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HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

UnitedHealthcare of the Midlands, Inc.

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

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

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

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

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

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

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

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

Internet Website Address www.uhc.com

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

OFFICERS

Chief Executive Officer, President, and Chair: Jeffrey Scott Stafford
Treasurer: Peter Marshall Gill
Secretary: Alexander McCarthy Miskella #
Chief Financial Officer and Vice President: James Stevenson Elliston

OTHER

Heather Anastasia Lang, Assistant Secretary
Nyle Brent Cottington, Vice President
Robert Andersen Broomfield, President, Commercial

DIRECTORS OR TRUSTEES

Robert Andersen Broomfield
Gloria Margaret Sargent
Jeffrey Scott Stafford

State of Nebraska
County of Douglas

State of
County of

State of
County of

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Jeffrey Scott Stafford
Chief Executive Officer, President, and Chair

Alexander McCarthy Miskella
Secretary

Peter Marshall Gill
Treasurer

Subscribed and sworn to before me this 22nd day of January, 2024

Subscribed and sworn to before me this _____ day of _____

Subscribed and sworn to before me this _____ day of _____

GENERAL NOTARY - State of Nebraska
HEENA CHAUDHARY
My Comm. Exp. January 7, 2025

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

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Robert Andersen Broomfield, President, Commercial

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Gloria Margaret Sargent
Jeffrey Scott Stafford

State of
County of

State of Wisconsin
County of Brown

State of
County of

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Jeffrey Scott Stafford
Chief Executive Officer, President, and Chair

Alexander McCarthy Miskella
Secretary

Peter Marshall Gill
Treasurer

Subscribed and sworn to before me this
day of

Subscribed and sworn to before me this
10 day of JAN 2024
Jamie Smith

Subscribed and sworn to before me this
day of

JAMIE SMITH NOTARY PUBLIC STATE OF WISCONSIN

a. Is this an original filing?..... Yes [X] No [ ]
b. If no,
1. State the amendment number.....
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State of Minnesota
County of Hennepin

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Jeffrey Scott Stafford
Chief Executive Officer, President, and Chair

Alexander McCarthy Miskella
Secretary

Peter Marshall Gill
Treasurer

Subscribed and sworn to before me this
day of

Subscribed and sworn to before me this
day of

Subscribed and sworn to before me this
22nd day of January 2024

a. Is this an original filing?..... Yes [X] No [ ]
b. If no,
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3. Number of pages attached.....

INGRID RICKBERG
NOTARY PUBLIC
MINNESOTA
My Commission Expires Jan. 31, 2028

ASSETS

		Current Year			Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)	910,194,073	0	910,194,073	691,288,408
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less $ 0 encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less $ 0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less $ 0 encumbrances)	0	0	0	0
5.	Cash ($ 364,834 , Schedule E - Part 1), cash equivalents ($ 243,607,779 , Schedule E - Part 2) and short-term investments ($ 0 , Schedule DA)	243,972,613	0	243,972,613	296,979,224
6.	Contract loans, (including $ 0 premium notes)	0	0	0	0
7.	Derivatives (Schedule DB)	0	0	0	0
8.	Other invested assets (Schedule BA)	1,793,269	0	1,793,269	0
9.	Receivables for securities	0	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	1,155,959,955	0	1,155,959,955	988,267,632
13.	Title plants less $ 0 charged off (for Title insurers only)	0	0	0	0
14.	Investment income due and accrued	7,124,595	0	7,124,595	5,561,813
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	25,814,803	677,524	25,137,279	47,724,900
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ 0 earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums ($ 2,406,254) and contracts subject to redetermination ($ 272,045,083)	274,451,337	0	274,451,337	221,583,901
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	45,396,898	50,690	45,346,208	30,210,691
18.1	Current federal and foreign income tax recoverable and interest thereon	9,012,656	0	9,012,656	13,498,179
18.2	Net deferred tax asset	6,856,946	0	6,856,946	5,036,449
19.	Guaranty funds receivable or on deposit	0	0	0	0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets ($ 0)	0	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23.	Receivables from parent, subsidiaries and affiliates	23,752,292	0	23,752,292	0
24.	Health care ($ 186,353,369) and other amounts receivable	208,487,253	22,133,884	186,353,369	147,748,546
25.	Aggregate write-ins for other than invested assets	556,203	809	555,394	6,048,943
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	1,757,412,938	22,862,907	1,734,550,031	1,465,681,054
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	1,757,412,938	22,862,907	1,734,550,031	1,465,681,054
	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 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	State income tax recoverable	555,394	0	555,394	6,048,943
2502.	Miscellaneous receivables	805	805	0	0
2503.	Prepaid commissions	4	4	0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	556,203	809	555,394	6,048,943

LIABILITIES, CAPITAL AND SURPLUS

		Current Year			Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less $ 0 reinsurance ceded)	561,154,893	0	561,154,893	523,135,870
2.	Accrued medical incentive pool and bonus amounts	75,681,256	0	75,681,256	63,609,995
3.	Unpaid claims adjustment expenses	4,326,038	0	4,326,038	4,126,162
4.	Aggregate health policy reserves, including the liability of $ 19,273,654 for medical loss ratio rebate per the Public Health Service Act	192,918,683	0	192,918,683	172,021,462
5.	Aggregate life policy reserves	0	0	0	0
6.	Property/casualty unearned premium reserves	0	0	0	0
7.	Aggregate health claim reserves	1,523,366	0	1,523,366	1,166,912
8.	Premiums received in advance	12,425,401	0	12,425,401	498,982
9.	General expenses due or accrued	15,081,464	0	15,081,464	20,739,372
10.1	Current federal and foreign income tax payable and interest thereon (including $ 0 on realized capital gains (losses))	0	0	0	0
10.2	Net deferred tax liability	0	0	0	0
11.	Ceded reinsurance premiums payable	2,121,459	0	2,121,459	1,862,181
12.	Amounts withheld or retained for the account of others	0	0	0	0
13.	Remittances and items not allocated	97,127	0	97,127	49,503
14.	Borrowed money (including $ 0 current) and interest thereon $ 0 (including $ 0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates	0	0	0	2,878,370
16.	Derivatives	0	0	0	0
17.	Payable for securities	8,316,929	0	8,316,929	2,350,364
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties (with $ 0 authorized reinsurers, $ 0 unauthorized reinsurers and $ 0 certified reinsurers)	0	0	0	0
20.	Reinsurance in unauthorized and certified ($ 0) companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22.	Liability for amounts held under uninsured plans	107,335,006	0	107,335,006	101,866,728
23.	Aggregate write-ins for other liabilities (including $ 2,422 current)	2,422	0	2,422	889,629
24.	Total liabilities (Lines 1 to 23)	980,984,044	0	980,984,044	895,195,530
25.	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26.	Common capital stock	XXX	XXX	100,000	100,000
27.	Preferred capital stock	XXX	XXX	0	0
28.	Gross paid in and contributed surplus	XXX	XXX	61,100,000	61,100,000
29.	Surplus notes	XXX	XXX	0	0
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31.	Unassigned funds (surplus)	XXX	XXX	692,365,987	509,285,524
32.	Less treasury stock, at cost:				
	32.1 0 shares common (value included in Line 26 $ 0)	XXX	XXX	0	0
	32.2 0 shares preferred (value included in Line 27 $ 0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	753,565,987	570,485,524
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	1,734,550,031	1,465,681,054
	DETAILS OF WRITE-INS				
2301.	Unclaimed property	2,422	0	2,422	801
2302.	Deposits payable	0	0	0	888,828
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	2,422	0	2,422	889,629
2501.		XXX	XXX		
2502.		XXX	XXX		
2503.		XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.		XXX	XXX		
3002.		XXX	XXX		
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099.	Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current Year		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months	XXX	6,062,233	5,595,473
2.	Net premium income (including $ 0 non-health premium income)	XXX	6,542,016,519	5,715,571,705
3.	Change in unearned premium reserves and reserve for rate credits	XXX	(27,486,012)	(106,739,153)
4.	Fee-for-service (net of $ 0 medical expenses)	XXX	0	0
5.	Risk revenue	XXX	0	0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0
8.	Total revenues (Lines 2 to 7)	XXX	6,514,530,507	5,608,832,552
	Hospital and Medical:			
9.	Hospital/medical benefits	0	4,751,307,884	4,058,394,986
10.	Other professional services	0	126,481,511	84,603,727
11.	Outside referrals	0	0	0
12.	Emergency room and out-of-area	0	0	0
13.	Prescription drugs	0	457,401,263	406,689,512
14.	Aggregate write-ins for other hospital and medical	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts	0	113,757,702	103,557,310
16.	Subtotal (Lines 9 to 15)	0	5,448,948,360	4,653,245,535
	Less:			
17.	Net reinsurance recoveries	0	0	0
18.	Total hospital and medical (Lines 16 minus 17)	0	5,448,948,360	4,653,245,535
19.	Non-health claims (net)	0	0	0
20.	Claims adjustment expenses, including $ 143,698,646 cost containment expenses	0	191,734,614	185,153,696
21.	General administrative expenses	0	436,875,506	401,922,570
22.	Increase in reserves for life and accident and health contracts (including $ 0 increase in reserves for life only)	0	0	0
23.	Total underwriting deductions (Lines 18 through 22)	0	6,077,558,480	5,240,321,801
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	436,972,027	368,510,751
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	0	56,288,631	27,157,414
26.	Net realized capital gains (losses) less capital gains tax of $ 816,453	0	3,071,418	(127,804)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	59,360,049	27,029,610
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $ 228,738) (amount charged off $ (1,050,083))]	0	(821,345)	(673,488)
29.	Aggregate write-ins for other income or expenses	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	495,510,731	394,866,873
31.	Federal and foreign income taxes incurred	XXX	103,332,891	82,862,795
32.	Net income (loss) (Lines 30 minus 31)	XXX	392,177,840	312,004,078
	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
0699.	Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.		XXX		
0702.		XXX		
0703		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799.	Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.				
2902.				
2903				
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	570,485,524	458,773,491
34.	Net income or (loss) from Line 32	392,177,840	312,004,078
35.	Change in valuation basis of aggregate policy and claim reserves	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $ 0	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0
38.	Change in net deferred income tax	1,820,497	2,014,755
39.	Change in nonadmitted assets	(5,917,874)	(7,406,800)
40	Change in unauthorized and certified reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles	0	0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus	0	0
45.	Surplus adjustments:		
	45.1 Paid in	0	0
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital	0	0
46.	Dividends to stockholders	(205,000,000)	(194,900,000)
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	183,080,463	111,712,033
49.	Capital and surplus end of reporting period (Line 33 plus 48)	753,565,987	570,485,524
	DETAILS OF WRITE-INS		
4701.			
4702.			
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

		1 Current Year	2 Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	6,517,222,844	5,615,444,272
2.	Net investment income	57,217,379	29,110,061
3.	Miscellaneous income	0	0
4.	Total (Lines 1 through 3)	6,574,440,223	5,644,554,333
5.	Benefit and loss related payments	5,442,918,277	4,517,675,693
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	639,122,843	519,378,143
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of $ 0 tax on capital gains (losses)	99,663,821	80,829,750
10.	Total (Lines 5 through 9)	6,181,704,941	5,117,883,586
11.	Net cash from operations (Line 4 minus Line 10)	392,735,282	526,670,747
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	208,966,529	74,009,851
	12.2 Stocks	0	0
	12.3 Mortgage loans	0	0
	12.4 Real estate	0	0
	12.5 Other invested assets	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	2,284	0
	12.7 Miscellaneous proceeds	5,966,565	2,350,364
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	214,935,378	76,360,215
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	426,170,185	197,628,367
	13.2 Stocks	0	0
	13.3 Mortgage loans	0	0
	13.4 Real estate	0	0
	13.5 Other invested assets	2,034,861	0
	13.6 Miscellaneous applications	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	428,205,046	197,628,367
14.	Net increase/(decrease) in contract loans and premium notes	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(213,269,668)	(121,268,152)
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	205,000,000	194,900,000
	16.6 Other cash provided (applied)	(27,472,225)	5,100,261
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(232,472,225)	(189,799,739)
	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)	(53,006,611)	215,602,856
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	296,979,224	81,376,368
	19.2 End of year (Line 18 plus Line 19.1)	243,972,613	296,979,224

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

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
			2	3				Federal Employees Health							
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1.	Net premium income	6,542,016,519	33,661,713	4,373,921	0	0	0	0	5,654,929,801	849,051,084	0	0	0	0	0
2.	Change in unearned premium reserves and reserve for rate credit	(27,486,012)	131,288	(62,974)	0	0	0	0	(17,598,664)	(9,955,662)	0	0	0	0	0
3.	Fee-for-service (net of $ 0 medical expenses)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4.	Risk revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6.	Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7.	Total revenues (Lines 1 to 6)	6,514,530,507	33,793,001	4,310,947	0	0	0	0	5,637,331,137	839,095,422	0	0	0	0	0
8.	Hospital/medical benefits	4,751,307,884	24,258,406	2,386,495	0	0	0	0	4,130,502,423	594,160,560	0	0	0	0	XXX
9.	Other professional services	126,481,511	71,935	536	0	0	0	0	123,162,006	3,247,034	0	0	0	0	XXX
10.	Outside referrals	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11.	Emergency room and out-of-area	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12.	Prescription drugs	457,401,263	6,146,141	310,727	0	0	0	0	266,170,179	184,774,216	0	0	0	0	XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	113,757,702	0	(10,015)	0	0	0	0	107,359,017	6,408,700	0	0	0	0	XXX
15.	Subtotal (Lines 8 to 14)	5,448,948,360	30,476,482	2,687,743	0	0	0	0	4,627,193,625	788,590,510	0	0	0	0	XXX
16.	Net reinsurance recoveries	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
17.	Total medical and hospital (Lines 15 minus 16)	5,448,948,360	30,476,482	2,687,743	0	0	0	0	4,627,193,625	788,590,510	0	0	0	0	XXX
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19.	Claims adjustment expenses including $ 143,698,646 cost containment expenses	191,734,614	986,564	128,192	0	0	0	0	165,735,714	24,884,144	0	0	0	0	0
20.	General administrative expenses	436,875,506	2,247,927	292,090	0	0	0	0	377,635,904	56,699,585	0	0	0	0	0
21.	Increase in reserves for accident and health contracts	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23.	Total underwriting deductions (Lines 17 to 22)	6,077,558,480	33,710,973	3,108,025	0	0	0	0	5,170,565,243	870,174,239	0	0	0	0	0
24.	Net underwriting gain or (loss) (Line 7 minus Line 23)	436,972,027	82,028	1,202,922	0	0	0	0	466,765,894	(31,078,817)	0	0	0	0	0
	DETAILS OF WRITE-INS														
0501.															XXX
0502.															XXX
0503.															XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.															XXX
1302.															XXX
1303.															XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1.	Comprehensive (hospital and medical) individual	33,796,860	0	135,147	33,661,713
2.	Comprehensive (hospital and medical) group	4,392,330	0	18,409	4,373,921
3.	Medicare Supplement	0	0	0	0
4.	Vision only	0	0	0	0
5.	Dental only	0	0	0	0
6.	Federal Employees Health Benefits Plan	0	0	0	0
7.	Title XVIII - Medicare	5,677,554,451	0	22,624,650	5,654,929,801
8.	Title XIX - Medicaid	852,405,929	0	3,354,845	849,051,084
9.	Credit A&H	0	0	0	0
10.	Disability Income	0	0	0	0
11.	Long-Term Care	0	0	0	0
12.	Other health	0	0	0	0
13.	Health subtotal (Lines 1 through 12)	6,568,149,570	0	26,133,051	6,542,016,519
14.	Life	0	0	0	0
15.	Property/casualty	0	0	0	0
16.	Totals (Lines 13 to 15)	6,568,149,570	0	26,133,051	6,542,016,519

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	5,341,231,837	30,148,854	2,978,830	0	0	0	0	4,526,642,611	781,461,542	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	5,341,231,837	30,148,854	2,978,830	0	0	0	0	4,526,642,611	781,461,542	0	0	0	0	0
2. Paid medical incentive pools and bonuses	101,686,442	0	1,541	0	0	0	0	100,177,915	1,506,986	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	561,154,893	1,449,816	435,893	0	0	0	0	486,189,207	73,079,977	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	561,154,893	1,449,816	435,893	0	0	0	0	486,189,207	73,079,977	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	1,523,366	10,543	0	0	0	0	0	889,099	623,724	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	1,523,366	10,543	0	0	0	0	0	889,099	623,724	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	75,681,256	0	8,616	0	0	0	0	64,520,082	11,152,558	0	0	0	0	0
6. Net health care receivables (a)	44,416,657	24,668	(2,677)	0	0	0	0	44,334,686	59,980	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	523,135,870	0	719,642	0	0	0	0	448,908,499	73,507,729	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net	523,135,870	0	719,642	0	0	0	0	448,908,499	73,507,729	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	1,166,912	0	0	0	0	0	0	643,124	523,788	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.4 Net	1,166,912	0	0	0	0	0	0	643,124	523,788	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	63,609,995	0	20,172	0	0	0	0	57,338,979	6,250,844	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:														
12.1 Direct	5,335,190,657	31,584,545	2,697,758	0	0	0	0	4,519,834,608	781,073,746	0	0	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.4 Net	5,335,190,657	31,584,545	2,697,758	0	0	0	0	4,519,834,608	781,073,746	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	113,757,703	0	(10,015)	0	0	0	0	107,359,018	6,408,700	0	0	0	0	0

(a) Excludes $ 1,980 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	282,698,894	195,839	75,928	0	0	0	0	273,884,590	8,542,537	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	282,698,894	195,839	75,928	0	0	0	0	273,884,590	8,542,537	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct	272,950,000	1,253,977	359,965	0	0	0	0	206,802,005	64,534,053	0	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Net	272,950,000	1,253,977	359,965	0	0	0	0	206,802,005	64,534,053	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	5,505,999	0	0	0	0	0	0	5,502,612	3,387	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	5,505,999	0	0	0	0	0	0	5,502,612	3,387	0	0	0	0	0
4. TOTALS:														
4.1 Direct	561,154,893	1,449,816	435,893	0	0	0	0	486,189,207	73,079,977	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	561,154,893	1,449,816	435,893	0	0	0	0	486,189,207	73,079,977	0	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

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

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual	1,318,926	28,829,928	33,902	1,426,457	1,352,828	0
2. Comprehensive (hospital and medical) group	329,391	2,649,439	19,294	416,599	348,685	719,642
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	269,074,141	4,257,568,468	7,663,271	479,415,036	276,737,412	449,551,624
8 Title XIX - Medicaid	63,122,901	718,338,641	7,244,950	66,458,751	70,367,851	74,031,516
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)	333,845,359	5,007,386,476	14,961,417	547,716,843	348,806,776	524,302,782
14. Health care receivables (a)	5,842,831	186,460,361	0	16,182,081	5,842,831	164,068,618
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	57,861,123	43,825,318	4,335,227	71,346,029	62,196,350	63,609,995
17. Totals (Lines 13 - 14 + 15 + 16)	385,863,651	4,864,751,433	19,296,644	602,880,791	405,160,295	423,844,159

(a) Excludes $ 1,980 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

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

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	385	366	364	355	352
2. 2019	5,884	6,269	6,269	6,269	6,268
3. 2020	XXX	8,548	8,567	8,573	8,580
4. 2021	XXX	XXX	5,609	6,697	6,723
5. 2022	XXX	XXX	XXX	3,549	5,170
6. 2023	XXX	XXX	XXX	XXX	31,481

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

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	421	366	364	355	352
2. 2019	6,645	6,311	6,269	6,269	6,268
3. 2020	XXX	9,765	8,621	8,573	8,580
4. 2021	XXX	XXX	6,852	6,764	6,723
5. 2022	XXX	XXX	XXX	4,222	5,226
6. 2023	XXX	XXX	XXX	XXX	33,330

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2019	8,030	6,268	297	4.7	6,565	81.8	0	0	6,565	81.8
2. 2020	17,601	8,580	339	4.0	8,919	50.7	0	0	8,919	50.7
3. 2021	8,036	6,723	289	4.3	7,012	87.3	0	0	7,012	87.3
4. 2022	5,982	5,170	280	5.4	5,450	91.1	55	0	5,505	92.0
5. 2023	38,104	31,481	969	3.1	32,450	85.2	1,849	15	34,314	90.1

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	197,315	194,761	193,679	192,818	192,760
2. 2019	2,305,712	2,543,798	2,542,442	2,541,836	2,541,417
3. 2020	XXX	2,188,206	2,444,473	2,443,891	2,443,428
4. 2021	XXX	XXX	2,321,680	2,525,720	2,528,768
5. 2022	XXX	XXX	XXX	3,573,076	3,896,816
6. 2023	XXX	XXX	XXX	XXX	4,300,973

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	212,657	194,761	193,679	192,818	192,760
2. 2019	2,669,837	2,552,885	2,542,442	2,541,836	2,541,417
3. 2020	XXX	2,556,612	2,446,915	2,443,891	2,443,428
4. 2021	XXX	XXX	2,634,620	2,532,608	2,528,768
5. 2022	XXX	XXX	XXX	4,073,078	3,904,637
6. 2023	XXX	XXX	XXX	XXX	4,844,750

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2019	3,113,146	2,541,417	116,885	4.6	2,658,302	85.4	0	0	2,658,302	85.4
2. 2020	3,033,765	2,443,428	106,394	4.4	2,549,822	84.0	0	0	2,549,822	84.0
3. 2021	3,074,522	2,528,768	105,046	4.2	2,633,814	85.7	0	0	2,633,814	85.7
4. 2022	4,803,256	3,896,816	156,553	4.0	4,053,369	84.4	7,821	61	4,061,251	84.6
5. 2023	5,637,331	4,300,973	144,273	3.4	4,445,246	78.9	543,778	3,730	4,992,754	88.6

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	31,726	34,082	34,268	34,095	34,088
2. 2019	364,093	390,474	393,051	395,671	395,015
3. 2020	XXX	383,254	420,333	424,161	425,788
4. 2021	XXX	XXX	555,430	599,357	602,572
5. 2022	XXX	XXX	XXX	687,771	747,802
6. 2023	XXX	XXX	XXX	XXX	718,759

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	36,838	34,082	34,268	34,095	34,088
2. 2019	400,324	394,023	393,051	395,671	395,015
3. 2020	XXX	431,098	428,846	424,161	425,788
4. 2021	XXX	XXX	607,116	606,503	602,572
5. 2022	XXX	XXX	XXX	760,907	759,222
6. 2023	XXX	XXX	XXX	XXX	792,195

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2019	448,737	395,015	21,262	5.4	416,277	92.8	0	0	416,277	92.8
2. 2020	489,792	425,788	23,771	5.6	449,559	91.8	0	0	449,559	91.8
3. 2021	689,789	602,572	34,227	5.7	636,799	92.3	0	0	636,799	92.3
4. 2022	799,595	747,802	28,979	3.9	776,781	97.1	11,420	70	788,271	98.6
5. 2023	839,096	718,759	21,611	3.0	740,370	88.2	73,436	450	814,256	97.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	229,426	229,209	228,311	227,268	227,200
2. 2019	2,675,689	2,940,541	2,941,762	2,943,776	2,942,700
3. 2020	XXX	2,580,008	2,873,373	2,876,625	2,877,796
4. 2021	XXX	XXX	2,882,719	3,131,774	3,138,063
5. 2022	XXX	XXX	XXX	4,264,396	4,649,788
6. 2023	XXX	XXX	XXX	XXX	5,051,213

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2019	2 2020	3 2021	4 2022	5 2023
1. Prior	249,916	229,209	228,311	227,268	227,200
2. 2019	3,076,806	2,953,219	2,941,762	2,943,776	2,942,700
3. 2020	XXX	2,997,475	2,884,382	2,876,625	2,877,796
4. 2021	XXX	XXX	3,248,588	3,145,875	3,138,063
5. 2022	XXX	XXX	XXX	4,838,207	4,669,085
6. 2023	XXX	XXX	XXX	XXX	5,670,275

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2019	3,569,913	2,942,700	138,444	4.7	3,081,144	86.3	0	0	3,081,144	86.3
2. 2020	3,541,158	2,877,796	130,504	4.5	3,008,300	85.0	0	0	3,008,300	85.0
3. 2021	3,772,347	3,138,063	139,562	4.4	3,277,625	86.9	0	0	3,277,625	86.9
4. 2022	5,608,833	4,649,788	185,812	4.0	4,835,600	86.2	19,296	131	4,855,027	86.6
5. 2023	6,514,531	5,051,213	166,853	3.3	5,218,066	80.1	619,063	4,195	5,841,324	89.7

UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including $ 0 for investment income)	188,069,623	0	62,974	0	0	0	0	26,968,535	161,038,114	0	0	0	0
5. Aggregate write-ins for other policy reserves	4,849,060	118,529	5,968	0	0	0	0	1,492,641	3,231,922	0	0	0	0
6. Totals (gross)	192,918,683	118,529	68,942	0	0	0	0	28,461,176	164,270,036	0	0	0	0
7. Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)	192,918,683	118,529	68,942	0	0	0	0	28,461,176	164,270,036	0	0	0	0
9. Present value of amounts not yet due on claims	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits	1,523,366	10,543	0	0	0	0	0	889,099	623,724	0	0	0	0
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross)	1,523,366	10,543	0	0	0	0	0	889,099	623,724	0	0	0	0
13. Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	1,523,366	10,543	0	0	0	0	0	889,099	623,724	0	0	0	0
DETAILS OF WRITE-INS													
0501. Redetermination contract payable	3,350,451	118,529	0	0	0	0	0	0	3,231,922	0	0	0	0
0502. Medicare Part D risk adjustment factor payable	1,492,641	0	0	0	0	0	0	1,492,641	0	0	0	0	0
0503. ACA risk adjustment payable	5,968	0	5,968	0	0	0	0	0	0	0	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	4,849,060	118,529	5,968	0	0	0	0	1,492,641	3,231,922	0	0	0	0
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes $ 0 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3	4	5
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent ($ 0 for occupancy of own building)	3,869,841	1,225,267	8,580,434	0	13,675,542
2. Salary, wages and other benefits	74,541,311	23,601,234	165,277,281	0	263,419,826
3. Commissions (less $ 0 ceded plus $ 0 assumed)	0	0	110,892,700	0	110,892,700
4. Legal fees and expenses	998,392	316,110	2,214,837	0	3,529,339
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services	7,236,883	2,291,338	16,046,172	0	25,574,393
7. Traveling expenses	1,316,408	416,800	2,918,815	0	4,652,023
8. Marketing and advertising	3,944,218	1,248,816	8,745,346	0	13,938,380
9. Postage, express and telephone	3,365,629	1,065,624	7,462,515	0	11,893,768
10. Printing and office supplies	4,980,972	1,577,073	11,044,098	0	17,602,143
11. Occupancy, depreciation and amortization	1,623,884	514,153	3,600,570	0	5,738,607
12. Equipment	601,128	190,329	1,332,856	0	2,124,313
13. Cost or depreciation of EDP equipment and software	7,727,748	2,446,756	17,134,407	0	27,308,911
14. Outsourced services including EDP, claims, and other services	6,716,983	6,490,582	13,875,461	0	27,083,026
15. Boards, bureaus and association fees	118,130	37,402	261,925	0	417,457
16. Insurance, except on real estate	1,459,479	462,100	3,236,041	0	5,157,620
17. Collection and bank service charges	404,873	128,191	897,708	0	1,430,772
18. Group service and administration fees	1,350,764	427,678	3,601,691	0	5,380,133
19. Reimbursements by uninsured plans	0	0	0	0	0
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	0	0	0	0	0
22. Real estate taxes	94,364	42,196	388,466	0	525,026
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	17,027,718	0	17,027,718
23.2 State premium taxes	0	0	5,971	0	5,971
23.3 Regulatory authority licenses and fees	0	0	94,792	0	94,792
23.4 Payroll taxes	2,096,376	919,419	8,491,651	0	11,507,446
23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	0
24. Investment expenses not included elsewhere	0	0	0	531,893	531,893
25. Aggregate write-ins for expenses	21,251,263	4,634,900	33,744,051	0	59,630,214
26. Total expenses incurred (Lines 1 to 25)	143,698,646	48,035,968	436,875,506	531,893	(a) 629,142,013
27. Less expenses unpaid December 31, current year	3,242,220	1,083,818	14,771,657	309,807	19,407,502
28. Add expenses unpaid December 31, prior year	3,099,654	1,026,508	20,495,925	243,447	24,865,534
29. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	143,556,080	47,978,658	442,599,774	465,533	634,600,045
DETAILS OF WRITE-INS					
2501. Sundry General Expenses	18,433,122	3,742,667	27,321,397	0	49,497,186
2502. Professional Fees/Consulting	1,732,027	548,393	3,840,349	0	6,120,769
2503. Information Technology	890,364	281,907	1,974,167	0	3,146,438
2598. Summary of remaining write-ins for Line 25 from overflow page	195,750	61,933	608,138	0	865,821
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	21,251,263	4,634,900	33,744,051	0	59,630,214

(a) Includes management fees of $ 309,948,617 to affiliates and $ 0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	(a) 2,651,350	2,977,340
1.1	Bonds exempt from U.S. tax	(a) 0	0
1.2	Other bonds (unaffiliated)	(a) 24,411,643	25,440,420
1.3	Bonds of affiliates	(a) 0	0
2.1	Preferred stocks (unaffiliated)	(b) 0	0
2.11	Preferred stocks of affiliates	(b) 0	0
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans	(c) 0	0
4.	Real estate	(d) 0	0
5	Contract Loans	0	0
6	Cash, cash equivalents and short-term investments	(e) 28,644,634	28,644,634
7	Derivative instruments	(f) 0	0
8.	Other invested assets	(241,592)	(241,592)
9.	Aggregate write-ins for investment income	0	0
10.	Total gross investment income	55,466,034	56,820,802
11.	Investment expenses		(g) 531,893
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h) 278
14.	Depreciation on real estate and other invested assets		(i) 0
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		532,171
17.	Net investment income (Line 10 minus Line 16)		56,288,631
	DETAILS OF WRITE-INS		
0901.			
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

(a) Includes $ 1,388,601 accrual of discount less $ 3,572,179 amortization of premium and less $ 1,078,843 paid for accrued interest on purchases.

(b) Includes $ 0 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued dividends on purchases.

(c) Includes $ 0 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued interest on purchases.

(d) Includes $ 0 for company's occupancy of its own buildings; and excludes $ 0 interest on encumbrances.

(e) Includes $ 1,522,517 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued interest on purchases.

(f) Includes $ 0 accrual of discount less $ 0 amortization of premium.

(g) Includes $. 0 investment expenses and $ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes $ 0 interest on surplus notes and $ 0 interest on capital notes.

(i) Includes $ 0 depreciation on real estate and $ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	341,361	0	341,361	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	3,544,226	0	3,544,226	0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	2,284	0	2,284	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	3,887,871	0	3,887,871	0	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens	0	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income	0	0	0
	4.3 Properties held for sale	0	0	0
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13.	Title plants (for Title insurers only)	0	0	0
14.	Investment income due and accrued	0	0	0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	677,524	566,758	(110,766)
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	0	0	0
	15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0
17.	Amounts receivable relating to uninsured plans	50,690	57,736	7,046
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2	Net deferred tax asset	0	0	0
19.	Guaranty funds receivable or on deposit	0	0	0
20.	Electronic data processing equipment and software	0	0	0
21.	Furniture and equipment, including health care delivery assets	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23.	Receivable from parent, subsidiaries and affiliates	0	0	0
24.	Health care and other amounts receivable	22,133,884	16,320,072	(5,813,812)
25.	Aggregate write-ins for other than invested assets	809	467	(342)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	22,862,907	16,945,033	(5,917,874)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	22,862,907	16,945,033	(5,917,874)
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Miscellaneous receivables	805	351	(454)
2502.	Prepaid commissions	4	116	112
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	809	467	(342)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

	Source of Enrollment	Total Members at End of 1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	6 Current Year Member Months
1.	Health Maintenance Organizations	476,788	505,415	508,192	503,972	499,661	6,062,233
2.	Provider Service Organizations	0	0	0	0	0	0
3.	Preferred Provider Organizations	0	0	0	0	0	0
4.	Point of Service	0	0	0	0	0	0
5.	Indemnity Only	0	0	0	0	0	0
6.	Aggregate write-ins for other lines of business	0	0	0	0	0	0
7.	Total	476,788	505,415	508,192	503,972	499,661	6,062,233
	DETAILS OF WRITE-INS						
0601.							
0602.							
0603.							
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

UNITEDHEALTHCARE OF THE MIDLANDS, INC.

NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS
AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operation

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

The Company was incorporated on April 16, 1984, as a health maintenance organization and operations commenced in August 1984. The Company is certified as a health maintenance organization by the Nebraska Department of Insurance. The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees. The Company is licensed in eight states.

The Company offers comprehensive commercial products to employer groups. Each contract outlines the coverage provided and renewal provisions.

The Company serves as a plan sponsor offering Medicare Plans under contracts with the Centers for Medicare and Medicaid Services ("CMS").

Effective January 1, 2022, affiliates, UnitedHealthcare of Alabama, Inc. and UnitedHealthcare of Arkansas, Inc. novated CMS contracts to the Company. The novation agreements resulted in full control of the contracts being transferred to the Company at $0 net book value for dates of service on or after January 1, 2022. Approval for these novations was received from CMS.

The Company has a contract with the state of Nebraska, Department of Health and Human Services ("DHHS"), Division of Medicaid and Long Term Care, to provide health care services to Medicaid eligible beneficiaries, which include eligible beneficiaries under the Children's Health Insurance Program ("CHIP"), in Nebraska. The current contract ended on December 31, 2023. The company entered into a new contract on January 1, 2024 which is effective through December 31, 2029, and includes an option for two (2) one-year extensions thereafter.

A. Accounting Practices

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

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

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

Net Income (Loss)	SSAP #	F/S Page #	F/S Line #	December 31, 2023	December 31, 2022
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	$ 392,177,840	$ 312,004,078
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP:					
Not Applicable				—	—
(3) State permitted practices that are an increase/(decrease) from NAIC SAP:					
Not Applicable				—	—
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	$ 392,177,840	$ 312,004,078
Capital and Surplus					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	$ 753,565,987	$ 570,485,524
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP:					
Not Applicable				—	—
(7) State permitted practices that are an increase/(decrease) from NAIC SAP:					
Not Applicable				—	—
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	$ 753,565,987	$ 570,485,524

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

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

C. Accounting Policy

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

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

(1–2) Bonds are stated at book/adjusted carrying value if they meet NAIC designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of three or higher. The Company does not have any mandatory convertible securities or Securities Valuation Office of the NAIC ("SVO") identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds are valued and reported using market prices published by the SVO in accordance with the NAIC Valuation of Securities manual prepared by the SVO or an external pricing service;

(3–4) The Company holds no common or preferred stock;

(5) The Company holds no mortgage loans on real estate;

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

(7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;

(8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;

(9) The Company holds no derivatives;

(10) Premium Deficiency Reserves ("PDR") and the related expenses are recognized when it is probable that expected future health care expenses, claims adjustment expenses ("CAE"), direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the financial statements. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, CAE and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as an increase in reserves for life and accident and health contracts in the financial statements in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the PDR calculation (see Note 30);

(11) CAE are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc., in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and United HealthCare Services, Inc. is performed to determine the allocation between CAE and general administrative expenses ("GAE") to be reported in the financial statements. It is the responsibility of United HealthCare Services, Inc. to pay CAE in the event the Company ceases operations. The Company has recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in unpaid CAE in the financial statements. Management believes the amount of the liability for unpaid CAE as of December 31, 2023 is adequate to cover the Company's cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified;

(12) The Company does not carry any fixed assets in the financial statements;

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

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

ASSETS

Cash and Invested Assets

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

Other Assets

- **Premiums and Considerations —** The Company reports uncollected premium balances from its insured members, groups, CMS, and state Medicaid agencies as premiums and considerations in the financial statements. Uncollected premium balances that are over 90 days past due, with the exception of amounts due from government insured plans, are considered nonadmitted assets. In addition to those balances, current balances are also considered nonadmitted if the corresponding balance greater than 90 days past due is deemed more than inconsequential. Premiums and considerations also include amounts for commercial risk adjustment receivables as defined in Section 1343 of the Affordable Care Act ("ACA"), CMS risk adjustment receivables for the Medicare Plans, pay for performance program receivables, and high cost drug pool receivables.

  Premium adjustments for the high cost drug pool are accounted for as premium adjustments subject to retrospectively rated features (see Note 24). Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and pay for performance programs are accounted for as premium adjustments subject to redetermination (see Note 24).

LIABILITIES

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

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

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

- **Accrued Medical Incentive Pool and Bonus Amounts —** The Company has agreements with certain provider groups that provide for the establishment of a pool which includes monthly premiums payable and the disbursement of funds for medical services. Any surplus in the pool is shared by the Company and the provider group based upon a predetermined risk-sharing percentage and the liability is included in accrued medical incentive pool and bonus amounts in the financial statements. The Company also has incentive and bonus arrangements with providers that are based on quality, utilization, and/or various health outcome measures. The estimated amount due to providers that meet the established metrics is included in accrued medical incentive pool and bonus amounts in the financial statements.

- **Aggregate Health Policy Reserves —** The Company establishes a liability, net of ceded reinsurance, for estimated accrued retrospective and redetermination premiums due from the Company based on the actuarial method and assumptions for each respective contract. Aggregate health policy reserves includes commercial risk adjustment payables as defined in Section 1343 of the ACA, CMS risk corridor payables, CMS risk adjustment payables for the Medicare Plans, and estimated MLR rebates payable on the comprehensive commercial, Medicaid and Medicare Plans.

  Additionally, the Company has recorded an estimated provider quality performance payable based on various quality measures. Heritage Health is a health care delivery system that combines physical health, behavioral health, and pharmacy programs into a single comprehensive and coordinated system for Nebraska's Medicaid and CHIP members.

  Further, pursuant to the Medicaid Managed Care Rule, based on the State of Nebraska's election and state contractual minimum loss ratio requirements, the Company is required to maintain specific minimum loss ratio on its Heritage Health Plan and Heritage Health populations.

  Premium adjustments for the CMS risk corridor and estimated MLR rebates programs are accounted for as premium adjustments subject to retrospectively rated features (see Note 24). Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and a portion of provider quality performance payables are accounted for as premium adjustments subject to redetermination (see Note 24).

- **Liability for Amounts Held Under Uninsured Plans —** Liability for amounts held under uninsured plans represents amounts due from the Company to CMS, state Medicaid agencies, and groups for the administrative activities it performs for which it has no insurance risk (see Note 18). Liability for amounts held under uninsured plans includes costs incurred that are less than the cost reimbursement under the Medicare Plans for the catastrophic reinsurance and the low-income member cost-sharing, a liability for the amounts subject to recoupment under the ACA coverage gap discount program and cost reimbursement for the cost-sharing reduction components of the ACA.

CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS

- **Restricted Cash Reserves —** The Company is in compliance with various states regulatory deposit requirements as of December 31, 2023 and 2022, respectively, for qualification purposes as a domestic and foreign insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).

- **Minimum Capital and Surplus —** Under the laws of the state of Nebraska, the Company's domiciliary state, the Nebraska Department of Insurance requires the Company to maintain a minimum capital and surplus equal to $66,920,165.

  Risk-based capital ("RBC") is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. The Nebraska Department of Insurance requires the Company to maintain minimum capital and surplus equal to the greater of the state statute as outlined above, or the company action level as calculated by the RBC formula, or the level needed to avoid action pursuant to the trend test in the RBC formula.

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

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

STATEMENTS OF OPERATIONS

- **Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits —** Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. Net premium income is shown net of reinsurance premiums paid and reinsurance premiums incurred but not paid in the financial statements.

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

  Medicare Plans with MLRs on fully insured products, as calculated under the definitions in the ACA and implementing regulations, that fall below certain targets are required to rebate ratable portions of premiums annually. In addition, the Company records premium adjustments for changes to the CMS Medicare Plans risk corridor program. Changes to these estimates are reflected in change in unearned premium reserves and reserve for rate credits in the financial statements (see Note 24). Net premium income also includes premium under the Medicare Plans which includes CMS premiums, including amounts pursuant to the CMS risk adjustment program (see Note 24), and member premiums, and the CMS low-income premium subsidy for the Company's insurance risk coverage.

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

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

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

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

- **Federal Income Taxes Incurred —** The provision for federal income taxes incurred is calculated based on applying the statutory federal income tax rate of 21% to net income before federal income taxes (see Note 9).

OTHER

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

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

  Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from members and CMS related to the Medicare Plans as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 86% and 97% as of December 31, 2023 and 84% and 84% as of December 31, 2022, respectively.

  Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from the state of Nebraska, DHHS as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 12% and 3% as of December 31, 2023 and 15% and 16% as of December 31, 2022, respectively.

Recently Issued Accounting Standards

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

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

D. Going Concern

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

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

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

3. BUSINESS COMBINATIONS AND GOODWILL

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

4. DISCONTINUED OPERATIONS

A. Discontinued Operation Disposed of or Classified as Held for Sale

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

B. Change in Plan of Sale of Discontinued Operation — Not applicable.

C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.

D. Equity Interest Retained in the Discontinued Operation after Disposal — Not applicable.

5. INVESTMENTS

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were $4,099,494 and $60,843, respectively, for 2023 and $0 and $7,427, respectively, for 2022. There were no gross realized gains and losses on sales of short-term investments for 2023 and 2022. The net realized gains and losses are included in net realized capital gains (losses) less taxes in the financial statements. Total proceeds on the sale of long-term investments were $139,487,343 and $315,619 for 2023 and 2022, respectively and there were no sales of short-term investments in 2023 and 2022.

As of December 31, 2023 and 2022, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of $243,972,613 and $296,979,224 respectively, are disclosed in the table below:

	2023				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	$ 265,941,319	$ 646,264	$ 884,678	$ 9,726,169	$ 255,976,736
State and agency municipal securities	90,695,262	448,394	132,909	1,875,056	89,135,691
City and county municipal securities	101,228,403	868,971	24,803	2,387,838	99,684,733
Corporate debt securities	452,329,089	1,590,703	458,305	24,135,456	429,326,031
Other invested assets	1,793,269	—	—	—	1,793,269
Total bonds and other invested assets	$ 911,987,342	$ 3,554,332	$ 1,500,695	$ 38,124,519	$ 875,916,460

	2023				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
Less than one year	$ 36,338,343	$ 5,062	$ 168	$ 388,526	$ 35,954,711
One to five years	266,562,758	538,958	251,788	9,108,055	257,741,873
Five to ten years	284,443,654	1,129,892	729,426	16,249,698	268,594,422
Over ten years	324,642,587	1,880,420	519,313	12,378,240	313,625,454
Total bonds and other invested assets	$ 911,987,342	$ 3,554,332	$ 1,500,695	$ 38,124,519	$ 875,916,460

	2022				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	$ 161,709,111	$ 114,064	$ 8,864,621	$ 3,157,697	$ 149,800,857
State and agency municipal securities	94,754,513	569,432	1,510,350	1,579,503	92,234,092
City and county municipal securities	75,361,361	162,079	2,414,061	1,494,647	71,614,732
Corporate debt securities	359,463,423	130,803	15,744,629	19,525,609	324,323,988
Total bonds	$ 691,288,408	$ 976,378	$ 28,533,661	$ 25,757,456	$ 637,973,669

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of $309,588,948 and fair value of $298,812,211.

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

	2023					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	$ 47,519,910	$ 884,678	$ 131,966,292	$ 9,726,169	$ 179,486,202	$ 10,610,847
State and agency municipal securities	17,795,227	132,909	36,980,288	1,875,056	54,775,515	2,007,965
City and county municipal securities	2,940,904	24,803	37,681,223	2,387,838	40,622,127	2,412,641
Corporate debt securities	25,756,481	458,305	284,110,336	24,135,456	309,866,817	24,593,761
Total bonds	$ 94,012,522	$ 1,500,695	$ 490,738,139	$ 38,124,519	$ 584,750,661	$ 39,625,214

	2022					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	$ 127,559,706	$ 8,864,621	$ 17,660,579	$ 3,157,697	$ 145,220,285	$ 12,022,318
State and agency municipal securities	56,792,159	1,510,350	8,684,618	1,579,503	65,476,777	3,089,853
City and county municipal securities	50,094,070	2,414,061	5,015,353	1,494,647	55,109,423	3,908,708
Corporate debt securities	206,553,145	15,744,629	112,486,371	19,525,609	319,039,516	35,270,238
Total bonds	$ 440,999,080	$ 28,533,661	$ 143,846,921	$ 25,757,456	$ 584,846,001	$ 54,291,117

The unrecognized unrealized losses on investments in U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2023 and 2022, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the state and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an other-than-temporary impairment (“OTTI”), such as the length of time and extent to which fair value has been less than cost, the financial condition, and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company’s intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of these reviews, the Company recorded OTTIs of $0 and $95,868 as of December 31, 2023 and 2022, respectively, which are included in net realized capital gains (losses) less taxes in the financial statements.

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

D. Loan-Backed Securities

(1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.

(2) The Company did not recognize any OTTIs on loan-backed securities as of December 31, 2023.

(3) The Company did not have any loan-backed securities with OTTIs to report by CUSIP as of December 31, 2023 or 2022.

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

		2023
The aggregate amount of unrealized losses:		
1. Less than 12 months	$	313,638
2. 12 months or longer		11,748,623
The aggregate related fair value of securities with unrealized losses:		
1. Less than 12 months		36,472,201
2. 12 months or longer		140,836,803

		2022
The aggregate amount of unrealized losses:		
1. Less than 12 months	$	9,410,925
2. 12 months or longer		5,218,747
The aggregate related fair value of securities with unrealized losses:		
1. Less than 12 months		129,289,995
2. 12 months or longer		34,470,299

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

E. Dollar Repurchase Agreements and/or Securities Lending Transactions — Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.

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

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

J. Real Estate — Not applicable.

K. Low-Income Housing Tax Credits

(1–7) LIHTC investments of $1,793,269 and $0 as of December 31, 2023 and 2022, respectively, are included in other invested assets in the financial statements. The Company also has a corresponding commitment for additional investment of $10,644,290 and $0 as of December 31, 2023 and 2022, respectively (see Note 14). The number of remaining years of unexpired tax credits is 11 years and the required holding period for the LIHTC investments is 15 years. The LIHTC investments are not currently subject to any regulatory reviews. The Company did not recognize any impairment losses, write-downs, or reclassifications during 2023 or 2022.

L. Restricted Assets

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

	Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted From Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	3 Increase/ (Decrease) (1 Minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a.	Subject to contractual obligation for which liability is not shown	$ —	$ —	$ —	$ —	$ —	— %	— %
b.	Collateral held under security lending agreements	—	—	—	—	—	— %	— %
c.	Subject to repurchase agreements	—	—	—	—	—	— %	— %
d.	Subject to reverse repurchase agreements	—	—	—	—	—	— %	— %
e.	Subject to dollar repurchase agreements	—	—	—	—	—	— %	— %
f.	Subject to dollar reverse repurchase agreements	—	—	—	—	—	— %	— %
g.	Placed under option contracts	—	—	—	—	—	— %	— %
h.	Letter stock or securities restricted as to sale—excluding FHLB capital stock	—	—	—	—	—	— %	— %
i.	FHLB capital stock	—	—	—	—	—	— %	— %
j.	On deposit with states	964,175	964,737	(562)	—	964,175	<1 %	<1 %
k.	On deposit with other regulatory bodies	—	—	—	—	—	— %	— %
l	Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	— %	— %
m.	Pledged as collateral not captured in other categories	—	—	—	—	—	— %	— %
n.	Other restricted assets	—	—	—	—	—	— %	— %
o.	Total restricted assets	$ 964,175	$ 964,737	$ (562)	$ —	$ 964,175	<1%	<1%

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

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

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

M. Working Capital Finance Investments — Not applicable.

N. Offsetting and Netting of Assets and Liabilities

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

O. 5GI Securities

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

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2023:

	General Account
1. Number of CUSIPs	1
2. Aggregate Amount of Investment Income	$ 69,640

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

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is $148,628,526 and $229,335,077 as of December 31, 2023 and 2022, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of December 31, 2023:

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

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

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

7. INVESTMENT INCOME

A. The Company excludes all investment income due and accrued amounts that are over 90 days past due from the financial statements.

B. There were no investment income amounts excluded from the financial statements.

C. The following table illustrates the gross interest income due and accrued, nonadmitted interest income due and accrued, and admitted interest income due and accrued amounts as of December 31, 2023 and 2022:

		2023
Interest Income Due And Accrued:		
1. Gross	$	7,124,595
2. Nonadmitted		—
3. Admitted		7,124,595

		2022
Interest Income Due And Accrued:		
1. Gross	$	5,561,813
2. Nonadmitted		—
3. Admitted		5,561,813

D. The Company has no aggregated deferred interest as of December 31, 2023 or 2022.

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

8. DERIVATIVE INSTRUMENTS

A–B. The Company has no derivative instruments.

9. INCOME TAXES

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

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

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

A. Deferred Tax Asset/Liability

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

	2023			2022			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	$ 7,252,222	$ —	$ 7,252,222	$ 5,217,437	$ —	$ 5,217,437	$ 2,034,785	$ —	$ 2,034,785
(b) Statutory valuation allowance adjustments	—	—	—	—	—	—	—	—	—
(c) Adjusted gross deferred tax assets (1a - 1b)	7,252,222	—	7,252,222	5,217,437	—	5,217,437	2,034,785	—	2,034,785
(d) Deferred tax assets nonadmitted	—	—	—	—	—	—	—	—	—
(e) Subtotal net admitted deferred tax asset (1c - 1d)	7,252,222	—	7,252,222	5,217,437	—	5,217,437	2,034,785	—	2,034,785
(f) Deferred tax liabilities	395,276	—	395,276	180,988	—	180,988	214,288	—	214,288
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	$ 6,856,946	$ —	$ 6,856,946	$ 5,036,449	$ —	$ 5,036,449	$ 1,820,497	$ —	$ 1,820,497

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

	2023			2022			Change		
	1	2	3	4	5	6	7	8	9
Admission Calculation Components SSAP No. 101	Ordinary	Capital	(Col 1 + 2) Total	Ordinary	Capital	(Col 4 + 5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7 + 8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	$ 7,252,222	$ —	$ 7,252,222	$ 5,217,437	$ —	$ 5,217,437	$ 2,034,785	$ —	$ 2,034,785
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	—	—	—	—	—	—	—	—	—
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	—	—	—	—	—	—	—	—	—
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	112,006,356	XXX	XXX	84,817,361	XXX	XXX	27,188,995
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	—	—	—	—	—	—	—	—	—
(d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))	$ 7,252,222	$ —	$ 7,252,222	$ 5,217,437	$ —	$ 5,217,437	$ 2,034,785	$ —	$ 2,034,785

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

	2023	2022
(a) Ratio percentage used to determine recovery period and threshold limitation amount	>300%	>300%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	$ 746,709,041	$ 565,449,075

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

	2023		2022		Change	
	1	2	3	4	5	6
Impact of Tax-Planning Strategies	**Ordinary**	**Capital**	**Ordinary**	**Capital**	**(Col 1 - 3) Ordinary**	**(Col 2 - 4) Capital**
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage.						
1. Adjusted gross DTAs amount from Note 9A1(c)	$ 7,252,222	$ —	$ 5,217,437	$ —	$ 2,034,785	$ —
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies	— %	— %	— %	— %	— %	— %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	$ 7,252,222	$ —	$ 5,217,437	$ —	$ 2,034,785	$ —
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies	— %	— %	— %	— %	— %	— %
(b) Does the Company's tax-planning strategies include the use of reinsurance?			Yes		No	X

B. Unrecognized Deferred Tax Liabilities

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

C. Significant Components of Income Taxes

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

	1	2	3
	2023	**2022**	**(Col 1 - 2) Change**
1. Current income tax			
(a) Federal	$ 103,332,891	$ 82,862,795	$ 20,470,096
(b) Foreign	—	—	—
(c) Subtotal (1a+1b)	103,332,891	82,862,795	20,470,096
(d) Federal income tax on net capital gains (losses)	816,453	(33,973)	850,426
(e) Utilization of capital loss carryforwards	—	—	—
(f) Other	—	—	—
(g) Total federal and foreign income taxes incurred (1c+1d+1e+1f)	$ 104,149,344	$ 82,828,822	$ 21,320,522

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

	1 2023	2 2022	3 (Col 1 - 2) Change
2. Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	$ 1,929,040	$ 1,637,899	$ 291,141
(2) Unearned premium reserve	521,867	20,957	500,910
(3) Policyholder reserves	—	—	—
(4) Investments	—	—	—
(5) Deferred acquisition costs	—	—	—
(6) Policyholder dividends accrual	—	—	—
(7) Fixed assets	—	—	—
(8) Compensation and benefits accrual	—	—	—
(9) Pension accrual	—	—	—
(10) Receivables — nonadmitted	4,801,210	3,558,433	1,242,777
(11) Net operating loss carryforward	—	—	—
(12) Tax credit carryforward	—	—	—
(13) Other	105	148	(43)
(99) Subtotal (sum of 2a1 through 2a13)	7,252,222	5,217,437	2,034,785
(b) Statutory valuation allowance adjustment	—	—	—
(c) Nonadmitted	—	—	—
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	7,252,222	5,217,437	2,034,785
(e) Capital:			
(1) Investments	—	—	—
(2) Net capital loss carryforward	—	—	—
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (2e1+2e2+2e3+2e4)	—	—	—
(f) Statutory valuation allowance adjustment	—	—	—
(g) Nonadmitted	—	—	—
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	—	—	—
(i) Admitted deferred tax assets (2d + 2h)	7,252,222	5,217,437	2,034,785
3. Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	—	—	—
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Policyholder reserves	—	—	—
(5) Other	395,276	180,988	214,288
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	395,276	180,988	214,288
(b) Capital:			
(1) Investments	—	—	—
(2) Real estate	—	—	—
(3) Other	—	—	—
(99) Subtotal (3b1+3b2+3b3)	—	—	—
(c) Deferred tax liabilities (3a99 + 3b99)	395,276	180,988	214,288
4. Net deferred tax assets/liabilities (2i - 3c)	$ 6,856,946	$ 5,036,449	$ 1,820,497

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

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

	2023		2022	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	$ 104,228,709	21 %	$ 82,914,909	21 %
Tax-exempt interest	(657,108)	<1	(545,414)	<1
Tax effect of nonadmitted assets	(1,242,754)	<1	(1,555,428)	<1
Total statutory income taxes	$ 102,328,847	21 %	$ 80,814,067	20 %
Federal income taxes incurred	$ 103,332,891	21 %	$ 82,862,795	21 %
Capital gains tax	816,453	<1	(33,973)	<1
Change in net deferred income tax	(1,820,497)	<1	(2,014,755)	<1
Total statutory income taxes	$ 102,328,847	21 %	$ 80,814,067	20 %

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

Current federal income taxes recoverable of $9,012,656 and $13,498,179 as of December 31, 2023 and 2022, respectively, are included in the financial statements. Federal income taxes paid, net of refunds, were $99,663,821 and $80,829,750 in 2023 and 2022, respectively.

Federal income taxes incurred of $104,149,344 and $82,828,822 for 2023 and 2022, respectively, are available for recoupment in the event of future net losses.

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

F. The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group Incorporated which constitutes a controlled group. The entities included within the consolidated return are included in the NAIC Statutory Statement Schedule Y - Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group Incorporated pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal return of UnitedHealth Group Incorporated. UnitedHealth Group Incorporated currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The U.S. IRS has completed exams on UnitedHealth Group Incorporated’s consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group Incorporated’s 2017 through 2020 tax returns are under review by the IRS under its Compliance Assurance Program. UnitedHealth Group Incorporated is no longer subject to income tax examinations prior to the 2014 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2015 and forward.

G. **Tax Contingencies —** Not applicable.

H. **Repatriation Transition Tax —** Not applicable.

I. **Alternative Minimum Tax Credit —** Not applicable.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

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

United HealthCare Services, Inc. maintains a private short-term investment pool in which affiliated companies may participate (see Note 1). At December 31, 2023 and 2022, the Company’s portion was $148,628,526 and $229,335,077, respectively and is included in cash equivalents in the financial statements.

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

The Company paid dividends of $205,000,000 and $194,900,000 in 2023 and 2022, respectively, to its parent (see Note 13).

The Company held a $100,000,000 subordinated revolving credit agreement with UnitedHealth Group Incorporated at an interest rate of London InterBank Offered Rate (“LIBOR”) plus a margin of 0.50%. This credit agreement was subordinate to the extent it did not conflict with any credit facility held by either party. This agreement was terminated effective December 31, 2022, due to the elimination of LIBOR as an interest rate benchmark in 2023. No amounts were outstanding under the line of credit as of December 31, 2022. This agreement was replaced with a new agreement, which was effective as of January 1, 2023.

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

Effective April 1, 2023, the Company entered into a new subordinated revolving credit agreement with United HealthCare Services Inc. at an interest rate of Fed Funds Target rate – Upper Bound plus 50 basis point. The Company’s subordinated credit agreement limit equals $250,000,000. This agreement has been approved by the Nebraska Department of Insurance and has replaced the previous agreement, which was held to the holding company threshold of the lesser of 3% of admitted assets or 25% of capital and surplus.

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

C. The Company has no material related party transactions that meet the disclosure requirements pursuant to SSAP No. 25, Affiliates and Other Related Parties (“SSAP No. 25”) that are not included in NAIC Statutory Statement Schedule Y—Part 2 Summary Of Insurer’s Transactions With Any Affiliates.

D. At December 31, 2023 and 2022, the Company reported $23,752,292 and $0, respectively, as receivables from parent, subsidiaries, and affiliates and $0 and $2,878,370, respectively, as amounts due to parent, subsidiaries, and affiliates, which are included in the financial statements. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.

E. The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month; (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in GAE, CAE, and hospital and medical expenses in the financial statements. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2023 and 2022, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

	2023	2022
OptumRx, Inc.	$ 540,387,380	$ 503,596,293
United HealthCare Services, Inc.	441,410,566	374,178,415
United Behavioral Health	194,892,440	158,720,073
naviHealth, Inc.	179,704,604	157,742,893
Optum Care Network of Indiana, LLC	156,717,356	105,531,224
Optum Health Networks, Inc.	67,808,669	6,324,782
XLHome, P.C.	63,754,541	62,980,156
OptumInsight, Inc.	15,817,530	12,347,622
Ear Professionals International Corporation	10,925,731	5,657,214
Prospero Health Partners, P.C.	2,645,534	13,046,339

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

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

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

naviHealth, Inc. provides comprehensive post-acute services and care delivery.

Optum Care Network of Indiana, LLC provides medical services to the Company’s members.

Optum Health Networks, Inc. provides services that may include, but are not limited to, care management services to eligible members and/or arranging for the delivery of clinical services to the Company’s enrollees.

XLHome, P.C. provides house call services to the Company’s members.

OptumInsight, Inc. provides services that may include, but are not limited to, coordination of benefits and data mining, Retrospective Fraud and Waste Abuse, subrogation and audit services. All recoveries are returned to the Company by OptumInsight, Inc. on a monthly basis.

Ear Professionals International Corporation provides hearing support services.

Prospero Health Partners, P.C. provides palliative care management services to the Company's members.

F. The Company has not extended any guarantees or undertakings for the benefit of an affiliate or related party.

G. The Company is part of an insurance holding company system with UnitedHealth Group Incorporated as the ultimate parent. Management believes that the Company's transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.

H. The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.

I. The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.

J. The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.

K. The Company does not have any investments in foreign insurance subsidiaries.

L. The Company does not hold any investments in a downstream noninsurance holding company.

M. The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.

N. The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.

O. The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships, and limited liability companies in which the Company's share of losses exceeds the investment.

11. DEBT

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

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

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

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

A–B. The Company has 100,000 shares authorized and 100,000 shares issued and outstanding of $1 par value common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, UnitedHealthcare, Inc.

C. Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Nebraska Department of Insurance.

D. The Company paid ordinary cash dividends of $75,000,000, $50,000,000, $50,000,000 and $30,000,000 on March 21, 2023, June 20, 2023, September 6, 2023 and December 29, 2023, respectively, to UnitedHealthcare, Inc., which complied with the provisions set forth in the statutes of Nebraska and required no approval. The dividends were recorded as a reduction to unassigned funds (surplus) in the financial statements.

The Company paid ordinary cash dividends of $100,000,000, $50,000,000, and $44,900,000 on December 29, 2022, June 28, 2022, and September 8, 2022, respectively, to UnitedHealthcare, Inc., which complied with the provisions set forth in the statutes of Nebraska and required no approval. The dividends were recorded as a reduction to unassigned funds (surplus) in the financial statements.

E. The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.

F. There are no restrictions placed on the Company's unassigned funds (surplus).

G. The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.

H. The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.

I. The Company does not have any special surplus funds.

J. The portion of unassigned funds (surplus), excluding net income and dividends, represented (or reduced) by each item below is as follows:

	2023	2022
Net deferred income taxes	6,856,946	5,036,449
Nonadmitted assets	(22,862,907)	(16,945,033)
Total	$ (16,005,961)	$ (11,908,584)

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

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A. Contingent Commitments

The Company has given National Affordable Housing Trust Timbercreek Apartments LIHTC a commitment for additional investment in the form of an equity contribution that will be required as long as the assets are performing based on the agreed upon contractual terms. The Company has the ability to sell its interest in the LIHTC investment prior to the additional contribution being required. The current amount of the commitment for additional investment is not to exceed $10,644,290 in the aggregate as of December 31, 2023.

B. Assessments

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

C. Gain Contingencies

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

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

E. Joint and Several Liabilities — Not applicable.

F. All Other Contingencies

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

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

On February 14, 2017, the Department of Justice ("DOJ") announced its decision to pursue certain claims within a lawsuit initially asserted against the Company and filed under seal by a whistleblower in 2011. The whistleblower's complaint, which was unsealed on February 15, 2017, alleges that the Company made improper risk adjustment submissions and violated the False Claims Act. On February 12, 2018, the court granted in part and denied in part the Company's motion to dismiss. In May 2018, the DOJ moved to dismiss the Company's counterclaims, which were filed in March 2018, and moved for partial summary judgment. In March 2019, the court denied the government's motion for partial summary judgment and dismissed the Company's counterclaims without prejudice. The Company cannot reasonably estimate the outcome that may result from this matter given its procedural status.

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

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

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

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

15. LEASES

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

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

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

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

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

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

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

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Medicare Part D program is a partially insured plan. The Company recorded a payable of $52,624,138 and $56,905,117 at December 31, 2023 and 2022, respectively, for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a receivable of $40,367,477 and $29,397,663 and also a payable of $54,710,868 and $44,961,611 at December 31, 2023 and 2022, respectively, for the Medicare Part D coverage gap discount program. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively, in the financial statements.

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

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

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

20. FAIR VALUE MEASUREMENTS

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

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

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

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

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

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

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

A. Fair Value

(1) Fair Value Measurements at Reporting Date

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

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

Description for Each Class of Asset or Liability	December 31, 2022 (Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	$ —	$ —	$ —	$ —	$ —
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total perpetual preferred stocks	—	—	—	—	—
Bonds:					
U.S. governments	—	—	—	—	—
Industrial and misc	—	—	—	—	—
Hybrid securities	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total bonds	—	—	—	—	—
Common stock:					
Industrial and misc	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total common stock	—	—	—	—	—
Derivative assets:					
Interest rate contracts	—	—	—	—	—
Foreign exchange contracts	—	—	—	—	—
Credit contracts	—	—	—	—	—
Commodity futures contracts	—	—	—	—	—
Commodity forward contracts	—	—	—	—	—
Total derivatives	—	—	—	—	—
Money-market funds	67,652,747	—	—	—	67,652,747
Qualified cash pool	229,335,077	—	—	—	229,335,077
Separate account assets	—	—	—	—	—
Total assets at fair value/NAV	$ 296,987,824	$ —	$ —	$ —	$ 296,987,824
b. Liabilities at fair value:					
Derivative liabilities	$ —	$ —	$ —	$ —	$ —
Total liabilities at fair value	$ —	$ —	$ —	$ —	$ —

(2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.

The Company considers its investments in LIHTC investments as a Level 3 investment even though no market valuation was required as of December 31, 2023 and 2022. As a result, these investments are excluded from being presented as a Level 3 security in the fair value hierarchy tables above. As there is no readily available market, these securities are recorded at book/adjusted carrying value and considered held to maturity as they will not be sold. As a result, these investments are recorded and reported at book value of $1,793,269 and $0 as of December 31, 2023 and 2022.

(3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2023 or 2022.

(4) The framework the Company has established for determining the fair value of the investment holdings is outlined above.

LIHTC Investments — The Company does consider its investments in LIHTC investments as a Level 3 investment even though no market valuation adjustment was required as of December 31, 2023 and 2022. As a result, these investments are excluded from being presented as a level 3 security in the financial hierarchy tables above. As there is no readily available market, these securities are recorded and reported at book/adjusted carrying value and considered held to maturity as they will not be sold. Should any contractual breakage occur that jeopardizes the ability to receive the tax credits associated with these securities, impairments will be recognized. As of December 31, 2023, all of these investments are performing in accordance with their original contract terms.

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

B. Fair Value Combination — Not applicable.

C. Aggregate Fair Value Hierarchy

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

	December 31, 2023						
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	$ 255,976,736	$ 265,941,319	$ 70,871,718	$ 185,105,018	$ —	$ —	$ —
State and agency municipal securities	89,135,691	90,695,262	—	89,135,691	—	—	—
City and county municipal securities	99,684,733	101,228,403	—	99,684,733	—	—	—
Corporate debt securities	429,326,031	452,329,089	—	429,326,031	—	—	—
Cash equivalents	243,607,779	243,607,779	243,607,779	—	—	—	—
Other invested assets	1,793,269	1,793,269	—	—	1,793,269	—	—
Total bonds, cash equivalents and other invested assets	$ 1,119,524,239	$ 1,155,595,121	$ 314,479,497	$ 803,251,473	$ 1,793,269	$ —	$ —

	December 31, 2022						
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	$ 149,800,857	$ 161,709,111	$ 41,239,599	$ 108,561,258	$ —	$ —	$ —
State and agency municipal securities	92,234,092	94,754,513	—	92,234,092	—	—	—
City and county municipal securities	71,614,732	75,361,361	—	71,614,732	—	—	—
Corporate debt securities	324,323,988	359,463,423	—	324,323,988	—	—	—
Cash equivalents	296,987,824	296,987,824	296,987,824	—	—	—	—
Total bonds and cash equivalents	$ 934,961,493	$ 988,276,232	$ 338,227,423	$ 596,734,070	$ —	$ —	$ —

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

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

21. OTHER ITEMS

A. Unusual or Infrequent Items

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

B. Troubled Debt Restructuring: Debtors

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

C. Other Disclosures

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

D. Business Interruption Insurance Recoveries

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

E. State Transferable and Non-transferable Tax Credits

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

F. Sub-Prime Mortgage-Related Risk Exposure

(1–4) The investment policy for the Company limits investments in loan-backed securities, which can include sub-prime issuers. Further, the policy limits investments in private issuer mortgage securities to 10% of the portfolio, which also includes sub-prime issuers. The Company does not have any sub-prime mortgage-related risk exposure as of December 31, 2023 and 2022.

G. Retained Assets

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

H. Insurance-Linked Securities Contracts

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

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

22. EVENTS SUBSEQUENT

Subsequent events have been evaluated through February 28, 2024, which is the date these financial statements were available for issuance.

TYPE I — Recognized Subsequent Events

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

TYPE II — Non-Recognized Subsequent Events

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

23. REINSURANCE

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

The Company has an insolvency-only reinsurance agreement with UnitedHealthcare Insurance Company, an affiliate of the Company, to provide insolvency protection for its enrollees. The Company remains primarily liable as the direct insurer on all risks reinsured.

The Company does not have any unaffiliated reinsurance agreements in place as of December 31, 2023 or 2022.

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

	2023	2022
Premiums:		
Direct	$ 6,568,149,570	$ 5,738,135,482
Ceded	26,133,051	22,563,777
Net premium income	$ 6,542,016,519	$ 5,715,571,705
Hospital and medical expenses:		
Direct	$ 5,448,948,360	$ 4,653,245,535
Net hospital and medical expenses	$ 5,448,948,360	$ 4,653,245,535

A. Ceded Reinsurance Report

Section 1 — General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes ( ) No (X)

(2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

Section 2 — Ceded Reinsurance Report — Part A

(1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

Yes ( ) No (X)

(2) Does the reporting entity have any reinsurance agreements in effect that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

Section 3 — Ceded Reinsurance Report — Part B

(1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

The Company estimates there should be no aggregate reduction in surplus for termination of all reinsurance agreements as of December 31, 2023.

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

Yes ( ) No (X)

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

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

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

E. Reinsurance Credit

(1) The Company has no ceding reinsurance contracts subject to Appendix A-791 – *Life and Health Reinsurance Agreements* (“A-791”) that includes a provision which limits the reinsurer’s assumption of significant risk.

(2) The Company has no ceding reinsurance contracts not subject to A-791, for which reinsurance accounting was applied and which includes a provision that limits the reinsurer’s assumption of risk.

(3) The Company’s reinsurance contracts do not contain features which result in delays in payment in form or in fact.

(4) The Company has not reflected a reinsurance accounting credit for any assumption reinsurance contracts not subject to Appendix A-791 and not yearly renewable term, which meet the risk transfer requirements of SSAP No. 61R, *Life, Deposit-Type, and Accident and Health Reinsurance* (“SSAP No. 61R”).

(5) The Company did not cede any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract during the period covered by these financial statements, for which the statutory accounting treatment and GAAP accounting treatment were not the same.

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

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

A. The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.

B. Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations and aggregate health policy reserves in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.

C. Pursuant to the ACA, the Company’s commercial and Medicare business is subject to retrospectively rated features based on the actual MLR experienced on the commercial and Medicare lines of business and redetermination features for premium adjustments for changes to each member’s health scores based on guidelines determined by the ACA. The total amount of direct premiums written for which a portion is subject to the retrospectively rated and redetermination features are $38,189,190 and $6,006,671 for commercial, and $5,677,554,451 and $4,839,294,111 for Medicare, representing <1% and <1% for commercial, and 86% and 84% for Medicare of total direct premiums written as of December 31, 2023 and December 31, 2022, respectively.

The Company has Medicare Part D risk-corridor amounts from CMS which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums related to certain Part D premiums based on guidelines determined by CMS. The formula is tiered and based on the bid MLR. The amount of Medicare Part D direct premiums written subject to the retrospectively rated feature was $182,288,152 and $170,810,849, representing 3% and 3% of total direct premiums written as of December 31, 2023 and December 31, 2022, respectively.

Effective January 1, 2019, the Company’s Nebraska Medicaid line of business is subject to retrospectively rated features based on the actual high cost drug experience for the Company and all other Nebraska managed care organizations (“MCOs”). The program was designed to eliminate any disproportionate share of high cost drug experience for any of the MCOs. The total amount of direct premiums written from the Medicaid contract for which a portion is subject to the retrospectively rated feature was $802,989,313 and $853,511,756, which represents 12% and 15% of total direct written premiums as of December 31, 2023 and December 31, 2022, respectively.

CMS has released the final Medicaid Managed Care Rule which is subject to each State's administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum medical loss ratio requirement. Pursuant to the regulations, premiums associated with the Company's Medicaid line of business is subject to retrospectively rated features based on the actual MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. In addition, the Company's Medicaid contract, with the state of Nebraska, is subject to redetermination features for which a portion of direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the direct premiums written can be eligible for a performance guarantee payment based on various quality measures. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was $802,989,313 and $853,511,756, representing 12% and 15% of total direct premiums written as of December 31, 2023 and December 31, 2022, respectively.

D. The Company is required to maintain specific minimum medical loss ratios on the comprehensive commercial and Medicare lines of business.

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

	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Other Categories with Rebates	5 Total
Prior reporting year					
(1) Medical loss ratio rebates incurred	$ —	$ —	$ —	$ 7,464,831	$ 7,464,831
(2) Medical loss ratio rebates paid	—	—	—	—	—
(3) Medical loss rebates unpaid	—	—	—	7,464,831	7,464,831
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	7,464,831
Current reporting year-to-date					
(7) Medical loss ratio rebates incurred	—	—	62,974	11,745,849	11,808,823
(8) Medical loss ratio rebates paid	—	—	—	—	—
(9) Medical loss rebates unpaid	—	—	62,974	19,210,680	19,273,654
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	19,273,654

Pursuant to the Medicaid Managed Care Rule, based on the state of Nebraska's election and state contractual minimum medical loss ratio requirements, the Company is required to maintain specific MLRs on its Heritage Health plan and Heritage Health populations. The Company has estimated $161,038,114 and $155,693,488 in estimated Medicaid Managed Care Rule and state MLR rebates on its Heritage Health plan and Heritage Health population as of December 31, 2023 and December 31, 2022, respectively, which is included in aggregate health policy reserves in the financial statements.

E. Risk-Sharing Provisions of the Affordable Care Act

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

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

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

Reinsurance and Risk Corridors — The transitional reinsurance program and risk corridors program were temporary programs which expired at the end of 2016. The details of the years impacted and the amounts received are included in Note 24E(5) below.

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

			December 31, 2023
a.	**Permanent ACA Risk Adjustment Program**		
	Assets		
	1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)	$	28,849
	Liabilities		
	2. Risk adjustment user fees payable for ACA Risk Adjustment		354
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)		5,968
	Operations (Revenue & Expense)		
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment		(209,860)
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)		359
b.	**Transitional ACA Reinsurance Program**		
	Assets		
	1. Amounts recoverable for claims paid due to ACA Reinsurance	$	—
	2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)		—
	3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance		—
	Liabilities		
	4. Liabilities for contributions payable due to ACA Reinsurance — not reported as ceded premium		—
	5. Ceded reinsurance premiums payable due to ACA Reinsurance		—
	6. Liability for amounts held under uninsured plans contributions for ACA Reinsurance		—
	Operations (Revenue & Expense)		
	7. Ceded reinsurance premiums due to ACA Reinsurance		—
	8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments		—
	9. ACA Reinsurance contributions — not reported as ceded premium		—
c.	**Temporary ACA Risk Corridors Program**		
	Assets		
	1. Accrued retrospective premium due to ACA Risk Corridors	$	—
	Liabilities		
	2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors		—
	Operations (Revenue & Expense)		
	3. Effect of ACA Risk Corridors on net premium income (paid/received)		—
	4. Effect of ACA Risk Corridors on change in reserves for rate credits		—

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

		Accrued During the Prior Year on Business Written before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
						Prior Yea Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
		1	2	3	4	5	6	7	8		9	10
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a.	Permanent ACA Risk Adjustment Program											
	1. Premium adjustment receivable (including high risk pool payments)	$ 3,441	$ —	$ 238	$ —	$ 3,203	$ —	$ (2,973)	$ —	A	$ 230	$ —
	2. Premium adjustment (payable) (including high risk pool premium)	—	(319,446)	—	(548,984)	—	229,538	—	(229,538)	B	—	—
	3. Subtotal ACA Permanent Risk Adjustment Program	3,441	(319,446)	238	(548,984)	3,203	229,538	(2,973)	(229,538)		230	—
b.	Transitional ACA Reinsurance Program											
	1. Amounts recoverable for claims paid	—	—	—	—	—	—	—	—	C	—	—
	2. Amounts recoverable for claims unpaid (contra liability)	—	—	—	—	—	—	—	—	D	—	—
	3. Amounts receivable relating to uninsured plans	—	—	—	—	—	—	—	—	E	—	—
	4. Liabilities for contributions payable due to ACA Reinsurance —not reported as ceded premium	—	—	—	—	—	—	—	—	F	—	—
	5. Ceded reinsurance premiums payable	—	—	—	—	—	—	—	—	G	—	—
	6. Liability for amounts held under uninsured plans	—	—	—	—	—	—	—	—	H	—	—
	7. Subtotal ACA Transitional Reinsurance Program	—	—	—	—	—	—	—	—		—	—
c.	Temporary ACA Risk Corridors Program											
	1. Accrued retrospective premium	—	—	—	—	—	—	—	—	I	—	—
	2. Reserve for rate credits or policy experience rating refunds	—	—	—	—	—	—	—	—	J	—	—
	3. Subtotal ACA Risk Corridors Program	—	—	—	—	—	—	—	—		—	—
d.	Total for ACA Risk-Sharing Provisions	$ 3,441	$ (319,446)	$ 238	$ (548,984)	$ 3,203	$ 229,538	$ (2,973)	$ (229,538)		$ 230	$ —

Explanation of Adjustments

A. The risk adjustment receivable as of December 31, 2022 utilized paid claims through October 31, 2022. As of the Reporting Date, the risk adjustment receivable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for Benefit Year 2022 dated June 30, 2023. The risk adjustment receivable was further adjusted based on CMS' Summary Report of 2021 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment State Transfers.

B. The risk adjustment payable as of December 31, 2022 utilized paid claims through October 31, 2022. As of the Reporting Date, the risk adjustment payable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for Benefit Year 2022 dated June 30, 2023. The risk adjustment payable was further adjusted based on CMS' Summary Report of 2021 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment State Transfers.

C. N/A

D. N/A

E. N/A

F. N/A

G. N/A

H. N/A

I. N/A

J. N/A

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

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1–3)	Prior Year Accrued Less Payments (Col 2–4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1–3+7)	Cumulative Balance from Prior Years (Col 2–4+8)
	1	2	3	4	5	6	7	8		9	10
Risk Corridors Program Year:	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —	A	$ —	$ —
2. Reserve for rate credits or policy experience rating refunds	—	—	—	—	—	—	—	—	B	—	—
b. 2015											
1. Accrued retrospective premium	—	—	—	—	—	—	—	—	C	—	—
2. Reserve for rate credits or policy experience rating refunds	—	—	—	—	—	—	—	—	D	—	—
c. 2016											
1. Accrued retrospective premium	—	—	—	—	—	—	—	—	E	—	—
2. Reserve for rate credits or policy experience rating refunds	—	—	—	—	—	—	—	—	F	—	—
d. Total for Risk Corridors	$ —	$ —	$ —	$ —	$ —	$ —	$ —	$ —		$ —	$ —

Explanation of Adjustments

A. N/A

B. N/A

C. N/A

D. N/A

E. N/A

F. N/A

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

Risk Corridors Program Year:	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-Admissions) (1 - 2 - 3)	5 Nonadmitted Amount	6 Net Admitted Asset (4 - 5)
a. 2014	$ —	$ —	$ —	$ —	$ —	$ —
b. 2015	—	—	—	—	—	—
c. 2016	7,758,293	—	7,758,293	—	—	—
d. Total (a+b+c)	$ 7,758,293	$ —	$ 7,758,293	$ —	$ —	$ —

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

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

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

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

	2022		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	$ —	$ (376,878,151)	$ (376,878,151)
Paid claims — net of health care receivables*	4,264,395,929	253,279,764	4,517,675,693
End of year claim reserve	573,811,973	14,100,804	587,912,777
Incurred claims excluding the change in health care receivables	4,838,207,902	(109,497,583)	4,728,710,319
Beginning of year health care receivables*	—	88,603,834	88,603,834
End of year health care receivables*	(158,948,055)	(5,120,563)	(164,068,618)
Total incurred claims	$ 4,679,259,847	$ (26,014,312)	$ 4,653,245,535

*Health care receivables excludes provider loans and advances not yet expensed of $0 and $85,947 for 2022 and 2021, respectively.

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, net of health care and other amounts receivable, as of December 31, 2022 was $423,844,159. As of December 31, 2023, $391,706,482 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care and other amounts receivable are now $13,453,813, as a result of re-estimation of unpaid claims. Therefore, there has been $18,683,864 favorable prior year development since December 31, 2022 to December 31, 2023. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of $18,089,389 offset by unfavorable development of $690,744 in retroactivity for inpatient, outpatient, physician, and pharmacy claims.

At December 31, 2022, the Company recorded $26,014,312 of favorable development. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of $11,970,405 and favorable development of $7,761,519 in retroactivity for inpatient, outpatient, physician, and pharmacy claims. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for MLR rebates and retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the financial statements.

The Company incurred CAE of $191,734,614 and $185,153,696 in 2023 and 2022, respectively. These costs are included in the management service fees paid by the Company to United HealthCare Services, Inc. as a part of the Agreement (see Note 10). The following table discloses paid CAE, incurred CAE, and the balance in unpaid CAE reserve for 2023 and 2022:

	2023	2022
Total claims adjustment expenses	$ 191,734,614	$ 185,153,696
Less: current year unpaid claims adjustment expenses	(4,326,038)	(4,126,162)
Add: prior year unpaid claims adjustment expenses	4,126,162	2,718,243
Total claims adjustment expenses paid	$ 191,534,738	$ 183,745,777

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

26. INTERCOMPANY POOLING ARRANGEMENTS

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

27. STRUCTURED SETTLEMENTS

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

28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

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

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

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

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received within 90 Days of Billing	Actual Rebates Received within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
12/31/2023	$ 137,640,570	$ 48,333,603	$ —	$ —	$ —
9/30/2023	138,812,714	139,125,015	87,274,886	—	—
6/30/2023	137,215,171	138,601,413	120,539,753	12,987,728	—
3/31/2023	130,677,603	133,791,843	112,049,503	17,521,976	718,034
12/31/2022	110,452,774	108,691,923	97,434,233	9,635,723	1,342,341
9/30/2022	108,230,765	109,279,420	99,837,445	7,222,173	2,090,508
6/30/2022	106,884,024	108,023,541	92,257,132	12,490,415	3,156,923
3/31/2022	103,341,415	105,209,868	89,022,732	12,204,590	3,818,317
12/31/2021	58,034,442	57,871,451	49,276,270	7,323,559	1,264,259
9/30/2021	58,681,946	59,587,940	53,939,600	3,682,299	1,956,556
6/30/2021	60,390,733	60,564,811	53,427,815	5,220,195	1,917,849
3/31/2021	62,001,627	61,351,400	49,979,657	8,943,832	2,427,200

Of the amount reported as health care and other amounts receivable, $185,577,464 and $145,853,212 relate to pharmacy rebates receivable as of December 31, 2023 and 2022, respectively. This change is primarily due to increased membership along with the change in generic/name brand mix.

B. The Company has nonadmitted all risk-sharing receivables from the financial statements.

The Company also admitted $394,301 and $1,522,617 resulting from capitation arrangement receivables and $368,864 and $372,717 of claim overpayment receivables as of December 31, 2023 and December 31, 2022, respectively, which are included in health care and other amounts receivable in the financial statements.

29. PARTICIPATING POLICIES

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

30. PREMIUM DEFICIENCY RESERVES

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

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

	2023	
1. Liability carried for premium deficiency reserves	$	—
2. Date of the most recent evaluation of this liability		12/31/2023
3. Was anticipated investment income utilized in this calculation?	Yes [X]	No [ ]

	2022	
1. Liability carried for premium deficiency reserves	$	—
2. Date of the most recent evaluation of this liability		12/31/2022
3. Was anticipated investment income utilized in this calculation?	Yes [X]	No [ ]

31. ANTICIPATED SALVAGE AND SUBROGATION

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [X] No [ ]
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? ..... Yes [X] No [ ] N/A [ ]

1.3 State Regulating? ..... Nebraska

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

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000731766

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [X]

2.2 If yes, date of change: .....

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2018

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2018

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/27/2020

3.4 By what department or departments?
Nebraska Department of Insurance .....

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [X]

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

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? ..... Yes [ ] No [X]
4.12 renewals? ..... Yes [ ] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? ..... Yes [ ] No [X]
4.22 renewals? ..... Yes [ ] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [X]
If yes, complete and file the merger history data file with the NAIC.

5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....	.....	.....

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [X]

6.2 If yes, give full information:
.....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? ..... Yes [ ] No [X]

7.2 If yes,
7.21 State the percentage of foreign control; ..... 0.0 %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....	.....

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? ..... Yes [ ] No [X]

8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

.....

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

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? ..... Yes [ ] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? ..... Yes [ ] No [X] N/A [ ]

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Deloitte & Touche LLP, Minneapolis, MN .....

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

.....

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

.....

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [X] No [ ] N/A [ ]

10.6 If the response to 10.5 is no or n/a, please explain.

.....

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Gary A. Iannone, Vice President of Actuarial Services of United HealthCare Services Inc., an affiliate of UnitedHealthcare of the Midlands, Inc., 185 Asylum Street, Hartford, CT 06103 .....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [X]

12.11 Name of real estate holding company ...

12.12 Number of parcels involved 0

12.13 Total book/adjusted carrying value .....$ 0

12.2 If yes, provide explanation

.....

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

.....

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]

13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [X] No [ ]

a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c. Compliance with applicable governmental laws, rules and regulations;

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

.....

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

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

The UHG Code of Conduct was refreshed in 2023 to include an updated letter from the CEO, a letter from the UHG Chief Compliance Officer, added Inclusion as a Core Value as well as our Quality Belief, and added new Q&As on a variety of topics. .....

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

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

.....

GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [X] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [X] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? ..... Yes [X] No [ ]

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers ..... $ 0
- 20.12 To stockholders not officers ..... $ 0
- 20.13 Trustees, supreme or grand (Fraternal Only) ..... $ 0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers ..... $ 0
- 20.22 To stockholders not officers ..... $ 0
- 20.23 Trustees, supreme or grand (Fraternal Only) ..... $ 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others ..... $ 0
- 21.22 Borrowed from others ..... $ 0
- 21.23 Leased from others ..... $ 0
- 21.24 Other ..... $ 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [X] No [ ]

22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment $ 663
- 22.22 Amount paid as expenses ..... $ 383
- 22.23 Other amounts paid ..... $ 0

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

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

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? ..... Yes [ ] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

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

GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. $ 0

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. $ 0

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [ ] No [ ] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ ] No [ ] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [ ] No [ ] N/A [X]

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. $ 0
25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 $ 0
25.093 Total payable for securities lending reported on the liability page. $ 0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No [ ]

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements $ 0
26.22 Subject to reverse repurchase agreements $ 0
26.23 Subject to dollar repurchase agreements $ 0
26.24 Subject to reverse dollar repurchase agreements $ 0
26.25 Placed under option agreements $ 0
26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock $ 0
26.27 FHLB Capital Stock $ 0
26.28 On deposit with states $ 964,175
26.29 On deposit with other regulatory bodies $ 0
26.30 Pledged as collateral - excluding collateral pledged to an FHLB $ 0
26.31 Pledged as collateral to FHLB - including assets backing funding agreements $ 0
26.32 Other $ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [ ] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ] N/A [X]
If no, attach a description with this statement.

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

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [ ] No [ ]

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [ ] No [ ]
27.42 Permitted accounting practice Yes [ ] No [ ]
27.43 Other accounting guidance Yes [ ] No [ ]

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [ ] No [ ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [ ] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. $ 0

29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No [ ]

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

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

GENERAL INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107105	BlackRock Financial Management, Inc	549300LVXYIVJKE13M84	SEC	NO
104518	DWS Investment Management Americas Inc.	CZ83K4EEEX8QVCT3B128	SEC	NO

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

30.2 If yes, complete the following schedule:

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

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

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

GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	918,082,609	882,011,727	(36,070,882)
31.2 Preferred stocks	0	0	0
31.3 Totals	918,082,609	882,011,727	(36,070,882)

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

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

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

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

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

N/A .....

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

33.2 If no, list exceptions:

.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ..... Yes [ ] No [ ] N/A [X]

GENERAL INTERROGATORIES

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

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

.....

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

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly ..... Yes [ ] No [ ]

39.22 Immediately converted to U.S. dollars ..... Yes [ ] No [ ]

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

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums
.....	.....	.....

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... $ 0

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

1 Name	2 Amount Paid
.....	.....

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

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

1 Name	2 Amount Paid
.....	.....

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

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

1 Name	2 Amount Paid
.....	.....

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

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

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

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

1.31 Reason for excluding

.....

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

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

1.6 Individual policies:

Most current three years:		
1.61 Total premium earned	$	0
1.62 Total incurred claims	$	0
1.63 Number of covered lives		0
All years prior to most current three years:		
1.64 Total premium earned	$	0
1.65 Total incurred claims	$	0
1.66 Number of covered lives		0

1.7 Group policies:

Most current three years:		
1.71 Total premium earned	$	0
1.72 Total incurred claims	$	0
1.73 Number of covered lives		0
All years prior to most current three years:		
1.74 Total premium earned	$	0
1.75 Total incurred claims	$	0
1.76 Number of covered lives		0

2. Health Test:

		1 Current Year	2 Prior Year
2.1	Premium Numerator	6,542,016,519	5,715,571,705
2.2	Premium Denominator	6,542,016,519	5,715,571,705
2.3	Premium Ratio (2.1/2.2)	1.000	1.000
2.4	Reserve Numerator	831,278,198	759,934,239
2.5	Reserve Denominator	831,278,198	759,934,239
2.6	Reserve Ratio (2.4/2.5)	1.000	1.000

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

3.2 If yes, give particulars:

.....

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

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

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

5.2 If no, explain:

UnitedHealthcare of the Midlands, Inc. has insolvency only reinsurance. .....

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical	$	0
5.32 Medical Only	$	0
5.33 Medicare Supplement	$	0
5.34 Dental & Vision	$	0
5.35 Other Limited Benefit Plan	$	0
5.36 Other	$	0

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

Hold harmless clauses in provider agreements and continuation of coverage endorsements in reinsurance agreements .....

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

7.2 If no, give details

.....

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year	197,564
8.2 Number of providers at end of reporting year	162,787

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

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months	$	0
9.22 Business with rate guarantees over 36 months	$	0

GENERAL INTERROGATORIES

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? ..... Yes [X] No [ ]

10.2 If yes:

10.21 Maximum amount payable bonuses	$	75,681,256
10.22 Amount actually paid for year bonuses	$	101,686,441
10.23 Maximum amount payable withholds	$	5,505,999
10.24 Amount actually paid for year withholds	$	4,976,712

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, ...	Yes [ ] No [X]
11.13 An Individual Practice Association (IPA), or,	Yes [ ] No [X]
11.14 A Mixed Model (combination of above)?	Yes [ ] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes [X] No [ ]

11.3 If yes, show the name of the state requiring such minimum capital and surplus. ..... Nebraska

11.4 If yes, show the amount required. ..... $ 66,920,165

11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes [ ] No [X]

11.6 If the amount is calculated, show the calculation

Nebraska Statutes Title 44 Chapter 32 Subsection 138

Premium Revenue	$6,542,016,519
Premiums < $150,000,000 at 2%	$3,000,000
Premiums > $150,000,000 at 1%	$63,920,165
Total	$66,920,165 .....

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

1 Name of Service Area
State of Alabama: Autauga, Baldwin, Barbour, Bibb, Blount, Bullock, Butler, Calhoun, Chambers, Cherokee, Chilton, Choctaw, Clarke, Clay, Cleburne, Coffee, Colbert, Conecuh, Coosa, Covington, Crenshaw, Cullman, Dale, Dallas, DeKalb, Elmore, Escambia, Etowah, Fayette, Franklin, Geneva, Greene, Hale, Henry, Houston, Jackson, Jefferson, Lamar, Lauderdale, Lawrence, Lee, Limestone, Lowndes, Macon, Madison, Marengo, Marion, Marshall, Mobile, Monroe, Montgomery, Morgan, Perry, Pickens, Pike, Randolph, Russell, Shelby, St.Clair, Sumter, Talladega, Tallapoosa, Tuscaloosa, Walker, Washington, Wilcox, Winston. .....
State of Arkansas: Ashley, Baxter, Benton, Boone, Bradley, Calhoun, Carroll, Chicot, Clark, Clay, Cleburne, Cleveland, Columbia, Conway, Craighead, Crawford, Crittenden, Cross, Dallas, Desha, Drew, Faulkner, Franklin, Fulton, Garland, Grant, Greene, Hempstead, Hot Spring, HotSpring, Howard, Independence, Izard, Jackson, Jefferson, Johnson, Lafayette, Lawrence, Lee, Lincoln, Little River, LittleRiver, Logan, Lonoke, Madison, Marion, Miller, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Prairie, Pulaski, Randolph, Saline, Scott, Searcy, Sebastian, Sevier, Sharp, St. Francis, St.Francis, Stone, Union, Van Buren, VanBuren, Washington, White, Woodruff, Yell. .....
State of Iowa: Adair, Adams, Appanoose, Audubon, Benton, BlackHawk, Boone, Bremer, State of Iowa: Buchanan, BuenaVista, Butler, Calhoun, Carroll, Cass, Cedar, CerroGordo, Chickasaw, Clarke, Clayton, Clinton, Crawford, Dallas, Davis, Decatur, Delaware, Dodge, Douglas, Dubuque, Fayette, Floyd, Franklin, Fremont, Gage, Greene, Grundy, Guthrie, Hamilton, Hancock, Hardin, Harrison, Howard, Iowa, Jackson, Jasper, Jefferson, Johnson, Jones, Keokuk, Kossuth, Lancaster, Linn, Lucas, Madison, Mahaska, Marion, Marshall, Mills, Mitchell, Monona, Monroe, Montgomery, Muscatine, Oteo, Page, Pocahontas, Polk, Pottawattamie, Poweshiek, Sarpy, Saunders, Scott, Seward, Shelby, Story, Tama, Union, Wapello, Warren, Washington., Wayne, Webster, Winnebago, Woodbury, Worth, Wright. .....
State of Illinois: Adams, Alexander, Bond, Boone, Bureau, Calhoun, Carroll, Clinton, Cook, Dekalb, Dupage, Fayette, Ford, Greene, Grundy, Henry, Iroquois, Jackson, Jersey, JoDaviess, Kane, Kankakee, Kendall, Lake, LaSalle, Lee, Livingston, Macoupin, Madison, Marion, McHenry, Monroe, Montgomery, Ogle, Perry, Pike, Randolph, St.Clair, Stephenson, Union, Washington, Will, Winnebago. .....
State of Indiana: Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, Dearborn, Decatur, DeKalb, Delaware, Dubois, Elkhart, Fayette, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Huntington, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Rush, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Union, Vanderburgh, Vermillion, Vigo, Wabash, Warren, Warrick, Washington, Wayne, Wells, White, Whitley. .....

1 Name of Service Area
State of Kansas: Allen, Anderson, Atchison, Barber, Bourbon, Brown, Butler, Chase, Chautauqua, Cherokee, Clay, Cloud, Coffey, Cowley, Crawford, Dickinson, Doniphan, Douglas, Edwards, Elk, Ellsworth, Franklin, Geary, Greenwood, Harper, Harvey, Jackson, Jefferson, Jewell, Johnson, Kingman, Kiowa, Labette, Leavenworth, Lincoln, Linn, Lyon, Marion, Marshall, McPherson, Miami, Mitchell, Montgomery, Morris, Nemaha, Neosho, Osage, Osborne, Ottawa, Pawnee, Phillips, Pottawatomie, Pratt, Reno, Republic, Rice, Rooks, Rush, Russell, Saline, Sedgwick, Shawnee, Smith, Stafford, Sumner, Wabaunsee, Washington, Wilson, Woodson, Wyandotte. .....
State of Missouri: Adair, Andrew, Atchison, Audrain, Barry, Barton, Bates, Benton, Bollinger, Boone, Buchanan, Butler, Caldwell, Callaway, Camden, CapeGirardeau, Carroll, Carter, Cass, Cedar, Chariton, Christian, Clark, Clay, Clinton, Cole, Cooper, Crawford, Dade, Dallas, Daviess, DeKalb, Dent, Douglas, Dunklin, Franklin, Gasconade, Gentry, Greene, Grundy, Harrison, Henry, Hickory, Holt, Howard, Howell, Iron, Jackson, Jasper, Jefferson, Johnson, Knox, Laclede, Lafayette, Lawrence, Lewis, Lincoln, Linn, Livingston, Macon, Madison, Maries, Marion, McDonald, Mercer, Miller, Mississippi, Moniteau, Monroe, Montgomery, Morgan, NewMadrid, Newton, Nodaway, Oregon, Osage, Ozark, Pemiscot, Perry, Pettis, Phelps, Pike, Platte, POLK, Pulaski, Putnam, Ralls, Randolph, Ray, Reynolds, Ripley, Saline, Schuyler, Scotland, Scott, Shannon, Shelby, St.Charles, St.Clair, St.Francois, St.Louis, St.LouisCity, Ste.Genevieve, Stoddard, Stone, Sullivan, Taney, Texas, Vernon, Warren, Washington, Wayne, Webster, Worth, Wright. .....
State of Nebraska: State-wide. .....
.....

13.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [X]

13.2 If yes, please provide the amount of custodial funds held as of the reporting date. .....$ 0

13.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [X]

13.4 If yes, please provide the balance of funds administered as of the reporting date. .....$ 0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [X]

14.2 If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
.....	.....	.....	.....	.....	.....	.....

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written ..... $ 0

15.2 Total Incurred Claims .....$ 0

15.3 Number of Covered Lives 0

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

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [X] No [ ]

16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

FIVE-YEAR HISTORICAL DATA

		1 2023	2 2022	3 2021	4 2020	5 2019
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	1,734,550,031	1,465,681,054	973,082,849	908,437,100	835,262,258
2.	Total liabilities (Page 3, Line 24)	980,984,044	895,195,530	514,309,358	498,445,708	476,909,457
3.	Statutory minimum capital and surplus requirement	66,920,165	58,655,717	39,513,994	37,132,408	36,926,881
4.	Total capital and surplus (Page 3, Line 33)	753,565,987	570,485,524	458,773,491	409,991,392	358,352,801
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	6,514,530,507	5,608,832,552	3,772,346,554	3,541,157,862	3,569,912,613
6.	Total medical and hospital expenses (Line 18)	5,448,948,360	4,653,245,535	3,123,163,841	2,869,588,757	2,960,662,721
7.	Claims adjustment expenses (Line 20)	191,734,614	185,153,696	135,468,770	129,513,786	139,329,523
8.	Total administrative expenses (Line 21)	436,875,506	401,922,570	279,891,520	343,356,949	275,011,820
9.	Net underwriting gain (loss) (Line 24)	436,972,027	368,510,751	233,822,423	198,698,370	194,908,549
10.	Net investment gain (loss) (Line 27)	59,360,049	27,029,610	13,914,270	13,519,887	17,790,211
11.	Total other income (Lines 28 plus 29)	(821,345)	(673,488)	(632,507)	(918,773)	(1,026,007)
12.	Net income or (loss) (Line 32)	392,177,840	312,004,078	196,031,492	152,968,900	167,373,497
	Cash Flow (Page 6)					
13.	Net cash from operations (Line 11)	392,735,282	526,670,747	205,980,044	185,976,577	203,652,055
	Risk-Based Capital Analysis					
14.	Total adjusted capital	753,565,987	570,485,524	458,773,491	409,991,392	358,352,801
15.	Authorized control level risk-based capital	150,783,689	142,602,468	101,731,904	105,484,835	114,979,912
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	499,661	476,788	362,741	354,026	342,547
17.	Total members months (Column 6, Line 7)	6,062,233	5,595,473	4,274,125	4,088,017	4,058,508
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)	83.6	83.0	82.8	81.0	82.9
20.	Cost containment expenses	2.2	2.5	2.7	2.8	2.8
21.	Other claims adjustment expenses	0.7	0.8	0.9	0.8	1.1
22.	Total underwriting deductions (Line 23)	93.3	93.4	93.8	94.4	94.5
23.	Total underwriting gain (loss) (Line 24)	6.7	6.6	6.2	5.6	5.5
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 17, Col. 5)	405,160,295	262,260,006	298,600,605	272,934,953	244,031,567
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	423,844,159	288,274,317	341,517,575	316,569,423	261,052,693
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30.	Affiliated mortgage loans on real estate	0	0	0	0	0
31.	All other affiliated	0	0	0	0	0
32.	Total of above Lines 26 to 31	0	0	0	0	0
33.	Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	0

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

If no, please explain: .....

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only 2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama AL	L	0	2,415,217,809	49,416,616	0	0	0	0	2,464,634,425	0
2. Alaska AK	N	0	0	0	0	0	0	0	0	0
3. Arizona AZ	N	0	0	0	0	0	0	0	0	0
4. Arkansas AR	L	0	237,870,817	0	0	0	0	0	237,870,817	0
5. California CA	N	0	0	0	0	0	0	0	0	0
6. Colorado CO	N	0	0	0	0	0	0	0	0	0
7. Connecticut CT	N	0	0	0	0	0	0	0	0	0
8. Delaware DE	N	0	0	0	0	0	0	0	0	0
9. District of Columbia DC	N	0	0	0	0	0	0	0	0	0
10. Florida FL	N	0	0	0	0	0	0	0	0	0
11. Georgia GA	N	0	0	0	0	0	0	0	0	0
12. Hawaii HI	N	0	0	0	0	0	0	0	0	0
13. Idaho ID	N	0	0	0	0	0	0	0	0	0
14. Illinois IL	L	0	523,677,452	0	0	0	0	0	523,677,452	0
15. Indiana IN	L	0	698,393,419	0	0	0	0	0	698,393,419	0
16. Iowa IA	L	0	31,593,376	0	0	0	0	0	31,593,376	0
17. Kansas KS	L	0	132,568,144	0	0	0	0	0	132,568,144	0
18. Kentucky KY	N	0	0	0	0	0	0	0	0	0
19. Louisiana LA	N	0	0	0	0	0	0	0	0	0
20. Maine ME	N	0	0	0	0	0	0	0	0	0
21. Maryland MD	N	0	0	0	0	0	0	0	0	0
22. Massachusetts MA	N	0	0	0	0	0	0	0	0	0
23. Michigan MI	N	0	0	0	0	0	0	0	0	0
24. Minnesota MN	N	0	0	0	0	0	0	0	0	0
25. Mississippi MS	N	0	0	0	0	0	0	0	0	0
26. Missouri MO	L	0	1,312,179,811	0	0	0	0	0	1,312,179,811	0
27. Montana MT	N	0	0	0	0	0	0	0	0	0
28. Nebraska NE	L	4,392,330	326,053,623	802,989,313	33,796,860	0	0	0	1,167,232,126	0
29. Nevada NV	N	0	0	0	0	0	0	0	0	0
30. New Hampshire NH	N	0	0	0	0	0	0	0	0	0
31. New Jersey NJ	N	0	0	0	0	0	0	0	0	0
32. New Mexico NM	N	0	0	0	0	0	0	0	0	0
33. New York NY	N	0	0	0	0	0	0	0	0	0
34. North Carolina NC	N	0	0	0	0	0	0	0	0	0
35. North Dakota ND	N	0	0	0	0	0	0	0	0	0
36. Ohio OH	N	0	0	0	0	0	0	0	0	0
37. Oklahoma OK	N	0	0	0	0	0	0	0	0	0
38. Oregon OR	N	0	0	0	0	0	0	0	0	0
39. Pennsylvania PA	N	0	0	0	0	0	0	0	0	0
40. Rhode Island RI	N	0	0	0	0	0	0	0	0	0
41. South Carolina SC	N	0	0	0	0	0	0	0	0	0
42. South Dakota SD	N	0	0	0	0	0	0	0	0	0
43. Tennessee TN	N	0	0	0	0	0	0	0	0	0
44. Texas TX	N	0	0	0	0	0	0	0	0	0
45. Utah UT	N	0	0	0	0	0	0	0	0	0
46. Vermont VT	N	0	0	0	0	0	0	0	0	0
47. Virginia VA	N	0	0	0	0	0	0	0	0	0
48. Washington WA	N	0	0	0	0	0	0	0	0	0
49. West Virginia WV	N	0	0	0	0	0	0	0	0	0
50. Wisconsin WI	N	0	0	0	0	0	0	0	0	0
51. Wyoming WY	N	0	0	0	0	0	0	0	0	0
52. American Samoa AS	N	0	0	0	0	0	0	0	0	0
53. Guam GU	N	0	0	0	0	0	0	0	0	0
54. Puerto Rico PR	N	0	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands VI	N	0	0	0	0	0	0	0	0	0
56. Northern Mariana Islands MP	N	0	0	0	0	0	0	0	0	0
57. Canada CAN	N	0	0	0	0	0	0	0	0	0
58. Aggregate Other Aliens OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	4,392,330	5,677,554,451	852,405,929	33,796,860	0	0	0	6,568,149,570	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0	0
61. Totals (Direct Business)	XXX	4,392,330	5,677,554,451	852,405,929	33,796,860	0	0	0	6,568,149,570	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

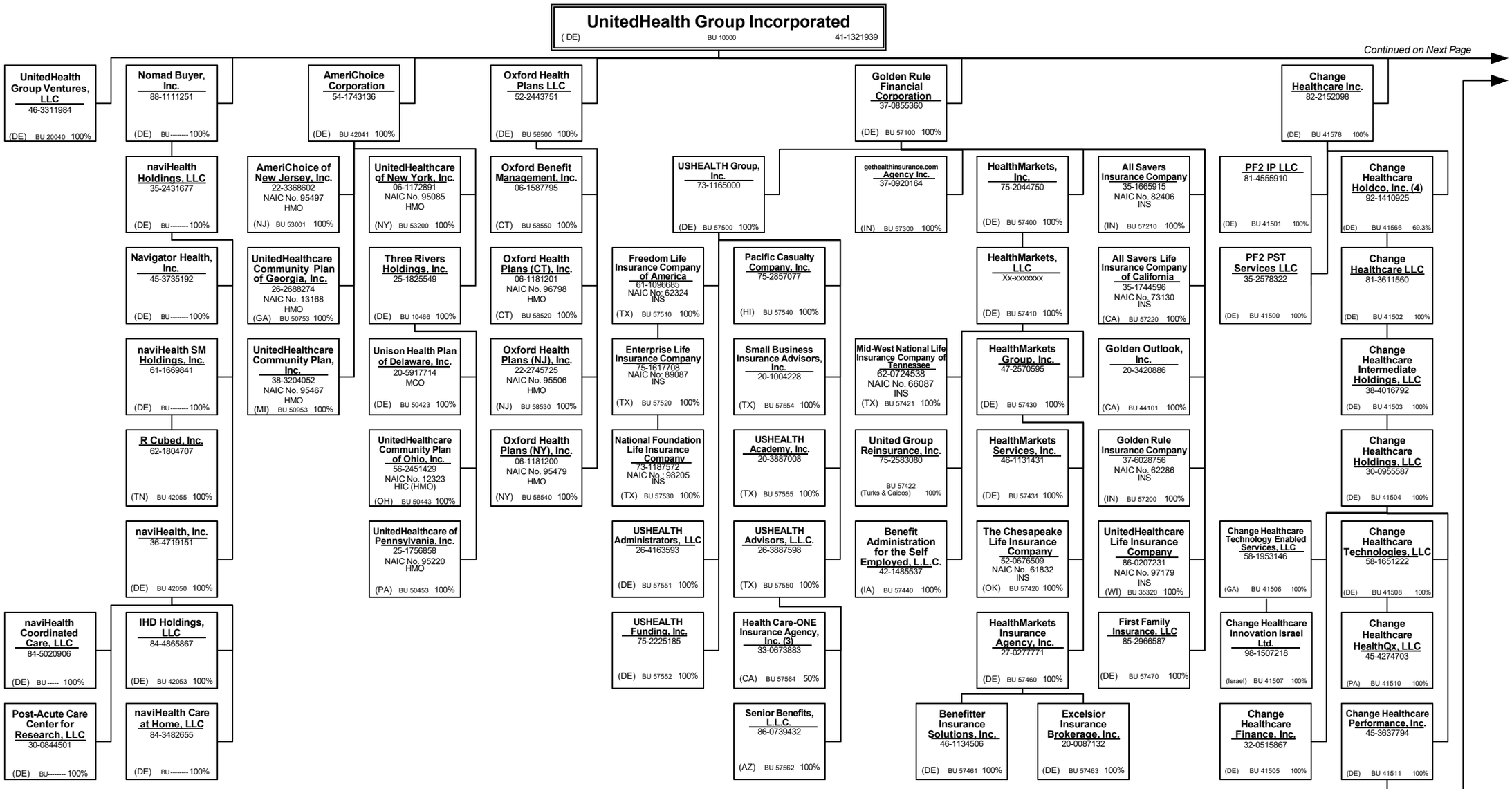
(a) Active Status Counts:

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

(b) Explanation of basis of allocation by states, premiums by state, etc.
Premiums allocated by state based upon Geographic Market.

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

PART 1 – ORGANIZATIONAL CHART



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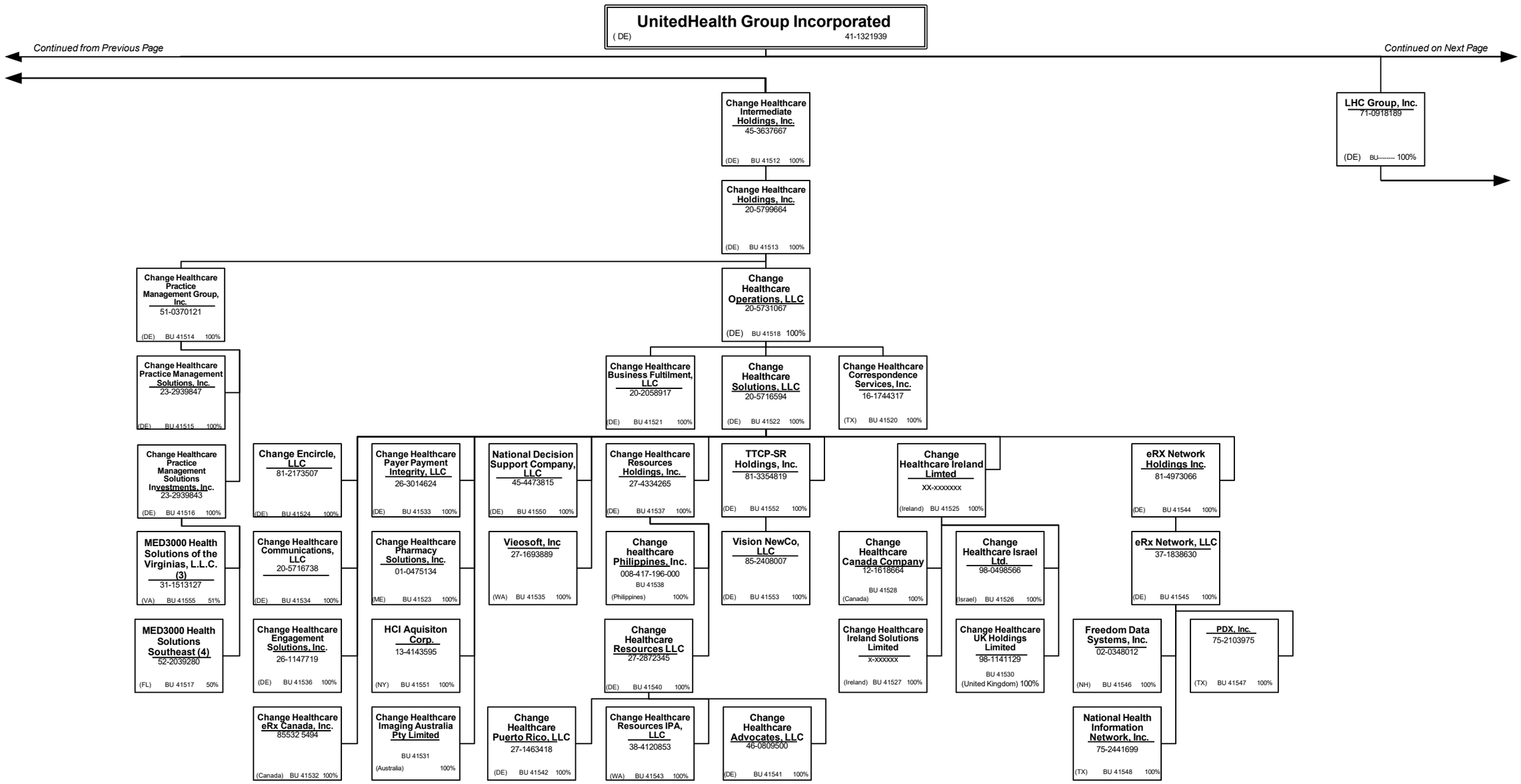

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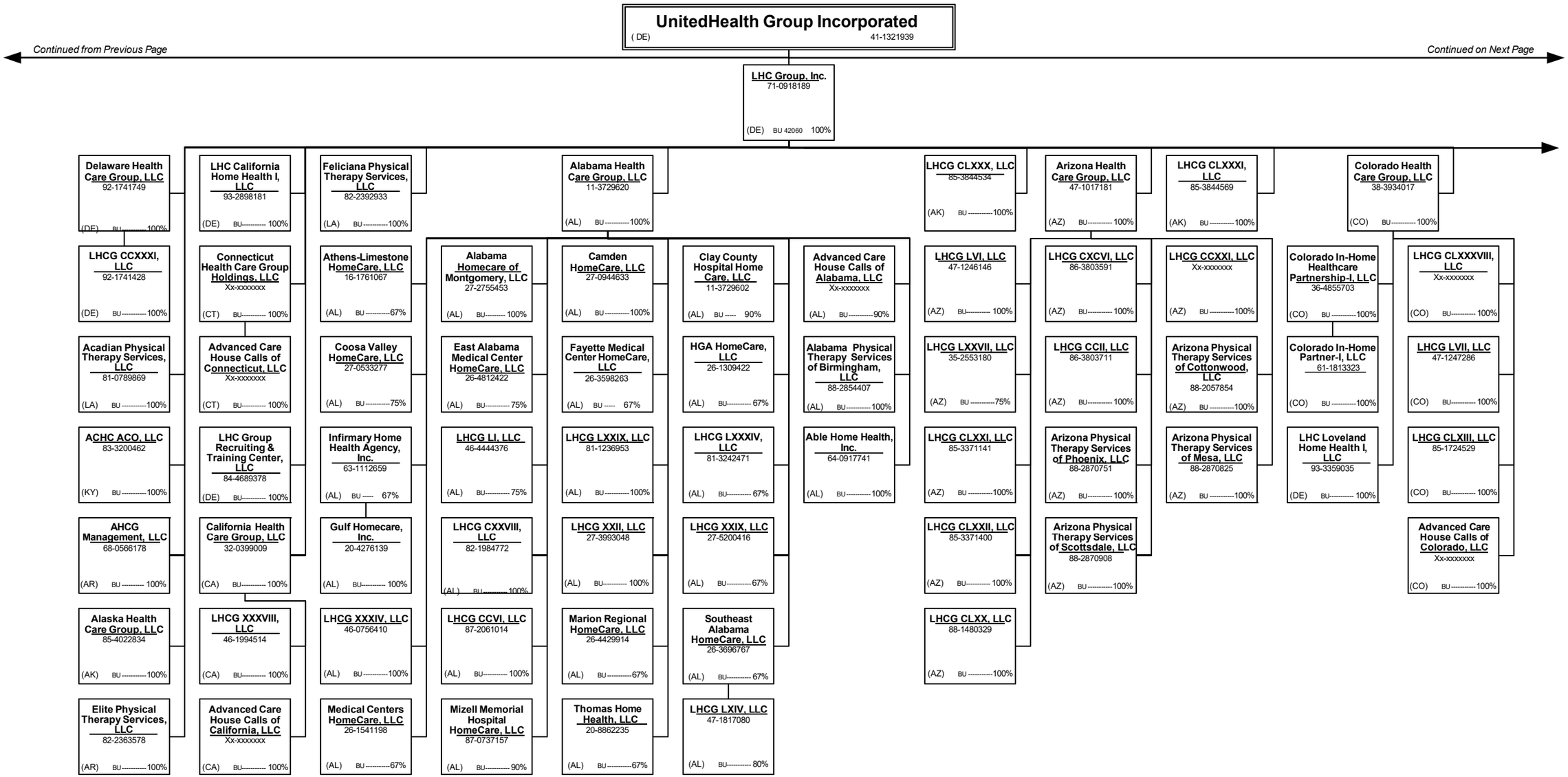

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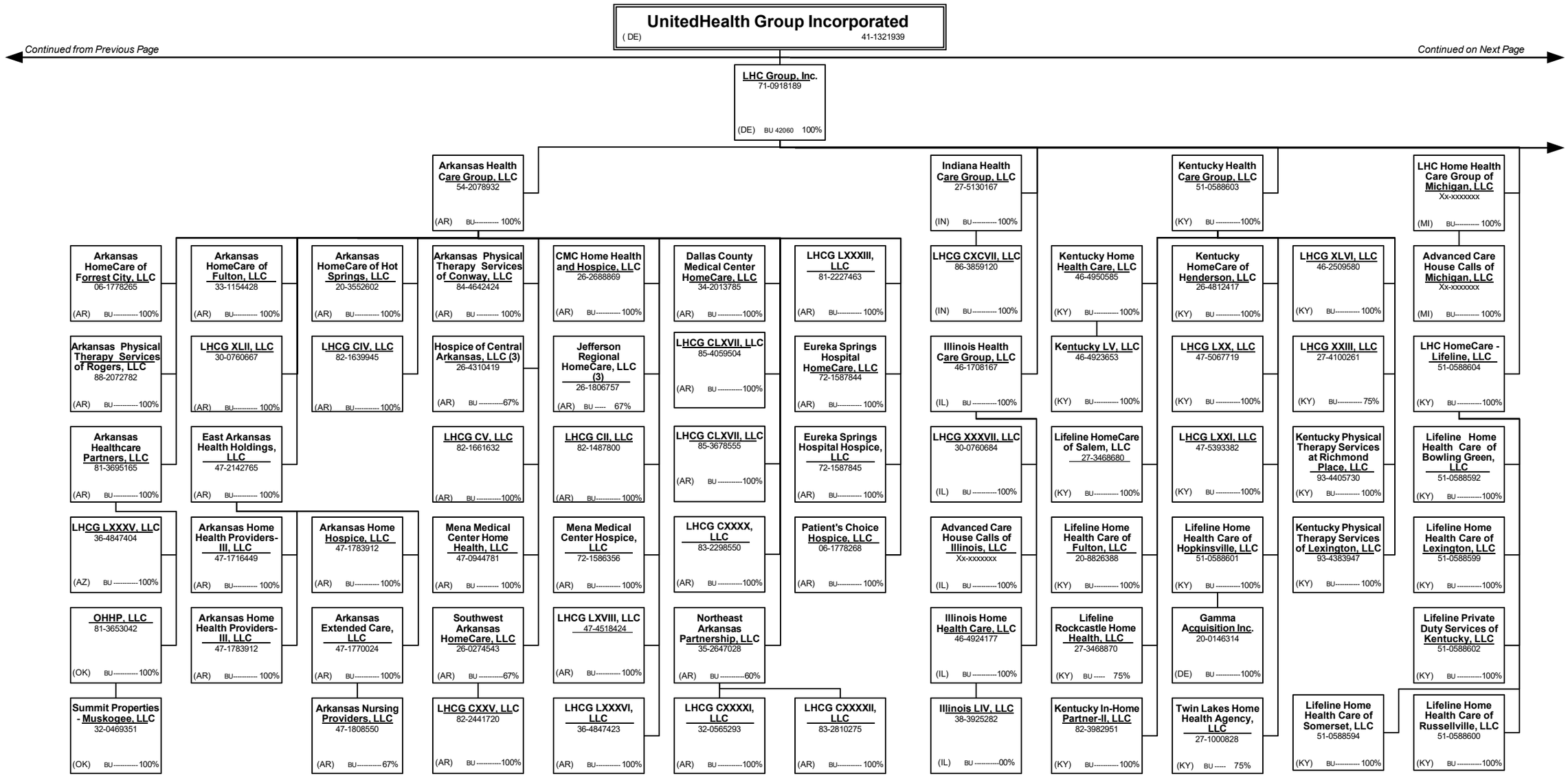

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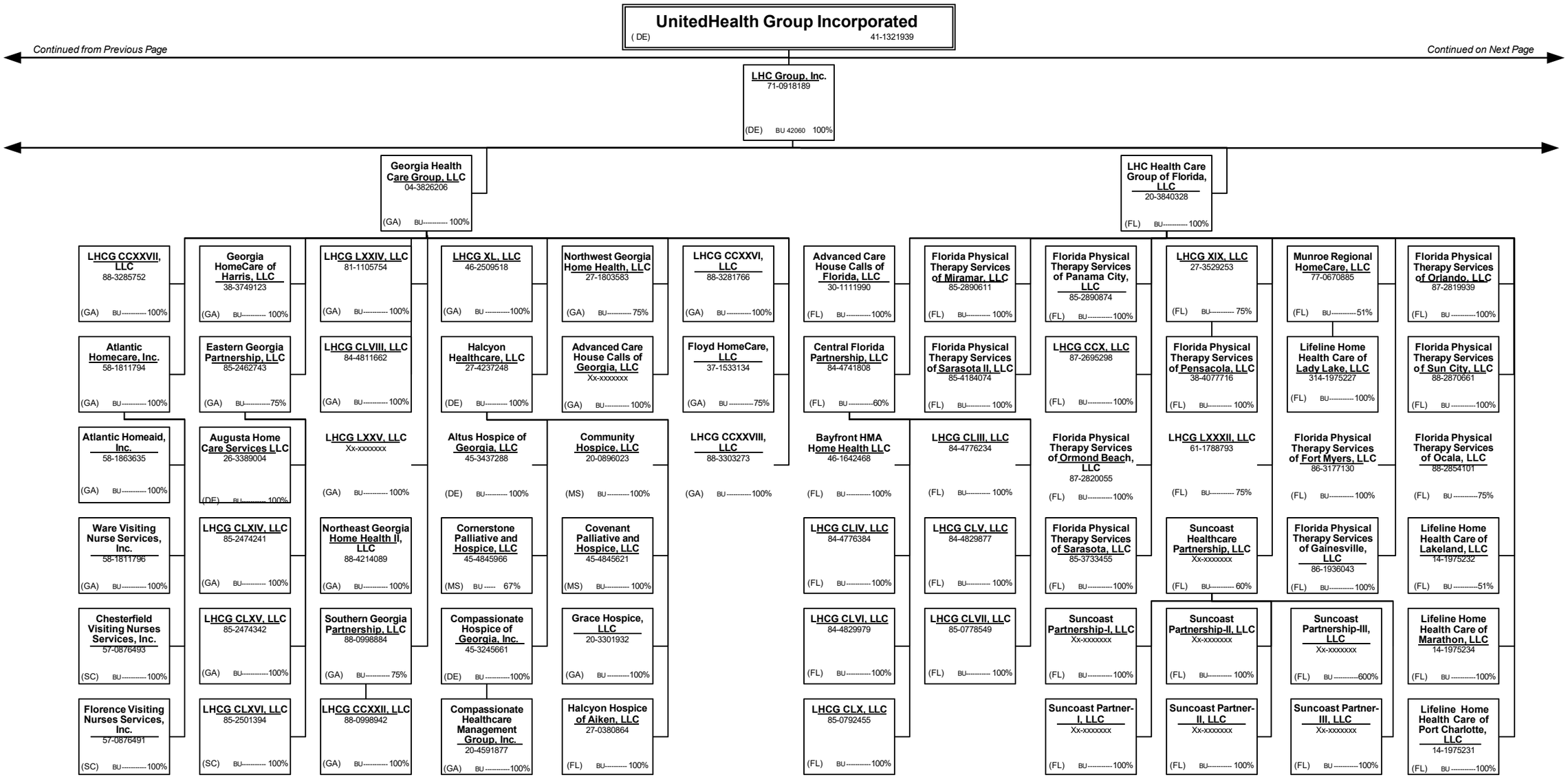

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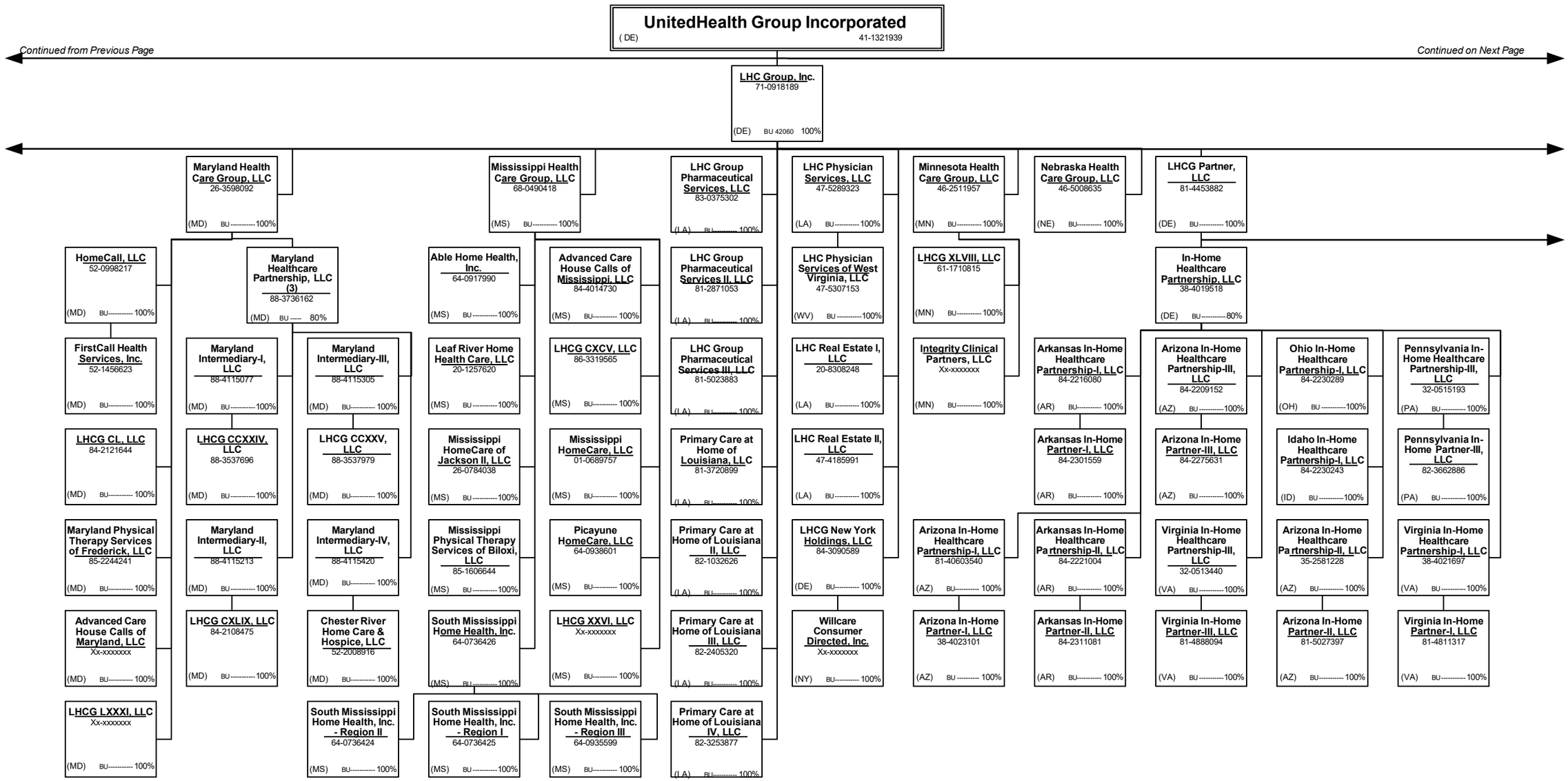

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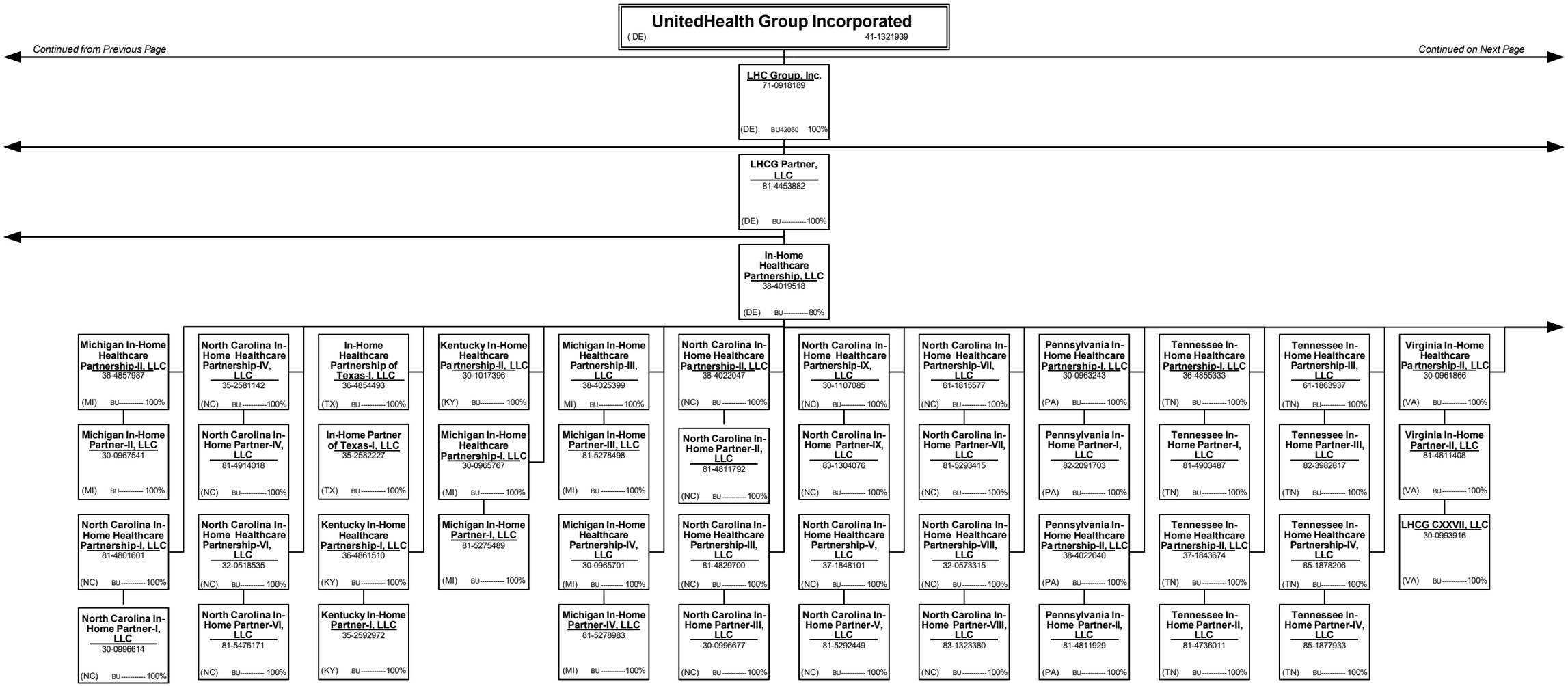

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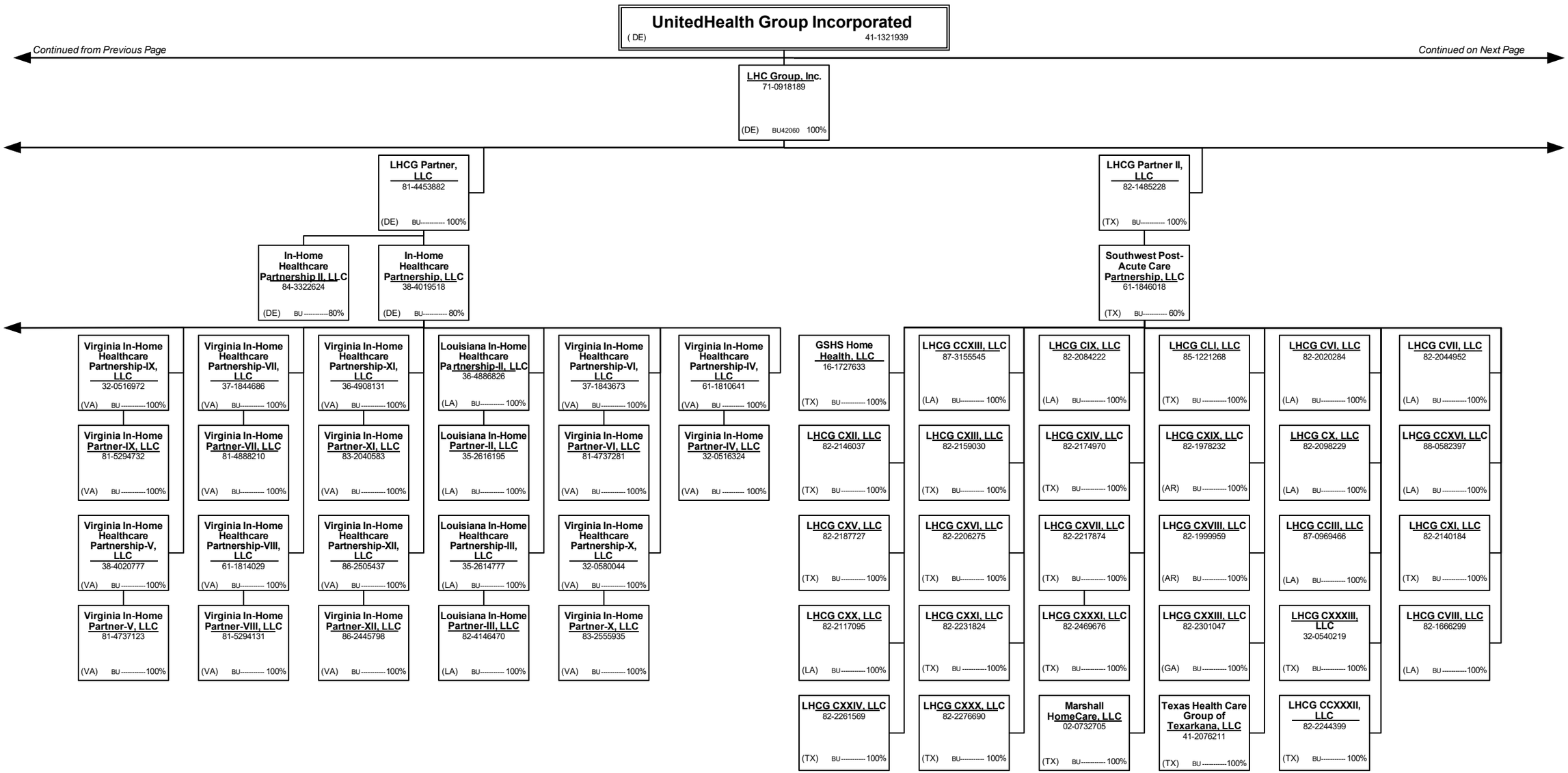

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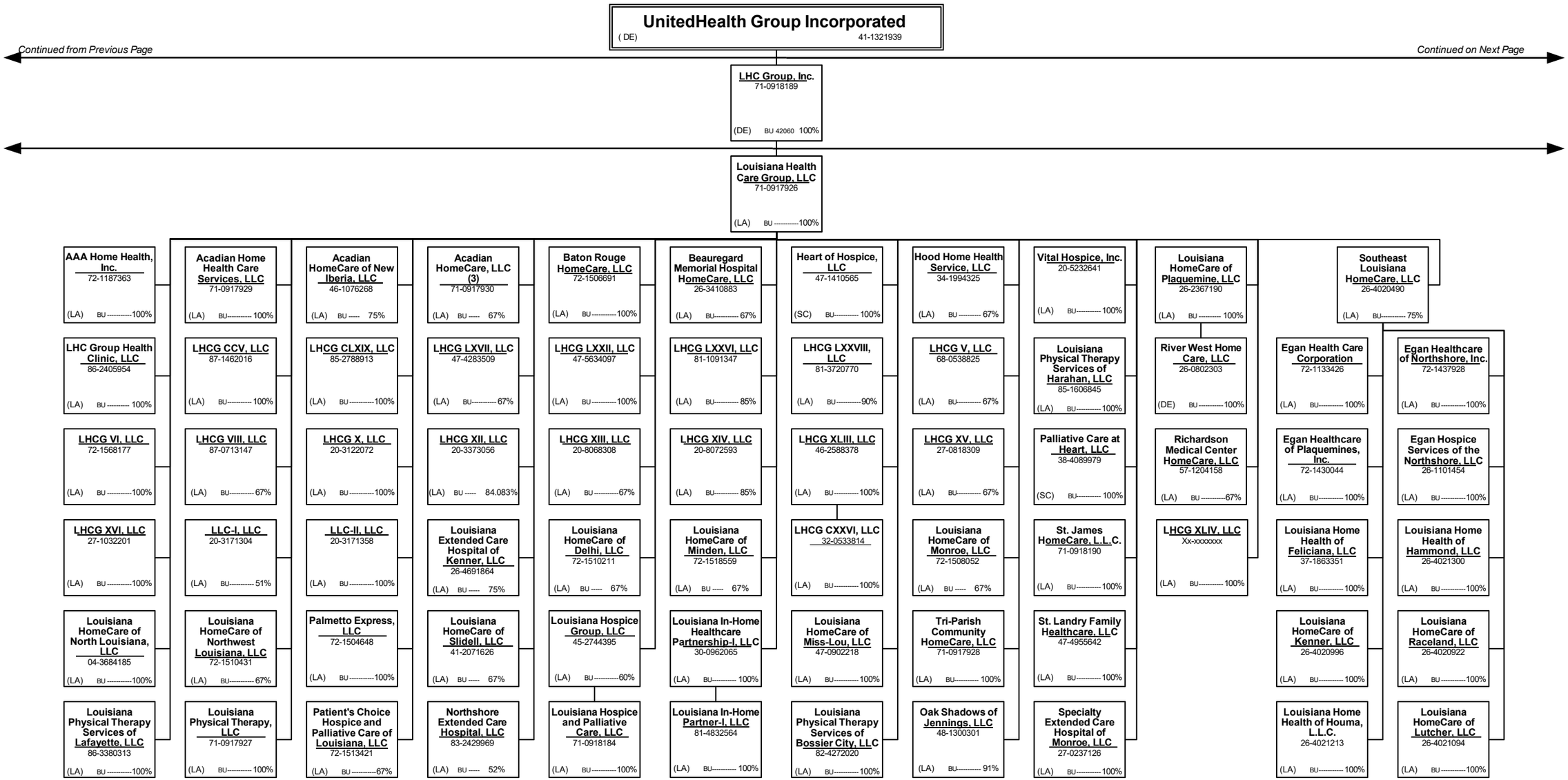

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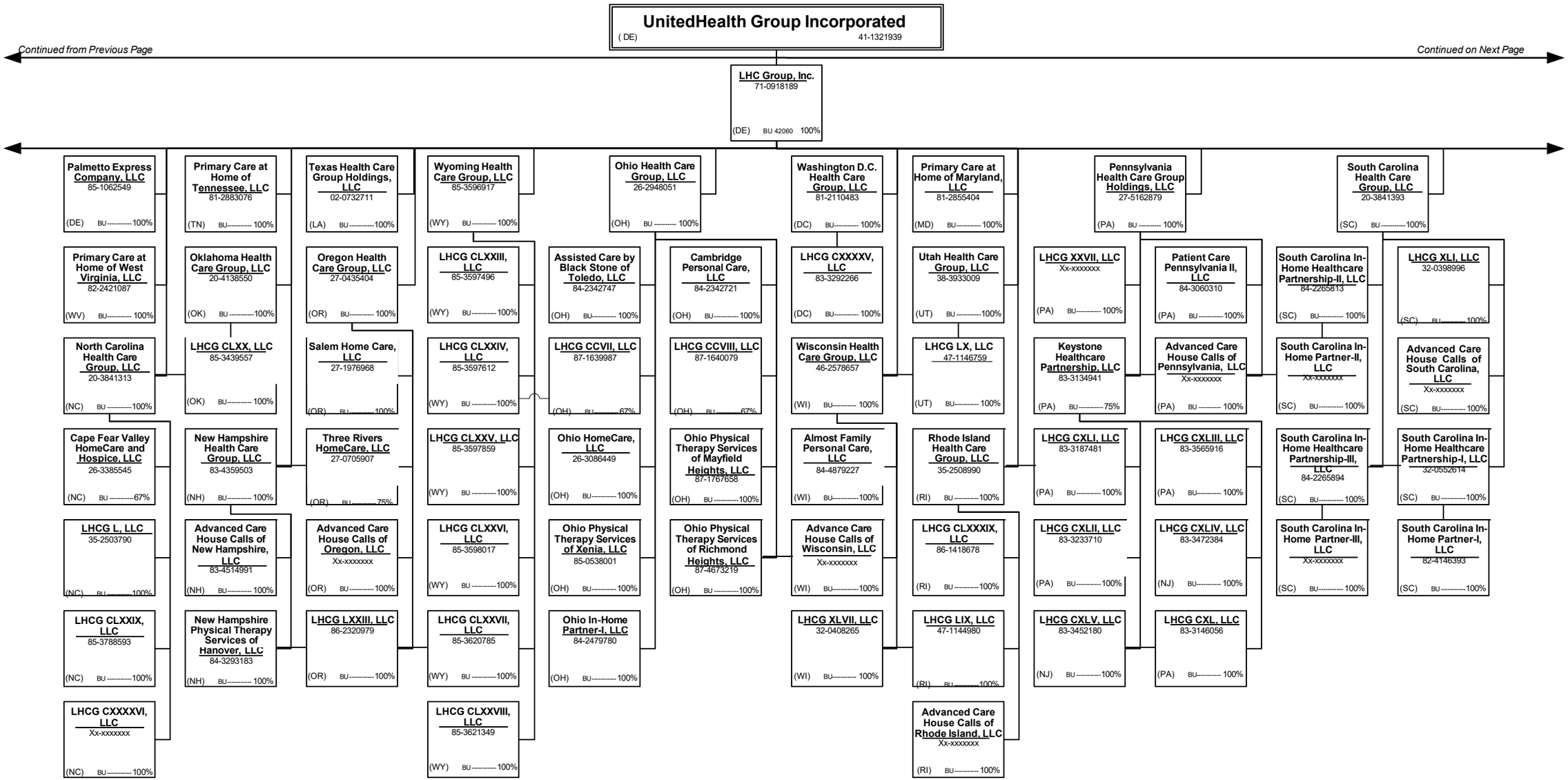

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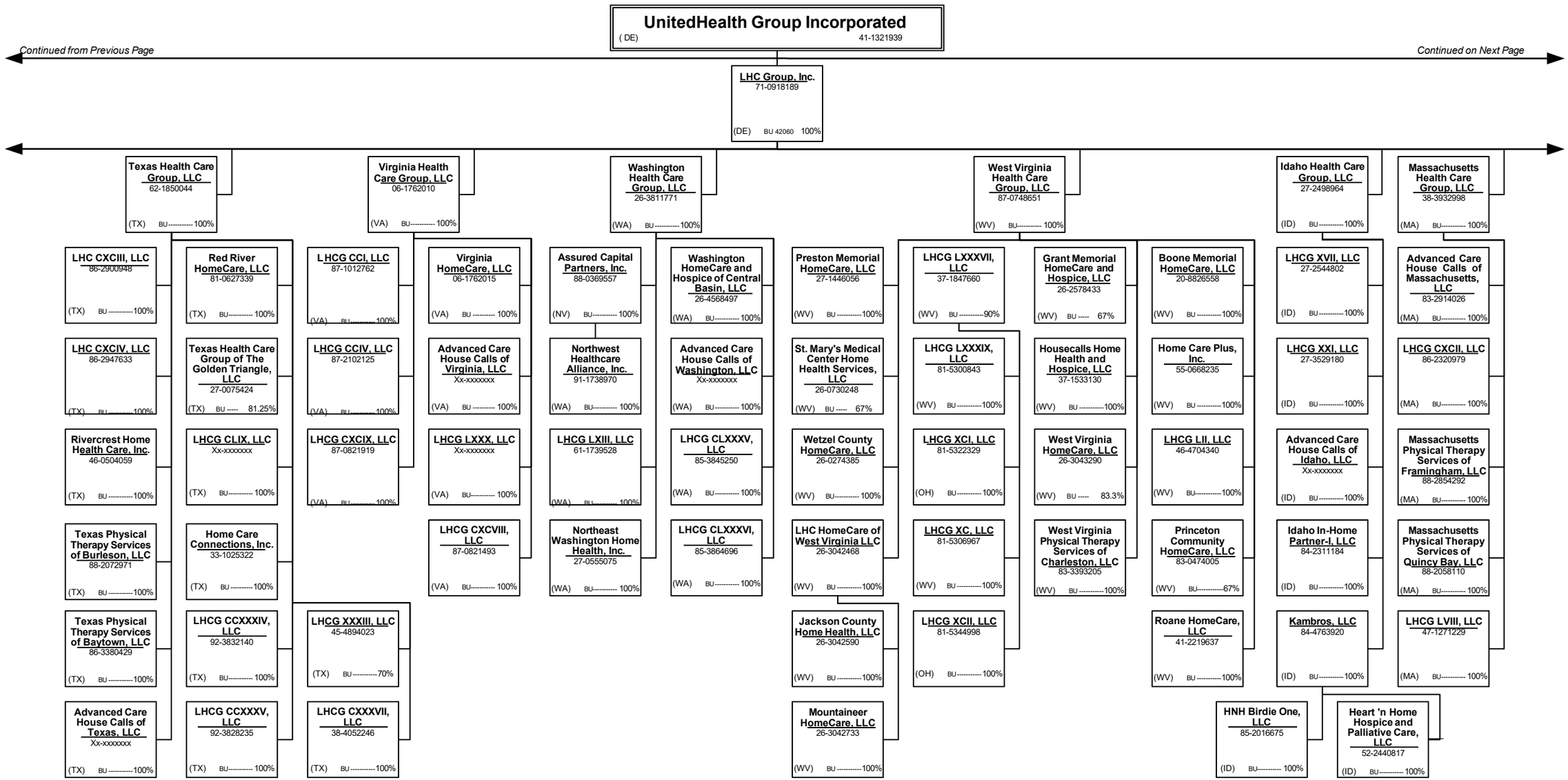

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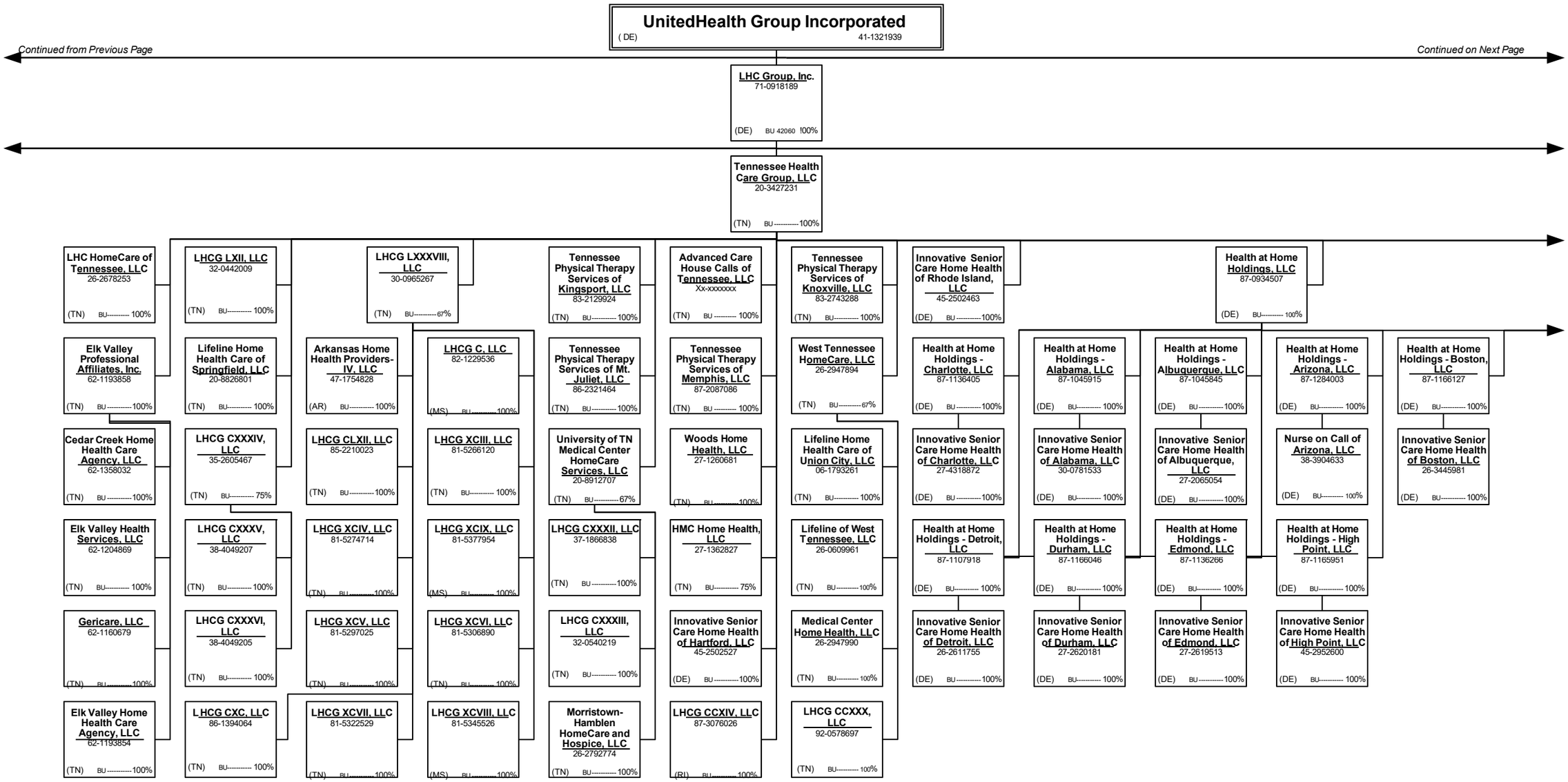

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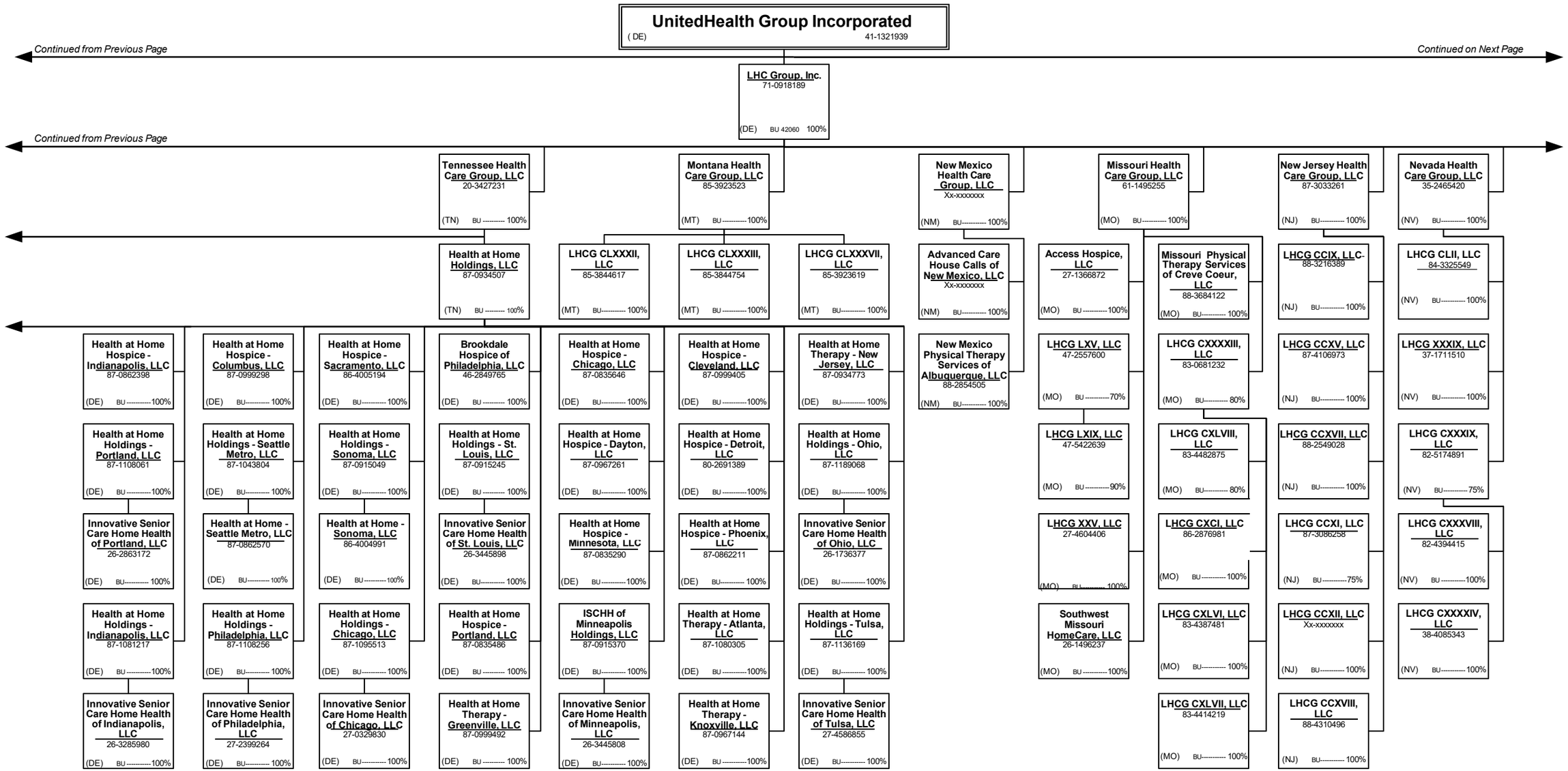

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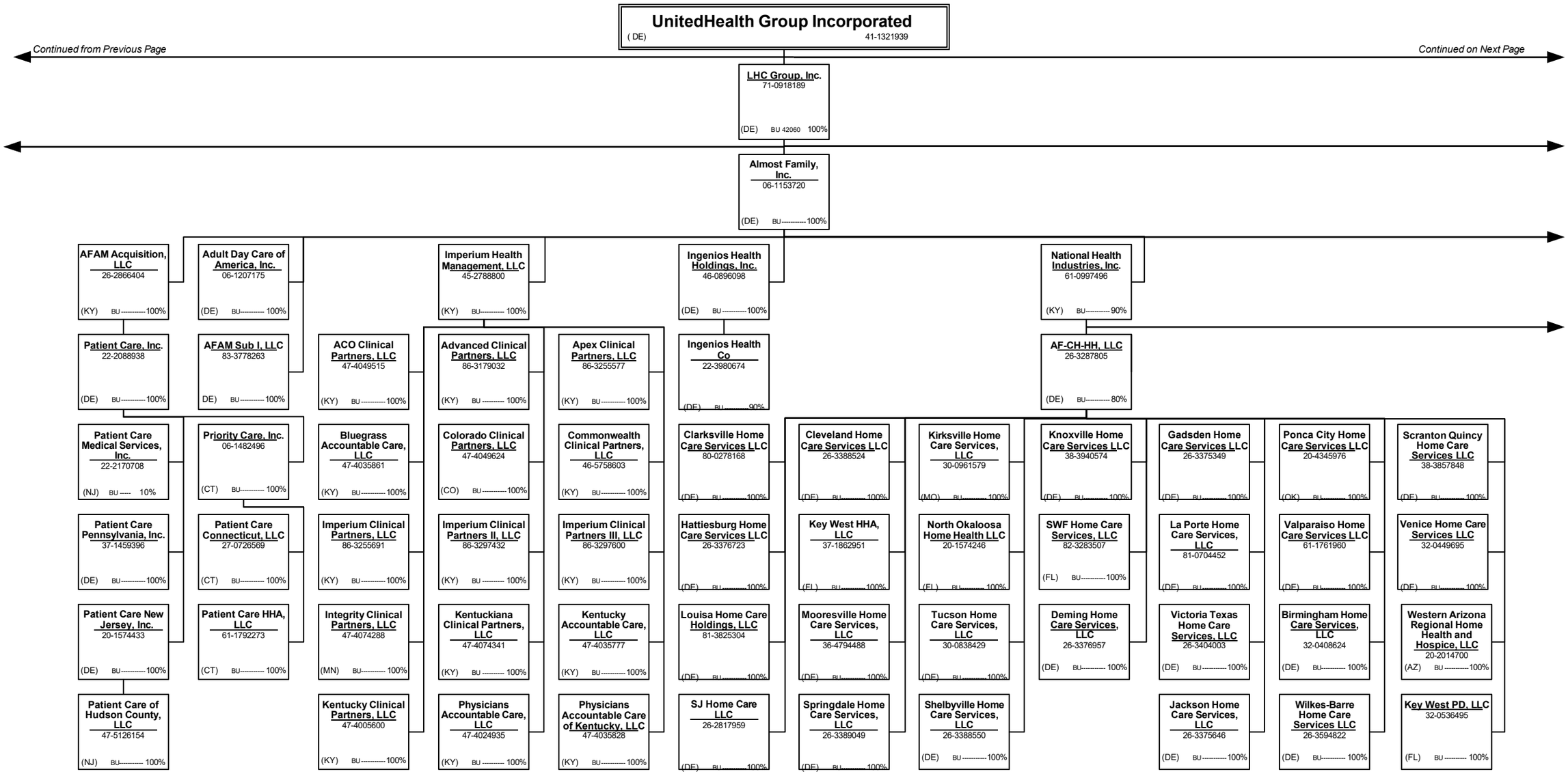

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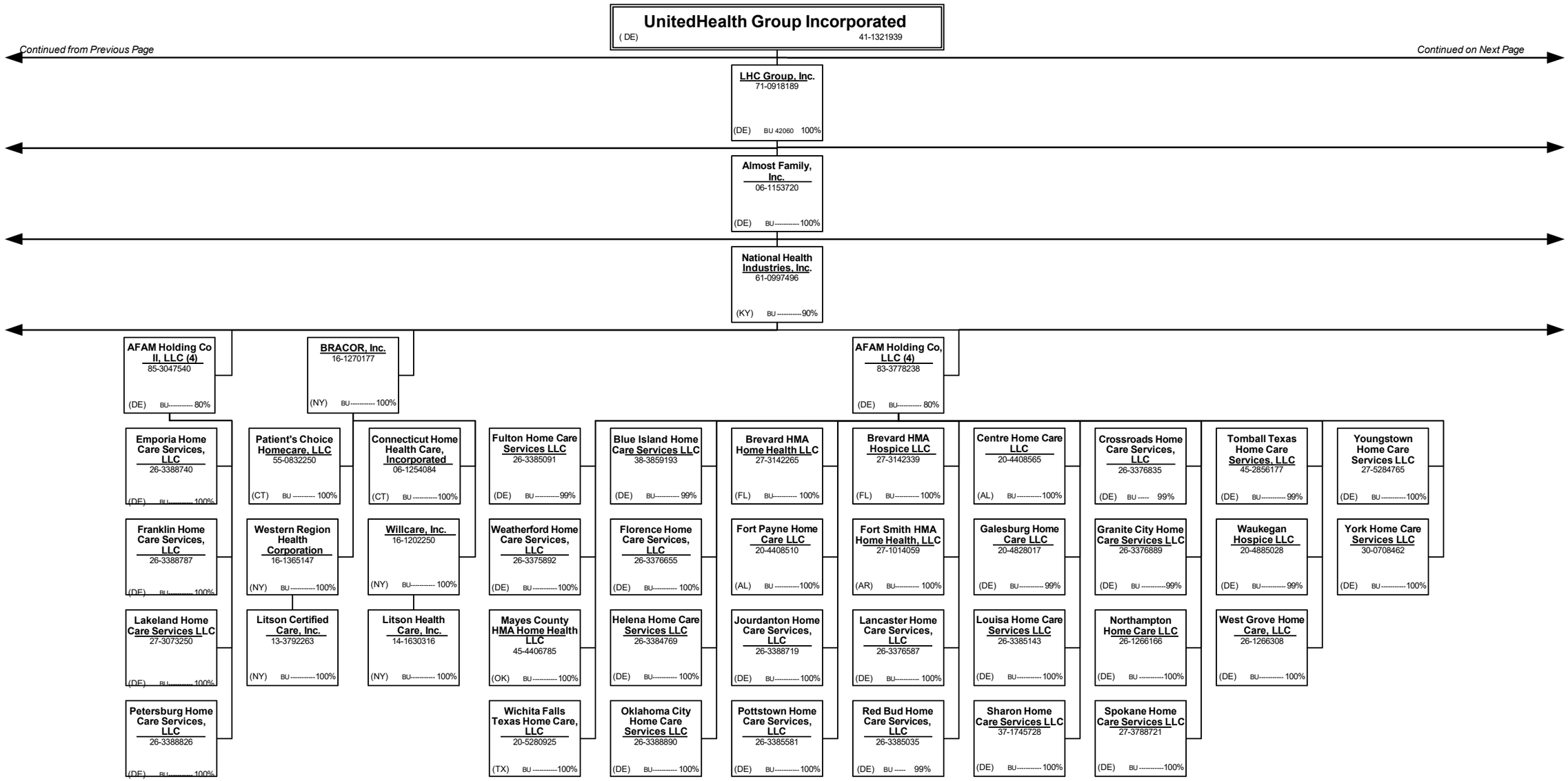

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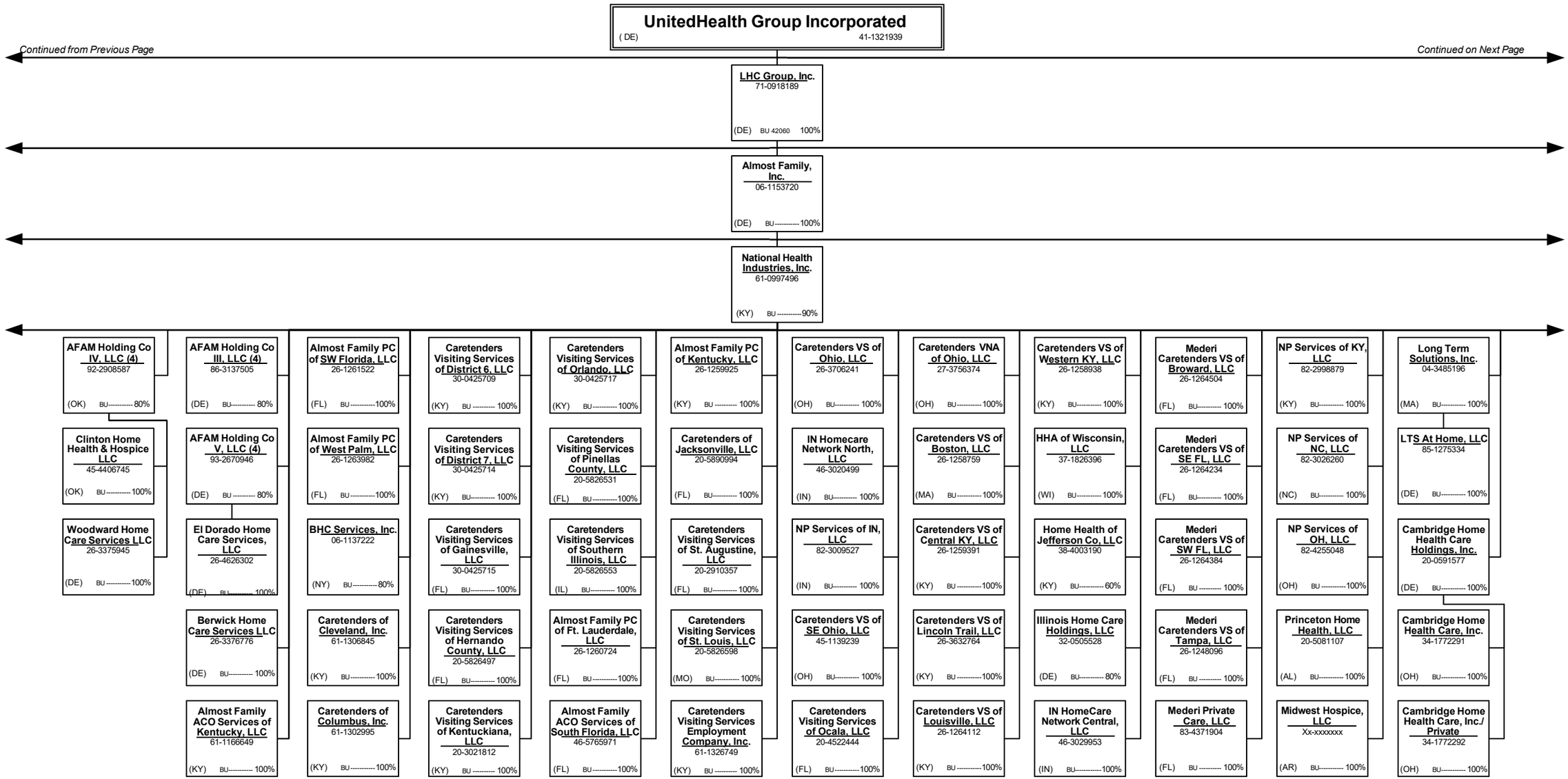

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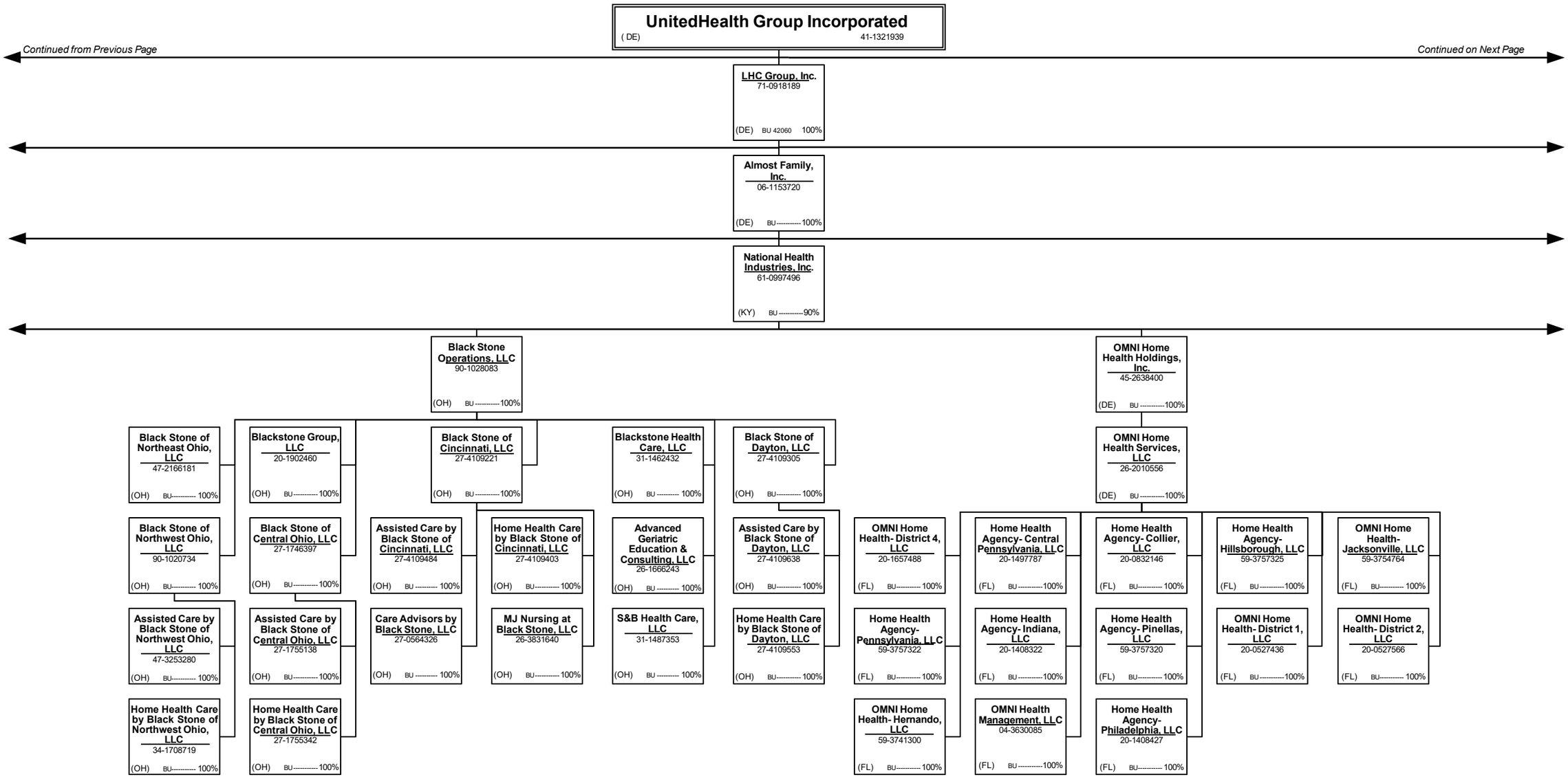

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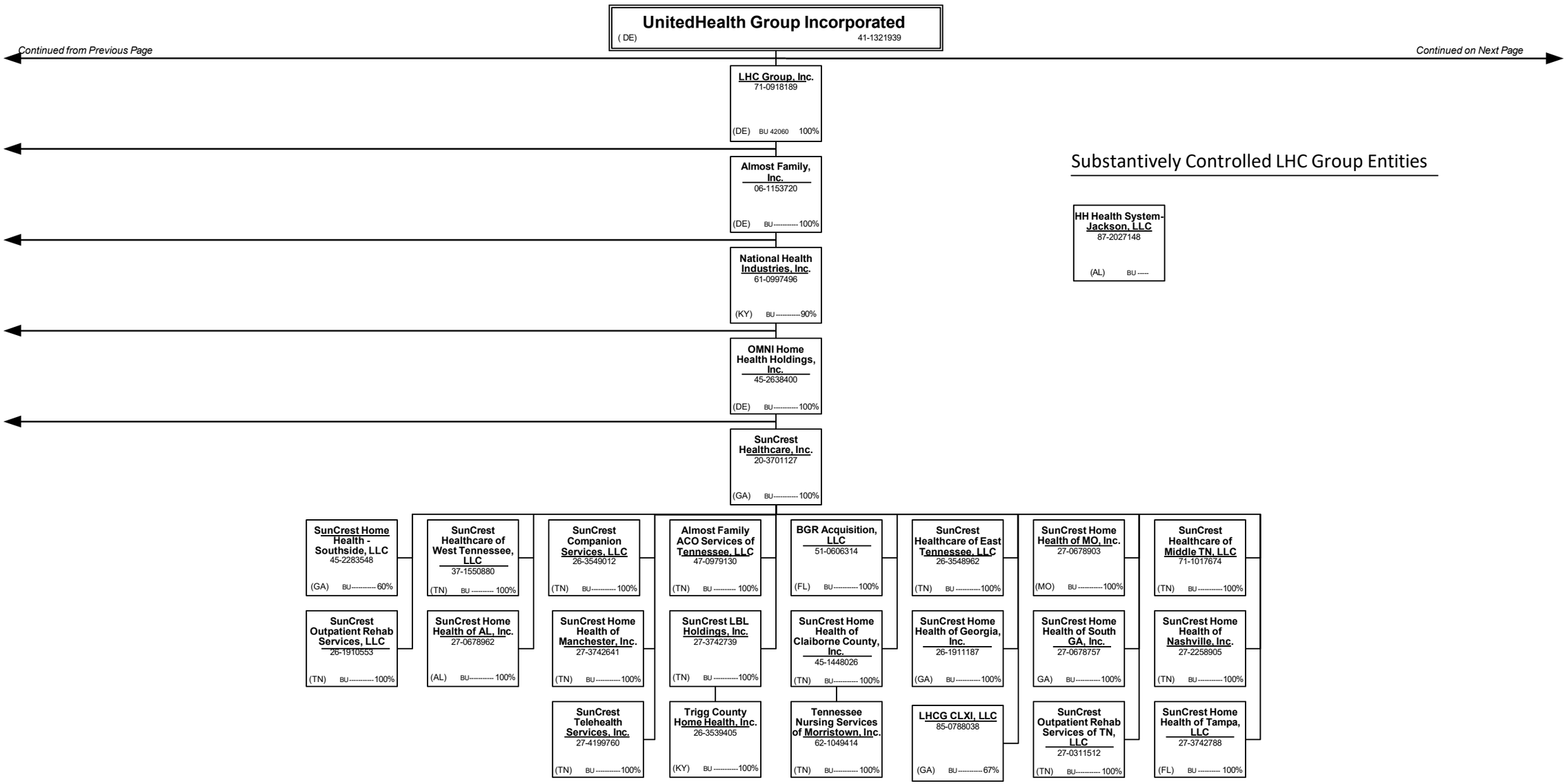

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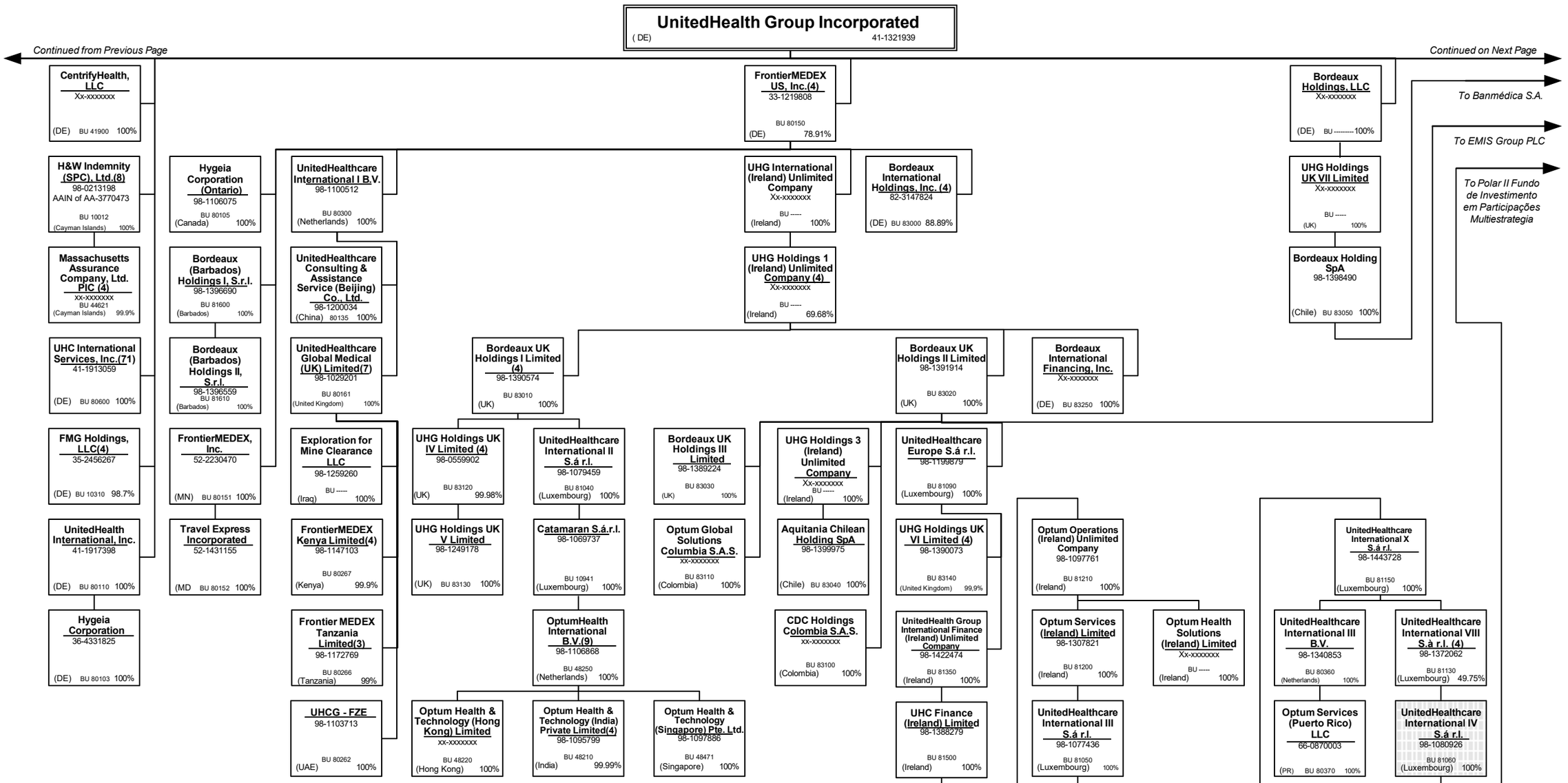

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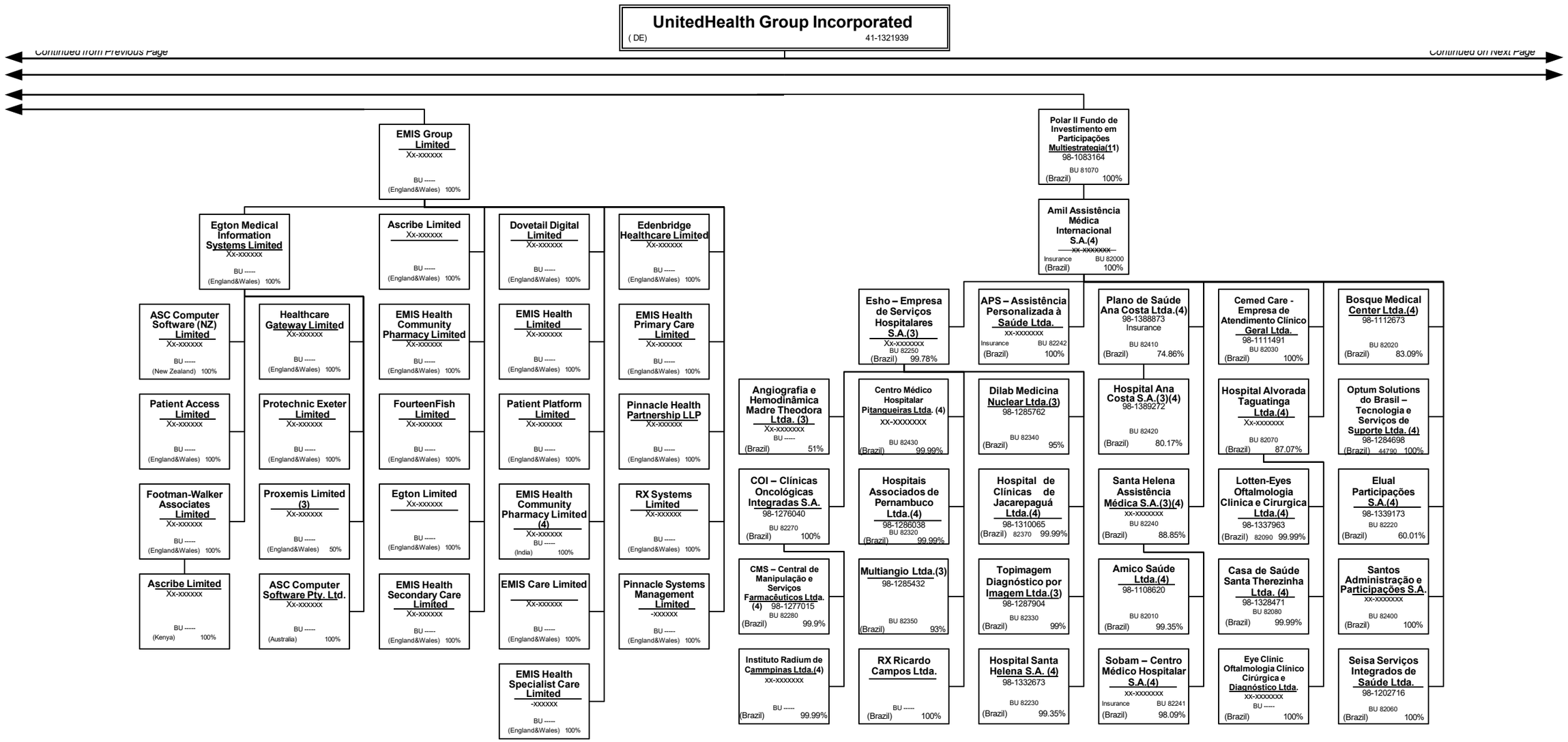

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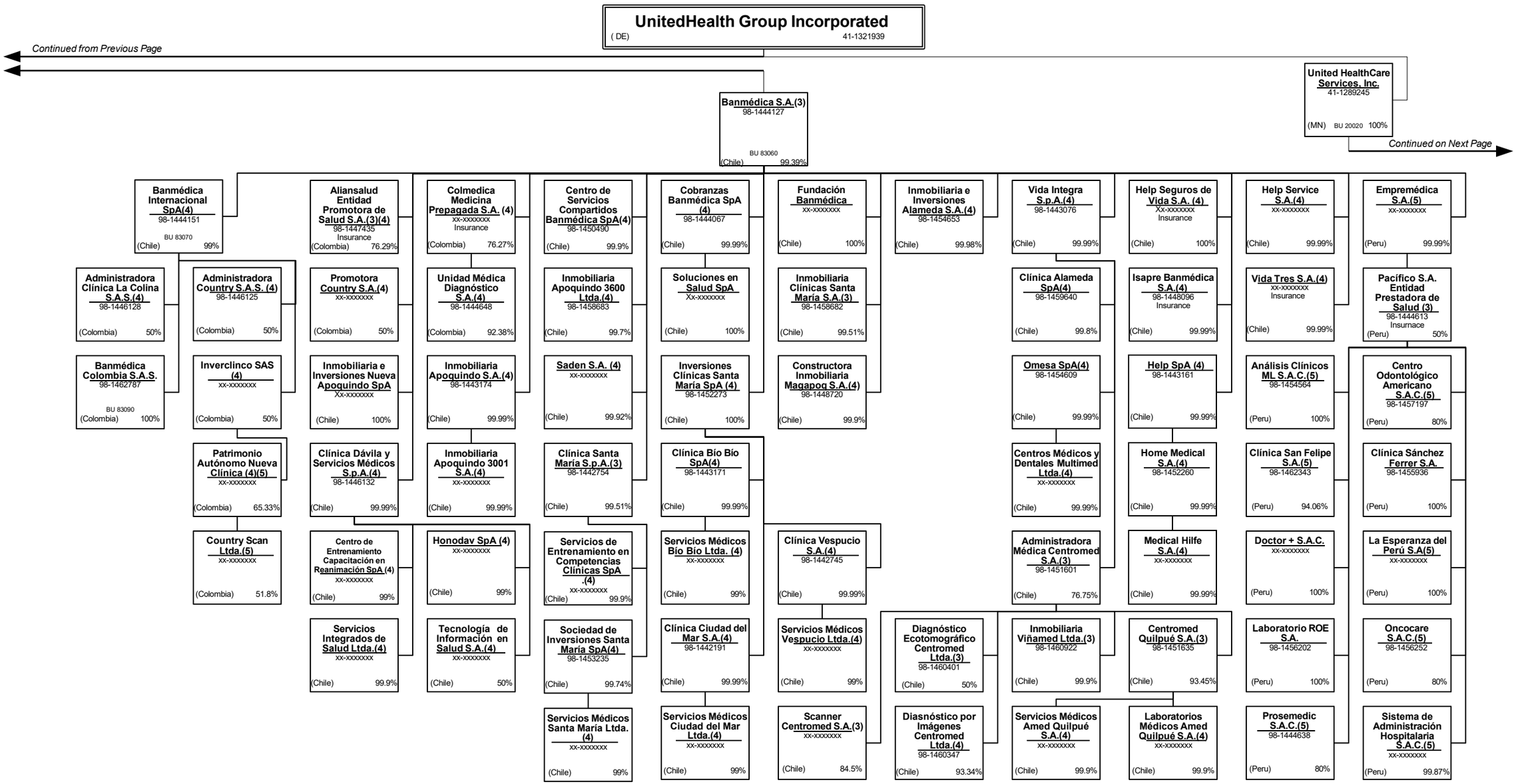

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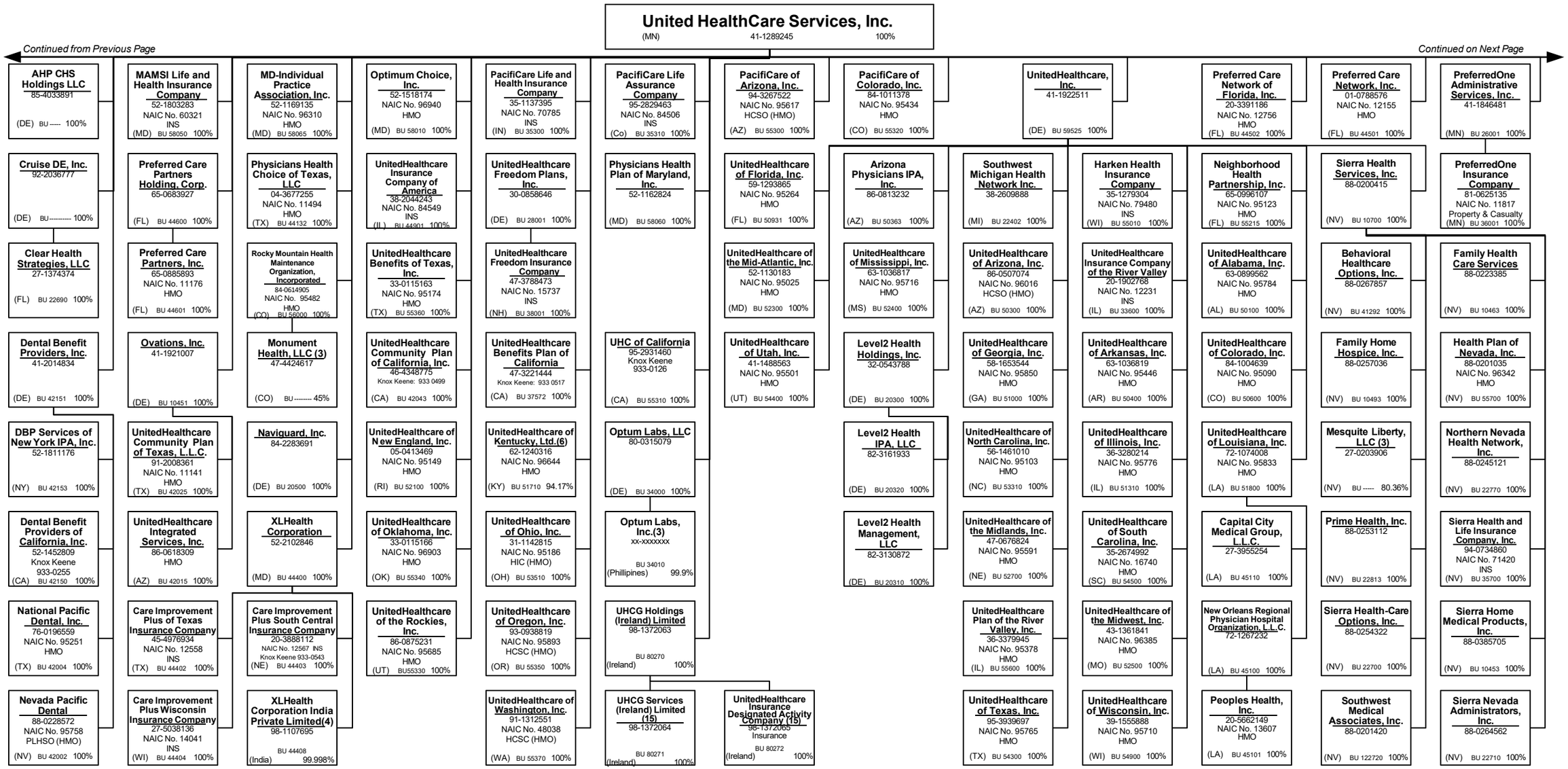

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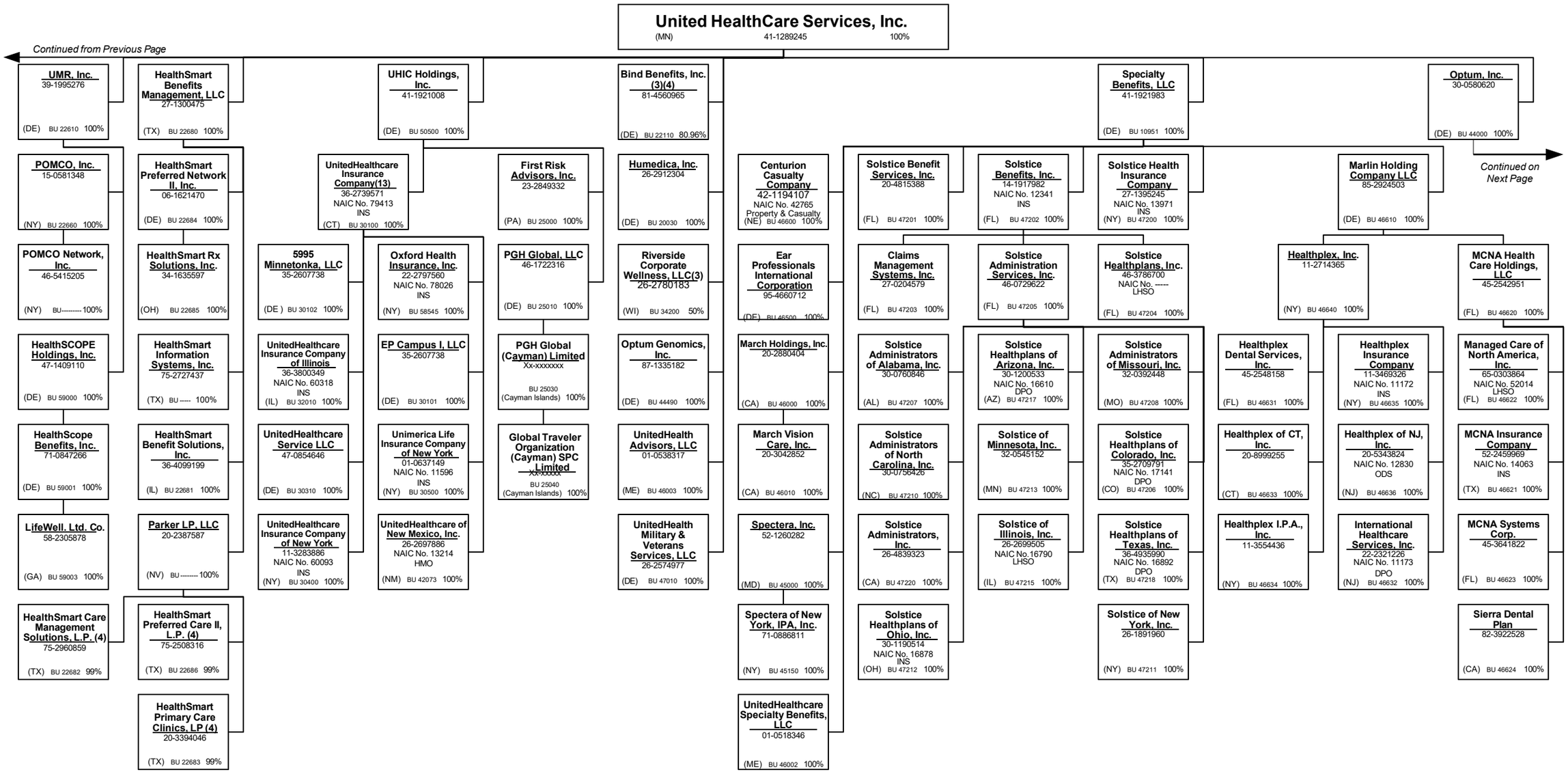

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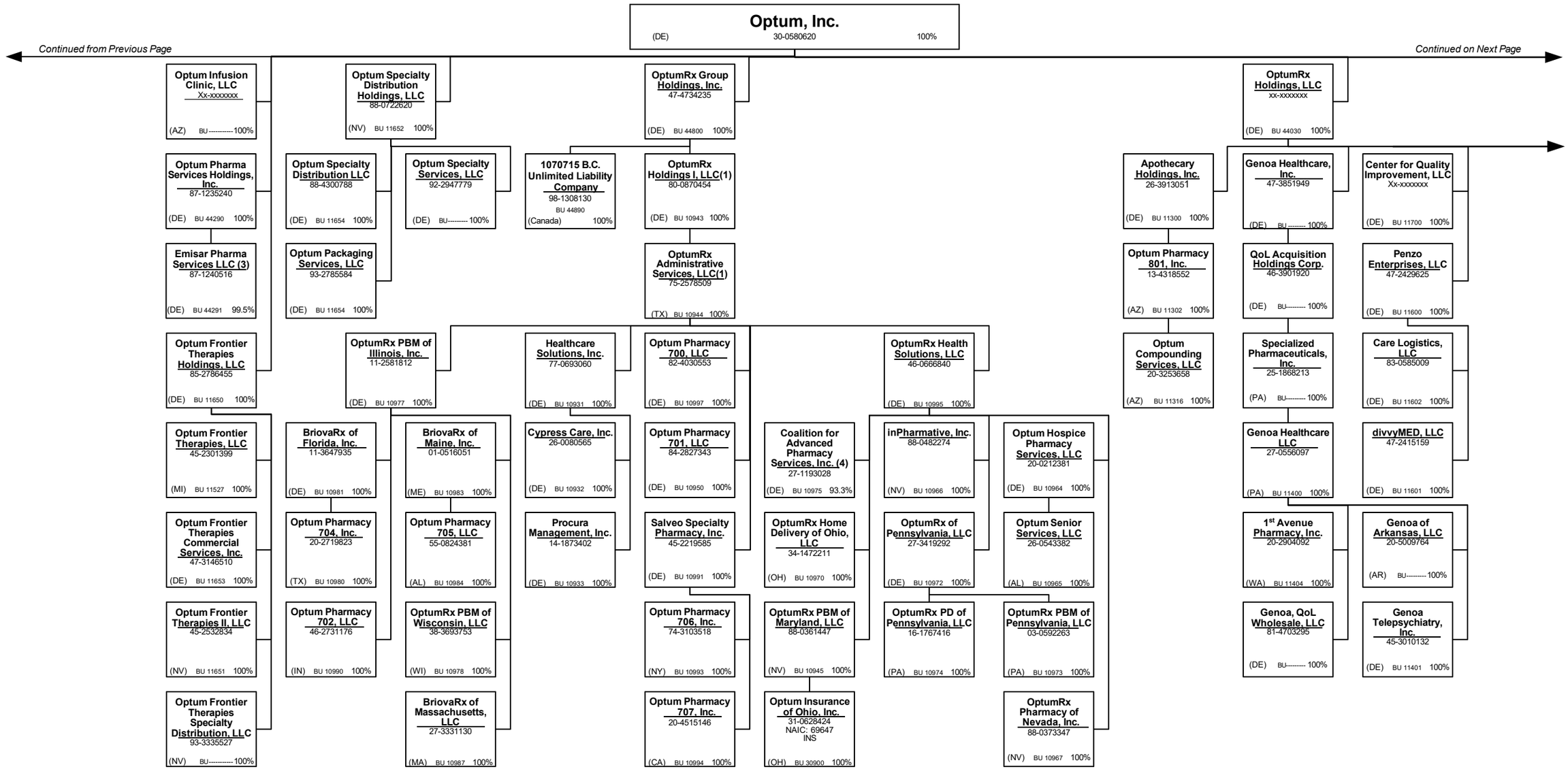

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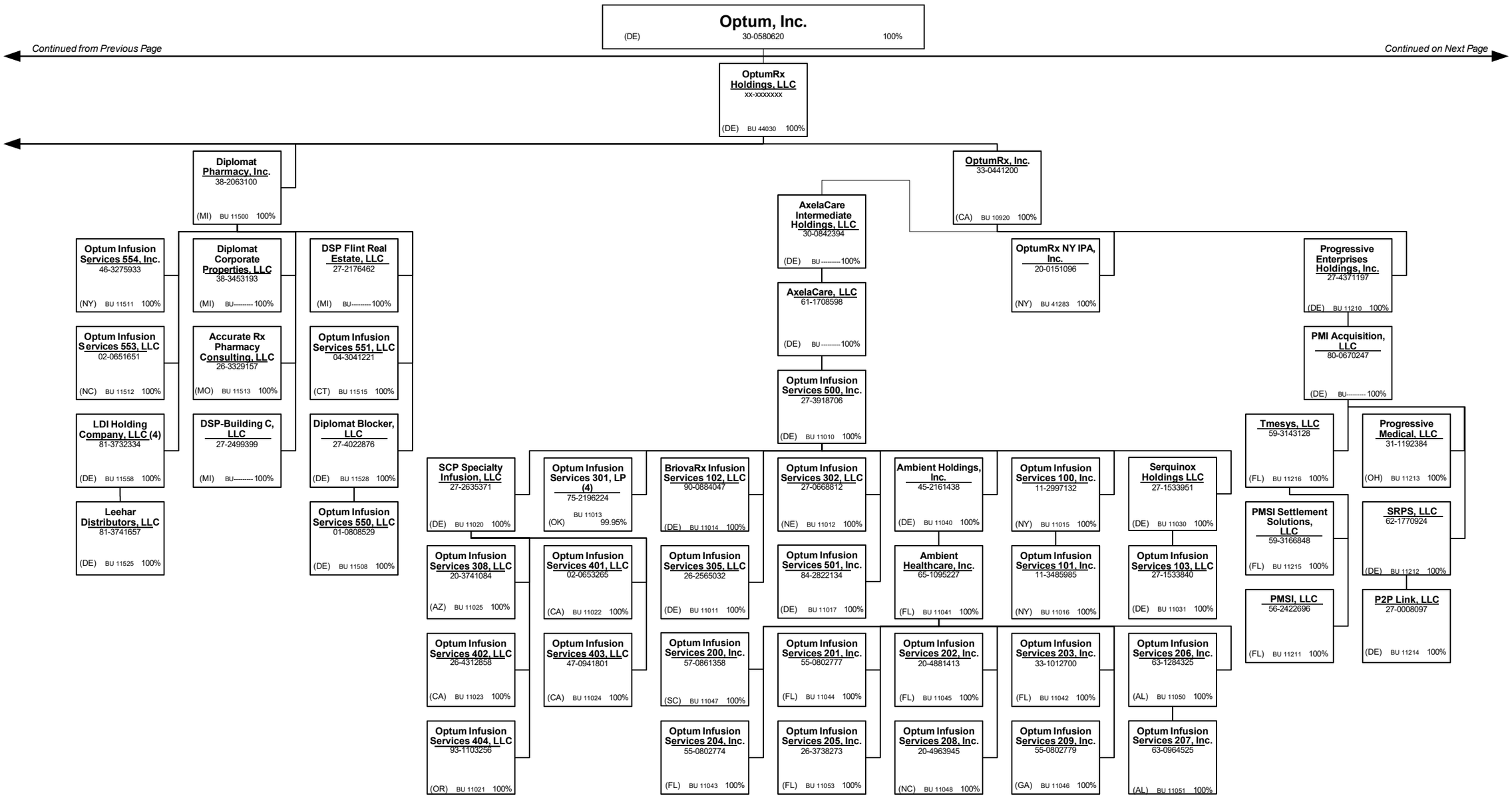

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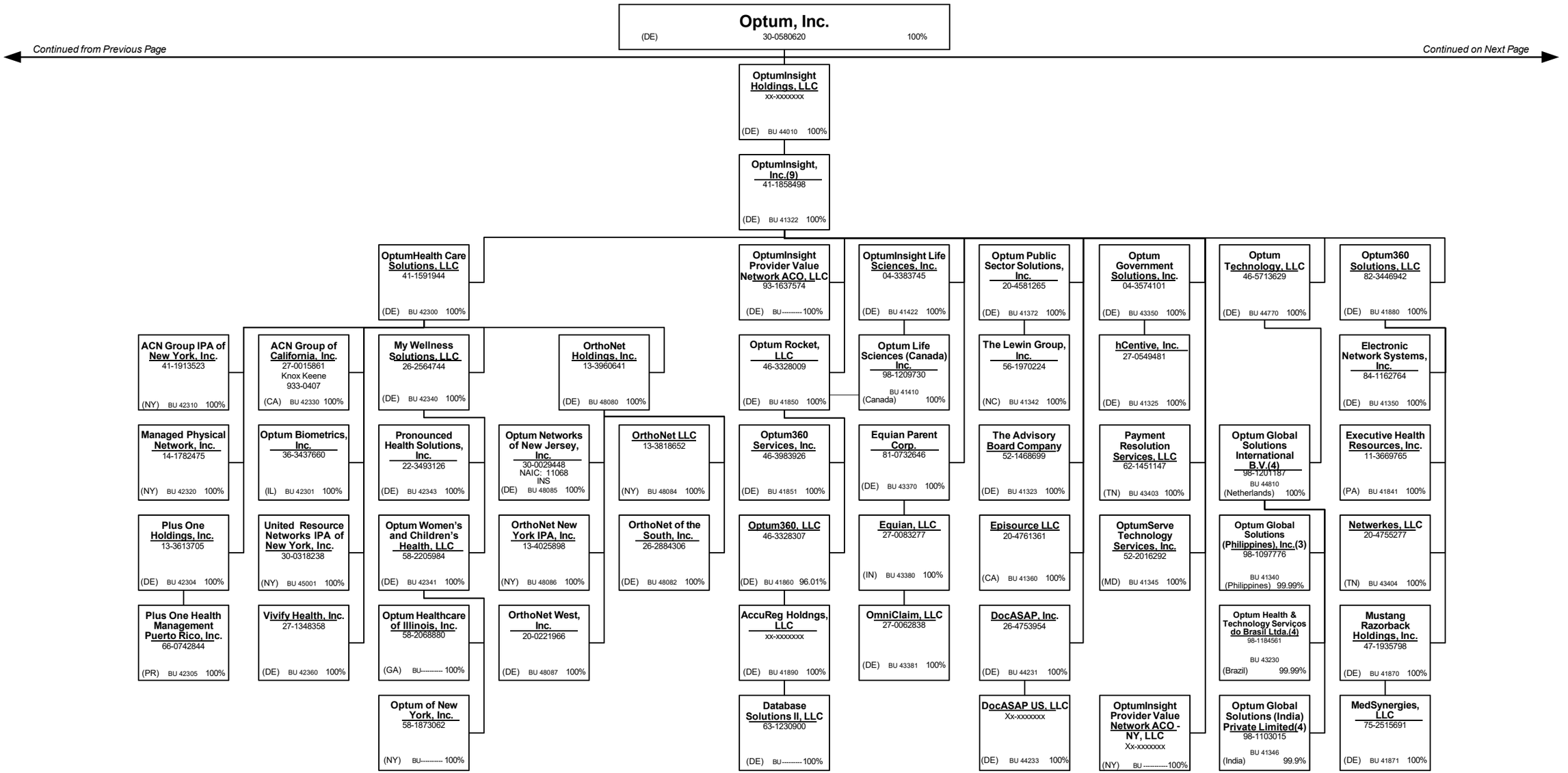

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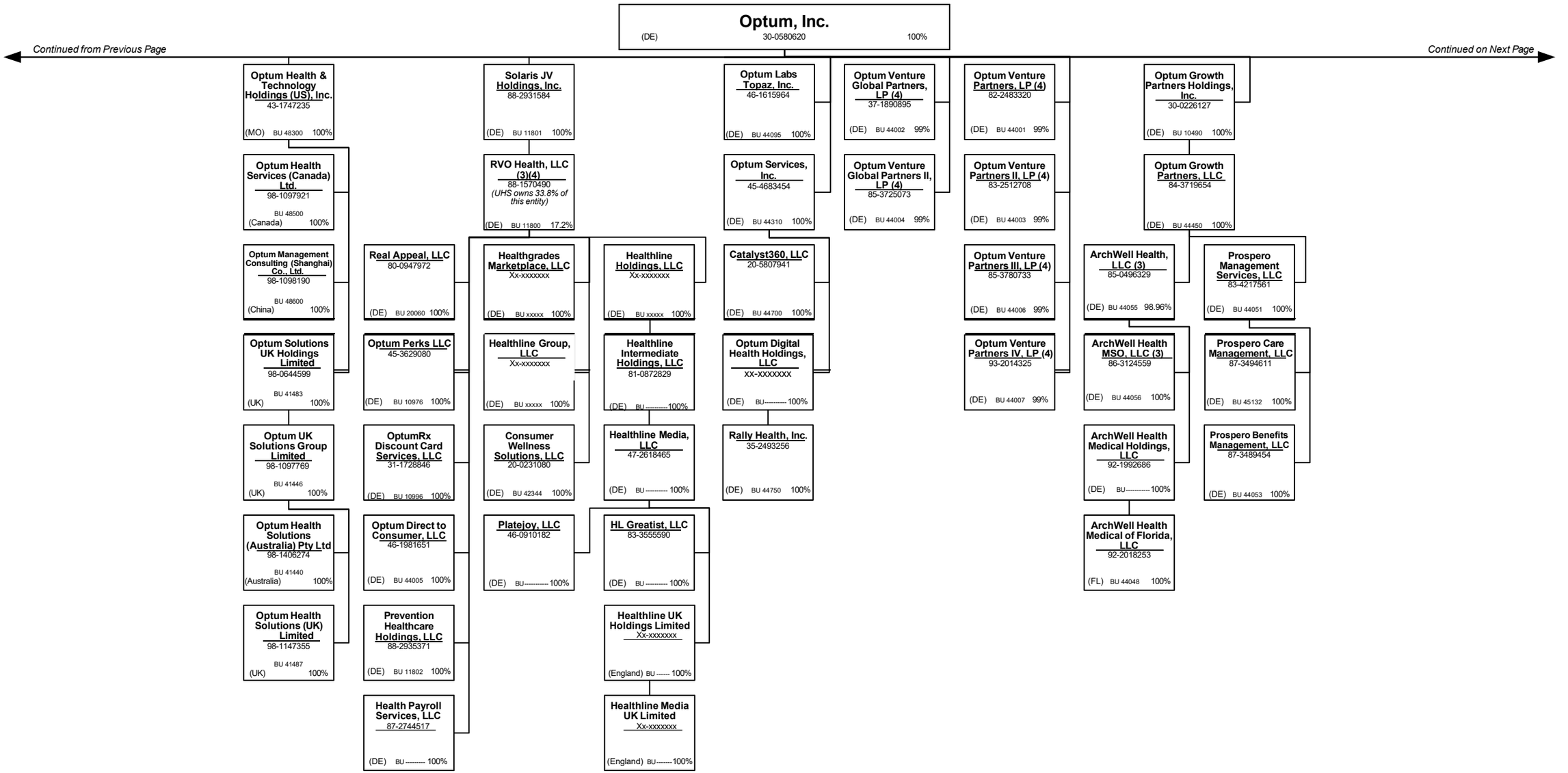

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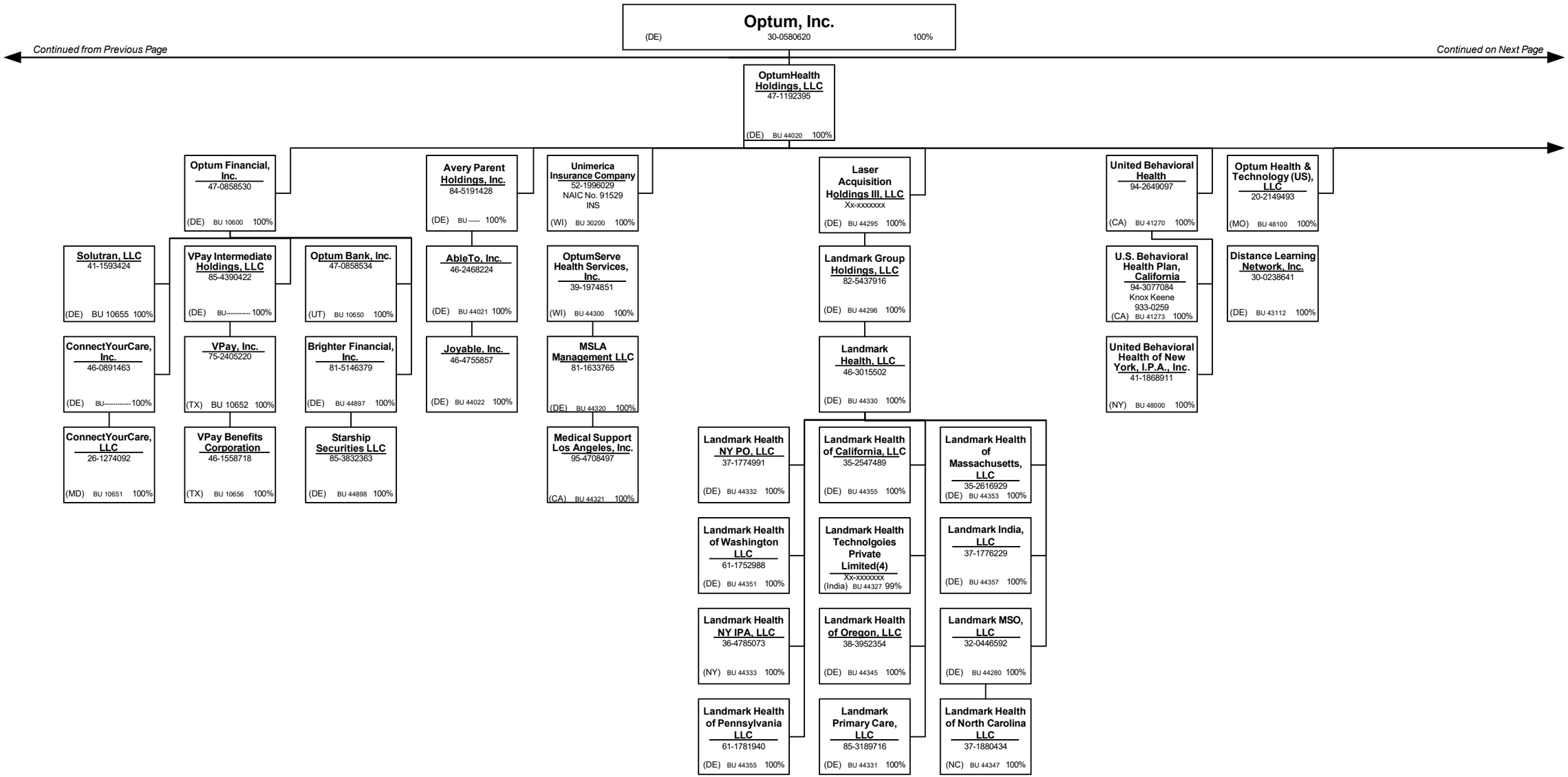

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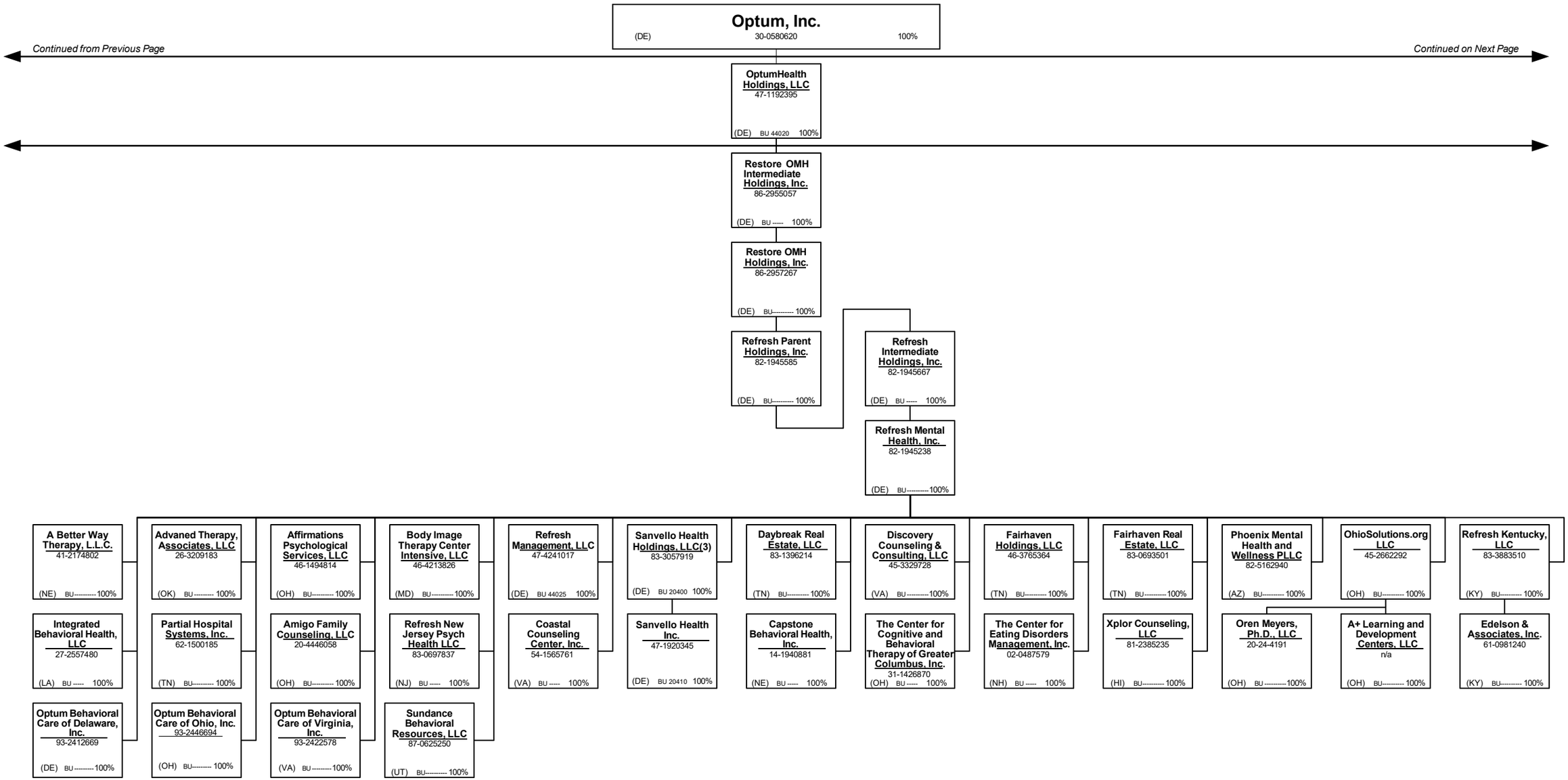

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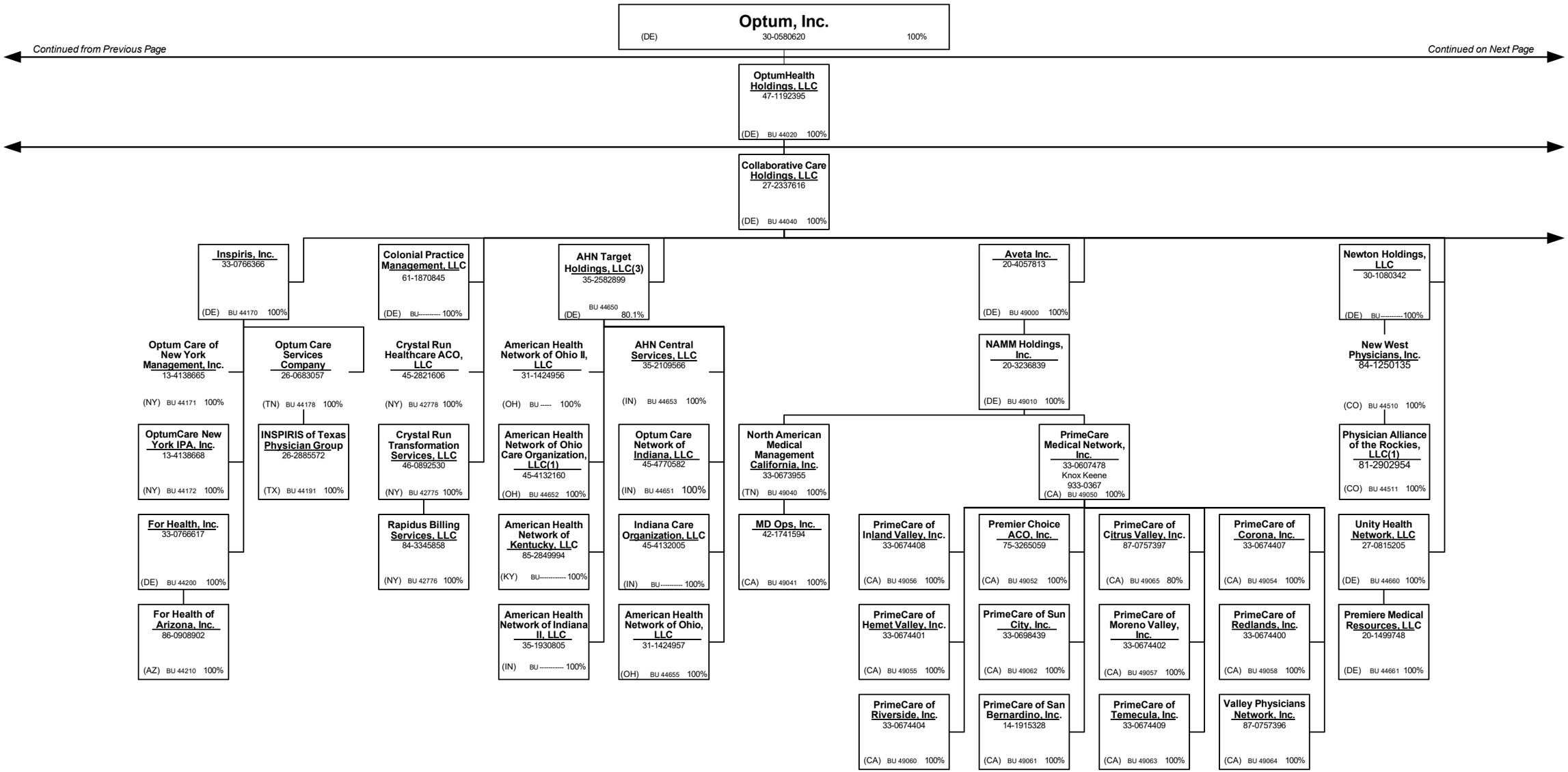

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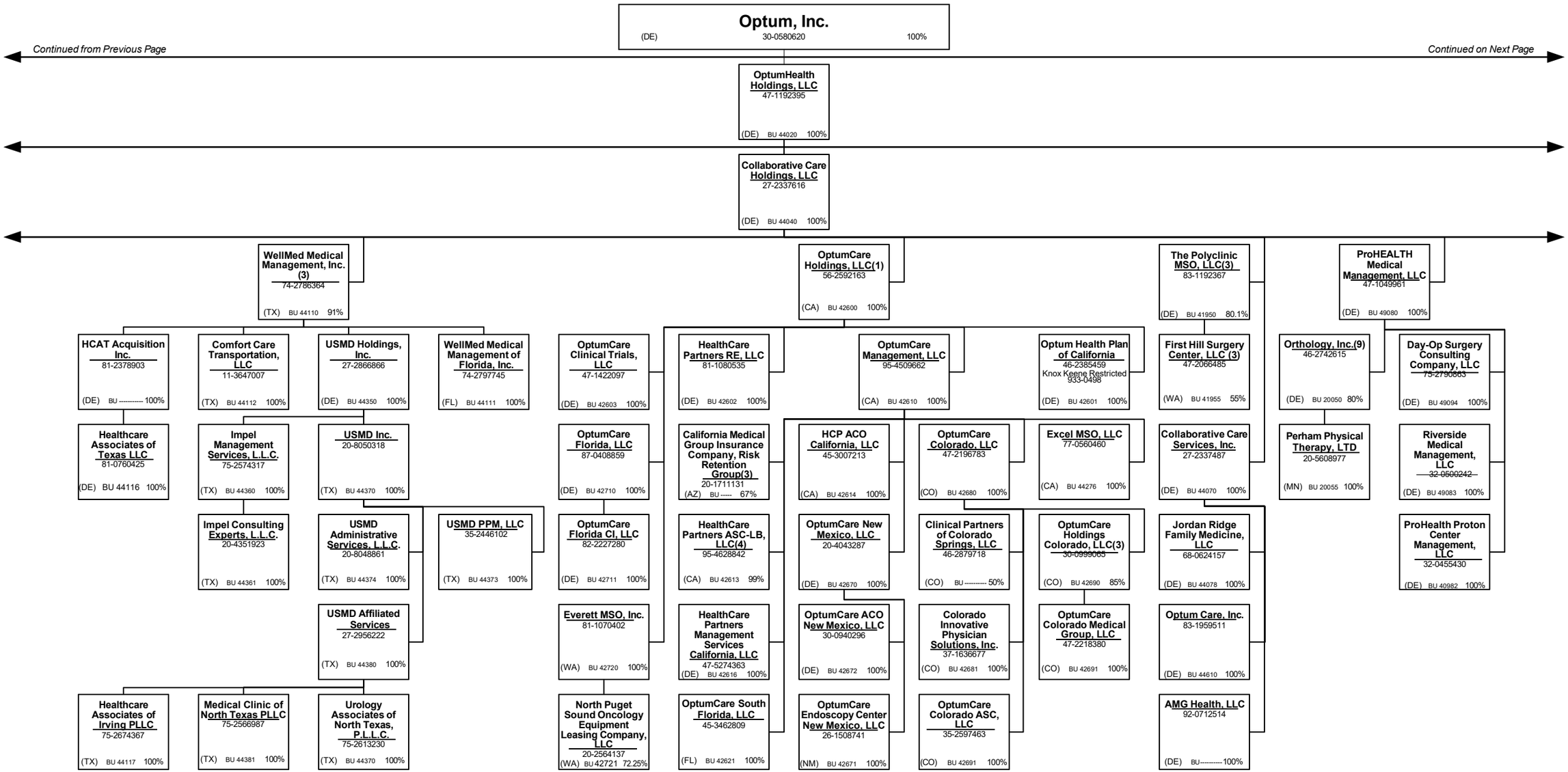
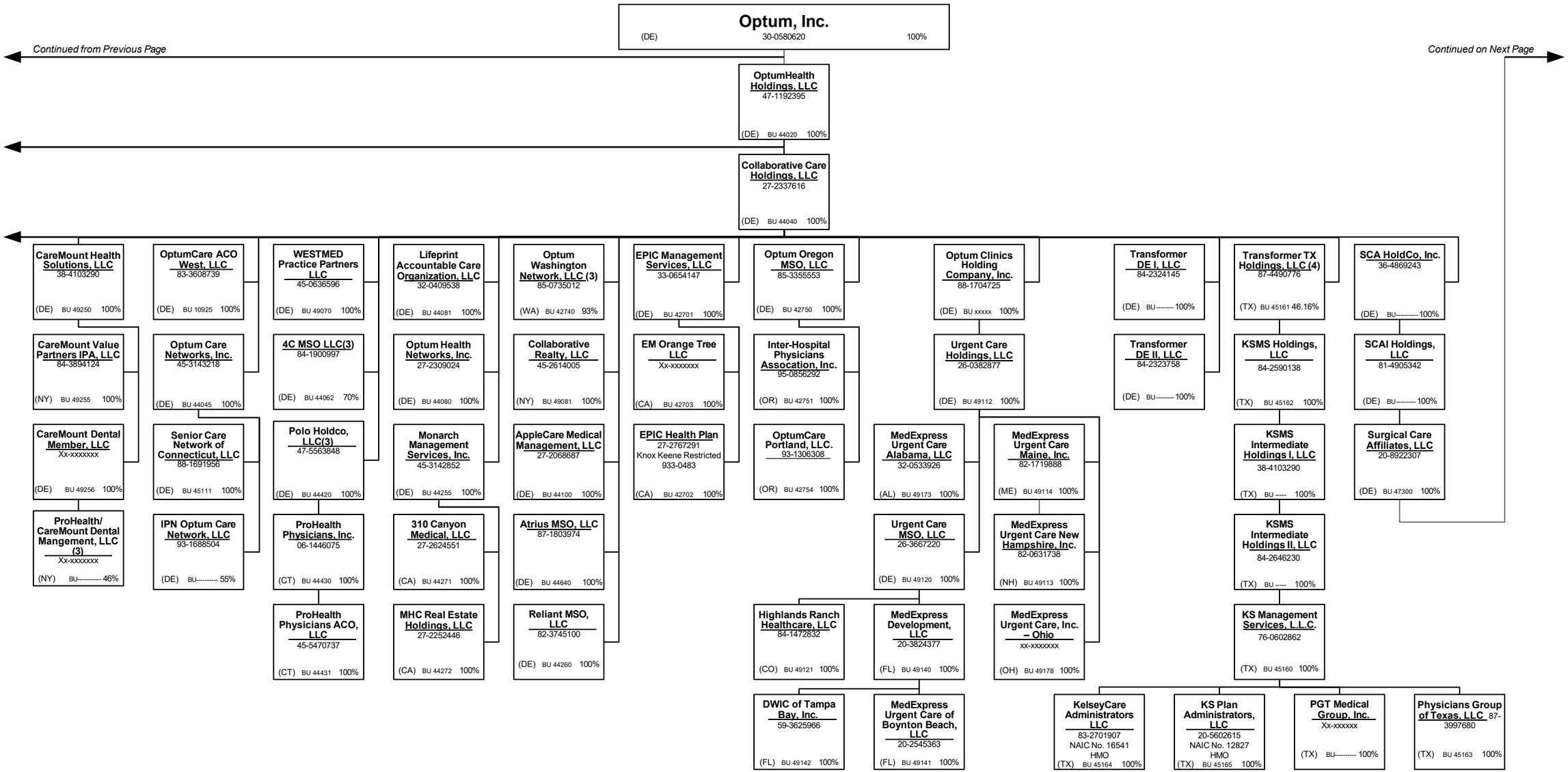
PART 1 – ORGANIZATIONAL CHART



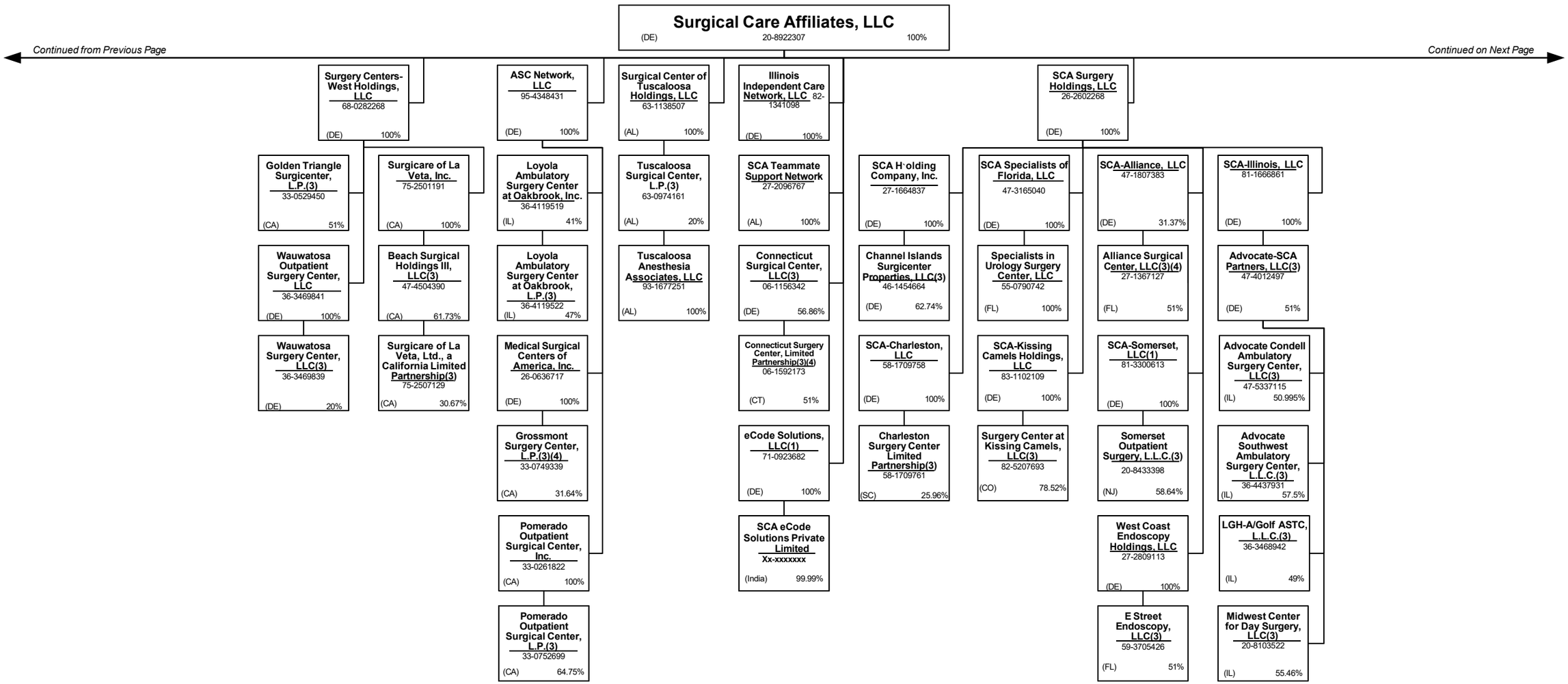
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



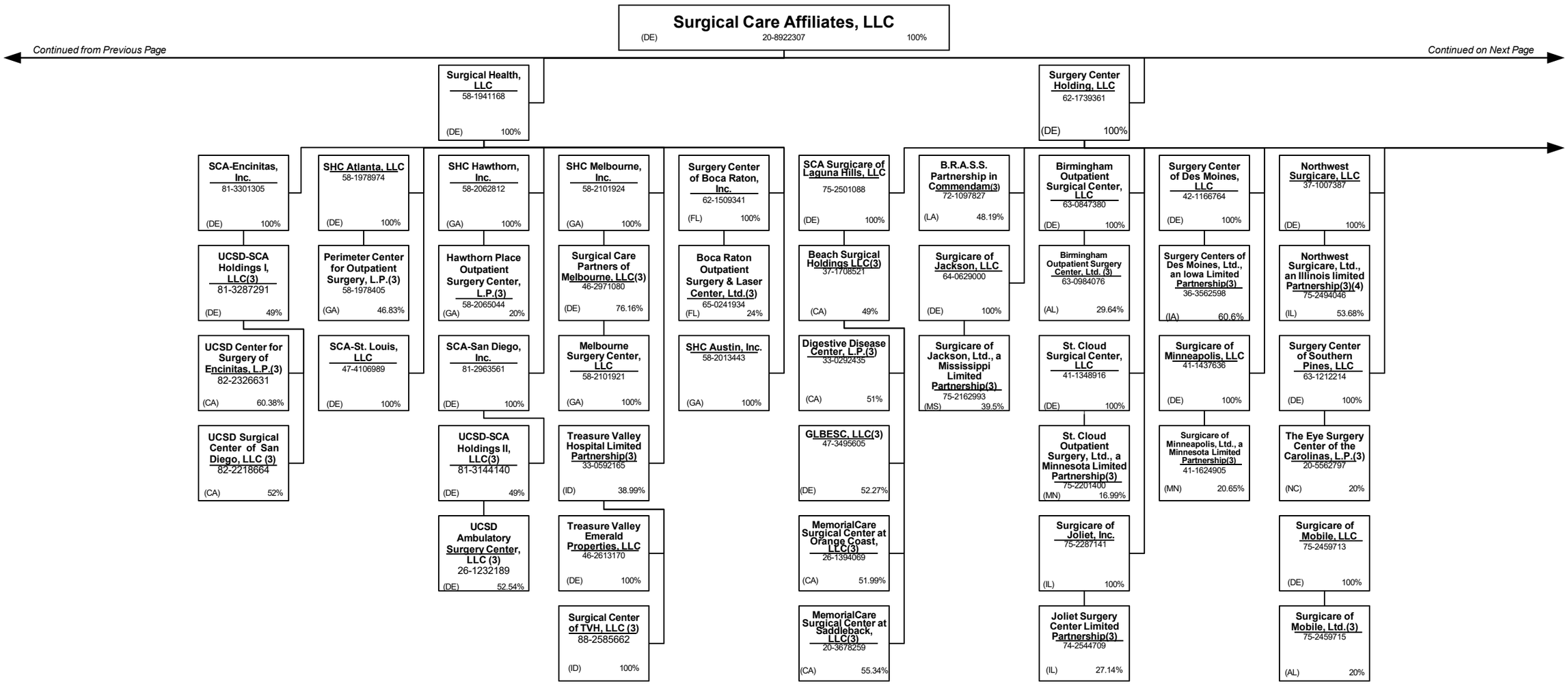
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



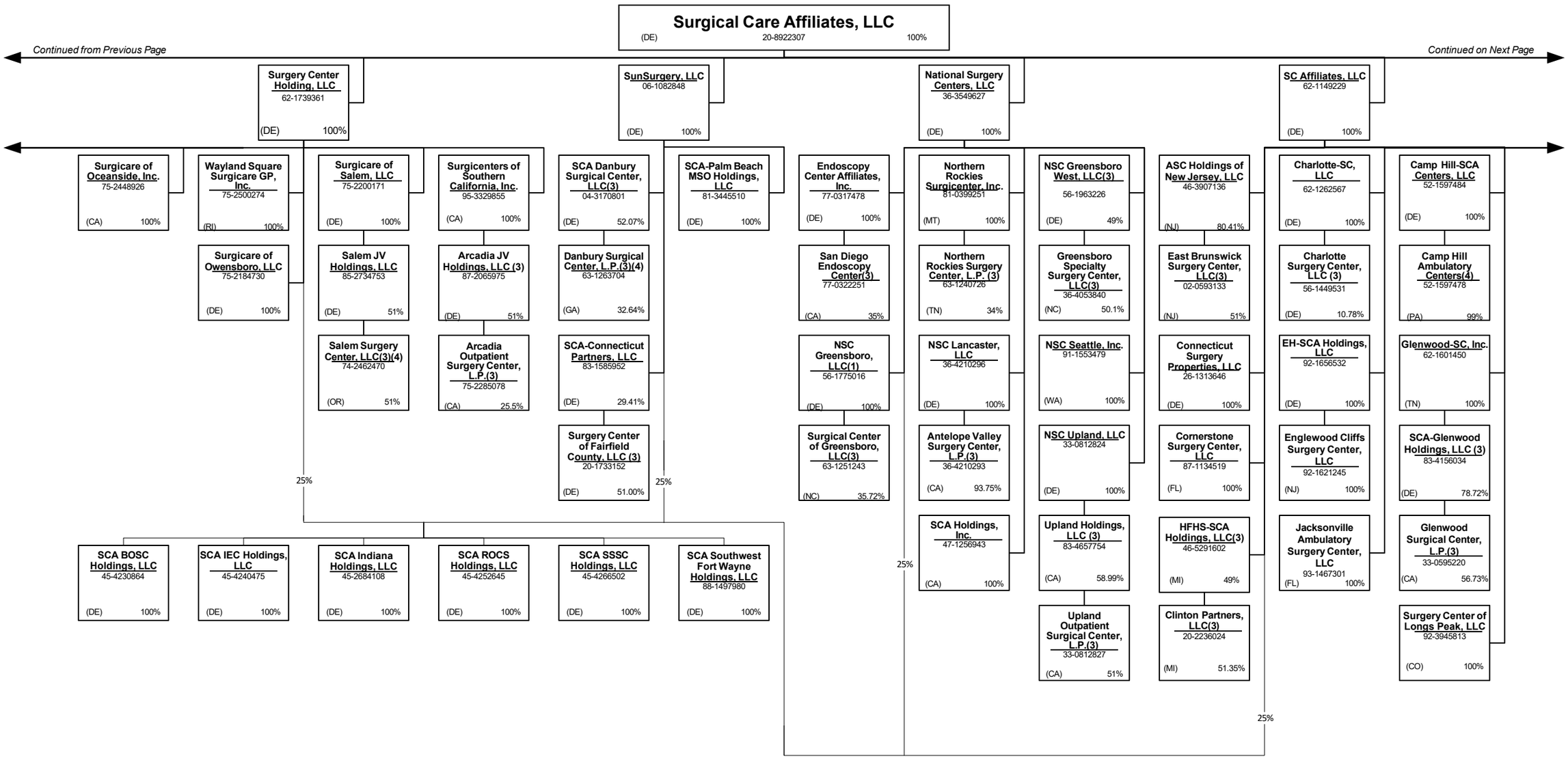
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



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

PART 1 – ORGANIZATIONAL CHART



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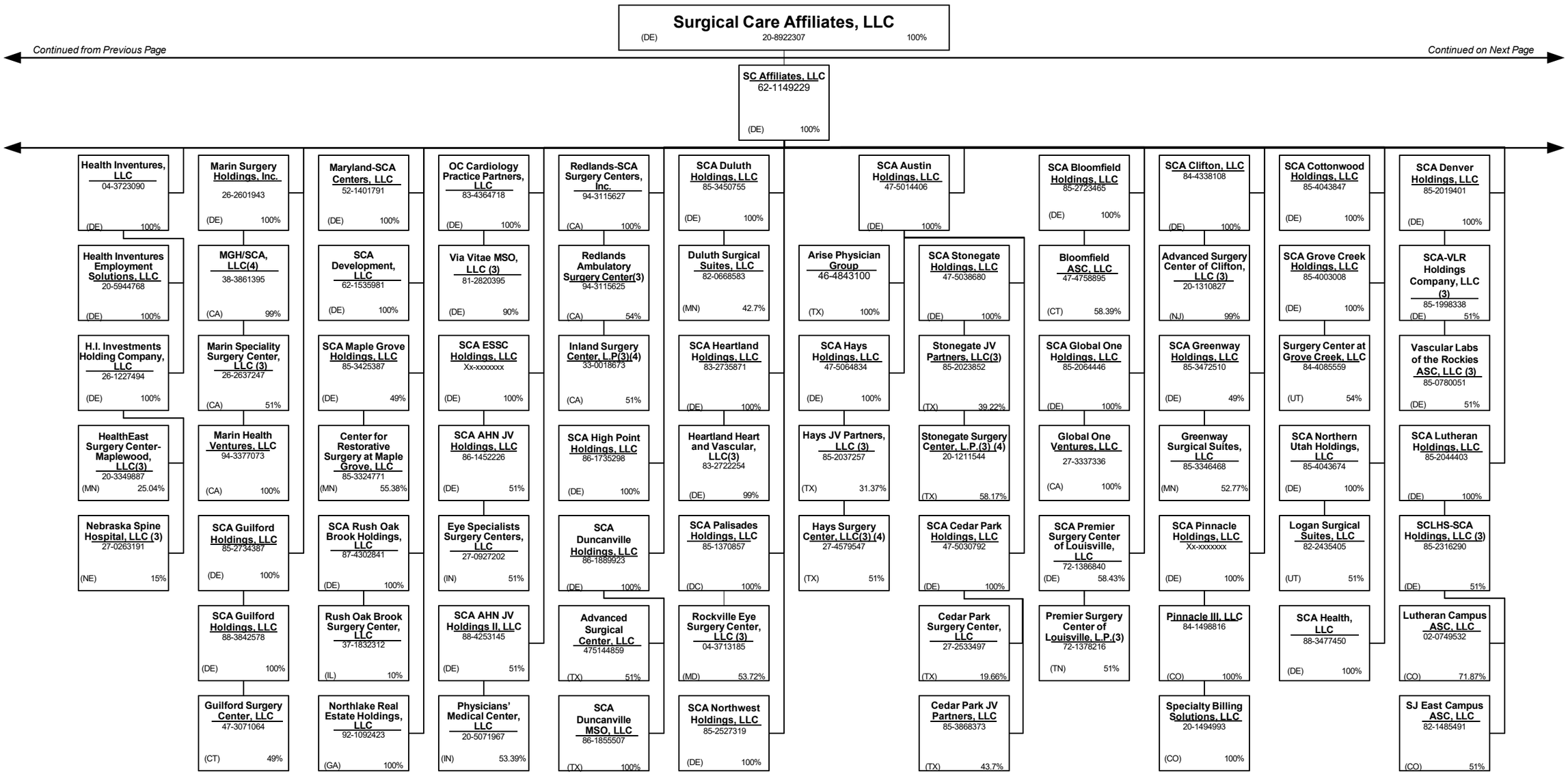

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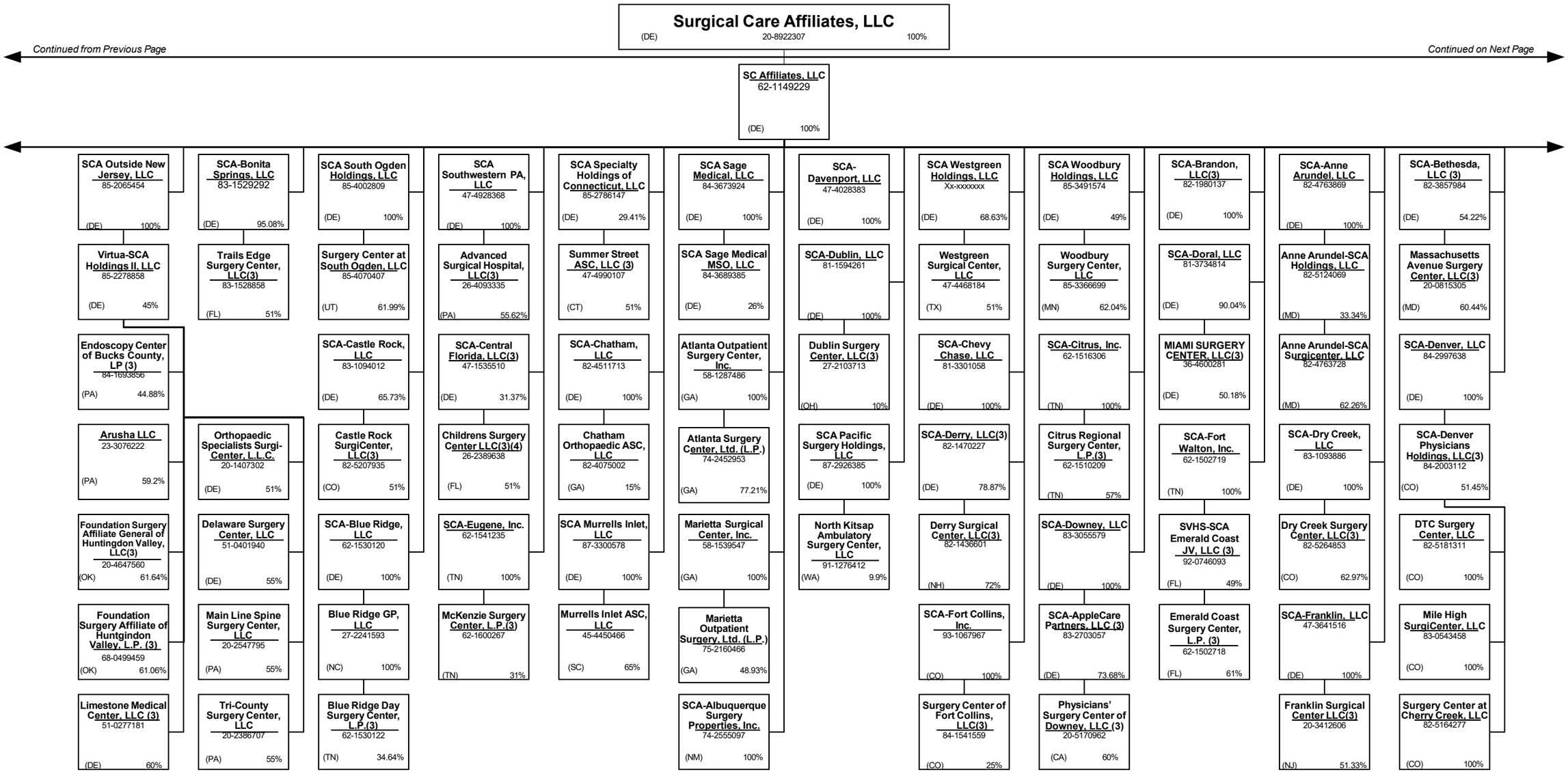

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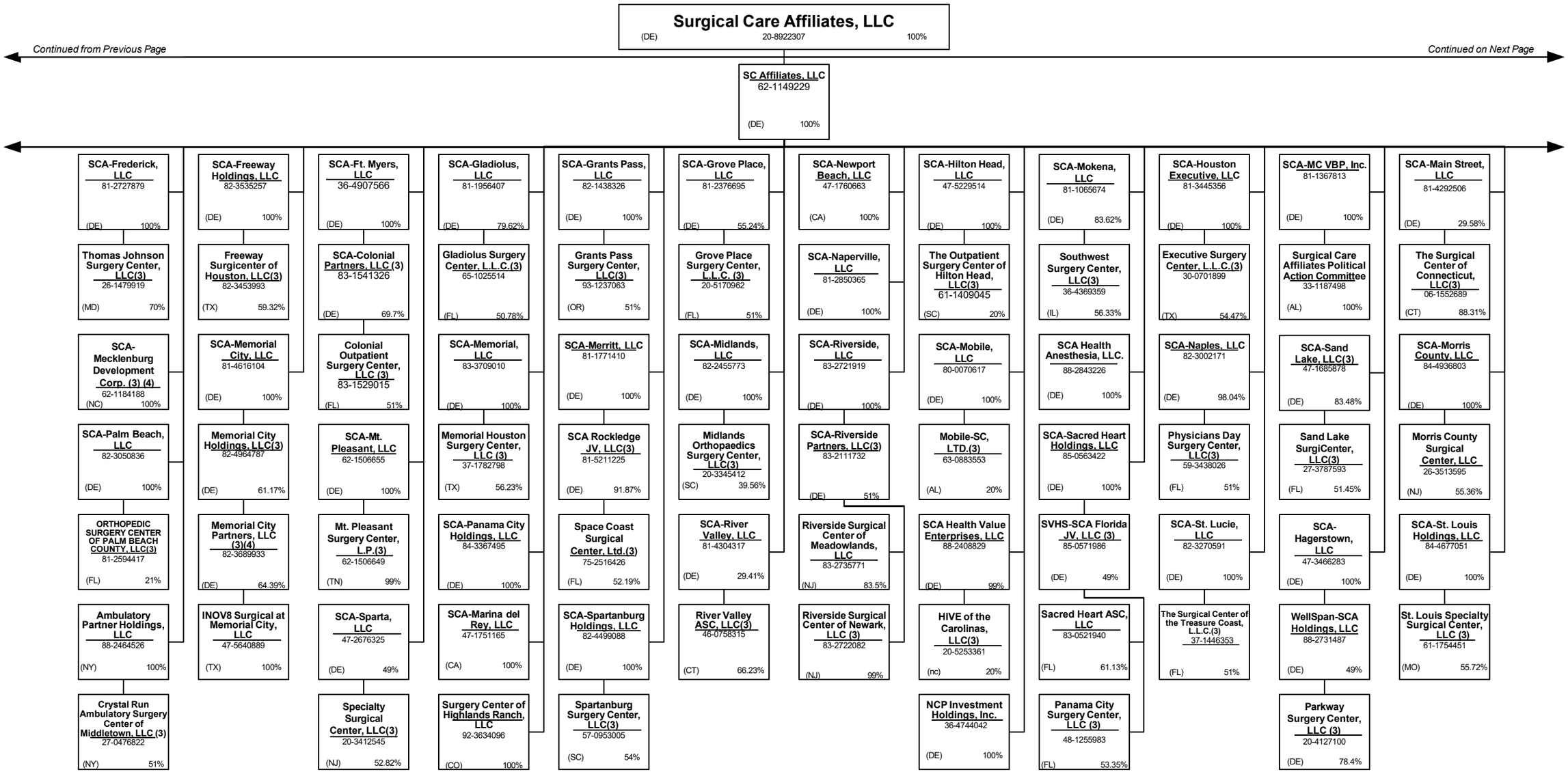

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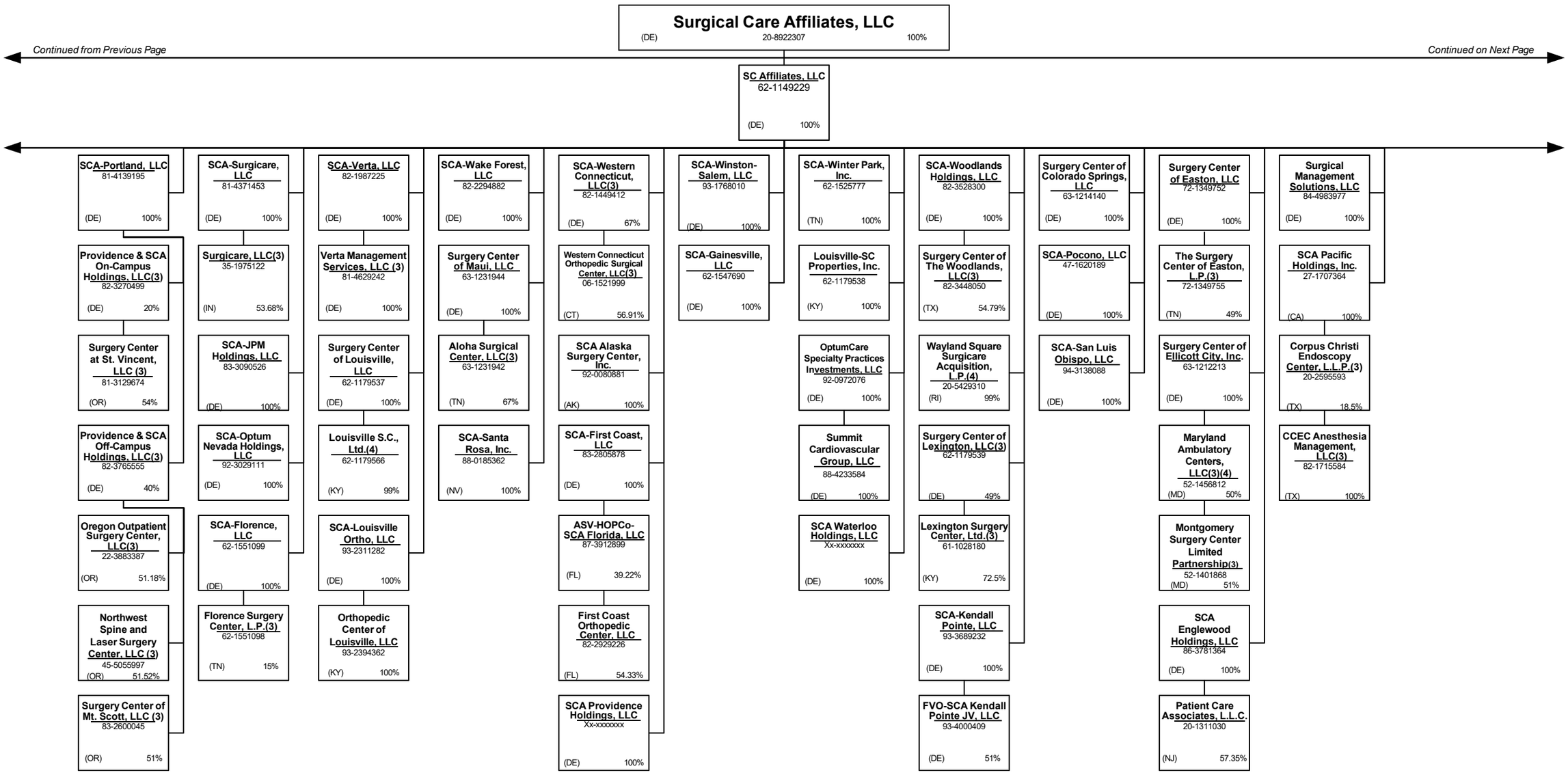

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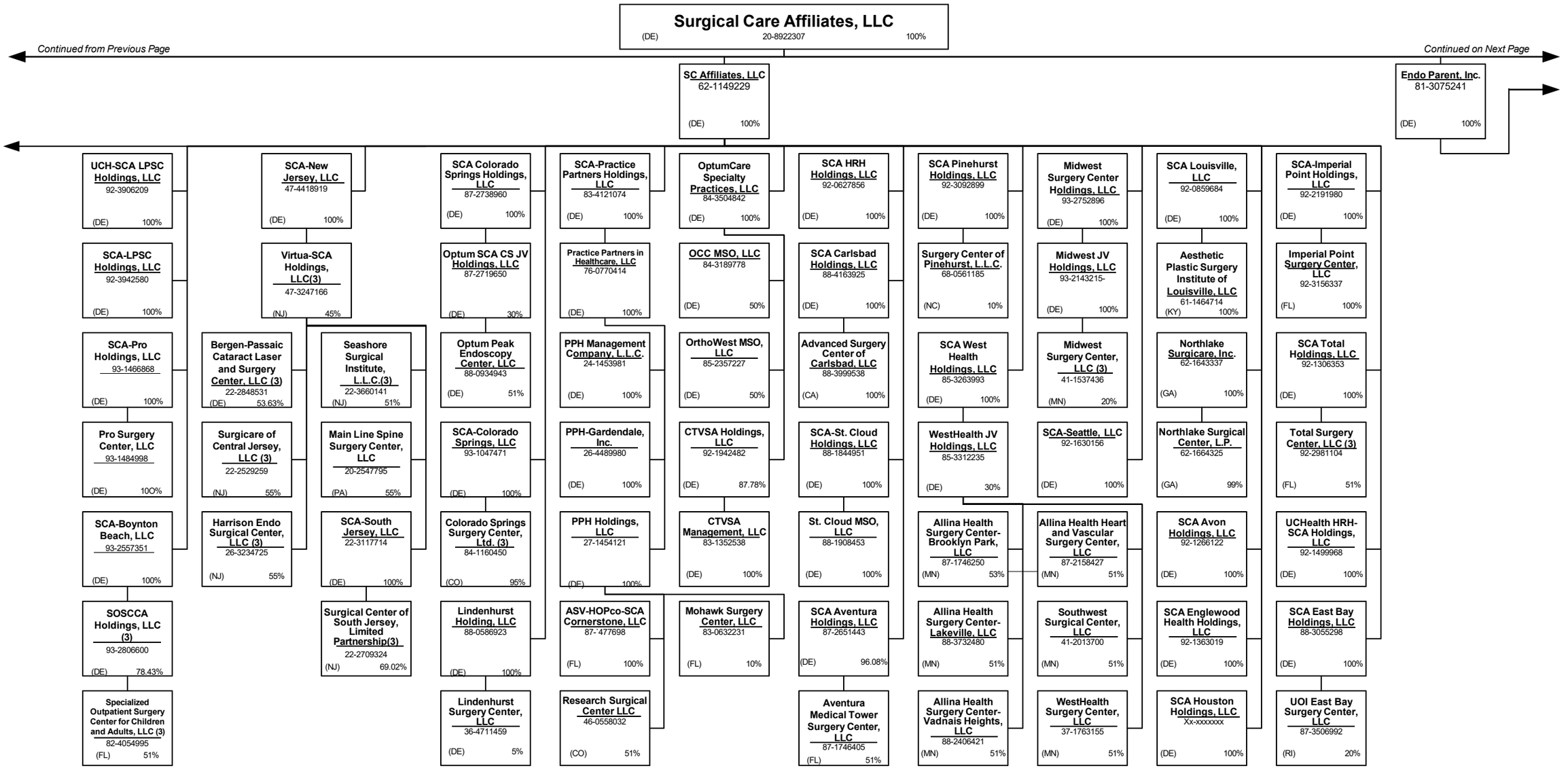

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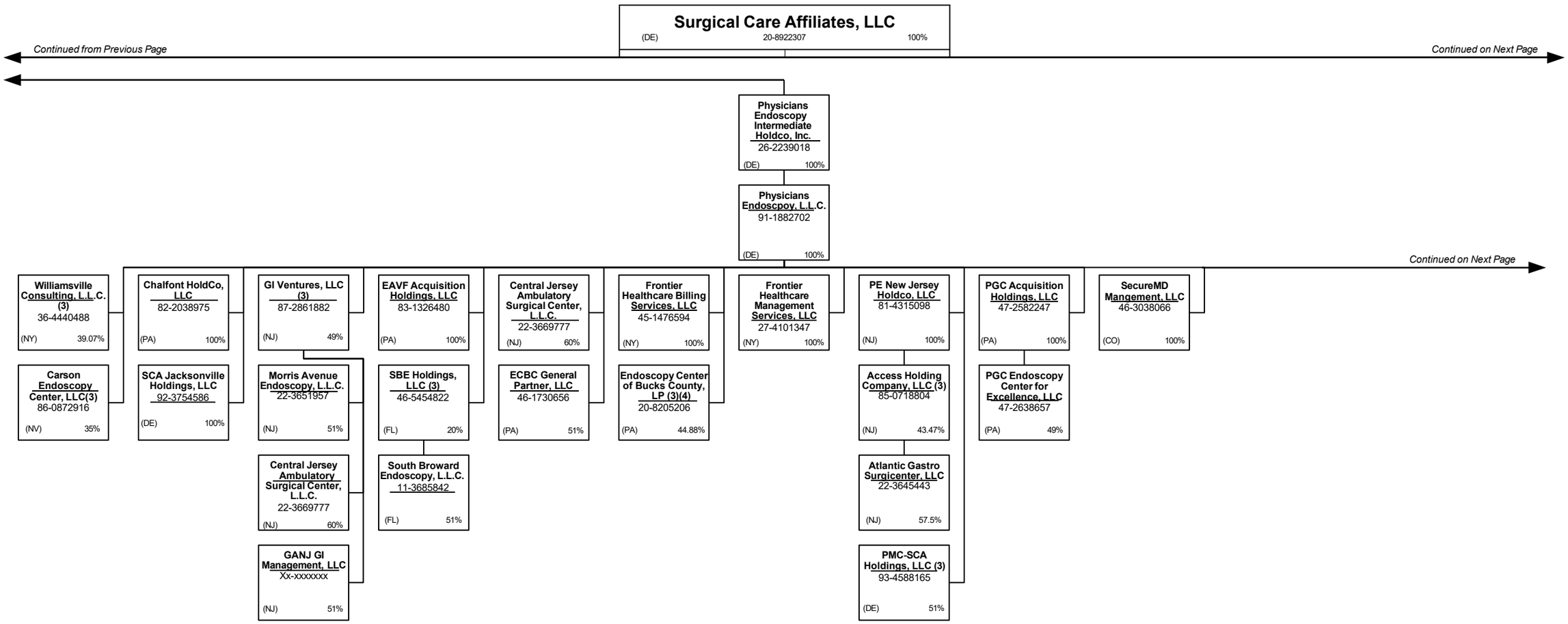
PART 1 – ORGANIZATIONAL CHART



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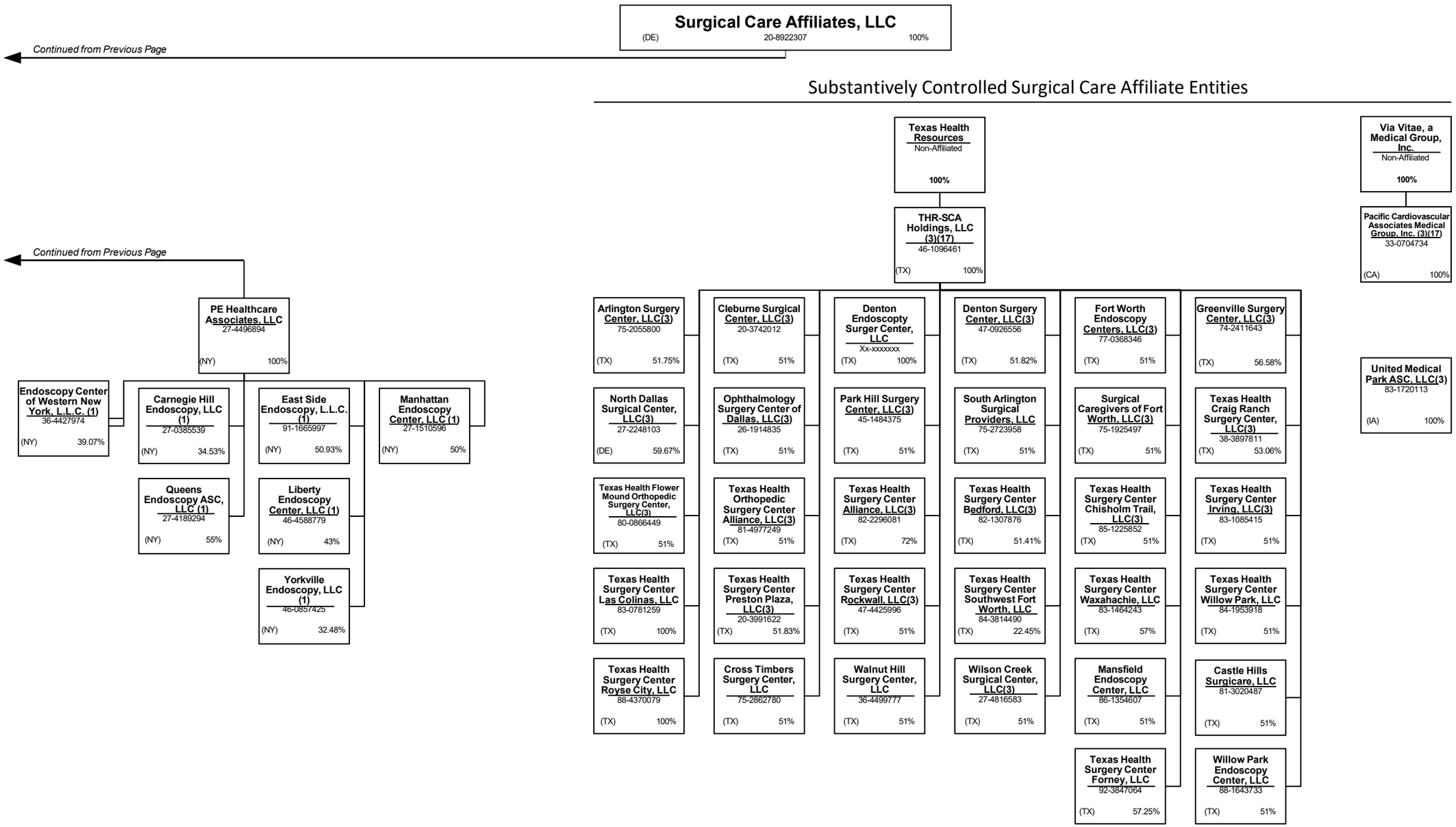

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
4C Medical Group, PLC	AZ	45-2402948
A.G. Dikengil, Inc.	NJ	22-3149900
AbleTo Behavioral Health Services of Michigan, P.C.	MI	85-4328419
AbleTo Behavioral Health Services of New Jersey, P.C.	NJ	85-4306375
AbleTo Behavioral Health Services, PC	CT	47-5519672
AbleTo Licensed Clinical Social Worker Services, P.C.	CA	85-0739865
AbleTo Psychiatry Health Services, P.C.	MA	88-2290313
AHN Accountable Care Organization, LLC	IN	45-4171713
Aleph Psychological Services, Inc.	CA	46-3477124
American Health Network of Indiana, LLC	IN	35-2108729
Angie Coil FNP, PLLC	AZ	81-2112951
AppleCare Hospitalists Medical Group, Inc.	CA	14-1890491
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269
AppleCare Medical Group, Inc.	CA	33-0898174
ArchWell Health Professional Services Holding Co.	DE	86-3278602
ArchWell Health Professional Services of Alabama, LLC	AL	86-3152173
ArchWell Health Professional Services of Arizona, LLC	AZ	87-2986923
ArchWell Health Professional Services of Kansas, P.A.	KS	86-3241870
ArchWell Health Professional Services of Nevada, P.C.	NV	88-1285211
ArchWell Health Professional Services of North Carolina, P.C.	NC	86-3222071
ArchWell Health Professional Services of Oklahoma, LLC	OK	86-3190019
ArchWell Health Professional Services. P.A.	FL	88-3481216
ARTA Western California, Inc.	CA	33-0658815
Astra Medical Clinic, PLLC	AZ	86-0882561
Atrius Health, Inc.	MA	04-3397450
Beaver Medical Group, P.C.	CA	33-0645967
Behavioral Solutions, P.C.	MA	04-3316367
Better Health Value Network, LLC	WA	47-4349079
Bexar Imaging Center, LLC	TX	22-3858211
California Spring Holdings, PC	CA	81-0881243
Carbondale Counseling Associates, PLLC	IL	47-1130641
CareMount Health Solutions ACO, LLC	NY	n/a
Carolina Behavioral Care, P.A.	NC	56-1780933
Carroll Counseling Center LLC	MD	52-2072546
Centers for Family Medicine, GP	CA	33-0483510
Christopher Stalberg, M.D., PLLC	AZ	26-4651320
Cielo House, Inc.	CA	27-1655973
Cognitive-Behavioral Therapy Center of Western North Carolina, P.A.	NC	20-3056794
Colonial Family Practice, L.L.C.	SC	02-0626080
Columbia Counseling Center P.A.	MD	52-2052733
Connect Medical, P.C.	NY	32-0551188
Crystal Run Healthcare Physicians LLP	NY	13-3843560
David C. Anderholm, M.D., P.A.	MN	41-1879063
David Moen, M.D. P.C.	NY	81-5101448
David R. Ferrell, M.D., P.C.	NV	45-2380022
Day-OP Center Of Long Island Inc.	NY	11-2811353
DBT and EMDR Specialists, P.A.	MN	47-3322541
Doc Martins, PLLC	AZ	20-0419099
Durable Medical Equipment, Inc.	MA	04-3106404
Elite Focus Clinic, Inc., a Professional Corporation	CA	47-3861802
Empire Physicians' Medical Group, Inc.	CA	33-0181426
Eugene Center for Anxiety and Stress, LLC	OR	83-2740282
Eugene Therapy, LLC	OR	90-0624377
Everett Physicians, Inc. P.S.	WA	81-1625636
Evolve, LLC	WI	61-1752488
Family Counseling Associates of Salem Andover LLC	NH	27-0820363
Ferrell Physician Services, P.C.	NY	87-4007730
First Hill Surgery Center, LLC	WA	47-2066485
First Step Services, PLLC	NC	51-0484581
Flagstaff Family Physicians, PLLC	AZ	86-0959327
Good Samaritan Medical Practice Association, Inc., A Medical Group	CA	95-3969271
Greater Phoenix Collaborative Care, P.C.	AZ	27-2337725
Gunn Behavioral Care of California, P.C.	CA	27-3237563
Gunn Behavioral Holdco, P.C.	CA	92-3292446
HealthCare Partners Affiliates Medical Group	CA	95-4526112
HealthCare Partners ASC-HB, LLC	CA	26-4247365

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

PART 1 – ORGANIZATIONAL CHART

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760
HealthCare Partners Medical Group, P.C.	CA	95-4340584
Heron Ridge Assoc., P.L.C.	MI	80-0020865
Homecare Dimensions of Florida, Inc.	TX	81-0884465
Homecare Dimensions, Inc.	TX	74-2758644
IN Style OPTICAL, LLC	MA	27-3296953
Inland Faculty Medical Group, Inc.	CA	33-0618077
Inspiris Medical Services of New Jersey, P.C.	NJ	45-2563134
INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674
INSPIRIS of New York Medical Services, P.C.	NY	13-4168739
INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670
Jonathan E. Goldberg, Ph.D., Inc.	MA	26-3013277
Joyce Marter & Associates, P.C.	IL	26-3478896
K.P. Counseling, Ltd.	IL	30-0089259
Kelsey-Seybold Medical Group, PLLC	TX	76-0386391
Keys Counseling, Inc.	IN	30-0358493
KS Pharm, LLC	TX	84-2355006
KS SC, LLC	TX	84-2241460
Landmark Medical of Arkansas, P.A.	AR	85-0997438
Landmark Medical of California, PC	CA	47-4553619
Landmark Medical of Connecticut, PC	CT	83-2295301
Landmark Medical of Florida, P.A.	FL	85-0838149
Landmark Medical of Idaho, PC	ID	92-0496439
Landmark Medical of Kansas, P.A.	KS	82-4633545
Landmark Medical of Kentucky, PSC	KY	82-4881602
Landmark Medical of Louisiana, a Professional Corporation	LA	82-4881732
Landmark Medical of Massachusetts, PLLC	MA	81-5364097
Landmark Medical of Michigan, P.C.	MI	86-3599871
Landmark Medical of Mississippi, P.C.	MS	82-5084178
Landmark Medical of Missouri, P.C.	MO	82-4857713
Landmark Medical of New Hampshire, P.C.	NH	85-1174070
Landmark Medical of North Carolina, P.C.	NC	82-4256752
Landmark Medical of Ohio, Professional Corporation	OH	82-4864947
Landmark Medical of Oregon, PC	OR	47-2926188
Landmark Medical of Pennsylvania, PC	PA	81-1605378
Landmark Medical of Rhode Island, PC	RI	84-2830065
Landmark Medical of Tennessee, PC	TN	30-1288593
Landmark Medical of Texas, PA	TX	83-2296389
Landmark Medical of Utah, PC	UT	84-2660339
Landmark Medical of Virginia, P.C.	VA	85-0839774
Landmark Medical of Washington, PC	WA	47-3028655
Landmark Medical, P.C.	NY	47-1588943
Level2 Medical Services, P.A.	DE	84-5003916
Level2 Medical Services, P.A. New Jersey	NJ	87-2684015
Level2 Medical Services, P.C. Alaska	AK	87-2600511
Level2 Medical Services, P.C. California	CA	92-1153396
Level2 Medical Services, P.C. Utah	UT	87-0989804
Life Strategies Counseling, Inc.	AR	20-0468524
LifeSolutions Counseling Associates, P.C.	IN	26-3292877
March Vision Care Group, Incorporated	CA	95-4874334
March Vision Care IPA, Inc.	NY	27-3115058
March Vision Care of Texas, Inc.	TX	45-4227915
MAT-RX DEVELOPMENT, L.L.C.	TX	43-1967820
Mat-Rx Fort Worth GP, L.L.C.	TX	35-2262695
ME Urgent Care Nebraska, Inc.	NE	81-0936574
MedExpress Employed Services, Inc.	DE	81-1265129
MedExpress Primary Care Arizona, P.C.	AZ	81-4550969
MedExpress Primary Care Arkansas, P.A.	AR	84-4234388
MedExpress Primary Care Kansas, P.A.	KS	81-4605885
MedExpress Primary Care Maryland, P.C.	MD	82-3384324
MedExpress Primary Care Massachusetts, P.C.	MA	82-1096099
MedExpress Primary Care Minnesota P.C.	MN	81-4396738
MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265
MedExpress Primary Care South Carolina, P.C.	SC	83-0764858
MedExpress Primary Care Texas, P.A.	TX	84-2500750
MedExpress Primary Care Virginia, P.C.	VA	82-3395792

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

PART 1 – ORGANIZATIONAL CHART

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
MedExpress Primary Care West Virginia, Inc.	WV	82-4401181
MedExpress Primary Care Wisconsin, S.C.	WI	81-4563448
MedExpress Urgent Care – New Jersey, P.C.	NJ	45-5388778
MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2089623
MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280
MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120
MedExpress Urgent Care California, P.C.	CA	82-0930142
MedExpress Urgent Care Connecticut, P.C.	CT	81-1956812
MedExpress Urgent Care Idaho, P.C.	ID	82-1135336
MedExpress Urgent Care Illinois, P.C.	IL	47-4308614
MedExpress Urgent Care Iowa, P.C.	IA	81-5353472
MedExpress Urgent Care Kansas, P.A.	KS	47-1919283
MedExpress Urgent Care Minnesota P.C.	MN	81-1125396
MedExpress Urgent Care Missouri P.C.	MO	47-3132625
MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747
MedExpress Urgent Care Oregon, P.C.	OR	82-1919436
MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765
MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706
MedExpress Urgent Care Texas, P.A.	TX	47-5147441
MedExpress Urgent Care Washington, P.C.	WA	82-2443118
MedExpress Urgent Care Wisconsin, S.C.	WI	81-4281678
MedExpress Urgent Care, Inc. – West Virginia	WV	26-4546400
MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667
MedExpress Urgent Care, P.C. – Indiana	IN	90-0929572
MedExpress Urgent Care, P.C. – Maryland	MD	45-3461101
MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908
MedExpress Urgent Care, P.C. – Michigan	MI	46-4793937
MedExpress Urgent Care, P.C. – Oklahoma	OK	47-1824365
MedExpress Urgent Care, P.C. – Pennsylvania	PA	26-3750502
MedExpress Urgent Care, P.C. – Tennessee	TN	45-4973138
MedExpress Urgent Care, P.C. – Virginia	VA	45-3123110
MedExpress Urgent Care, P.S.C. - Kentucky	KY	83-1565124
MedExpress, Inc. – Delaware	DE	45-5436856
Mental Health Resources, PLLC	TN	62-1396317
MH Physician Three Holdco, a Medical Corporation	CA	27-4691544
MHCH, Inc.	CA	80-0507474
MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508
Mindscapes Counseling, PLLC	CT	47-2117693
Mobile Medical Services of New Jersey, PC	NJ	81-2977678
Mobile Medical Services, P.C.	NY	30-0445773
Monarch Health Plan, Inc.	CA	22-3935634
Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660
NAMM Medical Group Holdings, Inc.	CA	56-2627070
NC Center For Resiliency, PLLC	NC	47-2693055
New Perspectives Center for Counseling & Therapy, L.L.C.	OR	93-1173779
New York Licensed Clinical Social Work, P.C.	NY	86-3891057
Northern California Physicians Network, Inc., a Professional Corporation	CA	81-1573604
Northlight Counseling Associates, Inc.	AZ	86-0646417
Northwest Medical Group Alliance, LLC	WA	91-1699944
NPN IPA Washington, PLLC	WA	61-1855159
Oakland Psychological Clinic, P.C.	MI	38-2481929
OHR Physician Group, P.C.	OR	93-0979031
Optum Behavioral Care of California, P.C.	CA	84-4887072
Optum Behavioral Care of Colorado, P.C.	CO	93-2952612
Optum Behavioral Care of Connecticut, P.C.	CT	93-2339326
Optum Behavioral Care of Kansas, P.A.	KS	93-3404672
Optum Behavioral Care of New Jersey, P.C.	NJ	85-0666386
Optum Behavioral Care of North Carolina, P.C.	NC	85-1959641
Optum Behavioral Care of Texas, P.A.	TX	84-3152209
Optum Clinic, P.A.	TX	75-2778455
Optum Everycare, P.C.	#N/A	66-1026448
Optum Medical Care of New Jersey, P.C.	NJ	22-3624559
Optum Medical Care, P.C.	NY	13-3544120
Optum Medical Group (Rhodes), P.C.	NV	88-0310956
Optum Medical Group II (Rhodes), P.C.	NV	86-0857176
Optum Medical Group, P.A.	KS	46-2662506

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

PART 1 – ORGANIZATIONAL CHART

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
Optum Medical Services of California, P.C.	CA	30-0826311
Optum Medical Services of Colorado, P.C.	CO	45-5424191
Optum Medical Services, P.C.	NC	45-3866363
Optum Urgent Care, PLLC	NY	46-1883579
OptumCare Portland, LLC	OR	93-1306308
Oregon Healthcare Resources, LLC	OR	27-3674492
Peninsula Psychological Center, Inc., P.S.	WA	91-1885912
Perspectives of Troy, P.C.	MI	38-2592367
Physician Partners Medical Group, Inc.	CA	30-0516435
Physician United PLLC	AZ	84-3476733
Physicians Medical Group of San Jose, Inc.	CA	94-2722082
Physicians Medical Holdings	CA	86-2631012
Pilot Holdings, P.C.	CA	87-3931756
Pinnacle Medical Group, Inc.	CA	33-0795271
Polyclinic Holdings, P.C.	WA	83-3042027
POLYCLINIC MANAGEMENT SERVICES COMPANY, LLC	WA	46-0508606
Primary Care Associated Medical Group, Inc.	CA	33-0527335
ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394
ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253
ProHEALTH Care Associates, L.L.P.	NY	11-3355604
ProHEALTH Medical NY, P.C.	NY	47-1388406
ProHealth Physicians, P.C.	CT	06-1469068
ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535
Prospero Health Partners Florida, Inc.	FL	85-0775386
Prospero Health Partners New York, P.C.	NY	82-2400620
Prospero Health Partners North Carolina, P.C.	NC	84-4569314
Prospero Health Partners, P.C.	MN	84-3234753
Prospero Medical Services New Jersey, P.C.	NJ	84-3844362
Psychiatry Services of New York, P.C.	FL	85-0921665
Psychiatry Specialists, S.C.	NY	27-3409538
Psychological Healthcare, PLLC	IL	16-1484552
Red Oak Counseling, Ltd.	NY	20-0785644
Redlands Family Practice Medical Group, Inc.	WI	56-2627067
Refresh Canopy Cove, Inc.	CA	82-3603285
Refresh Connecticut, PLLC	FL	84-2663780
Refresh Evolve, LLC	CT	83-4507157
Refresh In-Home Counseling LLC	WI	82-5351068
Refresh Pennsylvania, LLC	IL	84-1756547
Reliant Medical Group The Endoscopy Center, LLC	PA	20-5251393
Reliant Medical Group, Inc.	MA	04-2472266
RICBT, Inc.	MA	33-0999953
Riverside Community Healthplan Medical Group, Inc.	RI	33-0055097
Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379
Saad A. Shakir, M.D., Inc.	CA	77-0398259
Saddleback Medical Group, Inc.	CA	33-0571462
San Bernardino Medical Group, Inc.	CA	95-3088615
Sanvello Behavioral Health Services, P.A.	CA	84-1754732
Saris Counseling, LLC	DE	n/a
Seattle Psychology, P.L.L.C.	WI	46-3238571
SecureMD Professionals - California, PC	WA	46-3057015
Serenity Family and Psychological Counseling Center, P.C.	CA	45-3802527
Shark Holdings, P.C.	CA	87-3142148
Sherman Counseling Management, S.C.	CA	47-5082677
Silicon Valley TMS of Monterey Bay, GP	WI	81-3200297
Southwest Internal Medicine Group, Roberto Ruiz, M.D., PLLC	CA	86-0516447
Spring Behavioral Health of New Jersey, LLC	AZ	82-3087236
Springfield Psychological, P.C.	NJ	23-2833266
Surgical Eye Experts, LLC	PA	65-1321064
Surprise Health Center, PLLC	MA	86-1047772
Susan Albright P.L.C.	AZ	20-5176158
Talbert Medical Group, P.C.	AZ	93-1172065
The Everett Clinic, PLLC	CA	91-0214500
The Polyclinic, PLLC	WA	91-0369070
The Potter's House Family & Children Treatment Center, LLC	WA	20-8357849
The Tabor Therapy Group, Inc.	GA	46-5461304
Triangle Counseling Agency, Inc.	IL	26-2552129

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

PART 1 – ORGANIZATIONAL CHART

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
USMD Diagnostic Services, LLC	NC	27-2803133
USMD Hospital at Arlington, L.P.	TX	73-1662763
USMD Hospital at Fort Worth, L.P.	TX	20-3571243
USMD of Arlington GP, L.L.C.	TX	73-1662757
Vitucci, LCSW, P.C.	IL	85-1453387
Warner Family Practice, P.C.	AZ	86-0462952
Waypoint Minnesota PC	MN	46-2854394
WellMed Florida Medicare ACO, LLC	TX	84-2233329
WellMed Florida Services, PLLC	TX	45-2158334
WellMed Foundation Medicare ACO, LLC.	TX	84-2193803
WellMed Greater Texas Medicare ACO, LLC	TX	84-2178104
WellMed Medical Group, P.A.	TX	74-2574229
WellMed MSSP ACO, LLC	TX	84-2219968
WellMed Network Medicare ACO, LLC	TX	84-2204650
WellMed Network of Florida, Inc.	TX	35-2314192
WellMed Networks - DFW, Inc.	TX	41-2250215
WellMed Networks, Inc.	TX	74-2889447
WellMed of Las Cruces, Inc.	TX	92-0183013
XLHome Michigan, P.C.	MI	46-3537245
XLHome Northeast, P.C.	NJ	45-5530241
XLHome Oklahoma, Inc.	OK	46-2931689
XLHome, P.C.	MD	27-3543997

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

PART 1 – ORGANIZATIONAL CHART

Organizational Chart Footnotes

(1) Entity is owned in full or in part by a UnitedHealth Group Incorporated friendly physician.
(2) Control of the Foundation is based on sole membership, not the ownership of voting securities.
(3) The remaining percentage is owned either by a non-affiliated entity, outside investor(s), current/former company officer(s), or third party shareholder(s).
(4) The minority percentage is owned by one or more affiliated UnitedHealth Group Incorporated subsidiaries. Voting rights do vary.
(5) No information of the other shareholder(s) has been provided
(6) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.
(7) Branch offices in Iraq and Uganda.
(8) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.
(9) Registered as a foreign shareholder in Brazil.
(10) Open
(11) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.
(12) N/A
(13) Entity has a representative office in Beijing, China.
(14) Open
(15) Registered branch in the United Kingdom.
(16) Open
(17) Entity is not directly owned by the parent. However, the parent does have a viable economic interest as well as control over the entity through contractual agreements.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

	Claim Adjustment Expenses		3	4	5
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
2504. Interest	118,660	37,570	437,527	0	593,757
2505. Managed Care & Network Access	76,775	24,263	169,912	0	270,950
2506. Miscellaneous Losses	315	100	699	0	1,114
2597. Summary of remaining write-ins for Line 25 from overflow page	195,750	61,933	608,138	0	865,821