



HEALTH QUARTERLY STATEMENT
 AS OF JUNE 30, 2024
 OF THE CONDITION AND AFFAIRS OF THE
UnitedHealthcare of the Midlands, Inc.

NAIC Group Code 0707 0707 NAIC Company Code 95591 Employer's ID Number 47-0676824
(Current) (Prior)

Organized under the Laws of Nebraska, State of Domicile or Port of Entry NE

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 04/16/1984 Commenced Business 10/01/1984

Statutory Home Office 2717 North 118th Street; Suite 300 Omaha, NE, US 68164-9672
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2717 North 118th Street; Suite 300
(Street and Number)
Omaha, NE, US 68164-9672 402-445-5000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records 9800 Health Care Lane MN006-W500
(Street and Number)
Minnetonka, MN, US 55343 952-931-4352
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.uhc.com

Statutory Statement Contact Andrew J. Heitzman 952-931-4352
(Name) (Area Code) (Telephone Number)
andrew_heitzman@uhc.com 952-931-4651
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer, President, and Chair Bror Olof Hultgren # Treasurer Peter Marshall Gill
 Secretary Alexander McCarthy Miskella Chief Financial Officer and Vice President James Stevenson Elliston

OTHER

Robert Andersen Broomfield, President, Commercial Nyle Brent Cottingham, Vice President Heather Anastasia Lang, Assistant Secretary
Meeta Pratulchandra Shah M.D. #, Medical Director

DIRECTORS OR TRUSTEES

Robert Andersen Broomfield Bror Olof Hultgren # Gloria Margaret Sargent

State of Minnesota State of _____ State of _____
 County of Hennepin County of _____ County of _____

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions there from 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.

Nyle Brent Cottingham Alexander McCarthy Miskella Peter Marshall Gill
 Vice President Secretary Treasury

Subscribed and sworn to before me this 23 day of July, 2024
Jana L. Kuhlbeck _____
 _____ day of _____



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



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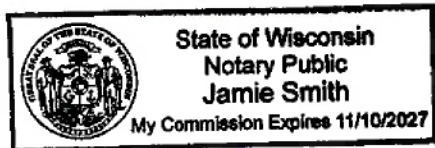
Robert Andersen Broomfield Bror Olof Hultgren # Gloria Margaret Sargent

State of _____ State of Wisconsin State of _____
 County of _____ County of Brow County of _____

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Nyle Brent Cottingham Alexander McCarthy Miskella Peter Marshall Gill
 Vice President Secretary Treasury

Subscribed and sworn to before me this _____ day of _____ Subscribed and sworn to before me this July 4 2024 day of July
June Smith



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 b. If no,
 1. State the amendment number.....
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Peter Marshall Gill (Signature)

Peter Marshall Gill
Treasury

Nyle Brent Cottingham
Vice President

Alexander McCarthy Miskella
Secretary

Subscribed and sworn to before me this day of

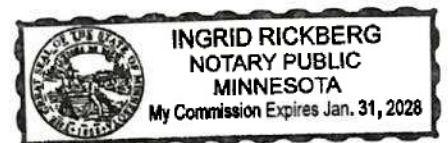
Subscribed and sworn to before me this day of

Subscribed and sworn to before me this 30th day of July 2024

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.



STATEMENT AS OF JUNE 30, 2024 OF THE UnitedHealthcare of the Midlands, Inc.

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	921,056,165	0	921,056,165	910,194,073
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$371,122), cash equivalents (\$137,773,755) and short-term investments (\$ 10,836,780)	148,981,657	0	148,981,657	243,972,613
6. Contract loans (including \$0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	1,293,051	0	1,293,051	1,793,269
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	1,071,330,873	0	1,071,330,873	1,155,959,955
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	7,491,293	0	7,491,293	7,124,595
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	25,160,718	755,839	24,404,879	25,137,279
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$8,047,980) and contracts subject to redetermination (\$261,776,081)	269,824,061	0	269,824,061	274,451,337
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	20,717,976	455,404	20,262,572	45,346,208
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	9,012,656
18.2 Net deferred tax asset	9,699,798	0	9,699,798	6,856,946
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	23,752,292
24. Health care (\$173,763,352) and other amounts receivable	209,221,371	35,458,019	173,763,352	186,353,369
25. Aggregate write-ins for other than invested assets	519	519	0	555,394
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	1,613,446,609	36,669,781	1,576,776,828	1,734,550,031
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	1,613,446,609	36,669,781	1,576,776,828	1,734,550,031
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	0	0	0	555,394
2502. Miscellaneous receivables	485	485	0	0
2503. Prepaid commissions	34	34	0	0
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)	519	519	0	555,394

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$(148,185) reinsurance ceded)	546,498,394	0	546,498,394	561,154,893
2. Accrued medical incentive pool and bonus amounts	59,767,206	0	59,767,206	75,681,256
3. Unpaid claims adjustment expenses	4,184,725	0	4,184,725	4,326,038
4. Aggregate health policy reserves, including the liability of \$21,457,153 for medical loss ratio rebate per the Public Health Service Act	81,308,140	0	81,308,140	192,918,683
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	1,399,456	0	1,399,456	1,523,366
8. Premiums received in advance	12,710,740	0	12,710,740	12,425,401
9. General expenses due or accrued	8,005,542	0	8,005,542	15,081,464
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized gains (losses))	10,301,391	0	10,301,391	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	2,134,464	0	2,134,464	2,121,459
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated	388,085	0	388,085	97,127
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	32,987,209	0	32,987,209	0
16. Derivatives	0	0	0	0
17. Payable for securities	1,081,575	0	1,081,575	8,316,929
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	106,188,084	0	106,188,084	107,335,006
23. Aggregate write-ins for other liabilities (including \$793 current)	793	0	793	2,422
24. Total liabilities (Lines 1 to 23)	866,955,804	0	866,955,804	980,984,044
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	100,000	100,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	61,100,000	61,100,000
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	648,621,024	692,365,987
32. Less treasury stock, at cost:				
32.10 shares common (value included in Line 26 \$0)	XXX	XXX	0	0
32.20 shares preferred (value included in Line 27 \$0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	709,821,024	753,565,987
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	1,576,776,828	1,734,550,031
DETAILS OF WRITE-INS				
2301. Unclaimed property	793	0	793	2,422
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)	793	0	793	2,422
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	2,882,236	3,027,388	6,062,233
2. Net premium income (including \$ 0 non-health premium income)	XXX	3,143,299,842	3,257,663,846	6,542,016,519
3. Change in unearned premium reserves and reserve for rate credits	XXX	117,797,538	39,088,159	(27,486,012)
4. Fee-for-service (net of \$ 0 medical expenses)	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
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	3,261,097,380	3,296,752,005	6,514,530,507
Hospital and Medical:				
9. Hospital/medical benefits	0	2,361,676,239	2,361,069,833	4,751,307,884
10. Other professional services	0	66,475,863	67,653,396	126,481,511
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	0	0	0	0
13. Prescription drugs	0	332,882,742	282,125,075	457,401,263
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	29,245,348	57,885,575	113,757,702
16. Subtotal (Lines 9 to 15)	0	2,790,280,192	2,768,733,879	5,448,948,360
Less:				
17. Net reinsurance recoveries	0	(148,185)	0	0
18. Total hospital and medical (Lines 16 minus 17)	0	2,790,428,377	2,768,733,879	5,448,948,360
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$ 66,209,118 cost containment expenses	0	88,341,679	98,784,025	191,734,614
21. General administrative expenses	0	200,751,581	215,585,442	436,875,506
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only)	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22)	0	3,079,521,637	3,083,103,346	6,077,558,480
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	181,575,743	213,648,659	436,972,027
25. Net investment income earned	0	28,026,053	24,803,576	56,288,631
26. Net realized capital gains (losses) less capital gains tax of \$ 274,538	0	1,032,787	938,539	3,071,418
27. Net investment gains (losses) (Lines 25 plus 26)	0	29,058,840	25,742,115	59,360,049
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 130,653) (amount charged off \$ (553,979))]	0	(423,326)	(368,352)	(821,345)
29. Aggregate write-ins for other income or expenses	0	(11,689)	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	210,199,568	239,022,422	495,510,731
31. Federal and foreign income taxes incurred	XXX	42,980,509	49,829,993	103,332,891
32. Net income (loss) (Lines 30 minus 31)	XXX	167,219,059	189,192,429	392,177,840
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. Fines And Penalties	0	(11,689)	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	(11,689)	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.....	753,565,987	570,485,524	570,485,524
34. Net income or (loss) from Line 32	167,219,059	189,192,429	392,177,840
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	2,842,852	252,568	1,820,497
39. Change in nonadmitted assets	(13,806,874)	(419,786)	(5,917,874)
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.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	(200,000,000)	(125,000,000)	(205,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	(43,744,963)	64,025,211	183,080,463
49. Capital and surplus end of reporting period (Line 33 plus 48)	709,821,024	634,510,735	753,565,987
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

STATEMENT AS OF JUNE 30, 2024 OF THE UnitedHealthcare of the Midlands, Inc.

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	3,155,066,542	3,770,845,113	6,517,222,844
2. Net investment income	29,054,785	25,100,947	57,217,379
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	3,184,121,327	3,795,946,060	6,574,440,223
5. Benefit and loss related payments	2,821,554,512	2,761,455,555	5,442,918,277
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	272,496,364	199,978,912	639,122,843
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	23,941,000	25,087,000	99,663,821
10. Total (Lines 5 through 9)	3,117,991,876	2,986,521,467	6,181,704,941
11. Net cash from operations (Line 4 minus Line 10)	66,129,451	809,424,593	392,735,282
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	144,173,480	105,083,049	208,966,529
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	2,284	2,284
12.7 Miscellaneous proceeds	0	0	5,966,565
12.8 Total investment proceeds (Lines 12.1 to 12.7)	144,173,480	105,085,333	214,935,378
13. Cost of investments acquired (long-term only):			
13.1 Bonds	154,784,921	256,726,672	426,170,185
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	2,034,861	2,034,861
13.6 Miscellaneous applications	7,235,354	2,350,364	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	162,020,275	261,111,897	428,205,046
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)	(17,846,795)	(156,026,564)	(213,269,668)
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	0	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	200,000,000	125,000,000	205,000,000
16.6 Other cash provided (applied)	56,726,388	29,561,256	(27,472,225)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(143,273,612)	(95,438,744)	(232,472,225)
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)	(94,990,956)	557,959,285	(53,006,611)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	243,972,613	296,979,224	296,979,224
19.2 End of period (Line 18 plus Line 19.1)	148,981,657	854,938,509	243,972,613

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

STATEMENT AS OF JUNE 30, 2024 OF THE UnitedHealthcare of the Midlands, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year	499,661	12,960	610	0	0	0	0	379,759	106,332	0	0	0	0	0
2. First Quarter	479,043	13,133	575	0	0	0	0	358,382	106,953	0	0	0	0	0
3. Second Quarter	470,467	12,738	568	0	0	0	0	355,499	101,662	0	0	0	0	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	2,882,236	80,521	3,461	0	0	0	0	2,149,257	648,997	0	0	0	0	0
Total Member Ambulatory Encounters for Period:														
7. Physician	4,137,521	38,560	2,443	0	0	0	0	3,202,595	893,923	0	0	0	0	0
8. Non-Physician	1,853,961	13,862	201	0	0	0	0	1,402,177	437,721	0	0	0	0	0
9. Total	5,991,482	52,422	2,644	0	0	0	0	4,604,772	1,331,644	0	0	0	0	0
10. Hospital Patient Days Incurred	222,946	328	42	0	0	0	0	178,499	44,077	0	0	0	0	0
11. Number of Inpatient Admissions	39,690	69	11	0	0	0	0	31,463	8,147	0	0	0	0	0
12. Health Premiums Written (a)	3,156,460,420	18,219,756	2,120,210	0	0	0	0	2,789,303,951	346,816,503	0	0	0	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Eamed.....	3,274,257,957	22,497,337	1,902,939	0	0	0	0	2,802,280,068	447,577,613	0	0	0	0	0
16. Property/Casualty Premiums Eamed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services.....	2,821,554,512	17,217,495	1,459,478	0	0	0	0	2,386,873,887	416,003,652	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	2,790,280,192	17,533,217	1,480,939	0	0	0	0	2,358,354,979	412,911,057	0	0	0	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,789,303,951

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 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	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		
1. Comprehensive (hospital and medical) individual	1,109,091	16,108,404	80,528	1,838,239	1,189,619	1,460,359
2. Comprehensive (hospital and medical) group	76,280	1,382,098	24,139	421,399	100,419	435,893
3. Medicare Supplement	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0
5. Dental only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	253,418,102	2,092,892,986	26,310,035	443,389,047	279,728,137	487,078,307
8. Title XIX - Medicaid	52,119,178	359,288,975	16,101,856	59,732,608	68,221,034	73,703,701
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	306,722,651	2,469,672,463	42,516,558	505,381,293	349,239,209	562,678,260
14. Health care receivables (a)	22,303,841	161,499,597	0	25,113,510	22,303,841	208,485,273
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	36,919,564	8,239,834	31,983,623	27,783,582	68,903,187	75,681,256
17. Totals (Lines 13 - 14 + 15 + 16)	321,338,374	2,316,412,700	74,500,181	508,051,365	395,838,555	429,874,243

(a) Excludes \$ 304,422 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operation

UnitedHealthcare of the Midlands, Inc. (the "Company") is a wholly owned subsidiary of UnitedHealthcare, Inc. with UnitedHealth Group Incorporated as its ultimate parent. The Company is licensed as a health maintenance organization in the state of Nebraska by the Nebraska Department of Insurance and is also licensed in seven additional states. The Company offers comprehensive commercial products, Medicare plans, and has a contract in the state of Nebraska to offer Medicaid plans.

A. Accounting Practices

The statutory basis financial statements (herein referred to as "financial statements") of the Company are presented on the basis of accounting practices prescribed or permitted by the Nebraska Department of Insurance.

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

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

	SSAP #	F/S Page #	F/S Line #	June 30, 2024	December 31, 2023
Net Income (Loss)					
(1) Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 167,219,059	\$ 392,177,840
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	\$ 167,219,059	\$ 392,177,840
Capital and Surplus					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 709,821,024	\$ 753,565,987
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(7) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	\$ 709,821,024	\$ 753,565,987

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

No significant change.

C. Accounting Policy

(1) No significant change.

(2) The Company does not have any mandatory convertible securities or Securities Valuation Office of the NAIC identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio.

(3-5) No significant change.

(6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets.

(7-13) No significant change.

D. Going Concern

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

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

No significant change.

3. BUSINESS COMBINATIONS AND GOODWILL

A-E. No significant change.

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

(1-4) No significant change.

B. Change in Plan of Sale of Discontinued Operations — Not applicable.**C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.****D. Equity Interest Retained in the Discontinued Operation after Disposal — Not applicable.****5. INVESTMENTS****A. Mortgage Loans, including Mezzanine Real Estate Loans — Not applicable.****B. Debt Restructuring — Not applicable.****C. Reverse Mortgages — Not applicable.****D. Loan-Backed Securities**

- (1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.
- (2) The Company did not recognize any other-than-temporary impairments ("OTTIs") on loan-backed securities as of June 30, 2024.
- (3) The Company did not have any loan-backed securities with OTTIs to report by CUSIP as of June 30, 2024.
- (4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of June 30, 2024 and December 31, 2023:

	June 30, 2024
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 1,655,949
2. 12 months or longer	14,497,989
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	120,521,167
2. 12 months or longer	146,362,683
	December 31, 2023
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 313,638
2. 12 months or longer	11,748,623
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	36,472,201
2. 12 months or longer	140,836,803

- (5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principal and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows, the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of June 30, 2024, the unrealized loss on any security that the Company classified as available for sale was not material to the Company's investment portfolio. Any other securities in an unrealized loss position as of June 30, 2024, the Company considers to be temporary.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions — Not applicable.**F. Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.****G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.****H. Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.**

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.

J. Real Estate — Not applicable.

K. Low-Income Housing Tax Credits —

(1-7) Low-income housing tax credit investments of \$1,293,051 and \$1,793,269 as of June 30, 2024 and December 31, 2023, respectively, are included in other invested assets in the financial statements. The Company also has a corresponding commitment for additional investment of \$10,644,290 as of June 30, 2024 and December 31, 2023 (see Note 14). The number of remaining years of unexpired tax credits is 10 years and the required holding period for the low-income housing credits investments is 14 years. The low-income housing tax credits investments are not currently subject to any regulatory reviews. The Company did not recognize any impairment losses, write-downs, or reclassifications during the six months ended June 30, 2024 and the year ended December 31, 2023.

L. Restricted Assets — No significant change.

M. Working Capital Finance Investments — Not applicable.

N. Offsetting and Netting of Assets and Liabilities

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

O. 5GI Securities

The Company does not have any investments with an NAIC designation of 5GI as of June 30, 2024 and December 31, 2023.

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees — No significant change.

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

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is \$45,281,946 and \$148,628,526 as of June 30, 2024 and December 31, 2023, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of June 30, 2024:

Asset Type	Percent Share
(1) Cash	10%
(2) Cash Equivalents	31%
(3) Short-Term Investments	59%
(4) Total	100%

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

A-B. No significant change.

7. INVESTMENT INCOME

A-E. No significant change.

8. DERIVATIVE INSTRUMENTS

A-B. Not applicable.

9. INCOME TAXES

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

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

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

A-I. No significant change.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

A-O. Material Related Party Transactions

No significant change.

As of June 30, 2024, the Company paid dividend of \$200,000,000 to its parent (see Note 13).

11. DEBT

A-B. The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2024 and 2023.

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

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

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

A-C. No significant change.

D. The Company paid ordinary cash dividend of \$200,000,000 on June 17, 2024, to the sole shareholder UnitedHealthcare, Inc., which complied with the provisions set forth in the statutes of Nebraska required no approval. The dividends were recorded as a reduction to unassigned surplus in the financial statements.

E-M. No significant change.

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS**A. Contingent Commitments**

The Company has given National Affordable Housing Trust Timbercreek Apartments low-income housing tax credit a commitment for additional investment in the form of an equity contribution that will be required as long as the assets are performing based on the agreed upon contractual terms. The Company has the ability to sell its interest in the low-income housing tax credit investments prior to the additional contribution being required. The current amount of the commitment for additional investment is not to exceed \$10,644,290 in the aggregate as of June 30, 2024.

B-F. No significant change.

15. LEASES

A-B. No significant change.

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

(1-4) No significant change.

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

A-C. The Company did not participate in any transfers of receivables, financial assets, or wash sales.

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

A-B. No significant change.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Medicare Part D program is a partially insured plan. The Company recorded a payable of \$61,259,999 and \$52,624,138 as of June 30, 2024 and December 31, 2023, respectively, for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a receivable of \$20,262,572 and \$40,367,477 and also a payable of \$50,449,449 and \$54,710,868 as of June 30, 2024 and December 31, 2023, respectively, for the Medicare Part D coverage gap discount program. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively in the financial statements.

The Inflation Reduction Act was signed into law in 2022 and created a one-year subsidy for 2023 labeled as the Inflation Reduction Act Subsidy Amounts ("IRASA"). The Company recorded a receivable of \$5,521,364 and \$4,964,945 as of June 30, 2024 and December 31, 2023, respectively, for the temporary retrospective subsidy be paid to Part D plans for the reduction in cost sharing and elimination of the deductible for ACIP-recommended vaccines and covered insulin products during the 2023 plan year related to IRASA. The IRASA was only available for 2023

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

No significant change.

20. FAIR VALUE MEASUREMENTS

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

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

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

- Quoted prices for similar assets in active markets;

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

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

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

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

A. Fair Value

(1) Fair Value Measurements at Reporting Date

The following tables present information about the Company's financial assets that are measured and reported at fair value at June 30, 2024 and December 31, 2023, in the financial statements according to the valuation techniques the Company used to determine their fair values:

STATEMENT AS OF JUNE 30, 2024 OF THE UnitedHealthcare of the Midlands, Inc.

Description for Each Class of Asset or Liability	June 30, 2024			Net Asset Value (NAV)	Total
	(Level 1)	(Level 2)	(Level 3)		
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ —	\$ —	\$ —	\$ —	\$ —
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total perpetual preferred stocks	—	—	—	—	—
Bonds:					
U.S. governments	—	—	—	—	—
Industrial and misc	—	—	—	—	—
Hybrid securities	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total bonds	—	—	—	—	—
Common stock:					
Industrial and misc	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total common stock	—	—	—	—	—
Derivative assets:					
Interest rate contracts	—	—	—	—	—
Foreign exchange contracts	—	—	—	—	—
Credit contracts	—	—	—	—	—
Commodity futures contracts	—	—	—	—	—
Commodity forward contracts	—	—	—	—	—
Total derivatives	—	—	—	—	—
Money-market funds	88,819,999	—	—	—	88,819,999
Qualified cash pool	45,281,946	—	—	—	45,281,946
Separate account assets	—	—	—	—	—
Total assets at fair value/NAV	<u>\$ 134,101,945</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 134,101,945</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ —	\$ —	\$ —	\$ —	\$ —
Total liabilities at fair value	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>

Description for Each Class of Asset or Liability	December 31, 2023			Net Asset Value (NAV)	Total
	(Level 1)	(Level 2)	(Level 3)		
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ —	\$ —	\$ —	\$ —	\$ —
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total perpetual preferred stocks	—	—	—	—	—
Bonds:					
U.S. governments	—	—	—	—	—
Industrial and misc	—	—	—	—	—
Hybrid securities	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total bonds	—	—	—	—	—
Common stock:					
Industrial and misc	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total common stock	—	—	—	—	—
Derivative assets:					
Interest rate contracts	—	—	—	—	—
Foreign exchange contracts	—	—	—	—	—
Credit contracts	—	—	—	—	—
Commodity futures contracts	—	—	—	—	—
Commodity forward contracts	—	—	—	—	—
Total derivatives	—	—	—	—	—
Money-market funds	87,090,717	—	—	—	87,090,717
Qualified cash pool	148,628,526	—	—	—	148,628,526
Separate account assets	—	—	—	—	—
Total assets at fair value/NAV	<u>\$ 235,719,243</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 235,719,243</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ —	\$ —	\$ —	\$ —	—
Total liabilities at fair value	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value for the six months ended June 30, 2024 and the year ended December 31, 2023.

The Company considers its investments in low-income housing tax credit investments as a Level 3 investment even though no market valuation was required as of June 30, 2024 and December 31, 2023. As a result, these investments are excluded from being presented as a Level 3 security in the fair value hierarchy tables above. As there is no readily available market, these securities are recorded at book/adjusted carrying value and considered held to maturity as they will not be sold. As a result, these investments are recorded and reported at book value of \$1,293,051 and \$1,793,269 as of June 30, 2024 and December 31, 2023.

- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2, or 3 of any financial assets or liabilities during the six months ended June 30, 2024 and the year ended December 31, 2023.
- (4) The framework the Company has established for determining the fair value of the investment holdings is outlined above.

Low-Income Housing Tax Credits Investments — The Company does consider its investments in low-income housing tax credit investments as a Level 3 investment even though no market valuation adjustment was required as of June 30, 2024 and December 31, 2023. As a result, these investments are excluded from being presented as a level 3 security in the financial hierarchy tables above. As there is no readily available market, these securities are recorded and reported at book/adjusted carrying value and considered held to maturity as they will not be sold. Should any contractual breakage occur that jeopardizes the ability to receive the tax credits associated with these securities, impairments will be recognized. As of June 30, 2024, all of these investments are performing in accordance with their original contract terms.

- (5) The Company has no derivative assets and liabilities to disclose.

B. Fair Value Combination — Not applicable.

C. Aggregate Fair Value Hierarchy

The aggregate fair value by hierarchy of all financial instruments as of June 30, 2024 and December 31, 2023, is presented in the table below:

Type of Financial Instrument	June 30, 2024						
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	\$ 258,383,704	\$ 274,139,787	\$ 81,836,700	\$ 176,547,004	\$ —	\$ —	\$ —
State and agency municipal securities	97,703,412	100,970,412	—	97,703,412	—	—	—
City and county municipal securities	80,324,184	83,739,437	—	80,324,184	—	—	—
Corporate debt securities	446,720,266	473,043,309	—	446,720,266	—	—	—
Cash equivalents	137,773,755	137,773,755	137,773,755	—	—	—	—
Other invested assets	1,293,051	1,293,051	—	—	1,293,051	—	—
Total bonds, short-term investments, cash equivalents, and other Invested assets	<u>\$ 1,022,198,372</u>	<u>\$ 1,070,959,751</u>	<u>\$ 219,610,455</u>	<u>\$ 801,294,866</u>	<u>\$ 1,293,051</u>	<u>\$ —</u>	<u>\$ —</u>

Type of Financial Instrument	December 31, 2022						
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	\$ 255,976,736	\$ 265,941,319	\$ 70,871,718	\$ 185,105,018	\$ —	\$ —	\$ —
State and agency municipal securities	89,135,691	90,695,262	—	89,135,691	—	—	—
City and county municipal securities	99,684,733	101,228,403	—	99,684,733	—	—	—
Corporate debt securities	429,326,031	452,329,089	—	429,326,031	—	—	—
Cash equivalents	243,607,779	243,607,779	243,607,779	—	—	—	—
Other invested assets	1,793,269	1,793,269	—	—	1,793,269	—	—
Total bonds, cash equivalents, and other Invested assets	<u>\$ 1,119,524,239</u>	<u>\$ 1,155,595,121</u>	<u>\$ 314,479,497</u>	<u>\$ 803,251,473</u>	<u>\$ 1,793,269</u>	<u>\$ —</u>	<u>\$ —</u>

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

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

21. OTHER ITEMS

A-I. No significant change.

22. EVENTS SUBSEQUENT

Subsequent events have been evaluated through August 14, 2023, which is the date these financial statements were available for issuance.

TYPE I — Recognized Subsequent Events

Any material Type I events subsequent to June 30, 2024, have been recognized in the financial statements and corresponding disclosures.

TYPE II — Non-Recognized Subsequent Events

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

23. REINSURANCE

A-E. No significant change.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

A-B. No significant change.

C. Pursuant to the Affordable Care Act, the Company's commercial and Medicare business is subject to retrospectively rated features based on the actual medical loss ratios ("MLR") experienced on the commercial and Medicare lines of business and redetermination features for premium adjustments for changes to each member's health scores based on guidelines determined by the Affordable Care Act. The total amount of direct premiums written for the commercial and Medicare lines of business for which a portion is subject to the retrospectively rated and redetermination features was \$20,339,965 and \$38,189,190 for Commercial, and \$2,789,303,952 and \$5,677,554,451 for Medicare, representing <1% and <1% for Commercial, and 88% and 86% for Medicare of total direct premiums written as of June 30, 2024 and December 31, 2023, respectively.

The Company has Medicare Part D risk-corridor amounts from Centers for Medicare and Medicaid Services which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums related to certain Part D premiums based on guidelines determined by Centers for Medicare and Medicaid Services. The formula is tiered and based on the bid MLR. The amount of Medicare Part D direct premiums written subject to the retrospectively rated feature was \$156,920,920 and \$182,288,152, representing 5% and 3% of total direct premiums written as of June 30, 2024 and December 31, 2023, respectively.

Effective January 1, 2019, the Company's Nebraska Medicaid line of business is subject to retrospectively rated features based on the actual high cost drug experience for the Company and all other Nebraska managed care organizations ("MCOs"). The program was designed to eliminate any disproportionate share of high cost drug experience for any of the MCOs. The total amount of direct premiums written from the Medicaid contract for which a portion is subject to the retrospectively rated feature was \$330,482,983 and \$802,989,313, which represents 10% and 12% of total direct written premiums as of June 30, 2024 and December 31, 2023, respectively.

- C.** The CMS has released the final Medicaid Managed Care Rule which is subject to each State's administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum loss ratio requirement. Pursuant to the regulations, premiums associated with the Company's Medicaid line of business is subject to retrospectively rated features based on the actual MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. In addition, the Company's Medicaid contract, with the State of Nebraska, is subject to redetermination features for which a portion of direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the direct premiums written can be eligible for a performance guarantee payment based on various quality measures. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$330,482,963 and \$802,989,313, representing 11% and 12% of total direct premiums written as of June 30, 2024 and December 31, 2023, respectively.
- D.** The Company is required to maintain a specific MLRs on the comprehensive commercial and Medicare line of business.

The following table discloses the MLR rebate liability for the comprehensive commercial and Medicare lines of business which is included in aggregate health policy reserves in the financial statements for the six months ended June 30, 2024 and the year ended December 31, 2023:

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior reporting year					
(1) Medical loss ratio rebates incurred	\$ —	\$ —	\$ 62,974	\$ 11,745,849	\$ 11,808,823
(2) Medical loss ratio rebates paid	—	—	—	—	—
(3) Medical loss rebates unpaid	—	—	62,974	19,210,680	19,273,654
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	19,273,654
Current reporting year-to-date					
(7) Medical loss ratio rebates incurred	—	—	217,271	1,966,228	2,183,499
(8) Medical loss ratio rebates paid	—	—	—	—	—
(9) Medical loss rebates unpaid	—	—	280,245	21,176,908	21,457,153
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	21,457,153

Pursuant to the Medicaid Managed Care Rule, based on the State of Nebraska's election and state contractual minimum loss ratio requirements, the Company is required to maintain specific MLRs on its Heritage Health plan and Heritage Health populations. The Company has recorded \$54,456,659 and \$161,038,114 in estimated Medicaid Managed Care Rule and state MLRs on its Heritage Health plan and Heritage Health populations as of June 30, 2024 and December 31, 2023, respectively which is included in aggregate health policy reserves in the financial statements.

E. Risk-Sharing Provisions of the Affordable Care Act

- (1) The Company has accident and health insurance premiums in 2024 and 2023 subject to the Affordable Care Act risk-sharing provisions for the permanent risk adjustment program.

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

(2) The following table presents the current year impact for the permanent risk adjustment program regarding the risk-sharing provisions of the Affordable Care Act on assets, liabilities, and operations.

a. Permanent ACA Risk Adjustment Program	June 30, 2024
<u>Assets</u>	
1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)	\$ 6,441
<u>Liabilities</u>	
2. Risk adjustment user fees payable for ACA Risk Adjustment	523
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)	95,901
<u>Operations (Revenue & Expense)</u>	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	(112,321)
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	169

(3) The following table is a roll forward of the prior year Affordable Care Act risk-sharing provisions for the permanent risk adjustment program for asset and liability balances, along with reasons for adjustments to prior year balances:

	Accrued During the Prior Year on Business Written before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	1	2	3	4	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustment receivable (including high risk pool payments)	\$ 28,849	\$ —	\$ 20	\$ —	\$ 28,829	\$ —	\$ (25,762)	\$ —	A	\$ 3,067	\$ —
2. Premium adjustment (payable) (including high risk pool premium)	—	(5,968)	—	—	—	(5,968)	—	(63,702)	B	—	(69,670)
3. Total ACA Permanent Risk Adjustment Program	28,849	(5,968)	20	—	28,829	(5,968)	(25,762)	(63,702)		3,067	(69,670)

Explanation of Adjustments

The risk adjustment receivable as of December 31, 2023 utilized paid claims through October 31, 2023. As of the Reporting Date, the risk adjustment receivable related to prior periods was adjusted based on CMS' Summary Report on Individual and Small Group Market Risk Transfers for the 2023 Benefit Year. The risk adjustment receivable was further adjusted based on CMS' Summary Report of 2022 Benefit Year Risk Adjustment Data Validation (HHS-RADV) Adjustments to Risk Adjustment State Transfers.

The risk adjustment payable as of December 31, 2023 utilized paid claims through October 31, 2023. As of the Reporting Date, the risk adjustment payable related to prior periods was adjusted based on CMS' Summary Report on Individual and Small Group Market Risk Transfers for the 2023 Benefit Year. The risk adjustment payable was further adjusted based on CMS' Summary Report of 2022 Benefit Year Risk Adjustment Data Validation (HHS-RADV) Adjustments to Risk Adjustment State Transfers.

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

- A. Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the financial statements. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves and health care and other amounts receivable (excluding provider loans and advances not yet expensed) at June 30, 2024 and December 31, 2023:

	June 30, 2024		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ —	\$ (638,359,515)	\$ (638,359,515)
Paid claims—net of health care receivables*	2,477,912,297	343,642,215	2,821,554,512
End of year claim reserve	<u>533,164,876</u>	<u>74,500,180</u>	<u>607,665,056</u>
Incurred claims excluding the change in health care receivables*	3,011,077,173	(220,217,120)	2,790,860,053
Beginning of year health care receivables*	—	208,485,273	208,485,273
End of year health care receivables*	<u>(186,613,108)</u>	<u>(22,303,841)</u>	<u>(208,916,949)</u>
Total incurred claims	<u>\$ 2,824,464,065</u>	<u>\$ (34,035,688)</u>	<u>\$ 2,790,428,377</u>

*Health care receivables excludes provider loans and advances not yet expensed of \$304,422 and \$1,980 for 2024 and 2023, respectively.

	December 31, 2023		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ —	\$ (587,912,777)	\$ (587,912,777)
Paid claims — net of health care receivables*	5,051,211,795	391,706,482	5,442,918,277
End of year claim reserve	<u>619,062,871</u>	<u>19,296,644</u>	<u>638,359,515</u>
Incurred claims excluding the change in health care receivables*	5,670,274,666	(176,909,651)	5,493,365,015
Beginning of year health care receivables*	—	164,068,618	164,068,618
End of year health care receivables*	<u>(202,642,442)</u>	<u>(5,842,831)</u>	<u>(208,485,273)</u>
Total incurred claims	<u>\$ 5,467,632,224</u>	<u>\$ (18,683,864)</u>	<u>\$ 5,448,948,360</u>

*Health care receivables excludes provider loans and advances not yet expensed of \$1,980 and \$0 for 2023 and 2022, respectively.

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, and aggregate health claim reserves, net of health care and other amounts receivable (excluding provider loans and advances not yet expensed) as of December 31, 2023, was \$429,874,242. As of June 30, 2024, \$343,642,215 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care and other amounts receivable (excluding provider loans and advances not yet expensed) are now \$52,196,339, as a result of re-estimation of unpaid claims. Therefore, there has been \$34,035,688 favorable prior year development since December 31, 2023, to June 30, 2024. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of \$14,959,442, favorable development of \$9,616,695 in retroactivity for inpatient, outpatient, physician, and pharmacy claims and favorable development of \$5,263,331 for risk share.

At December 31, 2023, the Company recorded \$18,683,864 of favorable development. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of \$18,089,389 offset by unfavorable development of \$690,744 in retroactivity for inpatient, outpatient, physician, and pharmacy claims. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for MLR rebates and retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the financial statements.

The Company incurred claims adjustment expenses of \$88,341,679 and \$191,734,614 for the six months ended June 30, 2024 and the year ended December 31, 2023, respectively. These costs are included in the management service fees paid by the Company to United HealthCare Services, Inc. as a part of the management agreement. The following table discloses paid claims adjustment expenses, incurred claims adjustment expenses, and the balance in unpaid claims adjustment expenses reserve for the six months ended June 30, 2024 and the year ended December 31, 2023:

	June 30, 2024	December 31, 2023
Total claims adjustment expenses	\$ 88,341,679	\$ 191,734,614
Less: current year unpaid claims adjustment expenses	(4,184,725)	(4,326,038)
Add: prior year unpaid claims adjustment expenses	4,326,038	4,126,162
	<u>88,482,992</u>	<u>191,534,738</u>
Total claims adjustment expenses paid	<u>\$ 88,482,992</u>	<u>\$ 191,534,738</u>

B. The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid claim adjustment expenses in 2024.

26. INTERCOMPANY POOLING ARRANGEMENTS

A-G. No significant change.

27. STRUCTURED SETTLEMENTS

A-B. No significant change.

28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

A-B. No significant change.

29. PARTICIPATING POLICIES — Not applicable.

30. PREMIUM DEFICIENCY RESERVES

The Company has not recorded any premium deficiency reserves as of June 30, 2024 and December 31, 2023. The analysis of premium deficiency reserves was completed as of June 30, 2024 and December 31, 2023. The Company did consider anticipated investment income when calculating the premium deficiency reserve.

The following table summarizes the Company's premium deficiency reserves as of June 30, 2024 and December 31, 2023:

	June 30, 2024
1. Liability carried for premium deficiency reserves	\$ —
2. Date of the most recent evaluation of this liability	06/30/24
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	December 31, 2023
1. Liability carried for premium deficiency reserves	\$ —
2. Date of the most recent evaluation of this liability	12/31/23
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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.
.....
- 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. 0000731766
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 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	2	3
Name of Entity	NAIC Company Code	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 []
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2023
- 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. 12/31/2018
- 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). 06/27/2020
- 6.4 By what department or departments?
Nebraska 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 [X] No [] N/A []
- 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 [X] No []
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
Optum Bank, Inc.	Salt Lake City, UTNO...	...NO...	...YES...	...NO...

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 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:
- 9.2 Has the code of ethics for senior managers been amended? Yes No
- 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
- 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
- 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
- 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
- 14.2 If yes, please complete the following:
- | | 1 | 2 |
|---|---|--|
| | Prior Year-End
Book/Adjusted
Carrying Value | 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 | \$.....0 | \$.....0 |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No
- 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
Bank of New York Mellon	Global Liquidity Services, 1 Wall St, 14th Floor, New York NY 10286
Northern Trust	50 S. LaSalle, Chicago, IL 60675

- 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
Internally Managed	I.....
BlackRock Financial Management, Inc	U.....
DWS Investment Management Americas Inc.	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 [X] No []

- 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
107105	BlackRock Financial Management, Inc	549300LVXY1VJKE13M84	SEC	NO.....
104518	DWS Investment Management Americas Inc.	CZ83K4EEEX8QVCT3B128	SEC	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 percent87.6 %
 - 1.2 A&H cost containment percent 2.0 %
 - 1.3 A&H expense percent excluding cost containment expenses 6.8 %
- 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\$..... 0
- 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\$.....0
- 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

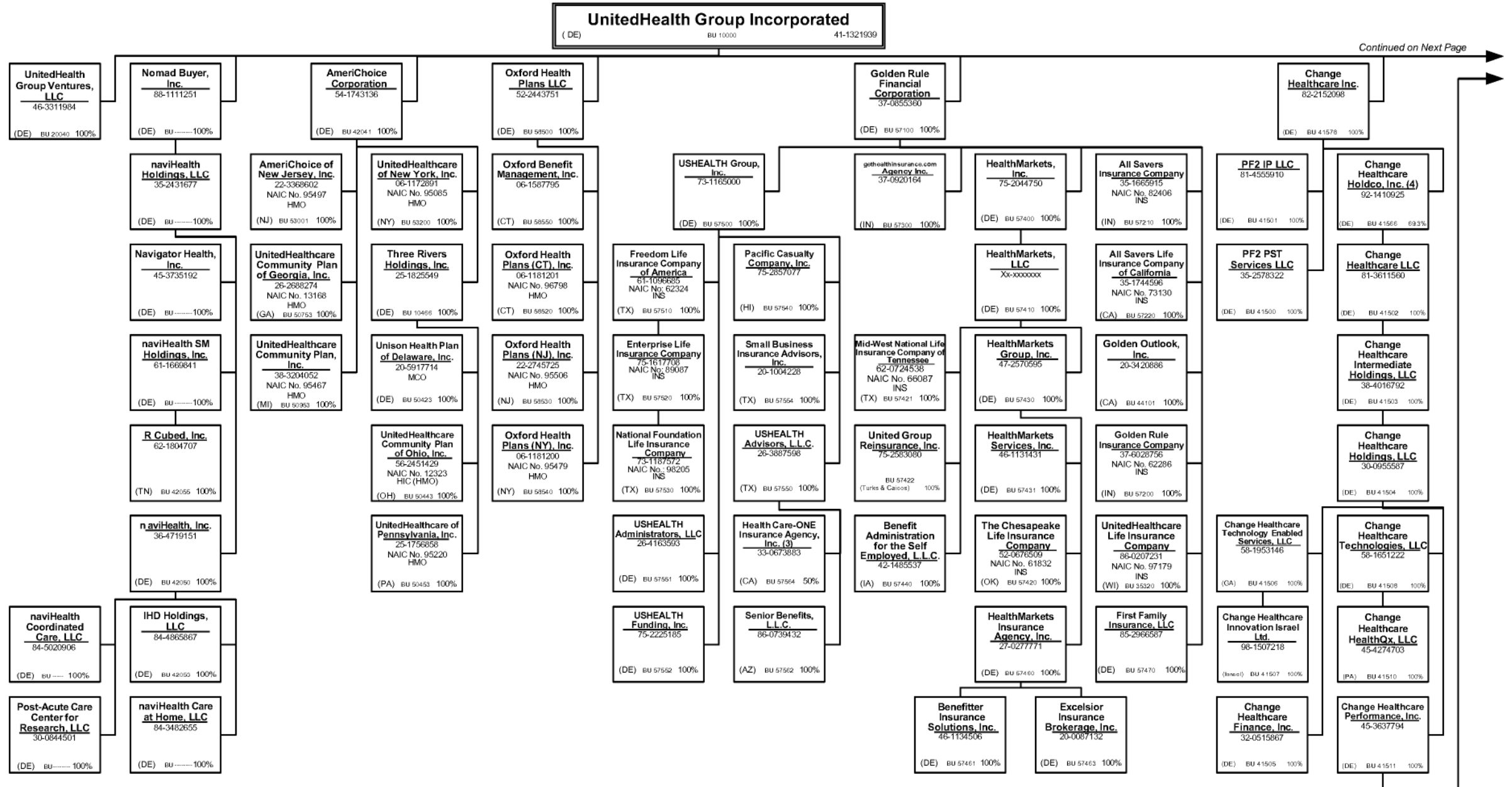
States, etc.	1 Active Status (a)	Direct Business Only									
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	L	0	1,117,993,225	16,333,520	0	0	0	0	1,134,326,745	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0	0
4. Arkansas	AR	L	0	114,112,984	0	0	0	0	0	114,112,984	0
5. California	CA	N	0	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0	0
14. Illinois	IL	L	0	276,540,409	0	0	0	0	0	276,540,409	0
15. Indiana	IN	L	0	371,421,837	0	0	0	0	0	371,421,837	0
16. Iowa	IA	L	0	17,786,791	0	0	0	0	0	17,786,791	0
17. Kansas	KS	L	0	61,803,201	0	0	0	0	0	61,803,201	0
18. Kentucky	KY	N	0	0	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0	0
26. Missouri	MO	L	0	629,580,954	0	0	0	0	0	629,580,954	0
27. Montana	MT	N	0	0	0	0	0	0	0	0	0
28. Nebraska	NE	L	0	200,064,551	330,482,982	18,219,756	0	0	0	550,887,499	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0	0	0
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	0	2,120,210	2,789,303,952	346,816,502	18,219,756	0	0	0	3,156,460,420	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0	0	0
61. Totals (Direct Business)	XXX	0	2,120,210	2,789,303,952	346,816,502	18,219,756	0	0	0	3,156,460,420	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	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 8
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N - None of the above - Not allowed to write business in the state..... 49

Premiums allocated by state based upon Geographic Market.

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



Continued on Next Page