DocuSign Envelope ID: 8694AE0F-0E6B-4B6E-BB68-3F850070BB5A

1 0 7 6 7 2 0 2 1 2 0 1 0 0 1 0 2

HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2021

OF THE CONDITION AND AFFAIRS OF THE

AMERIGROUP Ohio, Inc. dba AMERIGROUP Community Care

NAIC Group Code 0671 (Current) 0671 (Prior) NAIC Company Code 10767 Employer's ID Number 13-4212818

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 03/08/2002 Commenced Business 09/01/2005

Statutory Home Office 4361 Irwin Simpson Road, C/O Community Ins. Co. (Street and Number), Mason, OH, US 45040 (City or Town, State, Country and Zip Code)

Main Administrative Office 4425 Corporation Lane (Street and Number)

Virginia Beach, VA, US 23462 (City or Town, State, Country and Zip Code), (Area Code) (Telephone Number)

Mail Address 220 Virginia Ave (Street and Number or P.O. Box), Indianapolis, IN, US 46204 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 220 Virginia Ave (Street and Number)

Indianapolis, IN, US 46204 (City or Town, State, Country and Zip Code), (Area Code) (Telephone Number)

Internet Website Address www.amerigroup.com

Statutory Statement Contact Tim Niccum (Name), 317-488-6716 (Area Code) (Telephone Number)

tim.niccum@anthem.com (E-mail Address), 317-488-6200 (FAX Number)

OFFICERS

President/Chairperson Kristen Louise Metzger

Treasurer Vincent Edward Scher

Secretary Kathleen Susan Kiefer

Vice President/Assistant Secretary Jack Louis Young

OTHER

Eric (Rick) Kenneth Noble, Assistant Treasurer

DIRECTORS OR TRUSTEES

Jack Louis Young

Kristen Louise Metzger

Ronald William Penczek

State of Indiana
County of Johnson SS:

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.

DocuSigned by: Kristen Metzger 5C5DDB10C7D345F...
Kristen Louise Metzger
President/Chairperson

DocuSigned by: Kathy Kiefer 34259124741844A...
Kathleen Susan Kiefer
Secretary

DocuSigned by: Vincent E. Scher A85A33722D4143E...
Vincent Edward Scher
Treasurer

Subscribed and sworn to before me this 29th day of July 2021

Rita F. Gentry
Executive Assistant
1/17/2029

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.....

Rita F. Gentry
Notary Public
SEAL
Johnson County, State of Indiana
My Commission Expires January 17, 2029
Commission No: NP0641321

ASSETS

		Current Statement Date			4
		1	2	3	December 31
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1.	Bonds	1,343,669		1,343,669	1,351,651
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less $ encumbrances)			0	0
	4.2 Properties held for the production of income (less $ encumbrances)			0	0
	4.3 Properties held for sale (less $ encumbrances)			0	0
5.	Cash ($ 10,328,510), cash equivalents ($ 101,499) and short-term investments ($)	10,430,009		10,430,009	2,009,306
6.	Contract loans (including $ premium notes)			0	0
7.	Derivatives			0	0
8.	Other invested assets			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	11,773,678	0	11,773,678	3,360,957
13.	Title plants less $ charged off (for Title insurers only)			0	0
14.	Investment income due and accrued	19,619		19,619	19,617
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	24,679	492	24,187	0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums ($) and contracts subject to redetermination ($ 3,431,358)	3,431,358		3,431,358	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	131,998		131,998	0
18.1	Current federal and foreign income tax recoverable and interest thereon	284,086		284,086	0
18.2	Net deferred tax asset	232,060		232,060	36
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets ($)			0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates			0	279
24.	Health care ($ 94,318) and other amounts receivable	94,318		94,318	0
25.	Aggregate write-ins for other than invested assets	1,114,316	1,113,216	1,100	950
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	17,106,112	1,113,708	15,992,404	3,381,839
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28.	Total (Lines 26 and 27)	17,106,112	1,113,708	15,992,404	3,381,839
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	State income tax recoverable	1,100		1,100	950
2502.	Prepaid expenses	1,113,216	1,113,216	0	
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,114,316	1,113,216	1,100	950

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less $ ..... reinsurance ceded)	70,390		70,390	0
2.	Accrued medical incentive pool and bonus amounts			0	0
3.	Unpaid claims adjustment expenses	2,180		2,180	0
4.	Aggregate health policy reserves, including the liability of $ 0 for medical loss ratio rebate per the Public Health Service Act			0	0
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves			0	0
8.	Premiums received in advance	2,587		2,587	842
9.	General expenses due or accrued	350		350	375
10.1	Current federal and foreign income tax payable and interest thereon (including $ ..... on realized gains (losses))			0	5
10.2	Net deferred tax liability			0	0
11.	Ceded reinsurance premiums payable			0	0
12.	Amounts withheld or retained for the account of others			0	0
13.	Remittances and items not allocated	4,346		4,346	858
14.	Borrowed money (including $ ..... current) and interest thereon $ ..... (including $ ..... current)			0	0
15.	Amounts due to parent, subsidiaries and affiliates	6,743,878		6,743,878	0
16.	Derivatives			0	0
17.	Payable for securities			0	0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with $ ..... authorized reinsurers, $ ..... unauthorized reinsurers and $ ..... certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified ($ .....) companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22.	Liability for amounts held under uninsured plans	637,006		637,006	0
23.	Aggregate write-ins for other liabilities (including $ 22,511 current)	22,511	0	22,511	0
24.	Total liabilities (Lines 1 to 23)	7,483,248	0	7,483,248	2,080
25.	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26.	Common capital stock	XXX	XXX	1,000	1,000
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	9,147,882	3,147,882
29.	Surplus notes	XXX	XXX		
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31.	Unassigned funds (surplus)	XXX	XXX	(639,726)	230,877
32.	Less treasury stock, at cost:				
	32.1 ..... shares common (value included in Line 26 $ .....)	XXX	XXX		
	32.2 ..... shares preferred (value included in Line 27 $ .....)	XXX	XXX		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	8,509,156	3,379,759
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	15,992,404	3,381,839
	DETAILS OF WRITE-INS				
2301.	Amounts owed to CMS	22,511		22,511	
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	22,511	0	22,511	0
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 through 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 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX	54,624		
2.	Net premium income (including $ non-health premium income)	XXX	63,997,920		
3.	Change in unearned premium reserves and reserve for rate credits	XXX			
4.	Fee-for-service (net of $ medical expenses)	XXX			
5.	Risk revenue	XXX			
6.	Aggregate write-ins for other health care related revenues	XXX	0	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0	0
8.	Total revenues (Lines 2 to 7)	XXX	63,997,920	0	0
	Hospital and Medical:				
9.	Hospital/medical benefits		57,639,867		
10.	Other professional services		815,149		
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs		(14,129)	0	
14.	Aggregate write-ins for other hospital and medical	0	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts		28		
16.	Subtotal (Lines 9 to 15)	0	58,440,915	0	0
	Less:				
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)	0	58,440,915	0	0
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including $ cost containment expenses		146,739		0
21.	General administrative expenses		5,410,099	273	518
22.	Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)				0
23.	Total underwriting deductions (Lines 18 through 22)	0	63,997,753	273	518
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	167	(273)	(518)
25.	Net investment income earned		10,996	18,629	27,649
26.	Net realized capital gains (losses) less capital gains tax of $				
27.	Net investment gains (losses) (Lines 25 plus 26)	0	10,996	18,629	27,649
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $ (1,654))]		(1,654)		
29.	Aggregate write-ins for other income or expenses	0	(1,455)	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	8,054	18,356	27,131
31.	Federal and foreign income taxes incurred	XXX	(3,027)	1,011	705
32.	Net income (loss) (Lines 30 minus 31)	XXX	11,081	17,345	26,426
	DETAILS OF WRITE-INS				
0601.		XXX			
0602.		XXX			
0603.		XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX			
0702.		XXX			
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.	Miscellaneous Income (expense)		(1,455)	0	0
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(1,455)	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	3,379,759	3,353,664	3,353,664
34.	Net income or (loss) from Line 32	11,081	17,345	26,426
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of $			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax	231,660	(319)	33
39.	Change in nonadmitted assets	(1,113,344)		(364)
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	6,000,000	0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	5,129,397	17,026	26,095
49.	Capital and surplus end of reporting period (Line 33 plus 48)	8,509,156	3,370,690	3,379,759
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	60,543,628	0	842
2.	Net investment income	18,951	25,561	43,710
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	60,562,579	25,561	44,552
5.	Benefit and loss related payments	58,464,843	0	0
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	5,052,759	273	1,758
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of $ tax on capital gains (losses)	281,064	0	43,839
10.	Total (Lines 5 through 9)	63,798,666	273	45,597
11.	Net cash from operations (Line 4 minus Line 10)	(3,236,087)	25,288	(1,045)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	0	0	0
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	0
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	0	0	0
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	0	0	0
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	0
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	6,000,000	0	0
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	5,656,790	(76,050)	(76,259)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	11,656,790	(76,050)	(76,259)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	8,420,703	(50,762)	(77,304)
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	2,009,306	2,086,610	2,086,610
	19.2 End of period (Line 18 plus Line 19.1)	10,430,009	2,035,848	2,009,306

Note: Supplemental disclosures of cash flow information for non-cash transactions:

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	0									
2. First Quarter	9,053	0	0	0	0	0	0	9,053	0	0
3. Second Quarter	9,313							9,313		
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	54,624							54,624		
Total Member Ambulatory Encounters for Period:										
7 Physician	46,092							46,092		
8. Non-Physician	53,787							53,787		
9. Total	99,879	0	0	0	0	0	0	99,879	0	0
10. Hospital Patient Days Incurred	2,547							2,547		
11. Number of Inpatient Admissions	477							477		
12. Health Premiums Written (a)	63,997,920							63,997,920		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	63,997,920							63,997,920		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	58,370,524							58,370,524		
18. Amount Incurred for Provision of Health Care Services	58,440,915							58,440,915		

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $ 63,997,920

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	10,494	5,066	1,354	486	21	17,421
0499999 Subtotals	10,494	5,066	1,354	486	21	17,421
0599999 Unreported claims and other claim reserves						52,969
0699999 Total amounts withheld						
0799999 Total claims unpaid						70,390
0899999 Accrued medical incentive pool and bonus amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)					0	0
2. Medicare Supplement					0	0
3. Dental Only					0	0
4. Vision Only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare		58,464,814		70,390	0	0
7 Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	0	58,464,814	0	70,390	0	0
10. Healthcare receivables (a)		94,318		0	0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts		28		0	0	0
13. Totals (Lines 9-10+11+12)	0	58,370,524	0	70,390	0	0

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

NOTES TO FINANCIAL STATEMENTS

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2020. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of AMERIGROUP Ohio, Inc. (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* ("NAIC SAP"), subject to any deviations prescribed or permitted by the Ohio Department of Insurance ("ODI").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the ODI is shown below:

		SSAP #	F/S Page	F/S Line #	June 30, 2021	December 31, 2020
Net Income						
(1)	AMERIGROUP Ohio, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	$ 11,081	$ 26,426
(2)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(3)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	$ 11,081	$ 26,426
Surplus						
(5)	AMERIGROUP Ohio, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	$ 8,509,156	$ 3,379,759
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	$ 8,509,156	$ 3,379,759

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

No significant change.

C. Accounting Policies

(1) No significant change.

(2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield

to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.

(3) - (5) Not applicable.

(6) The Company has no loan-backed securities.

(7) - (13) Not applicable.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

(1) The Company did not have loan-backed securities at June 30, 2021.
(2) The Company did not recognize OTTI on its loan-backed securities during the Three months ended June 30, 2021.
(3) The Company did not hold OTTI on its loan-backed securities at June 30, 2021.
(4) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings at June 30, 2021.
(5) The Company had no impaired loan-backed securities at June 30, 2021.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not applicable.

NOTES TO FINANCIAL STATEMENTS

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at June 30, 2021.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at June 30, 2021.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at June 30 2021.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at June 30, 2021.

J. Real Estate

Not applicable.

K. Investments in Low-Income Housing Tax Credits

Not applicable.

L. Restricted Assets

No significant change.

M. Working Capital Finance Investments

Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company had no netted assets and liabilities at June 30, 2021.

O. 5GI Securities

The Company has no 5GI Securities as of June 30, 2021.

P. Short Sales

The Company did not have any short sales at June 30, 2021.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at June 30,2021.

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

The Company did not participate in a cash pool at June 30, 2021.

6. Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

7. Investment Income

No significant change.

8. Derivative Instruments

Not applicable.

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

No significant change.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship

No significant change.

B. Significant Transactions for Each Period

Effective January 1, 2021, the Company began writing Medicare Advantage business under a new contract with the Centers for Medicare & Medicaid Services (“CMS”). The products offered under the CMS contract are branded as Amerivantage products. The Company is remitting a monthly determinable capitation amount to an affiliate, Caremore Arizona, Inc. ("Caremore"), who is responsible for providing health care services to the enrollees. During 2021, the Company incurred capitation expense to Caremore of $52 million.

On June 25, 2021, the Company was authorized to receive a $6 million capital contribution from its parent, AMERIGROUP Corporation. It was received on June 30, 2021.

C. Intercompany Management and Service Arrangements

No significant change.

D. Amounts Due to or from Related Parties

At June 30, 2021, the Company reported no amounts due from affiliates and $6,743,878 due to affiliates. The payable balance represents intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - O.

No significant change.

11. Debt

Not applicable.

NOTES TO FINANCIAL STATEMENTS

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not applicable.

B. Not applicable.

C. Not applicable.

D. Not applicable.

E. Defined Contribution Plans

Not applicable.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

No significant change.

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

No significant change.

B. Assessments

(1) - (2)

No significant change.

C. - E.

No significant change.

F. All Other Contingencies

No significant change.

15. Leases

Not applicable.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant change.

NOTES TO FINANCIAL STATEMENTS

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

(1) No significant change.

(2) - (7) Not applicable.

C. Wash Sales

1. In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.

2. At June 30, 2021, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans

Not applicable.

B. Administrative Services Contract Plans

Not applicable.

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

The Company has uninsured Medicare liabilities, not receivables, at June 30, 2021.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

20. Fair Value Measurements

A. (1) Fair Value Measurement at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash equivalents					
Industrial and miscellaneous money market funds	$ 101,499	$ —	$ —	$ —	$ 101,499
Total cash equivalents	$ 101,499	$ —	$ —	$ —	$ 101,499

NOTES TO FINANCIAL STATEMENTS

(2) Fair Value Measurement in (Level 3) of the Fair Value Hierarchy

There are no investments in Level 3 as of June 30, 2021.

(3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

(4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services 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, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

Certain bonds, primarily corporate debt securities, are designated Level 3. For these securities, the valuation methodologies may incorporate broker quotes or discounted cash flow analyses using assumptions for inputs such as expected cash flows, benchmark yields, credit spreads, default rates and prepayment speeds that are not observable in the markets.

Cash equivalents primarily consist of highly rated money market funds or bonds with original maturities of three months or less. Due to the high ratings and short-term nature, these investments are designated as Level 1. The Company also holds bonds purchased with less than three months to maturity. Fair value of these bonds are based on quoted market prices obtained from third party pricing services which generally use Level 1 or Level 2 inputs.

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value ("NAV")	Not Practicable (Carrying Value)
Bonds	$ 1,458,205	$ 1,343,669	$ —	$ 1,458,205	$ —	$ —	$ —
Cash equivalents	101,499	101,499	101,499	—	—	—	—

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value.

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

NOTES TO FINANCIAL STATEMENTS

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through August 14, 2021 for the statutory statement issued on August 14, 2021. There were no events occurring subsequent to June 30, 2021 requiring recognition or disclosure.

23. Reinsurance

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

E. Risk Sharing Provisions of the Affordable Care Act ("ACA")

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year.

Not applicable.

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

Not applicable.

(4) Roll-forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.

Not applicable.

(5) ACA Risk Corridors Receivable as of Reporting Date.

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

A. As indicated in Note 10B, the Company began writing Medicare Advantage business effective 1/1/2021; thus, there are no estimated cost of claims and claim adjustment expense attributable to insured events of prior years until 2022.

B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable.

NOTES TO FINANCIAL STATEMENTS

27. Structured Settlements

Not applicable.

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	$	—
2. Date of the most recent evaluation of this liability		June 30, 2021
3. Was anticipated investment income utilized in the calculation?	Yes	No X

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [X]

1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]

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 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 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [X]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.
N/A

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [X] No [ ]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0001156039

4.1 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.

4.2 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 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [X] N/A [ ]
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2017

6.2 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. 12/31/2017

6.3 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). 05/23/2019

6.4 By what department or departments?
Ohio Department Of Insurance

6.5 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]

6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ ] No [ ] N/A [X]

7.1 Has this 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]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [X]

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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

9.1 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.

9.11 If the response to 9.1 is No, please explain:

N/A

9.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [X]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [X]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... $ 0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... $ 0

13. Amount of real estate and mortgages held in short-term investments: ..... $ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [X]

14.2 If yes, please complete the following:

		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21	Bonds	$ 0	$ 0
14.22	Preferred Stock	$ 0	$ 0
14.23	Common Stock	$ 0	$ 0
14.24	Short-Term Investments	$ 0	$ 0
14.25	Mortgage Loans on Real Estate	$ 0	$ 0
14.26	All Other	$ 0	$ 0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$ 0	$ 0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	$	$

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

15.2 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.

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. ..... $ 0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... $ 0

16.3 Total payable for securities lending reported on the liability page. ..... $ 0

GENERAL INTERROGATORIES

17. 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 [ ]

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

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase Bank, N.A	383 Madison Ave, New York, NY 10179

17.2 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 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [X]

17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 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 Name of Firm or Individual	2 Affiliation
Anthem, Inc.	I
Loomis, Sayles & Company, LP	U

17.5097 For those firms/individuals listed in the table for Question 17.5, 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 [ ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? ..... Yes [ ] No [X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	JIZPN2RX3UMNOYIDI313	Securities Exchange Commission	NO

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

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for 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]

20. 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]

21. 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]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1	A&H loss percent	91.8 %
1.2	A&H cost containment percent	0.4 %
1.3	A&H expense percent excluding cost containment expenses	8.2 %

2.1	Do you act as a custodian for health savings accounts?	Yes [ ] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	$
2.3	Do you act as an administrator for health savings accounts?	Yes [ ] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	$
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No [ ]
3.1	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 [ ]

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating

NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

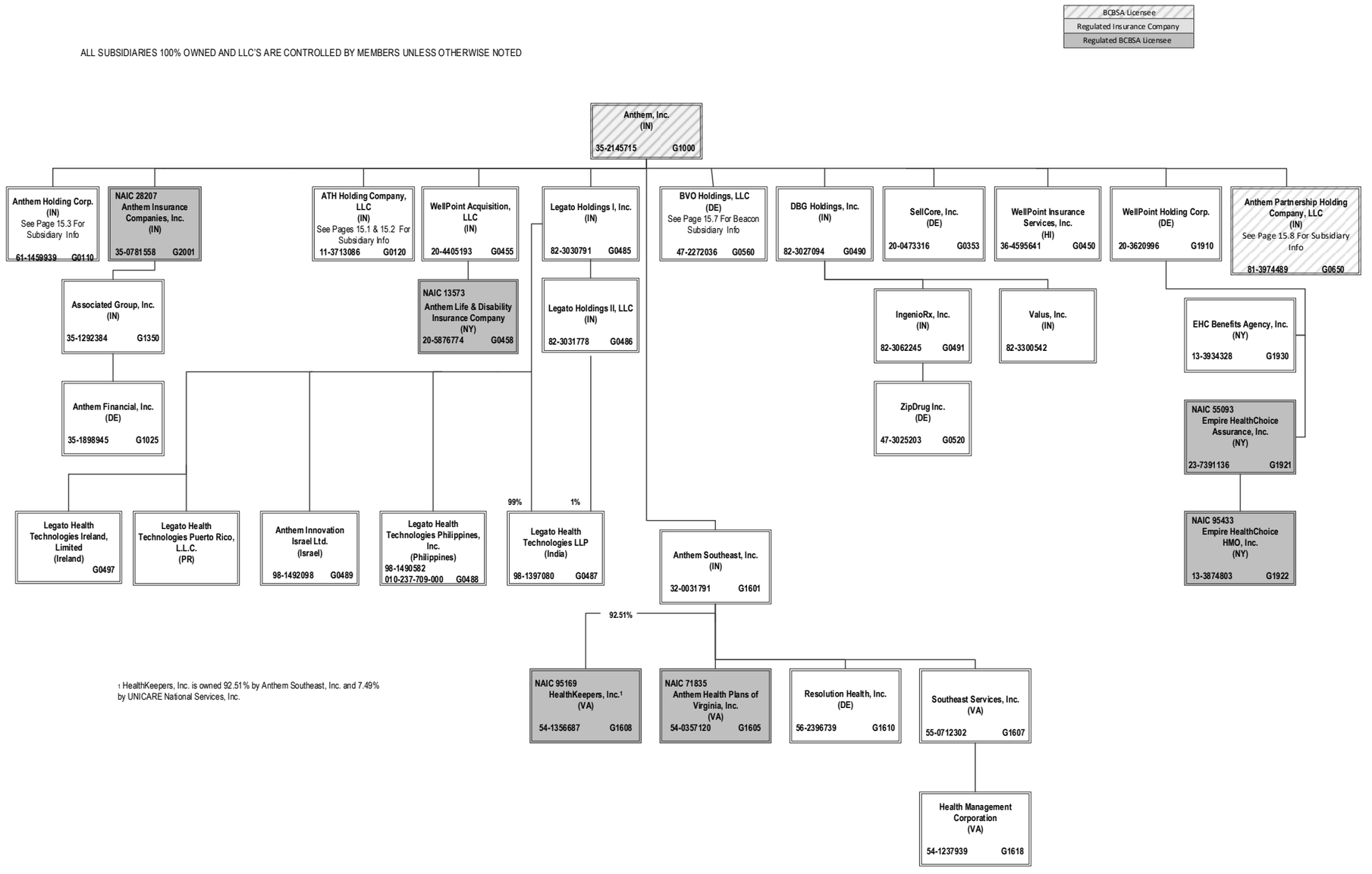
States, etc.	1 Active Status (a)	Direct Business Only 2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama AL	N								0	
2. Alaska AK	N								0	
3. Arizona AZ	L		63,997,920						63,997,920	
4. Arkansas AR	L								0	
5. California CA	N								0	
6. Colorado CO	N								0	
7. Connecticut CT	N								0	
8. Delaware DE	N								0	
9. District of Columbia DC	N								0	
10. Florida FL	N								0	
11. Georgia GA	N								0	
12. Hawaii HI	N								0	
13. Idaho ID	N								0	
14. Illinois IL	N								0	
15. Indiana IN	N								0	
16. Iowa IA	N								0	
17. Kansas KS	N								0	
18. Kentucky KY	N								0	
19. Louisiana LA	N								0	
20. Maine ME	N								0	
21. Maryland MD	N								0	
22. Massachusetts MA	N								0	
23. Michigan MI	N								0	
24. Minnesota MN	N								0	
25. Mississippi MS	N								0	
26. Missouri MO	N								0	
27. Montana MT	N								0	
28. Nebraska NE	N								0	
29. Nevada NV	N								0	
30. New Hampshire NH	N								0	
31. New Jersey NJ	N								0	
32. New Mexico NM	N								0	
33. New York NY	N								0	
34. North Carolina NC	N								0	
35. North Dakota ND	N								0	
36. Ohio OH	L								0	
37. Oklahoma OK	N								0	
38. Oregon OR	N								0	
39. Pennsylvania PA	N								0	
40. Rhode Island RI	N								0	
41. South Carolina SC	N								0	
42. South Dakota SD	N								0	
43. Tennessee TN	N								0	
44. Texas TX	N								0	
45. Utah UT	N								0	
46. Vermont VT	N								0	
47. Virginia VA	N								0	
48. Washington WA	N								0	
49. West Virginia WV	N								0	
50. Wisconsin WI	N								0	
51. Wyoming WY	N								0	
52. American Samoa AS	N								0	
53. Guam GU	N								0	
54. Puerto Rico PR	N								0	
55. U.S. Virgin Islands VI	N								0	
56. Northern Mariana Islands MP	N								0	
57. Canada CAN	N								0	
58. Aggregate Other Aliens OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	0	63,997,920	0	0	0	0	0	63,997,920	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX								0	
61. Totals (Direct Business)	XXX	0	63,997,920	0	0	0	0	0	63,997,920	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
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:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG 3
R - Registered - Non-domiciled RRGs 0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state 0
Q - Qualified - Qualified or accredited reinsurer 0
N - None of the above - Not allowed to write business in the state 54

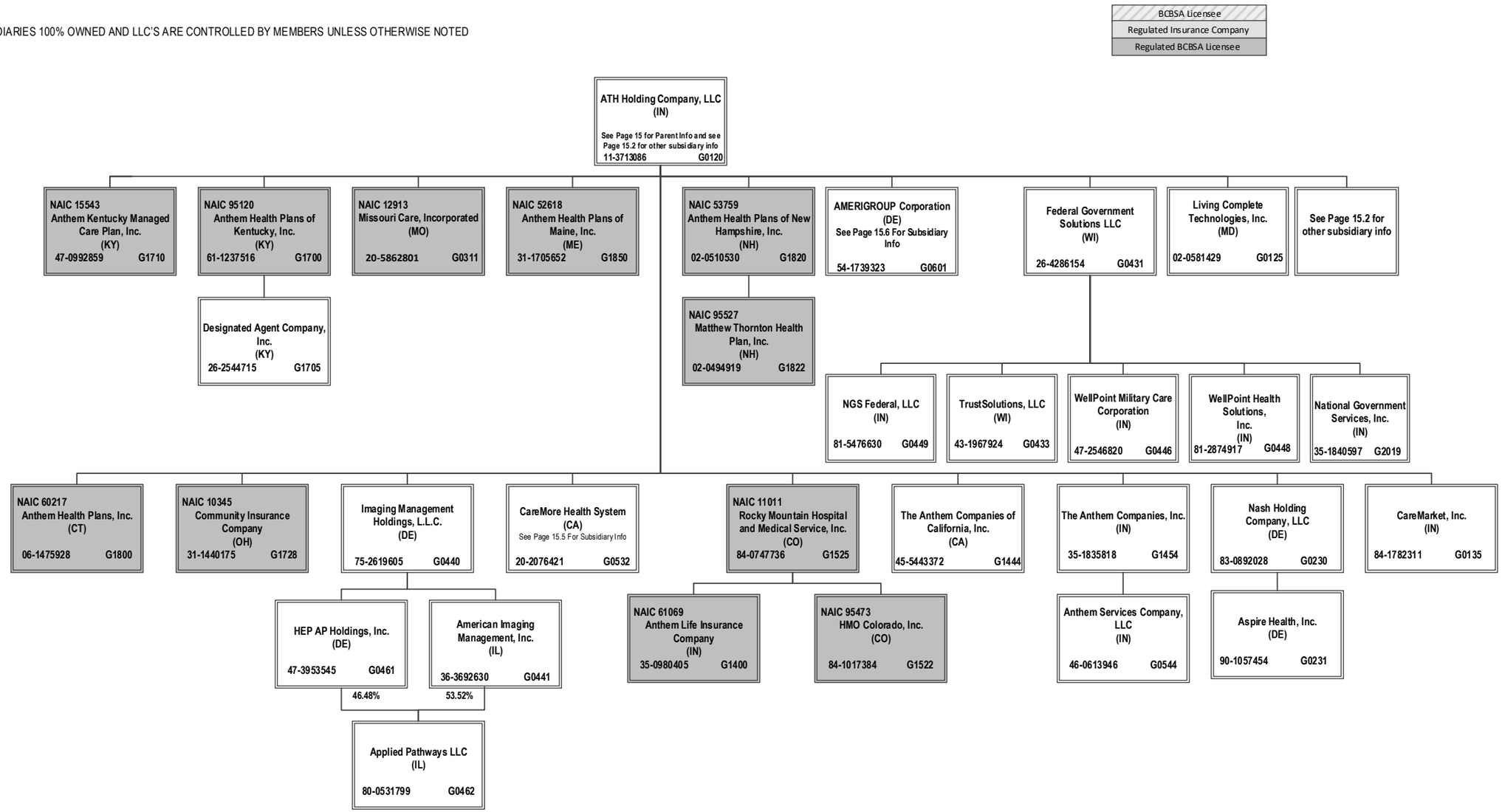
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



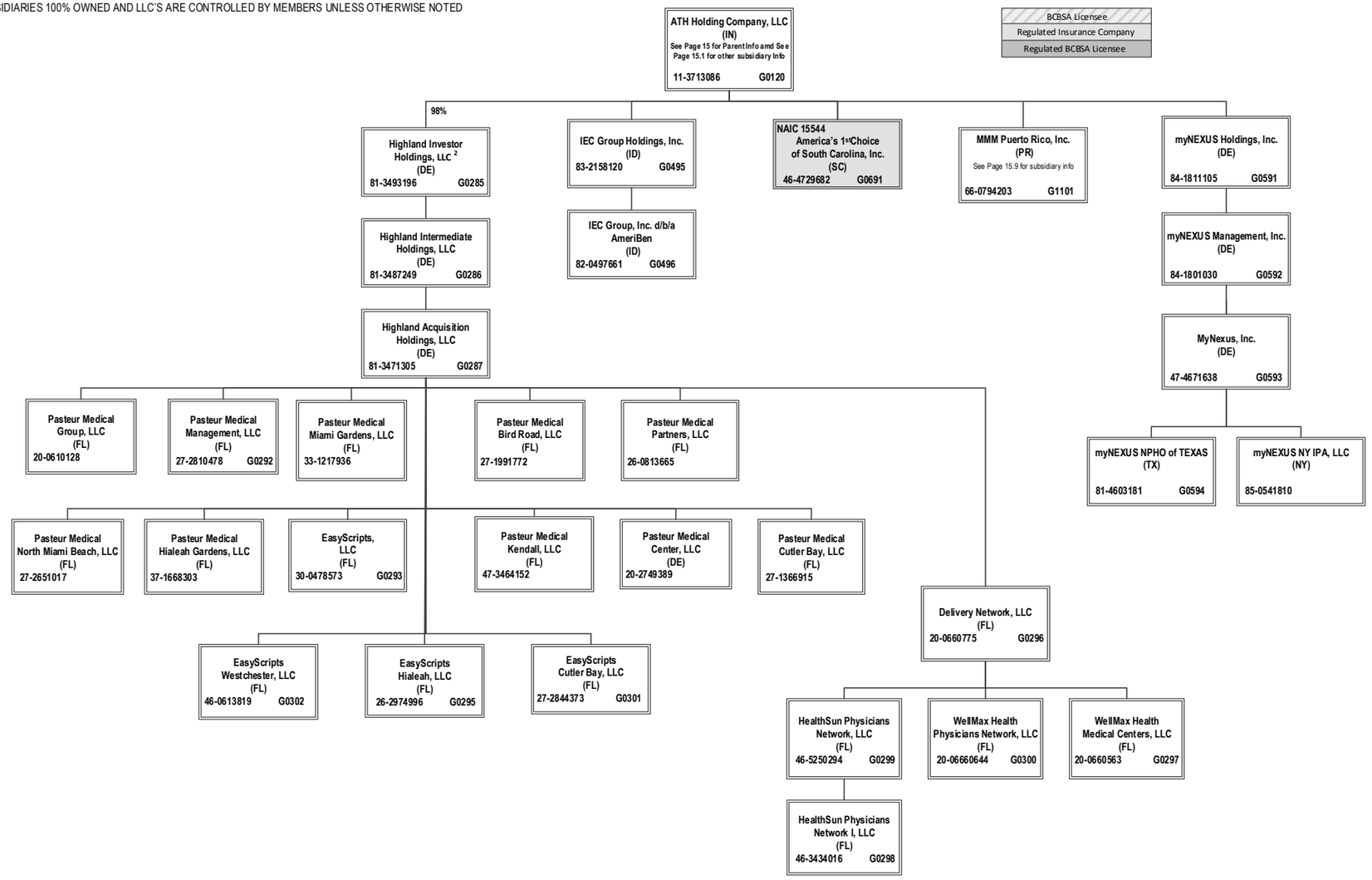
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



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

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

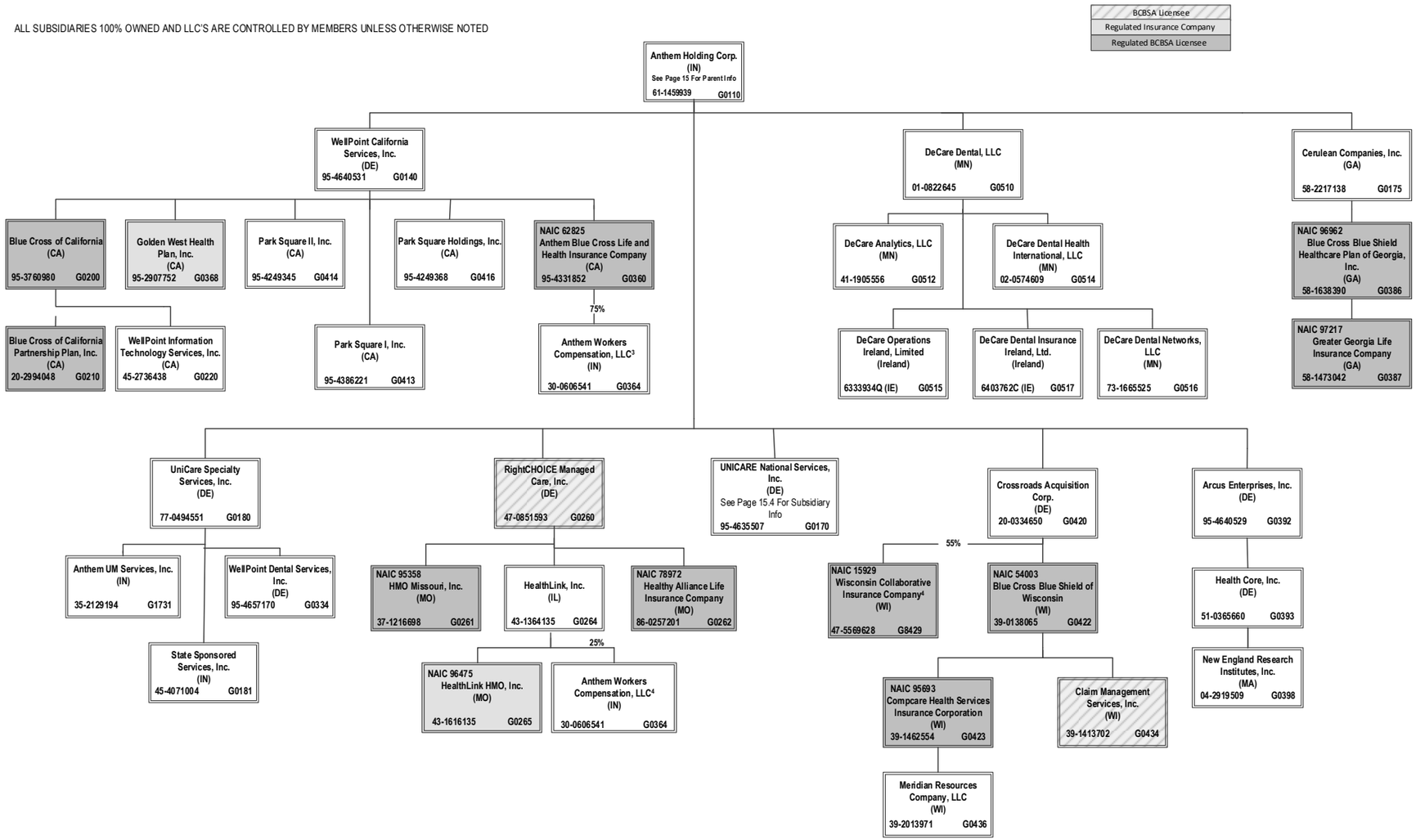


[2] ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Amerigroup Corporation holds the remaining 2% interest.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

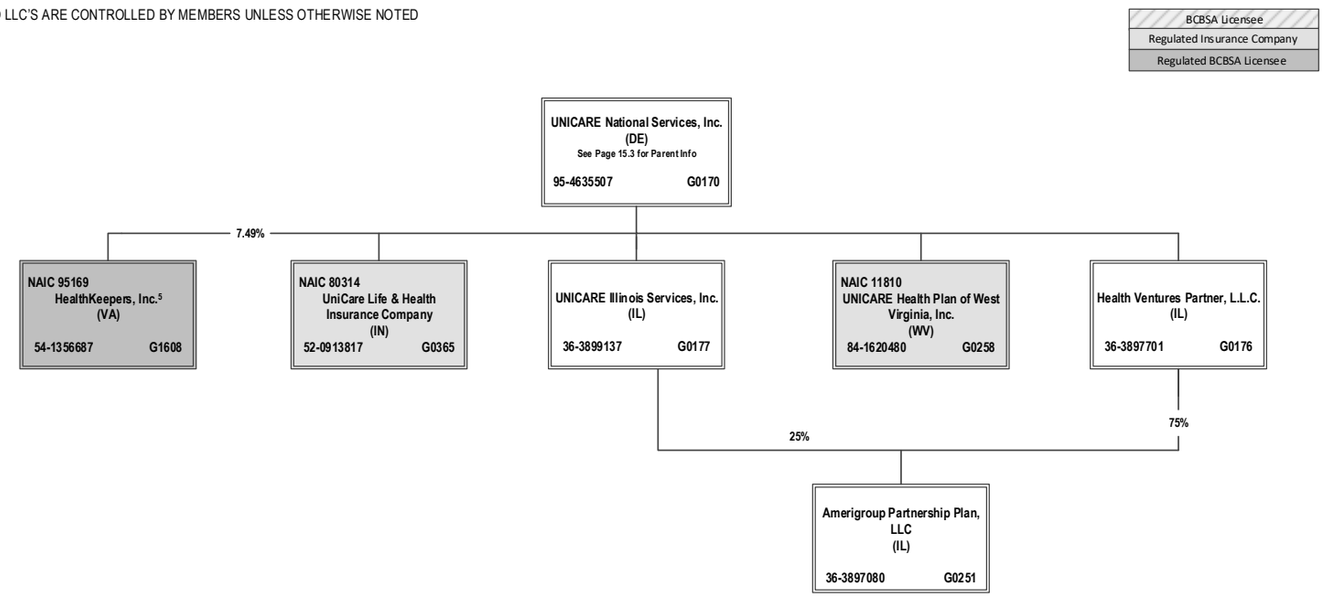


[3] 45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate). Not consolidated for accounting purposes.

[4] Anthem Workers' Compensation LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.

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

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

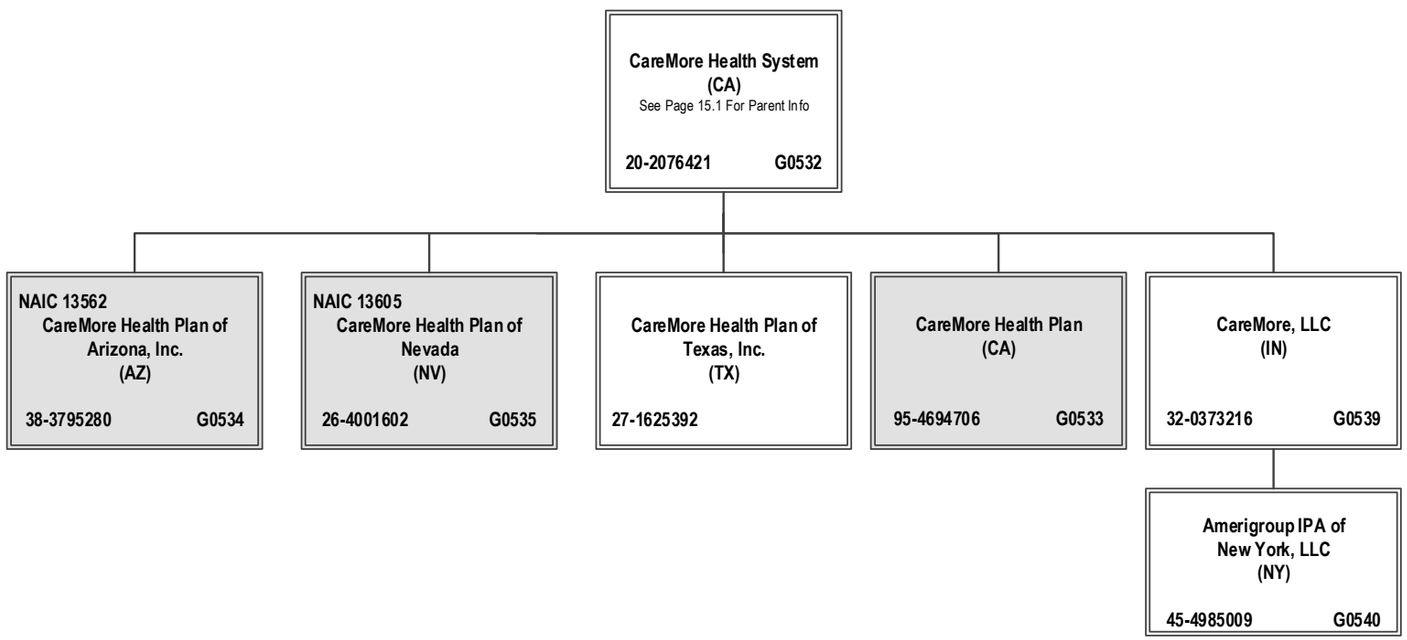


[5] HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

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

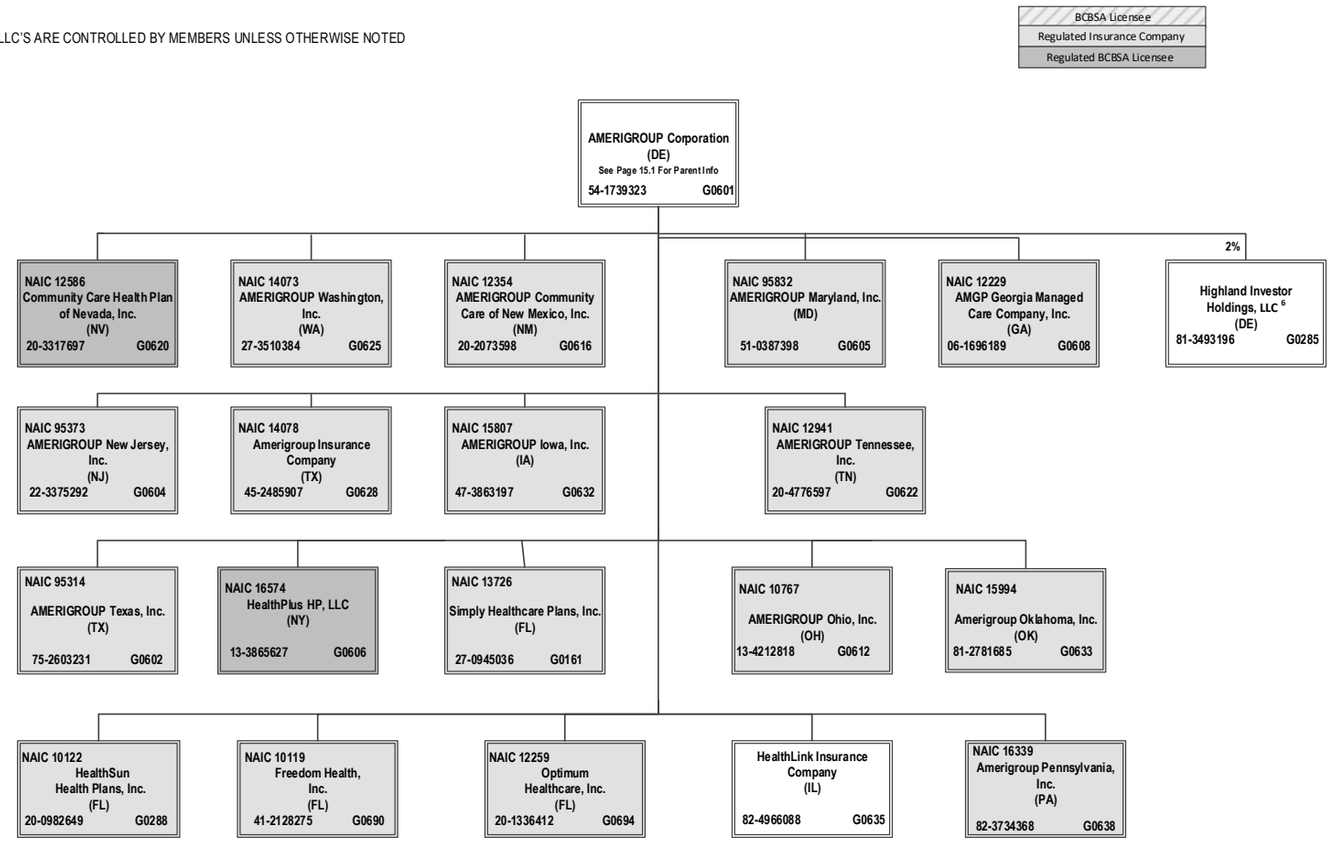
BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



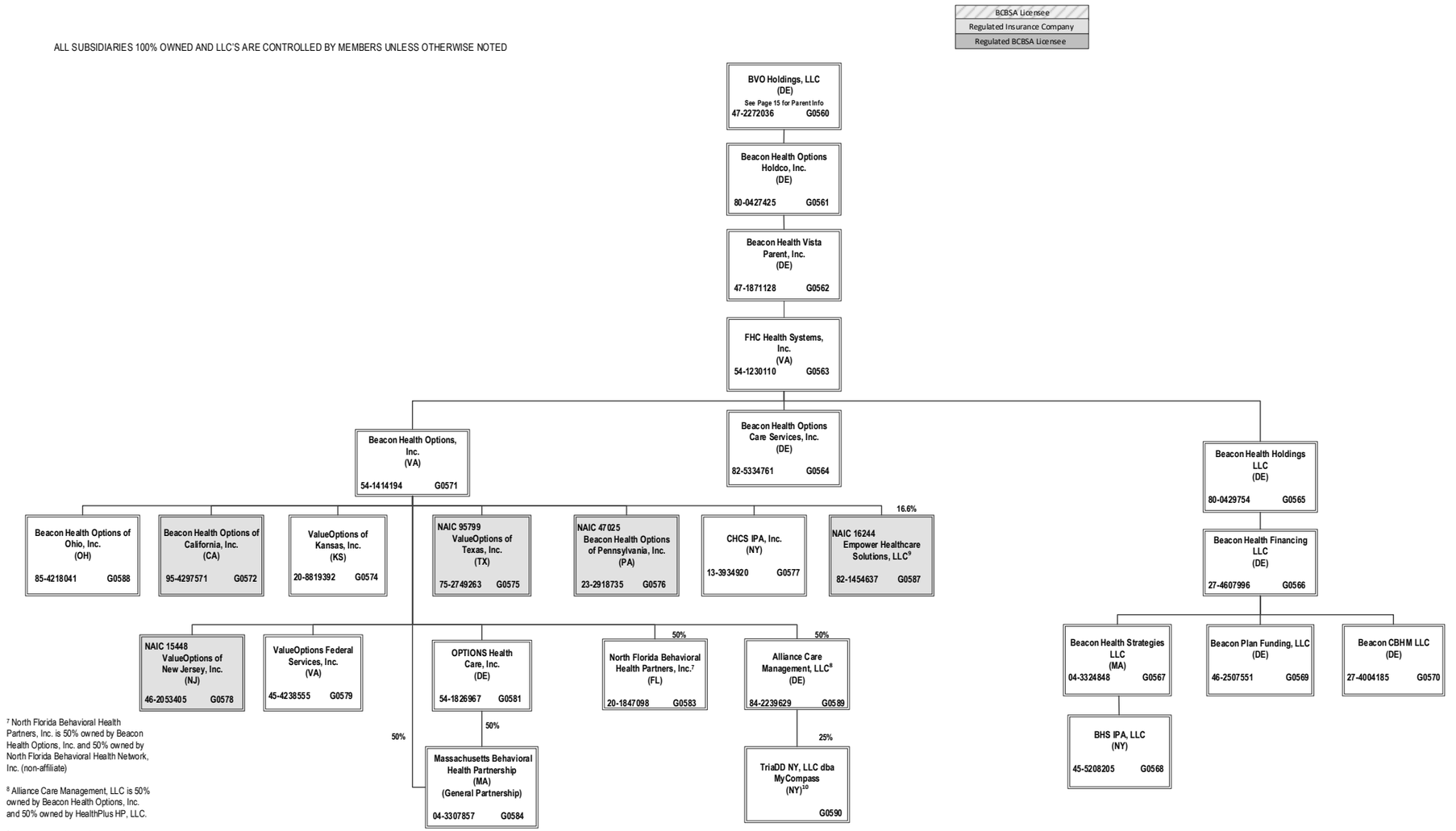
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



[6] Amerigroup Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

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



[7] North Florida Behavioral Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by North Florida Behavioral Health Network, Inc. (non-affiliate)

[8] Alliance Care Management, LLC is 50% owned by Beacon Health Options, Inc. and 50% owned by HealthPlus HP, LLC.

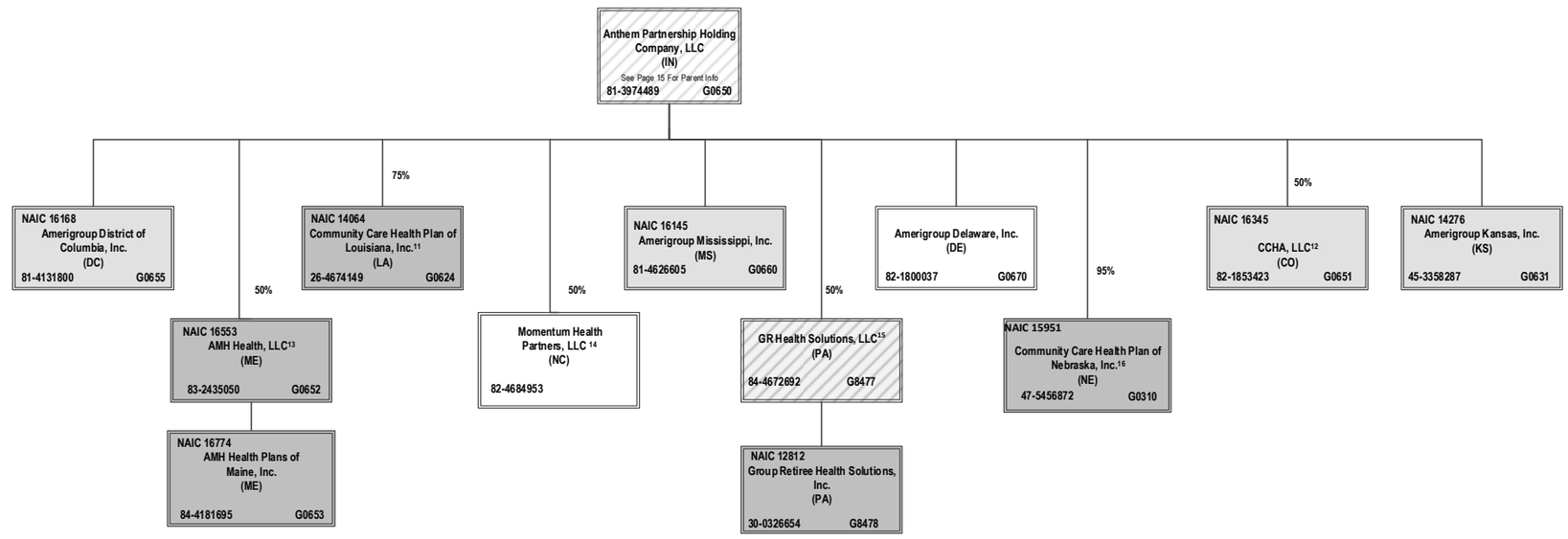
[9] Empower Healthcare Solutions, LLC is owned 16.6% by Beacon Health Options, Inc. and 83.4% by non-affiliates.

[10] TriaDD NY, LLC dba MyCompass is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.

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

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



[11] Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (non-affiliate)

[12] CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)

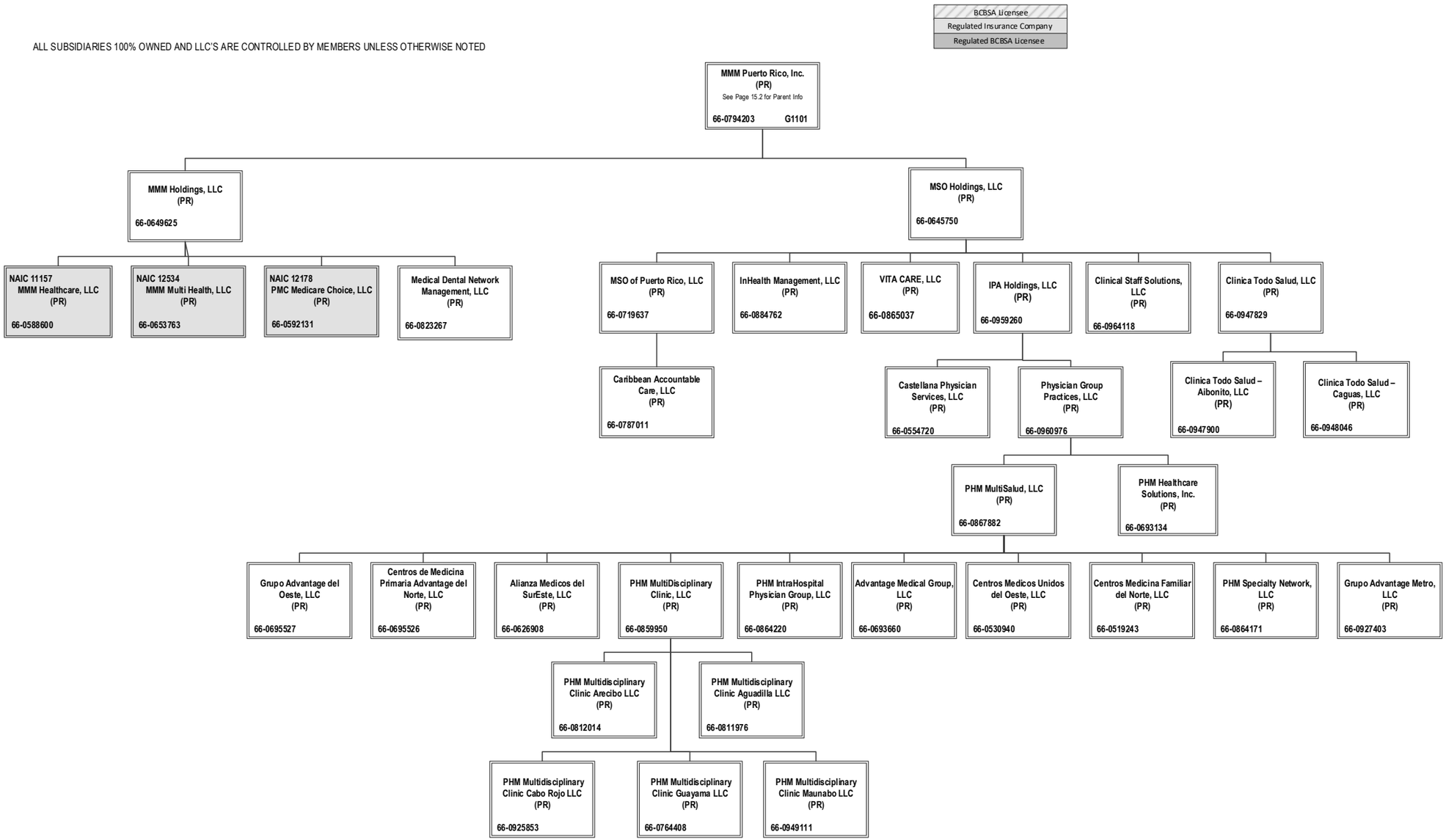
[13] AMH Health, LLC is a joint venture 50% owned by MaineHealth (non-affiliate) and 50% owned by Anthem Partnership Holding Company, LLC

[14] Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)

[15] GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

[16] Anthem Partnership Holding Company, LLC holds a 95% interest in Community Care Health Plan of Nebraska, Inc., and Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate) holds the remaining 5%

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



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0671	Anthem, Inc.		66-0693660		0001156039		Advantage Medical Group, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0626908		0001156039		Alianza Medicos del SurEste, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		84-2239629		0001156039		Alliance Care Management, LLC	DE	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	
0671	Anthem, Inc.		84-2239629		0001156039		Alliance Care Management, LLC	DE	NIA	HealthPlus HP, LLC	Ownership	50.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3692630		0001156039		American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15544	46-4729682		0001156039		America's 1st Choice of South Carolina, Inc.	SC	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12354	20-2073598		0001156039		AMERIGROUP Community Care of New Mexico, Inc.	NM	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1739323		0001156039		AMERIGROUP Corporation	DE	UDP	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-1800037		0001156039		AMERIGROUP Delaware, Inc.	DE	NIA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16168	81-4131800		0001156039		Amerigroup District of Columbia, Inc.	DC	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	14078	45-2485907		0001156039		Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15807	47-3863197		0001156039		AMERIGROUP Iowa, Inc.	IA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-4985009		0001156039		Amerigroup IPA of New York, LLC	NY	NIA	CareMore, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	14276	45-3358287		0001156039		Amerigroup Kansas, Inc.	KS	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95832	51-0387398		0001156039		AMERIGROUP Maryland, Inc.	MD	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	MS	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95373	22-3375292		0001156039		AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	10767	13-4212818		0001156039		AMERIGROUP Ohio, Inc.	OH	RE	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15994	81-2781685		0001156039		AMERIGROUP Oklahoma, Inc.	OK	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	UNICARE Illinois Services, Inc.	Ownership	25.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16339	82-3734368		0001156039		Amerigroup Pennsylvania, Inc.	PA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12941	20-4776597		0001156039		AMERIGROUP Tennessee, Inc.	TN	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95314	75-2603231		0001156039		AMERIGROUP Texas, Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	14073	27-3510384		0001156039		AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation	Ownership	9.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12229	06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	GA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16553	83-2435050		0001156039		AMH Health, LLC	ME	IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.	16774	84-4181695		0001156039		AMH Health Plans of Maine, Inc.	ME	IA	AMH Health, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	62825	95-4331852		0001156039		Anthem Blue Cross Life and Health Insurance Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1898945		0001156039		Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	52618	31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	ME	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	53759	02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc.	NH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	71835	54-0357120	40003317	0001156039		Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	60217	06-1475928		0001156039		Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		61-1459939		0001156039		Anthem Holding Corp.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-2145715		0001156039	New York Stock Exchange (NYSE)	Anthem, Inc.	IN	UIP				Anthem, Inc.	N	
0671	Anthem, Inc.		98-1492098		0001156039		Anthem Innovation Israel Ltd	ISR	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	28207	35-0781558		0001156039		Anthem Insurance Companies, Inc.	IN	IA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	13573	20-5876774		0001156039		Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	61069	35-0980405		0001156039		Anthem Life Insurance Company	IN	IA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3974489		0001156039		Anthem Partnership Holding Company, LLC	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-0613946		0001156039		Anthem Services Company, LLC	IN	NIA	The Anthem Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		32-0031791		0001156039		Anthem Southeast, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-2129194		0001156039		Anthem UM Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NIA	Anthem Blue Cross Life and Health Insurance Company	Ownership	75.000	Anthem, Inc.	N	0109
0671	Anthem, Inc.		30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NIA	HealthLink, Inc.	Ownership	25.000	Anthem, Inc.	N	0109

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0671	Anthem, Inc.		80-0531799		0001156039		Applied Pathways, LLC	IL	NIA	American Imaging Management, Inc.	Ownership	53.520	Anthem, Inc.	N	0108
0671	Anthem, Inc.		80-0531799		0001156039		Applied Pathways, LLC	IL	NIA	HEP AP Holdings, Inc.	Ownership	46.480	Anthem, Inc.	N	0108
0671	Anthem, Inc.		95-4640529		0001156039		Arcus Enterprises, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		90-1057454		0001156039		Aspire Health, Inc.	DE	NIA	Nash Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1292384		0001156039		Associated Group, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		11-3713086		0001156039		ATH Holding Company, LLC	IN	UIP	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-4004185		0001156039		Beacon CBHM LLC	DE	NIA	Beacon Health Financing LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-4607996		0001156039		Beacon Health Financing LLC	DE	NIA	Beacon Health Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		80-0429754		0001156039		Beacon Health Holdings, LLC	DE	NIA	FHC Health Systems, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-5334761		0001156039		Beacon Health Options Care Services, Inc.	DE	NIA	FHC Health Systems, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4297571		0001156039		Beacon Health Options of California, Inc.	CA	IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.	47025	23-2918735		0001156039		Beacon Health Options of Pennsylvania, Inc.	PA	IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		80-0427425		0001156039		Beacon Health Options Holdco, Inc.	DE	NIA	BVO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		85-4218041		0001156039		Beacon Health Options of Ohio, Inc.	OH	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1414194		0001156039		Beacon Health Options, Inc.	VA	NIA	FHC Health Systems, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		04-3324848		0001156039		Beacon Health Strategies LLC	MA	NIA	Beacon Health Financing LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-1871128		0001156039		Beacon Health Vista Parent, Inc.	DE	NIA	Beacon Health Options Holdco, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-2507551		0001156039		Beacon Plan Funding, LLC	DE	NIA	Beacon Health Financing LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-5208205		0001156039		BHS IPA, LLC	NY	NIA	Beacon Health Strategies LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	96962	58-1638390		0001156039		Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	WI	IA	Crossroads Acquisition Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-3760980		0001156039		Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.		20-2994048		0001156039		Blue Cross of California Partnership Plan, Inc.	CA	IA	Blue Cross of California	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.		47-2272036		0001156039		BVO Holdings, LLC	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		84-1782311		0001156039		CareMarket, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4694706		0001156039		CareMore Health Plan	CA	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.	13562	38-3795280		0001156039		CareMore Health Plan of Arizona, Inc.	AZ	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	13605	26-4001602		0001156039		CareMore Health Plan of Nevada	NV	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-1625392		0001156039		CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		32-0373216		0001156039		CareMore, LLC	IN	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-2076421		0001156039		CareMore Health System	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0787011		0001156039		Caribbean Accountable Care, LLC	PR	NIA	MSO of Puerto Rico, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0554720		0001156039		Castellana Physician Services, LLC	PR	NIA	IPA Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0695526		0001156039		Centros de Medicina Primaria Advantage del Norte, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0519243		0001156039		Centros Medicina Familiar del Norte, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0530940		0001156039		Centros Medicos Unidos del Oeste, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		39-1413702		0001156039		Claim Management Services, Inc.	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16345	82-1853423		0001156039		CCHA, LLC	CO	IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.				0001156039		CHCS IPA, Inc.	NY	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0947900		0001156039		Clinica Todo Salud-Aibonito, LLC	PR	NIA	Clinica Todo Salud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0948046		0001156039		Clinica Todo Salud-Caguas, LLC	PR	NIA	Clinica Todo Salud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0947829		0001156039		Clinica Todo Salud, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0964118		0001156039		Clinical Staff Solutions, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	14064	26-4674149		0001156039		Community Care Health Plan of Louisiana, Inc.	LA	IA	Anthem Partnership Holding Company, LLC	Ownership	75.000	Anthem, Inc.	N	0104
0671	Anthem, Inc.	15951	47-5456872		0001156039		Community Care Health Plan of Nebraska, Inc	NE	IA	Anthem Partnership Holding Company, LLC	Ownership	95.000	Anthem, Inc.	N	0116
0671	Anthem, Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc.	NV	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	10345	31-1440175		0001156039		Community Insurance Company	OH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95693	39-1462554		0001156039		Compcare Health Services Insurance Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	N	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0671	Anthem, Inc.		20-0334650		0001156039		Crossroads Acquisition Corp.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3027094		0001156039		DBG Holdings, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		41-1905556		0001156039		DeCare Analytics, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		02-0574609		0001156039		DeCare Dental Health International, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.				0001156039		DeCare Dental Insurance Ireland, Ltd.	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		73-1665525		0001156039		DeCare Dental Networks, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		01-0822645		0001156039		DeCare Dental, LLC	MN	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.				0001156039		DeCare Operations Ireland, Limited	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0660775		0001156039		Delivery Network, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		26-2544715		0001156039		Designated Agent Company, Inc.	KY	NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-2844373		0001156039		EasyScripts Cutler Bay, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		26-2974996		0001156039		EasyScripts Hialeah, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		30-0478573		0001156039		EasyScripts LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		13-3934328		0001156039		EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	55093	23-7391136		0001156039		Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95433	13-3874803		0001156039		Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16244	82-1454637		0001156039		Empower Healthcare Solutions, LLC	AR	IA	Beacon Health Options, Inc.	Ownership	16.600	Anthem, Inc.	N	0115
0671	Anthem, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	WI	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1230110		0001156039		FHC Health Systems, Inc.	VA	NIA	Beacon Health Vista Parent, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	10119	41-2128275		0001156039		Freedom Health, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-2907752		0001156039		Golden West Health Plan, Inc.	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.		84-4672692		0001156039		GR Health Solutions LLC	PA	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.	97217	58-1473042		0001156039		Greater Georgia Life Insurance Company	GA	IA	Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12812	30-0326654		0001156039		Group Retiree Health Solutions, Inc.	PA	IA	GR Health Solutions LLC	Ownership	100.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.		66-0695527		0001156039		Grupo Advantage del Oeste, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0927403		0001156039		Grupo Advantage Metro, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		51-0365660		0001156039		Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1237939		0001156039		Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3897701		0001156039		Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.	N	
0671	Anthem, Inc.	96475	43-1616135		0001156039		HealthLink HMO, Inc.	MO	IA	HealthLink, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		43-1364135		0001156039		HealthLink, Inc.	IL	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-4966088		0001156039		HealthLink Insurance Company	IL	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16574	13-3865627		0001156039		HealthPlus HP, LLC	NY	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	0100
0671	Anthem, Inc.	10122	20-0982649		0001156039		HealthSun Health Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-5250294		0001156039		HealthSun Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-3434016		0001156039		HealthSun Physicians Network I, LLC	FL	NIA	HealthSun Physicians Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	78972	86-0257201		0001156039		Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-3953545		0001156039		HEP AP Holdings, Inc.	DE	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3471305		0001156039		Highland Acquisition Holdings, LLC	DE	NIA	Highland Intermediate Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3487249		0001156039		Highland Intermediate Holdings, LLC	DE	NIA	Highland Investor Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	98.000	Anthem, Inc.	N	0107
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	AMERIGROUP Corporation	Ownership	2.000	Anthem, Inc.	N	0107
0671	Anthem, Inc.	95473	84-1017384		0001156039		HMO Colorado, Inc.	CO	IA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95358	37-1216698		0001156039		HMO Missouri, Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		83-2158120		0001156039		IEC Group Holdings, Inc.	ID	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-0497661		0001156039		IEC Group, Inc. d/b/a AmeriBen	ID	NIA	IEC Group Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		75-2619605		0001156039		Imaging Management Holdings, L.L.C.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3062245		0001156039		IngenioRX, Inc.	IN	NIA	DBG Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0884762		0001156039		InHealth Management, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0671	Anthem, Inc.		66-0959260		0001156039		IPA Holdings, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		98-1397080		0001156039		Legato Health Technologies LLP	IN	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	0105
0671	Anthem, Inc.				0001156039		Legato Health Technologies Ireland, Ltd	IRL	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		98-1490582		0001156039		Legato Health Technologies Philippines, Inc.	PHL	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	0106
0671	Anthem, Inc.				0001156039		Legato Health Technologies Puerto Rico, LLC	PR	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3030791		0001156039		Legato Holdings I, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3031178		0001156039		Legato Holdings II, LLC	IN	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		02-0581429		0001156039		Living Complete Technologies, Inc.	MD	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0111
0671	Anthem, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	OPTIONS Health Care, Inc.	Ownership	50.000	Anthem, Inc.	N	0111
0671	Anthem, Inc.	95527	02-0494919		0001156039		Matthew Thornton Health Plan, Inc.	NH	IA	Anthem Health Plans of New Hampshire, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0823267		0001156039		Medical Dental Network Management, LLC	PR	NIA	MMM Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		39-2013971		0001156039		Meridian Resource Company, LLC	WI	NIA	Compcare Health Services Insurance Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12913	20-5862801		0001156039		Missouri Care, Incorporated	MO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	11157	66-0588600		0001156039		MMM Healthcare, LLC	PR	IA	MMM Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0649625		0001156039		MMM Holdings, LLC	PR	NIA	MMM Puerto Rico, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12534	66-0653763		0001156039		MMM Multi Health, LLC	PR	IA	MMM Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0794203		0001156039		MMM Puerto Rico, Inc.	PR	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-4684953		0001156039		Momentum Health Partners, LLC	NC	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.		66-0645750		0001156039		MSO Holdings, LLC	PR	NIA	MMM Puerto Rico, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0719637		0001156039		MSO of Puerto Rico, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		84-1811105		0001156039		myNEXUS Holdings, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-4671638		0001156039		MyNexus, Inc.	DE	NIA	myNEXUS Management, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		84-1801030		0001156039		myNEXUS Management, Inc.	DE	NIA	myNEXUS Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-4603181		0001156039		myNEXUS NPHO of TEXAS	TX	NIA	MyNexus, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		85-0541810		0001156039		myNEXUS NY IPA, LLC	NY	NIA	MyNexus, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		83-0892028		0001156039		Nash Holding Company, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1840597		0001156039		National Government Services, Inc.	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		04-2919509		0001156039		New England Research Institute, Inc.	MA	NIA	Health Core, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-5476630		0001156039		NGS Federal, LLC	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-1847098		0001156039		North Florida Behavioral Health Partners, Inc.	FL	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0113
0671	Anthem, Inc.	12259	20-1336412		0001156039		Optimum Healthcare, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1826967		0001156039		OPTIONS Health Care, Inc.	DE	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4249368		0001156039		Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4386221		0001156039		Park Square I, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4249345		0001156039		Park Square II, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-1991772		0001156039		Pasteur Medical Bird Road, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-2749389		0001156039		Pasteur Medical Center, LLC	DE	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-1366915		0001156039		Pasteur Medical Cutler Bay, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0610128		0001156039		Pasteur Medical Group, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		37-1668303		0001156039		Pasteur Medical Hialeah Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-3464152		0001156039		Pasteur Medical Kendall, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-2810478		0001156039		Pasteur Medical Management, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		33-1217936		0001156039		Pasteur Medical Miami Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-2651017		0001156039		Pasteur Medical North Miami Beach, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		26-0813665		0001156039		Pasteur Medical Partners, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0693134		0001156039		PHM Healthcare Solutions, Inc.	PR	NIA	Physician Group Practices, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0864220		0001156039		PHM IntraHospital Physician Group, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0812014		0001156039		PHM Multidisciplinary Clinic Arecibo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0811976		0001156039		PHM Multidisciplinary Clinic Aguadilla LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Anthem, Inc.	N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0671	Anthem, Inc.		66-0925853		0001156039		PHM Multidisciplinary Clinic Cabo Rojo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0859950		0001156039		PHM MultiDisciplinary Clinic, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0764408		0001156039		PHM Multidisciplinary Clinic Guayama LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0949111		0001156039		PHM Multidisciplinary Clinic Maunabo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0867882		0001156039		PHM MultiSalud, LLC	PR	NIA	Physician Group Practices, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0864171		0001156039		PHM Specialty Network, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0960976		0001156039		Physician Group Practices, LLC	PR	NIA	IPA Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12178	66-0592131		0001156039		PMC Medicare Choice, LLC	PR	IA	MMM Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		56-2396739		0001156039		Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-0851593		0001156039		RightCHOICE Managed Care, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	11011	84-0747736		0001156039		Rocky Mountain Hospital and Medical Service, Inc.	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0473316		0001156039		SellCore, Inc.	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	13726	27-0945036		0001156039		Simply Healthcare Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		55-0712302		0001156039		Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-4071004		0001156039		State Sponsored Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1835818		0001156039		The Anthem Companies, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-5443372		0001156039		The Anthem Companies of California, Inc.	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.				0001156039		TriaDD NY, LLC dba MyCompass	NY	NIA	Alliance Care Management, LLC	Ownership	25.000	Anthem, Inc.	N	0117
0671	Anthem, Inc.		43-1967924		0001156039		TrustSolutions, LLC	WI	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	11810	84-1620480		0001156039		UNICARE Health Plan of West Virginia, Inc.	WV	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3899137		0001156039		UNICARE Illinois Services, Inc.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	80314	52-0913817		0001156039		UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4635507		0001156039		UNICARE National Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		77-0494551		0001156039		UNICARE Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-4238555		0001156039		ValueOptions Federal Services, Inc.	VA	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-8819392		0001156039		ValueOptions of Kansas, Inc.	KS	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15448	46-2053405		0001156039		ValueOptions of New Jersey, Inc.	NJ	IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95799	75-2749263		0001156039		ValueOptions of Texas, Inc.	TX	IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3300542		0001156039		Valus, Inc.	IN	NIA	DBG Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		66-0865037		0001156039		VITA CARE, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0660563		0001156039		WellMax Health Medical Centers, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0660644		0001156039		WellMax Health Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-4405193		0001156039		WellPoint Acquisition, LLC	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4640531		0001156039		WellPoint California Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4657170		0001156039		WellPoint Dental Services, Inc.	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-2874917		0001156039		WellPoint Health Solutions, Inc.	DE	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-3620996		0001156039		WellPoint Holding Corp	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-2736438		0001156039		WellPoint Information Technology Services, Inc.	CA	NIA	Blue Cross of California	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-4595641		0001156039		WellPoint Insurance Services, Inc.	HI	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-2546820		0001156039		WellPoint Military Care Corporation	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15929	47-5569628		0001156039		Wisconsin Collaborative Insurance Company	WI	IA	Crossroads Acquisition Corp.	Ownership	55.000	Anthem, Inc.	N	0110
0671	Anthem, Inc.		47-3025203		0001156039		ZipDrug Inc.	DE	NIA	IngenioRx, Inc.	Ownership	100.000	Anthem, Inc.	N	

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10 and has an NAIC Company Code in column 3. However, it does not file an NAIC statutory statement because it is regulated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	50% owned by unaffiliated investors
0103	30.09% owned by unaffiliated investors

Asterisk	Explanation
0104	25% owned by an unaffiliated investor
0105	Legato Health Technologies LLP is a Limited Liability Partnership formed under the laws of India, and is 99% owned by Legato Holdings I, Inc. an Indiana corporation, and 1% owned by Legato Holdings II, LLC, an Indiana Limited Liability company.
0106	Legato Health Technologies Philippines, Inc. was incorporated under with the Republic of the Philippines, and is 100% owned by Legato Holdings I, Inc. an Indiana corporation.
0107	Highland Investor Holding LLC is a Limited Liability Company formed under the laws of Delaware, and is 98% owned by ATH Holding Company, LLC. an Indiana limited liability company, and Amerigroup Corporation holds the remaining 2% interest..
0108	Applied Pathways, LLC is a Limited Liability Company formed under the laws of Illinois, and is 53.52% owned by American Imaging Management, Inc. an Illinois limited liability company, and 46.48% owned by HEP AP Holdings, Inc., a Delaware corporation.
0109	Anthem Worker's Compensation, LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.
0110	45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate) and 55% by Crossroads Acquisition Corp
0111	Massachusetts Behavioral Health Partnership is a General Partnership formed under the laws of Massachusetts, and is 50% owned by Beacon Health Options, Inc., a Virginia corporation, and 50% owned by OPTIONS Health Care, Inc., a Delaware corporation.
0112	Florida Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by Florida Behavioral Health, Inc. (non-affiliate)
0113	North Florida Behavioral Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by North Florida Behavioral Health Network, Inc. (non-affiliate)
0114	75% owned by an unaffiliated investor
0115	83.4% owned by unaffiliated investors
0116	5% owned by an unaffiliated investor
0117	TriaDD NY , LLC dba MyCompass (NY) is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1.

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]

OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other than temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

		1 Year to Date	2 Prior Year Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points and commitment fees		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,351,651	1,367,337
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of		
7.	Deduct amortization of premium	7,982	15,686
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	1,343,669	1,351,651
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	1,343,669	1,351,651

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	1,347,669	0	0	(4,000)	1,347,669	1,343,669	0	1,351,651
2. NAIC 2 (a)	0				0	0		
3. NAIC 3 (a)	0				0	0		
4. NAIC 4 (a)	0				0	0		
5. NAIC 5 (a)	0				0	0		
6. NAIC 6 (a)	0				0	0		
7. Total Bonds	1,347,669	0	0	(4,000)	1,347,669	1,343,669	0	1,351,651
PREFERRED STOCK								
8. NAIC 1	0				0	0		0
9. NAIC 2	0				0	0		0
10. NAIC 3	0				0	0		0
11. NAIC 4	0				0	0		0
12. NAIC 5	0				0	0		0
13. NAIC 6	0				0	0		0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	1,347,669	0	0	(4,000)	1,347,669	1,343,669	0	1,351,651

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 $ ..... ; NAIC 2 $ ..... ; NAIC 3 $ ..... NAIC 4 $ ..... ; NAIC 5 $ ..... ; NAIC 6 $.....

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	92,686	74,709
2.	Cost of cash equivalents acquired	8,814	17,977
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	1	
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	101,499	92,686
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	101,499	92,686

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

N O N E

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of

N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Bank of America 101 S. Tryon Street, 19th Floor, Charlotte, NC 28255		0.000	0	0	17,582,152	3,563,561	8,587,811	XXX
JP Morgan Chase 4 New York Plaza, 13th Floor, New York, NY 10004		0.000	0	0	1,740,750	1,740,893	1,740,699	XXX
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	19,322,902	5,304,454	10,328,510	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	19,322,902	5,304,454	10,328,510	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999. Total - Cash	XXX	XXX	0	0	19,322,902	5,304,454	10,328,510	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0599999. Total - U.S. Government Bonds						0	0	0
1099999. Total - All Other Government Bonds						0	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds						0	0	0
2499999. Total - U.S. Political Subdivisions Bonds						0	0	0
3199999. Total - U.S. Special Revenues Bonds						0	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	0
4899999. Total - Hybrid Securities						0	0	0
5599999. Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0
6099999. Subtotal - SVO Identified Funds						0	0	0
6599999. Subtotal - Unaffiliated Bank Loans						0	0	0
7699999. Total - Issuer Obligations						0	0	0
7799999. Total - Residential Mortgage-Backed Securities						0	0	0
7899999. Total - Commercial Mortgage-Backed Securities						0	0	0
7999999. Total - Other Loan-Backed and Structured Securities						0	0	0
8099999. Total - SVO Identified Funds						0	0	0
8199999. Total - Affiliated Bank Loans						0	0	0
8299999. Total - Unaffiliated Bank Loans						0	0	0
8399999. Total Bonds						0	0	0
31846V-56-7	FIRST AMERICAN TREASURY OBLIG Z TAXABLE GOVT AGENCY MMKT	SD	06/02/2021	0.000		92,688	0	14
31846V-56-7	FIRST AMERICAN TREASURY OBLIG Z TAXABLE GOVT AGENCY MMKT		06/02/2021	0.000		8,811	0	1
8699999. Subtotal - All Other Money Market Mutual Funds						101,499	0	15
9999999 - Total Cash Equivalents						101,499	0	15