

HEALTH ANNUAL STATEMENT

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

AMH Health, LLC

NAIC Gro	•	Company Code <u>16553</u> Employer's	ID Number <u>83-2435050</u>
Organized under the Laws of	(Current) (Prior) Maine	, State of Domicile or Port of E	ntryME
Country of Domicile		United States of America	
Licensed as business type:	Неа	alth Maintenance Organization	
Is HMO Federally Qualified? Yes	s[]No[X]		
Incorporated/Organized	11/02/2018	Commenced Business	04/12/2019
Statutory Home Office	2 Gannett Drive (Street and Number)	,, (City of	South Portland, ME, US 04106 or Town, State, Country and Zip Code)
	(Street and Number)	, ,	or rown, State, Country and Zip Code)
Main Administrative Office		4425 Corporation Lane (Street and Number)	
	ginia Beach, VA, US 23462 wn, State, Country and Zip Code)	,	757-473-2737 Area Code) (Telephone Number)
. ,		·	,, ,
Mail Address	4425 Corporation Lane (Street and Number or P.O. Box)		Virginia Beach, VA, US 23462 or Town, State, Country and Zip Code)
Drimany Location of Pooks and D	,	, ,	, ,
Primary Location of Books and R		220 Virginia Avenue (Street and Number)	
	dianapolis, IN, US 46204 wn, State, Country and Zip Code)	·	317-432-6988 Area Code) (Telephone Number)
, ,		·	Area Gode) (Telephone Number)
Internet Website Address		www.elevancehealth.com	
Statutory Statement Contact	Leigh Barrett (Name)	,,	317-432-6988 (Area Code) (Telephone Number)
leigh.	barrett@elevancehealth.com	<u> </u>	317-488-6200
	(E-mail Address)		(FAX Number)
		OFFICERS	
President and Chairperson Secretary		Treasurer _ Assistant Treasurer	Vincent Edward Scher Eric Kenneth Noble
Georgiany	Natilicen Gusun Nerei	OTHER	Life Normali Nobio
James Robert		ECTORS OR TRUSTEES Francis George McGinty #	Charles R Bayman #
Jennifer Mo	oore# N	Marshall Robert Chamberlin #	Mark Joseph Schneider
Denise Marie	Smith #		
State of	Indiana		
County of	Marion SS		
all of the herein described asset statement, together with related econdition and affairs of the said rein accordance with the NAIC Anrules or regulations require differespectively. Furthermore, the second	s were the absolute property of the said re exhibits, schedules and explanations therein eporting entity as of the reporting period sta nual Statement Instructions and Accounting erences in reporting not related to accou cope of this attestation by the described off	eporting entity, free and clear from any lient contained, annexed or referred to, is a full ted above, and of its income and deduction practices and Procedures manual except niting practices and procedures, accordingicers also includes the related correspondinclosed statement. The electronic filing ma	porting entity, and that on the reporting period stated above, is or claims thereon, except as herein stated, and that this and true statement of all the assets and liabilities and of the is therefrom for the period ended, and have been completed to the extent that: (1) state law may differ; or, (2) that state go to the best of their information, knowledge and belief, ng electronic filing with the NAIC, when required, that is an any be requested by various regulators in lieu of or in addition DocuSigned by:
o.gou sy.	C 纠.	Signed by:	Vincent E. Scher
<i>Venise</i> 9	-	tatly teler	A85A33722D4143E
Denise Marie Sm President and Chairp	ith	Nauneen Susan Neier Secretary	Vincent Edward Scher Treasurer
Zewis- Louanna Stiner	February 2025	a. Is this an original filir b. If no, 1. State the amendn 2. Date filed	nent number
Executive Admin Assistant	LOUANNA STINER Notary Public - Seal		

ASSETS

			Current Year		Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)				77,207,411
2.	Stocks (Schedule D):				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	5,392,398		5,392,398	3,890,575
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$7,444,365 , Schedule E - Part 1), cash equivalents				
	(\$, Schedule E - Part 2) and short-term				
	investments (\$, Schedule DA)	7,444,365		7,444,365	18,382,220
6.	Contract loans, (including \$ premium notes)			0	0
7.	Derivatives (Schedule DB)			0	0
8.	Other invested assets (Schedule BA)			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets (Schedule DL)			0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	94,386,406	0	94,386,406	99,480,206
13.	Title plants less \$ charged off (for Title insurers				
	only)				
14.	Investment income due and accrued	922,753		922,753	686,842
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	118,217	75,603	42,614	24,787
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$1,105,492) and				
	contracts subject to redetermination (\$ 12,205,251)	13,310,743		13,310,743	5,414,090
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				0
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon \dots				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software			0	0
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 (\$				
25.	Aggregate write-ins for other-than-invested assets	12,786	12, /86	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	117,930,447	1,618,072	116,312,375	114,510,151
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	Total (Lines 26 and 27)	117,930,447	1,618,072	116,312,375	114,510,151
	DETAILS OF WRITE-INS		, ,	, ,	, ,
1101.	DETAILS OF WINTE-ING				
1101.					
1102.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				0
1199.		0		n	n
2501.	Prepaid expenses			0	0
2502.					
2503.	Summary of remaining write-ins for Line 25 from overflow page				
2598.				0	
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	12,786	12,786	l U	0

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP		Current Year		Prior Year
		1	2	3	4
					T. (.)
		Covered	Uncovered	Total	Total
	Claims unpaid (less \$ reinsurance ceded)				
	Accrued medical incentive pool and bonus amounts				
	Inpaid claims adjustment expenses	613,369		613,369	729,627
4. A	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	773,432		773,432	14,265,925
5. A	Aggregate life policy reserves			0	0
6. F	Property/casualty unearned premium reserves			0	0
7. A	Aggregate health claim reserves			0	0
	Premiums received in advance				
	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon			02,7 00	
	(including \$ on realized capital gains (losses))			0	0
	Net deferred tax liability				
	Ceded reinsurance premiums payable				
	Amounts withheld or retained for the account of others	· ·			
	Remittances and items not allocated	82,6//		82,6//	43,740
14. B	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$current)			0	0
15. A	Amounts due to parent, subsidiaries and affiliates	17,582,794		17,582,794	15,244,561
16. E	Derivatives			0	0
	Payable for securities				
	Payable for securities lending				0
	runds held under reinsurance treaties (with \$				
	authorized reinsurers, \$				
	, ·			0	0
	reinsurers and \$				0
	Reinsurance in unauthorized and certified (\$			_	
	companies				
	Net adjustments in assets and liabilities due to foreign exchange rates				0
22. L	iability for amounts held under uninsured plans	32,928		32,928	5,542,575
23. A	ggregate write-ins for other liabilities (including \$				
	current)				
24. T	otal liabilities (Lines 1 to 23)	53,410,254	0	53,410,254	74,445,208
	Aggregate write-ins for special surplus funds				
	Common capital stock				
	Preferred capital stock				
	Gross paid in and contributed surplus				
	Surplus notes				
	Aggregate write-ins for other-than-special surplus funds				
	Jnassigned funds (surplus)	XXX	XXX	(41,099,879)	(63,937,057)
	ess treasury stock, at cost:				
3	2.1 shares common (value included in Line 26				
	\$	XXX	XXX		
3	2.2 shares preferred (value included in Line 27				
	\$				
33. T	otal capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	62,902,121	40,064,943
34. T	otal liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	116,312,375	114,510,151
	DETAILS OF WRITE-INS				
	liscellaneous Medicare liabilities	185 177	0	185 177	98 529
	scheat liabilities				
	Suitea (Trautiff (165				
	Summary of remaining write-ins for Line 23 from overflow page				
	otals (Lines 2301 through 2303 plus 2398)(Line 23 above)			305,092	213,148
2598. 5	Summary of remaining write-ins for Line 25 from overflow page	xxx	XXX	0	0
	otals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
	, , , , , , , , , , , , , , , , , , ,				
	Summary of remaining write-ins for Line 30 from overflow page				
3099. T	otals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AN	Current \	/oor	Prior Year
		1	2	3
		Uncovered	Total	Total
1.	Member Months	XXX	193,395	206,043
2.	Net premium income (including \$ non-health premium income)	xxx	237, 177, 246	234,298,719
3.	Change in unearned premium reserves and reserve for rate credits	xxx	3,943,833	(1,697,809)
4.	Fee-for-service (net of \$ medical expenses)			
	Risk revenue			
5.				
6.	Aggregate write-ins for other health care related revenues			0
7.	Aggregate write-ins for other non-health revenues			
8.	Total revenues (Lines 2 to 7)	XXX	241,121,079	232,600,910
	Hospital and Medical:			
9.	Hospital/medical benefits		164,085,197	181,738,916
10.	Other professional services		16,249,284	18,405,379
11.	Outside referrals		0	
12.	Emergency room and out-of-area		12 368 896	12,396,558
13.	Prescription drugs			6,808,839
	•			, ,
14.	Aggregate write-ins for other hospital and medical			
15.	Incentive pool, withhold adjustments and bonus amounts			
16.	Subtotal (Lines 9 to 15)	0	212,227,714	222,546,432
	Less:			
17.	Net reinsurance recoveries		0	
18.	Total hospital and medical (Lines 16 minus 17)	0	212,227,714	222,546,432
19.	Non-health claims (net)			
20.	Claims adjustment expenses, including \$			
	General administrative expenses			
21.			10,907,971	23,045,691
22.	Increase in reserves for life and accident and health contracts (including \$			
	increase in reserves for life only)		(9,927,351)	3, 124, 259
23.	Total underwriting deductions (Lines 18 through 22)	0	225,613,768	257,230,171
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	xxx	15,507,311	(24,629,261)
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		5.405.692	4.437.217
26.	Net realized capital gains (losses) less capital gains tax of \$			
	Net investment gains (losses) (Lines 25 plus 26)		5,444,525	
27.				2,659,556
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$		(21,210)	(10,819)
29.	Aggregate write-ins for other income or expenses	0	19,731	36,915
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus			(2) 742 223
	27 plus 28 plus 29)			
31.	Federal and foreign income taxes incurred	XXX		(888)
32.	Net income (loss) (Lines 30 minus 31)	XXX	20,950,357	(21,742,919)
	DETAILS OF WRITE-INS			
0601.		xxx		
0602.				
0603				
0698.	Summary of remaining write-ins for Line 6 from overflow page			0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	Totals (Lines 0001 tillough 0005 plus 0096)(Line 0 above)		-	
0702.				
0703				
0798.	Summary of remaining write-ins for Line 7 from overflow page			0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
2901.	Miscellaneous income (expense)		19,731	36,915
2902.				
2902. 2903 2998.	Summary of remaining write-ins for Line 29 from overflow page			0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES	Continued	
		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	40,064,943	38,884,238
34.	Net income or (loss) from Line 32		
35.	Change in valuation basis of aggregate policy and claim reserves		
26	Change in net unrealized capital gains (losses) less capital gains tax of \$		
36.			
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax		
39.	Change in nonadmitted assets		
40	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in	0	24,000,000
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	22,837,178	1, 180, 705
49.	Capital and surplus end of reporting period (Line 33 plus 48)	62,902,121	40,064,943
	DETAILS OF WRITE-INS		
4701.			
4702.			
4703.			
		0	.0
4798.	Summary of remaining write-ins for Line 47 from overflow page		0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	

CASH FLOW

	CASITIEOW	1	2
		Current Year	Prior Year
	Cash from Operations	Current real	i noi reai
1. P	remiums collected net of reinsurance	229 659 981	238 050 477
	let investment income		
	discellaneous income		0
	otal (Lines 1 through 3)		241.605.365
	lenefit and loss related payments		, .,
	let transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		
	ederal and foreign income taxes paid (recovered) net of \$		(888)
	otal (Lines 5 through 9)		251,708,176
	let cash from operations (Line 4 minus Line 10)		(10, 102, 811)
11. 1	ret cash from operations (Line 4 minus Line 10)	(3,000,000)	(10, 102,011)
	Cash from Investments		
12. P	Proceeds from investments sold, matured or repaid:		
	2.1 Bonds	56 027 706	57 862 205
	2.2 Stocks		
	2.3 Mortgage loans		
	2.4 Real estate		
	2.5 Other invested assets		
	2.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0
	2.7 Miscellaneous proceeds		2,451,416
	2.8 Total investment proceeds (Lines 12.1 to 12.7)		
	cost of investments acquired (long-term only):	50,927,700	
	3.1 Bonds	60 513 831	85 076 125
	3.2 Stocks		
•	3.3 Mortgage loans		0
	3.4 Real estate		
	3.5 Other invested assets		
	3.6 Miscellaneous applications		92,495
	3.7 Total investments acquired (Lines 13.1 to 13.6)		85,168,620
			03,100,020
	let increase/(decrease) in contract loans and premium notes		
15. N	let Cash Horn investments (Line 12.0 minus Line 13.7 minus Line 14)	(3,300,123)	(24,854,999)
	Cash from Financing and Miscellaneous Sources		
16. C	Cash provided (applied):		
	6.1 Surplus notes, capital notes	0	0
	6.2 Capital and paid in surplus, less treasury stock		
	6.3 Borrowed funds		
	6.4 Net deposits on deposit-type contracts and other insurance liabilities		
			0
	6.5 Dividends to stockholders		
	6.6 Other cash provided (applied)		7,309,698
17. N	let cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	2,506,965	31,309,698
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. N	let change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(10,937,855)	(3,648,112)
19. C	Cash, cash equivalents and short-term investments:		
1	9.1 Beginning of year	18,382,220	22,030,332
1	9.2 End of year (Line 18 plus Line 19.1)	7,444,365	18,382,220

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

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

Company Comp				2 41 42		<u> </u>				<u> </u>	0					
March Marc			1	Compre	hensive	4	5	6	7	8	9	10	11	12	13	14
Total Communication Total Information Total Information Total Communication Total Communication																
Column C				2	3											
1 Net permissin monores and residue in source and residue in section and residue in sec					_											
2 Charge in inserting personal recovers and coaching from the form of the company of the com					Group	Supplement	Vision Only	Dental Only	Benefits Plan			Credit A&H	Income	Care	Other Health	Non-Health
For rise credit 3,94,800	1.	Net premium income	237 , 177 , 246							237 , 177 , 246						
For rise credit 3,94,800	2.	Change in unearned premium reserves and reserve														
March compress			3,943,833							3,943,833						
March compress	3		.,,							.,,						
4. Right eventure 5. Appropries write ins for other health care related 5. Appropries write ins for other health care related 5. Appropries write ins for other methods care related 5. Appropries write ins for other methods care related 5. Appropries write ins for other methods care related 5. Appropries write ins for other methods care related 5. Appropries write ins for other methods 5. Appropries write ins for the methods 5. Appropries write ins for other methods 5. Appropries write ins for other methods 5. Appropries write ins for the	0.		0													VVV
5. Aggregate wife the for the following related by the control of the following process of the		' '														
Principles of the first of color conclusional case related			0													XXX
Private Priv	5.		0	0	0	0	0	0	0	0	0	0	0	0	0	xxx
Private Priv	6	Aggregate write-ins for other non-health care related														
7. Total revenues (Lines 10 6)	0.		0	YYY	YYY	YYY	YYY	YYY	YYY	YYY	YYY	YYY	YYY	YYY	YYY	0
Section Control of the Control o	7													^^^		
0. Order professional services 15,848,89				0	0	0	0				0	0	0		0	0
10 Outside referrations 0																
11 Emergency room and out-of-stream 12,988,896	9.	Other professional services	16,249,284							16,249,284						
12 Prescription drugs 14,100,764 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	10.	Outside referrals														XXX
12 Prescription drugs 14,100,764 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	11.	Emergency room and out-of-area	12.368.896							12.368.896						XXX
13 Aggregate write-rise for draw hospital and medical 0 0 0 0 0 0 0 0 0		ŭ ,														
14 Incentive pot, withfold adjustments and borus encourses 5,417,633			, ,	^	^	^	^	^	^		^	^	^	^	^	
amounts			0	0	J	J	0	0		J	0	0	0	J	J	^^^.
15 Subbolat (Lines 8 to 14) 212 (27714 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	14.		E 117 000			ĺ				F 117 000						1000
16 Net remissurance recoveries 0						·····								·····		
17 Total medical and hospital (Lines 15 minus 16), 212 227 14 0 0 0 0 0 222 277 14 0 0 0 0 0 0 0 0 0	15.		, ,	0	0	J0	0	0	0	212,227,714	0	0	0	J0	0	
18. Non-health claims (ref)	16.	Net reinsurance recoveries	0													XXX
18. Non-health claims (ref)	17	Total medical and hospital (Lines 15 minus 16)	212.227.714	0	0	0	0	0	0	212.227.714	0	0	0	0	0	XXX
19 Claims adjustment expenses including S = 3, 78, 146 contaminant expenses 6, 545, 44				YYY	YYY	YYY	YYY	YYY	YYY		YYY	YYY	YYY	YYY	YYY	
S - 3,76.145 cost containment expenses																
20 General administrative expenses 16,967,971 16,	19.		0.045.404							0.045.404						
21 Increase in reserves for accident and health contracts			, , -													
Contracts	20.	General administrative expenses	16,967,971							16,967,971						
22 Increase in reserves for life contracts	21.	Increase in reserves for accident and health														
22 Increase in reserves for life contracts		contracts	(9,927,351)							(9,927,351)						XXX
23 Total underwriting deductions (Lines 17 to 22)	22			XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	
24. Net underwriting gain or (loss) (Line 7 minus Line 23) DETAILS OF WRITE-INS Soft			225 612 760		Λ	Λ	Λ	Λ	Λ		Λ	Λ	0	Λ	n	Λ
23) 15,507,311 0 0 0 0 0 0 0 0 0			223,013,700	0		0	0			223,013,700	0		0			0
DETAILS OF WRITE-INS	24.	Net underwriting gain or (loss) (Line / minus Line	45 507 044				•			45 507 044	•	•				
SS01 Summary of remaining write-ins for Line 5 from			15,507,311	0	0	0	0	0	0	15,507,311	0	0	0	0	0	U
Sept. Summary of remaining write-ins for Line 5 from overflow page		DETAILS OF WRITE-INS														
Sept. Summary of remaining write-ins for Line 5 from overflow page	0501.															XXX
0503 0598 Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0 0 0 0 0 0																XXX
0.598 Summary of remaining write-ins for Line 5 from overflow page																
Oseption page										·····				·····		
0599	0598.		•	_	_	1 _	_	_	_	1	_	^	•	1	_	V00/
above	1		0	0	0	J0	0	0	0	J0	0	0	0	J0	0	XXX
0601	0599.					ĺ				İ				İ		
0602		above)	0	•	0	Ū	0	0	0	0	0		0	0	0	XXX
0602	0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.							XXX			XXX	XXX	XXX				
0698. Summary of remaining write-ins for Line 6 from overflow page																
Overflow page		Common of association units in faction 2 for				······································				······································			······································	······································		
Totals (Lines 0601 through 0603 plus 0698) (Line 6 0 XXX X	U098.		^	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	_
above 0 XXX 1		0	XXX	XXX		XXX	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	. 0	
1301	0699.		-													_
1302.		above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1303.	1301.															XXX
1303.	1302.					<u> </u>				<u> </u>						XXX
1398. Summary of remaining write-ins for Line 13 from overflow page						1				1				1		
overflow page		Summary of remaining write ine for Line 12 from				[[[[
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13	1390.		0	^	^	_	^	_	0	^	_	۸		_	^	YVV
	4000	, •	0		0	J	0			J			0	J	Ju	
above)U	1399.		•		_	1 _	_	_	_	1		^	_	1		2007
		above)	0	0	0	0	1 0	0	0	1 0	0	0	0	0	0	XXX

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE AMH Health, LLC

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMILIMS

PARI 1 - PREMIUMS	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
Comprehensive (hospital and medical) individual				0
Comprehensive (hospital and medical) group				0
3. Medicare Supplement				0
4. Vision only				0
5. Dental only				0
6. Federal Employees Health Benefits Plan	0			0
7. Title XVIII - Medicare	237, 177, 246			237, 177, 246
8. Title XIX - Medicaid	0			0
9. Credit A&H				0
10. Disability Income				0
11. Long-Term Care				0
12. Other health				0
13. Health subtotal (Lines 1 through 12)	237, 177, 246	0	0	237, 177, 246
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	237, 177, 246	0	0	237, 177, 246

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

							IS INCURRED I	DURING THE Y	EAR						
		1	Compret (Hospital &	Medical)	4	5	6	7	8	9	10	11	12	13	14
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1.	Payments during the year:	10101	a.v.aaa.	0.000	Саррісінсік	7.0.0 01y	20	201101110111011		mouroulu	0.00		54.5	0 11.01 11.00.11.	
	1.1 Direct	212,436,712							212,436,712						
	1.2 Reinsurance assumed	0							, , ,						
	1.3 Reinsurance ceded	0													
	1.4 Net	212,436,712	0	0	0	0	0	0	212,436,712	0	0	0	0	0	0
2	Paid medical incentive pools and														
	bonuses	4,142,404							4,142,404						
3.	Claim liability December 31, current year from Part 2A:			0											
	3.1 Direct	30,750,688	0	0	0	0	0	0	30,750,688	0	0	0	0	0	0
	3.2 Reinsurance assumed	0											·····		
	3.3 Reinsurance ceded	0	-					-				-			
	3.4 Net	30,750,688	0 .	0	0	0	0	0	30,750,688	0	0	0	0	0	0
4.	Claim reserve December 31, current year from Part 2D: 4.1 Direct	0													
	4.2 Reinsurance assumed	0													
	4.3 Reinsurance ceded	0													
	4.4 Net	0		0		0	0	0	0	0	0	0	0	0	0
5	Accrued medical incentive pools and				0			0					0	0	
Э.	bonuses, current year	3, 128, 124							3, 128, 124						
6.	Net health care receivables (a)	(147,393)							(147,393)						
	Amounts recoverable from reinsurers December 31, current year	0							(1 17 ,000)						
8.	Claim liability December 31, prior year from Part 2A:								00 504 740						
	8.1 Direct	36,524,712	0	0	0	0	0	0	36,524,712	0	0	0	0	0	0
	8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	8.4 Net	36,524,712	0	0	0	0	0	0	36,524,712	0	0	0	0	0	0
9.	Claim reserve December 31, prior year from Part 2D: 9.1 Direct	0													
	9.2 Reinsurance assumed												·····		
	9.3 Reinsurance assumed														
	9.4 Net	0	······		^	^	^	^			^	^	^		
10		0	u	0	0	0	0	J	J0	J	J	JU	J	0	J
10.	Accrued medical incentive pools and bonuses, prior year	1,852,895							1,852,895						
11.	Amounts recoverable from reinsurers December 31, prior year	1,032,033							1,002,000						
12.	Incurred Benefits:	,													
	12.1 Direct	206.810.081	0	0	0	0	0	0	206,810,081	0	0	0	0	0	0
	12.2 Reinsurance assumed	0		0		0	0	0	200,010,001	0	0	0	0	0	n
	12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	n
	12.4 Net	206.810.081	0	0	0			0	206,810,081	0	0				0
13.	Incurred medical incentive pools and	200,010,001	0	U	U	· ·	0	0	200,010,001	1	· ·	0	1	U	
13.	bonuses	5,417,633	0	0	0	0	0	0	5,417,633	0	0	0	0	0	0

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1			ı	T 2A - CLAIMS		D OF CURREN			ı			I	1
	1	Compre		4	5	6	7	8	9	10	11	12	13	14
		(Hospital 8	& Medical)	1			Federal							
		2	3				Employees							
				Medicare			Health	Title XVIII	Title XIX		Disability	Long-Term		Other
	Total	Individual	Group	Supplement	Vision Only	Dental Only	Benefits Plan	Medicare	Medicaid	Credit A&H	Income	Care	Other Health	Non-Health
Reported in Process of Adjustment:														
1.1 Direct	17.918.897							17,918,897						
	, , , ,							17,910,097						
1.2 Reinsurance assumed														
1.3 Reinsurance ceded	0 .													
1.4 Net	17,918,897	0	0	0	0	0	0	17,918,897	0	0	0	0	0	0
								, ,						
Incurred but Unreported:														
2.1 Direct	12,831,791 .							12,831,791						
2.2 Reinsurance assumed	0 .													
2.3 Reinsurance ceded	0													
				0								0		
2.4 Net	12,831,791	0	0	U	0	0	0	12,831,791	0	0	0	0	0	0
Amounts Withheld from Paid Claims														
and Capitations:														
3.1 Direct	0 .													
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net		0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
	00 750 000	•	•	0	•	•		00 750 000	•		_		_	
4.1 Direct								- , - ,		0		0	0	0
4.2 Reinsurance assumed	. 0 .		0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	. 0 .	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	30.750.688	n	n	n	0	n	0	30,750,688	n	n	n	0	n	n
T.T INGL	00,700,000	U	U		U	U		00,700,000	U		U	1		U

UNDERWRITING AND INVESTMENT EXHIBIT

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

	OK TEAK - NET OF F			and Claim Liability	5	6
	Claims Paid D	ouring the Year	December 31	of Current Year		Fating at a d Olaina
	1	2	3	4		Estimated Claim Reserve and Claim
	On Claims Incurred		On Claims Unpaid		Claims Incurred	Liability
	Prior to January 1	On Claims Incurred	December 31 of	On Claims Incurred	In Prior Years	December 31 of
Line of Business	of Current Year	During the Year	Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Lift of Edulation	or current rour	Burning the Tear	T HOT TOUT	During the real	(coldinio 1 · c)	THOI TOU
Comprehensive (hospital and medical) individual	0	0	0	0	0	0
Comprehensive (hospital and medical) group	0	0	0	0	0	0
3. Medicare Supplement	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Dental Only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare		198,897,641	10,249,026	20,501,662	23,788,097	
8 Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-Term Care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)		198,897,641	10,249,026	20,501,662	23,788,097	36,524,712
14. Health care receivables (a)		4,008,801	0	0	466,941	4,623,135
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	2,012,454	2,129,950	79,118	3,049,006	2,091,572	1,852,895
17. Totals (Lines 13 - 14 + 15 + 16)	15,084,584	197,018,790	10,328,144	23,550,668	25,412,728	33,754,472

UNDERWRITING AND INVESTMENT EXHIBIT

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

Section A - Paid Health Claims - Title XVIII

		Cur	nulative Net Amounts P	aid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024
1. Prior	0	0	0	0	0
2. 2020	51,237	61,549	61,855	61,556	61,575
3. 2021	XXX	125,701	150,913	152,212	152,978
4. 2022	XXX	XXX	180 , 187	207, 187	195,859
5. 2023	XXX	XXX	XXX	187,900	213,527
6. 2024	XXX	XXX	XXX	XXX	197,019

Section B - Incurred Health Claims - Title XVIII

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuse: Outstanding at End of Year					
Year in Which Losses Were Incurred	1 2020	2 2021	3 2022	4 2023	5 2024	
1. Prior	0	0	0	0	0	
2. 2020	64,030	61,796	61,843	61,556	61,575	
3. 2021	XXX	151,712	152,982	152,268	152,978	
4. 2022	XXX	XXX	213,633	208,225	205,911	
5. 2023	XXX	XXX	XXX	225, 184	213,803	
6. 2024	XXX	XXX	XXX	XXX	220,570	

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

		1	2	3	4	5	6	7	8	9	10
	Years in which					Claim and Claim Adjustment Expense			Unpaid Claims	Total Claims and Claims Adjustment	
	Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Adjustment Expenses	Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020		61,575	3,229	5.2	64,804	85.1	0	0	64,804	85.1
2.	2021	169,264	152,978	8,894	5.8	161,872	95.6	0	0		95.6
3.	2022	224,449	195,859	8,732	4.5	204,591	91.2	10,052	201	214,844	95.7
4.	2023	232,601	213,527	8,156	3.8	221,683	95.3	276	4	221,963	95.4
5.	2024	241,121	197,019	5,651	2.9	202,670	84.1	23,551	409	226,630	94.0

UNDERWRITING AND INVESTMENT EXHIBIT

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

Section A - Paid Health Claims - Grand Total

		Cumulative Net Amounts Paid					
		1	2	3	4	5	
	Year in Which Losses Were Incurred	2020	2021	2022	2023	2024	
1.	Prior	0	0	0	0	0	
2.	2020	51,237	61,549	61,855	61,556	61,575	
3.	2021	XXX	125,701	150,913	152,212	152,978	
4.	2022	XXX	XXX	180 . 187	207 . 187	195.859	
5.	2023	XXX	XXX	XXX	187,900	213,527	
6.	2024	XXX	XXX	XXX	XXX	197,019	

Section B - Incurred Health Claims - Grand Total

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonu Outstanding at End of Year					
Vol. 15 MICH Land Wood Land	1	2	3	4	5	
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024	
1. Prior	0	0	0	0	0	
2. 2020	64,030	61,796	61,843	61,556	61,575	
3. 2021	XXX	151,712	152,982	152,268	152,978	
4. 2022	XXX	XXX	213,633	208,225	205,911	
5. 2023	XXX	XXX	XXX	225, 184	213,803	
6. 2024	XXX	XXX	XXX	XXX	220,570	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2020		61,575	3,229	5.2	64,804	85.1	0	0	64,804	85.1
2.	2021	169.264	152.978	8.894	5.8	161.872	95.6	0	0	161.872	95.6
3.	2022		195,859	8,732	4.5	204,591	91.2	10,052	201	214,844	95.7
4.	2023		213,527	8,156	3.8	221,683	95.3	276	4	221,963	95.4
5.	2024	241,121	197,019	5,651	2.9	202,670	84.1	23,551	409	226,630	94.0

UNDERWRITING AND INVESTMENT EXHIBIT

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

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY														
		1	Compret (Hospital 8		4	5	6	7	8	9	10	11	12	13
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1.	Unearned premium reserves	1 Otal	muividuai	Gloup	Supplement	VISION ONly	Dental Only	Deficits Flair	Medicare	ivieulcalu	Credit Adi i	income	Care	Other
	Additional policy reserves (a)	662,440							662 . 440	•				
3.	Reserve for future contingent benefits	002,440							002,440					
4.	Reserve for rate credits or experience rating refunds	0												
7.		75 547							75.547					
_	(including \$ 662,440 for investment income)	75,517							75,517					
	Aggregate write-ins for other policy reserves	35,476	0	0		0	0			0			0	0
6.	Totals (gross)	773,433	0	0	0	0	0	0	773,433	0	0	0	0	0
7.	Reinsurance ceded													
	Totals (Net)(Page 3, Line 4)		0	0	0	0	0	0	773,433	0	0	0	0	0
9.	Present value of amounts not yet due on claims	·0												
10.	Reserve for future contingent benefits	0												
11.	Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals (gross)	0	0	0	0	0	0	0	0	0	0	0	0	0
13.	Reinsurance ceded	0												
14.	Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
	DETAILS OF WRITE-INS													
0501.	Risk adjustment payable	35,476							35,476					
0502.														
0503.														
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	35,476	0	0	0	0	0	0	35,476	0	0	0	0	0
1101.														
1102.														
1103.														
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$662,440 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

		Claim Adjustme	YSIS OF EXPENSES	S 3	4	5
		1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1	Rent (\$0 for occupancy of	Expenses	Lxperises	Lxperises	LApenses	Total
•	own building)	81 327	69 100	(14 430)		135 997
2.	Salary, wages and other benefits			4,012,061		
3.	Commissions (less \$					
3.	ceded plus \$ assumed)	0		4 246 055		4 246 055
4	Legal fees and expenses			, ,		, , ,
4.	Certifications and accreditation fees					
5.	Auditing, actuarial and other consulting services					
6.						
7.	Traveling expenses			28,920		
8.	Marketing and advertising			2,257,589		
9.	Postage, express and telephone					
10.	Printing and office supplies			183,678		· ·
11.	Occupancy, depreciation and amortization					
12.	Equipment	5	30	22,995		23,030
13.	Cost or depreciation of EDP equipment and software	27,715	19,496	516,438		563,649
14.	Outsourced services including EDP, claims, and					
	other services	163,760	274,337	4,108,882		4,546,979
15.	Boards, bureaus and association fees			18,729		· ·
16.	Insurance, except on real estate					
17.	Collection and bank service charges					
18.	Group service and administration fees	0	21,136	3		21, 139
19.	Reimbursements by uninsured plans	0		0		(
20.	Reimbursements from fiscal intermediaries	0		0		(
21.	Real estate expenses	4	1	92,198		92,200
22.	Real estate taxes	0		6,899		6,899
23.	Taxes, licenses and fees:					
	23.1 State and local insurance taxes	0		553		550
	23.2 State premium taxes	0		0		(
	23.3 Regulatory authority licenses and fees		151	6,613		7,779
	23.4 Payroll taxes		93 , 157	222, 192		503 , 13 ⁻
	23.5 Other (excluding federal income and real estate taxes)	0		3,274		3,274
24.	Investment expenses not included elsewhere	0		0	93,377	93,37
25.	Aggregate write-ins for expenses	(7,884)	508,819	(286,508)	0	214,42
26.	Total expenses incurred (Lines 1 to 25)	3,706,145	2,639,289	16,967,971	93,377	(a)23,406,782
27.	Less expenses unpaid December 31, current year		613,369	92,765		706 , 134
28.	Add expenses unpaid December 31, prior year	0	729,627	17,837	0	747,464
29.	Amounts receivable relating to uninsured plans, prior year	0	0	5,711,846	0	5,711,840
30.	Amounts receivable relating to uninsured plans, current year			4,238,043		4,238,043
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	3,706,145	2,755,547	15,419,240	93,377	21,974,309
	DETAILS OF WRITE-INS					
2501.	Miscellaneous expenses	(7,884)	508,819	(286,508)		214,427
2502.						
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	
	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) des management fees of \$	(7,884)	508,819	(286,508) -affiliates.	0	214,427

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a)602,907	
1.1	Bonds exempt from U.S. tax		
1.2	Other bonds (unaffiliated)		
1.3	Bonds of affiliates	(a) 0	0
2.1	Preferred stocks (unaffiliated)	(b)0	0
2.11	Preferred stocks of affiliates		
2.2	Common stocks (unaffiliated)		0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans		
4.	Real estate	(d) 0	0
5	Contract Loans		
6	Cash, cash equivalents and short-term investments	(e)1,253,197	1,253,197
7	Derivative instruments	(f)0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	49	49
10.	Total gross investment income	5,263,158	
11.	Investment expenses		(g)93,377
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)0
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		93,377
17.	Net investment income (Line 10 minus Line 16)		5,405,692
	DETAILS OF WRITE-INS		
0901.	Miscellaneous Income	49	49
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	49	49
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0
(a) Inclu	des \$755,381 accrual of discount less \$38,098 amortization of premium and less \$521,0	35 paid for accrued int	erest on purchases.
(b) Inclu	des \$0 accrual of discount less \$0 amortization of premium and less \$. 0 paid for accrued div	vidends on purchases.

EXHIBIT OF CAPITAL GAINS (LOSSES)

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

investment expenses and \$investment taxes, licenses and fees, excluding federal income taxes, attributable to

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

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

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

(i) Includes \$ ______0 depreciation on real estate and \$ _____ depreciation on other invested assets.

segregated and Separate Accounts.

	EVUIDIT	OF CAPI	IAL GAIN	3 (LUSSE	.J)	
		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Gain (Loss) (Columns 1 + 2)	Unrealized Capital	Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds			(193,159)		0
1.1	Bonds exempt from U.S. tax	(100,100)		0		
1.2	Other bonds (unaffiliated)	231.993	0		0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)			0	0	0
2.21	Common stocks of affiliates	0	0	0	1,501,813	0
3.	Mortgage loans		0		0	0
4.	Real estate		0	0		0
5.	Contract loans			0		
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments			0		
8.	Other invested assets		0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	38,834	0	38,834	1,501,813	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

	EXHIBIT OF NON-ADMITTE	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			0
	2.2 Common stocks			0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			0
	3.2 Other than first liens			_
4.	Real estate (Schedule A):			
••	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			_
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6.	Contract loans			0
7.	Derivatives (Schedule DB)			0
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:			
10.	15.1 Uncollected premiums and agents' balances in the course of collection	75 603	99 984	24 381
	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:			
10.	16.1 Amounts recoverable from reinsurers		0	0
	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			
	Current federal and foreign income tax recoverable and interest thereon			
18.1				0
	Net deferred tax asset			0
19.	Guaranty funds receivable or on deposit			_
20.	Electronic data processing equipment and software			0
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0
23.	Receivable from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other-than-invested assets	12,786	6,575	(6,211)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts		0.000.074	0
28.	Total (Lines 26 and 27)	1,618,072	2,003,071	384,999
1101.	DETAILS OF WRITE-INS			
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Prepaid expenses	12,786	0	(12,786)
2502.	Miscellaneous receivables	0	6,575	6,575
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	12,786	6,575	(6,211)

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EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE AMH Health, LLC

				Total Members at End of			6
		1	2	3	4	5	Current Year
	Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Member Months
1.	Health Maintenance Organizations	16,972	16, 189	16,048	15,964	16,074	193,395
2.	Provider Service Organizations						
3.	Preferred Provider Organizations						
4.	Point of Service						
5.	Indemnity Only						
6.	Aggregate write-ins for other lines of business	0	0	0	0	0	0
7.	Total	16,972	16,189	16,048	15,964	16,074	193,395
	DETAILS OF WRITE-INS						
0601.							
0602.							
0603.							
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

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

		SSAP#	F/S Page	F/S Line #	2024	2023
Net	Income					
(1)	AMH Health, LLC. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 20,950,357	\$(21,742,919)
(2)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(3)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 20,950,357	\$(21,742,919)
Sur	<u>plus</u>					
(5)	AMH Health, LLC. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 62,902,121	\$ 40,064,943
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 62,902,121	\$ 40,064,943

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

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

C. Accounting Policies

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

In addition, the Company uses the following accounting policies:

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

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

There were no accounting changes or corrections of errors during the years ended December 31, 2024 and 2023.

3. Business Combinations and Goodwill

A. Business Combinations and Goodwill

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

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

Not applicable.

4. Discontinued Operations

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

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

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

B. Debt Restructuring

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

C. Reverse Mortgages

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

D. Loan-Backed Securities

- (1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize OTTI on its loan-backed securities during the years ended December 31, 2024 and 2023.
- (3) The Company did not recognize OTTI on its loan-backed securities at December 31, 2024 and 2023.
- (4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):
 - a. The aggregate amount of unrealized losses:

1.	Less than 12 Months	\$ (84,323)
2.	12 Months or Longer	\$ (20,237)

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

1.	Less than 12 Months	\$ 7,544,125
2.	12 Months or Longer	\$ 1.402.526

(5) The Company's bond portfolio is sensitive to interest rate fluctuations, which impact the fair value of individual securities. Unrealized losses on bonds were primarily caused by the effects of the interest rate environment and the widening of credit spreads on certain securities. The Company currently has the ability and intent to hold these securities until their full cost can be recovered. Therefore, the Company does not believe the unrealized losses represent an OTTI at December 31, 2024 or 2023.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not enter into repurchase agreements at December 31, 2024 or 2023.
- (2) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers based on, among other things, their creditworthiness in exchange for collateral initially equal to at least 102% of the market value of the loaned securities. The Company receives the collateral in cash or securities, and if cash is received the cash collateral is thereafter invested according to guidelines of the Company's Investment Policy.
- (3) Not Applicable.
- (4) Not applicable.
- (5) Not applicable.
- (6) Not applicable.
- (7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at December 31, 2024 or 2023.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at December 31, 2024 or 2023.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at December 31, 2024 or 2023.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at December 31, 2024 or 2023.

J. Real Estate

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

K. Investments in Low-Income Housing Tax Credits

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

L. Restricted Assets

(1) Restricted assets (including pledged)

		1	2	3	4	5	6	7
Re	stricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a.	Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	0.00 %	0.00 %
b.	Collateral held under security lending agreements		_	_	_	_	0.00 %	0.00 %
c.	Subject to repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
d.	Subject to reverse repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
e.	Subject to dollar repurchase agreements	_	_	_	_	_	0.00 %	0.00 %
f.	Subject to dollar reverse repurchase agreements		_	_	_	_	0.00 %	0.00 %
g.	Placed under option contracts	_	_	_	_	_	0.00 %	0.00 %
h.	Letter stock or securities restricted as to sale-excluding FHLB capital stock		_	_	_	_	0.00 %	0.00 %
i.	FHLB capital stock	_	_	_	_	_	0.00 %	0.00 %
j.	On deposit with states	106,306	109,675	(3,369)	_	106,306	0.09 %	0.09 %
k.	On deposit with other regulatory bodies	_	_	_	_	_	0.00 %	0.00 %
l.	Pledged as collateral to FHLB (including assets backing funding agreements)	_	_	_	_	_	0.00 %	0.00 %
m.	Pledged as collateral not captured in other categories	_	_	_	_	_	0.00 %	0.00 %
n.	Other restricted assets	_	_	_	_	_	0.00 %	0.00 %
0.	Total Restricted Assets	\$ 106,306	\$ 109,675	\$ (3,369)	s —	\$ 106,306	0.09 %	0.09 %

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

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

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at December 31, 2024 and 2023.

N. Offsetting and Netting of Assets and Liabilities

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

O. 5GI Securities

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

P. Short Sales

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

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

Q. Prepayment Penalty and Acceleration Fees

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

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

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

S. Aggregate Collateral Loans by Qualifying Investment Collateral

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

6. Joint Ventures, Partnerships and Limited Liability Companies

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

7. Investment Income

- **A.** All investment income due and accrued with amounts that are over 90 days past due is non-admitted.
- **B.** At December 31, 2024 and 2023 there was no nonadmitted accrued investment income.
- C. At December 31, 2024 and 2023 the gross, nonadmitted and admitted amounts for interest income due and accrued are as follows:

Interest Income Due and Accrued	2024	2023		
1. Gross	\$ 922,753	\$ 686,842		
2. Nonadmitted	\$ 	\$ —		
3. Admitted	\$ 922,753	\$ 686,842		

- **D**. At December 31, 2024 and 2023 the Company had no aggregate deferred interest.
- **E**. At December 31, 2024 and 2023, the Company had no cumulative amounts of paid-in-kind ("PIK") interest included in the current principal balance.

8. Derivative Instruments

The Company has no derivative instruments.

9. Income Taxes

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

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

			12/31/2024	
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total
(a)	Gross Deferred Tax Assets	\$ 7,297,202	\$ 569,405	\$ 7,866,607
(b)	Statutory Valuation Allowance Adjustments	7,156,166	538,119	7,694,285
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	141,036	31,286	172,322
(d)	Deferred Tax Assets Nonadmitted	_	_	_
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	141,036	31,286	172,322
(f)	Deferred Tax Liabilities	141,036	31,286	172,322
(g)	(1e - 1f)	<u>\$</u>	\$	\$
			12/31/2023	
		(4)		(0)
		(4)	(5)	(6)
		Ordinary	Capital	(Col 4+5) Total
(a)	Gross Deferred Tax Assets	\$ 11,702,792	\$ —	\$ 11,702,792
(b)	Statutory Valuation Allowance Adjustments	11,555,789	_	11,555,789
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	147,003	_	147,003
(d)	Deferred Tax Assets Nonadmitted			
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	147,003		147,003
(f)	Deferred Tax Liabilities	762	146,241	147,003
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 146,241	\$ (146,241)	<u> </u>
			Change	
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a)	Gross Deferred Tax Assets	\$ (4,405,590)	\$ 560,405	\$ (3,836,185)
(b)	Statutory Valuation Allowance Adjustments	(4,399,623)		(3,861,504)
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	(5,967)		25,319
(d)	Deferred Tax Assets Nonadmitted			
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	(5,967)	31,286	25,319
(f)	Deferred Tax Liabilities	140,274	(114,955)	
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (146,241)	\$ 146,241	\$

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

			12/31/2024	
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total
Adn	nission Calculation Components SSAP No. 101	Orumary	Сарітаі	Total
	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ —	\$ —	\$ —
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The			
	 Lesser of 2(b)1 and 2(b)2 Below) Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date. 	_	_	_
	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	9,435,318
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	141,036	31,286	172,322
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total $(2(a) + 2(b) + 2(c))$	\$ 141,036	\$ 31,286	\$ 172,322
		(4)	12/31/2023	(6)
		(4)	(5)	(6) (Cal 415)
		Ordinary	Capital	(Col 4+5) Total
Adn	nission Calculation Components SSAP No. 101			
	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ —	\$ —	\$ —
(0)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	_	_	_
	Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	_	_	_
	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	6,009,741
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	147,003	_	147,003
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total $(2(a) + 2(b) + 2(c))$	\$ 147,003	<u> </u>	\$ 147,003
			Change	
		(7)	(8)	(9)
		(Col 1-4)	(Col 2-5)	(Col 7+8)
A du	mission Coloulation Commonants SSAD No. 101	Ordinary	Capital	Total
Aui	nission Calculation Components SSAP No. 101			
(a)	Through Loss Carrybacks.	\$	\$ —	\$ —
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)		_	_
	Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	_	_	_
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	3,425,577
	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	(5,967)	31,286	25,319
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total $(2(a) + 2(b) + 2(c))$	\$ (5,967)	\$ 31,286	\$ 25,319

(3)						20	24		2023
	(a)	Ratio Percentage Used To De Threshold Limitation Amoun		termine Recovery Period And			.06%	۷	120.13%
	(b)	Amount Of Adjusted Capital Recovery Period And Thresh				\$ 62,	902,121	\$	40,064,943
(4)			12/31	/2024	12/31/2	2023		Chai	ıge
			(1)	(2)	(3)	(4)	(5)		(6)
			Ordinary	Capital	Ordinary	Capital	(Col 1 Ordina		(Col 2-4) Capital
	Imp	act of Tax-Planning Strategies							
	(a)	Determination of Adjusted Gross Deferred Tax Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.							
		1. Adjusted Gross DTAs Amount From Note 9A1(c)	\$141,036	\$31,286	\$147,003	\$ —	\$ (5,9	67)	\$31,286
		2. Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	0.00 %	0.00 %	0.00 %	0.00 %	0.	00 %	0.00 %
		3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e) 4. Percentage of Net	\$141,036	\$31,286	\$147,003	\$ —	\$ (5,9		\$31,286
		Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	0.00 %	0.00 %	0.00 %	0.00 %	0.	00 %	0.00 %

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

Yes ____

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

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

				(1)	(2)	(3)	
			12	2/31/2024	12/31/2023	(Col 1-2) Change	
(1)	Cur	rent Income Tax					
	(a)	Federal	\$	_	\$ (888)	\$ 888	
	(b)	Foreign		_	_		
	(c)	Subtotal		_	(888)	888	
	(d)	Federal income tax expense on net capital gains		39,794	_	39,794	
	(e)	Utilization of capital loss carry-forwards		(39,794)	_	(39,794)	
	(f)	Other		_	_		
	(g)	Federal and foreign income taxes incurred	\$	_	\$ (888)	\$ 888	

				(1)	(2)	(3)
				12/31/2024	12/31/2023	(Col 1-2) Change
(2)	Def	erred T	ax Assets:		/	
	(a)	Ordin	ary			
		(1)	Discounting of unpaid losses	\$ 94,844	\$ 114,933	\$ (20,089)
		(2)	Unearned premium reserve	155	404	(249)
		(3)	Policyholder reserves	168,000	168,000	_
		(4)	Investments	_	_	_
		(5)	Deferred acquisition costs	_	_	_
		(6)	Policyholder dividends accrual	_	_	_
		(7)	Fixed assets	_	1,760	(1,760)
		(8)	Compensation and benefits accrual	_	_	_
		(9)	Pension accrual	_	_	_
		(10)	Receivables - nonadmitted	337,110	420,645	(83,535)
		(11)	Net operating loss carry-forward	6,068,281	8,705,083	(2,636,802)
		(12)	Tax credit carry-forward			(1,662,155)
		(13)	Other	628,812	2,291,967	(1,663,155)
	(1.)	G	(99) Subtotal (sum of 2a1 through 2a13)	7,297,202	11,702,792	(4,405,590)
	(b)		ory valuation allowance adjustment	7,156,166	11,555,789	(4,399,623)
	(c)		dmitted	141.026	147.002	(5.0(7)
	(d)	Aamı	tted ordinary deferred tax assets (2a99 - 2b - 2c)	141,036	147,003	(5,967)
	(e)	Capita	al			
		(1)	Investments	_	_	_
		(2)	Net capital loss carry-forward	569,405	_	569,405
		(3)	Real estate	_	_	_
		(4)	Other			
			(99) Subtotal (2e1+2e2+2e3+2e4)	569,405	_	569,405
	(f)	Statut	ory valuation allowance adjustment	538,119	_	538,119
	(g)	Nona	dmitted	_	_	_
	(h)	Admi	tted capital deferred tax assets (2e99 - 2f - 2g)	31,286		31,286
	(i)	Admi	tted deferred tax assets (2d + 2h)	\$ 172,322	\$ 147,003	\$ 25,319
				(1)	(2)	(3)
				12/31/2024	12/31/2023	(Col 1-2) Change
(3)	Def	erred T	ax Liabilities:			
	(a)	Ordin	ary			
		(1)	Investments	\$ 140,714	\$ —	\$ 140,714
		(2)	Fixed assets	_	_	_
		(3)	Deferred and uncollected premium	_	_	_
		(4)	Policyholder reserves	_	_	_
		(5)	Other	322	762	(440)
	(b)	Capita	(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	141,036	762	140,274
	(-)	(1)	Investments	31,286	146,241	(114,955)
		(2)	Real estate		_	_
		(3)	Other	_	_	_
			(99) Subtotal (3b1+3b2+3b3)	31,286	146,241	(114,955)
	(c)	Defer	red tax liabilities (3a99 + 3b99)	\$ 172,322		
(4)	Net		ed tax assets/liabilities (2i - 3c)	\$		\$

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

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

	 2024	2023
Tax expense computed using federal statutory rate	\$ 4,399,575 \$	(4,566,200)
Change in nonadmitted assets	80,850	(255,690)
Tax exempt income and dividend received deduction net of proration	(11,462)	(7,347)
Prior year true-up and adjustments	(607,459)	609,198
Interest (federal and state income tax)	_	(18)
Valuation allowance	(3,861,504)	4,220,033
Other, net	 _	(864)
Total	\$ <u> </u>	(888)
Federal income taxes incurred	\$ — \$	(888)
Total statutory income taxes	\$ <u> </u>	(888)

E. Operating loss carryforwards:

(1) At December 31, 2024, the Company had the following unused net operating loss or corporate alternative minimum tax ("AMT") credit carryforwards available to offset future taxable income. The losses or credits will begin to expire as noted.

Unused NOL Carryforwards	Origination Date	Expiration Date	 Unused Corporate AMT Credit Carryforwards	Origination Date	Expiration Date
\$ 28,896,578	2021	2041	\$ _		

- (2) The Company has no federal income taxes available for recoupment.
- (3) The Company has no protective tax deposits reported as admitted assets under Section 6603 of the Internal Revenue Service Code as of December 31, 2024 and 2023.
- **F.** The Company's Federal Income Tax return is a separate filing. No owner has the required 80% to include them in a consolidated return. Thus, no tax sharing agreement is in place for federal income taxes. As of December 31, 2024, the statute of limitations of the 2024, 2023, 2022 and 2021 tax year remains open.

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

- (1) On August 16, 2022, the U.S. government enacted the Inflation Reduction Act which includes a new corporate AMT of 15% on the adjusted financial statement of income ("AFSI") of corporations with average AFSI exceeding \$1.0 billion over a three-year period. The corporate AMT is effective beginning after December 31, 2022. The Company has determined that it is not an applicable corporation, therefore it does not expect to be subject to the corporate AMT in 2024.
- (2) Does the Company's tax-planning strategies include the use of corporate AMT? Yes_____ No \underline{X} __

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

A. Nature of the Relationship

The Company is a wholly-owned subsidiary of Elevance Health, Inc. ("Elevance Health"), a publicly traded company.

As of December 31, 2024, Anthem Partnership Holding Company, LLC ("APHC") owns 55,001 common membership units and 18,000 preferred membership units and MainHealth owns 31,001 common membership units.

B. Significant Transactions for Each Period

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

On December 20, 2023, the Company's parent company, APHC authorized a capital contribution to the Company in the amount of \$24,000,000 which was paid on December 29, 2023. In return, APHC received 24,000 common units.

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

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

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

D. Amounts Due to or from Related Parties

At December 31, 2024 and 2023, the Company reported no amounts due from affiliates. At December 31, 2024 and 2023, the Company reported \$17,582,794 and \$15,244,561 due to affiliates, respectively. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. Management and Service Contracts and Cost Sharing Arrangements

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

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

F. Guarantees or Contingencies for Related Parties

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

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

The Company is owned 64% by APHC and 36% by MaineHealth.

H. Amount Deducted for Investment in Upstream Company

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

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

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

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

Not applicable.

K. Investment in a Foreign Insurance Subsidiary

The Company does not have investments in foreign insurance subsidiaries.

L. Investment in Downstream Non-insurance Holding Companies

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

M. All SCA Investments

The Company has no SCA Investments.

N. Investment in Insurance SCAs

The Company does not have investments in Insurance SCAs.

O. SCA or SSAP 48 Entity Loss Tracking

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

11. Debt

A. Capital Notes and Other Debt

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

B. FHLB (Federal Home Loan Bank) Agreements

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

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

A. Defined Benefit Plan

Not applicable - See Note 12G.

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

E. Defined Contribution Plans

Not applicable - See Note 12G.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

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

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

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

	 2024	2023
Defined contribution plan	\$ 265,304 \$	309,872
Stock incentive compensation plan	172,700	168,318

H. Post Employment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

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

A. Outstanding Shares

The Company has no common stock outstanding.

B. Preferred Stock

The Company has no preferred stock outstanding.

C. Dividend Restrictions

Under Maine law, the Company is limited in the amount of dividends that can be declared without regulatory approval. The Superintendent of Insurance must approve any dividend that, together with all dividends declared during the preceding twelve months, exceeds the greater of the net gain from operations for the twelve-month period ending December 31 of the preceding year or 10% of the Company's surplus to policyholders as of December 31 of the preceding year as long as unassigned surplus is positive. Also, any dividend paid from other than unassigned funds will need the approval of the Superintendent of Insurance.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2025

Within the limitations of (C) above, the Company may not pay dividends during 2025 without prior approval.

F. Unassigned Surplus Restrictions

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

G. Mutual Surplus Advances

Not applicable.

H. Company Stock Held for Special Purpose

There are no shares of stock held for special purposes at December 31, 2024.

I. Changes in Special Surplus Funds

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

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment gains and losses was (\$3,107,602) at December 31, 2024.

K. Surplus Notes

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

L. Restatement due to Prior Quasi-reorganizations

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

M. Quasi-reorganizations over Prior 10 Years

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

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company had no contingent commitments at December 31, 2024 or 2023.

B. Assessments

- (1) The Company is subject to guaranty fund and other assessments by the state(s) in which it writes business. Guaranty fund assessments are accrued at the time of covered insurer insolvencies. Other assessments are accrued at the time the assessment obligation is incurred.
- (2) Not applicable.
- (3) Not applicable.

C. Gain Contingencies

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

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

Not applicable.

E. Joint and Several Liabilities

Not applicable.

F. All Other Contingencies

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice ("DOJ") filed a civil lawsuit against Elevance Health, Inc. in the District Court in a case captioned *United States v. Anthem*, Inc. The DOJ's suit alleges, among other things, that Elevance Health falsely certified the accuracy of the diagnosis data they submitted to the Centers for Medicare and Medicaid Services ("CMS") for risk-adjustment purposes under Medicare Part C and knowingly failed to delete inaccurate diagnosis codes. The DOJ further alleges that, as a result of these purported acts, Elevance Health caused CMS to calculate the risk-adjustment payments based on inaccurate diagnosis information, which enabled Elevance Health to obtain unspecified amounts of payments in Medicare funds in violation of the False Claims Act. The DOJ filed an amended complaint in July 2020, alleging the same causes of action but revising some of its factual allegations. In September 2020, Elevance Health filed a motion to transfer the lawsuit to the Southern District of Ohio, a motion to dismiss part of the lawsuit, and a motion to strike certain allegations in the amended complaint, all of which the District Court denied in October 2022. In November 2022, Elevance Health filed an answer. In March 2023, discovery commenced, and an initial case management conference was held in April 2023. Fact discovery is ongoing. In December 2024, the District Court issued a scheduling order setting the deadlines for the completion of fact discovery in August 2025 and April 2026 for the completion of expert discovery. Elevance Health intends to continue to vigorously defend this suit, which they believe is without merit; however, the ultimate outcome cannot be presently determined.

Other Contingencies

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

In addition to the lawsuits described above, the Company is also involved in other pending and threatened litigation of the character incidental to their business and is from time to time involved as a party in various governmental investigations, audits, reviews and administrative proceedings. These investigations, audits, reviews and administrative proceedings include routine and special inquiries by state insurance departments, state attorneys general, the U.S. Attorney General and subcommittees of the U.S. Congress. Such investigations, audits, reviews and administrative proceedings could result in the imposition of civil or criminal fines, penalties, other sanctions and additional rules, regulations or other restrictions on the Company's business operations. Any liability that may result from any one of these actions, or in the aggregate, could have a material adverse effect on the Company's consolidated financial position or results of operations.

The Company has no other known material contingencies.

Provisions for uncollectible amounts

At December 31, 2024 and 2023, the Company reported admitted assets of \$17,591,400 and \$11,150,723, respectively, in premium receivables and receivables due from uninsured plans. Based upon the Company's experience, any uncollectible receivables are not expected to exceed \$75,603 that was nonadmitted at December 31, 2024; therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company's financial condition.

15. Leases

A. Lessee Operating Lease

The Company has no lessee leasing arrangements.

B. Lessor Leases

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

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

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

Financial instruments that potentially subject the Company to concentrations of credit risk consist primarily of investment securities. All investment securities are managed by professional investment managers within policies authorized by the board of directors. Such policies limit the amounts that may be invested in any one issuer and prescribe certain investee company criteria. As of December 31, 2024, there were no significant concentrations.

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

A. Transfers of Receivables Reported as Sales

Not applicable at December 31, 2024 and 2023.

B. Transfer and Servicing of Financial Assets

Not applicable at December 31, 2024 and 2023.

C. Wash Sales

- (1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.
- (2) At December 31, 2024 and 2023, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

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

A. Administrative Services Only ("ASO") Plans

Not applicable at December 31, 2024.

B. Administrative Services Contract ("ASC") Plans

Not applicable at December 31, 2024.

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

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

(2)	Receivable from	Receivable from Related to		eceivable from Related to 2024			
	Federal government	ACA and Medicare cost sharing and reinsurance programs	\$	4,238,043 \$	5,685,695		
	Uninsured plans	Uninsured business, not including pharmaceutical rebate or provider receivables	\$	— \$	26,151		

- (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or similarly structured cost-based reimbursement arrangements, the Company has recorded no allowances and reserves for the adjustment of recorded revenues and receivables.
- (4) The Company has made no adjustment to revenue resulting from the audit of cost-reimbursement receivables related to revenues recorded in the prior period.

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

No premiums were written by managing general agents or third party administrators during the years ended December 31, 2024 and 2023.

20. Fair Value Measurements

A.

- (1) There are no assets or liabilities measured at fair value as of December 31, 2024 and 2023.
- (2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy
 There are no investments in Level 3 as of December 31, 2024 and 2023.
- (3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

(4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

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

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

There are no assets or liabilities measured at fair value.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2024 and 2023.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Practicable (Carrying Value)
Bonds	\$ 81,459,990	\$ 81,549,643	\$ —	\$81,459,990	s —	s —	\$ —

D. Not Practicable to Estimate Fair Value

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

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

A. Unusual or Infrequent Items

Not applicable at December 31, 2024 and 2023.

B. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2024 and 2023.

C. Other Disclosures

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

D. Business Interruption Insurance Recoveries

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

E. State Transferable and Non-Transferable Tax Credits

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

F. Subprime Mortgage-Related Risk Exposure

- (1) The Company's investment strategy of providing safety and preservation of capital, sufficient liquidity to meet cash flow requirements and the attainment of a competitive after-tax investment return is supported by a well diversified portfolio consisting of many different types of investments. The portion of the Company's investment portfolio with subprime mortgage-related risk exposure is relatively small in comparison to the overall investment portfolio, and consists mainly of investment grade securities with no exposure to collateralized debt obligations. All mortgage related investments are monitored closely as part of the quarterly investment review performed by the Elevance Health Investment Impairment Review Committee.
- (2) The Company did not carry investments in subprime mortgage loans in its portfolio at December 31, 2024 or 2023.
- (3) The Company did not have subprime mortgage-related risk exposure at December 31, 2024 or 2023.
- (4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2024 or 2023.

G. Retained Assets

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

H. Insurance-Linked Securities Contracts

Not applicable.

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

Not applicable.

22. Events Subsequent

Subsequent events have been considered through February 27, 2025 for the statutory statement issued on February 28, 2025. There were no events occurring subsequent to December 31, 2024 requiring recognition or disclosure.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

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

Yes () No (X)

If yes, give full details.

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

Yes () No (X)

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

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

Yes () No (X)

If yes, give full details.

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

Yes () No (X)

If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

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

\$0

	(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?
	Yes $()$ No (X)
	If yes, give full details.
В	. Uncollectible Reinsurance
	The Company has no uncollectible reinsurance at December 31, 2024 and 2023.
C	. Commutation of Ceded Reinsurance
	The Company has not commuted ceded reinsurance during 2024 and 2023.
D	. Certified Reinsurer Rating Downgraded or Status Subject Revocation
	The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2024 and 2023.
E	. Reinsurance Credit
	(1) Not applicable.
	(2) Not applicable.
	(3) Not applicable.
	(4) Not applicable.
	(5) Not applicable.
	(6) Not applicable.
24. R	etrospectively Rated Contracts & Contracts Subject to Redetermination
A	• The Company sells accident and health policies for which the premiums vary based on loss experience. The Company estimates retrospective premium adjustments through the review of each retrospectively rated account, comparing the claim development with that anticipated in the policy contracts.
В	. The Company records accrued retrospective premium as an adjustment to earned premium.
C	. All of the Company's premiums written in 2024 and 2023 were subject to retrospective rating features.
D	. Not applicable.
E	Risk-Sharing Provisions of the ACA
	(1) Did the reporting entity write accident and health insurance premium that is subject to

the Affordable Care Act risk-sharing provisions (YES/NO)? No

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

Not applicable.

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

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

- **A.** The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$8,056,042 during 2024. This is approximately 23.4% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$34,484,099 as of December 31, 2023. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2024. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- **B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable at December 31, 2024 and 2023.

27. Structured Settlements

Not applicable at December 31, 2024 and 2023.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2024	\$ 2,946,059	\$ 8,986,729	\$ 6,040,670	\$ —	\$ —
9/30/2024	2,759,730	8,085,353	7,936,074		
6/30/2024	2,579,272	7,472,370	7,323,459	148,911	
3/31/2024	2,219,048	7,969,903	7,814,414	155,490	_
12/31/2023	\$ 2,726,623	\$ 8,669,306	\$ 8,521,658	\$ 147,649	\$ —
9/30/2023	3,156,092	9,316,652	9,211,955	104,697	_
6/30/2023	3,061,801	8,750,247	8,649,107	101,140	_
3/31/2023	3,559,432	8,700,191	8,478,545	221,646	_
12/31/2022	\$ 3,141,947	\$ 8,324,603	\$ 8,131,311	\$ 193,291	\$ —
9/30/2022	2,684,974	7,870,807	7,755,205	115,602	_
6/30/2022	2,959,999	8,029,746	7,860,887	168,859	_
3/31/2022	2,581,474	6,979,465	6,856,258	123,208	_

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

B. Risk Sharing Receivables

Not applicable at December 31, 2024 and 2023.

29. Participating Policies

Not applicable at December 31, 2024 and 2023.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$	662,440
2. Date of the most recent evaluation of this liability	D	December 31, 2024
3. Was anticipated investment income utilized in the calculation?	Yes	No X

The Company recorded premium deficiency reserves of \$10,589,791 at December 31, 2023.

31. Anticipated Salvage and Subrogation

The Company took into account estimated anticipated subrogation and other recoveries in its determination of the liability for unpaid claims and reduced the liability by \$74,000 and \$107,000 at December 31, 2024 and 2023, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

	1 Nationality	2 Type of Entity				
	7.21 State the percentage of foreign control	ntity is a mutual or reciprocal, the nationality of its manager or oration, government, manager or attorney-in-fact).	····· <u></u>			%
7.1	If yes,			ν ο [j NU	v 1
7.1	Does any foreign (non-United States) person or entity directly or indirectly	control 10% or more of the reporting entity?	v	'es [] No !	(X 1
6.1	Has the reporting entity had any Certificates of Authority, licenses or regist revoked by any governmental entity during the reporting period?			es [] No	X]
6.4	Name of Entity Has the constituted and Cartificates of Authority licenses or registered.		Lor			
	1	2 3				
5.2	If yes, complete and file the merger nistory data file with the NAIC. If yes, provide the name of the entity, NAIC company code, and state of do ceased to exist as a result of the merger or consolidation.	omicile (use two letter state abbreviation) for any entity that has				
5.1	Has the reporting entity been a party to a merger or consolidation during the lf yes, complete and file the merger history data file with the NAIC.	ne period covered by this statement?		-	-	
		f new business?ls?] No] No	
4.2	During the period covered by this statement, did any sales/service organiz receive credit or commissions for or control a substantial part (more than 2	ation owned in whole or in part by the reporting entity or an affilia		es [] No	۸۱
4.1		s of the reporting entity) receive credit or commissions for or cont	Ү] No	
3.6	Have all of the recommendations within the latest financial examination re	port been complied with?	s []	No [] N/	4 [X]
3.5	Have all financial statement adjustments within the latest financial examinstatement filed with Departments?		s []	No [] N/	A [X]
3.4	By what department or departments? State of Maine Bureau of Insurance					
3.3	State as of what date the latest financial examination report became availad omicile or the reporting entity. This is the release date or completion date examination (balance sheet date).	e of the examination report and not the date of the				
3.2	State the as of date that the latest financial examination report became aventity. This date should be the date of the examined balance sheet and no	railable from either the state of domicile or the reporting of the date the report was completed or released				
3.1	State as of what date the latest financial examination of the reporting entity	y was made or is being made		12/31/	2022	
2.2	If yes, date of change:			05/17/		,
2.1	Has any change been made during the year of this statement in the charter reporting entity?		٧	′es [X] No	(1
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issu			000115		,
1.4	Is the reporting entity publicly traded or a member of a publicly traded grou		Y] No	i 1
1.3	State Regulating?			Mair		
1.2	If yes, did the reporting entity register and file with its domiciliary State Inst such regulatory official of the state of domicile of the principal insurer in the providing disclosure substantially similar to the standards adopted by the tis Model Insurance Holding Company System Regulatory Act and model subject to standards and disclosure requirements substantially similar to the	e Holding Company System, a registration statement National Association of Insurance Commissioners (NAIC) in regulations pertaining thereto, or is the reporting entity	s[X]	No [1 N/	A []
1.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?			es [X] No]

8.1 8.2	Is the company a subsidiary of a depository institution holding compan If the response to 8.1 is yes, please identify the name of the DIHC.	y (DIHC) or a DIHC itself, regulated by the Federal F	Reserve B	oard?	Yes	[]	No [Χ]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fill fresponse to 8.3 is yes, please provide below the names and location federal financial regulatory services agency [i.e. the Federal Reserve Federal Deposit Insurance Corporation (FDIC) and the Securities Exclaregulator.	is (city and state of the main office) of any affiliates r Board (FRB), the Office of the Comptroller of the Cur	egulated b	oy a CC), the	Yes]]	No [Х]
	1	2	3	4	5 6		1		
	Affiliate Name	Location (City, State)	FRB C	OCC F	FDIC SE	EC			
8.5	Is the reporting entity a depository institution holding company with sig	nificant insurance operations as defined by the Boar	d of Gove	rnors of			_		
8.6	Federal Reserve System or a subsidiary of the depository institution he lif response to 8.5 is no, is the reporting entity a company or subsidiary Federal Reserve Board's capital rule?	olding company? of a company that has otherwise been made subject	t to the		Yes	Ī.,		No [N/A	
9.	What is the name and address of the independent certified public according to the independent certified to the independent certifi				, , , , , ,		. ,	,	
	Ernst & Young LLP, 111 Monument Circle, Suite 4000, Indianapolis, IN								
10.1	Has the insurer been granted any exemptions to the prohibited non-au requirements as allowed in Section 7H of the Annual Financial Report law or regulation?	ing Model Regulation (Model Audit Rule), or substan	tially simil	ar state		[]	No [Х]
10.2	If the response to 10.1 is yes, provide information related to this exem								
10.3 10.4	Has the insurer been granted any exemptions related to the other requallowed for in Section 18A of the Model Regulation, or substantially sir If the response to 10.3 is yes, provide information related to this exem	uirements of the Annual Financial Reporting Model R nilar state law or regulation?	egulation	as		[]	No [Х]
10.5 10.6	Has the reporting entity established an Audit Committee in compliance If the response to 10.5 is no or n/a, please explain.	with the domiciliary state insurance laws?		··· Yes	E [X] No) []	N/A	[]
10.0	ii the response to 10.5 is no of that, please explain.								
11.	What is the name, address and affiliation (officer/employee of the reposition) of the individual providing the statement of actuarial opinion/certifichristine Valdez, FSA, MAAA, Director & Actuary III (employee): 2045	fication?			Ü				
12.1	Does the reporting entity own any securities of a real estate holding co	mpany or otherwise hold real estate indirectly?			Yes	[]	No [Χ]
		estate holding company							
		rcels involvedusted carrying value							
12.2	If yes, provide explanation	usted carrying value			Ф				
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITI	ES ONLY:			•••				
13.1	What changes have been made during the year in the United States n	nanager or the United States trustees of the reporting	g entity?						
13.2	, ,					[]	No []
13.3	Have there been any changes made to any of the trust indentures duri	9 ,				-	-	No []
13.4 14.1	If answer to (13.3) is yes, has the domiciliary or entry state approved the Are the senior officers (principal executive officer, principal financial of				s [] No) []	N/A	[]
17.1	similar functions) of the reporting entity subject to a code of ethics, whi a. Honest and ethical conduct, including the ethical handling of actual relationships; b. Full, fair, accurate, timely and understandable disclosure in the period	ich includes the following standards?or apparent conflicts of interest between personal ar	nd profess		Yes	[X]	No []
	c. Compliance with applicable governmental laws, rules and regulation	ns;							
	d. The prompt internal reporting of violations to an appropriate person	or persons identified in the code; and							
14.11	e. Accountability for adherence to the code. If the response to 14.1 is No, please explain:								
	Has the code of ethics for senior managers been amended?				···· Yes	[X]	No []
14.21	If the response to 14.2 is yes, provide information related to amendme 1. Changes to lobbying section to clarify that the policies in the section the Gifts and Special Courtesies section to ensure language on the progovernment officials, 3. Changes to the Code of Conduct to strengthen grievance process, 4. Added provisions for the use of Generative Al and / suppliers are required to adhere to RAI policies and guidelines, 5. Added provisions for the use of Generative Al and / suppliers are required to adhere to RAI policies and guidelines, 5. Added provisions for the use of Generative Al and / suppliers are required to adhere to RAI policies and guidelines, 5. Added provisions for the use of Generative Al and / suppliers are required to adhere to RAI policies.	apply to foreign government officials as well as domocess for requesting an exception to the prohibition of and clarify the scope and guiding principles for hum d Large Language Models (LLMs) and expanded to	on gifts to an rights clarify tha	and the t vendor	rs				
	Have any provisions of the code of ethics been waived for any of the s					[]	No [Χ]
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).								

		1			
1 American Bankers Association	2		3	4	ŀ
(ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances T	hat Can Trigger the Letter of Credit	Amo	ount
	BOARI	D OF DIRECTORS	S		
	or sale of all investments of the reporting entity passed u	upon either by the board of	directors or a subordinate committee	Yes [X] No
thereof?	ng entity keep a complete permanent record of the proce			Yes [X] No
part of any of its	g entity an established procedure for disclosure to its bo officers, directors, trustees or responsible employees th	nat is in conflict or is likely to	o conflict with the official duties of such	Yes [X] No
		FINANCIAL			
Accounting Prince	ent been prepared using a basis of accounting other than ciples)?				
Total amount loa	ned during the year (inclusive of Separate Accounts, ex	xclusive of policy loans):			
			20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Fraternal Only)		
Total amount of	loans outstanding at the end of year (inclusive of Separa	ate Accounts, exclusive of	•		
policy loans):	, , , , , , , , , , , , , , , , , , , ,		20.21 To directors or other officers		
			20.22 To stockholders not officers	\$	
			20.23 Trustees, supreme or grand	_	
Were any accets	reported in this statement subject to a contractual oblig	nation to transfer to anothe	(Fraternal Only)	\$	
obligation being	reported in the statement?	gation to transfer to anothe		Yes [] No
If yes, state the a	amount thereof at December 31 of the current year:		21.21 Rented from others		
			21.22 Borrowed from others		
			21.23 Leased from others	\$	
			21.24 Other	\$	
Does this statem	ent include payments for assessments as described in	the Annual Statement Insti	ructions other than guaranty fund or	V [1 N.
guaranty associa If answer is yes:	ation assessments?		.21 Amount paid as losses or risk adjustme		
ii aiiswei is yes.			.22 Amount paid as expenses		
			·		
Doos the reporti	ng entity report any amounts due from parent, subsidiari		.23 Other amounts paid		
	ny amounts receivable from parent included in the Page				
Does the insurer	utilize third parties to pay agent commissions in which t	the amounts advanced by	the third parties are not settled in full within	v .	
	o 24.1 is yes, identify the third-party that pays the agents			•	
		Is the	\neg		
		Third-Party Age			
	Name of Third-Party	a Related Party (Yes/No)	/		
	-				
		NVESTMENT			

25.02	If no, give full and complete information, relating thereto					
25.03	For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided) See Notes 5E and 17.					
25.04	For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Calinstructions.	apital	\$			C
25.05	For the reporting entity's securities lending program, report amount of collateral for other programs.		\$			C
25.06	Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?	Yes [] No]	N/A	[X]
25.07	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes [] No []	N/A	[X]
25.08	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending?	Yes [] No]	N/A	(X]
25.09	For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:					
	 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 Total payable for securities lending reported on the liability page 	\$				C
26.1	Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03).		Yes [Х]	No []
26.2	If yes, state the amount thereof at December 31 of the current year: 26.22 Subject to reverse repurchase agreements	ents	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		1	(
	26.32 Other		\$			0
26.3	For extensive (26.26) provide the following:					
26.3	For category (26.26) provide the following:			3		\neg
26.3				noun		
26.3	1 2 Nature of Restriction Description	•		noun		
	1 2 Nature of Restriction Description		Yes [noun	No [Х]
27.1 27.2	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		Yes [noun	No [Х]
27.1 27.2	1 2 Nature of Restriction Description Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	 Yes [Yes []	No [X]
27.1 27.2 INES 2	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	Yes [Yes []	No [N/A No [No [No [No [X]
27.1 27.2 LINES 2 27.3	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY: Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity of the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP No. 108 27.42 Permitted accounting practice	Yes [ity?	Yes [Yes [Yes [Yes [Yes []]]	No [N/A No [No [No [No [X] X] 3
27.1 27.2 INES 2 27.3 27.4	1 Nature of Restriction Description Does the reporting entity have any hedging transactions reported on Schedule DB?	Yes [ity?	Yes [] No Yes [Yes [Yes [Yes []]]]	No [N/A No [No [No [No [No [X] X]]]
27.1 27.2 INES 2 27.3 27.4	Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY: Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity of the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP No. 108	Yes [ity?	Yes [] No Yes [Yes [Yes [Yes [Yes []]]]]	No [N/A No [No [No [No [No [X]
27.1 27.2 IINES 2 27.3 27.4 27.5	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB?	Yes [ity? I-21 ed y in the tity's	Yes [] No Yes [Yes [Yes [Yes [Yes [)]]]]	No [No [No [No [No [No [X] X] 3 X
27.1 27.2 INES 2 27.3 27.4 27.5	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY: Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivility the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP No. 108. 27.42 Permitted accounting provision of SSAP No. 108. 27.43 Other accounting guidance 27.43 Other accounting guidance 37.43 Other accounting guidance 4. Hedging strategy subject to the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: 4. The reporting entity has obtained explicit approval from the domiciliary state. 5. Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21. 6. Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount. 6. Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Define Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company its actual day-to-day risk mitigation efforts. Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of tissuer, convertible into equity? If yes, state the amount thereof at December 31 of the current year. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting endifices, vaults or s	Yes [ity? I-21 ed y in the tity's	Yes [] No Yes [Yes [Yes [Yes [Yes [)]]]]	No [No [No [No [No [No [X] X] 3 X
27.1 27.2 INES 2 27.3 27.4 27.5	Nature of Restriction Does the reporting entity have any hedging transactions reported on Schedule DB? If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY: Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity of the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP No. 108. 27.42 Permitted accounting provision of SSAP No. 108. 27.43 Other accounting guidance 27.43 Other accounting guidance 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 certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount. • Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Define Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company its actual day-to-day risk mitigation efforts. Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of tissuer, convertible into equity? If yes, state the amount thereof at December 31 of the current year. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity offices, vaults or safely deposit b	Yes [rity?	Yes [] No Yes [Yes [Yes [Yes [Yes [Yes []]] X]	No [No [No [No [No [No [No [x] X] X] X]

GENERAL INTERROGATORIES

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

	1 Name(s)	1 2 3 3 ne(s) Complete Explana		2 Location(s)		2 Somplete Ex		ation(s)	
	Have there been any changes, including name change If yes, give full and complete information relating there	• •	luring the current	: year?	Yes [] N	No [X			
	1	2	3	4					

Old Custodian New Custodian Date of Change Reason

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

1	2
Name of Firm or Individual	Affiliation
Elevance Health, Inc	UU

29.03 29.04

designated with a "U") manage more than 10% of the reporting entity's invested assets?	Yes [X] No []
29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?	Yes [X] No [1

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

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
			Securities Exchange	
104863	Income Research & Management	254900R033N8JBVSKJ39	Commission	NO
	•		Securities Exchange	
105377	Loomis, Sayles & Company, LP		Commission	NO
	,, 1 ,,			

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

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

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

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

GENERAL INTERROGATORIES

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

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
31.1 Bonds	81,549,643	81,459,990	(89,653)
31.2 Preferred stocks	0	0	0
31.3 Totals	81,549,643	81,459,990	(89,653)

31.4	Describe the sources or methods utilized in determining the fair values:					
	Fair values were obtained from third-party pricing sources. If a security was not priced by a third-party pricing source, internal analytical systems or broker quotes were utilized.					
32.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Y	es []	No [Х]
32.2	If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Υ	es []	No []
32.3	If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:					
33.1 33.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Y	es [Х]	No []
34.	By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities?	Υ	es [1	No [X]
35.	By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security: a. The security was either: i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities"). b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security. c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators. d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation. Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?	Υ	es []	No [Х]
36.	By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?	Υ	es [1	No [X]
37.	By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following: a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date. b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties. c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review. d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments. Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?]	No	[X]	N/A	[]

38.1	Does the reporting entity directly hold cryptocurrencies?			Yes [] No [X]			
38.2	If the response to 38.1 is yes, on what schedule are they reported?							
39.1	Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?							
39.2	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							
39.3	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 Immediatel Converted to L Name of Cryptocurrency Directly Held, or	ÍSD, P Both F	3 ccepted for ayment of Premiums					
	OTHER	,		 -				
40.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?			\$	13,508			
40.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the service organizations, and statistical or rating bureaus during the period covered by this statement.	total payments to tra	ade associatio	ons,				
	1 Name	2 Amount Paid						
	Blue Cross Blue Shield Association	13,	508					
41.1	Amount of payments for legal expenses, if any?		<u>_</u>	\$	386, 108			
41.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total pay during the period covered by this statement.	ments for legal expe	enses					
	1	2						
	Name Omelveny & Myers	Amount Paid						
	Nelson Mullins Rileys	121,	338					
42.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers, or depart	ments of governme	nt, if any?	\$	5,935			
42.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total pay connection with matters before legislative bodies, officers, or departments of government during the period of							
	1 No	2						
	Name Preti Flaherty Beliveau Pachios LLP	Amount Paid	874					
	Serlin Haley	2,						
	Lobbying expenses disclosed reflect amounts reported in the Lobbyist Disclosure Reports filed with the Secretary of State as well as the cost of external contractors who provided lobbying services to the Company. The amount may include expenses that may have been paid by an affiliate on behalf of the Company and, as a result, may not be included in the Underwriting Gain reported on page 4 of the 2024 Annual Statement.	; 						
		+						

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 1.2	Does the reporting entity have any direct Medicare Supplement Insurance in force?				
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance 1.31 Reason for excluding				
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien	not included in Item (1.2) above	.\$		
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.				
1.6	Individual policies:	Most current three years:			
	•	1.61 Total premium earned	\$	0	
		1.62 Total incurred claims			
		1.63 Number of covered lives	-		
				0	
		All years prior to most current three years:		_	
		1.64 Total premium earned			
		1.65 Total incurred claims			
		1.66 Number of covered lives		0	
1.7	Group policies:	Most current three years:			
		1.71 Total premium earned	\$	0	
		1.72 Total incurred claims			
		1.73 Number of covered lives	-		
		All years prior to most current three years:		0	
		1.74 Total premium earned			
		1.75 Total incurred claims			
		1.76 Number of covered lives		0	
2.	Health Test:				
		1 2			
		Current Year Prior Year			
	2.1 Premium Numerator				
	2.2 Premium Denominator	241,121,079232,600,910			
	2.3 Premium Ratio (2.1/2.2)				
	2.4 Reserve Numerator				
	2.5 Reserve Denominator				
	2.6 Reserve Ratio (2.4/2.5)				
3.1	Has the reporting entity received any endowment or gift from contracting hospital returned when, as and if the earnings of the reporting entity permits?		Yes [] No [X]	
3.2	If yes, give particulars:				
4.1	Have copies of all agreements stating the period and nature of hospitals', physic dependents been filed with the appropriate regulatory agency?		Yes [X] No []	
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do the	se agreements include additional benefits offered?	Yes [] No []	
5.1	Does the reporting entity have stop-loss reinsurance?		Yes [] No [X]	
5.2	If no, explain:				
5.3	Maximum retained risk (see instructions)	5.31 Comprehensive Medical	¢		
0.0		5.32 Medical Only			
		5.32 Medicare Supplement			
		5.34 Dental & Vision			
		5.35 Other Limited Benefit Plan			
		5.36 Other	.\$		
6.	Describe arrangement which the reporting entity may have to protect subscribers hold harmless provisions, conversion privileges with other carriers, agreements agreements:	with providers to continue rendering services, and any other			
7.1	Does the reporting entity set up its claim liability for provider services on a service	ce date basis?	Yes [X] No []	
7.2	If no, give details				
8.	Provide the following information regarding participating providers:	8.1 Number of providers at start of reporting year.			
		8.2 Number of providers at end of reporting year		14,703	
9.1	Does the reporting entity have business subject to premium rate guarantees?		Yes [] No [X]	
				-	
9.2	If yes, direct premium earned:	9.21 Business with rate guarantees between 15-36 months. 9.22 Business with rate guarantees over 36 months			

10.1	Does the reporting entity have Incentive Pool, Withh	old or Bonus Ar	rangements in its p	rovider contracts?			Yes [X]	No []
10.2	If yes:		10 10).22 Amount actua).23 Maximum am	lly paid for year bo ount payable withh	sesnusesolds	\$	4,142,404
11.1	Is the reporting entity organized as:							
				11.13 An Individ	ll Group/Staff Mode dual Practice Asso Model (combination	ciation (IPA), or,	Yes [] No [X]] No [X]] No [X]
11.2 11.3 11.4	Is the reporting entity subject to Statutory Minimum (If yes, show the name of the state requiring such mill fyes, show the amount required	nimum capital a	nd surplus					No [] Maine 22,689,965
11.5 11.6	Is this amount included as part of a contingency reself the amount is calculated, show the calculation 250% of Health Risk-Based Capital Authorized Cont	erve in stockhold	der's equity?				Yes []] No [X]
12.	List service areas in which reporting entity is license	d to operate:						
			1 Name of Service					
13.1	Do you act as a custodian for health savings accoun	nts?					Yes []	No [X]
13.2	If yes, please provide the amount of custodial funds	held as of the re	porting date				\$	
13.3	Do you act as an administrator for health savings ac	counts?					Yes []	No [X]
13.4	If yes, please provide the balance of funds administe	ered as of the re	porting date				\$	
14.1 14.2	Are any of the captive affiliates reported on Scheduli If the answer to 14.1 is yes, please provide the follow		orized reinsurers?			Yes [] No [] N/A [X]
	1	2	3	4		Supporting Reserv		
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
15.	Provide the following for individual ordinary life insurceded):	ance* policies (l	J.S. business only)	-	ar (prior to reinsura	ince assumed or		
				15.2 T	otal Incurred Claim	ns Lives	\$	
	Term(whether full und Whole Life (whether f Variable Life (with or Universal Life (with or Variable Universal Life	derwriting, limiter full underwriting, without secondar without second	limited underwritin ry gurarantee) ary gurarantee)	ssue, "short form a g, jet issue, "short				
16.	Is the reporting entity licensed or chartered, registered	ed, qualified, elig	gible or writing busi	ness in at least two	o states?		Yes [] N	o [X]
16.1	If no, does the reporting entity assume reinsurance to domicile of the reporting entity?						Yes [] N	lo [X]

FIVE-YEAR HISTORICAL DATA

		1 2024	2 2023	3 2022	4 2021	5 2020
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	116,312,375	114,510,151	96,659,501	113,783,409	54,566,885
2.	Total liabilities (Page 3, Line 24)					
3.	Statutory minimum capital and surplus requirement .					
4.	Total capital and surplus (Page 3, Line 33)					
-	Income Statement (Page 4)	,- ,	, , , , , ,	, , ,		, ,
5.	Total revenues (Line 8)	241.121.079	232 .600 .910	224 .449 .133	169.263.979	76 . 115 . 663
6.	Total medical and hospital expenses (Line 18)					
7.	Claims adjustment expenses (Line 20)					
8.	Total administrative expenses (Line 21)					
9.	Net underwriting gain (loss) (Line 24)					
10.	Net investment gain (loss) (Line 27)					
11.	Total other income (Lines 28 plus 29)					
12.	Net income or (loss) (Line 32)					
12.	Cash Flow (Page 6)	20,000,007	(21,712,010)	(20,001,010)	(0,020,010)	(001,710
13.	Net cash from operations (Line 11)	(0.858.605)	(10, 102, 811)	(13.045.467)	(676 310)	11 164 297
13.	Risk-Based Capital Analysis	(9,030,093)	(10,102,011)	(10,040,407)	(070,519)	11, 104,237
14	Total adjusted capital	62 002 121	40 064 043	20 004 220	20 7/1 705	14 101 020
14.	Authorized control level risk-based capital					
15.	•	9,073,300	9,550,190	9,733,380		
40	Enrollment (Exhibit 1) Total members at end of period (Column 5, Line 7)	16 074	16 070	17 201	14 150	7 646
16.	Total members at end of period (Column 5, Line 7) Total members months (Column 6, Line 7)					
17.	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0	193,393	200,043	202,037	100,365	
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)	88.0	95.7	95.8	88.3	84.1
20.	Cost containment expenses				3.1	
21.	Other claims adjustment expenses	1.1	1.5	1.7	1.9	2.0
22.	Total underwriting deductions (Line 23)	93.6	110.6	113.1	103.7	101.0
23.	Total underwriting gain (loss) (Line 24)	6.4	(10.6)	(13.1)	(3.7)	(1.0
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 17, Col. 5)	25,412,728	29,093,370	27,575,194	10,559,035	
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	33,754,472	31,730,056	26,257,959	12,792,387	0
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)			0		0
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)				0	0
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	5,392,398	3,890,575	3,749,378	3,936,356	2,238,256
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)		0	0		0
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31	5,392,398	3,890,575	3,749,378	3,936,356	2,238,256
33.	Total investment in parent included in Lines 26 to 31 above.					

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated	by States	and Territ	tories

1	Allocated by States and Territories											
			1	2	3	4	5	6 Federal Employees	7 Life and	8	9	10
1.	States, etc.	A1	Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Health Benefits Program Premiums	Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
2.	Alaska		N								0	
3.	Arizona		N								0	
4.	Arkansas	AR	N								0	
5.	California	CA	N								0	
6.	Colorado		N								0	
7. 8.	Connecticut Delaware	CT DE	N								0	
9.		DC	N								0	
10.	Florida	FL	N								0	
11.	Georgia	-	N								0	
12.	Hawaii	HI ID	N								0	
13. 14.	IdahoIllinois	ID IL	N								0	
15.	Indiana		N								0	
16.	lowa	IA	N								0	
17.	Kansas	-	N								0	
18.	-		N								0	
19. 20.	Louisiana Maine		N L		237 , 177 , 246						0	
20.	Maryland		N		201 , 111 ,240						0	
22.	Massachusetts	MA	N								0	
23.	Michigan	MI	N								0	
24.			N								0	
25. 26.	Mississippi		N								0	
27.	Montana	MT	N								0	
28.	Nebraska	NE	N								0	
29.		NV	N								0	
30. 31.	New Hampshire		N								0	
32.	New Jersey New Mexico		N								0	
33.			N								0	
34.	North Carolina	NC	N								0	
35.			N								0	
36. 37.	Ohio Oklahoma		N								0	
38.	Oregon	OR	N								0	
39.	Pennsylvania		N								0	
40.	Rhode Island		N								0	
41.	South Carolina	SC	N								0	
42. 43.	South Dakota Tennessee	SD TN	N N								0	
44.	Texas	TX	N								0	
45.	Utah	UT	N								0	
46.			N								0	
47. 48.	Virginia Washington		N N								0	
46. 49.	West Virginia		N								0	
50.	Wisconsin		N								0	
51.	Wyoming	WY	N								0	
52.	American Samoa		N								0	
53. 54.	Guam Puerto Rico	GU PR	N								0	
55.	U.S. Virgin Islands		N								0	
56.	Northern Mariana	ME	NI.								_	
57.	Islands		N								0	
58.	Aggregate Other											
	Aliens		XXX	0	0	0	0	0	0	0	0	0
59. 60.	Subtotal Reporting Entity Contributions for En	nployee	XXX	0	237 , 177 ,246	0	0	0	0	0	237 , 177 , 246	0
61	Benefit Plans		XXX		007 177 040						0	
61.	Totals (Direct Busine DETAILS OF WRITE	,	XXX	0	237,177,246	0	0	0	0	0	237, 177, 246	0
58001.			XXX									
58002.			XXX									
58003. 58998	Summary of remainir		XXX									
55550.	write-ins for Line 58 f	from										
58999.	overflow page Totals (Lines 58001 t 58003 plus 58998)(Li	through	XXX	0	0	0	0	0	0	0	0	0
(a) Activ	above) e Status Counts:		XXX	0	0	0	0	0	0	0	0	0

(a)	Active	Status	Counts:

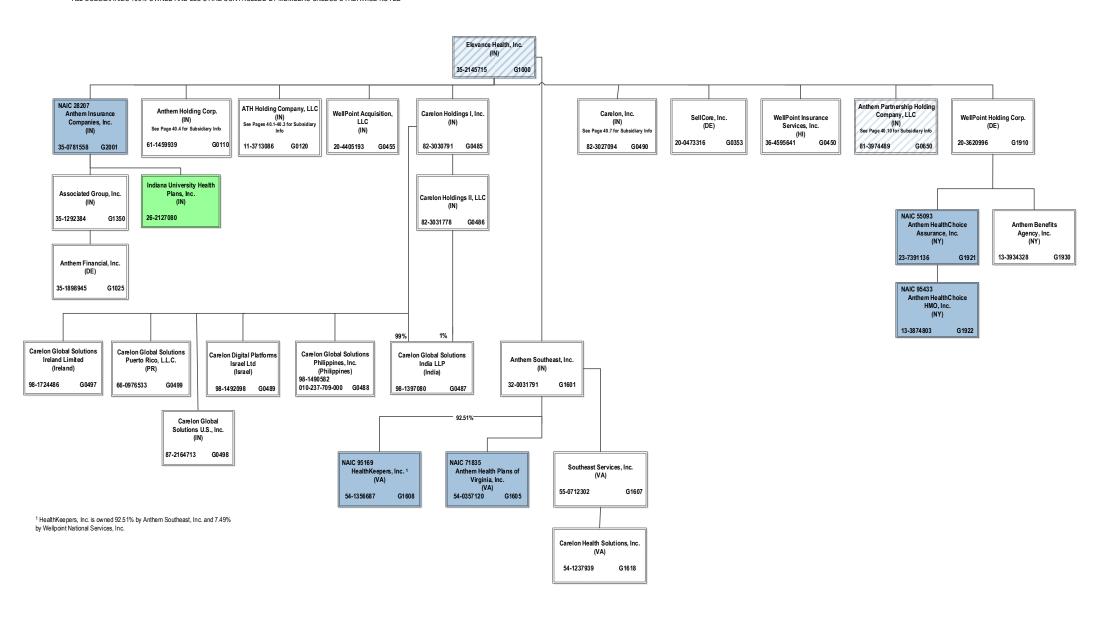
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

BCBSA Licensee

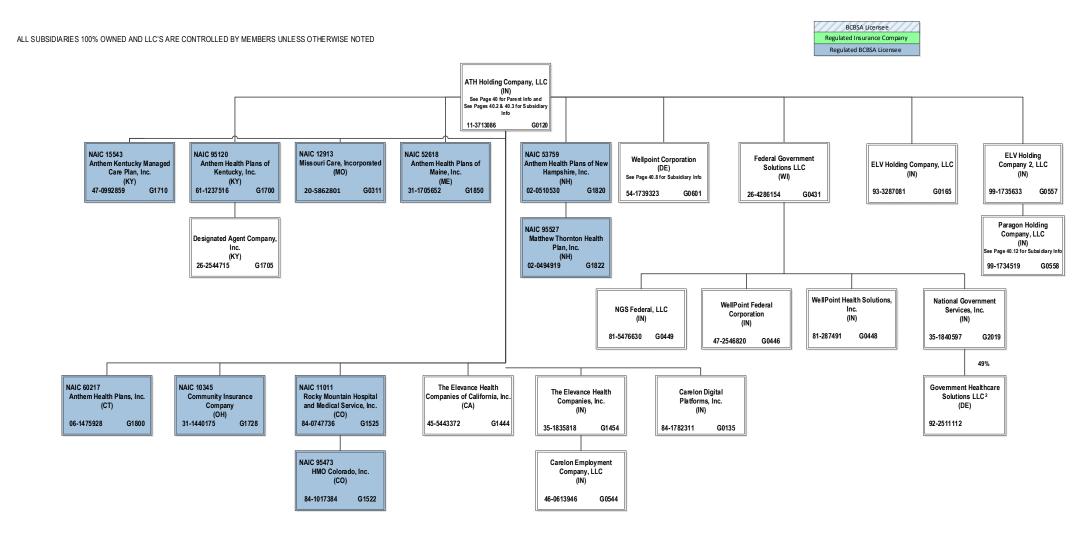
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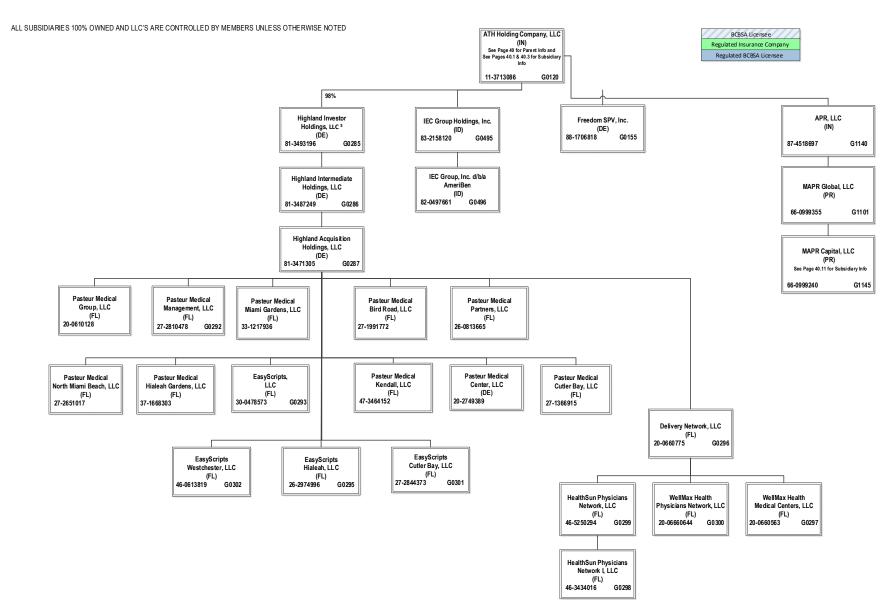
Regulated SCBSA Licensee



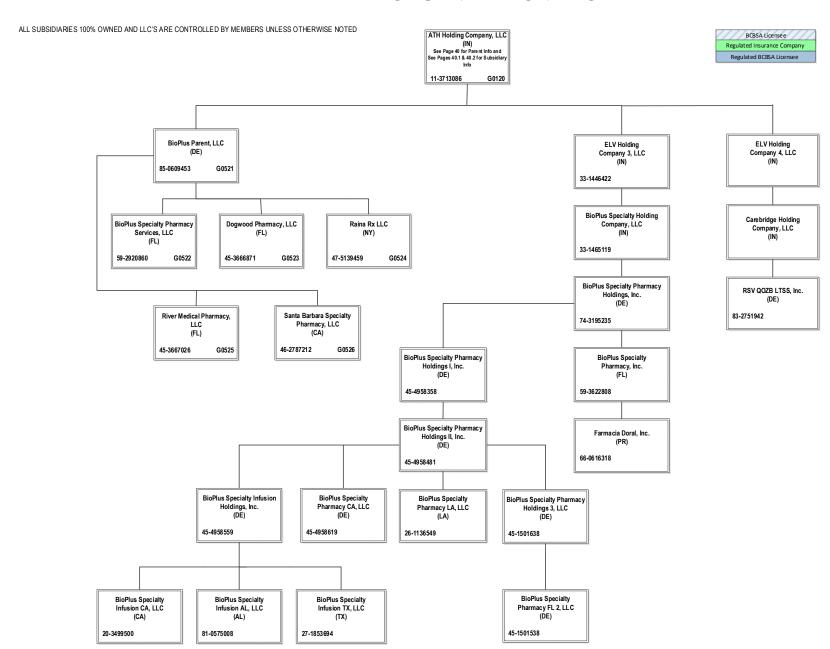
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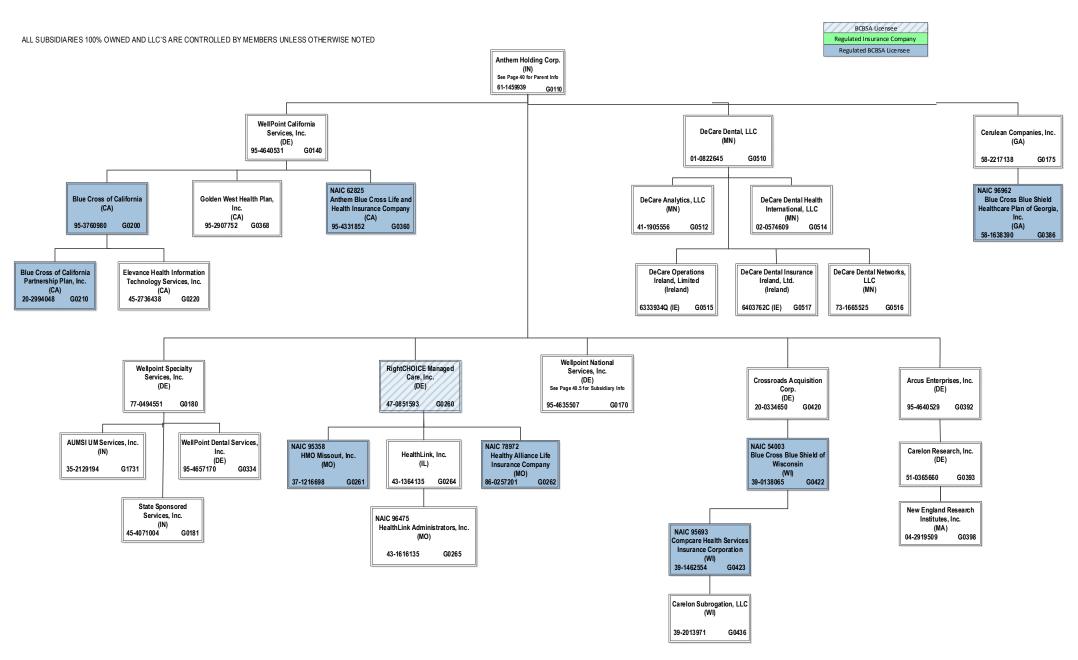
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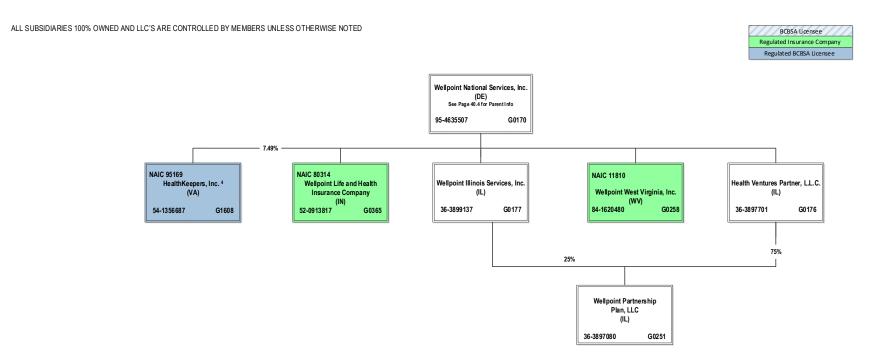
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



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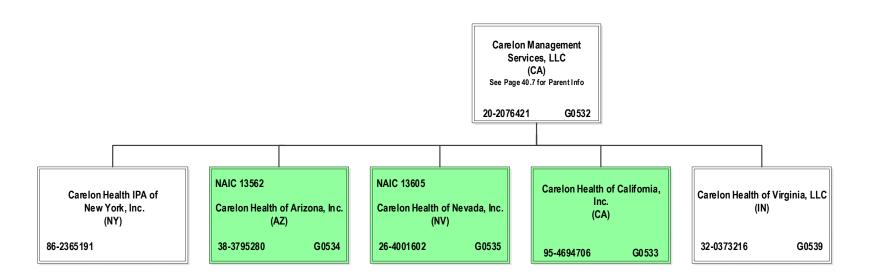
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee

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

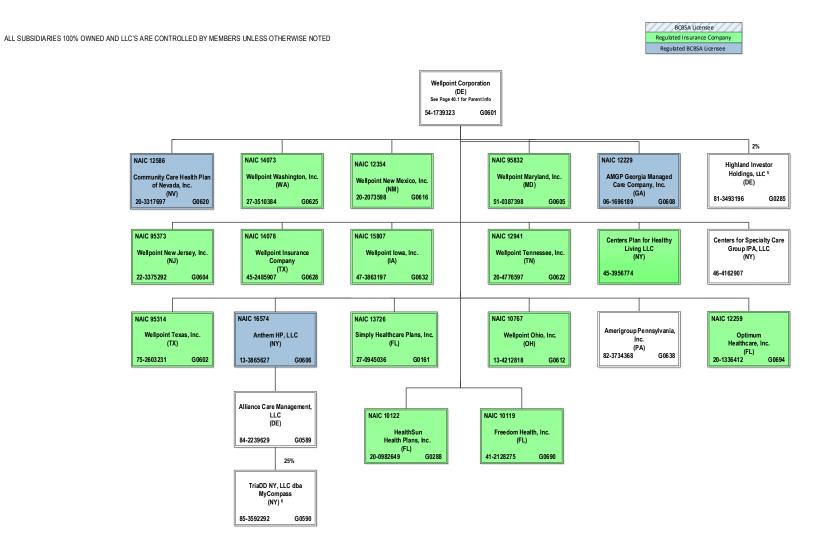


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

BCBSA Licensee
Regulated Insurance Company

Regulated BCBSA Licensee ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED Carelon, Inc. See Page 40 for Parent Info 82-3027094 G0490 Carelon Behavioral Health Holdings, Inc. CarelonRx, Inc. Carelon Insights, Inc. Nash Holding Carelon Health, Inc. Wellpoint IPA Holding Company, LLC Company, Inc. See Page 40.9 for Subsidiary Info (DE) 82-3062245 G0491 82-3300542 G0494 G0493 54-1230110 G0563 83-0892028 G0230 99-3881969 CarelonRx Pharmacy, Inc. Carelon Palliative Care, Inc. (DE) Carelon Management Services, LLC G0231 47-3025203 G0520 90-1057454 Wellpoint IPA of NY, LLC See Page 40.6 for Subsidiary Info 45-4985009 G0540 20-2076421 G0532 Healthcare Subrogation Carelon Medical Benefits Management, Inc. Group, L.L.C. 4600 Group Holdings, LLC (DE) (IL) (CA) 20-8188236 G0595 36-3692630 G0441 4600 Group, LLC (CA) Carelon Insights IPA of Carelon Health of Texas New York, LLC (NY) 81-4603181 G0594 G0596 85-0541810 Boehm & Associates, LLC (CA)

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



 $^{^5}$ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

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

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

BCBSA Licensee Regulated Insurance Company Regulated BCBSA Licensee ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED Carelon Behavioral Health Holdings, Inc. See Page 40.7 for Parent Info G0563 54-1230110 Carelon Behavioral Carelon Behavioral Care, Inc. Health, Inc. (VA) 82-5334761 G0564 54-1414194 G0571 NAIC 15448 Carelon Behavioral Health Carelon Behavioral Health of NAIC 47025 Living Complete Carelon Behavioral Health IPA, Carelon Health Federal **OPTIONS Health** Carelon Health of California, Inc. Carelon Health of Technologies, Inc. Services, Inc. Strategies, LLC Care, Inc. New Jersey, Inc. (CA) Pennsylvania, Inc. (MD) (NY) (VA) (MA) 50% (DE) 04-3324848 G0567 95-4297571 G0572 23-2918735 G0576 02-0581429 G0125 13-3934920 G0577 45-4238555 G0579 46-2053405 G0578 54-1826967 G0581 50% Carelon Behavioral Health Strategies IPA, LLC (NY) Massachusetts Behavioral Health Partnership 45-5208205 G0568 (General Partnership) 04-3307857 G0584

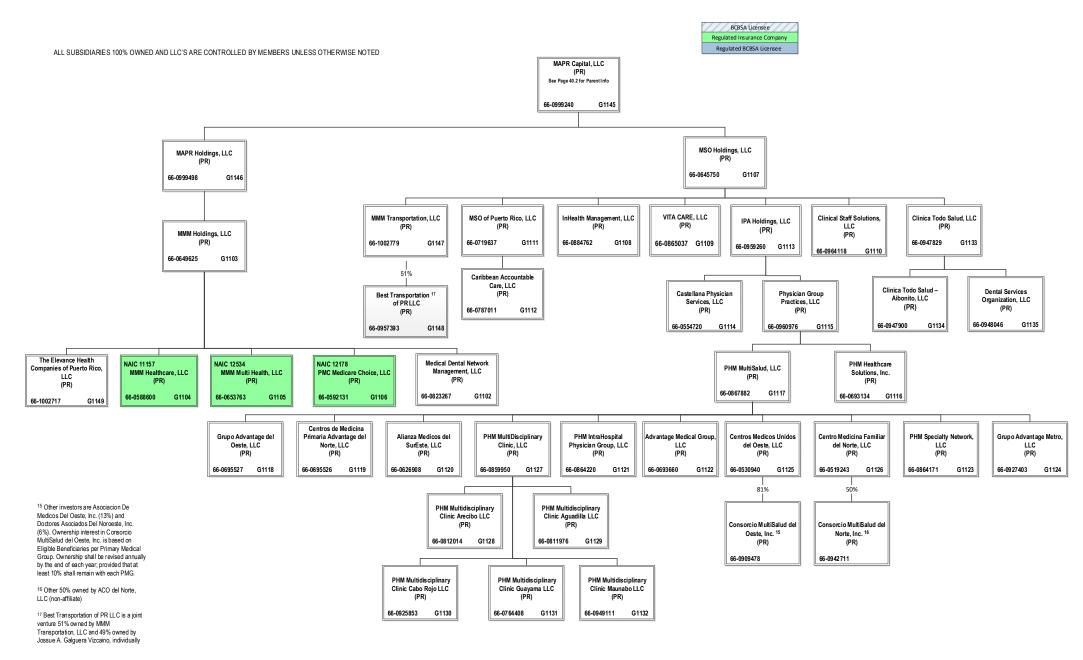
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BCBSA Licensee

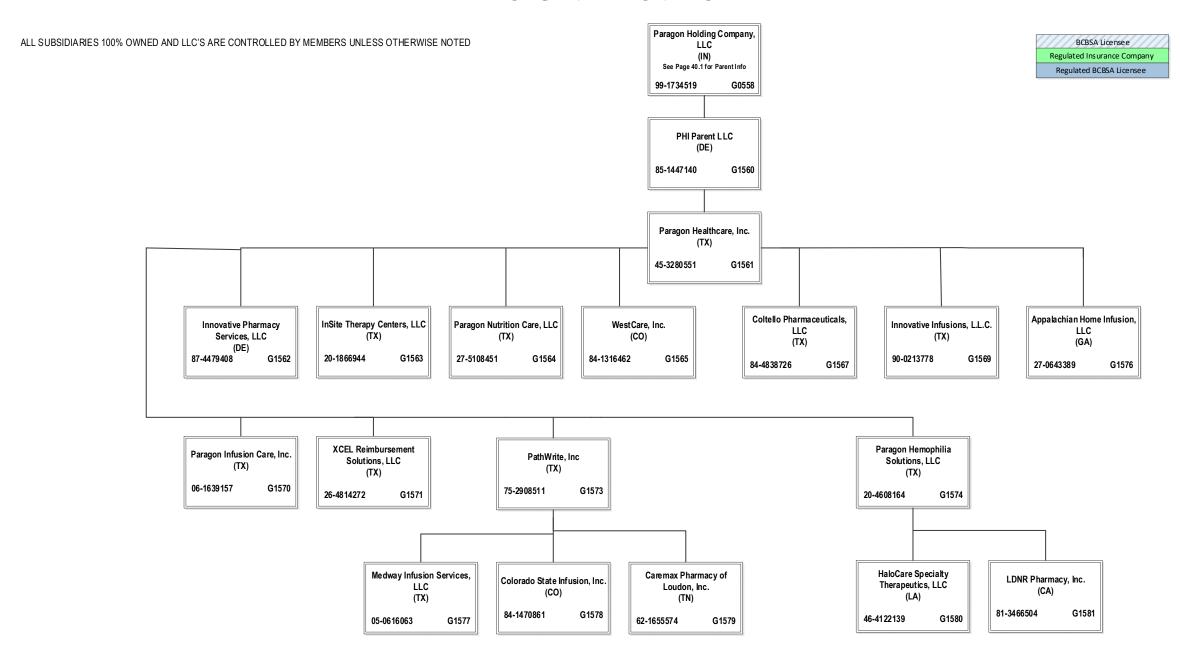
Regulated Insurance Company Regulated BCBSA Licensee ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED Anthem Partnership Holding Company, LLC 81-3974489 90% 49% 75% 50% NAIC 16345 NAIC 14276 NAIC 17519 NAIC 14064 AIC 16298 NAIC 16168 NAIC 16145 Wellpoint South Community Care Health Plan of munity Care Health Plan o Wellpoint Delaware, Inc. APC PASSE, LLC Amerigroup Mississippi, Inc. CCHAILC® Carolina Inc. Louisiana, Inc.7 (DE) Kansas, Inc. 14 (SC) (DC) 81-4626605 G0660 82-1853423 26-4674149 82-1800037 G0670 45-3358287 G0631 81-4131800 G0655 82-3062789 95% 92-3489706 50% 50% NAIC 15951 GR Health Solutions, LLC 11 NAIC 16553 Momentum Health Community Care Health Plan of (PA) AMH Health, LLC 9 Partners, LLC 10 Nebraska, Inc. 12 (NC) 84-4672692 G8477 47-5456872 G0310 83-2435050 G0652 82-4684953 NAIC 16774 NAIC 12812 AMH Health Plans of Maine Inc (PA) 30-0326654 G8478 84-4181695 G0653 7 Community Care Health Plan of Louisiana. Inc. is a joint venture 75% owned by

- 7 Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (non-affiliate)
- ⁸ CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company,
 LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)
- ⁹ AMH Health, LLC is a joint venture 36% owned by MaineHealth (non-affiliate) and 64% owned by Anthem Partnership Holding Company, LLC
- Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)
- ¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (nonaffiliate)
- 12 Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate).
- ¹³ APC PASSE, LLC (regulated entity) is a joint venture 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by Arkansas Provider Coalition, LLC (non-affiliate).
- ¹⁴ Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross Blue Shield of Kansas, Inc. (non-affiliate) and 5% owned by Blue Cross and Blue Shield of Kansas City (non-affiliate).

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



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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE AMH Health, LLC OVERFLOW PAGE FOR WRITE-INS

NONE