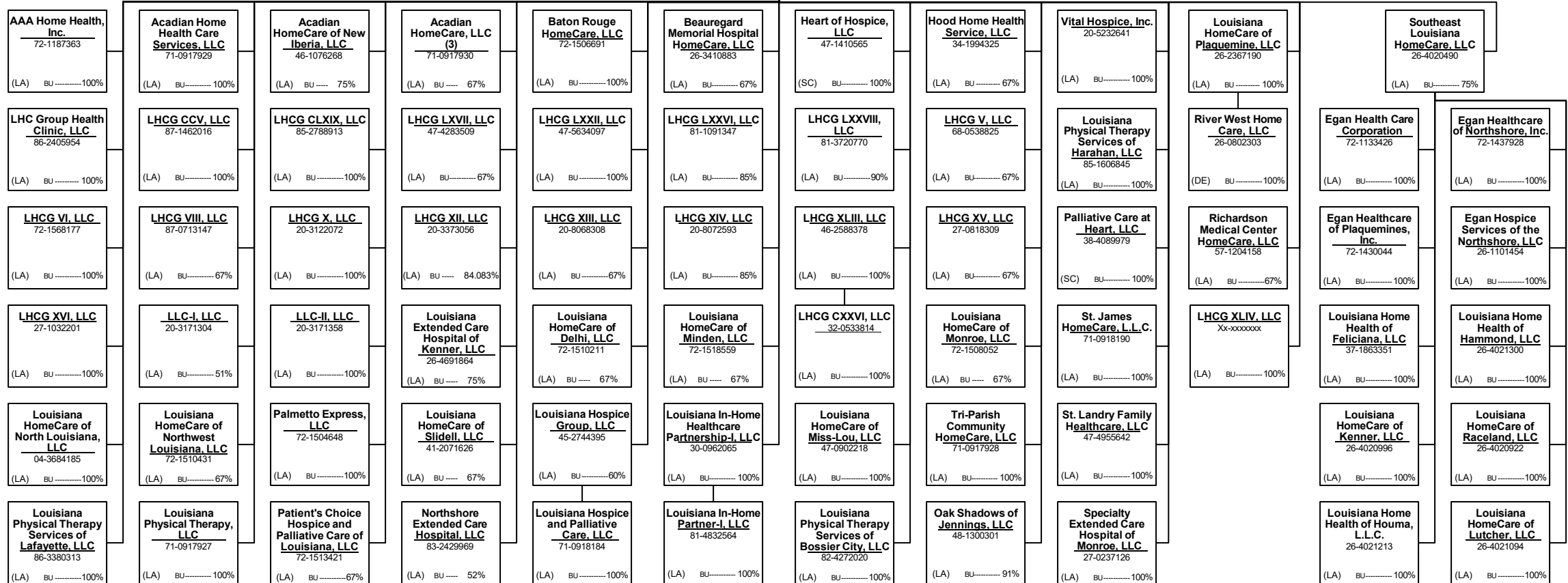
**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Louisiana Health Care Group, LLC**  
 71-0917926  
 (LA) BU -----100%



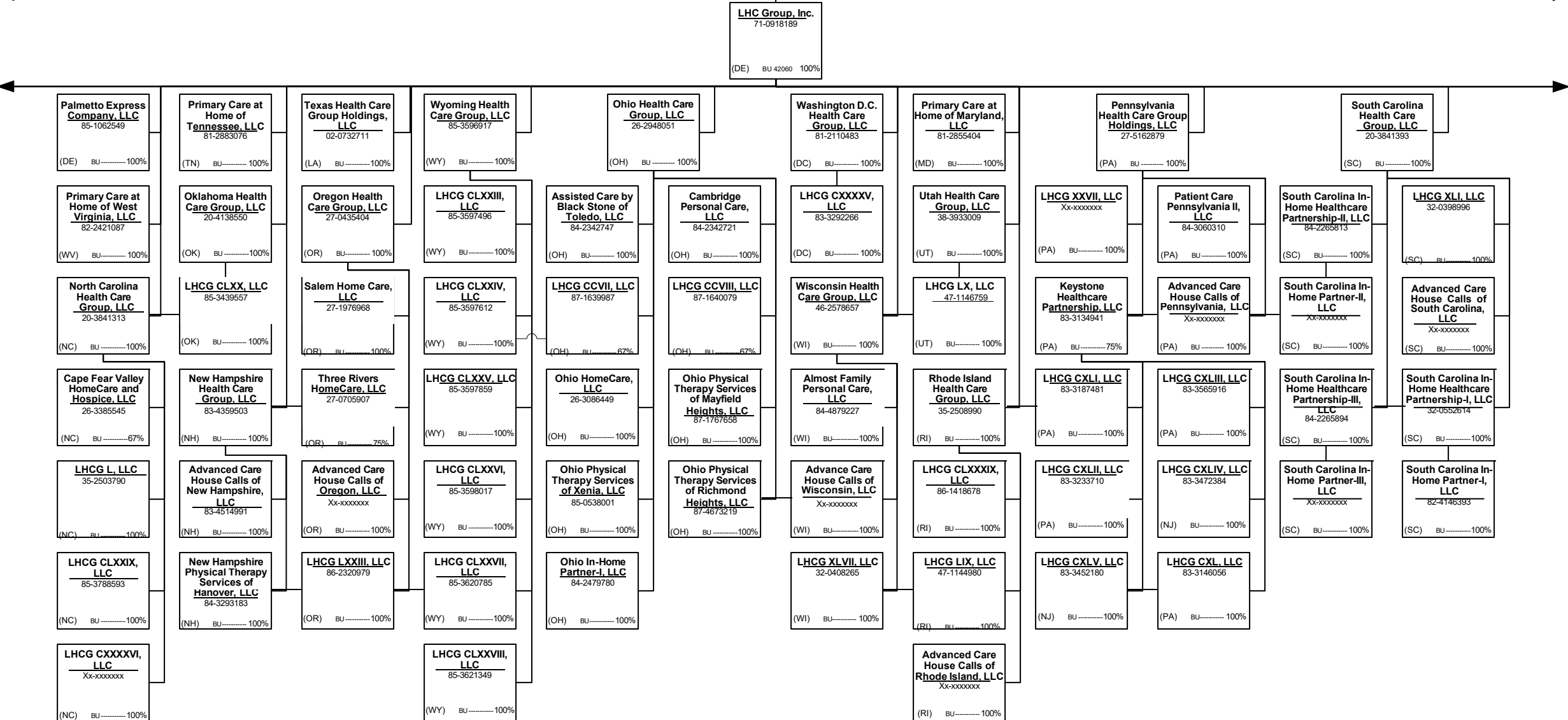
40.8

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Texas Health Care Group, LLC**  
 62-1850044  
 (TX) BU 100%

**Virginia Health Care Group, LLC**  
 06-1762010  
 (VA) BU 100%

**Washington Health Care Group, LLC**  
 26-3811771  
 (WA) BU 100%

**West Virginia Health Care Group, LLC**  
 87-0748651  
 (WV) BU 100%

**Idaho Health Care Group, LLC**  
 27-2498964  
 (ID) BU 100%

**Massachusetts Health Care Group, LLC**  
 38-3932998  
 (MA) BU 100%

**LHC CXIII, LLC**  
 86-2900948  
 (TX) BU 100%

**Red River HomeCare, LLC**  
 81-0627339  
 (TX) BU 100%

**LHCG CCI, LLC**  
 87-1012762  
 (VA) BU 100%

**Virginia HomeCare, LLC**  
 06-1762015  
 (VA) BU 100%

**Assured Capital Partners, Inc.**  
 88-0369557  
 (NV) BU 100%

**Washington HomeCare and Hospice of Central Basin, LLC**  
 26-4568497  
 (WA) BU 100%

**Preston Memorial HomeCare, LLC**  
 27-1446056  
 (WV) BU 100%

**LHCG LXXXVII, LLC**  
 37-1847660  
 (WV) BU 90%

**Grant Memorial HomeCare and Hospice, LLC**  
 26-2578433  
 (WV) BU 67%

**Boone Memorial HomeCare, LLC**  
 20-8826558  
 (WV) BU 100%

**LHCG XVII, LLC**  
 27-2544802  
 (ID) BU 100%

**Advanced Care House Calls of Massachusetts, LLC**  
 83-2914026  
 (MA) BU 100%

**LHC CXIV, LLC**  
 86-2947633  
 (TX) BU 100%

**Texas Health Care Group of The Golden Triangle, LLC**  
 27-0075424  
 (TX) BU 81.25%

**LHCG CCIV, LLC**  
 87-2102125  
 (VA) BU 100%

**Advanced Care House Calls of Virginia, LLC**  
 Xx-xxxxxx  
 (VA) BU 100%

**Northwest Healthcare Alliance, Inc.**  
 91-1738970  
 (WA) BU 100%

**Advanced Care House Calls of Washington, LLC**  
 Xx-xxxxxx  
 (WA) BU 100%

**St. Mary's Medical Center Home Health Services, LLC**  
 26-0730248  
 (WV) BU 67%

**LHCG LXXXIX, LLC**  
 81-5300843  
 (WV) BU 100%

**Housecalls Home Health and Hospice, LLC**  
 37-1533130  
 (WV) BU 100%

**Home Care Plus, Inc.**  
 56-0668235  
 (WV) BU 100%

**LHCG XXI, LLC**  
 27-3529180  
 (ID) BU 100%

**LHCG CXII, LLC**  
 86-2320979  
 (MA) BU 100%

**Rivercrest Home Health Care, Inc.**  
 46-0504059  
 (TX) BU 100%

**LHCG CLIX, LLC**  
 Xx-xxxxxx  
 (TX) BU 100%

**LHCG CXIX, LLC**  
 87-0821919  
 (VA) BU 100%

**LHCG LXXX, LLC**  
 Xx-xxxxxx  
 (VA) BU 100%

**LHCG LXIII, LLC**  
 61-1739528  
 (WA) BU 100%

**LHCG CLXXXV, LLC**  
 85-3845250  
 (WA) BU 100%

**Wetzel County HomeCare, LLC**  
 26-0274385  
 (WV) BU 100%

**LHCG XCI, LLC**  
 81-5322329  
 (OH) BU 100%

**West Virginia HomeCare, LLC**  
 26-3043290  
 (WV) BU 83.3%

**LHCG LII, LLC**  
 46-4704340  
 (WV) BU 100%

**Advanced Care House Calls of Idaho, LLC**  
 Xx-xxxxxx  
 (ID) BU 100%

**Massachusetts Physical Therapy Services of Framingham, LLC**  
 88-2854292  
 (MA) BU 100%

**Texas Physical Therapy Services of Burleson, LLC**  
 88-2072971  
 (TX) BU 100%

**Home Care Connections, Inc.**  
 33-1025322  
 (TX) BU 100%

**LHCG CXCVIII, LLC**  
 87-0821493  
 (VA) BU 100%

**Northwest Washington Home Health, Inc.**  
 27-0555075  
 (WA) BU 100%

**LHCG CLXXXVI, LLC**  
 85-3864696  
 (WA) BU 100%

**LHC HomeCare of West Virginia LLC**  
 26-3042468  
 (WV) BU 100%

**LHCG XC, LLC**  
 81-5306967  
 (WV) BU 100%

**West Virginia Physical Therapy Services of Charleston, LLC**  
 83-3393205  
 (WV) BU 100%

**Princeton Community HomeCare, LLC**  
 83-0474005  
 (WV) BU 67%

**Idaho In-Home Partner-I, LLC**  
 84-2311184  
 (ID) BU 100%

**Massachusetts Physical Therapy Services of Quincy Bay, LLC**  
 88-2058110  
 (MA) BU 100%

**Texas Physical Therapy Services of Baytown, LLC**  
 86-3380429  
 (TX) BU 100%

**LHCG CCXXXIV, LLC**  
 92-3832140  
 (TX) BU 100%

**LHCG XXXIII, LLC**  
 45-4894023  
 (TX) BU 70%

**Northwest Washington Home Health, Inc.**  
 27-0555075  
 (WA) BU 100%

**LHCG CLXXXVI, LLC**  
 85-3864696  
 (WA) BU 100%

**Jackson County Home Health, LLC**  
 26-3042590  
 (WV) BU 100%

**LHCG XCII, LLC**  
 81-5344998  
 (OH) BU 100%

**West Virginia Physical Therapy Services of Charleston, LLC**  
 83-3393205  
 (WV) BU 100%

**Roane HomeCare, LLC**  
 41-2219637  
 (WV) BU 100%

**Kambros, LLC**  
 84-4763920  
 (ID) BU 100%

**LHCG LVIII, LLC**  
 47-1271229  
 (MA) BU 100%

**Advanced Care House Calls of Texas, LLC**  
 Xx-xxxxxx  
 (TX) BU 100%

**LHCG CCXXXV, LLC**  
 92-3828235  
 (TX) BU 100%

**LHCG CXXXVII, LLC**  
 38-4052246  
 (TX) BU 100%

**Mountaineer HomeCare, LLC**  
 26-3042733  
 (WV) BU 100%

**HNH Birdie One, LLC**  
 85-2016675  
 (ID) BU 100%

**Heart 'n Home Hospice and Palliative Care, LLC**  
 52-2440817  
 (ID) BU 100%

40.10

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Tennessee Health Care Group, LLC**  
 20-3427231  
 (TN) BU 100%

**LHC HomeCare of Tennessee, LLC**  
 26-2678253  
 (TN) BU 100%

**LHCG LXII, LLC**  
 32-0442009  
 (TN) BU 100%

**LHCG LXXXVIII, LLC**  
 30-0965267  
 (TN) BU 67%

**Tennessee Physical Therapy Services of Kingsport, LLC**  
 83-2129924  
 (TN) BU 100%

**Advanced Care House Calls of Tennessee, LLC**  
 Xx-xxxxxxx  
 (TN) BU 100%

**Tennessee Physical Therapy Services of Knoxville, LLC**  
 83-2743288  
 (TN) BU 100%

**Innovative Senior Care Home Health of Rhode Island, LLC**  
 45-2502463  
 (DE) BU 100%

**Health at Home Holdings, LLC**  
 87-0934507  
 (DE) BU 100%

**Elk Valley Professional Affiliates, Inc.**  
 62-1193858  
 (TN) BU 100%

**Lifeline Home Health Care of Springfield, LLC**  
 20-8826801  
 (TN) BU 100%

**Arkansas Home Health Providers-IV, LLC**  
 47-1754828  
 (AR) BU 100%

**LHCG C, LLC**  
 82-1229536  
 (MS) BU 100%

**Tennessee Physical Therapy Services of Mt. Juliet, LLC**  
 86-2321464  
 (TN) BU 100%

**Tennessee Physical Therapy Services of Memphis, LLC**  
 87-2087086  
 (TN) BU 100%

**West Tennessee HomeCare, LLC**  
 26-2947894  
 (TN) BU 67%

**Health at Home Holdings - Charlotte, LLC**  
 87-1136405  
 (DE) BU 100%

**Health at Home Holdings - Alabama, LLC**  
 87-1045915  
 (DE) BU 100%

**Health at Home Holdings - Albuquerque, LLC**  
 87-1045845  
 (DE) BU 100%

**Health at Home Holdings - Arizona, LLC**  
 87-1284003  
 (DE) BU 100%

**Health at Home Holdings - Boston, LLC**  
 87-1166127  
 (DE) BU 100%

**Cedar Creek Home Health Care Agency, LLC**  
 62-1358032  
 (TN) BU 100%

**LHCG CXXXIV, LLC**  
 35-2605467  
 (TN) BU 75%

**LHCG CLXII, LLC**  
 85-2210023  
 (TN) BU 100%

**LHCG XCIII, LLC**  
 81-5266120  
 (TN) BU 100%

**University of TN Medical Center HomeCare Services, LLC**  
 20-8912707  
 (TN) BU 67%

**Woods Home Health, LLC**  
 27-1260681  
 (TN) BU 100%

**Lifeline Home Health Care of Union City, LLC**  
 06-1793261  
 (TN) BU 100%

**Innovative Senior Care Home Health of Charlotte, LLC**  
 27-4318872  
 (DE) BU 100%

**Innovative Senior Care Home Health of Alabama, LLC**  
 30-0781533  
 (DE) BU 100%

**Innovative Senior Care Home Health of Albuquerque, LLC**  
 27-2065054  
 (DE) BU 100%

**Nurse on Call of Arizona, LLC**  
 38-3904633  
 (DE) BU 100%

**Innovative Senior Care Home Health of Boston, LLC**  
 26-3445981  
 (DE) BU 100%

**Elk Valley Health Services, LLC**  
 62-1204869  
 (TN) BU 100%

**LHCG CXXXV, LLC**  
 38-4049207  
 (TN) BU 100%

**LHCG XCV, LLC**  
 81-5274714  
 (TN) BU 100%

**LHCG XCIX, LLC**  
 81-5377954  
 (MS) BU 100%

**LHCG CXXXII, LLC**  
 37-1866838  
 (TN) BU 100%

**HMC Home Health, LLC**  
 27-1362827  
 (TN) BU 75%

**Lifeline of West Tennessee, LLC**  
 26-0609961  
 (TN) BU 100%

**Health at Home Holdings - Detroit, LLC**  
 87-1107918  
 (DE) BU 100%

**Health at Home Holdings - Durham, LLC**  
 87-1166046  
 (DE) BU 100%

**Health at Home Holdings - Edmond, LLC**  
 87-1136266  
 (DE) BU 100%

**Health at Home Holdings - High Point, LLC**  
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 (DE) BU 100%

**Gericare, LLC**  
 62-1160679  
 (TN) BU 100%

**LHCG CXXXVI, LLC**  
 38-4049205  
 (TN) BU 100%

**LHCG XCVI, LLC**  
 81-5297025  
 (TN) BU 100%

**LHCG XCVI, LLC**  
 81-5306890  
 (TN) BU 100%

**LHCG CXXXIII, LLC**  
 32-0540219  
 (TN) BU 100%

**Innovative Senior Care Home Health of Hartford, LLC**  
 45-2502527  
 (DE) BU 100%

**Medical Center Home Health, LLC**  
 26-2947990  
 (TN) BU 100%

**Innovative Senior Care Home Health of Detroit, LLC**  
 26-2611755  
 (DE) BU 100%

**Innovative Senior Care Home Health of Durham, LLC**  
 27-2620181  
 (DE) BU 100%

**Innovative Senior Care Home Health of Edmond, LLC**  
 27-2619513  
 (DE) BU 100%

**Innovative Senior Care Home Health of High Point, LLC**  
 45-2952600  
 (DE) BU 100%

**Elk Valley Home Health Care Agency, LLC**  
 62-1193854  
 (TN) BU 100%

**LHCG CXC, LLC**  
 86-1394064  
 (TN) BU 100%

**LHCG XCVII, LLC**  
 81-5322529  
 (TN) BU 100%

**LHCG XCVIII, LLC**  
 81-5345526  
 (MS) BU 100%

**Morristown-Hamblen HomeCare and Hospice, LLC**  
 26-2792774  
 (TN) BU 100%

**LHCG CXXIV, LLC**  
 87-3076026  
 (RI) BU 100%

**LHCG CXXX, LLC**  
 92-0578697  
 (TN) BU 100%

40.11

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Tennessee Health Care Group, LLC**  
 20-3427231  
 (TN) BU 100%

**Montana Health Care Group, LLC**  
 85-3923523  
 (MT) BU 100%

**New Mexico Health Care Group, LLC**  
 Xx-xxxxxx  
 (NM) BU 100%

**Missouri Health Care Group, LLC**  
 61-1495255  
 (MO) BU 100%

**New Jersey Health Care Group, LLC**  
 87-3033261  
 (NJ) BU 100%

**Nevada Health Care Group, LLC**  
 35-2465420  
 (NV) BU 100%

**Health at Home Holdings, LLC**  
 87-0934507  
 (TN) BU 100%

**LHCG CLXXXII, LLC**  
 85-3844617  
 (MT) BU 100%

**LHCG CLXXXIII, LLC**  
 85-3844754  
 (MT) BU 100%

**LHCG CLXXXVII, LLC**  
 85-3923619  
 (MT) BU 100%

**Advanced Care House Calls of New Mexico, LLC**  
 Xx-xxxxxx  
 (NM) BU 100%

**Access Hospice, LLC**  
 27-1366872  
 (MO) BU 100%

**Missouri Physical Therapy Services of Creve Coeur, LLC**  
 88-3684122  
 (MO) BU 100%

**LHCG CCIX, LLC**  
 88-3276389  
 (NJ) BU 100%

**LHCG CLII, LLC**  
 84-3325549  
 (NV) BU 100%

40.12

**Health at Home Hospice - Indianapolis, LLC**  
 87-0862398  
 (DE) BU 100%

**Health at Home Hospice - Columbus, LLC**  
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 (DE) BU 100%

**Health at Home Hospice - Sacramento, LLC**  
 86-4005194  
 (DE) BU 100%

**Brookdale Hospice of Philadelphia, LLC**  
 46-2849765  
 (DE) BU 100%

**Health at Home Hospice - Chicago, LLC**  
 87-0835646  
 (DE) BU 100%

**Health at Home Hospice - Cleveland, LLC**  
 87-0999405  
 (DE) BU 100%

**Health at Home Therapy - New Jersey, LLC**  
 87-0934773  
 (DE) BU 100%

**New Mexico Physical Therapy Services of Albuquerque, LLC**  
 88-2854505  
 (NM) BU 100%

**LHCG LXV, LLC**  
 47-2557600  
 (MO) BU 70%

**LHCG CXXXIII, LLC**  
 83-0681232  
 (MO) BU 80%

**LHCG CCXV, LLC**  
 87-4106973  
 (NJ) BU 100%

**LHCG XXXIX, LLC**  
 37-1711510  
 (NV) BU 100%

**Health at Home Holdings - Portland, LLC**  
 87-1108061  
 (DE) BU 100%

**Health at Home Holdings - Seattle Metro, LLC**  
 87-1043804  
 (DE) BU 100%

**Health at Home Holdings - Sonoma, LLC**  
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 (DE) BU 100%

**Health at Home Holdings - St. Louis, LLC**  
 87-0915245  
 (DE) BU 100%

**Health at Home Hospice - Dayton, LLC**  
 87-0967261  
 (DE) BU 100%

**Health at Home Hospice - Detroit, LLC**  
 80-2691389  
 (DE) BU 100%

**Health at Home Holdings - Ohio, LLC**  
 87-1189068  
 (DE) BU 100%

**LHCG LXIX, LLC**  
 47-5422639  
 (MO) BU 90%

**LHCG CXLVIII, LLC**  
 83-4482875  
 (MO) BU 80%

**LHCG CCXVII, LLC**  
 88-2549028  
 (NJ) BU 100%

**LHCG CXXXIX, LLC**  
 82-5174891  
 (NV) BU 75%

**Innovative Senior Care Home Health of Portland, LLC**  
 26-2863172  
 (DE) BU 100%

**Health at Home - Seattle Metro, LLC**  
 87-0862570  
 (DE) BU 100%

**Health at Home - Sonoma, LLC**  
 86-4004991  
 (DE) BU 100%

**Innovative Senior Care Home Health of St. Louis, LLC**  
 26-3445898  
 (DE) BU 100%

**Health at Home Hospice - Minnesota, LLC**  
 87-0835290  
 (DE) BU 100%

**Health at Home Hospice - Phoenix, LLC**  
 87-0862211  
 (DE) BU 100%

**Innovative Senior Care Home Health of Ohio, LLC**  
 26-1736377  
 (DE) BU 100%

**LHCG XXV, LLC**  
 27-4604406  
 (MO) BU 100%

**LHCG CXCI, LLC**  
 86-2876981  
 (MO) BU 100%

**LHCG CCXI, LLC**  
 87-3086258  
 (NJ) BU 75%

**LHCG CXXXVIII, LLC**  
 82-4394415  
 (NV) BU 100%

**Health at Home Holdings - Indianapolis, LLC**  
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 (DE) BU 100%

**Health at Home Holdings - Philadelphia, LLC**  
 87-1108256  
 (DE) BU 100%

**Health at Home Holdings - Chicago, LLC**  
 87-1095513  
 (DE) BU 100%

**Health at Home Hospice - Portland, LLC**  
 87-0835486  
 (DE) BU 100%

**ISCHH of Minneapolis Holdings, LLC**  
 87-0915370  
 (DE) BU 100%

**Health at Home Therapy - Atlanta, LLC**  
 87-1080305  
 (DE) BU 100%

**Health at Home Holdings - Tulsa, LLC**  
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 (DE) BU 100%

**Southwest Missouri HomeCare, LLC**  
 26-1496237  
 (MO) BU 100%

**LHCG CXLVI, LLC**  
 83-4387481  
 (MO) BU 100%

**LHCG CCXII, LLC**  
 Xx-xxxxxx  
 (NJ) BU 100%

**LHCG CXXXIV, LLC**  
 38-4085343  
 (NV) BU 100%

**Innovative Senior Care Home Health of Indianapolis, LLC**  
 26-3285980  
 (DE) BU 100%

**Innovative Senior Care Home Health of Philadelphia, LLC**  
 27-2399264  
 (DE) BU 100%

**Innovative Senior Care Home Health of Chicago, LLC**  
 27-0329830  
 (DE) BU 100%

**Health at Home Therapy - Greenville, LLC**  
 87-0999492  
 (DE) BU 100%

**Innovative Senior Care Home Health of Minneapolis, LLC**  
 26-3445808  
 (DE) BU 100%

**Health at Home Therapy - Knoxville, LLC**  
 87-0967144  
 (DE) BU 100%

**Innovative Senior Care Home Health of Tulsa, LLC**  
 27-4586855  
 (DE) BU 100%

**LHCG CXLVII, LLC**  
 83-4414219  
 (MO) BU 100%

**LHCG CCXVIII, LLC**  
 88-4310496  
 (NJ) BU 100%

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Almost Family, Inc.**  
 06-1153720  
 (DE) BU 100%

**AFAM Acquisition, LLC**  
 26-2866404  
 (KY) BU 100%

**Adult Day Care of America, Inc.**  
 06-1207175  
 (DE) BU 100%

**Imperium Health Management, LLC**  
 45-2788800  
 (KY) BU 100%

**Ingenios Health Holdings, Inc.**  
 46-0896098  
 (DE) BU 100%

**National Health Industries, Inc.**  
 61-0997496  
 (KY) BU 90%

**Patient Care, Inc.**  
 22-2088938  
 (DE) BU 100%

**AFAM Sub I, LLC**  
 83-3778263  
 (DE) BU 100%

**ACO Clinical Partners, LLC**  
 47-4049515  
 (KY) BU 100%

**Advanced Clinical Partners, LLC**  
 86-3179032  
 (KY) BU 100%

**Apex Clinical Partners, LLC**  
 86-3255577  
 (KY) BU 100%

**Ingenios Health Co**  
 22-3980674  
 (DE) BU 90%

**AF-CH-HH, LLC**  
 26-3287805  
 (DE) BU 80%

**Patient Care Medical Services, Inc.**  
 22-2170708  
 (NJ) BU 10%

**Priority Care, Inc.**  
 06-1482496  
 (CT) BU 100%

**Bluegrass Accountable Care, LLC**  
 47-4035861  
 (KY) BU 100%

**Colorado Clinical Partners, LLC**  
 47-4049624  
 (CO) BU 100%

**Commonwealth Clinical Partners, LLC**  
 46-5768603  
 (KY) BU 100%

**Clarksville Home Care Services LLC**  
 80-0278168  
 (DE) BU 100%

**Cleveland Home Care Services LLC**  
 26-3388524  
 (DE) BU 100%

**Kirksville Home Care Services, LLC**  
 30-0961579  
 (MO) BU 100%

**Knoxville Home Care Services LLC**  
 38-3940574  
 (DE) BU 100%

**Gadsden Home Care Services LLC**  
 26-3375349  
 (DE) BU 100%

**Ponca City Home Care Services LLC**  
 20-4345976  
 (OK) BU 100%

**Scranton Quincy Home Care Services LLC**  
 38-3857848  
 (DE) BU 100%

**Patient Care Pennsylvania, Inc.**  
 37-1459396  
 (DE) BU 100%

**Patient Care Connecticut, LLC**  
 27-0726569  
 (CT) BU 100%

**Imperium Clinical Partners, LLC**  
 86-3256691  
 (KY) BU 100%

**Imperium Clinical Partners II, LLC**  
 86-3297432  
 (KY) BU 100%

**Imperium Clinical Partners III, LLC**  
 86-3297600  
 (KY) BU 100%

**Hattiesburg Home Care Services LLC**  
 26-3376723  
 (DE) BU 100%

**Key West HHA, LLC**  
 37-1862951  
 (FL) BU 100%

**North Okaloosa Home Health LLC**  
 20-1574246  
 (FL) BU 100%

**SWF Home Care Services, LLC**  
 82-3283507  
 (FL) BU 100%

**La Porte Home Care Services, LLC**  
 81-0704452  
 (DE) BU 100%

**Valparaiso Home Care Services LLC**  
 61-1761960  
 (DE) BU 100%

**Venice Home Care Services LLC**  
 32-0449695  
 (DE) BU 100%

**Patient Care New Jersey, Inc.**  
 20-1574433  
 (DE) BU 100%

**Patient Care HHA, LLC**  
 61-1792273  
 (CT) BU 100%

**Integrity Clinical Partners, LLC**  
 47-4074288  
 (MN) BU 100%

**Kentuckiana Clinical Partners, LLC**  
 47-4074341  
 (KY) BU 100%

**Kentucky Accountable Care, LLC**  
 47-4035777  
 (KY) BU 100%

**Louisa Home Care Holdings, LLC**  
 81-3825304  
 (DE) BU 100%

**Mooresville Home Care Services, LLC**  
 36-4794488  
 (DE) BU 100%

**Tucson Home Care Services, LLC**  
 30-0838429  
 (DE) BU 100%

**Deming Home Care Services, LLC**  
 26-3376957  
 (DE) BU 100%

**Victoria Texas Home Care Services, LLC**  
 26-3404003  
 (DE) BU 100%

**Birmingham Home Care Services, LLC**  
 32-0408624  
 (DE) BU 100%

**Western Arizona Regional Home Health and Hospice, LLC**  
 20-2014700  
 (AZ) BU 100%

**Patient Care of Hudson County, LLC**  
 47-5126154  
 (NJ) BU 100%

**Kentucky Clinical Partners, LLC**  
 47-4005600  
 (KY) BU 100%

**Physicians Accountable Care, LLC**  
 47-4024935  
 (KY) BU 100%

**Physicians Accountable Care of Kentucky, LLC**  
 47-4035828  
 (KY) BU 100%

**SJ Home Care LLC**  
 26-2817959  
 (DE) BU 100%

**Springdale Home Care Services, LLC**  
 26-3389049  
 (DE) BU 100%

**Shelbyville Home Care Services, LLC**  
 26-3388550  
 (DE) BU 100%

**Jackson Home Care Services, LLC**  
 26-3375646  
 (DE) BU 100%

**Wilkes-Barre Home Care Services, LLC**  
 26-3594822  
 (DE) BU 100%

**Key West PD, LLC**  
 32-0536495  
 (FL) BU 100%

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Almost Family, Inc.**  
 06-1153720  
 (DE) BU 100%

**National Health Industries, Inc.**  
 61-0997496  
 (KY) BU 90%

**AFAM Holding Co II, LLC (4)**  
 85-3047540  
 (DE) BU 80%

**BRACOR, Inc.**  
 16-1270177  
 (NY) BU 100%

**AFAM Holding Co, LLC (4)**  
 83-3778238  
 (DE) BU 80%

**Emporia Home Care Services, LLC**  
 26-3388740  
 (DE) BU 100%

**Patient's Choice Homecare, LLC**  
 55-0832250  
 (CT) BU 100%

**Connecticut Home Health Care, Incorporated**  
 06-1254084  
 (CT) BU 100%

**Fulton Home Care Services LLC**  
 26-3385091  
 (DE) BU 99%

**Blue Island Home Care Services LLC**  
 38-3859193  
 (DE) BU 99%

**Brevard HMA Home Health LLC**  
 27-3142339  
 (FL) BU 100%

**Brevard HMA Hospice LLC**  
 27-3142339  
 (FL) BU 100%

**Centre Home Care LLC**  
 20-4408565  
 (AL) BU 100%

**Crossroads Home Care Services, LLC**  
 26-3376835  
 (DE) BU 99%

**Tomball Texas Home Care Services, LLC**  
 45-2856177  
 (DE) BU 99%

**Youngstown Home Care Services LLC**  
 27-5284765  
 (DE) BU 100%

**Franklin Home Care Services, LLC**  
 26-3388787  
 (DE) BU 100%

**Western Region Health Corporation**  
 16-1365147  
 (NY) BU 100%

**Willcare, Inc.**  
 16-1202250  
 (NY) BU 100%

**Weatherford Home Care Services, LLC**  
 26-3375892  
 (DE) BU 100%

**Florence Home Care Services, LLC**  
 26-3376655  
 (DE) BU 100%

**Fort Payne Home Care LLC**  
 20-4408510  
 (AL) BU 100%

**Fort Smith HMA Home Health, LLC**  
 27-1014059  
 (AR) BU 100%

**Galesburg Home Care LLC**  
 20-4828017  
 (DE) BU 99%

**Granite City Home Care Services LLC**  
 26-3376889  
 (DE) BU 99%

**Waukegan Hospice LLC**  
 20-4885028  
 (DE) BU 99%

**York Home Care Services LLC**  
 30-0708462  
 (DE) BU 100%

**Lakeland Home Care Services LLC**  
 27-3073250  
 (DE) BU 100%

**Litson Certified Care, Inc.**  
 13-3792263  
 (NY) BU 100%

**Litson Health Care, Inc.**  
 14-1630316  
 (NY) BU 100%

**Mayes County HMA Home Health LLC**  
 45-4406785  
 (OK) BU 100%

**Helena Home Care Services LLC**  
 26-3384769  
 (DE) BU 100%

**Jourdanton Home Care Services, LLC**  
 26-3388719  
 (DE) BU 100%

**Lancaster Home Care Services, LLC**  
 26-3376587  
 (DE) BU 100%

**Louisa Home Care Services LLC**  
 26-3385143  
 (DE) BU 100%

**Northampton Home Care LLC**  
 26-1266166  
 (DE) BU 100%

**West Grove Home Care, LLC**  
 26-1266308  
 (DE) BU 100%

**Petersburg Home Care Services, LLC**  
 26-3388826  
 (DE) BU 100%

**Wichita Falls Texas Home Care, LLC**  
 20-5280925  
 (TX) BU 100%

**Oklahoma City Home Care Services LLC**  
 26-3388890  
 (DE) BU 100%

**Pottstown Home Care Services, LLC**  
 26-3385581  
 (DE) BU 100%

**Red Bud Home Care Services, LLC**  
 26-3385035  
 (DE) BU 99%

**Sharon Home Care Services LLC**  
 37-1745728  
 (DE) BU 100%

**Spokane Home Care Services LLC**  
 27-3788721  
 (DE) BU 100%

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

Continued from Previous Page

Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Almost Family, Inc.**  
 06-1153720  
 (DE) BU 100%

**National Health Industries, Inc.**  
 61-0997496  
 (KY) BU 90%

**AFAM Holding Co IV, LLC (4)**  
 92-2908587  
 (OK) BU 80%

**AFAM Holding Co III, LLC (4)**  
 86-3137505  
 (DE) BU 80%

**Almost Family PC of SW Florida, LLC**  
 26-1261522  
 (FL) BU 100%

**Caretenders Visiting Services of District 6, LLC**  
 30-0425709  
 (KY) BU 100%

**Caretenders Visiting Services of Orlando, LLC**  
 30-0425717  
 (KY) BU 100%

**Almost Family PC of Kentucky, LLC**  
 26-1259925  
 (KY) BU 100%

**Caretenders VS of Ohio, LLC**  
 26-3706241  
 (OH) BU 100%

**Caretenders VNA of Ohio, LLC**  
 27-3756374  
 (OH) BU 100%

**Caretenders VS of Western KY, LLC**  
 26-1265838  
 (KY) BU 100%

**Mederi Caretenders VS of Broward, LLC**  
 26-1264504  
 (FL) BU 100%

**NP Services of KY, LLC**  
 82-2998879  
 (KY) BU 100%

**Long Term Solutions, Inc.**  
 04-3485196  
 (MA) BU 100%

**Clinton Home Health & Hospice LLC**  
 45-4406745  
 (OK) BU 100%

**AFAM Holding Co V, LLC (4)**  
 93-2670946  
 (DE) BU 80%

**Almost Family PC of West Palm, LLC**  
 26-1263982  
 (FL) BU 100%

**Caretenders Visiting Services of District 7, LLC**  
 30-0425714  
 (KY) BU 100%

**Caretenders Visiting Services of Pinellas County, LLC**  
 20-5826531  
 (FL) BU 100%

**Caretenders of Jacksonville, LLC**  
 20-5890994  
 (FL) BU 100%

**IN Homecare Network North, LLC**  
 46-3020499  
 (IN) BU 100%

**Caretenders VS of Boston, LLC**  
 26-1258759  
 (MA) BU 100%

**HHA of Wisconsin, LLC**  
 37-1826396  
 (WI) BU 100%

**Mederi Caretenders VS of SE FL, LLC**  
 26-1264234  
 (FL) BU 100%

**NP Services of NC, LLC**  
 82-3026260  
 (NC) BU 100%

**LTS At Home, LLC**  
 85-1275334  
 (DE) BU 100%

**Woodward Home Care Services LLC**  
 26-3375945  
 (DE) BU 100%

**El Dorado Home Care Services, LLC**  
 26-4626302  
 (DE) BU 100%

**BHC Services, Inc.**  
 06-1137222  
 (NY) BU 80%

**Caretenders Visiting Services of Gainesville, LLC**  
 30-0425715  
 (FL) BU 100%

**Caretenders Visiting Services of Southern Illinois, LLC**  
 20-5826553  
 (IL) BU 100%

**Caretenders Visiting Services of St. Augustine, LLC**  
 20-2910357  
 (FL) BU 100%

**NP Services of IN, LLC**  
 82-3009527  
 (IN) BU 100%

**Caretenders VS of Central KY, LLC**  
 26-1259391  
 (KY) BU 100%

**Home Health of Jefferson Co, LLC**  
 38-4003190  
 (KY) BU 60%

**Mederi Caretenders VS of SW FL, LLC**  
 26-1264384  
 (FL) BU 100%

**NP Services of OH, LLC**  
 82-4255048  
 (OH) BU 100%

**Cambridge Home Health Care Holdings, Inc.**  
 20-0591577  
 (DE) BU 100%

**Berwick Home Care Services LLC**  
 26-3376776  
 (DE) BU 100%

**Caretenders of Cleveland, Inc.**  
 61-1306845  
 (KY) BU 100%

**Caretenders Visiting Services of Hernando County, LLC**  
 20-5826497  
 (FL) BU 100%

**Almost Family PC of Ft. Lauderdale, LLC**  
 26-1260724  
 (FL) BU 100%

**Caretenders Visiting Services of St. Louis, LLC**  
 20-5826598  
 (MO) BU 100%

**Caretenders VS of SE Ohio, LLC**  
 45-1139239  
 (OH) BU 100%

**Caretenders VS of Lincoln Trail, LLC**  
 26-3632764  
 (KY) BU 100%

**Illinois Home Care Holdings, LLC**  
 32-0505528  
 (DE) BU 80%

**Mederi Caretenders VS of Tampa, LLC**  
 26-1248096  
 (FL) BU 100%

**Princeton Home Health, LLC**  
 20-5081107  
 (AL) BU 100%

**Cambridge Home Health Care, Inc.**  
 34-1772291  
 (OH) BU 100%

**Almost Family ACO Services of Kentucky, LLC**  
 61-1166649  
 (KY) BU 100%

**Caretenders of Columbus, Inc.**  
 61-1302995  
 (KY) BU 100%

**Caretenders Visiting Services of Kentuckiana, LLC**  
 20-3021812  
 (KY) BU 100%

**Almost Family ACO Services of South Florida, LLC**  
 46-5765971  
 (FL) BU 100%

**Caretenders Visiting Services Employment Company, Inc.**  
 61-1326749  
 (KY) BU 100%

**Caretenders Visiting Services of Ocala, LLC**  
 20-4522444  
 (FL) BU 100%

**Caretenders VS of Louisville, LLC**  
 26-1264112  
 (KY) BU 100%

**IN HomeCare Network Central, LLC**  
 46-3029953  
 (IN) BU 100%

**Mederi Private Care, LLC**  
 83-4371904  
 (FL) BU 100%

**Midwest Hospice, LLC**  
 Xx-xxxxxxx  
 (AR) BU 100%

**Cambridge Home Health Care, Inc./ Private**  
 34-1772292  
 (OH) BU 100%

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

Continued from Previous Page

Continued on Next Page

**LHC Group, Inc.**  
 71-0918189  
 (DE) BU 42060 100%

**Almost Family, Inc.**  
 06-1153720  
 (DE) BU 100%

**National Health Industries, Inc.**  
 61-0997496  
 (KY) BU 90%

**Black Stone Operations, LLC**  
 90-1028083  
 (OH) BU 100%

**OMNI Home Health Holdings, Inc.**  
 45-2638400  
 (DE) BU 100%

**Black Stone of Northeast Ohio, LLC**  
 47-2166181  
 (OH) BU 100%

**Blackstone Group, LLC**  
 20-1902460  
 (OH) BU 100%

**Black Stone of Cincinnati, LLC**  
 27-4109221  
 (OH) BU 100%

**Blackstone Health Care, LLC**  
 31-1462432  
 (OH) BU 100%

**Black Stone of Dayton, LLC**  
 27-4109305  
 (OH) BU 100%

**OMNI Home Health Services, LLC**  
 26-2010556  
 (DE) BU 100%

**Black Stone of Northwest Ohio, LLC**  
 90-1020734  
 (OH) BU 100%

**Black Stone of Central Ohio, LLC**  
 27-1746397  
 (OH) BU 100%

**Assisted Care by Black Stone of Cincinnati, LLC**  
 27-4109484  
 (OH) BU 100%

**Home Health Care by Black Stone of Cincinnati, LLC**  
 27-4109403  
 (OH) BU 100%

**Advanced Geriatric Education & Consulting, LLC**  
 26-1666243  
 (OH) BU 100%

**Assisted Care by Black Stone of Dayton, LLC**  
 27-4109638  
 (OH) BU 100%

**OMNI Home Health- District 4, LLC**  
 20-1657488  
 (FL) BU 100%

**Home Health Agency- Central Pennsylvania, LLC**  
 20-1497787  
 (FL) BU 100%

**Home Health Agency- Collier, LLC**  
 20-0832146  
 (FL) BU 100%

**Home Health Agency- Hillsborough, LLC**  
 59-3757325  
 (FL) BU 100%

**OMNI Home Health- Jacksonville, LLC**  
 59-3754764  
 (FL) BU 100%

**Assisted Care by Black Stone of Northwest Ohio, LLC**  
 47-3253280  
 (OH) BU 100%

**Assisted Care by Black Stone of Central Ohio, LLC**  
 27-1755138  
 (OH) BU 100%

**Care Advisors by Black Stone, LLC**  
 27-0564326  
 (OH) BU 100%

**MJ Nursing at Black Stone, LLC**  
 26-3831640  
 (OH) BU 100%

**S&B Health Care, LLC**  
 31-1487353  
 (OH) BU 100%

**Home Health Care by Black Stone of Dayton, LLC**  
 27-4109553  
 (OH) BU 100%

**Home Health Agency- Pennsylvania, LLC**  
 59-3757322  
 (FL) BU 100%

**Home Health Agency- Indiana, LLC**  
 20-1408322  
 (FL) BU 100%

**Home Health Agency- Pinellas, LLC**  
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 (FL) BU 100%

**OMNI Home Health- District 1, LLC**  
 20-0527436  
 (FL) BU 100%

**OMNI Home Health- District 2, LLC**  
 20-0527566  
 (FL) BU 100%

**Home Health Care by Black Stone of Northwest Ohio, LLC**  
 34-1708719  
 (OH) BU 100%

**Home Health Care by Black Stone of Central Ohio, LLC**  
 27-1755342  
 (OH) BU 100%

**OMNI Home Health- Hernando, LLC**  
 59-3741300  
 (FL) BU 100%

**OMNI Health Management, LLC**  
 04-3630085  
 (FL) BU 100%

**Home Health Agency- Philadelphia, LLC**  
 20-1408427  
 (FL) BU 100%

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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 71-0918189  
 (DE) BU 42060 100%

**Almost Family, Inc.**  
 06-1153720  
 (DE) BU -----100%

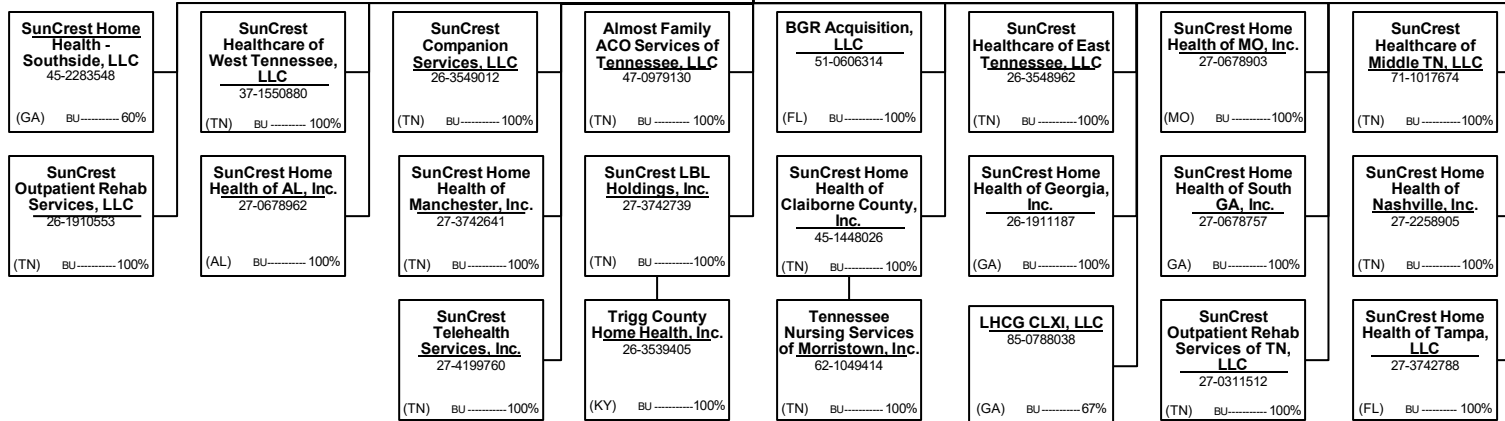
**National Health Industries, Inc.**  
 61-0997496  
 (KY) BU -----90%

**OMNI Home Health Holdings, Inc.**  
 45-2638400  
 (DE) BU -----100%

**SunCrest Healthcare, Inc.**  
 20-3701127  
 (GA) BU -----100%

Substantively Controlled LHC Group Entities

**HH Health System-Jackson, LLC**  
 87-2027148  
 (AL) BU ----



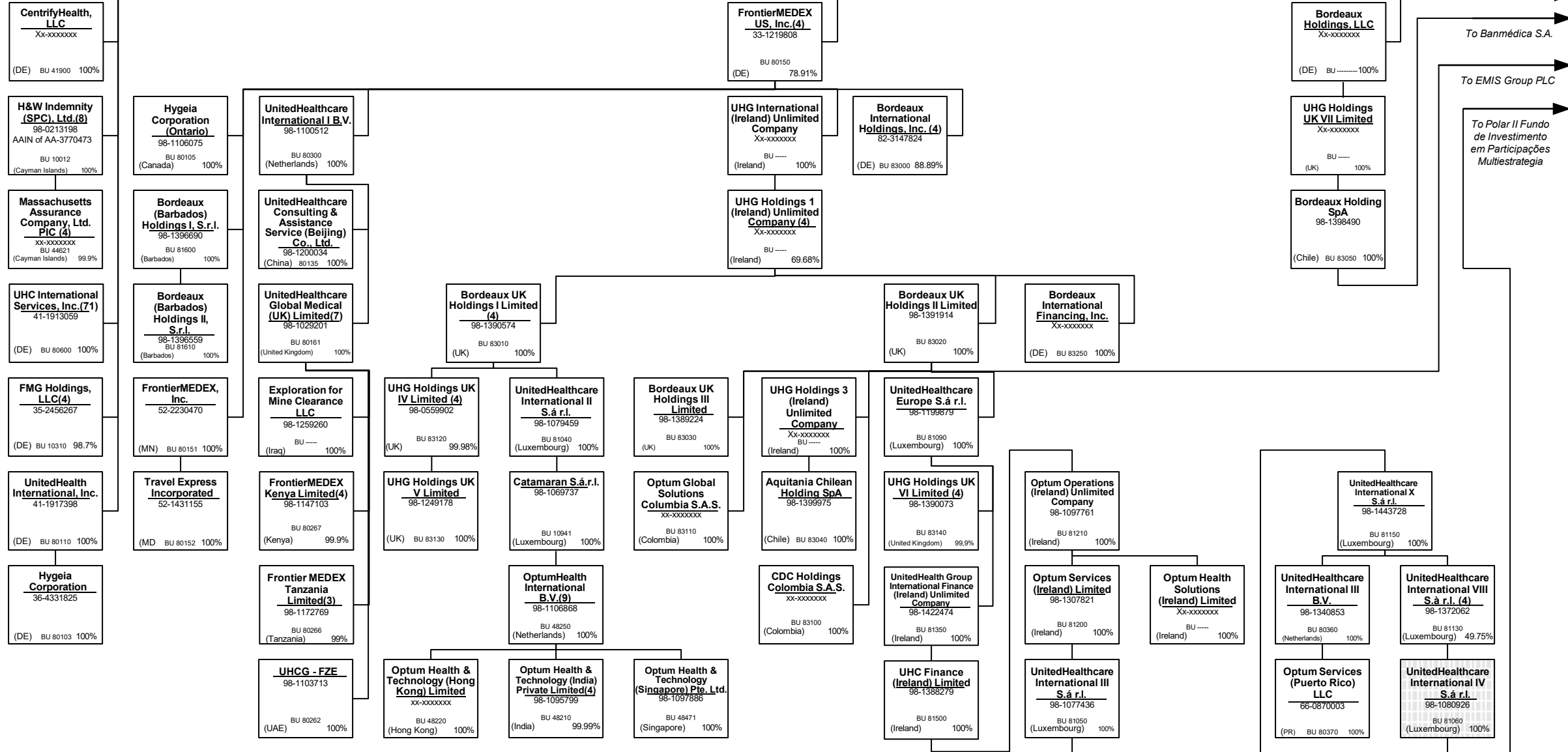


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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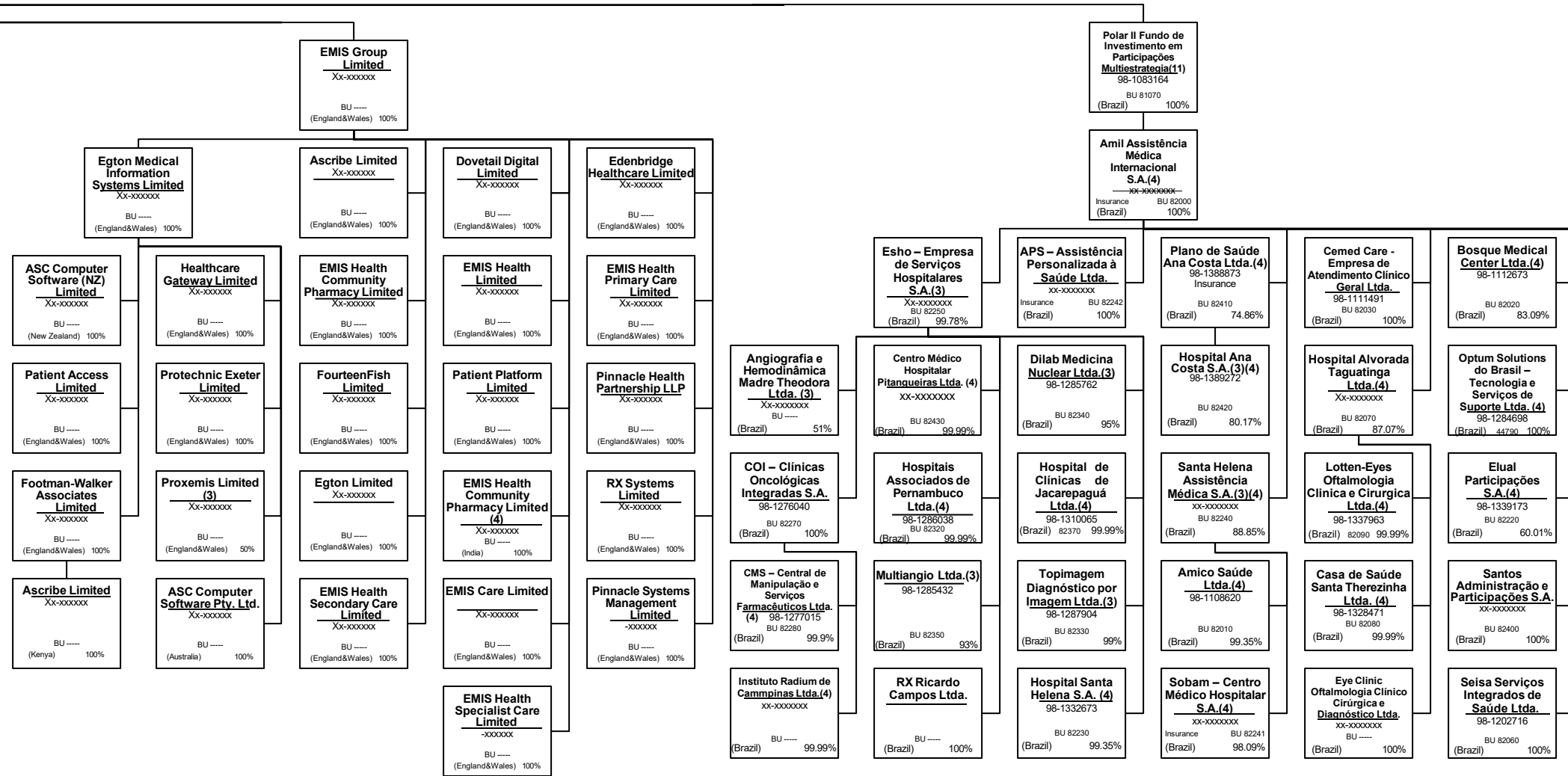


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

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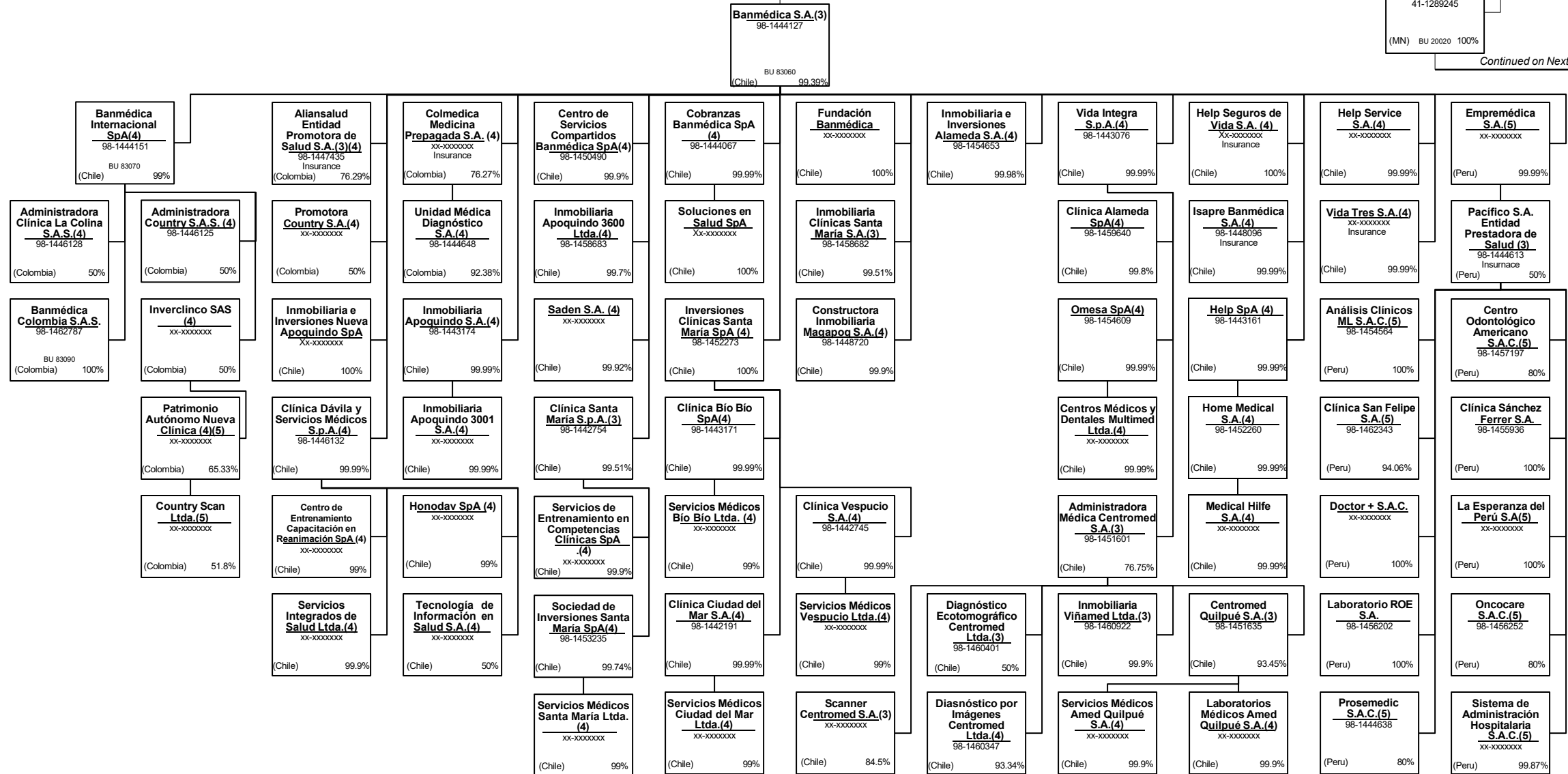
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 ( DE ) 41-1321939

**United HealthCare Services, Inc.**  
 41-1289245  
 (MN) BU 20020 100%

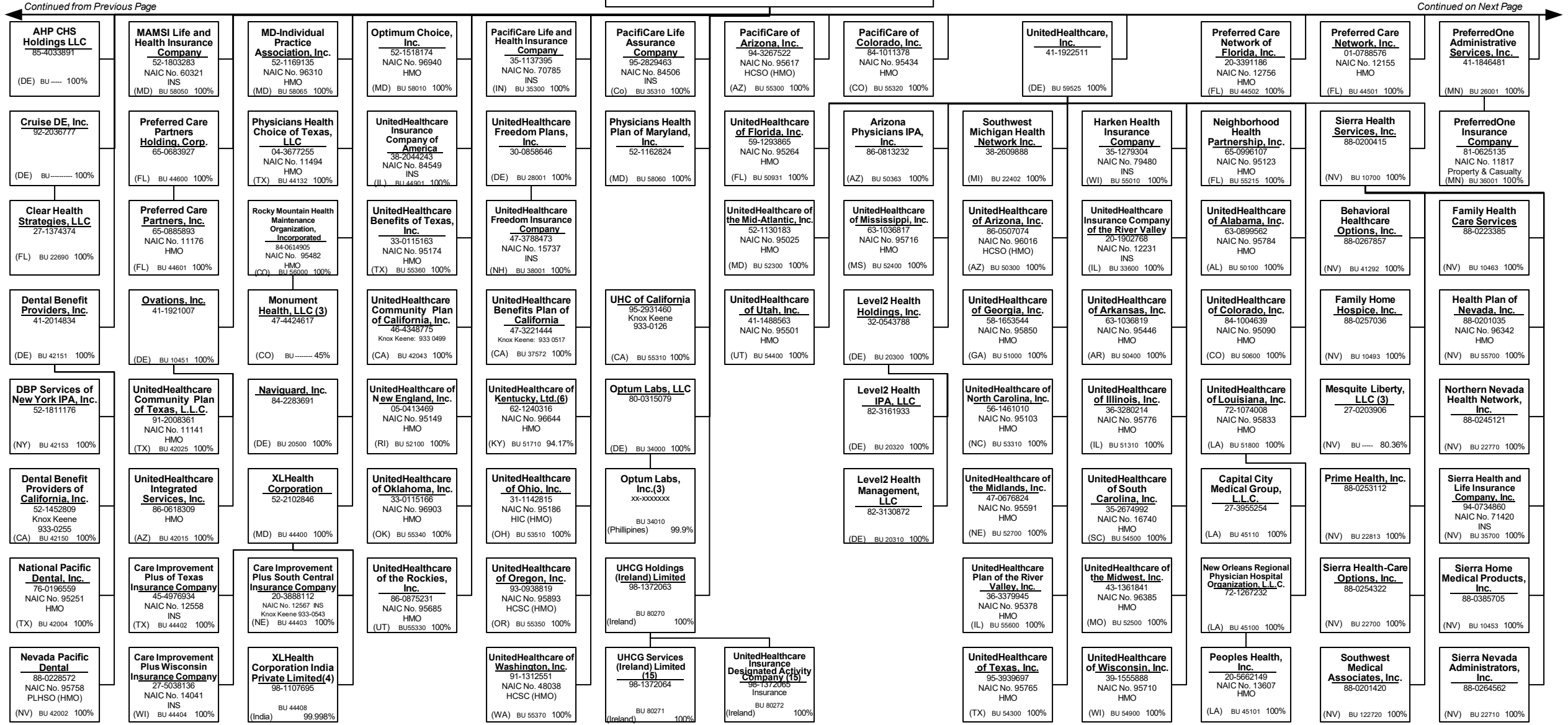
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**United HealthCare Services, Inc.**  
 (MN) 41-1289245 100%



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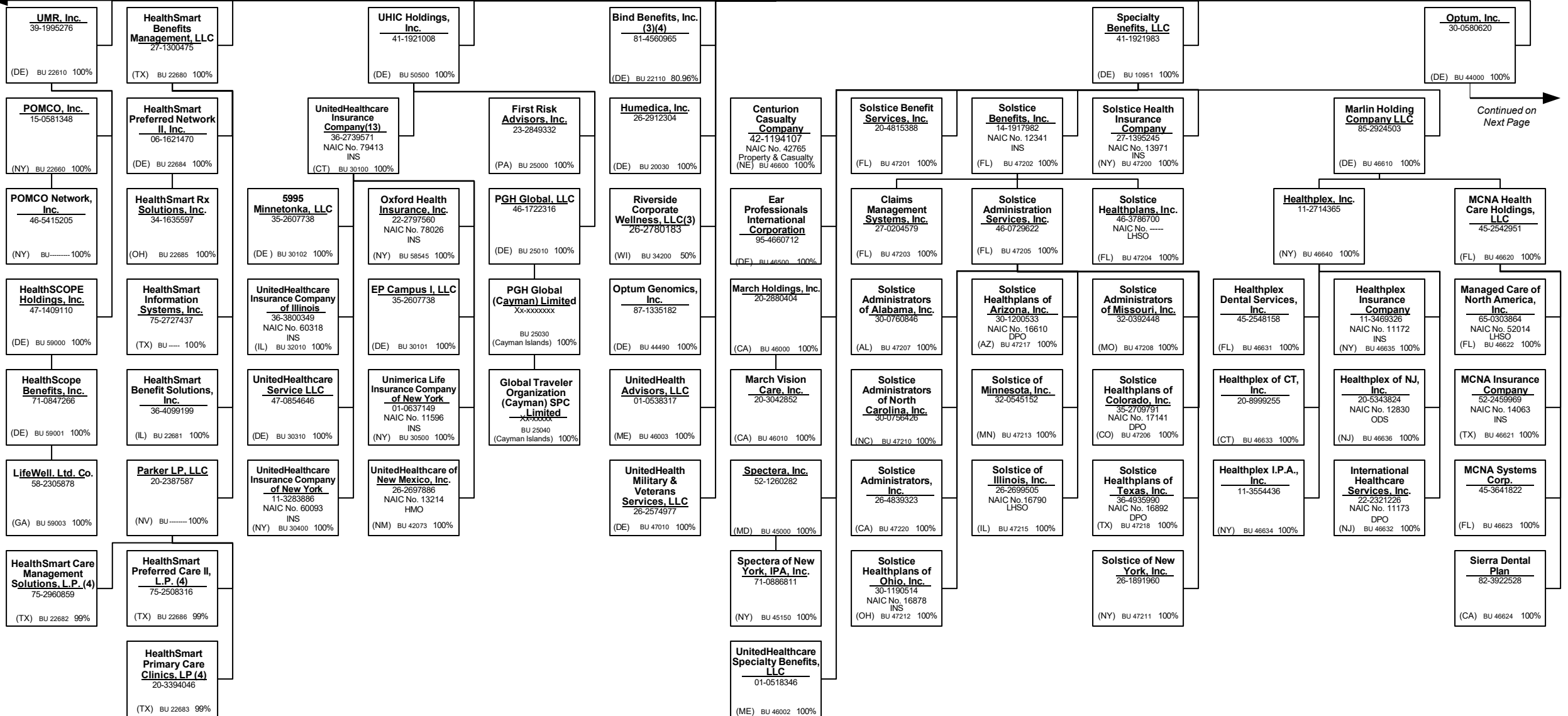
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

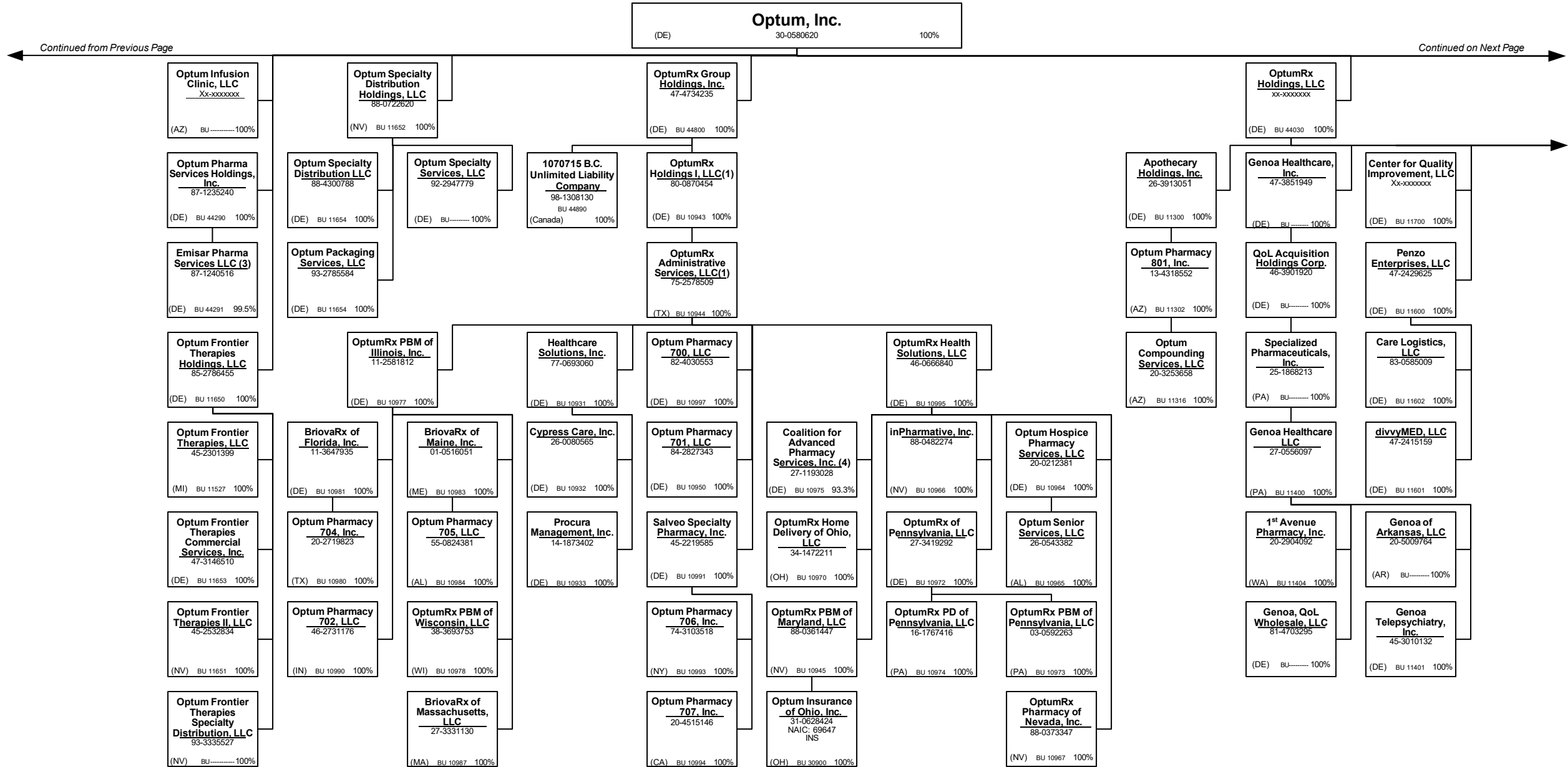
**United HealthCare Services, Inc.**  
 (MN) 41-1289245 100%

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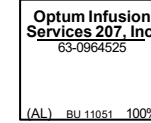
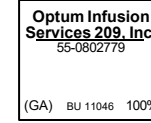
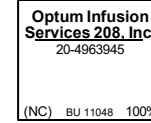
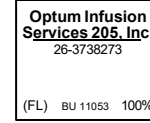
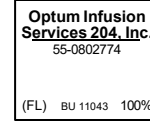
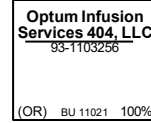
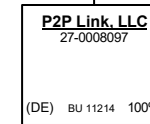
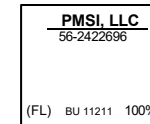
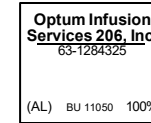
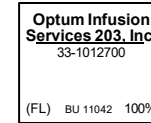
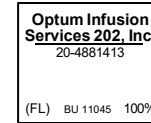
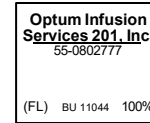
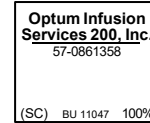
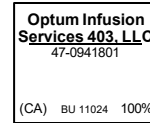
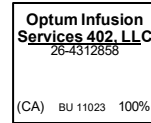
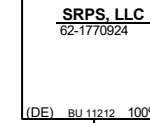
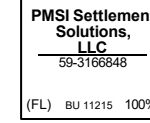
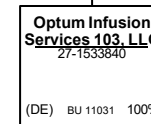
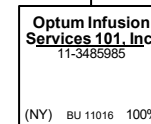
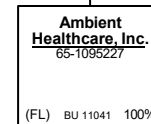
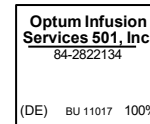
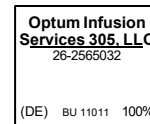
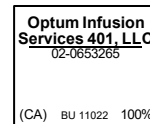
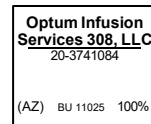
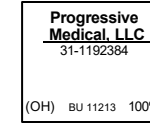
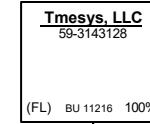
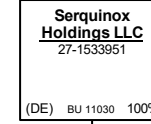
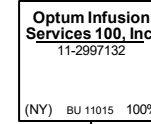
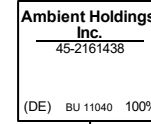
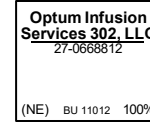
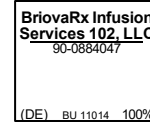
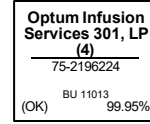
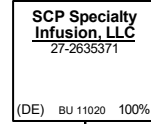
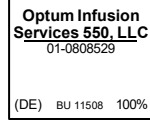
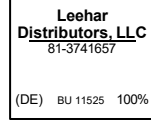
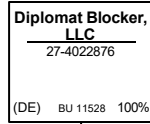
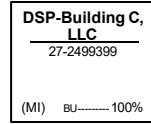
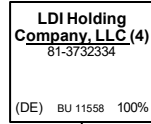
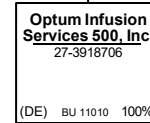
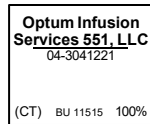
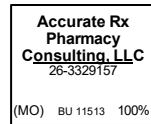
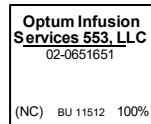
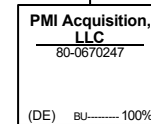
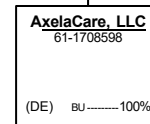
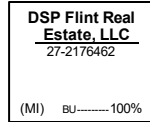
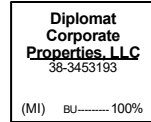
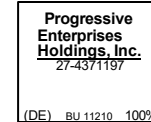
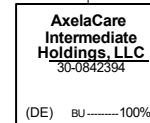
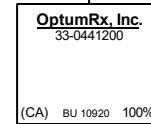
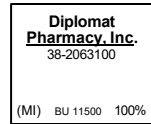
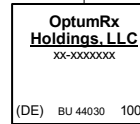
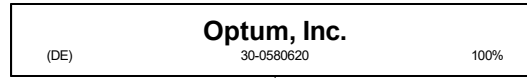
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Optum, Inc.**  
 (DE) 30-0580620 100%

**OptumInsight Holdings, LLC**  
 xx-xxxxxxx  
 (DE) BU 44010 100%

**OptumInsight, Inc.(9)**  
 41-1858498  
 (DE) BU 41322 100%

**OptumHealth Care Solutions, LLC**  
 41-1591944  
 (DE) BU 42300 100%

**OptumInsight Provider Value Network ACO, LLC**  
 93-1637574  
 (DE) BU-----100%

**OptumInsight Life Sciences, Inc.**  
 04-3383745  
 (DE) BU 41422 100%

**Optum Public Sector Solutions, Inc.**  
 20-4581265  
 (DE) BU 41372 100%

**Optum Government Solutions, Inc.**  
 04-3574101  
 (DE) BU 43350 100%

**Optum Technology, LLC**  
 46-5713629  
 (DE) BU 44770 100%

**Optum360 Solutions, LLC**  
 82-3446942  
 (DE) BU 41880 100%

**ACN Group IPA of New York, Inc.**  
 41-1913523  
 (NY) BU 42310 100%

**ACN Group of California, Inc.**  
 27-0015861  
 Knox Keene  
 933-0407  
 (CA) BU 42330 100%

**My Wellness Solutions, LLC**  
 26-2564744  
 (DE) BU 42340 100%

**OrthoNet Holdings, Inc.**  
 13-3960641  
 (DE) BU 48080 100%

**Optum Rocket, LLC**  
 46-3328009  
 (DE) BU 41850 100%

**Optum Life Sciences (Canada) Inc.**  
 98-1209730  
 BU 41410  
 (Canada) 100%

**The Lewin Group, Inc.**  
 56-1970224  
 (NC) BU 41342 100%

**hCentive, Inc.**  
 27-0549481  
 (DE) BU 41325 100%

**Electronic Network Systems, Inc.**  
 84-1162764  
 (DE) BU 41350 100%

**Managed Physical Network, Inc.**  
 14-1782475  
 (NY) BU 42320 100%

**Optum Biometrics, Inc.**  
 36-3437660  
 (IL) BU 42301 100%

**Pronounced Health Solutions, Inc.**  
 22-3493126  
 (DE) BU 42343 100%

**Optum Networks of New Jersey, Inc.**  
 30-0029448  
 NAIC: 11068  
 INS  
 (DE) BU 48085 100%

**OrthoNet LLC**  
 13-3818652  
 (NY) BU 48084 100%

**Optum360 Services, Inc.**  
 46-3983926  
 (DE) BU 41851 100%

**Equian Parent Corp.**  
 81-0732646  
 (DE) BU 43370 100%

**The Advisory Board Company**  
 52-1468699  
 (DE) BU 41323 100%

**Payment Resolution Services, LLC**  
 62-1451147  
 (TN) BU 43403 100%

**Optum Global Solutions International B.V.(4)**  
 98-1201187  
 BU 44810  
 (Netherlands) 100%

**Executive Health Resources, Inc.**  
 11-3669765  
 (PA) BU 41841 100%

**Plus One Holdings, Inc.**  
 13-3613705  
 (DE) BU 42304 100%

**United Resource Networks IPA of New York, Inc.**  
 30-0318238  
 (NY) BU 45001 100%

**Optum Women's and Children's Health, LLC**  
 58-2205984  
 (DE) BU 42341 100%

**OrthoNet New York IPA, Inc.**  
 13-4025898  
 (NY) BU 48086 100%

**OrthoNet of the South, Inc.**  
 26-2884306  
 (DE) BU 48082 100%

**Optum360, LLC**  
 46-3328307  
 (DE) BU 41860 96.01%

**Equian, LLC**  
 27-0083277  
 (IN) BU 43380 100%

**Episource LLC**  
 20-4761361  
 (CA) BU 41360 100%

**OptumServe Technology Services, Inc.**  
 52-2016292  
 (MD) BU 41345 100%

**Optum Global Solutions (Philippines), Inc.(3)**  
 98-1097776  
 BU 41340  
 (Philippines) 99.99%

**Netwerkes, LLC**  
 20-4755277  
 (TN) BU 43404 100%

**Plus One Health Management Puerto Rico, Inc.**  
 66-0742844  
 (PR) BU 42305 100%

**Vivify Health, Inc.**  
 27-1348358  
 (DE) BU 42360 100%

**Optum Healthcare of Illinois, Inc.**  
 58-2068880  
 (GA) BU-----100%

**OrthoNet West, Inc.**  
 20-0221966  
 (DE) BU 48087 100%

**AccuReg Holdngs, LLC**  
 xx-xxxxxxx  
 (DE) BU 41890 100%

**OmniClaim, LLC**  
 27-0062838  
 (DE) BU 43381 100%

**DocASAP, Inc.**  
 26-4753954  
 (DE) BU 44231 100%

**Optum Health & Technology Services do Brasil Ltda.(4)**  
 98-1184561  
 BU 43230  
 (Brazil) 99.99%

**Mustang Razorback Holdings, Inc.**  
 47-1935798  
 (DE) BU 41870 100%

**Optum of New York, Inc.**  
 58-1873062  
 (NY) BU-----100%

**Database Solutions II, LLC**  
 63-1230900  
 (DE) BU-----100%

**DocASAP US, LLC**  
 xx-xxxxxxx  
 (DE) BU 44233 100%

**OptumInsight Provider Value Network ACO - NY, LLC**  
 xx-xxxxxxx  
 (NY) BU-----100%

**Optum Global Solutions (India) Private Limited(4)**  
 98-1103015  
 BU 41346  
 (India) 99.9%

**MedSynergies, LLC**  
 75-2515691  
 (DE) BU 41871 100%

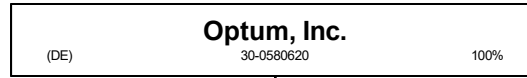
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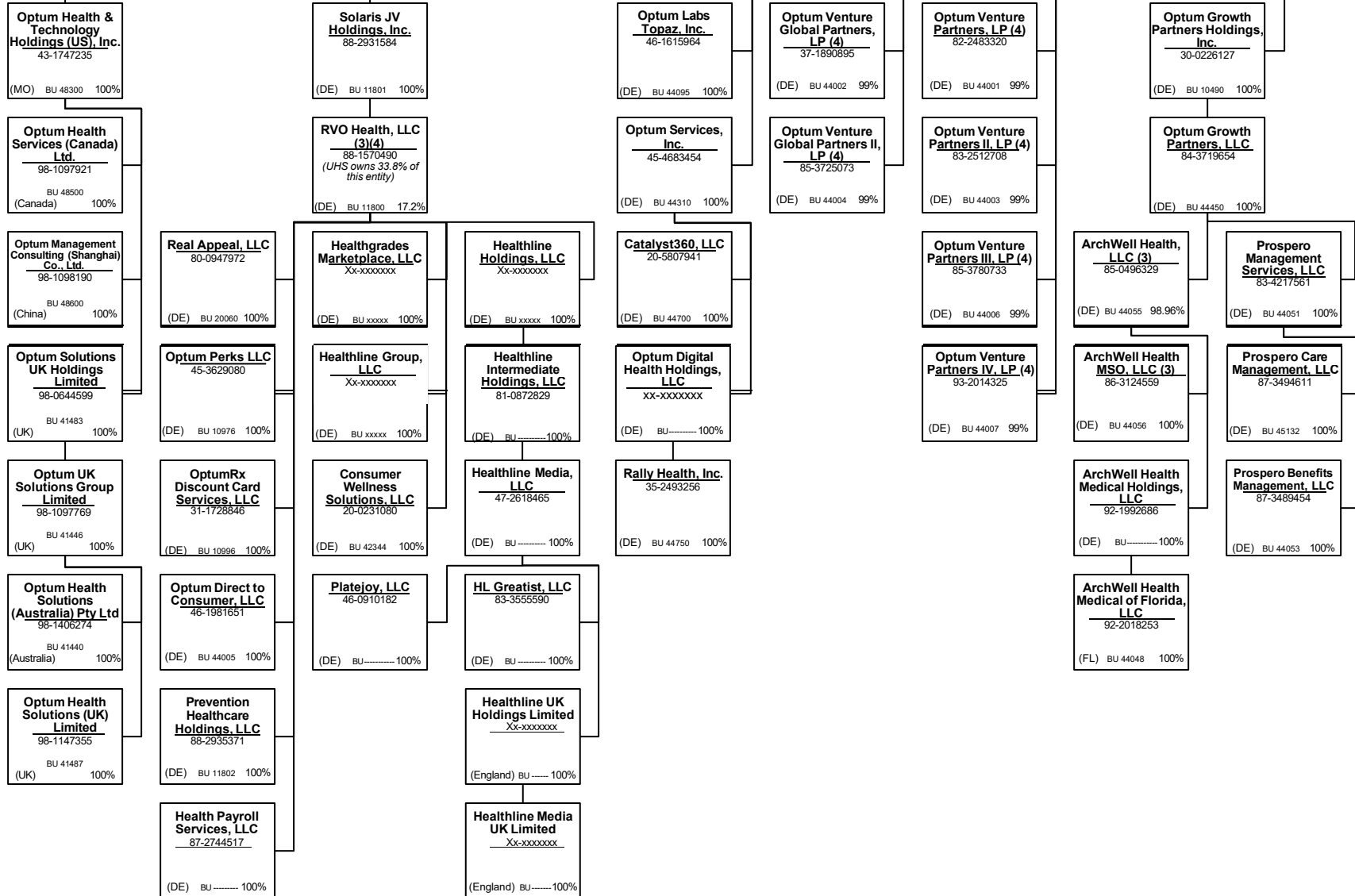


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

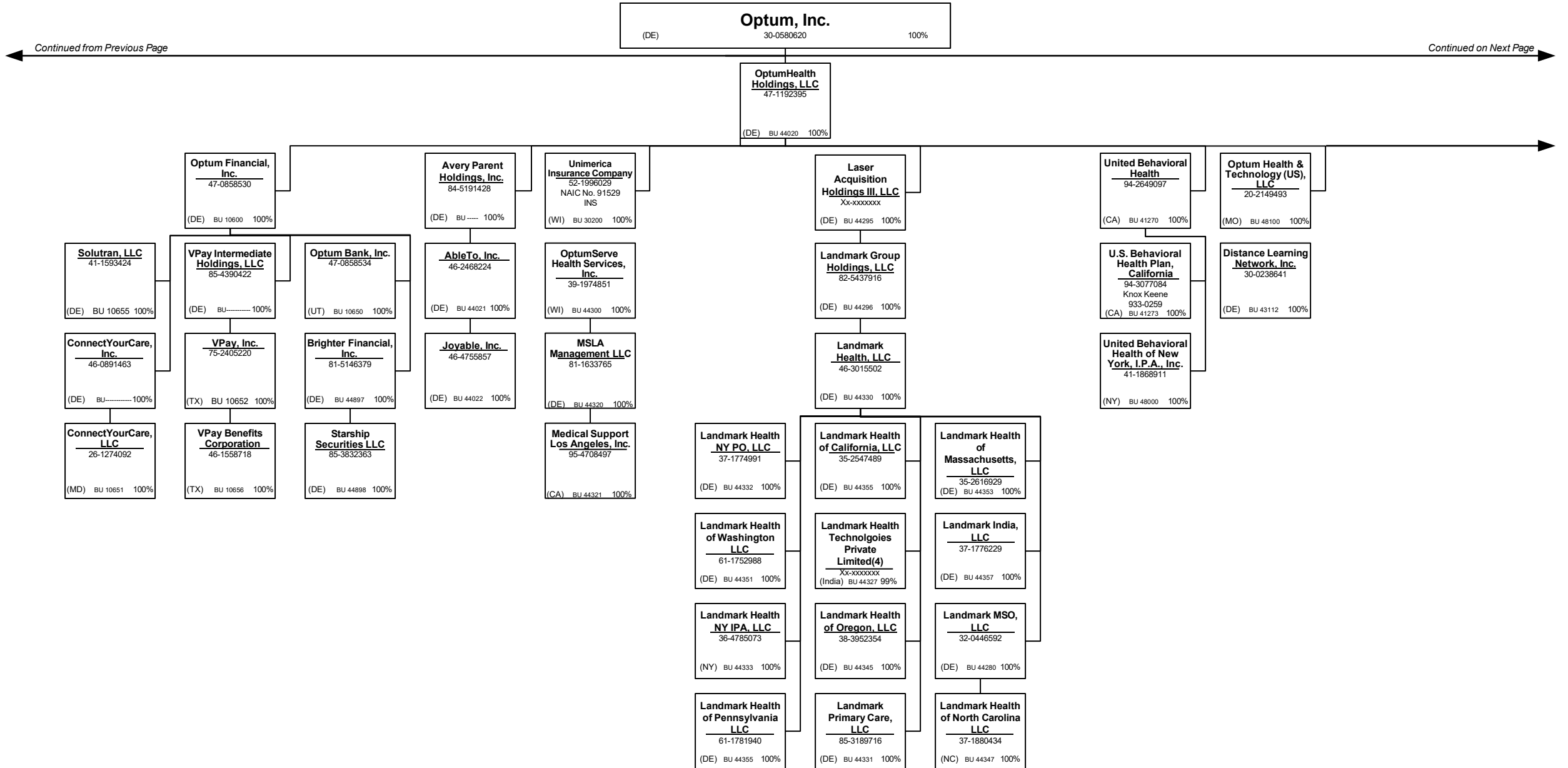


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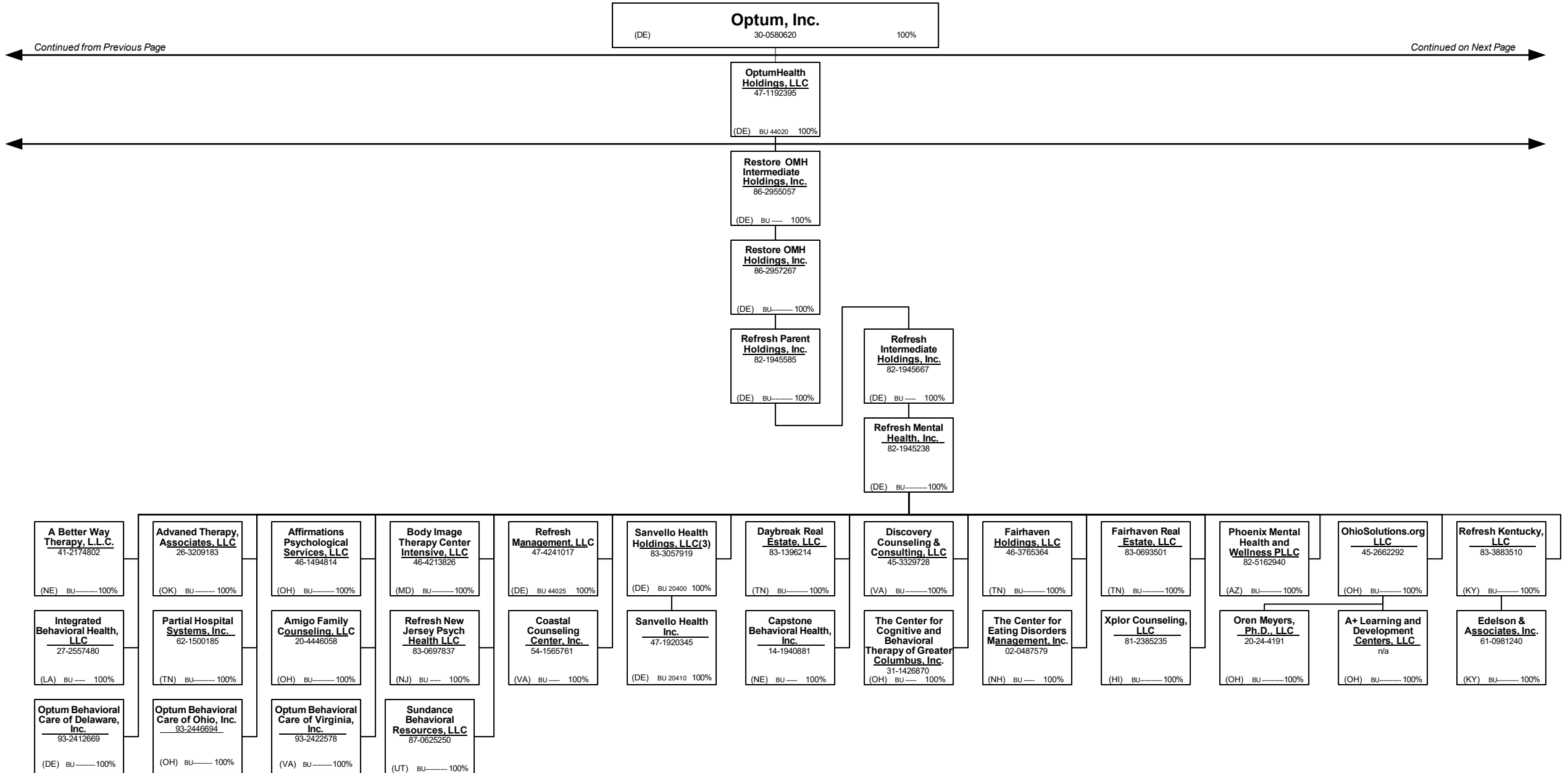
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

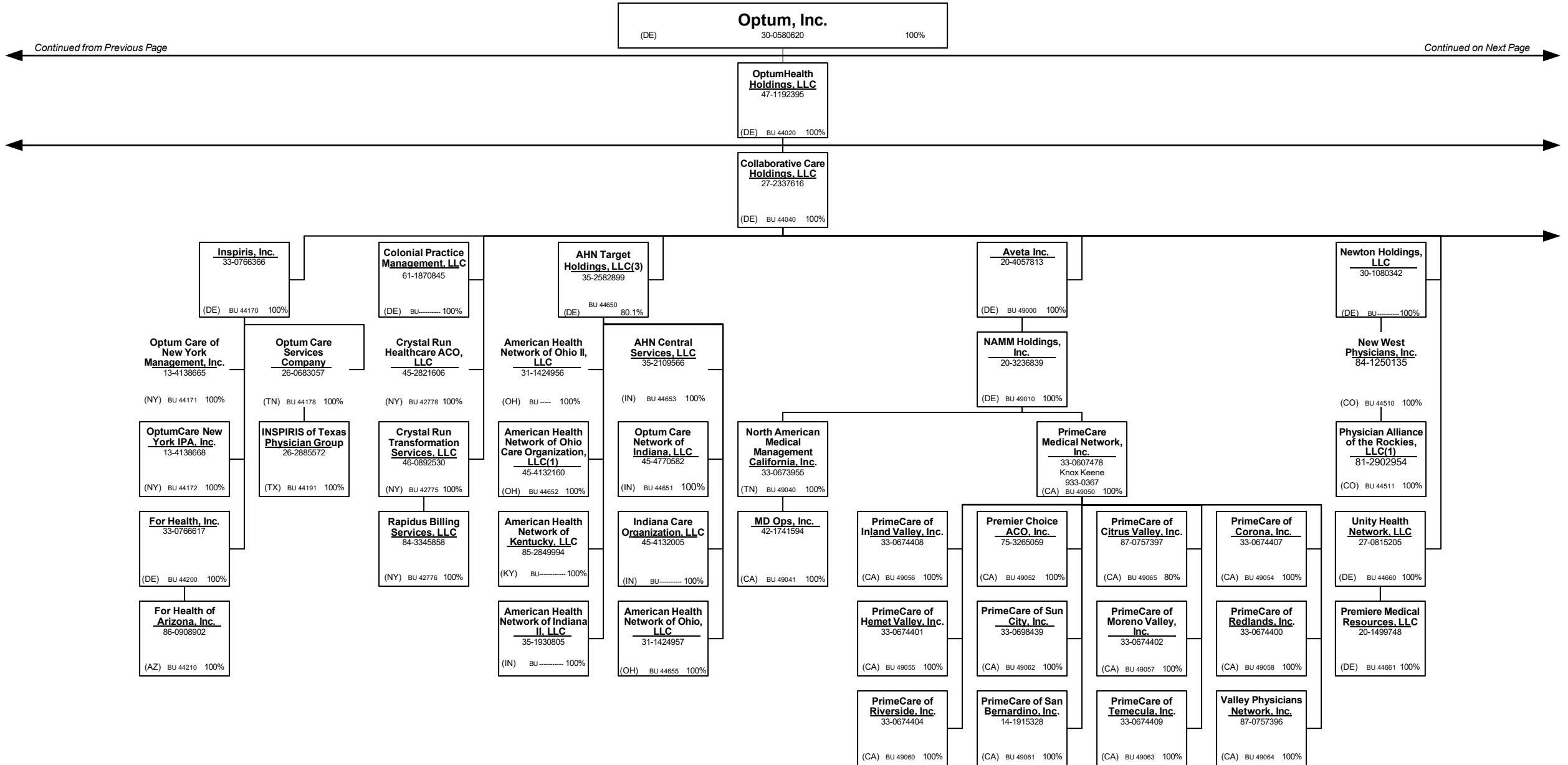


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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

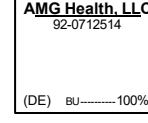
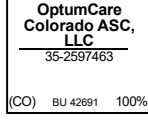
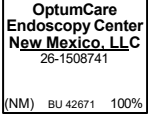
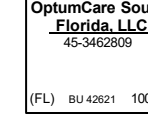
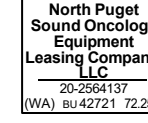
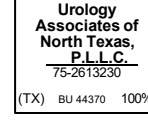
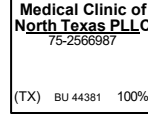
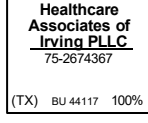
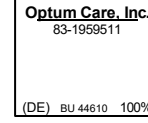
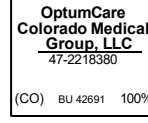
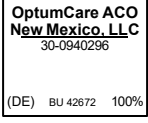
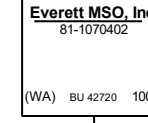
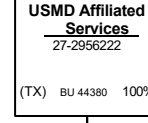
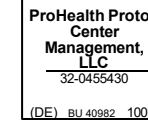
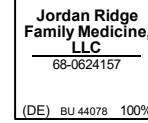
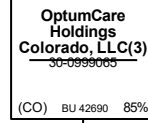
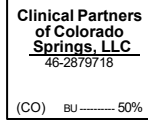
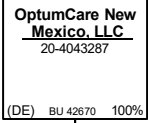
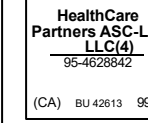
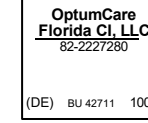
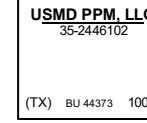
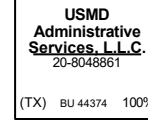
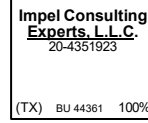
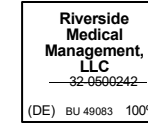
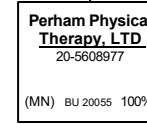
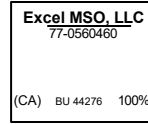
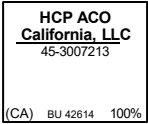
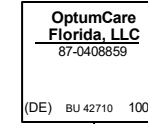
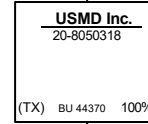
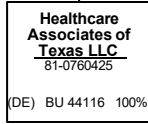
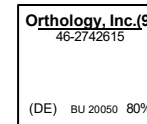
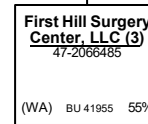
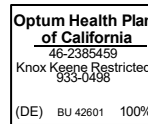
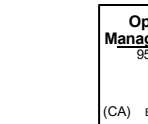
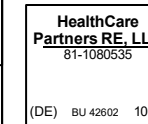
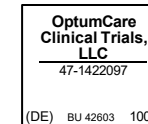
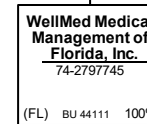
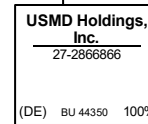
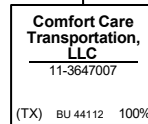
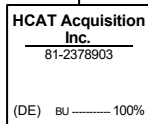
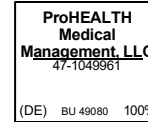
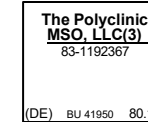
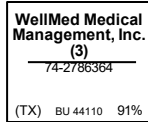
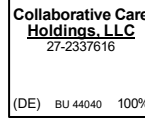
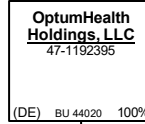
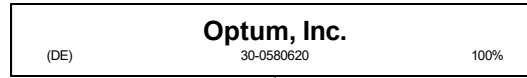


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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

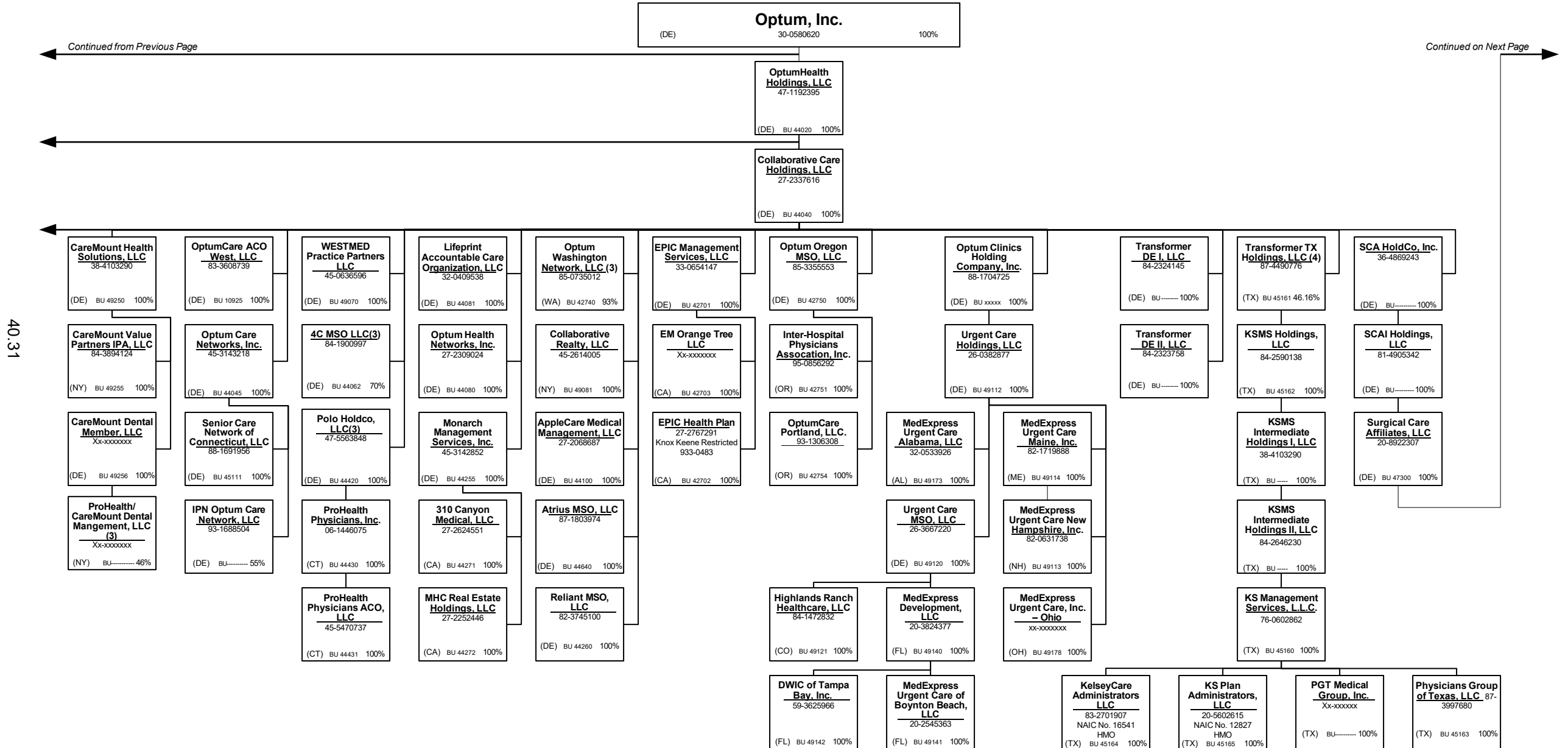


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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



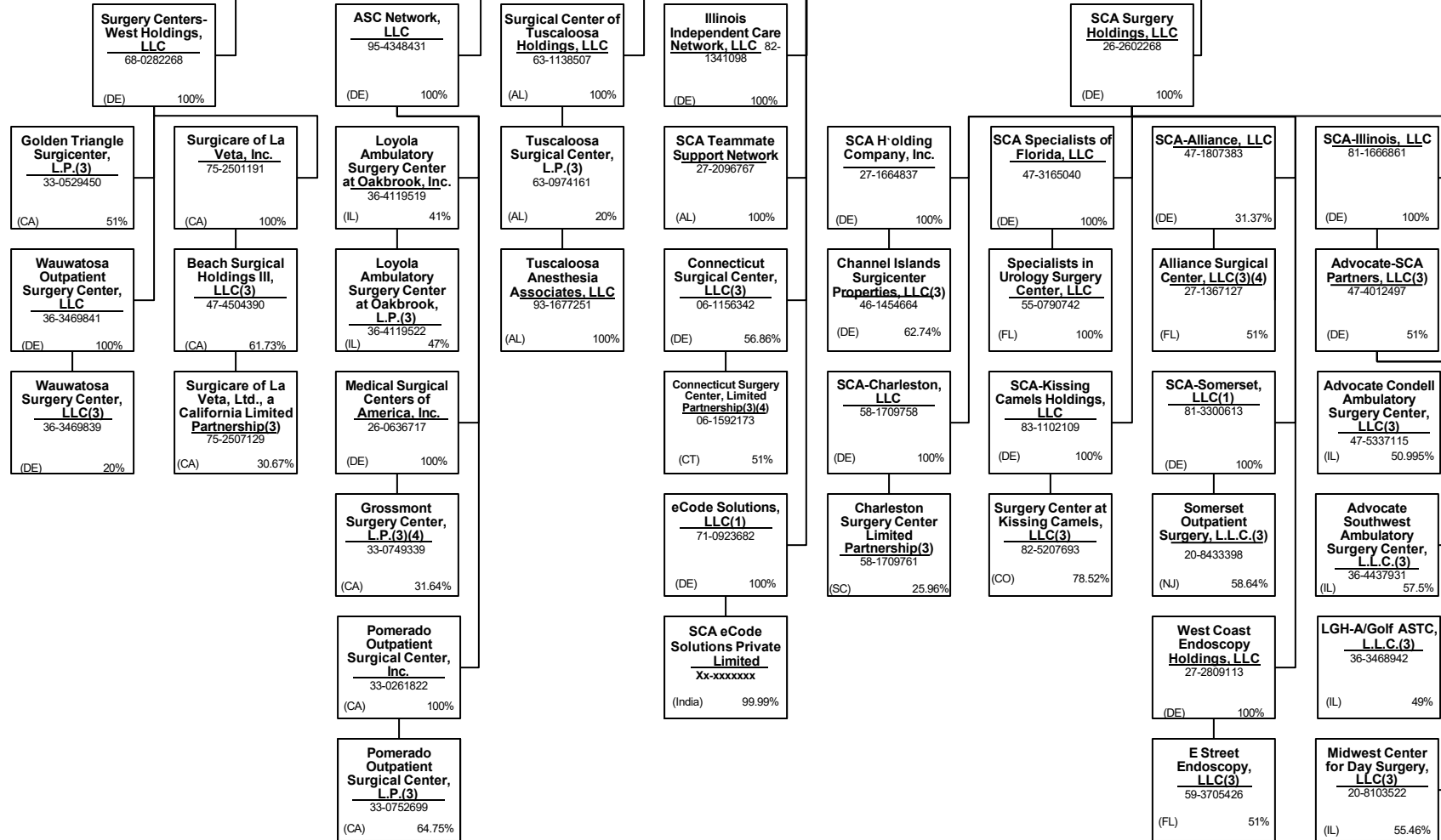
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



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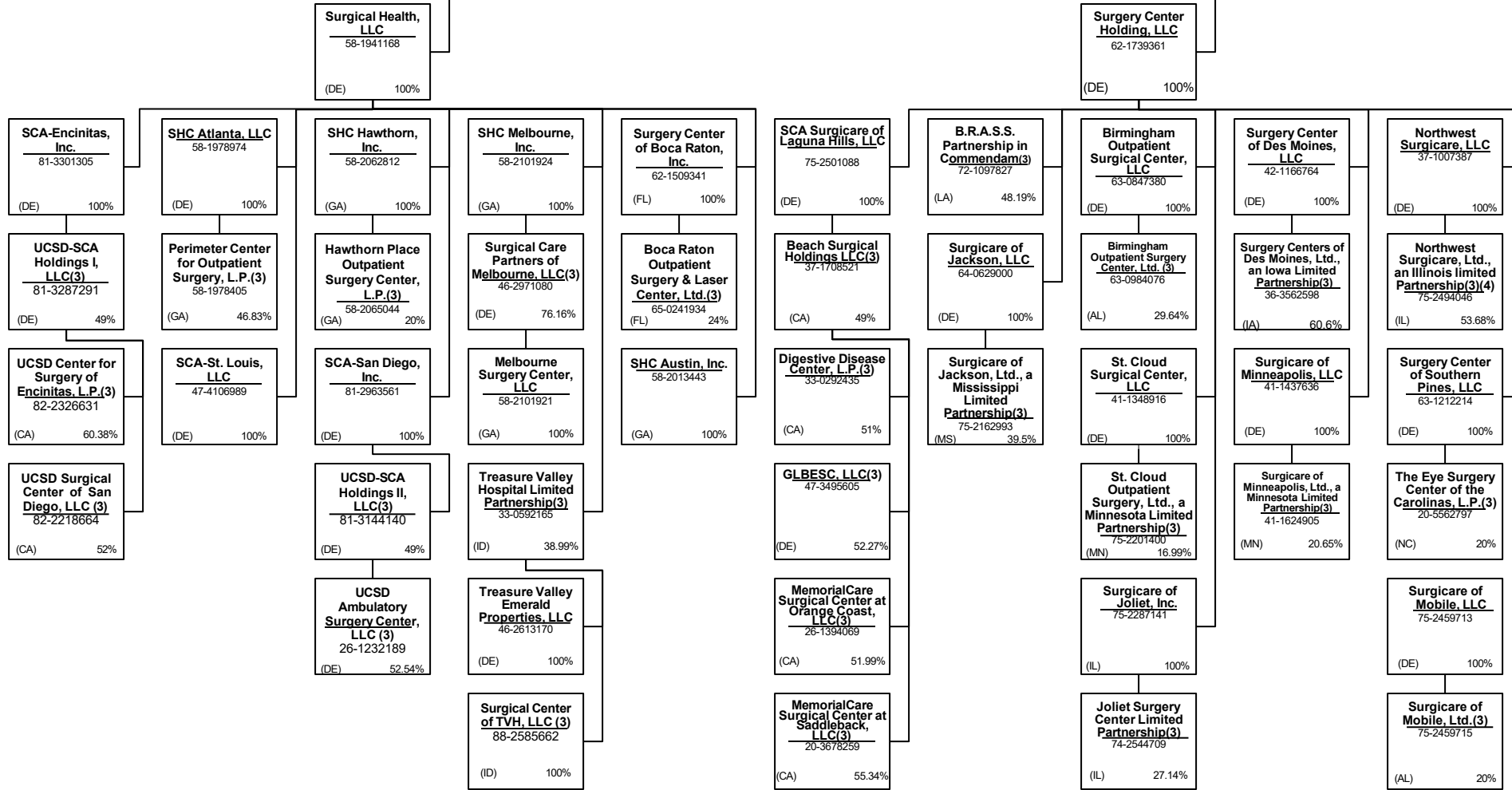


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

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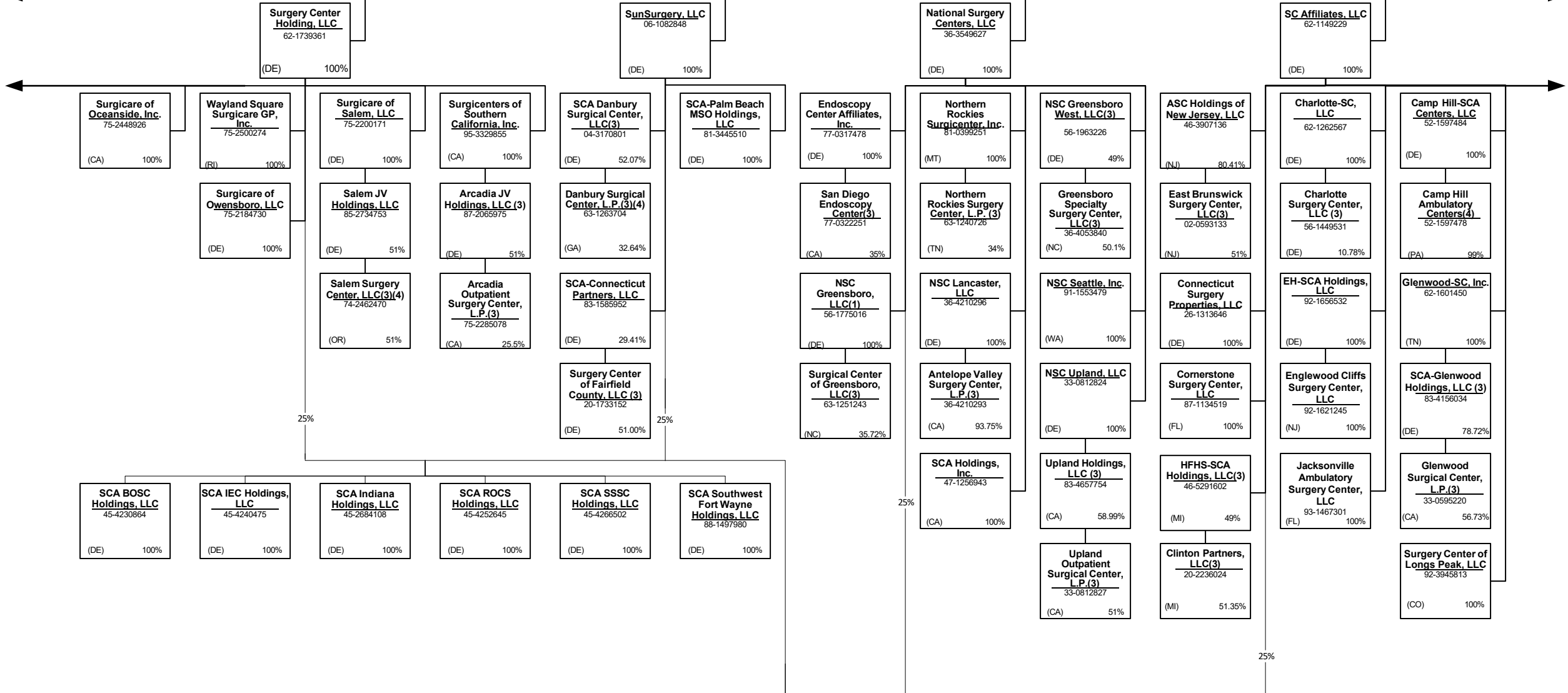




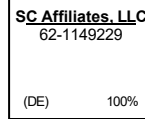
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

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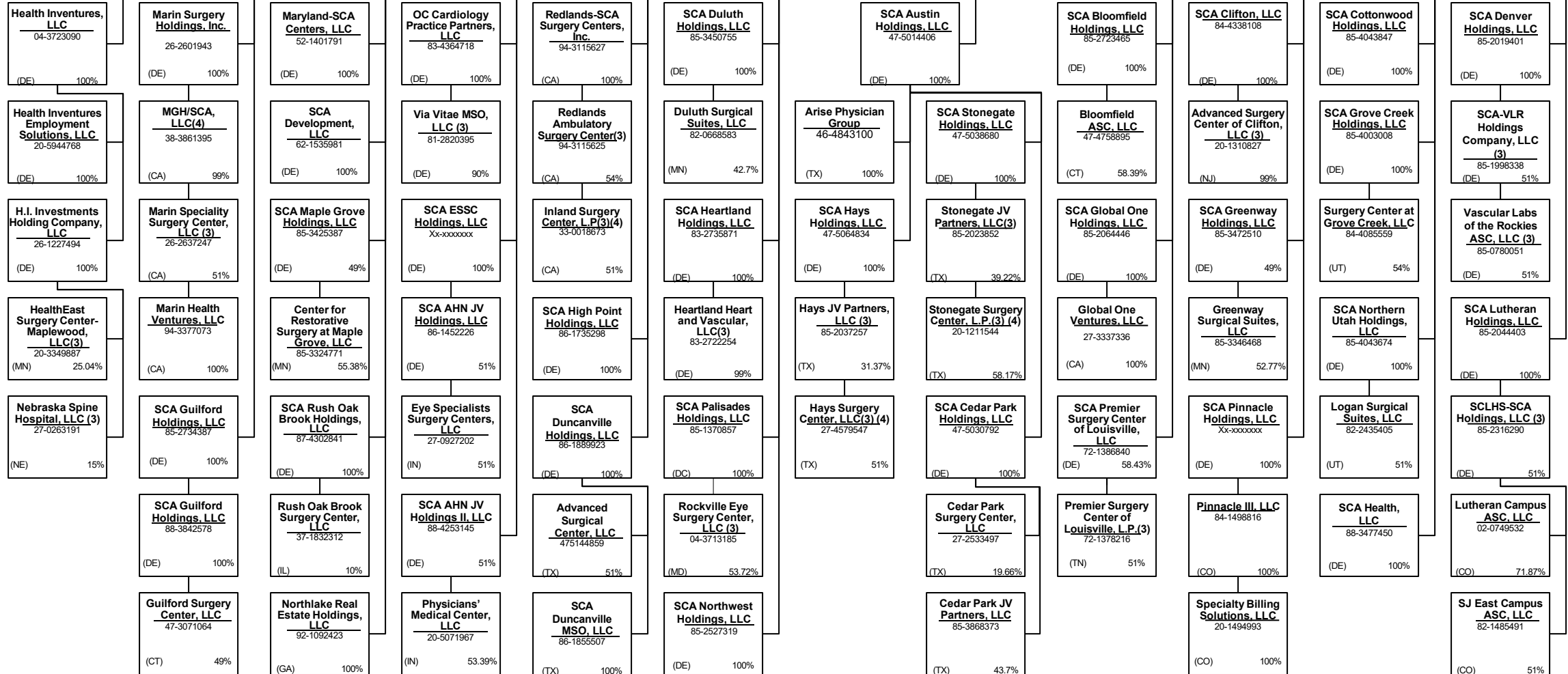


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



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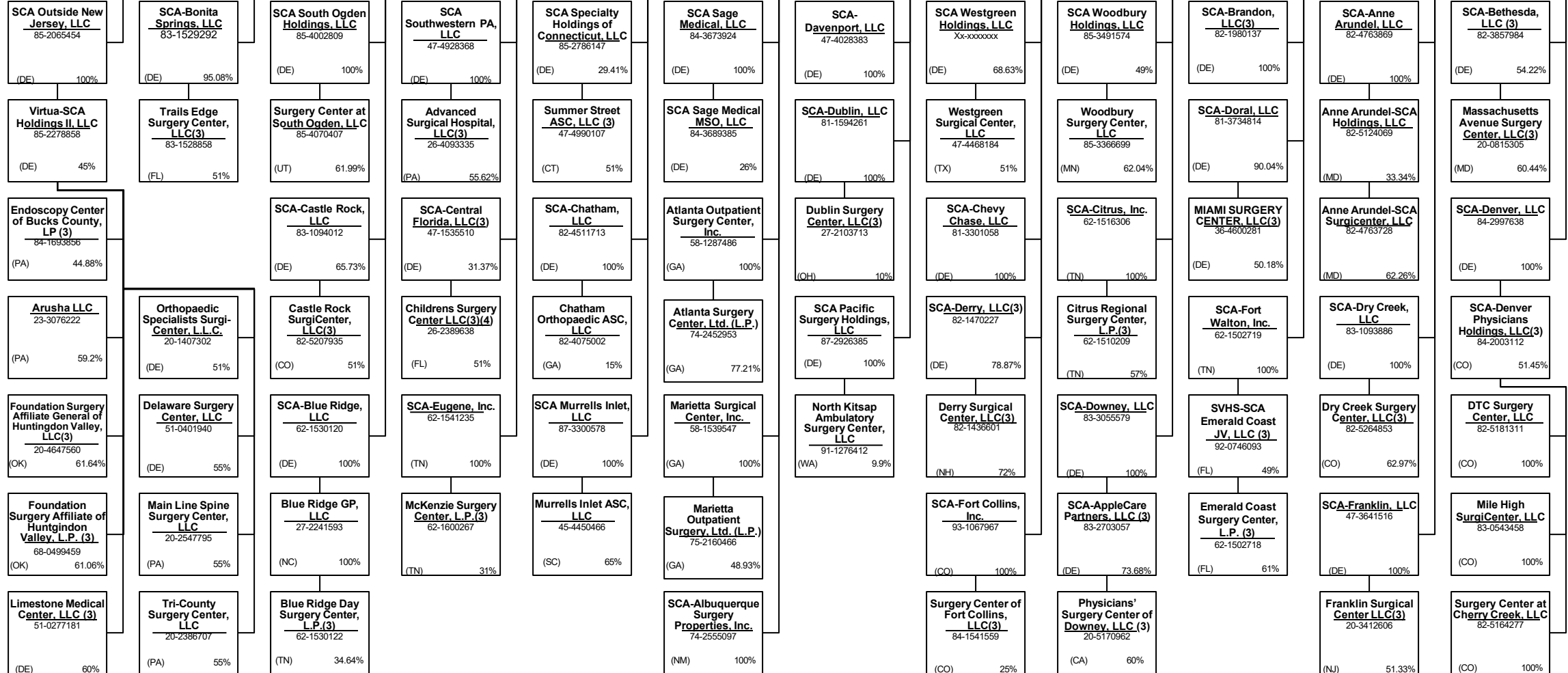
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

**SCA-Frederick, LLC**  
 81-2727879  
 (DE) 100%

**SCA-Freeway Holdings, LLC**  
 82-3535257  
 (DE) 100%

**SCA-Ft. Myers, LLC**  
 36-4907566  
 (DE) 100%

**SCA-Gladiolus, LLC**  
 81-1956407  
 (DE) 79.62%

**SCA-Grants Pass, LLC**  
 82-1438326  
 (DE) 100%

**SCA-Grove Place, LLC**  
 81-2376695  
 (DE) 55.24%

**SCA-Newport Beach, LLC**  
 47-1760663  
 (CA) 100%

**SCA-Hilton Head, LLC**  
 47-5229514  
 (DE) 100%

**SCA-Mokena, LLC**  
 81-1065674  
 (DE) 83.62%

**SCA-Houston Executive, LLC**  
 81-3445356  
 (DE) 100%

**SCA-MC VBP, Inc.**  
 81-1367813  
 (DE) 100%

**SCA-Main Street, LLC**  
 81-4292506  
 (DE) 29.58%

**Thomas Johnson Surgery Center, LLC(3)**  
 26-1479919  
 (MD) 70%

**Freeway Surgicenter of Houston, LLC(3)**  
 82-3453993  
 (TX) 59.32%

**SCA-Colonial Partners, LLC(3)**  
 83-1541326  
 (DE) 69.7%

**Gladiolus Surgery Center, L.L.C.(3)**  
 65-1025514  
 (FL) 50.78%

**Grants Pass Surgery Center, LLC(3)**  
 93-1237063  
 (OR) 51%

**Grove Place Surgery Center, L.L.C.(3)**  
 20-5170962  
 (FL) 51%

**SCA-Naperville, LLC**  
 81-2850365  
 (DE) 100%

**The Outpatient Surgery Center of Hilton Head, LLC(3)**  
 61-1409045  
 (SC) 20%

**Southwest Surgery Center, LLC(3)**  
 36-4369359  
 (IL) 56.33%

**Executive Surgery Center, L.L.C.(3)**  
 30-0701899  
 (TX) 54.47%

**Surgical Care Affiliates Political Action Committee**  
 33-1187498  
 (AL) 100%

**The Surgical Center of Connecticut, LLC(3)**  
 06-1552689  
 (CT) 88.31%

**SCA-Mecklenburg Development Corp. (3) (4)**  
 62-1184188  
 (NC) 100%

**SCA-Memorial City, LLC**  
 81-4616104  
 (DE) 100%

**Colonial Outpatient Surgery Center, LLC(3)**  
 83-1529015  
 (FL) 51%

**SCA-Memorial, LLC**  
 83-3709010  
 (DE) 100%

**SCA-Merritt, LLC**  
 81-1771410  
 (DE) 100%

**SCA-Midlands, LLC**  
 82-2455773  
 (DE) 100%

**SCA-Riverside, LLC**  
 83-2721919  
 (DE) 100%

**SCA-Mobile, LLC**  
 80-0070617  
 (DE) 100%

**SCA Health Anesthesia, LLC.**  
 88-2843226  
 (DE) 100%

**SCA-Naples, LLC**  
 82-3002171  
 (DE) 98.04%

**SCA-Sand Lake LLC(3)**  
 47-1685878  
 (DE) 83.48%

**SCA-Morris County, LLC**  
 84-4936803  
 (DE) 100%

**SCA-Palm Beach, LLC**  
 82-3050836  
 (DE) 100%

**Memorial City Holdings, LLC(3)**  
 82-4964787  
 (DE) 61.17%

**SCA-Mt. Pleasant, LLC**  
 62-1506655  
 (DE) 100%

**Memorial Houston Surgery Center, LLC(3)**  
 37-1782798  
 (TX) 56.23%

**SCA Rockledge JV, LLC(3)**  
 81-5211225  
 (DE) 91.87%

**Midlands Orthopaedics Surgery Center, LLC(3)**  
 20-3345412  
 (SC) 39.56%

**SCA-Riverside Partners, LLC(3)**  
 83-2111732  
 (DE) 51%

**Mobile-SC, LTD.(3)**  
 63-0883553  
 (AL) 20%

**SCA-Sacred Heart Holdings, LLC**  
 85-0563422  
 (DE) 100%

**Physicians Day Surgery Center, LLC(3)**  
 59-3438026  
 (FL) 51%

**Sand Lake SurgiCenter, LLC(3)**  
 27-3787593  
 (FL) 51.45%

**Morris County Surgical Center, LLC**  
 26-3513596  
 (NJ) 55.36%

**ORTHOPEDIC SURGERY CENTER OF PALM BEACH COUNTY, LLC(3)**  
 81-2594417  
 (FL) 21%

**Memorial City Partners, LLC (3)(4)**  
 82-3689933  
 (DE) 64.39%

**Mt. Pleasant Surgery Center, L.P.(3)**  
 62-1506649  
 (TN) 99%

**SCA-Panama City Holdings, LLC**  
 84-3367495  
 (DE) 100%

**Space Coast Surgical Center, Ltd.(3)**  
 75-2516426  
 (FL) 52.19%

**SCA-River Valley, LLC**  
 81-4304317  
 (DE) 29.41%

**Riverside Surgical Center of Meadowlands, LLC**  
 83-2735771  
 (NJ) 83.5%

**SCA Health Value Enterprises, LLC**  
 88-2408829  
 (DE) 99%

**SVHS-SCA Florida JV, LLC(3)**  
 85-0571986  
 (DE) 49%

**SCA-St. Lucie, LLC**  
 82-3270591  
 (DE) 100%

**SCA-Hagerstown, LLC**  
 47-3466283  
 (DE) 100%

**SCA-St. Louis Holdings, LLC**  
 84-4677051  
 (DE) 100%

**Ambulatory Partner Holdings, LLC**  
 88-2464526  
 (NY) 100%

**INOv8 Surgical at Memorial City, LLC**  
 47-5640889  
 (TX) 100%

**SCA-Sparta, LLC**  
 47-2676325  
 (DE) 49%

**SCA-Marina del Rey, LLC**  
 47-1751165  
 (CA) 100%

**SCA-Spartanburg Holdings, LLC**  
 82-4499088  
 (DE) 100%

**River Valley ASC, LLC(3)**  
 46-0758315  
 (CT) 66.23%

**Riverside Surgical Center of Newark, LLC(3)**  
 83-2722082  
 (NJ) 99%

**HIVE of the Carolinas, LLC(3)**  
 20-5253361  
 (nc) 20%

**Sacred Heart ASC, LLC**  
 83-0521940  
 (FL) 61.13%

**The Surgical Center of the Treasure Coast, L.L.C.(3)**  
 37-1446353  
 (FL) 51%

**WellSpan-SCA Holdings, LLC**  
 88-2731487  
 (DE) 49%

**St. Louis Specialty Surgical Center, LLC(3)**  
 61-1754451  
 (MO) 55.72%

**Crystal Run Ambulatory Surgery Center of Middletown, LLC(3)**  
 27-0476822  
 (NY) 51%

**Specialty Surgical Center, LLC(3)**  
 20-3412545  
 (NJ) 52.82%

**Surgery Center of Highlands Ranch, LLC**  
 92-3634096  
 (CO) 100%

**Spartanburg Surgery Center, LLC(3)**  
 57-0953005  
 (SC) 54%

**NCP Investment Holdings, Inc.**  
 36-4744042  
 (DE) 100%

**Panama City Surgery Center, LLC(3)**  
 48-1255983  
 (FL) 53.35%

**Parkway Surgery Center, LLC(3)**  
 20-4127100  
 (DE) 78.4%

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

**SCA-Portland, LLC**  
 81-4139195  
 (DE) 100%

**SCA-Surgicare, LLC**  
 81-4371453  
 (DE) 100%

**SCA-Verta, LLC**  
 82-1987225  
 (DE) 100%

**SCA-Wake Forest, LLC**  
 82-2294882  
 (DE) 100%

**SCA-Western Connecticut, LLC(3)**  
 82-1449412  
 (DE) 67%

**SCA-Winston-Salem, LLC**  
 93-1768010  
 (DE) 100%

**SCA-Winter Park, Inc.**  
 62-1525777  
 (TN) 100%

**SCA-Woodlands Holdings, LLC**  
 82-3528300  
 (DE) 100%

**Surgery Center of Colorado Springs, LLC**  
 63-1214140  
 (DE) 100%

**Surgery Center of Easton, LLC**  
 72-1349752  
 (DE) 100%

**Surgical Management Solutions, LLC**  
 84-4983977  
 (DE) 100%

**Providence & SCA On-Campus Holdings, LLC(3)**  
 82-3270499  
 (DE) 20%

**Surgicare, LLC(3)**  
 35-1975122  
 (IN) 53.68%

**Verta Management Services, LLC (3)**  
 81-4629242  
 (DE) 100%

**Surgery Center of Maui, LLC**  
 63-1231944  
 (DE) 100%

**Western Connecticut Orthopedic Surgical Center, LLC(3)**  
 06-1521999  
 (CT) 56.91%

**SCA-Gainesville, LLC**  
 62-1547690  
 (DE) 100%

**Louisville-SC Properties, Inc.**  
 62-1179538  
 (KY) 100%

**Surgery Center of The Woodlands, LLC(3)**  
 82-3448050  
 (TX) 54.79%

**SCA-Pocono, LLC**  
 47-1620189  
 (DE) 100%

**The Surgery Center of Easton, L.P.(3)**  
 72-1349755  
 (TN) 49%

**SCA Pacific Holdings, Inc.**  
 27-1707364  
 (CA) 100%

**Surgery Center at St. Vincent, LLC (3)**  
 81-3129674  
 (OR) 54%

**SCA-JPM Holdings, LLC**  
 83-3090526  
 (DE) 100%

**Surgery Center of Louisville, LLC**  
 62-1179537  
 (DE) 100%

**Aloha Surgical Center, LLC(3)**  
 63-1231942  
 (TN) 67%

**SCA Alaska Surgery Center, Inc.**  
 92-0080881  
 (AK) 100%

**OptumCare Specialty Practices Investments, LLC**  
 92-0972076  
 (DE) 100%

**Wayland Square Surgicare Acquisition, L.P.(4)**  
 20-5429310  
 (RI) 99%

**SCA-San Luis Obispo, LLC**  
 94-3138088  
 (DE) 100%

**Surgery Center of Ellicott City, Inc.**  
 63-1212213  
 (DE) 100%

**Corpus Christi Endoscopy Center, L.L.P.(3)**  
 20-2595593  
 (TX) 18.5%

**Providence & SCA Off-Campus Holdings, LLC(3)**  
 82-3765555  
 (DE) 40%

**SCA-Optum Nevada Holdings, LLC**  
 92-3029111  
 (DE) 100%

**Louisville S.C., Ltd.(4)**  
 62-1179566  
 (KY) 99%

**SCA-Santa Rosa, Inc.**  
 88-0185362  
 (NV) 100%

**SCA-First Coast, LLC**  
 83-2805878  
 (DE) 100%

**Summit Cardiovascular Group, LLC**  
 88-4233584  
 (DE) 100%

**Surgery Center of Lexington, LLC(3)**  
 62-1179539  
 (DE) 49%

**SCA-San Luis Obispo, LLC**  
 94-3138088  
 (DE) 100%

**Maryland Ambulatory Centers, LLC(3)(4)**  
 52-1456812  
 (MD) 50%

**CCEC Anesthesia Management, LLC(3)**  
 82-1715584  
 (TX) 100%

**Oregon Outpatient Surgery Center, LLC(3)**  
 22-3883387  
 (OR) 51.18%

**SCA-Florence, LLC**  
 62-1551099  
 (DE) 100%

**SCA-Louisville Ortho, LLC**  
 93-2311282  
 (DE) 100%

**ASV-HOPCo-SCA Florida, LLC**  
 87-3912899  
 (FL) 39.22%

**SCA Waterloo Holdings, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**Lexington Surgery Center, Ltd.(3)**  
 61-1028180  
 (KY) 72.5%

**SCA-San Luis Obispo, LLC**  
 94-3138088  
 (DE) 100%

**Montgomery Surgery Center Limited Partnership(3)**  
 52-1401868  
 (MD) 51%

**Northwest Spine and Laser Surgery Center, LLC (3)**  
 45-5055997  
 (OR) 51.52%

**Florence Surgery Center, L.P.(3)**  
 62-1551098  
 (TN) 15%

**Orthopedic Center of Louisville, LLC**  
 93-2394362  
 (KY) 100%

**First Coast Orthopedic Center, LLC**  
 82-2929226  
 (FL) 54.33%

**SCA Providence Holdings, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**SCA-Kendall Pointe, LLC**  
 93-3689232  
 (DE) 100%

**SCA-Kendall Pointe, LLC**  
 93-3689232  
 (DE) 100%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA Englewood Holdings, LLC**  
 86-3781364  
 (DE) 100%

**Surgery Center of Mt. Scott, LLC (3)**  
 83-2600045  
 (OR) 51%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA Englewood Holdings, LLC**  
 86-3781364  
 (DE) 100%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**SCA-Kendall Pointe JV, LLC**  
 93-4000409  
 (DE) 51%

**Patient Care Associates, L.L.C.**  
 20-1311030  
 (NJ) 57.35%

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

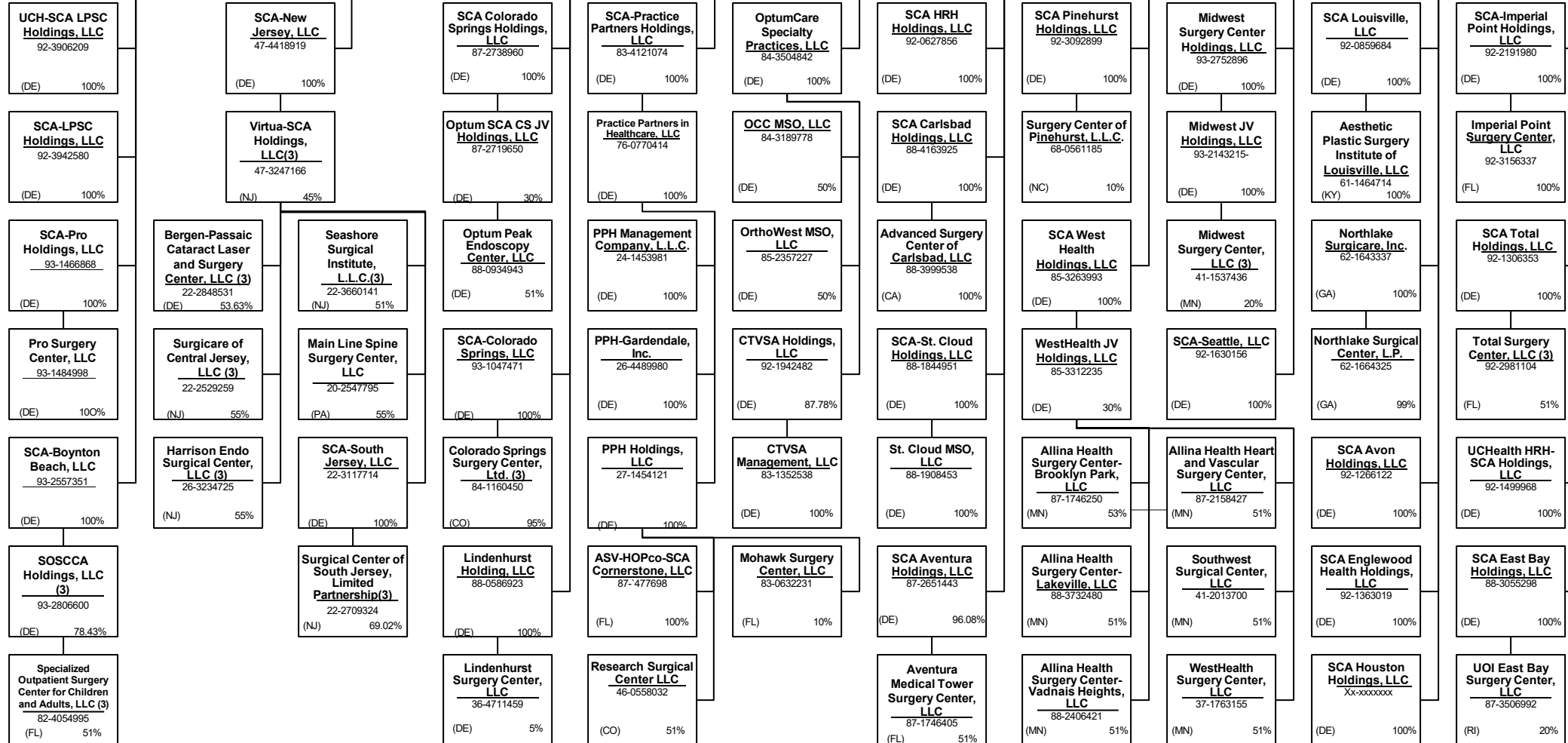
**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

**Endo Parent, Inc.**  
 81-3075241  
 (DE) 100%

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

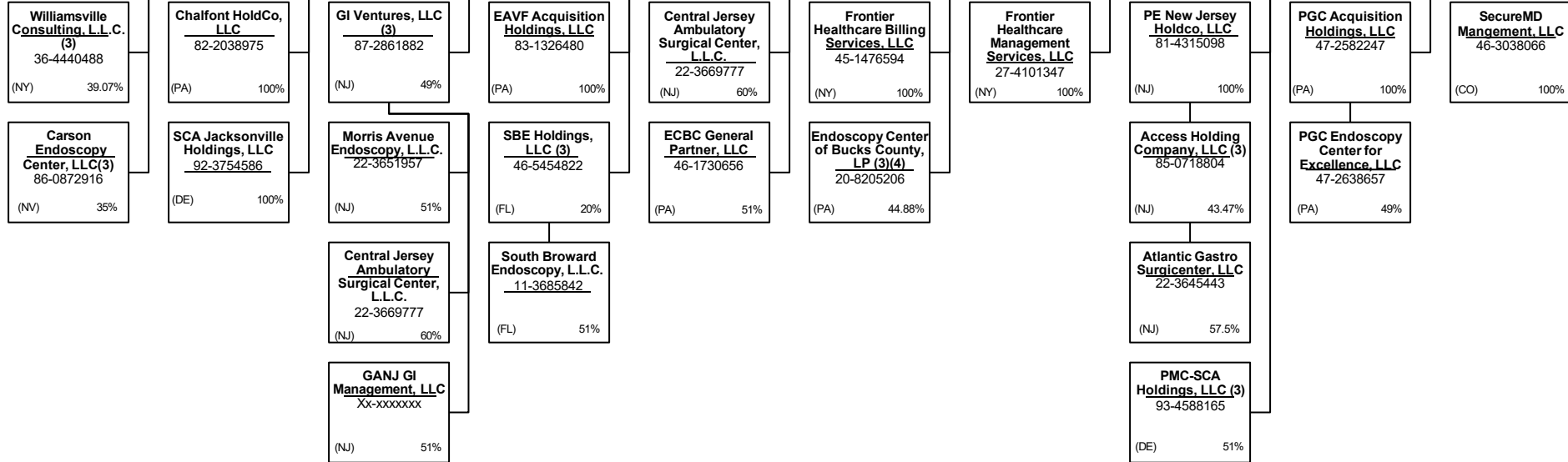
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**Physicians Endoscopy Intermediate Holdco, Inc.**  
 26-2239018  
 (DE) 100%

**Physicians Endoscopy, L.L.C.**  
 91-1882702  
 (DE) 100%

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

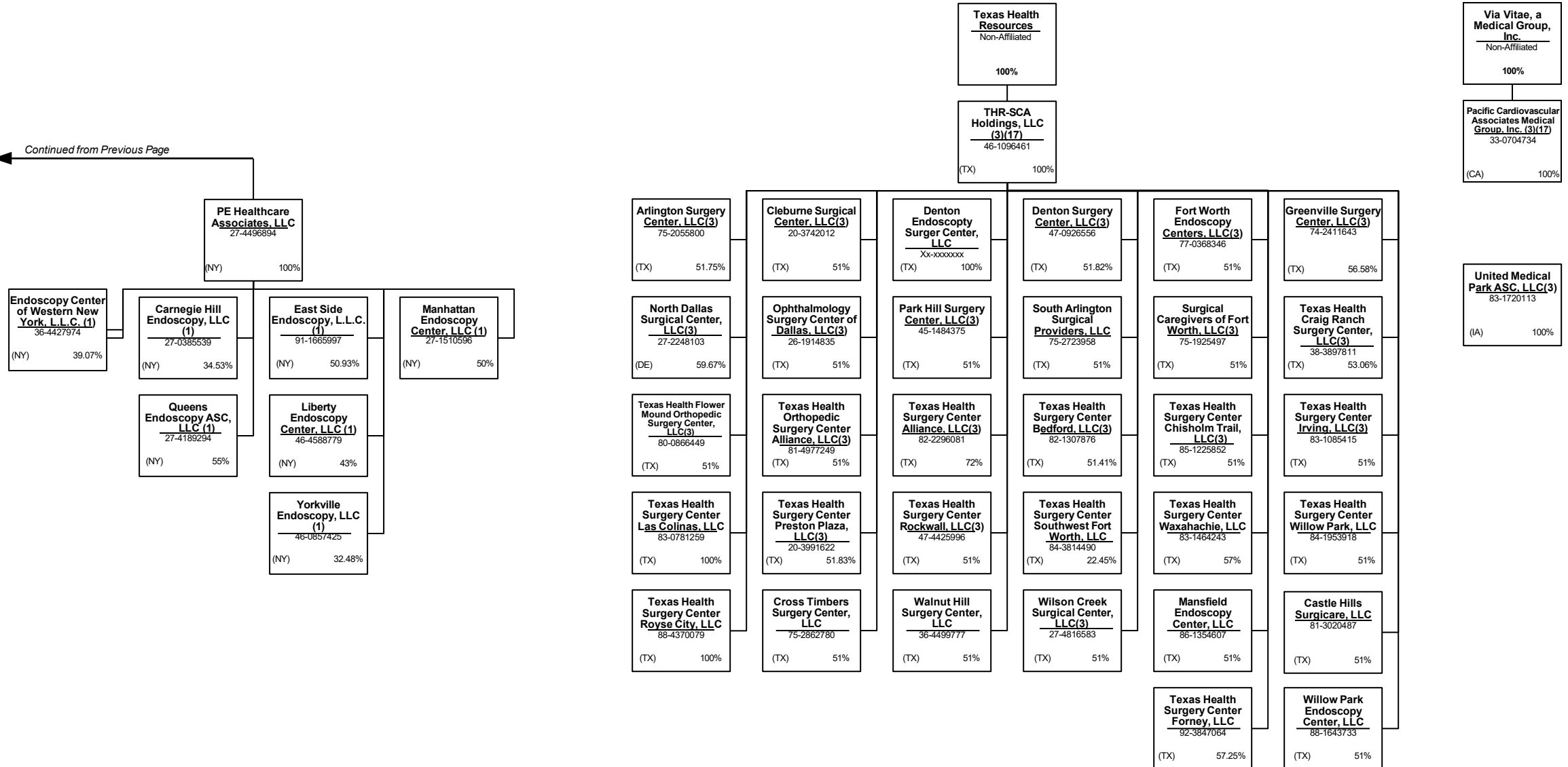
**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

Substantively Controlled Surgical Care Affiliate Entities

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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

Beneficially Owned Legal Entities

| <u>Entity Name</u>  | <u>Juris.</u> | <u>Federal Tax ID</u> | <u>Entity Name</u>  | <u>Juris.</u> | <u>Federal Tax ID</u> |
|---|---------------|-----------------------|---|---------------|-----------------------|
| 4C Medical Group, PLC   | AZ            | 45-2402948            | Carroll Counseling Center LLC                                       | MD            | 52-2072546            |
| A.G. Dikengil, Inc.   | NJ            | 22-3149900            | Centers for Family Medicine, GP                                     | CA            | 33-0483510            |
| AbleTo Behavioral Health Services of Michigan, P.C.           | MI            | 85-4328419            | Christopher Stalberg, M.D., PLLC                                    | AZ            | 26-4651320            |
| AbleTo Behavioral Health Services of New Jersey, P.C.         | NJ            | 85-4306375            | Cielo House, Inc.   | CA            | 27-1655973            |
| AbleTo Behavioral Health Services, PC                         | CT            | 47-5519672            | Cognitive-Behavioral Therapy Center of Western North Carolina, P.A. | NC            | 20-3056794            |
| AbleTo Licensed Clinical Social Worker Services, P.C.         | CA            | 85-0739865            | Colonial Family Practice, L.L.C.                                    | SC            | 02-0626080            |
| AbleTo Psychiatry Health Services, P.C.                       | MA            | 88-2290313            | Columbia Counseling Center P.A.                                     | MD            | 52-2052733            |
| AHN Accountable Care Organization, LLC                        | IN            | 45-4171713            | Connect Medical, P.C.   | NY            | 32-0551188            |
| Aleph Psychological Services, Inc.                            | CA            | 46-3477124            | Crystal Run Healthcare Physicians LLP                               | NY            | 13-3843560            |
| American Health Network of Indiana, LLC                       | IN            | 35-2108729            | David C. Anderholm, M.D., P.A.                                      | MN            | 41-1879063            |
| Angie Coil FNP, PLLC  | AZ            | 81-2112951            | David Moen, M.D. P.C.   | NY            | 81-5101448            |
| AppleCare Hospitalists Medical Group, Inc.                    | CA            | 14-1890491            | David R. Ferrell, M.D., P.C.  | NV            | 45-2380022            |
| AppleCare Medical Group St. Francis, Inc.                     | CA            | 33-0845269            | Day-OP Center Of Long Island Inc.                                   | NY            | 11-2811353            |
| AppleCare Medical Group, Inc.                                 | CA            | 33-0898174            | DBT and EMDR Specialists, P.A.                                      | MN            | 47-3322541            |
| ArchWell Health Professional Services Holding Co.             | DE            | 86-3278602            | Doc Martins, PLLC   | AZ            | 20-0419099            |
| ArchWell Health Professional Services of Alabama, LLC         | AL            | 86-3152173            | Durable Medical Equipment, Inc.                                     | MA            | 04-3106404            |
| ArchWell Health Professional Services of Arizona, LLC         | AZ            | 87-2986923            | Elite Focus Clinic, Inc., a Professional Corporation                | CA            | 47-3861802            |
| ArchWell Health Professional Services of Kansas, P.A.         | KS            | 86-3241870            | Empire Physicians' Medical Group, Inc.                              | CA            | 33-0181426            |
| ArchWell Health Professional Services of Nevada, P.C.         | NV            | 88-1285211            | Eugene Center for Anxiety and Stress, LLC                           | OR            | 83-2740282            |
| ArchWell Health Professional Services of North Carolina, P.C. | NC            | 86-3222071            | Eugene Therapy, LLC   | OR            | 90-0624377            |
| ArchWell Health Professional Services of Oklahoma, LLC        | OK            | 86-3190019            | Everett Physicians, Inc. P.S.                                       | WA            | 81-1625636            |
| ArchWell Health Professional Services. P.A.                   | FL            | 88-3481216            | Evolve, LLC   | WI            | 61-1752488            |
| ARTA Western California, Inc.                                 | CA            | 33-0658815            | Family Counseling Associates of Salem Andover LLC                   | NH            | 27-0820363            |
| Astra Medical Clinic, PLLC                                    | AZ            | 86-0882561            | Ferrell Physician Services, P.C.                                    | NY            | 87-4007730            |
| Atrius Health, Inc.   | MA            | 04-3397450            | First Hill Surgery Center, LLC                                      | WA            | 47-2066485            |
| Beaver Medical Group, P.C.                                    | CA            | 33-0645967            | First Step Services, PLLC   | NC            | 51-0484581            |
| Behavioral Solutions, P.C.                                    | MA            | 04-3316367            | Flagstaff Family Physicians, PLLC                                   | AZ            | 86-0959327            |
| Better Health Value Network, LLC                              | WA            | 47-4349079            | Good Samaritan Medical Practice Association, Inc., A Medical Group  | CA            | 95-3969271            |
| Bexar Imaging Center, LLC                                     | TX            | 22-3858211            | Greater Phoenix Collaborative Care, P.C.                            | AZ            | 27-2337725            |
| California Spring Holdings, PC                                | CA            | 81-0881243            | Gunn Behavioral Care of California, P.C.                            | CA            | 27-3237563            |
| Carbondale Counseling Associates, PLLC                        | IL            | 47-1130641            | Gunn Behavioral Holdco, P.C.  | CA            | 92-3292446            |
| CareMount Health Solutions ACO, LLC                           | NY            | n/a                   | HealthCare Partners Affiliates Medical Group                        | CA            | 95-4526112            |
| Carolina Behavioral Care, P.A.                                | NC            | 56-1780933            | HealthCare Partners ASC-HB, LLC                                     | CA            | 26-4247365            |

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

Beneficially Owned Legal Entities

| <u>Entity Name</u>  | <u>Juris.</u> | <u>Federal Tax ID</u> | <u>Entity Name</u>                           | <u>Juris.</u> | <u>Federal Tax ID</u> |
|---|---------------|-----------------------|--|---------------|-----------------------|
| HealthCare Partners Associates Medical Group, P.C.        | CA            | 45-5273760            | Landmark Medical of Oregon, PC               | OR            | 47-2926188            |
| HealthCare Partners Medical Group, P.C.                   | CA            | 95-4340584            | Landmark Medical of Pennsylvania, PC         | PA            | 81-1605378            |
| Heron Ridge Assoc., P.L.C.                                | MI            | 80-0020865            | Landmark Medical of Rhode Island, PC         | RI            | 84-2830065            |
| Homecare Dimensions of Florida, Inc.                      | TX            | 81-0884465            | Landmark Medical of Tennessee, PC            | TN            | 30-1288593            |
| Homecare Dimensions, Inc.                                 | TX            | 74-2758644            | Landmark Medical of Texas, PA                | TX            | 83-2296389            |
| IN Style OPTICAL, LLC                                     | MA            | 27-3296953            | Landmark Medical of Utah, PC                 | UT            | 84-2660339            |
| Inland Faculty Medical Group, Inc.                        | CA            | 33-0618077            | Landmark Medical of Virginia, P.C.           | VA            | 85-0839774            |
| Inspiris Medical Services of New Jersey, P.C.             | NJ            | 45-2563134            | Landmark Medical of Washington, PC           | WA            | 47-3028655            |
| INSPIRIS of Michigan Medical Services, P.C.               | MI            | 27-1561674            | Landmark Medical, P.C.                       | NY            | 47-1588943            |
| INSPIRIS of New York Medical Services, P.C.               | NY            | 13-4168739            | Level2 Medical Services, P.A.                | DE            | 84-5003916            |
| INSPIRIS of Pennsylvania Medical Services, P.C.           | PA            | 26-2895670            | Level2 Medical Services, P.A. New Jersey     | NJ            | 87-2684015            |
| Jonathan E. Goldberg, Ph.D., Inc.                         | MA            | 26-3013277            | Level2 Medical Services, P.C. Alaska         | AK            | 87-2600511            |
| Joyce Marter & Associates, P.C.                           | IL            | 26-3478896            | Level2 Medical Services, P.C. California     | CA            | 92-1153396            |
| K.P. Counseling, Ltd.                                     | IL            | 30-0089259            | Level2 Medical Services, P.C. Utah           | UT            | 87-0989804            |
| Kelsey-Seybold Medical Group, PLLC                        | TX            | 76-0386391            | Life Strategies Counseling, Inc.             | AR            | 20-0468524            |
| Keys Counseling, Inc.                                     | IN            | 30-0358493            | LifeSolutions Counseling Associates, P.C.    | IN            | 26-3292877            |
| KS Pharm, LLC   | TX            | 84-2355006            | March Vision Care Group, Incorporated        | CA            | 95-4874334            |
| KS SC, LLC  | TX            | 84-2241460            | March Vision Care IPA, Inc.                  | NY            | 27-3115058            |
| Landmark Medical of Arkansas, P.A.                        | AR            | 85-0997438            | March Vision Care of Texas, Inc.             | TX            | 45-4227915            |
| Landmark Medical of California, PC                        | CA            | 47-4553619            | MAT-RX DEVELOPMENT, L.L.C.                   | TX            | 43-1967820            |
| Landmark Medical of Connecticut, PC                       | CT            | 83-2295301            | Mat-Rx Fort Worth GP, L.L.C.                 | TX            | 35-2262695            |
| Landmark Medical of Florida, P.A.                         | FL            | 85-0838149            | ME Urgent Care Nebraska, Inc.                | NE            | 81-0936574            |
| Landmark Medical of Idaho, PC                             | ID            | 92-0496439            | MedExpress Employed Services, Inc.           | DE            | 81-1265129            |
| Landmark Medical of Kansas, P.A.                          | KS            | 82-4633545            | MedExpress Primary Care Arizona, P.C.        | AZ            | 81-4550969            |
| Landmark Medical of Kentucky, PSC                         | KY            | 82-4881602            | MedExpress Primary Care Arkansas, P.A.       | AR            | 84-4234388            |
| Landmark Medical of Louisiana, a Professional Corporation | LA            | 82-4881732            | MedExpress Primary Care Kansas, P.A.         | KS            | 81-4605885            |
| Landmark Medical of Massachusetts, PLLC                   | MA            | 81-5364097            | MedExpress Primary Care Maryland, P.C.       | MD            | 82-3384324            |
| Landmark Medical of Michigan, P.C.                        | MI            | 86-3599871            | MedExpress Primary Care Massachusetts, P.C.  | MA            | 82-1096099            |
| Landmark Medical of Mississippi, P.C.                     | MS            | 82-5084178            | MedExpress Primary Care Minnesota P.C.       | MN            | 81-4396738            |
| Landmark Medical of Missouri, P.C.                        | MO            | 82-4857713            | MedExpress Primary Care Oklahoma, P.C.       | OK            | 83-1077265            |
| Landmark Medical of New Hampshire, P.C.                   | NH            | 85-1174070            | MedExpress Primary Care South Carolina, P.C. | SC            | 83-0764858            |
| Landmark Medical of North Carolina, P.C.                  | NC            | 82-4256752            | MedExpress Primary Care Texas, P.A.          | TX            | 84-2500750            |
| Landmark Medical of Ohio, Professional Corporation        | OH            | 82-4864947            | MedExpress Primary Care Virginia, P.C.       | VA            | 82-3395792            |

## SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

### PART 1 – ORGANIZATIONAL CHART

#### Beneficially Owned Legal Entities

| Entity Name                                     | Juris. | Federal Tax ID | Entity Name  | Juris. | Federal Tax ID |
|---|--------|----------------|--|--------|----------------|
| MedExpress Primary Care West Virginia, Inc.     | WV     | 82-4401181     | Mental Health Resources, PLLC  | TN     | 62-1396317     |
| MedExpress Primary Care Wisconsin, S.C.         | WI     | 81-4563448     | MH Physician Three Holdco, a Medical Corporation                         | CA     | 27-4691544     |
| MedExpress Urgent Care – New Jersey, P.C.       | NJ     | 45-5388778     | MHCH, Inc.   | CA     | 80-0507474     |
| MedExpress Urgent Care - Northern New Jersey PC | NJ     | 83-2089623     | MHIPA Physician Two Holdco, a Medical Corporation                        | CA     | 27-4691508     |
| MedExpress Urgent Care Arizona, P.C.            | AZ     | 81-4030280     | Mindscapes Counseling, PLLC  | CT     | 47-2117693     |
| MedExpress Urgent Care Arkansas, P.A.           | AR     | 46-4348120     | Mobile Medical Services of New Jersey, PC                                | NJ     | 81-2977678     |
| MedExpress Urgent Care California, P.C.         | CA     | 82-0930142     | Mobile Medical Services, P.C.  | NY     | 30-0445773     |
| MedExpress Urgent Care Connecticut, P.C.        | CT     | 81-1956812     | Monarch Health Plan, Inc.  | CA     | 22-3935634     |
| MedExpress Urgent Care Idaho, P.C.              | ID     | 82-1135336     | Monarch HealthCare, A Medical Group, Inc.                                | CA     | 33-0587660     |
| MedExpress Urgent Care Illinois, P.C.           | IL     | 47-4308614     | NAMM Medical Group Holdings, Inc.  | CA     | 56-2627070     |
| MedExpress Urgent Care Iowa, P.C.               | IA     | 81-5353472     | NC Center For Resiliency, PLLC   | NC     | 47-2693055     |
| MedExpress Urgent Care Kansas, P.A.             | KS     | 47-1919283     | New Perspectives Center for Counseling & Therapy, L.L.C.                 | OR     | 93-1173779     |
| MedExpress Urgent Care Minnesota P.C.           | MN     | 81-1125396     | New York Licensed Clinical Social Work, P.C.                             | NY     | 86-3891057     |
| MedExpress Urgent Care Missouri P.C.            | MO     | 47-3132625     | Northern California Physicians Network, Inc., a Professional Corporation | CA     | 81-1573604     |
| MedExpress Urgent Care North Carolina, P.C.     | NC     | 81-5138747     | Northlight Counseling Associates, Inc.                                   | AZ     | 86-0646417     |
| MedExpress Urgent Care Oregon, P.C.             | OR     | 82-1919436     | Northwest Medical Group Alliance, LLC                                    | WA     | 91-1699944     |
| MedExpress Urgent Care Rhode Island, P.C.       | RI     | 81-5362765     | NPN IPA Washington, PLLC   | WA     | 61-1855159     |
| MedExpress Urgent Care South Carolina, P.C.     | SC     | 81-5380706     | Oakland Psychological Clinic, P.C.                                       | MI     | 38-2481929     |
| MedExpress Urgent Care Texas, P.A.              | TX     | 47-5147441     | OHR Physician Group, P.C.  | OR     | 93-0979031     |
| MedExpress Urgent Care Washington, P.C.         | WA     | 82-2443118     | Optum Behavioral Care of California, P.C.                                | CA     | 84-4887072     |
| MedExpress Urgent Care Wisconsin, S.C.          | WI     | 81-4281678     | Optum Behavioral Care of Colorado, P.C.                                  | CO     | 93-2952612     |
| MedExpress Urgent Care, Inc. – West Virginia    | WV     | 26-4546400     | Optum Behavioral Care of Connecticut, P.C.                               | CT     | 93-2339326     |
| MedExpress Urgent Care, P.C. – Georgia          | GA     | 47-1804667     | Optum Behavioral Care of Kansas, P.A.                                    | KS     | 93-3404672     |
| MedExpress Urgent Care, P.C. – Indiana          | IN     | 90-0929572     | Optum Behavioral Care of New Jersey, P.C.                                | NJ     | 85-0666386     |
| MedExpress Urgent Care, P.C. – Maryland         | MD     | 45-3461101     | Optum Behavioral Care of North Carolina, P.C.                            | NC     | 85-1959641     |
| MedExpress Urgent Care, P.C. – Massachusetts    | MA     | 47-1857908     | Optum Behavioral Care of Texas, P.A.                                     | TX     | 84-3152209     |
| MedExpress Urgent Care, P.C. – Michigan         | MI     | 46-4793937     | Optum Clinic, P.A.   | TX     | 75-2778455     |
| MedExpress Urgent Care, P.C. – Oklahoma         | OK     | 47-1824365     | Optum Everycare, P.C.  | #N/A   | 66-1026448     |
| MedExpress Urgent Care, P.C. – Pennsylvania     | PA     | 26-3750502     | Optum Medical Care of New Jersey, P.C.                                   | NJ     | 22-3624559     |
| MedExpress Urgent Care, P.C. – Tennessee        | TN     | 45-4973138     | Optum Medical Care, P.C.   | NY     | 13-3544120     |
| MedExpress Urgent Care, P.C. – Virginia         | VA     | 45-3123110     | Optum Medical Group (Rhodes), P.C.                                       | NV     | 88-0310956     |
| MedExpress Urgent Care, P.S.C. - Kentucky       | KY     | 83-1565124     | Optum Medical Group II (Rhodes), P.C.                                    | NV     | 86-0857176     |
| MedExpress, Inc. – Delaware                     | DE     | 45-5436856     | Optum Medical Group, P.A.  | KS     | 46-2662506     |

## SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

### PART 1 – ORGANIZATIONAL CHART

#### Beneficially Owned Legal Entities

| Entity Name                                      | Juris. | Federal Tax ID | Entity Name   | Juris. | Federal Tax ID |
|--|--------|----------------|---|--------|----------------|
| Optum Medical Services of California, P.C.       | CA     | 30-0826311     | Refresh Canopy Cove, Inc.                                   | CA     | 82-3603285     |
| Optum Medical Services of Colorado, P.C.         | CO     | 45-5424191     | Refresh Connecticut, PLLC                                   | FL     | 84-2663780     |
| Optum Medical Services, P.C.                     | NC     | 45-3866363     | Refresh Evolve, LLC   | CT     | 83-4507157     |
| Optum Urgent Care, PLLC                          | NY     | 46-1883579     | Refresh In-Home Counseling LLC                              | WI     | 82-5351068     |
| OptumCare Portland, LLC                          | OR     | 93-1306308     | Refresh Pennsylvania, LLC                                   | IL     | 84-1756547     |
| Oregon Healthcare Resources, LLC                 | OR     | 27-3674492     | Reliant Medical Group The Endoscopy Center, LLC             | PA     | 20-5251393     |
| Peninsula Psychological Center, Inc., P.S.       | WA     | 91-1885912     | Reliant Medical Group, Inc.                                 | MA     | 04-2472266     |
| Perspectives of Troy, P.C.                       | MI     | 38-2592367     | RICBT, Inc.   | MA     | 33-0999953     |
| Physician Partners Medical Group, Inc.           | CA     | 30-0516435     | Riverside Community Healthplan Medical Group, Inc.          | RI     | 33-0055097     |
| Physician United PLLC                            | AZ     | 84-3476733     | Riverside Electronic Healthcare Resources, Inc.             | CA     | 20-3420379     |
| Physicians Medical Group of San Jose, Inc.       | CA     | 94-2722082     | Saad A. Shakir, M.D., Inc.                                  | CA     | 77-0398259     |
| Physicians Medical Holdings                      | CA     | 86-2631012     | Saddleback Medical Group, Inc.                              | CA     | 33-0571462     |
| Pilot Holdings, P.C.                             | CA     | 87-3931756     | San Bernardino Medical Group, Inc.                          | CA     | 95-3088615     |
| Pinnacle Medical Group, Inc.                     | CA     | 33-0795271     | Sanvello Behavioral Health Services, P.A.                   | CA     | 84-1754732     |
| Polyclinic Holdings, P.C.                        | WA     | 83-3042027     | Saris Counseling, LLC                                       | DE     | n/a            |
| POLYCLINIC MANAGEMENT SERVICES COMPANY, LLC      | WA     | 46-0508606     | Seattle Psychology, P.L.L.C.                                | WI     | 46-3238571     |
| Primary Care Associated Medical Group, Inc.      | CA     | 33-0527335     | SecureMD Professionals - California, PC                     | WA     | 46-3057015     |
| ProHEALTH Ambulatory Surgery Center, Inc.        | NY     | 11-3447394     | Serenity Family and Psychological Counseling Center, P.C.   | CA     | 45-3802527     |
| ProHEALTH Care Associates of New Jersey LLP      | NJ     | 47-5656253     | Shark Holdings, P.C.  | CA     | 87-3142148     |
| ProHEALTH Care Associates, L.L.P.                | NY     | 11-3355604     | Sherman Counseling Management, S.C.                         | CA     | 47-5082677     |
| ProHEALTH Medical NY, P.C.                       | NY     | 47-1388406     | Silicon Valley TMS of Monterey Bay, GP                      | WI     | 81-3200297     |
| ProHealth Physicians, P.C.                       | CT     | 06-1469068     | Southwest Internal Medicine Group, Roberto Ruiz, M.D., PLLC | CA     | 86-0516447     |
| ProHEALTH Urgent Care Medicine of New Jersey LLP | NJ     | 47-5661535     | Spring Behavioral Health of New Jersey, LLC                 | AZ     | 82-3087236     |
| Prospero Health Partners Florida, Inc.           | FL     | 85-0775386     | Springfield Psychological, P.C.                             | NJ     | 23-2833266     |
| Prospero Health Partners New York, P.C.          | NY     | 82-2400620     | Surgical Eye Experts, LLC                                   | PA     | 65-1321064     |
| Prospero Health Partners North Carolina, P.C.    | NC     | 84-4569314     | Surprise Health Center, PLLC                                | MA     | 86-1047772     |
| Prospero Health Partners, P.C.                   | MN     | 84-3234753     | Susan Albright P.L.C.                                       | AZ     | 20-5176158     |
| Prospero Medical Services New Jersey, P.C.       | NJ     | 84-3844362     | Talbert Medical Group, P.C.                                 | AZ     | 93-1172065     |
| Psychiatry Services of New York, P.C.            | FL     | 85-0921665     | The Everett Clinic, PLLC                                    | CA     | 91-0214500     |
| Psychiatry Specialists, S.C.                     | NY     | 27-3409538     | The Polyclinic, PLLC  | WA     | 91-0369070     |
| Psychological Healthcare, PLLC                   | IL     | 16-1484552     | The Potter's House Family & Children Treatment Center, LLC  | WA     | 20-8357849     |
| Red Oak Counseling, Ltd.                         | NY     | 20-0785644     | The Tabor Therapy Group, Inc.                               | GA     | 46-5461304     |
| Redlands Family Practice Medical Group, Inc.     | WI     | 56-2627067     | Triangle Counseling Agency, Inc.                            | IL     | 26-2552129     |

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

Beneficially Owned Legal Entities

| <b>Entity Name</b>                      | <b>Juris.</b> | <b>Federal Tax ID</b> |
|---|---------------|-----------------------|
| USMD Diagnostic Services, LLC           | NC            | 27-2803133            |
| USMD Hospital at Arlington, L.P.        | TX            | 73-1662763            |
| USMD Hospital at Fort Worth, L.P.       | TX            | 20-3571243            |
| USMD of Arlington GP, L.L.C.            | TX            | 73-1662757            |
| Vitucci, LCSW, P.C.                     | IL            | 85-1453387            |
| Warner Family Practice, P.C.            | AZ            | 86-0462952            |
| Waypoint Minnesota PC                   | MN            | 46-2854394            |
| WellMed Florida Medicare ACO, LLC       | TX            | 84-2233329            |
| WellMed Florida Services, PLLC          | TX            | 45-2158334            |
| WellMed Foundation Medicare ACO, LLC.   | TX            | 84-2193803            |
| WellMed Greater Texas Medicare ACO, LLC | TX            | 84-2178104            |
| WellMed Medical Group, P.A.             | TX            | 74-2574229            |
| WellMed MSSP ACO, LLC                   | TX            | 84-2219968            |
| WellMed Network Medicare ACO, LLC       | TX            | 84-2204650            |
| WellMed Network of Florida, Inc.        | TX            | 35-2314192            |
| WellMed Networks - DFW, Inc.            | TX            | 41-2250215            |
| WellMed Networks, Inc.                  | TX            | 74-2889447            |
| WellMed of Las Cruces, Inc.             | TX            | 92-0183013            |
| XLHome Michigan, P.C.                   | MI            | 46-3537245            |
| XLHome Northeast, P.C.                  | NJ            | 45-5530241            |
| XLHome Oklahoma, Inc.                   | OK            | 46-2931689            |
| XLHome, P.C.                            | MD            | 27-3543997            |

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Organizational Chart Footnotes**

- (1) Entity is owned in full or in part by a UnitedHealth Group Incorporated friendly physician.
- (2) Control of the Foundation is based on sole membership, not the ownership of voting securities.
- (3) The remaining percentage is owned either by a non-affiliated entity, outside investor(s), current/former company officer(s), or third party shareholder(s).
- (4) The minority percentage is owned by one or more affiliated UnitedHealth Group Incorporated subsidiaries. Voting rights do vary.
- (5) No information of the other shareholder(s) has been provided
- (6) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.
- (7) Branch offices in Iraq and Uganda.
- (8) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.
- (9) Registered as a foreign shareholder in Brazil.
- (10) Open
- (11) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.
- (12) N/A
- (13) Entity has a representative office in Beijing, China.
- (14) Open
- (15) Registered branch in the United Kingdom.
- (16) Open
- (17) Entity is not directly owned by the parent. However, the parent does have a viable economic interest as well as control over the entity through contractual agreements.

**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

|   | Current Year |                         |   | Prior Year                  |
|---|--------------|-------------------------|---|-----------------------------|
|   | 1<br>Assets  | 2<br>Nonadmitted Assets | 3<br>Net Admitted Assets<br>(Cols. 1 - 2) | 4<br>Net Admitted<br>Assets |
| 2504. Prepaid Expenses .....  | 661          | 661                     | 0   | 0                           |
| 2597. Summary of remaining write-ins for Line 25 from overflow page | 661          | 661                     | 0   | 0                           |

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

|   | Claim Adjustment Expenses            |  | 3                                     | 4                      | 5         |
|---|--------------------------------------|--|---------------------------------------|------------------------|-----------|
|   | 1<br>Cost<br>Containment<br>Expenses | 2<br>Other Claim<br>Adjustment<br>Expenses | General<br>Administrative<br>Expenses | Investment<br>Expenses | Total     |
| 2504. Interest .....  | 12,463                               | 3,087                                      | 92,006                                | 0                      | 107,556   |
| 2505. Managed Care & Network Access .....                           | 9,068                                | 1,993                                      | 10,653                                | 0                      | 21,714    |
| 2506. Miscellaneous Losses .....                                    | 33                                   | 8  | 1,397                                 | 0                      | 1,438     |
| 2507. Reimbursement of Expenses from Reinsurers .....               | 0                                    | 0  | (611,108)                             | 0                      | (611,108) |
| 2597. Summary of remaining write-ins for Line 25 from overflow page | 21,564                               | 5,088                                      | (507,052)                             | 0                      | (480,400) |

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

|   | 1  | 2                                      | 3  |
|---|--|--|--|
|   | Current Year Total<br>Nonadmitted Assets | Prior Year Total<br>Nonadmitted Assets | Change in Total<br>Nonadmitted Assets<br>(Col. 2 - Col. 1) |
| 2504. Prepaid Expenses .....  | 0  | 699                                    | 699  |
| 2597. Summary of remaining write-ins for Line 25 from overflow page | 0  | 699                                    | 699  |