

ANNUAL STATEMENT

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

HARVARD PILGRIM HEALTH CARE, INC.

NAIC Group Code	4742, 4742 NAIC Company Code 96	6911Employer's ID Number04-24526	00
Organizad under the Laws of	(Current) (Prior) MA	State of Dominile or Port of Entry	MA
	US		IVIA
	HEALTH MAINTENANCE ORGANIZATION		YES
	02/11/1969		
-	ONE WELLNESS WAY		
Wall Administrative office	CANTON, MA, US 02021-1166		
		(Telephone)	
	ONE WELLNESS WAY	CANTON, MA, US 02021-1166	
Primary Location of Books and			
Records	ONE WELLNESS WAY		
	CANTON, MA, US 02021-1166		
Internet Website Address	WWW.HPHC.ORG	(Telephone)	
	RUCHI JAISWAL		
Statutory Statement Contact	RUCHI JAISWAL	(Telephone)	
	RUCHI.JAISWAL@POINT32HEALTH.ORG	· /	
	(E-Mail)	(Fax)	
	OFFICERS	(* 2.19	
CAIN-ATEN HAYES F	PRESIDENT AND CEO	TERESA (TISA) KRAMER HUGHES, ESQ	CLERK/SECRFTARY
·	PRICE, TREASURER		
	OTHER		
UMESH ANANTHARAM KURP.	AD, CHIEF FINANCIAL OFFICER	EILEEN O'SHEA AUEN#,	CHA I R
GREG ALLEN SHEL	LL, SR#, VICE CHAIR		
	DIRECTORS OR TRU		
		EILEEN O'SHEA AUE	
	EPH MCCOLGAN	MYECHIA MINTER-JORDA	
	NE MURPHY	BERTRAM LEE SCOT	
	D PAWLICKI	MICHAEL JOSEPH SH	
	N SHELL, SR/ISON TRANTER	IRINA SIMMONSHEDWIG VEITH WHITNE	
	EY WHITBECK	PETER LAWRENCE SLAVI	
WEGE	ET WHIT BEST	ETEIX ET WITCHISE SET W	4, 1410 11
State of MASSACHUSETTS.			
County of NORFOLK	SS		
The officers of this reporting ent	ity being duly sworn, each depose and say that	they are the described officers of said rend	orting entity and that
	pove, all of the herein described assets were the		
	ept as herein stated, and that this statement, tog		
	o, is a full and true statement of all the assets a		
	stated above, and of its income and deductions		
	al Statement Instructions and Accounting Pract		
	rules or regulations require differences in report knowledge and belief, respectively. Furthermore		
	ng electronic filing with the NAIC, when required		
	statement. The electronic filing may be request		
statement.	DocuSigned by:		
DocuSigned by:			
× Roland Price	× Umesh kurpad	, x	
ROLAND CHARZES PRICES	UMESH ANANTHARAM KURPA		
TREASURER	CHIEF FINANCIAL OFFICER		
	· · · · · · · · · · · · ·		
Subscribed and sworn to before	me	le this an original filing? Voc	
2/27/2023	a. h	Is this an original filing? Yes If no:	
this	_ uay oi	1. State the amendment number:	
		2. Date filed:	
DocuSigned by:		3. Number of pages attached:	
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ASSETS

	ASSETS	T			T
			Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	219,980,832	A33Cl3		
2.	Stocks (Schedule D):	213,300,002		217,700,002	204,241,442
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	 4.1 Properties occupied by the company (less \$ encumbrances)				
	4.3 Properties held for sale (less \$ encumbrances)				
5.	Cash (\$ (8,300,632), Schedule E - Part 1), cash equivalents (\$ 22,771,799, Schedule E - Part 2) and short-term investments (\$, Schedule DA)				
6.	Contract loans (including \$ premium notes)				
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities.				
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.	Aggregate write-ins for invested assets	402,847		402,847	402,847
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
	Title plants less \$ charged off (for Title insurers only)				
	Investment income due and accrued	691,137		691,137	1,766,919
15.	Premiums and considerations:				
	 15.1 Uncollected premiums and agents' balances in the course of collection 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) 				
	15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software		59,357,116		
21.	Furniture and equipment, including health care delivery assets (\$)		1,428,803		
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates		–	24,321,073	· · ·
24.	Health care (\$ 50,766,906) and other amounts receivable		15,524,000		
25.	Aggregate write-ins for other-than-invested assets	15,319,435	9,226,097	6,093,338	7,191,482
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)		90,869,657	1,103,376,076	1,204,313,484
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts Total (Lines 26 and 27)	1 104 045 700	00.060.657	1 100 076 076	1 204 212 404
28.	·	1,194,245,733	90,869,657	1,103,376,076	1,204,313,484
1101.	Is of Write-Ins . DEPOSITS	· ·		•	l -
	Summary of remaining write-ins for Line 11 from overflow page				
	. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
	PREPAID EXPENSES AND OTHER ASSETS		9,226,097		
2501. 2502.					l
	Summary of remaining write-ins for Line 25 from overflow page				
	. Summary of remaining write-ins for Line 25 from overflow page				
∠399.	. Totals (Lines 2001 tillough 2000 plus 2090) (Line 20 above)	15,319,435	9,220,09/	0,093,338	482

LIABILITIES, CAPITAL AND SURPLUS

		ID SURPLUS		Prior Year	
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)				166,968,683
	Accrued medical incentive pool and bonus amounts			27,186,411	
2.					
3.	Unpaid claims adjustment expenses	2,936,/53		2,936,753	2,461,279
4.	Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act.	11,895,253		11,895,253	19,285,964
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserves				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued				
	·				
10 2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others.				
13.	Remittances and items not allocated				
14.	Borrowed money (including \$ 40,000,000 current) and interest thereon \$ 109,878				
14.	(including \$ 109,848 current)	40 100 979		40 100 979	40 000 067
15.	Amounts due to parent, subsidiaries and affiliates				
	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending.				
	Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans	85,129,842		85,129,842	83,205,013
	Aggregate write-ins for other liabilities (including \$ current)				
24.	Total liabilities (Lines 1 to 23)	458,580,948		458,580,948	493,324,993
25.	Aggregate write-ins for special surplus funds	XXX	XXX		
26.	Common capital stock	XXX	XXX		
27.	Preferred capital stock				
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
	Aggregate write-ins for other-than-special surplus funds				
	Unassigned funds (surplus).				
32.	Less treasury stock, at cost:			003,730,120	0 10,500,151
02.	32.1 shares common (value included in Line 26 \$)	xxx	XXX		
	32.2 shares preferred (value included in Line 27 \$)		XXX		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)		XXX		710,988,491
34.	Total liabilities, capital and surplus (Lines 24 and 33)		XXX		1,204,313,484
	Is of Write-Ins			1,103,370,070	1,204,313,404
	. ACCRUED LONG TERM EXPENSE	10,168,861		10,168,861	12 662 670
	DEFERRED RENT	740,332			12,663,670
				· ·	321,689
	SECURITY DEPOSITS.			,	89,693
	Summary of remaining write-ins for Line 23 from overflow page				40075050
	. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)			10,998,886	13,075,052
		XXX	XXX		
			XXX		
			XXX		
2598	. Summary of remaining write-ins for Line 25 from overflow page		XXX		
2599	. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		XXX		
3001		XXX	XXX		
3002		XXX	XXX		
3003		XXX	XXX		
3098	. Summary of remaining write-ins for Line 30 from overflow page		XXX		
	. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		XXX		

STATEMENT OF REVENUE AND EXPENSES

		Curre	Prior Year	
		1	2	3
		Uncovered	Total	Total
1.	Member Months.	XXX	2,643,165	2,949,203
2.	Net premium income (including \$ non-health premium income)	XXX	1,700,964,666	1,822,202,591
3.	Change in unearned premium reserves and reserve for rate credits.	XXX	6,450,892	8,796,438
4.	Fee-for-service (net of \$ medical expenses)	XXX		
5.	Risk revenue	XXX		
6.	Aggregate write-ins for other health care related revenues	XXX		
7.	Aggregate write-ins for other non-health revenues	XXX		
8.	Total revenues (Lines 2 to 7)	XXX	1,707,415,558	1,830,999,029
Hosp	ital and Medical:			
9.	Hospital/medical benefits		1,100,691,028	1,271,076,529
10.	Other professional services		72,048,912	63,961,620
11.	Outside referrals		34,069,876	41,175,981
12.	Emergency room and out-of-area		21,687,058	21,249,497
13.	Prescription drugs		228,544,496	235,648,176
14.	Aggregate write-ins for other hospital and medical			
15.	Incentive pool, withhold adjustments and bonus amounts		41,704,009	42,274,833
16.	Subtotal (Lines 9 to 15)		1,498,745,379	1,675,386,636
Less				
17.	Net reinsurance recoveries.		40,803,737	25,102,729
18.	Total hospital and medical (Lines 16 minus 17)		1,457,941,642	1,650,283,907
19.	Non-health claims (net)			
20.	Claims adjustment expenses, including \$ 37,023,537 cost containment expenses		62,772,920	70,181,254
21.	General administrative expenses		225,065,369	232,984,208
22.	Increase in reserves for life and accident and health contracts (including \$ increase in reserves			
	for life only)			
23.	Total underwriting deductions (Lines 18 through 22)		1,745,779,931	1,943,708,799
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(38,364,373)	(112,709,770)
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		22,468,998	18,214,468
26.	Net realized capital gains (losses) less capital gains tax of \$		(32,943)	61,305,961
27.	Net investment gains (losses) (Lines 25 plus 26)		22,436,055	79,520,429
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)]			
29.	Aggregate write-ins for other income or expenses		(9,422,770)	(13,609,998)
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24			
	plus 27 plus 28 plus 29)			
31.	Federal and foreign income taxes incurred			
32.	Net income (loss) (Lines 30 minus 31)	XXX	(25,351,088)	(46,799,339)
Detai	ils of Write-Ins			
0601		XXX		
0602		XXX		
		XXX		
	. Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699	. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX		
0701		XXX		
0702	•	XXX		
0703	•	XXX		
0798	. Summary of remaining write-ins for Line 7 from overflow page	XXX		
0799	. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX		
1401				
1402	•			
1403				
1498	. Summary of remaining write-ins for Line 14 from overflow page			
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			
	. MISCELLANEOUS & OTHER INCOME/(EXPENSE)		(9,422,770)	(13,609,998
			, , , , , , , , , , , , , , , , , , ,	
2702				
2903	. Summary of remaining write-ins for Line 29 from overflow page			

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

		1	2
	CAPITAL & SURPLUS ACCOUNT	Current Year	Prior Year
33.	Capital and surplus prior reporting year	710,988,491	726,876,035
34.	Net income or (loss) from Line 32	(25,351,088)	(46,799,339)
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	(82,251,540)	(23,096,980)
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax.		
39.	Change in nonadmitted assets	5,549,088	(15,278,863)
40.	Change in unauthorized and certified reinsurance.		
41.	Change in treasury stock		
42.	Change in surplus notes		
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in		
	44.2 Transferred from surplus (Stock Dividend)		
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in	35,000,000	70,000,000
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus	860,177	(712,362)
48.	Net change in capital and surplus (Lines 34 to 47)	(66,193,363)	(15,887,544
49.	Capital and surplus end of reporting year (Line 33 plus 48)	644,795,128	710,988,491
Deta	ils of Write-Ins		
4701	. CHANGE IN NET PRIOR SERVICE COSTS AND RECOGNIZED GAIN/LOSS FOR POSTRETIREMENT MEDICAL PLAN	860,177	(712,362
4702			
4703			
4798	3. Summary of remaining write-ins for Line 47 from overflow page		
	7. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)		

CASH FLOW

	CASH FLOW		
		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance		
2.	Net investment income		
3.	Miscellaneous income		
1.	Total (Lines 1 to 3)		
5.	Benefit and loss related payments		
5 .	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.		
7.	Commissions, expenses paid and aggregate write-ins for deductions.		
3.	Dividends paid to policyholders.		
).	Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	1,863,314,521	1,959,474,813
11.	Net cash from operations (Line 4 minus Line 10)	(144,891,320)	(146,261,550
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	190,692,695	148,910,173
	12.2 Stocks.	15,530,672	92,983,319
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets	6,671,283	27,667,899
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.		
	12.7 Miscellaneous proceeds	54,198	
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	212,948,848	269,561,391
3.	Cost of investments acquired (long-term only):		
	13.1 Bonds	181,250,840	63,869,670
	13.2 Stocks	43,496,855	103,448,815
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.	Net increase (decrease) in contract loans and premium notes.		
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		
ΙΟ.	Cash from Financing and Miscellaneous Sources	(44,000,000)	00,024,000
16.	Cash provided (applied):		
١٠.	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities.		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)		
_			
7.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	99,059,010	51,560,349
	Reconciliation of Cash, Cash Equivalents and Short-Term Investments	(00.010.000)	(0.4.676.006)
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(89,819,800)	(34,676,336
9.	Cash, cash equivalents and short-term investments:		4444
	19.1 Beginning of year		
	19.2 End of year (Line 18 plus Line 19.1)	14,471,168	104,290,968
lote	: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0	001.2021 CAPITAL CONTRIBUTION FROM POINT32HEALTH SETTLED IN 2022		20,000,000
20.0	0002. NON CASH CAPITAL CONTRIBUTION TO HARVARD PILGRIM HEATH CARE OF NEW ENGLAND, INC	25,000,000	

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non- Health
1. Net premium income	1,700,964,666						2,235,394			
2. Change in unearned premium reserves and reserve for rate credit	6,450,892	6,450,892								
3. Fee-for-service (net of \$ medical expenses)										XXX
4. Risk revenue.										XXX
5. Aggregate write-ins for other health care related revenues										XXX
6. Aggregate write-ins for other non-health care related revenues		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Lines 1 to 6)	1,707,415,558	1,705,180,164					2,235,394			
8. Hospital/medical benefits	1,100,691,028	1,102,030,892					(1,339,864)			XXX
9. Other professional services	72,048,912	71,758,925					289,987			XXX
10. Outside referrals	34,069,876						(43,686)			XXX
11. Emergency room and out-of-area	21,687,058	21,687,058								XXX
12. Prescription drugs	228,544,496	227,761,449					783,047			XXX
13. Aggregate write-ins for other hospital and medical										XXX
14. Incentive pool, withhold adjustments and bonus amounts	41,704,009	43,122,608					(1,418,599)			XXX
15. Subtotal (Lines 8 to 14)	1,498,745,379	1,500,474,494					(1,729,115)			XXX
16. Net reinsurance recoveries.	40,803,737	40,803,737								XXX
17. Total hospital and medical (Lines 15 minus 16)	1,457,941,642	1,459,670,757					(1,729,115)			XXX
18. Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ 37,023,537 cost containment expenses	62,772,918	62,772,918								
20. General administrative expenses		225,179,439					(114,068)			
21. Increase in reserves for accident and health contracts	,,,,,						,,,,,			XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	1,745,779,931	1,747,623,114					(1,843,183)			
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(38,364,373)	(42,442,950)					4,078,577			
Details of Write-Ins	(00,004,070)	(42,442,500)					4,070,077			
0501.										XXX
0502.										XXX
0503.										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page										XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)										XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXX XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page		XXX	XXXXXX			XXX	XXXXXX	XXX XXX	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
, , , , , ,		ХХХ	ХХХ	ΑΧΧ	ΑΧΧ	Αλλ	Αλλ	Χλλ	Αλλ	
1301.										XXX
1302.										XXX
1303.										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page										XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										XXX

7

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1+2-3)
Comprehensive (hospital and medical) individual				
2. Comprehensive (hospital and medical) group.				
3. Medicare Supplement				
4. Dental only				
5. Vision only				
6. Federal Employees Health Benefits Plan				
7. Title XVIII - Medicare	2,235,394			2,235,394
8. Title XIX - Medicaid				
9. Credit A&H				
10. Disability Income				
11. Long-Term Care				
12. Other health				
13. Health subtotal (Lines 1 through 12)				1,700,964,666
14. Life				
15. Property/casualty				
16. Totals (Lines 13 to 15)			15,848	1,700,964,666

Annual Statement for the Year 2022 of the HARVARD PILGRIM HEALTH CARE, INC.

PART 2 - CLAIMS INCURRED DURING THE YEAR

			KRI Z - CLAIIVI										
1		sive (Hospital & edical)	4	5	6	7 Federal	8	9	10	11	12	13	14
	2	3	Madiaara			Employees Health Benefits	Title XVIII	Title XIX		Disability			Other Non-
Tot	Individual	Group	Medicare Supplement	Dental Only	Vision Only	Plan	Medicare	Medicaid	Credit A&H		Long-Term Care	Other Health	Health
1 Payments during the year:													1
1.1 Direct	3,891 305,747,40	3 1,188,514,211					12,302,272						
1.2 Reinsurance assumed													
	8,448 28,216,80												
1.4 Net	5,443 277,530,60	1 1,187,522,570					12,302,272						
	1,487 7,170,10	35,722,572					898,809						
3. Claim liability December 31, current year from Part 2A:													1
	8,880 28,722,24	2 107,585,549					511,089						
3.2 Reinsurance assumed													
3.3 Reinsurance ceded													
3.4 Net	8,880 28,722,24	2 107,585,549					511,089						
4. Claim reserve December 31, current year from Part 2D:													•
4.1 Direct													
4.2 Reinsurance assumed													
4.3 Reinsurance ceded													
4.4 Net													
	6,411 4,383,50	21,839,316					963.586						
	2,716 3,770,60						(3,183,634)						
	9,187 17,544,41						(0).00,00						
8. Claim liability December 31, prior year from Part 2A:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
	8,683 31,603,31	119,030,054					16,335,321						1
8.2 Reinsurance assumed	0,000	117,000,001					10,000,021						
8.3 Reinsurance ceded													
8.4 Net	8,683 31,603,31	119,030,054					16,335,321						
9. Claim reserve December 31, prior year from Part 2D:	0,000	117,000,004					10,000,021						
9.1 Direct													1
9.2 Reinsurance assumed													
9.3 Reinsurance ceded													
9.4 Net													
	4,315 4,345,07	3 21,647,822					3,051,420						
	4,315 4,345,07 3,898 5,723,38						3,031,420						
	3,070 3,723,38	540,513											
	1 270 200 005 72	3 1,158,283,963					(338,326)						•
	1,370 299,095,73	1,100,203,903					(338,320)						
12.2 Reinsurance assumed	0.707	705.000											
	3,737 40,037,83						(000.005)						
12.4 Net	<u> </u>						(338,326)						
13. Incurred medical incentive pools and bonuses	3,583 7,208,54	35,914,066					(1,189,025)						

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

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensi Med	ve (Hospital & ical)	4	5	6	7 Federal	8	9	10	11	12	13	14
		2	3	Medicare			Employees Health Benefits	Title XVIII	Title XIX		Disability			Other Non-
	Total	Individual	Group	Supplement	Dental Only	Vision Only	Plan	Medicare	Medicaid	Credit A&H	Income	Long-Term Care	Other Health	Health
Reported in Process of Adjustment:														
1.1 Direct	28,286,928	5,960,510	22,326,418											
1.2 Reinsurance assumed														
1.3 Reinsurance ceded														
1.4 Net	28,286,928	5,960,510	22,326,418											
2. Incurred but Unreported:														
2.1 Direct	106,960,246	22,430,548	84,018,609					511,089						
2.2 Reinsurance assumed														
2.3 Reinsurance ceded														
2.4 Net	106,960,246	22,430,548	84,018,609					511,089						
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	1,571,706	331,184	1,240,522											
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net	1,571,706	331,184	1,240,522											
4. TOTALS:														
4.1 Direct	136,818,880	28,722,242	107,585,549					511,089						
4.2 Reinsurance assumed														
4.3 Reinsurance ceded														
4.4 Net	136,818,880	28,722,242	107,585,549					511,089						

				Claim Reserve and Claim	Liability December 31 of	5	6
		Claims Paid D	uring the Year		nt Year É		
		1	2	3	4		
							Estimated Claim Reserve
			On Claims Incurred During		On Claims Incurred During		and Claim Liability
	Line of Business	January 1 of Current Year	the Year	December 31 of Prior Year	the Year 27,706,294	Years (Columns 1 + 3)	December 31 of Prior Year
1.	Comprehensive (hospital and medical) individual						31,603,310
2.	Comprehensive (hospital and medical) group	61,628,333	1,092,296,679	2,624,118	105,003,089	64,252,451	119,030,054
3.	Medicare Supplement						
4.	Dental Only						
5.	Vision Only						
6.	Federal Employees Health Benefits Plan						
7.	Title XVIII - Medicare			511,089		12,813,361	
8.	Title XIX - Medicaid						
9.	Credit A&H						
10.	Disability Income						
11.	Long-Term Care						
12.	Other health						
13.	Health subtotal (Lines 1 to 12)	98,930.402	1,366,829.752	4,109.497	132,709.383	103,039.899	166,968.685
14.	Health care receivables (a)	2.926.174	63.364.731	,	,	2.926.174	46,688,615
15.	Other non-health					_,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
16.	Medical incentive pools and bonus amounts	26.058.506	17,732,981	2.174.036	25,012,374	28,232.542	29,044,316
17.							

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

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

GRAND TOTAL

Section A - Paid Health Claims

			(Cumulative Net Amounts Pai	d	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior	104,100	119,375			119,369
2.	2018	1,407,179	1,510,146	1,520,731	1,519,441	1,519,441
3.	2019	XXX	1,341,259	1,423,703	1,425,759	1,425,898
4.	2020	XXX	XXX	1,336,384	1,426,488	1,428,142
5.	2021	XXX	XXX	XXX	1,538,105	1,664,353
6.	2022	XXX	XXX	XXX	XXX	1,384,563

Section B - Incurred Health Claims

		Sum of Cumulative Net Ame	ount Paid and Claim Liability	y, Claim Reserve and Medical	Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior	115,629	121,376		124,174	124,174
2.	2018	1,574,199	1,525,709	1,524,423	1,519,441	1,519,441
3.	2019	XXX	1,486,909	1,426,584	1,427,280	1,426,016
4.	2020	XXX	XXX	1,490,758	1,438,841	1,428,371
5.	2021	XXX	XXX	XXX	1,728,020	1,670,289
6.	2022	XXX	XXX	XXX	XXX	1,542,284

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and Claims	
				Claim		Adjustment			Unpaid	Adjustment	
				Adjustment		Expense			Claims	Expense	
		Premiums	Claims	Expense	(Col. 3/2)	Payments	(Col. 5/1)	Claims	Adjustment	Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018	1,834,947	1,519,441	51,128	3.365	1,570,569	85.592			1,570,569	85.592
2.	2019	1,696,833	1,425,898	56,726	3.978	1,482,624	87.376	118	2	1,482,744	87.383
3.	2020	1,731,378	1,428,142	64,077	4.487	1,492,219	86.187	229	4	1,492,452	86.200
4.	2021	1,830,999	1,664,353	68,663	4.126	1,733,016	94.649	5,936	96	1,739,048	94.978
5.	2022	1,707,621	1,384,563	52,191	3.769	1,436,754	84.138	157,721	2,834	1,597,309	93.540

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

HOSPITAL & MEDICAL

Section A - Paid Health Claims

			(Cumulative Net Amounts Paid		
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior	95,834	110,407	113,445	113,445	110,392
2.	2018		1,436,989	1,447,530	1,447,507	1,447,507
3.	2019	XXX	1,265,820	1,339,450	1,341,506	1,341,645
4.	2020	XXX	XXX	1,255,231		1,345,822
5.	2021	XXX	XXX	XXX		1,559,587
6.	2022	XXX	XXX	xxx	XXX	1,384,563

Section B - Incurred Health Claims

		Sum of Cumulative Net Am	ount Paid and Claim Liability	y, Claim Reserve and Medica	Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior			114,321	115,197	115,197
2.	2018	1,500,298	1,452,493	1,451,222	1,447,507	1,447,507
3.	2019	XXX	1,398,978	1,341,939	1,342,896	1,341,763
4.	2020	XXX	XXX	1,393,340		1,346,051
5.	2021	XXX	XXX	XXX	1,617,214	1,564,049
6.	2022	XXX	XXX	xxx	XXX	1,542,284

		1	2	3	4	5	6	7	8	9	10
						Claim and				Total Claims	
						Claim				and Claims	
				Claim		Adjustment			Unpaid	Adjustment	
				Adjustment		Expense			Claims	Expense	
		Premiums	Claims	Expense	(Col. 3/2)	Payments	(Col. 5/1)	Claims	Adjustment	Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018	1,764,821	1,447,507	44,490	3.074	1,491,997	84.541			1,491,997	84.541
2.	2019	1,611,486	1,341,645	48,774	3.635	1,390,419	86.282	118	2	1,390,539	86.289
3.	2020	1,630,376	1,345,822	55,511	4.125	1,401,333	85.952	229	4	1,401,566	85.966
4.	2021	1,725,084	1,559,587	60,704	3.892	1,620,291	93.925	4,462	80	1,624,833	94.189
5.	2022	1,705,885	1,384,563	52,179	3.769	1,436,742	84.223	157,721	2,834	1,597,297	93.635

12.MS

UNDERWRITING AND INVESTMENT EXHIBIT

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

MEDICARE SUPPLEMENT

Section A - Paid Health Claims

		ocodion / T did i i caldi i olan				
			(Cumulative Net Amounts Pa	id	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	XXX		
6.	2022	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims

		Sum of Cumulative Net Am	ount Paid and Claim Liability	, Claim Reserve and Medica	al Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	XXX		
6.	2022	XXX	XXX	XXX	xxx	

		1	2	3	4	5	6	7	8	9	10
		Premiums	Claims	Claim Adjustment Expense	(Col. 3/2)	Claim and Claim Adjustment Expense Payments	(Col. 5/1)	Claims	Unpaid Claims Adjustment	Total Claims and Claims Adjustment Expense Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018										
2.	2019		A								
3.	2020										
4.	2021										
5.	2022										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

DENTAL ONLY

Section A - Paid Health Claims

		ocoulon /t r ara meanin oran										
		Cumulative Net Amounts Paid										
		1	2	3	4	5						
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022						
1.	Prior											
2.	2018											
3.	2019											
4.	2020		XXX									
5.	2021	XXX	XXX	xxx								
6.	2022	XXX	XXX	XXX	XXX							

Section B - Incurred Health Claims

		Sum of Cumulative Net Am	ount Paid and Claim Liability	, Claim Reserve and Medica	al Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	XXX		
6.	2022	XXX	XXX	XXX	xxx	

		1	2	3	4	5	6	7	8	9	10
				Claim Adjustment	()	Claim and Claim Adjustment Expense	(a)		Unpaid Claims	Total Claims and Claims Adjustment Expense	(2.1.21)
		Premiums	Claims	Expense	(Col. 3/2)	Payments	(Col. 5/1)	Claims	Adjustment	Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018										
2.	2019		A								
3.	2020										
4.	2021										
5.	2022										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

VISION ONLY

Section A - Paid Health Claims

		ocoulon /t r ara meanin oran				
			(Cumulative Net Amounts Pa	id	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	xxx		
6.	2022	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims

		Sum of Cumulative Net Am	ount Paid and Claim Liability	, Claim Reserve and Medica	al Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019		_			
4.	2020		XXX			
5.	2021	XXX	XXX	XXX		
6.	2022	xxx	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
		Premiums	Claims	Claim Adjustment Expense	(Col. 3/2)	Claim and Claim Adjustment Expense Payments	(Col. 5/1)	Claims	Unpaid Claims Adjustment	Total Claims and Claims Adjustment Expense Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018										
2.	2019		((((((((((
3.	2020										
4.	2021										
5.	2022										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

FEDERAL EMPLOYEES HEALTH BENEFITS PLAN

Section A - Paid Health Claims

		ocoulon /t r ara meanin oran				
			(Cumulative Net Amounts Pa	id	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	xxx		
6.	2022	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims

		Sum of Cumulative Net An	nount Paid and Claim Liability	, Claim Reserve and Medica	al Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019		<u> </u>			
4.	2020		xxx			
5.	2021	XXX	XXX	XXX		
6.	2022	XXX	xxx	XXX	xxx	

	1	2	3	4	5	6	7	8	9	10
	Premiums	Claims	Claim Adjustment Expense	(Col. 3/2)	Claim and Claim Adjustment Expense Payments	(Col. 5/1)	Claims	Unpaid Claims Adjustment	Total Claims and Claims Adjustment Expense Incurred	(Col. 9/1)
Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2018										
2. 2019		A								
3. 2020										
4. 2021										
5. 2022										

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

TITLE XVIII MEDICARE

Section A - Paid Health Claims

			(Cumulative Net Amounts Paid		
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior			8,977	8,977	8,977
2.	2018	64,490	73,157	73,201	71,934	71,934
3.	2019	XXX	75,439	84,253	84,253	84,253
4.	2020	XXX	XXX	81,153	81,153	82,320
5.	2021	XXX	XXX	XXX	92,732	104,766
6.	2022	XXX	XXX	xxx	XXX	

Section B - Incurred Health Claims

	Sum of Cumulative Net Am	ount Paid and Claim Liability	y, Claim Reserve and Medical Inc	centive Pool and Bonuses	Outstanding at End of Year
	1	2	3	4	5
Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1. Prior	8,342	8,968	8,977	8,977	8,977
2. 2018	73,901	73,216	73,201	71,934	71,934
3. 2019	XXX	87,931	84,645	84,384	84,253
4. 2020	XXX	xxx	97,418	90,988	82,320
5. 2021	XXX	XXX	XXX	110,806	106,240
6. 2022	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
						Claim and				Total Claims	
						Claim				and Claims	
				Claim		Adjustment			Unpaid	Adjustment	
				Adjustment		Expense			Claims	Expense	
		Premiums	Claims	Expense	(Col. 3/2)	Payments	(Col. 5/1)	Claims	Adjustment	Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018	70,126	71,934	6,638	9.228	78,572	112.044			78,572	112.044
2.	2019	85,347	84,253	7,952	9.438	92,205	108.035			92,205	108.035
3.	2020	101,002	82,320	8,566	10.406	90,886	89.984			90,886	89.984
4.	2021	105,915	104,766	7,959	7.597	112,725	106.430	1,474	16	114,215	107.836
5.	2022	1,736	–	12		12	0.691			12	0.691

12.XI

UNDERWRITING AND INVESTMENT EXHIBIT

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

TITLE XIX MEDICAID

Section A - Paid Health Claims

		ocoulon /t r ara meanin oran				
			(Cumulative Net Amounts Pa	id	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019					
4.	2020		XXX			
5.	2021	XXX	XXX	xxx		
6.	2022	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims

	· · · · · · · · · · · · · · · · · · ·	Sum of Cumulative Net Ame	ount Paid and Claim Liability	y, Claim Reserve and Medica	I Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019		-			
4.	2020		XXX			
5.	2021	XXX	XXX	xxx		
6.	2022	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1)
1.	2018										
2.	2019										
3.	2020										
4.	2021										
5.	2022										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

OTHER HEALTH

Section A - Paid Health Claims

	OCCURNIA I dia ricatari orantic										
				Cumulative Net Amounts Pai	d						
		1	2	3	4	5					
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022					
1.	Prior										
2.	2018										
3.	2019.										
4.	2020	x x	XXX								
5.	2021	XXX	XXX	xxx							
6.	2022	XXX	XXX	XXX	XXX						

Section B - Incurred Health Claims

	· · · · · · · · · · · · · · · · · · ·	Sum of Cumulative Net Ame	ount Paid and Claim Liability	y, Claim Reserve and Medica	I Incentive Pool and Bonuses	Outstanding at End of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2018	2019	2020	2021	2022
1.	Prior					
2.	2018					
3.	2019		-			
4.	2020		XXX			
5.	2021	XXX	XXX	xxx		
6.	2022	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
		Premiums	Claims	Claim Adjustment Expense	(Col. 3/2)	Claim and Claim Adjustment Expense Payments	(Col. 5/1)	Claims	Unpaid Claims Adjustment	Total Claims and Claims Adjustment Expense Incurred	(Col. 9/1)
	Years in which Premiums were Earned and Claims were Incurred	Earned	Payments	Payments	Percent	(Col. 2+3)	Percent	Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2018										
2.	2019		A								
3.	2020										
4.	2021										
5.	2022										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	Comprehensi Med	ve (Hospital & ical)	4	5	6	7 Federal	8	9	10	11	12	13
		2	3	Medicare			Employees Health Benefits		Title XIX		Disability		
	Total	Individual	Group	Supplement	Dental Only	Vision Only	Plan	Medicare	Medicaid	Credit A&H	Income	Long-Term Care	Other
1. Unearned premium reserves													
2. Additional policy reserves (a)													
Reserve for future contingent benefits													
 Reserve for rate credits or experience rating refunds (including \$ for investment income) 	11,895,253	3,204,130	6,766,024					1,925,099					
5. Aggregate write-ins for other policy reserves	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
5. Totals (gross)	11,895,253	3,204,130	6,766,024					1,925,099					
7. Reinsurance ceded.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
3. Totals (Net) (Page 3, Line 4)	11,895,253	3,204,130	6,766,024					1,925,099					
Present value of amounts not yet due on claims	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						.,,					
0. Reserve for future contingent benefits													
Aggregate write-ins for other claim reserves													
2. Totals (gross)													
Reinsurance ceded													
4. Totals (Net) (Page 3, Line 7)													
Details of Write-Ins													
1501.													
0502.													
j503.													
D598. Summary of remaining write-ins for Line 5 from overflow page													
D599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)													
101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page													
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)													
a) Includes \$ premium deficiency reserve.													

PART 3 - ANALYSIS OF EXPENSES

		Claim Adjustm	nent Expenses	3	4	5
		1	2			
		Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent (\$	for occupancy of own building)				Lxpenses	877,563
	wages and other benefits					
	sions (less \$ ceded plus \$ assumed)					
	es and expenses					
	tions and accreditation fees					
6. Auditing,	, actuarial and other consulting services	1 /20 0/5	6 400 560	54 424 226		62 252 050
	g expenses					
	g and advertising					
	, express and telephone					
	and office supplies					
	ncy, depreciation and amortization					
12. Equipme	ent	10 10 5	1 5 2 0 2	220.075		3,222,390
	depreciation of EDP equipment and software					
	ced services including EDP, claims, and other services					
15. Boards, b	bureaus and association fees			4 04 0 700		1 010 700
	e, except on real estate					
17. Collectio	n and bank service charges	4 004 004		7.404.005		0.400.066
	ervice and administration fees					
	sements by uninsured plans					
	sements from fiscal intermediaries					
21. Real esta	ate expenses					
	ate taxes	39,486	51,129	/35,305		825,920
	censes and fees:					
	ate and local insurance taxes					
	ate premium taxes					
23.3 Re	gulatory authority licenses and fees			2,078,335		2,078,335
	yroll taxes					
	her (excluding federal income and real estate taxes)					
	ent expenses not included elsewhere					
	te write-ins for expenses					
	penses incurred (Lines 1 to 25)					
27. Less exp	enses unpaid December 31, current year			62,983,313		62,983,313
	enses unpaid December 31, prior year					
	s receivable relating to uninsured plans, prior year			27,008,130		27,008,130
	s receivable relating to uninsured plans, current year					
31. Total exp	penses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).	37,023,537	28,210,662	225,642,802	1,480,080	292,357,081
Details of Write	e-Ins					
2501						
2502						
2503						
	y of remaining write-ins for Line 25 from overflow page					
2599. Totals (L	ines 2501 through 2503 plus 2598) (Line 25 above)					

⁽a) Includes management fees of \$ 93,008,212 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

			1	2
			Collected During Year	Earned During Year
1.	U.S. Government bonds	. (a)		
1.1	Bonds exempt from U.S. tax			
1.2	Other bonds (unaffiliated)			
1.3	Bonds of affiliates.			
2.1	Preferred stocks (unaffiliated)			
2.11	Preferred stocks of affiliates	. (b)		
2.2	Common stocks (unaffiliated)		4,551,797	4,605,994
2.21	Common stocks of affiliates			
3.	Mortgage loans			
4.	Real estate	. (d)		
5.	Contract loans.			
6.	Cash, cash equivalents and short-term investments.			
7.	Derivative instruments			
8.	Other invested assets		5,416,161	6,309,434
9.	Aggregate write-ins for investment income			
10.	Total gross investment income		23,278,183	23,949,083
11.	Investment expenses			
12.	Investment taxes, licenses and fees, excluding federal income taxes			
13.	Interest expense			
14.	Depreciation on real estate and other invested assets			(i)
15.	Aggregate write-ins for deductions from investment income.			
16.	Total deductions (Lines 11 through 15)			1,480,086
17.	Net investment income (Line 10 minus Line 16)			22,468,998
	s of Write-Ins			
	Summary of remaining write-ins for Line 9 from overflow page			
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)			
	Summary of remaining write-ins for Line 15 from overflow page			
	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)			

- (a) Includes \$ 458,300 accrual of discount less \$ 615,540 amortization of premium and less \$ 720,897 paid for accrued interest on purchases.

- (a) Includes \$ 438,300 accrual of discount less \$ 5 13,340 amortization of premium and less \$ 720,897 paid for accrued interest on purchases.

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

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

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

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

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

 (g) Includes \$ accrual of discount less \$ amortization of premium.

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

 (h) Includes \$ 113,693 depreciation on real control and \$ investment accrued interest on accrued interest on purchases.

 (accrued interest on purchases.

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

 (c) Includes \$ accrued interest on purchases.

 (d) Includes \$ accrued of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

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

 (g) Includes \$ accrued of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

 (g) Includes \$ accrued of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

 (g) Includes \$ accrued of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

 (g) Includes \$ accrued of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

 (g) Includes \$ accrued of discount less \$ accrued of discount less \$
- (i) Includes \$ 1,413,683 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(2,595,520)		(2,595,520)		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	(1,990,543)		(1,990,543)	(75,452)	
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)	5,429,171	(2,682,031)	2,747,140	(35,637,332)	
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)		73,841	73,841	(592,532)	
10.	Total capital gains (losses)	2,575,246	(2,608,190)	(32,944)	(82,251,542)	
	s of Write-Ins					
	OTHER INVESTMENTS ACCRUALS		73,841	73,841	(592,532)	
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)			73 841	(592 532)	

	EXHIBIT OF NONADMITTE	1		0
		1	2	3
				Change in Total
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Nonadmitted Assets
1.	Bonds (Schedule D)			
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			
6.	Contract loans			
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:			
13.	15.1 Uncollected premiums and agents' balances in the course of collection	133 845	282 632	148 787
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.			
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance: 16.1 Amounts recoverable from reinsurers			
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
17.	Amounts receivable relating to uninsured plans			
18.1	Current federal and foreign income tax recoverable and interest thereon			
18.2	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit			
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable.			, , ,
25.	Aggregate write-ins for other-than-invested assets	9,226,097	11,349,337	2,123,240
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)		96,418,745	5,549,088
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	Total (Lines 26 and 27)	90,869,657	96,418,745	5,549,088
	ils of Write-Ins			
	<u> </u>			
	B. Summary of remaining write-ins for Line 11 from overflow page			
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501	. PREPAID EXPENSES AND OTHER ASSETS	9,226,097	11,349,337	2,123,240
2502				
2503				
	B. Summary of remaining write-ins for Line 25 from overflow page			
	7. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)			

EXHIBIT 1 – ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

		T	otal Members at End of	f		6
	1	2	3	4	5	
Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Current Year Member Months
1. Health Maintenance Organizations		182,909	181,841	191,642	174,258	1,844,234
2. Provider Service Organizations						
3. Preferred Provider Organizations		31,612	32,450	33,658	32,071	689,575
4. Point of Service	9,732	9,116	9,018	9,862	9,411	109,356
5. Indemnity Only						
6. Aggregate write-ins for other lines of business						
7. Total		223,637	223,309	235,162	215,740	2,643,165
Details of Write-Ins						
0601						
0602						
0603						
0698. Summary of remaining write-ins for Line 6 from overflow page						
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)						

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Harvard Pilgrim Health Care, Inc. ("Harvard Pilgrim" or the "Company") have been prepared in accordance with the National Association of Insurance Commissioners ("NAIC") Accounting Practices and Procedures Manual for statutory accounting principles ("NAIC SAP"), which do not differ from the accounting practices prescribed or permitted by the Division of Insurance of the Commonwealth of Massachusetts.

Harvard Pilgrim's net income and capital and surplus, based on NAIC SAP and practices prescribed and permitted by the Commonwealth of Massachusetts, are shown below:

	SSAP#	F/S Page	F/S Line #	2022	2021
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$(25,351,088)	\$(46,799,339).
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (25,351,088)	\$ (46,799,339)
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 644,795,128	\$ 710,988,491
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 644,795,128	\$ 710,988,491

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

The preparation of financial statements in accordance with NAIC SAP requires that management make estimates and assumptions which affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. The methods and assumptions used for making such estimates are reviewed regularly. Actual results could differ from those estimates. The claims unpaid liability, accrued medical incentive pool liability, valuation of investments, medical loss ratio rebate accrual ("MLR"), accrued retrospective premiums, premium deficiency reserves, and accruals for risk-sharing provisions under the Federal Affordable Care Act ("ACA") represent the Company's most significant estimates.

C. Accounting Policy

Real Estate, Furniture and Equipment

Real estate (including improvements), furniture and electronic data processing (EDP) equipment are carried at depreciated cost. Depreciation is calculated using the straight-line method over the estimated useful lives of the assets as follows:

Buildings and improvements: 20-40 years Equipment, furniture, and fixtures: 3-20 years Computer software and operating systems: 3-5 years

Amortization of leasehold improvements is calculated using the shorter of the asset's estimated useful life or related lease term.

Goodwill

Goodwill represents the amount by which the cost of acquiring an entity exceeds the book value of the acquired entity. Goodwill is amortized over the period in which Harvard Pilgrim benefits economically, not to exceed ten years and is charged directly to statutory net worth. Positive goodwill resulting from a business combination is included in the carrying value of the investment in the acquired entity in the statutory statement of admitted assets, liabilities and statutory net worth.

Retrospectively Rated Premium

Harvard Pilgrim sells 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. Any accrued retrospective premiums are recorded through premiums. Harvard Pilgrim records its liability for MLR rebates in aggregate health policy reserves based on the requirements of the ACA in accordance with SSAP No. 66, *Retrospectively Rated Contracts* ("SSAP No. 66"). SSAP No. 66 requires Harvard Pilgrim to accrue for the estimated amount of premiums to be returned retrospectively to an employer group or member as an adjustment to premium revenue. Harvard Pilgrim estimates the amount of the retrospective rebate based on the difference between the estimated MLR of each employer group segment as defined in the ACA, as of December 31st of each year, and the minimum MLR requirements for those employer group segments either under ACA requirements or individual state requirements, if the state has a higher MLR standard than the ACA. The Commonwealth of Massachusetts has set an MLR threshold of 88% for 2021 for the merged market segments as defined by Massachusetts state law. See Note 24.

Nonadmitted Assets

Certain assets, principally furniture, leasehold improvement, prepaid expenses, investment in unconsolidated subsidiary, past due premium, healthcare receivables, uninsured plan receivables, past due receivables from subsidiaries and affiliates, risk corridor receivables, EDP equipment and capitalized software in excess of the admissibility criteria are nonadmitted and, as such, are not included in statutory surplus.

Revenue Recognition

Premiums are recorded as revenue in the month for which members are entitled to service. Premium revenue collected prior to the month for which the member is entitled to service is recorded as premiums received in advance. Harvard Pilgrim's government contracts establish monthly rates per member, and there may be additional amounts due to Harvard Pilgrim based on items such as age, working status, or specific health issues of the member. The Center for Medicare & Medicaid Services ("CMS") has implemented a risk adjustment formula, which apportions premiums paid to all Medicare Advantage health plans according to the health status of each beneficiary enrolled.

1. Summary of Significant Accounting Policies and Going Concern (Continued)

Assessments

In accordance with SSAP No. 35R, *Revised, Guaranty Fund and Other Assessments*, insurance-related assessments are recognized as liabilities when certain conditions are met. The assessments are recorded as administrative expenses, except for certain health related assessments which are recorded as a component of hospital and medical expenses.

Risk Sharing Provisions of the Affordable Care Act

Beginning in 2014, the ACA has included three programs designed to stabilize the health insurance market ("3Rs"): a transitional reinsurance program ("ACA Reinsurance"), a temporary risk corridor program ("Risk Corridor"), and a permanent risk adjustment program ("Risk Adjustment"). The Risk Corridor and Reinsurance programs ended in 2016.

Risk Adjustment

The ACA established a permanent risk adjustment program to transfer funds from qualified individual and small group insurance plans with below average risk scores to those respective plans with above average risk scores. Based on the risk of Harvard Pilgrim's qualified plan members relative to the average risk of members of other qualified plans in comparable markets, the Company estimates its risk adjustment receivable or payable and reflects the impact as an adjustment to premium revenue. Beginning with the 2018 benefit year, the ACA risk adjustment methodology incorporates a high-cost risk pool calculation, which adds a reinsurance element to the risk adjustment program which is referred to as high-cost risk pooling. The adjustments to premium revenue are calculated including the high cost risk pool aspect of this program.

(1) Cash and Cash Equivalents

Cash and cash equivalents include amounts on deposit with banks and government and corporate debt issues with original maturities of three months or less. Money market mutual funds registered under the Investment Company Act of 1940 and regulated under rule 2a-7 of the Act shall be accounted for and reported as cash equivalents.

(2) Bonds and Preferred Stock

Investments in bonds and preferred stock are stated at amortized cost or the lower of amortized cost or fair value based on their NAIC designation. Investments in bonds are primarily comprised of government and corporate debt issues and asset-backed/mortgage-backed securities. Realized gains and losses are determined using the specific identification method and are included in investment income. Investment income is reported net of expenses related to the management and custody of investments.

(3) Common Stock

Common stock includes the investment in equity securities, which are stated at fair value, and the investment in unconsolidated subsidiaries which is recorded using the equity method. For the insurance subsidiaries, HPHC Insurance Company, Inc. (the "Insurance Company") and Harvard Pilgrim Health Care of New England, Inc. ("New England"), the investments are carried at the statutory net worth of the subsidiaries. For the non- insurance subsidiaries, the investments are carried at the Generally Accepted Accounting Principles ("GAAP") equity of the investee. All changes to the carrying value of the subsidiaries are recorded as a component of unrealized gains and losses. Unrealized gains and losses are recorded directly to statutory net worth.

- (4) Preferred stocks Not Applicable
- (5) Mortgage loans Not Applicable

(6) Loan-backed Securities

Loan-backed securities are reported at cost upon acquisition, and amortization of premium or discount is calculated using the scientific method and recorded as an adjustment to investment income. These securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities.

(7) Investments in subsidiaries, controlled and affiliated entities - Not Applicable

(8) Other Invested Assets

Harvard Pilgrim invests in certain joint ventures and limited partnerships and reports the investments in accordance with Statement of Statutory Accounting Principles No. 48, *Joint Ventures, Partnerships and Limited Liability Companies*. These investments are included in Other Invested Assets on the balance sheet. All changes to the carrying value of these investments are recorded as a component of unrealized gains and losses which are recorded directly to statutory net worth.

Investment in Limited Liability Company

Harvard Pilgrim is the sole corporate member in a limited liability company, Harvard Pilgrim Health Care Institute, LLC (the "Institute"). The carrying value of this company is equal to its net equity based on generally accepted accounting principles, and is treated as an admitted asset reported as other invested assets in the financial statements in accordance with Statement of Statutory Accounting Principles SSAP No. 48, Joint Ventures, Partnerships and Limited Liability Companies ("SSAP No. 48"). All changes to the carrying value of the Institute are recorded as a component of unrealized gains and losses. Unrealized gains and losses are recorded directly to statutory net worth.

(9) Derivatives - Not Applicable

(10) Premium Deficiency Reserve

Harvard Pilgrim evaluates its health care contracts to determine if it is probable that a loss will be incurred. A premium deficiency loss is recognized when it is probable that expected future paid claims, administrative expenses, and reserves will exceed existing reserves plus anticipated future premiums on existing contracts. Anticipated investment income is not considered in the calculation of premium deficiency losses.

(11) Claims Unpaid, Accrued Medical Incentive Pool and Unpaid Claims Adjustment Expenses

Harvard Pilgrim records claims unpaid, for both reported and incurred but not reported claims, which are expected to be paid after year-end for services provided to members in the current year based on Harvard Pilgrim's claim experience. This liability includes the estimated cost of services that will continue to be rendered after year-end for which Harvard Pilgrim is obligated to pay for such services in accordance with contract provisions or regulatory requirements. The amount of the estimated liability is actuarially determined based on historical claims data, current membership statistics, cost and utilization trends, and other related information and considers expected losses, if any, on existing contracts. This liability is an estimate, which is subject to the impact of changes in claim severity and frequency, as well as numerous other factors. Accordingly, this estimate is continuously reviewed and, as adjustments become necessary, they are reflected in current operations.

1. Summary of Significant Accounting Policies and Going Concern (Continued)

Harvard Pilgrim records an accrued medical incentive pool liability based on contractual arrangements with various health care providers. Compensation arrangements vary by provider. Hospital and medical expenses include claims payments, capitation payments, and various other costs incurred to provide and manage medical care provided to members, as well as estimates of future payments to hospitals and others for medical care provided to members in the current year based on Harvard Pilgrim's claims experience. Certain providers are paid on a fee for service basis and can be eligible for bonuses based on meeting prescribed quality performance measures. Harvard Pilgrim pays capitation under contractual agreements to a number of physicians and provider groups based on the number of enrolled Harvard Pilgrim members served by each physician or provider group. Certain providers have entered into risk-sharing arrangements with Harvard Pilgrim, whereby a settlement is calculated by comparing actual medical claims experience to a budgeted amount based upon contractual arrangements. These settlements are estimated and accrued during the period the related services were rendered and adjusted in future periods as final settlements are determined. Estimated settlements for these risk-sharing arrangements are reflected in the accrued medical incentive pool liability or health care receivables.

Harvard Pilgrim records a related unpaid claim adjustment expense ("CAE") liability to reflect the cost to adjudicate the claims unpaid as of yearend. The unpaid CAE liability is estimated as a percentage of the claims unpaid based on historical information on the administrative cost to adjudicate a claim.

(12) Harvard Pilgrim has not made material modifications to its capitalization policy from the prior period.

(13) Pharmaceutical Rebate Receivables

Harvard Pilgrim contracts with pharmaceutical manufacturers, some of which provide rebates based on use of the manufacturers' products by Harvard Pilgrim members. Harvard Pilgrim accrues rebates receivable on a monthly basis, which are included as a component of premium and health care receivables or uninsured plan receivables, based on the terms of the applicable contracts, historical data and current estimates. Harvard Pilgrim bills these rebates to the manufacturers on a quarterly basis. Harvard Pilgrim records rebates attributable to fully insured members as a reduction in medical costs.

D. Going Concern

Management continually evaluates the Company's ability to continue as a going concern. After considering management's plans, potential events and principal conditions, there is no substantial doubt about the Company's ability to continue as a going concern.

. Accounting Changes and Corrections of Errors - Not Applicable

. 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

		Calculation of Limitation Using	
		Prior Quarter	Current Reporting Period
(1)	Capital & Surplus	657,171,578	XXX
Less			
	(2) Admitted Positive Goodwill		
	(3) Admitted EDP Equipment & Operating System Software	3,684,951	XXX
	(4) Admitted Net Deferred Taxes		
(5)	Adjusted Capital and Surplus (Line 1-2-3-4)	653,486,627	XXX
(6)	Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line		
` '	5*10%])	65,348,663	XXX
(7)	Current period reported Admitted Goodwill	XXX	
(8)	Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line 5)		%

4. Discontinued Operations - Not Applicable

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans Not Applicable
- B. Debt Restructuring Not Applicable
- C. Reverse Mortgages Not Applicable
- D. Loan-Backed Securities
 - (1) Prepayment assumptions for single class and multiclass mortgage-backed / asset-backed securities were obtained from third party providers.
 - (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) Not Applicable

5. Investments (Continued)

(3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities

(1)	(2)	(3)	(4)	(5)	(6)	(7)
CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized OTTI	Amortized Cost After OTTI	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
922042601	\$13,330,482	\$ 10,648,452	\$ 2,682,030	\$ 10,648,452	\$ 10,648,452	12/31/2022
Total			\$ 2,682,030			

- (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss
 - a. The aggregate amount of unrealized losses:
 - 1. Less than 12 months
 \$....(43,098,520)

 2. 12 months or longer
 (28,279,161)
 - b. The aggregate related fair value of securities with unrealized losses:
 - 1. Less than 12 months
 \$ 418,818,214

 2. 12 months or longer
 159,951,850
- (5) Support for concluding impairments are not other-than-temporary Not Applicable
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- J. Real Estate Not Applicable
- K. Low-Income Housing Tax Credits (LIHTC) Not Applicable
- L. Restricted Assets
 - (1) Restricted assets (including pledged)

		(1) Total Gross (Admitted &	(2) Total Gross (Admitted &	(3)	(4)	(5)	(6) Gross (Admitted &	(7) Admitted
	Restricted Asset Category	Nonadmited & Nonadmited) Restricted from Current Year	Nonadmited (A Nonadmited) Restricted From Prior Year	Increase / (Decrease) (1 - 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 - 4)	Nonadmitted & Nonadmitted Restricted to Total Assets	
a.	Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$	%.	%.
b.	Collateral held under security lending agreements							
	Subject to repurchase agreements							
	Subject to reverse repurchase agreements.							
	Subject to dollar repurchase agreements							
f.	Subject to dollar reverse repurchase agreements							
g.	Placed under option contracts							
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock							
i.	FHLB capital stock	2,208,400	1,844,300	364,100		2,208,400	0.185	0.200
j.	On deposit with states					3,170,969	0.266	0.287
k.	On deposit with other regulatory bodies							
I.	Pledged as collateral to FHLB (including assets backing funding agreements)	48,864,639	43,120,864	5,743,775		48,864,639	4.092	4.429
m	. Pledged as collateral not captured in other categories							
n.	Other restricted assets							
0.	Total restricted assets (Sum of a through n)	\$ 54,244,008	\$ 48,163,482	\$ 6,080,526	\$	\$ 54,244,008	4.542 %	4.916 %

- (2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) Not Applicable
- (3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) Not Applicable
- (4) Collateral received and reflected as assets within the reporting entity's financial statements Not Applicable
- M. Working Capital Finance Investments Not Applicable
- N. Offsetting and Netting of Assets and Liabilities Not Applicable
- O. 5GI Securities Not Applicable
- P. Short Sales Not Applicable

5. Investments (Continued)

Q. Prepayment Penalty and Acceleration Fees

	General Account
(1) Number of CUSIPs	2
(2) Aggregate amount of investment income	\$ 67,588

R. Reporting Entity's Share of Cash Pool by Asset type - Not Applicable

Joint Ventures, Partnerships and Limited Liability Companies

- A. Investments in Joint Ventures, Partnerships or Limited Liability Companies that Exceed 10% of Admitted Assets Not Applicable
- B. Impaired Investments in Joint Ventures, Partnerships and Limited Liability Companies

The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

A. Due and Accrued Income Excluded from Surplus

All investment income due and accrued with amounts that are over 90 days past due are nonadmitted and excluded from surplus.

- B. Total Amount Excluded Not Applicable
- 8. Derivative Instruments Not Applicable

9. Income Taxes

Harvard Pilgrim is tax exempt under section 501(C)(3) of the Internal Revenue code.

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

On June 30, 2022 Harvard Pilgrim Health Care, Inc. contributed \$25 million of bonds at fair value to Harvard Pilgrim Health Care of New England, Inc.

On December 29, 2022 Point32Health, Inc. made a \$35 million capital contribution to Harvard Pilgrim Health Care, Inc.

As described in Note 3, on August 14, 2019, Harvard Pilgrim and Health Plans, Inc ("HPHI", formerly known as Tufts Health Plans, Inc., and the corporate parent of Tufts Associated Health Maintenance Organization, Inc. and Tufts Health Public Plans, Inc.) announced their intent to combine their respective nonprofit organizations. After the parties obtained required federal and state regulatory approvals, the combination became effective on January 1, 2021. As a result of the combination, effective January 1, 2021, HPHI became the direct corporate parent of Harvard Pilgrim and ultimate corporate parent for Harvard Pilgrim's affiliates. After receiving required approval, the incorporated name of HPHI was officially changed to Point32Health, Inc. effective July 1,2021.

On January 01, 2021, Harvard Pilgrim Health Care Foundation, Inc., a subsidiary of Harvard Pilgrim Health Care, Inc. was merged into Tufts Health Plan Foundation, Inc., a subsidiary of Harvard Pilgrim Health Care, Inc.'s parent corporation, Point32Health, Inc., and its name was changed to Point32Health Foundation, Inc.

Harvard Pilgrim made a \$10 million capital contribution to Harvard Pilgrim Health Care of New England, Inc. ("New England") in September 2021, and a \$5 million capital contribution to New England in December 2021. Upon receiving DOI approval, Harvard Pilgrim made a \$25 million capital contribution to New England, which was settled on February 2022. In accordance with SSAP No. 72 this contribution will be treated as a Type 1 subsequent even and is reflected as a liability for Harvard Pilgrim as of December 31, 2021.

A. New HPHC Holding Corporation ("NEWCO") is a wholly owned Delaware C corporation. All of the Company's for-profit subsidiaries are held by NEWCO. NEWCO's Board of Directors consists entirely of Harvard Pilgrim management.

NEWCO is a wholly owned subsidiary of Harvard Pilgrim, and acts as a downstream noninsurance holding company with no book value or assets other than the audited value of its subsidiary for-profit entities. When valuing its investment in NEWCO, Harvard Pilgrim utilizes the look-through approach in accordance with SSAP No. 97, which allows the Company to admit the value of its downstream noninsurance holding company provided that the entities owned by the downstream noninsurance holding company have annual audited financial statements. NEWCO has no liabilities, commitments, contingencies, guarantees or obligations to be considered in Harvard Pilgrim's determination of its carrying value.

B. Harvard Pilgrim conducts transactions with a number of affiliates. Harvard Pilgrim provides all administrative and operational management services to the Insurance Company, and New England. Harvard Pilgrim also provides certain administrative and operational services to HPI and Tufts Health Plan. Administrative expenses, including CAE, are allocated to the Insurance Company, New England, and HPI based on Harvard Pilgrim's departmental cost allocation methodology. There are certain operating expenses incurred by HPI and HPHC Insurance Agency, Inc. (the "Agency"), which are initially paid for by Harvard Pilgrim and reimbursed to the Company. HPI administers certain products on behalf of the Insurance Company. The Insurance Company pays a fee to HPI for the services performed administering those products. HPI pays fees to access the Harvard Pilgrim provider network.

Intercompany balances are settled quarterly, following the close of the quarter.

- C. Transactions With Related Party Who Are Not Reported on Schedule Y Not Applicable
- D. Amounts Due To or From Related Parties Not Applicable
- E. Harvard Pilgrim makes contributions to Harvard Pilgrim Health Care Foundation, Inc. (the "Foundation") and the Institute to support their ongoing operations. The Foundation reimburses Harvard Pilgrim for expenses paid on its behalf.
- F. Guarantees or Contingencies Not Applicable
- G. Nature of Relationships that Could Affect Operations Not Applicable
- H. Amount Deducted for Investment in Upstream Company Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets Not Applicable

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

- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies Not Applicable
- K. Foreign Subsidiary Value Using CARVM Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method Not Applicable
- M. All SCA Investments
 - (1) Balance sheet value (admitted and nonadmitted) all SCAs (except 8b(i) entities)

	SCA Entity	Percentage of SCA Ownership	Gr	oss Amount	Admitted Amount	 onadmitted Amount
a.	SSAP No. 97 8a Entities					
	Total SSAP No. 97 8a Entities	XXX	\$		\$	\$
b.	SSAP No. 97 8b(ii) Entities					
	Total SSAP No. 97 8b(ii) Entities	XXX	\$		\$	\$
c.	SSAP No. 97 8b(iii) Entities					
	NEW HPHC HOLDING CORPORATION	100.000 %	\$	92,726,341	\$ 92,375,597	\$ 350,744
	Total SSAP No. 97 8b(iii) Entities	XXX	\$	92,726,341	\$ 92,375,597	\$ 350,744
d.	SSAP No. 97 8b(iv) Entities					
	Total SSAP No. 97 8b(iv) Entities	XXX	\$		\$	\$
e.	Total SSAP No. 97 8b Entities (except 8b(i) entities) (b+c+d)	XXX	\$	92,726,341	\$ 92,375,597	\$ 350,744
f.	Aggregate Total (a+e)	XXX	\$	92,726,341	\$ 92,375,597	\$ 350,744

(2) NAIC filing response information

	SCA Entity	Type of NAIC Filing*	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received (Yes/No)	NAIC Disallowed Entities Valuation Method, Resubmission Required (Yes/No)	Code**
a.	SSAP No. 97 8a Entities						
	Total SSAP No. 97 8a Entities			\$			
b.	SSAP No. 97 8b(ii) Entities						
	Total SSAP No. 97 8b(ii) Entities			\$			
c.	SSAP No. 97 8b(iii) Entities						
		S2	.09/30/2022.	\$ 204,858,195	YES	NO	l
	Total SSAP No. 97 8b(iii) Entities			\$ 204,858,195			
d.	SSAP No. 97 8b(iv) Entities						
	Total SSAP No. 97 8b(iv) Entities			\$			
e.	Total SSAP No. 97 8b Entities (except 8b(i) entities) (b+c+d)			\$ 204,858,195			
f.	Aggregate Total (a+e)			\$ 204,858,195			
	* S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallov	ved Filing					

^{*} S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallowed Filing

- N. Investment in Insurance SCAs Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking Not Applicable

11. Debt

- A. Debt, Including Capital Notes Not Applicable
- B. FHLB (Federal Home Loan Bank) Agreements
 - (1) In April 2015, Harvard Pilgrim became a member of the FHLB of Boston with an initial membership stock investment of \$0.7 million. Through its membership, Harvard Pilgrim has the ability to conduct business activity (borrowings) with the FHLB. On April 15, 2020, the Board of Directors voted to authorize the Company to increase its borrowing limit with the FHLB from the Company's \$60.0 million borrowing limit to \$120.0 million to meet short term liquidity requirements. As of December 31, 2022, Harvard Pilgrim had a single loan outstanding of \$40.0 million.

^{**} I - Immaterial or M - Material

11. Debt (Continued)

(2)	FHLB	capital	stock
-----	------	---------	-------

(a)	Aggregate total	s
-----	-----------------	---

								Total
	1.							
			k - Class A					
			k - Class B					•
		,						
		` '						
			a+b+c+d)					
	•	* *	ed borrowing capacity	as determined by	tne insurer			\$ 120,000,00
	2.	Prior Year-End						•
			k - Class A					
			k - Class B					•
		• •						-
		()						
		() 00 0 (a+b+c+d)					
(b)	Mor	t) Actual or estimate) mbership stock (class A	ed borrowing capacity	-				\$ 120,000,00
(b)	iviei	indership stock (class A	and b) eligible and no	ot eligible for fede	триоп	Fligible	e for Redemption	
			(1)	(2)	(3)	(4)	(5)	(6)
	Мє	embership Stock	Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	Less Than 6 Months		Less 1 to Less Than	• • •
	1.	Class A	\$	\$	\$	\$	\$	\$
	2.	Class B	\$ \$08,400	\$ 608,400	\$	\$	\$	\$
) Col	llatera	al pledged to FHLB						
(a)	Am	ount pledged as of repo	orting date					
(4)		ou p.ougou uo oop.	orung date			4.0	4-5	(-)
						(1)	(2)	(3) Aggregate Total
						Fair Value	Carrying Value	Borrowing
	1.	Current year total colla	nteral pledged		\$	46,919,384	\$ 51,115,514	\$ 40,000,00
	2.	Prior year-end total col	lateral pledged			43,956,044	42,780,734	40,000,00
				od				
(b)	Max	ximum amount pledged	a during reporting perio					
(b)	Max	ximum amount pledged	d during reporting perio			(4)	(5)	(5)
(b)	Max	ximum amount pledged	a during reporting perio			(1)	(2)	(3)
(b)	Max	ximum amount pledged	d during reporting perio			(1)	(2)	Amount Borrowe
(b)	Max	ximum amount pledged	a during reporting perio		_	(1) Fair Value	(2) Carrying Value	(3) Amount Borrower at Time of Maximum Collater
(b)	Max		a during reporting perion	L	\$	Fair Value	Carrying Value	Amount Borrowe at Time of Maximum Collater
(b)		Current year total maxi				Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrowe at Time of Maximum Collater \$
,	1. 2.	Current year total maxi	imum collateral pledged			Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir	Current year total maxi Prior year-end total ma	imum collateral pledged iximum collateral pledge			Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir	Current year total maxi Prior year-end total ma ng from FHLB	imum collateral pledged iximum collateral pledge			Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. rrowir	Current year total maxi Prior year-end total ma ng from FHLB	imum collateral pledged iximum collateral pledge			Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. rrowir	Current year total maxi Prior year-end total ma ng from FHLB	imum collateral pledged iximum collateral pledge			Fair Value 51,657,071	Carrying Value \$ 57,425,643 42,780,734	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir Am	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting	imum collateral pledged iximum collateral pledge			Fair Value 51,657,071	Carrying Value \$ 57,425,643	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year	imum collateral pledged iximum collateral pledge g date	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. rrowir Am	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt	imum collateral pledged iximum collateral pledge g date	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir Am	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt	imum collateral pledged iximum collateral pledge g date	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. rrowir Am	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt	imum collateral pledged eximum collateral pledge g date	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. Amo	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt	imum collateral pledged iximum collateral pledge g date	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. rrowir Am	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt	imum collateral pledged iximum collateral pledge g date ts	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrowe at Time of Maximum Collater \$
) Bor	1. 2. Amo	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt (b) Funding agreement (c) Other (d) Aggregate total (a-	imum collateral pledged iximum collateral pledge g date ts	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrower at Time of Maximum Collater \$
) Bor	1. 2. Amo	Current year total maxi Prior year-end total ma ng from FHLB ount as of the reporting Current Year (a) Debt (b) Funding agreement (c) Other (d) Aggregate total (a- Prior Year-end (a) Debt (b) Funding agreement	imum collateral pledged iximum collateral pledge g date ts	ed		Fair Value 51,657,071 43,956,044	Carrying Value \$	Amount Borrower at Time of Maximum Collater \$

11. Debt (Continued)

(b) Maximum amount during reporting period (current year)

			Total
1.	Debt	. \$	40,000,000
2.	Funding agreements		
3.	Other		
4.	Aggregate total (Lines 1+2+3)	. \$	40,000,000

(c) FHLB - Prepayment obligations

Does the Company Have **Prepayment Obligations** Under the Following Arrangements? (YES/NO) YFS NO Funding agreements NO

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

Defined Benefit Plan

1. Debt.

Other

Harvard Pilgrim's postretirement medical plan allows employees who have attained age 60 and completed ten years of continuous service to remain in Harvard Pilgrim's group health care coverage upon retirement and until they qualify for Medicare coverage. In accordance with the provisions of the postretirement medical plan, retirees will pay 100% of the active monthly premium rate until they reach age 65. Once they reach age 65 and enroll in both Medicare A and B, Harvard Pilgrim will provide a maximum monthly contribution of \$150 to each retiree (and each spouse, if applicable), provided the employee is transitioning from an active Harvard Pilgrim employee medical plan. Additionally, Harvard Pilgrim covers up to 100% of the costs for select grandfathered retirees. The plan is not currently funded.

Effective December 31, 2016, the Company amended the postretirement medical plan to freeze participation and benefit accruals. Refer to (17) below for additional information.

A summary of assets, obligations and assumptions of the post-retirement medical plan are as follows at December 31, 2022 and 2021:

- (1) Change in benefit obligation
 - (a) Pension benefits Not Applicable
 - (b) Postretirement benefits

		Overfunded			Under	funded	
		2022	2021		2022		2021
1.	Benefit obligation at beginning of year	\$	\$	\$	3,608,761	\$	3,939,344
2.	Service cost						
3.	Interest cost				101,645		73,106
4.	Contribution by plan participants.				–		916,957
5.	Actuarial gain (loss)						
6.	Foreign currency exchange rate changes						
7.	Benefits paid				(429,504)		(1,376,799)
8.	Plan amendments.				–		56,153
9.	Business combinations, divestitures, curtailments, settlements and special termination benefits.						
10.	Benefit obligation at end of year	\$	\$	\$	4,139,910	\$	3,608,761

- (c) Special or contractual benefits per SSAP No. 11 Not Applicable
- (2) Change in plan assets

		Pension Benefits		Postretirement Benefits			ractual Benefits P No. 11
		2022	2021	2022	2021	2022	2021
a.	Fair value of plan assets at beginning of year	\$	\$	\$	\$	\$	\$
b.	Actual return on plan assets						
C.	Foreign currency exchange rate changes						
d.	Reporting entity contribution			429,504	459,842		
e.	Plan participants' contributions				916,957		
f.	Benefits paid			(429,504)	(1,376,799)		
g.	Business combinations, divestitures and settlements						
h.	Fair value of plan assets at end of year	\$	\$	\$ 859,008	\$	\$	\$

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

(3) Funded status

			Pension Benefits		Postretiren	nent Benefits
			2022	2021	2022	2021
a.	Con	nponents				
	1.	Prepaid benefit costs	\$	\$	\$	\$
	2.	Overfunded plan assets				
	3.	Accrued benefit costs			3,928,766	4,247,465
	4.	Liability for pension benefits			828,210	41,197
b.	Asse	ets and liabilities recognized				
	1.	Assets (nonadmitted)	\$	\$	\$	\$
	2.	Liabilities recognized			(3,100,556)	4,288,662
C.	Unre	ecognized liabilities	\$	\$	\$	\$

(4) Components of net periodic benefit cost

		Pension Benefits		Postretirement Benefits			tractual Benefits AP No. 11
		2022	2021	2022	2021	2022	2021
a.	Service cost	\$	\$	\$	\$	\$	\$
b.	Interest cost			101,645	73,106		
C.	Expected return on plan assets						
d.	Transition asset or obligation						
e.	Gains and losses.				(32,462)		
f.	Prior service cost or credit						
g.	Gain or loss recognized due to a settlement or curtailment						
h.	Total net periodic benefit cost		\$	\$ 101,645	\$ 40,644	\$	\$

(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost

		Pension Benefits		Postretirement Benefits	
		2022	2021	2022	2021
a.	Items not yet recognized as a component of net periodic cost - prior year	\$	\$	\$(14,955)	\$(727,318)
b.	Net transition asset or obligation recognized				
C.	Net prior service cost or credit arising during the period				
d.	Net prior service cost or credit recognized				
e.	Net gain and loss arising during the period.			(860,247)	679,901
f.	Net gain and loss recognized			–	32,462
g.	Items not yet recognized as a component of net periodic cost - current year	\$	\$	\$ (875,202)	\$ (14,955)

(6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost

		Pension Benefits		Postretirement Benefits	
		2022	2021	2022	2021
a.	Net transition asset or obligation	\$	\$	\$	\$
b.	Net prior service cost or credit				
C.	Net recognized gains and losses			875.203	(14.955)

(7) Weighted-average assumptions used to determine net periodic benefit cost

We	eighted-average assumptions used to determine net periodic benefit cost as of Dec. 31:	2022	2021
a.	Weighted-average discount rate	2.500 %	1.950 %
b.	Expected long-term rate of return on plan assets	%	%
C.	Rate of compensation increase.	%	%
d.	Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	%	%.
Weighted-average assumptions used to determine projected benefit obligations as of Dec. 31:			
		2022	2021
31:	-	5.150 %	2.500 %

For measurement purpose, the actual observed 2022 per capita cost of covered health care benefits were used. The rate of increase for these costs was assumed to be 5.71% for 2022, and decrease gradually to 4.00% for 2045, and remain at that level thereafter.

(8) Accumulated benefit obligation - Not Applicable

(9) Harvard Pilgrim has one Post-Retirement Medical Life Insurance Plan. The healthcare benefits are contributory with participants contributions adjusted annually and the life insurance benefits are non- contributory. The accounting for the health care plan is consistent with the Company's expressed intent to have Medicare eligible retirees pay any amount above the Company's contribution of \$150 per month. Additionally, there are certain grandfathered participants for whom the Company pays their entire benefit.

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

(10) Estimated future payments, which reflect expected future service, as appropriate

	Year	Amount
a.	2023	\$ 388,209
b.	2024	361,200
C.	2025	336,225
d.	2026	313,085
e.	2027	291,609
f.	2028 through 2032	1,182,811

- (11) The Company does not have any regulatory contribution requirements for 2022 however the Company's current projection for voluntary contributions to the defined benefit pension plan is \$388 thousand in 2022.
- (12) Amounts and types of securities of the reporting entity and related parties included in plan assets Not Applicable
- (13) Alternative method used to amortize prior service amounts or net gains and losses Not Applicable
- (14) Substantive commitments used as the basis for accounting for the benefit obligation Not Applicable
- (15) Special or contractual termination benefits recognized

Effective December 31, 2016, the Company amended the postretirement medical plan to freeze participation and benefit accruals. Retiree eligible participants had until December 31, 2017 to retire and elect coverage. The plan freeze was accounted for as a curtailment, and resulted in a credit to net periodic benefit cost in prior years.

- (16) Significant changes in the benefit obligation or plan assets not otherwise disclosed Not Applicable
- (17) Accumulated postretirement and pension benefit obligation and the fair value of plan assets for defined postretirement and pensions benefit plans

There was no transition surplus impact in 2019 due to the adoption of SSAP No. 102, Accounting for Pensions, a replacement of SSAP No. 89 ("SSAP 102") and SSAP 92, Postretirement Benefits Other Than Pensions ("SSAP 92").

- (18) Remaining surplus impact during transition period after adoption of SSAP No. 92 and SSAP No. 102 Not Applicable
- B. Investment Policies and Strategies of Plan Assets Not Applicable
- C. Fair Value of Each Class of Plan Assets Not Applicable
- D. Expected Long-Term Rate of Return for the Plan Assets Not Applicable
- E. Defined Contribution Plans

On September 22, 2021 the Human Resources Committee of the Board of Directors voted to approve the merger of the Harvard Pilgrim Health Care, Inc. PRISM 401(k) Savings, Match and Basic Plus Plan ("Plan") into the Tufts Health Plan Retirement Plan (the "THP Plan") effective at the stroke of midnight December 31, 2021 in accordance with Section 16.08 of the HPHC Plan and in accordance with the terms of the THP Plan and Internal Revenue Code Section 414(l) and regulations thereunder; (ii) allow Harvard Pilgrim Health Care, Inc. and Harvard Pilgrim Health Care Institute, LLC (collectively, the "HPHC Employers") to become participating employers in the THP Plan effective at the stroke of midnight December 31, 2021 such that eligible employees of the HPHC Employers shall be eligible to participate in the THP Plan on and after such date; and (iii) approve the amendment of the THP Plan effective at the stroke of midnight December 31, 2021 to reflect the merger of the HPHC Plan into the THP Plan and the participation of eligible employees of the HPHC Employers in the THP Plan.

Harvard Pilgrim employees participate in a defined contribution plan covering all employees. Participants can make salary deferral contributions up to 50% of their pay subject to the legally permitted maximum and, after one year of service, Harvard Pilgrim makes matching contributions equal to 100% of the first 4% of salary deferrals, subject to the legally permitted maximum. Harvard Pilgrim also makes an annual contribution of 2% of pay to each participant's account regardless of whether the employee makes salary deferral contributions or not. In December 2022 and 2021, it was announced that a discretionary 0% and 1% employer contribution will be made to the defined contribution plan in 2021 and 2020, respectively. Harvard Pilgrim's contributions amounted to \$0 million and \$8.3 million for the years ended December 31, 2022 and 2021, respectively.

- F. Multiemployer Plans Not Applicable
- G. Consolidated/Holding Company Plans Not Applicable
- H. Postemployment Benefits and Compensated Absences

Deferred Compensation Plan

Harvard Pilgrim established a non-qualified deferred compensation plan (the "Plan"), effective July 1, 2005, which allows certain highly compensated employees the option to defer specified amounts of their annual compensation on a pre-tax basis and also allows Harvard Pilgrim, at its discretion, the option to provide deferred compensation to key employees. A participant in the Plan is notified if a voluntary contribution is made by Harvard Pilgrim to that participant's account. In addition, the participant's account is credited to reflect investment returns based on measuring investments selected by either the participant or the Plan administrator in accordance with the Plan document. The participant will receive a benefit payment from their account upon severance from employment with Harvard Pilgrim. Harvard Pilgrim has recorded a liability of \$4.6 million and \$6.3 million for the years ended December 31, 2022 and 2021, respectively, which represents its obligation for benefits payable under the Plan. However, all amounts of compensation deferred under the Plan remain the assets of Harvard Pilgrim until paid out to a participant or his or her beneficiary. Harvard Pilgrim is not required to segregate or set aside any assets to meet its obligation under the Plan.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - Not Applicable

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

- A. Harvard Pilgrim is a not-for-profit 501(c)(3) corporation with no stockholders or capital stock,
- B. Dividend Rate of Preferred Stock Not Applicable

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (Continued)

- C. Dividend Restrictions Not Applicable
- D. Ordinary Dividends Not Applicable
- E. Extraordinary dividends are limited by the General Laws of Massachusetts, Chapter 176G, Section 28(q) which prohibits extraordinary dividend distribution until the Massachusetts Commissioner of Insurance ("Commissioner") approves the payment or the Commissioner has not disapproved the payment within 30 days of receiving notice of the declaration.
- F. Surplus Restrictions Not Applicable
- G. Surplus Advances Not Applicable
- H. Stock Held for Special Purposes None
- I. Changes in Special Surplus Funds None
- J. Unassigned Funds (Surplus)

The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses were as follows as of December 31, 2022.

Unrealized gains \$7233649

- K. Company-Issued Surplus Debentures or Similar Obligations Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years Not Applicable

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments
 - (1) Commitments or contingent commitment(s) to an SCA entity, joint venture, partnership, or limited liability company Not Applicable
 - (2) Nature and circumstances of guarantee Not Applicable
 - (3) Aggregate compilation of guarantee obligations Not Applicable
- B. Assessments Not Applicable
- C. Gain Contingencies Not Applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits Not Applicable
- E. Joint and Several Liabilities Not Applicable
- F. All Other Contingencies

HPHC is involved in various legal proceedings in the ordinary course of business. In the opinion of management, there are no legal proceedings pending against or involving HPIC whose outcome is likely to have a material adverse effect on the financial position or results of operations of HPHC.

15. Leases

- A. Lessee Operating Lease
 - (1) Leasing arrangements

Harvard Pilgrim has entered into several long-term noncancelable operating leases for buildings and equipment. The terms of the leases vary through the year 2027 with various renewal options. Total rent expense on all leases was \$3.5 million and \$6.7 million in 2022 and 2021, respectively.

- (2) For leases having initial or remaining noncancelable lease terms in excess of one year
 - (a) Minimum aggregate rental commitments at year end

	Year Ending December 31	Operating Leases
1.	2023	\$ 1,872,061
2.	2024	1,575,298
3.	2025	1,579,205
4.	2026	1,583,209
5.	2027	1,587,314
6.	Thereafter	9,593,789
7.	Total (sum of 1 through 6)	\$ 17,790,876

- (b) Sublease minimum rentals to be received Not Applicable
- (3) For sale-leaseback transactions Not Applicable
- B. Lessor Leases Not Applicable
- 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk Not Applicable
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities Not Applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Harvard Pilgrim administers employee health benefits for certain employer groups as an Administrative Services Only ("ASO") wherein it performs eligibility management, medical management, claims processing, and disbursement activities in return for administrative fees. The employer assumes utilization risk for these arrangements.

The loss from operations for ASO uninsured plans and the uninsured portion of partially insured plans during 2022 were as follows:

The gain (loss) from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans were as follows during 2022:

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a.	Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$(37,653,479)	\$	\$(37,653,479).
b.	Total net other income or expenses (including interest paid to or received from plans)			
C.	Net gain or (loss) from operations (a+b)	\$ (37,653,479)	\$	\$ (37,653,479)
d.	Total claim payment volume	1,130,510,957		1,130,510,957

- B. ASC Plans Not Applicable
- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract Not Applicable

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - Not Applicable

20. Fair Value Measurements

- A. Fair Value Measurement
 - (1) Fair value measurements at reporting date

Harvard Pilgrim's financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on a hierarchy defined by SSAP No. 100R, Fair Value Measurements.

	Description for each class of asset or liability	Leve	1	Level 2	Level 3	Net Asset Value (NAV)	Total
a.	Assets at fair value						
	COMMON STOCK: INDUSTRIAL & MISC.	\$ 2,2	208,400	\$. \$	\$	\$ 2,208,400
	COMMON STOCK: MUTUAL FUNDS	153,8	317,301				 153,817,301
	Total assets at fair value/NAV	\$ 156,0	25,701	\$	\$	\$	\$ 156,025,701
b.	Liabilities at fair value						
	Total liabilities at fair value	\$		\$	\$	\$	\$

- (2) Fair value measurements in Level 3 of the fair value hierarchy Not Applicable
- (3) The policy on the timing of recognizing transfers in and out of Level 3: Transfers in and out of Level 3 securities are recognized at the end of the reporting period.
- (4) For fair value measurements categorized within Level 2 and Level 3 of the fair value hierarchy, the valuation technique(s) and the inputs used in the fair value measurement: Fair value measurements of securities within the Level 2 and Level 3 hierarchy are determined using the NAIC approved independent third party pricing vendor at December 31, 2022. FHLB Class B stock is valued based on the par value of the stock.
- (5) Derivatives Not Applicable
- B. Other Fair Value Disclosures Not Applicable
- C. Fair Values for All Financial Instruments by Level 1, 2 and 3 $\,$

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
BONDS	\$ 207,338,694	\$ 219,980,832	\$	\$ 207,338,694	\$	\$	\$
COMMON STOCK	156,025,701	156,028,701	156,025,701				
CASH EQUIVALENTS	22.771.800	22.771.800	22.771.800				

- D. Not Practicable to Estimate Fair Value Not Applicable
- E. Nature and Risk of Investments Reported at NAV Not Applicable

21. Other Items

- A. Unusual or Infrequent Items None
- B. Troubled Debt Restructuring Not Applicable
- C. Other Disclosures

Long-Term Service Contract with NTT DATA

Harvard Pilgrim has a long-term services agreement (the "Agreement") with NTT DATA International, L.L.C. ("NTT DATA") following the assignment of the services agreement from Dell Inc. to NTT Data effective November 2, 2016. Under the Agreement, NTT DATA provides information technology operations, development and claims related processing services under the direction of Harvard Pilgrim staff. Services include operational services for technology and claims operations and business project services. The Agreement calls for an annual minimum commitment of \$60 million, and is subject to adjustment for changes in service levels, cost management by Harvard Pilgrim and performance incentives for NTT. The Agreement runs through July 31,2023.

21. Other Items (Continued)

- D. Business Interruption Insurance Recoveries Not Applicable
- E. State Transferable and Non-Transferable Tax Credits Not Applicable
- F. Subprime-Mortgage-Related Risk Exposure
 - (1) The Company's subprime exposure comes from its holdings in asset backed securities. On a quarterly basis, these holdings are reviewed with the Company's investment manager to determine the rationale for continuing to hold these securities and to determine if impairment has occurred. Some of the factors considered include asset quality, credit related issues, consistency of cash flow and expected recovery of principal.
 - (2) Direct exposure through investments in subprime mortgage loans Not Applicable
 - (3) Direct exposure through other investments

		Actual Cost	Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Other-Than- Temporary Impairment Losses Recognized
a.	Residential mortgage-backed securities	\$ 124,776,121	\$ 124,482,676	\$ 117,801,743	\$
b.	Commercial mortgage-backed securities	29,692,983	29,544,791	27,046,986	
C.	Collateralized debt obligations				
d.	Structured securities.	4,045,743	4,167,413	4,035,752	
e.	Equity investment in SCAs				
f.	Other assets.				
g.	Total (a+b+c+d+e+f)	\$ 158,514,847	\$ 158,194,880	\$ 148,884,482	\$

- (4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage Not Applicable
- Retained Assets Not Applicable
- H. Insurance-Linked Securities (ILS) 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

Harvard Pilgrim has evaluated events and transactions subsequent to December 31, 2022, through March 1, 2023, the date the financial statements are available for issuance and has determined there were no material events or transactions which require adjustment to, or disclosure in, the financial statements

23. Reinsurance

Effective January 1, 2019, Harvard Pilgrim began participating in the Maine Guaranteed Access Reinsurance Association, which provides reinsurance for a portion of the Company's Maine high-risk individual health business.

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

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

Yes () No (X)

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

Yes () No (X)

Section 2 - Ceded Reinsurance Report - Part A

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

Yes () No (X)

(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)

23. Reinsurance (Continued)

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

Yes () No (X)

- B. Uncollectible Reinsurance Not Applicable
- C. Commutation of Reinsurance Reflected in Income and Expenses Not Applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not Applicable
- E. Reinsurance Credit Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

The Company estimates accrued retrospective premium adjustments in accordance with SSAP No. 66. See Note 1.

B. Method Used to Record

The Company records accrued retrospective premium as an adjustment to earned premium,

C. Amount and Percent of Net Retrospective Premiums

The amount of net premiums written by the Company at December 31, 2022 that are subject to retrospective rating features was \$1,822.2 million, which represented 100% of the total net premiums written.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

	(1)	(2)	(3)	(4)	(5)
	Individual	Small Group Employer	Large Group Employer	•	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ 2,913,586	\$ 14,691,697	\$	\$	\$ 17,605,283
(2) Medical loss ratio rebates paid	14,599,558	11,916,971			26,516,529
(3) Medical loss ratio rebates unpaid		8,952,618			8,952,618
(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	\$ 8,952,618
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$	\$(8,952,618)	\$	\$	\$(8,952,618)
(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					
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$

- E. Risk-Sharing Provisions of the Affordable Care Act (ACA)
 - (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? YES

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year

		Amount
a.	Permanent ACA Risk Adjustment Program	
	Assets	
	1. Premium adjustments receivable due to the ACA risk adjustment (including high-risk pool payments)	\$ 25,485,460
	Liabilities	
	Risk adjustment user fees payable for ACA risk adjustment	\$ 198,432
	3. Premium adjustments payable due to ACA risk adjustment (including high-risk pool premium)	7,103,090
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment	\$(14,225,511)
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	129,465
b.	Transitional ACA Reinsurance Program	
	Assets	
	Amounts recoverable for claims paid due to ACA reinsurance	\$
	2. Amounts recoverable for claims unpaid due to ACA reinsurance (contra liability)	
	3. Amounts receivable relating to uninsured plans for contributions for ACA reinsurance.	
	Liabilities	
	4. Liabilities for contributions payable due to ACA reinsurance – not reported as ceded premium	
	5. Ceded reinsurance premiums payable due to ACA reinsurance	
	6. Liabilities for amounts held under uninsured plans contributions for ACA reinsurance	
	Operations (Revenue & Expense)	
	7. Ceded reinsurance premiums due to ACA reinsurance	\$
	8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments	
	ACA reinsurance contributions - not reported as ceded premium	
C.	Temporary ACA Risk Corridors Program	
	Assets	
	Accrued retrospective premium due to ACA risk corridors liabilities	\$
	2. Reserve for rate credits or policy experience rating refunds due to ACA risk corridors	
	Operations (Revenue & Expense)	
	3. Effect of ACA risk corridors on net premium income (paid/received)	\$
	4. Effect of ACA risk corridors on change in reserves for rate credits.	

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(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

						Diffe	rences	A	Adjustments			Unsettled Balances as of the Reporting Date	
		on Business	ng the Prior Year Written Before the Prior Year	Current Yea Written Befor	Paid as of the r on Business e Dec 31 of the r Year	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												
	Premium adjustments receivable (including high risk pool payments)	\$ 35,896,373	. \$	\$ 28,130,523	\$	\$ 7,765,850	\$	\$(7,653,069)	. \$	А	\$ 112,781	\$	
	Premium adjustments (payable) (including high risk pool premium)		7,203,269		3,594,279		3,608,990		3,423,338	В		7,032,328	
	Subtotal ACA Permanent Risk Adjustment Program	\$ 35,896,373	\$ 7,203,269	\$ 28,130,523	\$ 3,594,279	\$ 7,765,850	\$ 3,608,990	\$(7,653,069)	\$ 3,423,338		\$ 112,781	\$ 7,032,328	
b.	Transitional ACA Reinsurance Program												
	Amounts recoverable for claims paid	\$. \$	\$	\$	\$	\$	\$	\$	С	\$	\$	
	Amounts recoverable for claims unpaid (contra liability)									D			
	Amounts receivable relating to uninsured plans									E			
	Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium									F			
	Ceded reinsurance premiums payable									G			
	Liability for amounts held under uninsured plans									Н			
	7. Subtotal ACA Transitional Reinsurance Program		\$	\$	\$	\$	\$	\$	\$		\$	\$	
C.	Temporary ACA Risk Corridors Program	5											
	Accrued retrospective premium	\$. \$	\$	\$	\$	\$	\$	\$	1	\$	\$	
	Reserve for rate credits or policy experience rating refunds									J			
	Subtotal ACA Risk Corridors Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$	
d.	Total for ACA risk sharing provisions	\$ 35,896,373	\$ 7,203,269	\$ 28,130,523	\$ 3,594,279	\$ 7,765,850	\$ 3,608,990	\$ (7,653,069)	\$ 3,423,338		\$ 112,781	\$ 7,032,328	
_													

Explanations of Adjustments

- A: The premium adjustments payable under the permanent ACA Risk Adjustment program represent a change in previously estimated amounts to reflect the final settlement notification for the 2021 benefit year.

 B: The premium adjustments payable under the permanent ACA Risk Adjustment program represent a change in previously estimated amounts to reflect the final settlement notification for the 2019, 2020, and 2021 benefit years.

- C: None
 D: None
 E: None
 F: None
 G: None
- H: None None
- None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(4) Roll-forward of risk corridors asset and liability balances by program benefit year

					Differ	rences		Adjustments			nces as of the ng Date
	Accrued Dur Year on Busi Before Dec 3 Ye	ness Written 1 of the Prior	Received or F Current Year Written Before Prior	on Business Dec 31 of the	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)		(9)	(10)
Risk Corridors Program Year	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	Α	\$	\$
Reserve for rate credits or policy experience rating refunds									В		
b. 2015											
Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	С	\$	\$
Reserve for rate credits or policy experience rating refunds									D		
c. 2016											
Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	Е	\$	\$
Reserve for rate credits or policy experience rating refunds									F		
d. Total for Risk Corridors	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$

Explanations of Adjustments

A: None

B: None

C: None D: None

E: THE PREMIUM ADJUSTMENTS UNDER THE ACA RISK CORRIDOR PROGRAM REPRESENT CMS RECEIPTS THAT WERE PREVIOSULY NOT RECOGNIZED DUE TO THE UNCERTAINTY OF COLLECTIBILITY. REFER TO 24E(5).

F: None

(5) ACA risk corridors receivable as of reporting date

	(1)	(2)	(3)	(4)	(5)	(6)
Risk Corridors Program Year	Estimated Amount to be Filed or Final Amount Filed with CMS	Amounts for	Amounts Received from CMS	Asset Balance Gross of Nonadmissions (1-2-3)	Nonadmitted Amount	Net Admitted Asset (4-5)
a. 2014	\$	\$	\$	\$	\$	\$
b. 2015						
c. 2016	9,883,052		9,883,052			–
d. Total (a+b+c)	\$ 9,883,052	\$	\$ 9,883,052	\$ -	\$	\$ -

On April 27, 2020, the U.S. Supreme Court issued its decision in the case of Maine Community Health Options vs. the United States and held that the Federal Government was obligated to make payments on amounts due to insurers under the ACA Risk Corridors Program. The Company received a court judgment on its case as of July 7, 2020 and received \$9,883,052 from CMS in August 2020.

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

Reserves, net of healthcare receivables, as of December 31, 2021 were \$149.3 million. As of December 31, 2022, \$125.0 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years, net of health care receivables, are \$ 3.3 million. Therefore, there has been a \$21.0 million favorable prior-year development since December 31, 2021. The favorable development is generally a result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Harvard Pilgrim does not have any retrospectively rated policies.

- Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses Not
- 26. Intercompany Pooling Arrangements Not Applicable
- 27. Structured Settlements Not Applicable

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2022	\$	\$	\$	\$	\$
09/30/2022		36,884,997	27,013,287		
06/30/2022	36,377,986 .	36,377,986	26,912,607	(292,884)	
03/31/2022	35,697,331 .	35,697,331	26,978,288	(979,115)	554,585
12/31/2021	32,348,207 .	32,348,207	29,093,830	1,742,263	6,265,385
09/30/2021	31,717,256 .	31,717,256	29,268,731	495,221	6,152,934
06/30/2021		33,755,178	28,546,262	305,927	6,583,353
03/31/2021	31,338,375 .	31,338,375	26,643,068	435,060	6,390,314
12/31/2020	22,236,394 .	22,236,394	21,075,361	2,088,284	2,552,036
09/30/2020	23,813,947 .	23,752,238	21,374,707	1,430,247	3,906,655
06/30/2020	26,622,902 .	26,622,902	22,808,051	1,032,553	7,718,009
03/31/2020	27,839,469	27,839,469	24,766,307	1,684,011	4,755,501

B. Risk-Sharing Receivables

			Risk Sharing	g Receivable		Actual Risk Sharing Amounts Received					
Calendar Year	Evaluation Period Year Ending	As Estimated in the Prior Year	As Estimated in the Current Year	Billed	Not Yet Billed	In Year Billed	First Year Subsequent	Second Year Subsequent	All Other		
2022	2022	\$	\$	\$	\$	\$	\$	\$	\$		
	2023	1,427,565									
2021	2021	400,000	41,186								
	2020										
2020	2020	1,554,400	1,463,679	1,463,679		1,533,353					
	2021		400 000								

29. Participating Policies - Not Applicable

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves:

2. Date of the most recent evaluation of this liability: 12/31/2022

3. Was anticipated investment income utilized in the calculation? NO

31. Anticipated Salvage and Subrogation - Not Applicable

GENERAL

1.1.	which is an insurer?								YFS
	If yes, complete Schedule Y, Parts								
1.2.	If yes, did the reporting entity regi such regulatory official of the sta	ister and file v te of domicile	vith its domiciliary State Insura of the principal insurer in the	Holding Compa	ny Syster	n, a regis [.]	tration state	ment	
	providing disclosure substantially								
	its Model Insurance Holding Com subject to standards and disclosi								VEQ
	subject to standards and disclosi	ure requireme	into substantially similar to the	se required by s	ouch Act c	and regule	ations:	• • • • • • • • • • • • • • • • • • • •	MASSACHUSE
	State Regulating?								
	Is the reporting entity publicly trace								
	If the response to 1.4 is yes, provi								
2.1.	Has any change been made durir the reporting entity?								NO
2.2.	If yes, date of change:								
	State as of what date the latest fi								
3.2.	State the as of date that the lates								
2.2	entity. This date should be the da State as of what date the latest fi								12/31/2020
3.3.	domicile or the reporting entity. T								
	examination (balance sheet date))							06/23/2022
3.4.	By what department or department	nts?							
	MASSACHUSETTS DIVISION OF	INSURANCE							
3.5.	Have all financial statement adju								
0.6	statement filed with Departments								
3.6. 4.1.	Have all of the recommendations During the period covered by this		•						N/A
7.1.	combination thereof under comm	non control (o	ther than salaried employees	of the reporting of	entity) rec	ceive cred	it or commis	sions for or	
	control a substantial part (more t								
	4.11. sales of new business?								
4.2.	4.12. renewals? During the period covered by this								NU
7.2.	affiliate, receive credit or commis-								
	on direct premiums) of:								
	4.21. sales of new business?								
5 1	4.22. renewals?								
0.1.	If yes, complete and file the merg			period covered s	o, 11110 ott	2011101101			
5.2.	If yes, provide the name of the en			cile (use two let	ter state a	abbreviati	on) for any ϵ	entity that	
	has ceased to exist as a result of	the merger or	consolidation.					7	
			1	2			3		
		Na	me of Entity	NAIC Compa	any Code	State o	of Domicile		
6.1.	Has the reporting entity had any 0								
6.0	suspended or revoked by any gov	ernmental en	tity during the reporting period	l?					NO
6.2.	If yes, give full information								
					c				
7.1. 7.2.	Does any foreign (non-United Sta If yes,	ites) person o	r entity directly or indirectly co	ntrol 10% or mo	re of the r	reporting	entity?		NO
7.2.	7.21. State the percentage of for	eian control							%
	7.22. State the nationality(s) of t	he foreign pe	rson(s) or entity(s); or if the en	tity is a mutual o	or recipro	cal, the na	ationality of	its manager	
	or attorney-in-fact and iden	tify the type o	of entity(s) (e.g., individual, cor	poration, govern	nment, ma	anager or	attorney-in-f	act).	
			1		:	2			
			Nationality		Tyne o	f Entity			
			·····			-			
8.1.	Is the company a subsidiary of a	depository in	stitution holding company (DI	HC) or a DIHC its	self, regul	lated by tl	he Federal R	eserve	
	Board?								
	If response to 8.1 is yes, please ic								
8.3. 8.4	Is the company affiliated with one If response to 8.3 is yes, please p								INU
J.⊣.	federal financial regulatory service	es agency [i.e	e. the Federal Reserve Board (F	RB), the Office of	of the Cor	nptroller	of the Currer	icy (OCC),	
	the Federal Deposit Insurance Co	rporation (FD	IC) and the Securities Exchang	je Commission ((SEC)] an	d identify	the affiliate	's primary	
	federal regulator.					. 1		_	
	1		2		3		4	5	6
	Affiliate Name		Location (City, S	ate)	FR	В	OCC	FDIC	SEC

	Governors of Federal Reserve If response to 8.5 is no, is the	itory institution holding company with significant System or a subsidiary of the depository institution reporting entity a company or subsidiary of a con	on holding company? npany that has otherwise been made subject	to the
9.	What is the name and addres	al rule?s of the independent certified public accountant o ARENDON STREET BOSTON, MA 02116		
10.1.	Has the insurer been granted accountant requirements as a	any exemptions to the prohibited non-audit servic Illowed in Section 7H of the Annual Financial Rep or regulation?	orting Model Regulation (Model Audit Rule),	or
10.2.		provide information related to this exemption:		NO
	allowed for in Section 18A of	any exemptions related to the other requirements the Model Regulation, or substantially similar sta provide information related to this exemption:		
				VF0
	If the response to 10.5 is no o	lished an Audit Committee in compliance with the rn/a, please explain.	e domiciliary state insurance laws?	YES
11.	consulting firm) of the individ	d affiliation (officer/employee of the reporting ent ual providing the statement of actuarial opinion/o PRESIDENT, CHIEF ACTUARYPOINT32HEALTH, IN	certification?	
12.1.	Does the reporting entity owr 12.11 Name of real estate ho	any securities of a real estate holding company lding company	or otherwise hold real estate indirectly?	NO
		olved		
12.2.	If yes, provide explanation	carrying value		\$
	What changes have been ma Does this statement contain	CHES OF ALIEN REPORTING ENTITIES ONLY: de during the year in the United States manager of all business transacted for the reporting entity thr	ough its United States Branch on risks where	ver
	Have there been any changes	s made to any of the trust indentures during the year the domiciliary or entry state approved the chang	ear?	
	Are the senior officers (principerforming similar functions	pal executive officer, principal financial officer, principal financial officer, principal financial officer, principal financial of a code of ethics iduct, including the ethical handling of actual or a	ncipal accounting officer or controller, or pers s, which includes the following standards?	ons YES
	c. Compliance with applie	ely and understandable disclosure in the periodic recable governmental laws, rules and regulations; porting of violations to an appropriate person or p		tity;
14.11	e. Accountability for adhe. If the response to 14.1 is no,	erence to the code.		
14.2.	Has the code of ethics for se	nior managers been amended?		NO
14.21	. If the response to 14.2 is yes	provide information related to amendment(s).		
		ode of ethics been waived for any of the specified provide the nature of any waiver(s).	officers?	NO
15.1.		eficiary of a Letter of Credit that is unrelated to re		
15.2.	If the response to 15.1 is yes	indicate the American Bankers Association (ABA of Credit and describe the circumstances in whic) Routing Number and the name of the issuir	
	1	2	3	4
	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
		BOARD OF DIRE	CTORS	>
16.		nvestments of the reporting entity passed upon ei	ther by the board of directors or a subordina	re committee
17.	Does the reporting entity keep thereof?	a complete permanent record of the proceedings	of its board of directors and all subordinate	committeesYES
18.	on the part of any of its office	tablished procedure for disclosure to its board of rs, directors, trustees or responsible employees th	at is in conflict or is likely to conflict with the	official
	added of oddin person:			I L3

FINANCIAL

19.	Accounting Principles)?	, , , ,	•	NO
20.1.	Total amount loaned during the year (inclusive of Separate	e Accounts, exclusive of policy loans):		
	20.11 To directors or other officers			
	20.12 To stockholders not officers			
20.2	20.13 Trustees, supreme or grand (Fraternal only) Total amount of loans outstanding at the end of year (incl			Ş
20.2.	20.21 To directors or other officers	usive of Separate Accounts, exclusive of policy loc	ino).	\$
	20.22 To stockholders not officers			\$
	20.23 Trustees, supreme or grand (Fraternal only)			\$
21.1.	Were any assets reported in this statement subject to a co			
21.2	obligation being reported in the statement?			NO
21.2.	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			VEO
22.2	guaranty association assessments? If answer is yes:			YES
22.2.	22.21 Amount paid as losses or risk adjustment			\$ 12.057.777
	22.22 Amount paid as expenses			
	22.23 Other amounts paid			
	Does the reporting entity report any amounts due from par			
	If yes, indicate any amounts receivable from parent includ			
24.1.	Does the insurer utilize third parties to pay agent commiss within 90 days?			
24.2.	If the response to 24.1 is yes, identify the third-party that p			
		1	2	
		·		
			Is the Third-Party Agent a Related	
	Name	of Third-Party	Party (Yes/No)	
		INVESTMENT	<u> </u>	
05.01	Managellaka akada kanda andakan asawikin asamad D		a anala ba a analo aira	
25.01.	Were all the stocks, bonds and other securities owned Docontrol, in the actual possession of the reporting entity of			YES
25.02.		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		
25.03.	For securities lending programs, provide a description of	the program including value for collateral and am	nount of loaned securities.	
	and whether collateral is carried on or off-balance sheet.			
	provided)			
25.04.		ort amount of collateral for conforming programs	as outlined in the Risk-	^
25.05.	Based Capital InstructionsFor the reporting entity's securities lending program, reporting			
25.05.				Ş
20.00.	outset of the contract?			N/A
25.07.	, ,			N/A
25.08.				N 1/A
25.09.	conduct securities lending? For the reporting entity's securities lending program, stat			
25.09.	25.091. Total fair value of reinvested collateral assets r			
	25.092. Total book adjusted/carrying value of reinvested			
	25.093. Total payable for securities lending reported on	the liability page		
26.1.	Were any of the stocks, bonds or other assets of the repo	orting entity owned at December 31 of the current	year not exclusively under	
	the control of the reporting entity or has the reporting en currently in force? (Exclude securities subject to Interrog			VEQ
26.2.	If yes, state the amount thereof at December 31 of the co			1 L3
				\$
	26.22. Subject to reverse repurchase agreements			\$
		S		
		excluding FHLB Capital Stock		
		excluding FHLB Capital Stock		
	•			
	26.29. On deposit with other regulatory bodies			\$
		ged to an FHLB		
		s backing funding agreements		
26.2				Ş
26.3.	For category (26.26) provide the following:	2		
	1		3	
	Nature of Restriction	Description	Amount	

		ave any hedging transactions re e description of the hedging pro					NO
		e description of the nedging pro					N/A
LINES 27.3 through 27.5	FOR LII	FE/FRATERNAL REPORTING EN	ITITIES ONLY				
		tilize derivatives to hedge variab		rantees subject to fluctuati	ons as a result of int	terest rate	
-							
		ES, does the reporting entity util provision of SSAP No. 108					
		practice					
		idance					
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: • 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 cert 	fication	n has been obtained which indic	cates that the h	nedging strategy is incorpor	rated within the estab		
		ides the impact of the hedging					
		tification has been obtained whi ategy within VM-21 and that the					
		al day-to-day risk mitigation effo		arrouging changy to are t	.ougg ou alogy som	.g acca 2,c	
28.1. Were any preferred	stocks	or bonds owned as of December	er 31 of the cu	rrent year mandatorily conv	vertible into equity, or	r, at the option of	
		equity?					
		ereof at December 31 of the cu lle E- Part 3 - Special Deposits, r					
		afety deposit boxes, were all sto					
pursuant to a custo	dial ag	reement with a qualified bank o	or trust compai	ny in accordance with Secti	on 1, III - General Exa	amination	
		cing of Critical Functions, Custo					VES
		oly with the requirements of the					1 LO
		1			2	-	
	Non	on of Custodian(a)			Custodian's Addre		
BANK OF AMERICA	Name of Custodian(s) Custodian's Address BANK OF AMERICA. 135 S. LASALLE STREET SUITE 1840, CHICAGO IL 60603						
		not comply with the requireme		1			
location and a com			ints of the MAR	o Filiancial Conultion Exam	ппеть папироок, рго	vide the name,	
1		2			3		
Name(s)	Name(s) Location(s) Complete Explanation(s)						
Name(s)		Location(s)		Compl	ete Explanation(s)		
	y chan	Location(s) ges, including name changes, ir	n the custodiar				NO
29.03. Have there been ar	•	ges, including name changes, ir					NO
29.03. Have there been ar	•					4	NO
29.03. Have there been ar 29.04. If yes, give full and	•	ges, including name changes, ir ete information relating thereto: 2		n(s) identified in 29.01 durin		4	NO
29.03. Have there been ar	•	ges, including name changes, ir		n(s) identified in 29.01 durir			NO
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian	compl	ges, including name changes, ir ete information relating thereto: 2 New Custodian		n(s) identified in 29.01 durin 3 Date of Change	ng the current year?	4 Reason	
29.03. Have there been an 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of	comple	ges, including name changes, ir ete information relating thereto: 2 New Custodian - Identify all investment adviso s on behalf of the reporting enti	rs, investment	n(s) identified in 29.01 durin 3 Date of Change managers, broker/dealers,	ng the current year?	4 Reason s that have the autho	rity to
29.03. Have there been an 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of	comple	ges, including name changes, ir ete information relating thereto: 2 New Custodian - Identify all investment adviso	rs, investment	n(s) identified in 29.01 durin 3 Date of Change managers, broker/dealers,	ng the current year?	4 Reason s that have the author e reporting entity, no	rity to
29.03. Have there been an 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of	comple	ges, including name changes, ir ete information relating thereto: 2 New Custodian - Identify all investment adviso s on behalf of the reporting enti- investment accounts"; "hand	rs, investment ity. For assets le securities"]	n(s) identified in 29.01 durin 3 Date of Change managers, broker/dealers,	ng the current year?	4 Reason s that have the author e reporting entity, no	rity to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment d ["that have acces	ement ecision s to the	ges, including name changes, ir ete information relating thereto: 2 New Custodian - Identify all investment adviso s on behalf of the reporting ention investment accounts"; "hand Name of Firm of	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	ng the current year? including individuals by employees of the	4 Reason s that have the author e reporting entity, no	rity to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment d ["that have acces	ement ecision s to the	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting enterinvestment accounts"; "handle investment accounts"; "handle Name of Firm on NT AMERICAS, INC.	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	ing the current year?	4 Reason s that have the author e reporting entity, no	rity to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have access DWS INVESTMENT MANAFIDELITY MANAGEMENT	ement ecision s to the	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting entimes investment accounts"; "hand Name of Firm of NT AMERICAS, INC	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals	Reason s that have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have access DWS INVESTMENT MAN, FIDELITY MANAGEMENT THE VANGUARD GROUP, I	ement ecision s to the	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting enterinvestment accounts"; "handle investment accounts"; "handle Name of Firm on NT AMERICAS, INC.	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals	Reason s that have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of "that have acces DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL	ement ecisions to the	ges, including name changes, in ete information relating thereto: 2 New Custodian I Identify all investment adviso is on behalf of the reporting entition investment accounts"; "handled investment accounts	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been an 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of "that have access DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT C	ement ecisions to the AGEME & RESINCINVES' ESTATOMPAN	ges, including name changes, in ete information relating thereto: 2 New Custodian I Identify all investment adviso is on behalf of the reporting entition investment accounts"; "handle investme	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	rity to te as such.
29.03. Have there been an 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of "that have acces DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CO. HLM MANAGEMENT CO.	ement ecisions to the AGEME & RESI NCINVES' ESTATOMPAN LLC	ges, including name changes, in ete information relating thereto: 2 New Custodian Identify all investment adviso is on behalf of the reporting entitinvestment accounts"; "handle investment acc	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of "that have acces DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CHLM MANAGEMENT CO., BARINGS, LLC	ement ecisions to the	ges, including name changes, in ete information relating thereto: 2 New Custodian I Identify all investment adviso is on behalf of the reporting entition investment accounts"; "handle investme	rs, investment ity. For assets le securities"] or Individual	3 Date of Change managers, broker/dealers, that are managed internally	including individuals by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have acces DWS INVESTMENT MAN, FIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT C HLM MANAGEMENT CO., BARINGS, LLC. LEERINK PARTNERS LLC. PINEBRIDGE GLOBAL CRI	ement ecisions to the AGEME & RESI NCINVES' ESTATOMPAN LLC	ges, including name changes, in ete information relating thereto: 2 New Custodian Identify all investment adviso is on behalf of the reporting entitinvestment accounts"; "handle investment acc	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals to by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have acces DWS INVESTMENT MANA FIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT C HLM MANAGEMENT C HLM MANAGEMENT CO., BARINGS, LLC LEERINK PARTNERS LLC. PINEBRIDGE GLOBAL CRI JPM INFRASTRUCTURE I	ement ecisions to the AGEME & RESI NCINVES: ESTATOMPAN LLC	ges, including name changes, in ete information relating thereto: 2 New Custodian Identify all investment adviso is on behalf of the reporting entitinvestment accounts"; "handle investment acc	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have acces DWS INVESTMENT MAN, FIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT C HLM MANAGEMENT CO., BARINGS, LLC. LEERINK PARTNERS LLC. PINEBRIDGE GLOBAL CRI JPM INFRASTRUCTURE I GARCIA HAMILITON & AS	ement ecisions to the AGEME & RESI NCINVEST ESTAT OMPAN LLCEDIT FUNVEST SOCIATION COMPANIES TO THE NEST SOCIATION COM	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso is on behalf of the reporting entitinvestment accounts"; "handle investment acc	rs, investment ity. For assets le securities"] or Individual	Date of Change managers, broker/dealers, that are managed internally	including individuals to by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have acces DWS INVESTMENT MAN, FIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT C HLM MANAGEMENT CO., BARINGS, LLC. LEERINK PARTNERS LLC. PINEBRIDGE GLOBAL CRI JPM INFRASTRUCTURE I GARCIA HAMILITON & AS BLACK ROCK	ement ecisions to the AGEME & RESI NCINVEST ESTAT OMPAN LLCEDIT FUNVEST SOCIA	ges, including name changes, in ete information relating thereto: 2 New Custodian Identify all investment adviso is on behalf of the reporting entitinvestment accounts"; "handle investment acc	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals to by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have acces DWS INVESTMENT MANA FIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CO., BARINGS, LLC	ement ecisions to the RESI NCINVEST ESTAT OMPAN LLC	ges, including name changes, ir ete information relating thereto: 2 New Custodian - Identify all investment adviso is on behalf of the reporting entice investment accounts"; "handle investment accounts accou	rs, investment ity. For assets le securities"] or Individual	3 Date of Change managers, broker/dealers, that are managed internally	including individuals by employees of the	A Reason S that have the author e reporting entity, no 2 Affiliation U	ority to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have access DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CO., BARINGS, LLC LEERINK PARTNERS LLC. PINEBRIDGE GLOBAL CRI JPM INFRASTRUCTURE I GARCIA HAMILITON & AS BLACK ROCK TCW LOOMIS SAYLES PINEBRIDGE INVESTMEN 29.0597. For those firms	ement ecisions to the AGEME & RESI NCINVES' ESTATOMPAN LLC	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting entiminestment accounts"; "hand Name of Firm of the American State of	rs, investment ity. For assets le securities"] or Individual	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally	including individuals by by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U U U U U U U U U U U U U U U U U U U	nrity to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have access DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CO., BARINGS, LLC	ement ecisions to the AGEME & RESI NCINVES' ESTAT OMPAN LLCTS LLC.//individin a "U")	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting entiminestment accounts"; "hand Name of Firm of the American State of	rs, investment ity. For assets le securities"] or Individual tion 29.05, do reporting entit	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally any firms/individuals unaffy's invested assets?	including individuals by by employees of the	A Reason Sthat have the author e reporting entity, no 2 Affiliation U U U U U U U U U U U U U U U U U U U	nrity to te as such.
29.03. Have there been ar 29.04. If yes, give full and 1 Old Custodian 29.05. Investment manag make investment of ["that have access DWS INVESTMENT MANAFIDELITY MANAGEMENT THE VANGUARD GROUP, I PRINCIPAL REAL ESTATE MORGAN STANLEY REAL AUDAX MANAGEMENT CO., BARINGS, LLC	ement ecisions to the AGEME & RESI NCINVES' ESTATOMPAN LLCTS LLC.//individuals u "U") duals u	ges, including name changes, ir ete information relating thereto: 2 New Custodian Identify all investment adviso s on behalf of the reporting entiminestment accounts"; "hand Name of Firm of the American State of	rs, investment ity. For assets le securities"] or Individual tition 29.05, do reporting entity (i.e., design	n(s) identified in 29.01 during 3 Date of Change managers, broker/dealers, that are managed internally any firms/individuals unaffy's invested assets?	including individuals by by employees of the filiated with the reported table for Question	A Reason Sthat have the author e reporting entity, no 2 Affiliation U U U U U U U U U U U U U U U U U U U	nrity to te as such.

table below.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
,	DWS INVESTMENT MANAGEMENT AMERICAS,		SECURITIES AND EXCHANGE	DS
108281	FIDELITY MANAGEMENT & RESEARCH COMPANY.	.Z26LT2N3NO13KK7Y9Z32	AND EXCHANGE COMMISSION SECURITIES AND	DS
105958	THE VANGUARD GROUP, INC	22FEKWGAFY38KJJVTQ65	EXCHANGE COMMISSION SECURITIES	DS
106006	BARINGS LLC	ANDKRHQKPRRG4Q2KLR05	AND EXCHANGE	DS
159458	AUDAX MANAGEMENT COMPANY	254900WGBU9HZY6UFA23	SECURITIES	DS
127488	MORGAN STANLEY REAL ESTATE ADVISOR, INC	.549300N35MH5UNDKUZ51	AND EXCHANGE COMMISSION SECURITIES	DS
	PINEBRIDGE GLOBAL OPPORTUNISTIC DM CREDIT GP LLC	.5493007FM4Z08UJHBK70	AND EXCHANGE	DS
107038	JPM INFRASTRUCTURE INVESTMENT FUND	.549300W78QHV4XMM6K69	EXCHANGE	DS
6775732	GARCIA HAMILTON & ASSOCIATES, INC	.2549004MW2QAB6OS4P40		DS
107105	BLACKROCK	WMEVRQ7LCLDEFWERGI49		DS
7603253	THE TWC FUNDS	549300AS8HVWA70XQZ68		DS
1709305	PINEBRIDGE INVESTMENTS LLC	CLDVY8VY4GNT81Q4VM57		DS
	FLARE CAPITAL PARTNERS		SECURITIES AND EXCHANGE COMMISSION	DS

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....

30.2. If yes, complete the following schedule:

co.z y co, comprete and remarking concedence		
1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
921943882	VANGUARD DEV MKT INST	\$
922040100	VANGUARD INSTL INDX INST	50,510,219
922908876	VANGUARD S-C ID INST	7,039,321
543488795	LOOMIS SAYLES STRATEGIS INCOME FUND	19,074,934
09260B382	BLACKROCK STRATEGIC INCOME FUND	20,361,387
922042601	VANGUARD EMERGIND MARKETS INDEX FUND	10,648,452
30.2999 TOTAL		\$

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

.s. To each matual rand listed in the table above, complete the rollowing schedule.								
1	2	3	4					
		Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the						
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Holding	Date of Valuation					
VANGUARD DEV MKT INST	NESTLE SA	\$ 622,312	12/31/2022					
VANGUARD INSTL INDX INST	APPLE INC	1,547,288	12/31/2022					
LOOMIS SAYLES STRATEGIC INCOME FUND	US ULTRA BOND CBT MAR23	1,202,486	12/31/2022					
BLACKROCKSTRATEGIC INCOME FUND	FNMA 2.5%	4,072,506	12/31/2022					
VANGUARD EMERGING MARKETS INDEX FUND	Taiwan Semiconductor Manufacturing	643,829	12/31/2022					
VANGUARD SMALL CAP INDEX FUND	Steel Dynamics Inc.	18,017	12/31/2022					

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

	1	2	3
			Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
	Statement (Admitted) Value	Fair Value	over Statement (+)
31.1. Bonds	\$ 320,442,830	\$ 339,995,313	\$19,552,483
31.2. Preferred Stocks			
31.3. Totals	\$	\$	\$19,552,483

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

HARVARD PILGRIM HEALTH CARE, INC. OBTAINS FAIR VALUES FROM THE NAIC SECURITIES VALUATION OFFICE (SVO) APPROVED PRICING AGENCY (STANDARD & POORS), AND IF NOT AVAILABLE, MARKET VALUES ARE OBTAINED FROM INDEPNDENT THIRD PARTY PRICING VENDORS.

- 32.1. Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?..
- 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?...
- 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......
- 33.2. If no, list exceptions:
- By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
 - 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.
 - Issuer or obligor is current on all contracted interest and principal payments. b.
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal. C. Has the reporting entity self-designated 5GI securities?

- By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: 35.
 - The security was purchased prior to January 1, 2018.
 - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. b.
 - The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is C. shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - The reporting entity is not permitted to share this credit rating of the PL security with the SVO. d.

Has the reporting entity self-designated PLGI securities?.

NO

.NO...

.NO.....

NO

- By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each selfdesignated FE fund:
 - The shares were purchased prior to January 1, 2019. a.
 - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. b.
 - The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO C. prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC e. CRP in its legal capacity as an NRSRO.
 - 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?...

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:

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

38.1 Does the reporting entity directly hold cryptocurrencies?......

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?......
- 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. 39.22 Immediately converted to U.S. dollars....
- 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	2	3							
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums							

OTHER

- 40.1. Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?.....
- 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	2
Name	Amount Paid
NE HEALTHCARE EXCHANGE NETWORK INC	\$

41.1. Amount of payments for legal expenses, if any?..... \$..... 1.969.780 Annual Statement for the Year 2022 of the HARVARD PILGRIM HEALTH CARE, INC.

GENERAL INTERROGATORIESPART 1 - COMMON INTERROGATORIES

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	2
Name	Amount Paid
CROWELL & MORNING LLP	\$
42.1. Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of gany?	· .
42.2. List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment experimenters before legislative bodies, officers, or departments of government during the period covered by this statement.	nditures in connection with
1	2
Name	Amount Paid
	\$

GENERAL INTERROGATORIESPART 2 - HEALTH INTERROGATORIES

1.1 1.2				Medicare Supplement Insurusiness only					
1.2				on the Medicare Suppleme					
		son for excluding	o : . op o ou	оп по тошов о времени	oa.aoo <u>_</u> po				¥
1.4	Indic	ate amount of earned pre	mium attrib	outable to Canadian and/or	Other Alien not in	ncluded in Item	(1.2) above		\$
1.5	Indic	ate total incurred claims o	on all Medic	care Supplement insurance					\$
1.6	Indiv	idual policies:							
		t current three years:							
		ears prior to most current t					• • • • • • • • • • • • • • • • • • • •	•••••	
	1.64 Total premium earned \$\$							\$	
	1.66 Number of covered lives.								
1.7		p policies:							
		t current three years:							^
		ears prior to most current					•••••		
									\$
	1.75	Total incurred claims							\$
	1.76	Number of covered lives							
2. He	alth Te	est:				T	T	ı	
						1	2		
						Current Year	Prior Year		
			2.1	Premium Numerator		\$	\$		
						1,700,964,666	1,822,202,591		
			2.2	Premium Denominator		\$ 700.064.666	\$		
			2.2	Dramium Datio (2.1/2.2)			1,822,202,591		
			2.3 2.4	Premium Ratio (2.1/2.2) Reserve Numerator		\$. 175,900,543			
			2.5	Reserve Denominator		\$. 175,900,544	\$ 215,298,961		
			2.6	Reserve Ratio (2.4/2.5)					
3.1	Has t	the reporting entity receive	ed any endo	owment or gift from contract the reporting entity permits?	cting hospitals, ph	nysicians, denti	sts, or others th	at is agreed will be	NO
3.2		s, give particulars:	iiiiiigs or t	ne reporting entity permits:					
0.2	ii yee	s, give particulars.							
4.1			-4-4: 41		:4-1-/				
4.1				e period and nature of hosp te regulatory agency?					YES
4.2	If not	t previously filed, furnish h	nerewith a c	copy(ies) of such agreemen	it(s). Do these agr	eements inclu	de additional be	enefits offered?	
5.1				einsurance?					
5.2	If no,	, explain:							
5.3	Maxi	imum retained risk (see in:	structions)						
	5.31	Comprehensive Medical							\$
6				g entity may have to protect					\$
6.	inclu	ding hold harmless provis		g entity may have to protect ersion privileges with other					
	and a	any other agreements:							
	_			. 1.00. 6					\/=c
7.1 7.2		s the reporting entity set up , give details	o its claim l	iability for provider services	s on a service date	e pasis?			YES
,	,	, 5. , 5 45,4110							

GENERAL INTERROGATORIESPART 2 - HEALTH INTERROGATORIES

8.	Provide the following information regard								
	8.1 Number of providers at start of re								
0.1	8.2 Number of providers at end of rep Does the reporting entity have business								
9.1 9.2	If yes, direct premium earned:	subject to premiur	n rate guaranti	ees?					NU
J.Z	9.21 Business with rate guarantees bet	ween 15-36 month	1S						
	9.22 Business with rate guarantees over	er 36 months						\$	
10.1									
10.2	If yes:								
	10.21 Maximum amount payable bonus								
	10.22 Amount actually paid for year bor								
	10.23 Maximum amount payable withholds								
11.1	Is the reporting entity organized as:							Ψ	0,070,701
	11.12 A Medical Group/Staff Model,								NO
	11.13 An Individual Practice Association	, ,							
	11.14 A Mixed Model (combination of a								
	Is the reporting entity subject to Statutor								
11.3	If yes, show the name of the state requir	ring such minimun	n capital and s	urplus					SSACHUSE
11 <i>4</i>	If yes, show the amount required								
	Is this amount included as part of a con								
	If the amount is calculated, show the ca		. 0.0000	equity :					
12.	Show net worth of \$1,000,000; Actual ne statement filed with the commissioner of Total premium = \$1,707,415,558; (2% of equal to the sum of 3 months uncovered Harvard Pilgrim did not report any uncopaid on a capitated basis or managed b 4% of annual hospital expenditures paid commissioner. Adjusted annual health of \$10,278,006 = Minimum Net Worth Requires service areas in which reporting entitles.	on the first \$150,000 the first \$150,000 d health care expervered expenditures by hospital payment on a managed hospital expenditures cuirement of \$74,28	0,000 of premi,000 = \$3,000,000 inditures as reported to the state of the state of the state of the state of \$64,007,694 is,700	ium and 1% of a 000) + (1% of \$1 orted on the mos t equal to the su orted on the mos it basis as report	nnual premiu ,557415,558 st recent finar m of: i) 8% of st recent finan ted on the mo	m on the premi = \$15,574,156) ncial statement annual health cial statement ist recent finance	um in excess o = \$18,574,156 filed with the c care expenditu filed with the co cial statement f	of \$150,00 3) An am commission ares exceptommission filed with	00,000; or nount oner: ot those oner; and ii) the
12.	List service areas in which reporting ent	ity is licelised to of		1					
				I					
				ervice Area					
	Do you act as a custodian for health say								
	If yes, please provide the amount of cus Do you act as an administrator for healt			-					
	If yes, please provide the balance of the								
	Are any of the captive affiliates reported								
	If the answer to 14.1 is yes, please provi		•						
	1	2	3	4	Assets S	upporting Rese	rve Credit		
					5	6	7		
		NAIC Company	Domiciliary		Letters of	Trust			
	Company Name	Code		Reserve Credit	Credit	Agreements	Other		
15.	Provide the following for individual ordin	nary life insurance			for the curren	t vear (prior to a	eingurance		
10.	assumed or ceded).	iary inc insurance	policies (0.0.	business only)	ioi tiic cuiicii	t year (prior to i	cirisarance		
	15.1 Direct Premium Written							\$	
	15.2 Total Incurred Claims							\$	
	15.3 Number of Covered Lives								
		+0	udinamı l ifa In	auranaa Inaliida			\neg		
	Torm (whathe	er full underwriting		surance Include		nn")			
		whether full underw					_		
		(with or without se			.5020, 0110111	4			
		e (with or without s		<u> </u>			7		
		rersal Life (with or							
16	Is the reporting entity licensed or charter	and registered ave	lified aligible a	or writing busins	ee in at least	two states?			VEC
16. 16.1	If no, does the reporting entity assume r								1 L3
	domicile of the reporting entity?							********	

FIVE-YEAR HISTORICAL DATA

	FIVE-YEAR HI	STURICAL	DATA			
		1	2	3	4	5
		2022	2021	2020	2019	2018
Bala	nce Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	1,103,376,076	1,204,313,484	1,187,274,125		974,431,511
2.	Total liabilities (Page 3, Line 24)					421,683,585
3.	Statutory minimum capital and surplus requirement		85,601,093	69,262,292	80,378,258	88,998,427
4.	Total capital and surplus (Page 3, Line 33)	644,795,128	710,988,491	726,876,035	638,006,918	552,747,959
Inco	me Statement (Page 4)					
5.	Total revenues (Line 8)		1,830,999,029	1,731,378,185	1,696,833,408	1,834,947,303
6.	Total medical and hospital expenses (Line 18)	1,457,941,642	1,650,283,907	1,428,222,802	1,441,365,349	1,532,132,211
7.	Claims adjustment expenses (Line 20)	62,772,920	70,181,254	63,562,461	56,060,228	50,450,916
8.	Total administrative expenses (Line 21)			210,114,940	185,108,506	202,989,240
9.	Net underwriting gain (loss) (Line 24)					47,359,450
10.	Net investment gain (loss) (Line 27)			20,933,618	17,869,914	16,592,049
11.	Total other income (Lines 28 plus 29)	(9,422,770)	(13,609,998)	(43,243,157)	(15,957,083)	(23,016,653)
12.	Net income or (loss) (Line 32)	(25,351,088)	(46,799,339)	4,438,116	13,674,406	40,934,846
Cash	r Flow (Page 6)					
13.	Net cash from operations (Line 11)	(144,891,320)	(146,261,550)	97,387,401	(9,816,256)	109,259,466
Risk	-Based Capital Analysis	,			,	
14.	Total adjusted capital	644,795,128	710,988,491	726,876,035	638,006,918	552,747,959
15.	Authorized control level risk-based capital	115,138,744	124,400,422	104,164,210	106,522,219	106,326,476
Enro	llment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	215,740	245,147	241,953	235,654	260,496
17.	Total members months (Column 6, Line 7)	2,643,165	2,949,203	2,979,079	2,840,830	3,134,959
	rating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, \times 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)	85.4	90.1	82.5	84.9	83.5
20.	Cost containment expenses					
21.	Other claims adjustment expenses					
22.	Total underwriting deductions (Line 23)					97.4
23.	Total underwriting gain (loss) (Line 24)					2.6
Unpa	aid Claims Analysis (U&I Exhibit, Part 2B)	, ,	, ,			
2 4.	Total claims incurred for prior years (Line 17, Col. 5)	128,346,267	105,208,610	103,524,657	135,806,614	115,592,887
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]					
Inve	stments 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)					
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)					204.821.068
29.	Affiliated short-term investments (subtotal included in Sch. DA Verification, Col. 5, Line 10)					
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31					
33.	Total investment in parent included in Lines 26 to 31 above					
. .	Total in restrict in parent moraded in Elife 20 to 01 above		1			

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?

If no, please explain

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

				Allocated by States and Territories								
			1					irect Business On				
				2	3	4	5	6	7	8	9	10
	States, Etc.		Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property / Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
		AL	N									
2.		AK	N N									
		AZ AR	N									
		CA	N									
6.		CO	N									
7.		CT	L	27,025,346	–						27,025,346	
8.		DE	N									
		DC	N									
		FL GA	N									
		GΑ НІ	N									
		ID	N									
14.	Illinois	IL	N									
		IN	N									
		IA	N									
		KS	N									
		KY LA	N N									
		ME	L	399,936,188	374,279						400,310,467	
		MD	N	555,500,100	U, ¬,∠, j						.00,010,407	
	Massachusetts		L	1,272,283,215	1,361,486						1,273,644,701	
		MI	N									
		MN	N									
		MS	N									
		MO MT	N									
		NE	N									
	Nevada		N									
	New Hampshire		N									
		NJ	N									
		NM	N									
		NY	N									
		NC	N									
	North Dakota	ND ОН	N N									
		OK	N									
		OR	N									
		PA	N									
		RI	N									
		SC	N									
		SD	N									
		TN TX	N N									
		UT	N									
		VT	N									
47.	Virginia	VA	N									
		WA	N									
49.		WV	N									
	Wyoming	WI WY	N N									
51. 52.	Wyoming American Samoa		N									
	Guam		N									
	Puerto Rico		N									
55.	US Virgin Islands	VI	N									
	Northern Mariana Islands		N									
	Canada		N									
	Aggregate Other Alien		XXX	1,699,244,749	1,735,765						1,700,980,514	
60.	Reporting entity contributions for Employee Benefit Plans		XXX	1,077,244,749	1,730,700						1,700,700,314	
	Total (Direct Business)		XXX	1,699,244,749	1,735,765						1,700,980,514	
	of Write-Ins											
58001.			XXX									
			XXX									
58003.			XXX									
	Summary of remaining write- ins for Line 58 from overflow page		XXX									
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58		۸۸۸									
Ī	above)		XXX									1

(a) Active Status Counts				
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	3	4.	. Q - Qualified - Qualified or accredited reinsurer	
2 P - Registered - Non-domiciled PPGs	_	5	N - None of the above - Not allowed to write business in the state 54	

3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state...

(b) Explanation of basis of allocation by states, premiums by state, etc
For individual members Harvard Pilgrim allocates premium based on the member's residence. For group members Harvard Pilgrim allocates premium based on the group situs.

CHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

