

### **HEALTH QUARTERLY STATEMENT**

AS OF MARCH 31, 2021 OF THE CONDITION AND AFFAIRS OF THE

#### **AMH Health, LLC**

NA	IC Group Code 0671 (Current) (P	NAIC Company C	ode <u>16553</u> Employer's ID N	Number 83-2435050
Organized under the Laws of	Main	•	, State of Domicile or Port of Entry	yME
Country of Domicile		United States	of America	
Licensed as business type:		Health Maintenan	ce Organization	
Is HMO Federally Qualified?	Yes [ ] No [ X ]			
Incorporated/Organized	11/02/2018		Commenced Business	04/12/2019
Statutory Home Office	2 Gannett Dri	ve,	Sout	h Portland, ME, US 04106
	(Street and Nun	nber)	(City or Tov	wn, State, Country and Zip Code)
Main Administrative Office		4425 Corpora		
	Virginia Beach, VA, US 23462	(Street and	Number)	757-473-2737
	Town, State, Country and Zip Co	ode)	(Area	Code) (Telephone Number)
Mail Address	4425 Corporation Lan	е	Virgi	inia Beach, VA, US 23462
	(Street and Number or P.C	D. Box)	(City or Tov	wn, State, Country and Zip Code)
Primary Location of Books and	d Records	220 Virgini	a Avenue	
	Indianapolis, IN, US 46204	(Street and	Number)	317-488-6000
(City or	Town, State, Country and Zip Co	ode)	(Area	Code) (Telephone Number)
Internet Website Address		www.anthem.com/me	edicare-mainehealth	
-				0.17.400.0040
Statutory Statement Contact		Barrett Name)	,	317-488-6816 Area Code) (Telephone Number)
	leigh.barrett@anthem.com	, ,		317-488-6200
	(E-mail Address)			(FAX Number)
		OFFIC	ERS	
President and Chairperson			Treasurer	
Secretary _	Kathleen Susai	n Kleter OTH	Assistant Treasurer	Eric Kenneth Noble
		DIRECTORS O		
	Esquivel orge McGinty	Douglas Ja Raul Guille		Scott Douglas Mills Albert Graton Swallow III
	arl Warren	rtaar Game		, iibort Oratori Oranori III
State of	Maine	— ss:		
County of	Cumberland			
all of the herein described as statement, together with relate condition and affairs of the sa in accordance with the NAIC rules or regulations require respectively. Furthermore, th	sets were the absolute property ad exhibits, schedules and explan id reporting entity as of the report Annual Statement Instructions ar differences in reporting not relae scope of this attestation by the	of the said reporting entity, ations therein contained, aring period stated above, and Accounting Practices and ted to accounting practice described officers also incl	free and clear from any liens or inexed or referred to, is a full and to d of its income and deductions the d Procedures manual except to the s and procedures, according to udes the related corresponding el	ng entity, and that on the reporting period stated above, claims thereon, except as herein stated, and that this rue statement of all the assets and liabilities and of the refrom for the period ended, and have been completed extent that: (1) state law may differ; or, (2) that state the best of their information, knowledge and belief, ectronic filing with the NAIC, when required, that is an requested by various regulators in lieu of or in addition—DocuSigned by:
Rayl Cmitte		Hathy Kieler		Vincent E. Scher
		34259124741844A		A85A33722D4143E
Raul Guillermo		Kathleen Su		Vincent Edward Scher
Presiden	t	Secre	tary	Treasurer
Subscribed and sworn to befo	re me this		a. Is this an original filing? b. If no,  1. State the amendment n  2. Date filed  3. Number of pages attact	number

### **ASSETS**

			Current Statement Date		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
	Dondo				119,484
1.		35,070,089			119,404
2.	Stocks:			_	
	2.1 Preferred stocks				
	2.2 Common stocks	2,808,922		2,808,922	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens.			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$encumbrances)			0	0
	,				0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$47,292,543 ), cash equivalents				
	(\$) and short-term				
	investments (\$)	47,292,543		47,292,543	50,453,932
6.	Contract loans (including \$ premium notes)				0
7.	Derivatives				0
8.	Other invested assets				0
-					
9.	Receivables for securities				0
10.	Securities lending reinvested collateral assets				0
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	85 , 171 , 554	0	85,171,554	50,573,416
13.	Title plants less \$ charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued	2,083		2,083	3,333
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	771 656	8 043	763 613	60 377
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				0
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$3,315,988 )	3,315,988		3,315,988	1,051,966
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans				606,446
18.1	Current federal and foreign income tax recoverable and interest thereon				479,764
	Net deferred tax asset			*	244,778
				, ,	*
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$				0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates			0	0
24.	Health care (\$1,961,553 ) and other amounts receivable	1,987,422	25,869	1,961,553	1,400,595
25.	Aggregate write-ins for other than invested assets				146,210
26.	Total assets excluding Separate Accounts, Segregated Accounts and	, , ,	, ,	, ,	,
_0.	Protected Cell Accounts (Lines 12 to 25)	94,911,899	1,338,399	93,573,500	54,566,885
27.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts			0	0
28.	Total (Lines 26 and 27)	94,911,899	1,338,399	93,573,500	54,566,885
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.	Commence of a serial serial in the line fact in the fa				
1198.	Summary of remaining write-ins for Line 11 from overflow page				0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Prepaid expenses	1,286,161	1,286,161		0
2502.	State income tax recoverable	44,306		44,306	146,210
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,330,467	1,286,161	44,306	146,210
		. ,			,

### LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$ reinsurance ceded)			26,979,282	12,515,810
2.	Accrued medical incentive pool and bonus amounts			724 , 146	276,577
3.	Unpaid claims adjustment expenses			349,029	263,115
4.	Aggregate health policy reserves, including the liability of	, , , , , , , , , , , , , , , , , , , ,		,	,
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	199,855		199,855	9,755
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves			0	0
8.	Premiums received in advance	10,859		10,859	9,916
9.	General expenses due or accrued			895 , 153	2,447,878
10.1					
	(including \$ on realized gains (losses))			0	0
10.2	Net deferred tax liability			0	0
11.	Ceded reinsurance premiums payable			0	0
12.	Amounts withheld or retained for the account of others	21,582			10,355
13.	Remittances and items not allocated			23,436	11,840
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$ current)			0	0
15.	Amounts due to parent, subsidiaries and affiliates	11,441,409		11,441,409	24,869,703
16.	Derivatives	•		0	0
17.	Payable for securities	35,000,695		35,000,695	0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22.	Liability for amounts held under uninsured plans	1,729,897		1,729,897	1,218
23.	Aggregate write-ins for other liabilities (including \$				
	current)	531, 174		531,174	
24.	Total liabilities (Lines 1 to 23)	77,906,517	0		40,465,057
25.	Aggregate write-ins for special surplus funds	xxx	XXX	0	0
26.	Common capital stock	xxx	XXX		
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	18,002,000	18,002,000
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				
31.	Unassigned funds (surplus)	XXX	XXX	(2,335,017)	(3,900,172)
32.	Less treasury stock, at cost:				
	32.1 shares common (value included in Line 26				
	\$	XXX	XXX		
	32.2 shares preferred (value included in Line 27				
	\$				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	15,666,983	14,101,828
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	93,573,500	54,566,885
	DETAILS OF WRITE-INS				
2301.	Miscellaneous Medicare liabilities	·		521,063	45,617
2302.	Escheat liability	10,111		10,111	3,273
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page		0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)		0	531,174	48,890
2501.	Estimated ACA Health Insurer fee		XXX		0
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.					
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

### **STATEMENT OF REVENUE AND EXPENSES**

		То	ent Year Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX			69,079
2.	Net premium income ( including \$ non-health				
	premium income)	XXX	40,452,553	12,295,070	76,123,555
3.	Change in unearned premium reserves and reserve for rate credits	XXX	(191,962)		(7,892)
4.	Fee-for-service (net of \$ medical expenses)	XXX			0
5.	Risk revenue	XXX			0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0	0
8.	Total revenues (Lines 2 to 7)	XXX	40,260,591	12,295,070	76,115,663
	Hospital and Medical:				
9.	Hospital/medical benefits				
10.	Other professional services		3, 136, 202	1,161,381	5,909,233
11.	Outside referrals				0
12.	Emergency room and out-of-area			<i>'</i>	3,084,288
13.	Prescription drugs			, ,	5,394,786
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts		· ·	·	600,809
16.	Subtotal (Lines 9 to 15)	0	34,086,942	11,518,635	64,029,638
	Less:				
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)			11,518,635	64,029,638
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$909,543 cost				
	containment expenses				
21.	General administrative expenses		4,831,207	2,098,061	9,932,179
22.	Increase in reserves for life and accident and health contracts				_
	(including \$ increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned		(52,774)	(1,507)	(10,181)
26.	Net realized capital gains (losses) less capital gains tax of				0
27	\$ Net investment gains (losses) (Lines 25 plus 26)				0
27.	Net gain or (loss) from agents' or premium balances charged off [(amount	0	(52,774)	(1,507)	( 10, 101)
20.	recovered \$				
	(amount charged off \$		(1.526)		(2,753)
29.	Aggregate write-ins for other income or expenses		` ' '		39,585
30.	Net income or (loss) after capital gains tax and before all other federal		10,770		,00,000
00.	income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(106,772)	(1,858,866)	(722,983)
31.	Federal and foreign income taxes incurred	XXX	221,258	26,799	258,736
32.	Net income (loss) (Lines 30 minus 31)	XXX	(328,030)	(1,885,665)	(981,719)
	DETAILS OF WRITE-INS				
0601.		XXX			
0602.		XXX			
0603.		XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page			0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX			
0702.					
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page			0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.	· can (====================================		,	5	<u> </u>
1402.					
1403					^
1498.	Summary of remaining write-ins for Line 14 from overflow page	0		0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)		+		00.505
2901.			13,779	905	39,585
2902.			-		
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page				0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	13,779	905	39,585

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

	STATEMENT OF REVENUE AND EX	LENSES (C	<u>continuec</u>	,
		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	14,101,828	6,355,068	6,355,068
34.	Net income or (loss) from Line 32	(328,030)	(1,885,665)	(981,719)
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(29,334)		(161,744)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax	391,123	325,967	257,830
39.	Change in nonadmitted assets	1,531,396	(3,209,451)	(2,869,607)
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles.			
44.	Capital Changes:			
	44.1 Paid in			0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	0	0	11,502,000
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	1,565,155	(4,769,149)	7,746,760
49.	Capital and surplus end of reporting period (Line 33 plus 48)	15,666,983	1,585,919	14,101,828
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

#### **CASH FLOW**

	CASH FLOW		_	
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	37,482,525	11,022,802	75,012,302
2.	Net investment income	(1,437)	531	(6,940)
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	37,481,088	11,023,333	75,005,362
5.	Benefit and loss related payments	19,946,215	3,203,527	52,447,870
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	6,784,412	719,012	10,693,196
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	0	0	699,999
10.	Total (Lines 5 through 9)	26,730,627	3,922,539	63,841,065
11.	Net cash from operations (Line 4 minus Line 10)	10,750,461	7,100,794	11, 164, 297
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	0	0	0
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	35,000,695	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	35,000,695	0	0
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	35,000,695	(2,000,000)	0
	13.2 Stocks	600,000	4,000,000	2,400,000
	13.3 Mortgage loans			
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	35,600,695	2,000,000	2,400,000
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(600,000)	(2,000,000)	(2,400,000)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			11,502,000
	16.3 Borrowed funds		_	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders		0	0
	16.6 Other cash provided (applied)	(13,311,850)	526,799	23,636,772
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(13,311,850)	526,799	35,138,772
	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)	(3,161,389)	5,627,593	43,903,069
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(0, 101,000)		
13.		50,453,932	6,550,863	6,550,863

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

### **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	Compreh (Hospital &	ensive Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	7,646	0	0	0	0	0	0	7,646	0	
2. First Quarter	12,719							12,719		
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	36,920							36,920		
Total Member Ambulatory Encounters for Period:										
7 Physician	53,040							53,040		
8. Non-Physician	95,405							95,405		
9. Total	148,445	0	0	0	0	0	0	148,445	0	
10. Hospital Patient Days Incurred	9,056							9,056		
11. Number of Inpatient Admissions	1,071							1,071		
12. Health Premiums Written (a)	40,452,553							40,452,553		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	40,260,591							40,260,591		
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	19,175,901							19,175,901		
18. Amount Incurred for Provision of Health Care Services	34,086,942							34,086,942		

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

	Aging Analysis of Unpaid Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
0299999 Aggregate accounts not individually listed-uncovered						
0399999 Aggregate accounts not individually listed-covered	13, 130, 481	593,278	27,985	161		13,751,90
0499999 Subtotals	13, 130, 481	593,278	27,985	161	0	13,751,90
0599999 Unreported claims and other claim reserves		- ,	, , , , , , , , , , , , , , , , , , , ,	·		13,227,37
0699999 Total amounts withheld						., ,.
0799999 Total claims unpaid						26,979,28
0899999 Accrued medical incentive pool and bonus amounts						724 14

#### **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - F			12.1	Tri	_	
	Claims Year to		Liab End of Curr		5	6
	Year to	2	End of Curre	ani Quarter		
	On Claims Incurred Prior	2 On	On Claims Unpaid	4 On	Claims Incurred in	Estimated Claim Reserve and Claim Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)					0	0
Medicare Supplement					0	0
3. Dental Only					0	0
4. Vision Only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	7,496,147	13,405,223	2,860,388	24,118,894	10,356,535	12,515,810
7 Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	7,496,147	13,405,223	2,860,388	24,118,894	10,356,535	12,515,810
10. Healthcare receivables (a)	4,250	1,976,683			4,250	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts	150,514	104,950	449,448	274,698	599,962	276,577
13. Totals (Lines 9-10+11+12)	7,642,411	11,533,490	3,309,836	24,393,592	10,952,247	12,792,387

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

#### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

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

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

		SSAP#	F/S Page	F/S Line	March 31, 2021	December 31, 2020
Net	Income					
(1)	AMH Health, LLC. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (328,030)	\$ (981,719)
(2)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(3)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (328,030)	\$ (981,719)
<u>Sur</u>	<u>rplus</u>					
(5)	AMH Health, LLC. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 15,666,983	\$ 14,101,828
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 15,666,983	\$ 14,101,828

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

No significant change.

#### **C.** Accounting Policies

- (1) No significant change.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.

The Company holds 5 SVO-Identified bond exchange traded funds ("ETFs") reported on Schedule D-1. The Company has made an irrevocable decision to report ETFs at systematic value. Systematic valuation has been consistently applied to all ETFs held at March 31, 2021 and previous periods.

(3) - (5) No significant change.

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

- (6) Loan-backed securities are stated at amortized cost. Pre-payment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.
- (7) (13) No significant change.

#### D. Going Concern

Not applicable.

#### 2. Accounting Changes and Corrections of Errors

Not applicable.

#### 3. Business Combinations and Goodwill

Not applicable.

#### 4. Discontinued Operations

Not applicable.

#### 5. Investments

#### A. - C.

Not applicable.

#### D. Loan-Backed Securities

- (1) The Company did not have loan-backed securities at March 31, 2021.
- (2) The Company did not recognize other-than-temporary impairments ("OTTI") on its loan-backed securities during the three months ended March 31, 2021.
- (3) The Company did not hold OTTI on its loan-backed securities at March 31, 2021.
- (4) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings at March 31, 2021.
- (5) The Company had no impaired loan-backed securities at March 31, 2021.

#### E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not applicable.

#### F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at March 31, 2021.

#### G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at March 31, 2021.

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

#### H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at March 31, 2021.

#### I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at March 31, 2021.

#### J. Real Estate

Not applicable.

#### K. Investments in Low-Income Housing Tax Credits

Not applicable.

#### L. Restricted Assets

No significant change.

#### M. Working Capital Finance Investments

Not applicable.

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

The Company had no netted assets and liabilities at March 31, 2021.

#### O. 5GI Securities

The Company has no 5GI Securities as of March 31, 2021.

#### P. Short Sales

The Company did not have any short sales at March 31, 2021.

#### Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at March 31, 2021.

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

The Company did not participate in a cash pool at March 31, 2021.

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

#### 7. Investment Income

No significant change.

#### 8. Derivative Instruments

Not applicable.

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

#### 9. Income Taxes

No significant change.

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

#### A. Nature of the Relationship

No significant change.

#### **B.** Significant Transactions for the Period

The Company paid an additional capital contribution of \$600,000 to AMH Health Plans of Maine, Inc. on March 31, 2021.

#### C. Transactions with Related Parties who are not Reported on Schedule Y

No significant change.

#### D. Amounts Due to or from Related Parties

At March 31, 2021, the Company reported no amounts due from affiliates and \$11,441,409 due to affiliates. The payable balance represents intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

#### E. - O.

No significant change.

#### 11. Debt

Not applicable.

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

#### A. Defined Benefit Plan

Not applicable.

- **B.** Not applicable.
- C. Not applicable.
- **D.** Not applicable.

#### E. Defined Contribution Plans

Not applicable.

#### F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

#### G. Consolidated/Holding Company Plans

No significant change.

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

#### H. Post Employment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

Not applicable.

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

Not applicable.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
  - A. Transfers of Receivables Reported as Sales

Not applicable.

- B. Transfer and Servicing of Financial Assets
  - (1) Not applicable.
  - (2) (7) Not applicable.
- C. Wash Sales
  - (1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.
  - (2) At March 31, 2021, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
  - A. Administrative Services Only Plans

Not applicable.

**B.** Administrative Services Contract Plans

Not applicable.

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

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

Not applicable.

#### 20. Fair Value Measurements

A.

There are no assets or liabilities measured at fair value as of March 31, 2021.

#### **B.** Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

#### C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value ("NAV")	Practicable (Carrying Value)
Bonds	\$35,080,863	\$35,070,089	\$34,956,998	\$ 123,865	\$ —	\$ —	\$ —

#### D. Not Practicable to Estimate Fair Value

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

#### E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

#### 21. Other Items

No significant change.

#### 22. Events Subsequent

Subsequent events have been considered through May 12, 2021 for the statutory statement issued on May 13, 2021. There were no events occurring subsequent to March 31, 2021 requiring recognition or disclosure.

#### 23. Reinsurance

Not applicable.

#### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

#### A. - D.

No significant change.

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

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

No

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC. NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

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

Not applicable.

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

Not applicable.

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

Not applicable.

#### 25. Change in Incurred Claims and Claim Adjustment Expenses

- **A.** The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$1,591,845 during 2021. This is approximately 12.2% of unpaid claims and claim adjustment expenses of \$13,055,502 as of December 31, 2020. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2021. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- **B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

#### 26. Intercompany Pooling Arrangements

Not applicable.

#### 27. Structured Settlements

Not applicable.

#### 28. Health Care Receivables

No significant change.

#### 29. Participating Policies

Not applicable.

#### **30. Premium Deficiency Reserves**

The Company did not record any premium deficiency reserves at March 31, 2021.

#### 31. Anticipated Salvage and Subrogation

Not applicable.

#### **GENERAL INTERROGATORIES**

#### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

2.1 Hree 2.2 If 3.1 Is is if 3.2 H 3.3 If 3.4 Is 3.5 If 4.1 H	yes, has the report been filed with the domiciliary state?	System consisting t since the prior quanges.  ed group?  de issued by the suring the period co	articles of incorporation, g of two or more affiliated uarter end?	d persons, one or mor	e of which	Yes [ ) Yes [ ) Yes [ )	( ] No [ 01156039	] X ]
2.2 Iff 3.1 Isisiff 3.2 H 3.3 Iff 3.4 Is 3.5 Iff 4.1 H	eporting entity?  yes, date of change:  the reporting entity a member of an Insurance Holding Company Stan insurer?  yes, complete Schedule Y, Parts 1 and 1A.  ave there been any substantial changes in the organizational chart the response to 3.2 is yes, provide a brief description of those chart the reporting entity publicly traded or a member of a publicly trade the response to 3.4 is yes, provide the CIK (Central Index Key) contast the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and standard to exist as a result of the merger or consolidation.	System consisting It since the prior quanges.  The ded group?	g of two or more affiliated uarter end?	d persons, one or mor	e of which	Yes [ ) Yes [ ) Yes [ )	( ] No [ ] No [ ( ] No [ 01156039	] X ]
3.1 Is is if If 3.2 H 3.3 If 3.4 Is 3.5 If 4.1 H	the reporting entity a member of an Insurance Holding Company Stan insurer?  yes, complete Schedule Y, Parts 1 and 1A.  ave there been any substantial changes in the organizational chart the response to 3.2 is yes, provide a brief description of those chart the reporting entity publicly traded or a member of a publicly trade the response to 3.4 is yes, provide the CIK (Central Index Key) contast the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and states as a result of the merger or consolidation.	System consisting It since the prior quanges.  The ded group?	g of two or more affiliated uarter end?	d persons, one or mor	e of which	Yes [ )	] No [ ( ] No [ 01156039	X ]
is if ff 3.2 H 3.3 If 3.4 Is 3.5 If 4.1 H	yes, complete Schedule Y, Parts 1 and 1A.  ave there been any substantial changes in the organizational chart the response to 3.2 is yes, provide a brief description of those char the reporting entity publicly traded or a member of a publicly trade the response to 3.4 is yes, provide the CIK (Central Index Key) cor as the reporting entity been a party to a merger or consolidation du yes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and sta eased to exist as a result of the merger or consolidation.	t since the prior quanges.  ed group?	uarter end?  SEC for the entity/group.  overed by this statement			Yes [ )	] No [ ( ] No [ 01156039	X ]
<ul><li>3.3 If</li><li>3.4 Is</li><li>3.5 If</li><li>4.1 H</li></ul>	the response to 3.2 is yes, provide a brief description of those chars the reporting entity publicly traded or a member of a publicly traded the response to 3.4 is yes, provide the CIK (Central Index Key) coasts the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and state eased to exist as a result of the merger or consolidation.	ed group?ode issued by the suring the period co	SEC for the entity/group.			Yes [ )	( ] No [ 01156039	1
3.4 Is 3.5 If	the reporting entity publicly traded or a member of a publicly traded the response to 3.4 is yes, provide the CIK (Central Index Key) coast the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and state eased to exist as a result of the merger or consolidation.	ed group?ode issued by the suring the period co	SEC for the entity/group.			00	01156039	
3.5 If 4.1 H	the response to 3.4 is yes, provide the CIK (Central Index Key) codes as the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and state eased to exist as a result of the merger or consolidation.	ode issued by the Suring the period co	SEC for the entity/group.			00	01156039	
4.1 H	as the reporting entity been a party to a merger or consolidation duyes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and staeased to exist as a result of the merger or consolidation.	uring the period co	overed by this statement	1?				
	yes, complete and file the merger history data file with the NAIC.  yes, provide the name of the entity, NAIC Company Code, and staeased to exist as a result of the merger or consolidation.					Yes [	] No [	Х ]
	eased to exist as a result of the merger or consolidation.	ate of domicile (us	se two letter state abbrev	viation) for any entity th	nat has			
			2 NAIC Company Code	3 State of Domicile				
ir	the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting that the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including the reporting entity is subject to a management agreement, including entity is subject to a management agreement, including entity is subject to a management agreement, including entity is subject to a management agreement agreement.	ling third-party adr les regarding the t	ministrator(s), managing terms of the agreement of	general agent(s), atto or principals involved?	orney- PYes [	] No	[X] N/	′A [
6.1 S	state as of what date the latest financial examination of the reporting	ng entity was made	e or is being made		<u>-</u>			
	state the as of date that the latest financial examination report beca ate should be the date of the examined balance sheet and not the							
th	state as of what date the latest financial examination report became reporting entity. This is the release date or completion date of thate).	ne examination rep	port and not the date of t	the examination (bala	nce sheet			
6.4 B	y what department or departments?							
	lave all financial statement adjustments within the latest financial e tatement filed with Departments?					] No	[ ] N/	′A [ X
6.6 H	lave all of the recommendations within the latest financial examinat	ation report been o	complied with?		Yes [	] No	[ ] N/	/A [ X
	las this reporting entity had any Certificates of Authority, licenses of evoked by any governmental entity during the reporting period?					Yes [	] No [	Х ]
7.2 If	yes, give full information:							
8.1 Is	the company a subsidiary of a bank holding company regulated by	y the Federal Res	serve Board?			Yes [	] No [	Х ]
8.2 If	response to 8.1 is yes, please identify the name of the bank holding	ng company.						
8.3 Is	the company affiliated with one or more banks, thrifts or securities	s firms?				Yes [	] No [	Х ]
re	response to 8.3 is yes, please provide below the names and locati egulatory services agency [i.e. the Federal Reserve Board (FRB), the surance Corporation (FDIC) and the Securities Exchange Commis	the Office of the C	Comptroller of the Curren	cy (OCC), the Federa	l Deposit			
F	1 Affiliate Name	L	2 Location (City, State)	3 FRB	4 5 OCC FDIC	6 SEC		

### **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  (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;	Yes [ X ] No [ ]
	(c) Compliance with applicable governmental laws, rules and regulations;	
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.	
9.11	If the response to 9.1 is No, please explain:	
9.2	Has the code of ethics for senior managers been amended?	Yes [ ] No [ X ]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).	
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [ ] No [ X ]
	FINANCIAL	
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$	0
	INVESTMENT	
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for	
11.2	use by another person? (Exclude securities under securities lending agreements.)  If yes, give full and complete information relating thereto:	Yes [ ] No [ X ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	
13.	Amount of real estate and mortgages held in short-term investments:	
14.1 14.2	If yes, please complete the following:	res [ X ] NO [ ]
	Prior Year-End	Current Quarter
	Book/Adjusted	Book/Adjusted
1/1 21	Bonds\$	Carrying Value
	Preferred Stock\$	\$0
	Common Stock \$ 2,238,256	\$2,808,922
	Short-Term Investments \$ 0	\$0
	Mortgage Loans on Real Estate	\$0
	All Other	\$0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)\$	\$2,808,922
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above\$	\$0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?	Vec [ ] No [ Y ]
15.2		
	If no, attach a description with this statement.	1
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date:	
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	
	16.3 Total payable for securities lending reported on the liability page.	\$0

### **GENERAL INTERROGATORIES**

17.1	For all agreements that	at comply with the re	equirements of the NAIC Finan	ncial Condition Exan	niners Handbook,	complete	the following:			
	JP Morgan Chase Bank	Name of Custo	dian(s)	383 Madison Ave	Custoo , New York, NY 10	dian Addre	ess			
17.2	For all agreements that location and a comple		h the requirements of the NAIC	I C Financial Conditio	n Examiners Har	idbook, pr	ovide the name,			
	1 Name(		2 Location(s)			3 ete Explar	nation(s)			
17.3 17.4		changes, including i	name changes, in the custodial						[ ]	No [ X ]
	Old Custo	odian	2 New Custodian	The state of the s	Change		4 Reason			
17.5	make investment deci	sions on behalf of to cess to the investn	estment advisors, investment r he reporting entity. For assets t nent accounts"; "handle secu	that are managed ir urities"]						
	Anthem Inc		or Individual							
			in the table for Question 17.5, nore than 10% of the reporting					Yes	[	] No [ X ]
			with the reporting entity (i.e. de aggregate to more than 50% o					Yes	[	] No [ X ]
17.6	For those firms or inditable below.	viduals listed in the	table for 17.5 with an affiliation	n code of "A" (affilia	ted) or "U" (unaffi	liated), pro	ovide the information for th	е		
	1		2		3		4			5
	Central Registration						4		Mana	stment gement
	Central Registration Depository Number		Name of Firm or Individual		egal Entity Identif		Registered With		Mana Agre (IMA	gement eement () Filed
	Depository Number	Loomis, Sayles &	Name of Firm or Individual	JIZ	ZPN2RX3UMNOYIDI3	13	Registered With		Mana Agre (IMA	gement eement () Filed
18.1 18.2	Depository Number	Loomis, Sayles &	Company, LP	JIZ	PN2RX3UMN0YIDI3	13	Registered With Securities Exchange Commission		Mana Agre (IMA NO	gement eement a) Filed
	Depository Number  105377  Have all the filing requ If no, list exceptions:  By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has	Loomis, Sayles &	Company, LP	Illowing elements for ecurity does not exist payments.	rPN2RX3UMN0YID13** ment Analysis Of r each self-design t or an NAIC CRI	fice been nated 5GI credit ra	Registered With Securities Exchange Commission followed? security: ting for an FE or PL	Yes	Mana Agre (IMA NO	gement eement a) Filed
18.2	Depository Number  105377  Have all the filing requ If no, list exceptions:  By self-designating 5G a. Documentation security is not a b. Issuer or obligo c. The insurer has Has the reporting entit  By self-designating PL a. The security wa b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	Loomis, Sayles & Loomis, Sayles & Loomis, Sayles & Loomis, Sayles & Loomis, the Purious and th	poses and Procedures Manual porting entity is certifying the folit a full credit analysis of the secontracted interest and principal ion of ultimate payment of all cGI securities?	Illowing elements for ecurity does not exist payments. Contracted interest a contracted	reach self-design to ran NAIC CRI and principal.  of each self-design to ran NAIC CRI and principal.  of each self-design ted for the securing its legal capacit tate insurance rehe SVO.	fice been  nated 5GI  credit ra  nated PL0  ty.  y as a NR gulators.	Registered With Securities Exchange Commission followed? security: ting for an FE or PL GI security:	Yes	Mana Agre (IMA NO	gement sement (s) Filed (s) Filed (s) No [ ]
19.	Depository Number  105377  Have all the filing requiff no, list exceptions:  By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has the reporting entit By self-designating PL a. The security was b. The reporting er c. The NAIC Designon a current privid. The reporting er Has the reporting entit By assigning FE to a SFE fund: a. The shares were b. The reporting er c. The security hac January 1, 2019 d. The fund only or e. The current reporting tends on the fund only or e. The current reporting tends of the current reporting in its legal capacity.	Loomis, Sayles &	poses and Procedures Manual porting entity is certifying the folit a full credit analysis of the secontracted interest and principal ion of ultimate payment of all cogl securities?  Peporting entity is certifying the folian payment of all cogling entity is certifying the folian payment of all cogling entity is certifying the folian payment of the pa	Illowing elements for ecurity does not exist payments. Contracted interest a following elements of the payments of the payment	reach self-design to ran NAIC CRI and principal.  of each self-design to ran NAIC CRI and principal.  of each self-design ted for the securing its legal capacitate insurance rehe SVO.  ing the following of the securing the sec	fice been fated 5GI credit ra nated PL0 ty. y as a NR gulators. elements of	Registered With Secur it i es Exchange Commission  followed?  security: ting for an FE or PL  GI security: SRO which is shown  of each self-designated  as an NRSRO prior to	Yes	Mana Agre (IMA NO	gement sement (x) Filed (x

#### **GENERAL INTERROGATORIES**

#### PART 2 - HEALTH

#### Operating Percentages:

	1.1 A&H loss percent		86.9 %
	1.2 A&H cost containment percent		2.3 %
	1.3 A&H expense percent excluding cost containment expenses		13.2 %
2.1	Do you act as a custodian for health savings accounts?		Yes [ ] No [ X ]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	.\$	
2.3	Do you act as an administrator for health savings accounts?		Yes [ ] No [ X ]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	.\$	
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [ ] No [ X ]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [ ] No [ X ]

Showing All Nev	/ Paineurance	Treaties - Current	Vear to Date
SHOWING All NEV	v Reilisulalice	riealles - Guireill	Teal to Date

		Showing All New Reinsura	ince Treaties	- Current Yea	ar to Date			
1	2	3 4	5	6	7	8	9 Certified	10 Effective Date of
NAIC Company	ID Normalia a sa	Effective Name of Brigary	Domiciliary	Type of Reinsurance	Type of Business	Top of Delegance	Reinsurer Rating	Certified Reinsurer
Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Ceded	Type of Reinsurer	(1 through 6)	Rating
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### **SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

		1	Curre	nt Year to Da	ate - Allocate		and Territorie rect Business O				
	States, etc.	Active Status (a)	2 Accident and Health Premiums	3  Medicare Title XVIII	4  Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1.	Alabama AL	N								0	
2.	Alaska AK	N								0	
3.	Arizona AZ	N								0	
4.	Arkansas AR	N								0	
5.	California CA	N								0	
6.	Colorado CO Connecticut CT	N								0	
7. 8.	Connecticut CT Delaware DE	N								0 0	
9.	District of Columbia DC	N.								0	
10.	Florida FL	N.								0	
	Georgia GA	N.								0	
12.	Hawaii HI	N.								0	
13.	Idaho ID	N								0	
14.	Illinois IL	N								0	
15.	Indiana IN	N								0	
16.	lowa IA	N								0	
17.	Kansas KS	N	ļ				ļ		ļ	0	
18.	Kentucky KY	N.								0	
19.	Louisiana LA	N	·							0	
20.	Maine ME	L		40,452,553						40,452,553	
	Maryland MD	N	·							0	
22. 23.	Massachusetts MA	N	·				l		l	0 0	
23. 24.	Michigan MI Minnesota MN	N								0	
25.	Mississippi MS	NN.								0	
26.	Missouri MO	N								0	
27.	Montana MT	N								0	
28.	Nebraska NE	N.								0	
29.	Nevada NV	N								0	
	New Hampshire NH	N								0	
31.	New Jersey NJ	N								0	
32.	New Mexico NM	N								0	
33.	New York NY	N								0	
34.	North Carolina NC	N								0	
35.	North Dakota ND	N								0	
36.	Ohio OH	N								0	
37.	Oklahoma OK	N								0	
38.	Oregon OR	N.								0	
39.	Pennsylvania PA	N								0	
40.	Rhode Island RI	N								0	
41.	South Carolina SC	N								0	
42.	South Dakota SD	N								0	
43.	Tennessee TN Texas TX	N								0	
44. 45.	Utah UT	N N								0 0	
46.	Vermont VT	N.								0	
47.	Virginia VA	N								0	
	Washington WA	N								0	
49.	West Virginia WV	N								0	
50.	Wisconsin WI	N								0	
51.	Wyoming WY	N.								0	
52.	American Samoa AS	N	ļ							0	
53.	Guam GU	N								0	
54.	Puerto Rico PR	N								0	
	U.S. Virgin Islands VI	N								0	
56.	Northern Mariana	N						Ì		0	
57.	Islands MP Canada CAN	N								0	
57. 58.	Aggregate Other	N									
55.	Aliens OT	XXX	0	0	0	0	0	0	0	0	0
59.	Subtotal	XXX	0	40,452,553	0	0	0	0	0	40,452,553	0
60.	Reporting Entity										
	Contributions for Employee										
61.	Benefit Plans Totals (Direct Business)	XXX	0	40,452,553	0	0	0	0	0	40,452,553	0
01.	DETAILS OF WRITE-INS	^^^	U	TU, YUZ, JUJ	U	U	U	U	U	70,402,000	U
58001.		XXX	<u> </u>								
58002.		XXX									
58003.		XXX									
58998.	Summary of remaining										
	write-ins for Line 58 from	XXX	0	0	0	0	0	0	0	0	0
	overflow page Totals (Lines 58001 through		†	u	U	υ	U	u	U		
58999			1				i	1	i e	I	ĺ
58999.	58003 plus 58998)(Line 58	XXX	0	0	0	0	0	0	0	0	0

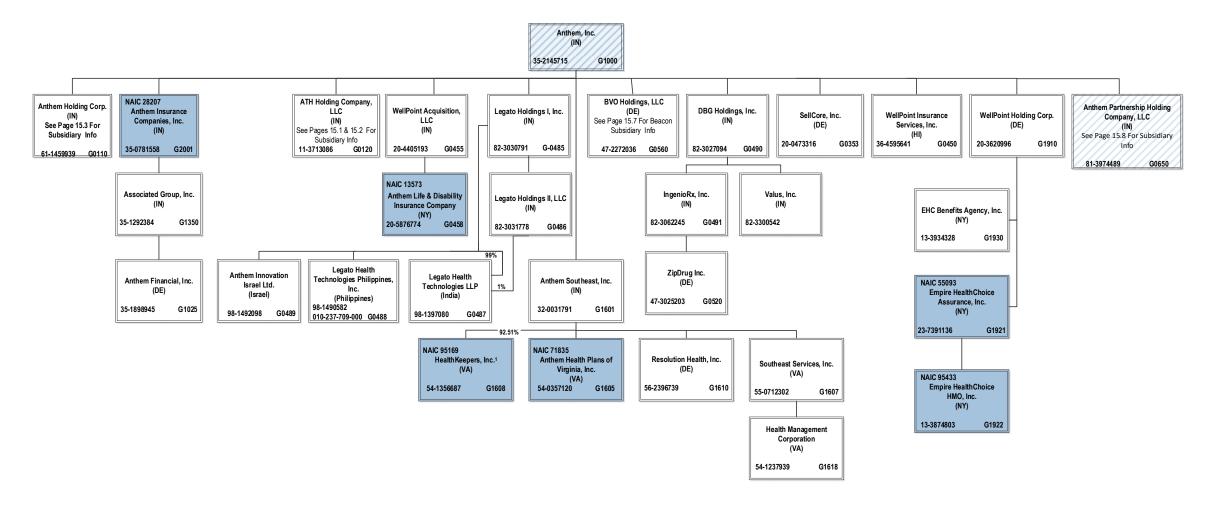
a) Active Status Counts:	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG1	R - Registered - Non-domiciled RRGs0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer0
N - None of the above - Not allowed to write business in the state	

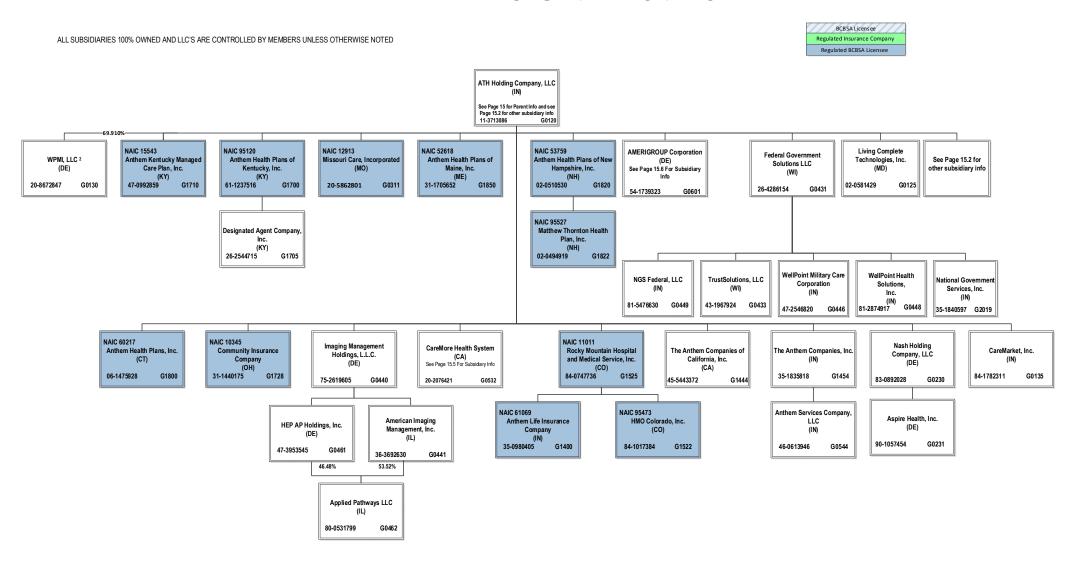
BCBSA Licensee

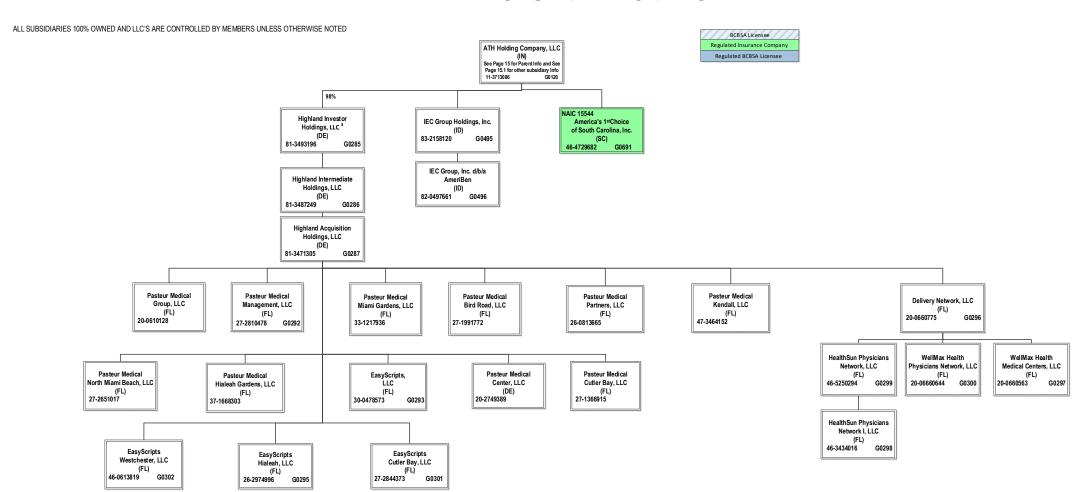
Regulated Insurance Company

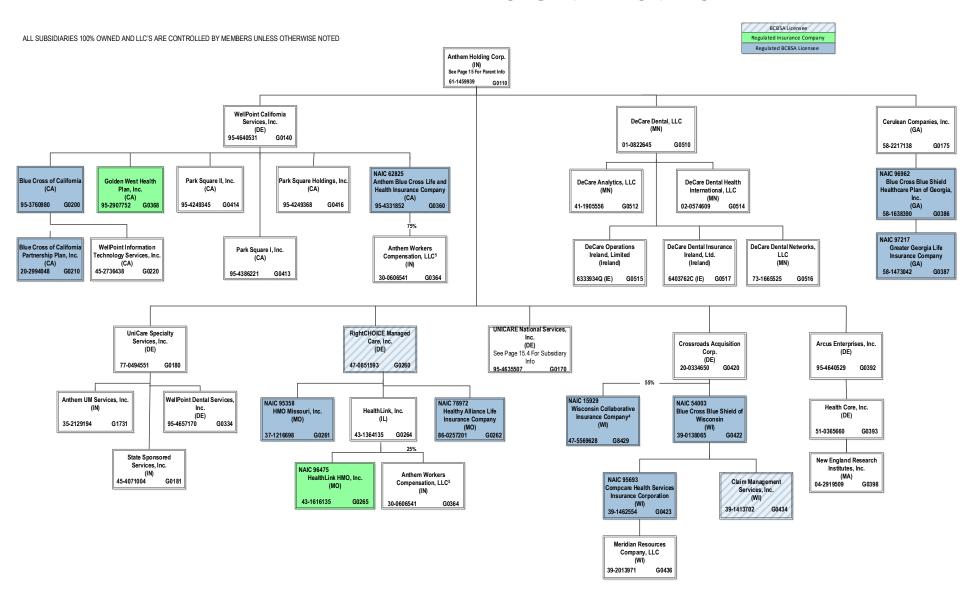
Regulated BCBSA Licensee

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



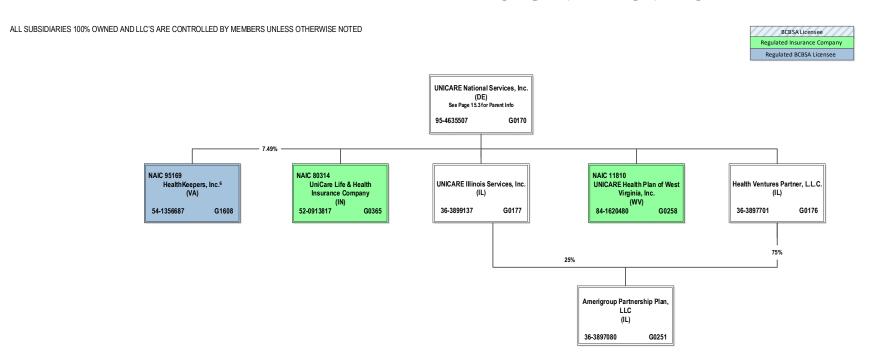






<sup>&</sup>lt;sup>4</sup> 45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate). Not consolidated for accounting purposes.

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



<sup>&</sup>lt;sup>6</sup> HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

### 15.5

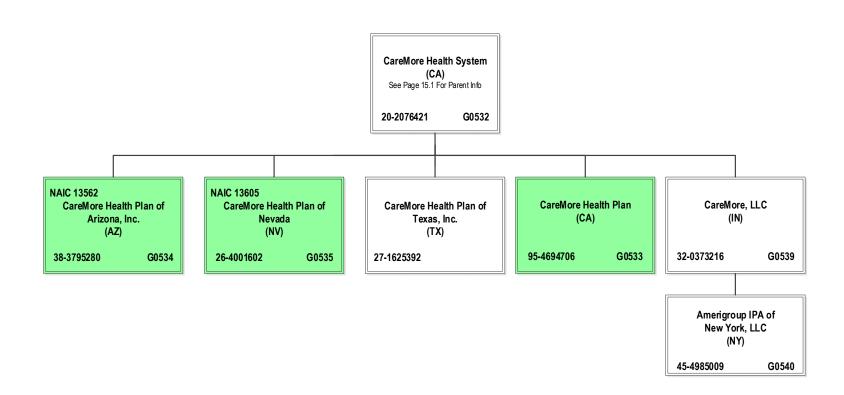
## SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

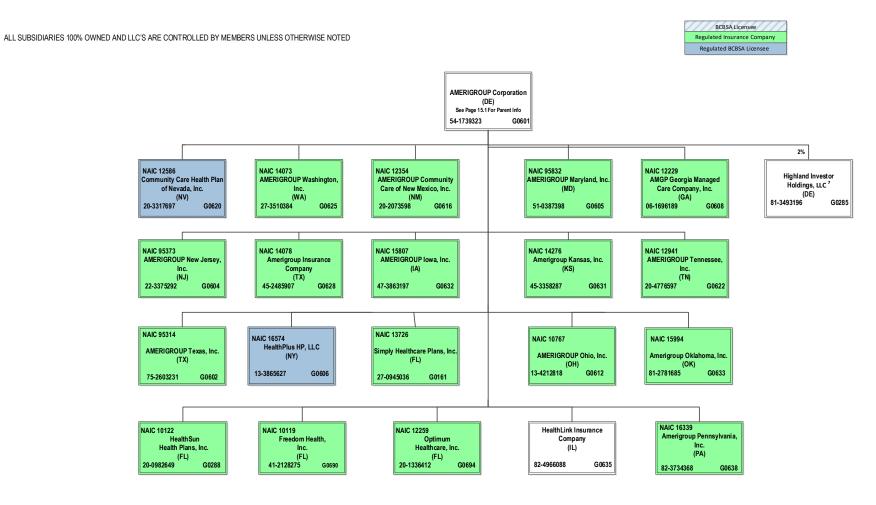
BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee

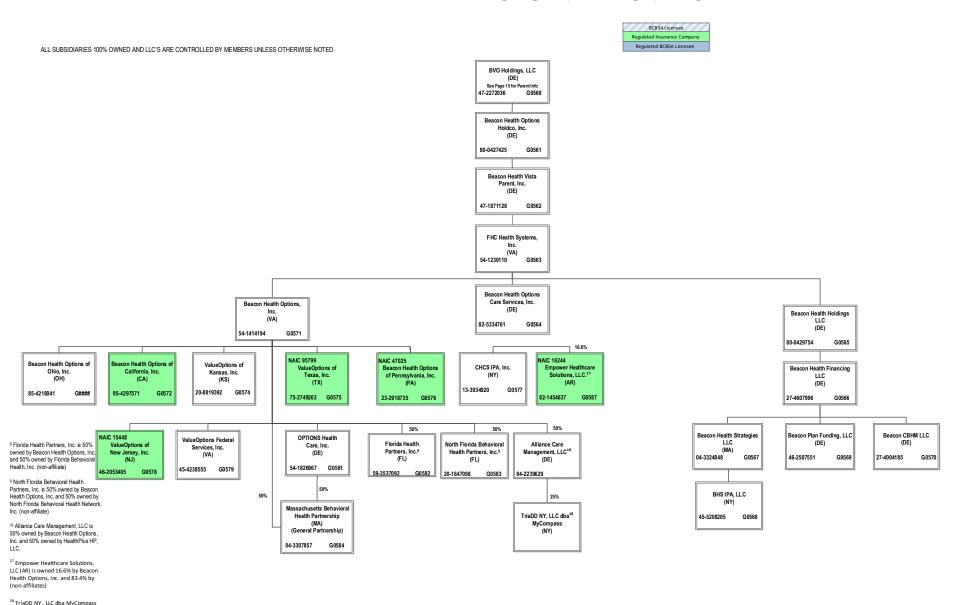
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED





 $<sup>^7</sup>$  Amerigroup Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

(NY) is owned 25% by Alliance care management, LLC and 75% by non-

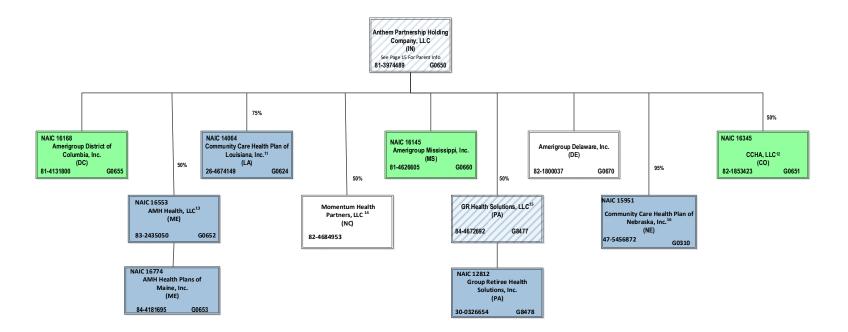


BCB SA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee

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



- 13 AMH Health, LLC is a joint venture 50% owned by MaineHealth (non-affiliate) and 50% owned by Anthem Partnership Holding Company, LLC
- 14 Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)
- 15 GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)
- se Anthem Partnership Holding Company, LLC holds a 95% interest in Community Care Health Plan of Nebraska, Inc., and Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate) holds the remaining 5%

<sup>&</sup>lt;sup>11</sup> Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana, Onon-affiliate)

<sup>&</sup>lt;sup>12</sup> CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)

### SCHEDULE Y

					PA	$\mathbf{R} \mathbf{I} \mathbf{I}$	A - DE I AI	L OF INSURANCE	· <b>C</b>	JULL	ING COMPANT	SISIEW				
1		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
· ·		_	Ŭ	•		Ů	•		Ů	. •		Type	If			
												of Control	Control			
															Is an	
										5		(Ownership,	is			
							Name of Securities			Relation-		Board,	Owner-		SCA	
							Exchange		Domi-	ship		Management,	ship		Filing	
			NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group			Company	ID	Federal		(U.Š. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	/ L
Code		Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	
.0671	Anthem. I		0000	84-2239629		0001156039	terriationaly	Alliance Care Management, LLC	DE	NIA	Beacon Health Options. Inc.	Ownership	50.000	Anthem. Inc.	N	+ + +
0671		nc.		84-2239629		0001156039		Alliance Care Management, LLC	DE	NIA	HealthPlus HP. LLC	Ownership	50.000	Anthem. Inc.	N N	
0671		nc.		36-3692630		0001156039		American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.	N	
9071	AITTIOII, I			00 0002000		0001100000		America's 1st Choice of South Carolina, Inc.			I maging management nordings, E.E.O.	owner sirrp.	100.000	Arthem, me.		
0671	Anthem, I	no.	15544	46-4729682		0001156039		America's 1st onotice of South Carofflia, file.	SC	IA	ATH Holding Company, LLC	Ownership	100,000	Anthem. Inc.	N	
0071	AITTHEII, I	iic	10044	40-4/23002		0001130039		AMERIGROUP Community Care of New Mexico, Inc.	30	IA	ATH HOTOTHY COMPANY, LLC	owner sirrp	100.000	Anthell, mc.	N	
0671	Anthem. I		12354	20-2073598		0001156039		AMERICACOP Community care of New Mexico, Inc.	N. 11	1.4	AMERIGROUP Corporation	Ownership	100,000	Anthem. Inc.	N	
0671		nc.	12354	54-1739323		0001156039		AMERIGROUP Corporation	NM	IA			100.000	Anthem Inc	N N	
									DE		ATH Holding Company, LLC	Ownership				
0671		nc	10100	82-1800037	-	0001156039		AMERIGROUP Delaware, Inc.	DE	NIA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671		nc		81-4131800		0001156039		Amerigroup District of Columbia, Inc.	DC	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671		nc.	14078	45-2485907		0001156039		Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671		nc		47-3863197		0001156039		AMERIGROUP Iowa, Inc.	IA	IA	AMERIGROUP Corporation	Ownership	100.000	. Anthem, Inc.	N	
0671		nc		45-4985009		0001156039		Amerigroup IPA of New York, LLC	NY	NI A	CareMore, LLC	Owner ship	100.000	. Anthem, Inc.	N	
0671	Anthem, I		14276	45-3358287		0001156039		Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership	100.000	. Anthem, Inc.	N	
0671		nc	95832	51-0387398		0001156039		AMERIGROUP Maryland, Inc.	MD		AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671		nc	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	MS	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	. Anthem, Inc.	N	
0671		nc	95373	22-3375292		0001156039		AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, I	nc	10767	13-4212818		0001156039		AMERIGROUP Ohio, Inc.	OH	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671		nc	15994	81-2781685		0001156039		AMERIGROUP Oklahoma, Inc.	OK	IA	AMERIGROUP Corporation	Ownership	100.000	. Anthem, Inc.	N	
0671	Anthem, I	nc		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	Health Ventures Partner, L.L.C.	Owner ship	75.000	Anthem, Inc.	N	
0671	Anthem, I	nc		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	UNICARE Illinois Services, Inc.	Owner ship.	25.000	Anthem, Inc.	N	]!
0671	Anthem, I	nc.	16339	82-3734368		0001156039		Amerigroup Pennsylvania, Inc.	PA	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem, Inc.	N	]!
0671	Anthem. I	nc	12941	20-4776597		0001156039		AMERIGROUP Tennessee, Inc.	TN	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem. Inc.	N	!
0671	Anthem. I	nc.	95314	75-2603231		0001156039		AMERIGROUP Texas. Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem. I	nc.	14073	27-3510384		0001156039		AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation	Ownership.	9.000	Anthem, Inc.	N	
.0671		nc.		06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	GA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N.	1
0671		nc.	16553	83-2435050		0001156039		AMH Health, LLC	ME	RE	Anthem Partnership Holding Company, LLC	Ownership.	50.000	Anthem. Inc.	N	0102
.0671	Anthem. I		16774	84-4181695		0001156039		AMH Health Plans of Maine. Inc.	ME	DS.	AMH Health, LLC	Ownership	100.000	Anthem. Inc.	N	
	7411(110111, 1							Anthem Blue Cross Life and Health Insurance			/www.rourtii, EEO	omici dirip.	100.000	, raterioni, inio.		
0671	Anthem. I	nc	62825	95-4331852		0001156039		Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem I		02023	35-1898945		0001156039		Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Owner ship.	100.000	Anthem Inc	N N	
0671	, ,	nc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671		nc.		31-1705652	1	0001156039		Anthem Health Plans of Maine, Inc.	NE		ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N N	-1
0671				02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc	NE	IA IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N N	
0671	Anther '	nc.	71835	54-0357120	40003317	0001156039			VA	IA IA	Anthem Southeast, Inc.	Ownership.	100.000	Anthem. Inc.	N N	
		nc.	60217	06-1475928	. 4000331/	0001156039		Anthem Health Plans of Virginia, Inc.	VA CT	IA IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N N	
				61-1459939	-			Anthem Health Plans, Inc.								
0671	Anthem, I	nc		o i=1459939		0001156039	N. V. I OI I F. I	Anthem Holding Corp.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
	l						New York Stock Exchange									
0671	Anthem, I			35-2145715		0001156039	(NYSE)	Anthem, Inc.	IN	UIP				Anthem, Inc.	N	
0671	Anthem, I		28207	98-1492098		0001156039		Anthem Innovation Israel Ltd	ISR	NI A	Legato Holdings I, Inc.	Owner ship	100.000	. Anthem, Inc.	N	
0671		nc		35-0781558		0001156039		Anthem Insurance Companies, Inc.	IN	IA	Anthem, Inc.	Owner ship.	100.000	Anthem, Inc.	N	
0671		nc	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc	KY		ATH Holding Company, LLC	Owner ship	100.000	. Anthem, Inc.	N	
0671	Anthem, I	nc	13573	20-5876774		0001156039		Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Ownership	100.000	. Anthem, Inc.	N	
				l	1	Ì					Rocky Mountain Hospital and Medical					
0671	Anthem, I	nc	61069	35-0980405		0001156039		Anthem Life Insurance Company	IN	IA	Service, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671		nc		81-3974489	.	0001156039		Anthem Partnership Holding Company, LLC	DE	UDP	Anthem, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem, I	nc.		46-0613946		0001156039		Anthem Services Company, LLC	IN	NIA	The Anthem Companies, Inc.	Ownership.	100.000	Anthem, Inc.	N.	
0671		nc.		32-0031791		0001156039		Anthem Southeast, Inc.	IN	NIA	Anthem. Inc.	Owner ship.	100.000	Anthem, Inc.	N	
0671	Anthem. I	nc.	l	35-2129194	1	0001156039		Anthem UM Services, Inc.	IN		UNICARE Specialty Services, Inc.	Owner ship.	100.000	Anthem. Inc.	N	1
								200110001 11101			Anthem Blue Cross Life and Health Insurance			, , , , , , , , , , , , , , , , , , , ,		1
0671	Anthem. I	nc	I	30-0606541	1	0001156039		Anthem Workers' Compensation, LLC	IN	NIA	Company	Ownership	75.000	Anthem. Inc.	N	0109
0671		nc		30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NIA	HealthLink, Inc.	Ownership	25.000	Anthem Inc	N N	0109
0671	, ,	nc.		80-0531799		0001156039		Applied Pathways, LLC	IL		American Imaging Management, Inc.	Owner Ship	53.520	Anthem, Inc.	N.	0109
0671	Anthem, I		l	80-0531799	1	0001156039		Applied Pathways, LLC	IL	NIA	HEP AP Holdings, Inc.	Owner ship.	46.480	Anthem, Inc.	N N	0108
I /0U	ATTURENT, I	IIG		00-0001189		Benoei I non		Applieu ratiiways, LLC	IL	NIA	INCL. WE UNIGHINGS, THE.	Owner Strip	40.400	. AITTHEII, THE.	IN	0 1 0

### SCHEDULE Y

The Court								L OF INSURANC	'L I	IOLL	IIIO COMI ANI	SISILIVI				
Name of Securities	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Company   Comp												Type	lf			
Company   Comp												of Control	Control			
NAME															Is an	
Part   Code							Name of Securities			Relation-						
Process									Domi-							
Company   Comp			NAIC					Names of								
Cool	Group			ID	Federal						Directly Controlled by			Liltimate Controlling		,
1971   Wilder   10		Group Name				CIK										*
507   1979   1			Couc		ROOD		international)								N N	+
OFF   New   Pr.															N	
Section   Company   Comp											Anthem Insurance Companies Inc					
Section   Color   Perform   Color   Color   Color   Color   Perform   Color   Color		Anthem. Inc.				0001156039				NIA		Ownership.	100.000	Anthem. Inc.		
1.077   White, 100   1		Anthem, Inc.		27-4004185		0001156039				NIA	Beacon Health Financing LLC	Owner ship.	100.000	Anthem, Inc.	N	
Description	0671	Anthem, Inc.								NIA	Beacon Health Holdings, LLC	Ownership	100.000	Anthem, Inc.		
Section   Sect																
Section   Part   Part				82-5334761												
April   Color   Colo			47005													0101
Anthony   Co.			4/025													
Color   Colo																
Anthony   Co.																
Soft   Californ   Ca																
Anthere.   Inc.																
Beff   Settler   Inc.											Beacon Health Financing LLC					1
Anthon   Inc.																
Anthon   Inc.   Section   Section		,						Blue Cross Blue Shield Healthcare Plan of						,		
Arthur, Inc.	0671	Anthem, Inc.								IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
Bits Cross of California Partmership Plan,   C.   A.   A.   Bits Cross of California   Discretify   Discret			54003													
Anthers   100   Anthers   10	0671	Anthem, Inc.		95-3760980		0001156039			CA		WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	N	0101
Asthorn, Inc.   47-272036   000156099   930 biolings, LLC   E. M.A. Asthorn, Inc.   000-reship   100,000   Asthorn, Inc.   M. N.																
Arther, Inc.																0101
Anthen, Inc.														/artion,		
Arthen,   nc.																0101
Arthon, Inc.   3,585   3-4001962   000115039   021-96052   000115039   021-96052   000115039   021-96052   000115039   021-96053   021-9			13562													0 10 1
Anthen, Inc.   27-865922   0001196099   Carellore Heal Ith Plan of Texas, Inc.   TX   NIA   Carellore Heal Ith System   Unmership   100.000   Anthen, Inc.   N.																
Anthen   Inc.				27-1625392				CareMore Health Plan of Texas. Inc.								1
Anthen Inc		Anthem, Inc.				0001156039			IN	NIA	CareMore Health System	Ownership.	100.000	Anthem, Inc.		.]
D671   Anthem   Inc.   1645   82-165423   0001156039   001156039								CareMore Health System		NIA						
D671																
OF71   Anthem, Inc.   O001156039   OF72   PA, Inc.   NV   NIA   Beacon Health Options, Inc.   Ownership,   100,000   Anthem, Inc.   N.   O104   Ownership,   100,000   Anthem, Inc.   N.   Ownership,   100,000   Anthem, Inc.   N.   O104   Ownership,   100,000   Anthem, Inc.   N.   Ow								Claim Management Services, Inc.								
			16345	82-1853423												0102
1,0671   Anthem, Inc.   1,4064   28-4674149   0001156039   Community Care Heal th Plan of Nebraska, Inc.   I.A.   Anthem Partnership Holding Company, LLC   Ownership,   75,000   Anthem, Inc.   N.   0.104   0.0671   Anthem, Inc.   1,2586   20-3317697   0001156039   Community Care Heal th Plan of Nevada, Inc.   N.   I.A.   Anthem Partnership Holding Company, LLC   Ownership,   95,000   Anthem, Inc.   N.   0.106   0.0671   Anthem, Inc.   1,0345   31-44075   0.001156039   Community Insurance Company   O.   I.A.   Anthem Partnership Holding Company, LLC   Ownership,   100,000   Anthem, Inc.   N.   0.001156039   Community Insurance Company   O.   I.A.   ATH Holding Company, LLC   Ownership,   100,000   Anthem, Inc.   N.   0.0671   Anthem, Inc.   9,6693   39-462554   0.001156039   Corporation   Ownership,   0.001156039   Corporation   Ownership,   0.001156039   Ownership,   0.0000   Ownership,	0671	Anthem, Inc.				0001156039			NY	NIA	Beacon Health Options, Inc.	Owner ship	100.000	Anthem, Inc.	N	
D671	0674	Anthon Inc	14064	26 4674440		0001156000		Community care mealth Plan of Louislana, Inc.	LA	1.4	Anthom Portnership Helding Commence 110	Ownership	7F 000	Anthom Inc	A1	0104
D671								Community Caro Hoalth Dlan of Nahrooks Inc			Anthem Partnership Holding Company, LLC					
D671																0110
Compare Health Services Insurance   Compare Health Services Insurance   Comporation   N.																
D671				]							g vompany; ===					
DBG Holdings, Inc.   IN. NIA.   Anthem, Inc.   Ownership.   100.000   Anthem, Inc.   N.		Anthem, Inc.	95693					Corporation		IA		Owner ship				
.0671	0671	Anthem, Inc.				0001156039		Crossroads Acquisition Corp.		NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
Decare Dental Health International, LLC   MN   NIA   Decare Dental, LLC   Ownership.   100.000   Anthem, Inc.   N   Decare Dental   LLC   Ownership.   100.000   Anthem, Inc.   N   Decare D																
.0671																
DeCare Dental Networks, LLC				02-0574609												
.0671				70 1005505												
Decare Operations Ireland, Limited   IRL   NIA   Decare Dental   LLC   Ownership   100.000   Anthem, Inc   N   NIA   N																
.0671         Anthem, Inc.         20-0660775         0001156039         Delivery Network, LLC         FL         NIA         Highland Acquisition Holdings, LLC         0wnership.         100.000         Anthem, Inc.         100.000         Anthem, Inc.         N           .0671         Anthem, Inc.         26-2544715         0001156039         Designated Agent Company, Inc.         KY         NIA         Anthem Health Plans of Kentucky, Inc.         0wnership.         100.000         Anthem, Inc.         N           .0671         Anthem, Inc.         27-2844373         0001156039         EasyScripts Cutler Bay, LLC         FL         NIA         Highland Acquisition Holdings, LLC         Ownership.         100.000         Anthem, Inc.         N				01-0022040												
.0671 Anthem, Inc. 26-2544715 0001156039 Designated Agent Company, Inc. KY. NIA Anthem Health Plans of Kentucky, Inc. Ownership				20-0660775												
0671Anthem, Inc				26-2544715												
				27-2844373												
1	0671	Anthem, Inc.		26-2974996		0001156039		EasyScripts Hialeah, LLC		NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	

### SCHEDULE Y

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						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.		. 30-0478573		0001156039		EasyScripts LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 46-0613819		0001156039		EasyScripts Westchester, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 13-3934328		0001156039		EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 23-7391136		0001156039		Empire HealthChoice Assurance, Inc	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		13–3874803		0001156039		Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16244	. 82-1454637		0001156039		Empower Healthcare Solutions, LLC	AR	IA	Beacon Health Options, Inc.	Owner ship	16.600	Anthem, Inc.	N	0115
0671	Anthem, Inc.		. 26-4286154		0001156039		Federal Government Solutions, LLC	WI	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 54-1230110		0001156039		FHC Health Systems, Inc.	VA	NIA	Beacon Health Vista Parent, Inc	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 59-3537092		0001156039		Florida Health Partners, Inc.	FL	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0112
0671	Anthem, Inc.		. 41-2128275		0001156039		Freedom Health, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		33-0884790		0001156039		GeriNet Physician Services, Inc.	CA	NIA	CareMore Health System	Owner ship	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.		. 95-2907752		0001156039		Golden West Health Plan, Inc.	CA	IA	WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.	.	84-4672692		0001156039		GR Health Solutions LLC	PA	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
										Blue Cross Blue Shield Healthcare Plan of					
0671	Anthem, Inc.	97217	58-1473042		0001156039		Greater Georgia Life Insurance Company	GA	IA	Georgia, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12812	30-0326654		0001156039		Group Retiree Health Solutions, Inc	PA	IA	GR Health Solutions LLC	Ownership	100.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.		. 51-0365660		0001156039		Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 54-1237939		0001156039		Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 36-3897701		0001156039		Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		54–1356687		0001156039		HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54–1356687		0001156039		HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.	N	
0671	Anthem, Inc.	96475	. 43–1616135		0001156039		HealthLink HMO, Inc.	MO	IA	HealthLink, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 43-1364135		0001156039		HealthLink, Inc.	IL	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 82-4966088		0001156039		HealthLink Insurance Company	IL	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		13–3865627		0001156039		HealthPlus HP, LLC	NY	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	0100
0671	Anthem, Inc.		20-0982649		0001156039		HealthSun Health Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		. 46-5250294		0001156039		HealthSun Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 46-3434016		0001156039		HealthSun Physicians Network I, LLC	FL	NIA	HealthSun Physicians Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	78972	86-0257201		0001156039		Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-3953545		0001156039		HEP AP Holdings, Inc.	DE	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		. 81–3487249		0001156039		Highland Acquisition Holdings, LLC	. DE	NIA	Highland Intermediate Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3471305		0001156039		Highland Intermediate Holdings, LLC	DE	NIA	Highland Investor Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	ATH Holding Company, LLC	Owner ship	98.000	Anthem, Inc.		0107
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	AMERIGROUP Corporation	Owner ship.	2.000	Anthem, Inc.	N	0107
0074		95473	04 4047004		0004450000		1840 0 1 1 1		1.4	Rocky Mountain Hospital and Medical		400.000	Anthem. Inc.		
0671	Anthem, Inc.		84-1017384		0001156039		HMO Colorado, Inc.		IA	Service, Inc.	Owner ship.	100.000		N	
0671	Anthem, Inc.		. 37-1216698		0001156039		HMO Missouri, Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Owner ship	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.	-	82-2157122		0001156039		IEC Group Holdings, Inc.	ID	NIA	ATH Holding Company, LLC	Owner ship	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.		. 82-0497661		0001156039		IEC Group, Inc. d/b/a AmeriBen	ID	NIA	IEC Group Holdings, Inc.	Owner ship	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.		. 75-2619605		0001156039		Imaging Management Holdings, L.L.C.	DE	NIA	ATH Holding Company, LLC	Owner ship	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.		. 82-3062245		0001156039		IngenioRX, Inc.	IN	NIA	DBG Holdings, Inc.	Owner ship.	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.		. 98-1397080		0001156039		Legato Health Technologies LLP	IN	NIA	Legato Holdings I, Inc	Ownership	100.000	Anthem, Inc.	N	0105
007.		1	00 4400500		0004450000		Legato Health Technologies Philippines, Inc.		A17.5			400 000	l	l	0.100
.0671	Anthem, Inc.		. 98-1490582		0001156039			PHL	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	0106
.0671	Anthem, Inc.		. 82-3030791		0001156039		Legato Holdings I, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.	-	. 82-3031178		0001156039		Legato Holdings II, LLC	IN	NIA	Legato Holdings I, Inc.	Owner ship	100.000	Anthem, Inc.	N	
.0671	Anthem, Inc.		. 02-0581429		0001156039		Living Complete Technologies, Inc.	MD	NIA	ATH Holding Company, LLC	Owner ship.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	Beacon Health Options, Inc.	Owner ship	50.000	Anthem, Inc.		0111
.0671	Anthem, Inc.		. 04–3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	OPTIONS Health Care, Inc.	Ownership	50.000	Anthem, Inc.	N	0111
0074	A-Ab I	05507	00 0404040		0004450000		Notable Thomas Houlds Blog In	ALL .	1.4	Anthem Health Plans of New Hampshire, Inc.	0	100.000	A-About Inc	N	
0671	Anthem, Inc.		02-0494919		0001156039		Matthew Thornton Health Plan, Inc.	NH	IA	0	Ownership	100.000	Anthem, Inc.	N	
0674	Anthon Inc	1	39-2013971		0001156039		Maridian Bassuras Company 110	w.	NIA	Composare Health Services Insurance	Ownership	100.000	Anthem. Inc.	N	
	Anthem, Inc.	10010	20-5862801				Meridian Resource Company, LLC			Corporation				N N	
0671	Anthem, Inc.	12913	20-5862801	.1	0001156039	I	Missouri Care, Incorporated	MO	lIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	IN	

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						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)		Entity(ies)/Person(s)	(Y/N)	*
		Code		RSSD		international)						tage		(Y/N)	0400
0671	Anthem, Inc.		. 82-4684953		0001156039		Momentum Health Partners, LLC	NC	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671 0671	Anthem, Inc.		. 83-0892028 35-1840597		0001156039 0001156039		Nash Holding Company, LLC	DE	NIA NIA	ATH Holding Company, LLCFederal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.		. 04-2919509		0001156039		National Government Services, Inc.	MA	NIA	Health Core. Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		81-5476630		0001156039		NGS Federal, LLC	MA	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	NN	
0071	Anthem, Inc.		. 01-04/0030		0001130039		North Florida Behavioral Health Partners,	IIV	NIA	rederal Government Solutions, LLC	owner snrp		Anthem, Inc.	N	
0671	Anthem. Inc.		20-1847098		0001156039		Inc.	FL	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem. Inc.	N	0113
0671	Anthem. Inc.	12259	20-1336412		0001156039		Optimum Healthcare, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.	N	0110
0671	Anthem, Inc.	12203	54-1826967		0001156039		OPTIONS Health Care, Inc.	DE	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem Inc	NN.	
0671	Anthem, Inc.		95-4249368		0001156039		Park Square Holdings, Inc.		NIA	WellPoint California Services, Inc.	Owner ship	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		95-4386221		0001156039		Park Square I, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		95-4249345		0001156039		Park Square II. Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem. Inc.		1
0671	Anthem. Inc.		27-1991772		0001156039		Pasteur Medical Bird Road, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Owner ship.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-2749389		0001156039		Pasteur Medical Center, LLC	DE	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		27-1366915		0001156039		Pasteur Medical Cutler Bay, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		20-0610128		0001156039		Pasteur Medical Group, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem. Inc.		
0671	Anthem. Inc.		37-1668303		0001156039		Pasteur Medical Hialeah Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		47-3464152		0001156039		Pasteur Medical Kendall, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		27-2810478		0001156039		Pasteur Medical Management, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		33-1217936		0001156039		Pasteur Medical Miami Gardens, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		27-2651017		0001156039		Pasteur Medical North Miami Beach, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		26-0813665		0001156039		Pasteur Medical Partners, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 56-2396739		0001156039		Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 47-0851593		0001156039		RightCHOICE Managed Care, Inc.	DE	NIA	Anthem Holding Corp.	Owner ship	100.000	Anthem, Inc.	N	
							Rocky Mountain Hospital and Medical Service,								
0671	Anthem, Inc.	11011	84-0747736		0001156039		Inc	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 20-0473316		0001156039		SellCore, Inc.	DE	NI A	Anthem, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	13726	27-0945036		0001156039		Simply Healthcare Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 55-0712302		0001156039		Southeast Services, Inc.	VA	NI A	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 45-4071004		0001156039		State Sponsored Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Owner ship	100.000	Anthem, Inc.		
0671	Anthem, Inc.		. 35-1835818		0001156039		The Anthem Companies, Inc.	IN	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 45-5443372		0001156039		The Anthem Companies of California, Inc	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.				0001156039		TriaDD NY, LLC dba MyCompass	NY	NI A	Alliance Care Management, LLC	Owner ship	25.000	Anthem, Inc.	N	0117
0671	Anthem, Inc.		43-1967924		0001156039		TrustSolutions, LLC	WI	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	11810	84-1620480		0001156039		UNICARE Health Plan of West Virginia, Inc	WV	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	80314	36-3899137		0001156039		UNICARE Illinois Services, Inc.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	80314	52-0913817		0001156039		UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4635507		0001156039		UNICARE National Services, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	·····
0671	Anthem, Inc.		. 77-0494551		0001156039		UNICARE Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 45-4238555		0001156039		ValueOptions Federal Services, Inc.	VA	NI A	Beacon Health Options, Inc.	Owner ship	100.000	Anthem, Inc.	N	·····
0671	Anthem, Inc.	15448	. 20-8819392 46-2053405		0001156039		ValueOptions of Kansas, Inc.	KS	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15448			0001156039 0001156039		ValueOptions of New Jersey, Inc.	NJ	IA	Beacon Health Options, Inc.	Ownership		, , , , , , , , , , , , , , , , , , , ,	N	·····
	Anthem, Inc.	95/99	75-2749263		0001156039		ValueOptions of Texas, Inc.		IA NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	NN	
0671 0671	Anthem, Inc.		. 82-3300542 20-0660563		0001156039		Valus, Inc	IN FL	NIA	DBG Holdings, Inc. Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	NN	·····
0671	Anthem, Inc.		. 20-0660644		0001156039		WellMax Health Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		20-0660644		0001156039		WellPoint Acquisition, LLC	.  FL     N	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	NN.	
0671	Anthem, Inc.		. 95-4640531		0001156039		WellPoint California Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.		95-4657170		0001156039		WellPoint Dental Services, Inc.	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem. Inc.	NN	
0671	Anthem, Inc.		. 81-2874917		0001156039		WellPoint Health Solutions, Inc.	DE	NIA	Federal Government Solutions, LLC	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-3620996		0001156039		WellPoint Holding Corp	DE	NIA	Anthem. Inc.	Owner ship	100.000	Anthem, Inc.	NN	
1 100	Anthon, inc.		20-0020330				WellPoint Information Technology Services,			Anthon, mo.	omici sittp		Anthon, IIIo.		
0671	Anthem, Inc.		45-2736438		0001156039		Inc.	CA	NIA	Blue Cross of California	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		36-4595641		0001156039		WellPoint Insurance Services, Inc.	HI	NIA	Anthem. Inc.	Owner ship	100.000	Anthem, Inc.	N	
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						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group Code		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.		47-2546820		0001156039		WellPoint Military Care Corporation	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	15929	47-5569628		0001156039		Wisconsin Collaborative Insurance Company	WI	IA	Crossroads Acquisition Corp	Owner ship	55.000	Anthem, Inc.	N	0110
0671	Anthem, Inc.		20-8672847		0001156039		WPMI, LLC	DE	NIA	ATH Holding Company, LLC	Owner ship	69.910	Anthem, Inc.	N	0103
0671	Anthem, Inc.		47-3025203		0001156039		ZipDrug Inc.	DE	NIA	IngenioRx, Inc.	Owner ship	100.000	Anthem, Inc.	N	

Asterisk	Explanation
	Insurer is deemed to be an insurance affiliate in column 10 and has an NAIC Company Code in column 3. However, it does not file an NAIC statutory statement because it is requiated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	50% owned by unaffiliated investors
	30.09% owned by unaffiliated investors
	25% owned by an unaffiliated investor
	Legato Health Technologies LLP is a Limited Liability Partnership formed under the laws of India, and is 99% owned by Legato Holdings I, Inc. an Indiana corporation, and 1% owned by Legato Holdings II, LLC, an Indiana Limited Liability Company.
	Legato Health Technologies Philippines, Inc. was incorporated under with the Republic of the Philippines, and is 100% owned by Legato Holdings I, Inc. an Indiana corporation.
	Highland Investor Holding LLC is a Limited Liability Company formed under the laws of Delaware, and is 98% owned by ATH Holding Company, LLC. an Indiana limited liability company, and Amerigroup Corporation holds the remaining 2% interest.
	Applied Pathways, LLC is a Limited Liability Company formed under the laws of Illinois, and is 53.52% owned by American Imaging Management, Inc. an Illinois limited liability company, and 46.48% owned by HEP AP Holdings, Inc., a Delaware corporation.
	Anthem Worker's Compensation, LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.
	45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate) and 55% by Crossroads Acquisition Corp
	Massachusetts Behavioral Health Partnership is a General Partnership formed under the laws of Massachusetts, and is 50% owned by Beacon Health Options, Inc., a Virginia corporation, and 50% owned by OPTIONS Health Care, Inc., a Delaware corporation.
	Florida Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by Florida Behavioral Health, Inc. (non-affiliate)  North Florida Behavioral Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by North Florida Behavioral Health Network, Inc. (non-affiliate)
	75% owned by an unaffiliated investor
	83.4% owned by unaffiliated investors
	5% owned by an unaffiliated investor
	TriaDD NY , LLC dba MyCompass (NY) is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.
0117	Triadu Ni , LLC dua mycompass (Ni) is owned 20% by Arriance vare management, LLC and 70% by Nor-arritrates.

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	Explanation:	
1.		
1.	Bar Code:  Medicare Part D Coverage Supplement [Document Identifier 365]	

## STATEMENT AS OF MARCH 31, 2021 OF THE AMH Health, LLC **OVERFLOW PAGE FOR WRITE-INS**

# NONE

#### **SCHEDULE A - VERIFICATION**

Real Estate

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

#### **SCHEDULE B - VERIFICATION**

Mortgage Loans

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

#### **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	Other Long Term Invested 7 65000	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

#### **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	2,357,740	122,657
2.	Cost of bonds and stocks acquired	35,600,695	2,400,000
3.	Accrual of discount		0
4.	Unrealized valuation increase (decrease)	(29,334)	(161,744)
5.	Total gain (loss) on disposals		0
6.	Deduct consideration for bonds and stocks disposed of		0
7.	Deduct amortization of premium	50,090	3, 173
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	37,879,011	2,357,740
12.	Deduct total nonadmitted amounts		2,238,256
13.	Statement value at end of current period (Line 11 minus Line 12)	37,879,011	119,484

### **SCHEDULE D - PART 1B**

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

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	119,484	5, 109, 495		(6,917)	5,222,062	0	0	119,484
2. NAIC 2 (a)	0	29,891,200	0	(43, 173)	29,848,027	0	0	0
3. NAIC 3 (a)	0				0			0
4. NAIC 4 (a)	0				0			0
5. NAIC 5 (a)	0				0			0
6. NAIC 6 (a)	0				0			0
7. Total Bonds	119,484	35,000,695	0	(50,090)	35,070,089	0	0	119,484
PREFERRED STOCK								
8. NAIC 1	0				0			
9. NAIC 2	0				0			
10. NAIC 3	0				0			
11. NAIC 4	0				0			
12. NAIC 5	0				0			
13. NAIC 6	0				0			
14. Total Preferred Stock	. 0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	119,484	35,000,695	0	(50,090)	35,070,089	0	0	119,484

a	Book/Ad	usted	Carrying	Value	e column	for the	end of	f the c	urrent	reporting	neri	nd inc	dudes	the t	following	amoun	t of sh	ort-tern	n and	cash 6	equivale	ent bon	ds by	/ NAI	C desi	ignatic	'n

Schedule DA - Part 1 - Short-Term Investments

#### NONE

Schedule DA - Verification - Short-Term Investments

#### NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

#### NONE

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

#### NONE

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

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

### NONE

Schedule E - Part 2 - Verification - Cash Equivalents

#### NONE

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

#### NONE

Schedule A - Part 3 - Real Estate Disposed

#### NONE

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

#### NONE

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

#### NONE

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

#### NONE

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

#### NONE

### **SCHEDULE D - PART 3**

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

	_			ong-renn bonds and Stock Acquired buning the Current Quarter					10
1	2	3	4	5	6	/	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreian	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
464287-24-2	ISHARES IBOXX INV GRD CORP BON			WallachBeth	0.000	3,577,183			2.A
464288-63-8	ISHARES INTERMEDIATE TERM CORP			WallachBeth	0.000		0	0	2.B
464288-64-6	ISHARES SHORT TERM CORPORATE B			WallachBeth	0.000	7,664,207	0	0	2.A
	JPMORGAN ULTRA-SHORT INCOME			WallachBeth	0.000	5, 109, 495	0	0	1.G
	SPDR PORTFOLIO SHORT TERM CORP		03/31/2021	WallachBeth	0.000	10,218,972	0	0	2.A
	otal - Bonds - SVO Identified Funds					35,000,695	0	0	XXX
8399997. Total	- Bonds - Part 3					35,000,695	0	0	XXX
8399998. Total	- Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total	- Bonds					35,000,695	0	0	XXX
8999997. Total	- Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total	- Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total	- Preferred Stocks					0	XXX	0	XXX
00176*-10-8	AMH Health Plans of Maine, Inc.		03/31/2021	Capital Contribution		600,000			
9399999. Subto	otal - Common Stocks - Parent, Subsidiaries and Affiliates Other					600,000	XXX	0	XXX
9799997. Total	- Common Stocks - Part 3					600,000	XXX	0	XXX
9799998. Total	- Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total	- Common Stocks					600,000	XXX	0	XXX
9899999. Total	- Preferred and Common Stocks					600,000	XXX	0	XXX
9999999 - Tota	ls					35,600,695	XXX	0	XXX

## Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of **NONE**

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **N O N E** 

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE** 

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

#### **SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1	2	3	4	5	Book Ba	ance at End of Ea	ch Month	9
						uring Current Quar		
			Amount of	Amount of	6	7	8	
			Interest Received					
		Rate of		at Current				
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
101 S. Tryon Street, 19th								
Floor, Charlotte, NC 28255								
Bank of America		0.000	0	0	36.520.435	37.176.483	(866,919)	xxx
4 New York Plaza, 13th	[				, , , , ,	, , ,	,,,,,,	
JP Morgan Chase Floor, New York, NY 10004		0.000	0	0	159,436	159,449	48, 159, 462	XXX
0199998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	36,679,871	37,335,932	47,292,543	XXX
0299998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	36,679,871	37,335,932	47,292,543	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
	ļ							
	[							L
	l	l						
					·····		·	
0599999. Total - Cash	XXX	XXX	0	0	36,679,871	37,335,932	47,292,543	XXX

## Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter NONE