



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2026
OF THE CONDITION AND AFFAIRS OF THE

Wellpoint Health Plans, Inc.

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

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., Mason, OH, US 45040
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 5800 Northampton Blvd
(Street and Number)
Norfolk, VA, US 23502, 757-490-6900
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 5800 Northampton Blvd, Norfolk, VA, US 23502
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 5800 Northampton Blvd
(Street and Number)
Norfolk, VA, US 23502, 800-331-1476
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.elevancehealth.com

Statutory Statement Contact Jill M Waddell, 262-202-1569
(Name) (Area Code) (Telephone Number)
jill.waddell@elevancehealth.com, 262-523-4945
(E-mail Address) (FAX Number)

OFFICERS

President/Chairperson Jennie Lynne Reynolds Treasurer Vincent Edward Scher
 Secretary Kathleen Susan Kiefer Assistant Treasurer Eric (Rick) Kenneth Noble

OTHER

Jennifer Ann Dewane, Vice President

DIRECTORS OR TRUSTEES

Jennie Lynne Reynolds Ronald William Penczek Jennifer Ann Dewane

State of Indiana SS:
 County of Marion

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.

Signed by:

 5AC76A9D5B56478...

Signed by:

 D85175EE05784B1...

Signed by:

 A85A33722D4143E...

Jennie Lynne Reynolds
 President/Chairperson

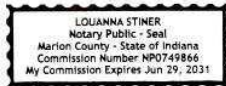
Kathleen Susan Kiefer
 Secretary

Vincent Edward Scher
 Treasurer

Subscribed and sworn to before me this
7th day of May 2026

- 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.....

Louanna Stiner
 Executive Admin Assistant
 06/29/31



STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, 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	15,140,721	0	15,140,721	1,327,754
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	750,449	0	750,449	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 \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 27,420,831), cash equivalents (\$ 21,245) and short-term investments (\$)	27,442,076	0	27,442,076	24,882,144
6. Contract loans (including \$ premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
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)	43,333,246	0	43,333,246	26,209,898
13. Title plants less \$ charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	37,158	0	37,158	24,617
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	61,516	46,872	14,644	15,143
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 582,134) and contracts subject to redetermination (\$ 3,640,298)	4,222,432	0	4,222,432	2,424,002
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	641,106	0	641,106	728,771
18.1 Current federal and foreign income tax recoverable and interest thereon	3,241	0	3,241	761,295
18.2 Net deferred tax asset	202,371	0	202,371	109,798
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
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	0
24. Health care (\$ 598,070) and other amounts receivable	969,237	371,167	598,070	686,788
25. Aggregate write-ins for other-than-invested assets	103,060	103,035	25	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	49,573,367	521,074	49,052,293	30,960,312
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	49,573,367	521,074	49,052,293	30,960,312
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. Premium tax recoverable	25	0	25	0
2502. Prepaid expenses	103,009	103,009	0	0
2503. Miscellaneous receivables	26	26	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)	103,060	103,035	25	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	7,649,084	0	7,649,084	7,454,659
2. Accrued medical incentive pool and bonus amounts	242,967	0	242,967	201,993
3. Unpaid claims adjustment expenses	35,833	0	35,833	42,637
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	315,958	0	315,958	40,693
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	683	0	683	597
9. General expenses due or accrued	115,068	0	115,068	49,333
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	0	0	0	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others.....	12,857	0	12,857	11,581
13. Remittances and items not allocated	453,309	0	453,309	442,782
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	3,093,027	0	3,093,027	3,065,710
16. Derivatives	0	0	0	0
17. Payable for securities	14,999,688	0	14,999,688	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$) 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	12,304	0	12,304	0
23. Aggregate write-ins for other liabilities (including \$159,677 current)	159,677	0	159,677	65,543
24. Total liabilities (Lines 1 to 23)	27,090,455	0	27,090,455	11,375,528
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	0	0
28. Gross paid in and contributed surplus	XXX	XXX	15,147,882	15,147,882
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	6,812,956	4,435,902
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX	0	0
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	21,961,838	19,584,784
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	49,052,293	30,960,312
DETAILS OF WRITE-INS				
2301. Miscellaneous liabilities	159,677		159,677	65,543
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)	159,677	0	159,677	65,543
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	11,847	13,902	53,560
2. Net premium income (including \$ non-health premium income).....	XXX	20,348,417	20,108,838	79,519,451
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(54,326)	(250,818)	(85,314)
4. Fee-for-service (net of \$ medical expenses)	XXX			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	20,294,091	19,858,020	79,434,137
Hospital and Medical:				
9. Hospital/medical benefits		12,974,884	15,104,237	61,171,448
10. Other professional services		221,447	162,692	713,965
11. Outside referrals		0	0	0
12. Emergency room and out-of-area		732,145	776,814	3,216,527
13. Prescription drugs		1,401,961	2,440,324	9,089,128
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		110,230	55,143	297,866
16. Subtotal (Lines 9 to 15)	0	15,440,667	18,539,210	74,488,934
Less:				
17. Net reinsurance recoveries		0	0	0
18. Total hospital and medical (Lines 16 minus 17)	0	15,440,667	18,539,210	74,488,934
19. Non-health claims (net)		0	0	
20. Claims adjustment expenses, including \$ 34,528 cost containment expenses		71,605	137,139	363,172
21. General administrative expenses		1,671,981	1,571,159	5,813,190
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) .		0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	17,184,253	20,247,508	80,665,296
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	3,109,838	(389,488)	(1,231,159)
25. Net investment income earned		175,252	273,904	930,157
26. Net realized capital gains (losses) less capital gains tax of \$		0	1,082,861	1,431,253
27. Net investment gains (losses) (Lines 25 plus 26)	0	175,252	1,356,765	2,361,410
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ 3,530)].....		(3,530)	(6,683)	(23,213)
29. Aggregate write-ins for other income or expenses	0	(82)	(3)	(272)
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	3,281,478	960,591	1,106,766
31. Federal and foreign income taxes incurred	XXX	758,054	(5,512)	14,594
32. Net income (loss) (Lines 30 minus 31)	XXX	2,523,424	966,103	1,092,172
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. Other income (expense)	0	(82)	(3)	(272)
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	(82)	(3)	(272)

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.....	19,584,784	21,363,940	21,363,940
34. Net income or (loss) from Line 32	2,523,424	966,103	1,092,172
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 \$ 101	379	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	92,674	64,455	(19,829)
39. Change in nonadmitted assets	(239,423)	(233,238)	148,500
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	0	0	(3,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	2,377,054	797,320	(1,779,157)
49. Capital and surplus end of reporting period (Line 33 plus 48)	21,961,838	22,161,260	19,584,784
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 MARCH 31, 2026 OF THE Wellpoint Health Plans, 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	18,767,848	19,013,965	79,359,502
2. Net investment income	298,731	314,123	1,314,834
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	19,066,579	19,328,088	80,674,336
5. Benefit and loss related payments	15,249,275	16,785,437	69,849,668
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	1,587,567	1,722,929	9,234,442
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	0	0	777,010
10. Total (Lines 5 through 9)	16,836,842	18,508,366	79,861,120
11. Net cash from operations (Line 4 minus Line 10)	2,229,737	819,722	813,216
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	300,000	16,110,185	16,610,185
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	14,999,688	3,289,735	3,289,735
12.8 Total investment proceeds (Lines 12.1 to 12.7)	15,299,688	19,399,920	19,899,920
13. Cost of investments acquired (long-term only):			
13.1 Bonds	14,249,718	0	561,025
13.2 Stocks	749,970	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)	14,999,688	0	561,025
14. Net increase/(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)	300,000	19,399,920	19,338,895
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	0	0	3,000,000
16.6 Other cash provided (applied)	30,195	(3,996,891)	(4,897,285)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	30,195	(3,996,891)	(7,897,285)
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)	2,559,932	16,222,751	12,254,826
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	24,882,144	12,627,318	12,627,318
19.2 End of period (Line 18 plus Line 19.1)	27,442,076	28,850,069	24,882,144

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

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STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, 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	4,221	0	0	0	0	0	0	4,221	0	0	0	0	0	0
2. First quarter	3,893							3,893						
3. Second quarter	0													
4. Third quarter	0													
5. Current year	0													
6. Current year member months	11,847							11,847						
Total Member Ambulatory Encounters for Period:														
7. Physician	16,754							16,754						
8. Non-physician	25,255							25,255						
9. Total	42,009	0	0	0	0	0	0	42,009	0	0	0	0	0	0
10. Hospital patient days incurred	1,144							1,144						
11. Number of inpatient admissions	195							195						
12. Health premiums written (a)	20,348,417							20,348,417						
13. Life premiums direct	0													
14. Property/casualty premiums written	0													
15. Health premiums earned.....	20,294,091							20,294,091						
16. Property/casualty premiums earned	0													
17. Amount paid for provision of health care services.....	15,249,274							15,249,274						
18. Amount incurred for provision of health care services	15,440,667							15,440,667						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 20,348,417

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	0	0	0	0	0	0
2. Comprehensive (hospital and medical) group	0	0	0	0	0	0
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	(3,090,878)	18,270,898	2,838,984	4,810,100	(251,894)	7,454,659
8. Title XIX - Medicaid	0	0	0	0	0	0
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)	(3,090,878)	18,270,898	2,838,984	4,810,100	(251,894)	7,454,659
14. Health care receivables (a)	290,570	678,667	0	0	290,570	925,229
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	74,784	(5,528)	148,048	94,919	222,832	201,993
17. Totals (Lines 13 - 14 + 15 + 16)	(3,306,664)	17,586,703	2,987,032	4,905,019	(319,632)	6,731,423

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
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, 2025. 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 Wellpoint Health Plans, Inc. 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"). The Company employed no permitted practices in preparing the accompanying statutory financial statements.

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:

	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>	<u>March 31, 2026</u>	<u>December 31, 2025</u>
<u>Net Income</u>					
(1) Wellpoint Health Plans, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	<u>XXX</u>	<u>XXX</u>	<u>XXX</u>	<u>\$ 2,523,424</u>	<u>\$ 1,092,172</u>
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:	<u> </u>	<u> </u>	<u> </u>	<u> —</u>	<u> —</u>
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:	<u> </u>	<u> </u>	<u> </u>	<u> —</u>	<u> —</u>
(4) NAIC SAP (1-2-3=4)	<u>XXX</u>	<u>XXX</u>	<u>XXX</u>	<u>\$ 2,523,424</u>	<u>\$ 1,092,172</u>
<u>Surplus</u>					
(5) Wellpoint Health Plans, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	<u>XXX</u>	<u>XXX</u>	<u>XXX</u>	<u>\$ 21,961,838</u>	<u>\$ 19,584,784</u>
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:	<u> </u>	<u> </u>	<u> </u>	<u> —</u>	<u> —</u>
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:	<u> </u>	<u> </u>	<u> </u>	<u> —</u>	<u> —</u>
(8) NAIC SAP (5-6-7=8)	<u>XXX</u>	<u>XXX</u>	<u>XXX</u>	<u>\$ 21,961,838</u>	<u>\$ 19,584,784</u>

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

No significant change.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

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.

The Company holds 19 SVO-Identified bond exchange trade funds (“ETFs”) reported as bonds on Schedule D-1 in which the Company has made an irrevocable decision to report at systematic value. Systematic valuation has been consistently applied to these ETFs held at March 31, 2026 and previous periods.

The Company holds 1 ETF reported on Schedule D-Part 2-Section 2 because the security is not on SVO identified bonds ETF listed. This ETF is carried at fair value.

- (3) Common stocks of unaffiliated companies are stated at fair value based upon security ratings prescribed by various third-party pricing sources.
- (4) - (15) No significant change.

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. Asset-Backed Securities

- (1) The Company did not have asset-backed securities at March 31, 2026.
- (2) The Company did not recognize other-than-temporary impairments ("OTTI") on its asset-backed securities during the three months ended March 31, 2026.
- (3) The Company did not recognize OTTI on its asset-backed securities at March 31, 2026.
- (4) The Company had no impaired asset-backed securities for which an OTTI had not been recognized in earnings at March 31, 2026.
- (5) The Company had no impaired asset-backed securities at March 31, 2026.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at March 31, 2026.

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 March 31, 2026.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at March 31, 2026.

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 March 31, 2026.

J. Real Estate

Not applicable.

K. Investments in Tax Credit Structures (tax credit investments)

Not applicable.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted assets (including pledged)

Restricted Asset Category	1	2	3	4	5	6	7
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	0.00 %	0.00 %
b. Collateral held under security lending agreements	—	—	—	—	—	0.00 %	0.00 %
c. Subject to repurchase agreements	—	—	—	—	—	0.00 %	0.00 %
d. Subject to reverse repurchase agreements	—	—	—	—	—	0.00 %	0.00 %
e. Subject to dollar repurchase agreements	—	—	—	—	—	0.00 %	0.00 %
f. Subject to dollar reverse repurchase agreements	—	—	—	—	—	0.00 %	0.00 %
g. Placed under option contracts	—	—	—	—	—	0.00 %	0.00 %
h. Letter stock or securities restricted as to sale-excluding FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %
i. FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %
j. On deposit with states	1,352,938	1,327,754	25,184	—	1,352,938	2.73 %	2.76 %
k. On deposit with other regulatory bodies	—	—	—	—	—	0.00 %	0.00 %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	0.00 %	0.00 %
m. Pledged as collateral not captured in other categories	—	—	—	—	—	0.00 %	0.00 %
n. Other restricted assets	—	—	—	—	—	0.00 %	0.00 %
o. Collateral assets received and on balance sheet	—	—	—	—	—	0.00 %	0.00 %
p. Assets held under modco reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %
q. Assets held under funds withheld reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %
r. Total restricted assets (Sum of a through q)	\$ 1,352,938	\$ 1,327,754	\$ 25,184	\$ —	\$ 1,352,938	2.73 %	2.76 %

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

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

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

M. Working Capital Finance Investments

Not applicable.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

N. Offsetting and Netting of Assets and Liabilities

The Company had no netted assets and liabilities at March 31, 2026.

O. 5GI Securities

The Company has no 5GI Securities as of March 31, 2026.

P. Short Sales

The Company did not have any short sales at March 31, 2026.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at March 31, 2026.

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

The Company did not participate in a cash pool at March 31, 2026.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

The Company did not have any aggregate collateral loans with qualifying investment collateral at March 31, 2026.

6. Prepayment Penalty and Acceleration Fees

Not applicable.

7. Investment Income

No significant change.

8. Derivative Instruments

Not applicable.

9. Income Taxes

A. - F.

No significant change.

G. - H.

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

No significant change.

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

A. - C.

No significant change.

D. Amounts Due to or from Related Parties

At March 31, 2026, the Company reported no amounts due from affiliates and \$3,093,027 due to affiliates. The payable balance represents intercompany transactions

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - O.

No significant change.

11. Debt

Not applicable.

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. - E.

No significant change.

F. All Other Contingencies

Litigation and Regulatory Proceedings

CMS Notice

On February 27, 2026, Elevance Health, Inc. was notified by the Centers for Medicare & Medicaid Services ("CMS") of its intent to impose intermediate sanctions on Elevance Health based on alleged noncompliance by Elevance Health with certain Medicare

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

Advantage risk adjustment data submission requirements related to diagnosis codes previously disclosed to CMS.

On March 13, 2026, CMS notified Elevance Health that it was granting Elevance Health's request for an extension of the effective date of the sanctions from March 31, 2026 to May 30, 2026 and also removed certain of Elevance Health's Medicare Advantage Prescription Drug plans from the threatened sanctions and granted a waiver for various Employee Group Waiver Plans. CMS subsequently modified the compliance timeline. Elevance Health now has until July 31, 2026 to complete a series of steps required by the agency to avoid sanctions. While Elevance Health is working with CMS to complete these steps to reach a resolution that avoids the imposition of sanctions or other remedies, there can be no assurance that such a resolution can be achieved. Elevance Health is currently contesting CMS' action through an administrative process.

In connection with the notice and Elevance Health's ongoing assessment of diagnosis codes, for dates of service 2015 through April 2, 2023, previously disclosed to CMS, Elevance Health recorded an accrual of approximately \$935,000,000 representing its current best estimate of the identified potential exposure for the resubmission of certain Medicare Advantage risk adjustment data pursuant to applicable loss contingency accounting guidance. The Company's portion of the accrual is reflected in this quarterly financial statement. Based on developments including the resolution of this matter by Elevance Health at an amount different than the overall accrual, actuals could differ from the amount accrued by the Company.

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.

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

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 March 31, 2026, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

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

No significant change.

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					
Common stock					
Exchange Traded Funds	\$ 750,449	\$ —	\$ —	\$ —	\$ 750,449
Total common stocks	\$ 750,449	\$ —	\$ —	\$ —	\$ 750,449
Cash equivalents					
Industrial and miscellaneous money market funds	\$ 21,245	\$ —	\$ —	\$ —	\$ 21,245
Total cash equivalents	\$ 21,245	\$ —	\$ —	\$ —	\$ 21,245
Total assets at fair value/NAV	\$ 771,694	\$ —	\$ —	\$ —	\$ 771,694

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

There are no investments in Level 3 as of March 31, 2026.

(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'

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

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.

Fair values of common and preferred stock are generally designated as Level 1 and are based on quoted market prices. For certain common and preferred stock, quoted market prices for the identical security are not always available and the fair value is estimated by reference to similar securities for which quoted prices are available. These securities are designated as Level 2. Certain equity securities, including private equity securities, for which the fair value is estimated based on each security's current condition and future cash flow projections. Such securities are designated as Level 3. The fair values of these private equity securities are generally based on either broker quotes, or discounted cash flow projections using assumptions for inputs such as the weighted-average cost of capital, long-term revenue growth rates and earnings before interest, taxes, depreciation and amortization, and/or revenue multiples 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)
Issuer credit obligations	\$15,283,423	\$15,140,721	\$14,254,137	\$1,029,286	\$ —	\$ —	\$ —
Unaffiliated common stock	750,449	750,449	750,449	—	—	—	—
Cash equivalents	21,245	21,245	21,245	—	—	—	—

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.

21. Other Items

No significant change.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

22. Events Subsequent

Subsequent events have been considered through May 12, 2026 for the statutory statement issued on May 13, 2026. There were no events occurring subsequent to March 31, 2026 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)? No

(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.

25. Change in Incurred Claims and Claim Adjustment Expenses

A. The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$7,096,360 during 2026. This is approximately 104.8% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$6,774,059 as of December 31, 2025. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2026. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.

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.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.
NOTES TO FINANCIAL STATEMENTS

30. Premium Deficiency Reserves

The Company did not record any premium deficiency reserves at March 31, 2026.

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. 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]
- 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 []
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. 12/31/2022
- 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. 12/31/2022
- 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). 06/25/2024
- 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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:
- 9.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 9.21 If the response to 9.2 is yes, provide information related to amendment(s).
- 1.Manager Responsibilities: Managers must keep conflict-of-interest surveys up-to-date so the company can track and address issues quickly and correctly.
- 2.Mobile Devices: Company devices are for short, work-related messages only. Unapproved apps are not allowed. Personal devices cannot be used for major work tasks or storing protected health information, and must follow passcode and legal hold rules.
- 3.Public Speaking & Media: If you are asked to speak publicly or talk to the media, you must first contact Corporate Communications and get approval.
- 4.External Publications: Any research or writing that uses Elevarance Health data must be approved by the Enterprise External Publication Review (EEPR) Committee. Breaking this rule may lead to an Ethics review.
- 5.Conflict of Interest: Lawyers who work at Elevarance Health but are not in the Legal department cannot give legal advice.
- 6.Political Activity: The Code now clearly explains the difference between your personal political activity and anything that represents the company.
- 7.AI Tools: Only company-approved AI tools may be used. Public or unapproved AI websites are not allowed.
- 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
- 13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
- 13.2 If yes, please complete the following:
- | | 1
Prior Year-End
Book/Adjusted
Carrying Value | 2
Current Quarter
Book/Adjusted
Carrying Value |
|---|--|---|
| 13.21 Bonds | \$ 0 | \$ 0 |
| 13.22 Preferred Stock | \$ 0 | \$ 0 |
| 13.23 Common Stock | \$ 0 | \$ 0 |
| 13.24 Short-Term Investments | \$ 0 | \$ 0 |
| 13.25 Mortgage Loans on Real Estate | \$ 0 | \$ 0 |
| 13.26 All Other | \$ 0 | \$ 0 |
| 13.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26) | \$ 0 | \$ 0 |
| 13.28 Total Investment in Parent included in Lines 13.21 to 13.26 above | \$ 0 | \$ 0 |
- 14.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 14.2 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.
15. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 15.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0
- 15.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0
- 15.3 Total payable for securities lending reported on the liability page. \$ 0

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

GENERAL INTERROGATORIES

16. 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 []
- 16.1 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

- 16.2 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)
.....

- 16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? Yes [] No [X]
- 16.4 If yes, give full information relating thereto:

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

- 16.5 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. This includes both primary and sub-advisors. 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
Elevance Health, Inc.	I.....
Loomis, Sayles & Company, LP	U.....

16.5097 For those firms/individuals listed in the table for Question 16.5, 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 [] No [X] N/A []

16.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 16.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X] N/A []

- 16.6 For those firms or individuals listed in the table for 16.5 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 Registered With	4 Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	Securities Exchange Commission	NO.....

- 17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 17.2 If no, list exceptions:

.....

18. 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]

GENERAL INTERROGATORIES

19. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
- a. The security was either:
 - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
 - b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
 - c. The NAIC Designation and NAIC Designation Category were 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, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
 - d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
- Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No []
20. 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 []

GENERAL INTERROGATORIES

PART 2 - HEALTH

- 1. Operating Percentages:
 - 1.1 A&H loss percent 76.300 %
 - 1.2 A&H cost containment percent 0.200 %
 - 1.3 A&H expense percent excluding cost containment expenses 8.400 %

- 2.1 Do you act as a custodian for health savings accounts? Yes [] No []
- 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 []
- 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 [] 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

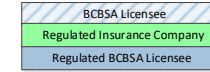
States, etc.	1 Active Status (a)	Direct Business Only									
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	N								0	
2. Alaska	AK	N								0	
3. Arizona	AZ	L	20,348,417							20,348,417	
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	20,348,417	0	0	0	0	0	20,348,417	0	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX									0	
61. Totals (Direct Business)	XXX	0	20,348,417	0	0	0	0	0	20,348,417	0	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:

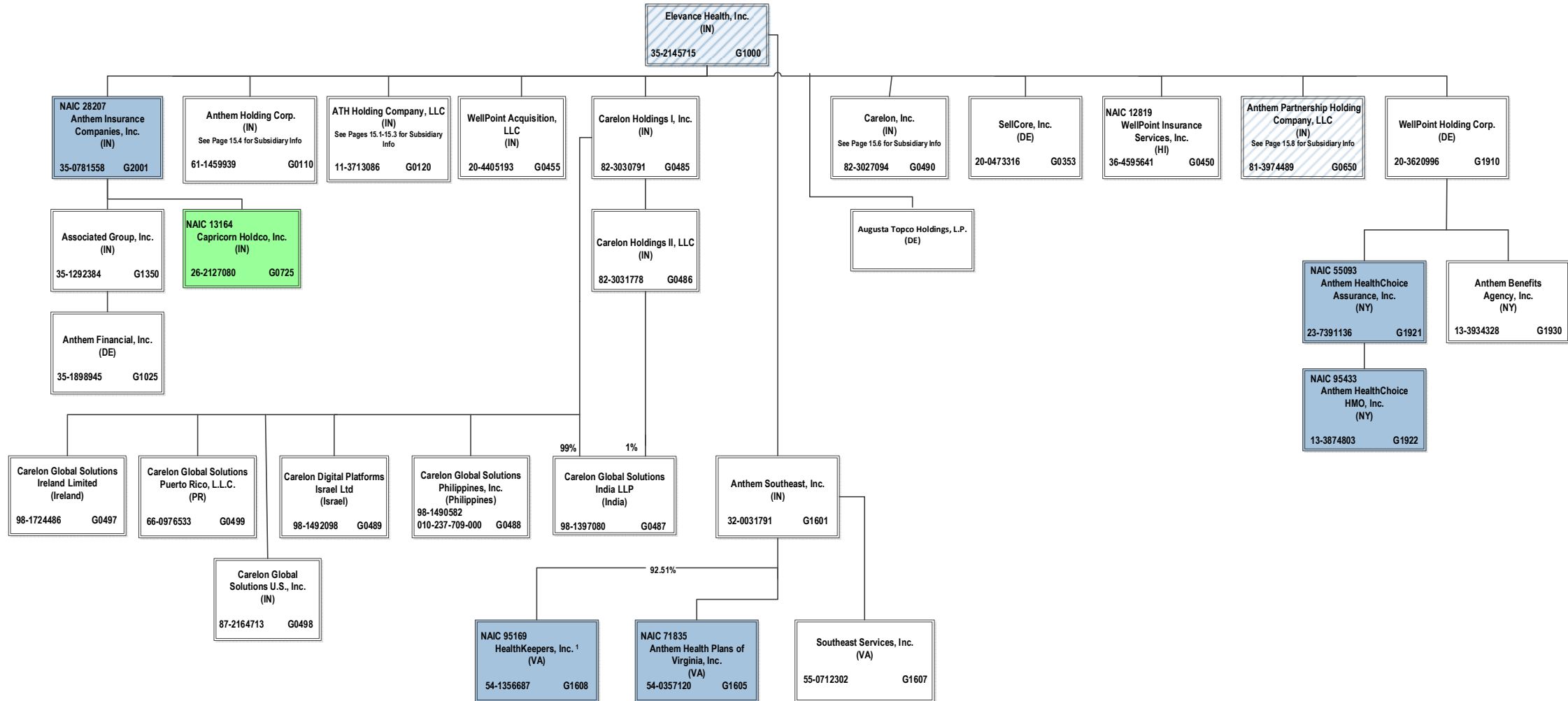
- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 3
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N -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

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



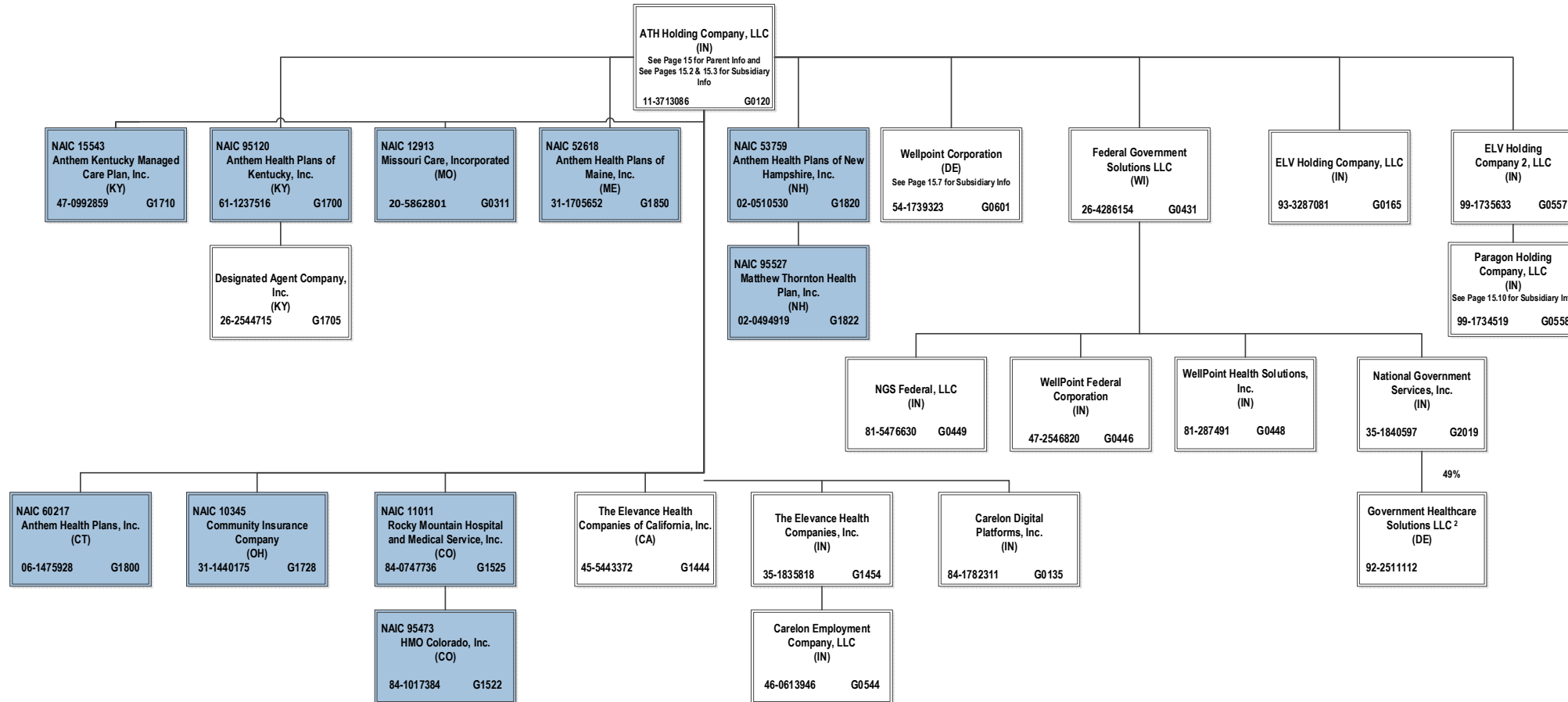
¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

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

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



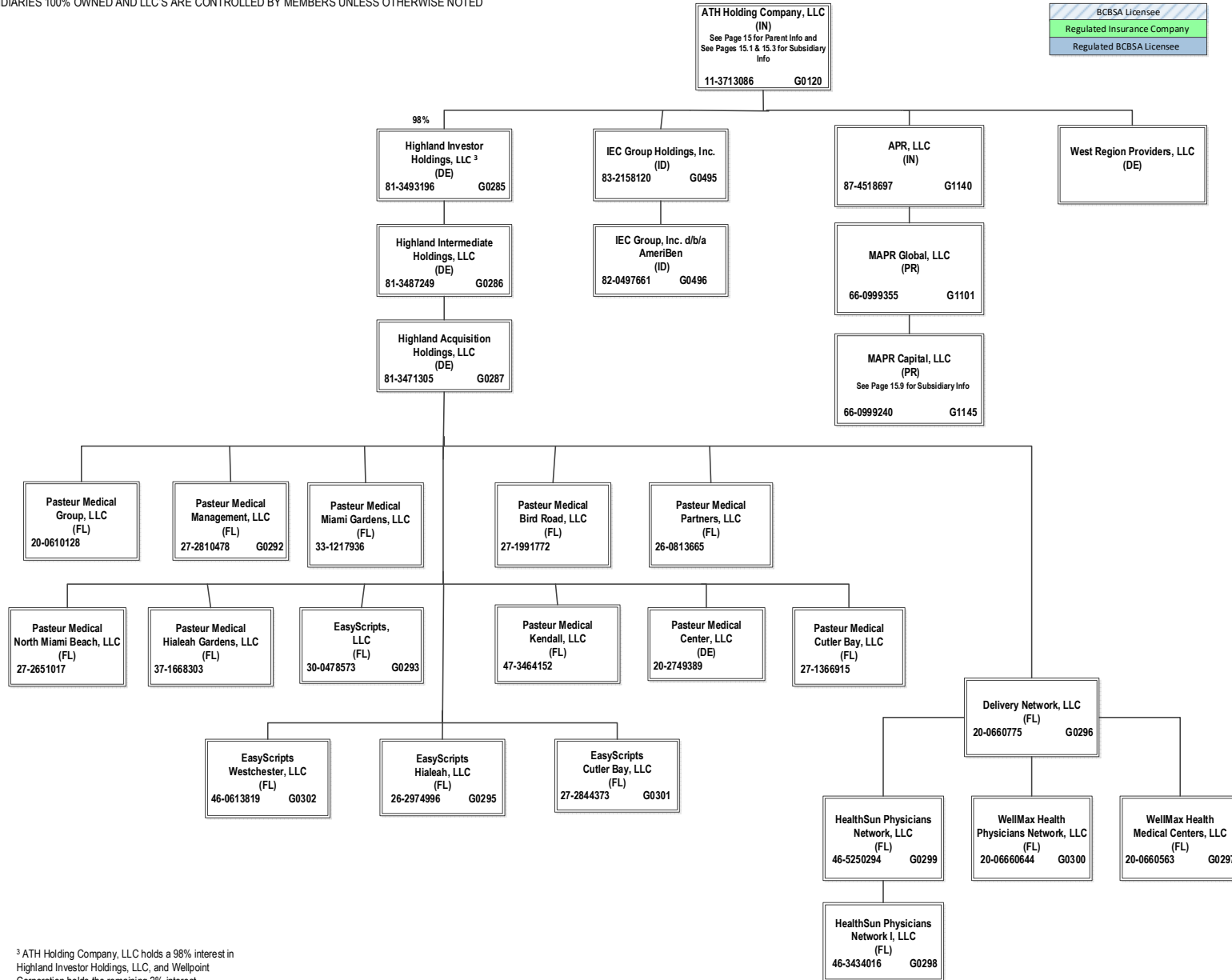
15.1

² Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

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

PART 1 – ORGANIZATIONAL CHART

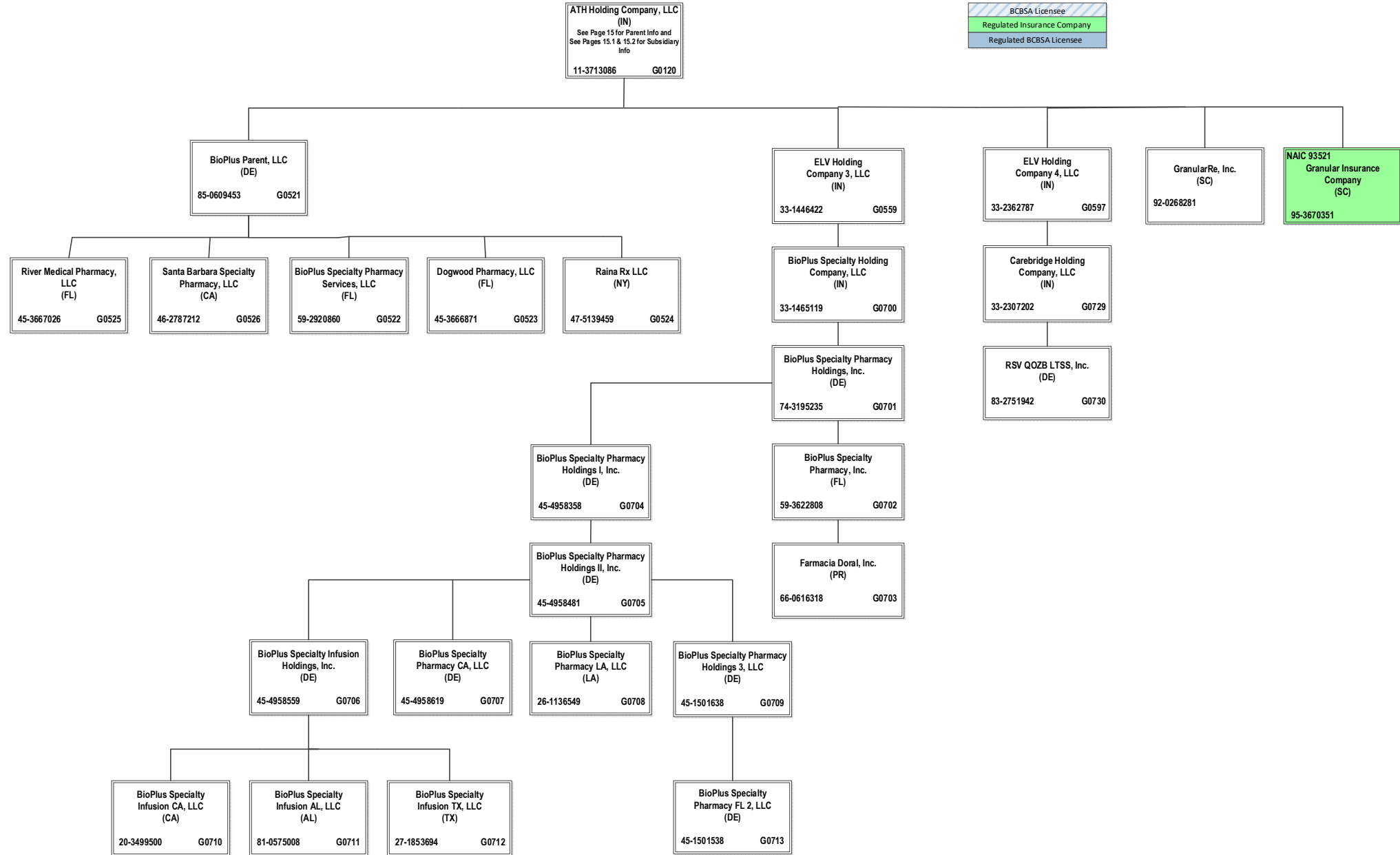
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



³ ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Wellpoint Corporation holds the remaining 2% interest.

15.2

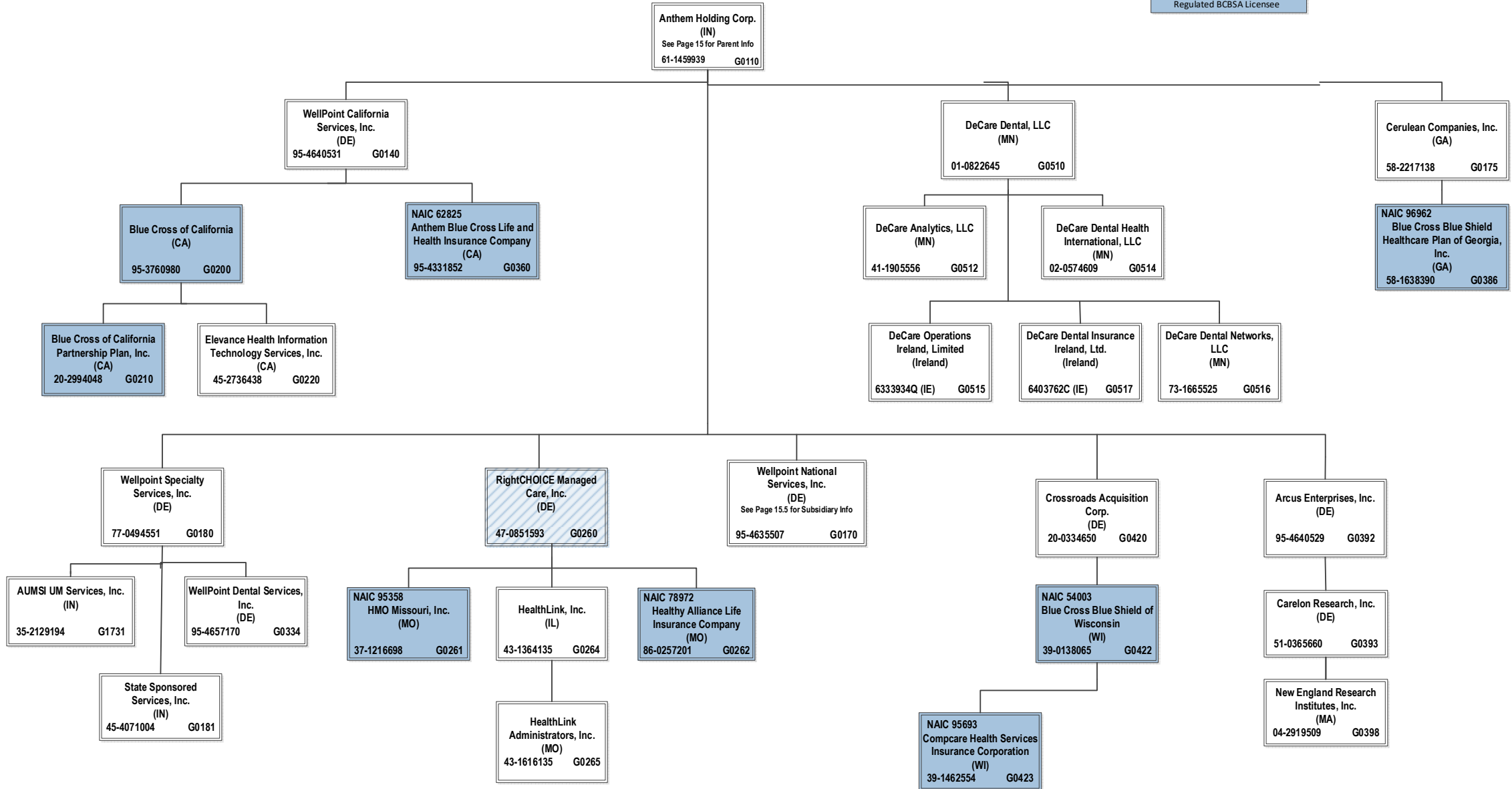
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



15.3

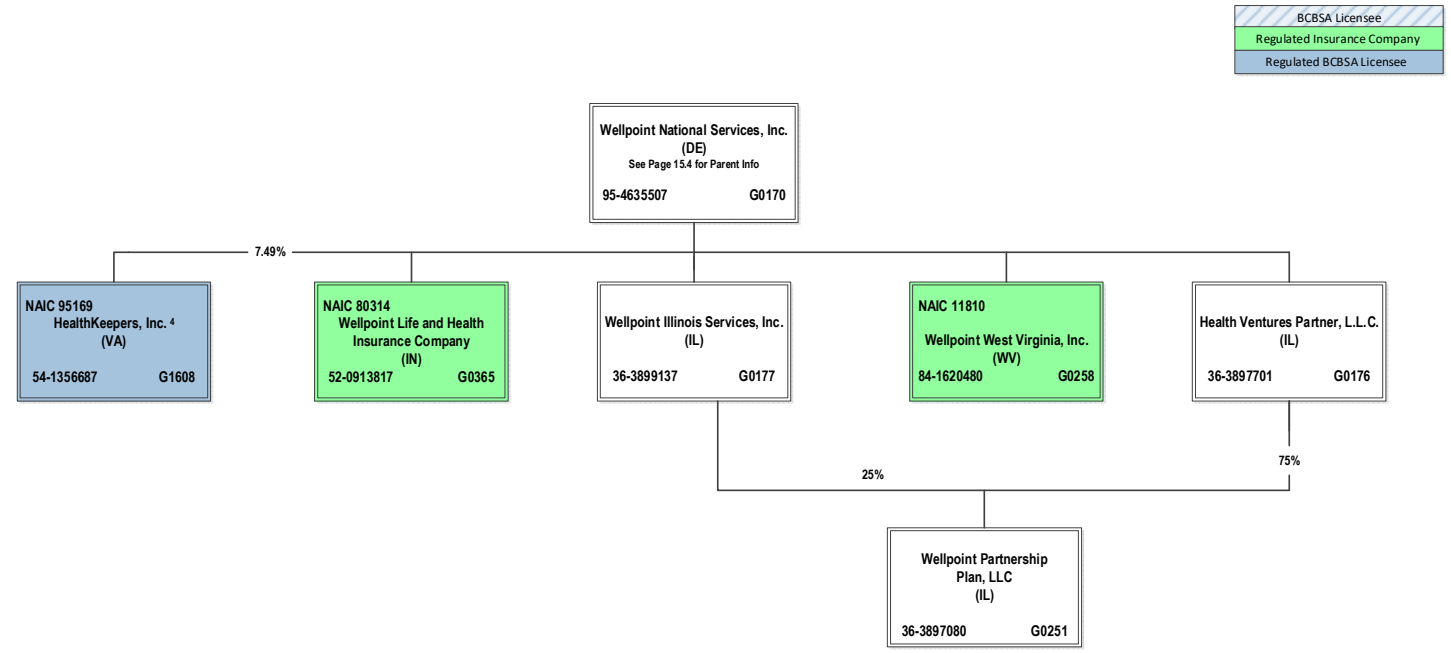
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



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

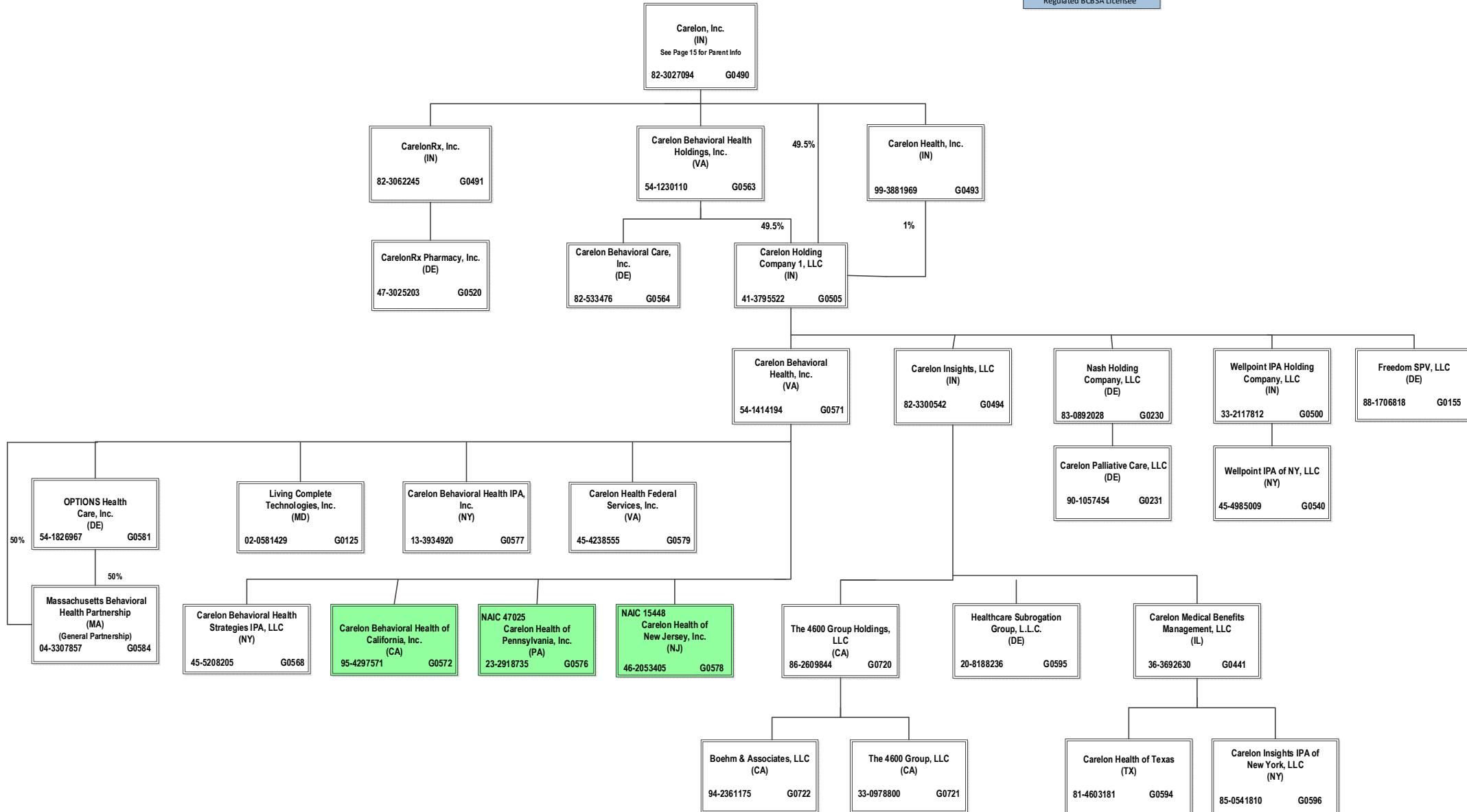
PART 1 – ORGANIZATIONAL CHART



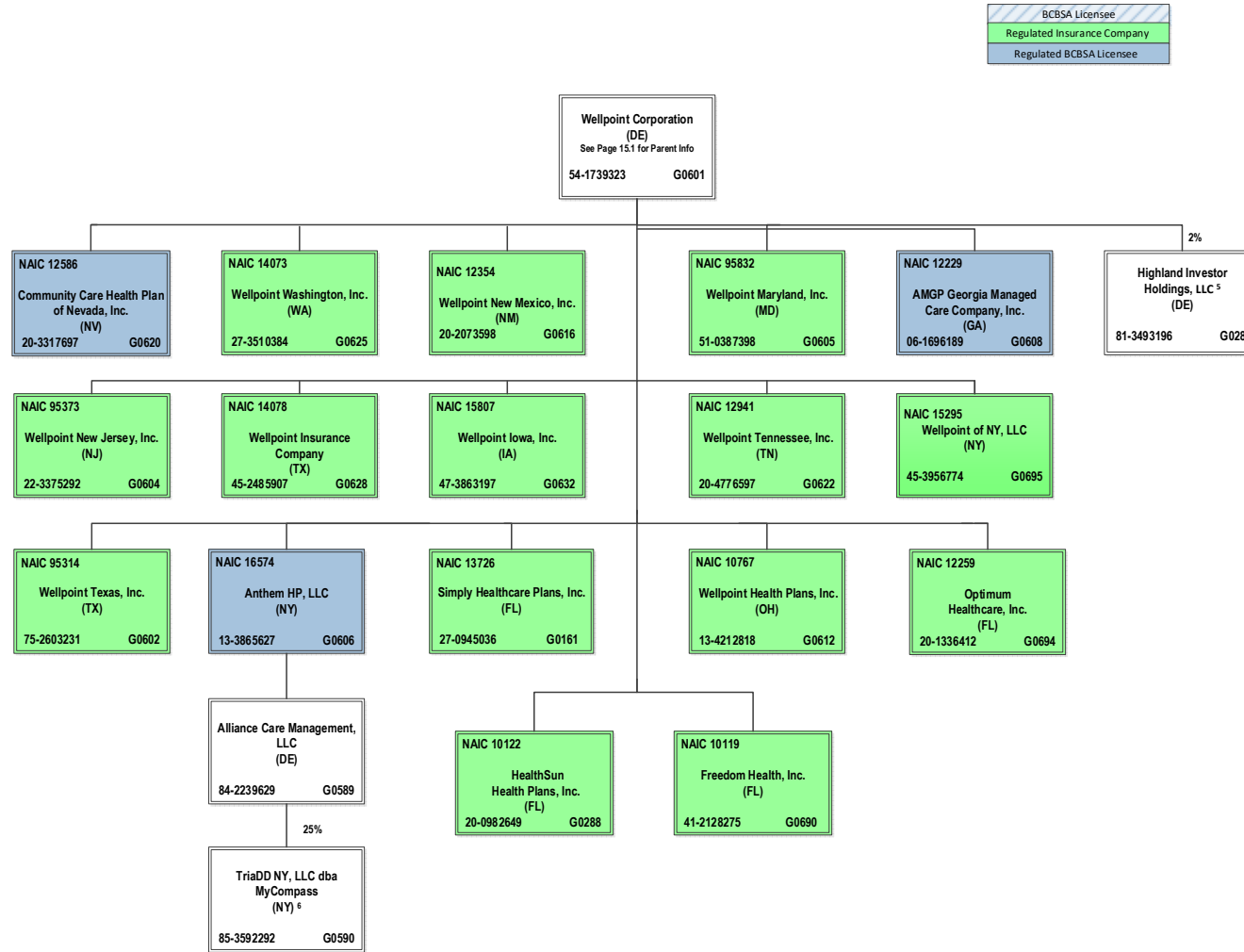
⁴ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

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



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

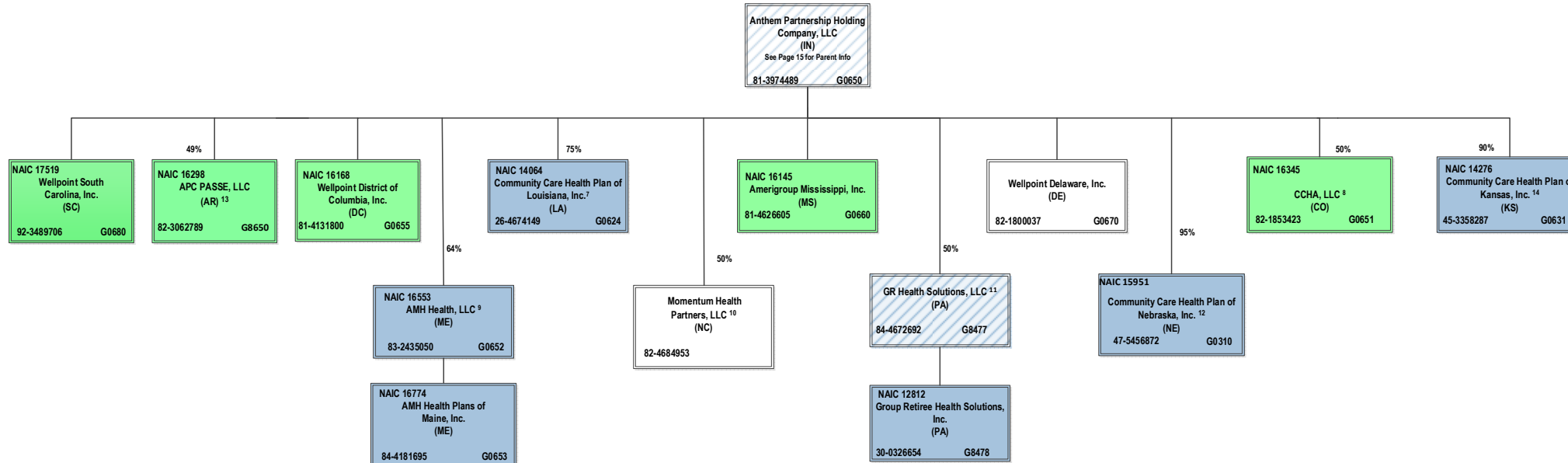


15.7

⁵ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.
⁶ TriADD NY, LLC dba MyCompass is 25% owned by Alliance Care Management, LLC and the remaining 75% interest is owned by unaffiliated investors.

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

PART 1 – ORGANIZATIONAL CHART



⁷ 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)

⁸ 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)

⁹ AMH Health, LLC is a joint venture 36% owned by MaineHealth (non-affiliate) and 64% owned by Anthem Partnership Holding Company, LLC

¹⁰ 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)

¹¹ 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)

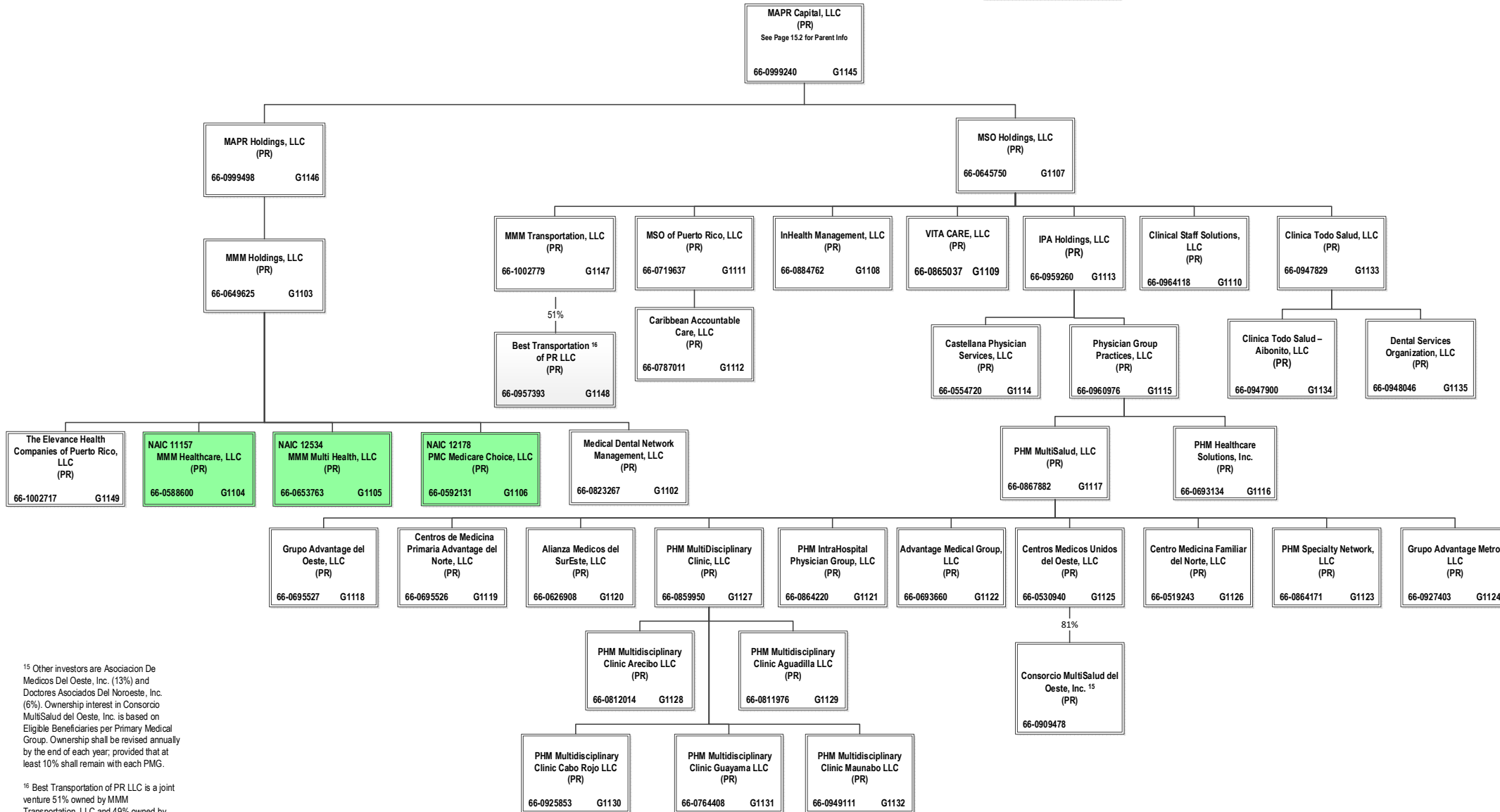
¹² Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate).

¹³ APC PASSE, LLC (regulated entity) is a joint venture 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by Arkansas Provider Coalition, LLC (non-affiliate).

¹⁴ Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross Blue Shield of Kansas, Inc. (non-affiliate) and 5% owned by Blue Cross and Blue Shield of Kansas City (non-affiliate).

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

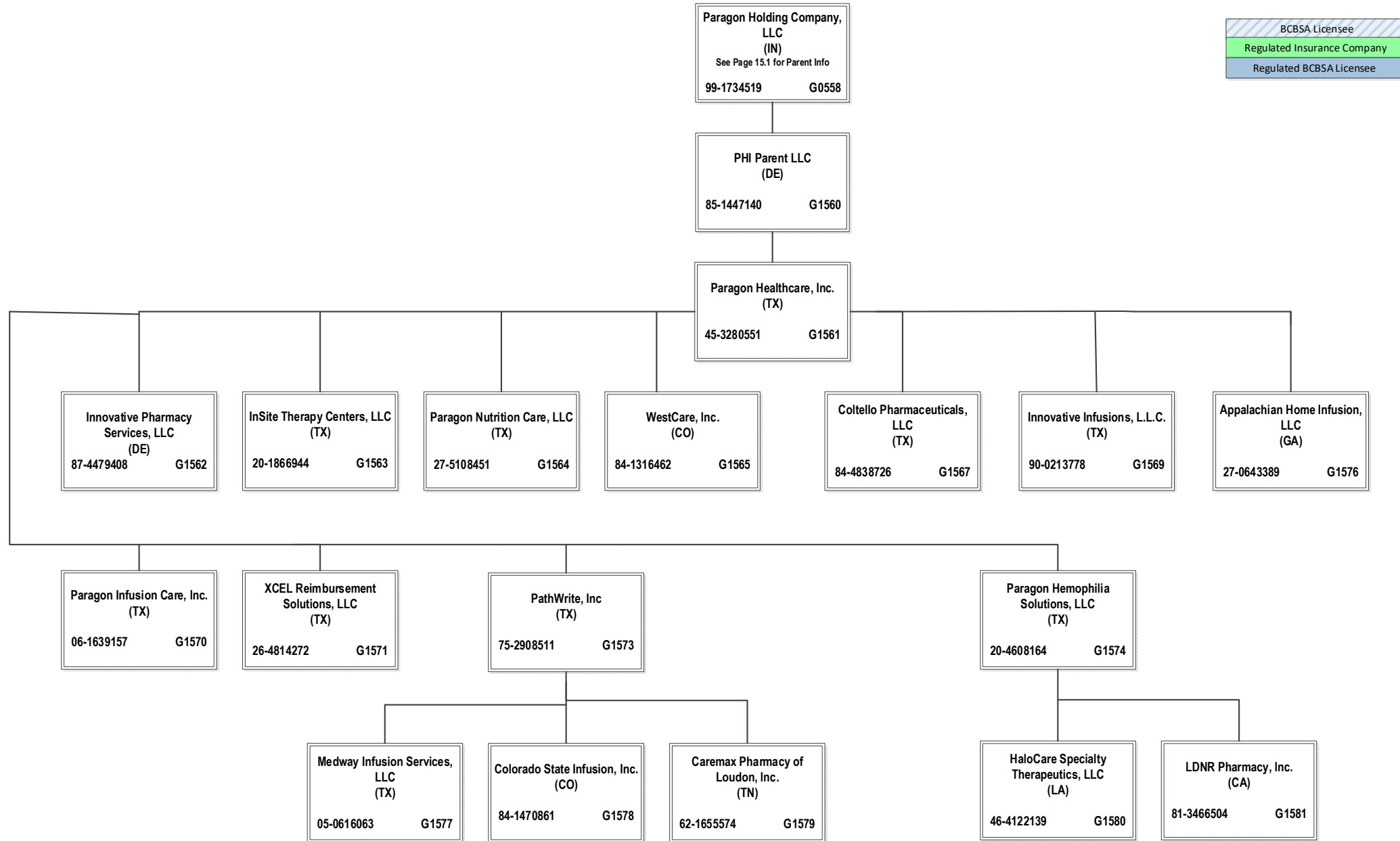


15.9

¹⁵ Other investors are Asociacion De Medicos Del Oeste, Inc. (13%) and Doctores Asociados Del Noroeste, Inc. (6%). Ownership interest in Consorcio MultiSalud del Oeste, Inc. is based on Eligible Beneficiaries per Primary Medical Group. Ownership shall be revised annually by the end of each year, provided that at least 10% shall remain with each PMG.

¹⁶ Best Transportation of PR LLC is a joint venture 51% owned by MMM Transportation, LLC and 49% owned by Jossue A. Galguera Vizcaino, individually

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

15.10

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0693660		0001156039		Advantage Medical Group, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0626908		0001156039		Alianza Medicos del SurEste, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		84-2239629		0001156039		Alliance Care Management, LLC	DE	NIA	Anthem HP, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	MS	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	12229	06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	GA	IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	16774	84-4181695		0001156039		AMH Health Plans of Maine, Inc.	ME	IA	AMH Health, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	16553	83-2435050		0001156039		AMH Health, LLC	ME	IA	Anthem Partnership Holding Company, LLC	Ownership	64.000	Elevance Health, Inc.	NO	0104
.0671	Elevance Health, Inc.		13-3934328		0001156039		Anthem Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	62825	95-4331852		0001156039		Anthem Blue Cross Life and Health Insurance Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		35-1898945		0001156039		Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	52618	31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	ME	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	53759	02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc.	NH	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	71835	54-0357120	40003317	0001156039		Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	60217	06-1475928		0001156039		Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	55093	23-7391136		0001156039		Anthem HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95433	13-3874803		0001156039		Anthem HealthChoice HMO, Inc.	NY	IA	Anthem HealthChoice Assurance, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		61-1459939		0001156039		Anthem Holding Corp.	IN	NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	16574	13-3865627		0001156039		Anthem HP, LLC	NY	IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	NO	0100
.0671	Elevance Health, Inc.	28207	35-0781558		0001156039		Anthem Insurance Companies, Inc.	IN	IA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3974489		0001156039		Anthem Partnership Holding Company, LLC	IN	NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		32-0031791		0001156039		Anthem Southeast, Inc.	IN	NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	16298	82-3062789		0001156039		APC Passe, LLC	AR	IA	Anthem Partnership Holding Company, LLC	Ownership	49.000	Elevance Health, Inc.	NO	0110
.0671	Elevance Health, Inc.		27-0643389		0001156039		Appalachian Home Infusion, LLC	GA	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		87-4518697		0001156039		APR, LLC	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		95-4640529		0001156039		Arcus Enterprises, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		35-1292384		0001156039		Associated Group, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		11-3713086		0001156039		ATH Holding Company, LLC	IN	UIP	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		35-2129194		0001156039		AUMSI UM Services, Inc.	IN	NIA	Wellpoint Specialty Services, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0957393		0001156039		Best Transportation of PR, LLC	PR	NIA	MM Transportation, LLC	Ownership	51.000	Elevance Health, Inc.	NO	0112
.0671	Elevance Health, Inc.		85-0609453		0001156039		BioPlus Parent, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		33-1465119		0001156039		BioPlus Specialty Holding Company, LLC	IN	NIA	ELV Holding Company 3, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-0575008		0001156039		BioPlus Specialty Infusion AL, LLC	AL	NIA	BioPlus Specialty Infusion Holdings, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-3499500		0001156039		BioPlus Specialty Infusion CA, LLC	CA	NIA	BioPlus Specialty Infusion Holdings, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-4958559		0001156039		BioPlus Specialty Infusion Holdings, Inc.	DE	NIA	Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-1853694		0001156039		BioPlus Specialty Infusion TX, LLC	TX	NIA	BioPlus Specialty Infusion Holdings, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-4958619		0001156039		BioPlus Specialty Pharmacy CA, LLC	CA	NIA	Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-1501538		0001156039		BioPlus Specialty Pharmacy FL 2, LLC	FL	NIA	BioPlus Specialty Pharmacy Holdings 3, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-1501638		0001156039		BioPlus Specialty Pharmacy Holdings 3, LLC	DE	NIA	Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-4958358		0001156039		BioPlus Specialty Pharmacy Holdings I, Inc.	DE	NIA	BioPlus Specialty Pharmacy Holdings, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-4958481		0001156039		BioPlus Specialty Pharmacy Holdings II, Inc.	DE	NIA	Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		74-3195235		0001156039		BioPlus Specialty Pharmacy Holdings, Inc.	DE	NIA	BioPlus Specialty Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0671	Elevalance Health, Inc.		26-1136549		0001156039		BioPlus Specialty Pharmacy LA, LLC	..LA.....	NIA.....	BioPlus Specialty Pharmacy Holdings II, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		59-2920860		0001156039		BioPlus Specialty Pharmacy Services, LLC	..FL.....	NIA.....	BioPlus Parent, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		59-3622808		0001156039		BioPlus Specialty Pharmacy, Inc.	..FL.....	NIA.....	BioPlus Specialty Pharmacy Holdings, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.	96962	58-1638390		0001156039		Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	..GA.....	IA.....	Cerulean Companies, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	..WI.....	IA.....	Crossroads Acquisition Corp.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		95-3760980		0001156039		Blue Cross of California	..CA.....	IA.....	WellPoint California Services, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	0100
.0671	Elevalance Health, Inc.		20-2994048		0001156039		Blue Cross of California Partnership Plan, Inc.	..CA.....	IA.....	Blue Cross of California	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	0100
.0671	Elevalance Health, Inc.		0001156039		0001156039		Boehm & Associates, LLC	..CA.....	NIA.....	The 4600 Group Holdings, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.	13164	26-2127080		0001156039		Capricorn Holdco, Inc.	..IN.....	IA.....	Anthem Insurance Companies, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carebridge Holding Company, LLC	..IN.....	NIA.....	ELV Holding Company 4, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-5334761		0001156039		Carelon Behavioral Care, Inc.	..DE.....	NIA.....	Carelon Behavioral Health Holdings, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		54-1230110		0001156039		Carelon Behavioral Health Holdings, Inc.	..VA.....	NIA.....	Carelon, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		13-39324920		0001156039		Carelon Behavioral Health IPA, Inc.	..NY.....	NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		95-4297571		0001156039		Carelon Behavioral Health of California, Inc.	..CA.....	IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	0100
.0671	Elevalance Health, Inc.		45-5208205		0001156039		Carelon Behavioral Health Strategies IPA, LLC	..NY.....	NIA.....	Carelon Behavioral Health Strategies, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		54-1414194		0001156039		Carelon Behavioral Health, Inc.	..VA.....	NIA.....	Carelon Holding Company 1, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		98-1492098		0001156039		Carelon Digital Platforms Israel Ltd.	..ISR.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		84-1782311		0001156039		Carelon Digital Platforms, Inc.	..IN.....	NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		46-0613946		0001156039		Carelon Employment Company, LLC.	..IN.....	NIA.....	The Elevalance Health Companies, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		98-1397080		0001156039		Carelon Global Solutions India LLP	..IN.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	99.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		98-1397080		0001156039		Carelon Global Solutions India LLP	..IN.....	NIA.....	Carelon Holdings II, LLC	Ownership.....	1.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carelon Global Solutions Ireland Limited	..IRL.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		98-1490582		0001156039		Carelon Global Solutions Philippines, Inc.	..PHL.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		66-0976533		0001156039		Carelon Global Solutions Puerto Rico, L.L.C.	..PR.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		87-2164713		0001156039		Carelon Global Solutions U.S., Inc.	..IN.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		45-4238555		0001156039		Carelon Health Federal Services, Inc.	..VA.....	NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.	15448	46-2053405		0001156039		Carelon Health of New Jersey, Inc.	..NJ.....	IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.	47025	23-2918735		0001156039		Carelon Health of Pennsylvania, Inc.	..PA.....	IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		81-4603181		0001156039		Carelon Health of Texas	..TX.....	NIA.....	Carelon Medical Benefits Management, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carelon Health, Inc.	..IN.....	NIA.....	Carelon, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carelon Holding Company 1, LLC	..IN.....	NIA.....	Carelon, Inc.	Ownership.....	49.500	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carelon Holding Company 1, LLC	..IN.....	NIA.....	Carelon Behavioral Health Holdings, Inc.	Ownership.....	49.500	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		0001156039		0001156039		Carelon Holding Company 1, LLC	..IN.....	NIA.....	Carelon Health, Inc.	Ownership.....	1.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-3030791		0001156039		Carelon Holdings I, Inc.	..IN.....	NIA.....	Elevalance Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-3031178		0001156039		Carelon Holdings II, LLC	..IN.....	NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		85-0541810		0001156039		Carelon Insights IPA of New York, LLC	..NY.....	NIA.....	Carelon Medical Benefits Management, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-3300542		0001156039		Carelon Insights, LLC	..IN.....	NIA.....	Carelon Holding Company 1, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		36-3692630		0001156039		Carelon Medical Benefits Management, LLC.	..IL.....	NIA.....	Carelon Insights, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		90-1057454		0001156039		Carelon Palliative Care, LLC	..DE.....	NIA.....	Nash Holding Company, LLC	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		51-0365660		0001156039		Carelon Research, Inc.	..DE.....	NIA.....	Arcus Enterprises, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-3027094		0001156039		Carelon, Inc.	..IN.....	NIA.....	Elevalance Health, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		47-3025203		0001156039		CarelonRx Pharmacy, Inc.	..DE.....	NIA.....	CarelonRx, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		82-3062245		0001156039		CarelonRx, Inc.	..IN.....	NIA.....	Carelon, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	
.0671	Elevalance Health, Inc.		62-1655574		0001156039		Caremax Pharmacy of Loudon, Inc.	..TN.....	NIA.....	PathWrite, Inc.	Ownership.....	100.000	Elevalance Health, Inc.	..NO.....	

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0787011		0001156039		Caribbean Accountable Care, LLC	..PR	..NIA	MSO of Puerto Rico, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0554720		0001156039		Castellana Physician Services, LLC	..PR	..NIA	IPA Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.	16345	82-1853423		0001156039		CCHA, LLC	..CO	..IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Elevance Health, Inc.	..NO	0101
.0671	Elevance Health, Inc.		66-0695526		0001156039		Centros de Medicina Primaria Advantage del Norte, LLC	..PR	..NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0519243		0001156039		Centros Medicina Familiar del Norte, LLC	..PR	..NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0530940		0001156039		Centros Medicos Unidos del Oeste, LLC	..PR	..NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	..GA	..NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0947829		0001156039		Clinica Todo Salud, LLC	..PR	..NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0947900		0001156039		Clinica Todo Salud-Aibonito, LLC	..PR	..NIA	Clinica Todo Salud, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0964118		0001156039		Clinical Staff Solutions, LLC	..PR	..NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		84-1470861		0001156039		Colorado State Infusion, Inc.	..CO	..NIA	PathWrite, Inc.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		84-4838726		0001156039		Coltello Pharmaceuticals, LLC	..TX	..NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.	14276	45-3358287		0001156039		Community Care Health Plan of Kansas, Inc.	..KS	..IA	Anthem Partnership Holding Company, LLC	Ownership	90.000	Elevance Health, Inc.	..NO	0109
.0671	Elevance Health, Inc.	14064	26-4674149		0001156039		Community Care Health Plan of Louisiana, Inc.	..LA	..IA	Anthem Partnership Holding Company, LLC	Ownership	75.000	Elevance Health, Inc.	..NO	0103
.0671	Elevance Health, Inc.	15951	47-5456872		0001156039		Community Care Health Plan of Nebraska, Inc.	..NE	..IA	Anthem Partnership Holding Company, LLC	Ownership	95.000	Elevance Health, Inc.	..NO	0107
.0671	Elevance Health, Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc.	..NV	..IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.	10345	31-1440175		0001156039		Community Insurance Company	..OH	..IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.	95693	39-1462554		0001156039		CompCare Health Services Insurance Corporation	..WI	..IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0909478		0001156039		Consorcio MultiSalud del Oeste, Inc.	..PR	..NIA	Centros Medicos Unidos del Oeste, LLC	Ownership	81.000	Elevance Health, Inc.	..NO	0102
.0671	Elevance Health, Inc.		20-0334650		0001156039		Crossroads Acquisition Corp.	..DE	..NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		41-1905556		0001156039		DeCare Analytics, LLC	..MN	..NIA	DeCare Dental, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		02-0574609		0001156039		DeCare Dental Health International, LLC	..MN	..NIA	DeCare Dental, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.				0001156039		DeCare Dental Insurance Ireland, Ltd.	..IRL	..NIA	DeCare Dental, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		73-1665525		0001156039		DeCare Dental Networks, LLC	..MN	..NIA	DeCare Dental, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		01-0822645		0001156039		DeCare Dental, LLC	..MN	..NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.				0001156039		DeCare Operations Ireland, Limited	..IRL	..NIA	DeCare Dental, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		20-0660775		0001156039		Delivery Network, LLC	..FL	..NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0948046		0001156039		Dental Services Organization, LLC	..PR	..NIA	Clinica Todo Salud, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		26-2544715		0001156039		Designated Agent Company, Inc.	..KY	..NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		45-3666871		0001156039		Dogwood Pharmacy, LLC	..FL	..NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		27-2844373		0001156039		EasyScripts Cutler Bay, LLC	..FL	..NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		26-2974996		0001156039		EasyScripts Hialeah, LLC	..FL	..NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		30-0478573		0001156039		EasyScripts LLC	..FL	..NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	..FL	..NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		45-2736438		0001156039		Elevance Health Information Technology Services, Inc.	..CA	..NIA	Blue Cross of California	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		35-2145715		0001156039	New York Stock Exchange (NYSE)	Elevance Health, Inc.	..IN	..UIP				Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		99-1735633		0001156039		ELV Holding Company 2, LLC	..IN	..NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		33-1446422		0001156039		ELV Holding Company 3, LLC	..IN	..NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.				0001156039		ELV Holding Company 4, LLC	..IN	..NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		93-3287081		0001156039		ELV Holding Company, LLC	..IN	..NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		66-0616318		0001156039		Farmacia Doral, Inc.	..PR	..NIA	BioPlus Specialty Pharmacy, Inc.	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	..WI	..NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.	10119	41-2128275		0001156039		Freedom Health, Inc.	..FL	..IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.		88-1706818		0001156039		Freedom SPV, LLC	..DE	..NIA	Carelon Holding Company 1, LLC	Ownership	100.000	Elevance Health, Inc.	..NO	
.0671	Elevance Health, Inc.				0001156039		Government Healthcare Solutions LLC	..DE	..NIA	National Government Services, Inc.	Ownership	49.000	Elevance Health, Inc.	..NO	0111

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0671	Elevance Health, Inc.		84-4672692		0001156039		GR Health Solutions LLC	PA	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Elevance Health, Inc.	NO	.0106
.0671	Elevance Health, Inc.	93521	95-3670351		0001156039		Granular Insurance Company	SC	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		92-0268281		0001156039		GranularRe, Inc.	SC	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	.0100
.0671	Elevance Health, Inc.	12812	30-0326654		0001156039		Group Retiree Health Solutions, Inc.	PA	IA	GR Health Solutions LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0695527		0001156039		Grupo Advantage del Oeste, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0927403		0001156039		Grupo Advantage Metro, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		46-4122139		0001156039		HaloCare Specialty Therapeutics, LLC	LA	NIA	Paragon Hemophilia Solutions, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		36-3897701		0001156039		Health Ventures Partner, L.L.C.	IL	NIA	Wellpoint National Services, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-8188236		0001156039		Healthcare Subrogation Group, LLC	DE	NIA	Carelon Insights, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	Wellpoint National Services, Inc.	Ownership	7.490	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		43-1616135		0001156039		HealthLink Administrators, Inc.	MO	NIA	HealthLink, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		43-1364135		0001156039		HealthLink, Inc.	IL	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	10122	20-0982649		0001156039		HealthSun Health Plans, Inc.	FL	IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		46-3434016		0001156039		HealthSun Physicians Network I, LLC	FL	NIA	HealthSun Physicians Network, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		46-5250294		0001156039		HealthSun Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	78972	86-0257201		0001156039		Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3471305		0001156039		Highland Acquisition Holdings, LLC	DE	NIA	Highland Intermediate Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3487249		0001156039		Highland Intermediate Holdings, LLC	DE	NIA	Highland Investor Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	98.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	Wellpoint Corporation	Ownership	2.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95473	84-1017384		0001156039		HMO Colorado, Inc.	CO	IA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95358	37-1216698		0001156039		HMO Missouri, Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		83-2158120		0001156039		IEC Group Holdings, Inc.	ID	NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		82-0497661		0001156039		IEC Group, Inc. d/b/a AmeriBen	ID	NIA	IEC Group Holdings, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0884762		0001156039		InHealth Management, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		90-0213778		0001156039		Innovative Infusions, LLC	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		87-4479408		0001156039		Innovative Pharmacy Services, LLC	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-1866944		0001156039		InSite Therapy Centers, LLC	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0959260		0001156039		IPA Holdings, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-3466504		0001156039		LDNR Pharmacy, Inc.	CA	NIA	Paragon Hemophilia Solutions, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		02-0581429		0001156039		Living Complete Technologies, Inc.	MD	NIA	Carelon Behavioral Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0999240		0001156039		MAPR Capital, LLC	PR	NIA	MAPR Global, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0999355		0001156039		MAPR Global, LLC	PR	NIA	APR, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0999498		0001156039		MAPR Holdings, LLC	PR	NIA	MAPR Capital, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	Carelon Behavioral Health, Inc.	Ownership	50.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	OPTIONS Health Care, Inc.	Ownership	50.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	95527	02-0494919		0001156039		Matthew Thornton Health Plan, Inc.	NH	IA	Anthem Health Plans of New Hampshire, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0823267		0001156039		Medical Dental Network Management, LLC	PR	NIA	MMH Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		05-0616063		0001156039		Medway Infusion Services, LLC	TX	NIA	PathWrite, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	12913	20-5862801		0001156039		Missouri Care, Incorporated	MO	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	11157	66-0588600		0001156039		MMI Healthcare, LLC	PR	IA	MMH Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0649625		0001156039		MMI Holdings, LLC	PR	NIA	MAPR Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	12534	66-0653763		0001156039		MMI Multi Health, LLC	PR	IA	MMH Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-1002779		0001156039		MMI Transportation, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		82-4684953		0001156039		Momentum Health Partners, LLC	NC	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Elevance Health, Inc.	NO	.0105
.0671	Elevance Health, Inc.		66-0645750		0001156039		MSO Holdings, LLC	PR	NIA	MAPR Capital, LLC	Ownership	100.000	Elevance Health, Inc.	NO	

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0719637		0001156039		MSO of Puerto Rico, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		83-0892028		0001156039		Nash Holding Company, LLC	DE	NIA	Carelton Holding Company 1, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		35-1840597		0001156039		National Government Services, Inc.	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		04-2919509		0001156039		New England Research Institute, Inc.	MA	NIA	Carelton Research, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		81-5476630		0001156039		NGS Federal, LLC	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	12259	20-1336412		0001156039		Optimum Healthcare, Inc.	FL	IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		54-1826967		0001156039		OPTIONS Health Care, Inc.	DE	NIA	Carelton Behavioral Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-3280551		0001156039		Paragon Healthcare, Inc.	TX	NIA	PHI Parent LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-4608164		0001156039		Paragon Hemophilia Solutions, Inc.	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		99-1734519		0001156039		Paragon Holding Company, LLC	IN	NIA	ELV Holding Company 2, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		06-1639157		0001156039		Paragon Infusion Care, Inc.	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-5108451		0001156039		Paragon Nutrition Care LLC	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-1991772		0001156039		Pasteur Medical Bird Road, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-2749389		0001156039		Pasteur Medical Center, LLC	DE	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-1366915		0001156039		Pasteur Medical Cutler Bay, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-0610128		0001156039		Pasteur Medical Group, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		37-1668303		0001156039		Pasteur Medical Hialeah Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		47-3464152		0001156039		Pasteur Medical Kendall, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-2810478		0001156039		Pasteur Medical Management, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		33-1217936		0001156039		Pasteur Medical Miami Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		27-2651017		0001156039		Pasteur Medical North Miami Beach, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		26-0813665		0001156039		Pasteur Medical Partners, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		75-2908511		0001156039		PathWrite, Inc.	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		85-1447140		0001156039		PHI Parent LLC	DE	NIA	Paragon Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0693134		0001156039		PHM Healthcare Solutions, Inc.	PR	NIA	Physician Group Practices, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0864220		0001156039		PHM IntraHospital Physician Group, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0811976		0001156039		PHM Multidisciplinary Clinic Aguadilla LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0812014		0001156039		PHM Multidisciplinary Clinic Arecibo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0925853		0001156039		PHM Multidisciplinary Clinic Cabo Rojo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0764408		0001156039		PHM Multidisciplinary Clinic Guayama LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0949111		0001156039		PHM Multidisciplinary Clinic Maunabo LLC	PR	NIA	PHM MultiDisciplinary Clinic, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0859950		0001156039		PHM MultiDisciplinary Clinic, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0867882		0001156039		PHM MultiSalud, LLC	PR	NIA	Physician Group Practices, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0864171		0001156039		PHM Specialty Network, LLC	PR	NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		66-0960976		0001156039		Physician Group Practices, LLC	PR	NIA	IPA Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	12178	66-0592131		0001156039		PMC Medicare Choice, LLC	PR	IA	MMH Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		47-5139459		0001156039		Raina Rx LLC	NY	NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		47-0851593		0001156039		RightCHOICE Managed Care, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-3667026		0001156039		River Medical Pharmacy, LLC	FL	NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
							Rocky Mountain Hospital and Medical Service, Inc.	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	11011	84-0747736		0001156039		RSV 002B LTSS, Inc.	DE	NIA	Carebridge Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		46-2787212		0001156039		Santa Barbara Specialty Pharmacy, LLC	CA	NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		20-0473316		0001156039		SellCore, Inc.	DE	NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.	13726	27-0945036		0001156039		Simply Healthcare Plans, Inc.	FL	IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		55-0712302		0001156039		Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.		45-4071004		0001156039		State Sponsored Services, Inc.	IN	NIA	Wellpoint Specialty Services, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	
.0671	Elevance Health, Inc.				0001156039		The 4600 Group Holdings, LLC	CA	NIA	Carelton Insights, Inc.	Ownership	100.000	Elevance Health, Inc.	NO	

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0671	Elevalance Health, Inc.				0001156039		The 4600 Group, LLC	CA	NIA	The 4600 Group Holdings, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		45-5443372		0001156039		The Elevalance Health Companies of California, Inc.	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		66-1002717		0001156039		The Elevalance Health Companies of Puerto Rico, LLC	PR	NIA	MMH Holdings, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		35-1835818		0001156039		The Elevalance Health Companies, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		85-3592292		0001156039		TriADD NY, LLC dba MyCompass	NY	NIA	Alliance Care Management, LLC	Ownership	25.000	Elevalance Health, Inc.	NO	0108
.0671	Elevalance Health, Inc.		66-0865037		0001156039		VITA CARE, LLC	PR	NIA	MSO Holdings, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		20-0660563		0001156039		WellMax Health Medical Centers, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		20-0660644		0001156039		WellMax Health Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		20-4405193		0001156039		WellPoint Acquisition, LLC	IN	NIA	Elevalance Health, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		95-4640531		0001156039		WellPoint California Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		54-1739323		0001156039		Wellpoint Corporation	DE	UDP	ATH Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		82-1800037		0001156039		Wellpoint Delaware, Inc.	DE	NIA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		95-4657170		0001156039		WellPoint Dental Services, Inc.	DE	NIA	Wellpoint Specialty Services, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	16168	81-4131800		0001156039		Wellpoint District of Columbia, Inc.	DC	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		47-2546820		0001156039		Wellpoint Federal Corporation	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	10767	13-4212818		0001156039		Wellpoint Health Plans, Inc.	OH	RE	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		81-2874917		0001156039		WellPoint Health Solutions, Inc.	DE	NIA	Federal Government Solutions, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		20-3620996		0001156039		WellPoint Holding Corp	DE	NIA	Elevalance Health, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		36-3899137		0001156039		Wellpoint Illinois Services, Inc.	IL	NIA	Wellpoint National Services, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	14078	45-2485907		0001156039		Wellpoint Insurance Company	TX	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		36-4595641		0001156039		WellPoint Insurance Services, Inc.	HI	IA	Elevalance Health, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	0100
.0671	Elevalance Health, Inc.	15807	47-3863197		0001156039		Wellpoint Iowa, Inc.	IA	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		45-4985009		0001156039		WellPoint IPA Holding Company, LLC	IN	NIA	Carelon Holding Company 1, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		52-0913817		0001156039		Wellpoint IPA of New York, LLC	NY	NIA	Wellpoint IPA Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	80314	52-0913817		0001156039		Wellpoint Life and Health Insurance Company	IN	IA	Wellpoint National Services, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	95832	51-0387398		0001156039		Wellpoint Maryland, Inc.	MD	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		95-4635507		0001156039		Wellpoint National Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	95373	22-3375292		0001156039		Wellpoint New Jersey, Inc.	NJ	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	12354	20-2073598		0001156039		WellPoint New Mexico, Inc.	NM	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	15295	45-3956774		0001156039		Wellpoint of NY, LLC	NY	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	0100
.0671	Elevalance Health, Inc.		36-3897080		0001156039		Wellpoint Partnership Plan, LLC	IL	NIA	Health Ventures Partner, L.L.C.	Ownership	75.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		36-3897080		0001156039		Wellpoint Partnership Plan, LLC	IL	NIA	Wellpoint Illinois Services, Inc.	Ownership	25.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	17519	92-3489706		0001156039		Wellpoint South Carolina, Inc.	SC	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		77-0494551		0001156039		Wellpoint Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	12941	20-4776597		0001156039		Wellpoint Tennessee, Inc.	TN	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	95314	75-2603231		0001156039		Wellpoint Texas, Inc.	TX	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	14073	27-3510384		0001156039		Wellpoint Washington, Inc.	WA	IA	Wellpoint Corporation	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.	11810	84-1620480		0001156039		Wellpoint West Virginia, Inc.	WV	IA	Wellpoint National Services, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		84-1316462		0001156039		WestCare, Inc.	CO	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	
.0671	Elevalance Health, Inc.		26-4814272		0001156039		XCEL Reimbursement Solutions, LLC	TX	NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevalance Health, Inc.	NO	

Asterisk	Explanation
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STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

0101	CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC, a non-affiliate.
0102	Owned 81% by Centros Medicos Unidos del Oeste, LLC, 13% by Asociacion de Medicos del Oeste, Inc. (a non-affiliate) and 6% by Doctores Asociados del Noroeste, Inc. (a non-affiliate).
0103	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 (a non-affiliate).
0104	AMH Health, LLC is a joint venture 64% owned by Anthem Partnership Holding Company, LLC and 36% by MaineHealth, a non-affiliate.
0105	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, a non-affiliate.
0106	GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC, a non-affiliate.
0107	Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, a non-affiliate.
0108	TriadDD NY, LLC dba MyCompass (NY) is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.
0109	Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross and Blue Shield of Kansas (a non-affiliate), and 5% owned by Blue Cross and Blue Shield of Kansas City, a non-affiliate.
0110	APC Passe, LLC is 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by the Arkansas Provider Coalition, LLC, which is not affiliated with Anthem, Inc.
0111	Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)
0112	Best Transportation of PR, LLC is a joint venture 51% owned by MMM Transportation, LLC and 49% owned by a non-affiliate.

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

AUGUST FILING

2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
--	-----

Explanation:

1.

Bar Code:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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 paid 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, depreciation and proportional amortization		
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	1,327,754	16,298,316
2. Cost of bonds and stocks acquired	14,999,688	561,025
3. Accrual of discount	31,070	(358,844)
4. Unrealized valuation increase/(decrease)	480	
5. Total gain (loss) on disposals	0	1,455,792
6. Deduct consideration for bonds and stocks disposed of	300,000	16,610,185
7. Deduct amortization of premium	167,821	18,351
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	15,891,170	1,327,754
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	15,891,170	1,327,754

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

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
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	1,327,754	8,249,634	300,000	(138,199)	9,139,189	0	0	1,327,754
2. NAIC 2 (a)	0	6,000,084	0	1,448	6,001,532	0	0	0
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total ICO	1,327,754	14,249,718	300,000	(136,751)	15,140,721	0	0	1,327,754
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total ABS	0	0	0	0	0	0	0	0
PREFERRED STOCK								
15. NAIC 1	0	0	0	0	0	0	0	0
16. NAIC 2	0	0	0	0	0	0	0	0
17. NAIC 3	0	0	0	0	0	0	0	0
18. NAIC 4	0	0	0	0	0	0	0	0
19. NAIC 5	0	0	0	0	0	0	0	0
20. NAIC 6	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	1,327,754	14,249,718	300,000	(136,751)	15,140,721	0	0	1,327,754

(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 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 ; NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

S102

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	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of cash equivalents acquired	10,021,295	20,508,800
3. Accrual of discount	0	0
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	10,000,050	20,508,800
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	21,245	0
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	21,245	0

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

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

NONE

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

NONE

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

NONE

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

NONE

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stocks Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
46090A-88-7	INVESCO ULTR SH DUR	03/31/2026	Bank of America Securities	0.000	749,958	0	0	2.B
464287-45-7	ISHARES:1-3 TRS BD ETF	03/31/2026	Bank of America Securities	0.000	749,961	0	0	1.A
464288-63-8	ISHARES:5-10 IG CORP BD	03/31/2026	Bank of America Securities	0.000	749,949	0	0	2.A
464288-64-6	ISHARES:1-5 IG CORP BD	03/31/2026	Bank of America Securities	0.000	749,988	0	0	2.A
464288-67-9	ISHARES:0-1 Y TRS BD	03/31/2026	Unknown	0.000	749,930	0	0	1.A
464298-65-5	ISHARES:FLOATING RT BOND	03/31/2026	Unknown	0.000	749,975	0	0	1.F
46434V-86-0	ISHARES:TR FL RATE BOND	03/31/2026	Bank of America Securities	0.000	749,936	0	0	1.A
46434V-87-8	ISHARES:ULTRA SD BD ACT	03/31/2026	Unknown	0.000	749,992	0	0	1.G
46435U-51-5	ISHARES:1BD DEC2028T CRP	03/31/2026	Bank of America Securities	0.000	749,980	0	0	2.B
46436E-71-8	ISHARES:0-3 MONTH TRS BD	03/31/2026	Unknown	0.000	750,010	0	0	1.A
466410-83-7	JPMORGAN:ULTRA-SHORT INC	03/31/2026	Bank of America Securities	0.000	749,951	0	0	1.G
69344A-10-7	PGIM ULTRA SHORT BOND	03/31/2026	Unknown	0.000	749,943	0	0	1.F
72201R-83-3	PIMCO ETF:ENH SM ACT ETF	03/31/2026	Unknown	0.000	749,865	0	0	2.A
78464A-37-5	SS SPDR PTF 1T CORP BOND	03/31/2026	Bank of America Securities	0.000	749,986	0	0	2.A
78464A-47-4	SS SPDR PTF ST CORP BOND	03/31/2026	Bank of America Securities	0.000	750,184	0	0	2.A
78468R-20-0	SS SPDR BBG IG FLTNG RT	03/31/2026	Bank of America Securities	0.000	749,989	0	0	1.F
78468R-66-3	SS SPDR BBG 1-3 MO T-BLL	03/31/2026	Bank of America Securities	0.000	749,942	0	0	1.F
92189H-74-8	VANECK:CLO	03/31/2026	Bank of America Securities	0.000	750,007	0	0	1.F
92206C-40-9	VANGUARD ST CORP BD ETF	03/31/2026	Bank of America Securities	0.000	750,174	0	0	2.A
0159999999	Subtotal - issuer credit obligations - SVO-identified bond exchange traded funds - systematic value				14,249,718	0	0	XXX
0489999999	Total - issuer credit obligations (unaffiliated)				14,249,718	0	0	XXX
0499999999	Total - issuer credit obligations (affiliated)				0	0	0	XXX
0509999997	Total - issuer credit obligations - Part 3				14,249,718	0	0	XXX
0509999998	Total - issuer credit obligations - Part 5				XXX	XXX	XXX	XXX
0509999999	Total - issuer credit obligations				14,249,718	0	0	XXX
1889999999	Total - asset-backed securities (unaffiliated)				0	0	0	XXX
1899999999	Total - asset-backed securities (affiliated)				0	0	0	XXX
1909999997	Total - asset-backed securities - Part 3				0	0	0	XXX
1909999998	Total - asset-backed securities - Part 5				XXX	XXX	XXX	XXX
1909999999	Total - asset-backed securities				0	0	0	XXX
2009999999	Total - issuer credit obligations and asset-backed securities				14,249,718	0	0	XXX
4509999997	Total - preferred stocks - Part 3				0	XXX	0	XXX
4509999998	Total - preferred stocks - Part 5				XXX	XXX	XXX	XXX
4509999999	Total - preferred stocks				0	XXX	0	XXX
46431W-50-7	ISHARES:SH DUR BD ACT	03/31/2026	Bank of America Securities	14,761.000	749,970	0	0	
5819999999	Subtotal - common stocks - exchange traded funds				749,970	XXX	0	XXX
5989999997	Total - common stocks - Part 3				749,970	XXX	0	XXX
5989999998	Total - common stocks - Part 5				XXX	XXX	XXX	XXX
5989999999	Total - common stocks				749,970	XXX	0	XXX
5999999999	Total - preferred and common stocks				749,970	XXX	0	XXX
6009999999	Totals				14,999,688	XXX	0	XXX

E04

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21
									10	11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Other Than Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
..796253-5K-4	SAN ANTONIO TEX ELEC & GAS REV	02/01/2026	Maturity @ 100.00	300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	02/01/2026	1.D FE
0059999999	Subtotal - issuer credit obligations - municipal bonds - special revenue			300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX
0489999999	Total - issuer credit obligations (unaffiliated)			300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX
0499999999	Total - issuer credit obligations (affiliated)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997	Total - issuer credit obligations - Part 4			300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX
0509999998	Total - issuer credit obligations - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999	Total - issuer credit obligations			300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX
1889999999	Total - asset-backed securities (unaffiliated)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1899999999	Total - asset-backed securities (affiliated)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999997	Total - asset-backed securities - Part 4			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999998	Total - asset-backed securities - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1909999999	Total - asset-backed securities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
2009999999	Total - issuer credit obligations and asset-backed securities			300,000	300,000	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX
4509999997	Total - preferred stocks - Part 4			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998	Total - preferred stocks - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999	Total - preferred stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997	Total - common stocks - Part 4			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998	Total - common stocks - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999	Total - common stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999	Total - preferred and common stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999	Totals			300,000	XXX	300,000	354,354	300,637	0	(637)	0	(637)	0	300,000	0	0	0	7,500	XXX	XXX

EOS

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

STATEMENT AS OF MARCH 31, 2026 OF THE Wellpoint Health Plans, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Restricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0489999999. Total - issuer credit obligations (unaffiliated)						0	0	0
0499999999. Total - issuer credit obligations (affiliated)						0	0	0
0509999999. Total - issuer credit obligations						0	0	0
31846V-23-7	FIRST AMER:GVT OBLG P		01/30/2026	3.570		0	29,379	0
31846V-56-7	FIRST AMER:GVT OBLG Z	SD	03/02/2026	3.530		8,750	25	0
94975P-40-5	ALLSPRING:GOVT MM I	SD	03/02/2026	3.530		12,495	38	45
8309999999. Subtotal - all other money market mutual funds						21,245	29,442	45
8589999999. Total cash equivalents (unaffiliated)						21,245	29,442	45
8599999999. Total cash equivalents (affiliated)						0	0	0
8609999999 - Total cash equivalents						21,245	29,442	45