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HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Anthem HealthChoice HMO, Inc.

NAIC Group Code 0671 (Current) 0671 (Prior) NAIC Company Code 95433 Employer's ID Number 13-3874803

Organized under the Laws of New York, State of Domicile or Port of Entry NY

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 03/05/1996 Commenced Business 03/19/1996

Statutory Home Office 1 Penn Plz, 35th Floor (Street and Number), New York, NY, US 10119 (City or Town, State, Country and Zip Code)

Main Administrative Office 1 Penn Plz, 35th Floor (Street and Number)
New York, NY, US 10119 (City or Town, State, Country and Zip Code), 212-563-5570 (Area Code) (Telephone Number)

Mail Address 1 Penn Plz, 35th Floor (Street and Number or P.O. Box), New York, NY, US 10119 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 220 Virginia Avenue (Street and Number)
Indianapolis, IN, US 46204 (City or Town, State, Country and Zip Code), 800-331-1476 (Area Code) (Telephone Number)

Internet Website Address www.elevancehealth.com

Statutory Statement Contact Leigh Barrett (Name), 317-432-6988 (Area Code) (Telephone Number)
leigh.barrett@elevancehealth.com (E-mail Address), 317-488-6200 (FAX Number)

OFFICERS

President, Chairperson and Chief Executive Officer	Victor John DeStefano	Treasurer	Eric (Rick) Kenneth Noble
Secretary	Jay Harry Wagner	Assistant Secretary	Patrick James O'Keeffe

OTHER

Vincent Edward Scher, Assistant Treasurer

DIRECTORS OR TRUSTEES

Victor John DeStefano
Lois Susan Freedman
Patrick James O'Keeffe
Neil Christopher Steffens

State of Indiana
County of Marion SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to

Signed by: Victor DeStefano D9E73B1C78C24A2...
Victor John DeStefano
President, Chairperson and Chief Executive Officer

DocuSigned by: Jay Wagner 12E402B114634B3...
Jay Harry Wagner
Secretary

DocuSigned by: Eric Noble E598440298764FA...
Eric (Rick) Kenneth Noble
Treasurer

Subscribed and sworn to before me this 21st day of February 2025

Louanna Stiner
Executive Admin Assistant
06/29/31

LOUANNA STINER
Notary Public - Seal
Marion County - State of Indiana
Commission Number NP0749866
My Commission Expires Jun 29, 2031

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

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)	235,690,069		235,690,069	239,890,020
2.	Stocks (Schedule D):				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			0	0
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 ($ 14,516,288 , Schedule E - Part 1), cash equivalents ($ 102,000,000 , Schedule E - Part 2) and short-term investments ($ ..... , Schedule DA)	116,516,288		116,516,288	5,422,746
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)	9,057,553		9,057,553	4,536,485
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	361,263,910	0	361,263,910	249,849,251
13.	Title plants less $ ..... charged off (for Title insurers only)			0	0
14.	Investment income due and accrued	2,384,782		2,384,782	2,264,071
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	3,689,189	1,171,339	2,517,850	1,897,350
	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 ($ 1,213,770) and contracts subject to redetermination ($ 20,638,708)	21,852,478		21,852,478	29,558,766
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	3,028,507	191,488	2,837,019	638,681
18.1	Current federal and foreign income tax recoverable and interest thereon			0	0
18.2	Net deferred tax asset	7,639,791		7,639,791	4,839,385
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets ($ .....)	803,083	803,083	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates			0	0
24.	Health care ($ 4,653,239) and other amounts receivable	31,498,739	26,845,500	4,653,239	4,514,380
25.	Aggregate write-ins for other-than-invested assets	2,743,147	99,183	2,643,964	5,010,230
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	434,903,626	29,110,593	405,793,033	298,572,114
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28.	Total (Lines 26 and 27)	434,903,626	29,110,593	405,793,033	298,572,114
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Prepaid expenses	2,369,390	68,905	2,300,485	1,191,367
2502.	New York assessment	149,867		149,867	600,008
2503.	Blue Card program receivables	126,497	25,278	101,219	39,543
2598.	Summary of remaining write-ins for Line 25 from overflow page	97,393	5,000	92,393	3,179,312
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	2,743,147	99,183	2,643,964	5,010,230

LIABILITIES, CAPITAL AND SURPLUS

		Current Year			Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less $ 0 reinsurance ceded)	66,922,159		66,922,159	81,189,844
2.	Accrued medical incentive pool and bonus amounts	41,534,115		41,534,115	39,186,883
3.	Unpaid claims adjustment expenses	1,643,381		1,643,381	1,855,175
4.	Aggregate health policy reserves, including the liability of $ 0 for medical loss ratio rebate per the Public Health Service Act	1,651,242		1,651,242	5,093,429
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserves			0	0
7.	Aggregate health claim reserves			0	0
8.	Premiums received in advance	75,115		75,115	256,749
9.	General expenses due or accrued	3,581,509		3,581,509	1,002,092
10.1	Current federal and foreign income tax payable and interest thereon (including $ on realized capital gains (losses))	1,330,650		1,330,650	1,318,320
10.2	Net deferred tax liability			0	0
11.	Ceded reinsurance premiums payable			0	0
12.	Amounts withheld or retained for the account of others	1,675,409		1,675,409	3,388,135
13.	Remittances and items not allocated	1,777,767		1,777,767	1,021,128
14.	Borrowed money (including $ current) and interest thereon $ (including $ current)			0	0
15.	Amounts due to parent, subsidiaries and affiliates	74,986,924		74,986,924	44,872,717
16.	Derivatives			0	0
17.	Payable for securities			0	0
18.	Payable for securities lending	9,057,553		9,057,553	4,536,485
19.	Funds held under reinsurance treaties (with $ authorized reinsurers, $ 0 unauthorized reinsurers and $ 0 certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified ($) companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22.	Liability for amounts held under uninsured plans	485,907		485,907	0
23.	Aggregate write-ins for other liabilities (including $ 12,297,167 current)	12,393,541	0	12,393,541	1,198,944
24.	Total liabilities (Lines 1 to 23)	217,115,272	0	217,115,272	184,919,901
25.	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26.	Common capital stock	XXX	XXX	2	2
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	101,999,998	101,999,998
29.	Surplus notes	XXX	XXX	0	
30.	Aggregate write-ins for other-than-special surplus funds	XXX	XXX	68,845,755	74,667,337
31.	Unassigned funds (surplus)	XXX	XXX	17,832,006	(63,015,124)
32.	Less treasury stock, at cost:				
	32.1 shares common (value included in Line 26 $)	XXX	XXX		
	32.2 shares preferred (value included in Line 27 $)	XXX	XXX		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	188,677,761	113,652,213
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	405,793,033	298,572,114
	DETAILS OF WRITE-INS				
2301.	Miscellaneous Medicare liabilities	12,118,782		12,118,782	804,773
2302.	Escheat liability	274,759		274,759	394,171
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	12,393,541	0	12,393,541	1,198,944
2501.		XXX	XXX		
2502.		XXX	XXX		
2503.		XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	Required reserves	XXX	XXX	68,845,755	74,667,337
3002.		XXX	XXX		
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	68,845,755	74,667,337

STATEMENT OF REVENUE AND EXPENSES

		Current Year		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months	XXX	457,895	468,322
2.	Net premium income (including $ non-health premium income)	XXX	550,766,040	597,338,698
3.	Change in unearned premium reserves and reserve for rate credits	XXX	3,453,781	(1,306,972)
4.	Fee-for-service (net of $ medical expenses)	XXX	0	0
5.	Risk revenue	XXX	0	0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0
8.	Total revenues (Lines 2 to 7)	XXX	554,219,821	596,031,726
	Hospital and Medical:			
9.	Hospital/medical benefits		351,276,676	400,401,801
10.	Other professional services		27,633,348	32,259,316
11.	Outside referrals		19,531,463	42,802,057
12.	Emergency room and out-of-area		21,827,205	22,140,859
13.	Prescription drugs		33,915,295	22,591,429
14.	Aggregate write-ins for other hospital and medical	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts		8,201,872	15,129,175
16.	Subtotal (Lines 9 to 15)	0	462,385,859	535,324,637
	Less:			
17.	Net reinsurance recoveries		0	0
18.	Total hospital and medical (Lines 16 minus 17)	0	462,385,859	535,324,637
19.	Non-health claims (net)			
20.	Claims adjustment expenses, including $ 10,824,046 cost containment expenses		16,619,560	22,994,720
21.	General administrative expenses		32,573,646	35,223,620
22.	Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)		0	(6,324,368)
23.	Total underwriting deductions (Lines 18 through 22)	0	511,579,065	587,218,609
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	42,640,756	8,813,117
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		10,864,583	9,346,999
26.	Net realized capital gains (losses) less capital gains tax of $ (71,720)		(1,111,338)	(3,922,991)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	9,753,245	5,424,008
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $ (470,040))]		(470,040)	(235,155)
29.	Aggregate write-ins for other income or expenses	0	(15,081)	27,203
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	51,908,880	14,029,173
31.	Federal and foreign income taxes incurred	XXX	11,078,918	2,277,437
32.	Net income (loss) (Lines 30 minus 31)	XXX	40,829,962	11,751,736
	DETAILS OF WRITE-INS			
0601.		XXX		
0602.		XXX		
0603		XXX		
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.		XXX		
0702.		XXX		
0703		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
2901.	Miscellaneous (expense) income		(15,081)	27,203
2902.				
2903				
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(15,081)	27,203

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	113,652,213	111,470,775
34.	Net income or (loss) from Line 32	40,829,962	11,751,736
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of $ 383	1,440	9,088
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax	2,800,789	4,841,800
39.	Change in nonadmitted assets	31,393,357	(14,421,186)
40	Change in unauthorized and certified reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in	0	0
	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)	75,025,548	2,181,438
49.	Capital and surplus end of reporting period (Line 33 plus 48)	188,677,761	113,652,213
	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 through 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

		1 Current Year	2 Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	558,193,532	601,496,522
2.	Net investment income	11,610,198	11,785,561
3.	Miscellaneous income	0	0
4.	Total (Lines 1 through 3)	569,803,730	613,282,083
5.	Benefit and loss related payments	443,929,090	546,001,311
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	48,910,933	54,410,935
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of $ (71,720) tax on capital gains (losses)	10,994,868	(1,832,069)
10.	Total (Lines 5 through 9)	503,834,891	598,580,177
11.	Net cash from operations (Line 4 minus Line 10)	65,968,839	14,701,906
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	62,416,501	143,530,413
	12.2 Stocks	0	0
	12.3 Mortgage loans	0	0
	12.4 Real estate	0	0
	12.5 Other invested assets	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	188
	12.7 Miscellaneous proceeds	0	10,034,284
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	62,416,501	153,564,884
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	60,220,916	95,448,777
	13.2 Stocks	0	0
	13.3 Mortgage loans	0	0
	13.4 Real estate	0	0
	13.5 Other invested assets	0	0
	13.6 Miscellaneous applications	4,521,068	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	64,741,984	95,448,777
14.	Net increase/(decrease) in contract loans and premium notes	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(2,325,483)	58,116,107
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	47,450,186	(74,312,987)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	47,450,186	(74,312,987)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	111,093,542	(1,494,974)
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	5,422,746	6,917,720
	19.2 End of year (Line 18 plus Line 19.1)	116,516,288	5,422,746

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

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
			2	3				Federal Employees Health							
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1.	Net premium income	550,766,040	3,061,126	12,518,665					535,186,249						
2.	Change in unearned premium reserves and reserve for rate credit	3,453,781		1,272,114					2,181,667						
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	0	0	0	0	XXX
6.	Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7.	Total revenues (Lines 1 to 6)	554,219,821	3,061,126	13,790,779	0	0	0	0	537,367,916	0	0	0	0	0	0
8.	Hospital/medical benefits	351,276,676	(347,275)	4,855,201					346,453,193					315,557	XXX
9.	Other professional services	27,633,348		407,012					27,226,336						XXX
10.	Outside referrals	19,531,463		6,498					19,524,965						XXX
11.	Emergency room and out-of-area	21,827,205		1,709,265					20,117,940						XXX
12.	Prescription drugs	33,915,295	(19)	(248,484)					34,472,173					(308,375)	XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	8,201,872	58,255	197,779					7,938,269					7,569	XXX
15.	Subtotal (Lines 8 to 14)	462,385,859	(289,039)	6,927,271	0	0	0	0	455,732,876	0	0	0	0	14,751	XXX
16.	Net reinsurance recoveries	0													XXX
17.	Total medical and hospital (Lines 15 minus 16)	462,385,859	(289,039)	6,927,271	0	0	0	0	455,732,876	0	0	0	0	14,751	XXX
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19.	Claims adjustment expenses including $ ..... 10,824,046 cost containment expenses	16,619,560	172,211	1,542,830					14,904,519						
20.	General administrative expenses	32,573,646	347,821	3,116,106					30,212,233					(1,102,514)	
21.	Increase in reserves for accident and health contracts	0													XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23.	Total underwriting deductions (Lines 17 to 22)	511,579,065	230,993	11,586,207	0	0	0	0	500,849,628	0	0	0	0	(1,087,763)	0
24.	Net underwriting gain or (loss) (Line 7 minus Line 23)	42,640,756	2,830,133	2,204,572	0	0	0	0	36,518,288	0	0	0	0	1,087,763	0
	DETAILS OF WRITE-INS														
0501.															XXX
0502.															XXX
0503.															XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.															XXX
1302.															XXX
1303.															XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual	3,061,126			3,061,126
2. Comprehensive (hospital and medical) group	12,518,665			12,518,665
3. Medicare Supplement				0
4. Vision only				0
5. Dental only				0
6. Federal Employees Health Benefits Plan	0			0
7. Title XVIII - Medicare	535,186,249			535,186,249
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)	550,766,040	0	0	550,766,040
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	550,766,040	0	0	550,766,040

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	438,074,450	(1,139,695)	(33,595,247)					472,608,633					200,759	
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	0													
1.4 Net	438,074,450	(1,139,695)	(33,595,247)	0	0	0	0	472,608,633	0	0	0	0	200,759	0
2. Paid medical incentive pools and bonuses	5,854,640	58,643	236,681					5,596,205					(36,889)	
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	66,922,159	271,169	1,291,633	0	0	0	0	65,354,368	0	0	0	0	4,989	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	66,922,159	271,169	1,291,633	0	0	0	0	65,354,368	0	0	0	0	4,989	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	0													
4.2 Reinsurance assumed	0													
4.3 Reinsurance ceded	0													
4.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	41,534,115	(394)	17,924					41,472,127					44,458	
6. Net health care receivables (a)	(30,377,222)	(841,499)	(40,470,336)					10,736,047					198,566	
7. Amounts recoverable from reinsurers December 31, current year	0													
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	81,189,844	320,267	1,437,230	0	0	0	0	79,432,347	0	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net	81,189,844	320,267	1,437,230	0	0	0	0	79,432,347	0	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
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	39,186,883	(6)	56,826					39,130,063						
11. Amounts recoverable from reinsurers December 31, prior year	0													
12. Incurred Benefits:														
12.1 Direct	454,183,987	(347,294)	6,729,492	0	0	0	0	447,794,607	0	0	0	0	7,182	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	454,183,987	(347,294)	6,729,492	0	0	0	0	447,794,607	0	0	0	0	7,182	0
13. Incurred medical incentive pools and bonuses	8,201,872	58,255	197,779	0	0	0	0	7,938,269	0	0	0	0	7,569	0

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	24,279,227	271,163	515,057	0	0	0	0	23,488,018	0	0	0	0	4,989	
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	0													
1.4 Net	24,279,227	271,163	515,057	0	0	0	0	23,488,018	0	0	0	0	4,989	0
2. Incurred but Unreported:														
2.1 Direct	42,642,932	6	776,576	0	0	0	0	41,866,350						
2.2 Reinsurance assumed	0													
2.3 Reinsurance ceded	0													
2.4 Net	42,642,932	6	776,576	0	0	0	0	41,866,350	0	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0													
3.2 Reinsurance assumed	0													
3.3 Reinsurance ceded	0													
3.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	66,922,159	271,169	1,291,633	0	0	0	0	65,354,368	0	0	0	0	4,989	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	66,922,159	271,169	1,291,633	0	0	0	0	65,354,368	0	0	0	0	4,989	0

UNDERWRITING AND INVESTMENT EXHIBIT

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

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual	(1,139,694)	0	271,169	0	(868,525)	320,266
2. Comprehensive (hospital and medical) group	(40,062,484)	6,467,236	60,253	1,231,380	(40,002,231)	1,437,230
3. Medicare Supplement	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Dental Only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	59,398,548	413,210,086	2,796,096	62,558,272	62,194,644	79,432,348
8 Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-Term Care	0	0	0	0	0	0
12. Other health	113,590	87,168	0	4,989	113,590	0
13. Health subtotal (Lines 1 to 12)	18,309,960	419,764,490	3,127,518	63,794,641	21,437,478	81,189,844
14. Health care receivables (a)	15,986,468	15,512,271	0	0	15,986,468	61,875,961
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	3,823,843	2,030,797	35,966,390	5,567,725	39,790,233	39,186,883
17. Totals (Lines 13 - 14 + 15 + 16)	6,147,335	406,283,016	39,093,908	69,362,366	45,241,243	58,500,766

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

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

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior	11,818	12,820	14,676	12,672	12,672
2. 2020	21,632	22,282	22,391	22,508	21,099
3. 2021	XXX	12,263	12,950	13,047	13,051
4. 2022	XXX	XXX	5,662	(6,729)	(6,640)
5. 2023	XXX	XXX	XXX	8,468	(31,698)
6. 2024	XXX	XXX	XXX	XXX	6,157

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

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior	12,724	13,649	14,693	12,999	12,672
2. 2020	23,887	22,465	22,388	22,514	21,371
3. 2021	XXX	14,115	13,033	13,057	13,053
4. 2022	XXX	XXX	7,372	(6,686)	(6,628)
5. 2023	XXX	XXX	XXX	9,896	(31,653)
6. 2024	XXX	XXX	XXX	XXX	7,406

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2020	39,598	21,099	105,340	499.3	126,439	319.3	272	33	126,744	320.1
2. 2021	17,231	13,051	39,598	303.4	52,649	305.5	2	0	52,651	305.6
3. 2022	12,173	(6,640)	17,229	(259.5)	10,589	87.0	12	0	10,601	87.1
4. 2023	13,498	(31,698)	13,135	(41.4)	(18,563)	(137.5)	45	0	(18,518)	(137.2)
5. 2024	16,852	6,157	730	11.9	6,887	40.9	1,249	0	8,136	48.3

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	82,422	84,712	84,264	82,696	82,696
2.	2020	676,920	776,195	773,768	778,464	778,119
3.	2021	XXX	638,685	707,271	711,067	711,903
4.	2022	XXX	XXX	536,226	562,996	566,183
5.	2023	XXX	XXX	XXX	456,145	500,097
6.	2024	XXX	XXX	XXX	XXX	400,160

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	90,773	97,813	97,232	95,674	82,696
2.	2020	809,537	788,424	788,496	792,561	805,045
3.	2021	XXX	727,923	713,308	721,592	720,207
4.	2022	XXX	XXX	614,109	568,596	566,237
5.	2023	XXX	XXX	XXX	531,507	503,576
6.	2024	XXX	XXX	XXX	XXX	468,224

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

Years in which Premiums were Earned and Claims were Incurred		1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1.	2020	912,811	778,119	871,978	112.1	1,650,097	180.8	26,926	0	1,677,023	183.7
2.	2021	737,982	711,903	912,818	128.2	1,624,721	220.2	8,304	0	1,633,025	221.3
3.	2022	668,388	566,183	738,017	130.3	1,304,200	195.1	54	3	1,304,257	195.1
4.	2023	582,534	500,097	670,622	134.1	1,170,719	201.0	3,479	66	1,174,264	201.6
5.	2024	537,368	400,160	12,845	3.2	413,005	76.9	68,064	1,541	482,610	89.8

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Other

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	7	7	7	7	7
2.	2020	79	79	79	79	79
3.	2021	XXX	0	0		0
4.	2022	XXX	XXX	0		0
5.	2023	XXX	XXX	XXX		0
6.	2024	XXX	XXX	XXX	XXX	(35)

Section B - Incurred Health Claims - Other

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	7	7	7	7	7
2.	2020	81	79	79	79	79
3.	2021	XXX		0		0
4.	2022	XXX	XXX	0		0
5.	2023	XXX	XXX	XXX		0
6.	2024	XXX	XXX	XXX	XXX	14

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

Years in which Premiums were Earned and Claims were Incurred		1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1.	2020	58	79	294	372.2	373	643.1	0	0	373	643.1
2.	2021		0	58	0.0	58	0.0	0	0	58	0.0
3.	2022	0	0	0	0.0	0	0.0	0	0	0	0.0
4.	2023	0	0	0	0.0	0	0.0	0	0	0	0.0
5.	2024		(35)	0	0.0	(35)	0.0	49	0	14	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

($000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	94,247	97,539	98,947	95,375	95,375
2.	2020	698,631	798,556	796,238	801,051	799,297
3.	2021	XXX	650,948	720,221	724,114	724,954
4.	2022	XXX	XXX	541,888	556,267	559,543
5.	2023	XXX	XXX	XXX	464,613	468,399
6.	2024	XXX	XXX	XXX	XXX	406,282

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	103,504	111,469	111,932	108,680	95,375
2.	2020	833,505	810,968	810,963	815,154	826,495
3.	2021	XXX	742,038	726,341	734,649	733,260
4.	2022	XXX	XXX	621,481	561,910	559,609
5.	2023	XXX	XXX	XXX	541,403	471,923
6.	2024	XXX	XXX	XXX	XXX	475,644

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

Years in which Premiums were Earned and Claims were Incurred		1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1.	2020	952,467	799,297	977,612	122.3	1,776,909	186.6	27,198	33	1,804,140	189.4
2.	2021	755,213	724,954	952,474	131.4	1,677,428	222.1	8,306	0	1,685,734	223.2
3.	2022	680,561	559,543	755,246	135.0	1,314,789	193.2	66	3	1,314,858	193.2
4.	2023	596,032	468,399	683,757	146.0	1,152,156	193.3	3,524	66	1,155,746	193.9
5.	2024	554,220	406,282	13,575	3.3	419,857	75.8	69,362	1,541	490,760	88.5

UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves	0												
2. Additional policy reserves (a)	0												
3. Reserve for future contingent benefits	0												
4. Reserve for rate credits or experience rating refunds (including $ ..... for investment income)	162,295							162,295					
5. Aggregate write-ins for other policy reserves	1,488,947	18,766	2,543	0	0	0	0	1,467,638	0	0	0	0	0
6. Totals (gross)	1,651,242	18,766	2,543	0	0	0	0	1,629,933	0	0	0	0	0
7. Reinsurance ceded	0												
8. Totals (Net)(Page 3, Line 4)	1,651,242	18,766	2,543	0	0	0	0	1,629,933	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	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 redetermination	1,488,947	18,766	2,543					1,467,638					
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 through 0503 plus 0598) (Line 5 above)	1,488,947	18,766	2,543	0	0	0	0	1,467,638	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 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes $ ..... 0 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3	4	5
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent ($ ..... for occupancy of own building)	191,970	134,506	(65,293)		261,183
2. Salary, wages and other benefits	8,488,390	3,637,512	9,883,078		22,008,980
3. Commissions (less $ ..... ceded plus $ ..... assumed)	0		4,105,410		4,105,410
4. Legal fees and expenses	780	(205)	949,616		950,191
5. Certifications and accreditation fees	0		0		0
6. Auditing, actuarial and other consulting services	566,065	129,299	1,420,738		2,116,102
7. Traveling expenses	10,248	2,051	51,737		64,036
8. Marketing and advertising	35,760	69,398	2,867,753		2,972,911
9. Postage, express and telephone	28,431	68,587	503,842		600,860
10. Printing and office supplies	6,218	517	311,118		317,853
11. Occupancy, depreciation and amortization	0		0		0
12. Equipment	10	47	39,676		39,733
13. Cost or depreciation of EDP equipment and software	81,829	40,929	1,199,239		1,321,997
14. Outsourced services including EDP, claims, and other services	920,842	581,854	7,889,487		9,392,183
15. Boards, bureaus and association fees	887		44,429		45,316
16. Insurance, except on real estate	0		79,067		79,067
17. Collection and bank service charges	0		24,129		24,129
18. Group service and administration fees	0	116,336	69,616		185,952
19. Reimbursements by uninsured plans	0		(2,210,482)		(2,210,482)
20. Reimbursements from fiscal intermediaries	0		0		0
21. Real estate expenses	8	4	203,409		203,421
22. Real estate taxes	0		15,192		15,192
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	(9,806)	(6,656)	4,293,586		4,277,124
23.2 State premium taxes	0		346,885		346,885
23.3 Regulatory authority licenses and fees	2,326	300	12,137		14,763
23.4 Payroll taxes	528,347	220,184	539,882		1,288,413
23.5 Other (excluding federal income and real estate taxes)	0		145,149		145,149
24. Investment expenses not included elsewhere	0		0	230,528	230,528
25. Aggregate write-ins for expenses	(28,259)	800,851	(145,754)	0	626,838
26. Total expenses incurred (Lines 1 to 25)	10,824,046	5,795,514	32,573,646	230,528	(a) 49,423,734
27. Less expenses unpaid December 31, current year		1,643,381	3,581,509		5,224,890
28. Add expenses unpaid December 31, prior year		1,855,175	1,002,092		2,857,267
29. Amounts receivable relating to uninsured plans, prior year			638,681		638,681
30. Amounts receivable relating to uninsured plans, current year			3,028,507		3,028,507
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	10,824,046	6,007,308	32,384,055	230,528	49,445,937
DETAILS OF WRITE-INS					
2501. Miscellaneous expenses	(28,259)	(204,852)	(145,754)		(378,865)
2502. Pharmacy admin fees		1,005,703			1,005,703
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	(28,259)	800,851	(145,754)	0	626,838

(a) Includes management fees of $ ..... 41,703,425 to affiliates and $ ..... to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	(a) 988,020	1,069,024
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 8,388,165	8,426,091
1.3	Bonds of affiliates	(a) 0	0
2.1	Preferred stocks (unaffiliated)	(b) 0	0
2.11	Preferred stocks of affiliates	(b) 0	0
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans	(c) 0	0
4.	Real estate	(d) 0	0
5	Contract Loans	0	0
6	Cash, cash equivalents and short-term investments	(e) 1,573,911	1,573,911
7	Derivative instruments	(f) 0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	24,303	26,085
10.	Total gross investment income	10,974,399	11,095,111
11.	Investment expenses		(g) 230,528
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h) 0
14.	Depreciation on real estate and other invested assets		(i) 0
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		230,528
17.	Net investment income (Line 10 minus Line 16)		10,864,583
	DETAILS OF WRITE-INS		
0901.	Miscellaneous income	4,076	4,076
0902.	Securities lending	20,228	22,009
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	24,303	26,085
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

(a) Includes $ 495,991 accrual of discount less $ 1,319,122 amortization of premium and less $ 145,459 paid for accrued interest on purchases.

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

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

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

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

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

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

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

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

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	0	0	0	0	0
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)	(1,183,058)	0	(1,183,058)	1,823	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans		0	0	0	0
4.	Real estate		0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	0	0	0	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets		0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(1,183,058)	0	(1,183,058)	1,823	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 through 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
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			0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income			0
	4.3 Properties held for sale			0
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)			0
9.	Receivables for securities			0
10.	Securities lending reinvested collateral assets (Schedule DL)			0
11.	Aggregate write-ins for invested assets	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued			0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	1,171,339	1,683,083	511,744
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			0
	15.3 Accrued retrospective premiums and contracts subject to redetermination			0
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
17.	Amounts receivable relating to uninsured plans	191,488		(191,488)
18.1	Current federal and foreign income tax recoverable and interest thereon			0
18.2	Net deferred tax asset			0
19.	Guaranty funds receivable or on deposit			0
20.	Electronic data processing equipment and software			0
21.	Furniture and equipment, including health care delivery assets	803,083	1,361,897	558,814
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0
23.	Receivable from parent, subsidiaries and affiliates			0
24.	Health care and other amounts receivable	26,845,500	57,361,581	30,516,081
25.	Aggregate write-ins for other-than-invested assets	99,183	97,389	(1,794)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	29,110,593	60,503,950	31,393,357
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28.	Total (Lines 26 and 27)	29,110,593	60,503,950	31,393,357
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Prepaid expenses	68,905	67,105	(1,800)
2502.	Blue Card program receivables	25,278	25,259	(19)
2503.	Miscellaneous receivables	5,000	5,025	25
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	99,183	97,389	(1,794)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

	Source of Enrollment	Total Members at End of					6
		1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	Current Year Member Months
1.	Health Maintenance Organizations	35,713	31,583	32,822	32,328	31,636	393,183
2.	Provider Service Organizations						
3.	Preferred Provider Organizations						
4.	Point of Service	1,079	1,039	5,319	9,014	5,321	63,197
5.	Indemnity Only						
6.	Aggregate write-ins for other lines of business	0	0	134	127	133	1,515
7.	Total	36,792	32,622	38,275	41,469	37,090	457,895
	DETAILS OF WRITE-INS						
0601.	Consumer driven health plans			134	127	133	1,515
0602.							
0603.							
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	0	134	127	133	1,515

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Anthem HealthChoice HMO, Inc. (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 New York State Department of Financial Services (the "Department"). The Department has adopted accounting policies found in NAIC SAP as a component of prescribed accounting practices. Additionally, the Department has adopted certain prescribed accounting practices that differ from those found in NAIC SAP, which impact the Company, specifically 1) overdue premiums (in excess of 90 days) from state and local governments or any of its instrumentalities shall be admitted assets; in NAIC SAP, premiums over 90 days due are non-admitted; 2) certain estimated market stabilization reinsurance/pooling recoverables, stop-loss recoverables, and reinsurance recoverables are admitted assets; in NAIC SAP, these recoverables are admitted only upon notification of the refund; and 3) prepaid broker commissions are admitted assets; in NAIC SAP, prepaid broker commissions are nonadmitted assets. The Department has the right to permit other specific practices that deviate from prescribed practices. The Company has employed no permitted practices in preparing the accompanying statutory-basis financial statements.

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

		SSAP #	F/S Page	F/S Line #	2024	2023
Net Income						
(1)	Anthem HealthChoice HMO, Inc. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	$ 40,829,962	$ 11,751,736
(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	$ 40,829,962	$ 11,751,736
Surplus						
(5)	Anthem HealthChoice HMO, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	$188,677,761	$113,652,213
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
	Prepaid Brokers' Commissions	29	2	25	2,300,485	1,191,367
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	$186,377,276	$112,460,846

NOTES TO FINANCIAL STATEMENTS

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 and reinsurance contracts. 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 and based on reports received from ceding companies for reinsurance. 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 Department. 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.
(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 investment in residual tranche bonds and preferred stocks.
(6) The Company has no mortgage loans - real estate
(7) Loan-backed securities are stated at amortized cost. Prepayment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.
(8) The Company has no investments in subsidiaries, controlled and affiliated companies.
(9) The Company has no investments in joint ventures, partnerships or limited liability companies.
(10) The Company has no derivative instruments.
(11) The Company recognizes losses from other-than-temporary impairments (“OTTI”) of investments in accordance with Statements of Standard Accounting Practice (“SSAP”) No. 26, *Bonds*; and SSAP No. 30, *Common Stock*; and SSAP No. 32, *Preferred Stock*.
(12) The Company does not anticipate investment income as a factor in premium deficiency calculations.
(13) 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.

(14) The Company has not modified its capitalization policy from the prior period.

(15) Pharmacy rebate receivables are recorded when earned based upon actual rebate receivables billed and an estimate of receivables based upon current utilization of specific pharmaceuticals and provider contract terms.

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, 2024 and 2023.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

Not applicable.

4. Discontinued Operations

The Company had no operations that were discontinued during 2024 or 2023.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company did not have investments in mortgage loans at December 31, 2024 or 2023.

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at December 31, 2024 or 2023.

NOTES TO FINANCIAL STATEMENTS

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at December 31, 2024 or 2023.

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, 2024 and 2023.

(3) The Company did not recognize OTTI on its loan-backed securities at December 31, 2024 and 2023.

(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	(1,142,162)
		2.	12 Months or Longer	(1,792,346)
b.	The aggregate related fair value of securities with unrealized losses:			
		1.	Less than 12 Months	35,187,946
		2.	12 Months or Longer	20,134,810

(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, 2024 or 2023.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) The Company did not enter into repurchase agreements at December 31, 2024 or 2023.

(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.

NOTES TO FINANCIAL STATEMENTS

(3) Collateral Received

a. Aggregate amount collateral received

			Fair Value
1.	Securities Lending		
	(a)	Open	8,962,313
	(b)	30 days or less	—
	(c)	31 to 60 days	—
	(d)	61 to 90 days	—
	(e)	Greater than 90 days	—
	(f)	Sub-total	$ 8,962,313
	(g)	Securities received	95,240
	(h)	Total collateral received	$ 9,057,553

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 $ 9,057,553

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

			Amortized Cost	Fair Value
1.	Securities Lending			
	(a)	Open	$ —	$ —
	(b)	30 days or less	3,518,610	3,519,133
	(c)	31 to 60 days	2,335,488	2,335,811
	(d)	61 to 90 days	209,712	209,695
	(e)	91 to 120 days	1,512,027	1,512,107
	(f)	121 to 180 days	837,029	837,654
	(g)	181 to 365 days	549,447	549,658
	(h)	1 to 2 years	—	—
	(i)	2 to 3 years	—	—
	(j)	Greater than 3 years	—	—
	(k)	Sub-total	$ 8,962,313	$ 8,964,058
	(l)	Securities received	95,240	95,240
	(m)	Total collateral reinvested	$ 9,057,553	$ 9,059,298

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, 2024 or 2023.

NOTES TO FINANCIAL STATEMENTS

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, 2024 or 2023.

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, 2024 or 2023.

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, 2024 or 2023.

J. Real Estate

The Company did not have investments in real estate and did not engage in retail land sales operations during 2024 or 2023.

K. Investments in Low-Income Housing Tax Credits

The Company did not invest in properties generating low-income housing tax credits during 2024 or 2023.

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted assets (including pledged)

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted from Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	3 Increase/ (Decrease) (1 minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross Admitted and Nonadmitted Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	$ —	$ —	$ —	$ —	$ —	0.00 %	0.00 %
b. Collateral held under security lending agreements	9,057,553	4,536,485	4,521,068	—	9,057,553	2.08 %	2.23 %
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	30,190,575	40,629,118	(10,438,543)	—	30,190,575	6.94 %	7.44 %
k. On deposit with other regulatory bodies	—	—	—	—	—	0.00 %	0.00 %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	0.00 %	0.00 %
m. Pledged as collateral not captured in other categories	—	—	—	—	—	0.00 %	0.00 %
n. Other restricted assets	—	—	—	—	—	0.00 %	0.00 %
o. Total Restricted Assets	$ 39,248,128	$ 45,165,603	$ (5,917,475)	$ —	$ 39,248,128	9.02 %	9.67 %

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

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

(2) Not applicable.

(3) Not applicable.

NOTES TO FINANCIAL STATEMENTS

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

Collateral Assets	1 Book/ Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted *)	4 % 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	9,057,553	9,059,298	2.08 %	2.23 %
i. Other	—	—	—	—
j. Total Collateral Assets (a+b+c+d+e+f+g+h+i)	$ 9,057,553	$ 9,059,298	2.08 %	2.23 %

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

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

	1 Amount	2 % of Liability to Total Liabilities *
k. Recognized Obligation to Return Collateral Asset	$ 9,057,553	4.17 %

* 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, 2024 and 2023.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at December 31, 2024 and 2023.

O. 5GI Securities

The Company has no 5GI Securities as of December 31, 2024 and 2023.

P. Short Sales

The Company did not have any short sales at December 31, 2024 and 2023.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at December 31, 2024 and 2023.

NOTES TO FINANCIAL STATEMENTS

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

The Company did not participate in a cash pool at December 31, 2024 or 2023.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

The Company did not have any aggregate collateral loans with qualifying investment collateral at December 31, 2024 or 2023.

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, 2024 and 2023 there was no nonadmitted accrued investment income.

C. At December 31, 2024 and 2023 the gross, nonadmitted and admitted amounts for interest income due and accrued are as follows:

Interest Income Due and Accrued	2024	2023
1. Gross	$ 2,384,782	$ 2,264,071
2. Nonadmitted	$ —	$ —
3. Admitted	$ 2,384,792	$ 2,264,071

D. At December 31, 2024 and 2023 the Company had no aggregate deferred interest.

E. At December 31, 2024 and 2023 the Company had cumulative amounts of paid-in-kind (“PIK”) interest included in the current principal balance as follows:

	2024	2023
Cumulative amounts of PIK interest included in the current principal balance	$ 549,621	$ 1,375

8. Derivative Instruments

The Company has no derivative instruments.

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

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

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

		12/31/2024		
		(1) Ordinary	(2) Capital	(3) (Col 1+2) Total
(a)	Gross Deferred Tax Assets	$ 7,737,400	$ 162,918	$ 7,900,318
(b)	Statutory Valuation Allowance Adjustments	—	—	—
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	7,737,400	162,918	7,900,318
(d)	Deferred Tax Assets Nonadmitted	—	—	—
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	7,737,400	162,918	7,900,318
(f)	Deferred Tax Liabilities	61,785	198,742	260,527
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	$ 7,675,615	$ (35,824)	$ 7,639,791

		12/31/2023		
		(4) Ordinary	(5) Capital	(6) (Col 4+5) Total
(a)	Gross Deferred Tax Assets	$ 14,080,069	$ —	$ 14,080,069
(b)	Statutory Valuation Allowance Adjustments	9,190,658	—	9,190,658
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	4,889,411	—	4,889,411
(d)	Deferred Tax Assets Nonadmitted	—	—	—
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	4,889,411	—	4,889,411
(f)	Deferred Tax Liabilities	3,344	46,682	50,026
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	$ 4,886,067	$ (46,682)	$ 4,839,385

		Change		
		(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
(a)	Gross Deferred Tax Assets	$ (6,342,669)	$ 162,918	$ (6,179,751)
(b)	Statutory Valuation Allowance Adjustments	(9,190,658)	—	(9,190,658)
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	2,847,989	162,918	3,010,907
(d)	Deferred Tax Assets Nonadmitted	—	—	—
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	2,847,989	162,918	3,010,907
(f)	Deferred Tax Liabilities	58,441	152,060	210,501
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	$ 2,789,548	$ 10,858	$ 2,800,406

NOTES TO FINANCIAL STATEMENTS

(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:

		12/31/2024		
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total
	Admission Calculation Components SSAP No. 101			
(a)	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	$ 7,723,195	$ —	$ 7,723,195
(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)	3,790	—	3,790
	1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	3,790	—	3,790
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	27,775,450
(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.	10,415	162,918	173,333
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	$ 7,737,400	$ 162,918	$ 7,900,318

		12/31/2023		
		(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.	$ 4,839,385	$ —	$ 4,839,385
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	—	—	—
	1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	—	—	—
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	16,321,924
(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.	50,026	—	50,026
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	$ 4,889,411	$ —	$ 4,889,411

		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.	$ 2,883,810	$ —	$ 2,883,810
(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)	3,790	—	3,790
	1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	3,790	—	3,790
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	11,453,526
(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.	(39,611)	162,918	123,307
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	$ 2,847,989	$ 162,918	$ 3,010,907

NOTES TO FINANCIAL STATEMENTS

(3)

	2024	2023
(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	1,050.65 %	546.18 %
(b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	$ 181,037,970	$ 108,812,828

(4)

	12/31/2024		12/31/2023		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col 1-3) Ordinary	(Col 2-4) 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)	$7,737,400	$162,918	$4,889,411	$ —	$2,847,989	$162,918
2. Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	$7,737,400	$162,918	$4,889,411	$ —	$2,847,989	$162,918
4. Percentage of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes _____ No X

B. The Company has no unrecognized deferred tax liabilities at December 31,2024 and 2023.

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

	(1) 12/31/2024	(2) 12/31/2023	(Col 1-2) Change
(1) Current Income Tax			
(a) Federal	$ 11,078,918	$ 2,277,437	$ 8,801,481
(b) Foreign	—	—	—
(c) Subtotal	11,078,918	2,277,437	8,801,481
(d) Federal income tax expense on net capital gains	(71,720)	(1,039,033)	967,313
(e) Utilization of capital loss carry-forwards	—	—	—
(f) Other	—	—	—
(g) Federal and foreign income taxes incurred	$ 11,007,198	$ 1,238,404	$ 9,768,794

NOTES TO FINANCIAL STATEMENTS

			(1) 12/31/2024	(2) 12/31/2023	(Col 1-2) Change
(2)	Deferred Tax Assets:				
(a)	Ordinary				
(1)		Discounting of unpaid losses	$ 284,831	$ 299,987	$ (15,156)
(2)		Unearned premium reserve	3,155	10,784	(7,629)
(3)		Policyholder reserves	420,000	462,000	(42,000)
(4)		Investments	—	—	—
(5)		Deferred acquisition costs	—	—	—
(6)		Policyholder dividends accrual	—	—	—
(7)		Fixed assets	100	504,292	(504,192)
(8)		Compensation and benefits accrual	—	—	—
(9)		Pension accrual	—	—	—
(10)		Receivables - nonadmitted	5,369,770	12,405,739	(7,035,969)
(11)		Net operating loss carry-forward	—	—	—
(12)		Tax credit carry-forward	—	—	—
(13)		Other	1,659,544	397,267	1,262,277
(99)		Subtotal (sum of 2a1 through 2a13)	7,737,400	14,080,069	(6,342,669)
(b)		Statutory valuation allowance adjustment	—	9,190,658	(9,190,658)
(c)		Nonadmitted	—	—	—
(d)		Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	7,737,400	4,889,411	2,847,989
(e)		Capital			
(1)		Investments	2,661	—	2,661
(2)		Net capital loss carry-forward	160,257	—	160,257
(3)		Real estate	—	—	—
(4)		Other	—	—	—
(99)		Subtotal (2e1+2e2+2e3+2e4)	162,918	—	162,918
(f)		Statutory valuation allowance adjustment	—	—	—
(g)		Nonadmitted	—	—	—
(h)		Admitted capital deferred tax assets (2e99 - 2f - 2g)	162,918	—	162,918
(i)		Admitted deferred tax assets (2d + 2h)	$ 7,900,318	$ 4,889,411	$ 3,010,907

			(1) 12/31/2024	(2) 12/31/2023	(3) (Col 1-2) Change
(3)	Deferred Tax Liabilities:				
(a)	Ordinary				
(1)		Investments	$ 60,710	$ —	$ 60,710
(2)		Fixed assets	—	—	—
(3)		Deferred and uncollected premium	—	—	—
(4)		Policyholder reserves	—	—	—
(5)		Other	1,075	3,344	(2,269)
(99)		Subtotal (3a1+3a2+3a3+3a4+3a5)	61,785	3,344	58,441
(b)		Capital			
(1)		Investments	198,742	46,682	152,060
(2)		Real estate	—	—	—
(3)		Other	—	—	—
(99)		Subtotal (3b1+3b2+3b3)	198,742	46,682	152,060
(c)		Deferred tax liabilities (3a99 + 3b99)	$ 260,527	$ 50,026	$ 210,501
(4)	Net deferred tax assets/liabilities (2i - 3c)		$ 7,639,791	$ 4,839,385	$ 2,800,406

The table above includes market discount under deferred tax liabilities as ordinary investments for 2024. Market discount had been netted with capital investments in 2023. This change did not materially impact any amounts presented in the financial statements. The difference of market discount netted with capital investments is immaterial in the prior year presented above.

NOTES TO FINANCIAL STATEMENTS

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:

	2024	2023
Tax expense computed using federal statutory rate	$ 10,885,804	$ 2,727,930
Change in nonadmitted assets	6,592,605	(3,028,449)
Tax exempt income and dividend received deduction net of proration	(484,900)	(505,994)
Prior year true-up and adjustments	412,660	(485,585)
Tax settlements and contingencies	(10,153)	(5,643)
Valuation allowance	(9,190,658)	(2,306,703)
Other, net	1,051	1,048
Total	$ 8,206,409	$ (3,603,396)
Federal income taxes incurred	$ 11,007,198	$ 1,238,404
Change in net deferred income taxes	(2,800,789)	(4,841,800)
Total statutory income taxes	$ 8,206,409	$ (3,603,396)

E. Operating loss carryforwards:

(1) The Company has no operating loss carryforwards and no corporate alternative minimum tax ("AMT") credit carryforwards as of December 31, 2024 or 2023.

(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:

	Ordinary	Capital	Total
2024	$ 11,129,843	$ —	$ 12,228,142
2023	4,726,891	—	4,726,891
2022	—	—	—

(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, 2024 and 2023.

F. The following companies will be included in the consolidated federal income tax return with their parent Elevance Health, Inc. ("Elevance Health") as of December 31, 2024 and either are current members of the consolidated tax sharing agreement or are in the process of being added to the consolidated tax sharing agreement. Allocation of federal income taxes, including corporate AMT, with affiliates subject to the tax sharing agreement is based upon separate income tax return calculations, including separate corporate AMT calculations, with credit for net operating losses and capital losses that can be used on a consolidated basis. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes. Intercompany income tax balances are settled based on the Internal Revenue Service due dates.

Albion Medical Group of Nevada, P.C.
Albion Medical Partners of California, P.C.
Albion Medical Partners of California West, P.C.
Albion Medical Partners of Illinois, S.C.
Alliance Care Management, LLC
Amerigroup Mississippi, Inc.
Amerigroup Pennsylvania, Inc.
AMGP Georgia Managed Care Company, Inc.
Anthem Benefits Agency, Inc.
Anthem Blue Cross Life and Health Insurance Company
Anthem Financial, Inc.
Colorado State Infusion, Inc.
Community Care Health Plan of Kansas, Inc.
Community Care Health Plan of Nebraska, Inc.
Community Care Health Plan of Nevada, Inc.
Community Insurance Company
Compcare Health Services Insurance Corporation
Crossroads Acquisition Corp.
DeCare Analytics, LLC
DeCare Dental Health International, LLC
DeCare Dental Networks, LLC
DeCare Dental, LLC

NOTES TO FINANCIAL STATEMENTS

Anthem HealthChoice Assurance, Inc.
Anthem HealthChoice HMO, Inc.
Anthem Health Plans of Kentucky, Inc.
Anthem Health Plans of Maine, Inc.
Anthem Health Plans of New Hampshire, Inc.
Anthem Health Plans of Virginia, Inc.
Anthem Health Plans, Inc.
Anthem Holding Corp.
Anthem HP, LLC
Anthem Insurance Companies, Inc.
Anthem Kentucky Managed Care Plan, Inc.
Anthem Southeast, Inc.
APR, LLC
Arcus Enterprises, Inc.
Associated Group, Inc.
AUMSI UM Services, Inc.
Beacon Health Financing, LLC
Beacon Health Options Holdco, Inc.
Beacon Health Vista Parent, Inc.
BioPlus Parent, LLC
BioPlus Specialty Holding Company, LLC
BioPlus Specialty Infusion Holdings, Inc.
BioPlus Specialty Pharmacy Holdings, Inc.
BioPlus Specialty Pharmacy Holdings I, Inc.
BioPlus Specialty Pharmacy Holdings II, Inc.
BioPlus Specialty Pharmacy, Inc.
BioPlus Specialty Pharmacy LA, LLC
Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.
Blue Cross Blue Shield of Wisconsin
Blue Cross of California
Blue Cross of California Partnership Plan, Inc.
Carebridge Holding Company, LLC
Carelon Behavioral Care, Inc.
Carelon Behavioral Health Holdings, Inc.
Carelon Behavioral Health, Inc.
Carelon Behavioral Health IPA, Inc.
Carelon Behavioral Health of California, Inc.
Carelon Behavioral Health Strategies IPA, LLC
Carelon Digital Platforms, Inc.
Carelon Global Solutions U.S., Inc.
Carelon Health Federal Services, Inc.
Carelon Health, Inc.
Carelon Health IPA of California
Carelon Health IPA of New York, Inc.
Carelon Health of Arizona, Inc.
Carelon Health of California, Inc.
Carelon Health of Nevada, Inc.
Carelon Health of New Jersey, Inc.
Carelon Health of Pennsylvania, Inc.
Carelon Health Solutions, Inc.
Carelon Holdings I, Inc.
Carelon, Inc.
Carelon Insights, Inc.
Carelon Management Services, Inc.
Carelon Medical Benefits Management, Inc.
Carelon Medical Partners, P.C.
Carelon Medical Partners of Arizona, P.C.
Carelon Medical Partners of Colorado, P.C.
Carelon Medical Partners of Kansas, P.A.
Carelon Medical Partners of New York, P.C.
Carelon Medical Partners of North Carolina, P.C.
Carelon Medical Partners of Texas, P.A.
Carelon Palliative Care, Inc.
Carelon Post Acute Solutions, Inc.
Carelon Research, Inc.
Designated Agent Company, Inc.
Elevance Health, Inc
Elevance Health Information Technology Services, Inc.
ELV Holding Company 2, LLC
ELV Holding Company 3, LLC
ELV Holding Company 4, LLC
Federal Government Solutions, LLC
Freedom Health, Inc.
Freedom SPV, Inc.
Golden West Health Plan, Inc.
HaloCare Specialty Therapeutics, LLC
Healthkeepers, Inc.
HealthLink Administrators, Inc.
HealthLink, Inc.
HealthSun Health Plan, Inc.
Healthy Alliance Life Insurance Company
HMO Colorado, Inc.
HMO Missouri, Inc.
IEC Group Holdings, Inc.
IEC Group, Inc. d/b/a AmeriBen
Innovative Pharmacy Services, LLC
LDNR Pharmacy, Inc.
Living Complete Technologies, Inc.
Massachusetts Behavioral Health Partnership
Matthew Thornton Health Plan, Inc.
Missouri Care, Incorporated
Nash Holding Company, LLC
National Government Services, Inc.
New England Research Institutes, Inc.
Optimum Healthcare, Inc.
OPTIONS Health Care, Inc.
Paragon Healthcare, Inc.
Paragon Holding Company, LLC
Paragon Infusion Care Inc.
Pathwrite, Inc.
PHI Parent, LLC
RightCHOICE Managed Care, Inc.
Rocky Mountain Hospital and Medical Service, Inc.
RSV QOZB LTSS, Inc.
SellCore, Inc.
Simply Healthcare Plans, Inc.
Southeast Services, Inc.
State Sponsored Services, Inc.
The Elevance Health Companies, Inc.
The Elevance Health Companies of California, Inc.
TrustSolutions, LLC
WellPoint California Services, Inc.
Wellpoint Corporation
Wellpoint Delaware, Inc.
WellPoint Dental Services, Inc.
Wellpoint District of Columbia, Inc.
WellPoint Federal Corporation
WellPoint Health Solutions, Inc.
WellPoint Holding Corporation
Wellpoint Illinois Services, Inc.
Wellpoint Insurance Company
WellPoint Insurance Services, Inc.
Wellpoint Iowa, Inc.
Wellpoint IPA Holding Company, Inc.
Wellpoint Life and Health Insurance Company
Wellpoint Maryland, Inc.
Wellpoint National Services, Inc.
Wellpoint New Jersey, Inc.
Wellpoint New Mexico, Inc.
Wellpoint Ohio, Inc.

NOTES TO FINANCIAL STATEMENTS

CarelonRx, Inc.	Wellpoint South Carolina, Inc.
CarelonRx Pharmacy, Inc.	Wellpoint Specialty Services, Inc.
Caremax Pharmacy of Loudon, Inc.	Wellpoint Tennessee, Inc.
CareMore Health of Arizona, Inc.	Wellpoint Texas, Inc.
CareMore Health Plan of Texas, Inc.	Wellpoint Washington, Inc.
Centers Plan for Healthy Living LLC	Wellpoint West Virginia, Inc.
Cerulean Companies, Inc.	WestCare, Inc.
Claim Management Services, Inc.	Wisconsin Collaborative Insurance Company

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

(1) On August 16, 2022, the U.S. government enacted the Inflation Reduction Act which includes a new 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 controlled group of corporations, of which the Company is a member, has determined it is an applicable corporation for purposes of determining if the corporate AMT exceeds the regular federal income tax payable. The controlled group has determined that it does not expect to be subject to the corporate AMT in 2024.

The Company is an applicable reporting entity, not individually as an unaffiliated corporation, but as a member of a tax-controlled group of corporations. The Company does not expect to be subject to the corporate AMT in 2024.

(2) An accounting policy election has been made to disregard corporate AMT when evaluating the need for a valuation allowance for its regular tax deferred tax assets.

(3) The controlled group of corporations, of which the Company is a member, has not made any material modifications to the methodology used to project the corporate AMT liability.

(4) Does the Company's tax-planning strategies include the use of corporate AMT? Yes_____ No __X__

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

A. Nature of the Relationship

The Company is a New York domiciled stock health maintenance organization ("HMO") and is a wholly-owned subsidiary of Anthem HealthChoice Assurance, Inc. ("AHCA"), which is an indirect wholly-owned subsidiary of Elevance Health, a publicly traded company.

B. Significant Transactions for Each Period

There were no significant transactions during the years ended December 31, 2024 and 2023.

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.

NOTES TO FINANCIAL STATEMENTS

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, 2024 and 2023, the Company reported no amounts due from affiliates. At December 31, 2024 and 2023, the Company reported $74,986,924 and $44,872,717 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.

Following is a summary of transactions between the Company and various affiliates during the years:

	2024	2023
The Anthem Companies, Inc.		
Medical Management	$ 5,149,437	$ 8,522,594
MIS-IT	1,376,847	2,099,098
Sales	1,282,855	2,066,228
Customer Service	2,406,792	3,197,812
Claims	269,019	265,496
Provider Network	1,434,454	1,233,374
Enrollment and Billing	307,728	455,692
Operations Support	1,105,024	1,513,631
Finance	482,293	344,680
Decision Support	306,313	337,399
Underwriting	23,257	8,625
Legal and Compliance	345,176	397,715
Human Resources	174,084	206,683
Marketing	589,339	909,822
General Management	214,977	270,971
Product Development and Management	191,770	195,909
Planning	27,919	39,497
General Administration	1,379,023	723,591
Other	259,387	440,482
Total	$ 17,325,694	$ 23,229,299
Elevance Health, Inc.		
MIS-IT	$ 1,949,206	$ 1,714,097
Medical Management	9,298,965	6,691,301
General Management	708,966	641,958
Print Mail	369,513	417,210
Customer Service	600,976	1,055,204
Marketing	990,805	2,009,426
Legal and Compliance	744,291	939,781
Provider Network	172,363	223,182
Sales	4,213,622	6,377,755
Claims	1,457	213,746
Enrollment and Billing	115,661	183,155
General Administration	357,942	205,557
Finance	53,024	60,658
Product Development & Management	40,009	84,536
Operations Support	4,665,915	5,555,662
External Affairs	50,647	70,371
Decision Support	32,428	63,328
Other	253,650	674,908
Total	$ 24,619,440	$ 27,181,835
Elevance Health Information Technology Services, Inc.		
MIS-IT	$ 1,078,830	$ 1,096,729
Other	22,794	10,702
Total	$ 1,101,624	$ 1,107,431

NOTES TO FINANCIAL STATEMENTS

Costs allocated from other Elevance Health, Inc. affiliates not listed above		
Medical Management	$ 11,362	$ 139,129
General Administration	(42,159)	(131,468)
Provider Network	4,307	9,535
MIS-IT	(59,660)	55,825
Finance	9,977	21,401
External Affairs	5,986	3,218
Product Development and Management	415	1,569
Claims	459,862	647,696
General Management	14,151	23,496
Underwriting	4	7
Decision Support	1,107	485
Credentialing	128	144
Marketing	37,468	68,256
Customer Service	2,725	5,171
Print Mail	67	(78)
Legal and Compliance	2,313	3,360
Clinical Health Policy	(2,290)	91
Human Resources	17,802	23,097
Sales	12,030	55,613
Planning	245	2,111
Actuarial Valuation	118	309
Operations Support	312,148	369,439
Other	2,643	4,749
Total	$ 790,749	$ 1,303,155
Net Costs Allocated to the Company	$ 43,837,507	$ 52,821,720
Federal Tax Payments to Elevance Health, Inc.	4,083,208	(150,407)
Total Schedule Y, Part 2, Column 8	$ 47,920,715	$ 52,671,313

E. Management and Service Contracts and Cost Sharing Arrangements

The Company has entered into administrative services agreements with its affiliated companies. Pursuant to these agreements, various administrative, management and support services are provided to or provided by the Company. The costs and expenses related to these administrative management and support services are allocated to or allocated by the Company in an amount equal to the direct and indirect costs and expenses incurred in providing these services. Costs include expenses such as salaries, employee benefits, information technology, dental benefits management services, health care management services, communications, advertising, consulting services, rent, utilities, billing, accounting, underwriting, and product development, which support the Company's operations. These costs are allocated based on various utilization statistics.

There were no changes to the intercompany management and service arrangements, and there were no additional arrangements entered into during 2024 or 2023. The amounts of transactions under such agreements are presented in Schedule Y, Part 2.

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

AHCA owns all outstanding shares of the Company. The Company's ultimate parent is Elevance Health.

NOTES TO FINANCIAL STATEMENTS

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

At December 31, 2024 and 2023, the Company did not have investments in affiliates.

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, 2024 and 2023.

B. FHLB (Federal Home Loan Bank) Agreements

The Company had no FHLB agreements outstanding at December 31, 2024 and 2023.

C. All Other Debt

The Company had no other debt outstanding at December 31, 2024 and 2023.

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

A. Defined Benefit Plan

Not applicable - See Note 12G.

NOTES TO FINANCIAL STATEMENTS

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 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 2024 and 2023, the Company was allocated the following costs or (credits) for these retirement benefits:

	2024	2023
Defined contribution plan	573,659	703,282
Stock incentive compensation plan	361,188	399,421

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

As of December 31, 2024, the Company has 200,000 shares of $.01 par value common stock authorized, issued and outstanding.

B. Preferred Stock

The Company has no preferred stock outstanding.

NOTES TO FINANCIAL STATEMENTS

C. Dividend Restrictions

Under New York law, the Company is limited in the amount of dividends that can be declared without regulatory approval. The Department and the New York State Department of Health ("NYDOH") must approve any dividend that exceeds the lesser of 10% of its capital and surplus or 100% of adjusted net investment income. Also, any dividend paid from other than positive unassigned surplus shall be considered an extraordinary dividend, and will need approval of the Insurance Commissioner.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2025

Within the limitations of (C) above, the Company may pay $10,864,583 in ordinary dividends during 2025 without restrictions, other than state notification requirements.

F. Unassigned Surplus Restrictions

Unassigned surplus funds are not restricted at December 31, 2024.

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, 2024.

I. Changes in Special Surplus Funds

There are no special surplus funds at December 31, 2024.

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment gains and losses was $(10,012) at December 31, 2024.

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, 2024 or 2023.

NOTES TO FINANCIAL STATEMENTS

B. Assessments

(1) The Company is subject to guaranty fund and other assessment. Guaranty fund assessments are accrued at the time of covered insurer insolvencies.

The Company participates in risk sharing pools, including the Demographic and Specified Medical Conditions (Regulation 164) and Stop Loss (Regulation 171) pools. These pools are intended to subsidize health insurance carriers for unfavorable claims experience. The Company is also subject to Bad Debt and Charity Care pools which subsidize financially stressed hospitals and Graduate Medical Expenses ("GME") assessments which subsidize hospital indigent care and health care initiatives. These assessments are accrued at the time the assessment obligation is incurred.

(2) Not applicable.

(3) Not applicable.

C. Gain Contingencies

The Company has no gain contingencies at December 31, 2024 or 2023.

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

Litigation and regulatory proceedings

Blue Cross Blue Shield Antitrust Litigation

Elevance Health, Inc. is a defendant in multiple lawsuits that were initially filed in 2012 against the BCBSA and Blue Cross and/or Blue Shield licensees (the "Blue plans") across the country. Cases filed in twenty-eight states were consolidated into a single, multi-district proceeding captioned *In re Blue Cross Blue Shield Antitrust Litigation* that is pending in the U.S. District Court for the Northern District of Alabama (the "Court"). Generally, the suits allege that the BCBSA and the Blue plans have conspired to horizontally allocate geographic markets through license agreements, best efforts rules that limit the percentage of non-Blue revenue of each plan, restrictions on acquisitions, rules governing the BlueCard® and National Accounts programs and other arrangements in violation of the Sherman Antitrust Act and related state laws. The cases were brought by two putative nationwide classes of plaintiffs, health plan subscribers and providers.

The BCBSA and Blue plans approved a settlement agreement and release with the subscriber plaintiffs (the "Subscriber Settlement Agreement"), which agreement required the Court's approval to become effective. The Subscriber Settlement Agreement requires the defendants to make a monetary settlement payment and contains certain terms imposing non-monetary obligations including (i) eliminating the "national best efforts" rule in the BCBSA license agreements (which rule limits the percentage of non-Blue revenue permitted for each Blue plan) and (ii) allowing for some large national employers with self-funded benefit plans to request a bid for insurance coverage from a second Blue plan in addition to the local Blue plan.

NOTES TO FINANCIAL STATEMENTS

In November 2020, the Court issued an order preliminarily approving the Subscriber Settlement Agreement, following which members of the subscriber class were provided notice of the Subscriber Settlement Agreement and an opportunity to opt out of the class. A small number of subscribers submitted valid opt-outs by the opt-out deadline.

In August 2022, the Court issued a final order approving the Subscriber Settlement Agreement (the "Final Approval Order"). The Court amended its Final Approval Order in September 2022, further clarifying the injunctive relief that may be available to subscribers who submitted valid opt-outs. The ultimate amount paid by Elevance Health under the Subscriber Settlement Agreement was $604,000,000.

Four notices of appeal of the Final Approval Order were heard by a panel of the United States Court of Appeals for the Eleventh Circuit (the “Eleventh Circuit”) in September 2023, and the Eleventh Circuit affirmed the Court’s Final Approval Order approving the Subscriber Settlement Agreement in October 2023. Petitions for rehearing were filed by certain appellants in November 2023 and December 2023 and were denied in January 2024. As a result, the Eleventh Circuit issued a mandate terminating the jurisdiction of the Eleventh Circuit in February 2024. In March 2024, Home Depot, one of the appellants, filed a petition for certiorari to the United States Supreme Court (the “Supreme Court”). On the respondents’ request, the Supreme Court granted an extension to respond until May 2024. In April 2024, David Behenna, another appellant, filed a petition for certiorari to the Supreme Court, and the defendants and the subscriber plaintiffs filed briefs in opposition in May 2024. In June 2024, the Supreme Court declined to grant certiorari, exhausting all appellate rights. The Subscriber Settlement Agreement and the defendants’ payment and non-monetary obligations under the Subscriber Settlement Agreement became effective in June 2024, with the request for second Blue plan bid provisions effective in September 2024. The funds held in escrow will be distributed in accordance with the Subscriber Settlement Agreement.

A number of follow-on cases involving entities that opted out of the Subscriber Settlement Agreement have been filed. Those actions are: *Alaska Air Group, Inc., et al. v. Anthem, Inc., et al.,* No. 2:21-cv-01209-AMM (N.D. Ala.); *JetBlue Airways Corp., et al. v. Anthem, Inc., et al.*, No. 2:22-cv-00558-GMB (N.D. Ala.); *Metropolitan Transportation Authority v. Blue Cross and Blue Shield of Alabama et al.*, No. 2:22-cv-00265-RDP (N.D. Ala.) (dismissed without prejudice in June 2023); *Bed Bath & Beyond Inc. v. Anthem, Inc.*, No. 2:22-cv-01256-SGC (N.D. Ala.); *Hoover, et al. v. Blue Cross Blue Shield Association, et al.*, No. 2:22-cv-00261-RDP (N.D. Ala.); and *VHS Liquidating Trust v. Blue Cross of California, et al.*, No. RG21106600 (Cal. Super.). In February 2023, the Court denied the defendants’ motion to dismiss based on a statute of limitations defense in *Alaska Air* and *Jet Blue*. In September 2023, the California court presiding over the *VHS* case, upheld its prior order granting in part defendants’ motion to strike based on the statute of limitations. Elevance Health intends to continue to vigorously defend these follow-on cases, which they believe are without merit; however, their ultimate outcome cannot be presently determined.

In October 2020, after the Court lifted the stay as to the provider litigation, provider plaintiffs filed a renewed motion for class certification, which defendants opposed. In March 2021, the Court issued an order terminating the pending motion for class certification until the Court determined the standard of review applicable to the providers’ claims. In response to that order, the parties filed renewed standard of review motions, and in June 2021, the parties filed summary judgment motions not critically dependent on class certification. In February 2022, the court issued orders (i) granting certain defendants’ motion for partial summary judgment against the provider plaintiffs who had previously released claims against such defendants, and (ii) granting the provider plaintiffs’ motion for partial summary judgment, determining that *Ohio v. American Express Co.* does not affect the standard of review in this case. In August 2022, the Court issued orders (i) granting in part the defendants’ motion regarding the antitrust standard of review, holding that for the period of time after the elimination of the “national best efforts” rule, the rule of reason applies to the provider plaintiffs’ market

allocation conspiracy claims, and (ii) denying the provider plaintiffs' motion for partial summary judgment on the standard of review, reaffirming its prior holding that the provider groups' boycott claims are subject to the rule of reason. In December 2023, the Court denied defendants' motion for summary judgment on providers' damage claims as time-barred and speculative and provider plaintiffs' motion for partial summary judgment on the defendants' single entity defense due to the existence of genuine issues of material fact. In January 2024, the Court issued orders (i) denying defendants' motion for summary judgment on (a) all claims by certain hospital providers and (b) any claims based on the Blue system's rules other than exclusive services areas or BlueCard and (ii) denying provider plaintiffs' motion for partial summary judgment on defendants' common law trademark claims. Provider plaintiffs' motion for partial summary judgment on defendants' common law trademark claims.

In the third quarter of 2024, the BCBSA, along with individually named Blue plans approved a settlement agreement and release (the "Provider Settlement Agreement") with the provider plaintiffs, and in October 2024 the provider plaintiffs filed a motion for preliminary approval with the Court. The Court granted preliminary approval of the provider settlement on December 4, 2024. If finally approved by the Court, the Provider Settlement Agreement will require defendants to make a monetary settlement payment, Elevance Health's portion of which is estimated to be $666,000,000, and will contain certain non-monetary terms including (i) expansion of certain opportunities to contract with providers in contiguous service areas, (ii) certain prompt pay commitments, and (iii) various technological enhancements to the BlueCard program. Elevance Health recognized their estimated payment obligation under the Provider Settlement Agreement of $666,000,000 in September 2024. Providers Plaintiff's motion for class certification remain pending. The Company recorded its portion of the Provider Settlement Agreement in 2024.

Express Scripts, Inc. Pharmacy Benefit Management Litigation

In March 2016, Elevance Health, Inc. filed a lawsuit against Express Scripts, Inc. ("Express Scripts"), their vendor at the time for pharmacy benefit management services, captioned *Anthem, Inc. v. Express Scripts, Inc.*, in the U.S. District Court for the Southern District of New York (the "District Court"). The lawsuit sought to recover over $14,800,000,000 in damages for pharmacy pricing that is higher than competitive benchmark pricing under the agreement between the parties (the "ESI Agreement"), over $158,000,000 in damages related to operational breaches, as well as various declarations under the ESI Agreement, including that Express Scripts: (i) breached its obligation to negotiate in good faith and to agree in writing to new pricing terms (the "Pricing Claim"); (ii) was required to provide competitive benchmark pricing to Elevance Health through the term of the ESI Agreement; (iii) has breached the ESI Agreement; and (iv) is required under the ESI Agreement to provide post-termination services, at competitive benchmark pricing, for one year following any termination.

Express Scripts has disputed Elevance Health's contractual claims and it sought declaratory judgments: (i) regarding the timing of the periodic pricing review under the ESI Agreement, and (ii) that it has no obligation to ensure that Elevance Health receives any specific level of pricing, that Elevance Health has no contractual right to any change in pricing under the ESI Agreement and that its sole obligation is to negotiate proposed pricing terms in good faith. In the alternative, Express Scripts claims that Elevance Health has been unjustly enriched by its payment of $4,675,000,000 at the time they entered into the ESI Agreement. In March 2017, the District Court granted Elevance Health's motion to dismiss Express Scripts' counterclaims for (i) breach of the implied covenant of good faith and fair dealing, and (ii) unjust enrichment with prejudice. After such ruling, Express Scripts' only remaining claims were for breach of contract and declaratory relief. In August 2021, Express Scripts filed a motion for summary judgment, which Elevance Health opposed. In March 2022, the District Court granted in part and denied in part Express Scripts' motion for summary judgment. The District Court dismissed Elevance Health's declaratory judgment claim, Elevance Health's breach of

contract claim for failure to prove damages and most of Elevance Health's operational breach claims. As a result of the summary judgment decision, the only remaining claims as of the filing of this Annual Report are (i) Elevance Health's operational breach claim based on Express Scripts' prior authorization processes and (ii) Express Scripts' counterclaim for breach of the market check provision of the ESI Agreement. Express Scripts filed a second motion for summary judgment in June 2022, challenging Elevance Health's remaining operational breach claims, which the District Court denied in March 2023. In November 2023, the District Court issued a final judgment ending the lawsuit in the District Court after the parties settled and stipulated to dismiss the only remaining claim that had not been disposed of by the court order or stipulation. In December 2023, Elevance Health filed a notice of appeal with the United States Court of Appeals for the Second Circuit, regarding the Pricing Claim. Mediation ordered by the Second Circuit occurred in March 2024 and was unsuccessful. Oral argument before the Second Circuit was held in October 2024. In November 2024, the Court affirmed the trial court's decision dismissing the case. A motion for rehearing was submitted which was denied. The matter is now closed.

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice ("DOJ") filed a civil lawsuit against Elevance Health, Inc. in the 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 risk-adjustment 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, all of which the District Court denied in October 2022. In November 2022, Elevance Health filed an answer. In March 2023, discovery commenced, and an initial case management conference was held in April 2023. Fact discovery is ongoing. In December 2024, the District Court issued a scheduling order setting the deadlines for the completion of fact discovery in August 2025 and April 2026 for the completion of expert discovery. Elevance Health intends to continue to vigorously defend this suit, which they believe is without merit; however, the ultimate outcome cannot be presently determined.

Other Contingencies

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, 2024 and 2023, the Company reported admitted assets of $27,207,347 and $32,094,797 respectively, in premium receivables and receivables due from uninsured plans. Based upon the Company's experience, any uncollectible receivables are not expected to exceed $1,362,827 that was nonadmitted at December 31, 2024; 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

(1) The Company leases office space, office equipment, EDP equipment, and software under various noncancelable operating leases. Certain leases have the right to renew. There are no escalation clauses for any lease. Related lease expense for 2024 and 2023 was $655,463 and $635,436, respectively.

(2) At December 31, 2024, the minimum aggregate rental commitments are as follows:

	Year Ending December 31	Operating Leases
1	2025	$ 741,364
2	2026	748,774
3	2027	763,744
4	2028	779,014
5	2029	794,608
6	Thereafter	401,246
7	Total (sum of 1 through 6)	$ 4,228,750

(3) The Company has not entered into any material sale-leaseback transactions.

B. Lessor Leases

(1) The Company has not entered into any operating leases as a lessor.

(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, 2024, 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, 2024 and 2023.

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, 2024 the fair value of securities loaned was $8,836,445 and the carrying value of securities loaned was $8,879,421.

(2) - (7) Not applicable.

C. Wash Sales

(1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.

(2) At December 31, 2024 and 2023, 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

The gain or (loss) from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2024 was:

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a.	Net reimbursement for administrative expenses (including administrative fees) in excess of (less than) actual expenses	$ —	$ 1,105,165	$ 1,105,165
b.	Total net other income or expenses (including interest paid to or received from plans)	—		—
c.	Net gain or (loss) from operations	$ —	$ 1,105,165	$ 1,105,165
d.	Total claim payment volume	$ —	$ 34,620,041	$ 34,620,041

NOTES TO FINANCIAL STATEMENTS

B. Administrative Services Contract ("ASC") Plans

The gain or (loss) from operations from ASC uninsured plans and the uninsured portion of partially insured plans during 2024 was:

		ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a.	Gross reimbursement for medical cost incurred	$ 7,138,644	$ —	$ 7,138,644
b.	Gross administrative fees accrued	—	—	—
c.	Other income or expenses (including interest paid to or received from plans)	—	—	—
d.	Gross expenses incurred (claims and administrative)	(7,140,032)	—	(7,140,032)
e.	Total gain or (loss) from operations	$ (1,388)	$ —	$ (1,388)

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

(1) The Company does not record revenue explicitly attributable to the cost share and reinsurance components of administered Medicare.

(2)

Receivable from	Related to	2024	2023
Federal government	ACA and Medicare cost sharing and reinsurance programs	$ —	$ 2,677,593
Uninsured plans	Uninsured business, not including pharmaceutical rebate or provider receivables	$ 2,837,019	$ —

(3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or similarly structured cost-based reimbursement arrangements, the Company has recorded no allowances and reserves for the adjustment of recorded revenues and receivables.

(4) The Company has made no adjustment to revenue resulting from the audit of cost-reimbursement receivables related to revenues recorded in the prior period.

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, 2024 and 2023.

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds					
U.S. special revenues	$ —	$ 483,863	$ —	$ —	$ 483,863
Total bonds	$ —	$ 483,863	$ —	$ —	$ 483,863
Cash equivalents					
Industrial and miscellaneous money market funds	$ 102,000,000	$ —	$ —	$ —	$102,000,000
Total cash equivalents	$ 102,000,000	$ —	$ —	$ —	$102,000,000
Total assets at fair value/NAV	$ 102,000,000	$ 483,863	$ —	$ —	$102,483,863

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

There are no investments in Level 3 as of December 31, 2024 and 2023.

(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.

Cash equivalents primarily consist of highly rated money market funds or bonds with original maturities of three months or less. Due to the high ratings and short-term nature, these investments are designated as Level 1. The Company also holds bonds purchased with less than three months to maturity. Fair value of these bonds are based on quoted market prices obtained from third party pricing services which generally use Level 1 or Level 2 inputs.

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

NOTES TO FINANCIAL STATEMENTS

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2024 and 2023.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	$228,777,991	$235,690,069	$ —	$228,777,991	$ —	$ —	$ —
Cash equivalents	$102,000,000	102,000,000	102,000,000	—	—	—	—
Securities lending collateral asset	$ 9,059,298	$ 9,057,553	$ —	$ 9,059,298	$ —	$ —	$ —

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, 2024 and 2023.

B. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2024 and 2023.

C. Other Disclosures

The Company has had a contract with Centers for Medicare & Medicaid Services ("CMS") to provide health care services through a network of healthcare providers to Medicare enrollees in the Greater New York Metropolitan area and select upstate counties. Effective January 1, 2025, this contract was novated to another Elevance Health affiliate, Anthem HP, LLC.

D. Business Interruption Insurance Recoveries

The Company has reported no recoveries for business interruption for the years ended December 31, 2024 and 2023.

E. State Transferable and Non-Transferable Tax Credits

The Company did not have state transferable or non-transferable tax credits at December 31, 2024 and 2023.

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, 2024 or 2023.

(3) The Company did not have subprime mortgage-related risk exposure at December 31, 2024 or 2023.

(4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2024 or 2023.

G. Retained Assets

The Company does not have retained assets at December 31, 2024 and 2023.

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 March 27, 2025 for the statutory statement issued on March 28, 2025. There were no events occurring subsequent to December 31, 2024 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.

NOTES TO FINANCIAL STATEMENTS

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.

B. Uncollectible Reinsurance

The Company has no uncollectible reinsurance at December 31, 2024 and 2023.

C. Commutation of Ceded Reinsurance

The Company has not commuted ceded reinsurance during 2024 and 2023.

D. Certified Reinsurer Rating Downgraded or Status Subject Revocation

The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2024 and 2023.

E. Reinsurance Credit

(1) Not applicable.

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

24. Retrospectively 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.

B. The Company records accrued retrospective premium as an adjustment to earned premium.

C. The amount of net premiums written by the Company at December 31, 2024 and 2023 that were subject to retrospective rating features was $550,766,040 and $597,338,698, respectively, which represented 100.0% and 100.0%, respectively, of the total net premiums written.

D. In accordance with the NAIC SAP, medical loss ratio rebates in accordance with the Federal 2010 Patient Protection and Affordable Care Act and Public Health Service Act ("ACA Act" or "ACA"), are to be reported in accordance with SSAP No. 66 - *Retrospectively Rated Contracts* ("SSAP No. 66"). A retrospectively rated contract is one that has the final policy premium calculated based on the loss experience of the insured during the term of the policy (including loss development after the term of the policy) and the stipulated formula set forth in the policy, or in the case of medical loss ratio rebates, a formula required by law. The Company based the incurred and unpaid liability amounts reported below based on its underwriting experience; actuarial, tax, and accounting estimates and assumptions at the financial statement date; as well as regulations and guidance available that is not final and subject to change prior to settlement. Accordingly, the Company's use of estimates and assumptions in the preparation of the statutory based financial statements and related footnote disclosures may differ from actual results. Hence, the amounts reported herein are for financial reporting purposes solely and not intended to be used for settlement purposes.

NOTES TO FINANCIAL STATEMENTS

Medical loss ratio rebates accrued pursuant to the ACA Act are as follows:

	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Year Reporting:					
(1) Medical loss ratio rebates incurred	$ (51,406)	$ —	$ (364,321)	$ —	$ (415,727)
(2) Medical loss ratio rebates paid	—	—	—	—	—
(3) Medical loss ratio rebates unpaid	—	—	—	—	—
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	$ —
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	$ —	$ —	$ —	$ —	$ —
(8) Medical loss ratio rebates paid	—	—	—	—	—
(9) Medical loss ratio rebates unpaid	—	—	—	—	—
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	$ —

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)? Yes

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

a. Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) $ —

Liabilities

2. Risk adjustment user fees payable for ACA Risk Adjustment $ —
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premiums) $ 21,309

Operations (Revenue & Expense)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment $ 3,860,131
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) $ —

Line items where the amount is zero is due to no balance and/or no activity as of the reporting date.

NOTES TO FINANCIAL STATEMENTS

(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.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)		$ —	$ 3,879,232	$ —	$(3,879,232)	$ —	$ 3,879,232	$ —	A	$ —	$ —
2. Premium adjustments (payable) (including high risk pool premiums)	$ —	$ 2,208	$ —	$ —	$ —	$ 2,208	$ —	$ (2,208)	B	$ —	$ —
3. Total ACA Permanent Risk Adjustment Program	$ —	$ 2,208	$ 3,879,232	$ —	$(3,879,232)	$ 2,208	$ 3,879,232	$ (2,208)		$ —	$ —

Explanations of Adjustments

A Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2023 Benefit Year."

B Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2023 Benefit Year."

25. Change in Incurred Claims and Claim Adjustment Expenses

A. The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by $11,782,195 during 2024. This is approximately 19.5% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of $60,335,942 as of December 31, 2023. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2024. 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, 2024 and 2023.

27. Structured Settlements

Not applicable at December 31, 2024 and 2023.

NOTES TO FINANCIAL STATEMENTS

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
12/31/2024	$ 4,653,239	$ 13,130,376	$ 8,444,767	$ —	$ —
9/30/2024	4,393,035	13,742,533	13,553,626	—	—
6/30/2024	4,191,771	13,411,621	13,219,854	191,767	—
3/31/2024	3,490,013	12,241,122	11,987,582	253,540	—
12/31/2023	$ 4,514,380	$ 13,785,350	$ 13,443,743	$ 341,607	$ —
9/30/2023	4,640,044	14,594,965	14,231,956	363,010	—
6/30/2023	5,242,054	14,572,601	14,211,163	361,438	—
3/31/2023	5,930,779	13,673,017	13,122,800	550,216	—
12/31/2022	5,596,207	15,038,767	14,457,849	580,918	—
9/30/2022	4,938,204	15,070,620	14,749,221	321,399	—
6/30/2022	5,827,576	15,890,128	15,376,130	513,999	—
3/31/2022	5,729,197	14,798,959	14,258,861	540,098	—

Note: Amounts within column "Estimated pharmacy rebates as reported on financial statements" include $0 of uninsured admitted pharmacy rebate receivables at December 31, 2024 that are reported within Pg 2, Ln 17 "Amounts receivable relating to uninsured plans."

B. Risk Sharing Receivables

Not applicable at December 31, 2024 and 2023.

29. Participating Policies

Not applicable at December 31, 2024 and 2023.

30. Premium Deficiency Reserves

The Company had no liabilities related to premium deficiency reserves as of December 31, 2024 and 2023.

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 $232,533 and $358,392 at December 31, 2024 and 2023, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

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

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

1.3 State Regulating? ..... New York

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. 0001156039

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 [X] No [ ]

2.2 If yes, date of change: 01/02/2024

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2022

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. 12/31/2022

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/24/2024

3.4 By what department or departments?
New York State Department of Financial Services .....

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

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

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

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

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

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

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

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

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

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

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

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

GENERAL INTERROGATORIES

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

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

.....

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

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....	.....	.....	.....	.....	.....

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

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

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

Ernst & Young LLP, 111 Monument Circle, Suite 4000, Indianapolis, IN 46204 .....

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

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

.....

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

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

.....

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

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

.....

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

Brandon Sanchez, FSA, MAAA, Associate Actuary (employee): One Penn Plaza, 35th & 36th floor, New York, NY, 10019 .....

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

12.11 Name of real estate holding company ...

12.12 Number of parcels involved .....

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

12.2 If yes, provide explanation

.....

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

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

.....

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

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

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

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

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

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

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

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

e. Accountability for adherence to the code.

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

.....

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

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

1.Changes to lobbying section to clarify that the policies in the section apply to foreign government officials as well as domestic, 2.Changes to the Gifts and Special Courtesies section to ensure language on the process for requesting an exception to the prohibition on gifts to government officials, 3.Changes to the Code of Conduct to strengthen and clarify the scope and guiding principles for human rights and the grievance process, 4.Added provisions for the use of Generative AI and Large Language Models (LLMs) and expanded to clarify that vendors / suppliers are required to adhere to RAI policies and guidelines, and 5.Added references to the Ireland Criminal Justice Act. .....

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

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

.....

GENERAL INTERROGATORIES

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

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

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

BOARD OF DIRECTORS

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

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

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

FINANCIAL

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

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

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

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

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

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

22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment $ 371,315
- 22.22 Amount paid as expenses ..... $ .....
- 22.23 Other amounts paid ..... $ .....

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

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

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

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

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

INVESTMENT

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

GENERAL INTERROGATORIES

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

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
See Notes 5E and 17.

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. $ 9,057,553

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

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

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

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

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

25.091	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 9,059,298
25.092	Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 9,057,553
25.093	Total payable for securities lending reported on the liability page	$ 9,057,553

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

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

26.21	Subject to repurchase agreements	$ 0
26.22	Subject to reverse repurchase agreements	$ 0
26.23	Subject to dollar repurchase agreements	$ 0
26.24	Subject to reverse dollar repurchase agreements	$ 0
26.25	Placed under option agreements	$ 0
26.26	Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	$ 0
26.27	FHLB Capital Stock	$ 0
26.28	On deposit with states	$ 30,190,575
26.29	On deposit with other regulatory bodies	$ 0
26.30	Pledged as collateral - excluding collateral pledged to an FHLB	$ 0
26.31	Pledged as collateral to FHLB - including assets backing funding agreements	$ 0
26.32	Other	$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

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

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

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

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

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

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

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

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

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

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

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

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

1 Name of Custodian(s)	2 Custodian's Address
JP Morgan Chase Bank, N.A	383 Madison Ave, New York, NY 10179

GENERAL INTERROGATORIES

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

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
Elevance Health, Inc.	I
Loomis, Sayles & Company, LP	U
MacKay Shields LLC	U

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	JIZPN2RX3UMNOYIDI313	Securities Exchange Commission	NO
107717	MacKay Shields LLC	549300Y7LLCOFU7R8H16	Securities Exchange Commission	NO

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

30.2 If yes, complete the following schedule:

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

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

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

GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	235,690,069	228,777,991	(6,912,078)
31.2 Preferred stocks	0		0
31.3 Totals	235,690,069	228,777,991	(6,912,078)

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 [X]

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

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

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

33.2 If no, list exceptions:

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
    a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
    b. Issuer or obligor is current on all contracted interest and principal payments.
    c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

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

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
    a. The security was either:
        i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
        ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
    b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
    c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
    d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

    Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? ..... Yes [ ] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
    a. The shares were purchased prior to January 1, 2019.
    b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
    c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
    d. The fund only or predominantly holds bonds in its portfolio.
    e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
    f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

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

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
    a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
    b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
    c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
    d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

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

GENERAL INTERROGATORIES

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

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

- .....

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

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

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

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

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

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

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... $ 35,120

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

1 Name	2 Amount Paid
Blue Cross Blue Shield Association	 35,120
.....	.....

41.1 Amount of payments for legal expenses, if any? ..... $ 764,210

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

1 Name	2 Amount Paid
Nelson Mullins Rileys	233,647
Omelveny & Myers	376,640
.....	.....

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? ..... $ 16,049

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

1 Name	2 Amount Paid
Pitta Bishop & Del Giorno LLC	4,209
Hinman Straub	 10,521
Lobbying expenses disclosed reflect amounts reported in the Lobbyist Disclosure Reports filed with the Secretary of State as well as the cost of external contractors who provided lobbying services to the Company. The amount may include expenses that may have been paid by an affiliate on behalf of the Company and, as a result, may not be included in the Underwriting Gain reported on page 4 of the 2024 Annual Statement.	.....
.....	.....

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

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

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

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

1.31 Reason for excluding

.....

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

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

1.6 Individual policies:

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

1.7 Group policies:

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

2. Health Test:

		1 Current Year	2 Prior Year
2.1	Premium Numerator	554,219,821	596,031,726
2.2	Premium Denominator	554,219,821	596,031,726
2.3	Premium Ratio (2.1/2.2)	1.000	1.000
2.4	Reserve Numerator	110,107,516	125,470,156
2.5	Reserve Denominator	110,107,516	125,470,156
2.6	Reserve Ratio (2.4/2.5)	1.000	1.000

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

3.2 If yes, give particulars:

.....

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

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

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

5.2 If no, explain:

The Company retains all risk. .....

5.3 Maximum retained risk (see instructions)

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

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

If the Company becomes insolvent, Anthem, Inc. has agreed to assume all contractual and financial obligations of the Company. All provider contracts contain appropriate hold harmless provisions. .....

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

7.2 If no, give details

.....

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year	131,557
8.2 Number of providers at end of reporting year	164,179

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	$

GENERAL INTERROGATORIES

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

10.2 If yes:

10.21 Maximum amount payable bonuses..... $ 41,534,115
10.22 Amount actually paid for year bonuses..... $ 5,854,640
10.23 Maximum amount payable withholds..... $ .....
10.24 Amount actually paid for year withholds..... $ .....

11.1 Is the reporting entity organized as:

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

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes [X] No [ ]
11.3 If yes, show the name of the state requiring such minimum capital and surplus. ..... New York
11.4 If yes, show the amount required. ..... $ 68,845,755
11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes [X] No [ ]
11.6 If the amount is calculated, show the calculation
Please see attached Report 16A from the Company's Supplement. .....

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

1 Name of Service Area
Albany
Bronx
Clinton
Columbia
Delaware
Dutchess
Essex
Fulton
Greene
Kings
Montgomery
Nassau
New York
Orange
Putnam
Queens
Rensselaer
Richmond
Rockland
Saratoga
Schenectady
Schoharie
Suffolk
Sullivan
Ulster
Warren
Washington
Westchester

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

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

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

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

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [X]
14.2 If the answer to 14.1 is yes, please provide the following:

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

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

15.1 Direct Premium Written ..... $ .....
15.2 Total Incurred Claims .....$ .....
15.3 Number of Covered Lives ....

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

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

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

NEW YORK SUPPLEMENT FOR THE YEAR 2024 OF THE Anthem HealthChoice HMO, Inc.

REPORT #16A

Calculations Of The Escrow Deposit And Contingent Reserve Health Department Regulation Part 98-1.11(e) and (f)

I. Escrow Deposit

1.	Projected 2024 Hospital and Medical Expenses (12/31/23 NY Supplement, page NY6, ln. 16, col. 9)	449,214,387
2.	Escrow Deposit Requirement (5% of projected 2024 hospital and medical expenses) [a]	22,460,719

(a) Department of Health Regulation 10 NYCRR 98-1.11(f), requires the HMO to establish an escrow account in the form of a trust account with a custodian, for which a deed of trust has been approved by the superintendent. MCO's must include 100% of the projected total medical expenses in the calculation of the 5% escrow requirement that must be on deposit, as of March 31, 2024. The assets that comprise the escrow account should be reported normally in the Balance Sheet,e.g., investments in bonds should be reported on Line 1. Bonds and cash should be reported on Line 5.Cash, Also, details of the account should be reported in the NAIC Health Blank, Schedule E – Part 3, Special Deposits.

II. Contingent Reserve*

1.	Direct Business (NAIC Health Blank, page 8, Underwriting & Investment Part 1 - Premiums, ln. 12, col. 1)		550,766,040
2.	Approved Reinsurance Ceded (Report #16B, col. 2) [b]		
3.	Net Premium Income (Net of approved reinsurance) for: *		
	3.i) All lines of business EXCEPT: Essential Plan, Medicaid Managed Care, HARP, MLTC Program (MLTC-Partial, Medicaid Advantage Plus ("MAP"), PACE) and HIV SNP (pages NY7-NY9, ln. 2.5, all columns EXCEPT: cols. 33, 35, 37, 41, 43, 45)		0
	3.ii) Essential Plan, HARP, Medicaid Managed Care and HIV SNP programs (pages NY8-NY9, ln. 2.5, cols. 33, 35, 41, 43)	0	
	LESS: Value Based Payment ("VBP") Supplemental Programs		0
	3.iii) MLTC Program (MLTC-Partial, MAP, PACE) (page NY9, ln. 2.5, col. 37)	0	
	3.iv) FIDA (page NY9, ln. 2.5, col. 45)		0
4.	Contingent Reserve, not including the 2% Point of Service Contingent Reserve Requirement.[c]		68,845,755
5.	2% Point of Service Contingent Reserve Requirement.[d]		
6.	Total Contingent Reserve (lns. 4+5 should equal page NY3, ln. 30.11, col. 3).		68,845,755
7.	Escrow Deposit, after offset of the Contingent Reserve (I.ln. 2 less II.ln. 4; minimum of $0, should equal page NY3, ln. 30.12, col. 3)		0
8.	Total minimum Net Worth (ln. 6+7; should equal page NY3, ln. 30.13, col. 3)		68,845,755

***The Net Premium Income amount used to calculate the contingent reserve for line 3 are the amounts reported on the Statement of Revenue and Expenses by Line of Business Parts 1, 2 & 3 on pages 9 to 12 in the NY Supplement for HMO.**

(b) This entry will equal Net Premium Income, Page NY4, Line 2.5 only if all reinsurance contracts have been approved by the Department of Financial Services. Reinsurance agreements not approved by the Department of Financial Services should not be included in this line.

(c) For HMO's certified prior to June 29, 2005, Line 5 equals 12½% of Line 3(i) PLUS 7¼% of Line 3(ii) PLUS 5% of Line 3(iii) PLUS 6.25% of Line 3(iv).

(d) The calculation of the Contingent Reserve must show that the HMO meets the 2% Point of Service Contingent Reserve requirement in addition to the standard contingent reserve requirement of 10 NYCRR 98-1.11(e) if the HMO writes out-of-network coverage for POS contracts aside from individual "standardized" POS contracts.

For HMO's certified after June 29, 2005:
If as of 12/31/2024, the HMO has not been certified for a full calendar year, then Line 4 equals 5% of projected premium revenue for the first full year of calendar year operations, i.e., 5% of Page NY6, Line 2.5, column 9 to which the HMO is to add back reinsurance premiums ceded pursuant to a reinsurance contract that has not been approved by the Department of Financial Services.

If as of 12/31/2024, the HMO has been certified for at least one full calendar year, then Line 4 is determined in accordance with the following schedule:

The provisions below pertain to the contingent reserve for the Essential Plan, Medicaid Managed Care, HARP, HIV SNP, and MLTC Partial Cap (MAP, PACE, FIDA).

Completed Calendar Years of Operations	Line 4 should include This Percent of the amount of Premium in Line 3(i).	PLUS	For Calendar Year Ending	Line 4 should include the Percent of the amount of Premium in Line 3(ii).	PLUS	Line 4 should include the Percent of the amount of Premium in Line 3(iii)	PLUS	Line 4 should include the Percent of the amount of Premium in Line 3(iv).
1 year	5%		2024	7.25%		5.00%		6.25%
2 years	6.50%		2025	7.25%		5.00%		6.25%
3 years	7.50%		2026	8.25%		5.00%		6.25%
4 years	8.50%		2027	9.25%		5.00%		6.25%
5 years	9.50%		2028	10.25%		5.00%		6.25%
6 years	10.50%		2029	11.25%		5.00%		6.25%
7 years	11.50%		2030	12.5%		5.00%		6.25%
8 or more years	12.50%		After 2030	12.5%		5.00%		6.25%

FIVE-YEAR HISTORICAL DATA

		1 2024	2 2023	3 2022	4 2021	5 2020
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	405,793,033	298,572,114	373,230,702	430,440,262	425,392,401
2.	Total liabilities (Page 3, Line 24)	217,115,272	184,919,901	261,759,927	285,360,692	245,190,660
3.	Statutory minimum capital and surplus requirement	68,845,755	74,667,337	85,215,761	94,833,398	118,700,549
4.	Total capital and surplus (Page 3, Line 33)	188,677,761	113,652,213	111,470,775	145,079,570	180,201,741
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	554,219,821	596,031,726	680,561,454	755,212,636	952,467,973
6.	Total medical and hospital expenses (Line 18)	462,385,859	535,324,637	606,241,540	727,470,444	841,246,491
7.	Claims adjustment expenses (Line 20)	16,619,560	22,994,720	29,558,605	45,694,823	54,590,226
8.	Total administrative expenses (Line 21)	32,573,646	35,223,620	44,949,912	55,648,901	92,710,145
9.	Net underwriting gain (loss) (Line 24)	42,640,756	8,813,117	(6,512,971)	(55,960,836)	(2,966,786)
10.	Net investment gain (loss) (Line 27)	9,753,245	5,424,008	4,152,237	9,028,847	11,142,065
11.	Total other income (Lines 28 plus 29)	(485,121)	(207,952)	(356,611)	(519,997)	(399,049)
12.	Net income or (loss) (Line 32)	40,829,962	11,751,736	(2,317,119)	(33,487,501)	10,156,172
	Cash Flow (Page 6)					
13.	Net cash from operations (Line 11)	65,968,839	14,701,906	(8,256,067)	(89,273,202)	20,658,329
	Risk-Based Capital Analysis					
14.	Total adjusted capital	188,677,761	113,652,213	111,470,775	145,079,570	180,201,741
15.	Authorized control level risk-based capital	17,231,052	19,922,635	24,128,090	29,215,098	33,554,285
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	37,090	36,792	44,819	55,885	73,879
17.	Total members months (Column 6, Line 7)	457,895	468,322	568,520	708,959	898,761
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)	83.4	89.8	89.1	96.3	88.3
20.	Cost containment expenses	2.0	2.6	2.8	4.3	3.8
21.	Other claims adjustment expenses	1.0	1.3	1.6	1.8	2.0
22.	Total underwriting deductions (Line 23)	92.3	98.5	101.0	107.4	100.3
23.	Total underwriting gain (loss) (Line 24)	7.7	1.5	(1.0)	(7.4)	(0.3)
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 17, Col. 5)	45,241,243	63,099,868	102,192,596	129,559,302	103,502,823
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	58,500,766	69,177,440	117,432,318	144,127,431	95,760,344
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)				0	0
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)				0	0
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)		0			
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31	0	0	0	0	0
33.	Total investment in parent included in Lines 26 to 31 above.					

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

If no, please explain: .....

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only 2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama AL	N								0	
2. Alaska AK	N								0	
3. Arizona AZ	N								0	
4. Arkansas AR	N								0	
5. California CA	N								0	
6. Colorado CO	N								0	
7. Connecticut CT	N								0	
8. Delaware DE	N								0	
9. District of Columbia DC	N								0	
10. Florida FL	N								0	
11. Georgia GA	N								0	
12. Hawaii HI	N								0	
13. Idaho ID	N								0	
14. Illinois IL	N								0	
15. Indiana IN	N								0	
16. Iowa IA	N								0	
17. Kansas KS	N								0	
18. Kentucky KY	N								0	
19. Louisiana LA	N								0	
20. Maine ME	L		194,159						194,159	
21. Maryland MD	N								0	
22. Massachusetts MA	N								0	
23. Michigan MI	N								0	
24. Minnesota MN	N								0	
25. Mississippi MS	N								0	
26. Missouri MO	N								0	
27. Montana MT	N								0	
28. Nebraska NE	N								0	
29. Nevada NV	N								0	
30. New Hampshire NH	N								0	
31. New Jersey NJ	N								0	
32. New Mexico NM	N								0	
33. New York NY	L	15,579,791	534,992,090						550,571,881	
34. North Carolina NC	N								0	
35. North Dakota ND	N								0	
36. Ohio OH	N								0	
37. Oklahoma OK	N								0	
38. Oregon OR	N								0	
39. Pennsylvania PA	N								0	
40. Rhode Island RI	N								0	
41. South Carolina SC	N								0	
42. South Dakota SD	N								0	
43. Tennessee TN	N								0	
44. Texas TX	N								0	
45. Utah UT	N								0	
46. Vermont VT	N								0	
47. Virginia VA	N								0	
48. Washington WA	N								0	
49. West Virginia WV	N								0	
50. Wisconsin WI	N								0	
51. Wyoming WY	N								0	
52. American Samoa AS	N								0	
53. Guam GU	N								0	
54. Puerto Rico PR	N								0	
55. U.S. Virgin Islands VI	N								0	
56. Northern Mariana Islands MP	N								0	
57. Canada CAN	N								0	
58. Aggregate Other Aliens OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	15,579,791	535,186,249	0	0	0	0	0	550,766,040	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX								0	
61. Totals (Direct Business)	XXX	15,579,791	535,186,249	0	0	0	0	0	550,766,040	0
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

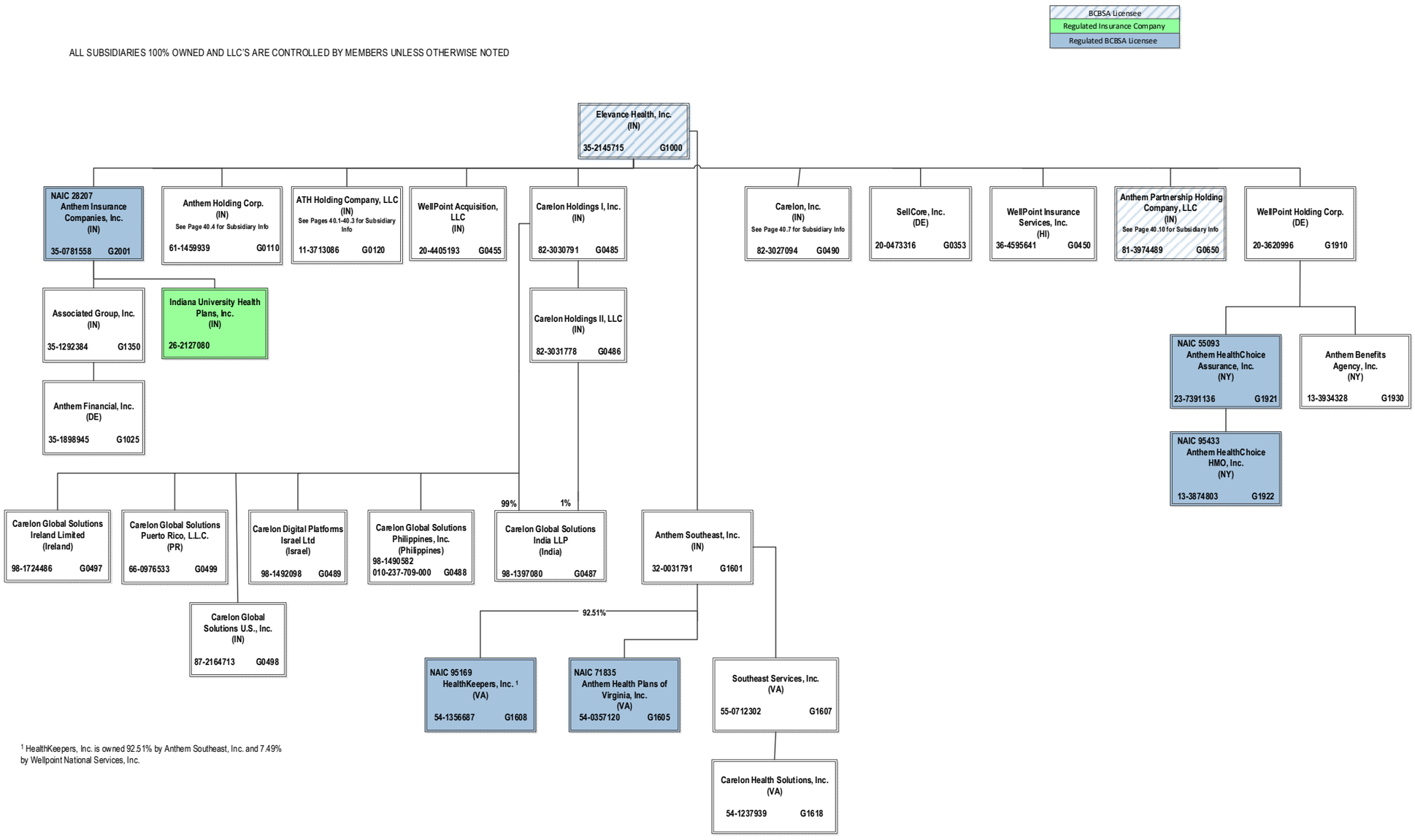
(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 2
2. R - Registered - Non-domiciled RRGs..... 0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
4. Q - Qualified - Qualified or accredited reinsurer..... 0
5. N - None of the above - Not allowed to write business in the state..... 55

(b) Explanation of basis of allocation by states, premiums by state, etc.

N/A

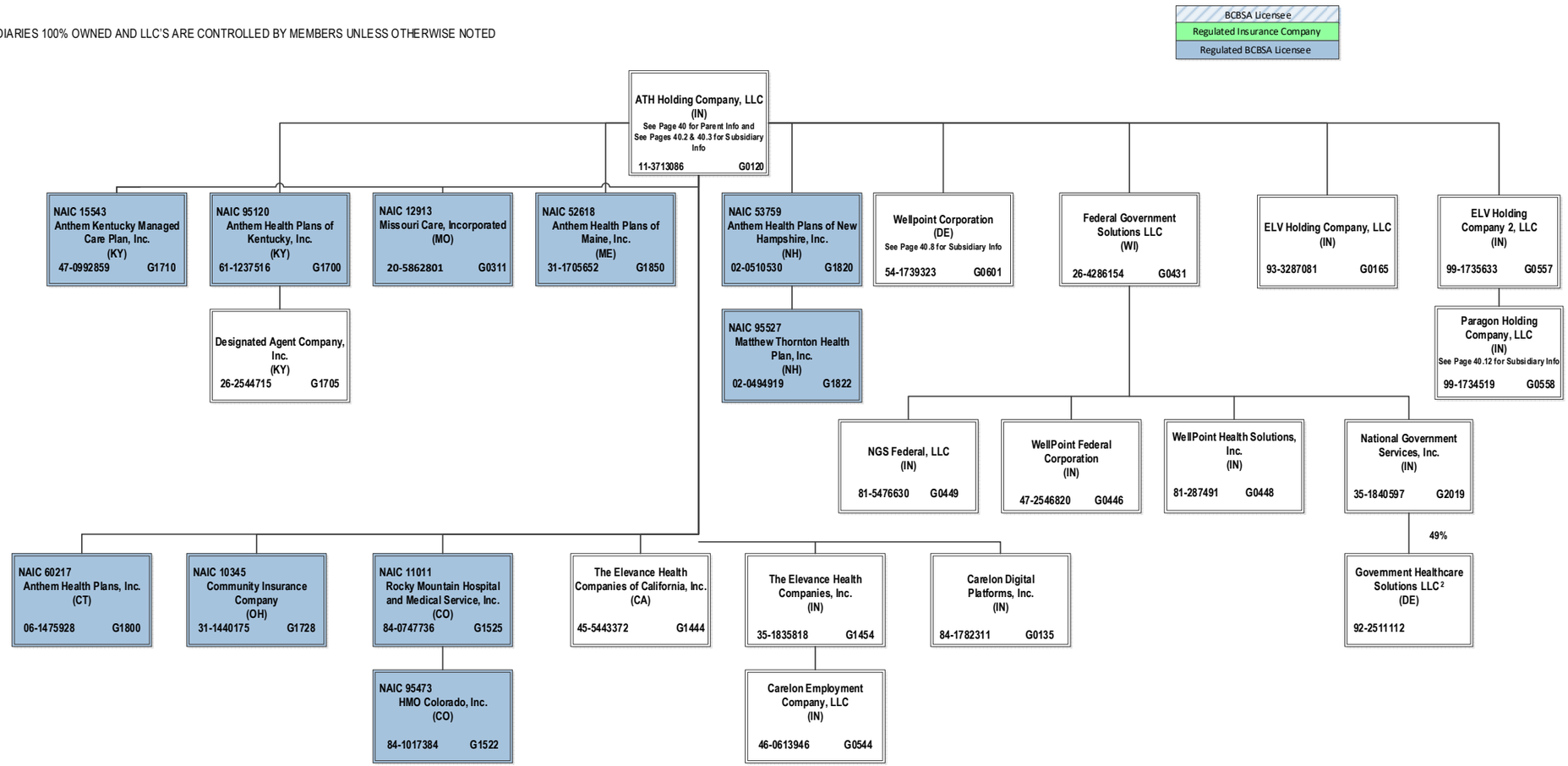
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



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

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

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



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

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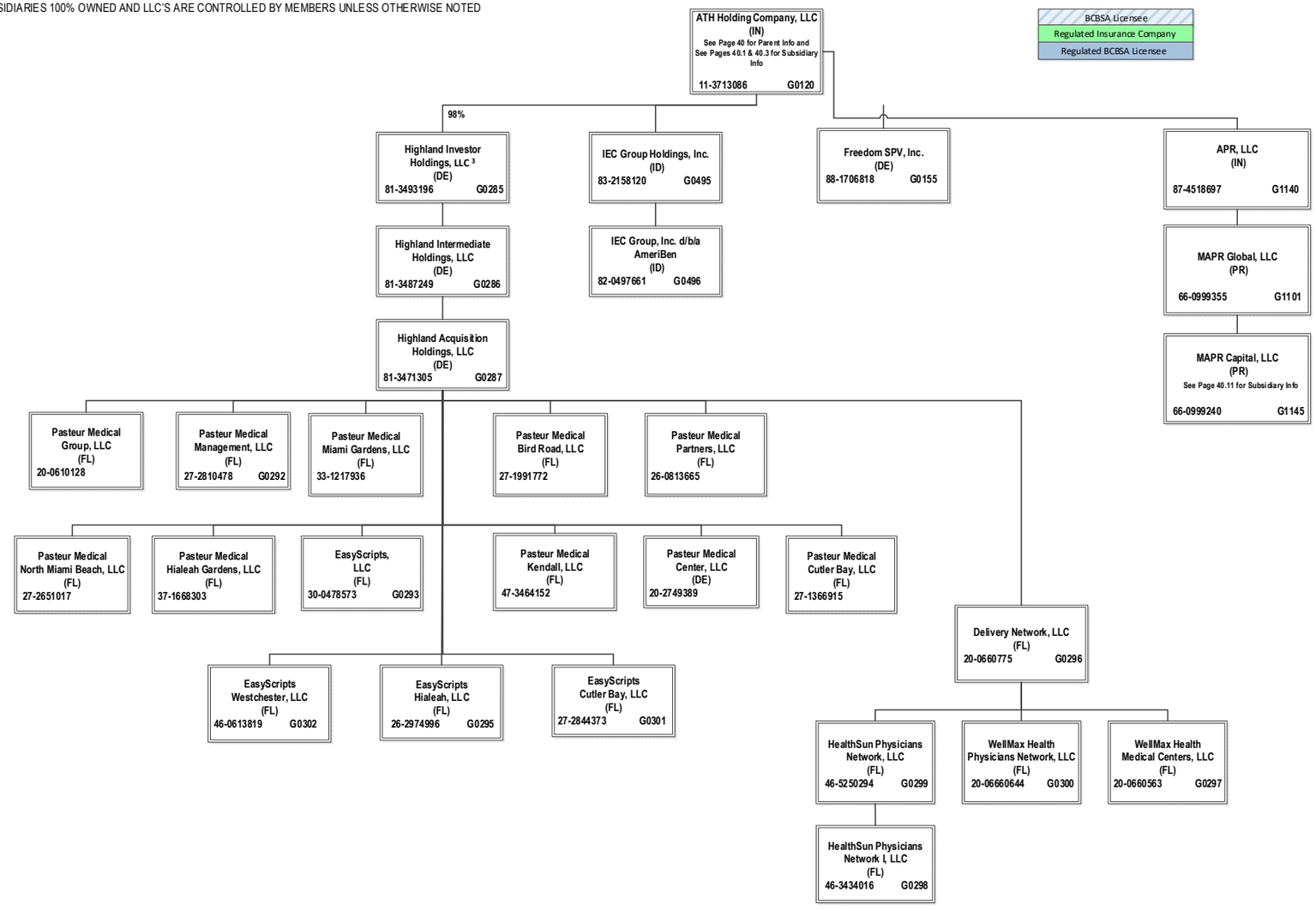

[3] ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Wellpoint Corporation holds the remaining 2% interest.

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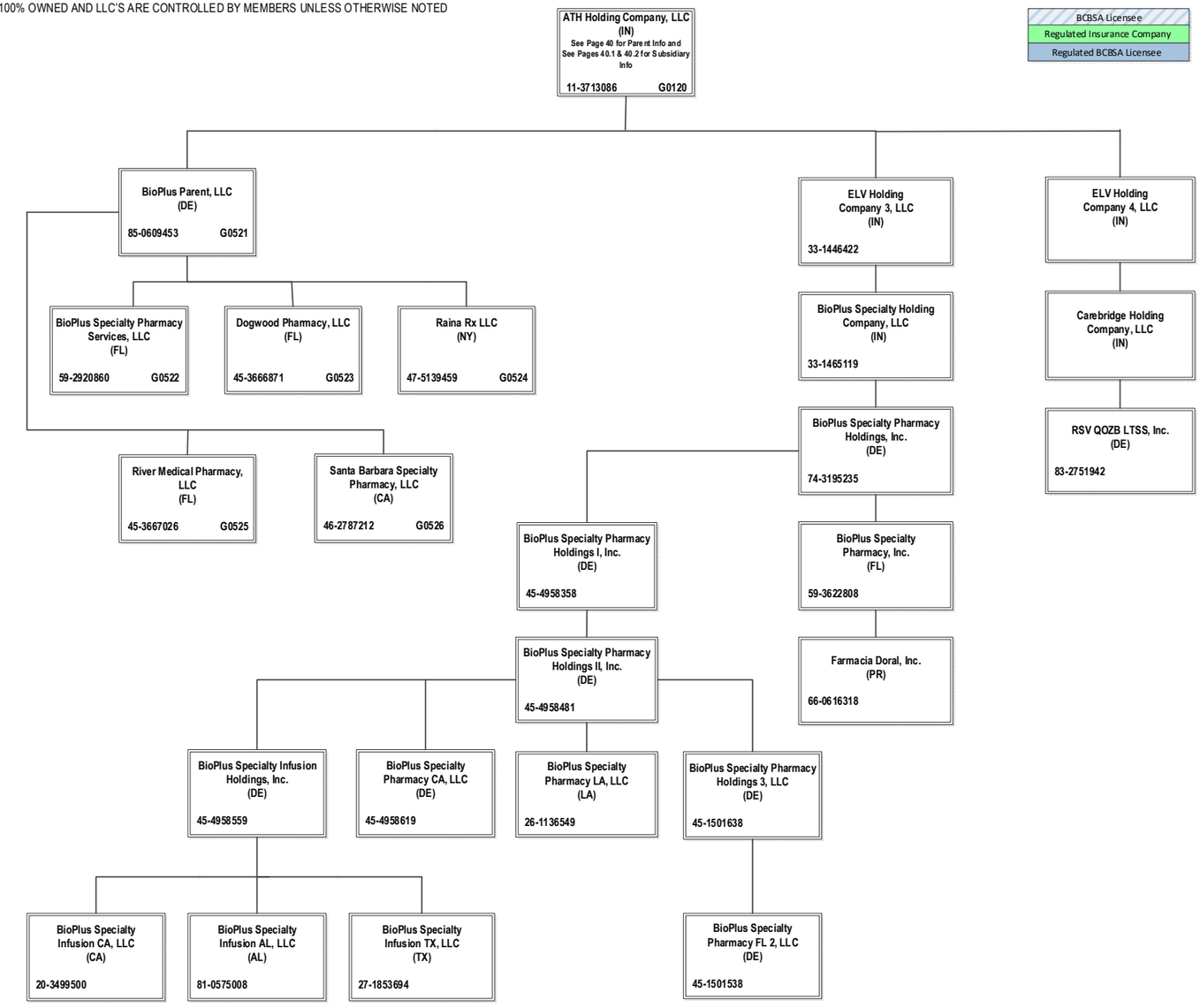

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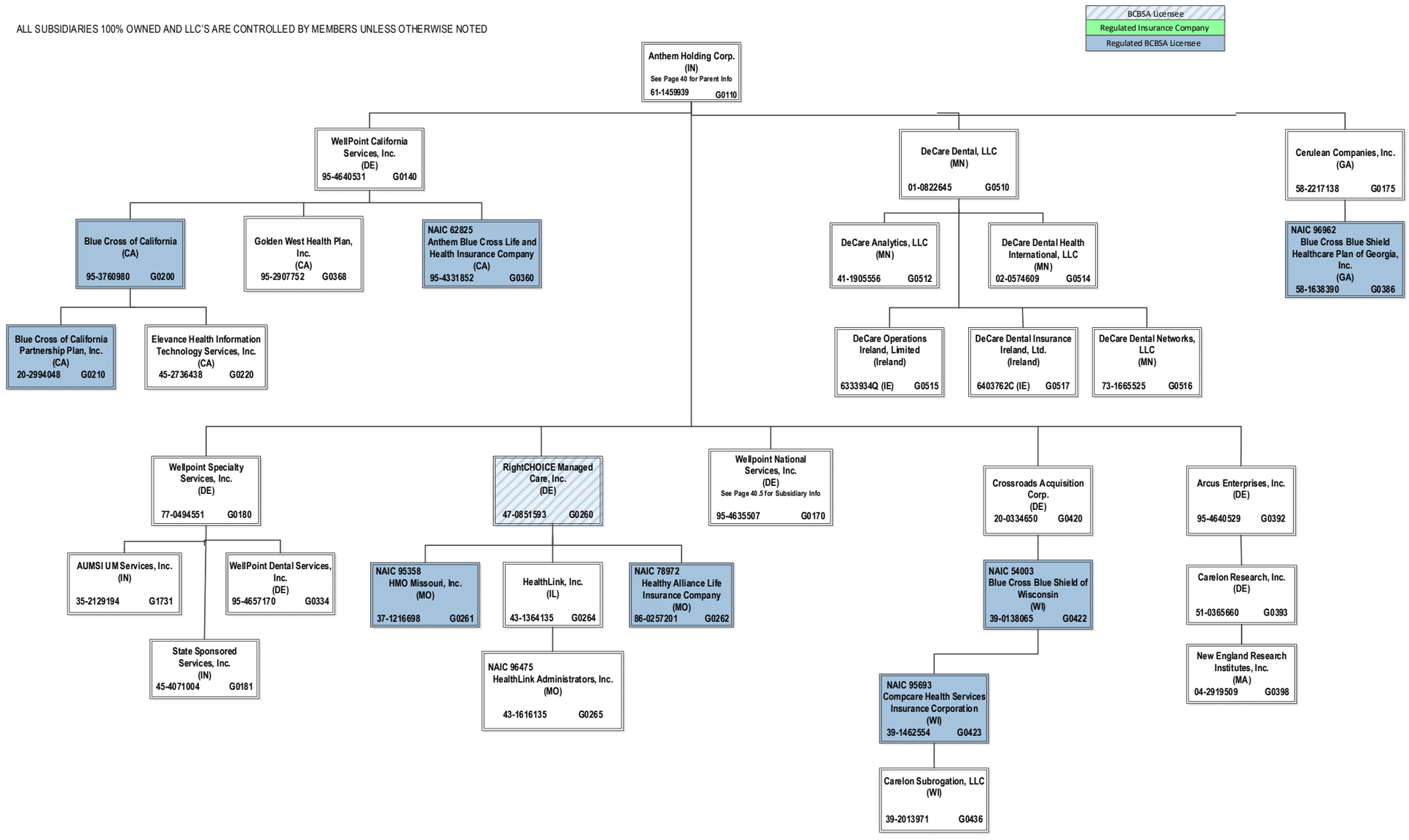

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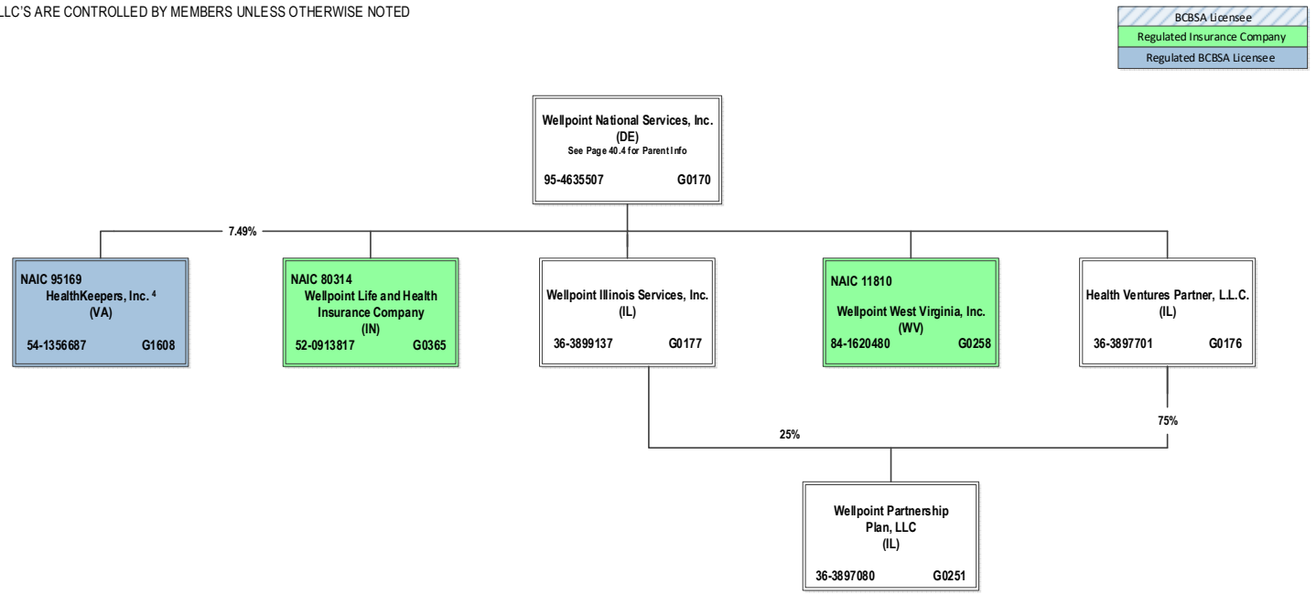
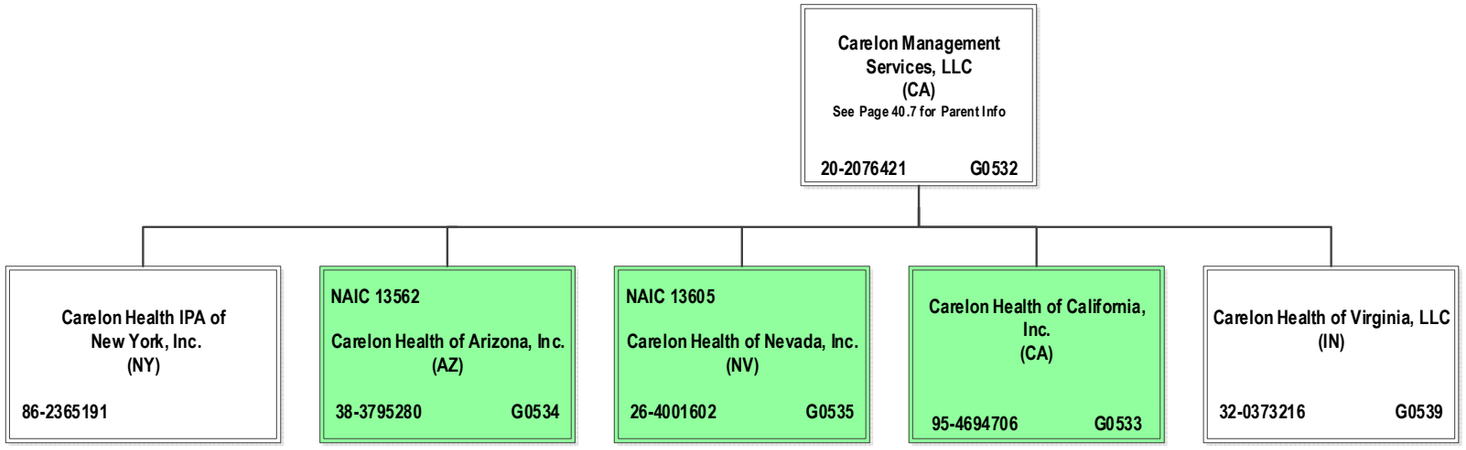


[4] HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

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

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

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



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PART 1 – ORGANIZATIONAL CHART

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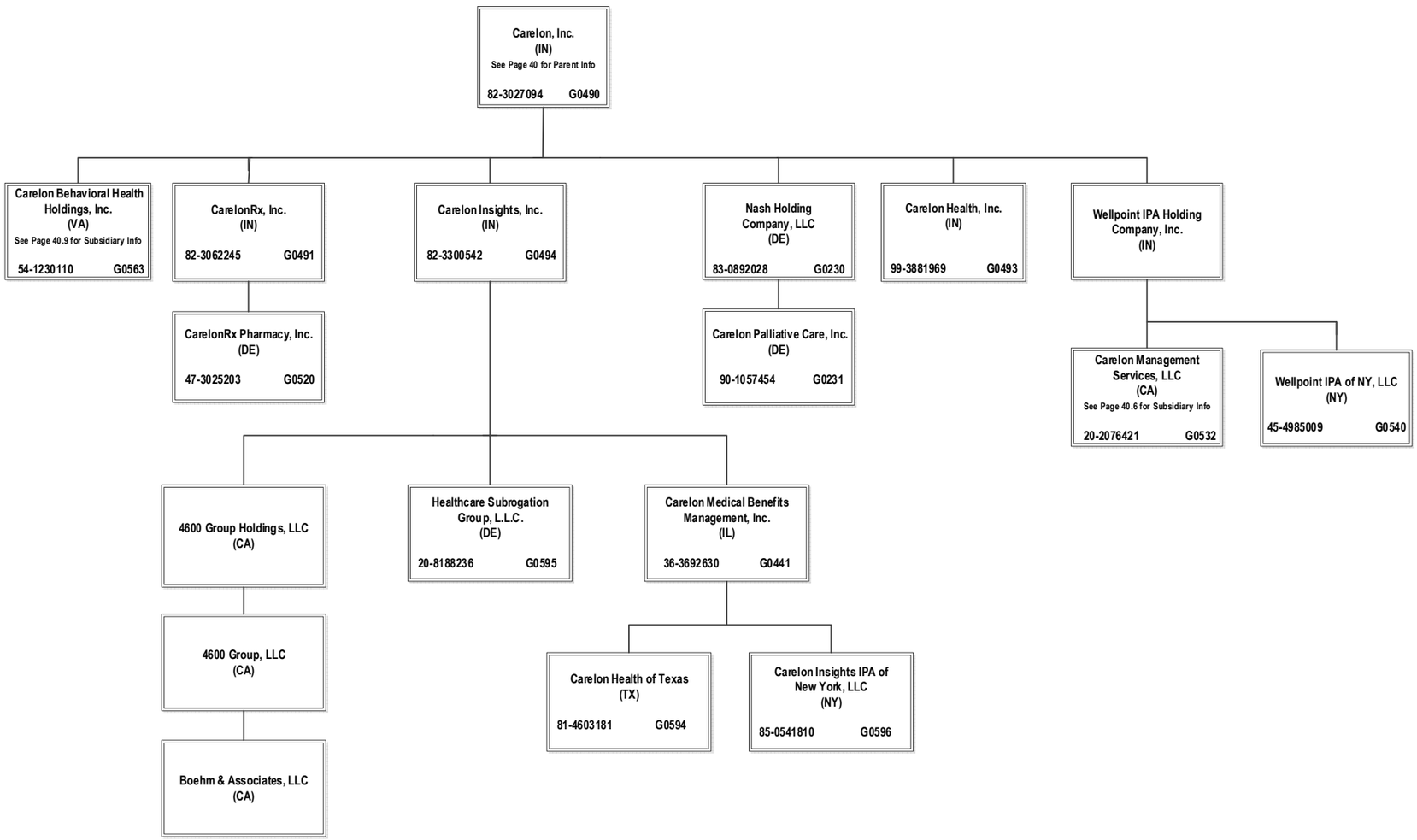

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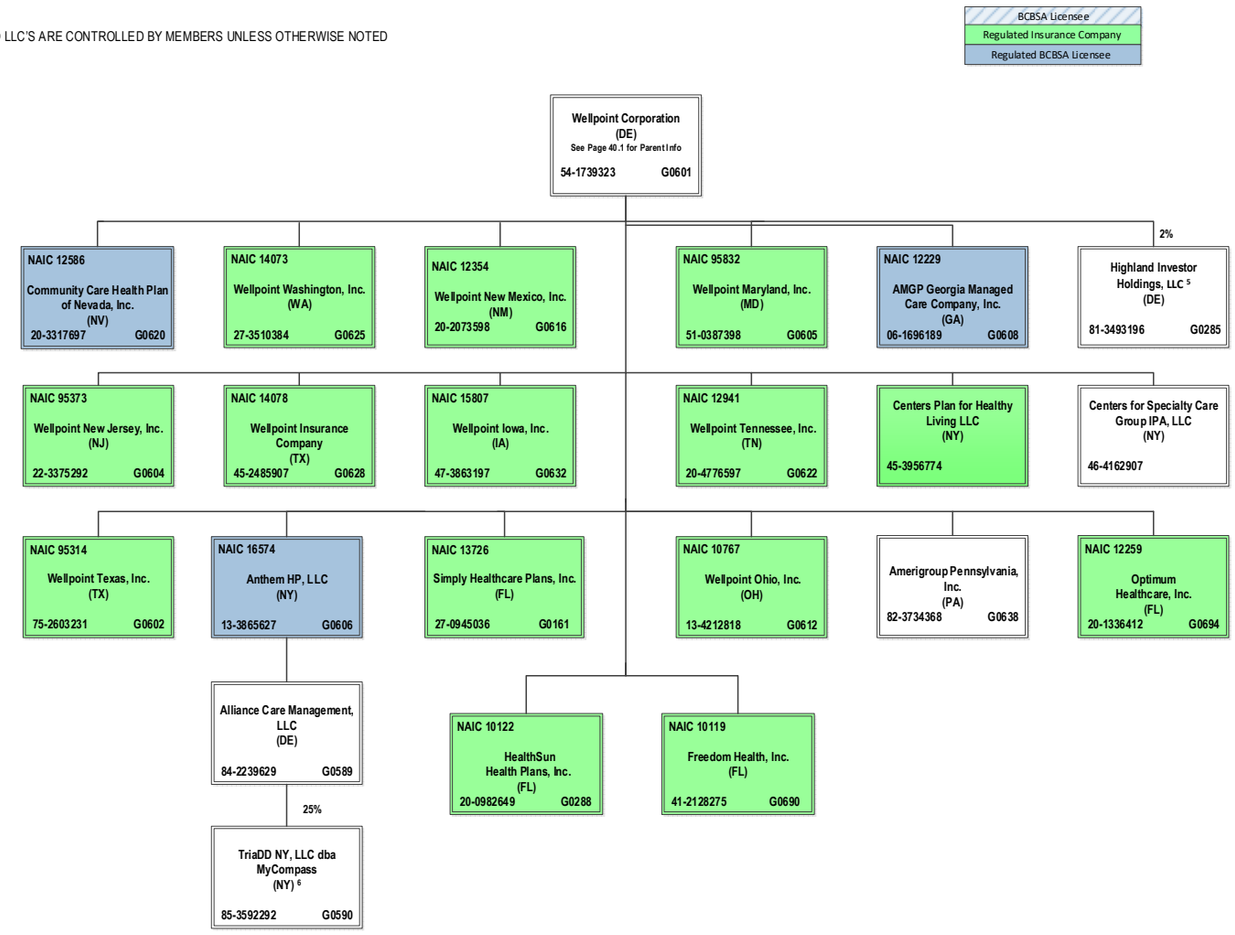

[5] Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

[6] TriaDD NY, LLC dba MyCompass is 25% owned by Alliance Care Management, LLC and the remaining 75% interest is owned by unaffiliated investors.

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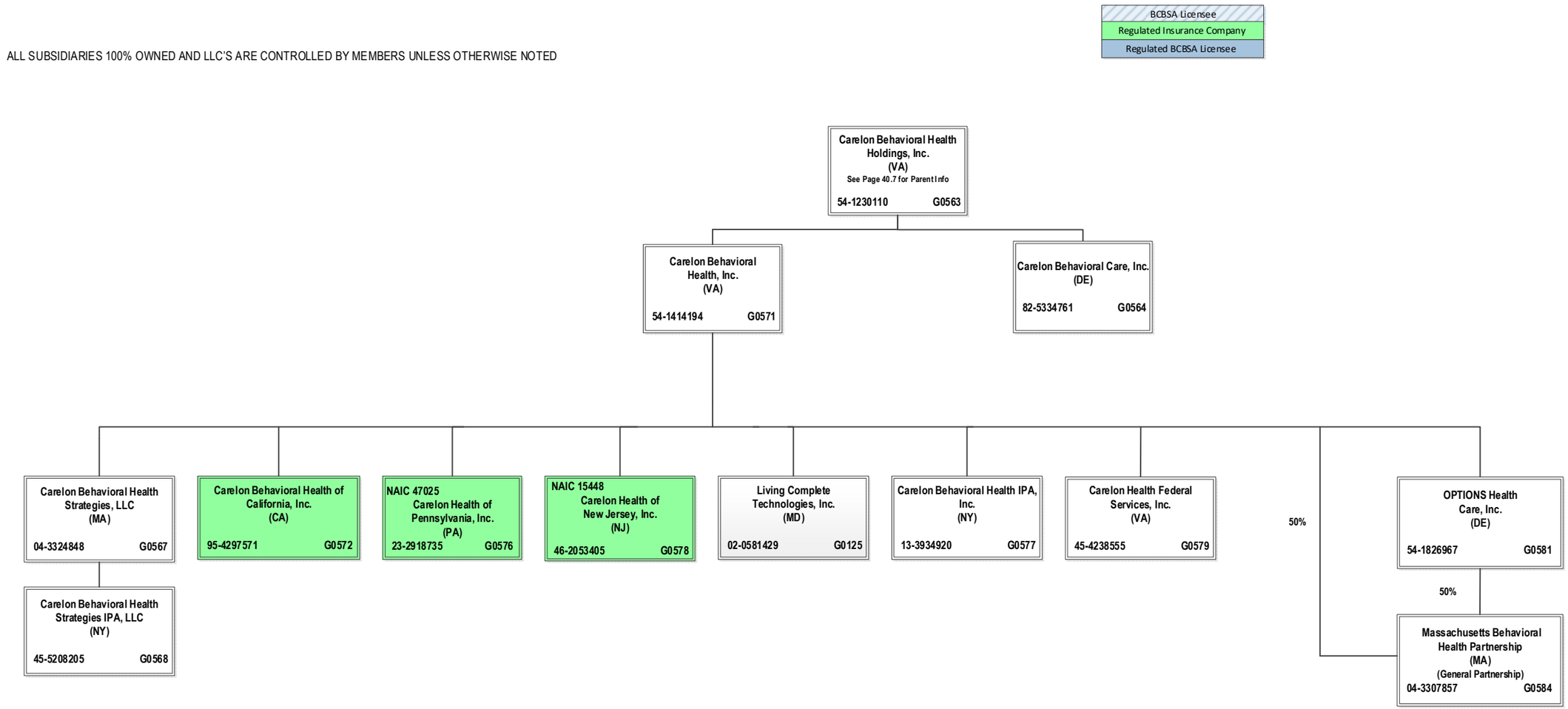
PART 1 – ORGANIZATIONAL CHART



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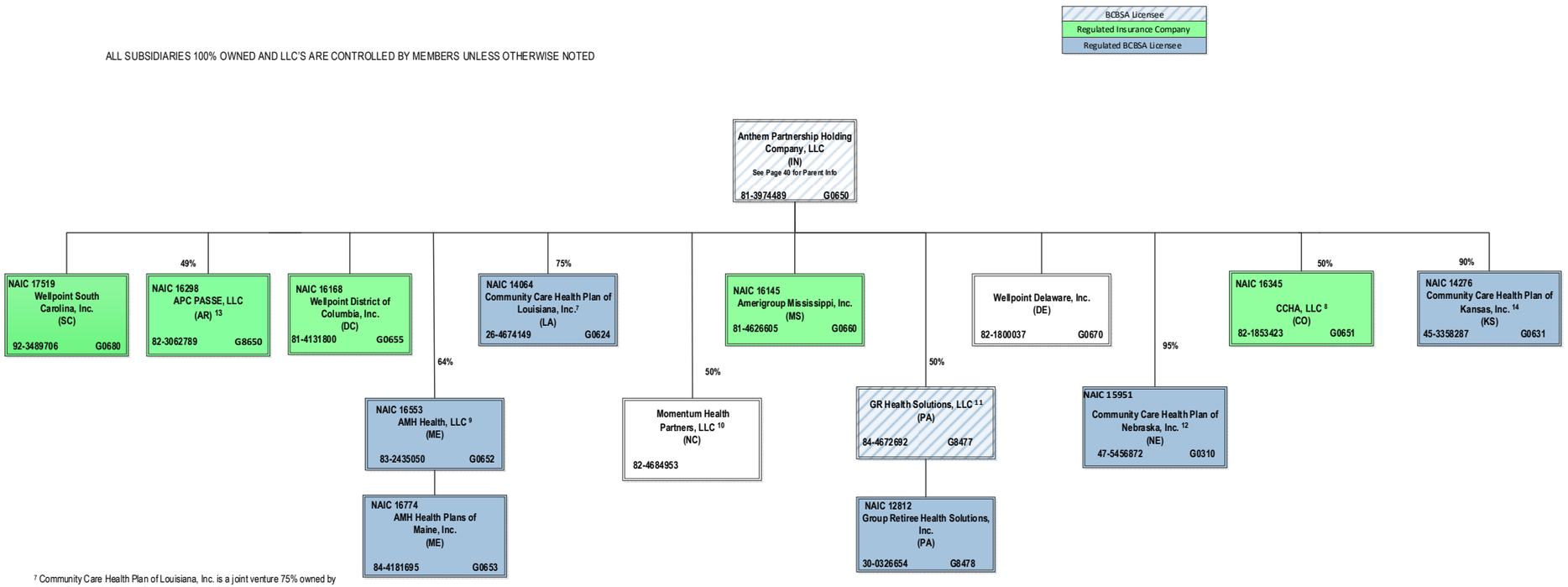


[7] Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (non-affiliate)

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

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

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

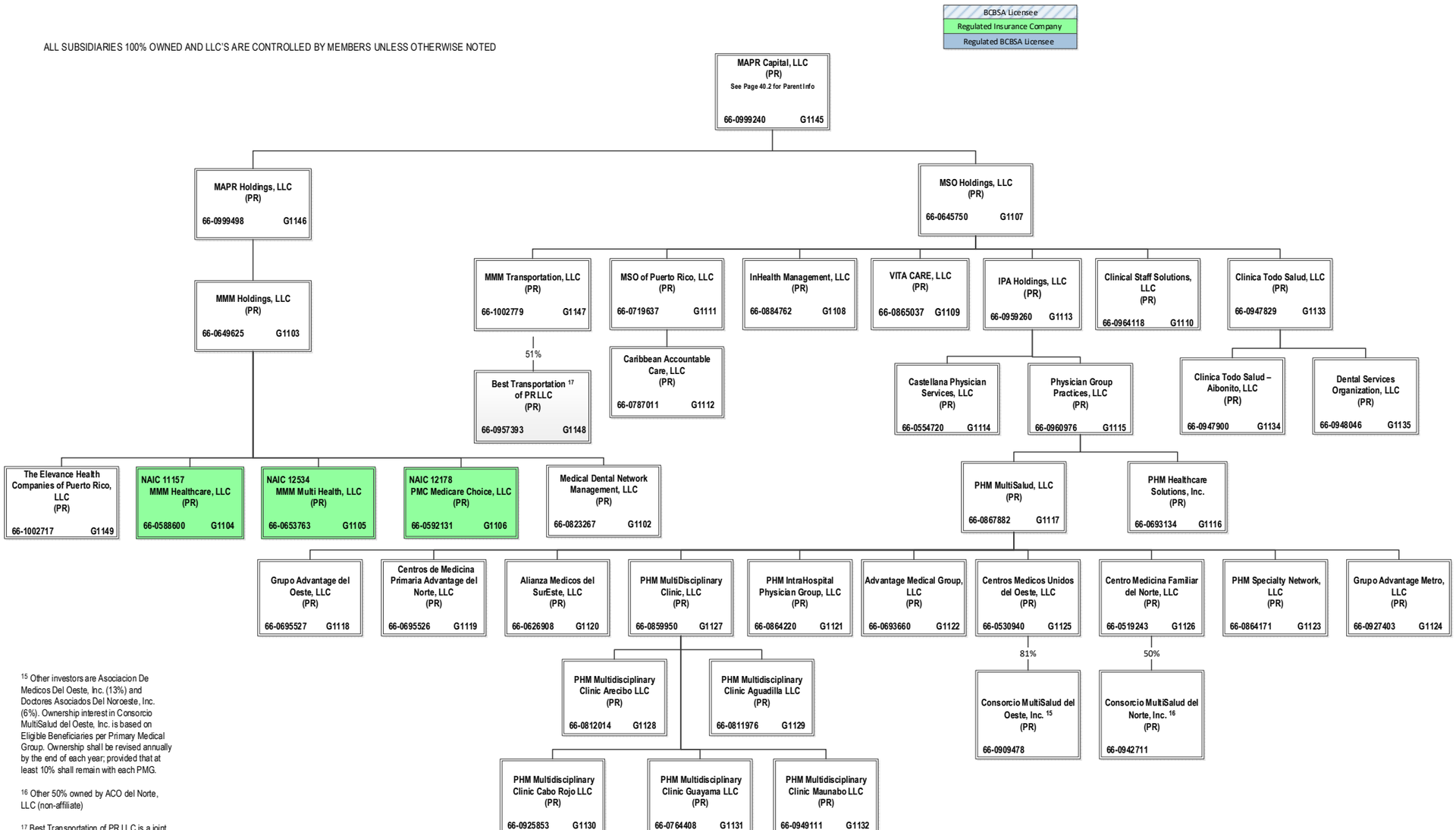
[11] GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

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

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

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

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



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

[16] Other 50% owned by ACO del Norte, LLC (non-affiliate)

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

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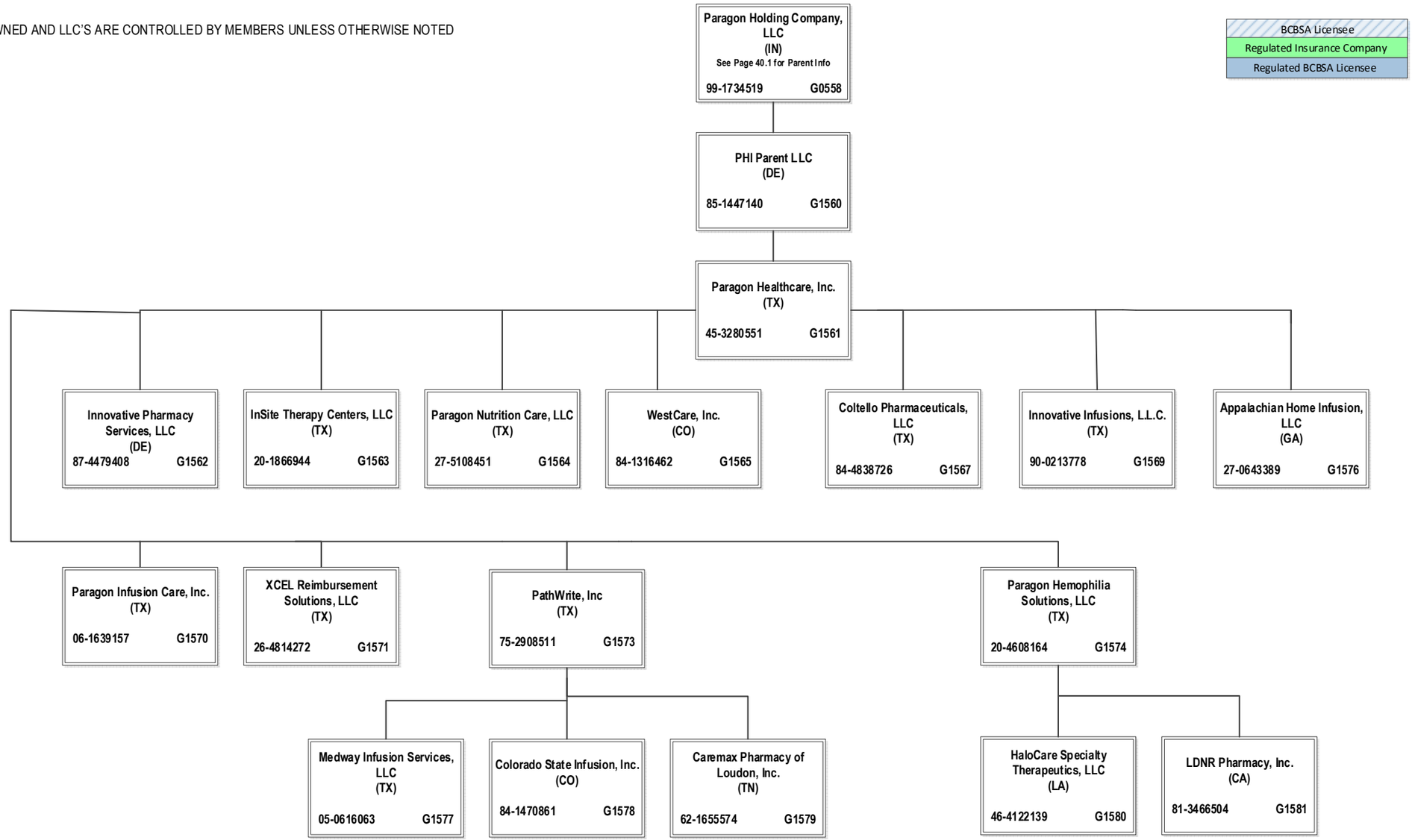

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Year			Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504.	Miscellaneous receivables	58,335	5,000	53,335	115,776
2505.	Premium tax recoverable	39,058		39,058	385,943
2506.	Medicare receivables			0	2,677,593
2597.	Summary of remaining write-ins for Line 25 from overflow page	97,393	5,000	92,393	3,179,312