



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE
Wellpoint New Jersey, Inc.

NAIC Group Code	0671 (Current)	0671 (Prior)	NAIC Company Code	95373	Employer's ID Number	22-3375292
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	04/03/1995			Commenced Business	02/01/1996	
Statutory Home Office	111 Wood Avenue South, Suite 220 (Street and Number)			Iselin, NJ, US 08830 (City or Town, State, Country and Zip Code)		
Main Administrative Office	5800 Northampton Blvd (Street and Number)			800-331-1476 (Area Code) (Telephone Number)		
	Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)					
Mail Address	5800 Northampton Blvd (Street and Number or P.O. Box)			Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	5800 Northampton Blvd (Street and Number)			800-331-1476 (Area Code) (Telephone Number)		
	Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)					
Internet Website Address	www.elevancehealth.com					
Statutory Statement Contact	Aaron Michael Koenig (Name)			317-431-0800 (Area Code) (Telephone Number)		
	Aaron.koenig@elevancehealth.com (E-mail Address)			317-488-6169 (FAX Number)		

OFFICERS

Chairperson,President & CEO	Patrick Kevin Fox	Treasurer	Vincent Edward Scher
Secretary	Kathleen Susan Kiefer	Vice President	Jennifer Ann Dewane

OTHER

Eric (Rick) Kenneth Noble, Assistant Treasurer

DIRECTORS OR TRUSTEES

Patrick Kevin Fox	Ronald William Penczek	Jennifer Ann Dewane
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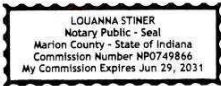
State of Indiana
County of Marion SS

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

Signed by: <i>Patrick Kevin Fox</i> 5266B45012CD4A8... Patrick Kevin Fox Chairperson, President & CEO	Signed by: <i>Vincent E. Scher</i> A85A33722D4143E... Vincent Edward Scher Treasurer	Signed by: <i>Kathleen Kiefer</i> D85175EE05784B1... Kathleen Susan Kiefer Secretary
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Subscribed and sworn to before me this
5th day of February 2026

Louanna Stiner
Executive Admin Assistant
06/29/31



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

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D)	474,861,614		474,861,614	539,926,603
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$			0	0
encumbrances)				
4.2 Properties held for the production of income (less				
\$ encumbrances)			0	0
4.3 Properties held for sale (less \$				
encumbrances)			0	0
5. Cash (\$ 44,345,685 , Schedule E - Part 1), cash equivalents				
(\$ 64,742,376 , Schedule E - Part 2) and short-term				
investments (\$, Schedule DA)	109,088,061		109,088,061	(13,201,903)
6. Contract loans, (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)	15,650,571		15,650,571	12,212,973
11. Aggregate write-ins for invested assets	0	0		0
12. Subtotals, cash and invested assets (Lines 1 to 11)	599,600,246	0	599,600,246	538,937,673
13. Title plants less \$ charged off (for Title insurers				
only)			0	0
14. Investment income due and accrued	6,052,685		6,052,685	5,970,134
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	15,560,000		15,560,000	24,903,905
15.2 Deferred premiums, agents' balances and installments booked but				
deferred and not yet due (including \$				
earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$ 1,525,733) and				
contracts subject to redetermination (\$ 15,964,877)	17,490,610		17,490,610	15,178,072
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	148,654		148,654	6,559,160
18.1 Current federal and foreign income tax recoverable and interest thereon			0	7,545,717
18.2 Net deferred tax asset	4,781,074	679,406	4,101,668	7,299,460
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets				
(\$)	3,768,828	3,768,828	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$ 4,433,806) and other amounts receivable	20,516,084	16,082,278	4,433,806	5,437,423
25. Aggregate write-ins for other-than-invested assets	790,753	790,753	0	8,680,575
26. Total assets excluding Separate Accounts, Segregated Accounts and				
Protected Cell Accounts (Lines 12 to 25)	668,708,934	21,321,265	647,387,669	620,512,120
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts			0	0
28. Total (Lines 26 and 27)	668,708,934	21,321,265	647,387,669	620,512,120
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. State income tax recoverable			0	8,680,575
2502. Prepaid Expenses	790,753	790,753	0	0
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	790,753	790,753	0	8,680,575

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$0 reinsurance ceded)	166,426,843		166,426,843	212,079,279
2. Accrued medical incentive pool and bonus amounts	16,037,823		16,037,823	14,475,724
3. Unpaid claims adjustment expenses.....	4,748,763		4,748,763	4,767,849
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	16,174,163		16,174,163	35,104,325
5. Aggregate life policy reserves.....			0	0
6. Property/casualty unearned premium reserves.....			0	0
7. Aggregate health claim reserves.....			0	0
8. Premiums received in advance.....			0	1,550
9. General expenses due or accrued.....	106,177,877		106,177,877	64,305,950
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses))	6,830,964		6,830,964	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable.....			0	0
12. Amounts withheld or retained for the account of others.....	332,254		332,254	466,256
13. Remittances and items not allocated.....	1,546,138		1,546,138	1,576,623
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current).....			0	0
15. Amounts due to parent, subsidiaries and affiliates.....	10,100,860		10,100,860	15,268,948
16. Derivatives.....			0	0
17. Payable for securities.....			0	1,089,580
18. Payable for securities lending	15,650,571		15,650,571	12,212,973
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans.....	313,536		313,536	363,606
23. Aggregate write-ins for other liabilities (including \$ 1,895,184 current).....	4,898,058	0	4,898,058	5,164,349
24. Total liabilities (Lines 1 to 23).....	349,237,850	0	349,237,850	366,877,010
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	10	10
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	40,322,020	40,322,020
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	257,827,789	213,313,080
32. Less treasury stock, at cost: 32.1 shares common (value included in Line 26 \$).....	XXX	XXX		0
32.2 shares preferred (value included in Line 27 \$).....	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	298,149,819	253,635,110
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	647,387,669	620,512,121
DETAILS OF WRITE-INS				
2301. Escheat liabilities	3,899,707		3,899,707	4,078,809
2302. Other premium liabilities	520,708		520,708	881,529
2303. Other liabilities	477,643		477,643	204,011
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	4,898,058	0	4,898,058	5,164,349
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	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 through 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.....	2,315,459	2,598,055
2. Net premium income (including \$ non-health premium income)	XXX.....	2,480,497,653	2,355,253,833
3. Change in unearned premium reserves and reserve for rate credits	XXX.....	9,078,168	(19,216,384)
4. Fee-for-service (net of \$ medical expenses)	XXX.....	0	0
5. Risk revenue	XXX.....	0	0
6. Aggregate write-ins for other health care related revenues	XXX.....	0	0
7. Aggregate write-ins for other non-health revenues	XXX.....	0	0
8. Total revenues (Lines 2 to 7)	XXX.....	2,489,575,821	2,336,037,449
Hospital and Medical:			
9. Hospital/medical benefits		1,244,657,106	1,313,849,890
10. Other professional services		296,493,214	268,189,367
11. Outside referrals		0	0
12. Emergency room and out-of-area		373,439,059	335,005,669
13. Prescription drugs		263,760,782	219,293,247
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		17,060,207	10,699,379
16. Subtotal (Lines 9 to 15)	0	2,195,410,368	2,147,037,552
Less:			
17. Net reinsurance recoveries		0	0
18. Total hospital and medical (Lines 16 minus 17)	0	2,195,410,368	2,147,037,552
19. Non-health claims (net)			0
20. Claims adjustment expenses, including \$ 64,108,802 cost containment expenses		83,611,285	87,958,545
21. General administrative expenses		183,031,727	142,395,874
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		(10,779,697)	10,779,697
23. Total underwriting deductions (Lines 18 through 22).....	0	2,451,273,683	2,388,171,668
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX.....	38,302,138	(52,134,219)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		21,790,150	22,277,533
26. Net realized capital gains (losses) less capital gains tax of \$ (457,850)		(5,885,255)	(15,925,201)
27. Net investment gains (losses) (Lines 25 plus 26)	0	15,904,895	6,352,332
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ (75,974))]		(75,974)	(203,762)
29. Aggregate write-ins for other income or expenses	0	1,031,816	1,353,949
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.....	55,162,875	(44,631,701)
31. Federal and foreign income taxes incurred	XXX.....	7,669,101	(6,158,510)
32. Net income (loss) (Lines 30 minus 31)	XXX	47,493,774	(38,473,190)
DETAILS OF WRITE-INS			
0601.	XXX.....		
0602.	XXX.....		
0603.	XXX.....		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX.....	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	XXX.....		
0702.	XXX.....		
0703.	XXX.....		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX.....	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
2901. Miscellaneous income (expense)		1,031,816	1,353,949
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	1,031,816	1,353,949

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	253,635,110	291,373,255
34. Net income or (loss) from Line 32	47,493,774	(38,473,190)
35. Change in valuation basis of aggregate policy and claim reserves		0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ (199,558)	(750,719)	(409,343)
37. Change in net unrealized foreign exchange capital gain or (loss)		0
38. Change in net deferred income tax	(3,230,067)	1,374,496
39. Change in nonadmitted assets	1,001,721	(230,108)
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
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (stock dividend).....	0	0
44.3 Transferred to surplus.....		0
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (stock dividend)		0
45.3 Transferred from capital		0
46. Dividends to stockholders		0
47. Aggregate write-ins for gains or (losses) in surplus	0	0
48. Net change in capital and surplus (Lines 34 to 47)	44,514,708	(37,738,145)
49. Capital and surplus end of reporting period (Line 33 plus 48)	298,149,819	253,635,110
DETAILS OF WRITE-INS		
4701.		
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	2,488,455,174	2,356,723,991
2. Net investment income	23,466,765	25,993,069
3. Miscellaneous income	0	
4. Total (Lines 1 through 3)	2,511,921,938	2,382,717,060
5. Benefit and loss related payments	2,234,059,276	2,176,797,936
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	217,256,624	272,871,072
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ (457,850) tax on capital gains (losses)	(7,165,431)	(1,461,492)
10. Total (Lines 5 through 9)	2,444,150,469	2,448,207,516
11. Net cash from operations (Line 4 minus Line 10)	67,771,470	(65,490,455)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	133,889,913	340,758,973
12.2 Stocks	0	
12.3 Mortgage loans	0	
12.4 Real estate	0	
12.5 Other invested assets	0	
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	1,051	142
12.7 Miscellaneous proceeds	0	1,717,034
12.8 Total investment proceeds (Lines 12.1 to 12.7)	133,890,964	342,476,149
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds	77,905,663	235,218,461
13.2 Stocks	0	
13.3 Mortgage loans	0	
13.4 Real estate	0	
13.5 Other invested assets	0	
13.6 Miscellaneous applications	4,527,178	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	82,432,841	235,218,461
14. Net increase/(decrease) in contract loans and premium notes	0	
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	51,458,123	107,257,688
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	
16.2 Capital and paid in surplus, less treasury stock	0	
16.3 Borrowed funds	0	
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	3,060,371	(53,091,372)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	3,060,371	(53,091,372)
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)	122,289,963	(11,324,139)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	(13,201,903)	(1,877,763)
19.2 End of year (Line 18 plus Line 19.1)	109,088,061	(13,201,903)

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Net premium income	2,480,497,653	47,780,788						705,096,259	1,727,620,606					
2. Change in unearned premium reserves and reserve for rate credit	9,078,168	14,958,033						1,117,064	(6,996,929)					
3. Fee-for-service (net of \$	0													XXX.
medical expenses)	0													XXX.
4. Risk revenue	0													
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
6. Aggregate write-ins for other non-health care related revenues	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
7. Total revenues (Lines 1 to 6)	2,489,575,821	62,738,821	0	0	0	0	0	706,213,323	1,720,623,677	0	0	0	0	0
8. Hospital/medical benefits	1,244,657,106	22,258,336						297,687,264	924,711,506					XXX.
9. Other professional services	296,493,214	9,447,843						66,791,496	220,253,875					XXX.
10. Outside referrals	0													XXX.
11. Emergency room and out-of-area	373,439,059	9,907,470						189,545,697	173,985,892					XXX.
12. Prescription drugs	263,760,782	6,098,422						78,409,954	179,252,406					XXX.
13. Aggregate write-ins for other hospital and medical Incentive pool, withhold adjustments and bonus amounts	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
14. Subtotal (Lines 8 to 14)	17,060,207	1,361,492						7,329,496	8,369,219					XXX.
15. Net reinsurance recoveries	2,195,410,368	49,073,563	0	0	0	0	0	639,763,907	1,506,572,898	0	0	0	0	XXX.
16. Total medical and hospital (Lines 15 minus 16).....	0													XXX.
17. Non-health claims (net)	2,195,410,368	49,073,563	0	0	0	0	0	639,763,907	1,506,572,898	0	0	0	0	XXX.
18. Claims adjustment expenses including \$	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
19. General administrative expenses	83,611,285	3,582,513						23,717,857	56,310,915					
20. Increase in reserves for accident and health contracts	183,031,727	8,697,954						36,390,423	137,943,350					
21. Increase in reserves for life contracts	(10,779,697)								(10,779,697)					XXX.
22. Total underwriting deductions (Lines 17 to 22)	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
23. Net underwriting gain or (loss) (Line 7 minus Line 23)	2,451,273,683	61,354,030	0	0	0	0	0	699,872,187	1,690,047,466	0	0	0	0	0
	38,302,138	1,384,791	0	0	0	0	0	6,341,136	30,576,211	0	0	0	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	0	0	0	0	XXX.
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0602.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0603.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.														XXX.
1302.														XXX.
1303.														XXX.
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual	47,780,788			47,780,788
2. Comprehensive (hospital and medical) group				0
3. Medicare supplement				0
4. Vision only				0
5. Dental only				0
6. Federal employees health benefits plan	0			0
7. Title XVIII - Medicare	705,096,259			705,096,259
8. Title XIX - Medicaid	1,727,620,606			1,727,620,606
9. Credit A&H				0
10. Disability income				0
11. Long-term care				0
12. Other health				0
13. Health subtotal (Lines 1 through 12)	2,480,497,653	0	0	2,480,497,653
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	2,480,497,653	0	0	2,480,497,653

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	2,218,561,166	49,980,615						623,064,294	1,545,516,257					
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	0													
1.4 Net	2,218,561,166	49,980,615	0	0	0	0	0	623,064,294	1,545,516,257	0	0	0	0	0
2. Paid medical incentive pools and bonuses	15,498,108	1,409,293						4,678,537	9,410,278					
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	166,426,843	5,417,486	0	0	0	0	0	50,037,096	110,972,261	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	166,426,843	5,417,486	0	0	0	0	0	50,037,096	110,972,261	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	0													
4.2 Reinsurance assumed	0													
4.3 Reinsurance ceded	0													
4.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	16,037,823	766,772						6,601,500	8,669,551					
6. Net health care receivables (a)	(5,441,430)	136,916						(5,253,962)	(324,384)					
7. Amounts recoverable from reinsurers December 31, current year	0													
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	212,079,279	7,549,115	0	0	0	0	0	45,920,940	158,609,224	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net	212,079,279	7,549,115	0	0	0	0	0	45,920,940	158,609,224	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	0													
9.2 Reinsurance assumed	0													
9.3 Reinsurance ceded	0													
9.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	14,475,724	814,573	0	0	0	0	0	3,950,540	9,710,611					
11. Amounts recoverable from reinsurers December 31, prior year	0													
12. Incurred Benefits:														
12.1 Direct	2,178,350,160	47,712,070	0	0	0	0	0	632,434,412	1,498,203,678	0	0	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.4 Net	2,178,350,160	47,712,070	0	0	0	0	0	632,434,412	1,498,203,678	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	17,060,207	1,361,492	0	0	0	0	0	7,329,497	8,369,218	0	0	0	0	0

(a) Excludes \$ 7,528,482 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	55,512,479	1,939,003						21,552,832	32,020,644					
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	0													
1.4 Net	55,512,479	1,939,003	0	0	0	0	0	21,552,832	32,020,644	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct	110,914,364	3,478,483	0	0	0	0	0	28,484,264	78,951,617					
2.2 Reinsurance assumed	0													
2.3 Reinsurance ceded	0													
2.4 Net	110,914,364	3,478,483	0	0	0	0	0	28,484,264	78,951,617	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0													
3.2 Reinsurance assumed	0													
3.3 Reinsurance ceded	0													
3.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	166,426,843	5,417,486	0	0	0	0	0	50,037,096	110,972,261	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	166,426,843	5,417,486	0	0	0	0	0	50,037,096	110,972,261	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint 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	6
	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	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual	2,819,655	47,160,960	846,531	4,570,955	3,666,186	7,549,115
2. Comprehensive (hospital and medical) group					0	0
3. Medicare supplement					0	0
4. Vision only					0	0
5. Dental only					0	0
6. Federal employees health benefits plan					0	0
7. Title XVIII - Medicare	29,416,457	593,647,836	(361,414)	50,398,509	29,055,043	45,920,941
8. Title XIX - Medicaid	160,117,831	1,385,398,429	3,283,842	107,688,420	163,401,673	158,609,223
9. Credit A&H					0	0
10. Disability income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)	192,353,943	2,026,207,225	3,768,959	162,657,884	196,122,902	212,079,279
14. Health care receivables (a)	3,411,528	9,576,074			3,411,528	18,429,031
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	7,115,041	8,383,067	6,189,412	9,848,411	13,304,453	14,475,724
17. Totals (Lines 13 - 14 + 15 + 16)	196,057,456	2,025,014,218	9,958,371	172,506,295	206,015,827	208,125,972

(a) Excludes \$ 7,528,482 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

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

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

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	678	731	718	718	718
2.	2021	26,995	29,698	29,697	29,693	29,694
3.	2022	XXX	29,879	32,644	32,659	32,658
4.	2023	XXX	XXX	34,726	37,129	37,316
5.	2024	XXX	XXX	XXX	37,522	40,691
6.	2025	XXX	XXX	XXX	XXX	47,712

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	749	731	725	687	718
2.	2021	29,331	29,767	30,042	29,724	29,694
3.	2022	XXX	33,610	33,006	32,658	32,658
4.	2023	XXX	XXX	39,679	39,361	37,830
5.	2024	XXX	XXX	XXX	43,654	41,147
6.	2025	XXX	XXX	XXX	XXX	52,927

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	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.	2021	39,744	29,694	39,744	133.8	69,438	174.7	0	0	69,438	174.7
2.	2022	43,558	32,658	43,559	133.4	76,217	175.0	0	0	76,217	175.0
3.	2023	48,906	37,316	49,341	132.2	86,657	177.2	514	12	87,183	178.3
4.	2024	50,178	40,691	3,637	8.9	44,328	88.3	456	8	44,792	89.3
5.	2025	62,739	47,712	3,133	6.6	50,845	81.0	5,215	108	56,168	89.5

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	.....	.....	.....	.....	43,853	49,029	48,922	48,496	48,473
2.	2021	.....	.....	.....	.....	409,072	468,390	467,985	468,867	467,834
3.	2022	.....	.....	.....	.....	XXX	506,327	549,370	548,673	548,550
4.	2023	.....	.....	.....	.....	XXX	XXX	517,733	554,223	554,812
5.	2024	.....	.....	.....	.....	XXX	XXX	XXX	501,031	531,339
6.	2025	.....	.....	.....	.....	XXX	XXX	XXX	XXX	590,865

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	.....	.....	.....	.....	50,924	48,768	48,929	48,497	48,473
2.	2021	.....	.....	.....	.....	463,356	469,021	467,935	468,873	467,913
3.	2022	.....	.....	.....	.....	XXX	568,485	549,759	548,086	548,759
4.	2023	.....	.....	.....	.....	XXX	XXX	574,670	556,263	555,885
5.	2024	.....	.....	.....	.....	XXX	XXX	XXX	549,443	534,607
6.	2025	.....	.....	.....	.....	XXX	XXX	XXX	XXX	642,875

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

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.	2021	513,714	467,834	513,680	109.8	981,514	191.1	79	3	981,596	191.1
2.	2022	660,046	548,550	660,018	120.3	1,208,568	183.1	209	7	1,208,784	183.1
3.	2023	721,386	554,812	401,056	72.3	955,868	132.5	1,073	(38)	956,903	132.6
4.	2024	663,553	531,339	24,789	4.7	556,128	83.8	3,268	17	559,413	84.3
5.	2025	706,213	590,865	20,660	3.5	611,525	86.6	52,010	1,648	665,183	94.2

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	85,880	91,532	91,180	91,682	91,812
2.	2021	1,088,048	1,272,357	1,273,764	1,274,183	1,274,398
3.	2022	XXX	1,231,979	1,355,668	1,357,278	1,357,923
4.	2023	XXX	XXX	1,330,266	1,503,184	1,508,351
5.	2024	XXX	XXX	XXX	1,405,706	1,562,532
6.	2025	XXX	XXX	XXX	XXX	1,386,438

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	93,475	92,324	91,451	91,557	91,812
2.	2021	1,247,690	1,280,155	1,276,738	1,274,306	1,274,455
3.	2022	XXX	1,376,820	1,359,402	1,357,272	1,357,924
4.	2023	XXX	XXX	1,518,643	1,505,063	1,508,365
5.	2024	XXX	XXX	XXX	1,572,154	1,566,820
6.	2025	XXX	XXX	XXX	XXX	1,501,720

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. 2021	1,429,092	1,274,398	1,429,103	112.1	2,703,501	189.2	57	2	2,703,560	189.2
2. 2022	1,654,547	1,357,923	1,654,580	121.8	3,012,503	182.1	1	0	3,012,504	182.1
3. 2023	1,705,166	1,508,351	1,713,816	113.6	3,222,167	189.0	14	0	3,222,181	189.0
4. 2024	1,622,306	1,562,532	59,344	3.8	1,621,876	100.0	4,288	86	1,626,250	100.2
5. 2025	1,720,624	1,386,438	48,605	3.5	1,435,043	83.4	115,282	2,896	1,553,221	90.3

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	130,411	141,292	140,820	140,896	141,003	
2.	2021	1,524,115	1,770,445	1,771,446	1,772,743	1,771,926	
3.	2022	XXX	1,768,185	1,937,682	1,938,610	1,939,131	
4.	2023	XXX	XXX	1,882,725	2,094,536	2,100,479	
5.	2024	XXX	XXX	XXX	1,944,259	2,134,562	
6.	2025	XXX	XXX	XXX	XXX	2,025,015	

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 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	145,148	141,823	141,105	140,741	141,003
2.	2021	1,740,377	1,778,943	1,774,715	1,772,903	1,772,062
3.	2022	xxx	1,978,915	1,942,167	1,938,016	1,939,341
4.	2023	xxx	xxx	2,132,992	2,100,687	2,102,080
5.	2024	xxx	xxx	xxx	2,165,251	2,142,574
6.	2025	xxx	xxx	xxx	xxx	2,197,522

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.	2021	.....	1,982,550	.....	1,771,926	.....	111.9	.....	3,754,453	.....	189.4
2.	2022	.....	2,358,151	.....	1,939,131	.....	121.6	.....	4,297,288	.....	182.2
3.	2023	.....	2,475,458	.....	2,100,479	.....	103.0	.....	4,264,692	.....	172.3
4.	2024	.....	2,336,037	.....	2,134,562	.....	4.1	.....	2,222,332	.....	95.5
5.	2025	.....	2,489,576	.....	2,025,015	.....	3.6	.....	2,097,413	.....	91.4

UNDERWRITING AND INVESTMENT EXHIBIT

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

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves	0												
2. Additional policy reserves (a)	0												
3. Reserve for future contingent benefits	0												
4. Reserve for rate credits or experience rating refunds (including \$ for investment income) ..	15,930,379	0							15,930,379				
5. Aggregate write-ins for other policy reserves	243,784	0	0	0	0	0	0	243,784	0	0	0	0	0
6. Totals (gross)	16,174,163	0	0	0	0	0	0	243,784	15,930,379	0	0	0	0
7. Reinsurance ceded	0												
8. Totals (Net)(Page 3, Line 4)	16,174,163	0	0	0	0	0	0	243,784	15,930,379	0	0	0	0
9. Present value of amounts not yet due on claims	0												
10. Reserve for future contingent benefits	0												
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross)	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Reinsurance ceded	0												
14. Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
0501. Other risk adjustment payable	243,784							243,784					
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	243,784	0	0	0	0	0	0	243,784	0	0	0	0	0
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

	Claim Adjustment Expenses		3	4	5
	1	2			
	Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent (\$ for occupancy of own building)	1,276,776	427,581	(530,101)	0	1,174,256
2. Salary, wages and other benefits	51,965,717	11,112,319	26,264,328	0	89,342,364
3. Commissions (less \$ ceded plus \$ assumed)	0	0	5,906,529	0	5,906,529
4. Legal fees and expenses	28,960	(282)	544,995	0	573,673
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services ...	1,178,495	238,766	5,048,511	0	6,465,772
7. Traveling expenses	597,375	561	190,456	0	788,392
8. Marketing and advertising	344,682	93,892	6,596,617	0	7,035,191
9. Postage, express and telephone	438,489	115,326	1,326,871	0	1,880,686
10. Printing and office supplies	63,399	1,039	224,422	0	288,860
11. Occupancy, depreciation and amortization	0	0	0	0	0
12. Equipment	1,032	119	262,490	0	263,641
13. Cost or depreciation of EDP equipment and software	1,118,275	94,996	3,423,921	0	4,637,192
14. Outsourced services including EDP, claims, and other services	2,967,821	1,954,152	10,414,456	0	15,336,429
15. Boards, bureaus and association fees	3,300	0	111,162	0	114,462
16. Insurance, except on real estate	0	0	349,358	0	349,358
17. Collection and bank service charges	0	0	38,029	0	38,029
18. Group service and administration fees	0	1	3,922	0	3,923
19. Reimbursements by uninsured plans	0	0	0	0	0
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	12	2	917,509	0	917,523
22. Real estate taxes	0	0	44,457	0	44,457
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	4,773,466	0	4,773,466
23.2 State premium taxes	0	0	115,012,536	0	115,012,536
23.3 Regulatory authority licenses and fees	13,945	116	77,300	0	91,361
23.4 Payroll taxes	3,379,884	643,526	1,505,361	0	5,528,771
23.5 Other (excluding federal income and real estate taxes)	0	0	1,217,806	0	1,217,806
24. Investment expenses not included elsewhere	0	0	0	663,577	663,577
25. Aggregate write-ins for expenses	730,640	4,820,369	(692,674)	0	4,858,335
26. Total expenses incurred (Lines 1 to 25)	64,108,802	19,502,483	183,031,727	663,577	(a) 267,306,589
27. Less expenses unpaid December 31, current year	0	4,748,763	106,177,877	0	110,926,640
28. Add expenses unpaid December 31, prior year		4,767,849	64,305,950		69,073,799
29. Amounts receivable relating to uninsured plans, prior year			6,559,160		6,559,160
30. Amounts receivable relating to uninsured plans, current year	0	0	148,653	0	148,653
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	64,108,802	19,521,569	134,749,293	663,577	219,043,241
DETAILS OF WRITE-INS					
2501. Misc expenses	730,640	4,820,369	(692,674)	0	4,858,335
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	730,640	4,820,369	(692,674)	0	4,858,335

(a) Includes management fees of \$135,581,932 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a) (8,715)	 94,579
1.1	Bonds exempt from U.S. tax	(a) .....	.....
1.2	Other bonds (unaffiliated)	(a) 20,269,445	 19,832,848
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) 2,048,042	 2,463,900
7	Derivative instruments	(f) 0	 0
8.	Other invested assets	 0	 0
9.	Aggregate write-ins for investment income	 62,404	 62,400
10.	Total gross investment income	22,371,176	22,453,727
11.	Investment expenses		(g) 663,577
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h) 0
14.	Depreciation on real estate and other invested assets		(i) 0
15.	Aggregate write-ins for deductions from investment income		 0
16.	Total deductions (Lines 11 through 15)		 663,577
17.	Net investment income (Line 10 minus Line 16)		21,790,150
DETAILS OF WRITE-INS			
0901.	Miscellaneous Income	31,291	31,291
0902.	Securities Lending	31,113	31,109
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	62,404	62,400
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 1,598,422 accrual of discount less \$3,384,720 amortization of premium and less \$ 180,324 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 \$ 473,761 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	0	0	0	0	0
1.1	Bonds exempt from U.S. tax .....	.....	.....	0	.....	.....
1.2	Other bonds (unaffiliated)	(6,344,159)	0	(6,344,159)	(950,277)	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans .....	.....	0	0	0	0
4.	Real estate .....	.....	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	1,051	2	1,054	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets .....	.....	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(6,343,107)	2	(6,343,105)	(950,277)	0
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

	1	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
2. Stocks (Schedule D):			
2.1 Preferred stocks		0	0
2.2 Common stocks		0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens		0	0
3.2 Other than first liens.....		0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company		0	0
4.2 Properties held for the production of income.....		0	0
4.3 Properties held for sale		0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)		0	0
6. Contract loans		0	0
7. Derivatives (Schedule DB)		0	0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities		0	0
10. Securities lending reinvested collateral assets (Schedule DL)		0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)		0	0
14. Investment income due and accrued		0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection		0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..		0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination		0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers		0	0
16.2 Funds held by or deposited with reinsured companies		0	0
16.3 Other amounts receivable under reinsurance contracts		0	0
17. Amounts receivable relating to uninsured plans		0	0
18.1 Current federal and foreign income tax recoverable and interest thereon		0	0
18.2 Net deferred tax asset	679,406	512,123	(167,283)
19. Guaranty funds receivable or on deposit		0	0
20. Electronic data processing equipment and software		0	0
21. Furniture and equipment, including health care delivery assets	3,768,828	492,406	(3,276,422)
22. Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23. Receivable from parent, subsidiaries and affiliates		0	0
24. Health care and other amounts receivable	16,082,278	20,520,090	4,437,812
25. Aggregate write-ins for other-than-invested assets	790,753	798,367	7,614
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	21,321,265	22,322,986	1,001,721
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
28. Total (Lines 26 and 27)	21,321,265	22,322,986	1,001,721
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501. Prepaids	790,753	782,640	(8,113)
2502. Miscellaneous receivables	0	15,727	15,727
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	790,753	798,367	7,614

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	199,415	198,380	195,935	189,590	186,259	2,315,459
2. Provider Service Organizations						
3. Preferred Provider Organizations						
4. Point of Service						
5. Indemnity Only						
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	199,415	198,380	195,935	189,590	186,259	2,315,459
DETAILS OF WRITE-INS						
0601.						
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Wellpoint New Jersey (the “Company”), have been prepared in conformity with the National Association of Insurance Commissioners’ (“NAIC”) *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* (“NAIC SAP”), subject to any deviations prescribed or permitted by the New Jersey Department of Banking and Insurance (the “DOBI”). The Company employed no permitted practices in preparing the accompanying statutory financial statements.

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

	SSAP #	F/S Page	F/S Line #	2025	2024
Net Income					
(1) Wellpoint New Jersey state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 47,493,774	\$(38,473,190)
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 47,493,774	\$(38,473,190)
Surplus					
(5) Wellpoint New Jersey state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$298,149,819	\$253,635,110
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$298,149,819	\$253,635,110

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

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

C. Accounting Policies

Health premiums are earned over the term of the related insurance policies. Premiums written are reported net of experience rating refunds. Premiums paid prior to the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period. Premium rates are subject to approval by the Centers for Medicare and Medicaid Services. Expenses are charged to operations as incurred.

The Company provides administrative services to various customers on an uninsured basis. Under these arrangements, the customer retains the risk of funding payments for health benefits provided, and the Company may be subject to credit risk of the customer from the time of the Company's claim payment until the Company receives the claim reimbursement. In accordance with SSAP No. 47, *Uninsured Plans*, these claims payments and subsequent reimbursements are excluded from the Company's statutory statement of revenue and expenses. Administrative fees for administering these arrangements are recognized as administrative services are performed and recorded as a reduction to general administrative expenses.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments, not backed by other loans, with maturities of less than one year and more than three months at the date of acquisition and are reported at amortized cost, which approximates fair value. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.
- (3) The Company has no investments in common stocks of unaffiliated companies.
- (4) The Company has no investments in preferred stocks.
- (5) The Company has no investment in residual tranche securities.
- (6) The Company has no mortgage loans - real estate.
- (7) Asset-backed securities are stated at amortized cost. Prepayment assumptions for asset-backed securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all asset-backed securities. Non-investment grade asset-backed securities are stated at the lower of amortized cost or fair value.
- (8) The Company has no investments in subsidiaries, controlled and affiliated companies.
- (9) The Company has no investments in joint ventures, partnerships or limited liability companies.
- (10) The Company has no derivative instruments.
- (11) The Company recognizes losses from other-than-temporary impairments ("OTTI") of investments in accordance with Statements of Standard Accounting Practice ("SSAP") No. 26, *Bonds*; and SSAP No. 30, *Common Stock*; and SSAP No. 32, *Preferred Stock*.
- (12) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (13) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions and other factors that may materially affect the cost, frequency and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- (14) The Company has not modified its capitalization policy from the prior period.
- (15) An accounting policy election has been made to disregard corporate AMT when evaluating the need for a valuation allowance for its regular tax deferred tax assets.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.
NOTES TO FINANCIAL STATEMENTS

- (16) Pharmacy rebate receivables are recorded when earned based upon actual rebate receivables billed and an estimate of receivables based upon current utilization of specific pharmaceuticals and provider contract terms.
- (17) The Company sells policies where premiums vary based on loss experience or premium stabilization programs. Retrospectively rated refunds include minimum medical loss ratio (“MLR”) rebates per the Affordable Care Act (“ACA”). Risk adjustment programs transfer premiums from insurers that enroll members with relatively lower health risks to insurers that enroll members with relatively higher health risks. Reserves for rate credits, risk adjustment programs or policy rating refunds are reported in aggregate policy reserves. Accrued retrospective premiums are reported in premiums receivable.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

There were no accounting changes or corrections of errors during the years ended December 31, 2025 and 2024.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

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

Not applicable.

4. Discontinued Operations

The Company had no operations that were discontinued during 2025 or 2024.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company did not have investments in mortgage loans at December 31, 2025 or 2024.

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at December 31, 2025 or 2024.

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at December 31, 2025 or 2024.

D. Asset-Backed Securities

(1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its asset-backed securities.

(2) The Company did not recognize OTTI on its asset-backed securities during the years ended December 31, 2025 and 2024.

(3) The Company did not recognize OTTI on its asset-backed securities at December 31, 2025 and 2024.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:			
	1. Less than 12 Months	\$	(5,940)
	2. 12 Months or Longer	\$	(2,780,113)
b. The aggregate related fair value of securities with unrealized losses:			
	1. Less than 12 Months	\$	4,696,809
	2. 12 Months or Longer	\$	19,353,958

(5) The Company’s bond portfolio is sensitive to interest rate fluctuations, which impact the fair value of individual securities. Unrealized losses on bonds were primarily caused by the effects of the interest rate environment and the widening of credit spreads on certain securities. The Company currently has the ability and intent to hold these securities until their full cost can be recovered. Therefore, the Company does not believe the unrealized losses represent an OTTI at December 31, 2025 or 2024.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) The Company did not enter into repurchase agreements at December 31, 2025 or 2024.

(2) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers based on, among other things, their creditworthiness in exchange for collateral initially equal to at least 102% of the market value of the loaned securities. The Company receives the collateral in cash or securities, and if cash is received the cash collateral is thereafter invested according to guidelines of the Company’s Investment Policy.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(3) Collateral Received

a. Aggregate amount collateral received		
		<u>Fair Value</u>
1. Securities Lending		
(a) Open	\$	12,403,290
(b) 30 days or less		—
(c) 31 to 60 days		—
(d) 61 to 90 days		—
(e) Greater than 90 days		—
(f) Sub-total	\$	12,403,290
(g) Securities received		3,247,281
(h) Total collateral received		<u>15,650,571</u>
2. Dollar repurchase agreement - Not applicable.		
b. The fair value of that collateral and of the portion of that collateral that it has sold or replugged		<u>\$ 15,650,571</u>
c. The Company receives cash collateral in an amount in excess of fair value of the securities lent. The Company reinvests the cash collateral according to guidelines of the Company’s Investment Policy.		

(4) Not applicable.

(5) Collateral Reinvestment

a. Aggregate amount collateral reinvested			
		<u>Amortized Cost</u>	<u>Fair Value</u>
1. Securities Lending			
(a) Open	\$	—	\$ —
(b) 30 days or less		4,778,088	4,779,892
(c) 31 to 60 days		3,896,193	3,898,996
(d) 61 to 90 days		404,385	404,412
(e) 91 to 120 days		2,267,446	2,267,502
(f) 121 to 180 days		826,101	826,202
(g) 181 to 365 days		231,077	231,077
(h) 1 to 2 years		—	—
(i) 2 to 3 years		—	—
(j) Greater than 3 years		—	—
(k) Sub-total		<u>12,403,290</u>	<u>12,408,081</u>
(l) Securities received		<u>3,247,281</u>	<u>3,247,281</u>
(m) Total collateral reinvested		<u>15,650,571</u>	<u>15,655,362</u>
2. Dollar repurchase agreement - Not applicable.			
b. Not applicable.			

(6) Not applicable.

(7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) The Company participates in overnight bilateral reverse repurchase agreements, which provide cash in exchange for a U.S. Treasury (or other high-quality collateral) with an initial fair value equal to at least 102% of the amount lent. If the fair value of the collateral falls below 100%, the counterparty is required to provide additional collateral, to bring the fair value back to at least 102%.

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	Yes	Yes	Yes	Yes
b. Tri-Party (YES/NO)	No	No	No	No

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open - No Maturity	\$ 4,100,000	3,800,000	4,000,000	5,700,000
2. Overnight	\$ —	\$ —	\$ —	\$ —
3. 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4. >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5. >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6. >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7. >1 Year	\$ —	\$ —	\$ —	\$ —

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Open - No Maturity	\$ —	\$ —	4,000,000	2,400,000
2. Overnight	\$ —	\$ —	\$ —	\$ —
3. 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4. >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5. >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6. >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7. >1 Year	\$ —	\$ —	\$ —	\$ —

(4) Fair Value of Securities Acquired Under Repo-Secured Borrowing

Not applicable.

(5) Fair Value of Securities Acquired Under Repo-Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount	\$ 4,163,129	\$ 3,918,159	\$ 4,078,856	\$ 5,793,021
b. Ending Balance	\$ —	\$ —	\$ 4,078,856	\$ 2,431,604

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(6). Securities Acquired Under Repo - Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. ICO - FV	\$ —	\$ 2,431,604	\$ —	\$ —
b. ABS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ 2,431,604	\$ —	\$ —

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
a. ICO - FV	\$ —	\$ —	\$ —	\$ —
b. ABS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ —	\$ —	\$ —

(7).Collateral Pledged - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	\$ 4,100,000	\$ 3,800,000	\$ 4,000,000	\$ 5,700,000
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash	\$ —	\$ —	\$ 4,000,000	\$ 2,400,000
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
3. Securities (BACV)	\$ —	\$ —	\$ —	\$ —
4. Nonadmitted Subset (BACV)	\$ —	\$ —	\$ —	\$ —

(8)Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous	\$ 2,400,000	\$ 2,431,604
b. 30 Days or Less	\$ —	\$ —
c. 31 to 90 Days	\$ —	\$ —
d. >90 Days	\$ —	\$ —

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(9).Recognized Receivable for Return of Collateral - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	\$ —	\$ —	\$ —	\$ —
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1. Cash	\$ —	\$ —	\$ —	\$ —
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —

(10).Recognized Liability to Return Collateral - Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1. Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at December 31, 2025 or 2024.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at December 31, 2025 or 2024.

J. Real Estate

The Company did not have investments in real estate and did not engage in retail land sales operations during 2025 or 2024.

K. Investments in Tax Credit Structures (tax credit investments)

The Company did not invest in projects generating tax credits during 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted assets (including pledged)

	1	2	3	4	5	6	7	8	9	10
Restricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)	Amount Reported in General Interrogatories	Difference from Note and GI	GI Ref
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	0.00 %	0.00 %	\$ —	\$ —	
b. Collateral held under security lending agreements	15,650,571	12,212,973	3,437,598	—	15,650,571	2.34 %	2.42 %	15,650,571	—	25.04 + 25.05
c. Subject to repurchase agreements	—	—	—	—	—	0.00 %	0.00 %	—	—	26.21
d. Subject to reverse repurchase agreements	2,400,000	2,600,000	(200,000)	—	2,400,000	0.36 %	0.37 %	2,400,000	—	26.22
e. Subject to dollar repurchase agreements	—	—	—	—	—	0.00 %	0.00 %	—	—	26.23
f. Subject to dollar reverse repurchase	—	—	—	—	—	0.00 %	0.00 %	—	—	26.24
g. Placed under option contracts	—	—	—	—	—	0.00 %	0.00 %	—	—	26.25
h. Letter stock or securities restricted as to sale-excluding FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %	—	—	26.26
i. FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %	—	—	26.27
j. On deposit with states	342,015,923	330,082,353	11,933,570	—	342,015,923	51.15 %	52.83 %	342,015,923	—	26.28
k. On deposit with other regulatory bodies	—	—	—	—	—	0.00 %	0.00 %	—	—	26.29
l. Pledged as collateral to FHLB (including assets backing funding	—	—	—	—	—	0.00 %	0.00 %	—	—	26.31
m. Pledged as collateral not captured in other categories	—	—	—	—	—	0.00 %	0.00 %	—	—	26.30
n. Other restricted assets	—	—	—	—	—	0.00 %	0.00 %	—	—	26.32
o. Collateral assets received and on balance sheet	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
p. Assets held under modco reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
q. Assets held under funds withheld reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
r. Total restricted assets (Sum of a through q)	\$ 360,066,494	\$ 344,895,326	\$ 15,171,168	\$ —	\$360,066,494	53.85 %	55.62 %	XXX	XXX	XXX

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

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

(2) - (3) Not applicable.

(4) Not applicable.

(5) Not applicable.

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at December 31, 2025 and 2024.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at December 31, 2025 and 2024.

O. 5GI Securities

The Company has no 5GI Securities as of December 31, 2025 and 2024.

P. Short Sales

The Company did not have any short sales at December 31, 2025 and 2024.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at December 31, 2025.

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

The Company did not participate in a cash pool at December 31, 2025 or 2024.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in joint ventures, partnerships or limited liability companies that exceeded 10% of its admitted assets at December 31, 2023 or 2022.

B. Not applicable.

7. Investment Income

A. All investment income due and accrued with amounts that are over 90 days past due is non-admitted.

B. At December 31, 2025 and 2024 there was no nonadmitted accrued investment income.

C. At December 31, 2025 and 2024 the gross, nonadmitted and admitted amounts for interest income due and accrued are as follows:

Interest Income Due and Accrued	2025	2024
1. Gross	\$ 6,052,685	\$ 5,970,134
2. Nonadmitted	\$ —	\$ —
3. Admitted	\$ 6,052,685	\$ 5,970,134

D. At December 31, 2025 and 2024 the Company had no aggregate deferred interest.

E. At December 31, 2025 and 2024, the Company had no cumulative amounts of paid-in-kind (“PIK”) interest included in the current principal balance.

8. Derivative Instruments

The Company has no derivative instruments.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

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

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

12/31/2025			
(1)	(2)	(3)	
Ordinary	Capital	(Col 1+2) Total	
(a) Gross Deferred Tax Assets	\$ 4,626,748	\$ 3,462,621	\$ 8,089,369
(b) Statutory Valuation Allowance Adjustments	—	2,905,569	2,905,569
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	4,626,748	557,052	5,183,800
(d) Deferred Tax Assets Nonadmitted	587,779	91,627	679,406
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	4,038,969	465,425	4,504,394
(f) Deferred Tax Liabilities	212,182	190,544	402,726
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 3,826,787	\$ 274,881	\$ 4,101,668

12/31/2024			
(4)	(5)	(6)	
Ordinary	Capital	(Col 4+5) Total	
(a) Gross Deferred Tax Assets	\$ 7,672,958	\$ 2,574,119	\$ 10,247,077
(b) Statutory Valuation Allowance Adjustments	—	2,287,107	2,287,107
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	7,672,958	287,012	7,959,970
(d) Deferred Tax Assets Nonadmitted	470,385	41,738	512,123
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	7,202,573	245,274	7,447,847
(f) Deferred Tax Liabilities	28,325	120,062	148,387
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 7,174,248	\$ 125,212	\$ 7,299,460

Change			
(7)	(8)	(9)	
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total	
(a) Gross Deferred Tax Assets	\$ (3,046,210)	\$ 888,502	\$ (2,157,708)
(b) Statutory Valuation Allowance Adjustments	—	618,462	618,462
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	(3,046,210)	270,040	(2,776,170)
(d) Deferred Tax Assets Nonadmitted	117,394	49,889	167,283
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	(3,163,604)	220,151	(2,943,453)
(f) Deferred Tax Liabilities	183,857	70,482	254,339
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (3,347,461)	\$ 149,669	\$ (3,197,792)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

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

12/31/2025		
(1)	(2)	(3)
Ordinary	Capital	(Col 1+2) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 3,802,117	\$ —	\$ 3,802,117
(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)	24,670	274,881	299,551
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	24,670	274,881	299,551
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	44,107,223
(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.	212,182	190,544	402,726
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 4,038,969	\$ 465,425	\$ 4,504,394

12/31/2024		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 5,723,485	\$ —	\$ 5,723,485
(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)	1,450,763	125,212	1,575,975
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	1,450,763	125,212	1,575,975
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	36,950,347
(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.	28,325	120,062	148,387
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 7,202,573	\$ 245,274	\$ 7,447,847

Change		
(7)	(8)	(9)
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ (1,921,368)	\$ —	\$ (1,921,368)
(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)	(1,426,093)	149,669	(1,276,424)
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	(1,426,093)	149,669	(1,276,424)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	7,156,876
(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.	183,857	70,482	254,339
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ (3,163,604)	\$ 220,151	\$ (2,943,453)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(3)			
		2025	2024
(a)	Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	370.8 %	331.0 %
(b)	Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 294,048,151	\$ 246,335,650

(4)		12/31/2025		12/31/2024		Change	
		(1)	(2)	(3)	(4)	(5)	(6)
		Ordinary	Capital	Ordinary	Capital	(Col 1-3) Ordinary	(Col 2-4) Capital

Impact of Tax-Planning Strategies

(a)	Determination of Adjusted Gross Deferred Tax Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.						
1.	Adjusted Gross DTAs Amount From Note 9A1(c)	\$4,626,748	\$557,052	\$7,672,958	\$287,012	\$(3,046,210)	\$270,040
2.	Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	0.00 %	65.79 %	0.00 %	58.17 %	0.00 %	7.62 %
3.	Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	\$4,038,969	\$465,425	\$7,202,573	\$245,274	\$(3,163,604)	\$220,151
4.	Percentage of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	0.00 %	30.68 %	0.00 %	4.11 %	0.00 %	26.57 %

(b)	Does the Company’s tax-planning strategies include the use of reinsurance?	Yes _____	No ☒ _____
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B. The Company has no unrecognized deferred tax liabilities at December 31,2025 and 2024.

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

		(1)	(2)	(3)
		12/31/2025	12/31/2024	(Col 1-2) Change
(1)	Current Income Tax			
(a)	Federal	\$ 7,669,101	\$ (6,158,510)	\$ 13,827,611
(b)	Foreign	—	—	—
(c)	Subtotal	7,669,101	(6,158,510)	13,827,611
(d)	Federal income tax expense on net capital gains	(457,850)	(1,077,291)	619,441
(e)	Utilization of capital loss carry-forwards	—	—	—
(f)	Other	—	—	—
(g)	Federal and foreign income taxes incurred	\$ 7,211,251	\$ (7,235,801)	\$ 14,447,052
(2)	Deferred Tax Assets:			
(a)	Ordinary			
(1)	Discounting of unpaid losses	\$ 598,384	\$ 656,076	\$ (57,692)
(2)	Unearned premium reserve	—	65	(65)
(3)	Policyholder reserves	798,000	1,197,000	(399,000)
(4)	Investments	—	—	—
(5)	Deferred acquisition costs	—	—	—
(6)	Policyholder dividends accrual	—	—	—
(7)	Fixed assets	748,821	424,533	324,288
(8)	Compensation and benefits accrual	—	—	—

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(9)	Pension accrual	—	—	—
(10)	Receivables - nonadmitted	1,796,297	2,731,540	(935,243)
(11)	Net operating loss carry-forward	—	—	—
(12)	Tax credit carry-forward	—	—	—
(13)	Other	685,246	2,663,744	(1,978,498)
(99)	Subtotal (sum of 2a1 through 2a13)	4,626,748	7,672,958	(3,046,210)
(b)	Statutory valuation allowance adjustment	—	—	—
(c)	Nonadmitted	587,779	470,385	117,394
(d)	Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	4,038,969	7,202,573	(3,163,604)
(e)	Capital			
(1)	Investments	\$ 366,508	\$ 166,950	199,558
(2)	Net capital loss carry-forward	3,096,113	2,407,169	688,944
(3)	Real estate	—	—	—
(4)	Other	—	—	—
(99)	Subtotal (2e1+2e2+2e3+2e4)	3,462,621	\$ 2,574,119	888,502
(f)	Statutory valuation allowance adjustment	2,905,569	2,287,107	618,462
(g)	Nonadmitted	91,627	41,738	49,889
(h)	Admitted capital deferred tax assets (2e99 - 2f - 2g)	465,425	245,274	220,151
(i)	Admitted deferred tax assets (2d + 2h)	\$ 4,504,394	\$ 7,447,847	\$ (2,943,453)

(1)	(2)	(3)
12/31/2025	12/31/2024	(Col 1-2) Change

(3) Deferred Tax Liabilities:

(a)	Ordinary			
(1)	Investments	\$ 210,679	\$ 27,148	\$ 183,531
(2)	Fixed assets	—	—	—
(3)	Deferred and uncollected premium	—	—	—
(4)	Policyholder reserves	—	—	—
(5)	Other	1,503	1,177	326
(99)	Subtotal (3a1+3a2+3a3+3a4+3a5)	212,182	28,325	183,857
(b)	Capital			
(1)	Investments	\$ 190,544	\$ 120,062	70,482
(2)	Real estate	—	—	—
(3)	Other	—	—	—
(99)	Subtotal (3b1+3b2+3b3)	190,544	120,062	70,482
(c)	Deferred tax liabilities (3a99 + 3b99)	\$ 402,726	\$ 148,387	\$ 254,338
(4)	Net deferred tax assets/liabilities (2i - 3c)	\$ 4,101,668	\$ 7,299,460	\$ (3,197,792)

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

	2025	2024
Tax expense computed using federal statutory rate	\$ 11,488,055	\$ (9,598,888)
Change in nonadmitted assets	245,491	8,688
Tax exempt income and dividend received deduction net of proration	(1,857,163)	(1,545,755)
Prior year true-up and adjustments	(53,526)	231,558
Valuation allowance	618,461	2,287,107
Other, net	—	6,994
Total	\$ 10,441,318	\$ (8,610,296)
Federal income taxes incurred	7,211,251	(7,235,801)
Change in net deferred income taxes	3,230,067	(1,374,495)
Total statutory income taxes	\$ 10,441,318	\$ (8,610,296)

E. Operating loss carryforwards:

- (1) The Company has no operating loss carryforwards and no corporate alternative minimum tax (“AMT”) credit carryforwards as of December 31, 2025 or 2024.
- (2) The following are income taxes incurred in the current and prior year(s) that will be available for recoupment in the event of future net losses:

	Ordinary	Capital	Total
2025 \$	7,049,285 \$	— \$	7,049,285
2024	—	—	—
2023	N/A	—	—

- (3) The Company has no protective tax deposits reported as admitted assets under Section 6603 of the Internal Revenue Service Code as of December 31, 2025 and 2024.

F. The following companies will be included in the consolidated federal income tax return with their parent Elevance Health, Inc. (“Elevance Health”) as of December 31, 2025 and either are current members of the consolidated tax sharing agreement or are in the process of being added to the consolidated tax sharing agreement. Allocation of federal income taxes, including corporate AMT, with affiliates subject to the tax sharing agreement is based upon separate income tax return calculations, including separate corporate AMT calculations, with credit for net operating losses and capital losses that can be used on a consolidated basis. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes. Intercompany income tax balances are settled based on the Internal Revenue Service due dates.

Albion Medical Group of Nevada, P.C.	Community Care Health Plan of Nevada, Inc.
Albion Medical Partners of California, P.C.	Community Insurance Company
Albion Medical Partners of California West, P.C.	Compcare Health Services Insurance Corporation
Albion Medical Partners of Illinois, S.C.	Crossroads Acquisition Corp.
Alliance Care Management, LLC	DeCare Analytics, LLC
Amerigroup Mississippi, Inc.	DeCare Dental Health International, LLC
Amerigroup Pennsylvania, Inc.	DeCare Dental Networks, LLC
AMGP Georgia Managed Care Company, Inc.	DeCare Dental, LLC
Anthem Benefits Agency, Inc.	Designated Agent Company, Inc.
Anthem Blue Cross Life and Health Insurance Company	Elevance Health, Inc
Anthem Financial, Inc.	Elevance Health Information Technology Services, Inc.
Anthem HealthChoice Assurance, Inc.	ELV Holding Company 2, LLC
Anthem HealthChoice HMO, Inc.	ELV Holding Company 3, LLC
Anthem Health Plans of Kentucky, Inc.	ELV Holding Company 4, LLC
Anthem Health Plans of Maine, Inc.	Federal Government Solutions, LLC
Anthem Health Plans of New Hampshire, Inc.	Freedom Health, Inc.
Anthem Health Plans of Virginia, Inc.	Freedom SPV, Inc.
Anthem Health Plans, Inc.	Golden West Health Plan, Inc.
Anthem Holding Corp.	Granular Insurance Company
Anthem HP, LLC	GranularRe, Inc.
Anthem Insurance Companies, Inc.	HaloCare Specialty Therapeutics, LLC
Anthem Kentucky Managed Care Plan, Inc.	Healthkeepers, Inc.
Anthem Southeast, Inc.	HealthLink Administrators, Inc.
APR, LLC	HealthLink, Inc.
Arcus Enterprises, Inc.	HealthSun Health Plan, Inc.
Associated Group, Inc.	Healthy Alliance Life Insurance Company
AUMSI UM Services, Inc.	HMO Colorado, Inc.
BioPlus Parent, LLC	HMO Missouri, Inc.

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NOTES TO FINANCIAL STATEMENTS

BioPlus Specialty Holding Company, LLC	IEC Group Holdings, Inc.
BioPlus Specialty Infusion Holdings, Inc.	IEC Group, Inc. d/b/a AmeriBen
BioPlus Specialty Pharmacy Holdings, Inc.	Innovative Pharmacy Services, LLC
BioPlus Specialty Pharmacy Holdings I, Inc.	LDNR Pharmacy, Inc.
BioPlus Specialty Pharmacy Holdings II, Inc.	Living Complete Technologies, Inc.
BioPlus Specialty Pharmacy, Inc.	Massachusetts Behavioral Health Partnership
BioPlus Specialty Pharmacy LA, LLC	Matthew Thornton Health Plan, Inc.
Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	Missouri Care, Incorporated
Blue Cross Blue Shield of Wisconsin	Nash Holding Company, LLC
Blue Cross of California	National Government Services, Inc.
Blue Cross of California Partnership Plan, Inc.	New England Research Institutes, Inc.
Capricorn Holdco, Inc.	Optimum Healthcare, Inc.
Carebridge Holding Company, LLC	OPTIONS Health Care, Inc.
Carelon Behavioral Care, Inc.	Paragon Healthcare, Inc.
Carelon Behavioral Health Holdings, Inc.	Paragon Holding Company, LLC
Carelon Behavioral Health, Inc.	Paragon Infusion Care Inc.
Carelon Behavioral Health IPA, Inc.	Pathwrite, Inc.
Carelon Behavioral Health of California, Inc.	PHI Parent, LLC
Carelon Behavioral Health Strategies IPA, LLC	RightCHOICE Managed Care, Inc.
Carelon Digital Platforms, Inc.	Rocky Mountain Hospital and Medical Service, Inc.
Carelon Global Solutions U.S., Inc.	RSV QOZB LTSS, Inc.
Carelon Health Federal Services, Inc.	SellCore, Inc.
Carelon Health, Inc.	Simply Healthcare Plans, Inc.
Carelon Health IPA of California	Southeast Services, Inc.
Carelon Health IPA of New York, Inc.	State Sponsored Services, Inc.
CareMore Health of Arizona, Inc.	The Elevance Health Companies, Inc.
CareMore Health of California, Inc.	The Elevance Health Companies of California, Inc.
Carelon Health of Nevada, Inc.	WellPoint California Services, Inc.
Carelon Health of New Jersey, Inc.	Wellpoint Corporation
Carelon Health of Pennsylvania, Inc.	Wellpoint Delaware, Inc.
Carelon Health Solutions, Inc.	WellPoint Dental Services, Inc.
Carelon Holdings I, Inc.	Wellpoint District of Columbia, Inc.
Carelon, Inc.	WellPoint Federal Corporation
Carelon Insights, Inc.	WellPoint Health Solutions, Inc.
Carelon Management Services, LLC	WellPoint Holding Corporation
Carelon Medical Benefits Management, Inc.	Wellpoint Illinois Services, Inc.
Carelon Medical Partners, P.C.	Wellpoint Insurance Company
Carelon Medical Partners of Arizona, P.C.	WellPoint Insurance Services, Inc.
Carelon Medical Partners of Colorado, P.C.	Wellpoint Iowa, Inc.
Carelon Medical Partners of Kansas, P.A.	Wellpoint IPA Holding Company, Inc.
Carelon Medical Partners of New York, P.C.	Wellpoint Life and Health Insurance Company
Carelon Medical Partners of North Carolina, P.C.	Wellpoint Maryland, Inc.
Carelon Medical Partners of Texas, P.A.	Wellpoint National Services, Inc.
Carelon Palliative Care, Inc.	Wellpoint New Jersey, Inc.
Carelon Research, Inc.	Wellpoint New Mexico, Inc.
CarelonRx, Inc.	Wellpoint Health Plans, Inc.
CarelonRx Pharmacy, Inc.	Wellpoint South Carolina, Inc.
Caremax Pharmacy of Loudon, Inc.	Wellpoint Specialty Services, Inc.
Centers Plan for Healthy Living LLC	Wellpoint Tennessee, Inc.
Cerulean Companies, Inc.	Wellpoint Texas, Inc.
Colorado State Infusion, Inc.	Wellpoint Washington, Inc.
Community Care Health Plan of Kansas, Inc.	Wellpoint West Virginia, Inc.
Community Care Health Plan of Nebraska, Inc.	WestCare, Inc.

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.
NOTES TO FINANCIAL STATEMENTS

I. Alternative Minimum Tax (AMT) Credit

The corporate alternative minimum tax (“CAMT”) is imposed at a rate of 15% on the adjusted financial statement income (“AFSI”) and is applicable only to corporations with average AFSI exceeding \$1.0 billion over a three year period. The applicability of the CAMT is determined on a tax-controlled group basis.

The Company is a member of a tax-controlled group of corporations. The Company does not expect to be subject to CAMT in 2025.

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

A. Nature of the Relationship

The Company is a New Jersey domiciled stock insurance company and is a wholly-owned subsidiary of Wellpoint Corporation (“WLP”). WLP is a wholly-owned subsidiary of ATH Holding Company, LLC (“ATH Holding”), which is an indirect wholly-owned subsidiary of Elevance Health, a publicly traded company.

B. Significant Transactions for Each Period

There were no significant transactions during the years ended December 31, 2025 and 2024.

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

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

D. Amounts Due to or from Related Parties

At December 31, 2025 and 2024, the Company reported no amounts due from affiliates. At December 31, 2025 and 2024, the Company reported \$10,100,860 and \$15,268,948 due to affiliates, respectively. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. Management and Service Contracts and Cost Sharing Arrangements

The Company has entered into administrative services agreements with its affiliated companies. Pursuant to these agreements, various administrative, management and support services are provided to or provided by the Company. The costs and expenses related to these administrative management and support services are allocated to or allocated by the Company in an amount equal to the direct and indirect costs and expenses incurred in providing these services. Costs include expenses such as salaries, employee benefits, information technology, pharmacy benefits administration, health care management services, communications, advertising, consulting services, rent, utilities, billing, accounting, underwriting, and product development, which support the Company’s operations. These costs are allocated based on various utilization statistics. Net payments to affiliated companies pursuant to the above administrative service agreements were \$134,319,676 and \$139,363,369 in 2025 and 2024, respectively.

In January 2023, an affiliate of Elevance Health made an equity investment that resulted in Elevance Health’s minority interest ownership of Liberty Dental. The Company capitated dental claims risk to Liberty Dental and reported \$41,684,935 and \$34,685,253 of capitation as claims expense under this arrangement in 2025 and 2024, respectively.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.
NOTES TO FINANCIAL STATEMENTS

F. Guarantees or Contingencies for Related Parties

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

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

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

H. Amount Deducted for Investment in Upstream Company

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

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

At December 31, 2025 and 2024, the Company did not have investments in affiliates.

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

Not applicable.

K. Investment in a Foreign Insurance Subsidiary

The Company does not have investments in foreign insurance subsidiaries.

L. Investment in Downstream Non-insurance Holding Companies

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

M. All SCA Investments

The Company has no SCA Investments.

N. Investment in Insurance SCAs

The Company does not have investments in Insurance SCAs.

O. SCA or SSAP 48 Entity Loss Tracking

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

11. Debt

A. Capital Notes and Other Debt

The Company had no capital notes or other debt outstanding at December 31, 2025 and 2024.

B. FHLB (Federal Home Loan Bank) Agreements

The Company had no FHLB agreements outstanding at December 31, 2025 and 2024.

C. All Other Debt

The Company had no other debt outstanding at December 31, 2025 and 2024.

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

A. Defined Benefit Plan

Not applicable - See Note 12G.

B. Not applicable - See Note 12G.

C. Not applicable - See Note 12G.

D. Not applicable - See Note 12G.

E. Defined Contribution Plans

Not applicable - See Note 12G.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

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

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

During 2025 and 2024, the Company was allocated the following costs or (credits) for these retirement benefits:

	2025	2024
Defined contribution plan	2,583,979	2,708,332
Stock incentive compensation plan	1,452,472	1,579,824

H. Post Employment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

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

A. Outstanding Shares

As of December 31, 2025, the Company has 1,000 shares of \$0.01 par value common stock authorized, issued and outstanding.

B. Preferred Stock

The Company has no preferred stock outstanding.

C. Dividend Restrictions

Under New Jersey Annotated Statutes 17:27A-4, extraordinary dividends or distributions made within the preceding 12 months exceeds the greater of (i) 10% of such insurer's surplus as regards policyholders as of December 31 next preceding, or (ii) the net income, not including realized capital gains, for the 12-month period ending December 31 next preceding, but shall not include pro rata distributions of any class of the insurer's own securities.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2025

Within the limitations of (C) above, the Company may pay \$47,493,774 in ordinary dividends during 2026 without restrictions, other than state notification requirements.

F. Unassigned Surplus Restrictions

Unassigned surplus funds are not restricted at December 31, 2025.

G. Mutual Surplus Advances

Not applicable.

H. Company Stock Held for Special Purpose

There are no shares of stock held for special purposes at December 31, 2025.

I. Changes in Special Surplus Funds

There are no special surplus funds at December 31, 2025.

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment losses was (\$1,378,768) at December 31, 2025.

K. Surplus Notes

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

L. Restatement due to Prior Quasi-reorganizations

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

M. Quasi-reorganizations over Prior 10 Years

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

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company had no contingent commitments at December 31, 2025 or 2024.

B. Assessments

(1) The Company is subject to guaranty fund and other assessments by the state(s) in which it writes business. Guaranty fund assessments are accrued at the time of covered insurer insolvencies. Other assessments are accrued at the time the assessment obligation is incurred.

(2) Not applicable.

(3) Not applicable.

C. Gain Contingencies

The Company has no gain contingencies at December 31, 2025 or 2024.

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

Not applicable.

E. Joint and Several Liabilities

Not applicable.

F. All Other Contingencies

Litigation and regulatory proceedings

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice (“DOJ”) filed a civil lawsuit against Elevance Health, Inc. in the U.S. District Court for the Southern District of New York (the “District Court”) in a case captioned *United States v. Anthem, Inc.* The DOJ’s suit alleges, among other things, that Elevance Health falsely certified the accuracy of the diagnosis data they submitted to the Centers for Medicare and Medicaid Services (“CMS”) for risk-adjustment purposes under Medicare Part C and knowingly failed to delete inaccurate diagnosis codes. The DOJ further alleges that, as a result of these purported acts, Elevance Health caused CMS to calculate the risk-adjustment payments based on inaccurate diagnosis information, which enabled Elevance Health to obtain unspecified amounts of payments in Medicare funds in violation of the False Claims Act. The DOJ filed an amended complaint in July 2020, alleging the same causes of action but revising some of its factual allegations. In September 2020, Elevance Health filed a motion to transfer the lawsuit to the Southern District of Ohio, a motion to dismiss part of the lawsuit, and a motion to strike certain allegations in the amended complaint, all of which the District Court denied in October 2022. In November 2022, Elevance Health filed an answer. In March 2023, discovery commenced. Fact and expert discovery are ongoing with current completion deadlines of June 30, 2026, and March 8, 2027, respectively. Elevance Health intends to continue to vigorously defend this suit, which

they believe is without merit; however, the ultimate outcome cannot be presently determined.

Other Contingencies

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

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

The Company has no other known material contingencies.

Provisions for uncollectible amounts

At December 31, 2025 and 2024, the Company reported admitted assets of \$33,199,264 and \$46,641,137, respectively, in premium receivables and receivables due from uninsured plans. These receivables are not deemed to be uncollectible, therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company’s financial condition.

15. Leases

A. Lessee Operating Lease

- (1) The Company leases office space, office equipment, EDP equipment, and software under various noncancelable operating leases. Certain leases have the right to renew. There are no escalation clauses for any lease. Related lease expense for 2025 and 2024 was \$1,199,445 and \$727,493, respectively.

The Company reevaluated its future office space needs and determined that it would permanently cease use of space under certain operating leases. At December 31, 2025 and 2024, the Company has lease exit costs liabilities of \$58,321 and \$1,015,248 respectively.

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NOTES TO FINANCIAL STATEMENTS

(2) At December 31, 2025, the minimum aggregate rental commitments are as follows:

	Year Ending December 31	Operating Leases
1.	2026	\$ 892,895
2.	2027	898,027
3.	2028	870,170
4.	2029	891,924
5.	2030	914,222
6.	Thereafter	—
7.	Total (sum of 1 through 6)	<u>\$ 4,467,238</u>

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

B. Lessor Leases

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

(2) The Company has not entered into any leveraged leases.

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

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

Financial instruments that potentially subject the Company to concentrations of credit risk consist primarily of investment securities. All investment securities are managed by professional investment managers within policies authorized by the board of directors. Such policies limit the amounts that may be invested in any one issuer and prescribe certain investee company criteria. As of December 31, 2025, there were no significant concentrations.

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

A. Transfers of Receivables Reported as Sales

Not applicable at December 31, 2025 and 2024.

B. Transfer and Servicing of Financial Assets

(1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At December 31, 2025 the fair value of securities loaned was \$15,331,817 and the carrying value of securities loaned was \$15,120,152.

(2) - (7) Not applicable.

C. Wash Sales

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

(2) At December 31, 2025 and 2024, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

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

A. Administrative Services Only ("ASO") Plans

The gain or (loss) from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2025 was:

	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative expenses (including administrative fees) in excess of (less than) actual expenses	\$ (3,552,909)	\$ —	\$ (3,552,909)
b. Total net other income or expenses (including interest paid to or received from plans)	—	—	—
c. Net gain or (loss) from operations	\$ (3,552,909)	\$ —	\$ (3,552,909)
d. Total claim payment volume	\$ 171,638,136	\$ —	\$ 171,638,136

B. Administrative Services Contract ("ASC") Plans

Not applicable at December 31, 2025.

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

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

(2)

Receivable from	Related to	2025	2024
Federal government	ACA and Medicare cost sharing and reinsurance programs	\$ 148,653	\$ 6,559,160

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

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

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

No premiums were written by managing general agents or third party administrators during the years ended December 31, 2025 and 2024.

20. Fair Value Measurements

A.
(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds					
Issuer credit obligations	\$ —	\$ 1,923,548	\$ —	\$ —	\$ 1,923,548
Asset-backed securities	—	1,548,633	—	—	1,548,633
Total bonds	\$ —	\$ 3,472,181	\$ —	\$ —	\$ 3,472,181
Cash equivalents					
Industrial and miscellaneous money market funds	\$ 62,342,376	\$ —	\$ —	\$ —	\$ 62,342,376
Total cash equivalents	\$ 62,342,376	\$ —	\$ —	\$ —	\$ 62,342,376
Total assets at fair value/NAV	\$ 62,342,376	\$ 3,472,181	\$ —	\$ —	\$ 65,814,557

- (2) There are no investments in Level 3 as of December 31, 2025 and 2024.
- (3) The Company’s policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.
- (4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2025 and 2024.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Issuer credit obligations	\$ 410,486,500	\$ 411,419,776	\$ —	\$ 409,607,338	\$ 879,162	\$ —	\$ —
Asset-backed securities	63,181,477	63,441,838	—	63,181,477	—	—	—
Cash equivalents	64,742,376	64,742,376	62,342,376	2,400,000	—	—	—
Securities lending collateral asset	15,655,362	15,650,571	—	15,655,362	—	—	—

D. Not Practicable to Estimate Fair Value

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

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

A. Unusual or Infrequent Items

Not applicable at December 31, 2025 and 2024.

B. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2025 and 2024.

C. Other Disclosures

Not applicable at December 31, 2025 and 2024.

D. Business Interruption Insurance Recoveries

The Company has reported no recoveries for business interruption for the years ended December 31, 2025 and 2024.

E. State and Federal Tax Credits

The Company did not have state or federal tax credits at December 31, 2025 and 2024.

F. Subprime Mortgage-Related Risk Exposure

- (1) The Company’s investment strategy of providing safety and preservation of capital, sufficient liquidity to meet cash flow requirements and the attainment of a competitive after-tax investment return is supported by a well diversified portfolio consisting of many different types of investments. The portion of the Company’s investment portfolio with subprime mortgage-related risk exposure is relatively small in comparison to the overall investment portfolio, and consists of investment grade securities with no exposure to collateralized debt obligations. All mortgage related investments are monitored closely as part of the quarterly investment review performed by the Elevance Health Investment Impairment Review Committee.
- (2) The Company did not carry investments in subprime mortgage loans in its portfolio at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(3) At December 31, 2025, the Company’s subprime mortgage-related risk exposure is detailed below:

	Actual Cost	Book/ Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a. Asset-backed securities	\$ 1,912,184	\$ 2,024,380	\$ 1,798,717	\$ —
b. Collateralized loan obligations	—	—	—	—
c. Equity investments in SCAs*	—	—	—	—
d. Other assets	—	—	—	—
e. Total	\$ 1,912,184	\$ 2,024,380	\$ 1,798,717	\$ —

(4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2025 or 2024.

G. Retained Assets

The Company does not have retained assets at December 31, 2025 and 2024.

H. Insurance-Linked Securities Contracts

Not applicable.

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

Not applicable.

22. Events Subsequent

Subsequent events have been considered through February 26, 2026 for the statutory statement issued on February 27, 2026. There were no other events occurring subsequent to December 31, 2025 requiring recognition or disclosure.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

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

Yes () No (X)

If yes, give full details.

(2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled, directly or indirectly, by an insured, a

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.
NOTES TO FINANCIAL STATEMENTS

beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

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

Yes () No (X)

If yes, give full details.

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

Yes () No (X)

If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

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

Not applicable.

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

Yes () No (X)

If yes, give full details.

B. Uncollectible Reinsurance

The Company has no uncollectible reinsurance at December 31, 2025 and 2024.

C. Commutation of Ceded Reinsurance

The Company has not commuted ceded reinsurance during 2025 and 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.
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D. Certified Reinsurer Rating Downgraded or Status Subject Revocation

The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2025 and 2024.

E. Reinsurance Credit

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. The Company sells accident and health policies for which the premiums vary based on loss experience. The Company estimates retrospective premium adjustments through the review of each retrospectively rated account, comparing the claim development with that anticipated in the policy contracts.
- B. The Company records accrued retrospective premium as an adjustment to earned premium.
- C. The amount of net premiums written by the Company at December 31, 2025 and 2024 that were subject to retrospective rating features was \$2,480,497,653 and \$2,355,253,833, respectively, which represented 100.0% and 100.0%, respectively, of the total net premiums written.

D. Not applicable.

E. Risk-Sharing Provisions of the ACA

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)? No

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

Not applicable.

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

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. The estimated cost of claims and claim adjustment expense attributable to insured events of prior years increased by \$4,450,995 during 2025. This is approximately 2.1% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$212,893,821 as of December 31, 2024. The deficiency reflects the increases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2025. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

26. Intercompany Pooling Arrangements

A. Not applicable at December 31, 2025 and 2024.

27. Structured Settlements

Not applicable at December 31, 2025 and 2024.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2025	\$ 4,427,045	\$ 17,666,077	\$ 13,239,032	\$0	\$0
9/30/2025	5,805,269	17,257,105	17,121,796	0	0
6/30/2025	5,742,119	16,198,518	15,957,749	240,769	0
3/31/2025	4,127,735	11,156,470	10,981,769	174,701	0
12/31/2024	\$ 5,437,423	\$ 17,467,618	\$ 17,324,665	\$ 142,952	\$0
9/30/2024	5,257,874	16,588,037	16,465,689	122,348	0
6/30/2024	5,239,812	15,715,400	15,615,710	99,690	0
3/31/2024	4,503,937	14,847,202	14,723,618	123,584	0
12/31/2023	\$ 5,518,736	\$ 17,017,808	\$ 16,873,939	\$ 143,868	0
9/30/2023	6,083,695	18,059,022	17,893,621	165,401	0
6/30/2023	5,761,165	16,434,871	16,338,392	96,479	0
3/31/2023	6,522,325	15,606,806	15,360,584	246,222	0

Note: Amounts within column "Estimated pharmacy rebates as reported on financial statements" include \$0 of uninsured admitted pharmacy rebate receivables at December 31, 2025 that are reported within Pg 2, Ln 17 "Amounts receivable relating to uninsured plans."

B. Risk Sharing Receivables

Not applicable at December 31, 2025 and 2024.

C. Other Health Care Receivables

- (1) Amounts included in other health care receivables which are recoverable from participants in Medicare Part D Prescription Payment Plan for the current reporting period \$ 6,761.
- (2) Aging of other health care receivables which are due from participant in Medicare Part D Prescription Payment Plan.

Name of Plan	1	2	3	4	5	6	7
	Current Period Gross*	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Medicare Prescription Payment Plan Recoverables	\$ 6,761	\$ 5,029	\$ 285	\$ 254	\$ 1,193	\$ —	\$ 6,761

• represents the Assets Page Column 1, included within Line 24 before nonadmission

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

NOTES TO FINANCIAL STATEMENTS

(3) Incurred claims expense includes write-offs of impaired Medicare Prescription Payment Plan receivables of \$0 for 2025.

29. Participating Policies

Not applicable at December 31, 2025 and 2024.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$	—
2. Date of the most recent evaluation of this liability	December 31, 2025	
3. Was anticipated investment income utilized in the calculation?	Yes	No X

The Company recorded premium deficiency reserves of \$10,779,697 at December 31, 2024

31. Anticipated Salvage and Subrogation

The Company took into account estimated anticipated subrogation and other recoveries in its determination of the liability for unpaid claims and reduced the liability by \$895,064 and \$457,127 at December 31, 2025 and 2024, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [X] No [] N/A []

1.3

State Regulating?

New Jersey

1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [X] No []

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0001156039

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2022

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2022

3.3

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

06/25/2024

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 [X]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [] No [] N/A [X]

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?
4.12 renewals?

Yes [] No [X]
Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

Yes [] No [X]
Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes [] No [X]

5.2

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

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

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

6.2

If yes, give full information
.....

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

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

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint 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 [] No [X]
- 8.4

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

.....

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

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes [] No [X]
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?

Yes [] No [X] N/A []
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? Ernst & Young, 835 N College Ave Suite 1125, Indianapolis 46204

.....
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]
- 10.2

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

.....
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]
- 10.4

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

.....
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [X] No [] N/A []
- 10.6

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

.....
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Christopher S. Gorton, ASA, MAAA, Associate Actuary (employee), 115 Great Brook Rd., New Milford, CT 06776

.....
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [] No [X]
- 12.11

Name of real estate holding company ...

.....
- 12.12

Number of parcels involved

.....
- 12.13

Total book/adjusted carrying value

\$
- 12.2

If yes, provide explanation

.....
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

.....
- 13.1

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

.....
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A [X]
- 14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [X] No []
- a.

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

.....
- b.

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

.....
- c.

Compliance with applicable governmental laws, rules and regulations;

.....
- d.

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

.....
- e.

Accountability for adherence to the code.

.....
- 14.11

If the response to 14.1 is No, please explain:

.....
- 14.2

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s). 1.Added a new section on mobile devices, stating that Elevance Health has the right to physically access any personal device used for company business to inspect, review, and collect company information.2.Strengthened language on secondary employment, emphasizing its potential to distract from associates' primary responsibilities and misappropriate compensation from Elevance Health. This also includes a reminder about conducting secondary employment/external activities such as freelancing, public speaking, and contributions to external publications.3.Introduced a new section on the Enterprise Firewall policy to ensure the proper use and disclosure of Competitively Sensitive Information within the Elevance Health family of companies 4.Included a Q&A on conference fees and clarified that all cash gifts must be declined. 5.Added language mandating that all Artificial Intelligence, machine learning, and large language models must be developed and/or used in accordance with the Enterprise AI policy. 6.Revised sections of the Code to comply with Section 508 of the Rehabilitation Act, ensuring individuals with disabilities have equal access to electronic information and data comparable to those without disabilities.

.....
- 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

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

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

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

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 []

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

GENERAL INTERROGATORIES

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

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

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions.15,650,571

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 [X] No [] N/A []

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

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

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

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 215,655,362

25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 215,650,571

25.093 Total payable for securities lending reported on the liability page15,650,571

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 agreements0

26.22 Subject to reverse repurchase agreements2,400,000

26.23 Subject to dollar repurchase agreements0

26.24 Subject to reverse dollar repurchase agreements0

26.25 Placed under option agreements0

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock0

26.27 FHLB Capital Stock0

26.28 On deposit with states342,015,923

26.29 On deposit with other regulatory bodies0

26.30 Pledged as collateral - excluding collateral pledged to an FHLB0

26.31 Pledged as collateral to FHLB - including assets backing funding agreements0

26.32 Other0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

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

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

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

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

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

27.41 Special accounting provision of SSAP No. 108Yes [] No []

27.42 Permitted accounting practiceYes [] No []

27.43 Other accounting guidanceYes [] 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:

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
JP Morgan Chase Bank, N.A	383 Madison Ave, New York, NY 10179

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint 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	2	3
Name(s)	Location(s)	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	2	3	4
Old Custodian	New Custodian	Date of Change	Reason

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

1	2
Name of Firm or Individual	Affiliation
Elevance Health, Inc.	I.....
Loomis, Sayles & Company, LP	U.....
Pacific Investment Management Company	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 [] N/A []

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 [] N/A []

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

1	2	3	4
Central Registration Depository Number	Name of Firm or Individual	Registered With	Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	Securities Exchange Commission	NO.....
104559	Pacific Investment Management Company	Securities Exchange Commission	NO.....

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

30.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

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 Issuer Credit Obligations	413,819,776	412,886,500	(933,276)
31.2 Asset-Backed Securities	63,441,838	63,181,477	(260,361)
31.3 Preferred stocks	0		0
31.4 Totals	477,261,614	476,067,977	(1,193,637)

31.5 Describe the sources or methods utilized in determining the fair values:
Fair values were obtained from third-party pricing sources. If a security was not priced by a third-party pricing source, internal analytical systems or broker quotes were utilized.

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

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 [X] No []

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

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

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

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

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
a. The security was either:
i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

GENERAL INTERROGATORIES

- 38.1

Does the reporting entity directly hold cryptocurrencies?

Yes [] No [X]
- 38.2

If the response to 38.1 is yes, on what schedule are they reported?
.....
- 39.1

Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?

Yes [] No [X]
- 39.2

If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
39.21 Held directly Yes [] No []
39.22 Immediately converted to U.S. dollars Yes [] No []
- 39.3

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

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

OTHER

- 40.1

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

\$0
- 40.2

List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.
- | 1 | 2 |
|------|-------------|
| Name | Amount Paid |
| | |
- 41.1

Amount of payments for legal expenses, if any?

\$ 648,236
- 41.2

List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.
- | 1 | 2 |
|------|-------------|
| Name | Amount Paid |
| | |
- 42.1

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

\$ 51,400
- 42.2

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

1	2
Name	Amount Paid
In-House Employee Lobbyists	21,400
Duane Morris Government Affairs	30,000

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

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

2,489,575,821

2,336,037,449

2.2

Premium Denominator

2,489,575,821

2,336,037,449

2.3

Premium Ratio (2.1/2.2)

1.000

1.000

2.4

Reserve Numerator

198,638,829

261,659,327

2.5

Reserve Denominator

198,638,829

261,659,328

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 [X]

5.1

Does the reporting entity have stop-loss reinsurance?

Yes [] No [X]

5.2

If no, explain:
The Company became self insured with regulatory approval effective 7/1/13.

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:
Physician and hospital contracts contain provisions, including hold harmless agreements, to protect members and depedents against insolvency.

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

35,249

8.2

Number of providers at end of reporting year

37,215

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Wellpoint New Jersey, Inc.

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.....\$ 16,037,823

10.22 Amount actually paid for year bonuses.....\$ 15,498,108

10.23 Maximum amount payable withholds.....\$

10.24 Amount actually paid for year withholds.....\$

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, Yes [] No [X]

11.13 An Individual Practice Association (IPA), or, Yes [] No [X]

11.14 A Mixed Model (combination of above)? Yes [] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? Yes [X] No []

11.3 If yes, show the name of the state requiring such minimum capital and surplus. New Jersey

11.4 If yes, show the amount required. \$ 188,542,215

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

New Jersey Net Worth requirement per N.J.A.C. 11:24-11.1 is calculated using premium revenues, uncovered health care expenses, and annual health care expenditures. This is filed in Attachment E.

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

1 Name of Service Area
Atlantic
Bergen
Burlington
Camden
Cape May
Cumberland
Essex
Gloucester
Hudson
Hunterdon
Mercer
Middlesex
Monmouth
Morris
Ocean
Passaic
Salem
Somerset
Sussex
Union
Warren
.....

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 0

*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 gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

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]

FIVE-YEAR HISTORICAL DATA

	1 2025	2 2024	3 2023	4 2022	5 2021
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	647,387,669	620,512,120	751,368,228	773,471,230	675,929,503
2. Total liabilities (Page 3, Line 24)	349,237,850	366,877,010	459,994,973	492,115,355	454,699,806
3. Statutory minimum capital and surplus requirement	188,542,215	178,187,964	183,121,923	0	158,404,977
4. Total capital and surplus (Page 3, Line 33)	298,149,819	253,635,110	291,373,255	281,355,875	221,229,697
Income Statement (Page 4)					
5. Total revenues (Line 8)	2,489,575,821	2,336,037,449	2,475,457,745	2,358,151,343	1,982,549,867
6. Total medical and hospital expenses (Line 18)	2,195,410,368	2,147,037,552	2,109,230,963	2,014,156,919	1,705,042,918
7. Claims adjustment expenses (Line 20)	83,611,285	87,958,545	99,986,063	95,161,885	92,721,861
8. Total administrative expenses (Line 21)	183,031,727	142,395,874	188,816,071	179,544,754	154,857,834
9. Net underwriting gain (loss) (Line 24)	38,302,138	(52,134,219)	77,424,648	69,287,785	29,927,254
10. Net investment gain (loss) (Line 27)	15,904,895	6,352,332	18,008,257	9,964,065	7,273,061
11. Total other income (Lines 28 plus 29)	955,842	1,150,187	1,417,583	1,195,075	1,538,687
12. Net income or (loss) (Line 32)	47,493,774	(38,473,190)	77,146,185	64,806,091	32,030,514
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	67,771,470	(65,490,455)	(22,113,363)	100,426,741	147,094,854
Risk-Based Capital Analysis					
14. Total adjusted capital	298,149,819	253,635,110	291,373,255	281,355,875	221,229,697
15. Authorized control level risk-based capital	79,296,510	74,360,827	75,795,278	76,313,833	69,150,101
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	186,259	199,415	253,862	279,670	268,026
17. Total members months (Column 6, Line 7)	2,315,459	2,598,055	3,239,470	3,258,067	3,116,132
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)	88.2	91.9	85.2	85.4	86.0
20. Cost containment expenses	2.6	2.9	3.0	3.1	3.5
21. Other claims adjustment expenses	0.8	0.9	1.0	0.9	1.1
22. Total underwriting deductions (Line 23)	98.5	102.2	96.9	97.1	98.5
23. Total underwriting gain (loss) (Line 24)	1.5	(2.2)	3.1	2.9	1.5
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	206,015,827	219,673,797	178,066,034	266,240,142	145,148,690
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	208,125,972	237,886,356	201,826,972	230,998,940	180,482,637
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 9 + 15, Col. 1)	0				
27. Affiliated preferred stocks (Sch. D Summary, Line 22, Col. 1)					0
28. Affiliated common stocks (Sch. D Summary, Line 28, Col. 1)					0
29. Affiliated mortgage loans on real estate					
30. All other affiliated					
31. Total of above Lines 26 to 30	0	0	0	0	0
32. Total investment in parent included in Lines 26 to 30 above.					

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

Yes [] No []

If no, please explain:

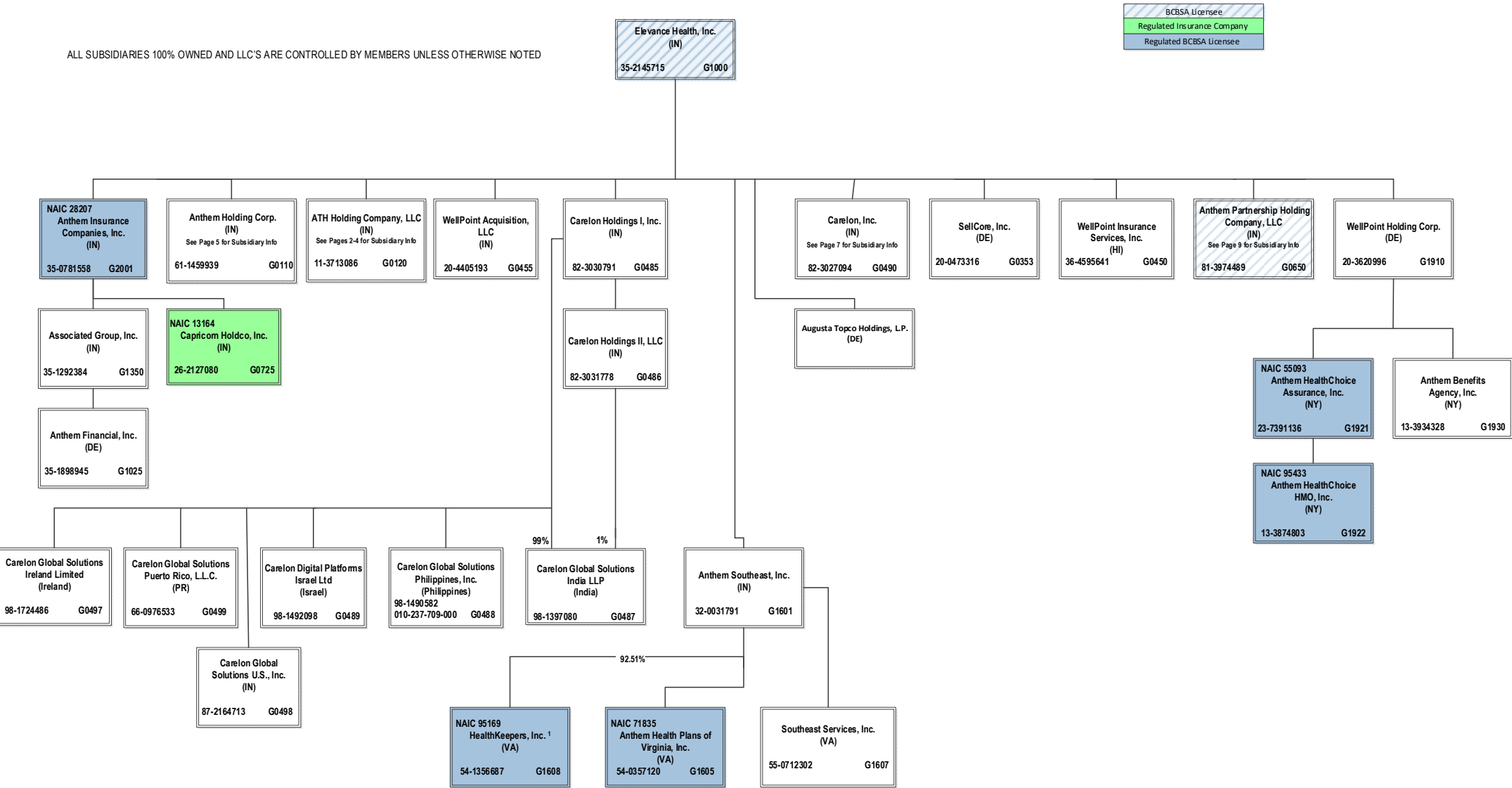
SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories												
			1	Direct Business Only								
				2	3	4	5	6	7	8	9	10
			Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
States, etc.												
1.	Alabama	AL	N								0	
2.	Alaska	AK	N								0	
3.	Arizona	AZ	N								0	
4.	Arkansas	AR	N								0	
5.	California	CA	N								0	
6.	Colorado	CO	N								0	
7.	Connecticut	CT	N								0	
8.	Delaware	DE	N								0	
9.	District of Columbia	DC	N								0	
10.	Florida	FL	N								0	
11.	Georgia	GA	N								0	
12.	Hawaii	HI	N								0	
13.	Idaho	ID	N								0	
14.	Illinois	IL	N								0	
15.	Indiana	IN	N								0	
16.	Iowa	IA	N								0	
17.	Kansas	KS	N								0	
18.	Kentucky	KY	N								0	
19.	Louisiana	LA	N								0	
20.	Maine	ME	N								0	
21.	Maryland	MD	N								0	
22.	Massachusetts	MA	N								0	
23.	Michigan	MI	N								0	
24.	Minnesota	MN	N								0	
25.	Mississippi	MS	N								0	
26.	Missouri	MO	N								0	
27.	Montana	MT	N								0	
28.	Nebraska	NE	N								0	
29.	Nevada	NV	N								0	
30.	New Hampshire	NH	N								0	
31.	New Jersey	NJ	L	0	705,096,259	1,727,620,606	47,780,788				2,480,497,653	
32.	New Mexico	NM	N								0	
33.	New York	NY	N								0	
34.	North Carolina	NC	N								0	
35.	North Dakota	ND	N								0	
36.	Ohio	OH	N								0	
37.	Oklahoma	OK	N								0	
38.	Oregon	OR	N								0	
39.	Pennsylvania	PA	N								0	
40.	Rhode Island	RI	N								0	
41.	South Carolina	SC	N								0	
42.	South Dakota	SD	N								0	
43.	Tennessee	TN	N								0	
44.	Texas	TX	N								0	
45.	Utah	UT	N								0	
46.	Vermont	VT	N								0	
47.	Virginia	VA	N								0	
48.	Washington	WA	N								0	
49.	West Virginia	WV	N								0	
50.	Wisconsin	WI	N								0	
51.	Wyoming	WY	N								0	
52.	American Samoa	AS	N								0	
53.	Guam	GU	N								0	
54.	Puerto Rico	PR	N								0	
55.	U.S. Virgin Islands	VI	N								0	
56.	Northern Mariana Islands	MP	N								0	
57.	Canada	CAN	N								0	
58.	Aggregate other aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59.	Subtotal	XXX		0	705,096,259	1,727,620,606	47,780,788	0	0	0	2,480,497,653	0
60.	Reporting entity contributions for employee benefit plans	XXX									0	
61.	Totals (direct business)	XXX		0	705,096,259	1,727,620,606	47,780,788	0	0	0	2,480,497,653	0
DETAILS OF WRITE-INS												
58001.		XXX										
58002.		XXX										
58003.		XXX										
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX		0	0	0	0	0	0	0	0	0

(a) Active Status Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1
2. R - Registered - Non-domiciled RRGs..... 0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
4. Q - Qualified - Qualified or accredited reinsurer..... 0
5. N - None of the above - Not allowed to write business in the state..... 56

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

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

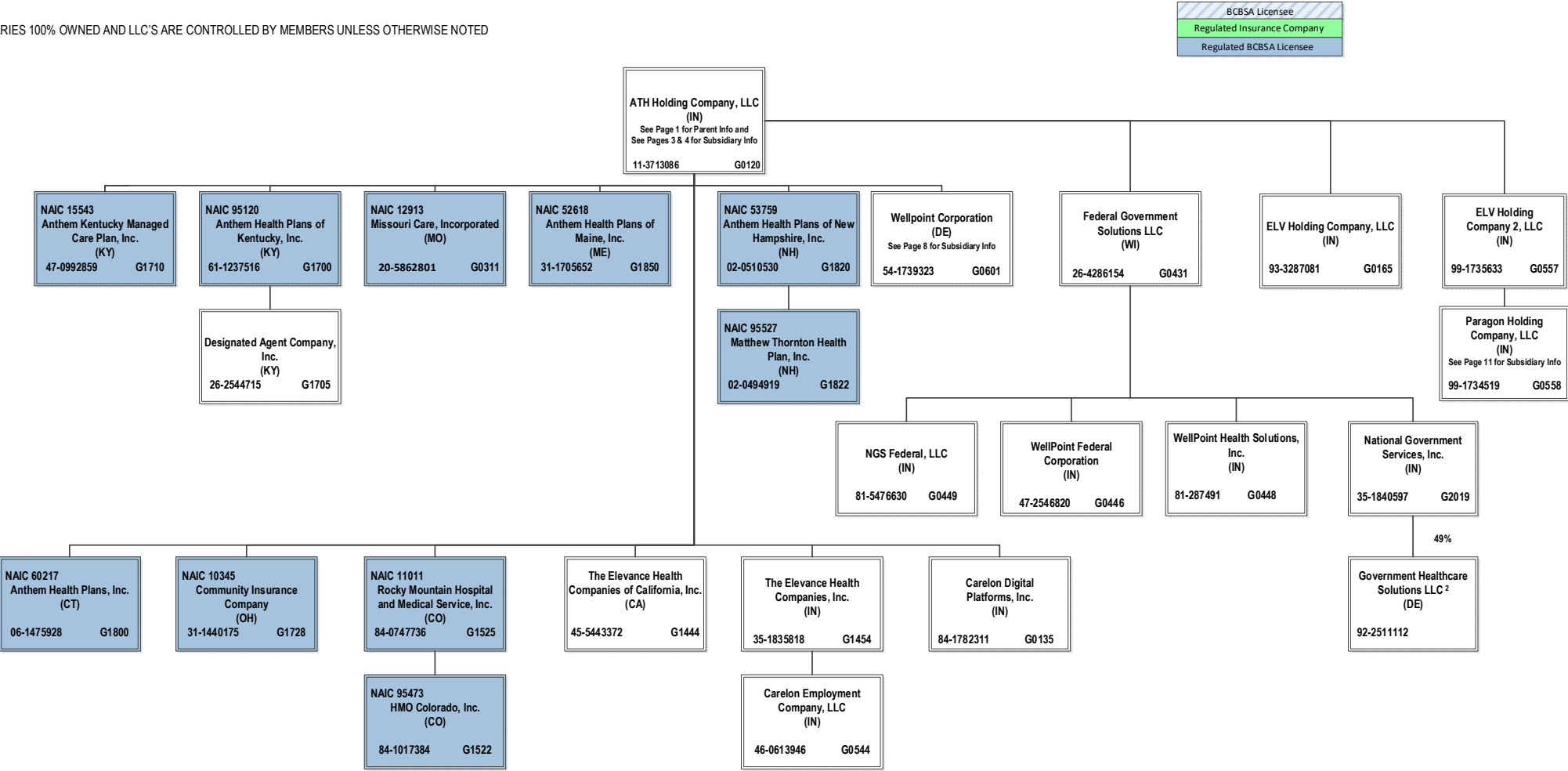


¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

Augusta Topco Holdings, L.P. is owned 39.6% by Elevance Health, Inc. and 60.4% by external entities.

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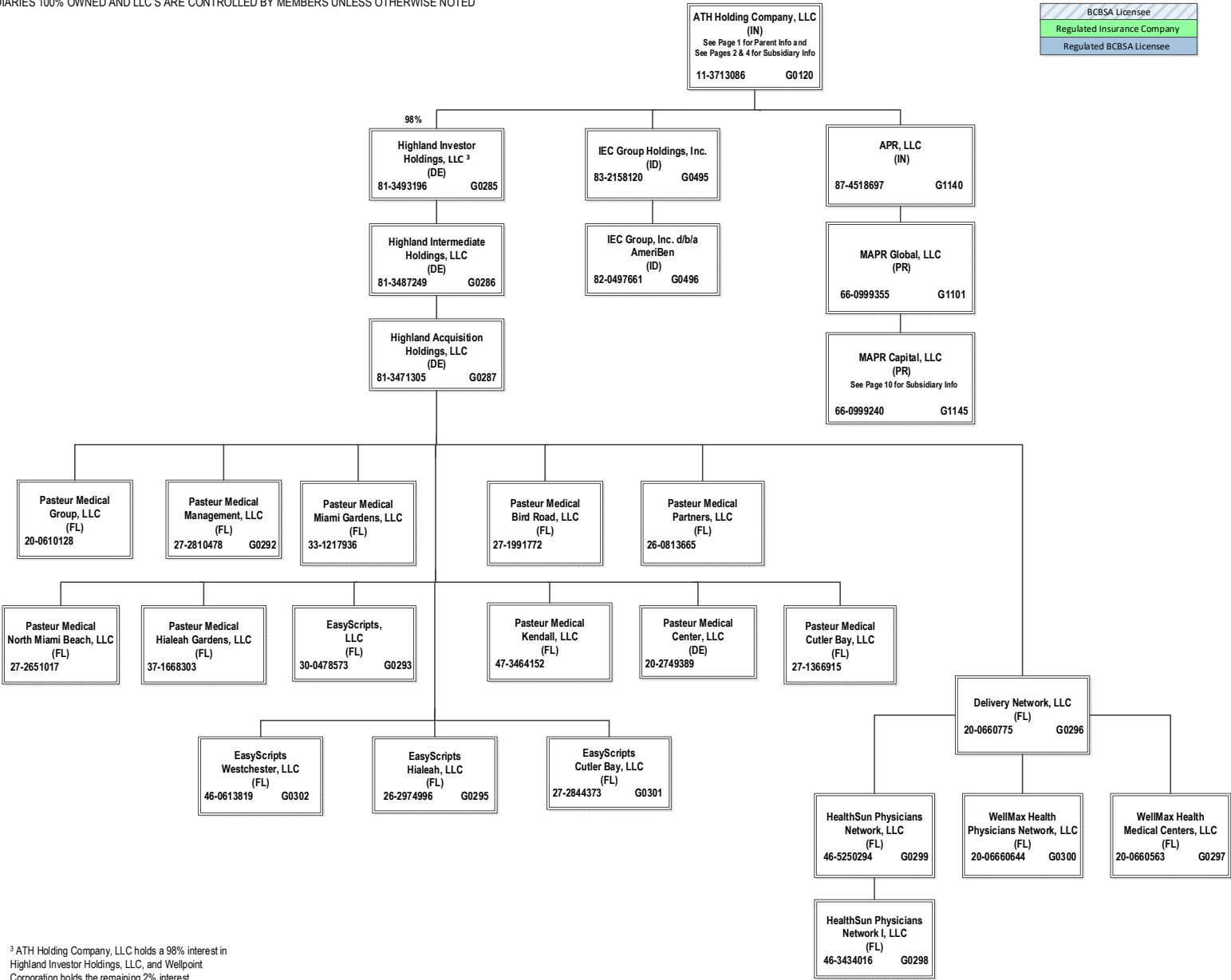
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



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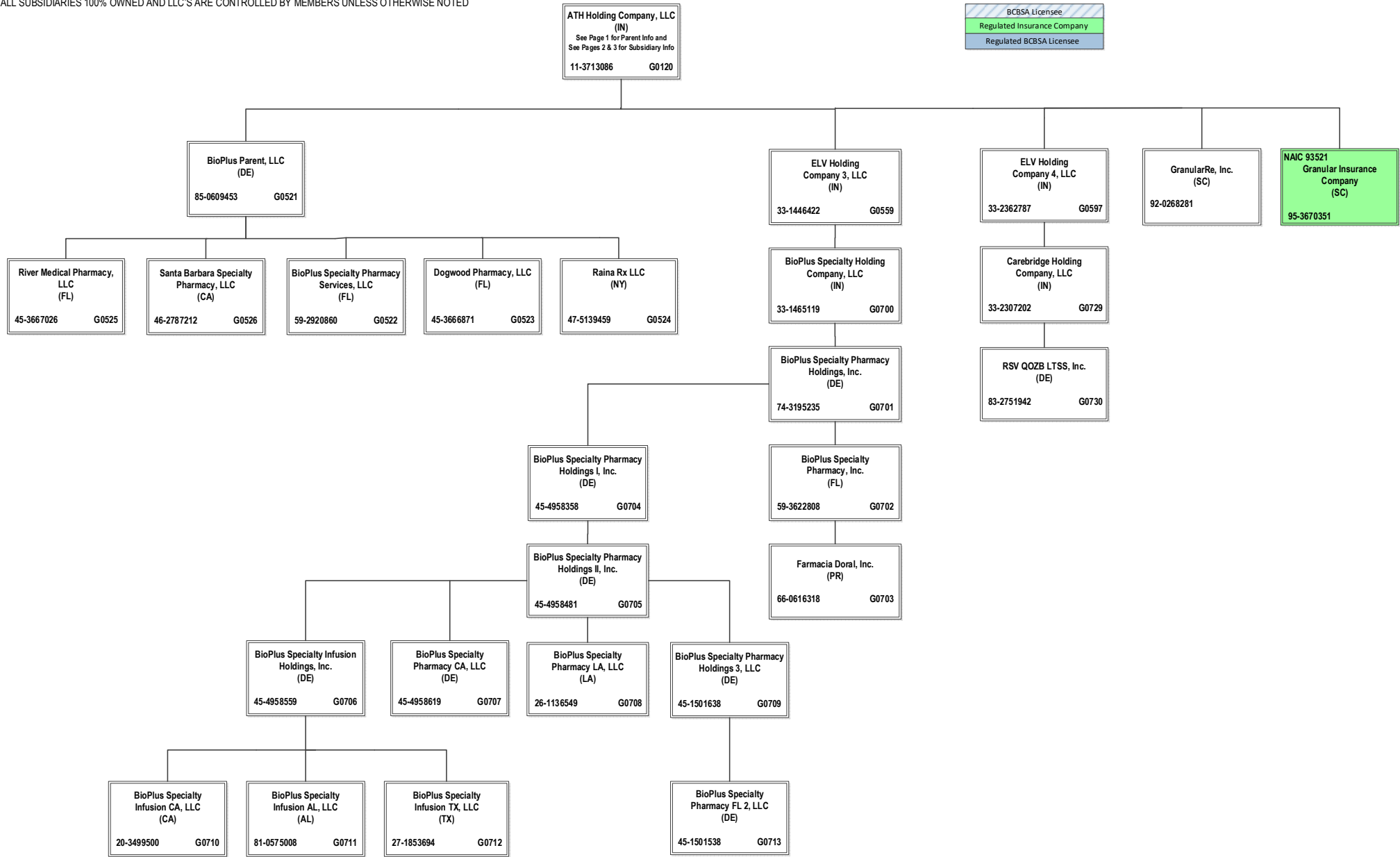
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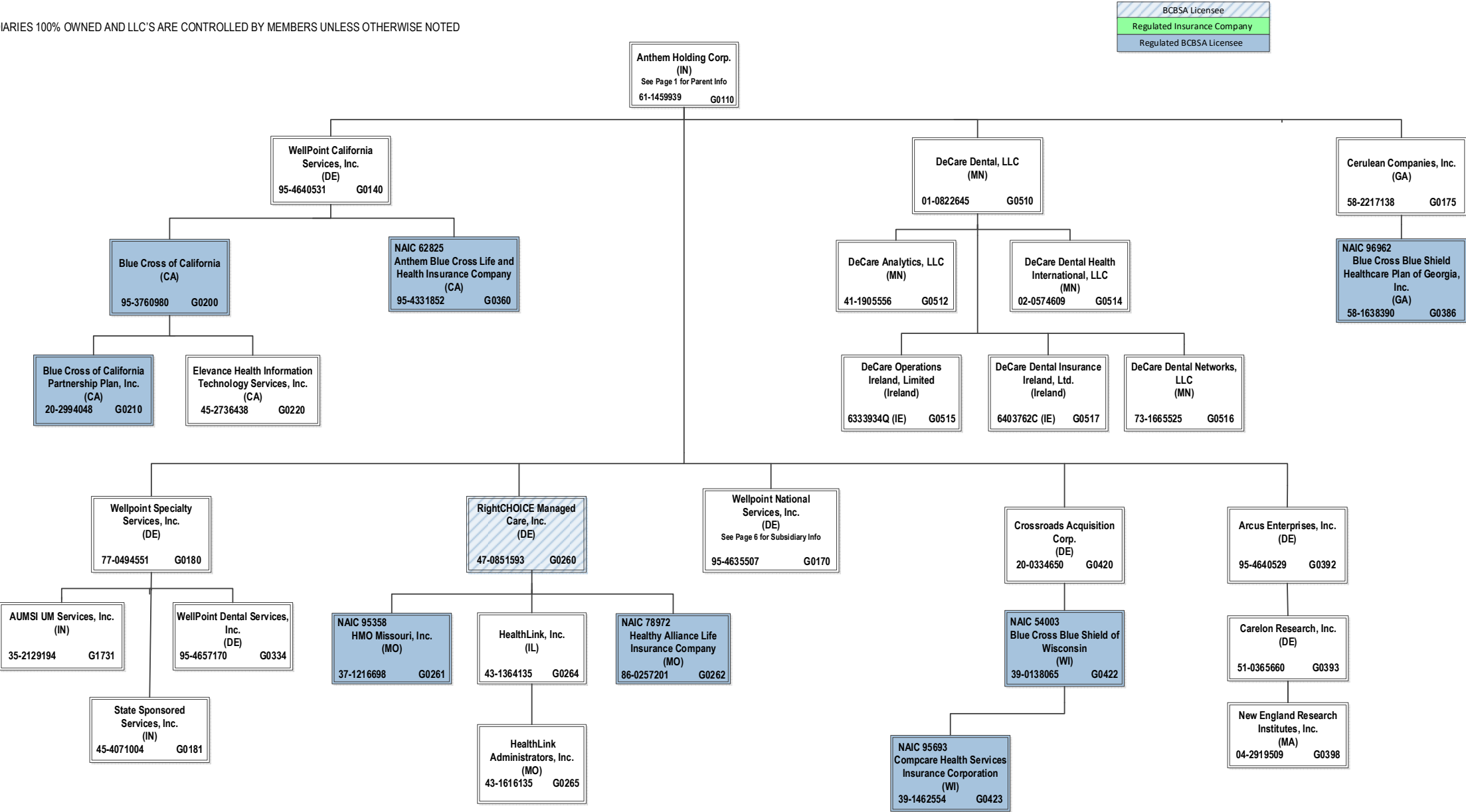
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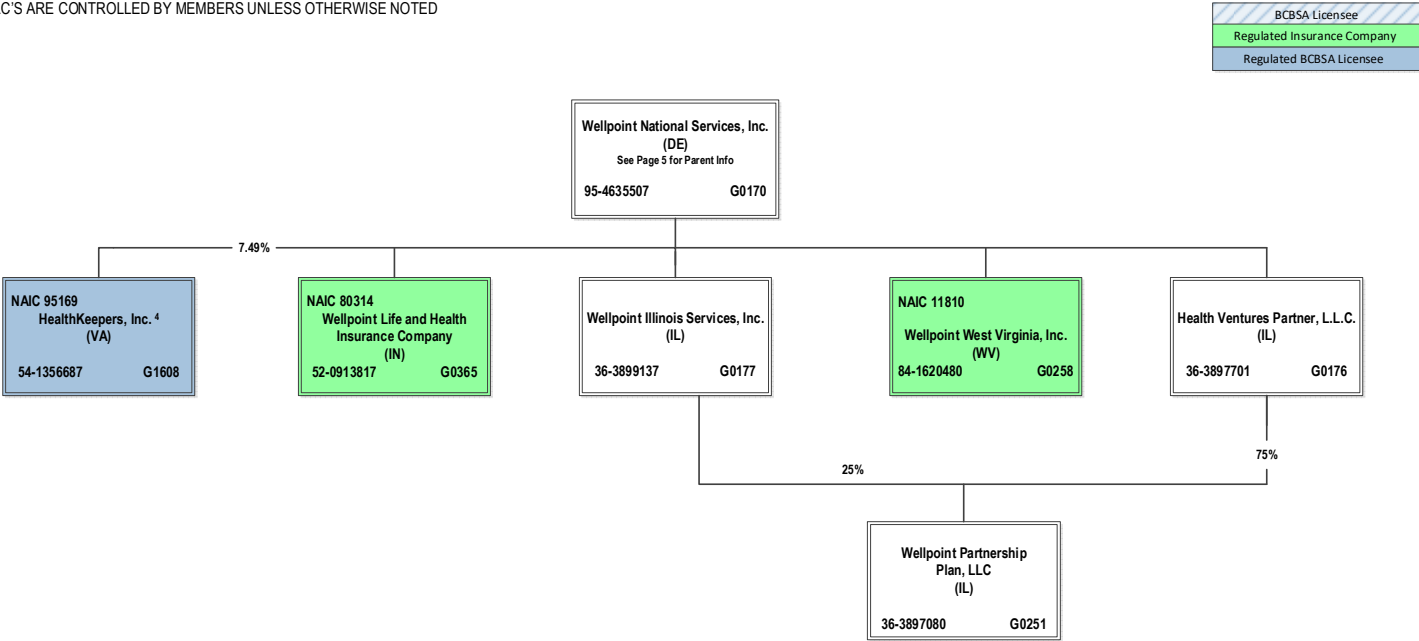
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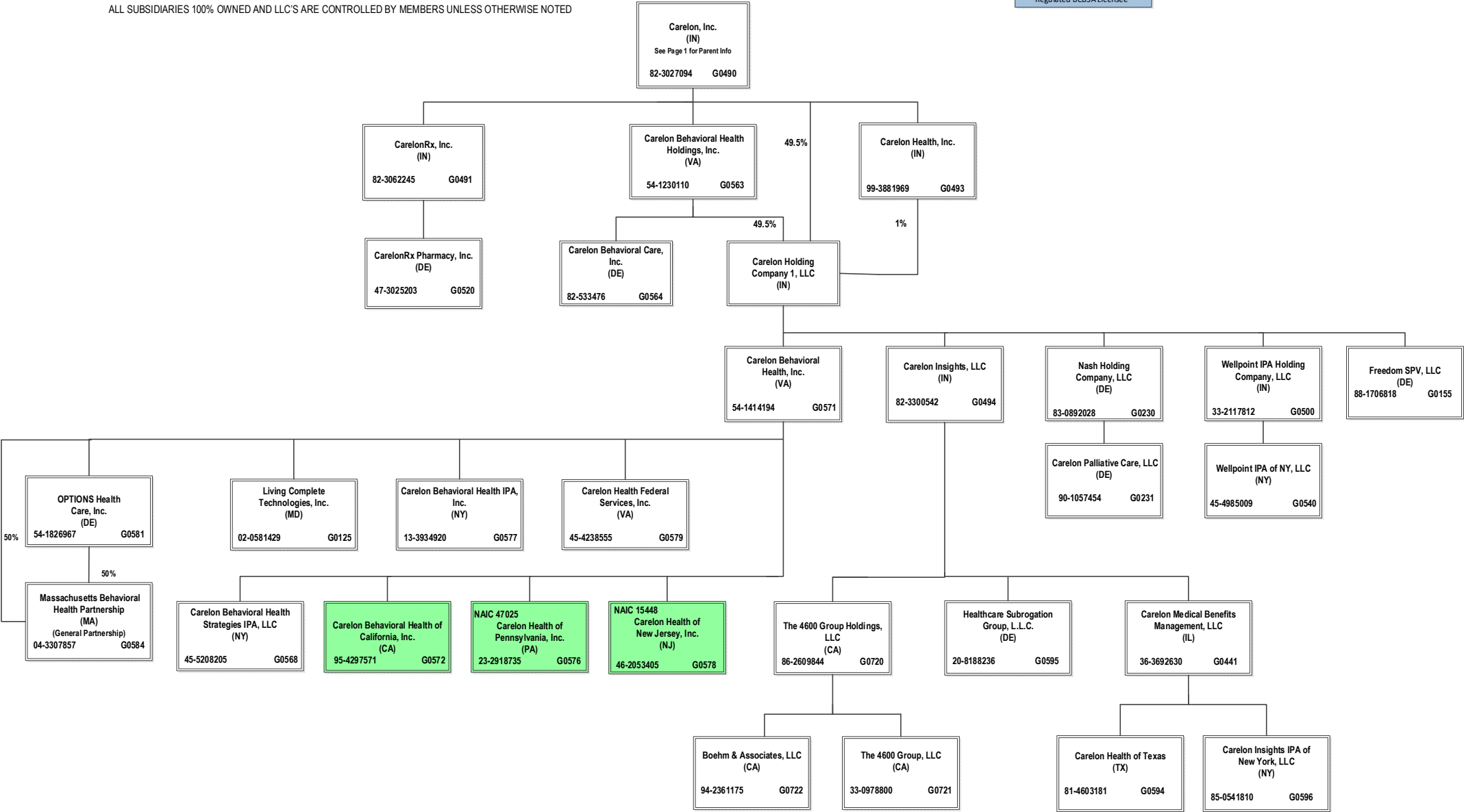
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BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee



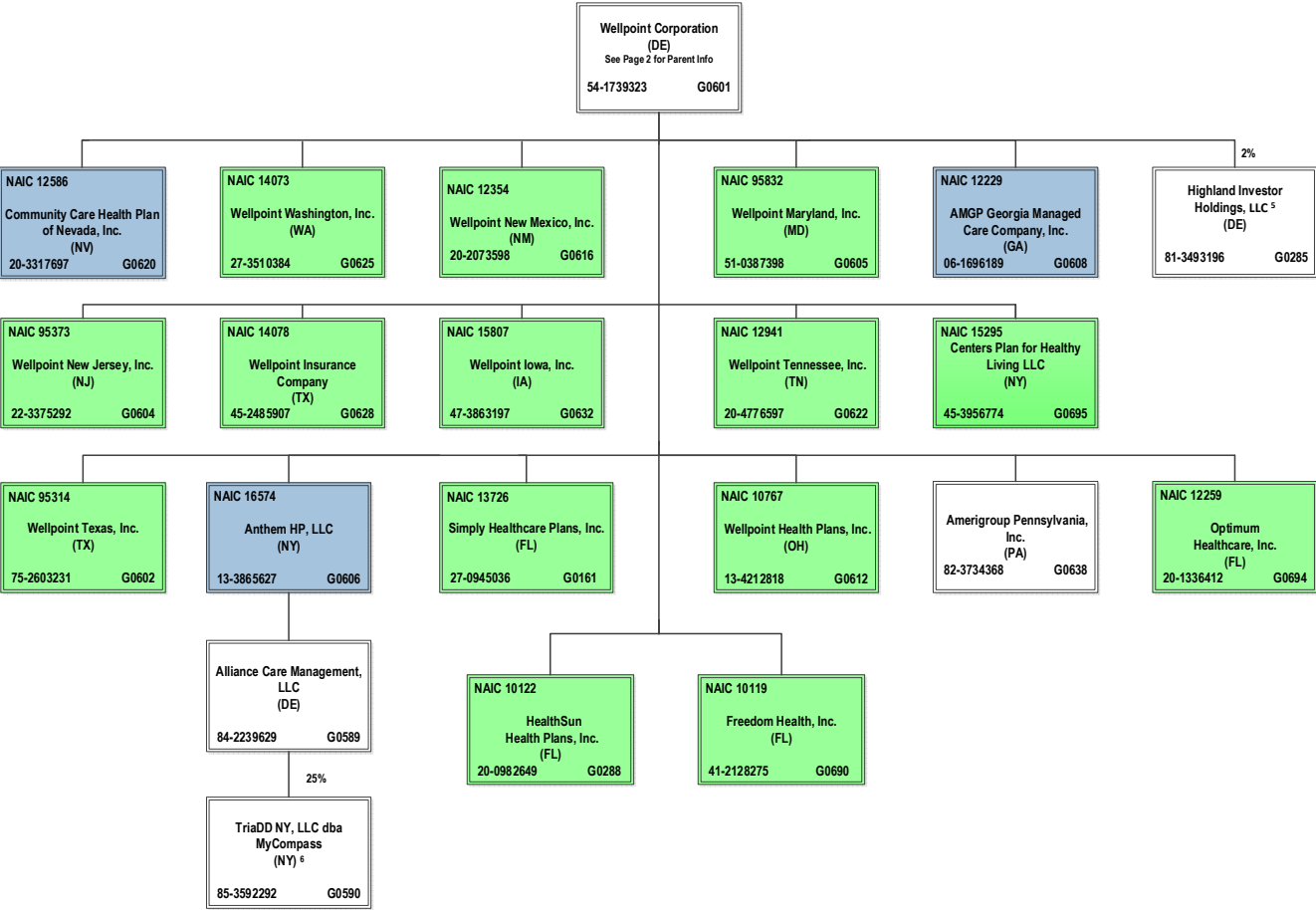
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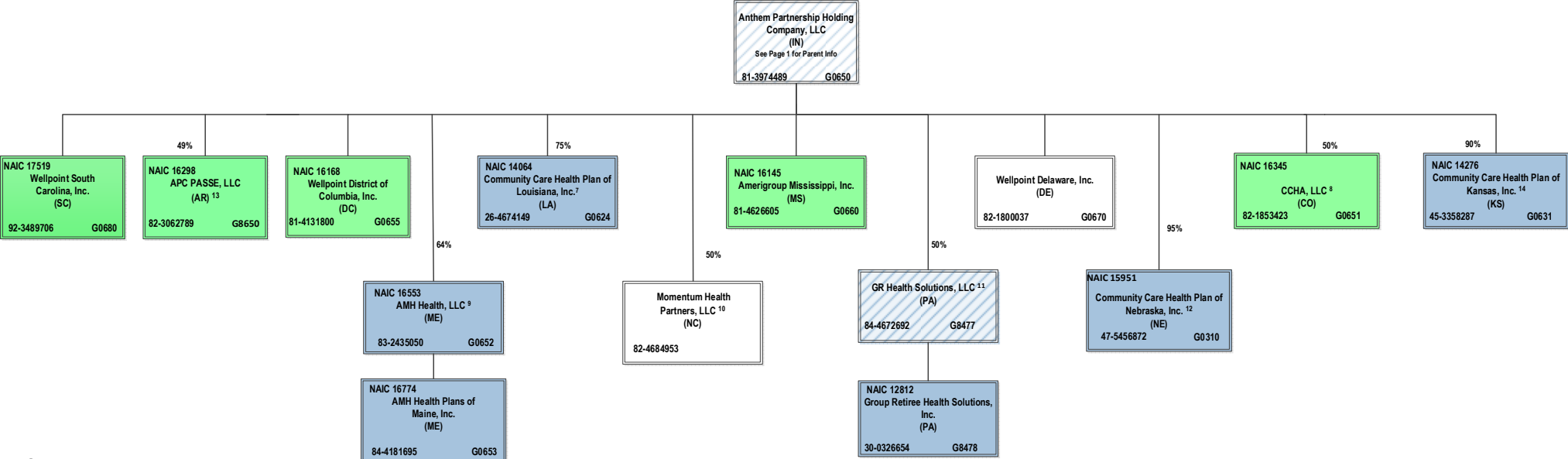


⁵ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

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

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

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

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

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

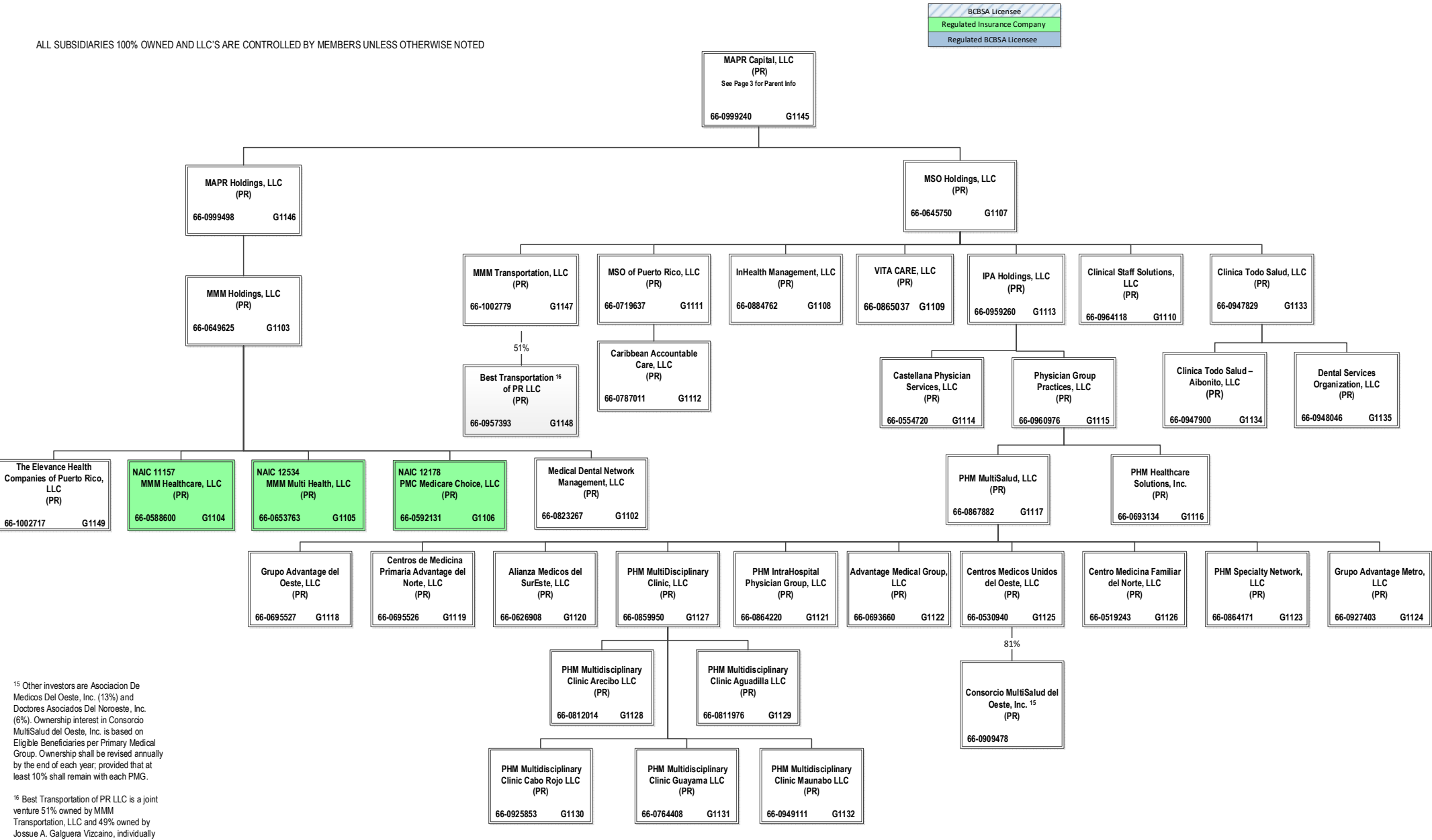
¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

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

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

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

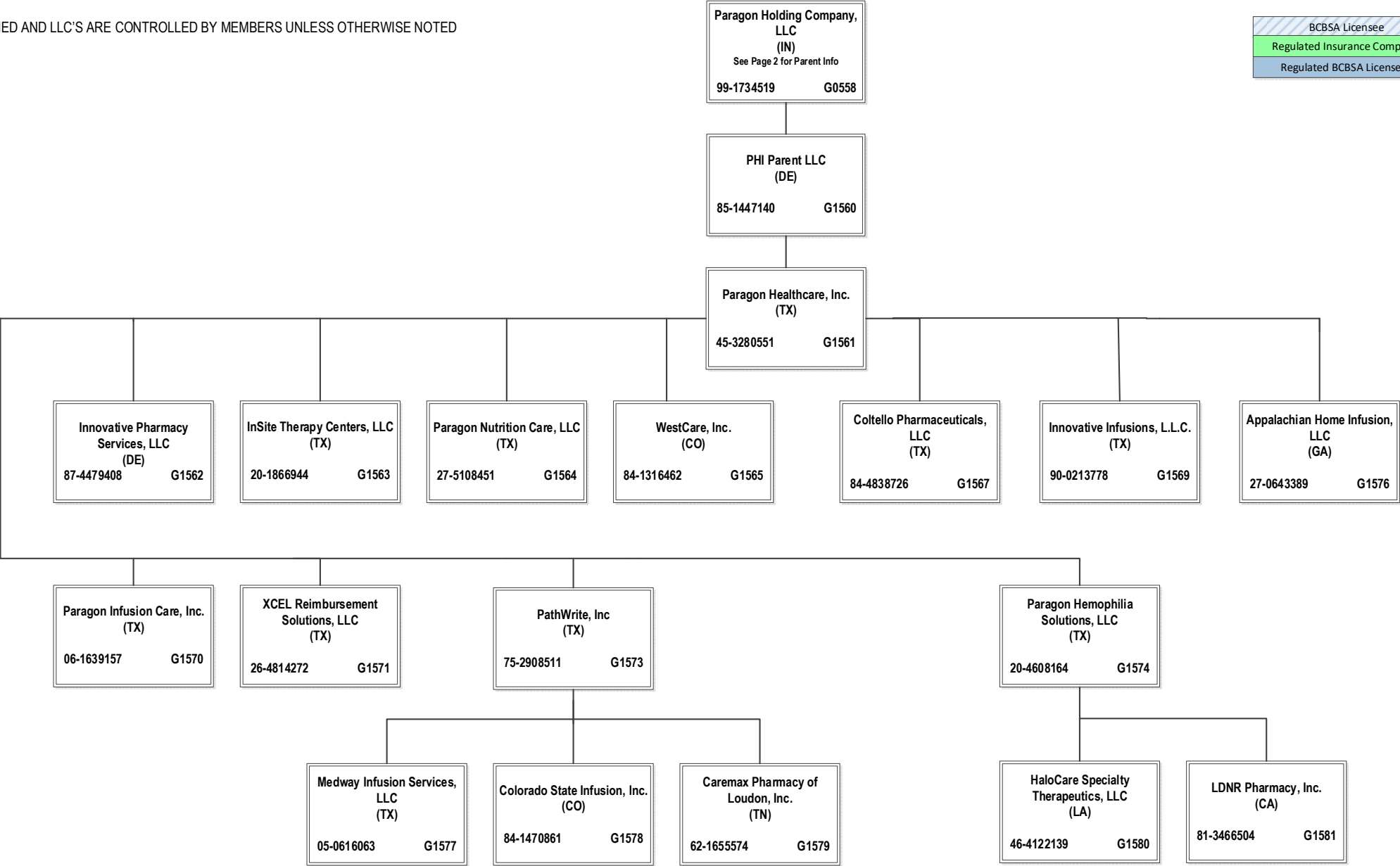
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BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



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NONE