HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2020 OF THE CONDITION AND AFFAIRS OF THE

	AmeriChoice of	New Jersey, I	nc.
NAIC Group Code	0707 0707 NAIC Company Co	ode95497_ Employer's ID	Number22-3368602
Organized under the Laws of	(Current) (Prior) New Jersey	, State of Domicile or Port of Entr	y NJ
Country of Domicile	United State	s of America	
Licensed as business type:	Health Maintenar	nce Organization	
Is HMO Federally Qualified? Yes [] No	[X]		
Incorporated/Organized	10/17/1994	Commenced Business	02/01/1996
Statutory Home Office 170 W	ood Avenue South 3rd Floor	,	Iselin, NJ, US 08830
-	(Street and Number)	(City or T	own, State, Country and Zip Code)
Main Administrative Office	170 Wood Avenu (Street and	e South 3rd Floor	
Iselin, NJ, U	S 08830,	,,	732-623-1258
(City or Town, State, Co	untry and Zip Code)	(Are	a Code) (Telephone Number)
Mail Address 4 Research 4 Researc	arch Drive 5th Floor d Number or P.O. Box)		Shelton, CT, US 06484 own, State, Country and Zip Code)
Primary Location of Books and Records	,	lum Street	,,,,,,
·	(Street and		
Hartford, CT, I (City or Town, State, Co		,(Are	203-447-4662 a Code) (Telephone Number)
Internet Website Address	www.Ameri	Choice.com	
Statutory Statement Contact	Bryan Tafel		203-447-4662
-	(Name)	,	(Area Code) (Telephone Number)
bryan_tafel@ (E-mail Ad		,	203-447-4451 (FAX Number)
	OFFIC	CERS	
President C	Charles Reeves Wayland #	-	Peter Marshall Gill
Secretary Ch	ristina Regina Palme-Krizak	Chief Financial Officer	Richard Michael Hersch
Nyle Brent Cottington, Vice Preside	OTH ent Heather Anastasia La		
Dhillin Dahart Franz			Timethy Mark Spiller
Phillip Robert Franz Charles Reeves Wayland #		ashell Smith #	Timothy Mark Spilker
State ofCounty of			State of County of
		_	
herein described assets were the absolute property related exhibits, schedules and explanations there reporting entity as of the reporting period stated a Statement Instructions and Accounting Practices not related to accounting practices and procedures	y of the said reporting entity, free and clear fror in contained, annexed or referred to, is a full ar above, and of its income and deductions therefir and Procedures manual except to the extent tha s, according to the best of their information, kn lectronic filing with the NAIC, when required, t	n any liens or claims thereon, except dd true statement of all the assets and om for the period ended, and have bo t: (1) state law may differ; or, (2) tha owledge and belief, respectively. F that is an exact copy (except for form	y, and that on the reporting period stated above, all of the t as herein stated, and that this statement, together with I liabilities and of the condition and affairs of the said een completed in accordance with the NAIC Annual at state rules or regulations require differences in reporting urthermore, the scope of this attestation by the described natting differences due to electronic filing) of the enclosed
Christina Regina Palme-Krizak	- Nyle Brent 0	Cottington	Richard Michael Hersch
Secretary	Vice Pre	•	Chief Financial Officer
Subscribed and sworn to before me this day of	Subscribed and sworn to b day of	before me this	Subscribed and sworn to before me this day of
	uu, of		
		a. Is this an original filing b. If no.	2?Yes [X] No []

- 1. State the amendment number.....
- 2. Date filed.....
- 3. Number of pages attached.....

	A53	SETS			
	—	1	Current Year 2	3	Prior Year 4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)		0		
2.	Stocks (Schedule D):				
	2.1 Preferred stocks		0	0	
		0	0	0	
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens		0	0	
		0	0	0	
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0				
		0	0	0	
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	
	4.3 Properties held for sale (less \$0	_			
	encumbrances)	0	0	0	
5.	Cash (\$615 , Schedule E - Part 1), cash equivalents				
	(\$				
	investments (\$0 , Schedule DA)				
6.	Contract loans, (including \$0 premium notes)				
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)		0		
13.	Title plants less \$0 charged off (for Title insurers				
	only)				
14.	Investment income due and accrued	2,931,052	0	2,931,052	3,042,11
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection		0		
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0				
		0	0	0	
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$4,578,018)	7,672,827	0	7,672,827	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies	0	0		
	16.3 Other amounts receivable under reinsurance contracts		0		
17.	Amounts receivable relating to uninsured plans			,	
	5			671,231	
	Net deferred tax asset				5,209,42
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software	0	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 (\$4,619,861) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets		2,561	0	
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	906.083.181	15.532.688	890.550.493	728,109,82
27.					
21.	Accounts	0	0	0	
28.	Total (Lines 26 and 27)	906,083,181	15,532,688	890,550,493	728,109,82
	DETAILS OF WRITE-INS				
101.					
102.					
103.				ļļ.	
198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	
199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	
501.	Miscellaneous receivables	2 561	2 561	0	
2502.				[
2502.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
	y er rendering white the for Ente zo norn overhow page	2,561			

ASSETS

LIABILITIES, CAPITAL AND SURPLUS

	_	1	Current Year	3	Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
	Claims unpaid (less \$0 reinsurance ceded)				
	Accrued medical incentive pool and bonus amounts		0		
	Unpaid claims adjustment expenses	2,029,575	0	2,029,575	2,391,283
4.	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public	100 101 100	0	100 101 100	CO 411 000
_	Health Service Act		0		
	Aggregate life policy reserves		0		
	Property/casualty unearned premium reserves		0		
	Aggregate health claim reserves		0		
	Premiums received in advance		0		
	General expenses due or accrued		0		
10.1	Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses))	0	0	0	10 651 220
40.0				0	
	Net deferred tax liability			0	
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others			0	
	Borrowed money (including \$0 current) and				0
14.	interest thereon \$0 (including				
	\$0 current)	0	0	0	0
15	Amounts due to parent, subsidiaries and affiliates				
	Derivatives				
	Payable for securities lending				
	Funds held under reinsurance treaties (with \$0				0
19.	authorized reinsurers, \$0 unauthorized				
	reinsurers and \$0 certified reinsurers)	0	0	0	0
20	Reinsurance in unauthorized and certified (\$0)				0
20.	companies	0	0	0	0
01	Net adjustments in assets and liabilities due to foreign exchange rates				
			0		
	Liability for amounts held under uninsured plans	1,070,207	0		1,070,207
23.	current)	25 002 122	0	25 002 122	6 190
24	Total liabilities (Lines 1 to 23)				373 400 856
24. 25.	Aggregate write-ins for special surplus funds				
	Common capital stock				
	Preferred capital stock				
27.	Gross paid in and contributed surplus				
	Surplus notes.				
	Aggregate write-ins for other than special surplus funds				
	Unassigned funds (surplus)				
	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26				
	\$0)		XXX	0	0
	32.20 shares preferred (value included in Line 27				
	\$0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	890,550,493	728,109,826
• · ·	DETAILS OF WRITE-INS			,,	,,.
2301	Declared dividend	35 000 000	0	35 000 000	0
	Unclaimed property				
	Summary of remaining write-ins for Line 23 from overflow page			.0	
	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	35,003,122	0	35,003,122	6,189
	Section 9010 ACA Subsequent Fee Year Assessment		XXX		
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)			0	37.345.597
	Totals (Lines 2501 tinu 2505 plus 2596)(Line 25 above)				. ,,
3000				++	
3003.	Summary of remaining write-ins for Line 30 from overflow page	VVV	~~~	0	^

STATEMENT OF REVENUE AND EXPENSES

	STATEWIENT OF REVENUE AN	Current	Prior Year		
		1 Uncovered	2 Total	3 Total	
1. Mer	nber Months		4,627,838		
2. Net	premium income (including \$	XXX		2,650,150,963	
3. Cha	nge in unearned premium reserves and reserve for rate credits	XXX	(97,918,393)	(397,754)	
4. Fee-	for-service (net of \$0 medical expenses)	XXX	0	0	
5. Risk	revenue	XXX	0	0	
6. Aggi	regate write-ins for other health care related revenues	XXX	0	0	
7. Aggi	regate write-ins for other non-health revenues	XXX	0	0	
8. Tota	I revenues (Lines 2 to 7)	XXX	2,396,773,442	2,649,753,209	
	pital and Medical:				
	pital/medical benefits				
	er professional services				
	side referrals				
	ergency room and out-of-area				
	scription drugs				
	regate write-ins for other hospital and medical				
	ntive pool, withhold adjustments and bonus amounts				
	total (Lines 9 to 15)	0	1,985,149,648	2,414,990,105	
Less 17. Net	s: reinsurance recoveries	0	0	0	
	al hospital and medical (Lines 16 minus 17)				
	-health claims (net)				
	-neaim claims (net) ms adjustment expenses, including \$75,510,226 cost containment expenses				
	eral administrative expenses				
		0			
	ease in reserves for life and accident and health contracts (including \$0	0	(01 411 000)	47 500 000	
	acrease in reserves for life only)				
	al underwriting deductions (Lines 18 through 22)				
	underwriting gain or (loss) (Lines 8 minus 23)			(112,210,015)	
	investment income earned (Exhibit of Net Investment Income, Line 17)				
	realized capital gains (losses) less capital gains tax of \$				
	investment gains (losses) (Lines 25 plus 26)	0 .	14,548,540	14,920,374	
	gain or (loss) from agents' or premium balances charged off [(amount recovered	0	0	0	
	0) (amount charged off \$		0	0	
	5	0 .		0	
	income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus plus 28 plus 29)			(97,289,641)	
31. Fede	eral and foreign income taxes incurred			(11,371,421)	
32. Net	income (loss) (Lines 30 minus 31)	XXX	112,906,614	(85,918,220)	
DET	AILS OF WRITE-INS				
0601					
0602		XXX			
0603		XXX			
0698. Sum	mary of remaining write-ins for Line 6 from overflow page	XXX	0	0	
	als (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0	
		XXX			
		XXX			
0703		XXX			
	mary of remaining write-ins for Line 7 from overflow page	XXX	0	0	
	Ils (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX		0	
1401					
	mary of remaining write-ins for Line 14 from overflow page	.0	.0	0	
	Ils (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0	
2901					
2903					
2998. Sum	mary of remaining write-ins for Line 29 from overflow page	0	0	0	
2999. Tota	als (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0	

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year		
34.	Net income or (loss) from Line 32		(85,918,220)
35.	Change in valuation basis of aggregate policy and claim reserves	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0
38.	Change in net deferred income tax	(1,318,395)	(3,864,160)
39.	Change in nonadmitted assets		
40	Change in unauthorized and certified reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles	0	0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus	0	0
45.	Surplus adjustments:		
	45.1 Paid in	0	
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital	0	0
46.	Dividends to stockholders	(35,000,000)	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital and surplus (Lines 34 to 47)		71,441,600
49.	Capital and surplus end of reporting period (Line 33 plus 48)	430,400,820	354,708,970
	DETAILS OF WRITE-INS		
4701.			
4702.			
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance		
2.	Net investment income		
3.	Miscellaneous income	0	0
4.	Total (Lines 1 through 3)	2,523,562,704	2,654,771,558
5.	Benefit and loss related payments	2,001,333,122	2,408,525,987
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)		(21,382,153)
10.	Total (Lines 5 through 9)	2,345,393,157	2,661,243,610
11.	Net cash from operations (Line 4 minus Line 10)	178,169,547	(6,472,051)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		0
	12.3 Mortgage loans		0
	12.4 Real estate		0
	12.5 Other invested assets		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		166 681 535
13.	Cost of investments acquired (long-term only):		
15.	13.1 Bonds		188 050 500
	13.2 Stocks		0
	13.3 Mortgage loans		0
	13.4 Real estate		0
	13.5 Other invested assets		0
			0
	13.6 Miscellaneous applications		188,950,599
	13.7 Total investments acquired (Lines 13.1 to 13.6)		-
14.	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(48,297,994)	(22,269,064)
	Orale forms Financian and Missallana and Orange		
10	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):	0	0
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	(1,692,382)	3,088,888
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(1,692,382)	153,088,888
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	128, 179, 171	124,347,773
	Cash, cash equivalents and short-term investments:		
19.			
	19.1 Beginning of year 19.2 End of year (Line 18 plus Line 19.1)	246,095,979 374,275,150	121,748,207 246,095,979

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

 20.0001. Dividend declared during 2020

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10	
		Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Onlv	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health	
1	Net premium income			0	0	Only	0 0	0		0	(
	Change in unearned premium reserves and reserve for	, io 1, oo 1, ooo							, 100,010,710			
	rate credit	(97,918,393)	(1,425,758)	0	0		.0	0	(96,492,635)	0		
3.	Fee-for-service (net of \$0											
	medical expenses)	0		0	0		.0	0	0	0	XXX	
4.	Risk revenue	0	0	0	0		.00	0	0	0	XXX	
	Aggregate write-ins for other health care related revenues	۵	0	0	0		.00	ο	0	0	xxx	
	Aggregate write-ins for other non-health care related revenues	0								xxx		
7.	Total revenues (Lines 1 to 6)	2,396,773,442		0	0		.0	0	2,359,321,110	0		
8.	Hospital/medical benefits	1,571,172,200		0	Q		٥٥	(41,526)	1,552,716,425	0	XXX	
9.	Other professional services			0	0		.0	0		0	XXX	
10.	Outside referrals	0	0	0	0		.0	0	0	0	XXX	
11.	Emergency room and out-of-area	0	0	0	0		.0	0	0	0	XXX	
12.	Prescription drugs			0	0		.00	(197,044)		0	XXX	
13.	Aggregate write-ins for other hospital and medical	0		0	0		.00	0	0	0	XXX	
14.	Incentive pool, withhold adjustments and bonus amounts			0	0		.0	0		0	XXX	
15.	Subtotal (Lines 8 to 14)	1,985,149,648		0	0		.0	(238,570)	1,952,831,443	0	XXX	
16.	Net reinsurance recoveries	0	0	0	0		.0	0	0	0	XXX	
17.	Total medical and hospital (Lines 15 minus 16)	1,985,149,648		0	0		.0	(238,570)	1,952,831,443	0	XXX	
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
19.	Claims adjustment expenses including											
	\$75,510,226 cost containment expenses			0	0		.0	0		Q		
20.	General administrative expenses		4, 117, 523	0	0		.00			0		
21.	Increase in reserves for accident and health contracts	(61,411,000)	0	0	0		.0	0	(61,411,000)	0	XXX	
	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	Total underwriting deductions (Lines 17 to 22)			0	Q		.0	(213, 186)	2,237,605,372	0		
24.	Total underwriting gain or (loss) (Line 7 minus Line 23)	121,084,490	(844,434)	0	0		0 0	213, 186	121,715,738	0	(
0501.	DETAILS OF WRITE-INS										xxx	
0502.											XXX	
0503.											XXX	
	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0		.00	0	0	0	XXX	
	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0		0 0	0	0	0	XXX	
0601.			XXX	XXX	XXX	XXX		XXX	XXX	XXX		
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0698.	Summary of remaining write-ins for Line 6 from overflow											
1	page	0	XXX	XXX	XXX	XXX		XXX	XXX	XXX	C	
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(
1301.											XXX	
1302.											XXX	
1303.											XXX	
	Summary of remaining write-ins for Line 13 from overflow page	۵۵	0	0	0		.00	0	0	0	xxx	
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0		0 0	0	0	0	XXX	

7

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)		0	0	
2. Medicare Supplement	0	0	0	0
3. Dental only	0	0	0	0
4. Vision only	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0
6. Title XVIII - Medicare	0	0	0	0
7. Title XIX - Medicaid	2,455,813,745	0	0	2,455,813,745
8. Other health	0	0	0	0
9. Health subtotal (Lines 1 through 8)	2,494,691,835	0	0	2,494,691,835
10. Life	0	0	0	0
11. Property/casualty	0	0	0	0
12. Totals (Lines 9 to 11)	2,494,691,835	0	0	2,494,691,835

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

		1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1	Payments during the year:	TOLAI		Supplement	Dental Only	VISION ONLY	Denenits Fian	Medicare	Medicald		Non-nealth
	1.1 Direct	1,992,363,124	31,721,472	0	0	0	0	(643)	1,960,642,295	0	
	1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	
	1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	1.4 Net	1,992,363,124	31,721,472	0	0	0	0	(643)	1,960,642,295	0	
2.	Paid medical incentive pools and bonuses		255,605	0	0	0	0	0		0	
	Claim liability December 31, current year from Part 2A: 3.1 Direct		4,251,425	0	0	0	0			0	
	3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	
	3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	3.4 Net		4,251,425	0	0	0	0	(10,168)	199,272,276	0	
4.	Claim reserve December 31, current year from Part 2D:										
	4.1 Direct	2,011,047			0	0	0		2,797,209	0	
	4.2 Reinsurance assumed	0		0	0	0	0	0	0	0	
	4.3 Reinsurance ceded	2,811,547			0	0	0			0	
-	4.4 Net	2,811,347	14,270			U	0		2,797,209	U	
	year		(78,935)	0	0	0	0			0	
	Net healthcare receivables (a)	(2,548,179)	(497,759)	0	0	0	0		(2,288,301)	0	
	Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	
8.	Claim liability December 31, prior year from Part 2A: 8.1 Direct		4,084,000	0	0	0	0	(10,121)		0	
	8.2 Reinsurance assumed			0	0	0	0		0	.0	
	8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	8.4 Net			0	0	0	0	(10, 121)		0	
9.	Claim reserve December 31, prior year from Part 2D: 9.1 Direct			0	0	0	0	0		0	
	9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	
	9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	9.4 Net	3,269,902	48,349	0	0	0	0	0	3,221,553	0	
10.	Accrued medical incentive pools and bonuses, prior year	3,234,783	(27,521)	0	0	0	0	140	3,262,164	0	
	Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	
12.	Incurred Benefits:										
	12.1 Direct	1,975,691,910		0	0	0	0		1,943,577,896	0	
	12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	
	12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	12.4 Net	1,975,691,910	32,352,585	0	0	0	0	(238,571)	1,943,577,896	0	
13	Incurred medical incentive pools and bonuses	9,457,738	204,191	0	0	0	0	(200,0.1)	9,253,547	0	

(a) Excludes \$0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

		1 1					1			
	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1. Reported in Process of Adjustment:				·						
1.1 Direct	23,979,943	2,416,315	0	0	0	0	0		0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	.0	0	0	0	0	0	.0	0
1.4 Net			0	0	0	0	0	21,563,628	0	0
2. Incurred but Unreported:										
2.1 Direct		1,835,110	0	0	0	0	(10,168)		0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
2.4 Net		1,835,110	0	0	0	0	(10,168)	177,708,648	0	0
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	0	0	0	0	0	0	0	0
4. TOTALS:										
4.1 Direct		4,251,425	0	0	0	0	(10,168)		0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	203,513,533	4,251,425	0	0	0	0	(10,168)	199,272,276	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

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

	Claims Paid [During the Year	Claim Reserve and Claim Liability December 31 of Current Year		5	6
Line of Business	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)				2,913,110		4, 132, 349
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare		0	(10,167)	0	(10,809)	(10,121)
7 Title XIX - Medicaid		1,801,292,596				
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)		1,831,332,438				
10. Healthcare receivables (a)		9,683,192	0	405,790		
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts		3,082,108		2,651,229	6,959,185	3,234,783
13. Totals (Lines 9 - 10 + 11 + 12)	156,857,570	1,824,731,354	10,707,291	198,934,523	167,564,861	206,081,090

(a) Excludes \$0 loans or advances to providers not yet expensed.

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

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

		Cur	nulative Net Amounts Paid	b	
	1	2	3	4	5
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020
1. Prior		1,943		1,937	
2. 2016					
3. 2017					
4. 2018					
5. 2019					
6. 2020	XXX	XXX	XXX	XXX	30,132

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

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuse: Outstanding at End of Year				
	1	2	3	4	5
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020
1. Prior					
2. 2016					
3. 2017	XXX				
4. 2018					
5. 2019			XXX		
6. 2020	XXX	XXX	XXX	XXX	33,045

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

		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			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	. 2016		33,265	0		33,265		0	0	33,265	
2	2. 2017			0	0.0			0	0		
3	3. 2018				0.6			0	0		
4	. 2019				4.7				7		
5	5. 2020	37,452	30,132	1,441	4.8	31,573	84.3	2,913	16	34,502	92.1

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

	Cumulative Net Amounts Paid				
	1	2	3	4	5
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020
1. Prior					
2. 2016	0	0	0	0	0
3. 2017	XXX	0	0	0	0
4. 2018	XXX		0	0	0
5. 2019	XXX			0	(1)
6. 2020	XXX	XXX	XXX	XXX	0

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuse Outstanding at End of Year				
	1	2	3	4	5
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020
1. Prior					
2. 2016	0	(10)	0	0	0
3. 2017		0	(10)	0	0
4. 2018		XXX	0	(10)	0
5. 2019		XXX	XXX	0	(11)
6. 2020	XXX	XXX	XXX	XXX	0

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

		1	2	3	4	5 Claim and Claim	6	7	8	9 Total Claims and	10
	Years in which					Adjustment Expense			Unpaid Claims	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.	2016	(19)	0		0.0	6,293	(33, 121.1)	0	0	6,293	(33, 121.1)
2.	2017		0		0.0			0	0		
3.	2018	(4)	0				(520,075.0)	0	0		(520,075.0)
4.	2019	0	0				0.0	(10)	0		0.0
5.	2020	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

		Cumulative Net Amounts Paid				
	1	2	3	4	5	
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020	
1. Prior						
2. 2016	1,883,450	2,057,981	2,061,309		2,059,496	
3. 2017	XXX	2,032,248	2,219,969	2,213,935	2,212,899	
4. 2018						
5. 2019	XXX		XXX	2, 173, 942	2,343,200	
6. 2020	XXX	XXX	XXX	XXX	1,804,283	

Section B	 Incurred 	Health	Claims -	Title XIX
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	Sum of Cumulative N	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1	2	3	4	5	
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020	
1. Prior						
2. 2016	2,096,233		2,061,309	2,059,729	2,059,496	
3. 2017			2,236,247	2,213,935	2,212,899	
4. 2018		XXX	2,374,669	2,364,194	2,352,082	
5. 2019			XXX	2,389,257	2,352,643	
6. 2020	XXX	XXX	XXX	XXX	2,000,710	

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

		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	. 2016	2,518,529	2,059,496	0	0.0	2,059,496		0	0	2,059,496	
2	. 2017		2,212,899	0	0.0	2,212,899		0	0	2,212,899	
3	. 2018	2,674,348	2,352,082	14 , 170	0.6	2,366,252		0	0		
4	. 2019	2,609,748	2,343,200		4.5	2,449,133					
5	. 2020	2,359,321	1,804,283	84,822	4.7	1,889,105	80.1	196,427	1,914	2,087,446	88.5

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	2016	2017	2018	2019	2020	
1. Prior						
2. 2016	1,914,703	2,091,194	2,094,577	2,092,994	2,092,761	
3. 2017	XXX		2,256,885	2,250,731	2,249,695	
4. 2018			2, 197,641			
5. 2019	XXX		XXX	2,214,830		
6. 2020	XXX	XXX	XXX	XXX	1,834,415	

Section	в-	Incurred	Health	Claims -	- Grand Total	
000000	-	mounou	ilouitii	eranne	orana rotar	

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1	2	3	4	5
Year in Which Losses Were Incurred	2016	2017	2018	2019	2020
1. Prior					
2. 2016	2,130,344	2,110,740	2,094,577	2,092,994	2,092,761
3. 2017	XXX	2,271,677	2,273,504	2,250,731	2,249,695
4. 2018			2,415,108	2,405,882	2,393,544
5. 2019				2,434,014	2,396,639
6. 2020	XXX	XXX	XXX	XXX	2,033,755

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. 2016	2,549,220	2,092,761		0.3	2,099,054		0	0	2,099,054	
	2. 2017	2,569,147	2,249,695		0.3	2,257,103		0	0	2,257,103	
:	3. 2018	2,714,463	2,393,544		1.5	2,428,779		0	0	2,428,779	
	4. 2019	2,649,753	2,385,934		5.3	2,513,117				2,523,924	
	5. 2020	2,396,773	1,834,415	86,263	4.7	1,920,678	80.1	199,340	1,930	2,121,948	88.5

UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	2	3		5	6	7	8	9
	Total	2 Comprehensive (Hospital & Medical)	s Medicare Supplement	4 Dental Only	5 Vision Only	o Federal Employees Health Benefits Plan	7 Title XVIII Medicare	o Title XIX Medicaid	9 Other
1. Unearned premium reserves	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a)	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including									
\$		1,580,120	0	0	0	0	0	101,425,483	0
5. Aggregate write-ins for other policy reserves		0	0	0	0	0	0	115,523	0
6. Totals (gross)		1,580,120	0	0	0	0	0		0
7. Reinsurance ceded	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)			0	0	0	0	0		0
9. Present value of amounts not yet due on claims	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits			0	0	0	0	0		0
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0
12. Totals (gross)			0	0	0	0	0		0
13. Reinsurance ceded	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	2,811,547	14,278	0	0	0	0	0	2,797,269	0
DETAILS OF WRITE-INS 0501. Redetermination Contract Payable		0	0	0	0	0	0		0
0503.									
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	115,523	0	0	0	0	0	0	115,523	0
1101.									
1102.						ļ			
1103.									
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0

(a) Includes \$ _____0 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

		PART 3 - ANAL Claim Adjustme	YSIS OF EXPENSE	ES 3	4	5
		1	2		4	5
		Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent (\$0 for occupancy of					
	own building)			3,464,544	0	6,455,162
2.	Salary, wages and other benefits					
3.	Commissions (less \$0					
	ceded plus \$0 assumed)	0	0	0	0	0
4.	Legal fees and expenses					
5.	Certifications and accreditation fees					
6.	Auditing, actuarial and other consulting services	4,084,107	1, 197,093	6, 118, 116	0	
7.	Traveling expenses					
8.	Marketing and advertising	2,439,734		3,654,795	0	6,809,640
9.	Postage, express and telephone			2,598,725	0	4,841,962
10.	Printing and office supplies	2,663,332			0	
11.	Occupancy, depreciation and amortization			1,588,341	0	2,959,408
12.	Equipment				0	
13.	Cost or depreciation of EDP equipment and					
	software	4,470,283	1,310,285	6,696,619	0	12,477,187
14.	Outsourced services including EDP, claims, and other services				0	
15.						
16.	Insurance, except on real estate					
17.	Collection and bank service charges				0	
18.	Group service and administration fees				0	
19.	Reimbursements by uninsured plans					0
20.	Reimbursements from fiscal intermediaries				0	
21.	Real estate expenses				0	
22.						
23.	Taxes, licenses and fees:	,	,	,		,
	23.1 State and local insurance taxes	0	0		0	
	23.2 State premium taxes					
	23.3 Regulatory authority licenses and fees					
	23.4 Payroll taxes					
	23.5. Other (excluding federal income and real					
	estate taxes)					
24.	Investment expenses not included elsewhere		0	0		
25.	Aggregate write-ins for expenses		2,782,758		0	
26.	Total expenses incurred (Lines 1 to 25)					(a)352,301,301
27.	Less expenses unpaid December 31, current year .					96 , 968 , 497
28.	Add expenses unpaid December 31, prior year	1,747,150	644,133			54,524,451
29.	Amounts receivable relating to uninsured plans, prior year	0	0	5,901	0	5,901
30.	Amounts receivable relating to uninsured plans, current year	0	0	5,901	0	5,901
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	75,713,467	23,911,632	209,906,249	325,907	309,857,255
	DETAILS OF WRITE-INS	Т				
2501.	Sundry General Expenses	8,113,331	2,378,099	12,154,014	0	
2502.	Professional Fees\Consulting			1,507,205	0	2,808,234
2503.	Information Technology				0	
2598.						
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25			· · · -·		
(a) Inclu	above) des management fees of \$158,525,304 t	9,493,904 o affiliates and \$	2,782,758 0 to no	14,706,596 on-affiliates.	0	26,983,258

EXHIBIT OF NET INVESTMENT INCOME

		1	2
			Earned During Year
1.	U.S. government bonds	(a)449,909	
1.1	Bonds exempt from U.S. tax	(a)0	0
1.2	Other bonds (unaffiliated)	(a)11,867,557	
1.3	Bonds of affiliates		
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	(c)0	0
4.	Real estate	(d)0	0
5	Contract Loans		
6	Cash, cash equivalents and short-term investments		
7	Derivative instruments	(f)0	0
8.	Other invested assets		
9.	Aggregate write-ins for investment income		0
10.	Total gross investment income	13,199,570	13,092,498
11.	Investment expenses	, ,	
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		
14.	Depreciation on real estate and other invested assets		
15.	Agregate write-ins for deductions from investment income		()
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		12,741,501
	DETAILS OF WRITE-INS		, ,
0901.			
0902			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9. above)	0	0
1501.		-	
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0
1000.			5

(a) Includes \$		accrual of discount less \$	rchases.
(b) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends on p	purchases.
(c) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on put	rchases.
(d) Includes \$	0	for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.	
(e) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on put	rchases.
(f) Includes \$	0	accrual of discount less \$0 amortization of premium.	
	350,997 d and Separate Acco	investment expenses and \$	
(h) Includes \$	0	interest on surplus notes and \$0 interest on capital notes.	
(i) Includes \$	0	depreciation on real estate and \$0 depreciation on other invested assets.	

EXHIBIT OF CAPITAL GAINS (LOSSES)

		,				
		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds		0		0	0
1.1	Bonds exempt from U.S. tax		0	0	0	0
1.2	Other bonds (unaffiliated)		(459,966)	1,817,343	0	0
1.3	Bonds of affiliates		0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	.0	0	0	0
5.	Contract loans		0	0	0	0
6.	Cash, cash equivalents and short-term investments		0	0	0	0
7.	Derivative instruments		0	0	0	0
8.	Other invested assets		0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	2,747,357	(459,966)	2,287,391	0	0
-	DETAILS OF WRITE-INS	, ,	, , ,	, ,		
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from					
5000.	overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9,					
	above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS 2 3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1) Current Year Total Prior Year Total Nonadmitted Assets Nonadmitted Assets .0 1. Bonds (Schedule D) .0 0 2. Stocks (Schedule D): 0 0 0 2.1 Preferred stocks 0 0 0 2.2 Common stocks 3. Mortgage loans on real estate (Schedule B): 0 0 3.1 First liens .0 3.2 Other than first liens. .0 ..0 .0 Real estate (Schedule A): 0 0 0 4.1 Properties occupied by the company. 4.2 Properties held for the production of income... 0 0 0 0 0 0 4.3 Properties held for sale Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments 5. .0 0 0 (Schedule DA) .0 .0 0 Contract loans 6. Derivatives (Schedule DB)0 0 0 7. .0 0 0 8. Other invested assets (Schedule BA) 0 0 0 9. Receivables for securities 10. Securities lending reinvested collateral assets (Schedule DL). 0 0 0 0 0 0 11. Aggregate write-ins for invested assets ... 0 0 0 12. Subtotals, cash and invested assets (Lines 1 to 11). 0 0 .0 13. Title plants (for Title insurers only) .0 ..0 .0 14. Investment income due and accrued 15. Premiums and considerations: .0 .0 .0 15.1 Uncollected premiums and agents' balances in the course of collection 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due . .0 .0 .0 15.3 Accrued retrospective premiums and contracts subject to redetermination 0 0 0 16. Reinsurance: 16.1 Amounts recoverable from reinsurers 0 0 0 0 0 16.2 Funds held by or deposited with reinsured companies 0 .0 .0 0 16.3 Other amounts receivable under reinsurance contracts .0 .0 .0 17. Amounts receivable relating to uninsured plans. .0 ..0 .0 18.1 Current federal and foreign income tax recoverable and interest thereon 0 0 0 18.2 Net deferred tax asset . 0 0 0 19. Guaranty funds receivable or on deposit ... 20. Electronic data processing equipment and software 0 0 0 21. 0 0 0 Furniture and equipment, including health care delivery assets 22. Net adjustment in assets and liabilities due to foreign exchange rates 0 0 0 0 23. Receivable from parent, subsidiaries and affiliates. 0 0 15.530.127 14.633.126 (897.001) 24. Health care and other amounts receivable 2.561 3, 193 632 25 Aggregate write-ins for other than invested assets. 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25). 15.532.688 (896, 369) 14.636.319 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts. 0 0 0 15.532.688 14,636,319 (896, 369)28 Total (Lines 26 and 27) DETAILS OF WRITE-INS 1101. 1102. 1103. 1198. 0 0 0 Summary of remaining write-ins for Line 11 from overflow page 0 0 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) 0 Miscellaneous Receivables 2501. 2,561 .3, 193 632 2502. 2503. 2598. Summary of remaining write-ins for Line 25 from overflow page 0 0 0 2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) 2,561 3,193 632

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

				Total Members at End c	of	Total Members at End of				
		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	418,865					4,627,838			
2.	Provider Service Organizations	0	0	0	0	0	0			
3.	Preferred Provider Organizations	0	0	0	0	0	0			
4.	Point of Service	0	0	0	0	0	0			
5.	Indemnity Only	0	0	0	0	0	0			
6.	Aggregate write-ins for other lines of business	0	0	0	0	0	0			
7.	Total	418,865	387,885	384,850	381,135	375,015	4,627,838			
	DETAILS OF WRITE-INS									
0601.										
0602.										
0603.										
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0			
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0			

AMERICHOICE OF NEW JERSEY, INC.

NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operation

AmeriChoice of New Jersey, Inc. (the "Company"), licensed as a health maintenance organization ("HMO") offers its enrollees a variety of managed care programs and products through contractual arrangements with health care providers. The Company is a wholly owned subsidiary of AmeriChoice Corporation, Inc. ("AmeriChoice"). AmeriChoice is a wholly owned subsidiary of UnitedHealth Group Incorporated ("UnitedHealth Group"). UnitedHealth Group is a publicly held company trading on the New York Stock Exchange.

The Company was incorporated on October 17, 1994 as an HMO and operations commenced in February 1996. The Company is certified as an HMO by the State of New Jersey Department of Banking and Insurance (the "Department"). The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees.

The Company has a contract with the State of New Jersey, Division of Medical Assistance and Health Services ("DMAHS"), to provide health care services to Medicaid and FamilyCare (a program for uninsured children and adults) eligible beneficiaries in New Jersey. The current contract is effective through June 30, 2021, and is subject to annual renewal provisions thereafter.

A. Accounting Practices

The statutory basis financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Department.

The Department recognizes only statutory accounting practices, prescribed or permitted by the State of New Jersey, for determining and reporting the financial condition and results of operations of an HMO, for determining its solvency under New Jersey Insurance Law. The state prescribes the use of the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures manual ("NAIC SAP") in effect for the accounting periods covered in the statutory basis financial statements.

No significant differences exist between the practices prescribed or permitted by the State of New Jersey and the NAIC SAP which materially affect the statutory basis net income (loss) and capital and surplus, as illustrated in the table below:

		00 AD #	5/0 Devie #	F/C ima #		December 31,	December 31,
Net	Income (Loss)	SSAP #	F/S Page #	F/S Line #		2020	2019
(1)	Companystate basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$	112,906,614	\$ (85,918,220)
(2)	State prescribed practices that are an increase/(decrease) from NAIC SAP: None		7000		Ŷ	-	• (00,010,220) -
(3)	State permitted practices that are an increase/(decrease) from NAIC SAP: None					-	-
(4)	NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	\$	112,906,614	\$ (85,918,220)
Сар	ital and Surplus						
(5)	Companystate basis (Page 3, Line 33, Columns 3 & 4)	xxx	XXX	XXX	\$	430,400,820	\$ 354,708,970
(6)	State prescribed practices that are an increase/(decrease) from NAIC SAP: None					-	_
(7)	State permitted practices that are an increase/(decrease) from NAIC SAP: None					_	-
(8)	NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	\$	430,400,820	\$ 354,708,970

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

The preparation of these statutory basis financial statements in conformity with the NAIC Annual Statement Instructions and the NAIC SAP include certain amounts that are based on the Company's estimates and judgments. These estimates require the Company to apply complex assumptions and judgments, often because the Company must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to hospital and medical benefits, claims unpaid, aggregate health policy reserves (including premium deficiency reserves ("PDR")), aggregate health claim reserves, risk corridors, and risk adjustment estimates. The Company adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of net income (loss) in the period in which the estimate is adjusted.

C. Accounting Policy

Basis of Presentation — The Company prepares its statutory basis financial statements on the basis of accounting practices prescribed or permitted by the Department. These statutory practices differ from accounting principles generally accepted in the United States of America ("GAAP").

Accounting policy disclosures that are required by the NAIC Annual Statement instructions are as follows:

- (1–2) Bonds and short-term investments are stated at book/adjusted carrying value if they meet NAIC designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of three or higher. The Company does not have any mandatory convertible securities or Securities Valuation Office of the NAIC ("SVO") identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant-yield interest method. Bonds and short-term investments are valued and reported using market prices published by the SVO in accordance with the NAIC Valuation of Securities manual prepared by the SVO or an external pricing service;
- (3-4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;
- (6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets;
- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;
- (8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;
- (9) The Company holds no derivatives;
- PDR (inclusive of conversion reserves) and the related expenses are recognized when it is (10) probable that expected future health care expenses, claims adjustment expenses ("CAE"), direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, CAE and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as a decrease in reserves for life and accident and health contracts in the statutory basis statements of operations in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the PDR calculation (see Note 30);

- (11) CAE are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the management agreement ("Agreement") (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc. ("UHS"), in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and general administrative expenses ("GAE") to be reported in the statutory basis statements of operations. It is the responsibility of UHS to pay CAE in the event the Company ceases operations. The Company has recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in unpaid CAE in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Management believes the amount of the liability for unpaid CAE as of December 31, 2020 is adequate to cover the Company's cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified;
- (12) The Company does not carry any fixed assets in the statutory basis financial statements;
- (13) Health care and other amounts receivable consist of pharmacy rebates receivable estimated based on the most currently available data from the Company's claims processing systems and from data provided by the Company's affiliated pharmaceutical benefit manager, OptumRx, Inc. ("OptumRx"). Health care and other amounts receivable also include receivables for amounts due to the Company for claim overpayments to providers. Health care and other amounts receivable are considered nonadmitted assets under the NAIC SAP if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the statutory basis statements of admitted assets, liabilities, and capital and surplus (see Note 28).

The Company has also deemed the following to be significant accounting policies and/or differences between statutory practices and GAAP:

ASSETS

Cash and Invested Assets

- Bonds and short-term investments include U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities, with a maturity of greater than one year at the time of purchase;
- Certain debt investments categorized as available-for-sale or held-to-maturity under GAAP are presented at the lower of book/adjusted carrying value or fair value in accordance with the NAIC designations in the statutory basis financial statements, whereas under GAAP, these investments are shown at fair value or book/adjusted carrying value, respectively;
- Cash, cash equivalents, and short-term investments in the statutory basis financial statements represent cash balances and investments with original maturities of one year or less from the time of acquisition, whereas under GAAP, the corresponding caption of cash, cash equivalents, and short-term investments includes cash balances and investments that will mature in one year or less from the balance sheet date;
- Cash represents cash held by the Company in operating accounts. Claims and other payments are made from the operating accounts daily;
- Outstanding checks are required to be netted against cash balances or presented as cash overdrafts if in excess of cash balances in the statutory basis statements of admitted assets, liabilities, and capital and surplus as opposed to being presented as other liabilities under GAAP;

- Cash equivalents include money-market funds and have original maturity dates of three months or less from the date of acquisition. Effective June 2020, cash equivalents also consist of the Company's share of a qualified cash pool sponsored and administered by UHS. The investment pool consists principally of investments with original maturities of less than one year, with the average life of the individual investments being less than 60 days. The Company's share of the pool represents an undivided ownership interest in the pool and is immediately convertible to cash at no cost or penalty. The participants within the pool have an individual fund number to track those investments owned by the Company. In addition, the Company is listed as a participant in the executed custodial agreement between UHS and the custodian whereby the Company's share in the investment pool is segregated and separately maintained. The pool is primarily invested in government obligations, commercial paper, certificates of deposit, and short-term agency notes and is recorded at cost or book/adjusted carrying value depending on the composition of the underlying securities. Interest income from the pool accrues daily to participating members based upon ownership percentage. Prior to June 2020, the investment pool was reported in short-term investments (see Note 1 Recently Issued Accounting Standards). Cash equivalents, excluding money-market funds, are reported at cost or book/adjusted carrying value depending on the nature of the underlying security, which approximates fair value. Money-market funds are reported at fair value or net asset value ("NAV") as a practical expedient;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. These gains and losses are reported as net realized capital gains less capital gains tax in the statutory basis statements of operations;
- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in net realized capital gains less taxes. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for loan-backed securities for periods subsequent to the loss recognition. The Company recognized an other-than-temporary impairment ("OTTI") of \$459,966 and \$0 for the years ended December 31, 2020 and 2019, respectively.
- The NAIC SAP requires the following captions to be taken into consideration in the reconciliation of the statutory basis statements of cash flows: cash, including cash overdrafts, cash equivalents, and short-term investments, which can include restricted cash reserves, with original maturities of one year or less from the time of acquisition, whereas under GAAP, pursuant to Accounting Standards Update 2016-18, *Statement of Cash Flows, Restricted Cash,* the statements of cash flows reconcile the corresponding captions of cash, cash equivalents and restricted cash with maturities of three months or less. Short-term investments with a final maturity of one year or less from the balance sheet date are not included in the reconciliation of GAAP cash flows. In addition, there are classification differences within the presentation of the cash flows are prepared in accordance with the NAIC Annual Statement Instructions.

Other Assets

- **Investment Income Due and Accrued** Investment income earned and due as of the reporting date, in addition to investment income earned but not paid or collected until subsequent periods, is reported as investment income due and accrued in the statutory basis statements of admitted assets, liabilities, and capital and surplus. The Company evaluates the collectability of the amounts due and accrued and amounts determined to be uncollectible are written off in the period in which the determination is made. In addition, the remaining balance is assessed for admissibility and any balance greater than 90 days past due is considered a nonadmitted asset.
- Premiums and Considerations The Company reports uncollected premium balances from its state Medicaid agency as premiums and considerations in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Uncollected premium balances that are over 90 days past due, with the exception of amounts due from government insured plans, are considered nonadmitted assets. In addition to those balances, current balances are also considered nonadmitted if the corresponding balance greater than 90 days past due is deemed more than inconsequential. Premiums and considerations also include the following (see Note 24):
 - a pay for performance program that is based upon the Company's performance against various quality and operational measures established in the Company's contract with the Department, which is based on a stated percentage of total direct premiums written. Premium adjustments for the Medicaid performance guarantee program are accounted for as premium adjustments subject to redetermination.

- b) NJ's high dollar risk share receivable, relating to the Company's risk corridor arrangement. This is based on a per member drug expenditure and is calculated using a target matrix, which is then evaluated against specified rates by the Department to determine whether there is a receivable or payable. This risk corridor is applicable to the current contract year.
- **Current Federal Income Tax Recoverable** The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses, the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal income tax return of UnitedHealth Group. A current federal income tax recoverable is recognized when the Company's allocated intercompany estimated payments are more than its actual calculated obligation based on the Company's stand-alone federal income tax return (see Note 9).
- Net Deferred Tax Asset The NAIC SAP provides for an amount to be recorded for deferred taxes on temporary differences between the financial reporting and tax bases of assets, subject to a valuation allowance and admissibility limitations on deferred tax assets (see Note 9). In addition, under the NAIC SAP, the change in deferred tax assets is recorded directly to unassigned surplus in the statutory basis financial statements, whereas under GAAP, the change in deferred tax assets is recorded as a component of the income tax provision within the income statement and is based on the ultimate recoverability of the deferred tax assets. Based on the admissibility criteria under the NAIC SAP, any deferred tax assets determined to be nonadmitted are charged directly to surplus and excluded from the statutory basis financial statements, whereas under GAAP, such assets are included in the balance sheet.

LIABILITIES

• Claims Unpaid and Aggregate Health Claim Reserves — Claims unpaid and aggregate health claim reserves include claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied, centrally controlled, and automated. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The Company estimates such liabilities for physician, hospital, and other medical cost disputes based upon an analysis of potential outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. The Company did not change actuarial methods during 2020 and 2019. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of December 31, 2020; however, actual payments may differ from those established estimates.

The Company contracts with hospitals, physicians, and other providers of health care under capitated or discounted fee for service arrangements, including a hospital per diem to provide medical care services to enrollees. Some of these contracts are with related parties (see Note 10). Capitated providers are at risk for the cost of medical care services provided to the Company's enrollees; however, the Company is ultimately responsible for the provision of services to its enrollees should the capitated provider be unable to provide the contracted services.

Accrued Medical Incentive Pool and Bonus Amounts — The Company has agreements with certain independent physicians and physician network organizations that provide for the establishment of a fund into which the Company places monthly premiums payable for members assigned to the physician. The Company manages the disbursement of funds from this account as well as reviews the utilization of nonprimary care medical services of members assigned to the physicians. Any surpluses in the fund are shared by the Company and the physician based upon predetermined risk-sharing percentage and the liability is included in accrued medical incentive pool and bonus amounts in the statutory basis statements of admitted assets, liabilities, and capital and surplus. The Company also has incentive and bonus arrangements with providers that are based on quality, utilization, and/or various health outcome measures. The estimated amount due to providers that meet the established metrics is included in accrued medical incentive pool and bonus amounts in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

- Aggregate Health Policy Reserves Aggregate health policy reserves includes:
 - a) risk corridor payables due to DMAHS for which adjustments are based on a target MLR that is established to determine if the Company's actual MLR differs from the expected MLR within a specified range by rate cell category, which is determined by the Department (see Note 24);
 - b) risk adjustment payables due to DMAHS which represent adjustments to capitation payments that are based on a calculation performed by DMAHS consultants for each company participating in the program (see Note 24); and
 - c) the estimated amount for PDR (see Note 30).
- **General Expenses Due or Accrued** General expenses that are due as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general expenses due or accrued in the statutory basis statements of admitted assets, liabilities, and capital and surplus. General expenses due or accrued also include the amounts for unpaid assessments and state income taxes.
- **Current Federal Income Tax Payable** The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses, the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal income tax return of UnitedHealth Group. A liability for federal income taxes payable is recognized when its allocated intercompany estimated payments are less than its actual calculated obligation based on the Company's stand-alone federal income tax return (see Note 9).
- Amounts due to Parent, Subsidiaries, and Affiliates, Net In the normal course of business, the Company has various transactions with related parties (see Note 10). The Company reports any unsettled amounts owed as amounts payable to parent, subsidiaries, and affiliates, net, in the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- **Payable for Securities** The Company reports payable for securities when investments are traded at the end of an accounting period for which the settlement does not occur until the following month in the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- Aggregate Write-Ins for Other Liabilities The Company declared a \$35,000,000 dividend on November 19, 2020 and did not receive approval from DOBI until January 27, 2021. Therefore, as of December 31, 2020, the declaration was recognized as an aggregate write-in for other liabilities in the statutory basis statements of admitted assets, liabilities, and capital and surplus (see Note 13).

CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS

• **Nonadmitted Assets** — Certain assets, including health care and other amounts receivable, are considered nonadmitted assets under the NAIC SAP and are excluded from the statutory basis statements of admitted assets, liabilities, and capital and surplus and charged directly to unassigned surplus. Under GAAP, such assets are included in the balance sheet.

Restricted Cash Reserves — The New Jersey Administrative Code ("NJAC") requires the Company to maintain minimum insolvency deposits with the State of New Jersey of \$2,292,240 and \$2,204,077 for administrative expenses at June 30, 2020 and 2019, respectively. The Company held regulatory deposits with the State of New Jersey with a book/adjusted carrying value of \$2,334,513 and \$2,282,293 as of December 31, 2020 and 2019, respectively, which is in compliance with the requirement for both years. These restricted deposits are included in bonds in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Interest earned on this deposit accrues to the Company.

The NJAC also requires the Company to maintain minimum insolvency claim deposits with the State of New Jersey of \$335,809,495 and \$344,108,686 for claim expenses at June 30, 2020 and 2019, respectively. The Company held regulatory deposits with the State of New Jersey with a book/adjusted carrying value of \$363,380,582 and \$350,308,742 as of December 31, 2020 and 2019, respectively, which was is in compliance with the requirement for both years. These restricted deposits are included in bonds in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Interest earned on this deposit accrues to the Company.

Minimum Capital and Surplus — Under the laws of the State of New Jersey, the Department requires the Company to maintain a minimum capital and surplus equal to the greater of \$2,292,240; 2% of the first \$150 million of annual premium revenue and 1% of annual premium revenue over \$150 million; three months of uncovered health care expenditures; or an amount equal to the sum of 8% of the annual health care expenditures (not including those expenditures paid on a capitated basis or those on a managed hospital plan basis), plus 4% of the annual hospital expenditures paid on a managed hospital payment basis. The minimum capital and surplus requirement was \$171,323,432 and \$210,326,183, for December 31, 2020 and 2019, respectively, which was based on health care expenditures, as that produced the highest minimum requirement. The Company has \$430,400,820 and \$354,708,970 in total statutory surplus as of December 31, 2020 and 2019, respectively, which is in compliance with the required amount.

Risk-based capital ("RBC") is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. The Department requires the Company to maintain minimum capital and surplus equal to the greater of the state statute as outlined above, or the company action level as calculated by the RBC formula or the level needed to avoid action pursuant to the trend test in the RBC formula. The Company is in compliance with the required amount.

The Company has \$430,400,820 and \$354,708,970 in total statutory basis capital and surplus as of December 31, 2020 and 2019, respectively, which is in compliance with the required amounts.

Section 9010 ACA subsequent fee year assessment — The Company is subject to the Section 9010 ACA subsequent fee year assessment. Under the NAIC SAP, as of December 31, 2019, an amount equal to the estimated subsequent year fee was apportioned out of unassigned surplus and reported as Section 9010 ACA subsequent fee year assessment, in the statutory basis statements of admitted assets, liabilities, and capital and surplus, whereas under GAAP, no such special surplus designation is required. In accordance with the 2021 Health Insurer Fee ("HIF") repeal, no HIF will be payable in 2021 or thereafter, therefore no amounts will be apportioned out of unassigned surplus after December 31, 2019.

STATEMENTS OF OPERATIONS

• Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits — Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. The corresponding change in unearned premium from year to year is reflected as a change in unearned premium reserves and reserve for rate credits in the statutory basis statements of operations. Under GAAP, the change in unearned premium from year to year is reported through premium income.

Net premium income also includes amounts paid by state and federal governments on a per member basis in exchange for the provision and administration of medical benefits under the Medicaid and Children's Health Insurance Program ("CHIP"). Premiums are contractual and are recognized in the coverage period in which members are entitled to receive services, except in the case of maternity payments. Maternity income is billed on contractual rates and recognized as income as each birth case is identified by the Company. Included in net premium income are capitated payments, home nursing risk-sharing payments, high-dollar risk pool payments, and maternity payments. The majority of net premium income recorded is based on capitated rates, which are monthly premiums paid for each member enrolled. Home nursing risk-sharing income is payable based upon the number of members that qualify for such reimbursement.

Total Hospital and Medical Expenses — Total hospital and medical expenses include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

Total hospital and medical expenses also include amounts incurred for incentive pool, withhold adjustments, and bonus amounts that are based on the underlying contractual provisions with the respective providers. In addition, adjustments to claims unpaid estimates and aggregate health claim reserves are reflected in the period once the change in estimate is identified and included in total hospital and medical expenses in the statutory basis statements of operations.

• General Administrative Expenses — Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to UHS in exchange for administrative and management services. Costs for items not included within the scope of the Agreement are directly expensed as incurred. State income taxes are also a component of GAE. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and GAE to be reported in the statutory basis statements of operations.

The Company is subject to an annual fee under Section 9010 of the ACA. A health insurance entity's annual fee becomes payable once the entity provides health insurance for any U.S. health risk during the calendar year, which is nondeductible for tax purposes (see Note 22). Under the NAIC SAP, the entire amount of the estimated annual fee expense is recognized on January 1 of the fee year in GAE in the statutory basis statements of operations, whereas under GAAP, a deferred asset is created on January 1 of the fee year which is amortized to expense on a straight-line basis throughout the year.

- **Net Investment Income Earned** Net investment income earned includes investment income collected during the period, as well as the change in investment income due and accrued on the Company's holdings. Amortization of premium or discount on bonds and certain external investment management costs are also included in net investment income earned (see Note 7).
- Federal Income Taxes Incurred (Benefit) The provision for federal income taxes incurred (benefit) is calculated based on applying the statutory federal income tax rate of 21% to net income (loss) before federal income taxes and net realized capital gains subject to certain adjustments (see Note 9).
- **Comprehensive Income** Comprehensive income and its components are not separately presented in the statutory basis financial statements, whereas under GAAP, it is a requirement to present comprehensive income and its components in the financial statements.

OTHER

• **Vulnerability Due to Certain Concentrations** — The Company is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of the Company's existing products in new markets and offerings of new products, both of which may restrict the Company's ability to expand its business.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from the State of New Jersey Division of Medical Assistance and Health Services as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 100% and 100% as of December 31, 2020 and 100% and 100% as of December 31, 2019, respectively.

Recently Issued Accounting Standards — In May 2020, the NAIC revised Statement of Statutory Accounting Principles ("SSAP") No. 2R, *Cash, Cash Equivalents, Drafts, and Short-Term Investments* ("SSAP No. 2R") for the presentation of qualifying cash pools. The revision clarified the types of cash pooling structures and the investments required to be maintained in those structures for the cash pools to qualify as cash, cash equivalents or short-term investments. This revised guidance is effective for reporting periods on and after January 1, 2021 with early adoption permitted. The Company has elected to early adopt the revised change effective June 2020 (see Note 5 and Note 20).

The Company reviewed all other recently issued guidance in 2020 and 2019 that has been adopted for 2020 or subsequent years' implementation and has determined that none of the items would have a significant impact to the statutory basis financial statements.

D. Going Concern

The Company has the ability and will continue to operate for a period of time sufficient to carry out its commitments, obligations and business objectives.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

No changes in accounting principles or corrections of errors have been recorded during the years ended December 31, 2020 and 2019.

3. BUSINESS COMBINATIONS AND GOODWILL

A–D. The Company was not party to a business combination during the years ended December 31, 2020 and 2019, and does not carry goodwill in its statutory basis statements of admitted assets, liabilities, and capital and surplus.

4. **DISCONTINUED OPERATIONS**

A. Discontinued Operation Disposed of or Classified as Held for Sale

(1–4) The Company did not have any discontinued operations disposed of or classified as held for sale during 2020 and 2019.

B. Change in Plan of Sale of Discontinued Operation — Not applicable.

- C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.
- D. Equity Interest Retained in the Discontinued Operation after Disposal Not applicable.

5. INVESTMENTS

Pursuant to the early adoption of SSAP No. 2R (see Note 1), the Company's investment in the qualified cash pool is included in cash equivalents in 2020 and was reported in short-term investments in 2019. The Company's investment in the qualified cash pool balance is \$355,251,646 and \$243,792,392 as of December 31, 2020 and December 31, 2019, respectively.

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were \$2,860,934 and \$113,576, respectively, for 2020 and \$1,691,111 and \$182,865 respectively, for 2019. There were no gross realized gains and losses on sales of short-term investments in 2020 or 2019. The net realized gain is included in net realized capital gains less taxes. Total proceeds on the sale of long-term investments were \$76,060,849 and \$106,629,787 and for short-term investments were \$1,263,542,014 and \$2,602,854,651 in 2020 and 2019, respectively.

As of December 31, 2020 and 2019, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of \$374,275,150 and \$2,303,587 respectively, are disclosed in the table below.

			2020		
		Gross	Gross	Gross	
		Unrecognized	Unreco gnized	Unrecognized	
	Book/Adjusted	Unrealized	Unrealized Losses		Fair
	Carrying Value	Gains	< 1 Year	> 1 Year	Value
U.S. government and agency securities	\$ 99,875,980	\$ 3,390,909	\$ 81,507	\$-	\$ 103,185,382
State and agency municipal securities	53,391,535	3,914,858	-	-	57,306,393
City and county municipal securities	82,471,674	4,608,746	3,127	-	87,077,293
Corporate debt securities	244,219,654	12,766,730	55,074	131,093	256,800,217
Total bonds	\$ 479,958,843	\$ 24,681,243	\$ 139,708	\$ 131,093	\$ 504,369,285
			2020		
		Gross	Gross	Gross	
		Unrecognized	Unreco gnized	Unrecognized	
	Book/Adjusted	Unrealized		Unrealized Losses	Fair
	Carrying Value	Gains	< 1 Year	> 1 Year	Value
Less than one year	\$ 11,520,205	\$ 144,737	\$-	\$-	\$ 11,664,942
One to five years	144,321,975	7,972,271	7,525	-	152,286,721
Five to ten years	123,573,642	8,518,341	17,580	21,934	132,052,469
Over ten years	200,543,021	8,045,894	114,603	109,159	208,365,153

			2019		
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$104,877,878	\$ 1,563,619	\$ 39,448	\$-	\$106,402,049
State and agency municipal securities	36,858,579	1,895,906	-	-	38,754,485
City and county municipal securities	40,768,217	2,518,109	-	11,395	43,274,931
Corporate debt securities	492,656,029	4,284,091	167,419	125,878	496,646,823
Total bonds and short-term investments	\$675,160,703	\$ 10,261,725	\$ 206,867	\$ 137,273	\$685,078,288

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of \$117,294,673 and fair value of \$120,321,202.

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2020 and 2019:

			2020		
	< 1	Year	> 1 Year	То	
	Fair Value	Gross Unrecognized Unrealized Losses	Gross Unrecognized Fair Unrealized Value Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities City and county municipal securities Corporate debt securities	\$ 34,831,249 3,393,344 20,237,340	\$ 81,507 3,127 55,074	\$ - \$ - 	\$ 34,831,249 3,393,344 46,842,431	\$ 81,507 3,127 186,167
Total bonds	\$ 58,461,933	\$ 139,708	<u>\$ 26,605,091</u> <u>\$ 131,093</u>	\$ 85,067,024	\$ 270,801
			2019		
	< 1	Year	> 1 Year	To	
		Gross	Gross		Gross
	Fair Value	Unrecognized Unrealized Losses	Unrecognized Fair Unrealized Value Losses	Fair Value	Unrecognized Unrealized Losses
U.S. government and agency securities City and county municipal securities Corporate debt securities	\$ 17,794,447 	\$ 39,448 - 	\$-\$- 1,268,379 11,395 21,258,764 125,878	\$ 17,794,447 1,268,379 66,228,410	\$ 39,448 11,395 293,297
Total bonds and short-term investments	\$ 62,764,093	\$ 206,867	<u>\$ 22,527,143</u> <u>\$ 137,273</u>	\$ 85,291,236	\$ 344,140

The unrecognized unrealized losses on investments in U.S. government and agency securities, city and county municipal securities, and corporate debt securities at December 31, 2020 and 2019, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the state and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an OTTI such as the length of time and extent to which fair value has been less than cost, the financial condition, and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company's intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of these reviews, the Company recorded an OTTI of \$459,966 and \$0 as of December 31, 2020 and 2019, respectively, which are included in net realized capital gains less taxes.

A–C. The Company has no mortgage loans, real estate loans, restructured debt, or reverse mortgages. The Company also has no real estate property occupied by the Company, real estate property held for the production of income, or real estate property held for sale.

D. Loan-Backed Securities

(1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.

(2) As of December 31, 2020, the Company has classified loan-backed securities that have OTTIs as intent to sell. For the remaining loan-backed securities, the Company has the intent and ability to retain the investment in the security for a period of time sufficient to recover the amortized cost basis and determined that the present value of cash flows to be collected is equal to or exceeds the amortized cost basis of the security, as of December 31, 2020. The table below illustrates the aggregate OTTIs recognized on loanbacked securities classified on the basis for the OTTI during 2020:

	Before Ter	1 d Cost Basis Other-than- nporary airment	Other-tha Impairme	2 an-Temporary nt Recognized n Loss	Fa	3 air Value 1 - 2
OTTI Recognized 1st Quarter						
 a. Intent to sell b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis 	\$	-	\$	-	\$	-
c. Total 1st Quarter	\$	-	\$	-	\$	-
OTTI Recognized 2nd Quarter						
 d. Intent to sell e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis 	\$	-	\$	-	\$	-
f. Total 2nd Quarter	\$	-	\$	_	\$	-
OTTI Recognized 3rd Quarter						
 g. Intent to sell h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis 	\$	95,451	\$	7,607	\$	87,844
i. Total 3rd Quarter	\$	95,451	\$	7,607	\$	87,844
OTTI Recognized 4th Quarter						
 j. Intent to sell k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis 	\$	-	\$	-	\$	-
I. Total 4th Quarter	\$		\$		\$	
m. Annual aggregate total			\$	7,607		

The Company did not recognize any OTTI on loan-backed securities due to an inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis, or where the present value of cash flows expected to be collected is less than the amortized cost basis of the security, as of December 31, 2020.

(3) The table below represents the loan-backed securities with an OTTI for the years ended December 31, 2020 and 2019, presented by CUSIP:

		2020			
-	3	4	5	6	7
-			A		D
	B	B			Date of Financia
		•		E ela Melue	Statemer
					Where
OTTI	Cash Flows	Impairment	Impairment	OTTI	Reporte
\$ 95,451	\$ 87,844	\$ 7,607	\$ 87,844	\$ 87,844	9/30/2020
XXX	XXX	\$ 7,607	XXX	XXX	XXX
		2040			
2	3	4	5	6	7
Book/Adjusted					
Carrying Value			Amortized		Date of
Amortized	Present	Recognized	Cost After		Financia
Cost before	Value of	Other-than-	Other-than-	Fair Value	Statemer
Current Period	Projected	Temporary	Temporary	at Time of	Where
SIP OTTI Cash Flows Impairment			Loss of the second second		
οττι	Cash Flows	Impairment	Impairment	οττι	Reporte
отті \$	S -	1 mpairment	1 mpairment	\$	Reporte
	\$ 95,451 	Book/Adjusted Carrying Value Amortized Cost before Current Period OTTI S 95,451 XXX XXX XXX XXX XXX XXX XXX XXX XXX	2 3 4 Book/Adjusted Carrying Value Amortized Present Recognized Amortized Present Value of Other-than- Current Period Projected Temporary OTTI Cash Flows Impairment \$ 95,451 \$ 87,844 \$ 7,607	2 3 4 5 Book/Adjusted Carrying Value Amortized Amortized Amortized Present Recognized Cost After Cost before Value of Other-than- Other-than- Current Period Projected Temporary Impairment \$ 95,451 \$ 87,844 \$ 7,607 \$ 87,844	2 3 4 5 6 Book/Adjusted Carrying Value Amortized Amortized Present Value of Other-than- Current Period OTTI Recognized Cost After Cash Flows Amortized Cost After Impairment Fair Value Other-than- Temporary Impairment \$ 95,451 \$ 87,844 \$ 7,607 \$ 87,844 \$ 87,844

(4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of December 31, 2020 and 2019:

	2020
The aggregate amount of unrealized losses: 1. Less than 12 months 2. 12 months or longer	\$ 136,582 131,093
The aggregate related fair value of securities with unrealized losses: 1. Less than 12 months 2. 12 months or longer	55,068,590 26,605,091 2019
The aggregate amount of unrealized losses: 1. Less than 12 months 2. 12 months or longer	\$ 124,324 125,878
The aggregate related fair value of securities with unrealized losses: 1. Less than 12 months 2. 12 months or longer	42,839,713 21,258,764

- (5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principle and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows, the underlying credit quality and credit ratings of the issuers, and the potential economic impacts of COVID-19 on the issuers, noting no significant credit deterioration since purchase. As of December 31, 2020, the unrealized loss on any security that the Company classified as intent to sell was not material to the Company's investment portfolio. Any other securities in an unrealized loss position as of December 31, 2020, the Company considers to be temporary.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not applicable.
- J. Real Estate Not applicable.
- K. Low-Income Housing Tax Credits ("LIHTC") Not applicable.

L. Restricted Assets —

(1) Restricted assets, including pledged securities as of December 31, 2020 and 2019, are presented below:

	Restricted Asset Category	(Adı Nona Restri	1 al Gross mitted & admitted) icted From ent Year	N	2 Total Gross (Admitted & Ionadmitted) stricted From Prior Year		3 Increase/ (Decrease) (1 Minus 2)	Non	4 I Current Year admitted stricted	5 Total Current Year Admitted Restricted (1 minus 4)		6 Gross (Admitted & Nonadmitted Restricted to Total Assets (a)		7 Admitte Restricted Total Admitted Assets (f	d to d
a.	Subject to contractual obligation for which liability is not shown	s		s		\$		e		¢					
b.	Collateral held under security lending	\$	-	Þ	-	Þ	-	Þ	-	Þ	-	-		-	
<u> </u>	agreements Subject to repurchase		-		-		-		-		-			-	
	agreements		-		-		-		-		-			-	
d.	Subject to reverse repurchase agreements		-		-		-		-		-			-	
e.	Subject to dollar repurchase agreements														
f.	Subject to dollar reverse		-		-				-		-			-	
a	repurchase agreements Placed under option		-		-				-		-			-	
0	contracts		-		-		-		-		-	-		-	
h.	Letter stock or securities restricted as to sale— excluding FHLB capital														
i.	stock FHLB capital stock		-		-		-		-		-			-	
j.	On deposit with states	30	- 65,715,095		- 352,591,035		- 13,124,060		-	36	- 5,715,095		40 %	-	40 %
k.	On deposit with other regulatory bodies		-		-		-		-		-			-	
I.															
m.	agreements) Pledged as collateral not captured in other		-		-		-		-		-			-	
n.	categories Other restricted assets		-		-		-		-		-			-	
0.	Total restricted assets	\$ 30	65,715,095	\$	352,591,035	\$	13,124,060	\$	-	\$ 36	5,715,095		<u>40 %</u>		<u>40 %</u>

(a) Column 1 divided by Asset Page, Column 1, Line 28
(b) Column 5 divided by Asset Page, Column 3, Line 28

(2–4) The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2020 or 2019.

M. Working Capital Finance Investments — Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company does not have any offsetting or netting of assets and liabilities as it relates to derivatives, repurchase and reverse repurchase agreements, and securities borrowing and securities lending activities.

O. 5GI Securities

The Company does not have any investments with an NAIC designation of 5GI as of December 31, 2020 and 2019.

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees —

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2020:

	Gen	eral Account
1. Number of CUSIPs		3
2. Aggregate Amount of Investment Income	\$	661,669

R. Reporting Entity's Share of Cash Pool by Asset Type — Pursuant to the early adoption of SSAP No. 2R in June 2020 (see Note 1), the Company's investment in the qualified cash pool is being reported in cash equivalents. Prior to the early adoption, the qualified cash pool was being

reported in short-term investments. The Company's investment in the qualified cash pool balance is \$355,251,646 and \$243,792,392 as of December 31, 2020 and 2019, respectively.

The following table presents the percent share distribution by asset type of the total qualified cash pool balance as of December 31, 2020:

Asset Type	Percent Share					
(1) Cash	0%					
(2) Cash Equivalents	85%					
(3) Short-Term Investments	15%					
(4) Total	100%					

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

A–B. The Company has no investments in joint ventures, partnerships, or limited liability companies that exceed 10% of admitted assets and did not recognize any impairment write-down for its investments in joint ventures, partnerships, and limited liability companies during the statement periods.

7. INVESTMENT INCOME

- A. The Company excludes all investment income due and accrued amounts that are over 90 days past due from the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- **B.** There were no investment income amounts excluded from the statutory basis financial statements.

8. DERIVATIVE INSTRUMENTS

A–B. The Company has no derivative instruments.

9. INCOME TAXES

A. Deferred Tax Asset/Liability

(1) The components of the net deferred tax asset at December 31, 2020 and 2019 are as follows:

		2020			2019		Change					
-	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7+8) Total			
(a) Gross deferred tax assets(b) Statutory valuation allowance adjustments	\$ 4,103,534	\$ - -	\$ 4,103,534	\$ 16,863,463 11,330,616	\$ 4,209 4,209	\$ 16,867,672 11,334,825	\$ (12,759,929) (11,330,616)	\$ (4,209) (4,209)	\$ (12,764,138) (11,334,825)			
(c) Adjusted gross deferred tax assets (1a - 1b)	4,103,534	-	4,103,534	5,532,847	-	5,532,847	(1,429,313)		(1,429,313)			
(d) Deferred tax assets nonadmitted			<u> </u>				<u> </u>	<u> </u>				
(e) Subtotal net admitted deferred tax asset (1c - 1d)	4,103,534		4,103,534	5,532,847		5,532,847	(1,429,313)		(1,429,313)			
(f) Deferred tax liabilities	212,506		212,506	323,425		323,425	(110,919)		(110,919)			
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	<u>\$ 3,891,028</u>	<u>\$</u>	<u>\$ 3,891,028</u>	<u>\$ 5,209,422</u>	<u>\$</u>	<u>\$ 5,209,422</u>	<u>\$ (1,318,394)</u>	<u>\$ -</u>	<u>\$ (1,318,394)</u>			

(2)

) The components of the adjusted gross deferred tax assets admissibility calculation under SSAP No. 101, *Income Taxes*, are as follows:

		2020			2019			Change					
Admission Calculation	1	2	3 (Col 1 + 2)	4	5	6 (Col 4 + 5)	7 (Col 1 - 4)	8 (Col 2 - 5)	9 (Col 7 + 8)				
Components SSAP No. 101	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total				
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 4,103,533	\$-	\$ 4,103,533	\$ 5,532,847	\$ -	\$ 5,532,847	\$ (1,429,314)	\$-	\$ (1,429,314)				
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and													
2(b)2 below) 1. Adjusted gross deferred tax assets expected to be realized following	-	-	-	-	-	-	-	-	-				
the balance sheet date 2. Adjusted gross deferred tax assets allowed per	-	-	-	-	-	-	-	-	-				
limitation threshold	XXX	XXX	63,976,469	XXX	XXX	52,424,932	XXX	XXX	11,551,537				
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross													
deferred taxliabilities	1	-	1	<u> </u>	-		1	-	1				
(d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))	\$ 4,103,534	s -	\$ 4,103,534	\$ 5,532,847	\$ -	\$ 5,532,847	\$ (1.429,313)	\$ -	\$ (1.429.313)				
(2(d) · 2(d) · 2(d))	φ 4,100,004	Ŷ -	φ 4,100,004	¢ 0,002,047	Ψ -	φ 0,002,047	¢ (1,420,010)	Ψ -	φ (1,420,010)				

(3) The ratio percentage and adjusted capital and surplus used to determine the recovery period and threshold limitations for the admissibility calculation are presented below:

	2020			2019
 (a) Ratio percentage used to determine recovery period and threshold limitation amount (b) Amount of adjusted capital and surplus used to 		740 %		347 %
determine recovery period and threshold limitation in 2(b)(2) above	\$	426,509,792	\$	349,499,548

(4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2020 and 2019 is presented below:

	2020					20	19		Change			
		1		2		3		4		5		6
Impact of Tax-Planning										(Col 1 - 3)		(Col 2 - 4)
Strategies	C	Ordinary		Capital		Ordinary		Capital		Ordinary		Capital
 (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) 	\$	4,103,534	\$	-	S	\$ 5,532,847	\$	-	\$	(1,429,313)	\$	-
 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies 		- %		-	%	- %		- %		- %		- %
 Net admitted adjusted gross DTAs amount from Note 9A1(e) Percentage of net admitted adjusted 	\$	4,103,534	\$	-	\$	\$ 5,532,847	\$	-	\$	(1,429,313)	\$	-
gross DTAs by tax character admitted because of the impact of tax-planning strategies		- %		-	%	- %		- %		- %		- %
(b) Does the Company's tax-planning strategies include the use of reinsurance?						Yes				No	х	

B. Unrecognized Deferred Tax Liabilities

(1–4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2020 and 2019.

C. Significant Components of Income Taxes

(1) The current federal income taxes incurred (benefit) for the years ended December 31, 2020 and 2019 are as follows:

	1			2	3 (Col 1 - 2)
	2020			2019	Change
1. Current income tax					
(a) Federal	\$	22,726,416	\$	(11,371,421)	\$ 34,097,837
(b) Foreign		-		-	 -
(c) Subtotal		22,726,416		(11,371,421)	34,097,837
(d) Federal income tax on net capital gains		480,352		309,741	170,611
(e) Utilization of capital loss carryforwards		-		-	-
(f) Other		-		-	
(g) Total federal and foreign income taxes incurred (benefit)	\$	23,206,768	\$	(11,061,680)	\$ 34,268,448

(2–4) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2020 and 2019, are as follows:

	1			2		3
		2020		2019		(Col 1 - 2) Change
2 Deferred tax assets:						
(a) Ordinary: (1) Discounting of unpaid losses	\$	675,436	\$	738,625	\$	(63,189)
(2) Unearned premium reserve	φ	-	φ	-	φ	(03,189)
(3) Policyholder reserves		-		12,896,310		(12,896,310)
(4) Investments(5) Deferred acquisition costs		-		-		-
(6) Policyholder dividends accrual		-		-		-
(7) Fixed assets(8) Compensation and benefits accrual		-		-		-
(9) Pension accrual		-		-		-
(10) Receivables — nonadmitted (11) Net operating loss carryforward		3,261,864		3,073,627		188,237
(12) Tax credit carryforward		-		-		-
(13) Other (including items <5% of total ordinary tax assets)		166,234		154,901		11,333
(99) Subtotal		4,103,534		16,863,463		(12,759,929)
(b) Statutory valuation allowance adjustment (c) Nonadmitted		-		11,330,616 -		(11,330,616) -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)		4,103,534		5,532,847		(1,429,313)
(e) Capital:						
(1) Investments(2) Net capital loss carryforward		-		4,209		(4,209)
(3) Real estate		-		-		-
(4) Other (including items <5% of total capital tax assets)		-				
(99) Subtotal		-		4,209		(4,209)
(f) Statutory valuation allowance adjustment (g) Nonadmitted		-		4,209		(4,209)
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)		-		-	_	-
(i) Admitted deferred tax assets (2d + 2h)		4,103,534		5,532,847		(1,429,313)
3 Deferred tax liabilities:						
(a) Ordinary: (1) Investments		-		68,418		(68,418)
(2) Fixed assets		-		-		-
(3) Deferred and uncollected premium(4) Policyholder reserves		-		-		-
(5) Other (including items <5% of total ordinary tax liabilities)		212,506		255,007		(42,501)
(99) Subtotal		212,506		323,425		(110,919)
(b) Capital:						
(1) Investments (2) Real estate		-		-		-
(3) Other (including items <5% of total capital tax liabilities)		-		-		-
(99) Subtotal		-		-		
(c) Deferred tax liabilities (3a99 + 3b99)		212,506		323,425		(110,919)
4 Net deferred tax assets/liabilities (2i - 3c)	\$	3,891,028	\$	5,209,422	\$	(1,318,394)

The other ordinary deferred tax liability of \$212,506 and \$255,007 for 2020 and 2019, respectively, consists of discounting of unpaid losses.

The Company assessed the potential realization of the gross deferred tax asset and established a valuation allowance of \$0 and \$11,334,825 to reduce the gross deferred tax asset to \$4,103,534 and \$5,532,847 as of December 31, 2020 and 2019, respectively, which represents the amount of the asset estimated to be recoverable via carryback of losses and reduction of future taxes. The change in the valuation allowance is attributable to the current year taxable income and a reduction to overall DTA position.

D. The provision for federal income taxes incurred (benefit) is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income (loss) before federal income taxes incurred (benefit), plus capital gains tax. A summarization of the significant items causing this difference as of December 31, 2020 and 2019 is as follows:

	2020			2019		
	Am	ount	Effective Tax Rate	Am	ount	Effective Tax Rate
Tax provision at the federal statutory rate	\$	28,583,811	21%	\$	(20,365,779)	21%
Tax-exempt interest	Ŧ	(397,970)	0%	Ŧ	(517,194)	1
Health insurer fee		7,862,384	5%		-	-
Current year tax credit		-	0%		-	-
Other current year items		-	0%		-	-
Tax effect of nonadmitted assets		(188,237)	0%		2,357,036	(2)
Prior year true-up		-	0%		-	-
Deferred corrections		-	0%		-	-
Change in statutory valuation allowance		(11,334,825)	-7%		11,328,417	(12)
Other	\$	-	0%	\$	-	-
Total statutory income taxes	\$	24,525,163	18%	\$	(7,197,520)	8%
Federal income taxes incurred	\$	22,726,416	17%	\$	(11,371,421)	12%
Capital gains tax		480,352	0		309,741	-
Change in net deferred income tax		1,318,395	1		3,864,160	(4)
Total statutory income taxes	\$	24,525,163	18%	\$	(7,197,520)	8%
				_		

E. At December 31, 2020, the Company had no net operating loss carryforwards.

Current federal income taxes recoverable (payable) of \$671,231 and \$(10,651,320) as of December 31, 2020 and 2019, respectively, are included in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Federal income taxes paid (recovered), net of refunds, were \$34,529,320 and \$(21,382,153) in 2020 and 2019, respectively.

Federal income taxes incurred of \$23,206,769 and \$0 for 2020 and 2019, respectively, are available for recoupment in the event of future net losses.

The Company has not admitted any aggregate amounts of deposits that are included within Section 6603 ("Deposits made to suspend running of interest on potential underpayments, etc.") of the Internal Revenue Service ("IRS") Code.

- F. The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The entities included within the consolidated return are included in the NAIC Statutory Statement Schedule Y—Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses, the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal income tax return of UnitedHealth Group. UnitedHealth Group currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The U.S. IRS has completed exams on UnitedHealth Group's consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group's 2017 through 2020 tax returns are under review by the IRS under its Compliance Assurance Program. With the exception of a few states, UnitedHealth Group is no longer subject to income tax examinations prior to the 2013 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2015 and forward. The Company does not believe any adjustments that may result from these examinations will be material to the Company.
- G. Tax Contingencies Not applicable.
- H. Repatriation Transition Tax Not applicable.
- I. Alternative Minimum Tax Credit Not applicable.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

A–B. In the ordinary course of business, the Company contracts with several affiliates to provide a wide variety of services to the Company's members. These agreements are filed with and approved by the Department according to Management's understanding of the current requirements and standards. Within the confines of the applicable filed and approved agreements (including subsequent amendments thereto), the amount and types of services provided by these affiliated entities can change year over year.

UHS maintains a private short-term investment pool in which affiliated companies may participate (see Note 1). At December 31, 2020 and 2019, the Company's portion was \$355,251,646 and \$243,792,392, respectively, and pursuant to SSAP No. 2R (see Note 1), is included in cash equivalents as of December 31, 2020 and in short-term investments as of December 31, 2019 in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

The Company has a tax-sharing agreement with UnitedHealth Group (see Note 9).

The Company paid no dividends in 2020 or 2019, but did declare a \$35,000,000 to its parent in 2020 (see Note 13).

The Company received capital infusions of \$0 and \$150,000,000 in 2020 and 2019, respectively, from its parent (see Note 13).

The Company holds a \$75,000,000 subordinated revolving credit agreement with UnitedHealth Group at an interest rate of London InterBank Offered Rate plus a margin of 0.50%. This credit agreement is subordinate to the extent it does not conflict with any credit facility held by either party. The credit agreement is for a one-year term and automatically renews annually, unless terminated by either party. The agreement was renewed effective December 31, 2020. No amounts were outstanding under the line of credit as of December 31, 2020 and 2019. There was no interest paid or still accrued on any borrowings throughout the year as of December 31, 2020 and 2019, respectively.

C. Transactions With Related Parties Who Are Not Reported On Schedule Y

The Company has no material related party transactions that meet the disclosure requirements pursuant to SSAP No. 25, *Affiliates and Other Related Parties* ("SSAP No. 25") that are not included in NAIC Statutory Statement Schedule Y—Part 2 Summary Of Insurer's Transactions With Any Affiliates.

- D. At December 31, 2020 and 2019, the Company reported \$13,269,057 and \$14,958,373, respectively, as amounts due to parent, subsidiaries, and affiliates, net which are included in the statutory basis statements of admitted assets, liabilities, and capital and surplus. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.
- E. The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month; (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in GAE, CAE, and hospital and medical expenses in the statutory basis statements of operations. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2020 and 2019, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

	2020	2019
OptumRx, Inc.	\$ 368,839,378	\$ 382,761,419
United HealthCare Services, Inc.	160,047,072	185,883,543
March Vision Care Group, Incorporated	11,041,915	12,751,550
Riverside Pediatric Group, P.C.	5,784,011	5,488,018
Dental Benefits Providers, Inc.	4,342,155	4,996,856
Ear Professionals International Corporation	1,578,370	5,392,843

OptumRx provides services that may include, but are not limited to, administrative services related to pharmacy management and pharmacy claims processing for enrollees, manufacturer rebate administration, pharmacy incentive services, specialty drug pharmacy services, durable medical equipment services including orthotics and prosthetics and personal health products

catalogues showing the healthcare products and benefit credits enrollees needed to redeem the respective products.

UHS provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for UHS to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, treasury and investment functions, claims adjudication and payment, benefit administration, disease management, health care decision support, medical management, credentialing, preventative health services, and utilization management reporting.

March Vision Care Group, Incorporated provides administrative services related to vision benefit management and claims processing.

Riverside Pediatric Group, P.C. provides medical assistance for children.

Dental Benefit Providers, Inc. provides dental care assistance.

Ear Professionals International Corporation provides hearing support services.

- **F.** The Company has not extended any guarantees or undertakings for the benefit of an affiliate or related party.
- **G.** The Company is part of an insurance holding company system with UnitedHealth Group as the ultimate parent. Management believes that the Company's transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.
- **H.** The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.
- I. The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.
- J. The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.
- K. The Company does not have any investments in foreign insurance subsidiaries.
- L. The Company does not hold any investments in a downstream noninsurance holding company.
- **M.** The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.
- **N.** The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.
- **O.** The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships and limited liability companies in which the Company's share of losses exceeds the investment.

11. DEBT

A–B. The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2020 and 2019.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

A-I. The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, or compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of UHS, which provides services to the Company under the terms of the Agreement (see Note 10).

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS

A–B. The Company has 25,000 shares authorized and 5,369 shares issued and outstanding of no par common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, AmeriChoice.

- **C.** Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Department.
- D. On November 19, 2020, the Company declared an ordinary cash dividend of \$35,000,000 to the sole shareholder, AmeriChoice which was unpaid as of December 31, 2020. The ordinary dividend complied with the provisions set forth in the statutes of New Jersey and is reported as an aggregate write-in for other liabilities and as a reduction to unassigned surplus in the statutory basis statements of admitted assets, liabilities, and capital and surplus. The Company received approval from the Department on January 26, 2021 and the dividend was paid on January 28, 2021.

The Company received cash infusions of \$150,000,000 in 2019 from the Company's parent, AmeriChoice, which were recorded as an increase to gross paid-in and contributed surplus in the statutory basis statements of admitted assets, liabilities, and capital and surplus. No cash infusions were received in 2020.

- **E.** The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- F. There are no restrictions placed on the Company's unassigned surplus.
- **G.** The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- **H.** The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- I. As discussed in Note 1, in 2020 no amount was required to be apportioned out of unassigned surplus as the HIF was repealed by Congress, effective January 1, 2021. For the year ended December 31, 2019, the amount of the estimated Section 9010 ACA subsequent fee year assessment apportioned out of unassigned surplus was \$37,345,597.
- J. The portion of unassigned surplus, excluding the apportionment of estimated Section 9010 ACA subsequent fee year assessment, net income (loss), and dividends or infusions, represented (or reduced) by each item below is as follows:

	2020	2019
Net deferred income taxes Nonadmitted assets	\$ 3,891,028 (15,532,688)	\$ 5,209,422 (14,636,319)
Total	<u>\$ (11,641,660)</u>	\$ (9,426,897)

K-M. The Company does not have any outstanding surplus notes and has never been a party to a quasi-reorganization.

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A. Contingent Commitments

The Company has no contingent commitments.

B. Assessments

The Company is not aware of any guaranty fund assessments or premium tax offsets, potential or accrued, that could have a material financial effect on the operations of the entity.

C. Gain Contingencies

The Company is not aware of any gain contingencies that should be disclosed in the statutory basis financial statements.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits — Not applicable.

E. Joint and Several Liabilities — Not applicable.

F. All Other Contingencies

The Company's business is regulated at the federal, state, and local levels. The laws and rules governing the Company's business and interpretations of those laws and rules are subject to frequent change. Broad latitude is given to the agencies administering those regulations. Further, the Company must obtain and maintain regulatory approvals to market and sell many of its products.

The Company has been, or is currently involved, in various governmental investigations, audits and reviews. These include routine, regular and special investigations, audits and reviews by the Centers for Medicare & Medicaid Services ("CMS") state insurance and health and welfare departments and other governmental authorities. The Company cannot reasonably estimate the range of loss, if any, that may result from any material government investigations, audits and reviews in which it is currently involved given the inherent difficulty in predicting regulatory action, fines and penalties, if any, and the various remedies and levels of judicial review available to the Company in the event of an adverse finding.

Because of the nature of its businesses, the Company is frequently made party to a variety of legal actions and regulatory inquiries, including class actions and suits brought by members, care providers, consumer advocacy organizations, customers and regulators, relating to the Company's businesses, including management and administration of health benefit plans and other services.

The Company records liabilities for its estimates of probable costs resulting from these matters where appropriate. Estimates of costs resulting from legal and regulatory matters involving the Company are inherently difficult to predict, particularly where the matters involve: indeterminate claims for monetary damages or may involve fines, penalties or punitive damages; present novel legal theories or represent a shift in regulatory policy; involve a large number of claimants or regulatory bodies; are in the early stages of the proceedings; or could result in a change in business practices. Accordingly, the Company is often unable to estimate the losses or ranges of losses for those matters where there is a reasonable possibility, or it is probable that a loss may be incurred. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect on the statutory basis statements of admitted assets, liabilities, and capital and surplus or statutory basis statements of operations of the Company.

The Company routinely evaluates the collectability of all receivable amounts included in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Impairment reserves are established for those amounts where collectability is uncertain. Based on the Company's past experience, exposure related to uncollectible balances and the potential of loss for those balances not currently reserved for is not material to the Company's statutory basis financial condition.

There are no other assets that the Company considers to be impaired at December 31, 2020 and 2019, except as disclosed in Note 5 and Note 20.

15. LEASES

A–B. According to the Agreement between the Company and UHS (see Note 10), operating leases for the rental of office facilities and equipment are the responsibility of UHS. Fees associated with the lease agreements are included as a component of the Company's management fee.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

(1–4) The Company does not hold any financial instruments with off-balance-sheet risk or have any concentrations of credit risk.

17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

A-C. The Company did not participate in any transfer of receivables, financial assets or wash sales.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

A–B. The Company has no operations from Administrative Services Only Contracts or Administrative Services Contracts in 2020 and 2019.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Company's Medicaid contract was subject to reconciliations under the ACA program for enhanced rates to primary care physicians through non-risk reconciled payments. The enhanced rate program is in run-out as of December 31, 2016. The Company recorded a payable in liability for amounts held under uninsured plans in the statutory basis statements of admitted assets, liabilities, and capital and surplus of \$1,068,206 as of December 31, 2020 and December 31, 2019 for cost reimbursements and payments to providers under this program. There is no risk to the Company since any excess or shortfall is 100% remitted to or received back from the state after the final reconciliation.

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2020 and 2019.

20. FAIR VALUE MEASUREMENTS

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

Level 1 — Quoted (unadjusted) prices for identical assets in active markets.

Level 2 — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets;
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.);
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.);
- Inputs that are derived principally from or corroborated by other observable market data.

Level 3 — Unobservable inputs that cannot be corroborated by observable market data.

The estimated fair values of bonds, cash equivalents, and short-term investments, (collectively "investment holdings") are based on quoted market prices, where available. The Company obtains one price for each security primarily from a third-party pricing service ("pricing service"), which generally uses quoted prices or other observable inputs for the determination of fair value. The pricing service normally derives the security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service 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, non-binding broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds. As the Company is responsible for the determination of fair value, it performs quarterly analyses on the prices received from the pricing service to determine whether the prices are reasonable estimates of fair value. Specifically, the Company compares the prices received from the pricing service to a secondary pricing source, prices reported by its custodian, its investment consultant, and third-party investment advisors. Additionally, the Company compares changes in the reported market values and returns to relevant market indices to test the reasonableness of the reported prices. The Company's internal price verification procedures and review of fair value methodology documentation provided by independent pricing services have not historically resulted in an adjustment in the prices obtained from the pricing service.

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest-level input that is significant to the fair value measurement in its entirety. The Company's assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

A. Fair Value

(1) Fair Value Measurements at Reporting Date

The following tables present information about the Company's financial assets that are measured and reported at fair value at December 31, 2020 and 2019, in the statutory basis statements of admitted assets, liabilities, and capital and surplus according to the valuation techniques the Company used to determine their fair values:

	December 31, 2020				
Description for Each Class of Asset or Liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value: Perpetual preferred stock: Industrial and misc Parent, subsidiaries, and affiliates	\$ - -	\$ - 	\$ - 	\$ - 	\$ -
Total perpetual preferred stocks					
Bonds: U.S. governments Industrial and misc Hybrid securities Parent, subsidiaries, and affiliates	- - -	- - -		- - -	- - -
Total bonds					
Common stock: Industrial and misc Parent, subsidiaries, and affiliates	-	-	-	-	-
Total common stocks					
Derivative assets: Interest rate contracts Foreign exchange contracts Credit contracts Commodity futures contracts Commodity forward contracts	- - - -	- - - -		-	- - - -
Total derivatives	-	-	-	-	-
Money-market funds Qualified cash pool Separate account assets	19,022,889 355,251,646 	- - -	-	- -	19,022,889 355,251,646
Total assets at fair value/NAV	\$ 374,274,535	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 374,274,535</u>
b. Liabilities at fair value:					
Derivative liabilities	<u>\$</u> -	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$</u> -
Total liabilities at fair value	<u>\$</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$</u>

	December 31, 2019						
Description for Each Class of Asset or Liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total		
a. Assets at fair value: Perpetual preferred stock: Industrial and misc Parent, subsidiaries, and affiliates	\$ - 	\$ - 	\$ - 	\$ - 	\$ - -		
Total perpetual preferred stocks							
Bonds: U.S. governments Industrial and misc Hybrid securities Parent, subsidiaries, and affiliates	- - -	- - -	- - -		- - -		
Total bonds		-					
Common stock: Industrial and misc Parent, subsidiaries, and affiliates	-	-	-	-	-		
Total common stocks		-	-	-			
Derivative assets: Interest rate contracts Foreign exchange contracts Credit contracts Commodity futures contracts Commodity forward contracts		- - - - -	- - - - -	- - - - -			
Total derivatives	-	-	-	-	-		
Money-market funds Separate account assets	2,303,084	-	-	-	2,303,084		
Total assets at fair value/NAV	\$ 2,303,084	\$ -	\$ -	\$ -	\$ 2,303,084		
b. Liabilities at fair value: Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -		
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>		

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.
- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2020 or 2019.
- (4) The Company has no investments reported with a fair value hierarchy of Level 2 or Level 3 and therefore has no valuation technique to disclose.
- (5) The Company has no derivative assets and liabilities to disclose.

B. Fair Value Combination — Not applicable.

C. Aggregate Fair Value Hierarchy

Pursuant to the early adoption of SSAP No. 2R in June 2020 (see Note 1), the Company's investment in the qualified cash pool is being reported in cash equivalents in the December 31, 2020 table below. Prior to the early adoption, the qualified cash pool was being reported in short-term investments and presented in corporate debt securities in the December 31, 2019 table below. The Company's investment in the qualified cash pool balance is \$355,251,646 and \$243,792,392 as of and December 31, 2020 and 2019, respectively.

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2020 and 2019 is presented in the table below:

				December 31, 20	20		
Type of	Aggregate	Admitted				Net Asset Value	Not Practicable
Financial Instrument	Fair Value	Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
U.S. government and agency securities	\$ 103,185,382	\$ 99,875,980	\$ 22,093,634	\$ 81,091,748	\$ -	\$-	\$-
State and agency municipal securities	57,306,393	53,391,535	-	57,306,393	-	-	-
City and county municipal securities	87,077,293	82,471,674	-	87,077,293		-	-
Corporate debt securities	256,800,217	244,219,654	-	256,800,217	-	-	-
Cash equivalents	374,274,535	374,274,535	374,274,535	-	-	-	-
Total bonds and cash equivalents	\$ 878,643,820	\$ 854,233,378	\$ 396,368,169	\$ 482,275,651	\$ -	\$-	\$ -
				December 31, 20	19		
Type of	Aggregate	Admitted				Net Asset Value	Not Practicable
Financial Instrument	Fair Value	Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
U.S. government and agency securities	\$ 106,402,050	\$ 104,877,878	\$ 19,368,617	\$ 87,033,433	\$ -	\$-	\$-
State and agency municipal securities	38,754,485	36,858,579	-	38,754,485	-	-	-
City and county municipal securities	43,274,931	40,768,217	-	43,274,931		-	-
Corporate debt securities	496,646,822	492,656,029	243,792,392	252,854,430	-	-	-
Cash equivalents	2,303,084	2,303,084	2,303,084	<u> </u>			<u> </u>
Total bonds, short-term investments, and							
cash equivalents	\$ 687,381,372	\$ 677,463,787	\$ 265,464,093	\$ 421,917,279	\$ -	\$-	\$-

D. Not Practicable to Estimate Fair Value — Not applicable.

E. Investments Measured Using the NAV Practical Expedient — Not applicable.

21. OTHER ITEMS

COVID-19 Trends and Uncertainties

The COVID-19 pandemic continues to evolve and the ultimate impact on the Company and its statutory basis results of operations, financial condition and cash flows remains uncertain. During the second quarter, the global health system experienced unprecedented levels of care deferral. As the pandemic advanced, access to and demand for care was most constrained from mid-March through April, began to recover in May and June and restored to near normal seasonal levels in the third quarter. Care patterns continued to normalize in the fourth quarter, returning to, and even exceeding, seasonal baselines, including COVID-19 treatment and testing costs, towards the end of the quarter. The temporary deferral of care experienced in 2020 may cause care patterns to moderately exceed normal baselines in future periods as utilization of health system capacity continues to increase. From time to time, health system capacity may be subject to possible increased volatility due to the pandemic. The Company has taken various measures which could include expanded benefit coverage in areas such as COVID-19 care and testing, telemedicine, and pharmacy benefits; provided customers assistance in the form of co-pay waivers and premium forgiveness; offered additional enrollment opportunities to those who previously declined employer-sponsored offerings; extended certain premium payment terms for customers experiencing financial hardship; simplified administrative practices; and accelerated payments to care providers, all with the aim of assisting our customers, care providers, members and communities in addressing the COVID-19 crisis. Temporary care deferrals impacted the Company's results of operations for the year ended December 31, 2020. The impact of temporary care deferrals was partially offset by COVID-19 related care and testing, the significant financial assistance provided to customers, rebate requirements and broader economic impacts.

Increased consumer demand for care, potentially even higher acuity care, along with continued COVID-19 care and testing costs are expected to result in increased future medical costs. Disrupted care patterns, as a result of the pandemic, may temporarily affect the ability to obtain complete member health status information, impacting future revenue in businesses that utilize risk adjustment methodologies. The ultimate overall impact is uncertain and dependent on the future pacing and intensity of the pandemic, the duration of policies and initiatives to address COVID-19, and the general economic recovery.

A. Unusual or Infrequent Items

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2020 and 2019.

B. Troubled Debt Restructuring: Debtors

The Company has no troubled debt restructurings as of December 31, 2020 and 2019.

C. Other Disclosures

The Company does not have any amounts not recorded in the statutory basis financial statements that represent segregated funds held for others. The Company also does not have any exposures related to forward commitments that are not derivative instruments.

D. Business Interruption Insurance Recoveries

The Company has not received any business interruption insurance recoveries during 2020 and 2019.

E. State Transferable and Non-transferable Tax Credits

The Company has no transferable or non-transferable state tax credits.

F. Sub-Prime Mortgage-Related Risk Exposure

- (1) The investment policy for the Company limits investments in loan-backed securities, which includes sub-prime issuers. Further, the policy limits investments in private-issuer mortgage securities to 10% of the portfolio, which also includes sub-prime issuers. The exposure to unrealized losses on sub-prime issuers is due to changes in market prices. There are no realized losses due to not receiving anticipated cash flows. The investments covered have an NAIC designation of 1 or 2.
- (2) The Company has no direct exposure through investments in sub-prime mortgage loans.
- (3) The Company has no direct exposure through other investments.
- (4) The Company has no underwriting exposure to sub-prime mortgage risk through mortgage guaranty or financial guaranty insurance coverage.

G. Retained Assets

The Company does not have any retained asset accounts for beneficiaries.

H. Insurance-Linked Securities Contracts

As of December 31, 2020, the Company is not aware of any possible proceeds of insurancelinked securities.

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 evaluated through February 26, 2021, which is the date these statutory basis financial statements were available for issuance.

<u>TYPE I — Recognized Subsequent Events</u>

Any material Type I events subsequent to December 31, 2020, have been recognized in the statutory basis financial statements and corresponding disclosures.

TYPE II — Non-Recognized Subsequent Events

For the years ended December 31, 2020 and 2019, the Company was subject to the annual fee under Section 9010 of the ACA. The fee is allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of the health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1, of the year the fee is due. The HIF was repealed by Congress, effective January 1, 2021.

The table below presents information regarding the annual fee under Section 9010 of the ACA as of December 31, 2020 and 2019:

	2020	2019
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	YES	-
B. ACA fee assessment payable for the upcoming year	\$-	\$ 37,345,597
C. ACA fee assessment paid	37,439,925	-
D. Premium written subject to ACA 9010 assessment	-	1,957,787,053
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 14)	430,400,820	
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)	430,400,820	
G. Authorized Control Level (Five-Year Historical Line 15)	57,634,731	
H. Would reporting the ACA assessment as of December 31, 2020, have triggered an RBC action level (YES/NO)?	NO	-

There are no other material non-recognized Type II events that require disclosure.

23. REINSURANCE

The Company does not have any affiliated or unaffiliated reinsurance agreements in place as of December 31, 2020 or 2019.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

- **A**. The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.
- B. Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations or aggregate health policy reserves, respectively, in the statutory basis statements of admitted assets, liabilities, and capital and surplus and as an adjustment to change in unearned premium reserves and reserve for rate credits in the statutory basis statements of operations.
- C. CMS released the final Medicaid Managed Care Rule which is subject to each State's administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum loss ratio requirement. Pursuant to the regulations, premiums associated with the Company's Medicaid line of business is subject to retrospectively rated features based on the actual medical loss ratios experienced on this product. In addition, the Company's Medicaid contract, including CHIP, with the State of New Jersey, is subject to redetermination features for which a portion of direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the direct premiums written can be eligible for a performance guarantee payment based on various quality measures, and for which a portion of direct premiums written is subject to risk adjusted rating changes and withhold adjustments. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$2,494,691,835 and \$2,650,150,963, representing 100% and 100% of total direct premiums written as of December 31, 2020 and December 31, 2019, respectively.
- **D.** The Company does not have comprehensive commercial business or Medicare business subject to specific minimum loss ratio requirements as of December 31, 2020 and 2019.

Pursuant to the Medicaid Managed Care Rule and/or state contractual minimum loss ratio requirements, the Company is required to maintain specific minimum loss ratios on its Medicaid population. The Company has no estimated state minimum loss ratio rebates on its Medicaid population as of December 31, 2020 and December 31, 2019.

E. Risk-Sharing Provisions of the Affordable Care Act

(1–5) The Company did not write accident and health premiums in 2020 and 2019 subject to the risk-sharing provisions of the ACA.

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

A. Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the statutory basis statements of operations. The following tables disclose paid claims, incurred claims, and the balance in the claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, and health care and other amounts receivable (excluding provider loans and advances) for the years ended December 31, 2020 and 2019:

		2020	
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$-	\$ (228,779,256)	\$ (228,779,256)
Paid claims—net of health care receivable*	1,834,414,546	166,918,576	2,001,333,122
End of year claim reserve	199,340,313	10,707,291	210,047,604
Incurred claims excluding the change in health care receivable	2,033,754,859	(51,153,389)	1,982,601,470
Beginning of year health care receivable*	-	22,698,166	22,698,166
End of year health care receivable*	(10,088,983)	(10,061,005)	(20,149,988)
Total incurred claims	\$ 2,023,665,876	\$ (38,516,228)	\$ 1,985,149,648

		2019	
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve Paid claims—net of health care receivable* End of year claim reserve	\$- 2,214,830,042 219,183,622	\$(234,086,014) 193,695,944 9,595,634	\$ (234,086,014) 2,408,525,986 228,779,256
Incurred claims excluding the change in health care receivable	2,434,013,664	(30,794,436)	2,403,219,228
Beginning of year health care receivable* End of year health care receivable*	(10,281,320)	34,469,043 (12,416,846)	34,469,043 (22,698,166)
Total incurred claims	\$2,423,732,344	\$ (8,742,239)	\$2,414,990,105

*Health care receivables excludes provider loans and advances not yet expensed of \$0 and \$200,000 for 2019 and 2018, respectively.

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, and aggregate health claim reserves, net of health care and other amounts receivable (excluding provider loans and advances not yet expensed) as of December 31, 2019 was \$206,081,090. As of December 31, 2020, \$166,918,576 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care receivables (excluding provider loans and advances not yet expensed) are now \$646,286, as a result of reestimation of unpaid claims. Therefore, there has been \$38,516,228 favorable prior year development since December 31, 2019 to December 31, 2020. The primary drivers consist of favorable development in retroactivity for inpatient, outpatient, physician, and pharmacy claims of \$33,739,106 and favorable development of \$11,602,286 for the provision for adverse deviations in experience, partially offset by \$3,724,402 in unfavorable development for risk share. At December 31, 2019, the Company recorded \$8,742,239 of favorable development. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of \$10,608,165, favorable development in risk share of \$1,899,242, partially offset by unfavorable development of \$4,649,824 in retroactivity for inpatient, outpatient, physician, and pharmacy claims. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the statutory basis statements of operations.

The Company incurred CAE of \$99,263,391 and \$109,073,170 in 2020 and 2019, respectively. These costs are included in the management service fees paid by the Company to UHS as a part of the Agreement (see Note 10). The following table discloses paid CAE, incurred CAE, and the balance in unpaid CAE reserve for 2020 and 2019:

	2020	2019
Total claims adjustment expenses Less: current year unpaid claims adjustment expenses Add: prior year unpaid claims adjustment expenses	\$99,263,391 (2,029,575) 2,391,283	\$ 109,073,170 (2,391,283) 2,374,821
Total claims adjustment expenses paid	\$99,625,099	\$ 109,056,708

B. The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid CAE in 2020.

26. INTERCOMPANY POOLING ARRANGEMENTS

A-G. The Company did not have any intercompany pooling arrangements in 2020 or 2019.

27. STRUCTURED SETTLEMENTS

A–B. The Company did not have structured settlements in 2020 or 2019.

28. HEALTH CARE RECEIVABLES

A. Pharmacy rebates receivable are recorded when reasonably estimated or billed by the affiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions.

The Company evaluates admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has nonadmitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of SSAP No. 84, *Health Care and Government Insured Plan Receivables* ("SSAP No. 84") from the statutory basis statements of admitted assets, liabilities, and capital and surplus.

For each pharmaceutical management agreement for which a portion of the total pharmacy rebates receivable can be admitted based on the admissibility criteria of SSAP No. 84, the pharmacy rebate transaction history is summarized as follows:

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
12/31/2020	\$ 3,105,016	\$ 856,939	\$-	\$ -	\$-
9/30/2020	3,206,592	2,918,011	1,727,684	-	-
6/30/2020	3,725,618	3,465,721	1,618,171	1,478,362	-
3/31/2020	4,398,220	3,967,512	202,582	3,652,594	14,877
12/31/2019	4,852,921	4,732,798	1,849,364	2,077,921	673,446
9/30/2019	4,740,350	4,865,325	1,809,732	1,643,024	1,333,749
6/30/2019	5,072,329	5,087,695	1,422,596	3,176,169	414,185
3/31/2019	4,699,252	4,874,824	1,981,403	1,155,789	1,613,039
12/31/2018	5,546,561	5,323,793	2,988,707	2,195,814	235,448
9/30/2018	5,280,131	5,329,331	2,691,382	1,874,905	672,590
6/30/2018	6,120,519	5,421,141	2,599,766	2,160,561	579,331
3/31/2018	6,178,044	5,617,222	1,893,999	3,029,922	616,334

Of the amount reported as health care and other amounts receivable, \$4,266,164 and \$7,735,590 relates to pharmacy rebates receivable as of December 31, 2020 and 2019, respectively. This decrease is primarily due to decreased membership along with the change in generic/name brand mix.

The Company also admitted approximately \$353,697 and \$329,450 for receivables from the providers for claims overpayments as of December 31, 2020, and 2019, respectively, which are included in health care and other amounts receivable in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

B. The Company does not have any risk-sharing receivables.

29. PARTICIPATING POLICIES

The Company did not have any participating contracts in 2020 or 2019.

30. PREMIUM DEFICIENCY RESERVES

The following table summarizes the Company's PDR as of December 31, 2020 and 2019:

		2020
1. Liability carried for premium deficiency reserves	\$	-
2. Date of the most recent evaluation of this liability		12/31/2020
3. Was anticipated investment income utilized in this calculation?	Yes	X No
		2019
1. Liability carried for premium deficiency reserves	\$	61,411,000
2. Date of the most recent evaluation of this liability		12/31/2019
3. Was anticipated investment income utilized in this calculation?	Yes	X No

PDR is included in aggregate health policy reserves in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, the Company has no salvage. As of December 31, 2020 and 2019, the Company had no specific accruals established for outstanding subrogation, as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid and aggregate health claim reserves.

GENERAL	INTERROGAT	ORIES
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PART 1 - COMMON INTERROGATORIES

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1, 1A and 2	
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	s [X] No [] N/A []
1.3	State Regulating?	New Jersey
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes [X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	0000731766
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] No [X]
2.2	If yes, date of change:	
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2018
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	12/31/2018
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	06/01/2020
3.4	By what department or departments? New Jersey Department of Banking and Insurance	
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Ye	s [] No [] N/A [X]
3.6	Have all of the recommendations within the latest financial examination report been complied with?	s[] No[X] N/A[]
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or com a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business?	Yes [] No [X]
4.2	4.12 renewals? During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affilial receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:	
	4.21 sales of new business?	
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC.	
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.	
	1 2 3 Name of Entity NAIC Company Code State of Domicile	
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended revoked by any governmental entity during the reporting period?	
6.2	If yes, give full information:	
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?	Yes [] No [X]
7.2	If yes,	
	 7.21 State the percentage of foreign control; 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact). 	<u>0.0</u> %
	1 2 Nationality Type of Entity	7

GENERAL INTERROGATORIES

8.1 8.2	If response to 8.1 is yes, please identify the name of the bank holding company.					Yes []	No [X]
8.3 8.4	N/A Is the company affiliated with one or more banks, thrifts or securiti If response to 8.3 is yes, please provide below the names and loc regulatory services agency [i.e. the Federal Reserve Board (FRB) Insurance Corporation (FDIC) and the Securities Exchange Comp	ies firms? ation (city and state of the main office) of any af , the Office of the Comptroller of the Currency ((filiates regulate DCC), the Fede	d by a fee eral Depo	deral	Yes [)	X]	No []
	1 Affiliato Namo	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC	7	
	Optum Bank, Inc.	Salt Lake City, Utah	NO	NO	YES	NO		
9.	What is the name and address of the independent certified public	·	•					
	Deloitte & Touche LLP, Minneapolis, MN							
10.1	Has the insurer been granted any exemptions to the prohibited no requirements as allowed in Section 7H of the Annual Financial Re law or regulation?	eporting Model Regulation (Model Audit Rule), o	r substantially s	imilar sta	ate	Yes [1	No [X]
10.2	If the response to 10.1 is yes, provide information related to this e	xemption:						
10.3	Has the insurer been granted any exemptions related to the other allowed for in Section 18A of the Model Regulation, or substantial	requirements of the Annual Financial Reporting	Model Regulat	tion as		Yes []	No [X]
10.4	If the response to 10.3 is yes, provide information related to this e	xemption:				-	-	
10.5	Has the reporting entity established an Audit Committee in compli	ance with the domiciliary state insurance laws?		····· ›	Yes [X	1 No [1	N/A [
10.6	If the response to 10.5 is no or n/a, please explain				-] 100 [1	
11.	What is the name, address and affiliation (officer/employee of the firm) of the individual providing the statement of actuarial opinion// Kevin P. Donnelly, Director of Actuarial Services of the Communit	certification? y and State division of United HealthCare Servi	d with an actuar ces, Inc., of whi	ial consu ch	ılting			
12.1	AmeriChoice of New Jersey is an affiliate, 9800 Health Care Lane Does the reporting entity own any securities of a real estate holdin					Yes [1	No [X]
		real estate holding company				100 [,	10 [7]
		of parcels involved				0		
		, k/adjusted carrying value						
12.2	If, yes provide explanation:							
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING EN							
13.1	What changes have been made during the year in the United Stat	tes manager or the United States trustees of the						
13.2	Does this statement contain all business transacted for the reporti					Yes [1	No []
13.3	Have there been any changes made to any of the trust indentures	during the year?				Yes [
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approv] No []	N/A [
14.1	Are the senior officers (principal executive officer, principal financi similar functions) of the reporting entity subject to a code of ethics a. Honest and ethical conduct, including the ethical handling of ac	, which includes the following standards?				Yes [)	X]	No []
	relationships; b. Full, fair, accurate, timely and understandable disclosure in the	periodic reports required to be filed by the report		ooononiai				
	c. Compliance with applicable governmental laws, rules and regul							
	d. The prompt internal reporting of violations to an appropriate per	rson or persons identified in the code; and						
14.11	e. Accountability for adherence to the code. If the response to 14.1 is No, please explain:							
14.2	Has the ends of athing for against managers been amonded?					Vac I	1	
	Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amen					res [1	No [X]
14.3	Have any provisions of the code of ethics been waived for any of t					Yes [1	No[X]
						100 [1	

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

GENERAL INTERROGATORIES

15.1				Yes [1 N	ωΓX	1		
15.2	If the response t	o 15.1 is yes, indicate the American Bankers Association (er of Credit and describe the circumstances in which the Le	ABA) Routing Number	and the name of the issuing or confirm	ning		,		1
	1 American Bankers Association	2		3			4		
	(ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances ⁻	That Can Trigger the Letter of Credit		Aı	mount		
						<u></u>			
		BOARD		S					
16.		or sale of all investments of the reporting entity passed upo				Yes [X I N	lo [1
17.	Does the reporti	ng entity keep a complete permanent record of the proceed	dings of its board of dire	ectors and all subordinate committees	5				1
18.	Has the reportin	g entity an established procedure for disclosure to its boarc officers, directors, trustees or responsible employees that	d of directors or trustee	s of any material interest or affiliation	on the	Yes [Yes [-	-]
		FI	NANCIAL						
19.	Has this stateme	ent been prepared using a basis of accounting other than S	Statutory Accounting Pr	inciples (e.g., Generally Accepted		. <i>.</i> -			
20.1	Accounting Prin	ciples)?	isive of policy loans).	20.11 To directors or other officers					
20.1		aned during the year (inclusive of deparate Accounts, excit	usive of policy loans).	20.12 To stockholders not officers					
				20.13 Trustees supreme or grand					
				(Fraternal Only)		<u>.</u> \$			0
20.2	Total amount of policy loans):	loans outstanding at the end of year (inclusive of Separate	Accounts, exclusive of	f 20.21 To directors or other officers		\$			0
	policy loans).			20.22 To stockholders not officers		-			
				20.02 Tructopa gunrama ar grand					
04.4	10/			(Fraternal Only)		\$			0
21.1	obligation being	s reported in this statement subject to a contractual obligati reported in the statement?	ion to transfer to anothe	er party without the liability for such		Yes [] N	lo [X]
21.2		amount thereof at December 31 of the current year:		21.21 Rented from others		.\$			0
				21.22 Borrowed from others					
				21.23 Leased from others					
22.1	Doos this staton	nent include payments for assessments as described in the	Annual Statement Inc	21.24 Other		\$			0
22.1	guaranty associa	ation assessments?				Yes [X] N	lo []
22.2	If answer is yes:			2.21 Amount paid as losses or risk ad					
				2.22 Amount paid as expenses					
00.4	Deep the report	na antitu ranart anu amaunta dua fram narant aubaidiariaa		2.23 Other amounts paid					
23.1 23.2		ng entity report any amounts due from parent, subsidiaries ny amounts receivable from parent included in the Page 2							
20.2	n yes, indicate a	ny amounts receivable from parent included in the r age 2				-Ψ			0
		INV	/ESTMENT						
24.01		cks, bonds and other securities owned December 31 of cur ssion of the reporting entity on said date? (other than secu				Yes [X] N	lo []
24.02	, 0	d complete information relating thereto							
24.03	whether collater	nding programs, provide a description of the program inclu al is carried on or off-balance sheet. (an alternative is to ref	ference Note 17 where	this information is also provided)					
24.04		entity's securities lending program, report amount of colla				_\$			0
24.05	For the reporting	entity's securities lending program, report amount of colla	teral for other program	S		.\$			0
24.06	Does your secur outset of the cor	ities lending program require 102% (domestic securities) a tract?	and 105% (foreign secu	rities) from the counterparty at the	Yes [] No []	N/A [X]
24.07	Does the reporti	ng entity non-admit when the collateral received from the c	counterparty falls below	100%?	Yes [] No [. 1	N/A [X]
24.08	Does the reporti conduct securiti	ng entity or the reporting entity 's securities lending agent u es lending?	utilize the Master Secur	rities lending Agreement (MSLA) to	Yes [] No []	N/A [X]

GENERAL INTERROGATORIES

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

	24.092 Total book adjusted/carrying value of reinvested co	orted on Schedule DL, Parts 1 and 2	; 0
25.1	Were any of the stocks, bonds or other assets of the reporting entity owned control of the reporting entity, or has the reporting entity sold or transferred force? (Exclude securities subject to Interrogatory 21.1 and 24.03).	any assets subject to a put option contract that is currently in	Yes [X] No []
25.2	If yes, state the amount thereof at December 31 of the current year:	 25.21 Subject to repurchase agreements 25.22 Subject to reverse repurchase agreements 25.23 Subject to dollar repurchase agreements 25.24 Subject to reverse dollar repurchase agreements 25.25 Placed under option agreements 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock 25.27 FHLB Capital Stock 25.28 On deposit with states 25.29 On deposit with other regulatory bodies 25.30 Pledged as collateral - excluding collateral pledged to an FHLB 25.31 Pledged as collateral to FHLB - including assets backing funding agreements 	\$0 \$0
		25.32 Other	<u>_\$</u> 0

25.3 For category (25.26) provide the following:

	1 Nature of Restriction	1 2 Nature of Restriction Description		3 ount
26.1	Does the reporting entity have any hedging transactions reported on Sc	hedule DB?	Yes [] No [X]
26.2	If yes, has a comprehensive description of the hedging program been m If no, attach a description with this statement.	nade available to the domiciliary state? Yes [] No [] N/A [X
LINES 2	6.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONL	_Y:		
26.3	Does the reporting entity utilize derivatives to hedge variable annuity gu	arantees subject to fluctuations as a result of interest rate sensitivity?	Yes [] No [X]
26.4	26.42 Per	ecial accounting provision of SSAP No. 108 mitted accounting practice er accounting guidance	Yes [] No []] No []] No []
26.5	 reserves and provides the impact of the hedging strategy within Financial Officer Certification has been obtained which indicate 	niciliary state. s consistent with the requirements of VM-21. he hedging strategy is incorporated within the establishment of VM-21	Yes [] No [X]
27.1	Were any preferred stocks or bonds owned as of December 31 of the c issuer, convertible into equity?		Yes [] No [X]
27.2	If yes, state the amount thereof at December 31 of the current year		\$	
28.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, r offices, vaults or safety deposit boxes, were all stocks, bonds and other custodial agreement with a qualified bank or trust company in accordan Outsourcing of Critical Functions, Custodial or Safekeeping Agreement	securities, owned throughout the current year held pursuant to a ce with Section 1, III - General Examination Considerations, F.	Yes [)	(] No []

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

1	2
Name of Custodian(s)	Custodian's Address
Bank of New York Mellon	Global Liquidity Services, 1 Wall St, 14th Floor, New York NY 10286
Northern Trust	50 S. LaSalle, Chicago, IL 60675

GENERAL INTERROGATORIES

28.02 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	2	3
Name(s)	Location(s)	Complete Explanation(s)
N/A		

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

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

1	2
Name of Firm or Individual	Affiliation
Internally Managed	I
JPMorgan Asset Management	U
Wellington Management Company, LLP	U

28.06 For those firms or individuals listed in the table for 28.05 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
107038	JPMorgan Asset Management	549300W78QHV4XMM6K69	SEC	NO
	Wellington Management Company, LLP	549300YHP12TEZNLCX41	SEC	NO
	• • • • • • • • • • • • • • • • • • •			

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and

1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
29.2999 - Total		0

29.3 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

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. 30.

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds			24,410,442
30.2 Preferred stocks	0	0	0
30.3 Totals	479,958,843	504,369,285	24,410,442

30.4 Describe the sources or methods utilized in determining the fair values: For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.

31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Y	es []	N	р [X]
31.2	If the answer to 31.1 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?	Ŷ	es []	N	o []
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:						
	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Ŷ	es [X]	N	p []
32.2	If no, list exceptions:						
33.	 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? 	Y	es []	Ne	5 [X]
34.	 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. 	Y	es []	N	5 [X]
35.	 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? 	Y	es [1	I N	5 [X	1
36.	 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. Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [-			-	-

GENERAL INTERROGATORIES

OTHER

37.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$	0
37.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to traservice organizations and statistical or rating bureaus during the period covered by this statement.	ade associations,	
	1 2 Name Amount Paid		
38.1	Amount of payments for legal expenses, if any?	\$	0
38.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expeduring the period covered by this statement.	enses	
	1 2 Name Amount Paid		
39.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of governments	nt, if any?\$	0
39.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures	in	

connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	1	2
	Name	Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?		
1.2 1.3	If yes, indicate premium earned on U.S. business only What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Ex		
	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	s 0
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	
		All years prior to most current three years: 1.64 Total premium earned	s 0
		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 1.72 Total incurred claims	
		1.73 Number of covered lives	
		All years prior to most current three years:	
		1.74 Total premium earned	\$0
		1.75 Total incurred claims	
		1.76 Number of covered lives	
2.	Health Test:		
		1 2	
		Current Year Prior Year	
	 2.1 Premium Numerator 2.2 Premium Denominator 		
	2.2 Premium Denominator 2.3 Premium Ratio (2.1/2.2)	1 000 1 000	
	2.4 Reserve Numerator		
	2.5 Reserve Denominator		
	2.6 Reserve Ratio (2.4/2.5)		
3.2	returned when, as and if the earnings of the reporting entity permits?		Yes [] No [X]
4.1	Have copies of all agreements stating the period and nature of hospitals', physicians dependents been filed with the appropriate regulatory agency?	s', and dentists' care offered to subscribers and	Yes [X] No []
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these a	greements include additional benefits offered?	Yes [] No []
5.1	Does the reporting entity have stop-loss reinsurance?		Yes [] No [X]
5.2	If no, explain: AmeriChoice of New Jersey, Inc. does not have any existing reinsurance contracts.		
5.3	Maximum retained risk (see instructions)	5.31 Comprehensive Medical	\$0
		5.32 Medical Only	\$0
		5.33 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 ar hold harmless provisions, conversion privileges with other carriers, agreements with agreements: Hold harmless clauses in provider agreements.	d their dependents against the risk of insolvency including 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 d	ate basis?	Yes [X] No []
7.2	If no, give details		
8.	Provide the following information regarding participating providers:	8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year	
9.1	Does the reporting entity have business subject to premium rate guarantees?		Yes [] No [X]
0.0	K		¢ 0
9.2	If yes, direct premium earned:	9.21 Business with rate guarantees between 15-36 months. 9.22 Business with rate guarantees over 36 months	

GENERAL INTERROGATORIES

10.1	Does the reporting entity have Incentive Pool, With	hhold or Bonus Ar	rrangements in it	s provider contracts?)	Yes [X] No []
10.2	If yes:			10.21 Maximum am	ount payable bonuses	\$	3,722,524
				10.22 Amount actua	ally paid for year bonuses	\$	8,951,447
					ount payable withholds		
					ally paid for year withholds		
11.1	Is the reporting entity organized as:						
				11 12 A Medica	al Group/Staff Model,	Yes [] No [X]
					dual Practice Association (IPA), or,	Yes [
					Model (combination of above)?	•] No [X]
11.0	In the reporting ontity subject to Statutony Minimum	a Canital and Sum		t= 2		Voc [V] No []
11.2	Is the reporting entity subject to Statutory Minimum					-	New Jersey
11.3	If yes, show the name of the state requiring such n		•			-	,
11.4	If yes, show the amount required.						
11.5 11.6	Is this amount included as part of a contingency re If the amount is calculated, show the calculation	eserve in stocknol	der's equity?			res [] No [X]
				ice Area v Jersey			
13.1 13.2	Do you act as a custodian for health savings account of custodial fund	unts?				•	
13.3	Do you act as an administrator for health savings a	accounts?				Yes [] No [X]
13.4	If yes, please provide the balance of funds adminis	stered as of the re	eporting date			\$	
14.1 14.2	Are any of the captive affiliates reported on Schedul If the answer to 14.1 is yes, please provide the following t		norized reinsurer	s?	Yes [] No [X	:] N/A [
	1	2	3	4	Assets Supporting Reserv	ve Credit	

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

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

	15.1 Direct Premium Written .	\$	0
	15.2 Total Incurred Claims	\$	0
	15.3 Number of Covered Live	S	0
*Ordinary Life Insurance Includes			
Term(whether full underwriting, limited underwriting, jet issue, "she	ort form app")		
Whole Life (whether full underwriting, limited underwriting, jet issu	e, "short form app")		
Variable Life (with or without secondary gurarantee)			

	finite Lie (mether fan andermining, minted andermining, jet leede, enertenn app /						
	Variable Life (with or without secondary gurarantee)						
	Universal Life (with or without secondary gurarantee)						
	Variable Universal Life (with or without secondary gurarantee)						
16.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes	[]	No [[X]	
16.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		[]	No [[X]	

FIVE-YEAR HISTORICAL DATA

		2020	2 2019	3 2018	4 2017	5 2016
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)					
2.	Total liabilities (Page 3, Line 24)			, ,	, ,	
3.	Statutory minimum capital and surplus requirement					
4.	Total capital and surplus (Page 3, Line 33)					272.880.20
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	2 396 773 442	2 649 753 209	2 714 463 416	2 569 148 354	2 549 219 8
6.	Total medical and hospital expenses (Line 18)					
о. 7.	Claims adjustment expenses (Line 20)					
8.	Total administrative expenses (Line 21)					
9.	Net underwriting gain (loss) (Line 24)					
9. 10.	Net investment gain (loss) (Line 24)					
	Total other income (Lines 28 plus 29)					
11.	Net income or (loss) (Line 32)					
12.		112,906,014	(85,918,220)	(20,072,006)		
	Cash Flow (Page 6)		(0.470.054)	(1.700.040)	05 047 007	05 400 4
13.	Net cash from operations (Line 11)	178,169,547	(6,4/2,051)	(1,782,642)		
	Risk-Based Capital Analysis					
14.	Total adjusted capital					
15.	Authorized control level risk-based capital		100,785,491			
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)					
17.	Total members months (Column 6, Line 7)	4,627,838	5,314,621	5,811,442	5,879,027	5,884,0
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)		100.0	100.0		
19.	Total hospital and medical plus other non-health	00.0				00
~~	(represented to the provide the prov					
20.	Cost containment expenses					2
21.	Other claims adjustment expenses					
22.	Total underwriting deductions (Line 23)					
23.	Total underwriting gain (loss) (Line 24) Unpaid Claims Analysis (U&I Exhibit, Part 2B)	5.1	(4.2)	(1.3)	2.4	5
24.	Total claims incurred for prior years					
25.	Estimated liability of unpaid claims-[prior year (Line		199,616,971			
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31					
32. 33.	Total investment in parent included in Lines 26 to					
50.	31 above.	0	0	0	0	

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS Allocated by States and Territories

2 3 4 5 6 7 8 9 Active Accident & Accident & Employees Life & Annuity Premiums & Property/ Total			Allocated by States and Territories 1 Direct Business Only								
Adiana Action of the second of t			I	2	3	4			7	8	9
State Access Decisit Pressure Use State Decisit Use State Total Pressure Total Pressure <thtotal pressure<="" th=""> Total Pressure</thtotal>				-	Ũ	•	-	Ŭ		Ũ	Ŭ
Active State Active Partial Parti Partial Partial Partial Parti Partial Partial Partia							Employees				
Data de State is enit Medicat Pern Other Consumt Cons Consumt Consumt Consum Cons Consumt Consumt Consumt							Health				
Better, PL (a) Provints Constants Provints Constants Provints Constants 1 Addresin AJ N 0<											
1 Alkebrain AL N 0 5 0		Statas ats									Deposit-Type
2 Adapting N	4									Ŭ.	Contracts
3. Alcona Az N 0<		, . <u> </u>	N	0	0		0	0	0	0	0
4. Advance AR 0		7	N		0		0		0		0
5. California CA N 0			N	0	0	0	0	0	0	0	0
6. Colorado CO N 0 S 0			N	0	0	0	0	0	0	0	0
1. Connectut of B. N 0			N	0	0	0	0	0	0	0	0
8. Delivante Deli N 0 <			N	0	0	0	0	0	0	0	0
9. District of Columbia Dr. N 0 <td></td> <td></td> <td>N</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td>			N	0	0	0	0	0	0	0	0
10. Porisia PL N 0			N	0	0	0	0	0	0	0	0
11. Gengla CA N 0			N	0	0	0	0	0	0	0	0
12. Haver Int N 0	10.	Florida FL	N	0	0	0	0	0	0	0	0
13. labol D N O D </td <td>11.</td> <td>Georgia GA</td> <td>N</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td>	11.	Georgia GA	N	0	0	0	0	0	0	0	0
14. Unode L N 0 </td <td></td> <td>Hawaii HI</td> <td>N</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td>		Hawaii HI	N	0	0	0	0	0	0	0	0
15. Indiana N N O	13.	Idaho ID	N	0	0	0	0	0	0	0	0
16. Iowa IA N D D D D D D D 17. Kansa KS N D	14.	Illinois IL	N	0	0	0	0	0	0	0	0
17. Karass ris N 0	15.	Indiana IN	N	0	0	0	0	0	0	0	0
18. Kertucky YY N 0 <th< td=""><td>16.</td><td>lowa IA</td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></th<>	16.	lowa IA	N	0	0	0	0	0	0	0	0
19. Louising LA N 0 <th< td=""><td>17.</td><td>Kansas KS</td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></th<>	17.	Kansas KS	N	0	0	0	0	0	0	0	0
20. Maine ME N 0 0 0 0 0 0 0 21. Massachustis MA N 0	18.	Kentucky KY	N	0	0	0	0	0	0	0	0
20. Maine ME N 0<			N	0	0	0	0	0	0	0	0
11. Mayand MO N 0			N	0	0	0	0	0	0	0	
12. Messachuzetts MA N 0			N.	0	0	0	0	0	0	0	0
33. Michigan Mi N 0 <th< td=""><td></td><td></td><td>N</td><td>0</td><td>0</td><td></td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></th<>			N	0	0		0	0	0	0	0
24. Minnesota NN 0 <t< td=""><td></td><td></td><td>N</td><td>0</td><td>0</td><td>ຸ ດ</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></t<>			N	0	0	ຸ ດ	0	0	0	0	0
25. Mississippi MS D O D O		-	N	0	0	0	0	0	0	0	0
26. Missori MO N 0 0 0 0 0 0 0 28. Nevtana NT N 0			N	۰ ۱	<u>ہ</u>		<u>ہ</u>	۰ ۱	<u>ہ</u>	n	n
27. Montana MT N 0 0 0 0 0 0 0 28. Nevada NV N 0			NN.	0			0	0	0	0	0
28. Nebraska NE N 0 <th< td=""><td></td><td></td><td>NN</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td><td>0</td><td>0</td></th<>			NN	0	0	0	0	0		0	0
29. Neveda NV N 0 0 0 0 0 0 0 31. New Jensey NJ L 38, 678,000 0 2, 455, 813, 745 0<			NN	0	0	0	0	0	0	0	0
30. New Hampshire Ni N 0			NN	0	0		0	0	0	0	0
11. New Jersey NJ L 38, 878, 080 0 2, 455, 813, 745 0			NN		0	0	0	0	0	0	0
12. New Moxico NM N 0 <			N		0		0	0	0	0 404 601 825	0
33. New York N 0			L	, ,	U			0			0
34. North CarolinaN N 0 0 0 0 0 0 0 0 38. North DaktaN N 0 <td< td=""><td></td><td></td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td><td>0</td><td></td><td>0</td></td<>			N	0	0	0	0		0		0
35. North Dakola ND ND O			N	0	0	0	0	0	0	0	0
36. Ohio OH N 0 </td <td></td> <td></td> <td>N</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td>			N	0	0	0	0	0	0	0	0
37. Oklahoma OK N 0 <td< td=""><td></td><td></td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></td<>			N	0	0	0	0	0	0	0	0
38. Oregon OR N 0 <td< td=""><td></td><td>0.11</td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></td<>		0.11	N	0	0	0	0	0	0	0	0
33. Pernsylvania PA N 0		-	N	0	0	0	0	0	0	0	0
40. Rhode Island Ri N 0		-	N	0	0	0	0	0	0	0	0
41. South Carolina SC N 0		-	N	0	0	0	0	0	0	0	0
42. South Dakota SD N 0			N	0	0	0	0	0	0	0	0
43. Tennessee TN N 0			N	0	0	0	0	0	0	0	0
44. Texas TX N 0<	42.	South Dakota SD	N	0	0	0	0	0	0	0	0
45. Utah UT N 0 </td <td>43.</td> <td>Tennessee TN</td> <td>N</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td>	43.	Tennessee TN	N	0	0	0	0	0	0	0	0
46. Vermont VT N 0	44.	Texas TX	N	0	0	0	0	0	0	0	0
47. Virginia VA N 0 <td< td=""><td>45.</td><td>Utah UT</td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></td<>	45.	Utah UT	N	0	0	0	0	0	0	0	0
47. Virginia VA N 0 <td< td=""><td>46.</td><td>Vermont VT</td><td>N</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></td<>	46.	Vermont VT	N	0	0	0	0	0	0	0	0
48. Washington WA N 0 <	47.	Virginia VA	N.	0	0	0	0	0	0	0	0
49. West Virginia WV N 0							0			0	0
50. Wisconsin WI N 0 <t< td=""><td>49.</td><td>West Virginia WV</td><td></td><td></td><td></td><td></td><td>0</td><td></td><td></td><td></td><td>0</td></t<>	49.	West Virginia WV					0				0
51. Wyoming							0				0
52. American Samoa AS N 0											0
53. Guam GU N 0 </td <td></td> <td>0</td>											0
54. Puerto Rico PR N 0							<u>و</u> ۱	n		n	n
55. U.S. Virgin Islands VI <								۰ ۱		۰ ۱	۰
56. Northern Mariana Islands MP N 0							<u>ر</u>	۰ ۱		۰ ۱	<u>ه</u>
Islands MP N 0<		0						······	0	·	0
57. Canada CAN N 0 <t< td=""><td>50.</td><td></td><td>N</td><td>0</td><td>0</td><td>0</td><td>n</td><td>0</td><td>0</td><td>0</td><td>n</td></t<>	50.		N	0	0	0	n	0	0	0	n
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alien OT XXX 0<											
59. Subtotal XXX .38,878,090 .0 2,455,813,745 .0 .0 .0 2,494,691,835 60. Reporting entity contributions for Employee Benefit Plans .XXX .0			XXX	0	0	0	0	0	0	0	0
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contributions for Employee Benefit Plans XXX 0 <td></td> <td></td> <td></td> <td>, ,</td> <td></td> <td>. , .,</td> <td></td> <td></td> <td></td> <td>, , ,</td> <td></td>				, ,		. , .,				, , ,	
Benefit Plans XXX 0		contributions for Employee									1
DETAILS OF WRITE-INS XXX 58001. XXX 58002. XXX 58003. XXX 58098. Summary of remaining write-ins for Line 58 from overflow page. XXX 58999. Totals (Lines 58001 through 58098) XXX 58099. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) XXX 0 0 0 0 0 0		Benefit Plans			0					0	0
58001. XXX XXX Image: Second s	61.		XXX	38,878,090	0	2,455,813,745	0	0	0	2,494,691,835	0
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58002. XXX XXX Image: Constraint of the state of the											
58003. XXX XXX Image: Constraining write-ins for Line 58 from overflow page. XXX Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: Constraining write-ins for Line 58 from overflow page. Image: C	58002.							_		l	ļ
58998. Summary of remaining write-ins for Line 58 from overflow page XXX 0	58003.							.		l	
write-ins for Line 58 from overflow page XXX 0 <td>58998.</td> <td>Summary of remaining</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	58998.	Summary of remaining									
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58003 plus 58998)(Line 58 above) XXX 0			XXX	0	0	0	0	0	0	0	0
above) XXX 0 0 0 0 0 0 0 0	58999.										ĺ
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			XXX	0	Ű	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....
N - None of the above - Not allowed to write business in the state.....

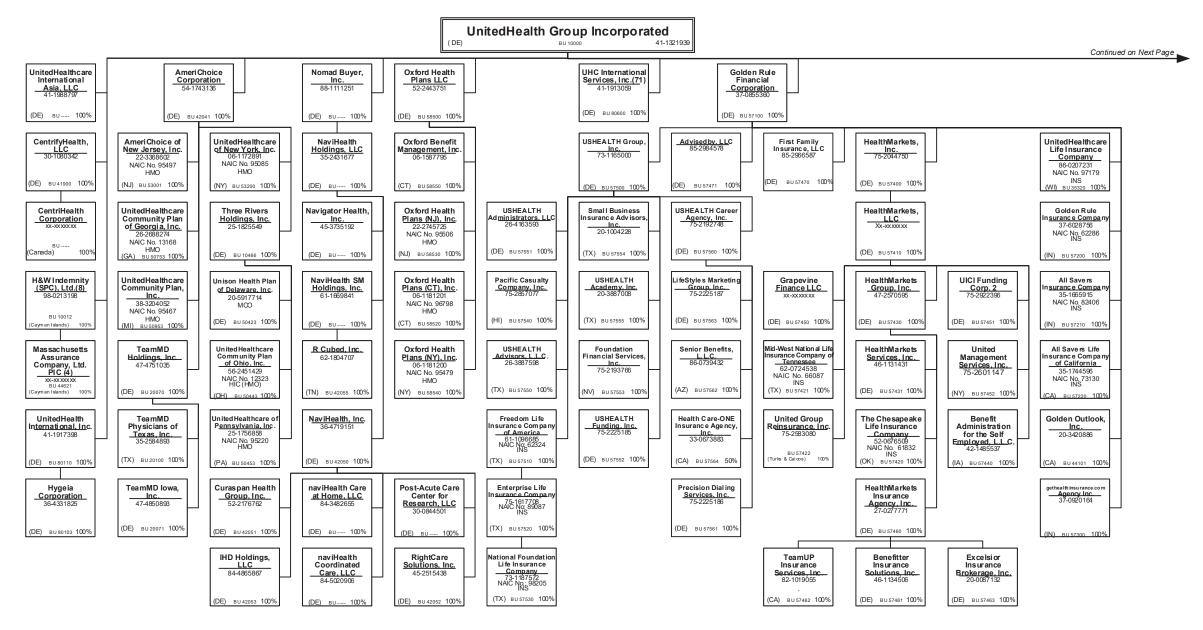
(b) Explanation of basis of allocation by states, premiums by state, etc. All premiums written within the state of New Jersey.

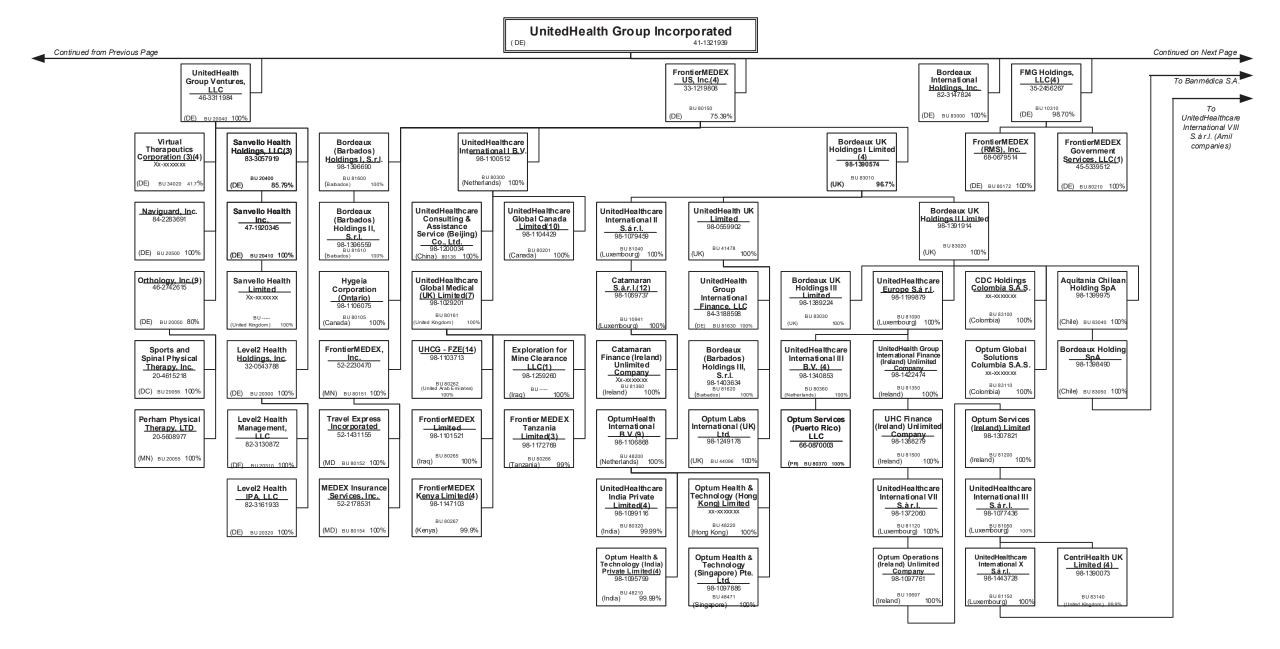
R - Registered - Non-domiciled RRGs... 0

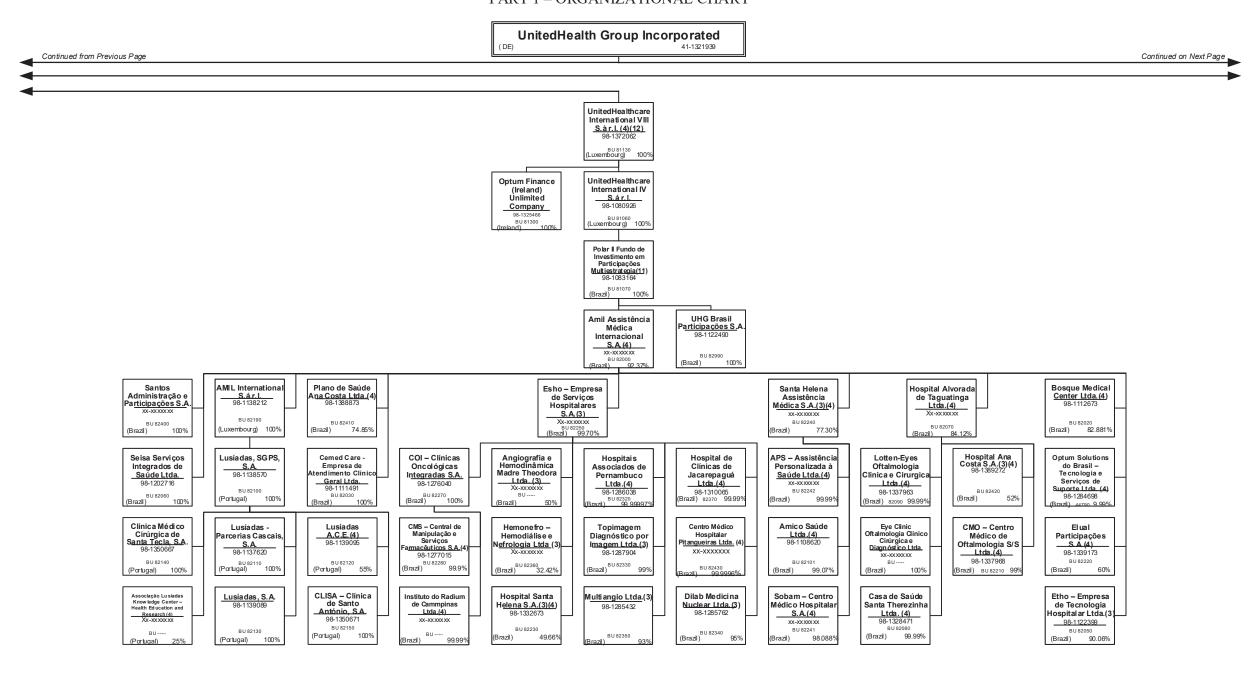
Q - Qualified - Qualified or accredited reinsurer.

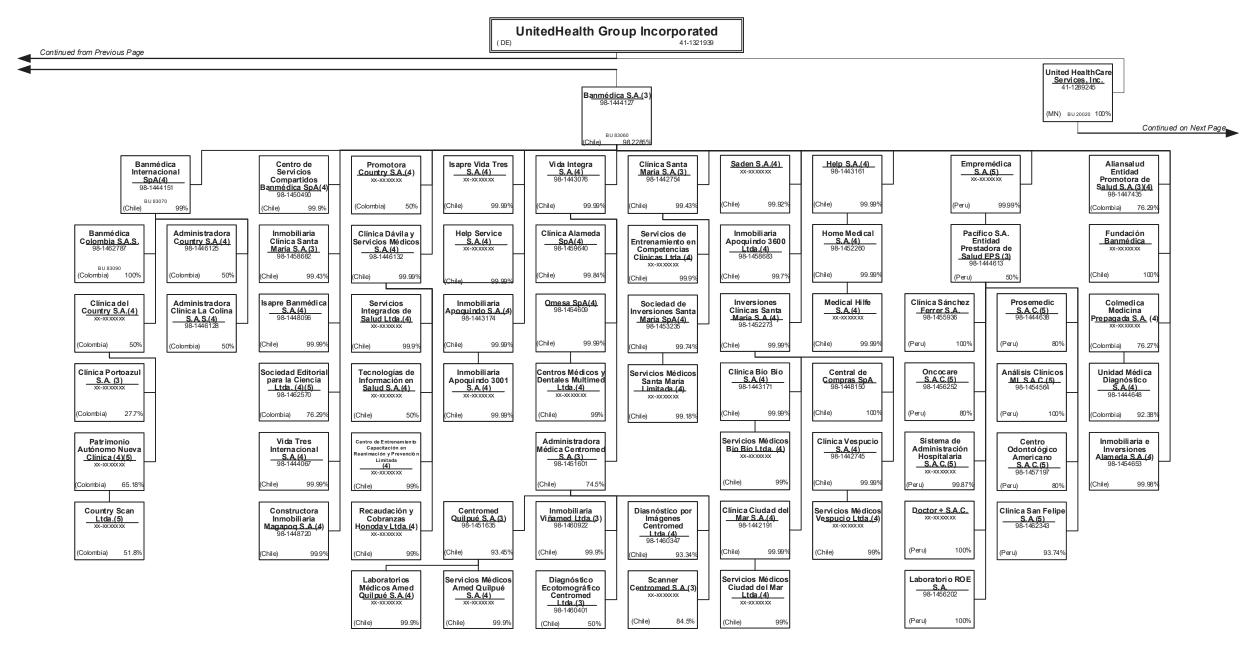
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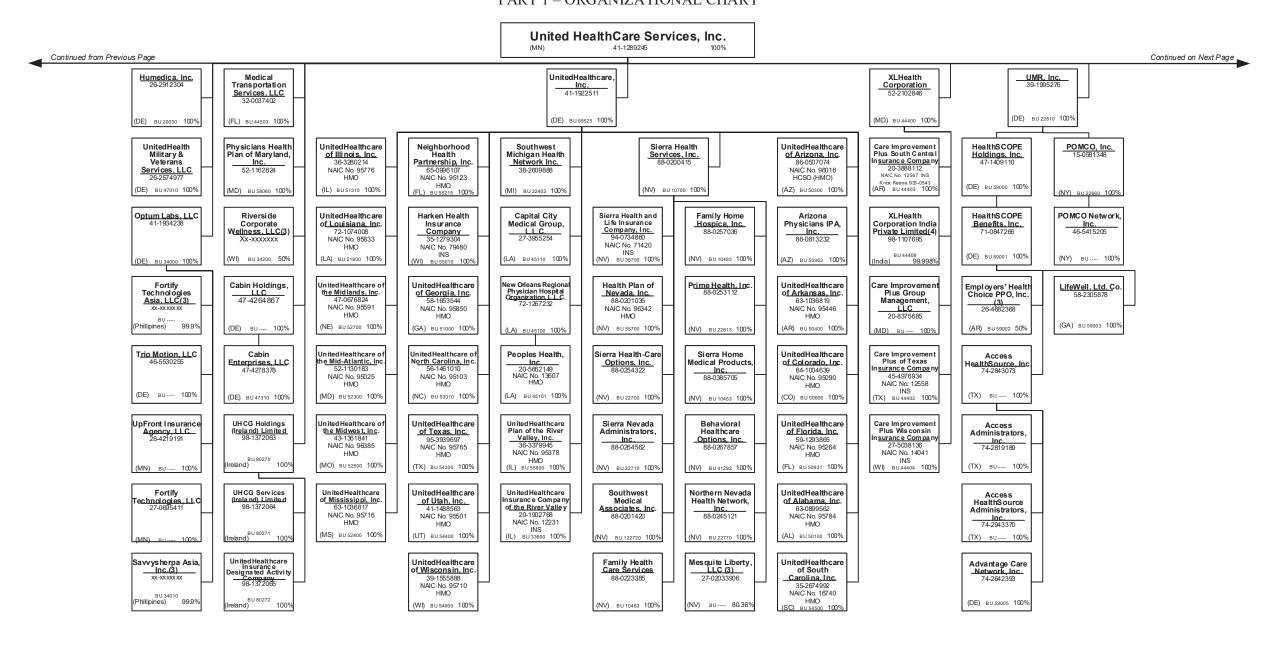
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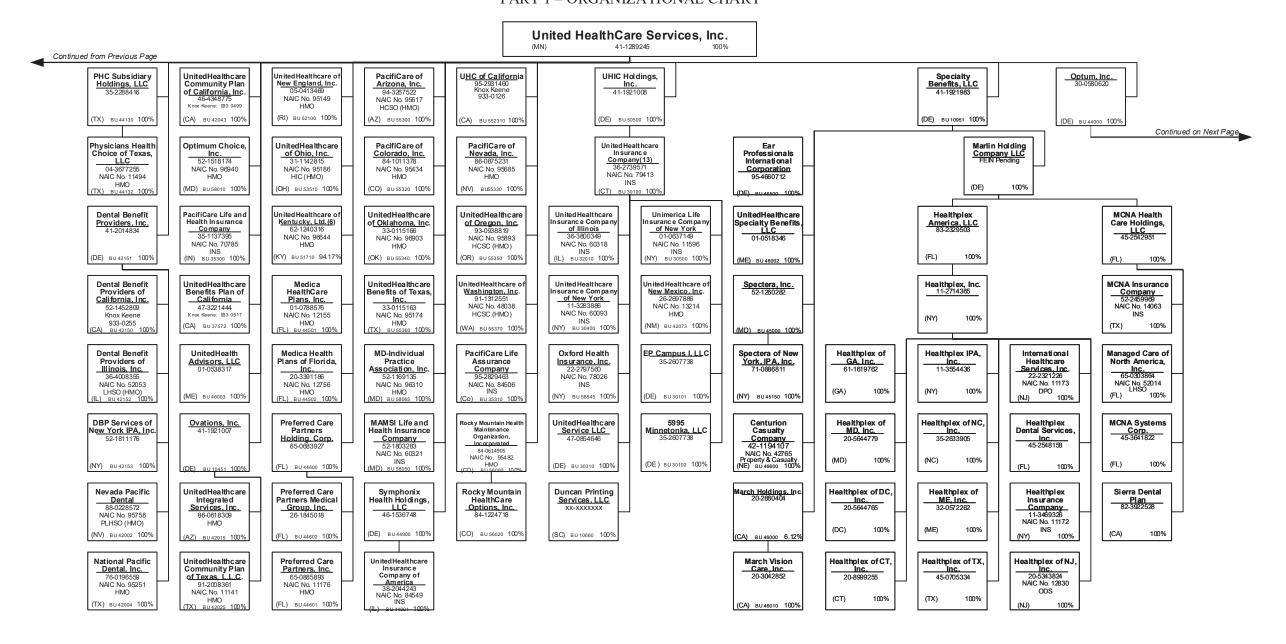




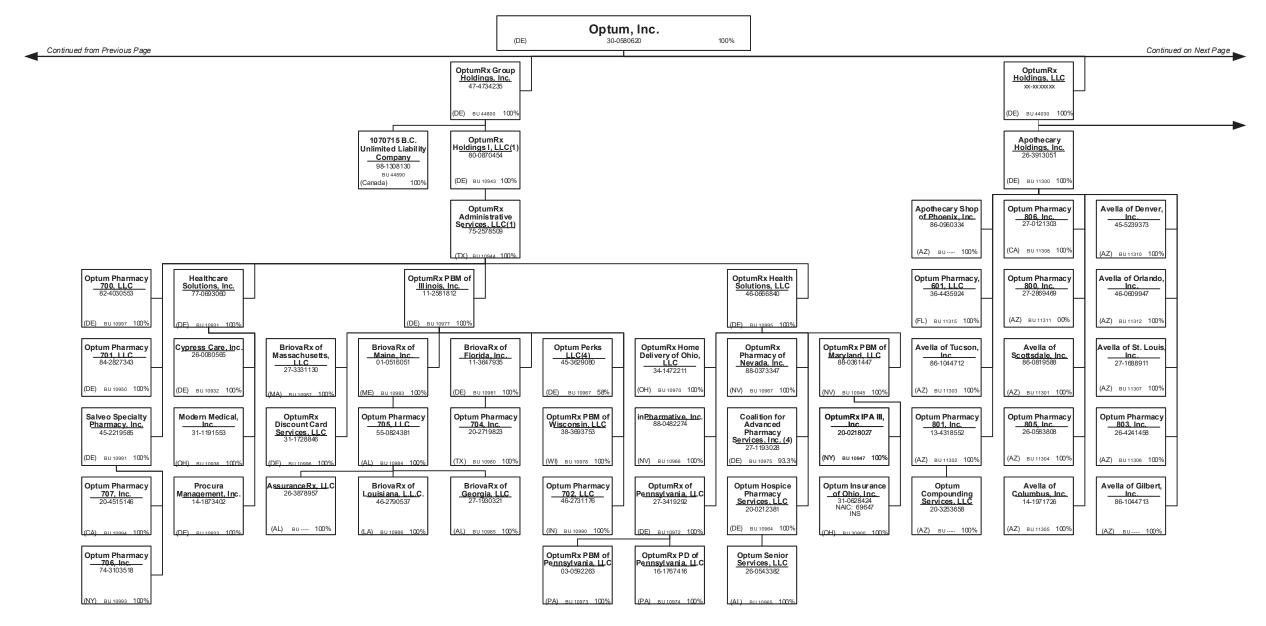


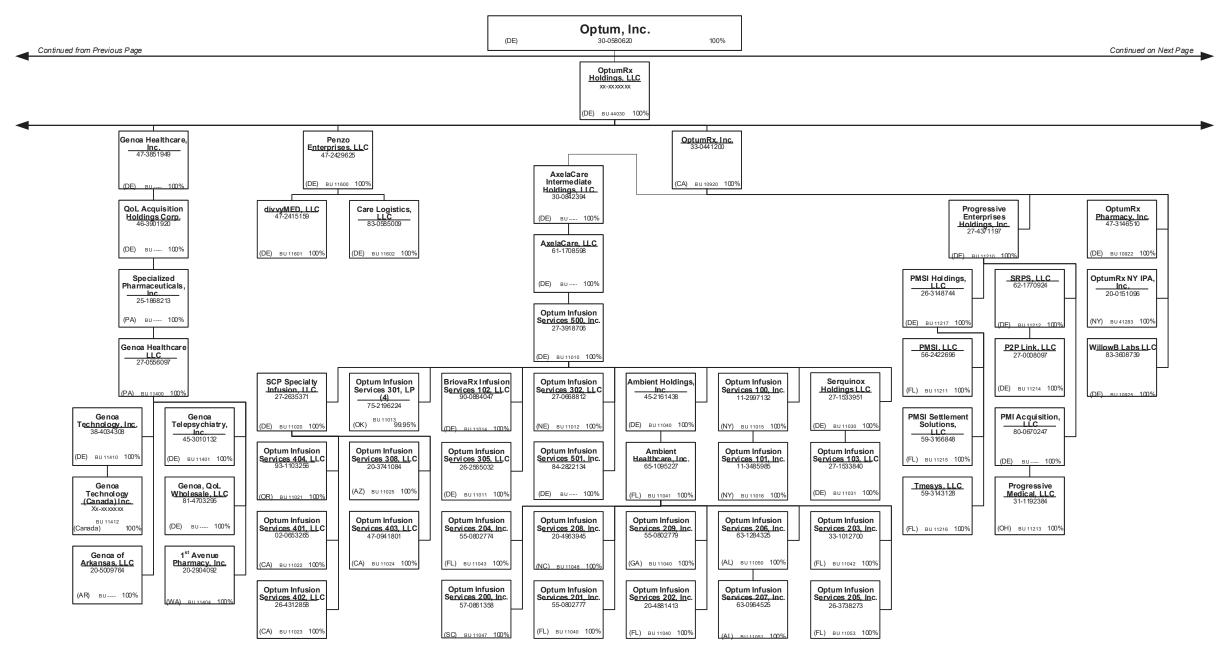


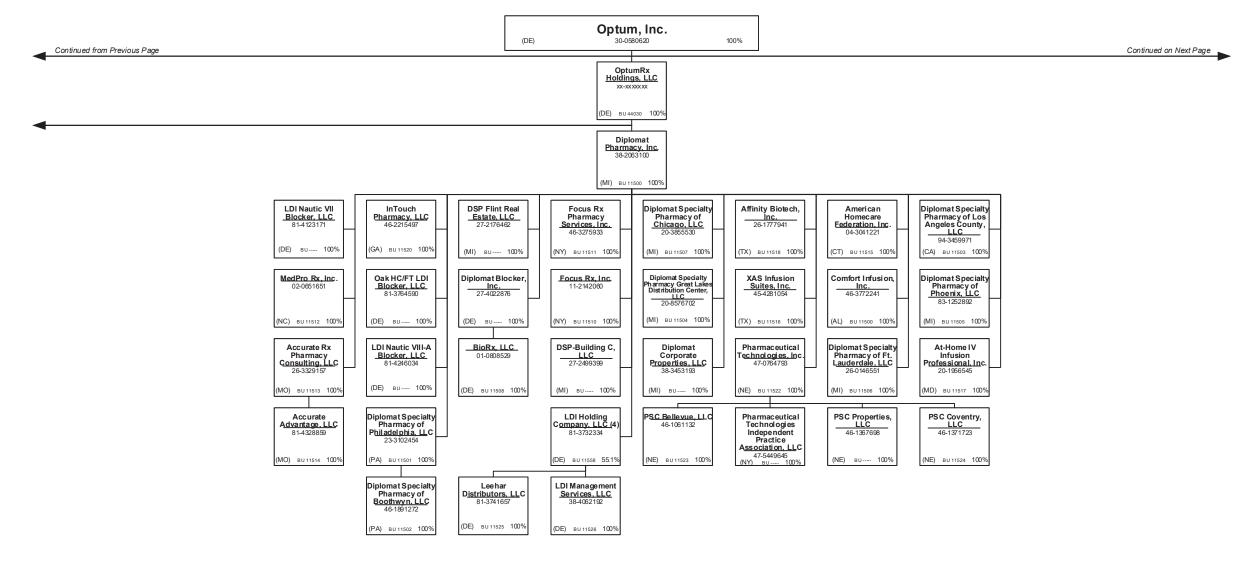


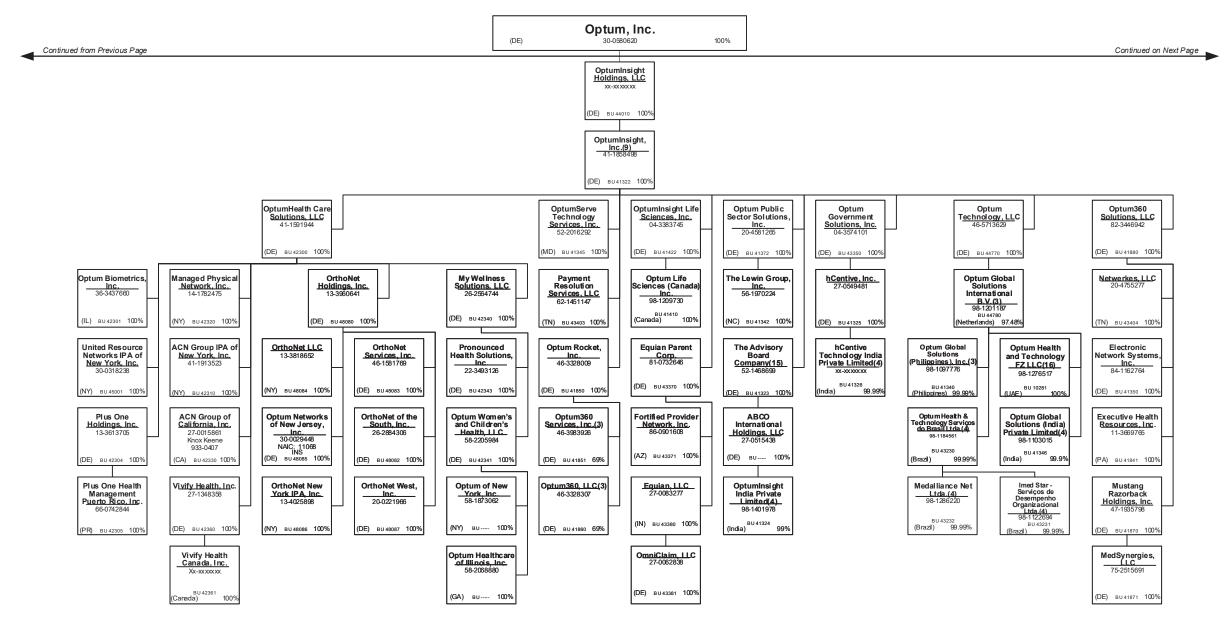


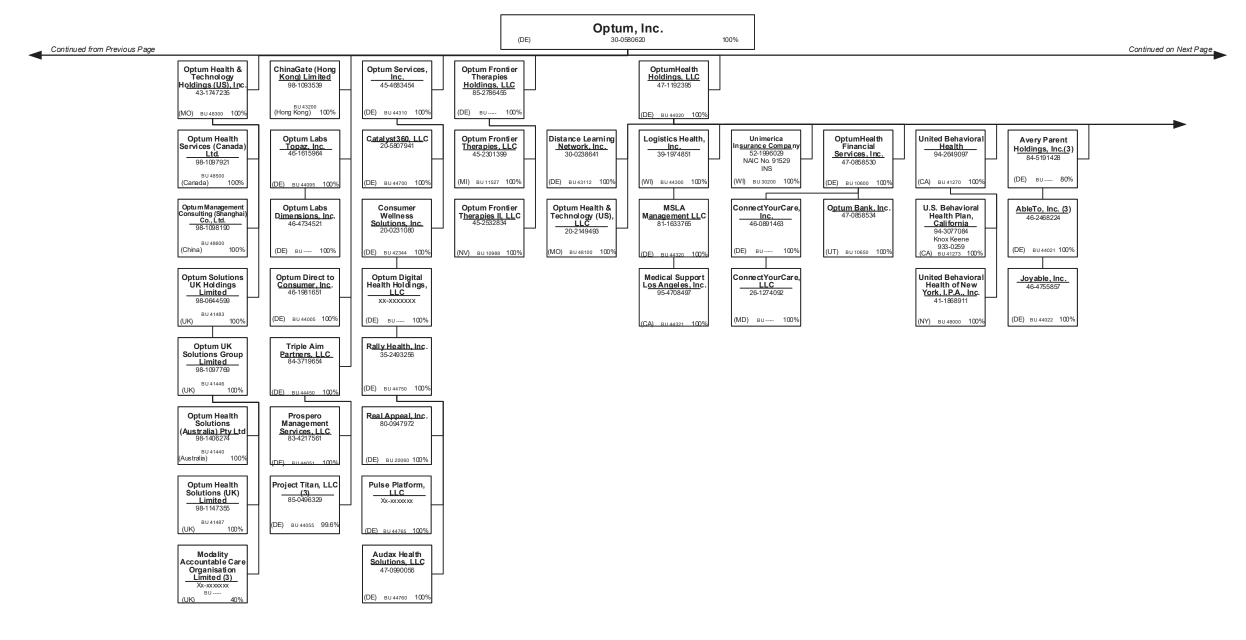
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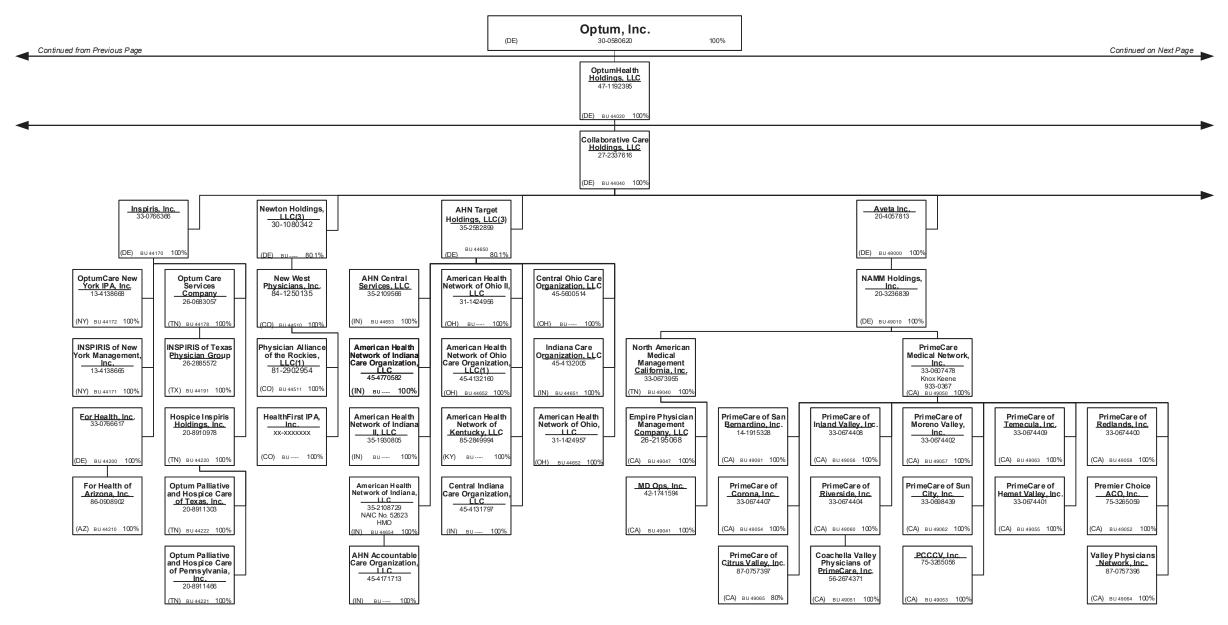


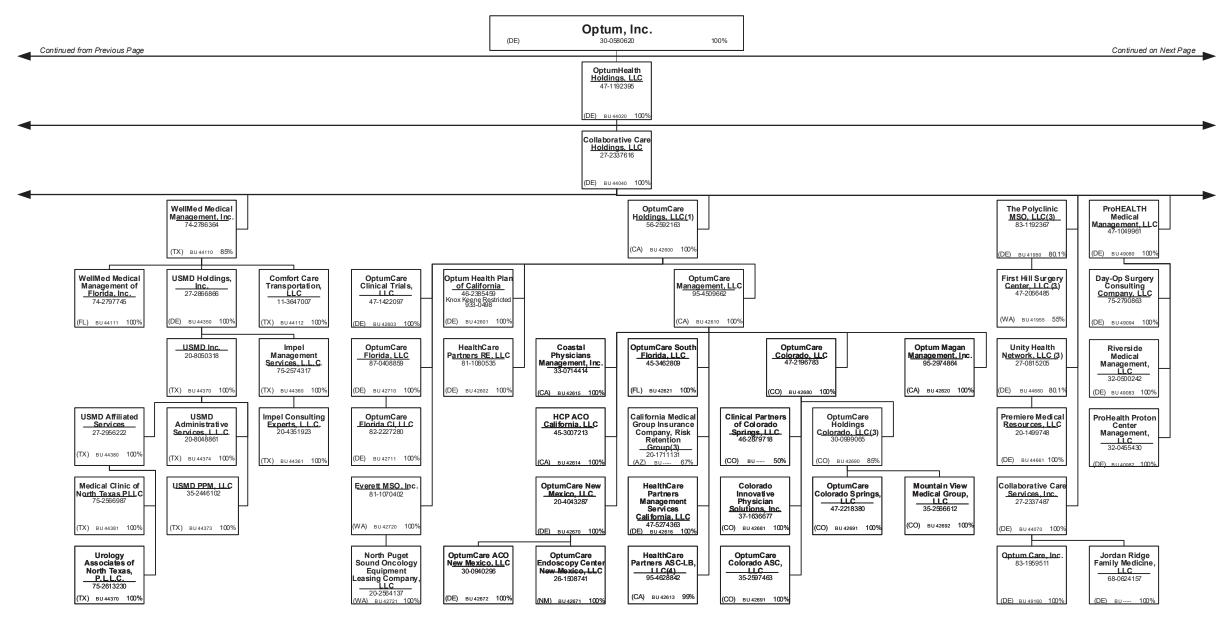


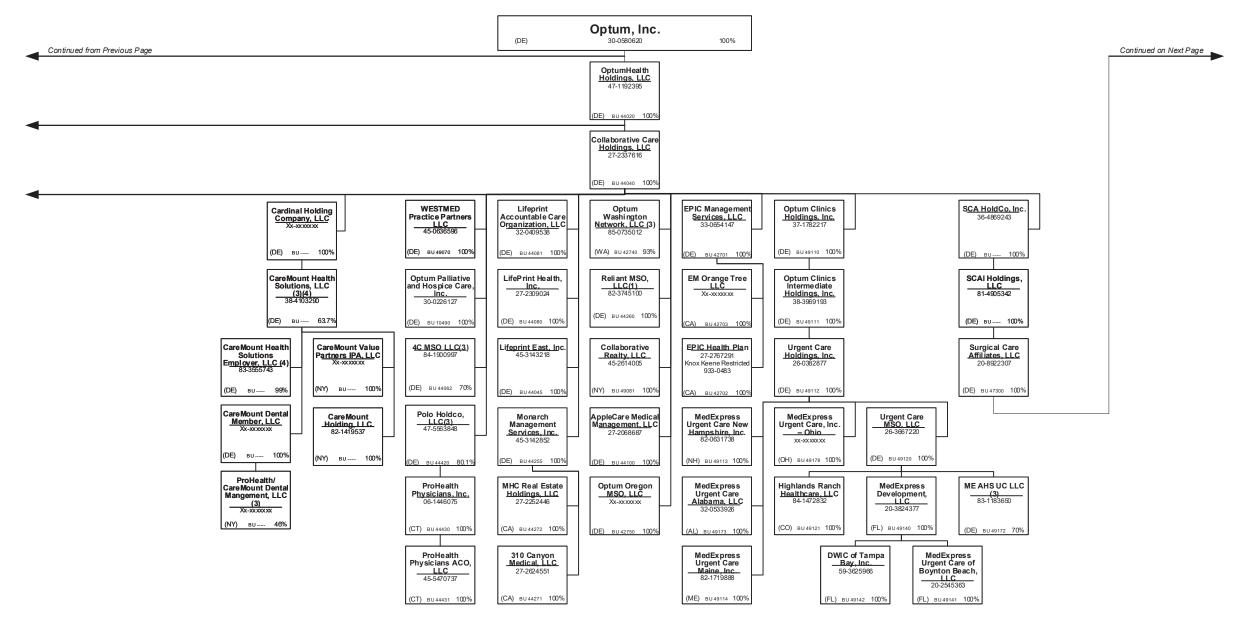












SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

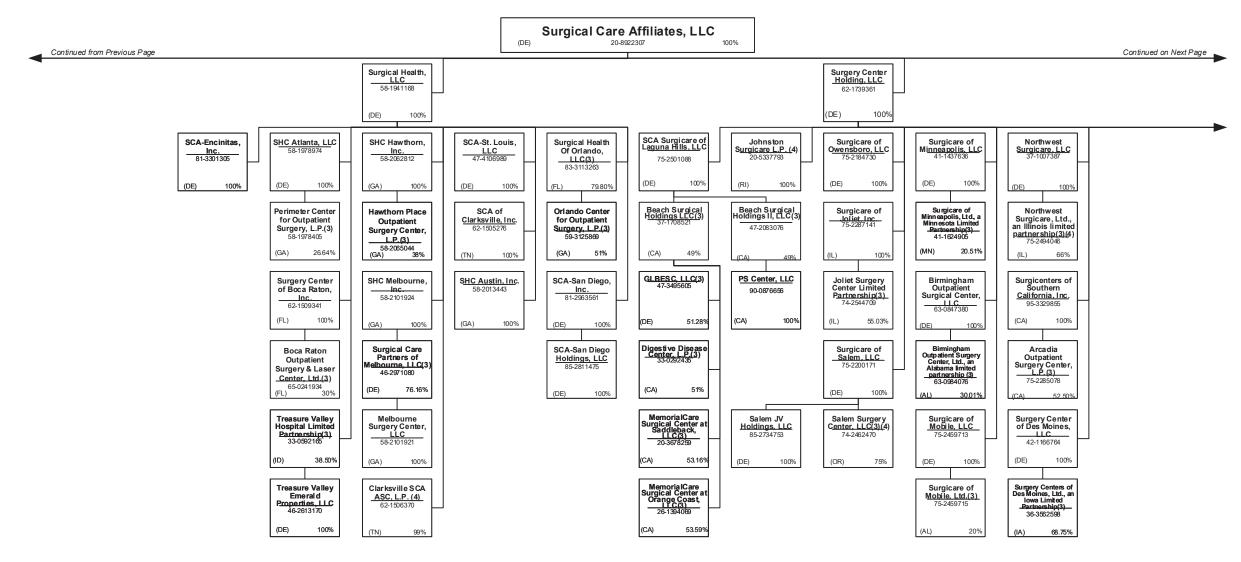
			Affiliates, LLC	100%			
Continued from Previous Page	L						Continued on Next Page
Surgery Centers- West Holdings, LLC 68-0282266 (DE) 100%	ASC Networ LLC 95-4348431 (DE) 10	Tuscaloosa		SCA St Holding 26-260 (DE)	100%		
Wauwatosa Outpatient Surgery Center, LLC 36-3469841 (DE) 100%	Loyola Ambulator Surgery Cen a <u>t Oakbrook,</u> 36-4119519 (IL) 10	Surgical Center, enter Surgical Center, L.P.(3) c, Inc. 63-0974161	SCA Specialists of Florida, LLC 47-3165040	SCA-Wilson, LLC 47-2890788 (DE) 100%	SCA-Somerset, LLC(1) 81-3300613 (DE) 100%	SCA-Illinois, LLC 81-1666861 (DE) 100%	
Wauwatosa Surgery Center, LLC(3) 36-3469839 (DE) 51%	Loyola Ambulator Surgery Cen at Oakbroo L.P.(3) 364119522	ory Independent Care Network, LLC 82-1341098	Specialists in Urology Surgery <u>Center, LLC</u> 55-0790742 (FL) 100%	Surgery Center of <u>Wilson, LLC(3)</u> 26-1767806 (NC) 76.45%	Somerset Outpatient Surgery L L C (3) 20-8433399 (NJ) 59.52%	Advocate-SCA Partners, LLC(3) 47-4012497 (DE) 51%	
Surgicare of La <u>Veta. Inc.</u> 75-2501191 (CA) 100%	Medical Surg Centers of <u>America, In</u> 26-0636717 (DE) 10	of Surgical Center, Inc. LLC(3)	West Coast Endoscopy Holdings, LLC 27-2809113 (DE) 100%	Surgical Hospital Holdings of Oklahoma, LLC 27-0168681 (DE) 100%	SC <u>A-Alliance, LLC</u> 47-1807383 (DE) 51%	Advocate Condell Ambulatory Surgery Center, LLC(3) 47-5337115 (IL) 58.65%	
Beach Surgical Holdings III, <u>LLC(3)</u> 47-4504390 (CA) 63.88%	Grossmon Surgery Cen L.P.(3)(4) 33-0749339 (CA) 33	enter, Center, Limited <u>Partnership(3)(4)</u>	E Street Endoscopy, 	SCA-Kissing Camels Holdings, LLC 83-1102109 (DE) 100%	Alliance Surgical Center, LLC(3)(4) 27-1367127 (FL) 51%	Midwest Center for Day Surgery, LLC(3) 20-8103522 (IL) 53.88%	
Surgicare of La Veta, Ltd., a California Limited <u>Partnershin(3)</u> 75-2507129 (CA) 28%	Pomerado Outpatien Surgical Cen Inc. 33-0261822 (CA)	enter, 71-0923682	SCA-Charleston, LLC 58-1709738 (DE) 100%	Surgery Center at Kissing Camels, LLC(3) 82-5207693 (DE) 67.81%	SCA Holding Company, Inc. 27-1664837 (DE) 100%	Advocate Southwest Ambulatory Surgery Center, LLC(3) 364437931 (IL) 53.5%	
Golden Triangle Surgicenter, L.P.(3) 33-0529450 (CA) 54%	Pomerado Outpatien Surgical Cen L.P.(3) 33-0752699 (CA) 57	enter, Solutions Private	Charleston Surgery Properties, LLC(3) 82-3973199 (DE) 50.85%	Charleston Surgery Center Limited Partnership(3) 58-1709761 (SC) 2263%	Channel Islands Surgicenter Properties, LLC(3) 46-1454664 (DE) 62.74%	Advocate Sherman Ambulatory Surgery Center, LLC 82-3113379 (IL) 100%	
						LGH-A/Golf ASTC, LLC(3)	

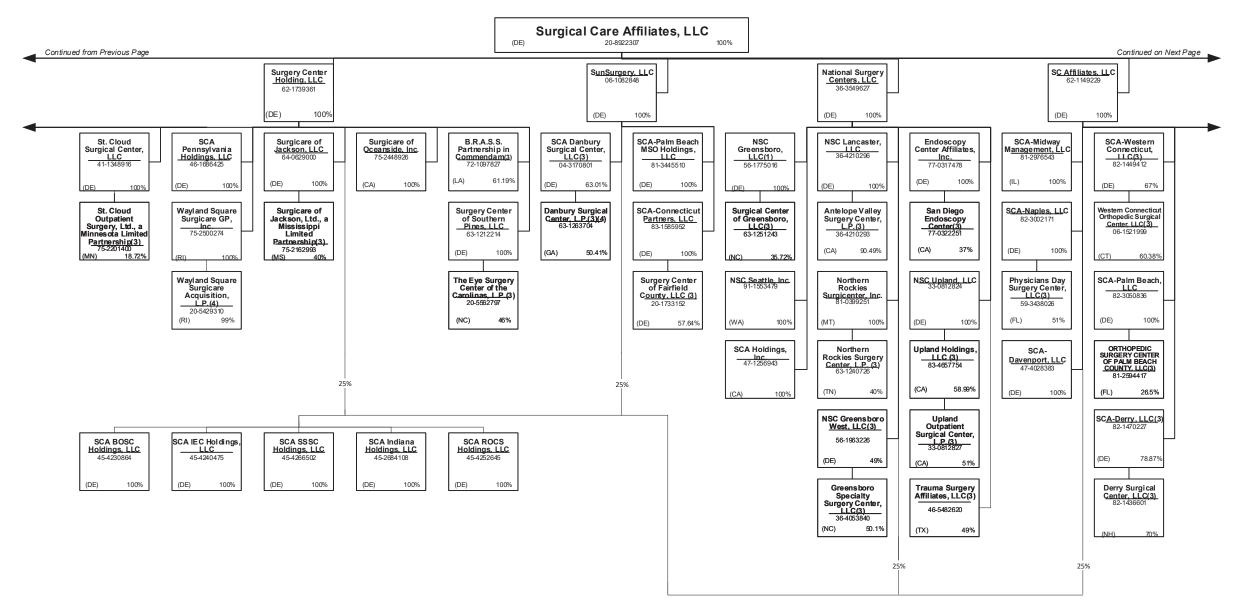
36-3468942

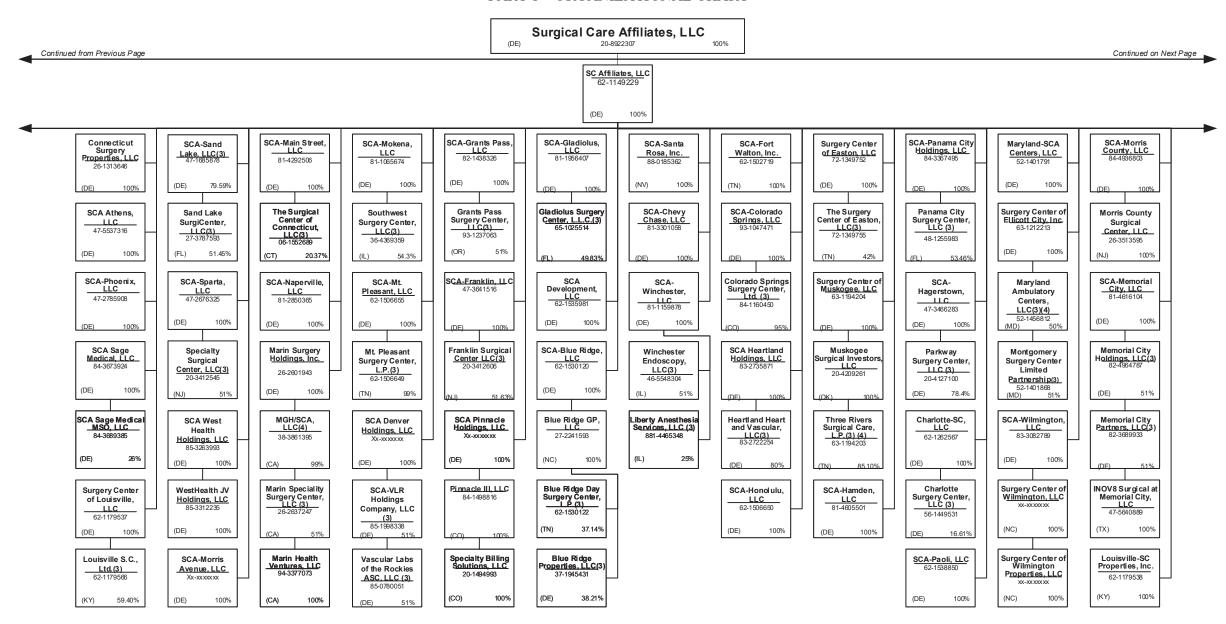
49%

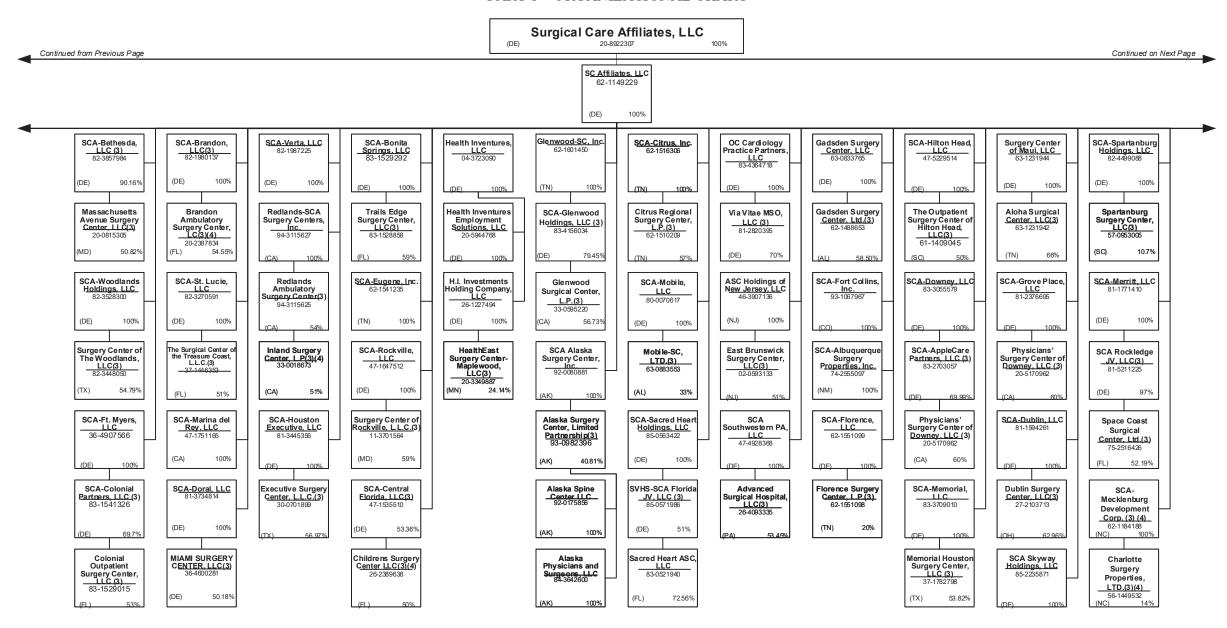
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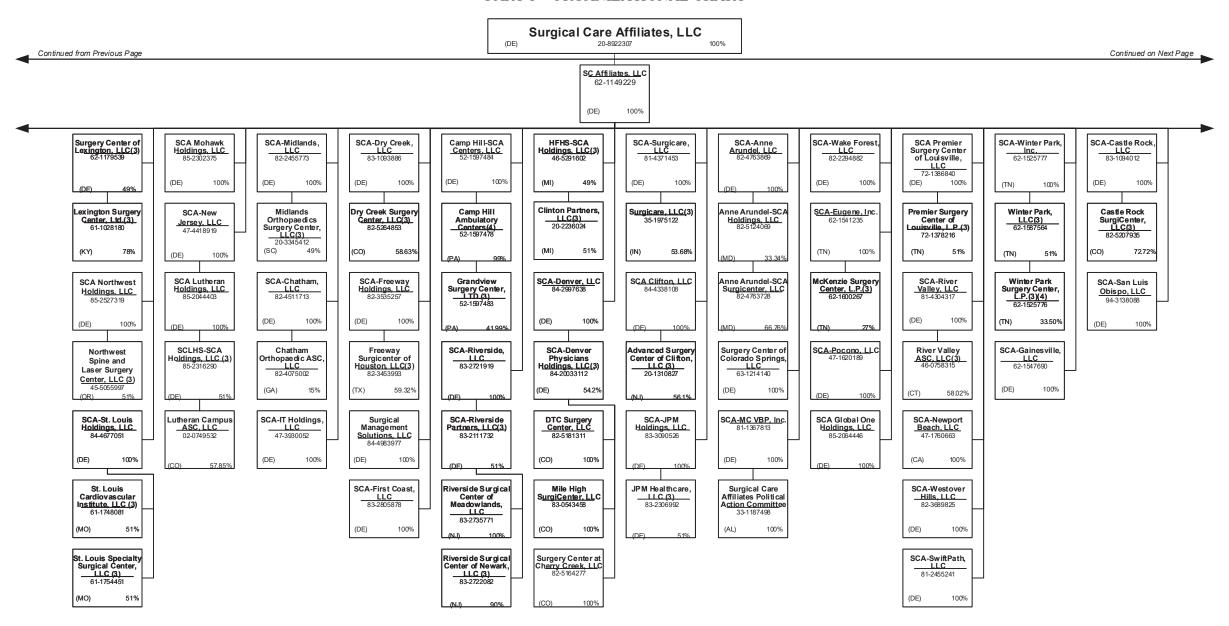
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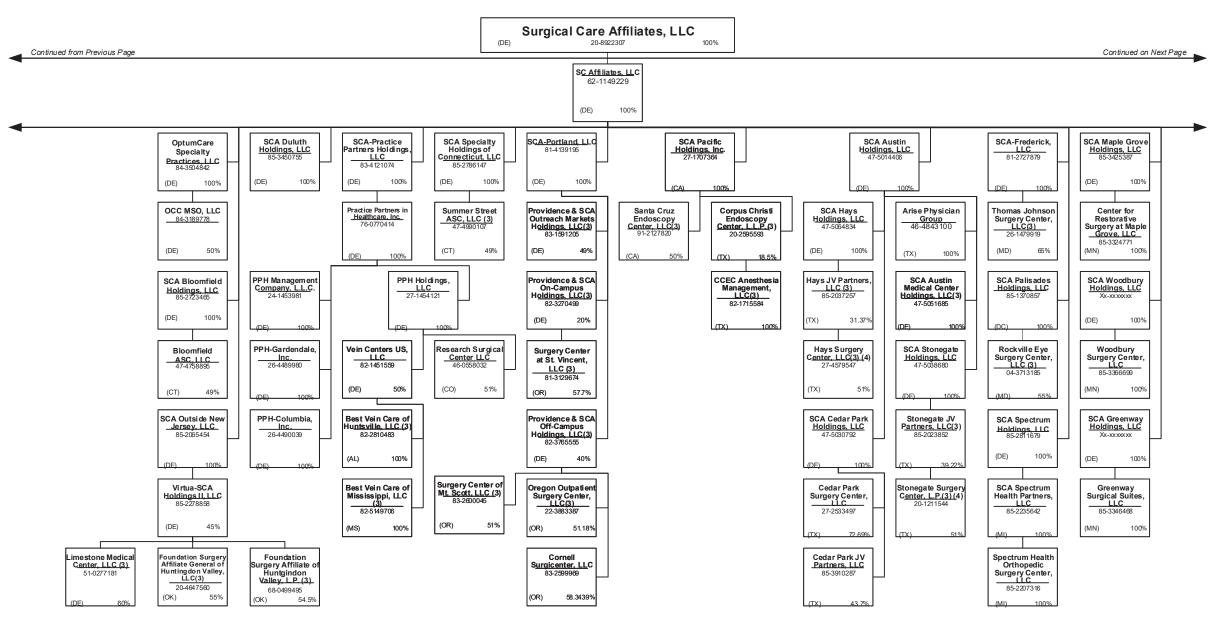


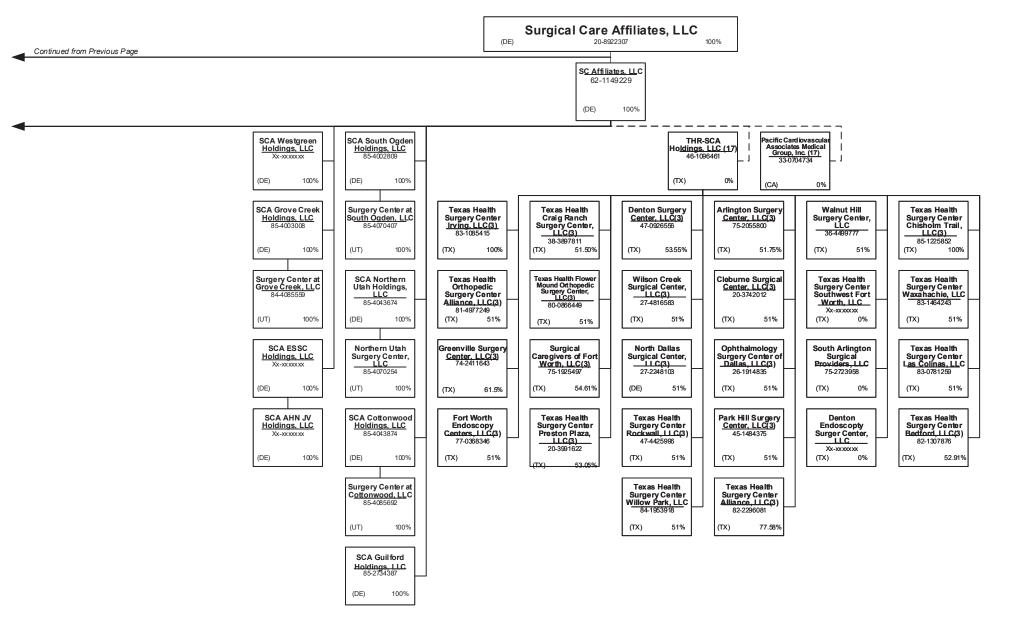












Entity Name Juris. Federal Tax ID Juris. Federal Tax ID **Entity Name** 4C Medical Group, PLC AZ 45-2402948 74-2758644 Homecare Dimensions, Inc. TX NJ 22-3149900 IN Style OPTICAL, LLC MA A.G. Dikengil, Inc. 27-3296953 AbleTo Behavioral Health Services, P.C. CT 47-5519672 Inland Faculty Medical Group, Inc. CA 33-0618077 AbleTo Licensed Clinical Social Worker Services, P.C. CA Inspiris Medical Services of New Jersey, P.C. NJ 45-2563134 ---14-1890491 INSPIRIS of Michigan Medical Services, P.C. MI 27-1561674 AppleCare Hospitalists Medical Group, Inc. CA AppleCare Medical ACO, LLC CA 45-2852872 INSPIRIS of New York Medical Services, P.C. NY 13-4168739 CA 33-0845269 INSPIRIS of Pennsylvania Medical Services, P.C. PA 26-2895670 AppleCare Medical Group St. Francis, Inc. 33-0898174 AppleCare Medical Group, Inc. CA Level 2 Medical Services, P.A. (ALASKA) AK 84-5003916 46-1772418 ARTA Health Network, P.C. CA Level2 Medical Services, P.A. DE 84-5003916 ARTA Western California, Inc. CA 33-0658815 March Vision Care Group, Incorporated CA 95-4874334 MA 04-3403101 NY 27-3115058 Aspectus, Inc. March Vision Care IPA, Inc. CA 33-0645967 45-4227915 Beaver Medical Group, P.C. March Vision Care of Texas, Inc. TX Bedford Physicians Risk Retention Group, Inc. VT 20-8773716 MAT-RX DEVELOPMENT, L.L.C. TX 43-1967820 WA 47-4349079 Mat-Rx Fort Worth GP, L.L.C. TX 35-2262695 Better Health Value Network, LLC Bexar Imaging Center, LLC TX 22-3858211 ME Urgent Care Nebraska, Inc. NE 81-0936574 Bongiorno Physical Therapy, P.C. NY MedExpress Employed Services, Inc. DE 81-1265129 --California Spring Holdings, PC CA 81-0881243 MedExpress Primary Care Arizona, P.C. AZ 81-4550969 CareMount Health Solutions ACO, LLC MedExpress Primary Care Arkansas, P.A. AR 84-4234388 NY ---CareMount Medical, P.C. NY 13-3544120 MedExpress Primary Care Kansas, P.A. KS 81-4605885 Centers for Family Medicine, GP CA 33-0483510 MedExpress Primary Care Maryland, P.C. MD. 82-3384324 David Moen M.D. P.C. NY 81-5101448 MedExpress Primary Care Massachusetts, P.C. MA 82-1096099 David R. Ferrell, M.D., P.C. NV 45-2380022 MN 81-4396738 MedExpress Primary Care Minnesota P.C. NY 11-2811353 MedExpress Primary Care Oklahoma, P.C. OK 83-1077265 Day-OP Center Of Long Island Inc. Durable Medical Equipment, Inc. MA 04-3106404 MedExpress Primary Care South Carolina, P.C. SC 83-0764858 Empire Physicians' Medical Group, Inc. CA 33-0181426 MedExpress Primary Care Texas, P.A. TX 84-2500750 81-1625636 MedExpress Primary Care Virginia, P.C. VA 82-3395792 Everett Physicians, Inc. P.S. WA First Hill Surgery Center, LLC WA 47-2066485 MedExpress Primary Care West Virginia, Inc. WV 82-4401181 Greater Phoenix Collaborative Care, P.C. AZ 27-2337725 WI 81-4563448 MedExpress Primary Care Wisconsin, S.C. HealthCare Partners Affiliates Medical Group CA 95-4526112 MedExpress Urgent Care - New Jersey, P.C. NJ 45-5388778 26-4247365 NJ 83-2089623 HealthCare Partners ASC-HB, LLC CA MedExpress Urgent Care - Northern New Jersey PC HealthCare Partners Associates Medical Group, P.C. CA 45-5273760 MedExpress Urgent Care Arizona, P.C. AZ 81-4030280 HealthCare Partners Medical Group, P.C. CA 95-4340584 AR 46-4348120 MedExpress Urgent Care Arkansas, P.A.

MedExpress Urgent Care California, P.C.

CA

82-0930142

TX

81-0884465

Homecare Dimensions of Florida, Inc.

MedExpress Urgert Care Maio, P.C. C 62.113536 Monarch HeathCare, A Medical Group, Inc. CA 33-6567660 MedExpress Urgert Care Maio, P.C. L 47-430861 Mona Rosts, M.D., P.C. CA 84-4687072 MedExpress Urgert Care Kansas, P.A. KS 47-191528 Mona Rosts, M.D., P.C. CA 84-2827070 MedExpress Urgert Care Massuri P.C. NN 81-1125395 NAMM Mole, Inc. CA 85-2872770 MedExpress Urgert Care Massuri P.C. NN 41-1125395 NAMM Mole, Inc. CA 85-287537 MedExpress Urgert Care Massuri P.C. NN 41 61-102747 mar/Heath Medigan INPC, P.C. MI 8-349940 MedExpress Urgert Care Mono, P.C. RR 82-198758 Northridge Medical Group, Inc. CA 85-287773745 MedExpress Urgert Care Sindin Contin, P.C. RR 82-1987580 Northridge Medical Group, Inc. CA 85-2877845 MedExpress Urgert Care Sindin Contin, P.C. RR 81-352776 Mideal Group, Inc. CA 85-487923 MedExpress Urgert Care Sindin Contin, P.C. RR 81-352776 Mide	Entity Name	Juris. Federal Tax ID		Entity Name	Juris.	Federal Tax ID
MedExpress Urgent Care Minols, P.C. L 47.4306514 Monka Roots, M.D., P.C. CA 84.4867072 MedExpress Urgent Care Kinss, P.A. KS 47.1918283 NAMM Medical Group Molings, Inc. CA 20.6802451 MedExpress Urgent Care Kinss, P.A. KS 47.1918283 NAMM More, Inc. CA 85.42827072 MedExpress Urgent Care Minssoul P.C. MO 47.31328255 navMeath Michigan HDC., P.C. MI 85.0975337 MedExpress Urgent Care Missouri P.C. MO 47.31328255 navMeath Michigan HDC., P.C. MI 85.0975337 MedExpress Urgent Care North Carolina, P.C. RI 61.53827056 Notrindige Medical Group Allance, LLC MI 86.4589782 MedExpress Urgent Care South Carolina, P.C. RI 61.53827056 Notrindige Medical Group Allance, LLC WA 87.1659844 MedExpress Urgent Care South Carolina, P.C. MI 84.2616767 Optim Medical Services of California, P.C. CA 86.4687937 MedExpress Urgent Care, NA. TX 47.5147441 NPI Washington, P.L. CA 86.262797 MedExpress Urgent Care, No. Care South Carolina, P.C. MI 84.261791 MI 86.4717309 <td>MedExpress Urgent Care Connecticut, P.C.</td> <td>СТ</td> <td>81-1956812</td> <td>Monarch Health Plan, Inc.</td> <td>CA</td> <td>22-3935634</td>	MedExpress Urgent Care Connecticut, P.C.	СТ	81-1956812	Monarch Health Plan, Inc.	CA	22-3935634
MedExpress Urgent Care lows, P.C. IA 81-553472 Mosaic Management Services, Inc. CA 20-5892451 MedExpress Urgent Care Minass, P.A. KS 47-1912033 NAMM Medical Group hölings, Inc. CA 68-202706 MedExpress Urgent Care Minssour P.C. MN 61-1125396 NAMM Moch, Inc. CA 68-202706 MedExpress Urgent Care Missour P.C. MN 61-1125396 NatVeath Mochy, Inc. MI 68-097337 MedExpress Urgent Care Mont Carulina, P.C. NC 81-1582766 Northridge Medical Group, Inc. CA 69-097307 MedExpress Urgent Care Mont Carulina, P.C. RI 81-5822766 Northridge Medical Group, Inc. CA 69-478023 MedExpress Urgent Care Montonika, P.C. RI 81-5822766 Northridge Medical Group, Inc. VA 61-1695196 MedExpress Urgent Care Washington, P.C. RI 82-2443118 Optim Eline, P.C. NA 61-16952196 MedExpress Urgent Care, P.C. – Gronja GA 47-1612467 Optim Medical Services of California, P.C. RI 62-662707 MedExpress Urgent Care, P.C. – Maina NA 62-2443118<	MedExpress Urgent Care Idaho, P.C.	D	82-1135336	Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660
NatedExpress Urgent Care Kansas, P.A. KS 47.1919283 NAMM Medical Group Holdings, Inc. CA 56-2827070 MedExpress Urgent Care Mission IP C. MO 81-1122386 NAMM Medit, Inc. CA 66-2827070 MedExpress Urgent Care Mission IP C. MO 81-5132747 navHealth Condinated Care SC, P.C. MI 86-3489040 MedExpress Urgent Care Moth Carolina, P.C. RI 81-532765 Northylesk Medical Group, Albor, P.C. A 96-2495783 MedExpress Urgent Care Moth Karolina, P.C. RI 81-532765 Northylesk Medical Group, Albor, ILC CA 96-2495783 MedExpress Urgent Care Tool kaind, P.C. RI 81-5327765 Northylesk Medical Group, Albor, ILC VIA 91-169994 MedExpress Urgent Care Visconin, S.C. WA 81-428178 Optim Medical Services of Colfronia, P.C. CA 95-2287455 MedExpress Urgent Care, P.C Motian WV 82-445118 Optim Medical Services of Colfronia, P.C. CA 45-3086233 MedExpress Urgent Care, P.C Motian WV 82-445118 Optim Medical Services of Colfronia, P.C. CA 45-3086234 MedExpress U	MedExpress Urgent Care Illinois, P.C.	L	47-4308614	Monika Roots, M.D., P.C.	CA	84-4887072
NadExpress Urgent Care Minnesota P.C. MM 81-1125396 NAMM MGH, Inc. CA 61-1627289 MedExpress Urgent Care Minissouri P.C. MC 47-31322825 navikeath Coordinated Care SC, P.C. MC 83-6907337 MedExpress Urgent Care Minissouri P.C. NC 81-5136747 navikeath Michigan MBPC, P.C. MC 43-69040 MedExpress Urgent Care Minissouri P.C. NR 81-5362765 Northridge Medical Group, Inc. CA 65-2995765 MedExpress Urgent Care Minis P.C. SC 81-5362765 Northridge Medical Group, Allance, LLC VA 61-1055159 MedExpress Urgent Care Visioning, P.C. SC 81-5380760 Northridge Medical Group, Allance, LLC VA 61-1055159 MedExpress Urgent Care Visioning, P.C. WA 82-2443118 Optim Medical Services of California, P.C. CA 35-52727845 MedExpress Urgent Care, P.C. – Mest Virginia WV 26-456400 Optim Medical Services of California, P.C. CA 35-56274 MedExpress Urgent Care, P.C. – Mest Virginia N 90-092557 Physician Asociates of the Greaus in Cara, Ministra Medical Group, Inc. CA 35-56274779	MedExpress Urgent Care Iowa, P.C.	IA	81-5353472	Mosaic Management Services, Inc.	CA	20-5892451
MedExpress Urgent Care Missouri P.C. M0 47-3132825 nav/Heath Coordinated Care SC, P.C. M1 65-0975337 MedExpress Urgent Care Missouri P.C. RC 81-319747 nav/Heath Michigan HBC, P.C. M1 64-349040 MedExpress Urgent Care Ronde Island, P.C. RC 82-191943 M1/ht After HiftMinhoarch, LLC CA 62-2995763 MedExpress Urgent Care South Carolina, P.C. RC 81-530706 Northweat Medical Group Allance, LLC CA 95-4746023 MedExpress Urgent Care South Carolina, P.C. WA 82-2957764 Northweat Medical Group Allance, LLC WA 91-199944 MedExpress Urgent Care Washington, P.C. WA 82-245418 Optim Medical Services of Colorado, P.C. CD 45-362931 MedExpress Urgent Care, Nort, - Medix Virginia W2 24-34400 Optim Medical Services of Colorado, P.C. CD 45-362931 MedExpress Urgent Care, P.C Meany Virginia W2 24-34401 Optim Medical Services of Colorado, P.C. CA 30-051843 MedExpress Urgent Care, P.C Meany Mart MD 45-346101 Physician Associates of Medical Group, No. CA 30-051843	MedExpress Urgent Care Kansas, P.A.	KS	47-1919283	NAMM Medical Group Holdings, Inc.	CA	56-2627070
Number Surgent Care North Carolina, P.C. NC 81-5138747 navReaBt Michigan HBPC, P.C. MI 84-2469040 MedExpress Urgent Care Rode Island, P.C. OR 82-1919436 Mthy After /ffly/Monarch, LLC CA 28-2995765 MedExpress Urgent Care Rode Island, P.C. SC 81-5300766 Northwest Medical Group, Anc. CA 95-7476023 MedExpress Urgent Care Texas, P.A TX 47-5147441 NPIN West Medical Group, Anc. CA 95-7476023 MedExpress Urgent Care Washington, P.C. WA 81-1655159 MedExpress Urgent Care Washington, P.C. CA 30-6026311 MedExpress Urgent Care, Washington, P.C. WA 81-1655159 MedExpress Urgent Care, No West Virginia VV 26-4546400 Optium Medical Services of Colorado, P.C. CA 45-642613 MedExpress Urgent Care, N.C West Virginia WV 26-4546407 Optium Medical Services of Colorado, P.C. CA 45-642613 MedExpress Urgent Care, N.C Maryland MD 45-346101 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. CA 95-672737 MedExpress Urgent Care, P.C Maryland MD 45-34	MedExpress Urgent Care Minnesota P.C.	MN	81-1125396	NAMM MGH, Inc.	CA	61-1627269
Number OR 82-1919436 Number After Fifty/Itonarch, LLC CA 28-2995765 MedExpress Urgent Care Rhode Island, P.C. RI 81-3382765 Northwest Medical Group, Inc. CA 64-748023 MedExpress Urgent Care South Carolina, P.C. SC 81-5380766 Northwest Medical Group Allance, LLC WA 61-1699944 MedExpress Urgent Care Washington, P.C. WA 47-5147441 NPIN PA Washington, P.L.C WA 61-1699944 MedExpress Urgent Care Washington, P.C. WA 82-2443116 Optum Medical Services of California, P.C. CA 30-0828311 MedExpress Urgent Care, N.C West Virginia WV 28-456460 Optum Medical Services of California, P.C. NC 4-5368038 MedExpress Urgent Care, P.C Mest Virginia NV 28-456460 Optum Medical Group, Inc. NA 9-0629572 MedExpress Urgent Care, P.C Massachusetts NA 4-71807865 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. NA 9-1822767 MedExpress Urgent Care, P.C Massachusetts MA 4-71857808 Physician Massociates of the Greater San Gabriel Valley, a Medical Group, Inc. NA	MedExpress Urgent Care Missouri P.C.	MO	47-3132625	naviHealth Coordinated Care SC, P.C.	M	85-0975337
MedExpress Urgent Care Rhode Island, P.C. RI 81-5382765 Northridge Medical Group, Inc. CA 95-4748023 MedExpress Urgent Care South Carolins, P.C. SC 81-5380766 Northwest Medical Group, Allance, LLC WA 91-1699944 MedExpress Urgent Care Viseshington, P.C. WA 82-47481318 Optimu Clinic, P.A. TX 75-2778455 MedExpress Urgent Care Viseshington, P.C. WA 82-42481318 Optimu Clinic, P.A. TX 75-2778455 MedExpress Urgent Care, Viseshington, P.C. WA 82-42481318 Optimu Medical Services, of California, P.C. NC 45-3285131 MedExpress Urgent Care, P.C. – Indiana N 90-09226572 Optimu Medical Services, P.C. NC 45-34861305 MedExpress Urgent Care, P.C. – Indiana N 90-09226572 Physician Associates of the Graeter San Gabriel Valley, a Medical Group, Inc. CA 90-4747379 MedExpress Urgent Care, P.C. – Indiana N 46-4739337 Physician Associates of the Graeter San Gabriel Valley, a Medical Group, Inc. CA 30-362273 MedExpress Urgent Care, P.C. – Michigan N 46-4739337 Polyclinic Management Services Company, LLC	MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747	naviHealth Michigan HBPC, P.C.	MI	84-3469040
MedExpress Urgent Care South Carolina, P.C. SC 81-5380706 Northwest Medical Group Allance, LLC WA 91-1699944 MedExpress Urgent Care Texas, P.A. TX 47-5147741 NN PA Washington, PLC WA 61-1655759 MedExpress Urgent Care Washington, P.C. WA 82-2443118 Optum Clinic, P.A. TX 75-277855 MedExpress Urgent Care, N.C West Virginia WV 26-4546400 Optum Medical Services of California, P.C. CA 45-368058 MedExpress Urgent Care, P.C Georgia GA 47-1804667 Optum Medical Services of California, P.C. CA 45-368058 MedExpress Urgent Care, P.C Indiana ND 945-3461101 Physician Partners Medical Group, Inc. CA 96-4747379 MedExpress Urgent Care, P.C Massachusetta MA 47-1857080 Physician Care Network, LLC. WA 91-822767 MedExpress Urgent Care, P.C Massachusetta MA 47-1857080 Physician Care Network, LLC. WA 93-0516432 MedExpress Urgent Care, P.C Massachusetta MA 47-1857080 Physician Care Network, LLC. WA 93-052735 MedExpress Urgent C	MedExpress Urgent Care Oregon, P.C.	OR	82-1919436	Nifty After Fifty/Monarch, LLC	CA	26-2995765
MedExpress Urgent Care Texas, P.A. TX 47.5147441 NPN PA Washington, PLC VX 61.1855159 MedExpress Urgent Care Washington, P.C. WA 82.2443118 Optum Dinic, P.A. TX 75.2778455 MedExpress Urgent Care Weschington, P.C. W1 81.4261676 Optum Medical Services of Colorado, P.C. CA 30-0655211 MedExpress Urgent Care, P.C Georgia GA 47.1804667 Optum Medical Services of Colorado, P.C. CA 45.3866333 MedExpress Urgent Care, P.C Indiana N 90-0925572 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. CA 95-4747379 MedExpress Urgent Care, P.C Indiana N 90-0925572 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. CA 90-0516435 MedExpress Urgent Care, P.C Maxschusetts M1 48-4793937 Polyclinic Management Services Company, LLC WA 46-0508666 MedExpress Urgent Care, P.C Okinhoma OK 47.1824055 Polyclinic Management Services Company, LLC WA 46-0508666 MedExpress Urgent Care, P.C Okinhoma OK 47.1824055 Polyclinic Management Services Company, LLC<	MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765	Northridge Medical Group, Inc.	CA	95-4748023
NedExpress Urgent Care Washington, P.C. WA 82-2433118 Optum Clnic, P.A. TX 75-2778455 MedExpress Urgent Care Wisconsin, S.C. W1 81-4281676 Optum Medical Services of California, P.C. CA 30-0828311 MedExpress Urgent Care, C Georgia GA A7-1804600 Optum Medical Services of Colorado, P.C. NC 45-346193 MedExpress Urgent Care, P.C Indiana N 90-0929572 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. CA 95-4747379 MedExpress Urgent Care, P.C Manyland MD 45-346101 Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc. CA 95-4747379 MedExpress Urgent Care, P.C Manyland MD 45-346101 Physician Pathers Medical Group, Inc. WA 91-1822767 MedExpress Urgent Care, P.C Manyland MI 46-4793937 Physician Sarte Network, LLC. WA 83-3042027 MedExpress Urgent Care, P.C Oklahoma CK 47-1824365 Polyclinic Management Services Company, LLC WA 46-0508608 MedExpress Urgent Care, P.C Vernisia VA 45-3125110 Prime Community Care, Inc. C	MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706	Northwest Medical Group Alliance, LLC	WA	91-1699944
MedExpress Urgent Care Wisconsin, S.C.Wi81-4281678Optum Medical Services of California, P.C.C.A30-6826311MedExpress Urgent Care, Inc West VirginiaWV26-4546400Optum Medical Services of Colorado, P.C.CO45-5424191MedExpress Urgent Care, P.C IndianaN90-0829572Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc.CA30-6516435MedExpress Urgent Care, P.C MarylandMD45-346101Physician Partners Medical Group, Inc.CA30-6516435MedExpress Urgent Care, P.C MassachusettsMA47-1857908Physicians Care Network, LLC.WA91-1822767MedExpress Urgent Care, P.C MassachusettsMA47-1857908Physicians Care Network, LLC.WA83-3042027MedExpress Urgent Care, P.C MakinganMI46-4793937Polyclinic Management Services Company, LLCWA83-3042027MedExpress Urgent Care, P.C NensylvaniaPA26-3750502Primary Care, Associated Medical Group, Inc.CA30-652768MedExpress Urgent Care, P.C TennesseeTN45-497138Prime Community Care, Inc.CA30-645768MedExpress Urgent Care, P.C VirginiaVA45-3123110PrimeCare Medical Group, PLLCIV45-469171MedExpress, Inc DelawareDE45-548656ProHEALTH Accountable Care Medical Group, PLLCIV45-469174MedExpress, Inc DelawareDE45-548656ProHEALTH Accountable Care Medical Group, PLLCIV45-469176MedExpress, Inc DelawareDE <t< td=""><td>MedExpress Urgent Care Texas, P.A.</td><td>TX</td><td>47-5147441</td><td>NPN IPA Washington, PLLC</td><td>WA</td><td>61-1855159</td></t<>	MedExpress Urgent Care Texas, P.A.	TX	47-5147441	NPN IPA Washington, PLLC	WA	61-1855159
MedExpress Urgent Care, Inc. – West VirginiaWV26-4546400Optum Medical Services of Colorado, P.C.CD45-5424191MedExpress Urgent Care, P.C. – GeorgiaGA47-1804667Optum Medical Services, P.C.NC45-3866363MedExpress Urgent Care, P.C. – IndianaIN90-0929572Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc.CA95-4747379MedExpress Urgent Care, P.C. – MarylandMD45-361010Physician Partners Medical Group, Inc.CA90-161267MedExpress Urgent Care, P.C. – MassachusettsMA47-1857908Physician Care Network, L.L.C.WA83-3042027MedExpress Urgent Care, P.C. – MassachusettsMA47-1824365Polyclnic Management Services Company, LLCWA46-3050806MedExpress Urgent Care, P.C. – PennsylvaniaOK47-1824365Polyclnic Management Services Company, LLCWA46-3050806MedExpress Urgent Care, P.C. – VerginiaVA45-317318Prime Community Care, Inc.CA30-051440MedExpress Urgent Care, P.C. – VerginiaVA45-3123110PrimeCare Medical Group, PLLCVY45-45469117MedExpress Urgent Care, P.S. – KentuckyKY63-1655124ProHEALTH Accountable Care Medical Group, PLLCVY45-4566263MedExpress, Inc. – DelawareDE45-5436856ProHEALTH Accountable Care Medical Group, PLLCNY47-5656253MedExpress, Inc. – DelawareDE45-5436856ProHEALTH Accountable Care Medical Group, PLLCNY47-5656253MedExpress, Inc. – DelawareDE	MedExpress Urgent Care Washington, P.C.	WA	82-2443118	Optum Clinic, P.A.	TX	75-2778455
MedExpress Urgent Care, P.C GeorgiaGA47.1804667Optum Medical Services, P.C.NC45.3868383MedExpress Urgent Care, P.C IndianaN90-0929572Physician Associates of the Greater San Gabriel Valley, a Medical Group, Inc.CA95-4747379MedExpress Urgent Care, P.C MaylandMD45-3461101Physician Partners Medical Group, Inc.CA30-0516435MedExpress Urgent Care, P.C MassachusettsMA47-1824965Physicians Care Network, LL.C.WA91-1822767MedExpress Urgent Care, P.C OklahomaK446-4793937Polyclinic Holdings, P.C.WA46-0508060MedExpress Urgent Care, P.C OklahomaK426-3750502Primary Care Associated Medical Group, Inc.CA33-0527335MedExpress Urgent Care, P.C VirginiaVA45-13110Prime Community Care, Inc.CA33-0627345MedExpress Urgent Care, P.C VirginiaVA45-13110Prime Community Care, Inc.CA33-06245461MedExpress Urgent Care, P.C VirginiaVA45-145124PrimeCare Medical Group of Chino Valley, Inc.CA33-0625735MedExpress Urgent Care, P.S KentuckyKY83-1565124PrimeCare Medical Group of Chino Valley, Inc.CA33-0625735MedExpress Urgent Care, P.S VentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469117MedExpress Urgent Care, P.G VentuckyK495-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656523Mi Hotysician Trwe Holdoo, a Medical Corporation<	MedExpress Urgent Care Wisconsin, S.C.	W	81-4281678	Optum Medical Services of California, P.C.	CA	30-0826311
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MedExpress Urgent Care, P.C MarylandMD45-3461101Physician Partners Medical Group, Inc.CA30-0516435MedExpress Urgent Care, P.C MassachusettsMA47-1857908Physicians Care Network, L.L.C.WA91-1822767MedExpress Urgent Care, P.C MichiganMI46-4793937Polyclinic Holdings, P.C.WA83-3042027MedExpress Urgent Care, P.C OklahomaOK47-1824365Polyclinic Management Services Company, LLCWA46-0508006MedExpress Urgent Care, P.C PennsylvaniaPA25-3750502Primary Care Associated Medical Group, Inc.CA33-0627355MedExpress Urgent Care, P.C TennesseeTN45-4973136Prime Community Care, Inc.CA33-064768MedExpress Urgent Care, P.C VirginiaVA45-3123110PrimeCare Medical Group of Chino Valley, Inc.CA33-0645768MedExpress, Inc DelawareDE45-5438656ProHEALTH Accountable Care Medical Group, PLLCNY45-469117MedExpress, Inc DelawareDE45-5438656ProHEALTH Care Associates of New Jersey LLPNJ47-565523MH Physician Three Holdco, a Medical CorporationCA95-4680463ProHEALTH Care Associates, IL.P.NJ47-138406MHCH, Inc.CA96-050744ProHEALTH Care Associates, IL.P.NY47-138406MHPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Wingent Care Medicine of New Jersey LLPNJ47-5661535Moble Medical Services of New Jersey, PC.NJ81-2977678ProHEALTH Urgent	MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667	Optum Medical Services, P.C.	NC	45-3866363
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MedExpress Urgent Care, P.C. – MichiganMI46-4793937Polyclinic Holdings, P.C.WA83-3042027MedExpress Urgent Care, P.C. – OklahomaOK47-1824365Polyclinic Management Services Company, LLCWA46-0508060MedExpress Urgent Care, P.C. – PennsylvaniaPA26-3750502Primary Care Associated Medical Group, Inc.CA33-0527335MedExpress Urgent Care, P.C. – TennesseeTN45-4973138Prime Community Care, Inc.CA33-06516440MedExpress Urgent Care, P.C. – VirginiaVA45-3123110Prime Care Medical Group of Chino Valley, Inc.CA33-0645768MedExpress Urgent Care, P.S.C KentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469171MedExpress, Inc. – DelawareDE45-5436856ProHEALTH Accountable Care Medical Group, PLLCNY47-1656523MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates of New Jersey LLPNJ47-1585604MHPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.NY41-1385604MHPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.NY46-149068Mobile Medical Services of New Jersey, P.C.NJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-188357	MedExpress Urgent Care, P.C Maryland	MD	45-3461101	Physician Partners Medical Group, Inc.	CA	30-0516435
MedExpressUrgent Care, P.C OklahomaOK47.1824365Polyclinic Management Services Company, LLCWA46.0508606MedExpressUrgent Care, P.C PennsylvaniaPA26.3750502Primary Care Associated Medical Group, Inc.CA33.0527335MedExpressUrgent Care, P.C TennesseeTN45.4973138Prime Community Care, Inc.CA30.0516440MedExpressUrgent Care, P.C VirginiaVA45.3123110PrimeCare Medical Group of Chino Valley, Inc.CA33.0645768MedExpressUrgent Care, P.S.C KentuckyKY83.1565124ProHEALTH Accountable Care Medical Group, PLLCNY45.4469117MedExpress, Inc DelawareDE45.5436856ProHEALTH Ambulatory Surgery Center, Inc.NY11.3447394Memorial Healthcare IPA, GPCA95.4688463ProHEALTH Care Associates of New Jersey LLPNJ47.5656253MH Physician Three Holdco, a Medical CorporationCA27.4691544ProHEALTH Care Associates, L.L.P.NY11.3355604MHPA Physician Two Holdco, a Medical CorporationCA27.4691508ProHEALTH Medical NY, P.C.NY47.1388406Mobile Medical Services of New Jersey, PCNJ81.2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47.5661535Mobile Medical Services, P.C.NY30-045773ProHEALTH Urgent Care Medicine, PLLCNY46.1883579	MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908	Physicians Care Network, L.L.C.	WA	91-1822767
MedExpress Urgent Care, P.C PennsylvaniaPA26-3750502Primary Care Associated Medical Group, Inc.CA33-0527335MedExpress Urgent Care, P.C TennesseeTN45-4973138Prime Community Care, Inc.CA33-0645768MedExpress Urgent Care, P.C VirginiaVA45-312310PrimeCare Medical Group of Chino Valley, Inc.CA33-0645768MedExpress Urgent Care, P.S.C KentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469117MedExpress, Inc DelawareDE45-5436856ProHEALTH Ambulatory Surgery Center, Inc.NY11-3447394Menorial Heathcare IPA, GPCA95-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA60-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.NY47-5661535Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.C Michigan	MI	46-4793937	Polyclinic Holdings, P.C.	WA	83-3042027
MedExpress Urgent Care, P.C TennesseeTN45-4973138Prime Community Care, Inc.CA30-0516440MedExpress Urgent Care, P.C VirginiaVA45-3123110PrimeCare Medical Group of Chino Valley, Inc.CA33-0645768MedExpress Urgent Care, P.S.C KentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469117MedExpress, Inc DelawareDE45-543856ProHEALTH Ambulatory Surgery Center, Inc.NY11-3447394Memorial Healthcare IPA, GPCA95-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, LL.P.NY11-335604MHCH, Inc.CA80-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.C. – Oklahoma	ок	47-1824365	Polyclinic Management Services Company, LLC	WA	46-0508606
MedExpress Urgent Care, P.C VirginiaVA45-3123110PrimeCare Medical Group of Chino Valley, Inc.CA33-0645768MedExpress Urgent Care, P.S.C KentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469117MedExpress, Inc DelawareDE45-5436856ProHEALTH Ambulatory Surgery Center, Inc.NY11-3447394Memorial Healthcare IPA, GPCA95-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, L.L.P.NY11-335604MHPA, Inc.CA80-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.C. – Pennsylvania	PA	26-3750502	Primary Care Associated Medical Group, Inc.	CA	33-0527335
MedExpress Urgent Care, P.S.C KentuckyKY83-1565124ProHEALTH Accountable Care Medical Group, PLLCNY45-4469117MedExpress, Inc DelawareDE45-5436856ProHEALTH Ambulatory Surgery Center, Inc.NY11-3447394Memorial Healthcare IPA, GPCA95-4668463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, LL.P.NY11-3355604MHPA, Inc.CA60-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHEALTH Medical NY, P.C.NY47-5661535Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.C Tennessee	TN	45-4973138	Prime Community Care, Inc.	CA	30-0516440
MedExpress, Inc DelawareDE45-5436856ProHEALTH Ambulatory Surgery Center, Inc.NY11-3447394Memorial Healthcare IPA, GPCA95-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, LL.P.NY11-3355604MHCH, Inc.CA60-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHealth Physicians, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.C. – Virginia	VA	45-3123110	PrimeCare Medical Group of Chino Valley, Inc.	CA	33-0645768
Memorial Healthcare IPA, GPCA95-4688463ProHEALTH Care Associates of New Jersey LLPNJ47-5656253MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, L.L.P.NY11-3355604MHCH, Inc.CA80-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHealth Physicians, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress Urgent Care, P.S.C Kentucky	KY	83-1565124	ProHEALTH Accountable Care Medical Group, PLLC	NY	45-4469117
MH Physician Three Holdco, a Medical CorporationCA27-4691544ProHEALTH Care Associates, LL.P.NY11-3355604MHCH, Inc.CA80-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHealth Physicians, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MedExpress, Inc Delaware	DE	45-5436856	ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394
MHCH, Inc.CA80-0507474ProHEALTH Medical NY, P.C.NY47-1388406MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHealth Physicians, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	Memorial Healthcare IPA, GP	CA	95-4688463	ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253
MHIPA Physician Two Holdco, a Medical CorporationCA27-4691508ProHealth Physicians, P.C.CT06-1469068Mobile Medical Services of New Jersey, PCNJ81-2977678ProHEALTH Urgent Care Medicine of New Jersey LLPNJ47-5661535Mobile Medical Services, P.C.NY30-0445773ProHEALTH Urgent Care Medicine, PLLCNY46-1883579	MH Physician Three Holdco, a Medical Corporation	CA	27-4691544	ProHEALTH Care Associates, L.L.P.	NY	11-3355604
Mobile Medical Services of New Jersey, PC NJ 81-2977678 ProHEALTH Urgent Care Medicine of New Jersey LLP NJ 47-5661535 Mobile Medical Services, P.C. NY 30-0445773 ProHEALTH Urgent Care Medicine, PLLC NY 46-1883579	MHCH, Inc.	CA	80-0507474	ProHEALTH Medical NY, P.C.	NY	47-1388406
Mobile Medical Services, P.C. NY 30-0445773 ProHEALTH Urgent Care Medicine, PLLC NY 46-1883579	MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508	ProHealth Physicians, P.C.	СТ	06-1469068
	Mobile Medical Services of New Jersey, PC	NJ	81-2977678	ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535
Moen, M.D., P.C. CA 85-3287029 Prospero Health Partners Florida, Inc. FL 85-0775386	Mobile Medical Services, P.C.	NY	30-0445773	ProHEALTH Urgent Care Medicine, PLLC	NY	46-1883579
	Moen, M.D., P.C.	CA	85-3287029	Prospero Health Partners Florida, Inc.	FL	85-0775386

Physician Owned Entities

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Entity Name	Juris. Federal Tax ID		Entity Name	Juris.	Federal Tax ID
Prospero Health Partners New York, P.C.	NY	82-2400620	WellMed Florida Medicare ACO, LLC	TX	84-2233329
Prospero Health Partners North Carolina, P.C.	NC	84-4569314	WellMed Greater Texas Medicare ACO, LLC		84-2178104
Prospero Health Partners, P.C.	MN	84-3234753	WellMed Medical Group, P.A. TX		74-2574229
Prospero Medical Services New Jersey, P.C.	NJ	84-3844362	WellMed Network of Florida, Inc. TO		35-2314192
Psychiatry Services of New York, P.C.	NY	85-0921665	WellMed Networks - DFW, Inc.	ТХ	41-2250215
Redlands Family Practice Medical Group, Inc.	CA	56-2627067	WellMed Networks, Inc.	TX	74-2889447
Reliant Medical Group The Endoscopy Center, LLC	MA	20-5251393	WellMed of Las Cruces, Inc.	ТХ	92-0183013
Reliant Medical Group, Inc.	MA	04-2472266	WellMed Tampa/Orlando Medicare ACO, LLC	TX	84-2193803
Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097	WellMed Texas Medicare ACO, LLC	TX	84-2219968
Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379	WND Medical, PLLC	TX	45-2158334
Riverside Pediatric Group, P.C.	NJ	22-3624559	XLHome Michigan, P.C.	MI	46-3537245
Robert B. McBeath, M.D. II, P.C.	NV	86-0857176	XLHome Northeast, P.C.	NJ	45-5530241
Robert B. McBeath, M.D. III, P.C.	NV	46-2662506	XLHome Oklahoma, Inc.	OK	46-2931689
Robert B. McBeath, M.D., Professional Corporation	NV	88-0310956	XLHome, P.C.	MD	27-3543997
San Bernardino Medical Group, Inc.	CA				
Sanvello Behavioral Health Services of Michigan, P.C.	DE	85-1941832			
Sanvello Behavioral Health Services of New Jersey, P.C.	NJ	85-0666386			
Sanvello Behavioral Health Services of North Carolina, P.C.	NC	85-1959641			
Sanvello Behavioral Health Services of Texas, P.A.	TX	84-3152209			
Sanvello Behavioral Health Services, P.A.	DE	84-1754732			
Southern California Medical Practice Concepts, LLC	CA	30-0743767			
Surgical Eye Experts, LLC	MA	65-1321064			
Talbert Medical Group, P.C.	CA	93-1172065			
TeamMD Physicians, P.C.	IA	42-1446216			
The Everett Clinic, PLLC	WA	91-0214500			
The Polyclinic, PLLC	WA	91-0369070			
USMD Diagnostic Services, LLC	ТХ	27-2803133			
USMD Hospital at Arlington, L.P.	TX	73-1662763			
USMD Hospital at Fort Worth, L.P.	тх	20-3571243			
USMD of Arlington GP, L.L.C.	тх	73-1662757			
Vitucci, LCSW, P.C.	IL.	85-1453387			
Waypoint Minnesota PC	MN	46-2854394			

MN

46-2859426

Waypoint Minnesota Sports PC

Organizational Chart Footnotes

- (1) Entity is owned in full or in part by a UnitedHealth Group Incorporated friendly physician.
- (2) Control of the Foundation is based on sole membership, not the ownership of voting securities.
- (3) The remaining percentage is owned either by a non-affiliated entity, outside investor(s), former company officer(s), or third party shareholder(s).
- (4) The minority percentage is owned by one or more affiliated UnitedHealth Group Incorporated subsidiaries. Voting rights do vary.
- (5) No information of the other shareholder(s) has been provided
- (6) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.
- (7) Branch offices in Iraq and Uganda.
- (8) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.
- (9) Registered as a foreign shareholder in Brazil.
- (10) Registered in Nova Scotia and Newfoundland& Labrador.
- (11) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.
- (12) Branch office located in the United States.
- (13) Entity has a representative office in Beijing, China.
- (14) Registered in the Dubai Silicon Oasis free zone.
- (15) Registered branches in Australia and the UK.
- (16) Registered in the Dubai Healthcare City free zone.
- (17) Entity is not directly owned by the parent. However, the parent does have a viable economic interest as well as control over the entity through contractual agreements.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE AmeriChoice of New Jersey, Inc. OVERFLOW PAGE FOR WRITE-INS

	Claim Adjustme	ent Expenses	3	4	5
	1	2			
	Cost	Other Claim	General		
	Containment	Adjustment	Administrative	Investment	
	Expenses	Expenses	Expenses	Expenses	Total
2504. Interest		5,956		0	
2505. Miscellaneous Losses				0	
2506. Managed Care & Network Access				0	
2597. Summary of remaining write-ins for Line 25 from overflow page	123,982	36,340	670,170	0	830,492

NONE