



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE
AmeriChoice of New Jersey, Inc.

NAIC Group Code 0707 0707 NAIC Company Code 95497 Employer's ID Number 22-3368602
(Current) (Prior)

Organized under the Laws of New Jersey State of Domicile or Port of Entry NJ

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 10/17/1994 Commenced Business 02/01/1996

Statutory Home Office 170 Wood Avenue South 3rd Floor Iselin, NJ, US 08830
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 170 Wood Avenue South 3rd Floor
(Street and Number)
Iselin, NJ, US 08830 732-623-1258
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 4 Research Drive 5th Floor Shelton, CT, US 06484
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 185 Asylum Street
(Street and Number)
Hartford, CT, US 06103 860-702-9855
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.AmeriChoice.com

Statutory Statement Contact Stephen J Wells 608-783-8610
(Name) (Area Code) (Telephone Number)
stephen_j_wells@uhc.com 952-931-4651
(E-mail Address) (FAX Number)

OFFICERS

President Charles Reeves Wayland Chief Financial Officer Richard Michael Hersch
Treasurer Peter Marshall Gill Vice President Nyle Brent Cottingham

OTHER

Heather Anastasia Lang, Assistant Secretary

DIRECTORS OR TRUSTEES

Michael Lester Cotton # Phillip Robert Franz Tameeka Lashell Smith
Scott Douglas Waulters # Charles Reeves Wayland

State of Minnesota State of Minnesota State of _____
County of Hennepin County of Hennepin County of _____

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

Peter Marshall Gill
Peter Marshall Gill
Treasurer

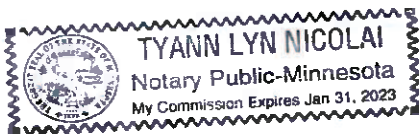
Nyle Brent Cottingham
Nyle Brent Cottingham
Vice President

Richard Michael Hersch
Richard Michael Hersch
Chief Financial Officer

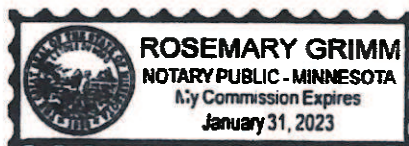
Subscribed and sworn to before me this
26 day of January, 2022
By: Ryan A. Aden

Subscribed and sworn to before me this
24th day of January, 2022
Rosemary Grimm

Subscribed and sworn to before me this
_____ day of _____



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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	650,547,889	0	650,547,889	479,958,843
2. Stocks (Schedule D):				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$466,096 , Schedule E - Part 1), cash equivalents (\$268,777,051 , Schedule E - Part 2) and short-term investments (\$0 , Schedule DA)	269,243,147	0	269,243,147	374,275,150
6. Contract loans, (including \$0 premium notes)	0	0	0	0
7. Derivatives (Schedule DB)	0	0	0	0
8. Other invested assets (Schedule BA)	0	0	0	0
9. Receivables for securities	1,645	0	1,645	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	919,792,681	0	919,792,681	854,233,993
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	3,764,042	0	3,764,042	2,931,052
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	19,770,312	0	19,770,312	16,524,600
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$7,599) and contracts subject to redetermination (\$2,543,471)	2,551,070	0	2,551,070	7,672,827
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	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	0
17. Amounts receivable relating to uninsured plans	5,901	0	5,901	5,901
18.1 Current federal and foreign income tax recoverable and interest thereon	5,864,864	0	5,864,864	671,231
18.2 Net deferred tax asset	4,211,758	0	4,211,758	3,891,028
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$6,513,803) and other amounts receivable	23,811,839	17,298,036	6,513,803	4,619,861
25. Aggregate write-ins for other than invested assets	2,509	2,509	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	979,774,976	17,300,545	962,474,431	890,550,493
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	979,774,976	17,300,545	962,474,431	890,550,493
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Miscellaneous receivables	2,509	2,509	0	0
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,509	2,509	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded).....	205,312,725	0	205,312,725	203,513,533
2. Accrued medical incentive pool and bonus amounts.....	8,175,776	0	8,175,776	3,722,524
3. Unpaid claims adjustment expenses.....	1,961,137	0	1,961,137	2,029,575
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act.....	188,264,745	0	188,264,745	103,121,126
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	2,717,971	0	2,717,971	2,811,547
8. Premiums received in advance.....	0	0	0	0
9. General expenses due or accrued.....	76,519,108	0	76,519,108	94,938,922
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses)).....	0	0	0	0
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	0	0	0	0
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	12,662,169	0	12,662,169	13,269,057
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	670,000
18. Payable for securities lending.....	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies.....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0	0	0
22. Liability for amounts held under uninsured plans.....	49,028,004	0	49,028,004	1,070,267
23. Aggregate write-ins for other liabilities (including \$3,251 current).....	3,251	0	3,251	35,003,122
24. Total liabilities (Lines 1 to 23).....	544,644,886	0	544,644,886	460,149,673
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	0	0
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	278,069,150	278,069,150
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	139,760,395	152,331,670
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	417,829,545	430,400,820
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	962,474,431	890,550,493
DETAILS OF WRITE-INS				
2301. Declared Dividend.....	0	0	0	35,000,000
2302. Unclaimed property.....	3,251	0	3,251	3,122
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above).....	3,251	0	3,251	35,003,122
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above).....	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above).....	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	4,647,580	4,627,838
2. Net premium income (including \$0 non-health premium income).....	XXX	2,512,231,268	2,494,691,835
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(88,346,352)	(97,918,393)
4. Fee-for-service (net of \$0 medical expenses).....	XXX	0	0
5. Risk revenue.....	XXX	0	0
6. Aggregate write-ins for other health care related revenues.....	XXX	0	0
7. Aggregate write-ins for other non-health revenues.....	XXX	0	0
8. Total revenues (Lines 2 to 7).....	XXX	2,423,884,916	2,396,773,442
Hospital and Medical:			
9. Hospital/medical benefits.....	0	1,604,731,217	1,571,172,200
10. Other professional services.....	0	92,949,261	77,012,171
11. Outside referrals.....	0	0	0
12. Emergency room and out-of-area.....	0	0	0
13. Prescription drugs.....	0	338,664,455	327,507,539
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....	0	8,291,983	9,457,738
16. Subtotal (Lines 9 to 15).....	0	2,044,636,916	1,985,149,648
Less:			
17. Net reinsurance recoveries.....	0	0	0
18. Total hospital and medical (Lines 16 minus 17).....	0	2,044,636,916	1,985,149,648
19. Non-health claims (net).....	0	0	0
20. Claims adjustment expenses, including \$78,612,958 cost containment expenses.....	0	100,949,710	99,263,391
21. General administrative expenses.....	0	209,373,830	252,686,913
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only).....	0	0	(61,411,000)
23. Total underwriting deductions (Lines 18 through 22).....	0	2,354,960,456	2,275,688,952
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	68,924,460	121,084,490
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	0	11,838,738	12,741,501
26. Net realized capital gains (losses) less capital gains tax of \$142,336.....	0	535,453	1,807,039
27. Net investment gains (losses) (Lines 25 plus 26).....	0	12,374,191	14,548,540
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)].....	0	0	0
29. Aggregate write-ins for other income or expenses.....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	81,298,651	135,633,030
31. Federal and foreign income taxes incurred.....	XXX	16,422,800	22,726,416
32. Net income (loss) (Lines 30 minus 31).....	XXX	64,875,851	112,906,614
DETAILS OF WRITE-INS			
0601.	XXX		
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above).....	XXX	0	0
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above).....	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	0	0	0
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0	0
2999. Totals (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.....	430,400,820	354,708,970
34. Net income or (loss) from Line 32.....	64,875,851	112,906,614
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.....	320,730	(1,318,395)
39. Change in nonadmitted assets.....	(1,767,856)	(896,369)
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	0
45.2 Transferred to capital (Stock Dividend).....	0	0
45.3 Transferred from capital.....	0	0
46. Dividends to stockholders.....	(76,000,000)	(35,000,000)
47. Aggregate write-ins for gains or (losses) in surplus.....	0	0
48. Net change in capital and surplus (Lines 34 to 47).....	(12,571,275)	75,691,850
49. Capital and surplus end of reporting period (Line 33 plus 48)	417,829,545	430,400,820
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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	2,510,904,580	2,508,020,195
2. Net investment income	14,852,074	15,542,509
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	2,525,756,654	2,523,562,704
5. Benefit and loss related payments	2,042,139,898	2,001,333,122
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	280,880,085	309,530,715
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	21,758,769	34,529,320
10. Total (Lines 5 through 9)	2,344,778,752	2,345,393,157
11. Net cash from operations (Line 4 minus Line 10)	180,977,902	178,169,547
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	128,532,917	142,360,620
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	670,000
12.8 Total investment proceeds (Lines 12.1 to 12.7)	128,532,917	143,030,620
13. Cost of investments acquired (long-term only):		
13.1 Bonds	302,264,470	191,328,614
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	671,645	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	302,936,115	191,328,614
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(174,403,198)	(48,297,994)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	111,000,000	0
16.6 Other cash provided (applied)	(606,707)	(1,692,382)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(111,606,707)	(1,692,382)
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)	(105,032,003)	128,179,171
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	374,275,150	246,095,979
19.2 End of year (Line 18 plus Line 19.1)	269,243,147	374,275,150
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001. Dividend declared during 2020	0	35,000,000

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income	2,512,231,268	33,818,263	0	0	0	0	0	2,478,413,005	0	0
2. Change in unearned premium reserves and reserve for rate credit	(88,346,352)	(568,864)	0	0	0	0	0	(87,777,488)	0	0
3. Fee-for-service (net of \$ medical expenses)	0	0	0	0	0	0	0	0	0	XXX
4. Risk revenue	0	0	0	0	0	0	0	0	0	XXX
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6)	2,423,884,916	33,249,399	0	0	0	0	0	2,390,635,517	0	0
8. Hospital/medical benefits	1,604,731,217	14,653,624	0	0	0	0	0	1,590,077,593	0	XXX
9. Other professional services	92,949,261	3,674,014	0	0	0	0	0	89,275,247	0	XXX
10. Outside referrals	0	0	0	0	0	0	0	0	0	XXX
11. Emergency room and out-of-area	0	0	0	0	0	0	0	0	0	XXX
12. Prescription drugs	338,664,455	9,163,628	0	0	0	0	0	329,500,827	0	XXX
13. Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts	8,291,983	4,761	0	0	0	0	0	8,287,222	0	XXX
15. Subtotal (Lines 8 to 14)	2,044,636,916	27,496,027	0	0	0	0	0	2,017,140,889	0	XXX
16. Net reinsurance recoveries	0	0	0	0	0	0	0	0	0	XXX
17. Total medical and hospital (Lines 15 minus 16)	2,044,636,916	27,496,027	0	0	0	0	0	2,017,140,889	0	XXX
18. Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19. Claims adjustment expenses including \$ cost containment expenses	100,949,710	1,010,226	0	0	0	0	0	99,939,484	0	0
20. General administrative expenses	209,373,830	2,455,212	0	0	0	0	0	206,918,618	0	0
21. Increase in reserves for accident and health contracts	0	0	0	0	0	0	0	0	0	XXX
22. Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23. Total underwriting deductions (Lines 17 to 22)	2,354,960,456	30,961,465	0	0	0	0	0	2,323,998,991	0	0
24. Total underwriting gain or (loss) (Line 7 minus Line 23)	68,924,460	2,287,934	0	0	0	0	0	66,636,526	0	0
DETAILS OF WRITE-INS										
0501.										XXX
0502.										XXX
0503.										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	XXX
0599. 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	XXX	0
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.										XXX
1302.										XXX
1303.										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	XXX
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)	33,818,263	0	0	33,818,263
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	2,478,413,005	0	0	2,478,413,005
8. Other health	0	0	0	0
9. Health subtotal (Lines 1 through 8)	2,512,231,268	0	0	2,512,231,268
10. Life	0	0	0	0
11. Property/casualty	0	0	0	0
12. Totals (Lines 9 to 11)	2,512,231,268	0	0	2,512,231,268

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct	2,038,301,167	29,322,073	0	0	0	0	(10,168)	2,008,989,262	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	2,038,301,167	29,322,073	0	0	0	0	(10,168)	2,008,989,262	0	0
2. Paid medical incentive pools and bonuses	3,838,730	4,761	0	0	0	0	0	3,833,969	0	0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	205,312,725	2,368,776	0	0	0	0	0	202,943,949	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	205,312,725	2,368,776	0	0	0	0	0	202,943,949	0	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct	2,717,971	5,727	0	0	0	0	0	2,712,244	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	2,717,971	5,727	0	0	0	0	0	2,712,244	0	0
5. Accrued medical incentive pools and bonuses, current year	8,175,776	(78,936)	0	0	0	0	140	8,254,572	0	0
6. Net healthcare receivables (a)	3,661,851	(60,393)	0	0	0	0	0	3,722,244	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct	203,513,533	4,251,425	0	0	0	0	(10,168)	199,272,276	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
8.4 Net	203,513,533	4,251,425	0	0	0	0	(10,168)	199,272,276	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct	2,811,547	14,278	0	0	0	0	0	2,797,269	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
9.4 Net	2,811,547	14,278	0	0	0	0	0	2,797,269	0	0
10. Accrued medical incentive pools and bonuses, prior year	3,722,523	(78,935)	0	0	0	0	140	3,801,318	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:										
12.1 Direct	2,036,344,932	27,491,266	0	0	0	0	0	2,008,853,666	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
12.4 Net	2,036,344,932	27,491,266	0	0	0	0	0	2,008,853,666	0	0
13. Incurred medical incentive pools and bonuses	8,291,983	4,760	0	0	0	0	0	8,287,223	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct	50,710,007	374,089	.0	.0	.0	.0	.0	50,335,918	.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	50,710,007	374,089	.0	.0	.0	.0	.0	50,335,918	.0	.0
2. Incurred but Unreported:										
2.1 Direct	154,602,718	1,994,687	.0	.0	.0	.0	.0	152,608,031	.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	154,602,718	1,994,687	.0	.0	.0	.0	.0	152,608,031	.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	205,312,725	2,368,776	.0	.0	.0	.0	.0	202,943,949	.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	205,312,725	2,368,776	.0	.0	.0	.0	.0	202,943,949	.0	.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

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

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5 Claims Incurred In Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	1,477,180	27,844,893	566,199	1,808,304	2,043,379	4,265,702
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	(10,168)	0	0	0	(10,168)	(10,167)
7. Title XIX - Medicaid	134,448,399	1,874,540,863	10,070,997	195,585,197	144,519,396	202,069,545
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	135,915,411	1,902,385,756	10,637,196	197,393,501	146,552,607	206,325,080
10. Healthcare receivables (a)	15,174,847	8,102,247	0	534,744	15,174,847	20,149,988
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	838,732	3,000,000	462,104	7,713,672	1,300,836	3,722,524
13. Totals (Lines 9 - 10 + 11 + 12)	121,579,296	1,897,283,509	11,099,300	204,572,429	132,678,596	189,897,616

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

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

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2017	2 2018	3 2019	4 2020	5 2021
1. Prior	1,971	2,019	2,017	2,015	2,016
2. 2017	34,641	36,916	36,796	36,796	36,796
3. 2018	XXX	38,372	41,462	41,462	41,462
4. 2019	XXX	XXX	40,888	42,734	42,734
5. 2020	XXX	XXX	XXX	30,132	31,614
6. 2021	XXX	XXX	XXX	XXX	27,845

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

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2017	2 2018	3 2019	4 2020	5 2021
1. Prior	2,249	2,019	2,017	2,015	2,016
2. 2017	37,779	37,267	36,796	36,796	36,796
3. 2018	XXX	40,439	41,698	41,462	41,462
4. 2019	XXX	XXX	44,757	44,007	42,734
5. 2020	XXX	XXX	XXX	33,045	32,101
6. 2021	XXX	XXX	XXX	XXX	29,653

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2017	33,837	36,796	0	0.0	36,796	108.7	0	0	36,796	108.7
2. 2018	40,119	41,462	262	0.6	41,724	104.0	0	0	41,724	104.0
3. 2019	40,005	42,734	2,003	4.7	44,737	111.8	0	0	44,737	111.8
4. 2020	37,452	31,614	1,563	4.9	33,177	88.6	487	4	33,668	89.9
5. 2021	33,249	27,845	893	3.2	28,738	86.4	1,808	15	30,561	91.9

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	(41)	(55)	(57)	(57)	(58)
2.	2017	0	0	0	0	0
3.	2018	XXX	0	0	0	0
4.	2019	XXX	XXX	0	(1)	(1)
5.	2020	XXX	XXX	XXX	0	(10)
6.	2021	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	(51)	(55)	(57)	(57)	(58)
2.	2017	0	(10)	0	0	0
3.	2018	XXX	0	(10)	0	0
4.	2019	XXX	XXX	0	(11)	(1)
5.	2020	XXX	XXX	XXX	0	(10)
6.	2021	XXX	XXX	XXX	XXX	0

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2017	13	0	0	0.0	0	0.0	0	0	0	0.0
2. 2018	(4)	0	0	0.0	0	0.0	0	0	0	0.0
3. 2019	0	(1)	0	0.0	(1)	0.0	0	0	(1)	0.0
4. 2020	0	(10)	0	0.0	(10)	0.0	0	0	(10)	0.0
5. 2021	0	0	0	0.0	0	0.0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	166,664	171,658	172,867	172,460	172,266
2.	2017	2,032,248	2,219,969	2,213,935	2,212,899	2,212,465
3.	2018	XXX	2,159,269	2,354,824	2,352,082	2,350,358
4.	2019	XXX	XXX	2,173,942	2,343,200	2,345,347
5.	2020	XXX	XXX	XXX	1,804,283	1,939,772
6.	2021	XXX	XXX	XXX	XXX	1,877,541

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	185,942	171,658	172,867	172,460	172,266
2.	2017	2,233,898	2,236,247	2,213,935	2,212,899	2,212,465
3.	2018	XXX	2,374,669	2,364,194	2,352,082	2,350,358
4.	2019	XXX	XXX	2,389,257	2,352,643	2,345,347
5.	2020	XXX	XXX	XXX	2,000,710	1,950,383
6.	2021	XXX	XXX	XXX	XXX	2,080,840

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2017	2,535,297	2,212,465	7,408	0.3	2,219,873	87.6	0	0	2,219,873	87.6
2. 2018	2,674,348	2,350,358	34,973	1.5	2,385,331	89.2	0	0	2,385,331	89.2
3. 2019	2,609,748	2,345,347	125,223	5.3	2,470,570	94.7	0	0	2,470,570	94.7
4. 2020	2,359,321	1,939,772	97,512	5.0	2,037,284	86.4	10,612	96	2,047,992	86.8
5. 2021	2,390,636	1,877,541	87,271	4.6	1,964,812	82.2	203,299	1,846	2,169,957	90.8

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	168,594	173,622	174,827	174,418	174,224
2.	2017	2,066,889	2,256,885	2,250,731	2,249,695	2,249,261
3.	2018	XXX	2,197,641	2,396,286	2,393,544	2,391,820
4.	2019	XXX	XXX	2,214,830	2,385,933	2,388,080
5.	2020	XXX	XXX	XXX	1,834,415	1,971,376
6.	2021	XXX	XXX	XXX	XXX	1,905,386

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2017	2 2018	3 2019	4 2020	5 2021
1.	Prior	188,140	173,622	174,827	174,418	174,224
2.	2017	2,271,677	2,273,504	2,250,731	2,249,695	2,249,261
3.	2018	XXX	2,415,108	2,405,882	2,393,544	2,391,820
4.	2019	XXX	XXX	2,434,014	2,396,639	2,388,080
5.	2020	XXX	XXX	XXX	2,033,755	1,982,474
6.	2021	XXX	XXX	XXX	XXX	2,110,493

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

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2017	2,569,147	2,249,261	7,408	0.3	2,256,669	87.8	0	0	2,256,669	87.8
2. 2018	2,714,463	2,391,820	35,235	1.5	2,427,055	89.4	0	0	2,427,055	89.4
3. 2019	2,649,753	2,388,080	127,226	5.3	2,515,306	94.9	0	0	2,515,306	94.9
4. 2020	2,396,773	1,971,376	99,075	5.0	2,070,451	86.4	11,099	100	2,081,650	86.9
5. 2021	2,423,885	1,905,386	88,164	4.6	1,993,550	82.2	205,107	1,861	2,200,518	90.8

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	2	3	4	5	6	7	8	9
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	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 \$0) for investment income	188,264,745	919,938	0	0	0	0	0	187,344,807	0
5. Aggregate write-ins for other policy reserves	0	0	0	0	0	0	0	0	0
6. Totals (gross)	188,264,745	919,938	0	0	0	0	0	187,344,807	0
7. Reinsurance ceded	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)	188,264,745	919,938	0	0	0	0	0	187,344,807	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	2,717,971	5,727	0	0	0	0	0	2,712,244	0
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0
12. Totals (gross)	2,717,971	5,727	0	0	0	0	0	2,712,244	0
13. Reinsurance ceded	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	2,717,971	5,727	0	0	0	0	0	2,712,244	0
DETAILS OF WRITE-INS									
0501.									
0502.									
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)	0	0	0	0	0	0	0	0	0
1101.									
1102.									
1103.									
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0
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 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$0 for occupancy of own building)	2,325,726	642,333	2,192,489	0	5,160,548
2. Salary, wages and other benefits	40,545,393	11,198,075	38,222,612	0	89,966,080
3. Commissions (less \$0 ceded plus \$0 assumed)	0	0	0	0	0
4. Legal fees and expenses	359,162	99,195	338,586	0	796,943
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services	4,337,704	1,198,014	4,089,205	0	9,624,923
7. Traveling expenses	408,416	112,799	385,018	0	906,233
8. Marketing and advertising	2,387,606	659,424	2,250,824	0	5,297,854
9. Postage, express and telephone	1,704,446	470,744	1,606,801	0	3,781,991
10. Printing and office supplies	2,962,690	818,254	2,792,962	0	6,573,906
11. Occupancy, depreciation and amortization	1,050,943	290,256	990,736	0	2,331,935
12. Equipment	336,447	92,922	317,172	0	746,541
13. Cost or depreciation of EDP equipment and software	4,398,818	1,214,892	4,146,817	0	9,760,527
14. Outsourced services including EDP, claims, and other services	5,048,801	1,876,980	3,988,551	0	10,914,332
15. Boards, bureaus and association fees	54,525	15,059	51,402	0	120,986
16. Insurance, except on real estate	792,587	218,901	747,181	0	1,758,669
17. Collection and bank service charges	260,276	71,885	245,365	0	577,526
18. Group service and administration fees	895,445	247,309	844,146	0	1,986,900
19. Reimbursements by uninsured plans	0	0	0	0	0
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	0	0	0	0	0
22. Real estate taxes	87,640	31,150	143,055	0	261,845
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	10,486,635	0	10,486,635
23.2 State premium taxes	0	0	0	0	0
23.3 Regulatory authority licenses and fees	0	0	124,046,361	0	124,046,361
23.4 Payroll taxes	1,738,192	617,806	2,837,266	0	5,193,264
23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	0
24. Investment expenses not included elsewhere	0	0	0	426,855	426,855
25. Aggregate write-ins for expenses	8,918,141	2,460,754	8,650,646	0	20,029,541
26. Total expenses incurred (Lines 1 to 25)	78,612,958	22,336,752	209,373,830	426,855	(a) 310,750,395
27. Less expenses unpaid December 31, current year	1,527,204	433,933	76,367,110	151,998	78,480,245
28. Add expenses unpaid December 31, prior year	1,543,909	485,666	94,812,953	125,969	96,968,497
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)	78,629,663	22,388,485	227,819,673	400,826	329,238,647
DETAILS OF WRITE-INS					
2501. Sundry General Expenses	7,359,885	2,032,698	6,935,963	0	16,328,546
2502. Professional Fees\Consulting	1,147,437	316,906	1,081,703	0	2,546,046
2503. Information Technology	332,734	91,897	313,672	0	738,303
2598. Summary of remaining write-ins for Line 25 from overflow page	78,085	19,253	319,308	0	416,646
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	8,918,141	2,460,754	8,650,646	0	20,029,541

(a) Includes management fees of \$142,933,119 to affiliates and \$0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds	(a) 511,774	518,199
1.1 Bonds exempt from U.S. tax	(a) 0	0
1.2 Other bonds (unaffiliated)	(a) 10,722,625	11,549,504
1.3 Bonds of affiliates	(a) 0	0
2.1 Preferred stocks (unaffiliated)	(b) 0	0
2.11 Preferred stocks of affiliates	(b) 0	0
2.2 Common stocks (unaffiliated)	0	0
2.21 Common stocks of affiliates	0	0
3. Mortgage loans	(c) 0	0
4. Real estate	(d) 0	0
5. Contract Loans	0	0
6. Cash, cash equivalents and short-term investments	(e) 197,955	197,955
7. Derivative instruments	(f) 0	0
8. Other invested assets	0	0
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	11,432,354	12,265,658
11. Investment expenses		(g) 426,855
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h) 65
14. Depreciation on real estate and other invested assets		(i) 0
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		426,920
17. Net investment income (Line 10 minus Line 16)		11,838,738
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

- (a) Includes \$ 218,835 accrual of discount less \$ 4,039,132 amortization of premium and less \$ 446,603 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.
- (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.
- (g) Includes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	494,941	0	494,941	0	0
1.1 Bonds exempt from U.S. tax	0	0	0	0	0
1.2 Other bonds (unaffiliated)	182,849	0	182,849	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	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	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	677,790	0	677,790	0	0
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB)	0	0	0
8. Other invested assets (Schedule BA)	0	0	0
9. Receivables for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	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	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
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
16.2 Funds held by or deposited with reinsured companies	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	0	0	0
20. Electronic data processing equipment and software	0	0	0
21. Furniture and equipment, including health care delivery assets	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivable from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable	17,298,036	15,530,127	(1,767,909)
25. Aggregate write-ins for other than invested assets	2,509	2,561	52
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	17,300,545	15,532,688	(1,767,857)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28. Total (Lines 26 and 27)	17,300,545	15,532,688	(1,767,857)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Miscellaneous Receivables	2,509	2,561	52
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)	2,509	2,561	52

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations	375,015	378,671	387,959	396,151	401,930	4,647,580
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	375,015	378,671	387,959	396,151	401,930	4,647,580
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, 2021 AND 2020****1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN****Organization and Operation**

AmeriChoice of New Jersey (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, 2022, and is subject to annual renewal provisions thereafter.

A. Accounting Practices

The statutory basis financial statements (herein referred to as "financial statements") 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 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 and capital and surplus, as illustrated in the table below:

	SSAP #	F/S Page #	F/S Line #	December 31, 2021	December 31, 2020
Net Income					
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 64,875,851	\$ 112,906,614
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: None				-	-
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: None				-	-
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	<u>\$ 64,875,851</u>	<u>\$ 112,906,614</u>
Capital and Surplus					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 417,829,545	\$ 430,400,820
(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	<u>\$ 417,829,545</u>	<u>\$ 430,400,820</u>

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

The preparation of these 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, aggregate health claim reserves, risk corridor, 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 in the period in which the estimate is adjusted.

C. Accounting Policy

Basis of Presentation — The Company prepares its 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 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 Investment Analysis Office of the NAIC ("IAO") 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 IAO in accordance with the NAIC Valuation of Securities manual prepared by the IAO 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;
- (10) Premium deficiency reserves ("PDR") (inclusive of conversion reserves) and the related expenses are recognized when it is 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 financial statements. 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 financial statements 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 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 financial statements. 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 financial statements. Management believes the amount of the liability for unpaid CAE as of December 31, 2021 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 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, hospitals and other health care organizations. 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 financial statements (see Note 28).

The Company has also deemed the following to be significant accounting policies:

ASSETS

Cash and Invested Assets

- Bonds include securities with a maturity of greater than one year at the time of purchase;
- Cash equivalents include securities that have original maturity dates of three months or less from the date of acquisition. Cash equivalents also consist of the Company's share of a qualified cash pool sponsored and administered by UHS. The investment pool 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. 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 ("net realized capital gains less taxes") in the financial statements;
- 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 in the financial statements. 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 (see Note 5).

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 2021 and 2020. 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, 2021; 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.

- **Aggregate Health Policy Reserves** — Aggregate health policy reserves includes 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). Aggregate health policy reserves also includes risk adjustment payables due to DMAHS which represents adjustments to capitation payments that are based on a calculation performed by DMAHS consultants for each company participating in the program (see Note 24).
- **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 financial statements.
- **Liability for Amounts Held Under Uninsured Plans** — Liability for amounts held under uninsured plans represents amounts due from the Company to the state Medicaid agency for the administrative activities it performs for which it has no insurance risk (see Note 18).

CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS

- **Restricted Cash Reserves** — The Company is in compliance with The New Jersey Administrative Code ("NJAC") regulatory deposit requirements as of December 31, 2021 and 2020, respectively, for qualification purposes as a domestic insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).

The NJAC also requires the Company to maintain minimum insolvency claim deposits with the State of New Jersey of \$314,411,547 and \$335,809,495 for claim expenses at June 30, 2021 and 2020, respectively. The Company held regulatory deposits with the State of New Jersey with a book/adjusted carrying value of \$371,569,537 and \$363,380,582 as of December 31, 2021 and 2020, respectively, which was 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 \$177,819,290 and \$171,323,432, for December 31, 2021 and 2020, respectively, which was based on health care expenditures, as that produced the highest minimum requirement.

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 is in compliance with the minimum required capital and surplus amounts where it is licensed to do business, as of December 31, 2021 and 2020.

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 Medicaid plan is subject to experience rated rebates, including risk corridor programs, risk adjustment programs, and performance guarantees based on various utilization measures. The Company records premium adjustments for the changes to the estimates for experience rated rebates and risk corridor programs which are reflected in change in unearned premium reserves and reserve for rate credits and for the risk adjustment program and performance guarantees which are reflected in net premium income in the financial statements (see Note 24). 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 Medicaid and Children’s Health Insurance Program (“CHIP”), and home nursing risk-sharing payments, high-dollar risk pool payments, and maternity payments. 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.

- **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 financial statements.

- **General Administrative Expenses** — General expenses that have been paid 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 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 financial statements.
- **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).

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, 2021 and 100% and 100% as of December 31, 2020, respectively.

Recently Issued Accounting Standards — In July 2020, the NAIC revised Statement of Statutory Accounting Principles (“SSAP”) No. 106, *Affordable Care Act Section 9010 Assessment* for the repeal of the Affordable Care Act Section 9010 Assessment, effective January 1, 2021. The Company adopted the revision on the effective date.

The Company reviewed all other recently issued guidance in 2021 and 2020 that has been adopted for 2021 or subsequent years’ implementation and has determined that none of the items would have a significant impact to the 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, 2021 and 2020.

3. BUSINESS COMBINATIONS AND GOODWILL

A–E. The Company was not party to a business combination during the years ended December 31, 2021 and 2020, and does not carry goodwill in its financial statements.

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 2021 and 2020.

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

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 \$828,291 and \$0, respectively, for 2021 and \$2,860,934 and \$113,576, respectively, for 2020. There were no gross realized gains and losses on sales of short-term investments in 2021 or 2020. The net realized gain is included in net realized capital gains less taxes. Total proceeds on the sale of long-term investments were \$33,079,646 and \$76,060,849 and for short-term investments were \$0 and \$1,263,542,014 in 2021 and 2020, respectively.

As of December 31, 2021 and 2020, 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 \$269,243,147 and \$374,275,150 respectively, are disclosed in the table below:

	2021				
	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	\$ 95,437,433	\$ 725,245	\$ 743,864	\$ -	\$ 95,418,814
State and agency municipal securities	65,035,864	3,184,982	258,282	-	67,962,564
City and county municipal securities	93,916,730	3,958,845	25,271	-	97,850,304
Corporate debt securities	<u>396,157,862</u>	<u>6,174,566</u>	<u>1,541,894</u>	<u>96,232</u>	<u>400,694,302</u>
Total bonds	<u>\$ 650,547,889</u>	<u>\$ 14,043,638</u>	<u>\$ 2,569,311</u>	<u>\$ 96,232</u>	<u>\$ 661,925,984</u>

	2021				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
Less than one year	\$ 6,963,975	\$ 71,651	\$ -	\$ -	\$ 7,035,626
One to five years	197,008,501	5,329,851	558,658	-	201,779,694
Five to ten years	193,624,408	4,654,042	556,703	13,983	197,707,764
Over ten years	<u>252,951,005</u>	<u>3,988,094</u>	<u>1,453,950</u>	<u>82,249</u>	<u>255,402,900</u>
Total bonds	<u>\$ 650,547,889</u>	<u>\$ 14,043,638</u>	<u>\$ 2,569,311</u>	<u>\$ 96,232</u>	<u>\$ 661,925,984</u>

	2020				
	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	\$ 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	<u>244,219,654</u>	<u>12,766,730</u>	<u>55,074</u>	<u>131,093</u>	<u>256,800,217</u>
Total bonds	<u>\$ 479,958,843</u>	<u>\$ 24,681,243</u>	<u>\$ 139,708</u>	<u>\$ 131,093</u>	<u>\$ 504,369,285</u>

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 \$142,253,727 and fair value of \$142,067,128.

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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, 2021 and 2020:

	2021					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses
U.S. government and agency securities	\$ 69,562,026	\$ 743,864	\$ -	\$ -	\$ 69,562,026	\$ 743,864
State and agency municipal securities	18,226,962	258,282	-	-	18,226,962	258,282
City and county municipal securities	11,268,742	25,271	-	-	11,268,742	25,271
Corporate debt securities	196,518,978	1,541,894	2,919,542	96,232	199,438,520	1,638,126
Total bonds	\$ 295,576,708	\$ 2,569,311	\$ 2,919,542	\$ 96,232	\$ 298,496,250	\$ 2,665,543

	2020					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses
U.S. government and agency securities	\$ 34,831,249	\$ 81,507	\$ -	\$ -	\$ 34,831,249	\$ 81,507
City and county municipal securities	3,393,344	3,127	-	-	3,393,344	3,127
Corporate debt securities	20,237,340	55,074	26,605,091	131,093	46,842,431	186,167
Total bonds	\$ 58,461,933	\$ 139,708	\$ 26,605,091	\$ 131,093	\$ 85,067,024	\$ 270,801

The unrecognized unrealized losses on investments in U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2021 and 2020, 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 other-than-temporary impairment ("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 \$0 and \$459,966 as of December 31, 2021 and 2020, 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) The Company did not recognize any OTTI on loan-backed securities as of December 31, 2021.
- (3) The Company did not have any OTTIs to report by CUSIP as of December 31, 2021. The table below represents the loan-backed securities with an OTTI for the year ended December 31, 2020, presented by CUSIP:

2021						
1	2	3	4	5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-than-Temporary Impairment	Amortized Cost After Other-than-Temporary Impairment	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
None	\$ -	\$ -	\$ -	\$ -	\$ -	
Total	XXX	XXX	\$ -	XXX	XXX	XXX

2020						
1	2	3	4	5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-than-Temporary Impairment	Amortized Cost After Other-than-Temporary Impairment	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
85572VAA8	\$ 95,451	\$ 87,844	\$ 7,607	\$ 87,844	\$ 87,844	9/30/2020
Total	XXX	XXX	\$ 7,607	XXX	XXX	XXX

- (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, 2021 and 2020:

		2021
The aggregate amount of unrealized losses:		
1. Less than 12 months		\$ 1,627,611
2. 12 months or longer		96,233
The aggregate related fair value of securities with unrealized losses:		
1. Less than 12 months		198,923,477
2. 12 months or longer		2,919,542
		2020
The aggregate amount of unrealized losses:		
1. Less than 12 months		\$ 136,582
2. 12 months or longer		131,093
The aggregate related fair value of securities with unrealized losses:		
1. Less than 12 months		55,068,590
2. 12 months or longer		26,605,091

- (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 principal 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 and the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of December 31, 2021, 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 unrecognized loss position as of December 31, 2021, 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, 2021 and 2020, are presented below:

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted From Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	3 Increase/ (Decrease) (1 Minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	0 %	0 %
b. Collateral held under security lending agreements	-	-	-	-	-	0 %	0 %
c. Subject to repurchase agreements	-	-	-	-	-	0 %	0 %
d. Subject to reverse repurchase agreements	-	-	-	-	-	0 %	0 %
e. Subject to dollar repurchase agreements	-	-	-	-	-	0 %	0 %
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	0 %	0 %
g. Placed under option contracts	-	-	-	-	-	0 %	0 %
h. Letter stock or securities restricted as to sale—excluding FHLB capital stock	-	-	-	-	-	0 %	0 %
i. FHLB capital stock	-	-	-	-	-	0 %	0 %
j. On deposit with states	376,563,046	365,715,095	10,847,951	-	376,563,046	39 %	42 %
k. On deposit with other regulatory bodies	-	-	-	-	-	0 %	0 %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	0 %	0 %
m. Pledged as collateral not captured in other categories	-	-	-	-	-	0 %	0 %
n. Other restricted assets	-	-	-	-	-	0 %	0 %
o. Total restricted assets	\$ 376,563,046	\$ 365,715,095	\$ 10,847,951	\$ -	\$ 376,563,046	39 %	42 %

(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, 2021 or 2020.

- 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, 2021 and 2020.

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2021:

	<u>General Account</u>
1. Number of CUSIPs	4
2. Aggregate Amount of Investment Income	\$ 64,611

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

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is \$256,487,192 and \$355,251,646 as of December 31, 2021 and December 31, 2020, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of December 31, 2021:

<u>Asset Type</u>	<u>Percent Share</u>
(1) Cash	0%
(2) Cash Equivalents	52%
(3) Short-Term Investments	48%
(4) Total	<u>100%</u>

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 financial statements.

B. There were no investment income amounts excluded from the 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, 2021 and 2020 are as follows:

	2021			2020			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	4,381,763	\$ -	\$ 4,381,763	\$ 4,103,534	\$ -	\$ 4,103,534	\$ 278,229	\$ -	\$ 278,229
(b) Statutory valuation allowance adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (1a - 1b)	4,381,763	-	4,381,763	4,103,534	-	4,103,534	278,229	-	278,229
(d) Deferred tax assets nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal net admitted deferred tax asset (1c - 1d)	4,381,763	-	4,381,763	4,103,534	-	4,103,534	278,229	-	278,229
(f) Deferred tax liabilities	170,005	-	170,005	212,506	-	212,506	(42,501)	-	(42,501)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	<u>\$ 4,211,758</u>	<u>\$ -</u>	<u>\$ 4,211,758</u>	<u>\$ 3,891,028</u>	<u>\$ -</u>	<u>\$ 3,891,028</u>	<u>\$ 320,730</u>	<u>\$ -</u>	<u>\$ 320,730</u>

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

Admission Calculation Components SSAP No. 101	2021			2020			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1 + 2) Total	Ordinary	Capital	(Col 4 + 5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7 + 8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 4,381,762	\$ -	\$ 4,381,762	\$ 4,103,533	\$ -	\$ 4,103,533	\$ 278,229	\$ -	\$ 278,229
(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	62,042,668	XXX	XXX	63,976,469	XXX	XXX	(1,933,801)
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	<u>1</u>	-	<u>1</u>	<u>1</u>	-	<u>1</u>	-	-	-
(d) Deferred tax assets admitted as the result of application of SSAP No. 101									
Total (2(a) + 2(b) + 2(c))	<u>\$ 4,381,763</u>	<u>\$ -</u>	<u>\$ 4,381,763</u>	<u>\$ 4,103,534</u>	<u>\$ -</u>	<u>\$ 4,103,534</u>	<u>\$ 278,229</u>	<u>\$ -</u>	<u>\$ 278,229</u>

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- (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:

	2021	2020
(a) Ratio percentage used to determine recovery period and threshold limitation amount	>300%	740%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	\$ 413,617,787	\$ 426,509,792

- (4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2021 and 2020 is presented below:

Impact of Tax-Planning Strategies	2021		2020		Change	
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col 1 - 3) Ordinary	6 (Col 2 - 4) 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)	\$ 4,381,763	\$ -	\$ 4,103,534	\$ -	\$ 278,229	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 4,381,763	\$ -	\$ 4,103,534	\$ -	\$ 278,229	\$ -
4. Percentage of net admitted adjusted 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	X

B. Unrecognized Deferred Tax Liabilities

- (1-4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2021 and 2020.

C. Significant Components of Income Taxes

- (1) The current federal income taxes incurred for the years ended December 31, 2021 and 2020 are as follows:

	1 2021	2 2020	3 (Col 1 - 2) Change
1. Current income tax			
(a) Federal	\$ 16,422,800	\$ 22,726,416	\$ (6,303,616)
(b) Foreign	-	-	-
(c) Subtotal	16,422,800	22,726,416	(6,303,616)
(d) Federal income tax on net capital gains	142,336	480,352	(338,016)
(e) Utilization of capital loss carryforwards	-	-	-
(f) Other	-	-	-
(g) Total federal and foreign income taxes incurred	<u>\$ 16,565,136</u>	<u>\$ 23,206,768</u>	<u>\$ (6,641,632)</u>

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(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, 2021 and 2020, are as follows:

	1	2	3
	2021	2020	(Col 1 - 2) Change
2 Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 710,848	\$ 675,436	\$ 35,412
(2) Unearned premium reserve	-	-	-
(3) Policyholder reserves	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	-	-	-
(8) Compensation and benefits accrual	-	-	-
(9) Pension accrual	-	-	-
(10) Receivables — nonadmitted	3,633,114	3,261,864	371,250
(11) Net operating loss carryforward	-	-	-
(12) Tax credit carryforward	-	-	-
(13) Other (including items <5% of total ordinary tax assets)	<u>37,801</u>	<u>166,234</u>	<u>(128,433)</u>
(99) Subtotal	4,381,763	4,103,534	278,229
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	<u>4,381,763</u>	<u>4,103,534</u>	<u>278,229</u>
(e) Capital:			
(1) Investments	-	-	-
(2) Net capital loss carryforward	-	-	-
(3) Real estate	-	-	-
(4) Other (including items <5% of total capital tax assets)	<u>-</u>	<u>-</u>	<u>-</u>
(99) Subtotal	-	-	-
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	<u>-</u>	<u>-</u>	<u>-</u>
(i) Admitted deferred tax assets (2d + 2h)	<u>4,381,763</u>	<u>4,103,534</u>	<u>278,229</u>
3 Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	-	-	-
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other (including items <5% of total ordinary tax liabilities)	<u>170,005</u>	<u>212,506</u>	<u>(42,501)</u>
(99) Subtotal	<u>170,005</u>	<u>212,506</u>	<u>(42,501)</u>
(b) Capital:			
(1) Investments	-	-	-
(2) Real estate	-	-	-
(3) Other (including items <5% of total capital tax liabilities)	<u>-</u>	<u>-</u>	<u>-</u>
(99) Subtotal	<u>-</u>	<u>-</u>	<u>-</u>
(c) Deferred tax liabilities (3a99 + 3b99)	<u>170,005</u>	<u>212,506</u>	<u>(42,501)</u>
4 Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 4,211,758</u>	<u>\$ 3,891,028</u>	<u>\$ 320,730</u>

The other ordinary deferred tax liability of \$170,005 and \$212,506 for 2021 and 2020, respectively, consists of discounting of unpaid losses.

The Company assessed the potential realization of the gross deferred tax asset and as a result no statutory valuation allowance was required and no allowance was established as of December 31, 2021 and 2020.

- D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income before federal income taxes incurred, plus capital gains tax. A summarization of the significant items causing this difference as of December 31, 2021 and 2020 is as follows:

	2021		2020	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	\$ 17,102,608	21%	\$ 28,583,811	21%
Tax-exempt interest	(486,952)	(1)	(397,970)	-
Health insurer fee	-	-	7,862,384	5
Tax effect of nonadmitted assets	(371,250)	-	(188,237)	-
Change in statutory valuation allowance	-	-	(11,334,825)	(7)
Total statutory income taxes	<u>\$ 16,244,406</u>	<u>20%</u>	<u>\$ 24,525,163</u>	<u>18%</u>
Federal income taxes incurred	\$ 16,422,800	20%	\$ 22,726,416	17%
Capital gains tax	142,336	-	480,352	-
Change in net deferred income tax	(320,730)	-	1,318,395	1
Total statutory income taxes	<u>\$ 16,244,406</u>	<u>20%</u>	<u>\$ 24,525,163</u>	<u>18%</u>

- E. At December 31, 2021, the Company had no net operating loss carryforwards.

Current federal income taxes recoverable of \$5,864,864 and \$671,231 as of December 31, 2021 and 2020, respectively, are included in the financial statements. Federal income taxes paid were \$21,758,769 and \$34,529,320 in 2021 and 2020, respectively.

Federal income taxes incurred of \$16,565,135 and \$23,206,769 for 2021 and 2020, 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 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 2014 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 there to), 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, 2021 and 2020, the Company’s portion was \$256,487,192 and \$355,251,646, respectively and is included in cash equivalents in the financial statements.

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

The Company paid dividends of \$111,000,000 in 2021 to its parent, of which \$35,000,000 was declared in 2020. The Company paid no dividends in 2020 (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, 2021. No amounts were outstanding under the line of credit as of December 31, 2021 and 2020. There was no interest paid or still accrued on any borrowings throughout the year as of December 31, 2021 and 2020, 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, 2021 and 2020, the Company reported \$12,662,169 and \$13,269,057, respectively, as amounts due to parent, subsidiaries, and affiliates, which are included in the financial statements. 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 financial statements. 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, 2021 and 2020, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

	2021	2020
OptumRx	\$ 348,546,677	\$ 368,839,378
UHS	144,536,667	160,047,072
March Vision Care Group, Incorporated	11,119,188	11,041,915
Riverside Pediatric Group, P.C.	7,258,776	5,784,011
Dental Benefits Providers, Inc.	4,371,908	4,342,155
Ear Professionals International Corporation*	-	1,578,370

*The current year amount did not meet the threshold requirements pursuant to SSAP No. 25.

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, utilization management reporting and expenses incurred for new business that will be effective in the subsequent year.

March Vision Care Group, Inc. 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 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 2021 and 2020.

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 value 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. The Company paid ordinary cash dividends of \$35,000,000 and \$76,000,000 on January 28, 2021 and November 5, 2021, respectively, to AmeriChoice, which were approved by the Department and recorded as a reduction to unassigned surplus in the financial statements.
- 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. The Company does not have any special surplus funds.
- J. The portion of unassigned surplus, excluding net income and dividends, represented (or reduced) by each item below is as follows:

	2021	2020
Net deferred income taxes	\$ 4,211,758	\$ 3,891,028
Nonadmitted assets	<u>(17,300,545)</u>	<u>(15,532,688)</u>
Total	<u>\$ (13,088,787)</u>	<u>\$ (11,641,660)</u>

- 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 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 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 financial statements of the Company.

The Company routinely evaluates the collectability of all receivable amounts included in the financial statements. 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 assets that the Company considers to be impaired at December 31, 2021 and 2020, 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 2021 and 2020.

C. 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 financial statements of \$1,065,920 and \$1,068,206 as of December 31, 2021 and 2020, respectively, for cost reimbursements and payments to providers under this program. There is no risk to the Company since any excess or shortfall will be 100% remitted to or received back from the state at the time the final reconciliation is completed.

The Company's Medicaid contract with the state Medicaid agency includes provisions for various types of enhanced payments to participating providers. Funds are received from the state Medicaid agency and the Company subsequently disburses these funds to providers as directed by the state Medicaid agency. There is no risk to the Company as a result of these pass-through payments. The Company recorded a payable of \$47,960,024 and \$0 as of December 31, 2021 and 2020, respectively, in liability for amounts held under uninsured plans in the financial statements for the additional pass-through payments to be made to providers.

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 2021 and 2020.

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 and cash equivalents (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, 2021 and 2020, in the financial statements according to the valuation techniques the Company used to determine their fair values:

Description for Each Class of Asset or Liability	December 31, 2021				Total
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
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	12,289,859	-	-	-	12,289,859
Qualified cash pool	256,487,192	-	-	-	256,487,192
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	<u>\$ 268,777,051</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 268,777,051</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
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	19,022,889	-	-	-	19,022,889
Qualified cash pool	355,251,646	-	-	-	355,251,646
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	<u>\$ 374,274,535</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 374,274,535</u>
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, 2021 or 2020.
- (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

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2021 and 2020 is presented in the table below:

Type of Financial Instrument	December 31, 2021						Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)			
U.S. government and agency securities	\$ 95,418,814	\$ 95,437,433	\$ 27,120,069	\$ 68,298,745	\$ -	\$ -	\$ -	
State and agency municipal securities	67,962,564	65,035,864	-	67,962,564	-	-	-	
City and county municipal securities	97,850,304	93,916,730	-	97,850,304	-	-	-	
Corporate debt securities	400,694,302	396,157,862	-	400,694,302	-	-	-	
Cash equivalents	268,777,051	268,777,051	268,777,051	-	-	-	-	
Total bonds and cash equivalents	\$ 930,703,035	\$ 919,324,940	\$ 295,897,120	\$ 634,805,915	\$ -	\$ -	\$ -	

Type of Financial Instrument	December 31, 2020						Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)			
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	\$ -	\$ -	\$ -	

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 overall impact to the Company's financial statements is uncertain and dependent on the future pacing, intensity and duration of the pandemic, the severity of new variants of the COVID-19 virus, the effectiveness and extent of administration of vaccination and treatments and general economic uncertainty.

A. Unusual or Infrequent Items

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2021 and 2020.

B. Troubled Debt Restructuring: Debtors

The Company has no troubled debt restructurings as of December 31, 2021 and 2020.

C. Other Disclosures

The Company does not have any amounts not recorded in the 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 2021 and 2020.

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, 2021, the Company is not aware of any possible proceeds of insurance-linked 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 28, 2022, which is the date these financial statements were available for issuance.

TYPE I — Recognized Subsequent Events

Any material Type I events subsequent to December 31, 2021, have been recognized in the financial statements and corresponding disclosures.

TYPE II — Non-Recognized Subsequent Events

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

23. REINSURANCE

A–D. The Company does not have any affiliated or unaffiliated reinsurance agreements in place as of December 31, 2021 or 2020.

- E. Reinsurance Credit** – Not applicable.

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 in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.

- C.** CMS has 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 MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. The Company also has recorded risk-corridor amounts from the State Medicaid agency which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums adjustments based on the risk-corridor tier guidelines included in the contract. 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 \$2,512,231,268 and \$2,494,691,835, representing 100% and 100% of total direct premiums written as of December 31, 2021 and December 31, 2020, respectively.
- D.** The Company does not have any business subject to specific minimum loss ratio requirements as of December 31, 2021 and 2020.

Pursuant to the Medicaid Managed Care Rule, based on the State's election, the Company is required to maintain specific MLRs on its Medicaid populations. The Company has no amounts accrued for Medicaid MLR rebates as of December 31, 2021 and December 31, 2020, respectively. The Company recorded a risk corridor payable due to DMAHS as the Company's actual MLR was lower than the target MLR established in the contract (see Note 1). As of December 31, 2021 and 2020, the company recorded a payable of \$188,264,745 and \$103,005,603, respectively, which is included in aggregate health policy reserves in the financial statements.

E. Risk-Sharing Provisions of the Affordable Care Act

- (1-5)** The Company did not write accident and health premiums in 2021 and 2020 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 financial statements. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, and health care and other amounts receivable for the years ended December 31, 2021 and 2020:

	2021		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ -	\$ (210,047,604)	\$ (210,047,604)
Paid claims—net of health care receivables	1,905,385,755	136,754,143	2,042,139,898
End of year claim reserve	<u>205,107,174</u>	<u>11,099,299</u>	<u>216,206,473</u>
Incurred claims excluding the change in health care receivables	2,110,492,929	(62,194,162)	2,048,298,767
Beginning of year health care receivables	-	20,149,988	20,149,988
End of year health care receivables	<u>(8,636,992)</u>	<u>(15,174,847)</u>	<u>(23,811,839)</u>
Total incurred claims	<u>\$ 2,101,855,937</u>	<u>\$ (57,219,021)</u>	<u>\$ 2,044,636,916</u>
	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 receivables	1,834,414,546	166,918,576	2,001,333,122
End of year claim reserve	<u>199,340,313</u>	<u>10,707,291</u>	<u>210,047,604</u>
Incurred claims excluding the change in health care receivables	2,033,754,859	(51,153,389)	1,982,601,470
Beginning of year health care receivables	-	22,698,166	22,698,166
End of year health care receivables	<u>(10,088,983)</u>	<u>(10,061,005)</u>	<u>(20,149,988)</u>
Total incurred claims	<u>\$ 2,023,665,876</u>	<u>\$ (38,516,228)</u>	<u>\$ 1,985,149,648</u>

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, net of health care and other amounts receivable as of December 31, 2020 was \$189,897,616. As of December 31, 2021, \$136,754,143 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, health care and other amounts receivable are now \$(4,075,548), as a result of re-estimation of unpaid claims. Therefore, there has been \$57,219,021 favorable prior year development since December 31, 2020 to December 31, 2021. The primary drivers consist of favorable development of \$26,273,105 in retroactivity for inpatient, outpatient, physician, and pharmacy claims, \$19,000,000 favorable development as a result of the release of actuarial reserves, and \$9,086,943 favorable change in the provision for adverse deviations in experience. At December 31, 2020, the Company recorded \$38,516,228 of favorable development. 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. 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 financial statements.

The Company incurred CAE of \$100,949,710 and \$99,263,391 in 2021 and 2020, 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 2021 and 2020:

	2021	2020
Total claims adjustment expenses	\$ 100,949,710	\$ 99,263,391
Less: current year unpaid claims adjustment expenses	(1,961,137)	(2,029,575)
Add: prior year unpaid claims adjustment expenses	<u>2,029,575</u>	<u>2,391,283</u>
Total claims adjustment expenses paid	<u>\$ 101,018,148</u>	<u>\$ 99,625,099</u>

- 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 2021.

26. INTERCOMPANY POOLING ARRANGEMENTS

A–G. The Company did not have any intercompany pooling arrangements in 2021 or 2020.

27. STRUCTURED SETTLEMENTS

A–B. The Company did not have structured settlements in 2021 or 2020.

28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

- 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 financial statements.

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
12/31/2021	\$ 3,937,992	\$ 1,166,928	\$ -	\$ -	\$ -
9/30/2021	3,866,460	3,935,443	1,996,294	-	-
6/30/2021	3,958,068	3,969,568	2,265,613	1,620,308	-
3/31/2021	3,708,985	3,671,702	1,167,967	2,097,829	307,022
12/31/2020	3,105,016	3,006,410	1,177,599	1,624,877	160,100
9/30/2020	3,206,592	3,118,762	1,780,898	1,005,202	299,137
6/30/2020	3,725,618	3,477,029	1,618,171	1,478,362	268,406
3/31/2020	4,398,220	3,899,820	202,582	3,652,594	100,591
12/31/2019	4,852,921	4,644,373	1,849,364	2,077,921	716,909
9/30/2019	4,740,350	4,810,854	1,809,732	1,643,024	1,356,828
6/30/2019	5,072,329	5,007,418	1,422,596	3,176,169	417,434
3/31/2019	4,699,252	4,788,947	1,981,403	1,155,789	1,650,582

Of the amount reported as health care and other amounts receivable, \$5,576,961 and \$4,266,164 relates to pharmacy rebates receivable as of December 31, 2021 and 2020, respectively. This change is primarily due to increased membership along with the change in generic/name brand mix.

The Company also admitted \$936,842 and \$353,697 of provider receivables resulting from claim overpayments as of December 31, 2021 and December 31, 2020, respectively, which are included in health care and other amounts receivable in the financial statements.

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

29. PARTICIPATING POLICIES

The Company did not have any participating contracts in 2021 or 2020.

30. PREMIUM DEFICIENCY RESERVES

The Company has not recorded any PDR as of December 31, 2021 or 2020. The analysis of PDR was completed as of December 31, 2021 and 2020. The Company did consider anticipated investment income when calculating the PDR.

The following table summarizes the Company's PDR as of December 31, 2021 and 2020:

	2021
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	<u>12/31/2021</u>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	2020
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	<u>12/31/2020</u>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, the Company has no salvage. As of December 31, 2021 and 2020, 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 INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes No
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes 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 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
- 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? Yes No N/A
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes No N/A
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes No
4.12 renewals? Yes No
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes No
4.22 renewals? Yes No
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes No
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes No
- 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
- 7.2 If yes,
7.21 State the percentage of foreign control; 0.0 %
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).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [X] No []
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
Optum Bank, Inc.	Salt Lake City, Utah	NO.....	NO.....	YES.....	NO.....

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? Yes [] No [X]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Deloitte & Touche LLP, Minneapolis, MN
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain
.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Kevin P. Donnelly, Director of Actuarial Services of the Community and State division of United HealthCare Services, Inc., of which AmeriChoice of New Jersey is an affiliate, 9800 Health Care Lane, Minnetonka, MN 55343
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company
12.12 Number of parcels involved 0
12.13 Total book/adjusted carrying value \$ 0
- 12.2 If, yes provide explanation:
.....
13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
c. Compliance with applicable governmental laws, rules and regulations;
d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
Non-material updates to the existing code. Amendments include expanding the communications section to cover marketing practices, adding a commitment to ethical marketing, defining intellectual property, and articulating our commitments to human rights, inclusion and diversity.
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- | | | |
|---|----|---|
| 20.11 To directors or other officers..... | \$ | 0 |
| 20.12 To stockholders not officers..... | \$ | 0 |
| 20.13 Trustees, supreme or grand (Fraternal Only) | \$ | 0 |
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- | | | |
|---|----|---|
| 20.21 To directors or other officers..... | \$ | 0 |
| 20.22 To stockholders not officers..... | \$ | 0 |
| 20.23 Trustees, supreme or grand (Fraternal Only) | \$ | 0 |
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- | | | |
|---------------------------------|----|---|
| 21.21 Rented from others..... | \$ | 0 |
| 21.22 Borrowed from others..... | \$ | 0 |
| 21.23 Leased from others | \$ | 0 |
| 21.24 Other | \$ | 0 |
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [X] No []
- 22.2 If answer is yes:
- | | | |
|---|----|-------------|
| 22.21 Amount paid as losses or risk adjustment \$ | \$ | 0 |
| 22.22 Amount paid as expenses | \$ | 141,296,508 |
| 22.23 Other amounts paid | \$ | 0 |
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

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

GENERAL INTERROGATORIES

- 25.02 If no, give full and complete information relating thereto
N/A
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
N/A
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 0
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$ 0
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 25.08 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0
- 25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0
- 25.093 Total payable for securities lending reported on the liability page. \$ 0
- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$ 0
- 26.22 Subject to reverse repurchase agreements \$ 0
- 26.23 Subject to dollar repurchase agreements \$ 0
- 26.24 Subject to reverse dollar repurchase agreements \$ 0
- 26.26 Placed under option agreements \$ 0
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ 0
- 26.27 FHLB Capital Stock \$ 0
- 26.28 On deposit with states \$ 376,563,046
- 26.29 On deposit with other regulatory bodies \$ 0
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 0
- 26.32 Other \$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

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

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [] No []
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes [] No []
- 27.42 Permitted accounting practice Yes [] No []
- 27.43 Other accounting guidance Yes [] No []
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$ 0
29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian's Address
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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

GENERAL INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107105	BlackRock Financial Management, Inc	549300LVXY1VJKE13M84	SEC	NO.....
107038	J.P. Morgan Asset Management	549300W78QH4XMM6K69	SEC	NO.....
106595	Wellington Management Company, LLP	549300YHP12TEZNLX41	SEC	NO.....

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

30.2 If yes, complete the following schedule:

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

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

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

GENERAL INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	650,547,889	661,925,982	11,378,093
31.2 Preferred stocks	0	0	0
31.3 Totals	650,547,889	661,925,982	11,378,093

31.4 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.

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]

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

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

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

33.2 If no, list exceptions:
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 b. Issuer or obligor is current on all contracted interest and principal payments.
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
 Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 a. The security was purchased prior to January 1, 2018.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
 Has the reporting entity self-designated PLGI securities? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
 a. The shares were purchased prior to January 1, 2019.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 d. The fund only or predominantly holds bonds in its portfolio.
 e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
 Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
 a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
 Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$0

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

1 Name	2 Amount Paid

39.1 Amount of payments for legal expenses, 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 payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$0

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

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

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

1.2 If yes, indicate premium earned on U.S. business only. \$ 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ 0

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 \$ 0

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

1.6 Individual policies: Most current three years:

1.61 Total premium earned \$ 0

1.62 Total incurred claims \$ 0

1.63 Number of covered lives 0

All years prior to most current three years:

1.64 Total premium earned \$ 0

1.65 Total incurred claims \$ 0

1.66 Number of covered lives 0

1.7 Group policies: Most current three years:

1.71 Total premium earned \$ 0

1.72 Total incurred claims \$ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned \$ 0

1.75 Total incurred claims \$ 0

1.76 Number of covered lives 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	2,512,231,268	2,494,691,835
2.2 Premium Denominator	2,512,231,268	2,494,691,835
2.3 Premium Ratio (2.1/2.2)	1.000	1.000
2.4 Reserve Numerator	404,471,217	313,168,730
2.5 Reserve Denominator	404,471,217	313,168,730
2.6 Reserve Ratio (2.4/2.5)	1.000	1.000

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

3.2 If yes, give particulars:
.....

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

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

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

5.2 If no, explain:
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 \$ 0

5.34 Dental & Vision \$ 0

5.35 Other Limited Benefit Plan \$ 0

5.36 Other \$ 0

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

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

7.2 If no, give details
.....

8. Provide the following information regarding participating providers: 8.1 Number of providers at start of reporting year 22,098

8.2 Number of providers at end of reporting year 22,879

9.1 Does the reporting entity have business subject to premium rate guarantees? Yes [] No [X]

9.2 If yes, direct premium earned: 9.21 Business with rate guarantees between 15-36 months.. \$ 0

9.22 Business with rate guarantees over 36 months \$ 0

GENERAL INTERROGATORIES

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

10.2 If yes: 10.21 Maximum amount payable bonuses.....\$ 8,175,776
10.22 Amount actually paid for year bonuses.....\$ 3,838,732
10.23 Maximum amount payable withholds.....\$ 0
10.24 Amount actually paid for year withholds.....\$ 0

11.1 Is the reporting entity organized as:
11.12 A Medical Group/Staff Model, Yes [] No [X]
11.13 An Individual Practice Association (IPA), or, Yes [] No [X]
11.14 A Mixed Model (combination of above)? Yes [] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? Yes [X] No []
 11.3 If yes, show the name of the state requiring such minimum capital and surplus. New Jersey
 11.4 If yes, show the amount required. \$ 177,819,290
 11.5 Is this amount included as part of a contingency reserve in stockholder's equity? Yes [] No [X]
 11.6 If the amount is calculated, show the calculation

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

1 Name of Service Area
All 21 counties within the State of New Jersey

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

13.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0

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

13.4 If yes, please provide the balance of funds administered as of the reporting date. \$ 0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

14.2 If the answer to 14.1 is yes, please provide the following:

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

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):
15.1 Direct Premium Written\$ 0
15.2 Total Incurred Claims\$ 0
15.3 Number of Covered Lives

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

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

FIVE-YEAR HISTORICAL DATA

	1 2021	2 2020	3 2019	4 2018	5 2017
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	962,474,431	890,550,493	728,109,826	587,710,133	591,573,599
2. Total liabilities (Page 3, Line 24)	544,644,886	460,149,673	373,400,856	304,442,763	272,884,764
3. Statutory minimum capital and surplus requirement	177,819,290	171,323,432	210,326,183	208,915,517	196,673,476
4. Total capital and surplus (Page 3, Line 33)	417,829,545	430,400,820	354,708,970	283,267,370	318,688,835
Income Statement (Page 4)					
5. Total revenues (Line 8)	2,423,884,916	2,396,773,442	2,649,753,209	2,714,463,416	2,569,148,354
6. Total medical and hospital expenses (Line 18)	2,044,636,916	1,985,149,648	2,414,990,105	2,389,951,877	2,239,321,308
7. Claims adjustment expenses (Line 20)	100,949,710	99,263,391	109,073,170	107,194,643	103,087,537
8. Total administrative expenses (Line 21)	209,373,830	252,686,913	190,397,949	237,703,493	166,278,904
9. Net underwriting gain (loss) (Line 24)	68,924,460	121,084,490	(112,210,015)	(34,295,597)	60,460,605
10. Net investment gain (loss) (Line 27)	12,374,191	14,548,540	14,920,374	12,498,882	10,058,827
11. Total other income (Lines 28 plus 29)	0	0	0	1,287,046	(1,957,486)
12. Net income or (loss) (Line 32)	64,875,851	112,906,614	(85,918,220)	(26,072,006)	45,635,098
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	180,977,902	178,169,547	(6,472,051)	(1,782,642)	35,647,397
Risk-Based Capital Analysis					
14. Total adjusted capital	417,829,545	430,400,820	354,708,970	283,267,370	318,688,835
15. Authorized control level risk-based capital	37,906,777	57,634,731	100,785,491	99,638,013	91,349,296
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	401,930	375,015	418,865	469,999	482,719
17. Total members months (Column 6, Line 7)	4,647,580	4,627,838	5,314,621	5,811,442	5,879,027
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	84.4	82.8	91.1	88.0	87.2
20. Cost containment expenses	3.2	3.2	3.0	2.5	2.6
21. Other claims adjustment expenses	0.9	1.0	1.1	1.4	1.4
22. Total underwriting deductions (Line 23)	97.2	94.9	104.2	101.3	97.6
23. Total underwriting gain (loss) (Line 24)	2.8	5.1	(4.2)	(1.3)	2.4
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Col. 5)	132,678,596	167,564,861	190,874,732	196,856,537	179,683,782
25. Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	189,897,616	206,081,090	199,616,971	202,328,401	198,489,690
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate	0	0	0	0	0
31. All other affiliated	0	0	0	0	0
32. Total of above Lines 26 to 31	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above	0	0	0	0	0

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

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

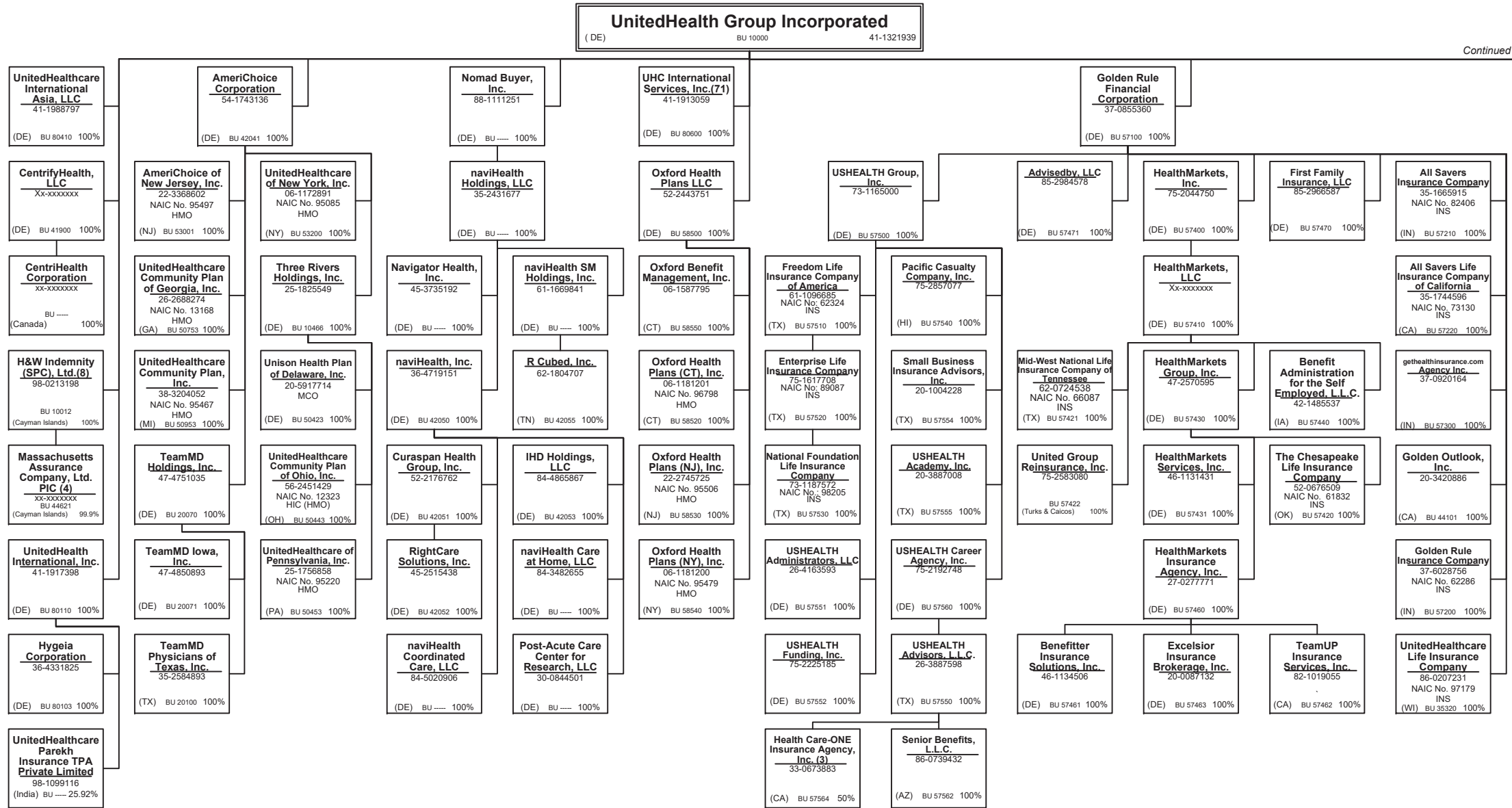
States, etc.	1 Active Status (a)	Direct Business Only									
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. Alaska	AK	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Arizona	AZ	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Arkansas	AR	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. California	CA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Colorado	CO	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. Connecticut	CT	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Delaware	DE	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. District of Columbia	DC	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Florida	FL	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Georgia	GA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Hawaii	HI	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
13. Idaho	ID	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Illinois	IL	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
15. Indiana	IN	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Iowa	IA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Kansas	KS	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Kentucky	KY	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Louisiana	LA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
20. Maine	ME	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
21. Maryland	MD	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Massachusetts	MA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. Michigan	MI	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Minnesota	MN	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
25. Mississippi	MS	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Missouri	MO	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Montana	MT	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Nebraska	NE	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
29. Nevada	NV	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
30. New Hampshire	NH	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
31. New Jersey	NJ	L	.0	2,478,413,005	33,818,263	.0	.0	.0	2,512,231,268	.0	.0
32. New Mexico	NM	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
33. New York	NY	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
34. North Carolina	NC	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. North Dakota	ND	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
36. Ohio	OH	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
37. Oklahoma	OK	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
38. Oregon	OR	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
39. Pennsylvania	PA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
40. Rhode Island	RI	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
41. South Carolina	SC	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
42. South Dakota	SD	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
43. Tennessee	TN	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
44. Texas	TX	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
45. Utah	UT	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
46. Vermont	VT	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
47. Virginia	VA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
48. Washington	WA	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
49. West Virginia	WV	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
50. Wisconsin	WI	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
51. Wyoming	WY	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
52. American Samoa	AS	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
53. Guam	GU	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
54. Puerto Rico	PR	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
55. U.S. Virgin Islands	VI	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
56. Northern Mariana Islands	MP	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
57. Canada	CAN	N	.0	.0	.0	.0	.0	.0	.0	.0	.0
58. Aggregate Other Aliens	OT	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
59. Subtotal	XXX	.0	.0	2,478,413,005	33,818,263	.0	.0	.0	2,512,231,268	.0	.0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
61. Totals (Direct Business)	XXX	.0	.0	2,478,413,005	33,818,263	.0	.0	.0	2,512,231,268	.0	.0
DETAILS OF WRITE-INS											
58001.	XXX										
58002.	XXX										
58003.	XXX										
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 R - Registered - Non-domiciled RRGs..... 0
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0
 N - None of the above - Not allowed to write business in the state..... 56

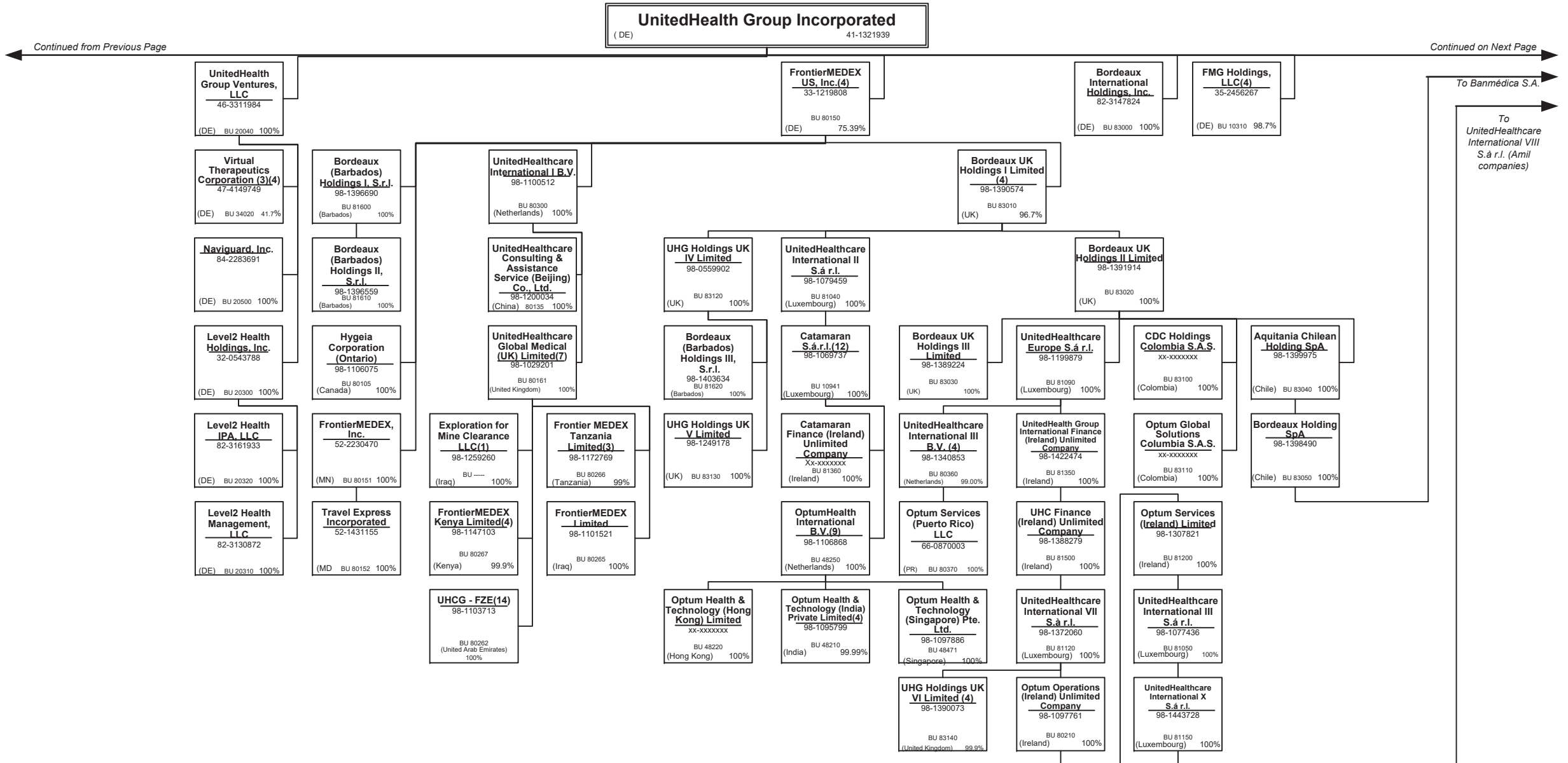
(b) Explanation of basis of allocation by states, premiums by state, etc.
 All premiums written within the state of New Jersey.

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



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



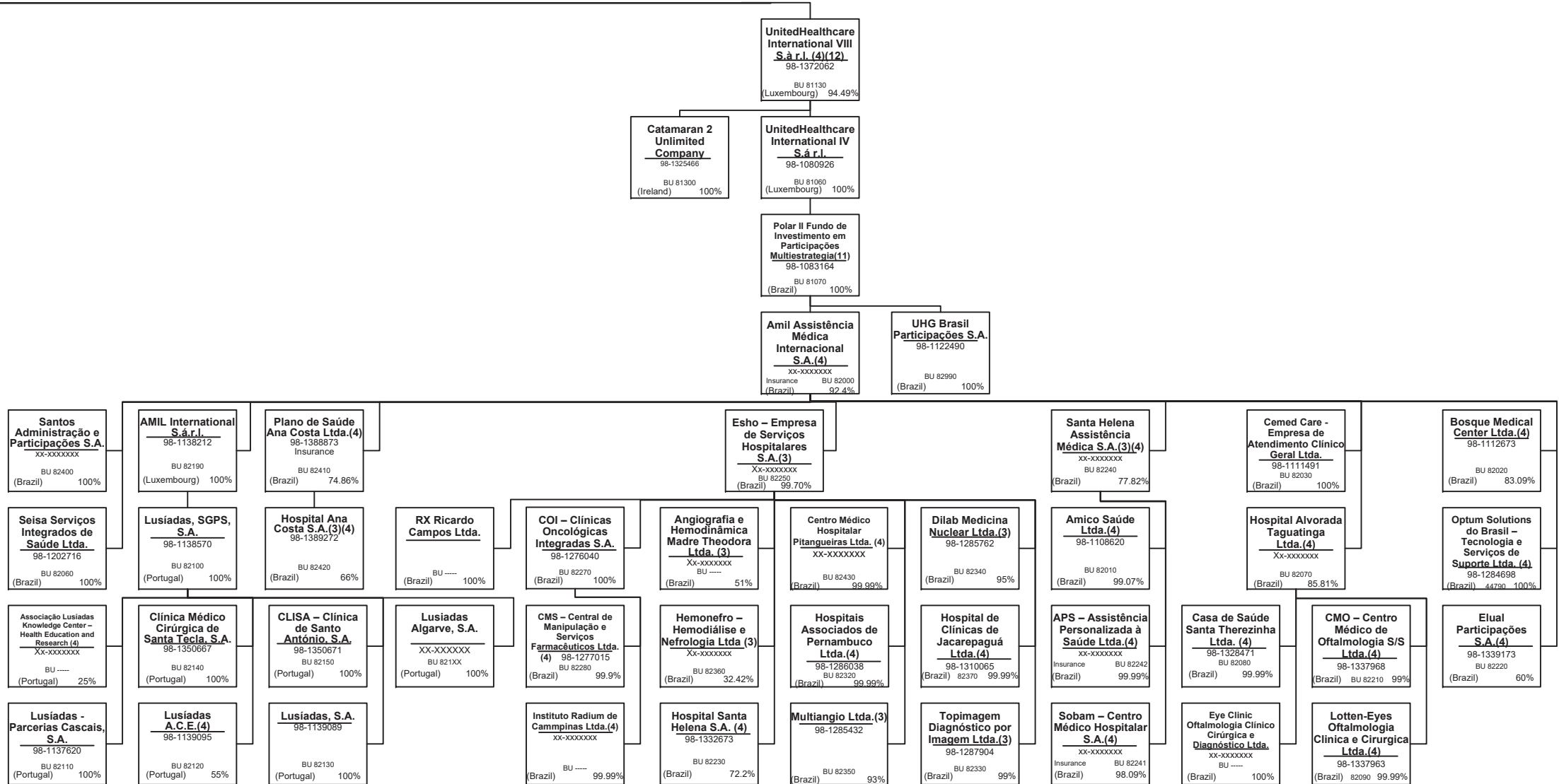
40.1

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

UnitedHealth Group Incorporated
 (DE) 41-1321939

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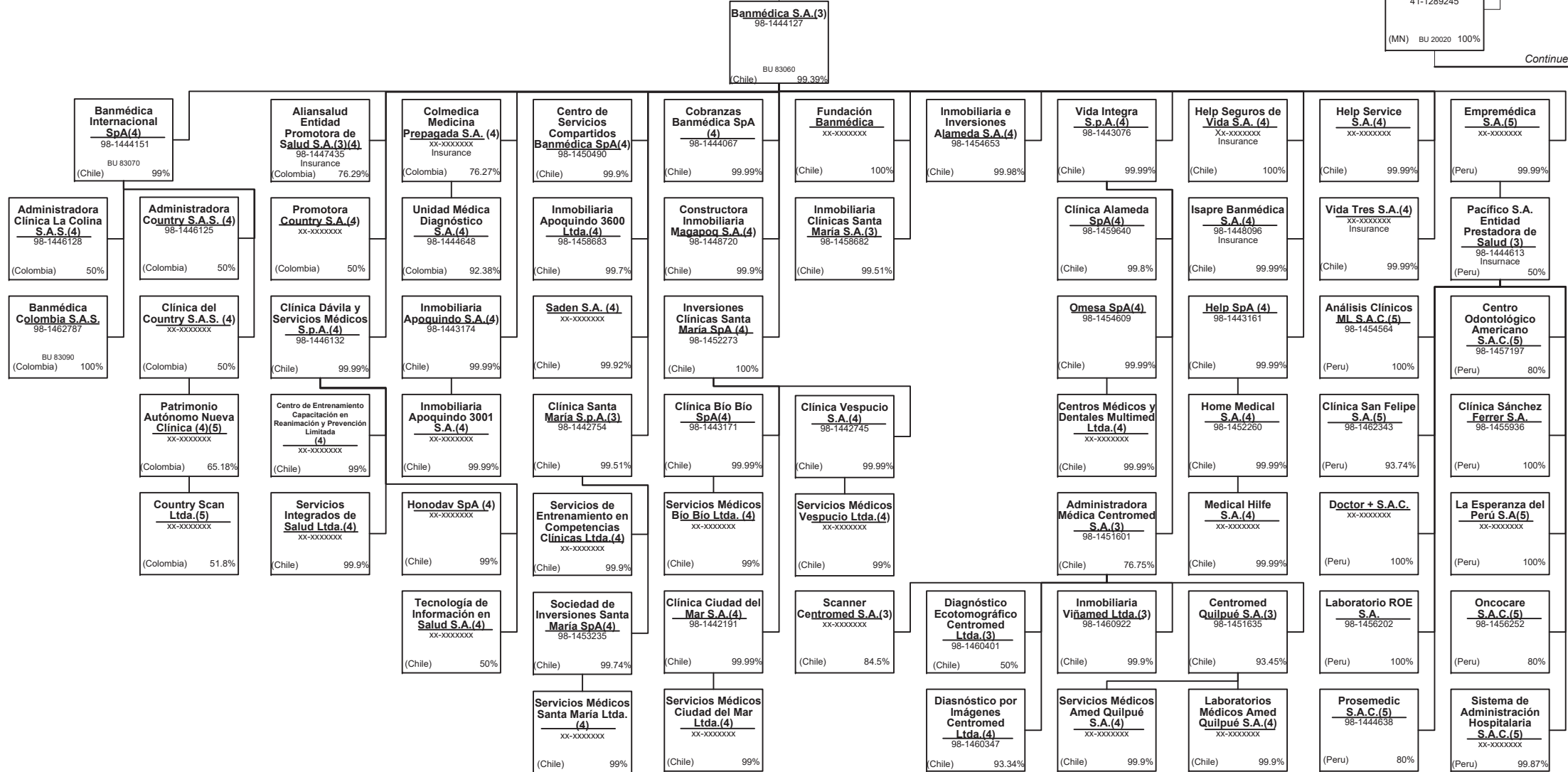
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

UnitedHealth Group Incorporated
 (DE) 41-1321939

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United HealthCare Services, Inc.
 41-1289245
 (MN) BU 20020 100%

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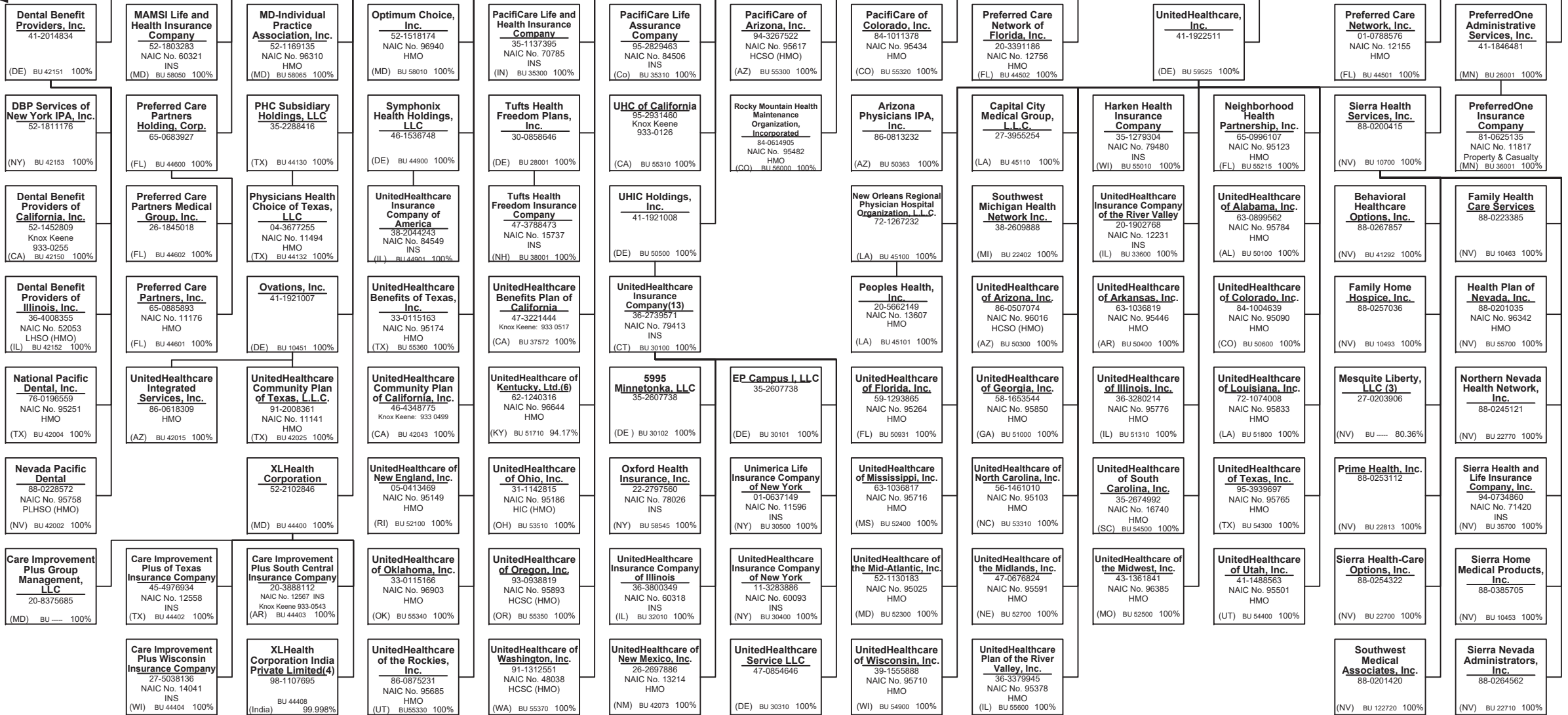


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

United HealthCare Services, Inc.
 (MN) 41-1289245 100%

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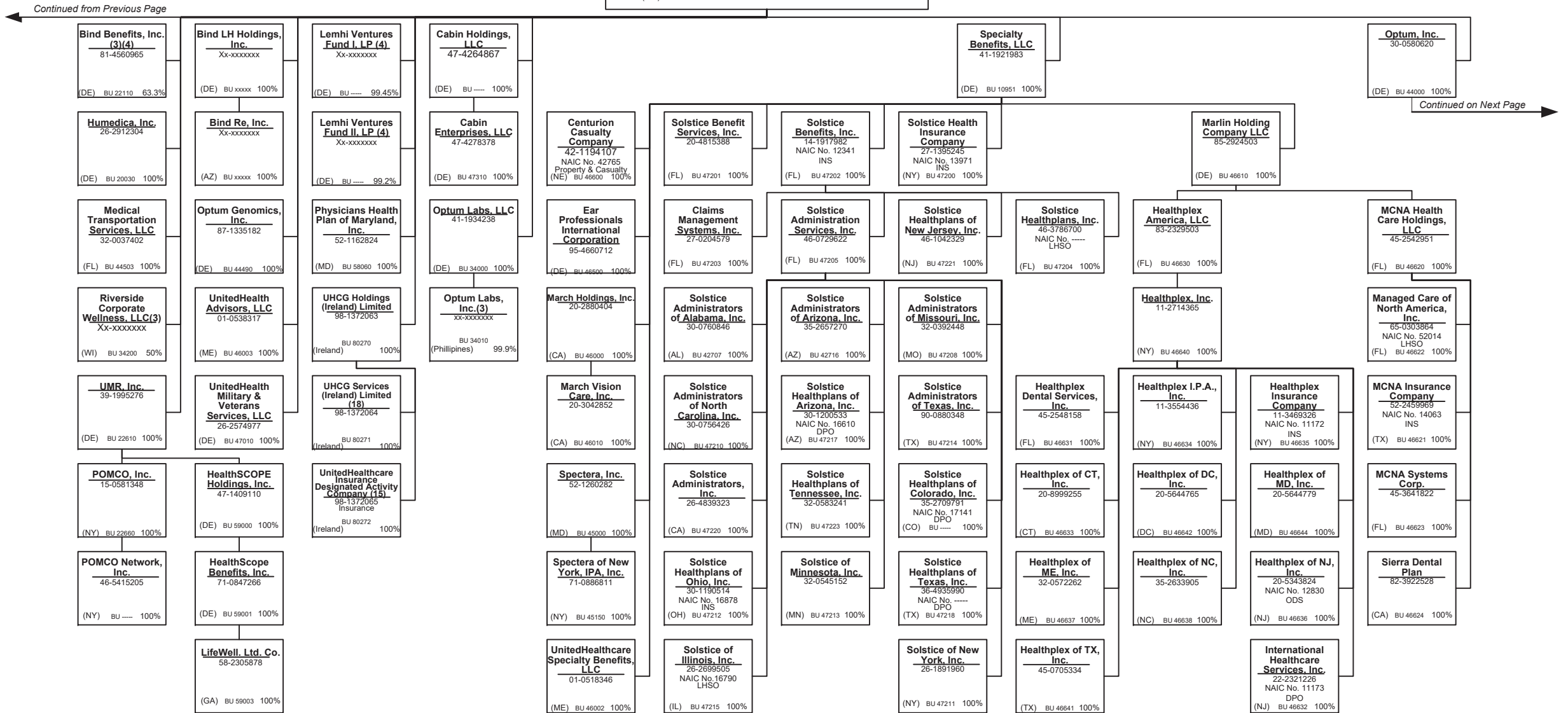
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40.4

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

United HealthCare Services, Inc.
 (MN) 41-1289245 100%

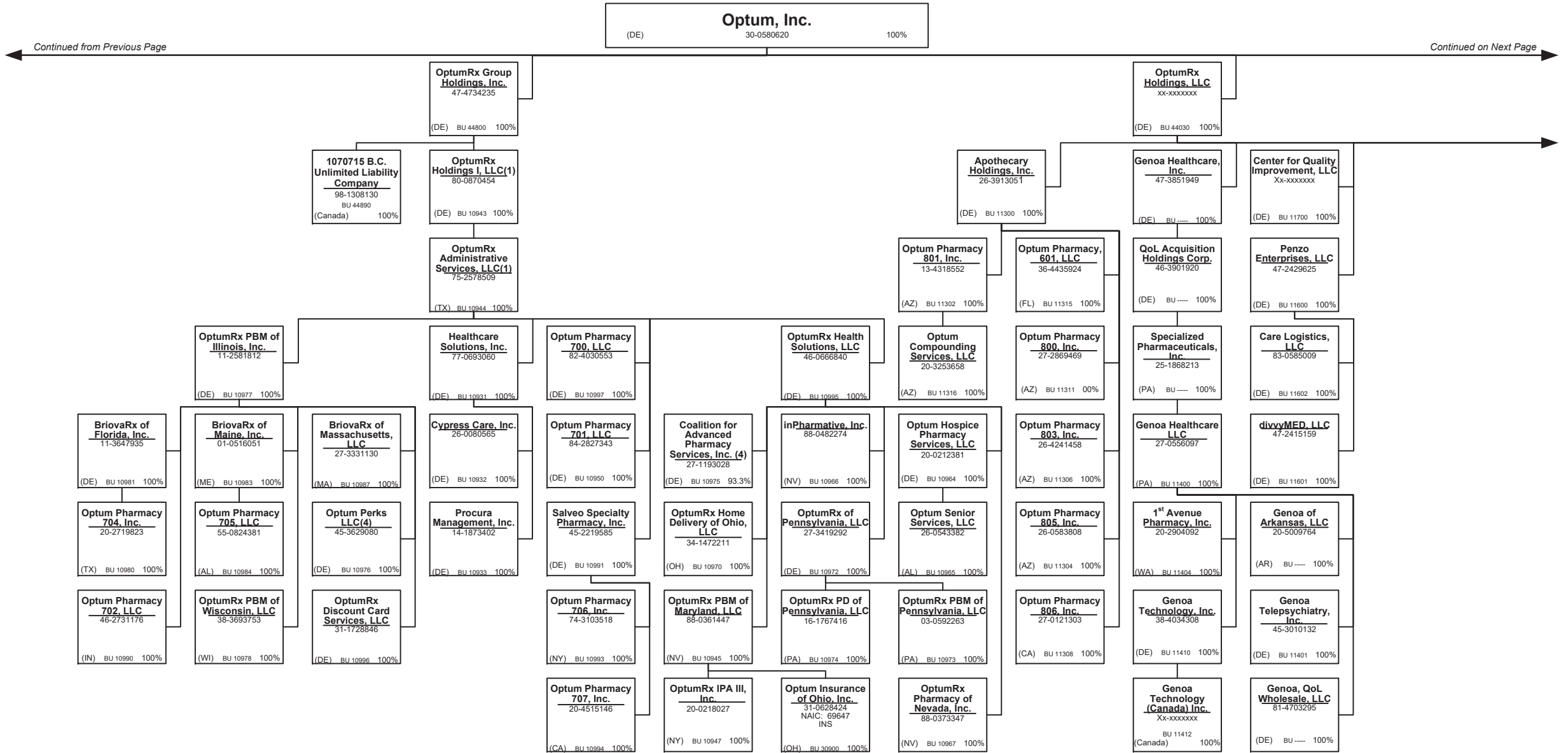


40.5

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

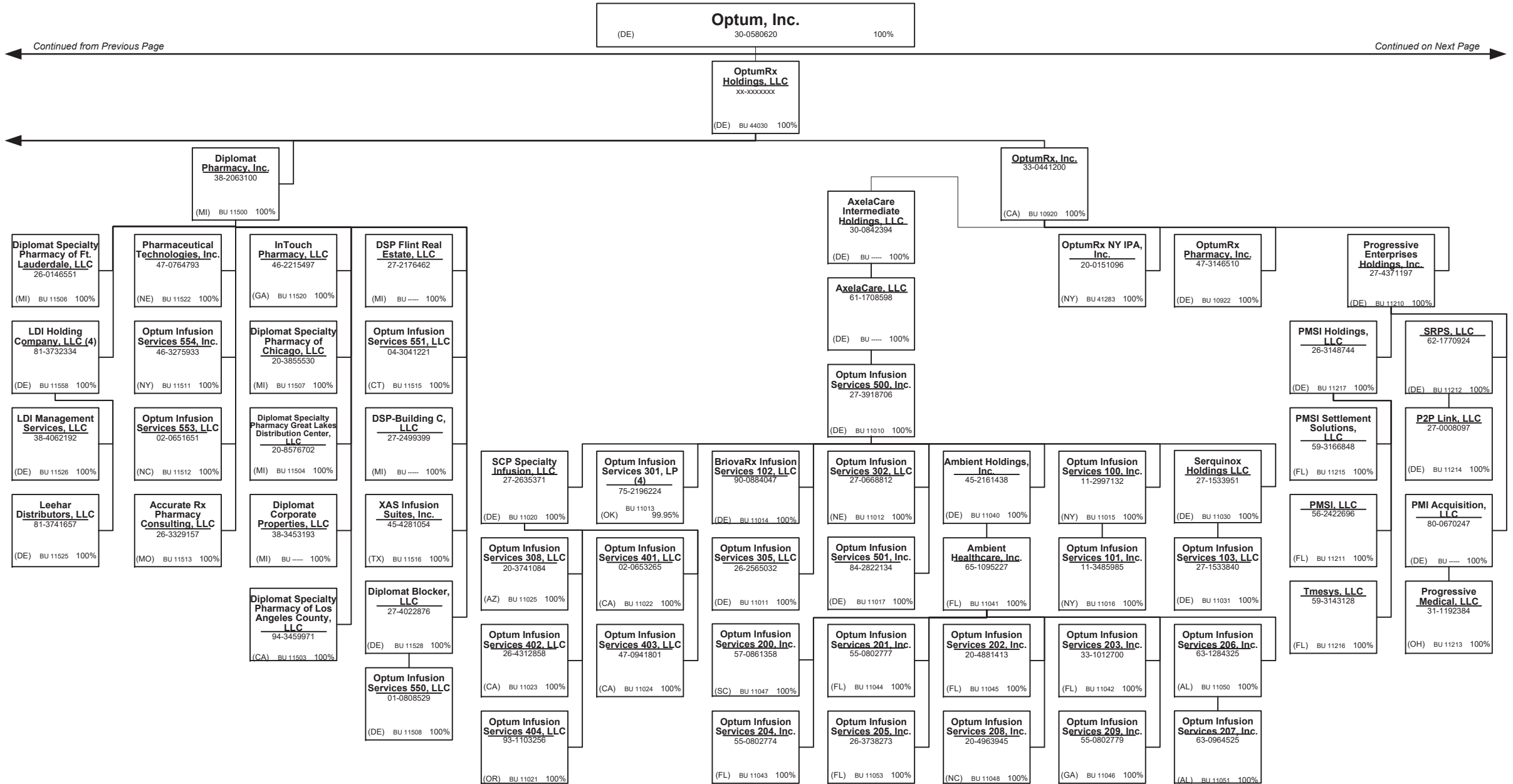


40.6

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



40.7

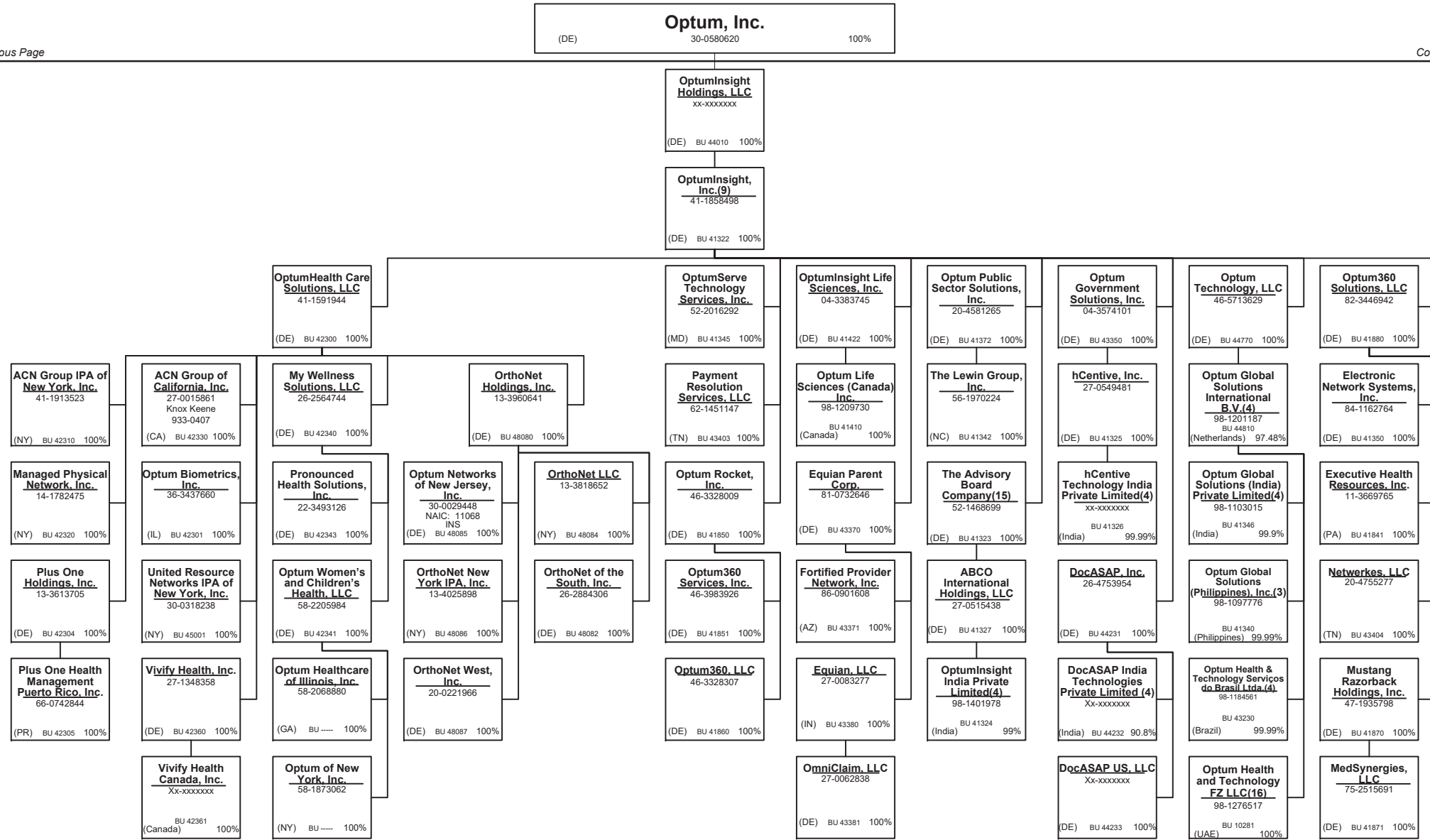
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

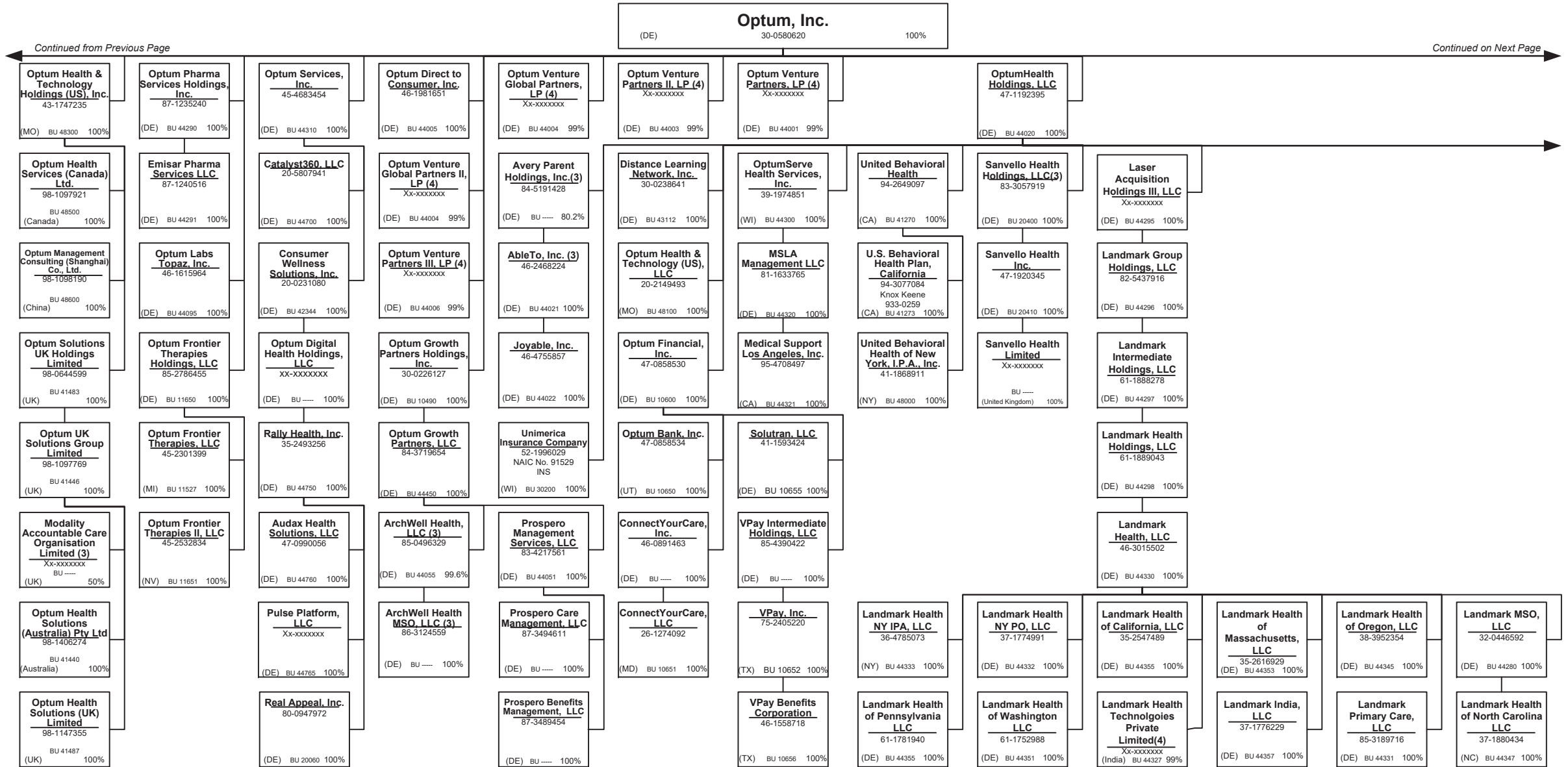
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

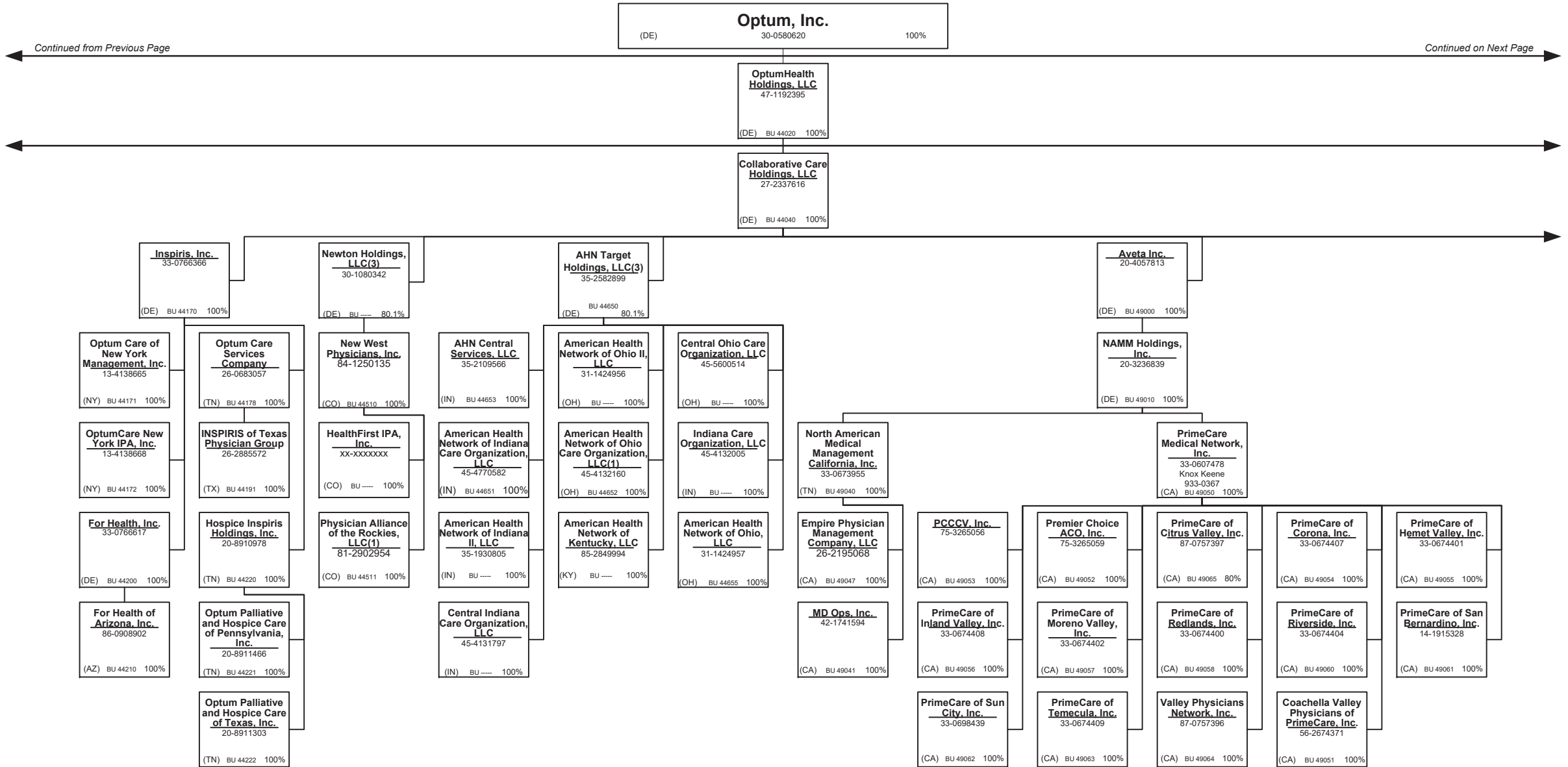


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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

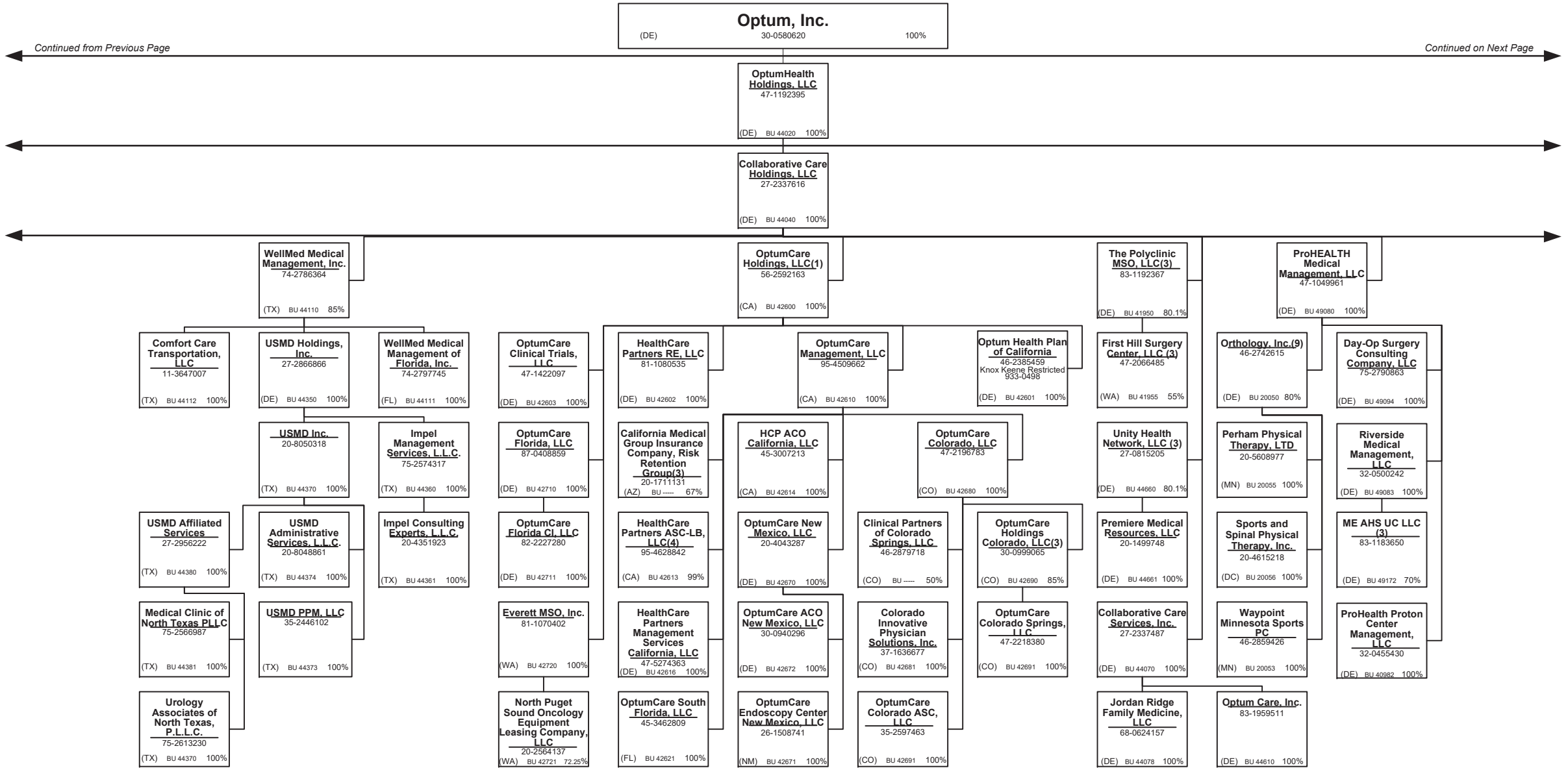


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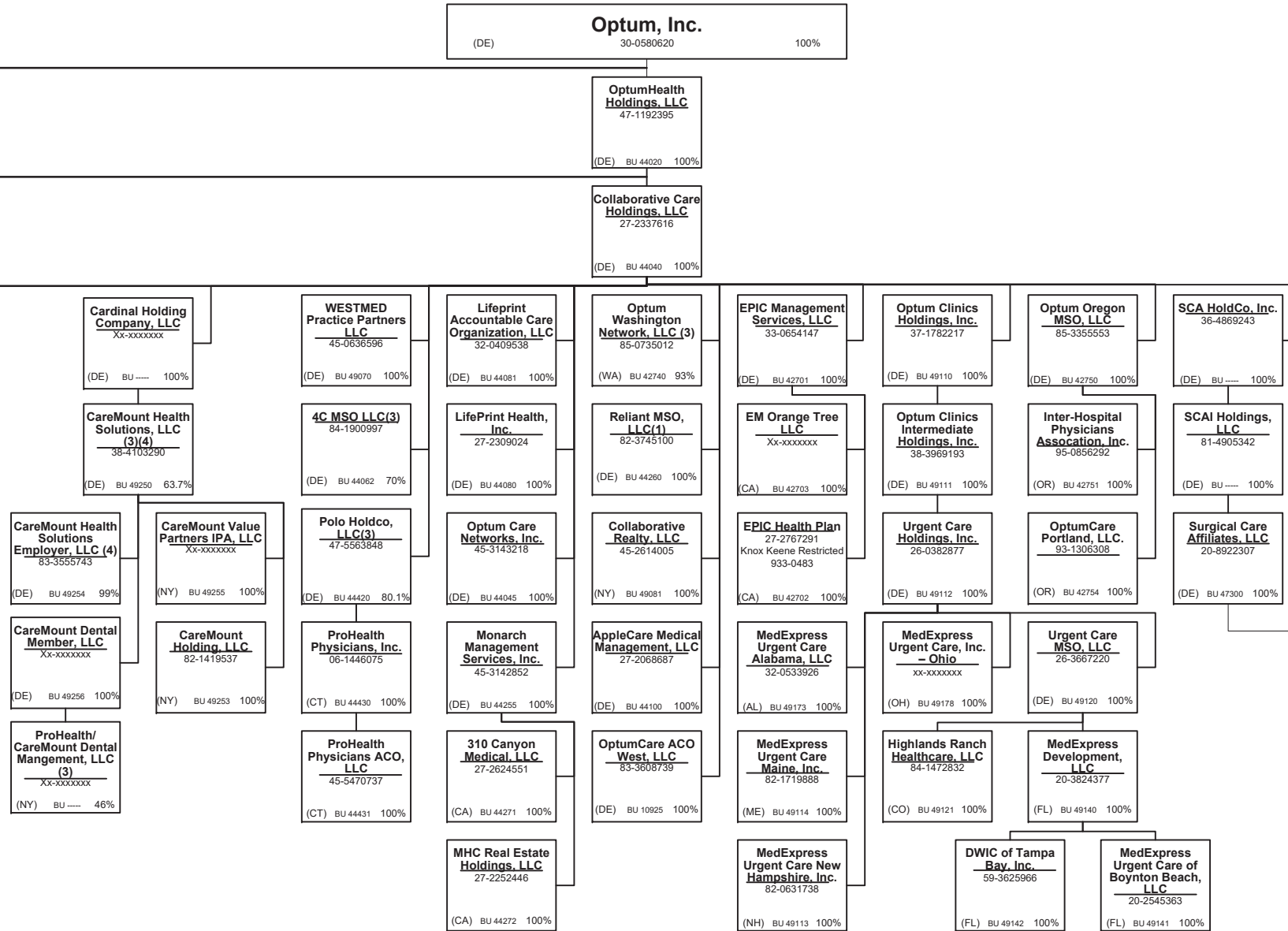
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



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

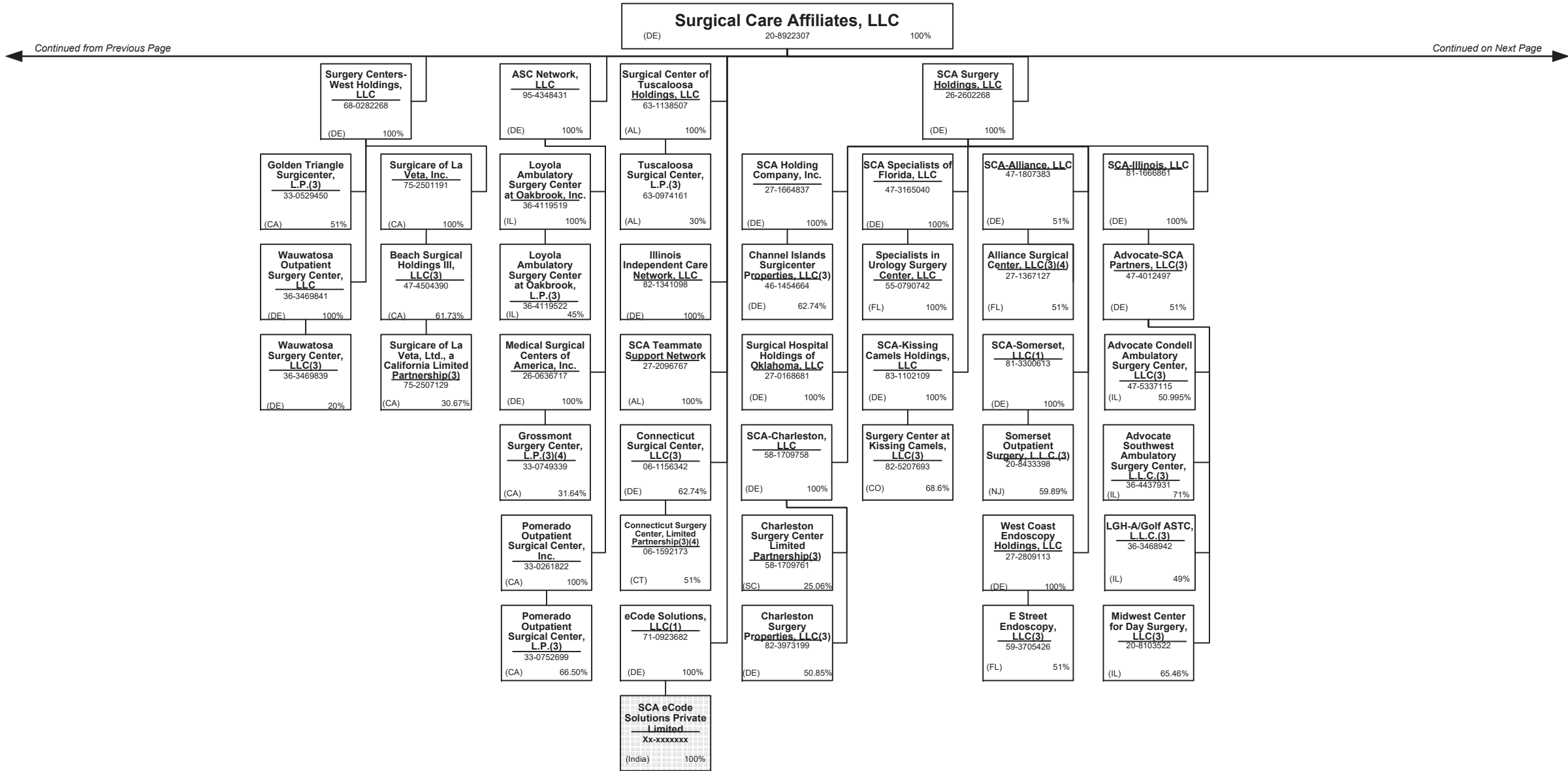


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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



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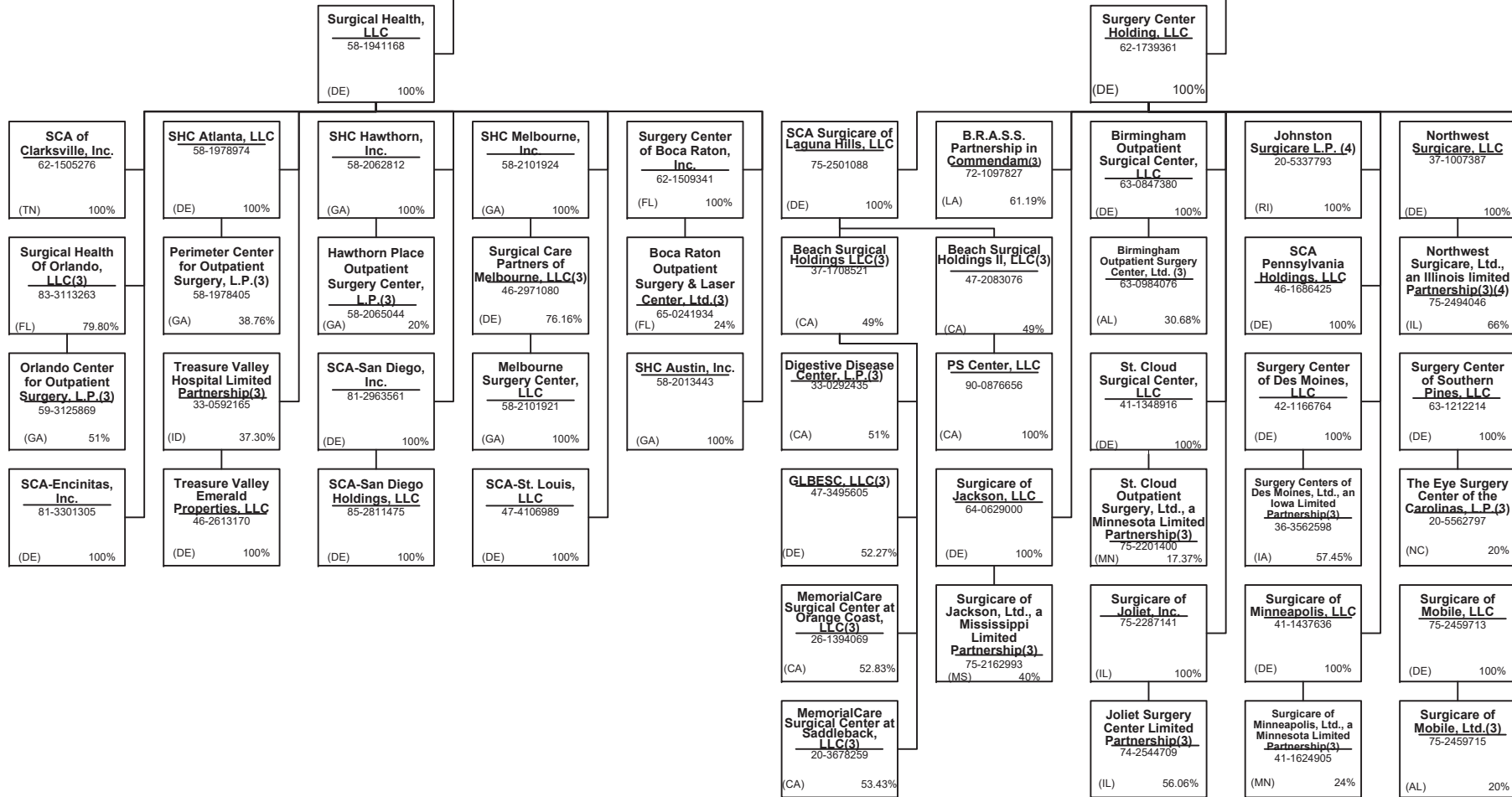
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

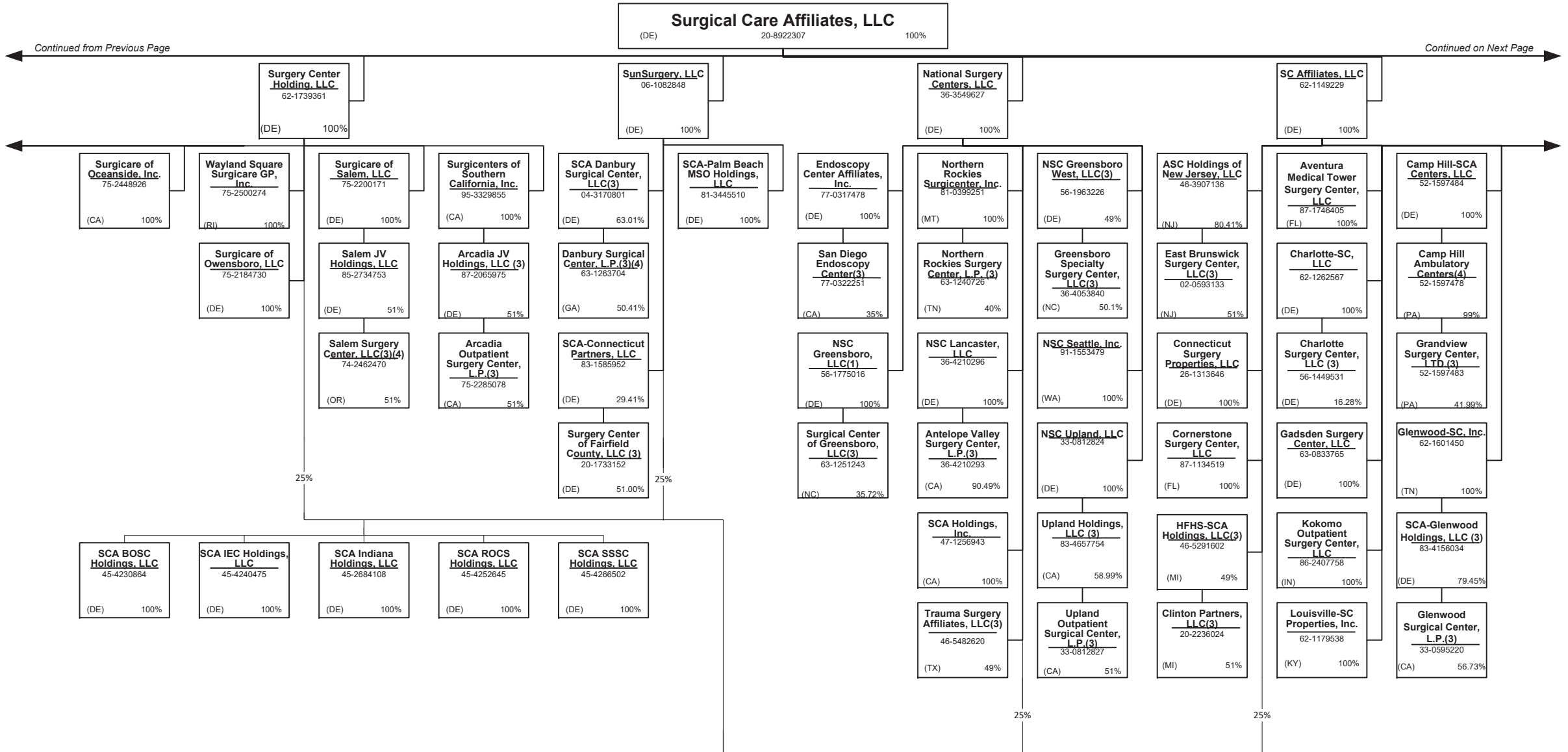
Surgical Care Affiliates, LLC
 (DE) 20-8922307 100%

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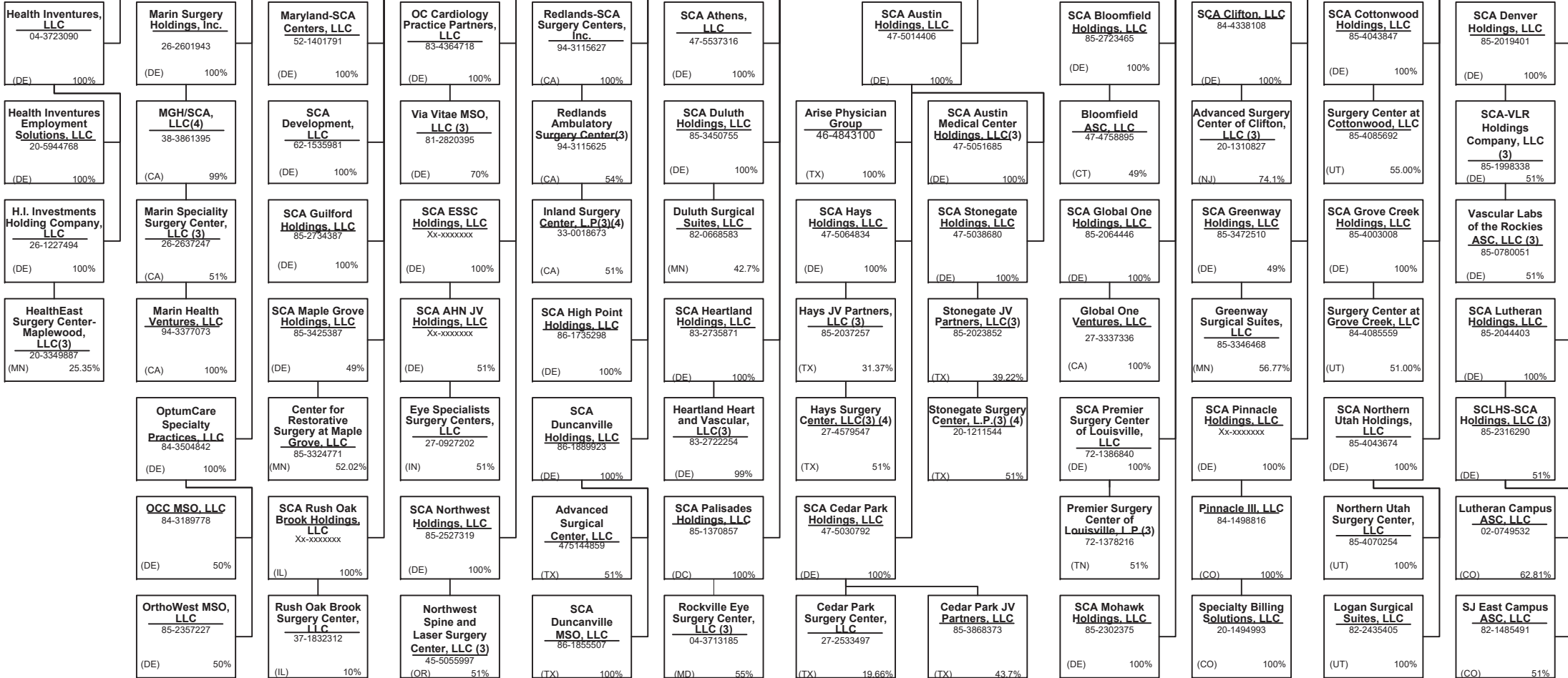
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



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

Surgical Care Affiliates, LLC
 (DE) 20-8922307 100%

SC Affiliates, LLC
 62-1149229
 (DE) 100%



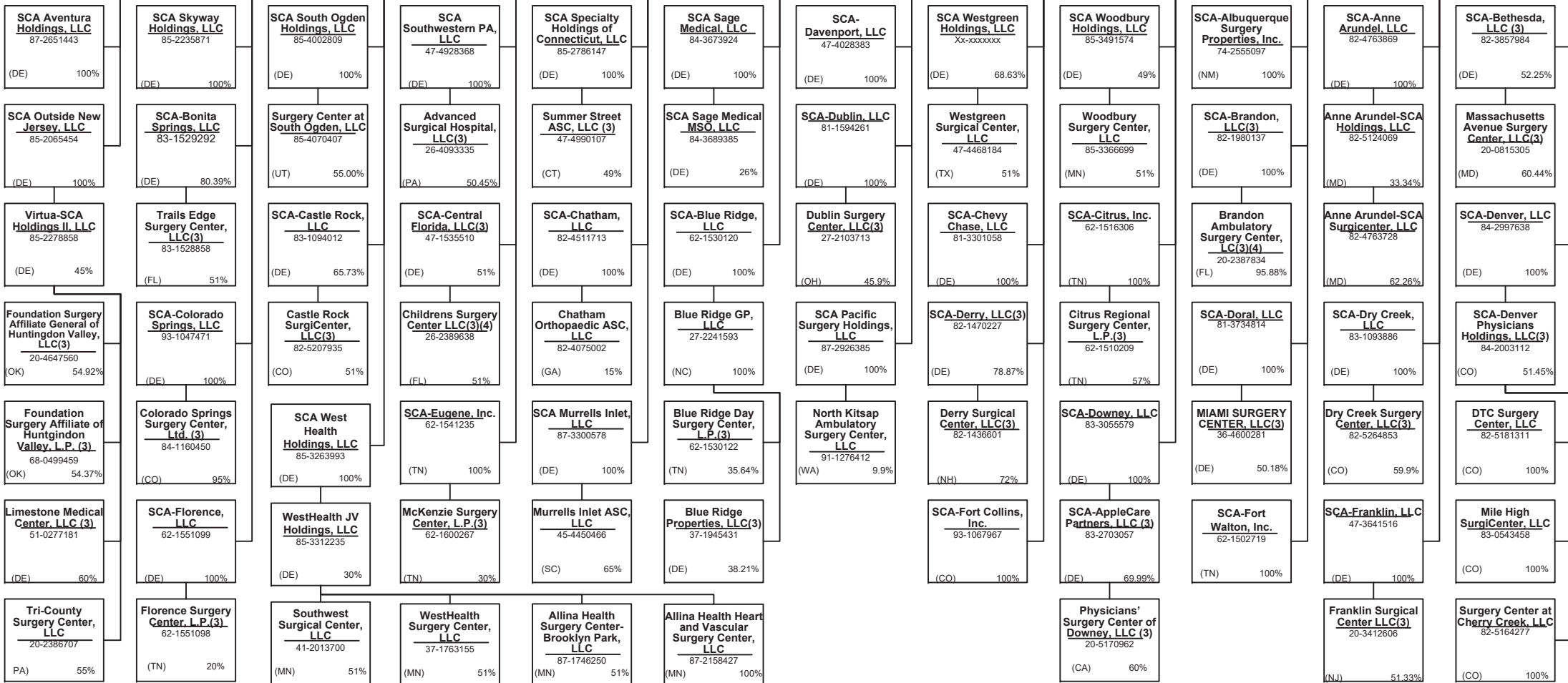
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

Surgical Care Affiliates, LLC
 (DE) 20-8922307 100%

SC Affiliates, LLC
 62-1149229
 (DE) 100%



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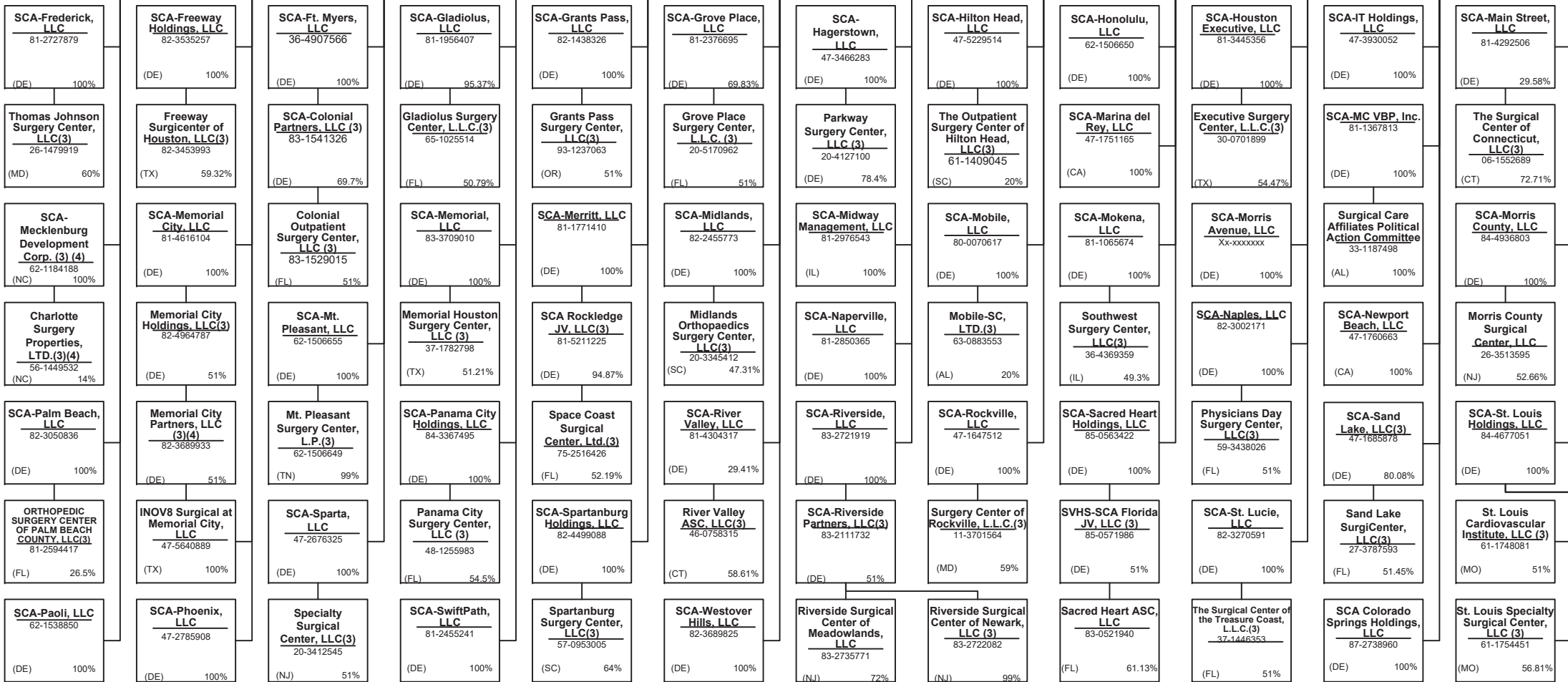
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

Surgical Care Affiliates, LLC
 (DE) 20-8922307 100%

SC Affiliates, LLC
 62-1149229
 (DE) 100%

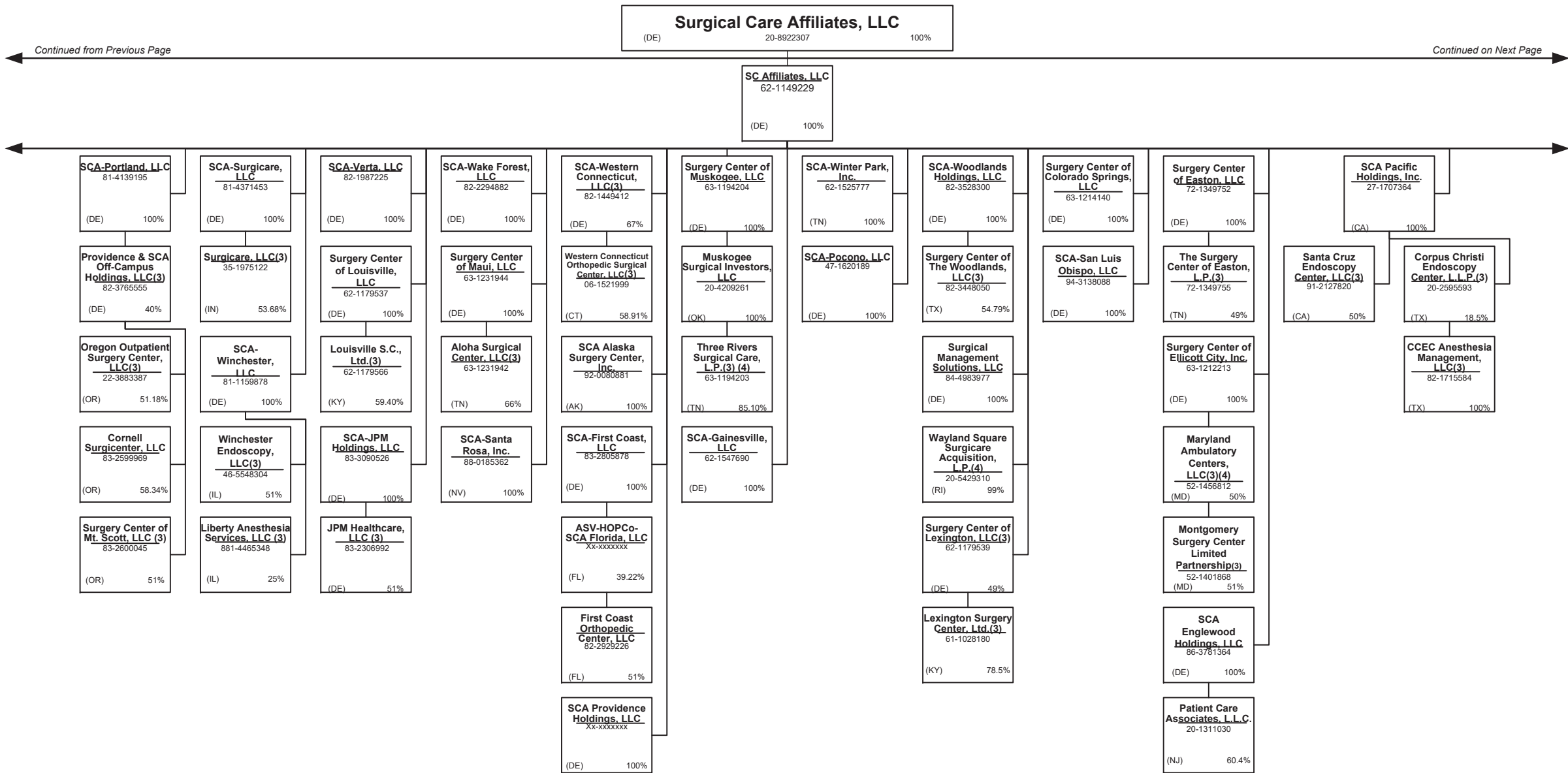
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



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

Surgical Care Affiliates, LLC
 (DE) 20-8922307 100%

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SC Affiliates, LLC
 62-1149229
 (DE) 100%

Substantively Controlled Surgical Care Affiliate Entities

SCA-New Jersey, LLC
 47-4418919
 (DE) 100%

SCA-Practice Partners Holdings, LLC
 83-4121074
 (DE) 100%

Texas Health Resources
 Non-Affiliated
 100%

Via Vitae, a Medical Group, Inc.
 Non-Affiliated
 100%

Virtua-SCA Holdings, LLC(3)
 47-3247166
 (NJ) 45%

Practice Partners in Healthcare, LLC
 76-0770414
 (DE) 100%

THR-SCA Holdings, LLC (3)(17)
 46-1096461
 (TX) 100%

Pacific Cardiovascular Associates Medical Group, Inc. (3)(17)
 35-0704734
 (CA) 100%

Bergen-Passaic Cataract Laser and Surgery Center, LLC (3)
 22-2848531
 (DE) 56.13%

Surgicare of Central Jersey, LLC (3)
 22-2529259
 (NJ) 55%

Main Line Spine Surgery Center, LLC
 20-2547795
 (PA) 55%

PPH Management Company, L.L.C.
 24-1453981
 (DE) 100%

PPH Holdings, LLC
 27-1454121
 (DE) 100%

Arlington Surgery Center, LLC(3)
 75-2055800
 (TX) 51.75%

Cleburne Surgical Center, LLC(3)
 20-3742012
 (TX) 51%

Denton Endoscopy Surgery Center, LLC
 Xx-xxxxxxx
 (TX) 100%

Denton Surgery Center, LLC(3)
 47-0926556
 (TX) 54.48%

Fort Worth Endoscopy Centers, LLC(3)
 77-0368346
 (TX) 51%

Greenville Surgery Center, LLC(3)
 74-2411643
 (TX) 63.75%

SCA-South Jersey, LLC
 22-3117714
 (DE) 100%

Harrison Endo Surgical Center, LLC (3)
 26-3234725
 (NJ) 55%

PPH-Gardendale, Inc.
 26-4489980
 (DE) 100%

ASV-HOPco-SCA Cornerstone, LLC
 87-477698
 (FL) 100%

North Dallas Surgical Center, LLC(3)
 27-2248103
 (DE) 55.38%

Ophthalmology Surgery Center of Dallas, LLC(3)
 26-1914835
 (TX) 51%

Park Hill Surgery Center, LLC(3)
 45-1484375
 (TX) 51%

South Arlington Surgical Providers, LLC
 75-2723958
 (TX) 51%

Surgical Caregivers of Fort Worth, LLC(3)
 75-1925497
 (TX) 51%

Texas Health Craig Ranch Surgery Center, LLC(3)
 38-3897811
 (TX) 51.50%

Surgical Center of South Jersey, Limited Partnership(3)
 22-2709324
 (NJ) 64.60%

PPH-Columbia, Inc.
 26-4490039
 (DE) 100%

Research Surgical Center LLC
 46-0558032
 (CO) 51%

Texas Health Flower Mound Orthopedic Surgery Center, LLC(3)
 80-0866449
 (TX) 51%

Texas Health Orthopedic Surgery Center Alliance, LLC(3)
 81-4977249
 (TX) 51%

Texas Health Surgery Center Alliance, LLC(3)
 82-2296081
 (TX) 73.58%

Texas Health Surgery Center Bedford, LLC(3)
 82-1307876
 (TX) 51.41%

Texas Health Surgery Center Chisholm Trail, LLC(3)
 85-1225852
 (TX) 56%

Texas Health Surgery Center Irving, LLC(3)
 83-1085415
 (TX) 51%

Texas Health Surgery Center Las Colinas, LLC
 83-0781259
 (TX) 100%

Texas Health Surgery Center Preston Plaza, LLC(3)
 20-3991622
 (TX) 55.20%

Texas Health Surgery Center Rockwall, LLC(3)
 47-4425996
 (TX) 51%

Texas Health Surgery Center Southwest Fort Worth, LLC
 84-3814490
 (TX) 22.45%

Texas Health Surgery Center Waxahachie, LLC
 83-1464243
 (TX) 57%

Texas Health Surgery Center Willow Park, LLC
 84-1953918
 (TX) 51%

Cross Timbers Surgery Center, LLC
 75-2862780
 (TX) 51%

Walnut Hill Surgery Center, LLC
 36-4499777
 (TX) 51%

Wilson Creek Surgical Center, LLC(3)
 27-4816583
 (TX) 51%

Mansfield Endoscopy Center, LLC
 86-1354607
 (TX) 51%

United Medical Park ASC, LLC(3)
 83-1720113
 (IA) 100%

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
4C Medical Group, PLC	AZ	45-2402948	Empire Physicians' Medical Group, Inc.	CA	33-0181426
A.G. Dikengil, Inc.	NJ	22-3149900	Everett Physicians, Inc. P.S.	WA	81-1625636
AbleTo Behavioral Health Services of Michigan, P.C.	MI	85-4328419	First Hill Surgery Center, LLC	WA	47-2066485
AbleTo Behavioral Health Services of New Jersey, P.C.	NJ	85-4306375	Greater Phoenix Collaborative Care, P.C.	AZ	27-2337725
AbleTo Behavioral Health Services, P.C.	CT	47-5519672	HealthCare Partners Affiliates Medical Group	CA	95-4526112
AbleTo Licensed Clinical Social Worker Services, P.C.	CA	85-0739865	HealthCare Partners ASC-HB, LLC	CA	26-4247365
American Health Network of Indiana, LLC	IN	35-2108729	HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760
AHN Accountable Care Organization, LLC	IN	45-4171713	HealthCare Partners Medical Group, P.C.	CA	95-4340584
AppleCare Hospitalists Medical Group, Inc.	CA	14-1890491	Homecare Dimensions of Florida, Inc.	TX	81-0884465
AppleCare Medical ACO, LLC	CA	45-2852872	Homecare Dimensions, Inc.	TX	74-2758644
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269	IN Style OPTICAL, LLC	MA	27-3296953
AppleCare Medical Group, Inc.	CA	33-0898174	Inland Faculty Medical Group, Inc.	CA	33-0618077
ArchWell Health Professional Services Holding Co.	DE	86-3278602	Inspiris Medical Services of New Jersey, P.C.	NJ	45-2563134
ArchWell Health Professional Services of Alabama, LLC	AL	86-3152173	INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674
Archwell Health Professional Services of Arizona, LLC	AZ	87-2986923	INSPIRIS of New York Medical Services, P.C.	NY	13-4168739
ArchWell Health Professional Services of Kansas, P.A.	KS	86-3241870	INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670
Archwell Health Professional Services of Nebraska, LLC	NB *	87-3065955	Landmark Connect of California, PC	CA	36-4886532
ArchWell Health Professional Services of North Carolina, P.C.	NC	86-3222071	Landmark Connect of Oregon, P.C.	OR	82-4121823
ArchWell Health Professional Services of Oklahoma, LLC	OK	86-3190019	Landmark Connect of Pennsylvania, PC	PA	82-4513634
ARTA Western California, Inc.	CA	33-0658815	Landmark Connect of Washington, P.C.	WA	82-4273042
Aspectus, Inc.	MA	04-3403101	Landmark Medical of Arkansas, P.A.	AR	85-0997438
Beaver Medical Group, P.C.	CA	33-0645967	Landmark Medical of California, PC	CA	47-4553619
Better Health Value Network, LLC	WA	47-4349079	Landmark Medical of Connecticut, PC	CT	83-2295301
Bexar Imaging Center, LLC	TX	22-3858211	Landmark Medical of Florida, P.A.	FL	85-0838149
California Spring Holdings, PC	CA	81-0881243	Landmark Medical of Idaho, PC	ID	--
CareMount Health Solutions ACO, LLC	NY	--	Landmark Medical of Kansas, P.A.	KS	82-4633545
CareMount Medical, P.C.	NY	13-3544120	Landmark Medical of Kentucky, PSC	KY	82-4881602
Centers for Family Medicine, GP	CA	33-0463510	Landmark Medical of Louisiana, a Professional Corporation	LA	82-4881732
Connect Medical, P.C.	NY	32-0551188	Landmark Medical of Massachusetts, PLLC	MA	81-5364097
David Moen, M.D. P.C.	NY	81-5101448	Landmark Medical of Michigan, P.C.	MI	86-3599871
David R. Ferrell, M.D., P.C.	NV	45-2380022	Landmark Medical of Mississippi, P.C.	MS	82-5084176
Day-OP Center Of Long Island Inc.	NY	11-2811353	Landmark Medical of Missouri, P.C.	MO	82-4857713
Durable Medical Equipment, Inc.	MA	04-3106404	Landmark Medical of New Hampshire, P.C.	NH	85-1174070

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
Landmark Medical of North Carolina, P.C.	NC	82-4256752	MedExpress Primary Care West Virginia, Inc.	WV	82-4401181
Landmark Medical of Ohio, Professional Corporation	OH	82-4864947	MedExpress Primary Care Wisconsin, S.C.	WI	81-4563448
Landmark Medical of Oregon, PC	OR	47-2926188	MedExpress Urgent Care – New Jersey, P.C.	NJ	45-5388778
Landmark Medical of Pennsylvania, PC	PA	81-1605378	MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2089623
Landmark Medical of Rhode Island, PC	RI	84-2830065	MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280
Landmark Medical of Tennessee, PC	TN	30-1288593	MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120
Landmark Medical of Texas, PA	TX	83-2296389	MedExpress Urgent Care California, P.C.	CA	82-0930142
Landmark Medical of Utah, PC	UT	84-2660339	MedExpress Urgent Care Connecticut, P.C.	CT	81-1956812
Landmark Medical of Virginia, P.C.	VA	85-0839774	MedExpress Urgent Care Idaho, P.C.	ID	82-1135336
Landmark Medical of Washington, PC	WA	47-3028655	MedExpress Urgent Care Illinois, P.C.	IL	47-4308614
Landmark Medical, P.C.	NY	47-1588943	MedExpress Urgent Care Iowa, P.C.	IA	81-5353472
Level2 Medical Services, P.A.	DE	84-5003916	MedExpress Urgent Care Kansas, P.A.	KS	47-1919283
Level2 Medical Services, P.A. New Jersey	NJ	87-2684015	MedExpress Urgent Care Minnesota P.C.	MN	81-1125396
Level2 Medical Services, P.C. Alaska	AK	87-2600511	MedExpress Urgent Care Missouri P.C.	MO	47-3132625
Level2 Medical Services, P.C. California	CA	84-5003916	MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747
Level2 Medical Services, P.C. Utah	UT	87-0989804	MedExpress Urgent Care Oregon, P.C.	OR	82-1919436
March Vision Care Group, Incorporated	CA	95-4874334	MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765
March Vision Care IPA, Inc.	NY	27-3115058	MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706
March Vision Care of Texas, Inc.	TX	45-4227915	MedExpress Urgent Care Texas, P.A.	TX	47-5147441
MAT-RX DEVELOPMENT, L.L.C.	TX	43-1967820	MedExpress Urgent Care Washington, P.C.	WA	82-2443118
Mat-Rx Fort Worth GP, L.L.C.	TX	35-2262695	MedExpress Urgent Care Wisconsin, S.C.	WI	81-4281678
ME Urgent Care Nebraska, Inc.	NB *	81-0936574	MedExpress Urgent Care, Inc. – West Virginia	WV	26-4546400
MedExpress Employed Services, Inc.	DE	81-1265129	MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667
MedExpress Primary Care Arizona, P.C.	AZ	81-4550969	MedExpress Urgent Care, P.C. – Indiana	IN	90-0929572
MedExpress Primary Care Arkansas, P.A.	AR	84-4234388	MedExpress Urgent Care, P.C. – Maryland	MD	45-3461101
MedExpress Primary Care Kansas, P.A.	KS	81-4605885	MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908
MedExpress Primary Care Maryland, P.C.	MD	82-3384324	MedExpress Urgent Care, P.C. – Michigan	MI	46-4793937
MedExpress Primary Care Massachusetts, P.C.	MA	82-1096099	MedExpress Urgent Care, P.C. – Oklahoma	OK	47-1824365
MedExpress Primary Care Minnesota P.C.	MN	81-4396738	MedExpress Urgent Care, P.C. – Pennsylvania	PA	26-3750502
MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265	MedExpress Urgent Care, P.C. – Tennessee	TN	45-4973138
MedExpress Primary Care South Carolina, P.C.	SC	83-0764858	MedExpress Urgent Care, P.C. – Virginia	VA	45-3123110
MedExpress Primary Care Texas, P.A.	TX	84-2500750	MedExpress Urgent Care, P.S.C. - Kentucky	KY	83-1565124
MedExpress Primary Care Virginia, P.C.	VA	82-3395792	MedExpress, Inc. – Delaware	DE	45-5436856

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AmeriChoice of New Jersey, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
Memorial Healthcare IPA, GP	CA	95-4688463	ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253
MH Physician Three Holdco, a Medical Corporation	CA	27-4691544	ProHEALTH Care Associates, L.L.P.	NY	11-3355604
MHCH, Inc.	CA	80-0507474	ProHEALTH Medical NY, P.C.	NY	47-1388406
MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508	ProHealth Physicians, P.C.	CT	06-1469068
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
Moen, M.D., P.C.	CA	85-3287029	Prospero Health Partners Florida, Inc.	FL	85-0775386
Monarch Health Plan, Inc.	CA	22-3935634	Prospero Health Partners New York, P.C.	NY	82-2400620
Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660	Prospero Health Partners North Carolina, P.C.	NC	84-4569314
Monika Roots, M.D., P.C.	CA	84-4887072	Prospero Health Partners, P.C.	MN	84-3234753
Mosaic Management Services, Inc.	CA	20-5892451	Prospero Medical Services New Jersey, P.C.	NJ	84-3844362
NAMM Medical Group Holdings, Inc.	CA	56-2627070	Prospero Medical Services, P.A.	FL	87-2406404
NAMM MGH, Inc.	CA	61-1627269	Psychiatry Services of New York, P.C.	NY	85-0921665
naviHealth Coordinated Care SC, P.C.	MI	85-0975337	Redlands Family Practice Medical Group, Inc.	CA	56-2627067
naviHealth Michigan HBPC, P.C.	MI	84-3469040	Reliant Medical Group The Endoscopy Center, LLC	MA	20-5251393
New York Licensed Clinical Social Work, P.C.	NY	86-3891057	Reliant Medical Group, Inc.	MA	04-2472266
Nifty After Fifty/Monarch, LLC	CA	26-2995765	Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097
Northwest Medical Group Alliance, LLC	WA	91-1699944	Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379
NPN IPA Washington, PLLC	WA	61-1855159	Riverside Pediatric Group, P.C.	NJ	22-3624559
OHR Physician Group, P.C.	OR	93-0979031	Robert B. McBeath, M.D. II, P.C.	NV	86-0857176
Optum Clinic, P.A.	TX	75-2778455	Robert B. McBeath, M.D. III, P.C.	NV	46-2662506
Optum Medical Services of California, P.C.	CA	30-0826311	Robert B. McBeath, M.D., Professional Corporation	NV	86-0310956
Optum Medical Services of Colorado, P.C.	CO	45-5424191	San Bernardino Medical Group, Inc.	CA	--
Optum Medical Services, P.C.	NC	45-3866363	Sanvello Behavioral Health Services of Michigan, P.C.	DE	85-1941832
Oregon Healthcare Resources, LLC	OR	27-3674492	Sanvello Behavioral Health Services of New Jersey, P.C.	NJ	85-0666386
Physician Partners Medical Group, Inc.	CA	30-0516435	Sanvello Behavioral Health Services of North Carolina, P.C.	NC	85-1959641
Physicians Care Network, L.L.C.	WA	91-1822767	Sanvello Behavioral Health Services of Texas, P.A.	TX	84-3152209
Polyclinic Holdings, P.C.	WA	83-3042027	Sanvello Behavioral Health Services, P.A.	DE	84-1754732
Polyclinic Management Services Company, LLC	WA	46-0508606	Southern California Medical Practice Concepts, LLC	CA	30-0743767
Primary Care Associated Medical Group, Inc.	CA	33-0527335	Surgical Eye Experts, LLC	MA	65-1321064
Prime Community Care, Inc.	CA	30-0516440	Talbert Medical Group, P.C.	CA	93-1172085
ProHEALTH Accountable Care Medical Group, PLLC	NY	45-4469117	TeamMD Physicians, P.C.	IA	42-1446216
ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394	The Everett Clinic, PLLC	WA	91-0214500

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID
The Polyclinic, PLLC	WA	91-0369070
USMD Diagnostic Services, LLC	TX	27-2803133
USMD Hospital at Arlington, L.P.	TX	73-1662763
USMD Hospital at Fort Worth, L.P.	TX	20-3571243
USMD of Arlington GP, L.L.C.	TX	73-1662757
Vitucci, LCSW, P.C.	IL	85-1453387
Waypoint Minnesota PC	MN	46-2854394
WellMed Florida Medicare ACO, LLC	TX	84-2233329
WellMed Greater Texas Medicare ACO, LLC	TX	84-2178104
WellMed Medical Group, P.A.	TX	74-2574229
WellMed Network of Florida, Inc.	TX	35-2314192
WellMed Networks - DFW, Inc.	TX	41-2250215
WellMed Networks, Inc.	TX	74-2889447
WellMed of Las Cruces, Inc.	TX	92-0183013
WellMed Tampa/Orlando Medicare ACO, LLC	TX	84-2193803
WellMed Texas Medicare ACO, LLC	TX	84-2219968
WND Medical, PLLC	TX	45-2158334
XLHome Michigan, P.C.	MI	46-3537245
XLHome Northeast, P.C.	NJ	45-5530241
XLHome Oklahoma, Inc.	OK	46-2931689
XLHome, P.C.	MD	27-3543997

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

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) N/A
- (13) Entity has a representative office in Beijing, China.
- (14) Registered in the Dubai Silicon Oasis free zone.
- (15) Registered branch in 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.
- (18) Entity has a branch office in the United Kingdom.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
2504. Managed Care & Network Access	52,155	12,091	41,272	0	105,518
2505. Miscellaneous Losses	15,973	4,412	15,058	0	35,443
2506. Interest	9,957	2,750	262,978	0	275,685
2597. Summary of remaining write-ins for Line 25 from overflow page	78,085	19,253	319,308	0	416,646