

HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022 OF THE CONDITION AND AFFAIRS OF THE

AMH Health, LLC

	NAIC Group Code	0671 NAIC C	ompany Code	16553_ Employer's	s ID Number 83-243	5050	
Organized under the L	aws of		, St	ate of Domicile or Port of	Entry	ME	
Country of Domicile		U	Inited States of	America			
Licensed as business	type:	Healt	h Maintenance	Organization			
Is HMO Federally Qua	alified? Yes[] No[)	(]					
Incorporated/Organize	ed	11/02/2018		Commenced Business	04	/12/2019	
Statutory Home Office		2 Gannett Drive	,		South Portland, ME, US ()4106	
		(Street and Number)		(City	or Town, State, Country an	d Zip Code)	
Main Administrative O	ffice	4	1425 Corporation				
	Virginia Beach, V	'A, US 23462	(Street and N	umber)	757-473-2737		
	(City or Town, State, Co				(Area Code) (Telephone N	umber)	
Mail Address	4425	Corporation Lane			Virginia Beach, VA, US 2	3462	
	(Street an	d Number or P.O. Box)		(City	or Town, State, Country an	d Zip Code)	
Primary Location of Bo	ooks and Records		220 Virginia				
	Indianapolis, IN	. US 46204	(Street and N	umber)	317-432-6988		
	(City or Town, State, Co				(Area Code) (Telephone N	umber)	
Internet Website Addr	ess	W	ww.elevanceh	ealth.com			
Statutory Statement C	ontact	Leigh Barrett			317-432-698	38	
•		(Name)			(Area Code) (Telepho	ne Number)	
	leigh.barrett@eleva (E-mail Ad				317-488-6200 (FAX Number)		
	person pretary	Albert Graton Swallow # Kathleen Susan Kiefer	OTHE	Assistant Treasurer	-	Edward Scher enneth Noble	
			07000 00	TDU07550	-		
	Aleksey Furman		CTORS OR Cimberly Switlid		Scott	: Douglas Mills	
	ncis George McGinty David Earl Warren		Raul Guillerm	o Smith	Albert	Graton Swallow	
	David Laii Waiieii				_		
State of	Indiana Johnson	SS					
all of the herein descriptions attement, together with condition and affairs of in accordance with the rules or regulations or respectively. Further exact copy (except for to the enclosed statem	ribed assets were the at the related exhibits, sched if the said reporting entity as NAIC Annual Statemer require differences in remore, the scope of this a formatting differences depoted by: **AULH** Swallow** **AULH** Swallow** **AULH** **A	worn, each depose and say tha psolute property of the said rep dules and explanations therein or as of the reporting period state at Instructions and Accounting F sporting not related to account ttestation by the described offic ue to electronic filing) of the end	orting entity, frontained, anne d above, and c Practices and Fring practices ers also include closed stateme	ee and clear from any lie exed or referred to, is a fur fits income and deductic Procedures manual exceptand procedures, according the related correspondint. The electronic filing manded by:	ens or claims thereon, excell and true statement of all to ons therefrom for the period of to the extent that: (1) stating to the best of their infiding electronic filing with the hay be requested by various	ppt as herein stated, he assets and liabilit ended, and have be e law may differ; or, ormation, knowledge NAIC, when requir regulators in lieu of DocuSigned by: Vincent &.	and that this ies and of the en completed (2) that state e and belief, ed, that is an or in addition
	Graton Swallow 4AB President		Kathleen Susa Secretai		Vin	cent Edward Scher Treasurer	
Subscribed and sworn 14th Rita F Gentry Executive Assistant 1/17/2029				 a. Is this an original fit b. If no, 1. State the amend 2. Date filed 3. Number of page 	dment number	Yes [X] No []

Bita F. Gentry
Notary Public
SEAL
Johnson County, Store of Indiana
My Commission Express Amary. 17, 2029
Commission No. NP0641321

ASSETS

			Current Year		Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)				27,016,024
2.	Stocks (Schedule D):				
	2.1 Preferred stocks			0	0
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$22,030,332 , Schedule E - Part 1), cash equivalents				
	(\$, Schedule E - Part 2) and short-term				
	investments (\$0 , Schedule DA)	22,030,332		22,030,332	69,499,398
6.	Contract loans, (including \$ premium notes)			0	0
7.	Derivatives (Schedule DB)			0	0
8.	Other invested assets (Schedule BA)			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	2,451,416		2,451,416	1,561,239
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	79,418,126	0	79,418,126	102,013,017
13.	Title plants less \$ charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued	177,220		177,220	7,210
	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	172,506	130,903	41,603	143,480
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$8,358,444)	8,358,444		8,358,444	4,378,372
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				0
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts			0	0
	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon \dots	465,757		465,757	465,757
18.2	Net deferred tax asset			0	232,786
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				
	(\$)				
	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates				
	Health care (\$3,141,948) and other amounts receivable				
	Aggregate write-ins for other than invested assets	428,035	0	428,035	969,934
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	Q7 <i>1111</i> Q00	785 <i>1</i> 08	96 650 501	113 783 <i>4</i> 00
27.	From Separate Accounts, Segregated Accounts and Protected Cell				110,700,400
	Accounts			0	0
28.	Total (Lines 26 and 27)	97,444,999	785,498	96,659,501	113,783,409
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)		0	0	0
2501.	State income tax recoverable	428,035	0	428,035	969,934
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
	· · · · · · · · · · · · · · · · · · ·	428,035	0		

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP		Current Year		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
	Claims unpaid (less \$0 reinsurance ceded)				
	Accrued medical incentive pool and bonus amounts				
	Inpaid claims adjustment expenses	705,226		705,226	500,564
4. A	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	8,689,264		8,689,264	1,235,861
5. A	Aggregate life policy reserves			0	0
6. F	Property/casualty unearned premium reserves			0	0
7. A	Aggregate health claim reserves			0	0
	Premiums received in advance				
	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon	,,,,,			.,,,,,
	(including \$ on realized capital gains (losses))			0	0
	Net deferred tax liability				
	Ceded reinsurance premiums payable				
	Amounts withheld or retained for the account of others				
	Remittances and items not allocated	44 , 158		44 , 158	93,429
14. B	Sorrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$ current)			0	0
15. A	Amounts due to parent, subsidiaries and affiliates	5,969,710		5,969,710	53,094,668
16. E	Derivatives			0	0
17. F	Payable for securities	92,495		92,495	0
	Payable for securities lending				
	runds held under reinsurance treaties (with \$	_,,			
	authorized reinsurers, \$0 unauthorized				
	reinsurers and \$0 certified reinsurers)			0	0
					0
	Reinsurance in unauthorized and certified (\$				0
	companies				
	Net adjustments in assets and liabilities due to foreign exchange rates				0
22. L	iability for amounts held under uninsured plans	4 , 153 , 727		4 , 153 , 727	48,502
	ggregate write-ins for other liabilities (including \$				
	current)				
24. T	otal liabilities (Lines 1 to 23)	57,775,263	0	57,775,263	83,041,704
25. A	Aggregate write-ins for special surplus funds	xxx	XXX	0	0
	Common capital stock				
	Preferred capital stock				
	Gross paid in and contributed surplus				
	Surplus notes				
	Aggregate write-ins for other than special surplus funds				
	Jnassigned funds (surplus)				
				(41, 117, 702)	(6,200,293)
	ess treasury stock, at cost:				
3	2.1 shares common (value included in Line 26				
	\$	XXX	XXX		
3	2.2 shares preferred (value included in Line 27				
	\$				
33. T	otal capital and surplus (Lines 25 to 31 minus Line 32)	xxx	XXX	38,884,238	30 , 741 , 705
34. T	otal liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	96,659,501	113,783,409
	DETAILS OF WRITE-INS				
	ther liabilities	76 467		76 467	n
	scheat liability	·			
	liscellaneous Medicare liabilities				
	Summary of remaining write-ins for Line 23 from overflow page				
	otals (Lines 2301 thru 2303 plus 2398)(Line 23 above)		0	128,978	156,637
2598. 5	Summary of remaining write-ins for Line 25 from overflow page	xxx	XXX	0	0
	otals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
		1			
	Summary of remaining write-ins for Line 30 from overflow page				
3099. T	otals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

2. No. 3. Cl. 4. Fe 6. Ag. 7. Ag. 7. Ag. 10. Of 11. Of 12. Ei 13. Pr. 14. Ag. 15. In 16. St. 17. No. 18. To. 20. Cl. 21. Gr. 22. In 23. To. 23. To. 23. To. 23. To. 24. Ag. 24. Ag. 25. In 25.	Member Months	XXX	2 Total 202,097	
2. No. 3. Cl. 4. Fe 6. Ag. 7. Ag. 8. To 9. Ho 10. Or 11. Or 12. En 14. Ag. 15. In 16. St. 17. No. 18. To 20. Cl. 21. Gr. 22. In 23. To 23. To 23. To 23.	let premium income (including \$ non-health premium income)	XXX		
2. No. 3. Cl. 4. Fe 6. Ag. 7. Ag. 8. To 9. Ho 10. Or 11. Or 12. En 14. Ag. 15. In 16. St. 17. No. 18. To 20. Cl. 21. Gr. 22. In 23. To 23. To 23. To 23.	let premium income (including \$ non-health premium income)	XXX XXX XXX XXX XXX XXX XXX XXX XXX XX		
3. Cl 4. Fe 5. Ri 6. Ag 7. Ag 8. To 9. Ho 10. Or 11. Or 12. Er 13. Pr 14. Ag 15. In 16. Si 17. No 18. To 20. Cl 21. Gr 22. In	change in unearned premium reserves and reserve for rate credits ee-for-service (net of \$ medical expenses) citisk revenue ggregate write-ins for other health care related revenues ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits citier professional services citier referrals citier re	XXX		
3. Cl 4. Fe 5. Ri 6. Ag 7. Ag 8. To 10. Or 11. Or 12. Er 13. Pr 14. Ag 15. In 16. Si 17. No 18. To 20. Cl 21. Gr 22. In 23. To	change in unearned premium reserves and reserve for rate credits ee-for-service (net of \$ medical expenses) citisk revenue ggregate write-ins for other health care related revenues ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits citier professional services citier referrals citier re	XXX		
4. Fe 5. Ri 6. Aq 7. Aq 8. To 9. Ho 10. Or 11. Or 12. Ei 14. Aq 15. In 16. Si 17. No 19. No 20. Ci 21. Gi 22. In 23. To	ee-for-service (net of \$ medical expenses)	XXX XXX XXX XXX XXX XXX XXX XXX XXX XX		
5. Ri 6. Ag 7. Ag 8. To 9. Ho 10. Oi 11. Oi 12. Ei 13. Pr 14. Ag 15. In 16. Si 17. No 18. To 20. Ci 21. Gi 22. In 23. To	tisk revenue ggregate write-ins for other health care related revenues ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits other professional services outside referrals ggregate write-ins for other hospital and medical. mergency room and out-of-area rescription drugs ggregate write-ins for other hospital and medical. mentive pool, withhold adjustments and bonus amounts subtotal (Lines 9 to 15) ess: let reinsurance recoveries otal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$	XXX		
5. Ri 6. Ag 7. Ag 8. To 9. Ho 10. Oi 11. Oi 12. Ei 13. Pr 14. Ag 15. In 16. Si 17. No 18. To 20. Ci 21. Gi 22. In 23. To	tisk revenue ggregate write-ins for other health care related revenues ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits other professional services outside referrals ggregate write-ins for other hospital and medical. mergency room and out-of-area rescription drugs ggregate write-ins for other hospital and medical. mentive pool, withhold adjustments and bonus amounts subtotal (Lines 9 to 15) ess: let reinsurance recoveries otal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$	XXX		
6. Ag 7. Ag 8. To 9. Ho 10. Or 11. Or 12. Er 13. Pr 14. Ag 15. In 16. St 17. No 19. No 20. Cl 21. Gr 22. In 23. To	ggregate write-ins for other health care related revenues ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits other professional services outside referrals drescription drugs ggregate write-ins for other hospital and medical. meentive pool, withhold adjustments and bonus amounts subtotal (Lines 9 to 15) ess: let reinsurance recoveries otal hospital and medical (Lines 16 minus 17) claims adjustment expenses, including \$			
7. Ag 8. To 9. Ho 10. Of 11. Of 12. En 13. Pr 14. Ag 15. In 16. St 17. No 18. To 20. Cl 21. Gr 22. In	ggregate write-ins for other non-health revenues otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits other professional services outside referrals drescription drugs drescription drescripti			
8. To He 9. He 9. He 10. Or 11. Or 12. Er 13. Pr 14. Ag 15. In 16. Si 17. No 18. To 20. Cl 21. Gr 22. In 23. To 23. To 23.	otal revenues (Lines 2 to 7) lospital and Medical: lospital/medical benefits other professional services outside referrals mergency room and out-of-area rescription drugs ggregate write-ins for other hospital and medical necentive pool, withhold adjustments and bonus amounts subtotal (Lines 9 to 15) ess: let reinsurance recoveries otal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$			
9. Ho 9. Ho 10. Of 11. Of 12. Ei 13. Pr 14. Ag 15. In 16. So 17. No 18. To 20. Cl 21. Go 22. In	lospital and Medical: lospital/medical benefits other professional services outside referrals comergency room and out-of-area drescription drugs aggregate write-ins for other hospital and medical concentive pool, withhold adjustments and bonus amounts cubtotal (Lines 9 to 15) ess: let reinsurance recoveries cotal hospital and medical (Lines 16 minus 17) claims adjustment expenses, including \$			
9. Hd 10. Of 11. Of 12. E1 13. Pt 14. Ag 15. In 16. St 17. No 18. To 20. Cl 21. Gi 22. In 23. To	Obspital/medical benefits Other professional services Outside referrals Outside referr			
10. Of 11. Of 12. En 13. Pr 14. Ag 15. In 16. St 17. No 18. To 20. Cl 21. Gr 22. In 23. To 23. To 24.	obtailed referrals			
11. Of 12. Ei 13. Pr 14. Ag 15. In 16. Si 17. No 19. No 20. Cl 21. Gi 22. In 23. To	outside referrals mergency room and out-of-area prescription drugs ggregate write-ins for other hospital and medical	0		
12. Er 13. Pr 14. Ag 15. In 16. St 17. No 18. To 19. No 20. Cl 21. Gr 22. In	imergency room and out-of-area	0		
13. Pr 14. Ag 15. In 16. Si 17. No 18. To 19. No 20. Cl 21. Gi 22. In	rescription drugs	0		
13. Pr 14. Ag 15. In 16. Si 17. No 18. To 19. No 20. Cl 21. Gi 22. In	rescription drugs	0		
14. Aç 15. In 16. Si 17. Ni 18. To 19. Ni 20. Cl 21. Gi 22. In	ess: let reinsurance recoveries lotal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$	0		
15. In. 16. Si Le 17. No 18. To 19. No 20. Ci 21. Gi 22. In.	ess: let reinsurance recoveries otal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$	0	3,413,711214,950,1170	2,406,466
16. St. Le 17. No 18. To 19. No 20. Cl 21. Gr 22. In 23. To	ess: let reinsurance recoveries	0	214,950,117	149,478,903
17. No. 18. To. 19. No. 20. Cl. 21. Go. 22. In. 23. To.	ess: let reinsurance recoveries	0	214,950,117	149,478,903
17. No. 18. To 19. No. 20. Cl 21. Go 22. In 23. To	otal hospital and medical (Lines 16 minus 17) lon-health claims (net) claims adjustment expenses, including \$	0		149,478,903
18. To 19. No 20. Cl 21. Gi 22. In 23. To	otal hospital and medical (Lines 16 minus 17)	0		149,478,903
19. No 20. Cl 21. Go 22. In 23. To	claims adjustment expenses, including \$		9,134,366	
19. No 20. Cl 21. Go 22. In 23. To	claims adjustment expenses, including \$		9,134,366	
20. Cl 21. G 22. In 23. To	Claims adjustment expenses, including \$		9,134,366	
21. G 22. In	Seneral administrative expenses			
22. In	ncrease in reserves for life and accident and health contracts (including \$		22,340,913	17 701 710
23. To	, ,			17,701,716
	increase in reserves for life only)			
			7,465,532	0
24 N	otal underwriting deductions (Lines 18 through 22)	0	253,890,930	175,559,112
_ ∠+. IV	let underwriting gain or (loss) (Lines 8 minus 23)	XXX	(29,441,797)	(6,295,133)
25. No	let investment income earned (Exhibit of Net Investment Income, Line 17)		776.997	259.088
	let realized capital gains (losses) less capital gains tax of \$(45,226)			
	let investment gains (losses) (Lines 25 plus 26)		602,119	
			002,119	411,390
	let gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$			
29. Aç	ggregate write-ins for other income or expenses	0	37,752	58 , 133
30. No	let income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus			
2	27 plus 28 plus 29)	XXX	(28,819,508)	(5,835,389)
31. Fe	ederal and foreign income taxes incurred	XXX	(187,562)	(12,344)
32. No	let income (loss) (Lines 30 minus 31)	XXX	(28,631,946)	(5,823,045)
D	ETAILS OF WRITE-INS			
0601		XXX		
	ummary of remaining write-ins for Line 6 from overflow page			0
		XXX	0	
	otals (Lines 0601 thru 0603 plus 0698)(Line 6 above)		-	
0798. St	ummary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. To	otals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401				
1402				
1403				
1498. St	ummary of remaining write-ins for Line 14 from overflow page	0	0	0
	otals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
	iscellaneous income (expense)		37,752	58 , 133
2902	(0,000)		, ,	
2902				
	summary of remaining write-ins for Line 29 from overflow page			
	otals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	37,752	

STATEMENT OF REVENUE AND EXPENSES (Continued)

		Continued	/
		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year		14,101,828
34.	Net income or (loss) from Line 32	(28,631,946)	(5,823,045)
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(3 686 978)	(901 900)
37.	Change in net unrealized capital gains (tosses) less capital gains tax or \$ Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax		
	Change in nonadmitted assets		
39.			
40	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		
42.	Change in surplus notes		
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in		
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in	41,000,000	21,000,000
	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
48.	Net change in capital and surplus (Lines 34 to 47)		16,639,877
49.	Capital and surplus end of reporting period (Line 33 plus 48)	38,884,238	30,741,705
	DETAILS OF WRITE-INS		
4701.			
4702.			
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

	CASITILOW	1	2
		Current Year	Prior Year
	Cash from Operations	000 400 004	107 000 470
1.	Premiums collected net of reinsurance		
2.	Net investment income		422,663
3.	Miscellaneous income		0
4.	Total (Lines 1 through 3)		167,451,135
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions		31,035,610
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$(45,226) tax on capital gains (losses)		0
10.	Total (Lines 5 through 9)		168, 127, 454
11.	Net cash from operations (Line 4 minus Line 10)	(13,045,467)	(676,319)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	10.491.640	
	12.2 Stocks	1.354.181	0
	12.3 Mortgage loans		
	12.4 Real estate		0
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	,	
10		11,907,909	55, 120, 165
13.	Cost of investments acquired (long-term only): 13.1 Bonds	26 959 605	62 007 200
	13.2 Stocks		2,600,000
	13.3 Mortgage loans	, , , , , , , , , , , , , , , , , , ,	0
	13.4 Real estate		0
	13.5 Other invested assets		
	13.6 Miscellaneous applications		1,561,239
	13.7 Total investments acquired (Lines 13.1 to 13.6)		66, 168, 439
14.	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(29,310,913)	(31,042,256)
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	41,000,000	21,000,000
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)		29,764,041
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		50,764,041
	DECONCILIATION OF CASH CASH FOLINIAL ENTS AND SHOOT TEDM INVESTMENTS		
18.	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(47,469,066)	19,045,466
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(11,100,000)	10,010,100
13.	19.1 Beginning of year	69,499,398	50,453,932
	19.2 End of year (Line 18 plus Line 19.1)	22,030,332	69,499,398

Note: Supplemental disclosures of cash flow information for non-cash transactions:		
		1

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		4	IAL I OIO C	3	4		JI DOOMA		0	1 0	40
		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
		Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health
1	Net premium income	224 . 429 . 321	(Hospital & Medical)	Supplement	Offity	Offig	Delicits Flati	224 . 429 . 321	ivieuicaiu	Other Health	Non-neam
	Change in unearned premium reserves and reserve for	224,429,321						224,423,321			
	rate credit	19,812						19,812			
3.	Fee-for-service (net of \$										
	medical expenses)	0									XXX
4.	Risk revenue	0									XXX
5.	Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	XXX
6.	Aggregate write-ins for other non-health care related revenues	0	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0
7	Total revenues (Lines 1 to 6)	224 . 449 . 133	0	0		0		224 . 449 . 133		0	0
8.	Hospital/medical benefits	171,998,614						171.998.614			XXX
-	Other professional services	18.013.848						18.013.848			XXX
10.	Outside referrals	0									XXX
11.	Emergency room and out-of-area	13,507,954						13,507,954			XXX
12.		8.015.990						8.015.990			XXX
13.	Aggregate write-ins for other hospital and medical	0,010,000	0	0	n	0	0	0,010,000	n	0	XXX
	Incentive pool, withhold adjustments and bonus amounts	3,413,711						3,413,711			XXX
15.	Subtotal (Lines 8 to 14)		0	0	n	0	0	214.950.117	n	0	XXX
	Net reinsurance recoveries	0									XXX
		214.950.117	0	0	n	0	0	214.950.117	n	0	XXX
	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
	Claims adjustment expenses including					,				,	
10.	\$ cost containment expenses							9, 134, 366			
20.	General administrative expenses	22,340,915						22,340,915			
21.	Increase in reserves for accident and health contracts	7.465.532						7.465.532			XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
	Total underwriting deductions (Lines 17 to 22)	253,890,930	0	0	0	0	0	253,890,930	0	0	0
	Total underwriting gain or (loss) (Line 7 minus Line 23)	(29.441.797)	0	0	0	0	0	(29,441,797)	0	0	0
	DETAILS OF WRITE-INS	(=0,,,	-	-				(=0,,,		_	-
0501.	DET/ILES OF WITHE INC										XXX
0502.											XXX
0502.											XXX
	Summary of remaining write-ins for Line 5 from overflow page			0		0	0	0		0	XXX
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)					0			0	0	XXX
0601.	Totals (Lines 050 Fthird 0503 plus 0596) (Line 5 above)	U	XXX	XXX	XXX		XXX	XXX	XXX	XXX	^^^
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX		XXX	XXX	XXX	XXX	
	Summary of remaining write-ins for Line 6 from overflow										
0096.	page	n	xxx	XXX	XXX	xxx	xxx	xxx	XXX	xxx	n
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	n	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	n
1301.	Totals (Elifes coot till a coop plas coop) (Elife a above)	· ·	7000	7000	7000	7000	7000	7000	7001	7000	XXX
1301.								•			XXX
1302.											XXX
	Summary of remaining write-ins for Line 13 from		0	0		0	0	0		0	XXX
1200	overflow page								0	0	
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	1 0	0	0	0	1 0	XXX

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ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AMH Health, LLC

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMILIMS

PART 1 - PREMIUMS	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
Comprehensive (hospital and medical) individual				0
Comprehensive (hospital and medical) group				0
3. Medicare Supplement				0
4. Dental only				0
5. Vision only				0
6. Federal Employees Health Benefits Plan	0			0
7. Title XVIII - Medicare	224,429,321			224,429,321
8. Title XIX - Medicaid	0			0
9. Credit A&H				0
10. Disability Income				0
11. Long-Term Care				0
12. Other health				0
13. Health subtotal (Lines 1 through 12)	224,429,321	0	0	224,429,321
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	224,429,321	0	0	224,429,321

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

		1	Compreh (Hospital &	nensive Medical)	4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1.	Payments during the year:														
	1.1 Direct	204,376,995							204,376,995						
	1.2 Reinsurance assumed	0													
	1.3 Reinsurance ceded	0													
	1.4 Net	204,376,995	0	0	0	0	0	0	204,376,995	0	0	0	0	0	0
2.	Paid medical incentive pools and bonuses	2,832,557							2,832,557						
3.	Claim liability December 31, current year from Part 2A:														
	3.1 Direct	34,571,933	0 .	0	0	0	0	0	34,571,933	0	0	0	0	0	0
	3.2 Reinsurance assumed	0	0 .	0	0	0	0	0	0	0	0	0	0	0	0
	3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	3.4 Net	34,571,933	0	0	0	0	0	0	34,571,933	0	0	0	0	0	0
4.	Claim reserve December 31, current year from Part 2D: 4.1 Direct	0							, ,						
	4.2 Reinsurance assumed	0													
	4.3 Reinsurance ceded														
	4.4 Net	0		0	0	0	0	0	0	0	0	0	0	0	0
	Accrued medical incentive pools and bonuses, current year	931, 193							931,193						
6.	Net health care receivables (a)	1,504,602							1,504,602						
7.	Amounts recoverable from reinsurers December 31, current year	0													
8.	Claim liability December 31, prior year from Part 2A: 8.1 Direct	25,907,920			0	0	0	0	25.907.920	0				0	0
		0			٥٥		0 n	0	25,907,920	0				0	0
	8.2 Reinsurance assumed				0	0	0 n	0		0				0	0
	8.3 Reinsurance ceded	0			٥		0	0	0	0	0			0	0
9.	8.4 Net	25,907,920	0 .	0	U	0	0	0	25,907,920	0	0	U	0	0	0
	9.1 Direct	0													
	9.2 Reinsurance assumed	0													
	9.3 Reinsurance ceded	0													
	9.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	Accrued medical incentive pools and bonuses, prior year	350,039							350,039						
11.	Amounts recoverable from reinsurers December 31, prior year	0							,						
12.	Incurred Benefits:														
	12.1 Direct	211,536,406	0	0	0	0	0	0	211,536,406	0	0	0	0	0	0
	12.2 Reinsurance assumed	0	0 .	0	0	0	0	0	0	0	0	0	0	0	0
	12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	12.4 Net	211,536,406	0	0	0	0	0	0	211,536,406	0	0	0	0	0	0
13.	Incurred medical incentive pools and bonuses	3,413,711	0	0	0	0	0	0	3,413,711	0	0	0	0	0	0

⁽a) Excludes \$23,473 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	T			PAR	T 2A - CLAIMS		D OF CURREN			ı	T		T	1
	1	Compre		4	5	6	7	8	9	10	11	12	13	14
		(Hospital 8	s Medical)	-			Federal							
		2	3				Employees							
				Medicare			Health	Title XVIII	Title XIX		Disability	Long-Term		Other
	Total	Individual	Group	Supplement	Dental Only	Vision Only	Benefits Plan	Medicare	Medicaid	Credit A&H	Income	Care	Other Health	Non-Health
Reported in Process of Adjustment:														
1.1 Direct	17.371.112							17,371,112						
	1 1													
1.2 Reinsurance assumed														
1.3 Reinsurance ceded	. 0 .													
1.4 Net	17,371,112	0	0	0	0	0	0	17,371,112	0	0	0	0	0	0
Incurred but Unreported:														
2.1 Direct	17,200,821 .							17,200,821						
2.2 Reinsurance assumed	0 .													
2.3 Reinsurance ceded	0													
				0						0				0
2.4 Net		0	0	0	U	0	u	17,200,821	U	0	U	0	0	0
Amounts Withheld from Paid Claims														
and Capitations:														
3.1 Direct														
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net		0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
	04 574 000	•		0				04 574 000	•	0				
4.1 Direct								. ,. ,				0	0	0
4.2 Reinsurance assumed	. 0 .		0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0 .	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	34,571,933	n	n	n	0	n	0		n	n	n	0	n	n
4.4 INCL	04,011,000	U	U	U	Ų	U	1	UT, J1 1, 300	U	Ų	ı	l U	U	U

UNDERWRITING AND INVESTMENT EXHIBIT

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

PART 2B - ANALYSIS OF CLAIMS UNPAID - N		During the Year	Claim Reserve a	nd Claim Liability	5	6
	1	2	3	4		Estimated Claim Reserve and Claim
Line of Business	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Liability December 31 of Prior Year
Comprehensive (hospital and medical) individual					0	
Comprehensive (hospital and medical) group					0	
Medicare Supplement					0	0
4. Dental Only					0	0
5. Vision Only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare	24,433,219	182,212,244	2,021,305	32,550,628	26,454,524	25,907,920
8 Title XIX - Medicaid					0	0
9. Credit A&H					0	
10. Disability Income					0	
11. Long-Term Care					0	
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)						
14. Health care receivables (a)	5,120	3,767,950	0	0	5,120	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	1,090,014	1,742,543	35,776	895,417	1, 125, 790	350,039
17. Totals (Lines 13 - 14 + 15 + 16)	25,518,113	180, 186, 837	2,057,081	33,446,045	27,575,194	26,257,959

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

		Cui	mulative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1. Prior	0	0	0	0	0
2. 2018					0
3. 2019	XXX				0
4 2020	XXX	XXX	51.237	61.549	61.855
5 2021	XXX	XXX	XXX	125.701	150.913
6. 2022	XXX	XXX	XXX	XXX	180,187

Section B - Incurred Health Claims - Title XVIII

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonu Outstanding at End of Year					
	1 2 3 4					
Year in Which Losses Were Incurred	2018	2019	2020	2021	2022	
1. Prior	0	0	0	0	0	
2. 2018					0	
3. 2019	XXX				0	
4. 2020	XXX	XXX	64,030	61,796	61,843	
5. 2021	XXX	XXX	XXX	151,712	152,982	
6. 2022	XXX	XXX	XXX	XXX	213,633	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018		0	0	0.0	0	0.0	0	0	0	0.0
2.	2019		0	0	0.0	0	0.0	0	0	0	0.0
3.	2020		61.855	3.234	5.2	65.089	85.5	(12)	0	65.077	85.5
4.	2021	169,264	150,913	8,862	5.9	159,775	94.4	2,069	41	161,885	95.6
5.	2022	224,449	180, 187	7,614	4.2	187,801	83.7	33,446	664	221,911	98.9

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Grand Total

			Cı	umulative Net Amounts F	Paid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior	0	0	0	0	0
2.	2018	0	0	00	0	0
3.	2019	XXX	0	0	0	0
4.	2020	XXX	XXX	51.237	61.549	61.855
5.	2021	XXX	XXX	XXX	125.701	150.913
6.	2022	XXX	XXX	XXX	XXX	180, 187

Section B - Incurred Health Claims - Grand Total

	Sum of Cumulative Ne	t Amount Paid and Cl	aim Liability, Claim Rese Outstanding at End of Ye	rve and Medical Incent ar	ive Pool and Bonuses	
	1 2 3 4 5					
Year in Which Losses Were Incurred	2018	2019	2020	2021	2022	
1. Prior	0	0	0	0	0	
2. 2018	0	0	0	0	0	
3. 2019	XXX	0	0	0	0	
4. 2020	XXX	XXX	64,030	61,796	61,843	
5. 2021	XXX	XXX	XXX	151,712	152,982	
6. 2022	XXX	XXX	XXX	XXX	213,633	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018	0	0	0	0.0	0	0.0	0	0	0	0.0
2.	2019	0	0	0	0.0	0	0.0	0	0	0	0.0
3.	2020		61.855	3.234	5.2	65.089	85.5	(12)	0	65.077	85.5
4.	2021	169,264	150,913	8,862	5.9	159,775	94.4	2,069	41		95.6
5.	2022	224,449	180, 187	7,614	4.2	187,801	83.7	33,446	664	221,911	98.9

UNDERWRITING AND INVESTMENT EXHIBIT

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

					SATE RESERVE	FOR ACCIDE	NT AND HEAL	TH CONTRACT						
		1	Compreh (Hospital &		4	5	6	7	8	9	10	11	12	13
		Total	2 Individual	3 Group	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1.	Unearned premium reserves	0				,								
2.	Additional policy reserves (a)								7 . 465 . 532					
3.	Reserve for future contingent benefits	0												
4.	Reserve for rate credits or experience rating refunds													
	(including \$7,465,532 for investment income)	1,216,049							1,216,049					
5.	Aggregate write-ins for other policy reserves	7,683		0	0	0	0		7,683		0	0	0	0
6.	Totals (gross)		0	0	0	0	0		8,689,264	0	0	0	0	0
7.	Reinsurance ceded	0												
8.	Totals (Net)(Page 3, Line 4)		0	0	0	0	0	0	8,689,264	0	0	0	0	0
9.	Present value of amounts not yet due on claims	0												
10.	Reserve for future contingent benefits	0												
11.	Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals (gross)	0	0	0	0	0					0	0	0	0
13.	Reinsurance ceded	0												
14.	Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
	DETAILS OF WRITE-INS													
0501.	Risk adjustment payable	7,683							7,683					
0502.														
0503.														
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	7,683	0	0	0	0	0	0	7,683	0	0	0	0	0
1101.														
1102.														
1103.														
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0 .	0
1199.	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$7,465,532 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

			YSIS OF EXPENSE			
		Claim Adjustme 1 Cost	ent Expenses 2 Other Claim	3 General	4	5
		Containment Expenses	Adjustment Expenses	Administrative Expenses	Investment Expenses	Total
1.	Rent (\$ for occupancy of					
	own building)	116,046	81,529	54,228	0	251,803
2.	Salary, wages and other benefits	3,891,840	1,610,147	4,981,074	0	10,483,061
3.	Commissions (less \$					
	ceded plus \$ assumed)	0	0	5,982,034	0	5,982,034
4.	Legal fees and expenses	1,649	165	308,225	0	310,039
5.	Certifications and accreditation fees	0	0	0	0	0
6.	Auditing, actuarial and other consulting services	356,366	224,225	665,873	0	1,246,464
7.	Traveling expenses	3,801	1,264	68,754	0	73,819
8.	Marketing and advertising	13,771	24,682	3,966,213	0	4,004,666
9.	Postage, express and telephone	32,286	37,799	511,376	0	581,461
10.	Printing and office supplies	21,150	3,737	426,785	0	451,672
11.	Occupancy, depreciation and amortization	100	181	86,210	0	86,491
12.	Equipment	0	0	0	0	0
13.	Cost or depreciation of EDP equipment and software	(26,952)	26,541	207,771	0	207,360
14.	Outsourced services including EDP, claims, and other services	478 594	618 809	3 501 220	0	4 598 623
15.	Boards, bureaus and association fees				0	
16.	Insurance, except on real estate			•		
17.	Collection and bank service charges					
18.	Group service and administration fees					
19.	Reimbursements by uninsured plans					
20.	Reimbursements from fiscal intermediaries					
21.	Real estate expenses				0	
22.	Real estate taxes	*		,	0	,
23.	Taxes, licenses and fees:					
20.	23.1 State and local insurance taxes	0	0	547,227	0	547.227
	23.2 State premium taxes			, ,	0	,
	23.3 Regulatory authority licenses and fees					
	23.4 Payroll taxes			290,637		
	23.5 Other (excluding federal income and real	230,713	100,910	290,037		020,203
	estate taxes)	0	0	9,823	0	9,823
24.	Investment expenses not included elsewhere	0	0	0	26 , 158	26 , 158
25.	Aggregate write-ins for expenses	152,545	1,063,943	359,680	0	1,576,168
26.	Total expenses incurred (Lines 1 to 25)	5,331,726	3,802,640	22,340,915	26,158 (a	a)31,501,439
27.	Less expenses unpaid December 31, current year	0	705,226	13, 102	0	718,328
28.	Add expenses unpaid December 31, prior year		500,564	4,180		504,744
29.	Amounts receivable relating to uninsured plans, prior year			3,446,916		3,446,916
30.	Amounts receivable relating to uninsured plans, current year	0	0	4,628,368	0	4,628,368
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	5,331,726	3,597,978	23,513,445	26,158	32,469,307
	DETAILS OF WRITE-INS					
2501.	Miscellaneous expenses	152,545	1,063,943	359,680	0	1,576,168
2502.						
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	152,545	1,063,943	359,680	0	1,576,168
a) Inclu	des management fees of \$ 23,580,007			n-affiliates.	- 1	, ,

(a) Includes management fees of \$23,580,007 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	()	
1.1	Bonds exempt from U.S. tax	` '	
1.2	Other bonds (unaffiliated)		,-
1.3	Bonds of affiliates		
2.1	Preferred stocks (unaffiliated)		
2.11	Preferred stocks of affiliates	(b)0	0
2.2	Common stocks (unaffiliated)		12,491
2.21	Common stocks of affiliates		
3.	Mortgage loans		
4.	Real estate	(d)0	0
5	Contract Loans		
6	Cash, cash equivalents and short-term investments	(e)581,313	581,313
7	Derivative instruments	(f)0	0
8.	Other invested assets		
9.	Aggregate write-ins for investment income	28,437	28,624
10.	Total gross investment income	633,146	
11.	Investment expenses		(g)26,158
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		,
14.	Depreciation on real estate and other invested assets		` '
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		776.997
	DETAILS OF WRITE-INS		,
0901.	Miscellaneous income	11	11
0902.	Securities lending	28,426	28,613
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	C
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	28,437	28,624
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		(

(a) Includes \$	146,017	accrual of discount less \$768,1	amortization of premium and less \$	154,915	paid for accrued interest on purchases.
(b) Includes \$	0	accrual of discount less \$	0 amortization of premium and less \$	0	paid for accrued dividends on purchases
(c) Includes \$	0	accrual of discount less \$	0 amortization of premium and less \$		paid for accrued interest on purchases.
(d) Includes \$		for company's occupancy of its own build	ngs; and excludes \$	interest on encur	mbrances.
(e) Includes \$	63	accrual of discount less \$	0 amortization of premium and less \$	554	paid for accrued interest on purchases.
(f) Includes \$		accrual of discount less \$	amortization of premium.		
	and Separate Acco	investment expenses and \$	investment taxes, licenses and f	ees, excluding fede	eral income taxes, attributable to
(h) Includes \$		interest on surplus notes and \$	interest on capital notes.		
(:) I = = I	0	d	depresiation on other inves	tad assats	

EXHIBIT OF CAPITAL GAINS (LOSSES)

	LAIIIDII	1	2	<u> </u>	4	5
		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds	(84,765)	0	(84,765)	0	0
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)	681	0	681	0	0
1.3	Bonds of affiliates			0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	(135,663)	0	[(135,663)		
2.21	Common stocks of affiliates	0	0	0	(3,686,978)	0
3.	Mortgage loans		0	0	0	0
4.	Real estate		0	0		0
5.	Contract loans			0		
6.	Cash, cash equivalents and short-term investments	(357)	0	(357)		
7.	Derivative instruments			0		
8.	Other invested assets			0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(220, 104)	0	(220, 104)	(3,686,978)	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from					
	overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9,					
	above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

EXHIBIT OF NON-ADMITTED ASSETS								
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)				
1.	Bonds (Schedule D)			0				
2.	Stocks (Schedule D):							
	2.1 Preferred stocks			0				
	2.2 Common stocks			0				
3.	Mortgage loans on real estate (Schedule B):							
	3.1 First liens			0				
	3.2 Other than first liens							
4.	Real estate (Schedule A):							
	4.1 Properties occupied by the company			0				
	4.2 Properties held for the production of income							
	4.3 Properties held for sale			_				
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0				
6.	Contract loans			0				
7.	Derivatives (Schedule DB)			0				
8.	Other invested assets (Schedule BA)							
9.	Receivables for securities							
10.	Securities lending reinvested collateral assets (Schedule DL)							
11.	Aggregate write-ins for invested assets							
12.	Subtotals, cash and invested assets (Lines 1 to 11)							
13.	Title plants (for Title insurers only)							
14.	Investment income due and accrued							
15.	Premiums and considerations:							
10.	15.1 Uncollected premiums and agents' balances in the course of collection	130 903	59 437	(71.466)				
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due							
	15.3 Accrued retrospective premiums and contracts subject to redetermination							
16	Reinsurance:							
16.	16.1 Amounts recoverable from reinsurers			0				
	16.2 Funds held by or deposited with reinsured companies							
47	16.3 Other amounts receivable under reinsurance contracts							
	Amounts receivable relating to uninsured plans			0				
	Current federal and foreign income tax recoverable and interest thereon			0				
	Net deferred tax asset							
19.	Guaranty funds receivable or on deposit							
20.	Electronic data processing equipment and software							
21.	Furniture and equipment, including health care delivery assets							
22.	Net adjustment in assets and liabilities due to foreign exchange rates							
23.	Receivable from parent, subsidiaries and affiliates							
24.	Health care and other amounts receivable		163, 195	(491,400)				
25.	Aggregate write-ins for other than invested assets	0	257, 109	257, 109				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)		479,741	(305,757)				
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0				
28.	Total (Lines 26 and 27)	785,498	479,741	(305,757)				
1101.	DETAILS OF WRITE-INS							
1102.								
1103.								
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0				
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0				
2501.	Prepaid Expense		257,109	257, 109				
2502.								
2503.								
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0					
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	257,109	257,109				

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EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

	Total Members at End of					6	
	_ 1	2	3	4	5	Current Year	
Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Member Months	
Health Maintenance Organizations	14, 152	16,557	16,854	17,090	17,201	202,097	
Provider Service Organizations							
Preferred Provider Organizations							
4. Point of Service							
5. Indemnity Only							
Aggregate write-ins for other lines of business	. 0	0	0	0	0	0	
7. Total	14,152	16,557	16,854	17,090	17,201	202,097	
DETAILS OF WRITE-INS							
0601.							
0602.							
0603.							
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0	
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0	

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 Maine Bureau of Insurance ("Bureau").

A reconciliation of the Company's net income (loss) 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 #	2022	2021
Net	Income					
(1)	AMH Health, LLC. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$(28,631,946)	\$ (5,823,045)
(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	\$(28,631,946)	\$ (5,823,045)
<u>Sur</u>	<u>plus</u>					
(5)	AMH Health, LLC. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 38,884,238	\$ 30,741,705
(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	\$ 38,884,238	\$ 30,741,705

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

Preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policies

Health premiums are earned over the term of the related insurance policies. Premiums written are reported net of excess loss reinsurance ceded and experience rating refunds. Unearned premium reserves are established to cover the unexpired portion of premiums written and are computed by pro rata methods for direct business. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period Premium rates for certain lines of business are subject to approval by the Bureau. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. All other costs, including underwriting expenses, are charged to operations as incurred.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments with maturities of less than one year and more than three months at the date of acquisition and are reported at amortized cost, which approximates fair value. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (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 17 SVO-Identified bond exchange traded funds ("ETFs") reported as bonds on Schedule D-1 in which the Company has made an irrevocable decision to report at systematic value. Systematic valuation has been consistently applied to these ETFs held at December 31, 2022 and previous periods.
- (3) The Company has no investments in common stocks of unaffiliated companies.
- (4) The Company has no investments in preferred stocks.
- (5) The Company has no mortgage loans real estate.
- (6) The Company has no loan-backed securities.
- (7) The Company owns 100% of the common stock of AMH Health Plans of Maine, Inc. ("AMH Health Plans of Maine"), a Maine domiciled stock insurance company. The Company's investment is carried at its statutory book value. The company reports net change in the equity of its subsidiary as a change in net unrealized gains and losses.
- (8) The Company has no investments in joint ventures, partnerships or limited liability companies.
- (9) The Company has no derivative instruments.
- (10) The Company recognizes losses from other-than-temporary impairments ("OTTI") of investments in accordance with Statements of Standard Accounting Practice ("SSAP") No. 26R, *Bonds*; and SSAP No. 30, *Common Stock*; and SSAP No. 32R, *Preferred Stock*.
- (11) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (12) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions and other factors that may materially affect the cost, frequency and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- (13) The Company has not modified its capitalization policy from the prior period.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

There were no accounting changes or corrections of errors during the years ended December 31, 2022 and 2021.

3. Business Combinations and Goodwill

A. Business Combinations and Goodwill

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

4. Discontinued Operations

The Company had no operations that were discontinued during 2022 or 2021.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company did not have investments in mortgage loans at December 31, 2022 or 2021.

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at December 31, 2022 or 2021.

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at December 31, 2022 or 2021.

D. Loan-Backed Securities

- (1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize OTTI on its loan-backed securities during the years ended December 31, 2022 and 2021.
- (3) The Company did not recognize OTTI on its loan-backed securities at December 31, 2022 and 2021.
- (4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):
 - a. The aggregate amount of unrealized losses:

1.	Less than 12 Months	\$ (131,086)
2.	12 Months or Longer	\$ _

b. The aggregate related fair value of securities with unrealized losses:

1.	Less than 12 Months	6,190,519
2.	12 Months or Longer	

(5) The Company's bond portfolio is sensitive to interest rate fluctuations, which impact the fair value of individual securities. Unrealized losses on bonds were primarily caused by the effects of the interest rate environment and the widening of credit spreads on certain securities. The Company currently has the ability and intent to hold these securities until their full cost can be recovered. Therefore, the Company does not believe the unrealized losses represent an OTTI at December 31, 2022 or 2021.

(6) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings at December 31, 2022 and 2021.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not enter into repurchase agreements at December 31, 2022 or 2021.
- (2) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers based on, among other things, their creditworthiness in exchange for collateral initially equal to at least 102% of the market value of the loaned securities. The Company receives the collateral in cash or securities, and if cash is received the cash collateral is thereafter invested according to guidelines of the Company's Investment Policy.

(3) Collateral Received

a. Aggregate amount collateral received

			<u>F</u>	<u>'air Value</u>
1.	Secu	rities Lending		
	(a)	Open	\$	_
	(b)	30 days or less		_
	(c)	31 to 60 days		_
	(d)	61 to 90 days		_
	(e)	Greater than 90 days		
	(f)	Sub-total	\$	_
	(g)	Securities received		2,451,416
	(h)	Total collateral received	\$	2,451,416

- 2. Dollar repurchase agreement Not applicable.
- b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged \$\\ 2,451,416\$
- c. The Company receives cash collateral in an amount in excess of fair value of the securities lent. The Company reinvests the cash collateral according to guidelines of the Company's Investment Policy.
- (4) The Company does not have any securities lending transactions administered by an affiliated agent.

(5) Collateral Reinvestment

a. Aggregate amount collateral reinvested

		An	ortized Cost	<u>Fair Value</u>
1. Se	curities Lending			
(a)) Open	\$	_	\$
(b)	30 days or less		_	_
(c)	31 to 60 days		_	
(d)) 61 to 90 days		_	
(e)	91 to 120 days		_	
(f)	121 to 180 days		_	
(g)	181 to 365 days		_	
(h)	1 to 2 years			
(i)	2 to 3 years		_	_
(j)	Greater than 3 years			
(k)) Sub-total	\$	_	\$ _
(1)	Securities received		2,451,416	2,451,416
(m	n) Total collateral reinvested	\$	2,451,416	\$ 2,451,416

- 2. Dollar repurchase agreement Not applicable.
- b. Not applicable.
- (6) Not applicable.
- (7) 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 December 31, 2022 or 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 December 31, 2022 or 2021.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at December 31, 2022 or 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 December 31, 2022 or 2021.

J. Real Estate

The Company did not have investments in real estate and did not engage in retail land sales operations during 2022 or 2021.

K. Investments in Low-Income Housing Tax Credits

The Company did not invest in properties generating low-income housing tax credits during 2022 or 2021.

L. Restricted Assets

(1) Restricted assets (including pledged)

		1	2	3	4	5	6	7
Restricted Asset Category		Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a.	Subject to contractual obligation for which liability is not shown	\$ —	\$ —	s —	\$ —	s —	0.00 %	0.00 %
b.	Collateral held under security lending agreements	2,451,416	1,561,239	890,177	_	2,451,416	2.52 %	2.54 %
c.	Subject to repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
d.	Subject to reverse repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
e.	Subject to dollar repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
f.	Subject to dollar reverse repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
g.	Placed under option contracts	_	_	_	_	_	0.00 %	0.00 %
h.	Letter stock or securities restricted as to sale-excluding FHLB capital stock		_	_	_	_	0.00 %	0.00 %
i.	FHLB capital stock	_	_	_	_	_	0.00 %	0.00 %
j.	On deposit with states	112,993	116,263	(3,270)	_	112,993	0.12 %	0.12 %
k.	On deposit with other regulatory bodies	_	_	_	_	_	0.00 %	0.00 %
1.	Pledged as collateral to FHLB (including assets backing funding agreements)	_	_	_	_	_	0.00 %	0.00 %
m.	Pledged as collateral not captured in other categories	_	_	_	_	_	0.00 %	0.00 %
n.	Other restricted assets	_			_		0.00 %	0.00 %
o.	Total Restricted Assets	\$ 2,564,409	\$ 1,677,502	\$ 886,907	\$ —	\$ 2,564,409	2.63 %	2.65 %

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

- (2) Not applicable.
- (3) Not applicable.

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

(4)
Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

		1	2	3	4
	Collateral Assets	Book/ Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted*)	% of BACV to Total Admitted Assets **
a.	Cash	\$	\$ —	— %	— %
b.	Schedule D, Part 1	_	_	_	_
c.	Schedule D, Part 2 Section 1	_	_	_	
d.	Schedule D, Part 2 Section 2	_	_	_	_
e.	Schedule B	_	_	_	_
f.	Schedule A	_	_	_	_
g.	Schedule BA, Part 1	_	_	_	_
h.	Schedule DL, Part 1	2,451,416	2,451,416	2.5 %	2.5 %
i.	Other	_	_	_	_
j.	Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$ 2,451,416	\$ 2,451,416	2.5 %	2.5 %

^{*} Column 1 divided by Asset Page, Line 26 (Column 1)

^{**} Column 1 divided by Asset Page, Line 26 (Column 3)

		<u>1</u>	<u>2</u>
		Amount	% of Liability to Total Liabilities *
k.	Recognized Obligation to Return Collateral Asset	\$ 2,451,416	4.2 %

^{*} Column 1 divided by Liability Page, Line 24 (Column 3)

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at December 31, 2022 and 2021.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at December 31, 2022 and 2021.

O. 5GI Securities

The Company has no 5GI Securities as of December 31, 2022 and 2021.

P. Short Sales

The Company did not have any short sales at December 31, 2022 and 2021.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at December 31, 2022 and 2021.

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

The Company did not participate in a cash pool at December 31, 2022 or 2021.

6. Joint Ventures, Partnerships and Limited Liability Companies

- **A.** The Company has no investments in joint ventures, partnerships or LLCs.
- **B.** Not applicable.

7. Investment Income

- **A.** All investment income due and accrued with amounts that are over 90 days past due is non-admitted.
- **B.** At December 31, 2022 and 2021 there was no nonadmitted accrued investment income.

8. Derivative Instruments

The Company has no derivative instruments.

9. Income Taxes

A. The components of net deferred tax assets (liabilities):

(1) The components of net deferred tax asset (liabilities) are as follows:

			12/31/2022	1
		(1)	(2)	(3)
				(Col 1+2)
		Ordinary	Capital	Total
(a)	Gross Deferred Tax Assets	\$7,182,744	\$ 153,319	\$ 7,336,063
(b)	Statutory Valuation Allowance Adjustments	7,182,437	153,319	7,335,756
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	307		307
(d)	Deferred Tax Assets Nonadmitted	_	_	_
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	307	_	307
(f)	Deferred Tax Liabilities	307	_	307
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ —	\$ —	\$ —
			12/31/2021	
		(4)	(5)	(6)
				(Col 4+5)
		Ordinary	Capital	Total
(a)	Gross Deferred Tax Assets	\$1,419,174	\$ 22,026	\$ 1,441,200
(b)	Statutory Valuation Allowance Adjustments	1,186,388	22,026	1,208,414
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	232,786	_	232,786
(d)	Deferred Tax Assets Nonadmitted			_
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	232,786	_	232,786
(f)	Deferred Tax Liabilities			_
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 232,786	\$ —	\$ 232,786
	(10 - 11)	Ψ 232,700	Ψ	Ψ 232,700
			Change	
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a)	Gross Deferred Tax Assets	\$5,763,570	\$ 131,293	\$ 5,894,863
(b)	Statutory Valuation Allowance Adjustments	5,996,049	131,293	6,127,342
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	(232,479)	_	(232,479)
(d)	Deferred Tax Assets Nonadmitted	_	_	_
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	(232,479)	_	(232,479)
(f)	Deferred Tax Liabilities	307		307
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (232,786)	\$	\$ (232,786)

(2) The amount of admitted adjusted gross deferred tax assets under each component of SSAP No. 101, *Income Taxes* ("SSAP No. 101") are as follows:

		12/31/2022	
	(1)	(2)	(3)
	Ordinary	Capital	(Col 1+2) Total
Admission Calculation Components SSAP No. 101			1
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ —	\$ —	\$ —
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	_	_	_
Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date. The Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	_	_	_
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	5,832,636
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	307	_	307
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 307	<u>\$</u>	\$ 307
		12/31/2021	
	(4)	(5)	(6)
	Ordinary	Capital	(Col 4+5) Total
Admission Calculation Components SSAP No. 101			
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 232,786	\$ —	\$ 232,786
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	_	_	_
 Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date. 	_	_	_
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	3,156,995
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.		_	_
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 232,786	\$ —	\$ 232,786
		Change	
	(7)	(8)	(9)
	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
Admission Calculation Components SSAP No. 101			
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ (232,786)	\$ —	\$ (232,786)
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	_	_	_
 Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date. 	_	_	_
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	2,675,641
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	307	_	307

2022 2021 (3) (a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. 398.59% 418.36 % Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. 38,884,238 \$31,569,948

(4) 12/31/2022 12/31/2021 Change **(1)** (3) **(4)** (5) **(2)** (6) (Col 1-3) (Col 2-4) Ordinary Capital Ordinary Capital Capital Impact of Tax-Planning Strategies

(a) Determination of Adjusted Gross Deferred Tax Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.

1. Adjusted Gross DTAs Amount From Note 9A1(c)

2. Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies

Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)

Percentage of Net
Admitted Adjusted Gross
DTAs By Tax Character
Admitted Because Of The
Impact Of Tax Planning
Strategies

\$ 307 \$232,786 \$ — \$(232,479) 0.00 % 0.00 % 0.00 % 0.00 % 0.00 % 0.00 % 307 \$232,786 \$ -\$(232,479)

0.00%0.00 %0.00 % 0.00 % 0.00 % 0.00~%

Does the Company's tax-planning strategies include the use of reinsurance?

No X Yes

B. The Company has no unrecognized deferred tax liabilities at December 31, 2022 and 2021.

C. Current income taxes incurred consist of the following major components:

			(1)	(2)	(3)
		_1	2/31/2022	12/31/2021	(Col 1-2) Change
(1) Cu	rrent Income Tax				
(a)	Federal	\$	(187,562) \$	(1,165,746)	\$ 978,184
(b)	Foreign		_		<u> </u>
(c)	Subtotal		(187,562)	(1,165,746)	978,184
(d)	Federal income tax expense on net capital gains		(45,226)	26,353	(71,579)
(e)	Utilization of capital loss carry-forwards		_	1,153,402	(1,153,402)
(f)	Other		_	_	
(g)	Federal and foreign income taxes incurred	\$	(232,788) \$	14,009	\$ (246,797)

				Г	(1)	(2)		
					(1)	(2)	(3)	
					12/31/2022	12/31/2021	(Col 1-2) Change	
(2)	Def	erred T	ax Assets:					
	(a)	Ordin	nary					
		(1)	Discounting of unpaid losses	\$	98,267	\$ 76,912	\$ 21,355	
		(2)	Unearned premium reserve		178	464	(286)	
		(3)	Policyholder reserves		168,000	126,000	42,000	
		(4)	Investments		_	_	_	
		(5)	Deferred acquisition costs		_	_	_	
		(6)	Policyholder dividends accrual		_	_	_	
		(7)	Fixed assets		_	_	_	
		(8)	Compensation and benefits accrual			_	_	
		(9)	Pension accrual		_	_	_	
		(10)	Receivables - nonadmitted		164,955	46,753	118,202	
		(11)	Net operating loss carry-forward		5,169,144	1,153,402	4,015,742	
		(12)	Tax credit carry-forward		_	_		
		(13)	Other		1,582,200	15,643	1,566,557	
			(99) Subtotal (sum of 2a1 through 2a13)		7,182,744	1,419,174	5,763,570	
	(b)	Statut	tory valuation allowance adjustment		7,182,437	1,186,388	5,996,049	
	(c)	Nona	dmitted		_	_		
	(d)	Admi	tted ordinary deferred tax assets (2a99 - 2b - 2c)		307	232,786	(232,479)	
	(e)	(e) Capital						
		(1)	Investments		153,319	22,026	131,293	
		(2)	Net capital loss carry-forward		_	_	_	
		(3)	Real estate		_	_		
		(4)	Other		_	_	_	
			(99) Subtotal (2e1+2e2+2e3+2e4)		153,319	22,026	131,293	
	(f)	Statut	tory valuation allowance adjustment		153,319	22,026	131,293	
	(g)	Nona	dmitted		_	_		
	(h)	Admi	tted capital deferred tax assets (2e99 - 2f - 2g)		_	_	_	
	(i)	Admi	tted deferred tax assets (2d + 2h)	\$	307	\$ 232,786	\$ (232,479)	
(3)	Def	erred T	Cax Liabilities:					
	(a)	Ordin	ary					
	. ,	(1)	Investments	\$	_	\$ —	\$ —	
		(2)	Fixed assets		_	_	_	
		(3)	Deferred and uncollected premium		_	_		
		(4)	Policyholder reserves		_	_	_	
		(5)	Other		307	_	307	
			(99) Subtotal (3a1+3a2+3a3+3a4+3a5)		307	_	307	
	(b)							
	. /	(1)	Investments		_	_	_	
		(2)	Real estate		_			
		(3)	Other		_	_	_	
			(99) Subtotal (3b1+3b2+3b3)	_		_	_	
	(c)	Defer	red tax liabilities (3a99 + 3b99)	\$	307	\$ —	\$ 307	
(4)			ed tax assets/liabilities (2i - 3c)	\$		\$ 232,786		
			(_x 00)	=		. 352,.30	. (202,700)	

D. The Company's income tax expense and change in deferred income taxes differs from the amount obtained by applying the federal statutory income tax rate of 21% for the year ended December 31 as follows:

	 2022	2021
Tax expense computed using federal statutory rate	\$ (6,061,594) \$	(1,219,898)
Change in nonadmitted assets	(64,209)	29,097
Tax exempt income and dividend received deduction net of proration	(1,540)	(280)
Prior year true-up and adjustments		20,450
Valuation allowance	6,127,343	1,208,414
Other, net	 (2)	1,458
Total	\$ (2) \$	39,241
Federal income taxes incurred	\$ (232,788) \$	14,009
Change in net deferred income taxes	 232,786	25,232
Total statutory income taxes	\$ (2) \$	39,241

E. Operating loss carryforwards:

(1) At December 31, 2022, the Company had the following unused net operating loss or tax credit carryforwards available to offset future taxable income. The losses or credits will begin to expire as noted.

 Unused NOL	Will Begin to	Unused Tax Credit	Will begin to
Carryforwards	Expire	Carryforwards	Expire
\$ 24,614,970	2041	<u> </u>	

(2) The following are income taxes incurred in the current and prior year(s) that will be available for recoupment in the event of future net losses:

	Ord	linary	Capital	Total
2022	\$	— \$	— \$	_
2021		_	_	_
2020		N/A	_	_

- (3) The Company has no protective tax deposits reported as admitted assets under Section 6603 of the Internal Revenue Service Code as of December 31, 2022 and 2021.
- **F.** The Company's Federal Income Tax return is a separate filing. No owner has the required 80% to include them in a consolidated return. Thus, no tax sharing agreement is in place for federal income taxes. As of December 31, 2022, the statute of limitations of the 2022, 2021 and 2020 tax year remains open.

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

On August 16, 2022, the U.S. government enacted the Inflation Reduction Act which includes a new corporate alternative minimum tax (the "Corporate AMT") of 15% on the adjusted financial statement of income ("AFSI") of corporations with average AFSI exceeding \$1.0 billion over a three-year period. The Corporate AMT is effective beginning after December 31, 2022. The Company has determined that it is not an applicable corporation, therefore it does not expect to be subject to the Corporate AMT in 2023.

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

A. Nature of the Relationship

The Company is a wholly-owned subsidiary of Elevance Health, Inc. ("Elevance Health"), a publicly traded company. Elevance Health changed its name from Anthem, Inc. on June 27, 2022, following approval of its shareholders.

As of December 31, 2022, APHC owns 1 common membership unit and 18,000 preferred membership units and MainHealth owns one common membership unit.

B. Significant Transactions for Each Period

The following significant transactions took place between the Company and its affiliates:

The Company paid an additional contribution of \$1,500,000 to AMH Health Plans of Maine, Inc. on December 30, 2022.

On December 22, 2022, the Company's parent company, Elevance Health, authorized a capital contribution to the Company in the amount of \$9,500,000 which was paid on December 29, 2022.

The Company received a capital contribution of \$9,500,000 from MaineHealth on December 29, 2022.

The Company received a capital contribution of \$5,000,000 from MaineHealth on September 23, 2022.

On September 21, 2022, the Company's parent company, Elevance Health, authorized a capital contribution to the Company in the amount of \$5,000,000 which was paid on September 23, 2022.

The Company paid an additional contribution of \$2,000,000 to AMH Health Plans of Maine, Inc. on June 30, 2022.

The Company received a capital contribution of \$6,000,000 from MaineHealth on June 28, 2022.

On June 27, 2022, the Company's parent company, Elevance Health, authorized a capital contribution to the Company in the amount of \$6,000,000 which was paid on June 29, 2022.

The Company received a capital contribution of \$6,500,000 from Anthem Partnership Holding Company, LLC ("APHC") on December 22, 2021. In return, APHC received 6,500 preferred membership units.

The Company received a capital contribution of \$6,500,000 from MaineHealth on December 22, 2021. In return, MaineHealth received 6,500 preferred membership units.

The Company paid an additional capital contribution of \$2,000,000 to AMH Health Plans of Maine, Inc. on September 29, 2021.

The Company received a capital contribution of \$4,000,000 from Anthem Partnership Holding Company, LLC ("APHC") on June 28, 2021. In return, APHC received 4,000 preferred membership units.

The Company received a capital contribution of \$4,000,000 from MaineHealth on June 28, 2021. In return, MaineHealth received 4,000 preferred membership units.

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

For changes to the intercompany management and service arrangements see Note 10E. The amounts of transactions under such agreements are presented in Schedule Y, Part 2.

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

The Company has no transactions with related parties who are not reported on Schedule Y.

D. Amounts Due to or from Related Parties

At December 31, 2022 and 2021, the Company reported no amounts due from affiliates. At December 31, 2022 and 2021, the Company reported \$5,969,710 and \$53,094,668 due to affiliates, respectively. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. Management and Service Contracts and Cost Sharing Arrangements

The Company entered into an administrative services agreement with APHC and MaineHealth. Pursuant to these agreements, various administrative, management and support services are provided to or provided by the Company. Costs include expenses such as salaries, employees benefits, information technology, pharmacy benefits administration, communications, advertising, consulting services, rent, utilities, billing, accounting, underwriting, and product development which support the Company's operations.

The Company amended the administrative services agreement with APHC and MaineHealth to confirm reporting and oversight responsibilities relating to utilization management for behavioral health services.

In addition, the Company has entered into a joinder affiliated services agreement as part of the Master Services Agreement between Anthem affiliates and Beacon Health Strategies LLC and Beacon Health Options, Inc., effective January 1, 2021.

F. Guarantees or Contingencies for Related Parties

The Company did not enter into guarantees or undertakings for the benefit of an affiliate which would result in a material contingent exposure of the Company's or any affiliated insurer's assets or liabilities.

G. Nature of Control Relationships that Could Affect Operations or Financial Position

The Company is owned 50% by APHC and 50% by MaineHealth.

H. Amount Deducted for Investment in Upstream Company

The Company does not own shares of upstream intermediate entities or Elevance Health.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

The Company does not have investments in affiliates greater than 10% of admitted assets.

J. Write-down for Impairments of Investments in Subsidiaries, Controlled or Affiliated ("SCA") Companies

Not applicable.

K. Investment in a Foreign Insurance Subsidiary

The Company does not have investments in foreign insurance subsidiaries.

L. Investment in Downstream Non-insurance Holding Companies

The Company does not have investments in downstream non-insurance holding companies.

M. All SCA Investments

The Company has no SCA Investments.

N. Investment in Insurance SCAs

The Company does not have investments in Insurance SCAs.

O. SCA or SSAP 48 Entity Loss Tracking

The Company does not have losses on investments in Insurance SCAs and/or joint ventures, partnerships or LLCs.

11. Debt

A. Capital Notes and Other Debt

The Company had no capital notes or other debt outstanding at December 31, 2022 and 2021.

B. FHLB (Federal Home Loan Bank) Agreements

The Company had no FHLB agreements outstanding at December 31, 2022 and 2021.

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

A. Defined Benefit Plan

Not applicable - See Note 12G.

- **B.** Not applicable See Note 12G.
- C. Not applicable See Note 12G.
- **D.** Not applicable See Note 12G.

E. Defined Contribution Plans

Not applicable - See Note 12G.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

The Company participates in a nonqualified deferred compensation plan sponsored by Elevance Health which covers certain employees once the participant reaches the maximum contribution amount for the Elevance Health 401(k) Plan (the "401(k) Plan"). The deferred amounts are payable according to the terms and subject to the conditions of the deferred compensation plan. Elevance Health allocates a share of the total accumulated costs of this plan to the Company based on the number of allocated employees subject to the deferred compensation plan. The Company has no legal obligation for benefits under this plan.

The Company participates in the Elevance Health 401(k) Plan, sponsored by ATH Holding Company, LLC ("ATH Holding") and covering substantially all employees. Voluntary employee contributions are matched by ATH Holding subject to certain limitations. ATH Holding allocates a share of the total accumulated costs of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

The Company participates in a stock incentive compensation plan, sponsored by Elevance Health, providing incentive awards to non-employee directors and employees, consisting of Elevance Health stock options, restricted stock, restricted stock units, stock appreciation rights, performance shares, and performance units. Elevance Health allocates a share of the total share-based compensation expense of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

During 2022 and 2021, the Company was allocated the following costs or (credits) for these retirement benefits:

	 2022	2021	
Deferred compensation plan	\$ 2,296	\$ 3,201	
Defined contribution plan	236,532	242,237	
Stock incentive compensation plan	118,872	121,380	

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

A. Outstanding Shares

The Company has no common stock outstanding.

B. Preferred Stock

The Company has no preferred stock outstanding.

C. Dividend Restrictions

Under Maine law, the Company is limited in the amount of dividends that can be declared without regulatory approval. The Superintendent of Insurance must approve any dividend that, together with all dividends declared during the preceding twelve months, exceeds the greater of the net gain from operations for the twelve-month period ending

December 31 of the preceding year or 10% of the Company's surplus to policyholders as of December 31 of the preceding year as long as unassigned surplus is positive. Also, any dividend paid from other than unassigned funds will need the approval of the Superintendent of Insurance.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2023

Within the limitations of (C) above, the Company may not pay dividends during 2023 without prior approval.

F. Unassigned Surplus Restrictions

Unassigned surplus funds are not restricted at December 31, 2022.

G. Mutual Surplus Advances

Not applicable.

H. Company Stock Held for Special Purpose

There are no shares of stock held for special purposes at December 31, 2022.

I. Changes in Special Surplus Funds

There are no special surplus funds at December 31, 2022.

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment gains and losses was \$(4,750,622) at December 31, 2022.

K. Surplus Notes

The Company has not issued any surplus notes or debentures or similar obligations.

L. Restatement due to Prior Quasi-reorganizations

The Company had no restatements due to prior quasi-reorganizations.

M. Quasi-reorganizations over Prior 10 Years

The Company has not been involved in a quasi-reorganization during the past 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company had no contingent commitments at December 31, 2022 or 2021.

B. Assessments

(1) The Company is subject to guaranty fund and other assessments by the state in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies.

Other assessments are accrued either at the time of the assessment or at the time the losses are incurred.

- (2) Not applicable.
- (3) Not applicable.

C. Gain Contingencies

The Company has no gain contingencies at December 31, 2022 or 2021.

D. Claims-Related Extra Contractual Obligation and the Bad Faith Losses Stemming From Lawsuits

Not applicable.

E. Joint and Several Liabilities

Not applicable.

F. All Other Contingencies

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice ("DOJ") filed a civil lawsuit against Elevance Health, Inc. (f/k/a Anthem, Inc.) in the U.S. District Court for the Southern District of New York (the "New York District Court") in a case captioned *United States* v. Anthem, Inc. The DOJ's suit alleges, among other things, that Elevance Health falsely certified the accuracy of the diagnosis data they submitted to the Centers for Medicare and Medicaid Services ("CMS") for risk-adjustment purposes under Medicare Part C and knowingly failed to delete inaccurate diagnosis codes. The DOJ further alleges that, as a result of these purported acts, Elevance Health caused CMS to calculate the riskadjustment payments based on inaccurate diagnosis information, which enabled Elevance Health to obtain unspecified amounts of payments in Medicare funds in violation of the False Claims Act. The DOJ filed an amended complaint in July 2020, alleging the same causes of action but revising some of its factual allegations. In September 2020, Elevance Health filed a motion to transfer the lawsuit to the Southern District of Ohio, a motion to dismiss part of the lawsuit, and a motion to strike certain allegations in the amended complaint. In an opinion and order issued October 3, 2022, the New York District Court denied Elevance Health's motions, and the case will now proceed in that court. In November 2022, Elevance Health filed an answer. They intend to continue to vigorously defend this suit, which they believe is without merit; however, the ultimate outcome cannot be presently determined.

From time to time, the Company and certain of its subsidiaries are parties to various legal proceedings, many of which involve claims for coverage encountered in the ordinary course of business. The Company, like Health Maintenance Organizations ("HMOs") and health insurers generally, exclude certain healthcare and other services from coverage under their HMO, Preferred Provider Organizations and other plans. The Company is, in the ordinary course of business, subject to the claims of their enrollees arising out of decisions to restrict or deny reimbursement for uncovered services. The loss of even one such claim, if it results in a significant punitive damage award, could have a material adverse effect on the Company. In addition, the risk of potential liability under punitive damage theories may increase significantly the difficulty of obtaining reasonable reimbursement of coverage claims.

In addition to the lawsuits described above, the Company is also involved in other pending and threatened litigation of the character incidental to their business and is from time to time involved as a party in various governmental investigations, audits, reviews

and administrative proceedings. These investigations, audits, reviews and administrative proceedings include routine and special inquiries by state insurance departments, state attorneys general, the U.S. Attorney General and subcommittees of the U.S. Congress. Such investigations, audits, reviews and administrative proceedings could result in the imposition of civil or criminal fines, penalties, other sanctions and additional rules, regulations or other restrictions on the Company's business operations. Any liability that may result from any one of these actions, or in the aggregate, could have a material adverse effect on the Company's consolidated financial position or results of operations.

The Company has no other known material contingencies.

Provisions for uncollectible amounts

At December 31, 2022 and 2021, the Company reported admitted assets of \$13,028,415 and \$7,968,768, respectively, in premium receivables and receivables due from uninsured plans. Based upon the Company's experience, any uncollectible receivables are not expected to exceed \$130,903 that was nonadmitted at December 31, 2022; therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company's financial condition.

15. Leases

A. Lessee Operating Lease

The Company has no lessee leasing arrangements.

B. Lessor Leases

- (1) The Company has not entered into any operating leases.
- (2) The Company has not entered into any leveraged leases.

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

The Company has no significant financial instruments with off-balance sheet risk.

Financial instruments that potentially subject the Company to concentrations of credit risk consist primarily of investment securities. All investment securities are managed by professional investment managers within policies authorized by the board of directors. Such policies limit the amounts that may be invested in any one issuer and prescribe certain investee company criteria. As of December 31, 2022, there were no significant concentrations.

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

A. Transfers of Receivables Reported as Sales

Not applicable at December 31, 2022 and 2021.

B. Transfer and Servicing of Financial Assets

(1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At December 31, 2022 the fair value of securities loaned was \$2,252,583 and the carrying value of securities loaned was \$2,253,445.

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 December 31, 2022 and 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 ("ASO") Plans

Not applicable at December 31, 2022.

B. Administrative Services Contract ("ASC") Plans

Not applicable at December 31, 2022.

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

(2)	Receivable from	Receivable from Related to		2022	2021
	Federal government	ACA and Medicare cost sharing and reinsurance programs	\$	4,628,368 \$	3,446,916
	State government	ACA cost sharing and reinsurance programs, including Section 1332	\$	- \$	_
	Uninsured plans	Uninsured business, not including pharmaceutical rebate receivables	\$	- \$	_

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

No premiums were written by managing general agents or third party administrators during the years ended December 31, 2022 and 2021.

20. Fair Value Measurements

Α.

There are no assets or liabilities measured at fair value as of December 31, 2022 and 2021.

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

There are no investments in Level 3 as of December 31, 2022 and 2021.

- (3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.
- (4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes,

benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

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

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

There are no assets or liabilities measured at fair value.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2022 and 2021.

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	\$ 48,840,952	\$ 51,187,000	\$ 24,112,372	\$24,728,580	\$ —	\$	\$
Securities lending collateral asset	2,451,416	2,451,416	_	2,451,416	_	_	_

D. Not Practicable to Estimate Fair Value

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

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

A. Unusual or Infrequent Items

Not applicable at December 31, 2022 and 2021.

B. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2022 and 2021.

C. Other Disclosures

Assets in the amount of \$112,993 and \$116,263 at December 31, 2022 and 2021, respectively, were on deposit with government authorities or trustees as required by law.

The Bureau requires that the Company maintain a risk-based capital at no less than the greater of 375% of authorized control level risk-based capital or the minimum surplus requirements of 24-A M.R.S. Section 410.

D. Business Interruption Insurance Recoveries

The Company has reported no recoveries for business interruption for the years ended December 31, 2022 and 2021.

E. State Transferable and Non-Transferable Tax Credits

The Company did not have state transferable or non-transferable tax credits at December 31, 2022 and 2021.

F. Subprime Mortgage-Related Risk Exposure

- (1) The Company's investment strategy of providing safety and preservation of capital, sufficient liquidity to meet cash flow requirements and the attainment of a competitive after-tax investment return is supported by a well diversified portfolio consisting of many different types of investments. The portion of the Company's investment portfolio with subprime mortgage-related risk exposure is relatively small in comparison to the overall investment portfolio, and consists mainly of investment grade securities with no exposure to collateralized debt obligations. All mortgage related investments are monitored closely as part of the quarterly investment review performed by the Elevance Health Investment Impairment Review Committee.
- (2) The Company did not carry investments in subprime mortgage loans in its portfolio at December 31, 2022 or 2021.
- (3) The Company did not have subprime mortgage-related risk exposure at December 31, 2022 or 2021.
- (4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2022 or 2021.

G. Retained Assets

The Company does not have retained assets at December 31, 2022 and 2021.

H. Insurance-Linked Securities Contracts

Not applicable.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable.

22. Events Subsequent

Subsequent events have been considered through February 27, 2023 for the statutory statement issued on February 28, 2023. There were no events occurring subsequent to December 31, 2022 requiring recognition or disclosure.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

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

Yes () No (X)

If yes, give full details.

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

Yes () No (X)

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

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

Yes () No (X)

If yes, give full details.

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

Yes () No (X)

If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

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

\$0

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in

	force or which had existing reserves established by the Company as of the effective date of the agreement?
	Yes () No (X)
	If yes, give full details.
В.	Uncollectible Reinsurance
	The Company has no uncollectible reinsurance at December 31, 2022 and 2021.
C.	Commutation of Ceded Reinsurance
	The Company has not commuted ceded reinsurance during 2022 and 2021.
D.	Certified Reinsurer Rating Downgraded or Status Subject Revocation
	The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2022 and 2021.
E.	Reinsurance Credit
	(1) Not applicable.
	(2) Not applicable.
	(3) Not applicable.
	(4) Not applicable.
	(5) Not applicable.
	(6) Not applicable.
24. Re	etrospectively Rated Contracts & Contracts Subject to Redetermination
A.	The Company sells accident and health policies for which the premiums vary based on loss experience. The Company estimates retrospective premium adjustments through the review of each retrospectively rated account, comparing the claim development with that anticipated in the policy contracts.
В.	The Company records accrued retrospective premium as an adjustment to earned premium.
C.	All of the Company's net premiums written are subject to a retrospective rating feature.
D.	Not applicable.
E.	Risk-Sharing Provisions of the ACA
	(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)?No
	(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets,

Liabilities and Revenue for the Current Year

Not applicable.

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

Not applicable.

(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 increased by \$2,173,204 during 2022. This is approximately 8.1% of unpaid claims and claim adjustment expenses of \$26,758,523 as of December 31, 2021. The deficiency reflects the increase 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 2022. 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 at December 31, 2022 and 2021.

27. Structured Settlements

Not applicable at December 31, 2022 and 2021.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2022	\$ 3,141,947	\$ 8,324,603	\$ 5,182,656	\$ —	\$
9/30/2022	2,684,974	7,870,807	7,755,205	_	_
6/30/2022	2,959,999	8,029,746	7,860,887	168,859	
3/31/2022	2,581,474	6,979,465	6,856,258	123,208	_
12/31/2021	\$ 2,125,937	\$ 5,740,967	\$ 5,663,573	\$ 77,394	\$ —
9/30/2021	1,859,300	5,320,603	5,227,697	92,906	_
6/30/2021	1,989,514	3,754,397	3,682,823	71,574	
3/31/2021	1,955,064	4,921,486	4,878,634	42,851	_
12/31/2020	1,209,016	3,264,527	3,260,277	4,250	
9/30/2020	631,740	2,105,778	2,082,716	23,062	
6/30/2020	744,053	2,389,752	2,380,117	9,635	_
3/31/2020	449,890	1,002,420	1,002,420	_	_

B. Risk Sharing Receivables

Not applicable at December 31, 2022 and 2021.

29. Participating Policies

Not applicable at December 31, 2022 and 2021.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$	7,465,532
2. Date of the most recent evaluation of this liability	D	ecember 31, 2022
3. Was anticipated investment income utilized in the calculation?	Yes	No X

The Company had no liabilities related to premium deficiency reserves as of December 31, 2021.

31. Anticipated Salvage and Subrogation

The Company took into account estimated anticipated subrogation and other recoveries in its determination of the liability for unpaid claims and reduced the liability by \$254,000 and \$111,000 at December 31, 2022 and 2021, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.				
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	[X] No	[] N/A [1	
1.3	State Regulating?	Ma	aine		
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?	. Yes [X] No []	
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	0001	156039		
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	. Yes [] No [X]	
2.2	If yes, date of change:				
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made	12/3	1/2022		
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released				
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).				
3.4	By what department or departments? State of Maine Bureau of Insurance				
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	[] No	[] N/A [Х]	
3.6	Have all of the recommendations within the latest financial examination report been complied with?	[] No	[] N/A [Х]	
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business?	. Yes [] No [X		
4.2	4.12 renewals? During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct] No [X	J	
	premiums) of: 4.21 sales of new business?] No [X] No [X		
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	. Yes [] No [X]	
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.				
	1 2 3 Name of Entity NAIC Company Code State of Domicile				
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?] No [X]	
6.2	If yes, give full information:				
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?	. Yes [] No [X]	
7.2	If yes, 7.21 State the percentage of foreign control;			%	
	1 2 Nationality Type of Entity				

8.1 8.2	Is the company a subsidiary of a depository institution holding compan If the response to 8.1 is yes, please identify the name of the DIHC.					es []	No []	Κ]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fill fresponse to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commission	rms? city and state of the main office) of any affiliates r Office of the Comptroller of the Currency (OCC), the	egulated by	a fede	Y ral	es []	No []	X]
	1	2	3	4	5	6			
	Affiliate Name	Location (City, State)			FDIC	SEC	_		
8.5 8.6	Is the reporting entity a depository institution holding company with sig Federal Reserve System or a subsidiary of the depository institution for If response to 8.5 is no, is the reporting entity a company or subsidiary	olding company?				es []	No [2	Х]
0.0	Federal Reserve Board's capital rule?			Yes	[]	No [Χ]	N/A	[]
9.	What is the name and address of the independent certified public according to the Ernst & Young LLP, 111 Monument Circle, Suite 4000, Indianapolis, IN	N 46204							
10.1	Has the insurer been granted any exemptions to the prohibited non-au requirements as allowed in Section 7H of the Annual Financial Reportillaw or regulation?	ing Model Regulation (Model Audit Rule), or substa	intially simil	ar state	Ү	es []	No []	Х]
10.2	If the response to 10.1 is yes, provide information related to this exemp	ption:				-		-	
	Has the insurer been granted any exemptions related to the other requallowed for in Section 18A of the Model Regulation, or substantially sin	uirements of the Annual Financial Reporting Model milar state law or regulation?	Regulation	as		es []	No []	Х]
10.4	If the response to 10.3 is yes, provide information related to this exempton of the response to 10.3 is yes, provide information related to this exempton.								
10.5	Has the reporting entity established an Audit Committee in compliance					No I	1	N/A	r 1
10.6	If the response to 10.5 is no or n/a, please explain					NO []	IN/ A	
11.	What is the name, address and affiliation (officer/employee of the reportirm) of the individual providing the statement of actuarial opinion/certific Claudia Ellis, ASA, MAAA, Director & Actuary, II (employee) 2455 Mos	orting entity or actuary/consultant associated with a fication?	n actuarial o	onsultir	ng				
12.1						1 20	1	No F	y 1
12.1		estate holding company			[co [1	NO [/	, 1
		rcels involved							
		usted carrying value							
12.2	If, yes provide explanation:								
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITI	ES ONLY:							
13.1	What changes have been made during the year in the United States m	•							
	Does this statement contain all business transacted for the reporting e Have there been any changes made to any of the trust indentures duri	ntity through its United States Branch on risks whe	rever locate	d?	Ү	es [-	No []
13.3	If answer to (13.3) is yes, has the domiciliary or entry state approved the	9 ,				es [-	No [
13.4 14.1					5 []	INO [J	N/A	l J
	similar functions) of the reporting entity subject to a code of ethics, whi a. Honest and ethical conduct, including the ethical handling of actual relationships:	ich includes the following standards?	······		Ү	es [X	[]	No []
	b. Full, fair, accurate, timely and understandable disclosure in the peric c. Compliance with applicable governmental laws, rules and regulation		tity;						
	d. The prompt internal reporting of violations to an appropriate person	or persons identified in the code; and							
14.11	e. Accountability for adherence to the code. If the response to 14.1 is No, please explain:								
14.2	Has the code of ethics for senior managers been amended?					es [X	(]	No []
14.21	If the response to 14.2 is yes, provide information related to amendme								
1/1 2	Code amended to reflect name change from Anthem to Elevance Hea					٦ ٥٥	1	No F	v 1
	Have any provisions of the code of ethics been waived for any of the s If the response to 14.3 is yes, provide the nature of any waiver(s).	pecineu onicers?			Ү	es [1	No []	7]

, , , , , , , , , , , , , , , , , , , 					
1 American Bankers Association	2		3	4	ŀ
(ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances T	hat Can Trigger the Letter of Credit	Amo	ount
	g c. comming Dam Harris		at our rigger the Letter or creati		
	BOARI	D OF DIRECTORS			
	or sale of all investments of the reporting entity passed of	upon either by the board of	directors or a subordinate committee	Yes [X] No
thereof?	ng entity keep a complete permanent record of the proc			Yes [X] No
part of any of its	g entity an established procedure for disclosure to its bo officers, directors, trustees or responsible employees th	nat is in conflict or is likely to	conflict with the official duties of such	Yes [X] No
				-	
		FINANCIAL			
	ent been prepared using a basis of accounting other that siples)?	n Statutory Accounting Prin		Yes [] No
	aned during the year (inclusive of Separate Accounts, ex	xclusive of policy loans):	20.11 To directors or other officers	\$	
			20.12 To stockholders not officers20.13 Trustees, supreme or grand (Fraternal Only)		
Total amount of	loans outstanding at the end of year (inclusive of Separa	rate Accounts exclusive of	•		
policy loans):	isano satistanang at the sna or year (merebit en separi	a.c. / 1000a.ma, c./a.a	20.21 To directors or other officers	\$	
			20.22 To stockholders not officers	\$	
			20.23 Trustees, supreme or grand		
			(Fraternal Only)	\$	
obligation being	reported in this statement subject to a contractual obligation of the statement?				
ii yes, state the a	amount thereof at December 31 of the current year:		21.21 Rented from others		
			21.22 Borrowed from others		
			21.23 Leased from others		
D 1122 1 . 1	and the dealers are sent to the control of the cont		21.24 Other	\$	
Does this staten	nent include payments for assessments as described in ation assessments?	the Annual Statement Instr	uctions other than guaranty fund or	1 20V	1 No
If answer is yes:	ation assessments:		21 Amount paid as losses or risk adjustme		
			22 Amount paid as expenses		
			23 Other amounts paid		
Does the reporti	ng entity report any amounts due from parent, subsidiari				
	ny amounts receivable from parent included in the Page				
Does the insurer	utilize third parties to pay agent commissions in which	the amounts advanced by t	he third parties are not settled in full within	v .	
	o 24.1 is yes, identify the third-party that pays the agents			-	
		Is the			
		Third-Party Ager	nt		
	Nove of Third Dad	a Related Party	'		
	Name of Third-Party	(Yes/No)			

25.02	If no, give full and comp	olete information relating thereto						
25.03	whether collateral is car	rried on or off-balance sheet. (an alte	program including value for collateral and amount of loaned securities, and rnative is to reference Note 17 where this information is also provided)					
25.04	For the reporting entity's	s securities lending program, report a	mount of collateral for conforming programs as outlined in the Risk-Based Capital	\$		2	,451	,416
25.05	For the reporting entity's	s securities lending program, report a	mount of collateral for other programs.	\$				
25.06			ic securities) and 105% (foreign securities) from the counterparty at the	X] N	0 [] N	I/A [[]
25.07	Does the reporting entit	y non-admit when the collateral recei	ved from the counterparty falls below 100%? Yes [X] N	0 [] N	I/A [i]
25.08	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending?				0 [] N	I/A [[]
25.09	For the reporting entity's	s securities lending program state the	e amount of the following as of December 31 of the current year:					
	25.092	Total book adjusted/carrying value of	al assets reported on Schedule DL, Parts 1 and 2 f reinvested collateral assets reported on Schedule DL, Parts 1 and 2eported on the liability page.	.\$		2	,451	1,416
26.1	control of the reporting	entity or has the reporting entity sold	ng entity owned at December 31 of the current year not exclusively under the or transferred any assets subject to a put option contract that is currently in 25.03).	Yes	[X] No]]
26.2	If yes, state the amount	thereof at December 31 of the curre	26.21 Subject to repurchase agreements	\$. 112	2,993
26.3	For category (26.26) pro	ovide the following:						
		1 Nature of Restriction	2 Description		3 Amou]
27.1	Does the reporting entit	ty have any hedging transactions repr	orted on Schedule DB?	Yes	ſ	1 No	ΙX	_ (]
		nsive description of the hedging progr	ram been made available to the domiciliary state? Yes [-		_	_
INES 2	7.3 through 27.5: FOR L	LIFE/FRATERNAL REPORTING EN	TITIES ONLY:					
27.3	Does the reporting entit	y utilize derivatives to hedge variable	annuity guarantees subject to fluctuations as a result of interest rate sensitivity? $% \left(\frac{1}{2}\right) =\frac{1}{2}\left(\frac$	Yes	[] No	[X	[]
27.4	If the response to 27.3 i	is YES, does the reporting entity utiliz	e: 27.41 Special accounting provision of SSAP No. 108	Yes	[] No] No] No	[]
27.5	following: The reporting of Hedging strate Actuarial certific reserves and p Financial Office Hedging Strate	entity has obtained explicit approval fi gy subject to the special accounting a ication has been obtained which indic provides the impact of the hedging streer Certification has been obtained wh	ccounting provisions of SSAP No. 108, the reporting entity attests to the	.,] No]
28.1			31 of the current year mandatorily convertible into equity, or, at the option of the	Yes]] No	[X	(]
28.2	If yes, state the amount	thereof at December 31 of the curre	nt year.	\$				
29.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?]	
29.01	For agreements that co	mply with the requirements of the NA	IC Financial Condition Examiners Handbook, complete the following:					
	Nam	1 ne of Custodian(s)	2 Custodian's Address 383 Madison Ave, New York, NY 10179					
	JP Morgan Chase Bank,	N.A						

GENERAL INTERROGATORIES

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

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

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

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

1	2
Name of Firm or Individual	Affiliation
Elevance Health, Inc.	I
Income Research & Management	U
Loomis, Sayles & Company, LP	U

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?.....

Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?.....

Yes [] No [X]

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

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
			Securities Exchange	
105377	Loomis, Sayles & Company, LP	JIZPN2RX3UMN0YIDI313	Commission	NO
			Securities Exchange	
104863	Income Research & Management		Commission	NO

30.2 If yes, complete the following schedule:

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

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

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

GENERAL INTERROGATORIES

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

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
31.1 Bonds	51,187,000	48,840,952	(2,346,048)
31.2 Preferred stocks	0		0
31.3 Totals	51,187,000	48,840,952	(2,346,048)

31.4	Describe the sources or methods utilized in determining the fair values: Fair values were obtained from third-party pricing sources. If a security was not priced by a third-party pricing source, internal analytical systems or broker quotes were utilized.				
32.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes []	No [Х]
32.2	If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes []	No []
32.3	If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:				
	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Yes [Х]	No []
34.	By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities?	Yes []	No [Х]
35.	By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. Has the reporting entity self-designated PLGI securities?	Yes []	No [X]
36.	By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?	Yes [1	No [X]
37.	By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following: a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date. b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties. c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review. d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments. Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?] No	[X]	N/A	[

38.1	Does the reporting entity directly hold cryptocurrencies?			Yes [] No [X]
38.2	If the response to 38.1 is yes, on what schedule are they reported?				
39.1	Does the reporting entity directly or indirectly accept cryptocurrencies as payments for p	premiums on policies?		Yes [] No [X]
39.2		ately converted to U.S. dollars?] No []] No []
39.3	If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of	premiums or that are held direc	tly.		
	1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums		
	OTHER				
40.1	Amount of payments to trade associations, service organizations and statistical or rating	g bureaus, if any?		\$	8,385
40.2	List the name of the organization and the amount paid if any such payment represented service organizations and statistical or rating bureaus during the period covered by this		ents to trade associati	ons,	
	1 Name	A	2		
	Blue Cross Blue Shield Association	AIIIC	8,385		
41.1	Amount of payments for legal expenses, if any?			\$	312,716
41.2	List the name of the firm and the amount paid if any such payment represented 25% or during the period covered by this statement.	more of the total payments for I	egal expenses		
	1	_	2		
	OMELVENY & MYERS Total		, , , , , , , , , , , , , , , , , , ,		
42.1	Amount of payments for expenditures in connection with matters before legislative bodi	·		\$	10,618
42.2	List the name of the firm and the amount paid if any such payment represented 25% or connection with matters before legislative bodies, officers, or departments of governments.				
	1 Name	Amo	2 ount Paid		
	Preti Flaherty Beliveau Pachios LLP Lobbying expenses disclosed reflect amounts reported in the Lobbyist Disclosure F the Secretary of State as well as the cost of external contractors who provided I the Company. The amount may include expenses that may have been paid by an affili Company and, as a result, may not be included in the Underwriting Gain reported o Annual Statement.	Reports filed with obbying services to iate on behalf of the on page 4 of the 2022			

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 1.2	Does the reporting entity have any direct Medicare Supplement Insurance in for If yes, indicate premium earned on U.S. business only.			
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insuran 1.31 Reason for excluding			
	•			
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alie			
1.5	Indicate total incurred claims on all Medicare Supplement Insurance		\$	0
1.6	Individual policies:	Most current three years:		
		1.61 Total premium earned		
		1.62 Total incurred claims	\$	0
		1.63 Number of covered lives		
		All years prior to most current three years:		
		1.64 Total premium earned	¢	0
		1.65 Total incurred claims		
		1.66 Number of covered lives		
		1.00 114111561 01 0070104 11700	•••	
1.7	Group policies:	Most current three years:		
		1.71 Total premium earned	\$	0
		1.72 Total incurred claims		
		1.73 Number of covered lives		
		All years prior to most current three years:		0
		1.74 Total premium earned		
		1.75 Total incurred claims		
		1.76 Number of covered lives		0
_	Haalib Taab			
2.	Health Test:	1 2		
		Current Year Prior Year		
	2.1 Premium Numerator			
	2.3 Premium Ratio (2.1/2.2)			
	2.4 Reserve Numerator			
	2.5 Reserve Denominator			
	2.6 Reserve Ratio (2.4/2.5)	1.0001.000		
3.2	returned when, as and if the earnings of the reporting entity permits?		Yes []	No [X]
4.1	Have copies of all agreements stating the period and nature of hospitals', phys dependents been filed with the appropriate regulatory agency?		Yes [X]	No []
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do the	ese agreements include additional benefits offered?	Yes []	No []
5.1	Does the reporting entity have stop-loss reinsurance?		Yes []	No [X]
5.2	If no, explain:		.00 []	[]
	Elevance Health, Inc. will assume, pay, and discharge the obligations in the ev	/ent the Company is insolvent.		
5.3	Maximum retained risk (see instructions)	5.31 Comprehensive Medical	. \$	0
	(5.32 Medical Only	\$	n
		5.33 Medicare Supplement	\$	n
		5.34 Dental & Vision		
		5.35 Other Limited Benefit Plan	. Ф	٥
		5.36 Other	Φ	٥
6.	Describe arrangement which the reporting entity may have to protect subscribe hold harmless provisions, conversion privileges with other carriers, agreements agreements:	ers and their dependents against the risk of insolvency including ts with providers to continue rendering services, and any other	. •	
	Physician and hospital contracts contain provisions, including hold harmless aginsolvency.			
7.1	Does the reporting entity set up its claim liability for provider services on a serv	/ice date basis?	Yes [X]	No []
7.2	If no, give details			
8.	Provide the following information regarding participating providers:	8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year		
9.1	Does the reporting entity have business subject to premium rate guarantees?		Yes []	No [X]
9.2	If yes, direct premium earned:	9.21 Business with rate guarantees between 15-36 months. 9.22 Business with rate guarantees over 36 months		

10.1	Does the reporting entity have Incentive Pool, Withh	old or Bonus Ar	rangements in its p	provider contracts?	·		Yes [X]	No []
10.2	If yes:		10 10	0.22 Amount actua 0.23 Maximum am	ount payable bonus ally paid for year bor ount payable withhount ally paid for year wit	nuses olds	\$	2,832,557
11.1	Is the reporting entity organized as:			11.13 An Indivi	al Group/Staff Mode dual Practice Assoc Model (combinatior	ciation (IPA), or,	Yes [] No [X]] No [X]] No [X]
11.2 11.3 11.4	Is the reporting entity subject to Statutory Minimum (If yes, show the name of the state requiring such min If yes, show the amount required.	nimum capital a	nd surplus				\$	No [] Maine 24,388,450 No [X]
11.5 11.6	Is this amount included as part of a contingency rese If the amount is calculated, show the calculation 250% of Health Risk-Based Capital Authorized Cont							NO [X]
12.	List service areas in which reporting entity is license	d to operate:						
			Name of Service					
13.1	Do you act as a custodian for health savings accoun	ts?					Yes []	No [X]
13.2	If yes, please provide the amount of custodial funds	held as of the re	porting date				\$	
13.3	Do you act as an administrator for health savings ac	counts?					Yes []	No [X]
13.4	If yes, please provide the balance of funds administe	ered as of the re	porting date				\$	
14.1 14.2	Are any of the captive affiliates reported on Schedule If the answer to 14.1 is yes, please provide the follow		orized reinsurers?			Yes [] No [] N/A [X]
	1	2	3	4		Supporting Reserv		
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
15.	Provide the following for individual ordinary life insur ceded):	ance* policies (l	J.S. business only	,	. W		ļ	
				15.2 7	Direct Premium Write Total Incurred Claim Number of Covered	ıs	\$	0
			nary Life Insurance					
	Term(whether full und Whole Life (whether f							
	Variable Life (with or	without seconda	ry gurarantee)	ig, jot loodo, onort	тонн арр у			
	Universal Life (with or Variable Universal Life			antee)				
16.	Is the reporting entity licensed or chartered, registered	ed, qualified, eliç	gible or writing busi	iness in at least tw	o states?		Yes [] No	o [X]
16.1	If no, does the reporting entity assume reinsurance to domicile of the reporting entity?						Yes [] No	o [X]

FIVE-YEAR HISTORICAL DATA

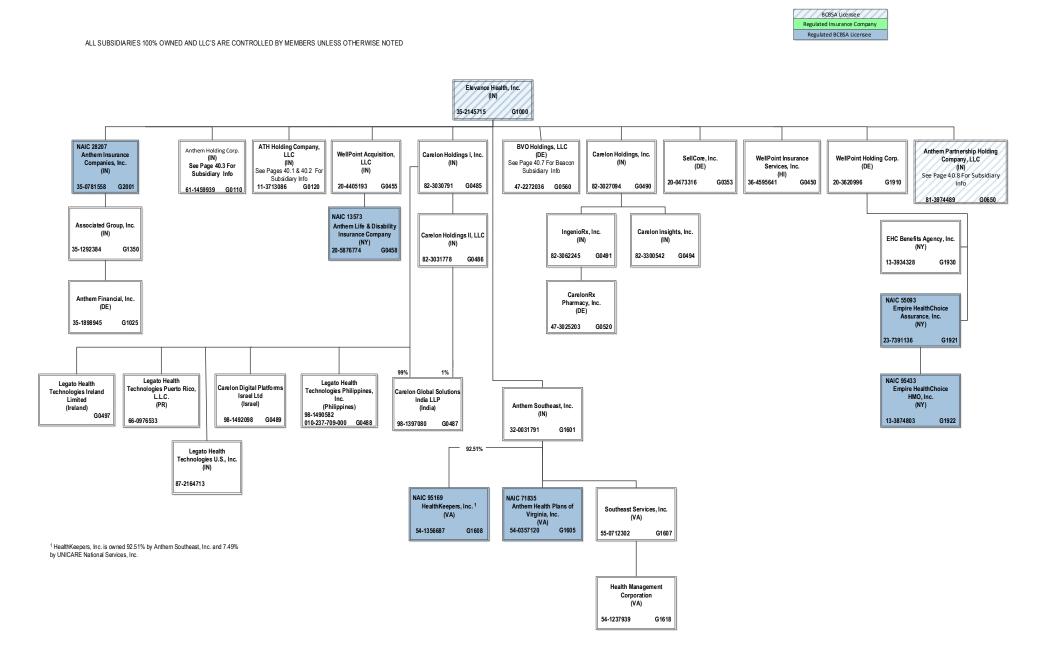
		2022	2 2021	3 2020	4 2019	5 2018
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	96,659,501	113,783,409	54,566,885	6,715,354	
2.	Total liabilities (Page 3, Line 24)	57,775,263	83,041,704	40,465,057	360,286	
3.	Statutory minimum capital and surplus requirement	24,388,450	16,092,180	8,930,955	27,358	
4.	Total capital and surplus (Page 3, Line 33)	38,884,238	30,741,705	14,101,828	6,355,068	
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	224,449,133	169,263,979		0	
6.	Total medical and hospital expenses (Line 18)					
7.	Claims adjustment expenses (Line 20)					
8.	Total administrative expenses (Line 21)					
9.	Net underwriting gain (loss) (Line 24)					
10.	Net investment gain (loss) (Line 27)					
11.	Total other income (Lines 28 plus 29)					
12.	Net income or (loss) (Line 32)					
	Cash Flow (Page 6)	, , , , , ,	(1)	, , , ,	,,,,,,,	
13.	Net cash from operations (Line 11)	(13.045.467)	(676.319)	11.164.297	(180,426)	
10.	Risk-Based Capital Analysis		(0.0,0.0)		(100, 120,	
14.	Total adjusted capital	38 884 238	30 741 705	14 101 828	6 355 068	
15.	Authorized control level risk-based capital					
10.	Enrollment (Exhibit 1)		7,202,401			
16.	Total members at end of period (Column 5, Line 7)	17 201	14 152	7 646		
17.	Total members months (Column 6, Line 7)			69,079		
17.	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0	202,037	100,300			
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)		88.3	84.1	0.0	
20.	Cost containment expenses			1.8		
21.	Other claims adjustment expenses					
22.	Total underwriting deductions (Line 23)					
23.	Total underwriting gain (loss) (Line 24)	(13.1)	(3.7)	(1.0)	0.0	
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 17, Col. 5)	27,575,194	10,559,035			
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	26,257,959	12,792,387	0		
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0		0		
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)		0	0	0	
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	3,749,378	3,936,356	2,238,256	0	
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0		0		
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31	3,749,378	3,936,356	2,238,256	0	
33.	Total investment in parent included in Lines 26 to					

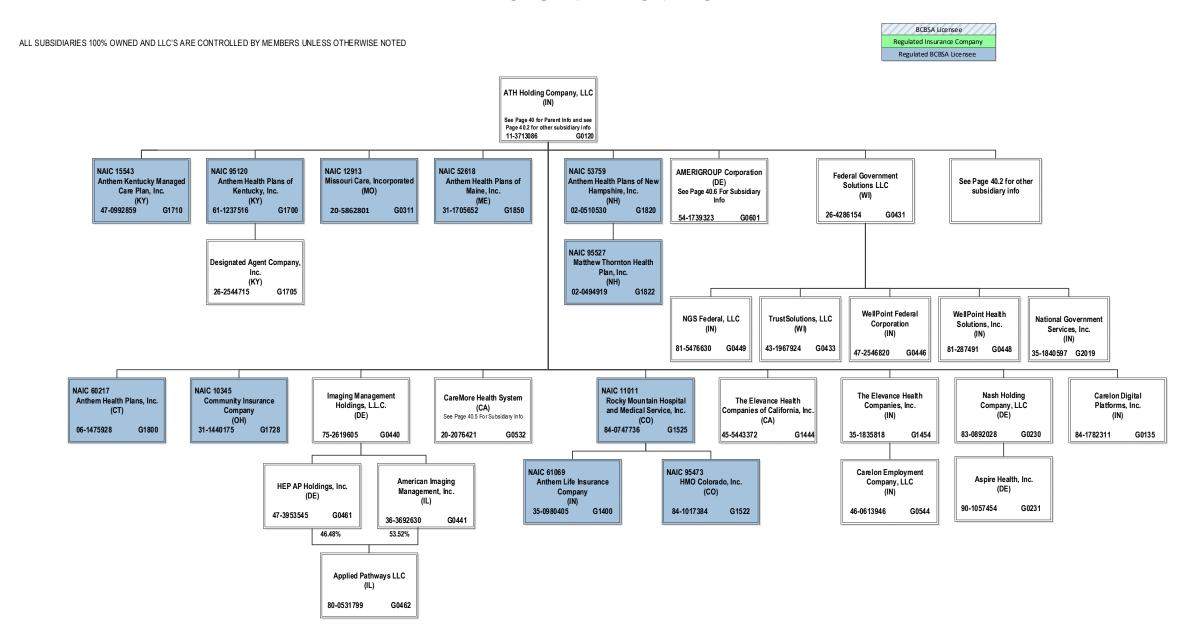
SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

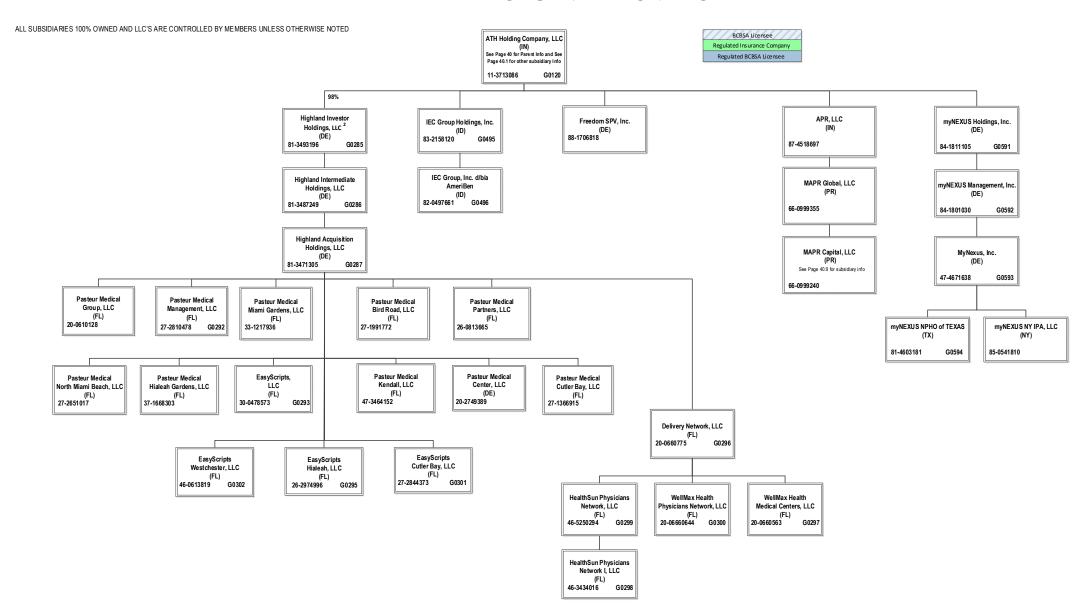
Allocated by States and Territories

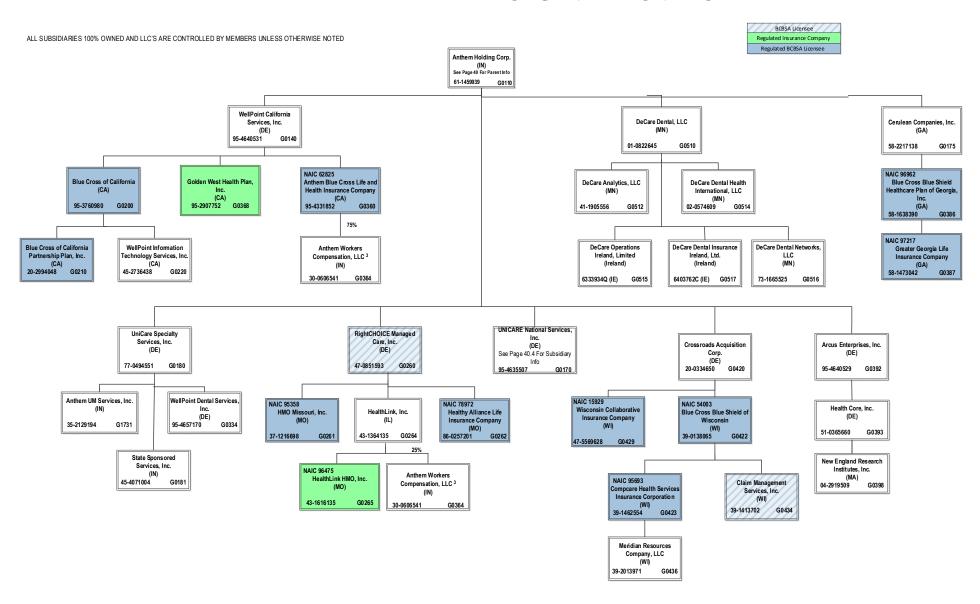
	Allocated by States and Territories 1 Direct Business Only											
	States, etc.		Active Status (a)	2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1.	Alabama	AL	N								0	
2.	Alaska		N								0	
	Arizona	ΑZ	N								0	
	Arkansas		N								0	
5.	California Colorado		N								0	
6. 7.	Connecticut		N N								0	
8.	Delaware	DE	N								0	
	District of Columbia	DC	N								0	
10.	Florida	FL	N								0	
11.	Georgia	-	N								0	
	Hawaii		N								0	
	Idaho	ID 	N								0	
	IllinoisIndiana	IL IN	N N								0	
	lowa		N								0	
	Kansas		N								0	
	Kentucky		N								0	
	Louisiana		N								0	
	Maine		L		224,429,321						224,429,321	
21.	Maryland		N								0	
	Massachusetts	MA	N								0	
	Michigan	MI	N N								0	
	Minnesota Mississippi		N N								0	
26.	Missouri	MO	N								0	
	Montana		N								0	
28.	Nebraska	NE	N								0	
29.	Nevada	NV	N								0	
	New Hampshire		N								0	
	New Jersey		N								0	
32.	New Mexico		N								0	
	New York North Carolina		N								0	
	North Dakota		N								0	
36.	Ohio		N								0	
37.	Oklahoma	-	N								0	
38.	Oregon	OR	N								0	
39.	Pennsylvania	PA	N								0	
	Rhode Island		N								0	
41.	South Carolina	SC	N								0	
42.	South Dakota	SD	N								0	
	Tennessee Texas	TN TX	N N								0	
	Utah	UT	N								0	
_	Vermont		N								0	
	Virginia		N								0	
48.	Washington	WA	N								0	
	West Virginia		N								0	
	Wisconsin		N								0	
	Wyoming	WY	N								0	
52. 53.	American Samoa Guam	AS GU	N								0	
	Puerto Rico		N								0	
	U.S. Virgin Islands		N								0	
	Northern Mariana											
	Islands		N								0	
	Canada	CAN	N					ļ			0	
58.	Aggregate Other Aliens	ОТ	XXX	0	0	0	0	0	0	0	0	n
59.	Subtotal		XXX	0	224,429,321	0	0	0	0	0	224,429,321	0
60.	Reporting Entity Contributions for Er				, ,							
61.	Benefit Plans Totals (Direct Busine		XXX	0	224,429,321	0	0	0	0	0	224,429,321	0
J1.	DETAILS OF WRITE		^^^	U	LLT, TLU, OL 1	U U	U	1	U	0	LLT, 743, 341	0
58001.			XXX									
58002.			XXX									
58003.			XXX					ļ				
58998.	Summary of remainir write-ins for Line 58 for overflow page		XXX	0	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 f 58003 plus 58998)(L											
	above) e Status Counts:		XXX	0	0	0	0	0	0	0	0	0

(a)	Active	Status	Counts:

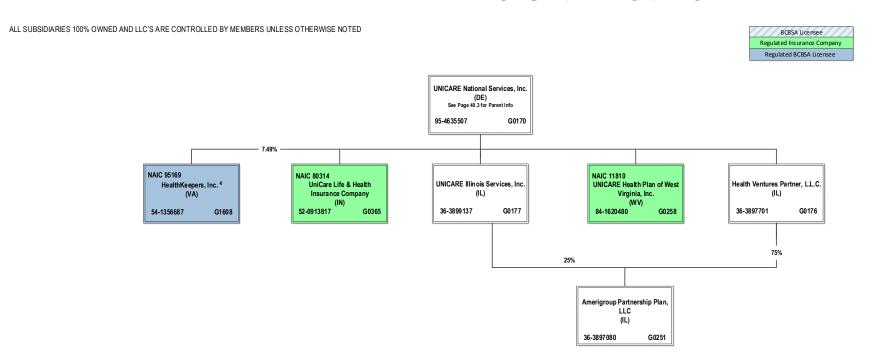








 $^{^3}$ Anthem Workers' Compensation, LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.



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

40.5

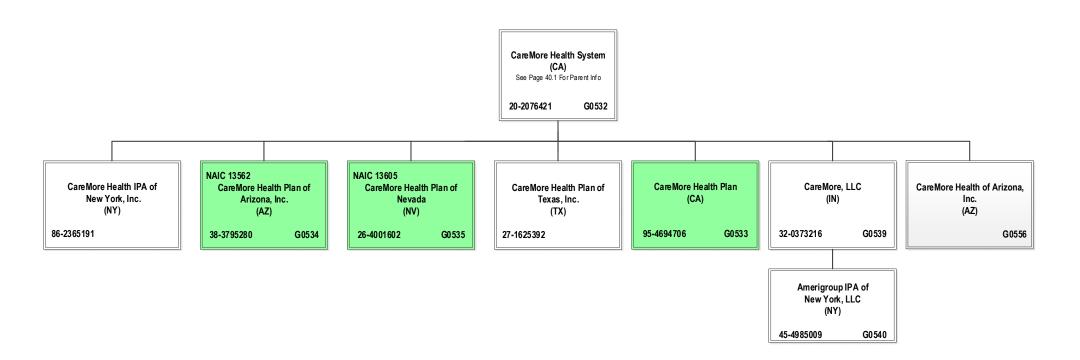
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

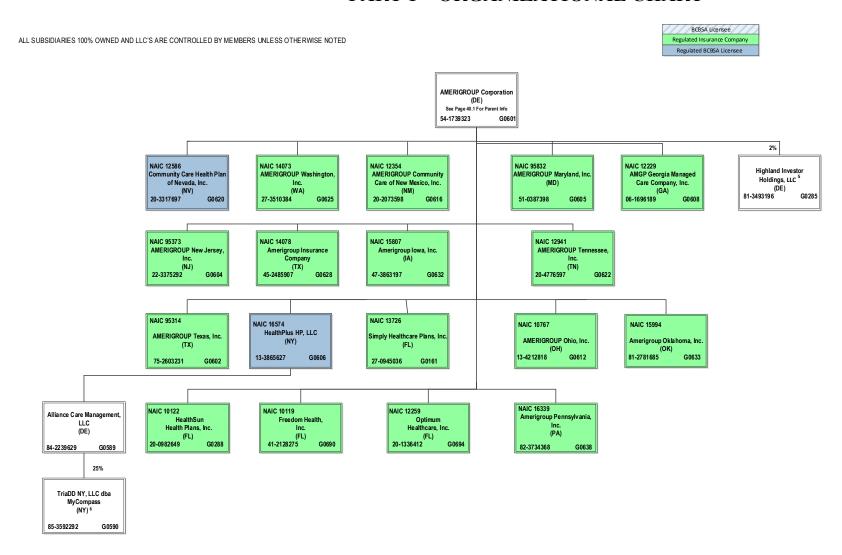
BCBSA Licensee

Regulated Insurance Company

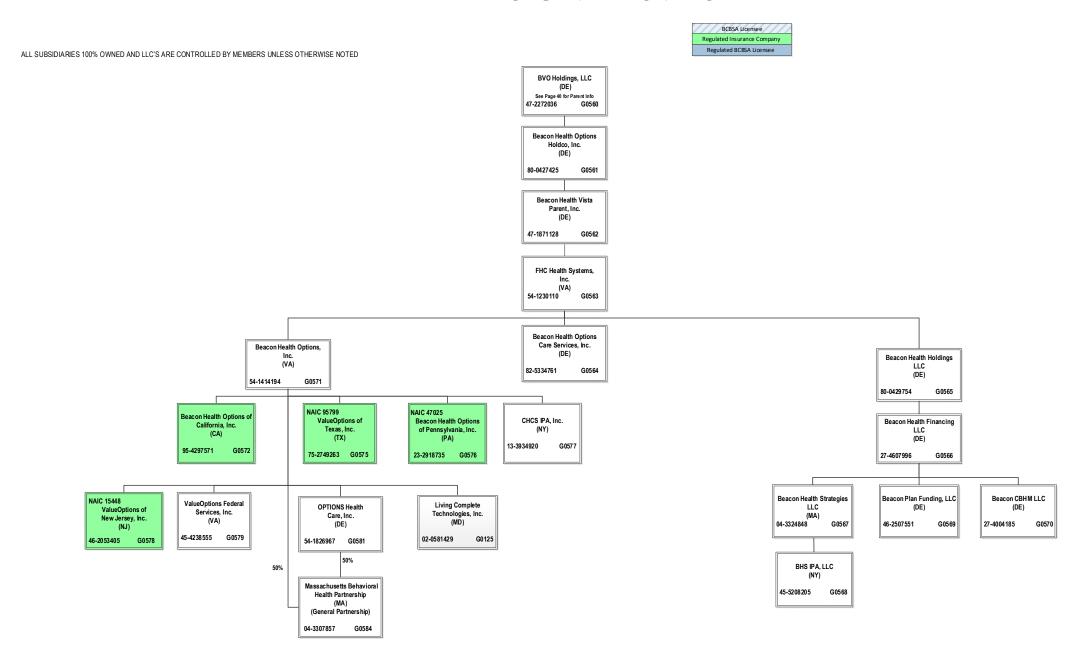
Regulated BCBSA Licensee

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



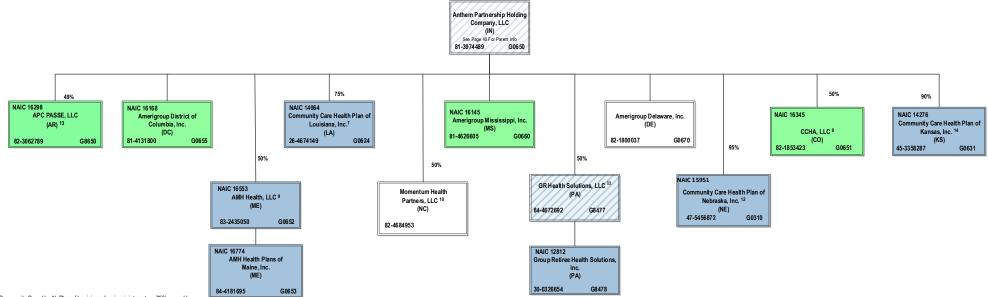


⁵ Amerigroup Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.



BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

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



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

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

⁹ AMH Health, LLC is a joint venture 50% owned by MaineHealth (non-affiliate) and 50% owned by Anthem Partnership Holding Company, LLC

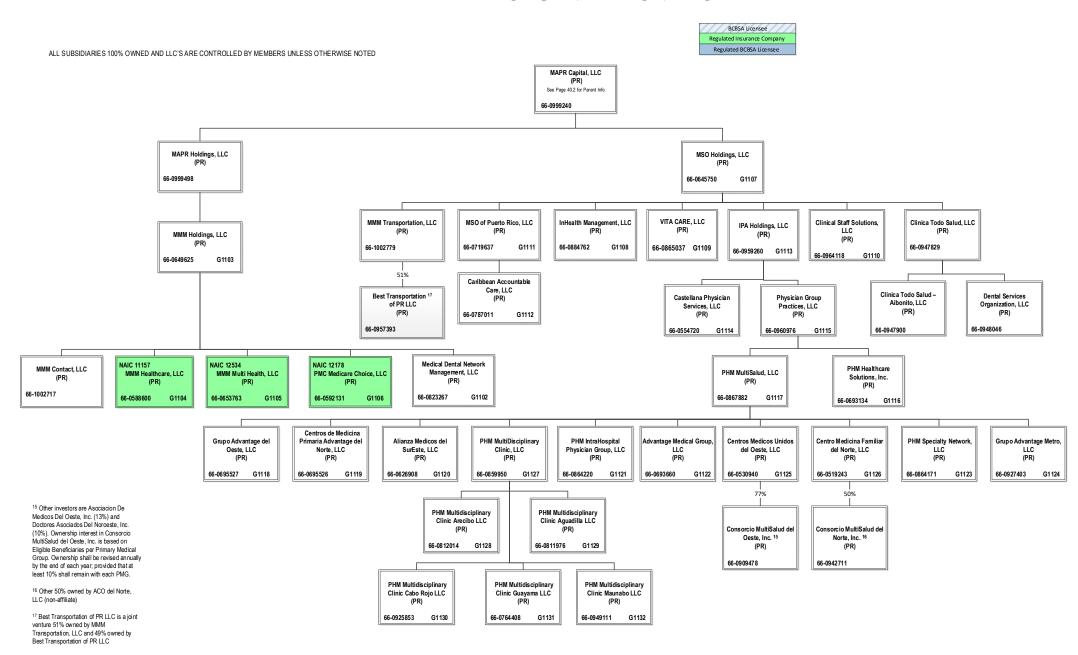
Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)

¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (nonaffiliate)

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

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

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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AMH Health, LLC OVERFLOW PAGE FOR WRITE-INS

NONE