



HEALTH ANNUAL STATEMENT

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

UnitedHealthcare of New England, Inc.

NAIC Group Code 0707 0707 NAIC Company Code 95149 Employer's ID Number 05-0413469
(Current) (Prior)
Organized under the Laws of Rhode Island, State of Domicile or Port of Entry RI
Country of Domicile United States of America
Licensed as business type: Health Maintenance Organization
Is HMO Federally Qualified? Yes [] No [X]
Incorporated/Organized 11/14/1984 Commenced Business 12/27/1984
Statutory Home Office 475 Kilvert Street, Suite 310 Warwick, RI, US 02886-1392
(Street and Number) (City or Town, State, Country and Zip Code)
Main Administrative Office 9800 Health Care Lane, MN006-W500
(Street and Number)
Minnetonka, MN, US 55343 952-912-6815
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Mail Address 9800 Health Care Lane, MN006-W500 Minnetonka, MN, US 55343
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)
Primary Location of Books and Records 9800 Health Care Lane, MN006-W500
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Minnetonka, MN, US 55343 952-912-6815
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Internet Website Address www.unitedhealthcare.com
Statutory Statement Contact Kuldeep Badana 612-485-3007
(Name) (Area Code) (Telephone Number)
kuldeep_badana@optum.com 952-931-4651
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer Michael Alexander Florczyk Chief Financial Officer Ross Allen Bauerly #
President Timothy Callahan Archer Secretary Bryn Searns

OTHER

Marilyn Victoria Hirsch #, Treasurer Heather Anastasia Lang, Assistant Secretary Jessica Leigh Zuba, Assistant Secretary
Nyle Brent Cottingham, Vice President Michael Alexander Florczyk, Vice President, Medicaid Operations

DIRECTORS OR TRUSTEES

Timothy Callahan Archer Michael Alexander Florczyk Suzanne Judith Swoop O'Brien #

State of Colorado State of _____ State of _____
County of Arapahoe County of _____ County of _____

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions 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 statement.

Bryn Searns Timothy Callahan Archer Nyle Brent Cottingham
Secretary President Vice President

Subscribed and sworn to before me this 28 day of January, 2025
Subscribed and sworn to before me this _____ day of _____
Subscribed and sworn to before me this _____ day of _____

Christina C Bedard

NOTARY PUBLIC

STATE OF COLORADO

NOTARY ID# 20234045329

MY COMMISSION EXPIRES 12/04/2027

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.....



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DIRECTORS OR TRUSTEES

Timothy Callahan Archer Michael Alexander Florczyk Suzanne Judith Swoop O'Brien #

State of _____ State of CONNECTICUT State of _____
County of _____ County of HARTFORD County of _____

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Bryn Seams Timothy Callahan Archer Nyle Brent Cottingham
Secretary President Vice President

Subscribed and sworn to before me this _____ day of _____
Subscribed and sworn to before me this 22nd day of January 2025
Dawn J. Benford
Notary Public
MCE 6/30/2027

- a. Is this an original filing?..... Yes [X] No []
b. If no,
1. State the amendment number.....
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Timothy Callahan Archer Michael Alexander Florczyk Suzanne Judith Swoop O'Brien #
State of _____ State of _____ State of MN
County of _____ County of _____ County of Hennepin

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Bryn Seams Timothy Callahan Archer Nyle Brent Cottingham
Secretary President Vice President
Subscribed and sworn to before me this _____ day of _____
Subscribed and sworn to before me this _____ day of _____
Subscribed and sworn to before me this _____ day of January '25
Jenna L Kuhlbeck

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ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	281,074,111	0	281,074,111	263,882,093
2. Stocks (Schedule D):				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$(111,036) , Schedule E - Part 1), cash equivalents (\$58,313,887 , Schedule E - Part 2) and short-term investments (\$0 , Schedule DA)	58,202,851	0	58,202,851	175,053,114
6. Contract loans, (including \$0 premium notes)	0	0	0	0
7. Derivatives (Schedule DB)	0	0	0	0
8. Other invested assets (Schedule BA)	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	339,276,962	0	339,276,962	438,935,207
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	1,956,428	0	1,956,428	1,900,626
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	8,570,629	52,502	8,518,127	3,406,859
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$9,326,547) and contracts subject to redetermination (\$4,744,169)	14,070,716	0	14,070,716	8,702,633
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	201,805	0	201,805	180,949
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	38,819	0	38,819	40,733
17. Amounts receivable relating to uninsured plans	715,484	0	715,484	463,023
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	9,978,261
18.2 Net deferred tax asset	4,277,740	0	4,277,740	3,743,326
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	3,831,523
24. Health care (\$5,334,299) and other amounts receivable	14,808,366	9,474,067	5,334,299	4,634,132
25. Aggregate write-ins for other-than-invested assets	25,251	25,251	0	4,601,056
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	383,942,200	9,551,820	374,390,380	480,418,328
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	383,942,200	9,551,820	374,390,380	480,418,328
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 Taxes Receivable	0	0	0	3,588,897
2502. Prepaid premium Taxes	0	0	0	1,012,159
2503. Miscellaneous Current Assets	24,398	24,398	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	853	853	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	25,251	25,251	0	4,601,056

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$ 3,414,800 reinsurance ceded)	39,219,753	0	39,219,753	47,046,323
2. Accrued medical incentive pool and bonus amounts	21,546,340	0	21,546,340	28,332,802
3. Unpaid claims adjustment expenses.....	382,451	0	382,451	400,006
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	22,397,699	0	22,397,699	96,128,695
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	498,695	0	498,695	504,109
8. Premiums received in advance.....	50,149,378	0	50,149,378	53,636,824
9. General expenses due or accrued.....	2,275,855	0	2,275,855	453,284
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses)) ..	1,982,814	0	1,982,814	0
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable.....	283,262	0	283,262	37,793
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	2,894	0	2,894	325
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	14,833,095	0	14,833,095	0
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	480,000	0	480,000	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans.....	73,466	0	73,466	1,055,524
23. Aggregate write-ins for other liabilities (including \$7,812 current).....	7,812	0	7,812	22,316,467
24. Total liabilities (Lines 1 to 23).....	154,133,514	0	154,133,514	249,912,152
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	5,862,835	5,862,835
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	12,000,000	12,000,000
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	202,394,031	212,643,328
32. Less treasury stock, at cost: 32.1 .....0 shares common (value included in Line 26 \$0).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	220,256,866	230,506,163
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	374,390,380	480,418,315
DETAILS OF WRITE-INS				
2301. Dividends declared payable	0	0	0	22,300,000
2302. Unclaimed Property	7,812	0	7,812	16,467
2303.				
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)	7,812	0	7,812	22,316,467
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	1,027,063	1,221,560
2. Net premium income (including \$0 non-health premium income)	XXX	598,212,559	686,158,208
3. Change in unearned premium reserves and reserve for rate credits	XXX	79,564,008	17,165,462
4. Fee-for-service (net of \$0 medical expenses)	XXX	0	0
5. Risk revenue	XXX	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	677,776,567	703,323,670
Hospital and Medical:			
9. Hospital/medical benefits	0	444,809,624	463,404,780
10. Other professional services	0	501,823	256,960
11. Outside referrals	0	0	0
12. Emergency room and out-of-area	0	0	0
13. Prescription drugs	0	125,197,191	130,239,926
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	20,474,179	39,306,599
16. Subtotal (Lines 9 to 15)	0	590,982,817	633,208,265
Less:			
17. Net reinsurance recoveries	0	4,596,325	4,316,558
18. Total hospital and medical (Lines 16 minus 17)	0	586,386,492	628,891,707
19. Non-health claims (net)	0	0	0
20. Claims adjustment expenses, including \$ 14,291,160 cost containment expenses	0	18,005,999	19,243,445
21. General administrative expenses	0	34,813,106	31,582,189
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	639,205,597	679,717,341
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	38,570,970	23,606,329
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)	0	13,046,194	15,565,555
26. Net realized capital gains (losses) less capital gains tax of \$369,664	0	1,390,642	390,379
27. Net investment gains (losses) (Lines 25 plus 26)	0	14,436,836	15,955,934
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 43,671) (amount charged off \$ (5,270))]	0	38,401	59,446
29. Aggregate write-ins for other income or expenses	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	53,046,207	39,621,709
31. Federal and foreign income taxes incurred	XXX	10,513,154	7,910,172
32. Net income (loss) (Lines 30 minus 31)	XXX	42,533,053	31,711,537
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.			
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	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	230,506,163	223,613,760
34. Net income or (loss) from Line 32	42,533,053	31,711,537
35. Change in valuation basis of aggregate policy and claim reserves	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0
38. Change in net deferred income tax	534,414	454,593
39. Change in nonadmitted assets	(3,316,764)	(2,973,727)
40. Change in unauthorized and certified reinsurance	0	0
41. Change in treasury stock	0	0
42. Change in surplus notes	0	0
43. Cumulative effect of changes in accounting principles.....	0	0
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....	0	0
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (Stock Dividend)	0	0
45.3 Transferred from capital	0	0
46. Dividends to stockholders	(50,000,000)	(22,300,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0
48. Net change in capital and surplus (Lines 34 to 47)	(10,249,297)	6,892,403
49. Capital and surplus end of reporting period (Line 33 plus 48)	220,256,866	230,506,163
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	590,313,918	690,650,018
2. Net investment income	13,999,822	16,624,732
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	604,313,740	707,274,750
5. Benefit and loss related payments	603,934,377	609,395,685
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	47,543,935	52,121,018
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	(1,078,257)	17,073,708
10. Total (Lines 5 through 9)	650,400,055	678,590,411
11. Net cash from operations (Line 4 minus Line 10)	(46,086,315)	28,684,339
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	92,921,063	42,581,844
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	480,000	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	93,401,063	42,581,844
13. Cost of investments acquired (long-term only):		
13.1 Bonds	109,425,463	50,559,464
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	889,781
13.7 Total investments acquired (Lines 13.1 to 13.6)	109,425,463	51,449,245
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(16,024,400)	(8,867,401)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	50,000,000	0
16.6 Other cash provided (applied)	(4,739,545)	12,660,368
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(54,739,545)	12,660,368
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)	(116,850,260)	32,477,306
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	175,053,111	142,575,805
19.2 End of year (Line 18 plus Line 19.1)	58,202,851	175,053,111
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001.Dividend declared and unpaid	0	22,300,000

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, 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	598,212,559	26,568	2,058,686	0	0	0	0	31,937,160	564,190,145	0	0	0	0	0
2. Change in unearned premium reserves and reserve for rate credit	79,564,008	0	0	0	0	0	0	(102,913)	79,666,921	0	0	0	0	0
3. Fee-for-service (net of \$ 0 medical expenses)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
4. Risk revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	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)	677,776,567	26,568	2,058,686	0	0	0	0	31,834,247	643,857,066	0	0	0	0	0
8. Hospital/medical benefits	444,809,624	180,715	3,740,646	0	0	0	0	22,953,167	417,935,096	0	0	0	0	XXX.
9. Other professional services	501,823	0	4,399	0	0	0	0	497,424	0	0	0	0	0	XXX.
10. Outside referrals	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
11. Emergency room and out-of-area	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
12. Prescription drugs	125,197,191	(381)	1,088,924	0	0	0	0	1,588,146	122,520,502	0	0	0	0	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. Incentive pool, withhold adjustments and bonus amounts	20,474,179	(517)	(12,041)	0	0	0	0	390,259	20,096,478	0	0	0	0	XXX.
15. Subtotal (Lines 8 to 14)	590,982,817	179,817	4,821,928	0	0	0	0	25,428,996	560,552,076	0	0	0	0	XXX.
16. Net reinsurance recoveries	4,596,325	107,890	2,883,004	0	0	0	0	0	1,605,431	0	0	0	0	XXX.
17. Total medical and hospital (Lines 15 minus 16).....	586,386,492	71,927	1,938,924	0	0	0	0	25,428,996	558,946,645	0	0	0	0	XXX.
18. Non-health claims (net)	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
19. Claims adjustment expenses including \$ 14,291,160 cost containment expenses	18,005,999	800	61,966	0	0	0	0	961,298	16,981,935	0	0	0	0	0
20. General administrative expenses	34,813,106	1,546	119,806	0	0	0	0	1,858,590	32,833,164	0	0	0	0	0
21. Increase in reserves for accident and health contracts	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
22. Increase in reserves for life contracts	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
23. Total underwriting deductions (Lines 17 to 22)	639,205,597	74,273	2,120,696	0	0	0	0	28,248,884	608,761,744	0	0	0	0	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	38,570,970	(47,705)	(62,010)	0	0	0	0	3,585,363	35,095,322	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 2024 OF THE UnitedHealthcare of New England, 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	66,923	0	40,355	26,568
2. Comprehensive (hospital and medical) group	5,190,390	0	3,131,706	2,058,684
3. Medicare Supplement	0	0	0	0
4. Vision only	0	0	0	0
5. Dental only	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0
7. Title XVIII - Medicare	31,969,020	0	31,858	31,937,162
8. Title XIX - Medicaid	566,583,857	0	2,393,712	564,190,145
9. Credit A&H	0	0	0	0
10. Disability Income	0	0	0	0
11. Long-Term Care	0	0	0	0
12. Other health	0	0	0	0
13. Health subtotal (Lines 1 through 12)	603,810,190	0	5,597,631	598,212,559
14. Life	0	0	0	0
15. Property/casualty	0	0	0	0
16. Totals (Lines 13 to 15)	603,810,190	0	5,597,631	598,212,559

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	579,439,813	56,954	4,600,434	0	0	0	0	26,390,909	548,391,516	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	2,773,612	38,876	2,734,736	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	576,666,201	18,078	1,865,698	0	0	0	0	26,390,909	548,391,516	0	0	0	0	0
2. Paid medical incentive pools and bonuses	27,268,176	0	11	0	0	0	0	393,997	26,874,168	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	42,634,553	151,626	691,119	0	0	0	0	2,263,526	39,528,282	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	3,414,800	55,908	375,851	0	0	0	0	70	2,982,971	0	0	0	0	0
3.4 Net	39,219,753	95,718	315,268	0	0	0	0	2,263,456	36,545,311	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	511,449	3,509	17,750	0	0	0	0	4,108	486,082	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	12,754	267	12,487	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	498,695	3,242	5,263	0	0	0	0	4,108	486,082	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	21,546,340	453	341	0	0	0	0	144,776	21,400,770	0	0	0	0	0
6. Net health care receivables (a)	2,908,581	(905)	(99,312)	0	0	0	0	1,810,665	1,198,133	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year	201,805	1,366	200,509	0	0	0	0	(70)	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	48,656,768	31,653	562,788	0	0	0	0	1,803,150	46,259,177	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	1,610,445	(16,620)	249,455	0	0	0	0	70	1,377,540	0	0	0	0	0
8.4 Net	47,046,323	48,273	313,333	0	0	0	0	1,803,080	44,881,637	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	511,828	1,007	11,857	0	0	0	0	5,992	492,972	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	7,719	(1,232)	8,951	0	0	0	0	0	0	0	0	0	0	0
9.4 Net	504,109	2,239	2,906	0	0	0	0	5,992	492,972	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	28,332,802	660	5,168	0	0	0	0	148,515	28,178,459	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	180,947	6,070	174,947	0	0	0	0	(70)	0	0	0	0	0	0
12. Incurred Benefits:														
12.1 Direct	570,508,638	180,334	4,833,970	0	0	0	0	25,038,736	540,455,598	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	4,603,860	108,199	2,890,230	0	0	0	0	0	1,605,431	0	0	0	0	0
12.4 Net	565,904,778	72,135	1,943,740	0	0	0	0	25,038,736	538,850,167	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	20,481,714	(207)	(4,816)	0	0	0	0	390,258	20,096,479	0	0	0	0	0

(a) Excludes \$ 1,100,000 loans or advances to providers not yet expensed.

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	10,914,050	1,988	147,122	0	0	0	0	384,267	10,380,673	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	(103,412)	1,501	(104,983)	0	0	0	0	70	0	0	0	0	0	0
1.4 Net	11,017,462	487	252,105	0	0	0	0	384,197	10,380,673	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct	31,720,503	149,638	543,997	0	0	0	0	1,879,259	29,147,609	0	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	3,518,212	54,407	480,834	0	0	0	0	0	2,982,971	0	0	0	0	0
2.4 Net	28,202,291	95,231	63,163	0	0	0	0	1,879,259	26,164,638	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	42,634,553	151,626	691,119	0	0	0	0	2,263,526	39,528,282	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	3,414,800	55,908	375,851	0	0	0	0	70	2,982,971	0	0	0	0	0
4.4 Net	39,219,753	95,718	315,268	0	0	0	0	2,263,456	36,545,311	0	0	0	0	0

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	(2,808)	25,590	36,270	62,689	33,462	50,514
2. Comprehensive (hospital and medical) group	36,989	1,803,147	(113,554)	434,086	(76,565)	316,236
3. Medicare Supplement	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Dental Only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	591,080	25,799,828	175,230	2,092,334	766,310	1,809,072
8. Title XIX - Medicaid	40,406,979	507,984,537	(49,367)	37,080,760	40,357,612	45,374,610
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-Term Care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	41,032,240	535,613,102	48,579	39,669,869	41,080,819	47,550,432
14. Health care receivables (a)	7,268,593	6,119,228	0	320,542	7,268,593	10,799,784
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	27,037,915	230,260	4,872,249	16,674,091	31,910,164	28,332,802
17. Totals (Lines 13 - 14 + 15 + 16)	60,801,562	529,724,134	4,920,828	56,023,418	65,722,390	65,083,450

(a) Excludes \$ 1,100,000 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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	(102)	(110)	(111)	(108)	(104)
2.	2020	1,817	1,637	1,637	1,641	1,641
3.	2021	XXX	1,564	1,495	1,498	1,497
4.	2022	XXX	XXX	1,462	1,256	1,254
5.	2023	XXX	XXX	XXX	1,995	1,846
6.	2024	XXX	XXX	XXX	XXX	2,031

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	(81)	(110)	(111)	(108)	(104)
2.	2020	2,114	1,660	1,637	1,641	1,641
3.	2021	XXX	1,840	1,502	1,498	1,497
4.	2022	XXX	XXX	1,830	1,307	1,254
5.	2023	XXX	XXX	XXX	2,317	1,769
6.	2024	XXX	XXX	XXX	XXX	2,529

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.	2020	2,515	1,641	298	18.2	1,939	77.1	0	0	1,939	77.1
2.	2021	2,075	1,497	402	26.9	1,899	91.5	0	0	1,899	91.5
3.	2022	2,205	1,254	247	19.7	1,501	68.1	0	0	1,501	68.1
4.	2023	1,772	1,846	50	2.7	1,896	107.0	(77)	(1)	1,818	102.6
5.	2024	2,085	2,031	55	2.7	2,086	100.0	497	4	2,587	124.1

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	63,831	63,594	63,416	63,418	63,321
2.	2020	605,101	683,687	684,026	684,020	683,915
3.	2021	XXX	728,243	799,980	800,000	799,886
4.	2022	XXX	XXX	0	(1)	(1)
5.	2023	XXX	XXX	XXX	13,598	14,668
6.	2024	XXX	XXX	XXX	XXX	26,030

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	64,049	63,594	63,416	63,418	63,321
2.	2020	716,927	683,693	684,026	684,020	683,915
3.	2021	XXX	834,393	801,230	800,000	799,886
4.	2022	XXX	XXX	0	1	(1)
5.	2023	XXX	XXX	XXX	15,554	14,843
6.	2024	XXX	XXX	XXX	XXX	28,267

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. 2020	877,530	683,915	32,390	4.7	716,305	81.6	0	0	716,305	81.6
2. 2021	949,219	799,886	30,658	3.8	830,544	87.5	0	0	830,544	87.5
3. 2022	1,972	(1)	738	(73,800.0)	737	37.4	0	0	737	37.4
4. 2023	16,309	14,668	502	3.4	15,170	93.0	175	2	15,347	94.1
5. 2024	31,834	26,030	840	3.2	26,870	84.4	2,237	25	29,132	91.5

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	42,441	49,292	49,077	49,175	49,254
2.	2020	.....	.....	.....	.....	437,128	489,716	481,235	483,914	483,810
3.	2021	.....	.....	.....	.....	XXX	521,429	563,368	564,605	564,088
4.	2022	.....	.....	.....	.....	XXX	XXX	522,351	577,296	576,374
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	535,058	603,772
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	507,985

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	50,853	49,292	49,077	49,175	49,254
2.	2020	.....	.....	.....	.....	492,766	492,841	481,235	483,914	483,810
3.	2021	.....	.....	.....	.....	XXX	554,060	567,677	564,605	564,088
4.	2022	.....	.....	.....	.....	XXX	XXX	568,544	588,158	576,374
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	597,749	608,595
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	561,594

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

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.	2020	.....553,607	.....483,810	.....19,234	.....4.0	.....503,044	.....90.9	.....0	.....0	.....503,044	.....90.9
2.	2021	.....633,094	.....564,088	.....19,588	.....3.5	.....583,676	.....92.2	.....0	.....0	.....583,676	.....92.2
3.	2022	.....652,385	.....576,374	.....15,943	.....2.8	.....592,317	.....90.8	.....0	.....0	.....592,317	.....90.8
4.	2023	.....685,243	.....603,772	.....18,604	.....3.1	.....622,376	.....90.8	.....4,823	.....29	.....627,228	.....91.5
5.	2024	.....643,857	.....507,985	.....14,499	.....2.9	.....522,484	.....81.1	.....53,610	.....323	.....576,417	.....89.5

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	106,170	112,776	112,382	112,485	112,471
2.	2020	1,044,046	1,175,040	1,166,898	1,169,575	1,169,366
3.	2021	XXX	1,251,236	1,364,843	1,366,103	1,365,471
4.	2022	XXX	XXX	523,813	578,551	577,627
5.	2023	XXX	XXX	XXX	550,651	620,286
6.	2024	XXX	XXX	XXX	XXX	536,046

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 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	114,821	112,776	112,382	112,485	112,471
2.	2020	1,211,807	1,178,194	1,166,898	1,169,575	1,169,366
3.	2021	XXX	1,390,293	1,370,409	1,366,103	1,365,471
4.	2022	XXX	XXX	570,374	589,466	577,627
5.	2023	XXX	XXX	XXX	615,620	625,207
6.	2024	XXX	XXX	XXX	XXX	592,390

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.	2020	1,433,652	1,169,366	51,922	4.4	1,221,288	85.2	0	0	1,221,288	85.2
2.	2021	1,584,388	1,365,471	50,648	3.7	1,416,119	89.4	0	0	1,416,119	89.4
3.	2022	656,562	577,627	16,928	2.9	594,555	90.6	0	0	594,555	90.6
4.	2023	703,324	620,286	19,156	3.1	639,442	90.9	4,921	30	644,393	91.6
5.	2024	677,776	536,046	15,394	2.9	551,440	81.4	56,344	352	608,136	89.7

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	0	0	0	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including \$0 for investment income) ..	21,329,809	(37)	36	0	0	0	0	0	21,329,810	0	0	0	0
5. Aggregate write-ins for other policy reserves	1,067,890	0	673,485	0	0	0	0	394,405	0	0	0	0	0
6. Totals (gross)	22,397,699	(37)	673,521	0	0	0	0	394,405	21,329,810	0	0	0	0
7. Reinsurance ceded	0	(21)	21	0	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)	22,397,699	(16)	673,500	0	0	0	0	394,405	21,329,810	0	0	0	0
9. Present value of amounts not yet due on claims	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits	511,450	3,509	17,750	0	0	0	0	4,109	486,082	0	0	0	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)	511,450	3,509	17,750	0	0	0	0	4,109	486,082	0	0	0	0
13. Reinsurance ceded	12,755	268	12,487	0	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	498,695	3,241	5,263	0	0	0	0	4,109	486,082	0	0	0	0
DETAILS OF WRITE-INS													
0501. Centres for Medicare and Medicaid Services Risk Adjustment Payable	394,405	0	0	0	0	0	0	394,405	0	0	0	0	0
0502. Affordable Care Act Risk Adjustment payable	673,485	0	673,485	0	0	0	0	0	0	0	0	0	0
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	1,067,890	0	673,485	0	0	0	0	394,405	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 \$0 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES					
	Claim Adjustment Expenses		3	4	5
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
			General Administrative Expenses	Investment Expenses	Total
1. Rent (\$0 for occupancy of own building)	404,468	96,294	641,072	0	1,141,834
2. Salary, wages and other benefits	7,805,220	1,858,236	12,371,071	0	22,034,527
3. Commissions (less \$0 ceded plus \$0 assumed)	0	0	2,875,952	0	2,875,952
4. Legal fees and expenses	105,071	25,015	166,527	0	296,613
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services ...	980,850	233,517	1,585,385	0	2,799,752
7. Traveling expenses	131,190	31,233	207,932	0	370,355
8. Marketing and advertising	363,617	86,569	576,324	0	1,026,510
9. Postage, express and telephone	286,019	68,094	453,333	0	807,446
10. Printing and office supplies	548,739	130,642	869,736	0	1,549,117
11. Occupancy, depreciation and amortization	147,195	35,044	233,300	0	415,539
12. Equipment	66,206	15,762	104,934	0	186,902
13. Cost or depreciation of EDP equipment and software	864,896	205,911	1,370,837	0	2,441,644
14. Outsourced services including EDP, claims, and other services	1,101,558	596,878	736,196	0	2,434,632
15. Boards, bureaus and association fees	10,649	2,535	16,878	0	30,062
16. Insurance, except on real estate	188,796	44,948	299,236	0	532,980
17. Collection and bank service charges	47,520	11,313	75,318	0	134,151
18. Group service and administration fees	130,411	31,048	219,096	0	380,555
19. Reimbursements by uninsured plans	0	0	(761,836)	0	(761,836)
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	0	0	0	0	0
22. Real estate taxes	15,008	3,416	27,580	0	46,004
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	20,314	0	20,314
23.2 State premium taxes	0	0	11,297,661	0	11,297,661
23.3 Regulatory authority licenses and fees	0	0	231,474	0	231,474
23.4 Payroll taxes	375,203	85,389	689,490	0	1,150,082
23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	0
24. Investment expenses not included elsewhere	0	0	0	178,751	178,751
25. Aggregate write-ins for expenses	718,544	152,995	505,296	0	1,376,835
26. Total expenses incurred (Lines 1 to 25)	14,291,160	3,714,839	34,813,106	178,751	(a) .....52,997,856
27. Less expenses unpaid December 31, current year	303,547	78,904	2,233,880	41,975	2,658,306
28. Add expenses unpaid December 31, prior year	315,721	84,285	348,057	105,227	853,290
29. Amounts receivable relating to uninsured plans, prior year	0	0	463,023	0	463,023
30. Amounts receivable relating to uninsured plans, current year	0	0	715,484	0	715,484
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	14,303,334	3,720,220	33,179,744	242,003	51,445,301
DETAILS OF WRITE-INS					
2501. Miscellaneous Expenses	718,544	152,995	1,021,428	0	1,892,967
2502. Reimbursement of Expenses from Reinsurers	0	0	(516,132)	0	(516,132)
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)	718,544	152,995	505,296	0	1,376,835

(a) Includes management fees of \$30,668,862 to affiliates and \$0 to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, Inc.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a) .....671,997	.....766,671
1.1	Bonds exempt from U.S. tax	(a) .....0	.....0
1.2	Other bonds (unaffiliated)	(a) .....7,213,461	.....7,204,221
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) .....5,254,053	.....5,254,053
7	Derivative instruments	(f) .....0	.....0
8.	Other invested assets .....	.....0	.....0
9.	Aggregate write-ins for investment income .....	.....0	.....0
10.	Total gross investment income	13,139,511	13,224,945
11.	Investment expenses		(g) .....178,751
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) .....		.....178,751
17.	Net investment income (Line 10 minus Line 16)		13,046,194
DETAILS OF WRITE-INS			
0901.	.....	
0902.	.....	
0903.	.....	
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0
1501.	.....	
1502.	.....	
1503.	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$265,220 accrual of discount less \$1,337,902 amortization of premium and less \$580,278 paid for accrued interest on purchases.
- (b) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends on purchases.
- (c) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (d) Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
- (e) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (f) Includes \$0 accrual of discount less \$0 amortization of premium.
- (g) Includes \$.0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$0 interest on surplus notes and \$0 interest on capital notes.
- (i) Includes \$0 depreciation on real estate and \$0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	140,044	0	140,044	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	1,620,262	0	1,620,262	0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	0	0	0	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	1,760,306	0	1,760,306	0	0
DETAILS OF WRITE-INS						
0901.	.....				
0902.	.....				
0903.	.....				
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 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	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB)	0	0	0
8. Other invested assets (Schedule BA)	0	0	0
9. Receivables for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)	0	0	0
14. Investment income due and accrued	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	52,502	42,177	(10,325)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0
17. Amounts receivable relating to uninsured plans	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2 Net deferred tax asset	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software	0	0	0
21. Furniture and equipment, including health care delivery assets	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivable from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable	9,474,067	6,165,843	(3,308,224)
25. Aggregate write-ins for other-than-invested assets	25,251	27,036	1,785
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	9,551,820	6,235,056	(3,316,764)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28. Total (Lines 26 and 27)	9,551,820	6,235,056	(3,316,764)
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. Miscellaneous Current Assets	24,398	26,375	1,977
2502. Miscellaneous Receivables	703	461	(242)
2503. Prepaid Commissions	150	200	50
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)	25,251	27,036	1,785

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	95,355	89,651	84,455	84,051	80,315	1,027,063
2. Provider Service Organizations	0	0	0	0	0	0
3. Preferred Provider Organizations	0	0	0	0	0	0
4. Point of Service	0	0	0	0	0	0
5. Indemnity Only	0	0	0	0	0	0
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	95,355	89,651	84,455	84,051	80,315	1,027,063
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

UNITEDHEALTHCARE OF NEW ENGLAND, INC.

NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS
AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operation

UnitedHealthcare of New England, Inc. (the “Company”), licensed as a health maintenance organization, offers its enrollees a variety of managed care programs and products through contractual arrangements with health care providers. The Company is a wholly owned subsidiary of United HealthCare Services, Inc. United HealthCare Services, Inc. is a wholly owned subsidiary of United HealthCare Services, Inc., a management corporation that provides services to the Company under the terms of a management agreement. United HealthCare Services, Inc. is a wholly owned subsidiary of UnitedHealth Group Incorporated. UnitedHealth Group Incorporated is a publicly held company trading on the New York Stock Exchange.

The Company was incorporated on November 14, 1984, as a health maintenance organization and operations commenced in December, 1984. The Company is certified as a health maintenance organization in six states. The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees.

The Company offers comprehensive commercial products to individual and employer groups. Each contract outlines the coverage provided and renewal provisions. Effective January 1, 2022, the Company began offering comprehensive commercial products in the State of Maine.

The Company has a contract with the State of Rhode Island and Providence Plantations, Department of Human Services, to provide health care services to Medicaid eligible beneficiaries in Rhode Island. The current contract is effective through June 30, 2024, and is subject to annual renewal provisions thereafter.

The Company also has a contract with the State of Rhode Island and Human Services Commission to provide Medicare services to Medicaid members who are dually eligible for Medicare.

A. Accounting Practices

The statutory basis financial statements (herein referred to as “financial statements”) are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Business Regulation.

The Rhode Island Department of Business Regulation recognizes only statutory accounting practices, prescribed or permitted by the state of Rhode Island, for determining and reporting the financial condition and results of operations of a health maintenance organization, for determining its solvency under Rhode Island Insurance Law. The State of Rhode Island prescribes the use of the National Association of Insurance Commissioners’ Accounting Practices and Procedures manual in effect for the accounting periods covered in the financial statements.

No significant differences exist between the practices prescribed or permitted by the State of Rhode Island and the National Association of Insurance Commissioners’ Accounting Practices and Procedures manual, also known as NAIC SAP, which materially affect the statutory basis net income (loss) and capital and surplus, as illustrated in the table below:

Net Income (Loss)	SSAP #	F/S Page #	F/S Line #	2024	2023
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 42,533,053	\$ 31,711,537
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	<u>\$ 42,533,053</u>	<u>\$ 31,711,537</u>
Capital and Surplus					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 220,256,866	\$ 230,506,163
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(7) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				—	—
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	<u>\$ 220,256,866</u>	<u>\$ 230,506,163</u>

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

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

C. Accounting Policy

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

The Company has deemed the following to be significant differences between statutory practices and generally accepted accounting principles:

- Certain debt investments categorized as available-for-sale or held-to-maturity under generally accepted accounting principles are presented at the lower of book/adjusted carrying value or fair value in accordance with the National Association of Insurance Commissioners' designations in the financial statements, whereas under generally accepted accounting principles, these investments are shown at fair value or book/adjusted carrying value, respectively.
- Cash, cash equivalents, and short-term investments in the financial statements represent cash balances and investments with original maturities of one year or less from the time of acquisition, whereas under generally accepted accounting principles, the corresponding caption of cash, cash equivalents, and short-term investments includes cash balances and investments that will mature in one year or less from the balance sheet date. The Company reported \$0 and \$0 short-term investments as of December 31, 2024 and 2023, respectively.
- Outstanding checks are required to be netted against cash balances in the financial statements, whereas under generally accepted accounting principles, outstanding checks are presented as other liabilities.
- The statutory basis statements of cash flows reconcile the corresponding captions of cash, cash equivalents, and short-term investments, which can include restricted cash reserves, with original maturities of one year or less from the time of acquisition, whereas under generally accepted accounting principles, the statements of cash flows reconcile the corresponding captions of cash, cash equivalents, and restricted cash with maturities of three months or less. Short-term investments with a final maturity of one year or less from the balance sheet date are not included in the reconciliation of generally accepted accounting principles cash flows. In addition, there are classification differences within the presentation of the cash flow categories between generally accepted accounting principles and National Association of Insurance Commissioners' Accounting Practices and Procedures manual. The statutory basis statements of cash flows are prepared in accordance with the National Association of Insurance Commissioners' Annual Statement Instructions.
- The National Association of Insurance Commissioners' Accounting Practices and Procedures manual provides for an amount to be recorded for deferred taxes on temporary differences between the financial reporting and tax basis of assets, subject to a valuation allowance and admissibility limitations on deferred tax assets, and tax basis of liabilities (see Note 9). In addition, under the National Association of Insurance Commissioners' Accounting Practices and Procedures manual, the net change in deferred tax assets and/or liabilities is recorded directly to unassigned funds (surplus) in the financial statements, whereas under generally accepted accounting principles, the net change in deferred tax assets and/or liabilities is recorded as a component of the income tax provision within the income statement and is based on the ultimate recoverability of the deferred tax assets. Based on the admissibility criteria under the National Association of Insurance Commissioners' Accounting Practices and Procedures manual, any deferred tax assets determined to be nonadmitted are charged directly to surplus and excluded from the financial statements, whereas under generally accepted accounting principles, such assets are included in the balance sheet.
- Reserves ceded to reinsurers for claims unpaid and aggregate health claim reserves have been reported as reductions of the related reserves rather than as assets, which would be required under generally accepted accounting principles.
- Certain assets, including certain aged premium receivables, certain health care and other amounts receivable, prepaid expenses are considered nonadmitted assets under the National Association of Insurance Commissioners' Accounting Practices and Procedures manual and are excluded from the financial statements and charged directly to unassigned funds (surplus).
- The change in unearned premium from year to year are recorded as change in unearned premium reserves and reserve for rate credits in the financial statements, whereas under generally accepted accounting principles, the change in unearned premium from year to year is reported through premium income.
- Comprehensive income and its components are not separately presented in the financial statements, whereas under generally accepted accounting principles, it is a requirement to present comprehensive income and its components in the financial statements.

Accounting policy disclosures that are required by the National Association of Insurance Commissioners' Annual Statement instructions are as follows:

- (1–2) Bonds are stated at book/adjusted carrying value if they meet National Association of Insurance Commissioners designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet National Association of Insurance Commissioners' designation of three or higher. The Company does not have any mandatory convertible securities or Securities Valuation Office of the National Association of Insurance Commissioners identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds and short-term investments are valued and reported using market prices published by the Securities Valuation Office in accordance with the National Association of Insurance Commissioners' Valuation of Securities manual prepared by the Securities Valuation Office or an external pricing service;
- (3–4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;
- (6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets;
- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;
- (8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;
- (9) The Company holds no derivatives;
- (10) Premium deficiency reserves and the related expenses are recognized when it is probable that expected future health care expenses, claims adjustment expenses, direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the financial statements. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, claims adjustment expenses and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as an increase in reserves for life and accident and health contracts in the financial statements in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the premium deficiency reserves calculation (see Note 30);
- (11) Claims adjustment expenses included in general insurance expenses, are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the management agreement (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc., in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and United HealthCare Services, Inc. is performed to determine the amount of claims adjustment expenses included in general insurance expenses to be reported in the financial statements. It is the responsibility of United HealthCare Services, Inc. to pay claims adjustment expenses in the event the Company ceases operations. The Company has recorded an estimate of unpaid claims adjustment expenses associated with incurred but unpaid claims, which is included in general expenses due or accrued in the financial statements. Management believes the amount of the liability for unpaid claims adjustment expenses as of December 31, 2024 is adequate to cover the Company's cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid claims adjustment expenses, included as a component of general expenses due or accrued are reflected in operating results in the period in which the change in estimate is identified;
- (12) The Company does not carry any fixed assets in the financial statements;
- (13) Health care and other amounts receivable consist of pharmacy rebates receivable estimated based on the most currently available data from the Company's claims processing systems and from data provided by the Company's affiliated pharmaceutical benefit manager, OptumRx, Inc. Health care and other amounts receivable also include receivables for capitation arrangements, amounts due to the Company for provider advances and claim overpayments to providers, hospitals and other health care organizations risk share receivables and State stop loss receivables. Health care and other amounts receivable are considered nonadmitted assets under the National Association of Insurance Commissioners' Accounting Practices and Procedures manual if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the financial statements (see Note 28).

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

ASSETS***Cash and Invested Assets***

- Bonds include securities with a maturity of greater than one year at the time of purchase;
- Cash equivalents include securities that have original maturity dates of three months or less from the date of acquisition. Cash equivalents also consist of the Company's share of a qualified cash pool sponsored and administered by United HealthCare Services, Inc. The investment pool is recorded at cost or book/adjusted carrying value depending on the composition of the underlying securities. Interest income from the pool accrues daily to participating members based upon ownership percentage. Cash equivalents, excluding money-market funds, are reported at cost or book/adjusted carrying value depending on the nature of the underlying security, which approximates fair value. Money-market funds are reported at fair value or net asset value as a practical expedient;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. These gains and losses are reported as net realized capital gains (losses) less capital gains tax in the financial statements;
- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in net realized capital gains (losses) less taxes, in the financial statements. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for loan-backed securities for periods subsequent to the loss recognition (see Note 5).

Other Assets

- **Premiums and Considerations** — The Company reports uncollected premium balances from its insured members, groups, the Centers for Medicare and Medicaid Services, and state Medicaid agencies as premiums and considerations in the financial statements. Uncollected premium balances that are over 90 days past due, with the exception of amounts due from government insured plans, are considered nonadmitted assets. In addition to those balances, current balances are also considered nonadmitted if the corresponding balance greater than 90 days past due is deemed more than inconsequential. Premiums and considerations also include amounts for commercial risk adjustment receivables as defined in Section 1343 of the Affordable Care Act, the Centers for Medicare and Medicaid Services risk corridor receivables, Medicaid performance guarantee receivables and the Rhode Island risk share program's estimated accrued retrospective premiums. The Company has a risk share arrangement with the Rhode Island Executive Office of Health and Human Services.

Premium adjustments for the Centers for Medicare and Medicaid Services risk corridor and Rhode Island risk share programs are accounted for as premium adjustments subject to retrospectively rated features (see Note 24). Premium adjustments for the commercial Affordable Care Act Section 1343 risk adjustment, and Medicaid pay for performance programs are accounted for as premium adjustments subject to redetermination (see Note 24).

LIABILITIES

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

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied, centrally controlled, and automated. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The Company estimates such liabilities for physician, hospital, and other medical cost disputes based upon an analysis of potential outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. The Company did not change actuarial methods during 2024 and 2023. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of December 31, 2024; however, actual payments may differ from those established estimates.

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

- **Accrued Medical Incentive Pool and Bonus Amounts** — The Company has agreements with certain provider groups that provide for the establishment of a pool which includes monthly premiums payable and the disbursement of funds for medical services. Any surplus in the pool is shared by the Company and the provider group based upon a predetermined risk-sharing percentage and the liability is included in accrued medical incentive pool and bonus amounts in the financial statements.

- **Aggregate Health Policy Reserves** — The Company establishes a liability, net of ceded reinsurance, for estimated accrued redetermination premiums due from the Company based on the actuarial method and assumptions for each respective contract. Aggregate health policy reserves includes Aggregate health policy reserves includes commercial risk adjustment payables as defined in Section 1343 of the Affordable Care Act, and Centers for Medicare and Medicaid Services risk adjustment payables for the Medicare Plans.

Premium adjustments for the commercial Affordable Care Act Section 1343 risk adjustment, and Centers for Medicare and Medicaid Services risk adjustment are accounted for as premium adjustments subject to redetermination (see Note 24).

- **Premiums Received in Advance** — Premiums received in full for the policies processed during the current period, but prior to the commencement of the service period, are recorded as premiums received in advance in the financial statements.
- **Aggregate write-ins for other liabilities** — The Company recorded a liability for dividend declared to its parent which remained unpaid as of December 31, 2023 (see Note 13).

CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS

- **Restricted Cash Reserves** — The Company is in compliance with various states regulatory deposit requirements as of December 31, 2024 and 2023, respectively, for qualification purposes as a domestic and foreign insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).
- **Minimum Capital and Surplus** — Under the laws of the state of Rhode Island, the Rhode Island Department of Business Regulation requires the Company to maintain a minimum capital and surplus equal to \$2,500,000.

Risk-based capital is a regulatory tool for measuring the minimum amount of capital appropriate for a health maintenance organization to support its overall business operations in consideration of its size and risk profile. The Company has an arrangement with the State to maintain above 275% of the RBC Authorized Control Level. Under the laws of the State of Massachusetts, the Division of Insurance requires the company to maintain a minimum capital and surplus equal to \$1,000,000 or 2% of the first \$150,000,000 annual premium revenue and 1% of annual premium revenue in excess of \$150,000,000 or an amount equal to the sum of 3 months uncovered health care expenditures as reported on the most recent financial statement filed with the commissioner or an amount equal to the sum of 8 percent of annual health care expenditures except those paid on a capitated basis or managed hospital payment basis as reported on the most recent financial statement filed with the commissioner; and 4 percent of annual hospital expenditures paid on a managed hospital payment basis as reported on the most recent financial statement filed with the commissioner.

The Company is also subject to minimum capital and surplus requirements in other states where it is licensed to do business.

The Company is in compliance with the minimum required capital and surplus amounts where it is licensed to do business, as of December 31, 2024 and 2023.

STATEMENTS OF OPERATIONS

- **Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits** — Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. Net premium income is shown net of reinsurance premiums paid and reinsurance premiums incurred but not paid in the financial statements. The corresponding change in unearned premium from year to year is reflected as a change in unearned premium reserves and reserve for rate credits in the financial statements.

Comprehensive commercial health plans with medical loss ratios on fully insured products, as calculated under the definitions in the Affordable Care Act and implementing regulations, that fall below certain targets are required to rebate ratable portions of premiums annually. The Company classifies changes to the estimated rebates and retrospective premium adjustments as change in unearned premium reserves and reserve for rate credits in the financial statements (see Note 24). In addition, pursuant to Section 1343 of the Affordable Care Act, the Company records premium adjustments for changes to the commercial risk adjustment balances which are reflected in net premium income in the financial statements (see Note 24).

The Medicaid plan is subject to experience rated rebates, including medical loss ratios and risk corridor programs, risk adjustment program, and performance guarantees based on various utilization measures. The Company records premium adjustments for the changes to the estimates for experience rated rebates and risk corridor programs which are reflected in change in unearned premium reserves and reserve for rate credits and for risk adjustment program and performance guarantees which are reflected in net premium income in the financial statements (see Note 24). Net premium income also includes amounts paid by state and federal governments on a per member basis in exchange for the provision and administration of medical benefits under the Medicaid, home nursing risk-sharing payments, high-dollar risk pool payments, and maternity payments. Premiums are contractual and are recognized in the coverage period in which members are entitled to receive services, except in the case of maternity payments. Maternity income is billed on contractual rates and recognized as income as each birth case is identified by the Company.

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

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

- **General Administrative Expenses** — General expenses that have been paid as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general administrative expenses. Pursuant to the terms of the management agreement (see Note 10), the Company pays a management fee to United HealthCare Services, Inc. in exchange for administrative and management services. State income taxes are also a component of general administrative expenses. Costs for items not included within the scope of the management agreement are directly expensed as incurred. A detailed review of the administrative expenses of the Company and United HealthCare Services, Inc. is performed to determine the allocation between claims adjustment expenses to be reported in the financial statements.

OTHER

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

The Company has no commercial customers that individually exceed 10% of total direct premiums written for the years ended December 31, 2024 and 2023, respectively.

The Company contracts with the Centers for Medicare and Medicaid Services to serve Medicare members across the states it is licensed in, which represents 5% and 2% of total direct premiums written as of December 31, 2024 and 2023.

The Company has Medicaid contracts with the state of Rhode Island to serve the Medicaid populations, which represents 94% and 97% of total direct premiums written as of December 31, 2024 and 2023, respectively.

Recently Issued Accounting Standards

In May 2024, the National Association of Insurance Commissioners revised Statement of Statutory Accounting Principles No. 107, *Risk-Sharing Provisions of the Affordable Care Act* to remove the federal Affordable Care Act disclosure on the transitional reinsurance program and the risk corridor program (see Note 24), effective for annual 2024. The Company chose to early adopt the revision during quarter 2 of 2024.

The Company reviewed all other recently issued guidance in 2024 and 2023 that has been adopted for 2024 or subsequent years' implementation and has determined that none of the items would have a significant impact to the financial statements.

D. Going Concern

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

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

No changes in accounting principles or corrections of errors have been recorded during the years ended December 31, 2024 and 2023.

3. BUSINESS COMBINATIONS AND GOODWILL

A–E. The Company was not party to a business combination during the years ended December 31, 2024 and 2023, and does not carry goodwill in its financial statements.

4. DISCONTINUED OPERATIONS

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

(1–4) The Company did not have any discontinued operations disposed of or classified as held for sale during 2024 and 2023.

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

C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.

D. Equity Interest Retained in the Discontinued Operation after Disposal — Not applicable.

5. INVESTMENTS

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were \$1,760,570 and \$493,788, respectively, for 2024 and 2023. The net realized gains and losses are included in net realized capital gains (losses) less capital gains tax in the financial statements. Total proceeds on the sale of long-term investments were \$64,047,326 and \$14,125,738 in 2024 and 2023 respectively.

As of December 31, 2024 and 2023, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of \$58,202,851 and \$175,053,114 respectively, are disclosed in the table below:

2024					
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$ 82,785,211	\$ 11,731	\$ 1,057,317	\$ 5,440,652	\$ 76,298,973
State and agency municipal securities	30,640,482	524	338,029	463,619	29,839,358
City and county municipal securities	19,805,115	233	90,977	715,358	18,999,013
Corporate debt securities	147,843,303	37,769	1,226,206	11,248,970	135,405,896
Total bonds	<u>\$ 281,074,111</u>	<u>\$ 50,257</u>	<u>\$ 2,712,530</u>	<u>\$ 17,868,599</u>	<u>\$ 260,543,239</u>

2024					
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
Less than one year	\$ 11,559,558	\$ 4	\$ —	\$ 167,596	\$ 11,391,966
One to five years	76,790,333	18,124	210,098	2,637,782	73,960,577
Five to ten years	104,877,708	18,365	1,392,221	7,892,897	95,610,955
Over ten years	87,846,512	13,764	1,110,211	7,170,324	79,579,741
Total bonds	<u>\$ 281,074,111</u>	<u>\$ 50,257</u>	<u>\$ 2,712,530</u>	<u>\$ 17,868,599</u>	<u>\$ 260,543,239</u>

2023					
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$ 67,177,679	\$ 85,575	\$ 100,829	\$ 4,556,069	\$ 62,606,356
State and agency municipal securities	28,288,185	70,004	113,686	401,911	27,842,592
City and county municipal securities	27,289,842	129,734	11,117	721,259	26,687,200
Corporate debt securities	141,126,374	294,297	34,971	13,164,979	128,220,721
Total bonds	<u>\$ 263,882,080</u>	<u>\$ 579,610</u>	<u>\$ 260,603</u>	<u>\$ 18,844,218</u>	<u>\$ 245,356,869</u>

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of \$84,269,435 and fair value of \$76,495,859

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2024 and 2023:

2024						
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ 28,975,495	\$ 1,057,317	\$ 40,664,081	\$ 5,440,652	\$ 69,639,576	\$ 6,497,969
State and agency municipal securities	15,643,118	338,029	12,175,558	463,619	27,818,676	801,648
City and county municipal securities	8,350,757	90,977	10,005,481	715,358	18,356,238	806,335
Corporate debt securities	32,365,718	1,226,206	94,620,039	11,248,970	126,985,757	12,475,176
Total bonds	\$ 85,335,088	\$ 2,712,530	\$ 157,465,159	\$ 17,868,599	\$ 242,800,247	\$ 20,581,129

2023						
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ 8,800,239	\$ 100,829	\$ 42,929,004	\$ 4,556,069	\$ 51,729,243	\$ 4,656,898
State and agency municipal securities	7,401,905	113,686	11,428,691	401,911	18,830,596	515,597
City and county municipal securities	4,570,325	11,117	11,654,142	721,259	16,224,467	732,376
Corporate debt securities	3,017,129	34,971	107,963,348	13,164,979	110,980,477	13,199,950
Total bonds	\$ 23,789,598	\$ 260,603	\$ 173,975,185	\$ 18,844,218	\$ 197,764,783	\$ 19,104,821

The unrecognized unrealized losses on investments in U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2024 and 2023, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the state and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an other-than-temporary impairment, such as the length of time and extent to which fair value has been less than cost, the financial condition, and near-term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company’s intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of this review, no other-than-temporary impairments were recorded by the Company as of December 31, 2024 and 2023, respectively.

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

D. Loan-Backed Securities

- (1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.
- (2) The Company did not recognize any other-than-temporary impairments on loan-backed securities as of December 31, 2024.
- (3) The Company did not have any loan-backed securities with other-than-temporary impairments to report by CUSIP as of December 31, 2024 or 2023.

(4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of December 31, 2024 and 2023:

	2024
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 754,242
2. 12 months or longer	7,047,333
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	22,914,005
2. 12 months or longer	46,586,879
	2023
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 30,200
2. 12 months or longer	6,818,177
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	4,629,541
2. 12 months or longer	55,142,529

(5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principal and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows and the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of December 31, 2024, the unrealized loss on any security that the Company classified as available-for-sale was not material to the Company’s investment portfolio. Any other securities in an unrealized loss position as of December 31, 2024, the Company considers to be temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions — Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.
- J. Real Estate — Not applicable.
- K. Low-Income Housing Tax Credits — Not applicable.

L. Restricted Assets —

(1) Restricted assets, including pledged securities as of December 31, 2024 and 2023, are presented below:

	1	2	3	4	5	6	7
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 & Nonadmitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	— %	— %
b. Collateral held under security lending agreements	—	—	—	—	—	— %	— %
c. Subject to repurchase agreements	—	—	—	—	—	— %	— %
d. Subject to reverse repurchase agreements	—	—	—	—	—	— %	— %
e. Subject to dollar repurchase agreements	—	—	—	—	—	— %	— %
f. Subject to dollar reverse repurchase agreements	—	—	—	—	—	— %	— %
g. Placed under option contracts	—	—	—	—	—	— %	— %
h. Letter stock or securities restricted as to sale—excluding FHLB capital stock	—	—	—	—	—	— %	— %
i. FHLB capital stock	—	—	—	—	—	— %	— %
j. On deposit with states	1,445,946	1,491,526	(45,580)	—	1,445,946	<1 %	<1 %
k. On deposit with other regulatory bodies	—	—	—	—	—	— %	— %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	— %	— %
m. Pledged as collateral not captured in other categories	—	—	—	—	—	— %	— %
n. Other restricted assets	—	—	—	—	—	— %	— %
o. Total restricted assets	\$ 1,445,946	\$ 1,491,526	\$ (45,580)	\$ —	\$ 1,445,946	<1%	<1%

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

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

(2–4) The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2024 or 2023.

M. Working Capital Finance Investments — Not applicable.

N. Offsetting and Netting of Assets and Liabilities

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

O. 5GI Securities

The Company does not have any investments with an National Association of Insurance Commissioners' designation of 5GI as of December 31, 2024 and 2023.

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2024:

	General Account
1. Number of CUSIPs	1
2. Aggregate Amount of Investment Income	\$ 831

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

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is \$50,721,506 and \$160,985,013 as of December 31, 2024 and 2023, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of December 31, 2024:

Asset Type	Percent Share
(1) Cash	3%
(2) Cash Equivalents	51%
(3) Short-Term Investments	46%
(4) Total	100%

S. Aggregate Collateral Loans by Qualifying Investment Collateral — Not applicable.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

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

7. INVESTMENT INCOME

- A. The Company excludes all investment income due and accrued amounts that are over 90 days past due from the financial statements.
- B. There were no investment income amounts excluded from the financial statements.
- C. The following table illustrates the gross interest income due and accrued, nonadmitted interest income due and accrued, and admitted interest income due and accrued amounts as of December 31, 2024 and 2023:

2024		
Interest Income Due And Accrued:		
1. Gross	\$	1,956,428
2. Nonadmitted		—
3. Admitted		1,956,428

2023		
Interest Income Due And Accrued:		
1. Gross	\$	1,900,626
2. Nonadmitted		—
3. Admitted		1,900,626

- D. The Company has no aggregated deferred interest as of December 31, 2024 or 2023.
- E. The Company has no paid-in-kind interest as of December 31, 2024 or 2023.

8. DERIVATIVE INSTRUMENTS

A–B. The Company has no derivative instruments.

9. INCOME TAXES

The corporate alternative minimum tax is calculated as 15% of adjusted financial statement income and applies only to corporations with average annual adjusted financial statement income in excess of \$1 billion for three prior taxable years. The applicability of the corporate alternative minimum tax is determined on a tax-controlled group basis.

The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group Incorporated which constitutes a controlled group. The controlled group's expected federal income tax will exceed the corporate alternative minimum tax and therefore the Company does not expect to be subject to the minimum tax.

The controlled group has not made any material modifications to the methodology used to project the corporate alternative minimum tax.

A. Deferred Tax Asset/Liability

(1) The components of the net deferred tax asset at December 31, 2024 and 2023 are as follows:

	2024			2023			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	\$ 4,297,312	\$ —	\$ 4,297,312	\$ 4,467,245	\$ —	\$ 4,467,245	\$ (169,933)	\$ —	\$ (169,933)
(b) Statutory valuation allowance adjustments	—	—	—	—	—	—	—	—	—
(c) Adjusted gross deferred tax assets (1a - 1b)	4,297,312	—	4,297,312	4,467,245	—	4,467,245	(169,933)	—	(169,933)
(d) Deferred tax assets nonadmitted	—	—	—	—	—	—	—	—	—
(e) Subtotal net admitted deferred tax asset (1c - 1d)	4,297,312	—	4,297,312	4,467,245	—	4,467,245	(169,933)	—	(169,933)
(f) Deferred tax liabilities	19,572	—	19,572	723,919	—	723,919	(704,347)	—	(704,347)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 4,277,740	\$ —	\$ 4,277,740	\$ 3,743,326	\$ —	\$ 3,743,326	\$ 534,414	\$ —	\$ 534,414

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

Admission Calculation Components SSAP No. 101	2024			2023			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1 + 2) Total	Ordinary	Capital	(Col 4 + 5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7 + 8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 4,297,312	\$ —	\$ 4,297,312	\$ 4,467,245	\$ —	\$ 4,467,245	\$ (169,933)	\$ —	\$ (169,933)
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	—	—	—	—	—	—	—	—	—
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	—	—	—	—	—	—	—	—	—
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	32,396,869	XXX	XXX	34,014,426	XXX	XXX	(1,617,557)
(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	—	—	—	—	—	—	—	—	—
(d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))	<u>\$ 4,297,312</u>	<u>\$ —</u>	<u>\$ 4,297,312</u>	<u>\$ 4,467,245</u>	<u>\$ —</u>	<u>\$ 4,467,245</u>	<u>\$ (169,933)</u>	<u>\$ —</u>	<u>\$ (169,933)</u>

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

	2024	2023
(a) Ratio percentage used to determine recovery period and threshold limitation amount	>300%	>300%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	\$ 215,979,126	\$ 226,762,837

(4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2024 and 2023 is presented below:

Impact of Tax-Planning Strategies	2024		2023		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col 1 - 3) Ordinary	(Col 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage.						
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 4,297,312	\$ —	\$ 4,467,245	\$ —	\$ (169,933)	\$ —
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies	— %	— %	— %	— %	— %	— %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 4,297,312	\$ —	\$ 4,467,245	\$ —	\$ (169,933)	\$ —
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies	— %	— %	— %	— %	— %	— %
(b) Does the Company's tax-planning strategies include the use of reinsurance?			Yes		No	X

B. Unrecognized Deferred Tax Liabilities

(1–4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2024 and 2023.

C. Significant Components of Income Taxes

(1) The current federal income taxes incurred for the years ended December 31, 2024 and 2023 are as follows:

	1	2	3
	2024	2023	(Col 1 - 2) Change
1. Current income tax			
(a) Federal	\$ 10,513,154	\$ 7,910,172	\$ 2,602,982
(b) Foreign	—	—	—
(c) Subtotal (1a+1b)	10,513,154	7,910,172	2,602,982
(d) Federal income tax on net capital gains (losses)	369,664	103,772	265,892
(e) Utilization of capital loss carryforwards	—	—	—
(f) Other	—	—	—
(g) Total federal and foreign income taxes incurred (1c+1d+1e+1f)	<u>\$ 10,882,818</u>	<u>\$ 8,013,944</u>	<u>\$ 2,868,874</u>

(2–4) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2024 and 2023, are as follows:

	1	2	3
	2024	2023	(Col 1 - 2) Change
2. Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 185,036	\$ 219,962	\$ (34,926)
(2) Unearned premium reserve	2,106,274	2,252,747	(146,473)
(3) Policyholder reserves	—	—	—
(4) Investments	—	—	—
(5) Deferred acquisition costs	—	—	—
(6) Policyholder dividends accrual	—	—	—
(7) Fixed assets	—	—	—
(8) Compensation and benefits accrual	—	—	—
(9) Pension accrual	—	—	—
(10) Receivables — nonadmitted	2,005,851	1,994,094	11,757
(11) Net operating loss carryforward	—	—	—
(12) Tax credit carryforward	—	—	—
(13) Other	151	442	(291)
(99) Subtotal (sum of 2a1 through 2a13)	4,297,312	4,467,245	(169,933)
(b) Statutory valuation allowance adjustment	—	—	—
(c) Nonadmitted	—	—	—
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	4,297,312	4,467,245	(169,933)
(e) Capital:			
(1) Investments	—	—	—
(2) Net capital loss carryforward	—	—	—
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (2e1+2e2+2e3+2e4)	—	—	—
(f) Statutory valuation allowance adjustment	—	—	—
(g) Nonadmitted	—	—	—
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	—	—	—
(i) Admitted deferred tax assets (2d + 2h)	4,297,312	4,467,245	(169,933)
3. Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	—	—	—
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Policyholder reserves	—	—	—
(5) Other	19,572	723,919	(704,347)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	19,572	723,919	(704,347)
(b) Capital:			
(1) Investments	—	—	—
(2) Real estate	—	—	—
(3) Other	—	—	—
(99) Subtotal (3b1+3b2+3b3)	—	—	—
(c) Deferred tax liabilities (3a99 + 3b99)	19,572	723,919	(704,347)
4. Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 4,277,740</u>	<u>\$ 3,743,326</u>	<u>\$ 534,414</u>

- The Company assessed the potential realization of the gross deferred tax asset and as a result no statutory valuation allowance was required and no allowance was established as of December 31, 2024 and 2023.
- D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income (loss) before federal income taxes. A summarization of the significant items causing this difference as of December 31, 2024 and 2023 is as follows:

	2024		2023	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	\$ 11,217,333	21 %	\$ 8,342,351	21 %
Tax-exempt interest	(172,407)	(1)	(190,722)	<(1)
Tax effect of nonadmitted assets	(696,522)	(1)	(624,483)	(2)
Prior year true-up	—	—	32,205	<1
Total statutory income taxes	<u>\$ 10,348,404</u>	<u>19 %</u>	<u>\$ 7,559,351</u>	<u>19 %</u>
Federal income taxes incurred	\$ 10,513,154	20 %	\$ 7,910,172	21 %
Capital gains tax	369,664	1	103,772	<1
Change in net deferred income tax	<u>(534,414)</u>	<u>(1)</u>	<u>(454,593)</u>	<u>(1)</u>
Total statutory income taxes	<u>\$ 10,348,404</u>	<u>19 %</u>	<u>\$ 7,559,351</u>	<u>19 %</u>

- E. At December 31, 2024, the Company had no net operating loss carryforwards.

Current federal income taxes payable of \$1,982,814 and recoverable of \$(9,978,261) as of December 31, 2024 and 2023, respectively, are included in the financial statements. Federal income taxes recovered were \$1,078,256 and paid, net of refunds were \$(17,073,708) in 2024 and 2023, respectively.

Federal income taxes incurred of \$10,873,814 and \$7,990,744 for 2024 and 2023, respectively, are available for recoupment in the event of future net losses.

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

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

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

- A–B. In the ordinary course of business, the Company contracts with several affiliates to provide a wide variety of services to the Company's members. These agreements are filed with and approved by the Rhode Island Department of Business Regulation according to Management's understanding of the current requirements and standards. Within the confines of the applicable filed and approved agreements (including subsequent amendments thereto), the amount and types of services provided by these affiliated entities can change year over year.
- United HealthCare Services, Inc. maintains a private short-term investment pool in which affiliated companies may participate (see Note 1). At December 31, 2024 and 2023, the Company's portion was \$50,721,506 and \$160,985,013 respectively and is included in cash equivalents in the financial statements.

The Company has a tax-sharing agreement with United HealthCare Services, Inc. (see Note 9).

The Company paid dividend of \$50,000,000 in 2024 to its parent. The Company declared dividend of \$22,300,000 to its parent which was paid on January 2, 2024 (see Note 13).

The Company holds a \$50,000,000 subordinated credit agreement with United HealthCare Services, Incorporated at an interest rate of Fed Funds Target rate – Upper Bound plus 50 basis points. This credit agreement is subordinate to the claims of non-affiliated creditors and loans from non-affiliated lenders of the borrowers. This credit agreement is revolving, unless terminated by either party. No amounts were outstanding under the line of credit as of December 31, 2024 and 2023. There was no interest paid or accrued on all borrowings throughout the year as of December 31, 2024 and 2023, respectively.

The Company has entered into reinsurance agreements with an affiliated entity (see Note 23).

- C. The Company has no material related party transactions that meet the disclosure requirements pursuant to Statement of Statutory Accounting Principles No. 25, *Affiliates and Other Related Parties* that are not included in National Association of Insurance Commissioner Statutory Statement Schedule Y—Part 2 Summary Of Insurer’s Transactions With Any Affiliates.
- D. The Company had amounts due to parent, subsidiaries and affiliates of \$14,833,095 as of December 31, 2024 and receivables from parent, subsidiaries and affiliates of \$3,831,523 as of December 31, 2023, which are included in the financial statements. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.
- E. The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month; (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in general administrative expenses, claims adjustment expenses, and hospital and medical expenses in the financial statements. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2024 and 2023, which meet the disclosure requirements pursuant to Statement of Statutory Accounting Principles No. 25, *Affiliates and Other Related Parties*, regardless of the effective date of the contract:

	2024	2023
OptumRx, Inc.	\$ 129,930,995	\$ 136,656,574
United Behavioral Health	117,262,209	120,865,317
United HealthCare Services, Inc.	32,250,521	30,342,017

OptumRx, Inc. provides services that may include, but are not limited to, administrative services related to pharmacy management and pharmacy claims processing for enrollees, manufacturer rebate administration, pharmacy incentive services, specialty drug pharmacy services, durable medical equipment services including orthotics and prosthetics and personal health products catalogues showing the healthcare products and benefit credits enrollees needed to redeem the respective products.

United Behavioral Health provides services related to mental health and substance abuse treatment.

United HealthCare Services, Inc. provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for United HealthCare Services, Inc. to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, treasury and investment functions, claims adjudication and payment, benefit administration, disease management, health care decision support, medical management, credentialing, preventative health services, utilization management reporting and expenses incurred for new business that will be effective in the subsequent year.

The Company has premium payments that are received and claim payments and direct expenses such as broker commissions, Rhode Island Department of Business Regulation exam fees, Affordable Care Act assessments and premium taxes that are processed and paid by an affiliated United HealthCare Services, Inc. entity. Premiums, claims, and direct expenses applicable to the Company are settled at regular intervals throughout the month via the intercompany settlement process and any amounts outstanding are reflected in receivables from parent, subsidiaries, and affiliates amounts due to parent, subsidiaries, and affiliates in the financial statements.

- F. The Company’s parent provides a guarantee to the Company to provide the necessary capital contributions so the Company does not fall below the 275% RBC Authorized Control Level as required by the State.
- G. The Company is part of an insurance holding company system with United HealthCare Services, Inc. as the ultimate parent. Management believes that the Company’s transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.
- H. The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.
- I. The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.
- J. The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.

- K. The Company does not have any investments in foreign insurance subsidiaries.
- L. The Company does not hold any investments in a downstream noninsurance holding company.
- M. The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.
- N. The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.
- O. The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships, and limited liability companies in which the Company's share of losses exceeds the investment.

11. DEBT

- A–B. The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2024 and 2023.

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

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

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

- A–B. The Company has 100 shares authorized and 10 shares issued and outstanding of no par value common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, United HealthCare Services, Inc.
- C. Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Rhode Island Department of Business Regulation.
- D. The Company paid an extraordinary cash dividend to United HealthCare Services, Inc. of \$50,000,000 on June 7, 2024, which was approved by the Rhode Island Department of Business Regulation and was recorded as a reduction to unassigned funds (surplus) in the financial statements. The Company also paid an ordinary cash dividend to United HealthCare Services, Inc. of \$ 22,300,000 on January 2, 2024, which required no approval and was recorded as a reduction to unassigned funds (surplus) in the financial statements.
- E. The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- F. There are no restrictions placed on the Company's unassigned funds (surplus).
- G. The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- H. The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- I. The Company does not have any special surplus funds.
- J. The portion of unassigned funds (surplus), excluding the net income (loss), and dividends, represented (or reduced) by each item below is as follows:

	2024	2023
Net deferred income taxes	\$ 4,277,740	\$ 3,743,326
Nonadmitted assets	(9,551,820)	(6,235,056)
Total	<u>\$ (5,274,080)</u>	<u>\$ (2,491,730)</u>

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

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A. Contingent Commitments

The Company has no contingent commitments.

B. Assessments

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

C. Gain Contingencies

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

- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits —** Not applicable.
- E. Joint and Several Liabilities —** Not applicable.
- F. All Other Contingencies**

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

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

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

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

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

There are no assets that the Company considers to be impaired at December 31, 2024 and 2023.

15. LEASES

- A–B.** According to the management agreement between the Company and United HealthCare Services, Inc. (see Note 10), United HealthCare Services, Inc. is responsible for operating leases for the rental of office facilities and equipment. Fees associated with the lease agreements are included as a component of the Company's management fee.

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

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

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

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

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

- A–B.** The Company has no operations from Administrative Services Only Contracts or Administrative Services Contracts in 2024 and 2023.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Medicare Part D program is a partially insured plan. The Company recorded a receivable of \$715,484 and \$463,023 at December 31, 2024 and 2023, respectively, for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a payable of \$73,466 and \$127,228 at December 31, 2024 and 2023, respectively, for the Medicare Part D coverage gap discount program. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively, in the financial statements.

The Company's Medicaid contract with the State includes provisions for various types of enhanced payments to participating providers. Funds are received from the State and the Company subsequently disburses these funds to providers as directed by the State. There is no risk to the Company as a result of these pass-through payments. The Company recorded a payable of \$0 and \$928,296 as of December 31, 2024 and 2023, respectively. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans in the financial statements for the additional pass-through payments to be made to providers.

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

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2024 and 2023.

20. FAIR VALUE MEASUREMENTS

The National Association of Insurance Commissioner Practices and Procedures manual defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

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

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

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

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

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

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

A. Fair Value

(1) Fair Value Measurements at Reporting Date

The following tables present information about the Company's financial assets that are measured and reported at fair value at December 31, 2024 and 2023, in the financial statements according to the valuation techniques the Company used to determine their fair values.

Description for Each Class of Asset or Liability	2024			Net Asset Value (NAV)	Total
	(Level 1)	(Level 2)	(Level 3)		
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ —	\$ —	\$ —	\$ —	\$ —
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total perpetual preferred stocks	—	—	—	—	—
Bonds:					
U.S. governments	—	—	—	—	—
Industrial and misc	—	—	—	—	—
Hybrid securities	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total bonds	—	—	—	—	—
Common stock:					
Industrial and misc	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total common stock	—	—	—	—	—
Derivative assets:					
Interest rate contracts	—	—	—	—	—
Foreign exchange contracts	—	—	—	—	—
Credit contracts	—	—	—	—	—
Commodity futures contracts	—	—	—	—	—
Commodity forward contracts	—	—	—	—	—
Total derivatives	—	—	—	—	—
Money-market funds					
	7,592,382	—	—	—	7,592,382
Qualified cash pool	50,721,505	—	—	—	50,721,505
Separate account assets	—	—	—	—	—
Total assets at fair value/NAV	\$ 58,313,887	\$ —	\$ —	\$ —	\$ 58,313,887
b. Liabilities at fair value:					
Derivative liabilities	\$ —	\$ —	\$ —	\$ —	\$ —
Additional write-ins	—	—	—	—	—
Additional write-ins	—	—	—	—	—
Total liabilities at fair value	\$ —	\$ —	\$ —	\$ —	\$ —

Description for Each Class of Asset or Liability	2023			Net Asset Value (NAV)	Total
	(Level 1)	(Level 2)	(Level 3)		
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ —	\$ —	\$ —	\$ —	\$ —
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total perpetual preferred stocks	—	—	—	—	—
Bonds:					
U.S. governments	—	—	—	—	—
Industrial and misc	—	—	—	—	—
Hybrid securities	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total bonds	—	—	—	—	—
Common stock:					
Industrial and misc	—	—	—	—	—
Parent, subsidiaries, and affiliates	—	—	—	—	—
Total common stock	—	—	—	—	—
Derivative assets:					
Interest rate contracts	—	—	—	—	—
Foreign exchange contracts	—	—	—	—	—
Credit contracts	—	—	—	—	—
Commodity futures contracts	—	—	—	—	—
Commodity forward contracts	—	—	—	—	—
Total derivatives	—	—	—	—	—
Money-market funds	12,891,563	—	—	—	12,891,563
Qualified cash pool	160,985,013	—	—	—	160,985,013
Separate account assets	—	—	—	—	—
Total assets at fair value/NAV	\$ 173,876,576	\$ —	\$ —	\$ —	\$ 173,876,576
b. Liabilities at fair value:					
Derivative liabilities	\$ —	\$ —	\$ —	\$ —	\$ —
Total liabilities at fair value	\$ —	\$ —	\$ —	\$ —	\$ —

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.
- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2024 or 2023.
- (4) The Company has no investments reported with a fair value hierarchy of Level 2 or Level 3 and therefore has no valuation technique to disclose.
- (5) The Company has no derivative assets and liabilities to disclose.
- B. Fair Value Combination — Not applicable.

C. Aggregate Fair Value Hierarchy

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2024 and 2023 is presented in the table below:

2024							
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	\$ 76,298,973	\$ 82,785,211	\$ 29,214,155	\$ 47,084,818	\$ —	\$ —	\$ —
State and agency municipal securities	29,839,358	30,640,482	—	29,839,358	—	—	—
City and county municipal securities	18,999,013	19,805,115	—	18,999,013	—	—	—
Corporate debt securities	135,405,896	147,843,303	—	135,405,896	—	—	—
Cash equivalents	58,313,887	58,313,887	58,313,887	—	—	—	—
Total bonds and cash equivalents	<u>\$ 318,857,127</u>	<u>\$ 339,387,998</u>	<u>\$ 87,528,042</u>	<u>\$ 231,329,085</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>
2023							
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
U.S. government and agency securities	\$ 62,606,356	\$ 67,177,678	\$ 15,030,520	\$ 47,575,836	\$ —	\$ —	\$ —
State and agency municipal securities	27,842,592	28,288,185	—	27,842,592	—	—	—
City and county municipal securities	26,687,200	27,289,842	—	26,687,200	—	—	—
Corporate debt securities	128,220,721	141,126,375	—	128,220,721	—	—	—
Cash equivalents	175,074,835	175,074,835	175,074,835	—	—	—	—
Total bonds and cash equivalents	<u>\$ 420,431,704</u>	<u>\$ 438,956,915</u>	<u>\$ 190,105,355</u>	<u>\$ 230,326,349</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ —</u>

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

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

21. OTHER ITEMS

A. Unusual or Infrequent Items

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2024 and 2023.

B. Troubled Debt Restructuring: Debtors

The Company has no troubled debt restructurings as of December 31, 2024 and 2023.

C. Other Disclosures

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

D. Business Interruption Insurance Recoveries

The Company has not received any business interruption insurance recoveries during 2024 and 2023.

E. State Transferable and Non-transferable Tax Credits

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

F. Sub-Prime Mortgage-Related Risk Exposure

(1–4) The Company does not have any sub-prime mortgage-related risk exposure as of December 31, 2024 and 2023.

G. Retained Assets

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

H. Insurance-Linked Securities Contracts

As of December 31, 2024, the Company is not aware of any possible proceeds of insurance-linked securities.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy — Not applicable.

22. EVENTS SUBSEQUENT

Subsequent events have been evaluated through February 26, 2025, which is the date these financial statements were available for issuance.

TYPE I — Recognized Subsequent Events

Any material Type I events subsequent to December 31, 2024, have been recognized in the financial statements and corresponding disclosures.

TYPE II — Non-Recognized Subsequent Events

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

23. REINSURANCE

Reinsurance Agreements — In the normal course of business, the Company seeks to reduce potential losses that may arise from catastrophic events that cause unfavorable underwriting results by reinsuring certain levels of such risk with affiliated and other nonaffiliated reinsurers. The Company remains primarily liable as the direct insurer on all risks reinsured.

The Company has a reinsurance agreement with UnitedHealthcare Insurance Company, an affiliate of the Company, through which 60% of earned comprehensive commercial member premiums, hospital and medical expenses, and operating expenses are transferred to UnitedHealthcare Insurance Company. Reinsurance premiums of \$3,166,170 and \$2,663,251 for the years ended December 31, 2024 and 2023, respectively, were netted against net premium income in the financial statements. Reinsurance recoveries of \$3,016,368 and \$2,541,864 for the years ended December 31, 2024 and 2023, respectively, are included in net reinsurance recoveries in the financial statements. The Company transferred general administrative expenses and claim adjustment expenses of \$516,132 and \$611,108 in 2024 and 2023, respectively, to UnitedHealthcare Insurance Company, under this agreement. The Company recorded receivables related to changes in reserve estimates that includes changes related to medical loss ratio rebates of \$147,290 and \$(82,143) in 2024 and 2023, respectively, which are netted against claims unpaid within the financial statements. The Company recorded paid claim receivables related to this agreement, including payments made for the medical loss ratio rebates of \$201,805 and \$180,949 in 2024 and 2023, respectively, which are included in amounts recoverable from reinsurers within the financial statements. The Company recorded ceded reserves for provider incentives of \$1,191 and \$8,743 in 2024 and 2023, respectively, which is included in accrued medical incentive pool and bonus amounts in the financial statements. The agreement also provides insolvency-only protection for its enrollees. Fees related to this agreement, which are calculated based on a percentage of earned premiums, of \$670,183 and \$699,117 in 2024 and 2023, respectively, are netted against net premium income in the financial statements. This agreement also provides for reserve cap protection. Reinsurance contracts do not relieve the Company from its obligations to policyholders. Failure of reinsurers to honor their obligations could result in losses to the Company.

The Company also has a reinsurance agreement for its Medicaid product with UnitedHealthcare Insurance Company. Under the provisions of the contract, the reinsurer indemnifies the Company for 80% of all eligible inpatient services in excess of \$300,000 per Medicaid member during each contract year. The Company ceded premiums of \$1,761,279 in 2024 and \$1,505,163 in 2023 to UnitedHealthcare Insurance Company under this agreement. Reinsurance recoveries of \$(1,605,431) and \$1,451,927 as of December 31, 2024 and 2023, respectively, are included in net reinsurance recoveries in the financial statements.

The Company recorded receivables related to changes in reserve estimates that includes changes related to medical loss ratio rebates of \$2,982,971 and \$1,377,540 in 2024 and 2023, respectively, which are netted against claims unpaid within the financial statements.

The effect of both internal and external reinsurance agreements outlined above on net premium income, hospital and medical expenses, general administrative expenses and claims adjustment expenses is presented below:

	2024	2023
Premiums:		
Direct	\$ 603,810,190	\$ 691,025,739
Ceded	5,597,631	4,867,531
Net premium income	<u>\$ 598,212,559</u>	<u>\$ 686,158,208</u>
Hospital and medical expenses:		
Direct	\$ 590,982,817	\$ 633,208,265
Ceded	4,596,325	4,316,558
Net hospital and medical expenses	<u>\$ 586,386,492</u>	<u>\$ 628,891,707</u>
General Administrative Expenses and Claims Adjustment Expenses:		
Direct	\$ 53,335,237	\$ 51,436,742
Ceded	516,132	611,108
Net General Administrative Expenses and Claims Adjustment Expenses	<u>\$ 52,819,105</u>	<u>\$ 50,825,634</u>

The Company recognized reinsurance recoveries related to internal and external reinsurance agreements of \$4,596,325 and \$4,316,558 in 2024 and 2023, respectively, which are recorded as net reinsurance recoveries in the financial statements. In addition, reinsurance recoverables related to internal and external

reinsurance agreements of \$201,805 and \$180,949 for paid losses are recorded as amounts recoverable from reinsurers and \$3,414,800 and \$1,610,445 for unpaid losses are recorded as a reduction to claims unpaid in 2024 and 2023, respectively, in the financial statements.

A. Ceded Reinsurance Report

Section 1 — General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?
- Yes () No (X)
- (2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or any other person not primarily engaged in the insurance business?
- Yes () No (X)

Section 2 — Ceded Reinsurance Report — Part A

- (1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?
- Yes () No (X)
- (2) Does the reporting entity have any reinsurance agreements in effect 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)

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.
- The Company estimates there should be no aggregate reduction in surplus for termination of all reinsurance agreements as of December 31, 2024.
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?
- Yes () No (X)

B. Uncollectible Reinsurance — During 2024 and 2023, there were no uncollectible reinsurance recoverables.

C. Commutation of Ceded Reinsurance — There was no commutation of reinsurance in 2024 or 2023.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation — Not applicable.

E. Reinsurance Credit

- (1) The Company has no ceding reinsurance contracts subject to APPENDIX A-791 – *Life and Health Reinsurance Agreements* (“A-791”) that includes a provision which limits the reinsurer’s assumption of significant risk.
- (2) The Company has no ceding reinsurance contracts not subject to A-791, for which reinsurance accounting was applied and which includes provisions that limits the reinsurer’s assumption of risk.
- (3) The Company’s reinsurance contracts do not contain features which result in delays in payment in form or in fact.
- (4) The Company has not reflected a reinsurance accounting credit for any assumption reinsurance contracts not subject to APPENDIX A-791 and not yearly renewable term, which meet the risk transfer requirements of Statement of Statutory Accounting Principles No. 61R, *Life, Deposit-Type, and Accident and Health Reinsurance*.
- (5) The Company did not cede any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract during the period covered by these financial statements, for which the statutory accounting treatment and generally accepted accounting principles accounting treatment were not the same.

- (6) The Company’s ceded reinsurance contracts which are not subject to A-791 and not yearly renewable term reinsurance, are treated the same for generally accepted accounting principles and statutory accounting principles.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

- A. The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.
- B. Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations and aggregate health policy reserves in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.
- C. Pursuant to the Affordable Care Act, the Company’s commercial business is subject to retrospectively rated features based on the actual medical loss ratio experienced on the commercial line of business and redetermination features for premium adjustments for changes to each member’s health scores based on guidelines determined by the Affordable Care Act. The total amount of direct premiums written for which a portion is subject to the retrospectively rated and redetermination are \$5,257,314 and \$4,418,756, representing <1% and <1% of total direct premiums written as of December 31, 2024 and 2023, respectively.

Pursuant to the regulations of the Medicaid Managed Care Rule regulations, premiums associated with the Company’s Medicaid line of business is subject to retrospectively rated features based on the actual medical loss ratio experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. The Company also has recorded risk-corridor amounts from the state Medicaid agency which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums adjustments based on the risk-corridor tier guidelines included in the contract. In addition, the Company’s Medicaid contract, with the state of Rhode Island, is subject to redetermination features for which a portion of direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the direct premiums written can be eligible for a performance guarantee payment based on various quality measures, and for which a portion of direct premiums written is subject to risk adjusted rating changes and withhold adjustments. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$566,583,856 and \$670,527,497, representing 94% and 97% of total direct premiums written as of December 31, 2024 and December 31, 2023, respectively.

- D. The Company is required to maintain specific minimum medical loss ratios on the comprehensive commercial lines of business.

The following table discloses the minimum medical loss ratio rebate liability for the comprehensive commercial and Medicare lines of business which is included in aggregate health policy reserves in the financial statements for the years ended December 31, 2024 and 2023:

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior reporting year					
(1) Medical loss ratio rebates incurred	\$ —	\$ (56,751)	\$ —	\$ —	\$ (56,751)
(2) Medical loss ratio rebates paid	—	—	—	—	—
(3) Medical loss rebates unpaid	—	—	—	—	—
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	—
Current reporting year-to-date					
(7) Medical loss ratio rebates incurred	—	—	—	—	—
(8) Medical loss ratio rebates paid	—	—	—	—	—
(9) Medical loss rebates unpaid	—	—	—	—	—
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	—

E. Risk-Sharing Provisions of the Affordable Care Act

- (1) The Company has accident and health insurance premiums in 2024 and 2023 subject to the Affordable Care Act risk-sharing provisions for the permanent risk adjustment program.

The risk adjustment program is a permanent program designed to mitigate the potential impact of adverse selection that generally applies to non-grandfathered individual and small group plans inside and outside of exchanges. The program helps to stabilize market premiums by transferring funds from plans with relatively low-risk enrollees to plans with relatively high-risk enrollees. The data used by the Centers for Medicare and Medicaid Services to determine the risk adjustment transfer amount is subject to audits along with the true-up to the final Centers for Medicare and Medicaid Services report, which may result in a material change to arrive at the final risk adjustment amount from the initial risk adjustment estimate recorded. Premium adjustments pursuant to the risk adjustment program are accounted for as premium subject to redetermination and user fees are accounted for as assessments.

- (2) The following table presents the current year impact for the permanent risk adjustment program regarding the risk-sharing provisions of the Affordable Care Act on assets, liabilities, and operations:

a. Permanent ACA Risk Adjustment Program

2024

Assets

- | | | |
|--|----|--------|
| 1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) | \$ | 41,794 |
|--|----|--------|

Liabilities

- | | |
|--|---------|
| 2. Risk adjustment user fees payable for ACA Risk Adjustment | 1,612 |
| 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium) | 673,485 |

Operations (Revenue & Expense)

- | | |
|--|-----------|
| 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment | (633,258) |
| 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) | 1,613 |

- (3) The following table is a roll forward of the prior year Affordable Care Act risk-sharing provisions for the permanent risk adjustment program for asset and liability balances, along with reasons for adjustments to prior year balances:

	Accrued During the Prior Year on Business Written before December 31 of the Prior Year				Received or Paid as of the Current Year on Business Written before December 31 of the Prior Year				Differences		Adjustments		Unsettled Balances as of the Reporting Date	
													Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
									Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		
	1	2	3	4	5	6	7	8	9	10				
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)			
a. Permanent ACA Risk Adjustment Program														
1. Premium adjustment receivable (including high risk pool payments)	\$ 276,606	\$ —	\$ 106,545	\$ —	\$ 170,061	\$ —	\$ (170,061)	\$ —	A	\$ —	\$ —			
2. Premium adjustment (payable) (including high risk pool premium)	—	(1,039,079)	—	(870,585)	—	(168,494)	—	180,330	B	—	11,836			
3. Total ACA Permanent Risk Adjustment Program	276,606	(1,039,079)	106,545	(870,585)	170,061	(168,494)	(170,061)	180,330		—	11,836			

The risk adjustment receivable as of December 31, 2023 utilized paid claims through October 31, 2023. As of the Reporting Date, the risk adjustment receivable related to prior periods was adjusted based on CMS' Summary Report on Individual and Small Group Market Risk Transfers for the 2023 Benefit Year. The risk adjustment receivable was further adjusted based on CMS' Summary Report of 2022 Benefit Year Risk

A. Adjustment Data Validation (HHS-RADV) Adjustments to Risk Adjustment State Transfers.

The risk adjustment payable as of December 31, 2023 utilized paid claims through October 31, 2023. As of the Reporting Date, the risk adjustment payable related to prior periods was adjusted based on CMS' Summary Report on Individual and Small Group Market Risk Transfers for the 2023 Benefit Year. The risk adjustment payable was further adjusted based on CMS' Summary Report of 2022 Benefit Year Risk Adjustment Data.

B. Validation (HHS-RADV) Adjustments to Risk Adjustment State Transfers.

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

A. Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the financial statements. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, health care and other amounts receivable (excluding provider loans and advances not yet expensed) and reinsurance recoverables for the years ended December 31, 2024 and 2023:

	2024		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ —	\$ (75,883,234)	\$ (75,883,234)
Paid claims — net of health care receivables* and reinsurance recoveries collected	536,045,916	67,888,461	603,934,377
End of year claim reserve	56,343,961	4,920,827	61,264,788
Incurring claims excluding the change in health care receivables* and reinsurance recoveries collected as presented below	592,389,877	(3,073,946)	589,315,931
Beginning of year health care receivables* and reinsurance recoveries collected	—	10,980,732	10,980,732
End of year health care receivables* and reinsurance recoverables	(6,642,327)	(7,267,844)	(13,910,171)
Total incurred claims	\$ 585,747,550	\$ 638,942	\$ 586,386,492

*Health care receivables excludes provider loans and advances not yet expensed of \$1,100,000 and \$192 for 2024 and 2023, respectively.

	2023		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ —	\$ (52,128,181)	\$ (52,128,181)
Paid claims — net of health care receivables* and reinsurance recoveries collected	550,651,051	58,744,634	609,395,685
End of year claim reserve	64,968,659	10,914,575	75,883,234
Incurring claims excluding the change in health care receivables and reinsurance recoveries collected as presented below	615,619,710	17,531,028	633,150,738
Beginning of year health care receivables* and reinsurance recoveries collected	—	6,721,701	6,721,701
End of year health care receivables* and reinsurance recoverables	(8,021,759)	(2,958,973)	(10,980,732)
Total incurred claims	\$ 607,597,951	\$ 21,293,756	\$ 628,891,707

*Health care receivables excludes provider loans and advances not yet expensed of \$192 and \$0 for 2023 and 2022, respectively.

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, net of health care and other amounts receivable, and reinsurance recoverables as of, December 31, 2023 was \$ 64,902,502. As of December 31, 2024, \$67,888,461 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care and other amounts receivable (excluding provider loans and advances not yet expensed) and reinsurance recoverables are now \$(2,347,017), as a result of re-estimation of unpaid claims. Therefore, there has been \$638,942 unfavorable prior year development since December 31, 2023 to December 31, 2024. The primary drivers consist of \$3,577,425 unfavorable development in risk share, \$2,375,868 unfavorable development in retroactivity for inpatient, outpatient, physician, and pharmacy claims, \$1,868,260 unfavorable development in capitation, \$132,314 unfavorable development in reinsurance offset by \$3,270,037 favorable development in other claims reserve, favorable development as a result of a change in the provision for adverse deviations in experience of \$3,035,949, \$740,541 favorable development in pharmacy rebates, and \$312,216 favorable development in surcharge.

At December 31, 2023, the Company recorded \$21,293,756 of unfavorable development. The primary drivers consist of \$19,879,229 unfavorable development in Medicaid risk share and unfavourable development of \$4,362,896 in retroactivity for inpatient outpatient, physician, and pharmacy claims offset by favorable development as a result of a change in the provision for adverse deviations in experience of \$2,937,754.

The Company incurred claims adjustment expenses of \$18,005,999 and \$19,243,445 in 2024 and 2023, respectively. These costs are included in the management service fees paid by the Company to United HealthCare Services, Inc. as a part of the management agreement (see Note 10). The following table discloses paid claims adjustment expenses, incurred claims adjustment expenses, and the balance in unpaid claims adjustment expenses reserve for 2024 and 2023:

	2024	2023
Total claims adjustment expenses	\$ 18,005,999	\$ 19,243,445
Less: current year unpaid claims adjustment expenses	(382,451)	(400,006)
Add: prior year unpaid claims adjustment expenses	400,006	343,133
	<u>18,023,554</u>	<u>19,186,572</u>
Total claims adjustment expenses paid	\$ 18,023,554	\$ 19,186,572

B. The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid claims adjustment expenses in 2024.

26. INTERCOMPANY POOLING ARRANGEMENTS

A–G. The Company did not have any intercompany pooling arrangements in 2024 or 2023.

27. STRUCTURED SETTLEMENTS

A–B. The Company did not have structured settlements in 2024 or 2023.

28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

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

The Company evaluates admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has nonadmitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of Statement of Statutory Accounting Principles No. 84, *Health Care and Government Insured Plan Receivables* from the financial statements.

For each pharmaceutical management agreement for which a portion of the total pharmacy rebates receivable can be admitted based on the admissibility criteria of Statement of Statutory Accounting Principles No. 84, *Health Care and Government Insured Plan Receivables*, the pharmacy rebate transaction history is summarized as follows:

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received within 90 Days of Billing	Actual Rebates Received within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
12/31/2024	\$ 2,557,771	\$ 895,287	\$ —	\$ —	\$ —
9/30/2024	2,360,857	2,632,649	1,275,016	—	—
6/30/2024	2,120,942	2,609,429	1,373,703	995,009	—
3/31/2024	2,166,446	2,420,619	1,212,499	1,018,085	62,791
12/31/2023	2,488,841	2,510,827	1,520,180	801,609	73,833
9/30/2023	2,647,513	2,732,827	1,560,326	916,762	130,278
6/30/2023	2,497,319	2,564,789	1,101,784	1,249,513	158,558
3/31/2023	2,301,835	2,364,888	745,653	1,276,879	273,908
12/31/2022	1,790,090	1,878,465	649,604	869,341	341,429
9/30/2022	1,790,092	1,707,037	857,457	901,617	(64,252)
6/30/2022	1,723,360	1,719,194	961,451	743,642	(3,448)
3/31/2022	1,516,792	1,554,213	628,585	735,128	175,401

Of the amount reported as health care and other amounts receivable, \$3,804,909 and \$ 3,675,408 relate to pharmacy rebates receivable as of December 31, 2024 and 2023, respectively. This change is primarily due to increased membership along with the change in generic/name brand mix.

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

The Company also admitted \$1,529,390 and \$958,532 of provider receivables resulting from claim overpayments as of December 31, 2024 and 2023, respectively, which are included in health care and other amounts receivable in the financial statements.

29. PARTICIPATING POLICIES

The Company did not have any participating contracts in 2024 or 2023.

30. PREMIUM DEFICIENCY RESERVES

The Company has not recorded any premium deficiency reserves as of December 31, 2024 or 2023. The analysis of premium deficiency reserves was completed as of December 31, 2024 and 2023. The Company did consider anticipated investment income when calculating the premium deficiency reserves.

The following table summarizes the Company's premium deficiency reserves as of December 31, 2024 and 2023:

	2024
1. Liability carried for premium deficiency reserves	\$ —
2. Date of the most recent evaluation of this liability	<div>12/31/2024</div>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	2023
1. Liability carried for premium deficiency reserves	\$ —
2. Date of the most recent evaluation of this liability	<div>12/31/2023</div>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, the Company has no salvage. As of December 31, 2024 and 2023, the Company had no specific accruals established for outstanding subrogation, as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid and aggregate health claim reserves.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1

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

Yes ☒ 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 ☒ No ☐ N/A ☐

1.3

State Regulating?

Rhode Island

1.4

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

Yes ☒ No ☐

1.5

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

0000731766

2.1

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

Yes ☐ No ☒

2.2

If yes, date of change:

3.1

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

12/31/2023

3.2

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

12/31/2018

3.3

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

06/11/2020

3.4

By what department or departments?
Rhode Island Department of Business Regulation

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ N/A ☒

3.6

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

Yes ☐ No ☐ N/A ☒

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

Yes ☐ No ☒
Yes ☐ No ☒

4.2

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

Yes ☐ No ☒
Yes ☐ No ☒

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 ☒

5.2

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

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

6.1

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

Yes ☐ No ☒

6.2

If yes, give full information
.....

7.1

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

Yes ☐ No ☒

7.2

If yes,
7.21 State the percentage of foreign control
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).

0.0 %

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES

8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If the response to 8.1 is yes, please identify the name of the DIHC.
.....

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [X] No []

8.4

If response to 8.3 is yes, please provide below the names and 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
Optum Bank, Inc.	Salt Lake City, UT .....	...NO....	...NO....	...YES....	...NO....
.....

8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the 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?
Deloitte & Touche LLP, Minneapolis, MN.

10.1

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

Yes [] No [X]

10.2

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

10.3

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

Yes [] No [X]

10.4

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

10.5

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

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

10.6

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

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Gary A. Iannone, Vice President of Actuarial Services of United HealthCare Services Inc., an affiliate of UnitedHealthcare of New England, Inc., 185 Asylum Street, Hartford, CT 06103

12.1

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

Yes [] No [X]

12.11

Name of real estate holding company ...

12.12

Number of parcels involved

0

12.13

Total book/adjusted carrying value

\$0

12.2

If yes, provide explanation
.....

13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

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

13.2

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

Yes [] No []

13.3

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

Yes [] No []

13.4

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

Yes [] No [] N/A []

14.1

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

Yes [X] No []

a.

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

b.

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

c.

Compliance with applicable governmental laws, rules and regulations;

d.

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

e.

Accountability for adherence to the code.

14.11

If the response to 14.1 is No, please explain:
.....

14.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]

14.21

If the response to 14.2 is yes, provide information related to amendment(s).
.....

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).
.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, Inc.

GENERAL INTERROGATORIES

- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [] No [X]
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes [X] No []
17.

Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes [X] No []
18.

Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [X] No []

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [] No [X]
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....\$ 0

20.12 To stockholders not officers.....\$ 0

20.13 Trustees, supreme or grand (Fraternal Only)\$ 0
- 20.2

Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....\$ 0

20.22 To stockholders not officers.....\$ 0

20.23 Trustees, supreme or grand (Fraternal Only)\$ 0
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes [] No [X]
- 21.2

If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others.....\$ 0

21.22 Borrowed from others.....\$ 0

21.23 Leased from others\$ 0

21.24 Other\$ 0
- 22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [X] No []
- 22.2

If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ 419

22.22 Amount paid as expenses\$ 17,174

22.23 Other amounts paid\$ 0
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [] No [X]
- 23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0
- 24.1

Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?

Yes [] No [X]
- 24.2

If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

- 25.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03).....

Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, 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)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 0

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$ 0

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

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

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

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

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0

25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0

25.093 Total payable for securities lending reported on the liability page \$ 0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$ 0

26.22 Subject to reverse repurchase agreements \$ 0

26.23 Subject to dollar repurchase agreements \$ 0

26.24 Subject to reverse dollar repurchase agreements \$ 0

26.25 Placed under option agreements \$ 0

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ 0

26.27 FHLB Capital Stock \$ 0

26.28 On deposit with states 1,445,946

26.29 On deposit with other regulatory bodies \$ 0

26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0

26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 0

26.32 Other \$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

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

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

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

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

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

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

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

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.

Yes [] No []

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$ 0

29. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, 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
Internally Managed	I.....
DWS Investment Management Americas Inc.	U.....
BlackRock Financial Management, Inc	U.....

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

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

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
107105	BlackRock Financial Management, Inc	549300LVXY1VJKE13M84	SEC	NO.....
104518	DWS Investment Management Americas Inc.	CZ83K4EEEEX8QVCT3B128	SEC	NO.....

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

30.2 If yes, complete the following schedule:

1	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 2024 OF THE UnitedHealthcare of New England, 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 Bonds	281,074,111	260,543,240	(20,530,871)
31.2 Preferred stocks	0	0	0
31.3 Totals	281,074,111	260,543,240	(20,530,871)

- 31.4 Describe the sources or methods utilized in determining the fair values:
For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.
- 32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]
- 32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []
- 32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
N/A
- 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 [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, 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 [X]
39.22 Immediately converted to U.S. dollars Yes [] No [X]
- 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?

\$ 30,591
- 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
OLIVER WYMAN .....	..... 30,591
- 41.1

Amount of payments for legal expenses, if any?

\$ 0
- 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?

\$ 0
- 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

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

677,776,567

703,323,670

2.2

Premium Denominator

677,776,567

703,323,670

2.3

Premium Ratio (2.1/2.2)

1.000

1.000

2.4

Reserve Numerator

83,662,487

172,011,929

2.5

Reserve Denominator

83,662,487

172,011,929

2.6

Reserve Ratio (2.4/2.5)

1.000

1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes [] No [X]

3.2

If yes, give particulars:

.....

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [X] No []

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [] No []

5.1

Does the reporting entity have stop-loss reinsurance?

Yes [X] No []

5.2

If no, explain:

.....

5.3

Maximum retained risk (see instructions)

5.31

Comprehensive Medical

\$ 0

5.32

Medical Only

\$ 0

5.33

Medicare Supplement

\$ 0

5.34

Dental & Vision

\$ 0

5.35

Other Limited Benefit Plan

\$ 0

5.36

Other

\$ 0

6.

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

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?.....

Yes [X] No []

7.2

If no, give details

.....

8.

Provide the following information regarding participating providers:

8.1

Number of providers at start of reporting year

113,507

8.2

Number of providers at end of reporting year

44,873

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 2024 OF THE UnitedHealthcare of New England, Inc.

GENERAL INTERROGATORIES

10.1

Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?

Yes ☒ No ☐

10.2

If yes:

10.21

Maximum amount payable bonuses

\$ 21,546,340

10.22

Amount actually paid for year bonuses

\$ 27,271,022

10.23

Maximum amount payable withholds

\$ 0

10.24

Amount actually paid for year withholds

\$ 29,558

11.1

Is the reporting entity organized as:

11.12

A Medical Group/Staff Model

Yes ☐ No ☒

11.13

An Individual Practice Association (IPA), or,

Yes ☐ No ☒

11.14

A Mixed Model (combination of above)?

Yes ☐ No ☒

11.2

Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?

Yes ☒ No ☐

11.3

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

Rhode Island

11.4

If yes, show the amount required.

\$ 44,857,365

11.5

Is this amount included as part of a contingency reserve in stockholder's equity?

Yes ☐ No ☒

11.6

If the amount is calculated, show the calculation

The Rhode Island Department of Business Regulation holds UnitedHealthCare of New England, Inc. to 275% of RBC ACL.

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

1 Name of Service Area
UnitedHealthcare of New England, Inc. is licensed statewide in Massachusetts for the commercial line of business. Additionally, the Medicare and Retirement line of business is licensed to operate in Bristol, Essex, Hampden, Middlesex, Norfolk, Plymouth, and Suffolk counties.
UnitedHealthcare of New England, Inc. is licensed statewide in Rhode Island for all lines of business
UnitedHealthcare of New England, Inc. is licensed in Carroll, Cheshire, Coos, Grafton, Hillsborough, Rockingham, Strafford and Sullivan Counties in New Hampshire for Medicare and Retirement line of business.
UnitedHealthcare of New England, Inc. is licensed in Allegheny, Beaver, Berks, Bucks, Butler, Chester, Clarion, Crawford, Erie, Fayette, Forest, Greene, Jefferson, Lawrence, Lehigh, Mercer, Northampton, Venango, Warren, Washington, Westmoreland and York Counties in Pennsylvania for Medicare and Retirement line of business.
UnitedHealthcare of New England, Inc. is licensed in Addison, Bennington, Chittenden, Lamoille, Orange, Rutland, Washington, Windham and Windsor Counties in Vermont for Medicare and Retirement line of business.
UnitedHealthcare of New England, Inc. is licensed statewide in Maine for the commercial line of business.

13.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒

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 ☒

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 ☐

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 gurarantee)
Universal Life (with or without secondary gurarantee)
Variable Universal Life (with or without secondary gurarantee)

16.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes ☒ No ☐

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 ☐

FIVE-YEAR HISTORICAL DATA

	1 2024	2 2023	3 2022	4 2021	5 2020
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	374,390,380	480,418,315	450,640,552	492,033,121	473,586,044
2. Total liabilities (Page 3, Line 24)	154,133,514	249,912,152	227,026,792	285,848,677	269,174,406
3. Statutory minimum capital and surplus requirement	44,857,365	9,070,861	61,527,012	91,857,873	500,000
4. Total capital and surplus (Page 3, Line 33)	220,256,866	230,506,163	223,613,760	206,184,444	204,411,638
Income Statement (Page 4)					
5. Total revenues (Line 8)	677,776,567	703,323,670	656,561,973	1,584,388,273	1,433,651,095
6. Total medical and hospital expenses (Line 18)	586,386,492	628,891,707	563,885,513	1,350,274,816	1,187,529,163
7. Claims adjustment expenses (Line 20)	18,005,999	19,243,445	16,616,318	55,244,420	51,311,487
8. Total administrative expenses (Line 21)	34,813,106	31,582,189	34,440,176	100,187,979	130,670,055
9. Net underwriting gain (loss) (Line 24)	38,570,970	23,606,329	41,619,966	78,681,058	64,140,390
10. Net investment gain (loss) (Line 27)	14,436,836	15,955,934	8,215,095	6,596,627	5,573,583
11. Total other income (Lines 28 plus 29)	38,401	59,446	(98,526)	(312,281)	(347,376)
12. Net income or (loss) (Line 32)	42,533,053	31,711,537	39,675,012	67,172,242	49,489,810
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	(46,086,315)	28,684,339	71,934,286	82,781,185	112,070,371
Risk-Based Capital Analysis					
14. Total adjusted capital	220,256,866	230,506,163	223,613,760	206,184,444	204,411,638
15. Authorized control level risk-based capital	16,311,769	3,383,825	3,309,866	33,402,863	39,155,808
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	80,315	95,355	100,989	180,005	172,670
17. Total members months (Column 6, Line 7)	1,027,063	1,221,560	1,198,845	2,141,709	1,984,860
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)	86.5	89.4	85.9	85.2	82.8
20. Cost containment expenses	2.1	2.2	2.0	2.7	2.7
21. Other claims adjustment expenses	0.5	0.6	0.5	0.8	0.9
22. Total underwriting deductions (Line 23)	94.3	96.6	93.7	95.0	95.5
23. Total underwriting gain (loss) (Line 24)	5.7	3.4	6.3	5.0	4.5
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	65,722,390	66,928,371	109,762,372	140,651,686	113,554,421
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	65,083,450	45,634,617	110,578,965	149,258,834	111,880,618
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate	0	0	0	0	0
31. All other affiliated	0	0	0	0	0
32. Total of above Lines 26 to 31	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	0

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

Yes [] No []

If no, please explain:

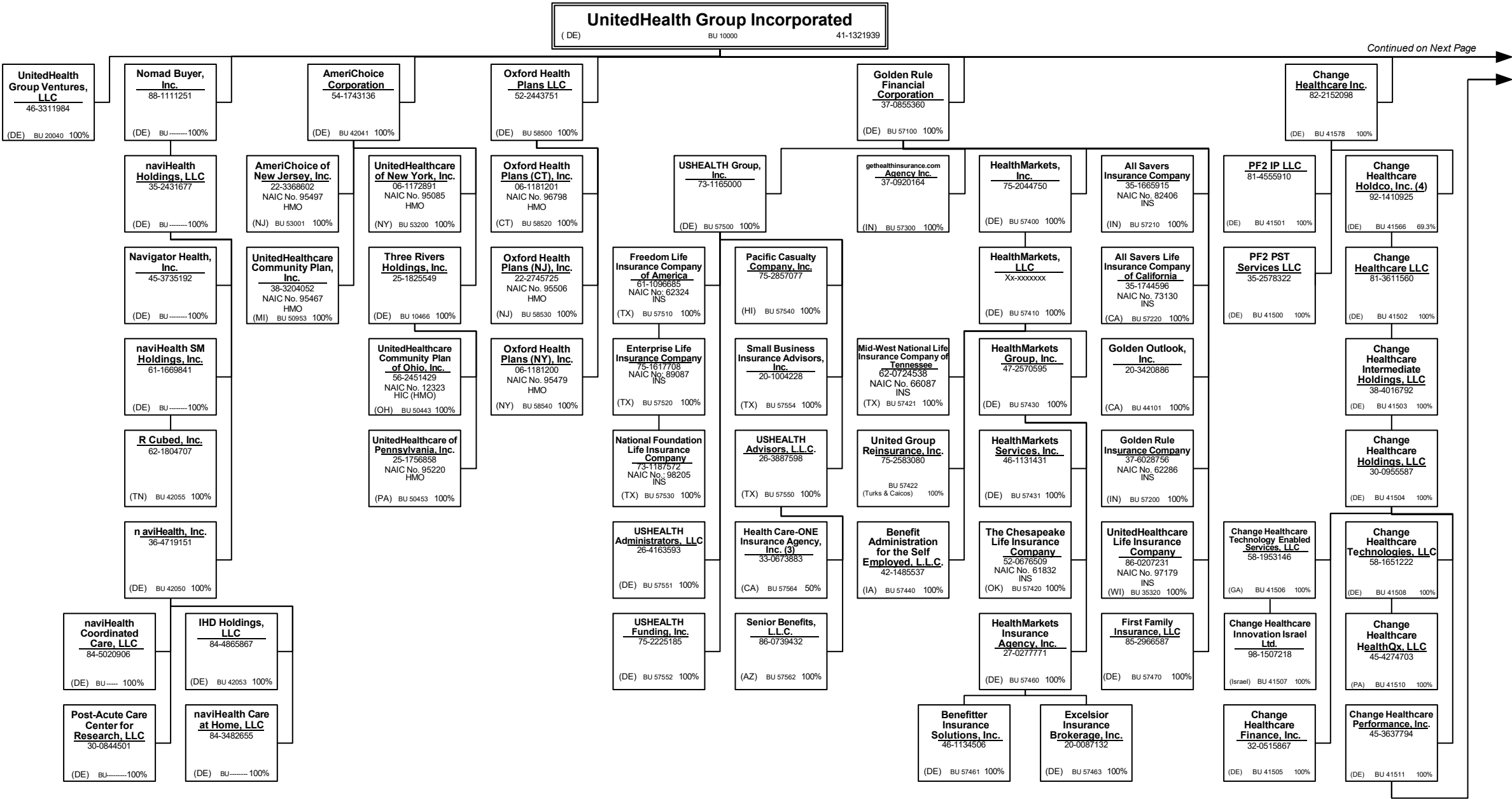
SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories											
States, etc.	1	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	
1. Alabama	AL	N	0	0	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0	0
20. Maine	ME	L	2,870,029	0	0	0	0	0	2,870,029	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0	0
22. Massachusetts	MA	L	0	39,026	0	0	0	0	39,026	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0	0
30. New Hampshire	NH	L	0	(62,584)	0	0	0	0	(62,584)	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	L	0	21,599	0	0	0	0	21,599	0	0
40. Rhode Island	RI	L	2,387,284	32,118,390	566,583,857	0	0	0	601,089,531	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0	0
46. Vermont	VT	L	0	(147,411)	0	0	0	0	(147,411)	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0	0	0
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	5,257,313	31,969,020	566,583,857	0	0	0	0	603,810,190	0	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0	0	0
61. Totals (Direct Business)	XXX	5,257,313	31,969,020	566,583,857	0	0	0	0	603,810,190	0	0
DETAILS OF WRITE-INS											
58001.	XXX										
58002.	XXX										
58003.	XXX										
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0	0

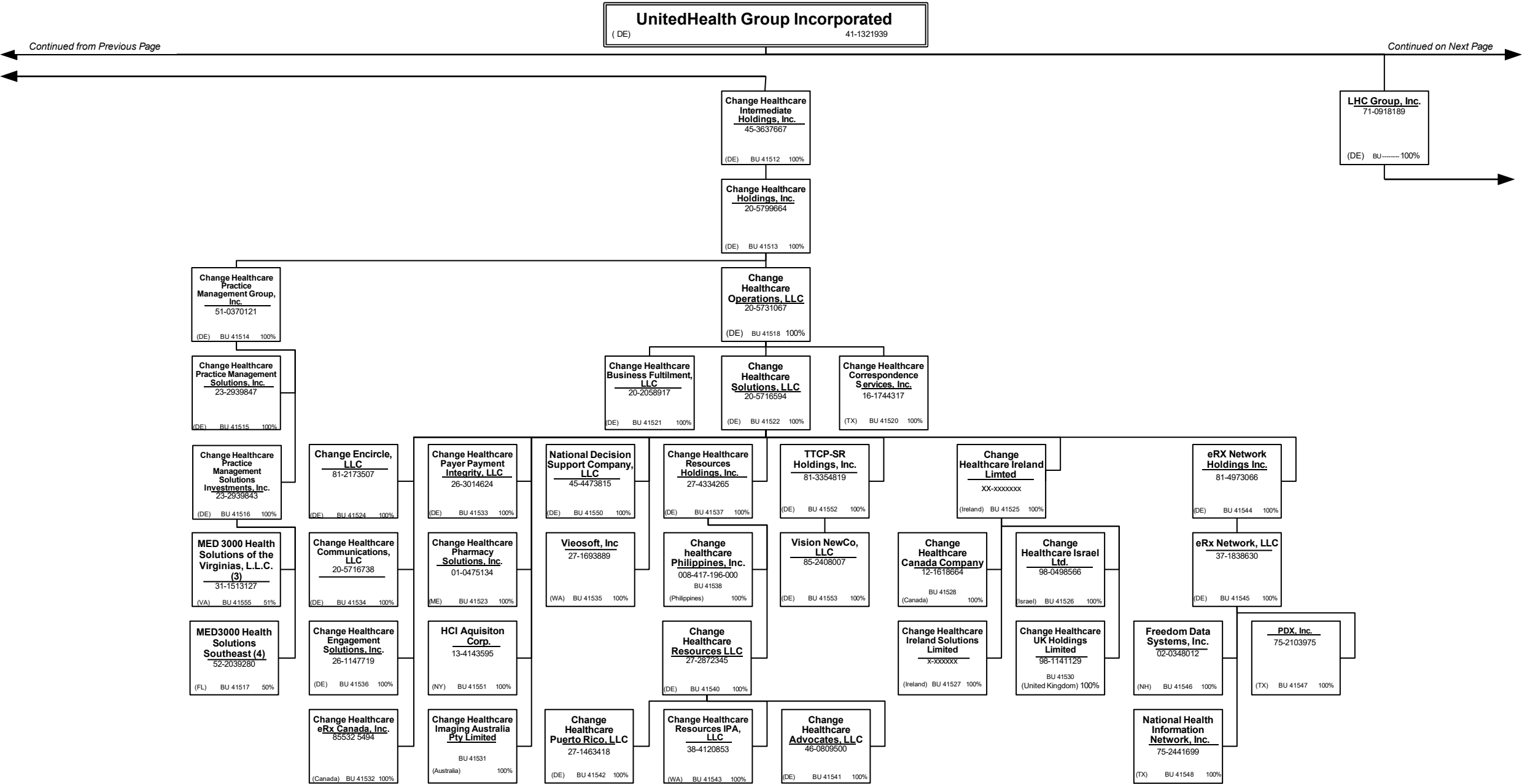
(a) Active Status Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 6
2. R - Registered - Non-domiciled RRGs..... 0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
4. Q - Qualified - Qualified or accredited reinsurer..... 0
5. N - None of the above - Not allowed to write business in the state..... 51

(b) Explanation of basis of allocation by states, premiums by state, etc.
Premiums are allocated by state based on geographic market.

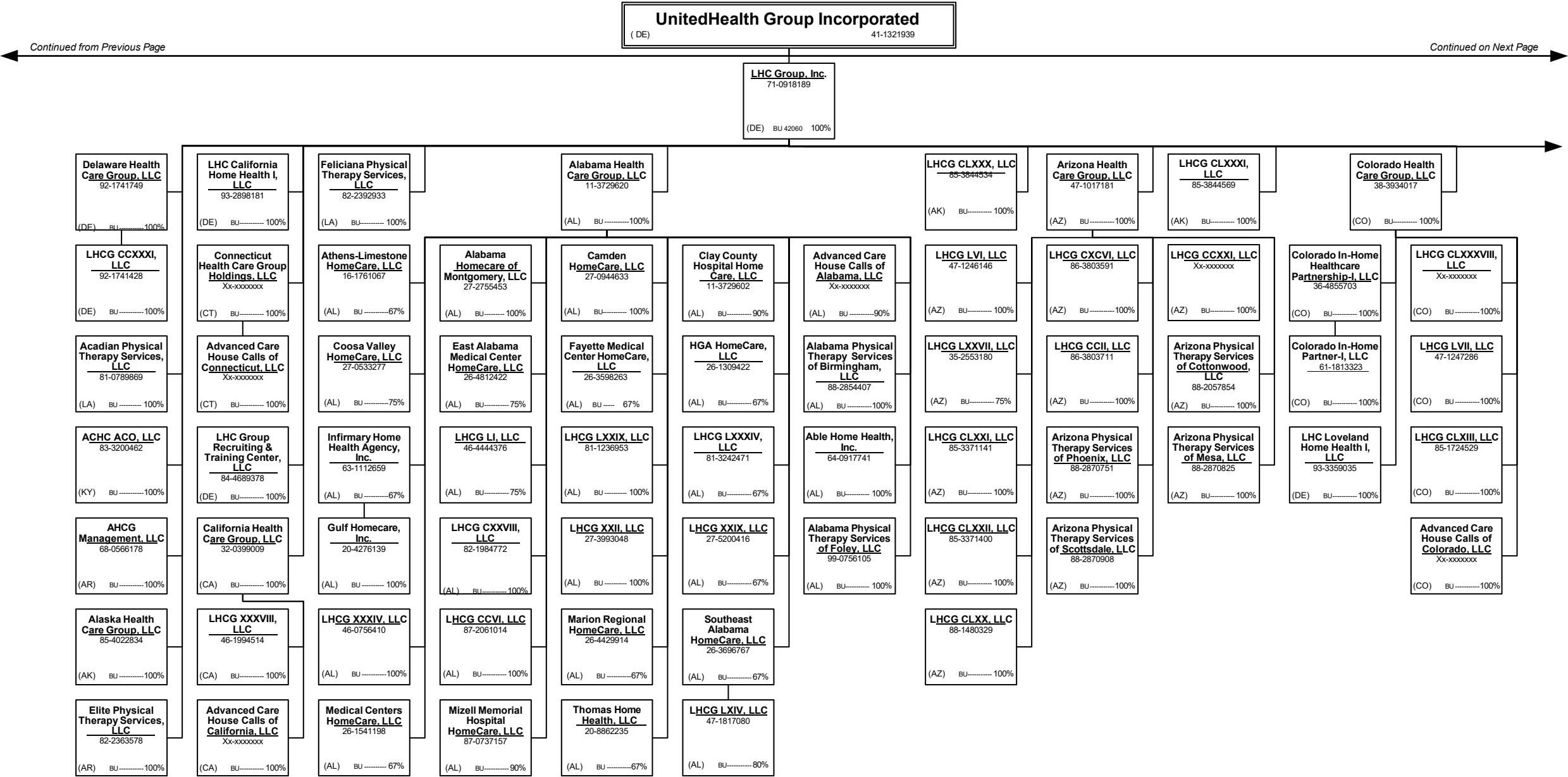
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



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



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



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

UnitedHealth Group Incorporated
(DE) 41-1321939

Continued from Previous Page

Continued on Next Page

LHC Group, Inc.
71-0918189
(DE) BU 42060 100%

Arkansas Health
Care Group, LLC
54-2078932
(AR) BU-----100%

Indiana Health
Care Group, LLC
27-5130167
(IN) BU-----100%

Kentucky Health
Care Group, LLC
51-0588603
(KY) BU-----100%

LHC Home Health
Care Group of
Michigan, LLC
Xx-xxxxxxx
(MI) BU-----100%

Arkansas
HomeCare of
Forrest City, LLC
06-1778265
(AR) BU-----100%

Arkansas
HomeCare of
Fulton, LLC
33-1154428
(AR) BU-----100%

Arkansas
HomeCare of Hot
Springs, LLC
20-3552602
(AR) BU-----100%

Arkansas Physical
Therapy Services
of Conway, LLC
84-4642424
(AR) BU-----100%

CMC Home Health
and Hospice, LLC
26-2688869
(AR) BU-----100%

Dallas County
Medical Center
HomeCare, LLC
34-2013785
(AR) BU-----100%

LHCG LXXXIII,
LLC
81-2227463
(AR) BU-----100%

LHCG CXCVII, LLC
86-3859120
(IN) BU-----100%

Kentucky Home
Health Care, LLC
46-4950585
(KY) BU-----100%

Kentucky
HomeCare of
Henderson, LLC
26-4812417
(KY) BU-----100%

LHCG XLVI, LLC
46-2509580
(KY) BU-----100%

Advanced Care
House Calls of
Michigan, LLC
Xx-xxxxxxx
(MI) BU-----100%

Arkansas Physical
Therapy Services
of Rogers, LLC
88-2072782
(AR) BU-----100%

LHCG XLII, LLC
30-0760667
(AR) BU-----100%

Arkansas Physical
Therapy Services
of Hot Springs,
LLC
99-3242136
(AR) BU-----100%

Hospice of Central
Arkansas, LLC (3)
26-4310419
(AR) BU-----67%

Jefferson
Regional
HomeCare, LLC
(3)
26-1806757
(AR) BU-----67%

LHCG CLXVII, LLC
85-4059504
(AR) BU-----100%

Eureka Springs
Hospital
HomeCare, LLC
72-1587844
(AR) BU-----100%

Illinois Health
Care Group, LLC
46-1708167
(IL) BU-----100%

Kentucky LV, LLC
46-4923653
(KY) BU-----100%

LHCG LXX, LLC
47-5067719
(KY) BU-----100%

LHCG XXIII, LLC
27-4100261
(KY) BU-----75%

LHC HomeCare -
Lifeline, LLC
51-0588604
(KY) BU-----100%

Arkansas
Healthcare
Partners, LLC
81-3695165
(AR) BU-----100%

East Arkansas
Health Holdings,
LLC
47-2142765
(AR) BU-----100%

LHCG CIV, LLC
82-1639945
(AR) BU-----100%

LHCG CV, LLC
82-1661632
(AR) BU-----100%

LHCG CII, LLC
82-1487800
(AR) BU-----100%

LHCG CLXVII, LLC
85-3678555
(AR) BU-----100%

Eureka Springs
Hospital Hospice,
LLC
72-1587845
(AR) BU-----100%

LHCG XXXVII, LLC
30-0760684
(IL) BU-----100%

Lifeline HomeCare
of Salem, LLC
27-3468680
(KY) BU-----100%

LHCG LXXI, LLC
47-5393382
(KY) BU-----100%

Kentucky Physical
Therapy Services
at Richmond
Place, LLC
93-4405730
(KY) BU-----100%

Lifeline Home
Health Care of
Bowling Green,
LLC
51-0588592
(KY) BU-----100%

LHCG LXXXV, LLC
36-4847404
(AZ) BU-----100%

Arkansas Home
Health Providers-
III, LLC
47-1716449
(AR) BU-----100%

Arkansas Home
Hospice, LLC
47-1783912
(AR) BU-----100%

Mena Medical
Center Home
Health, LLC
47-0944781
(AR) BU-----100%

Mena Medical
Center Hospice,
LLC
72-1586356
(AR) BU-----100%

LHCG CXXXX,
LLC
83-2298550
(AR) BU-----100%

Patient's Choice
Hospice, LLC
06-1778268
(AR) BU-----100%

Advanced Care
House Calls of
Illinois, LLC
Xx-xxxxxxx
(IL) BU-----100%

Lifeline Home
Health Care of
Fulton, LLC
20-8826388
(KY) BU-----100%

Lifeline Home
Health Care of
Hopkinsville, LLC
51-0588601
(KY) BU-----100%

Kentucky Physical
Therapy Services
of Lexington, LLC
93-4383947
(KY) BU-----100%

Lifeline Home
Health Care of
Lexington, LLC
51-0588599
(KY) BU-----100%

Arkansas Home
Health Providers-
III, LLC
47-1783912
(AR) BU-----100%

Arkansas
Extended Care,
LLC
47-1770024
(AR) BU-----100%

Southwest
Arkansas
HomeCare, LLC
26-0274543
(AR) BU-----67%

LHCG LXVIII, LLC
47-4518424
(AR) BU-----100%

Northeast
Arkansas
Partnership, LLC
35-2647028
(AR) BU-----60%

LHCG CXXXII,
LLC
83-2810275
(AR) BU-----100%

Illinois Home
Health Care, LLC
46-4924177
(IL) BU-----100%

Lifeline
Rockcastle Home
Health, LLC
27-3468870
(KY) BU-----75%

Gamma
Acquisition Inc.
20-0146314
(DE) BU-----100%

Kentucky Physical
Therapy Services
of Somerset, LLC
33-1353810
(KY) BU-----100%

Lifeline Private
Duty Services of
Kentucky, LLC
51-0588602
(KY) BU-----100%

Arkansas Nursing
Providers, LLC
47-1808550
(AR) BU-----67%

LHCG CXXV, LLC
82-2441720
(AR) BU-----100%

LHCG LXXXVI,
LLC
36-4847423
(AR) BU-----100%

LHCG CXXXXI,
LLC
32-0565293
(AR) BU-----100%

Illinois LIV, LLC
38-3925282
(IL) BU-----00%

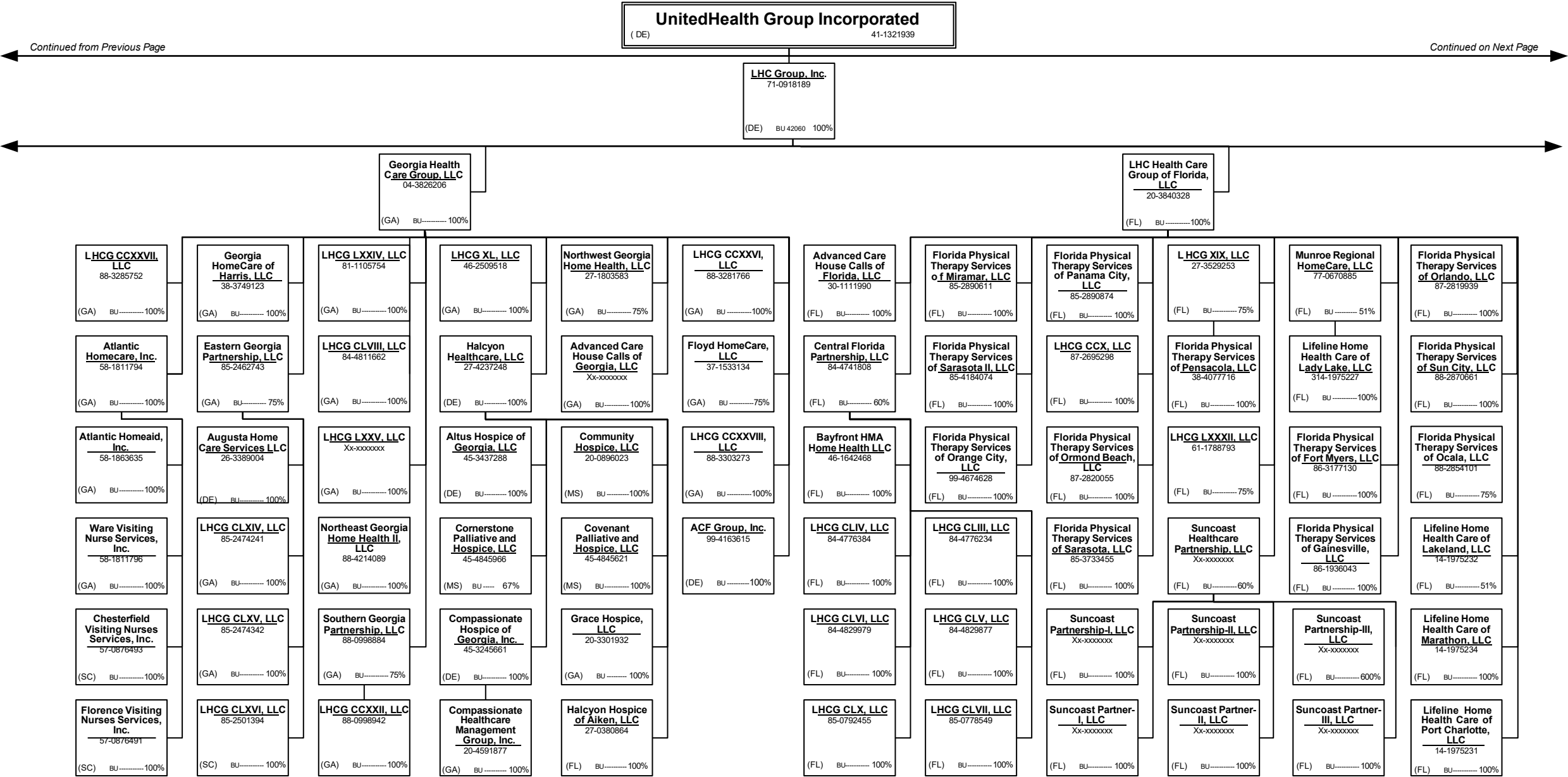
Kentucky In-Home
Partner-II, LLC
82-3982951
(KY) BU-----100%

Twin Lakes Home
Health Agency,
LLC
27-1000828
(KY) BU-----75%

Lifeline Home
Health Care of
Somerset, LLC
51-0588594
(KY) BU-----100%

Lifeline Home
Health Care of
Russellville, LLC
51-0588600
(KY) BU-----100%

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



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

UnitedHealth Group Incorporated
(DE) 41-1321939

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LHC Group, Inc.
71-0918189
(DE) BU 42060 100%

Maryland Health
Care Group, LLC
26-3598092
(MD) BU 100%

Mississippi Health
Care Group, LLC
68-0490418
(MS) BU 100%

LHC Group
Pharmaceutical
Services II, LLC
81-2871053
(LA) BU 100%

LHC Physician
Services, LLC
47-5289323
(LA) BU 100%

Minnesota Health
Care Group, LLC
46-2511957
(MN) BU 100%

Nebraska Health
Care Group, LLC
46-5008635
(NE) BU 100%

LHCG Partner,
LLC
81-4453882
(DE) BU 100%

HomeCall, LLC
52-0998217
(MD) BU 100%

Maryland
Healthcare
Partnership, LLC
(3)
88-3736162
(MD) BU 80%

Able Home Health,
Inc.
64-0917990
(MS) BU 100%

Advanced Care
House Calls of
Mississippi, LLC
84-4014730
(MS) BU 100%

LHC Group
Pharmaceutical
Services III, LLC
81-5023883
(LA) BU 100%

LHC Real Estate I,
LLC
20-8308248
(LA) BU 100%

LHCG XLVIII, LLC
61-1710815
(MN) BU 100%

In-Home
Healthcare
Partnership, LLC
38-4019518
(DE) BU 80%

LHCG CL, LLC
84-2121644
(MD) BU 100%

Maryland
Intermediary-I,
LLC
88-4115077
(MD) BU 100%

Maryland
Intermediary-III,
LLC
88-4115305
(MD) BU 100%

Leaf River Home
Health Care, LLC
20-1257620
(MS) BU 100%

LHCG CXCV, LLC
86-3319565
(MS) BU 100%

Primary Care at
Home of
Louisiana, LLC
81-3720899
(LA) BU 100%

LHC Real Estate II,
LLC
47-4185991
(LA) BU 100%

Integrity Clinical
Partners, LLC
Xx-xxxxxxx
(MN) BU 100%

Arkansas In-Home
Healthcare
Partnership-I, LLC
84-2216080
(AR) BU 100%

Arizona In-Home
Healthcare
Partnership-III,
LLC
84-2209152
(AZ) BU 100%

Ohio In-Home
Healthcare
Partnership-I, LLC
84-2230289
(OH) BU 100%

Pennsylvania In-
Home Healthcare
Partnership-III,
LLC
32-0515193
(PA) BU 100%

Maryland Physical
Therapy Services
of Frederick, LLC
85-2244241
(MD) BU 100%

LHCG CCXXIV,
LLC
88-3537696
(MD) BU 100%

LHCG CCXXV,
LLC
88-3537979
(MD) BU 100%

Mississippi
HomeCare of
Jackson II, LLC
26-0784038
(MS) BU 100%

Mississippi
HomeCare, LLC
01-0689757
(MS) BU 100%

Primary Care at
Home of Louisiana
II, LLC
82-1032626
(LA) BU 100%

LHCG New York
Holdings, LLC
84-3090589
(DE) BU 100%

Arkansas In-Home
Partner-I, LLC
84-2301559
(AR) BU 100%

Arizona In-Home
Partner-III, LLC
84-2275631
(AZ) BU 100%

Idaho In-Home
Healthcare
Partnership-I, LLC
84-2230243
(ID) BU 100%

Pennsylvania In-
Home Partner-III,
LLC
82-3662886
(PA) BU 100%

Maryland
Intermediary-II,
LLC
88-4115213
(MD) BU 100%

Maryland
Intermediary-IV,
LLC
88-4115420
(MD) BU 100%

Mississippi
Physical Therapy
Services of Biloxi,
LLC
85-1606644
(MS) BU 100%

Picayune
HomeCare, LLC
64-0938601
(MS) BU 100%

Primary Care at
Home of Louisiana
III, LLC
82-2405320
(LA) BU 100%

Willcare
Consumer
Directed, Inc.
Xx-xxxxxxx
(NY) BU 100%

Arizona In-Home
Healthcare
Partnership-I, LLC
81-40603540
(AZ) BU 100%

Arkansas In-Home
Healthcare
Partnership-II, LLC
84-2221004
(AR) BU 100%

Virginia In-Home
Healthcare
Partnership-III,
LLC
32-0513440
(VA) BU 100%

Arizona In-Home
Healthcare
Partnership-II, LLC
35-2581228
(AZ) BU 100%

Virginia In-Home
Healthcare
Partnership-I, LLC
38-4021697
(VA) BU 100%

LHCG CXLIX, LLC
84-2108475
(MD) BU 100%

Chester River
Home Care &
Hospice, LLC
52-2008916
(MD) BU 100%

South Mississippi
Home Health, Inc.
64-0736426
(MS) BU 100%

LHCG XXVI, LLC
Xx-xxxxxxx
(MS) BU 100%

Primary Care at
Home of Louisiana
IV, LLC
82-3253877
(LA) BU 100%

Arizona In-Home
Partner-I, LLC
38-4023101
(AZ) BU 100%

Arkansas In-Home
Partner-II, LLC
84-2311081
(AR) BU 100%

Virginia In-Home
Partner-III, LLC
81-4888094
(VA) BU 100%

Arizona In-Home
Partner-II, LLC
81-5027397
(AZ) BU 100%

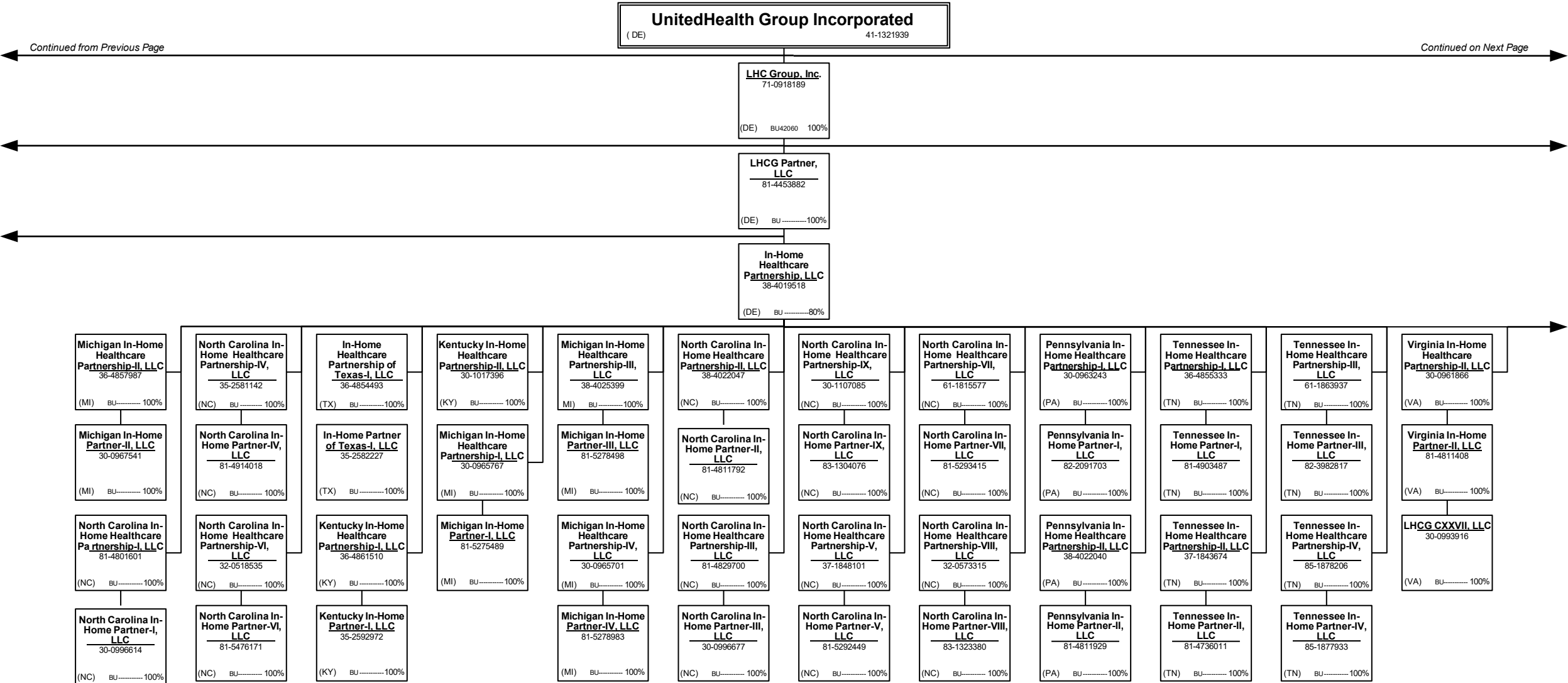
Virginia In-Home
Partner-I, LLC
81-4811317
(VA) BU 100%

South Mississippi
Home Health, Inc.
- Region II
64-0736424
(MS) BU 100%

South Mississippi
Home Health, Inc.
- Region I
64-0736425
(MS) BU 100%

South Mississippi
Home Health, Inc.
- Region III
64-0935599
(MS) BU 100%

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



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

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UnitedHealth Group Incorporated

(DE)41-1321939

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LHC Group, Inc.

71-0918189

(DE)BU42060100%

LHCG Partner, LLC

81-4453882

(DE)BU-----100%

In-Home Healthcare Partnership, LLC

38-4019518

(DE)BU-----80%

LHCG Partner II, LLC

82-1485228

(TX)BU-----100%

Southwest Post-Acute Care Partnership, LLC

61-1846018

(TX)BU-----60%

Virginia In-Home Healthcare Partnership-IX, LLC

32-0516972

(VA)BU-----100%

Virginia In-Home Partner-IX, LLC

81-5294732

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-V, LLC

38-4020777

(VA)BU-----100%

Virginia In-Home Partner-V, LLC

81-4737123

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-VII, LLC

37-1844686

(VA)BU-----100%

Virginia In-Home Partner-VII, LLC

81-4888210

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-VIII, LLC

61-1814029

(VA)BU-----100%

Virginia In-Home Partner-VIII, LLC

81-5294131

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-XI, LLC

36-4908131

(VA)BU-----100%

Virginia In-Home Partner-XI, LLC

83-2040583

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-XII, LLC

86-2505437

(VA)BU-----100%

Virginia In-Home Partner-XII, LLC

86-2445798

(VA)BU-----100%

Louisiana In-Home Healthcare Partnership-II, LLC

36-4886826

(LA)BU-----100%

Louisiana In-Home Partner-II, LLC

35-2616195

(LA)BU-----100%

Louisiana In-Home Healthcare Partnership-III, LLC

35-2614777

(LA)BU-----100%

Louisiana In-Home Partner-III, LLC

82-4146470

(LA)BU-----100%

Virginia In-Home Healthcare Partnership-VI, LLC

37-1843673

(VA)BU-----100%

Virginia In-Home Partner-VI, LLC

81-4737281

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-X, LLC

32-0580044

(VA)BU-----100%

Virginia In-Home Partner-X, LLC

83-2555935

(VA)BU-----100%

Virginia In-Home Healthcare Partnership-IV, LLC

61-1810641

(VA)BU-----100%

Virginia In-Home Partner-IV, LLC

32-0516324

(VA)BU-----100%

GSHS Home Health, LLC

16-1727633

(TX)BU-----100%

LHCG CXII, LLC

82-2146037

(TX)BU-----100%

LHCG CXV, LLC

82-2187727

(TX)BU-----100%

LHCG CXXIV, LLC

82-2261569

(TX)BU-----100%

LHC Lufkin Home Health I, LLC

99-2735771

(TX)BU-----100%

LHCG CXIII, LLC

87-3155545

(LA)BU-----100%

LHCG CXIII, LLC

82-2159030

(TX)BU-----100%

LHCG CXVI, LLC

82-2206275

(TX)BU-----100%

LHCG CXXX, LLC

82-2276690

(TX)BU-----100%

LHC Onalaska Home Health I, LLC

99-2735959

(TX)BU-----100%

LHCG CIX, LLC

82-2084222

(LA)BU-----100%

LHCG CXIV, LLC

82-2174970

(TX)BU-----100%

LHCG CXVII, LLC

82-2217874

(TX)BU-----100%

LHCG CXXXI, LLC

82-2469676

(TX)BU-----100%

LHCG CLI, LLC

85-1221268

(TX)BU-----100%

LHCG CXXIII, LLC

82-2301047

(GA)BU-----100%

Texas Health Care Group of Texarkana, LLC

41-2076211

(TX)BU-----100%

Marshall HomeCare, LLC

02-0732705

(TX)BU-----100%

LHCG CVI, LLC

82-2020284

(LA)BU-----100%

LHCG CX, LLC

82-2098229

(LA)BU-----100%

LHCG CCIII, LLC

87-0969466

(LA)BU-----100%

LHCG CXXXIII, LLC

32-0540219

(TX)BU-----100%

LHCG CCXXXII, LLC

82-2244399

(TX)BU-----100%

LHCG CVII, LLC

82-2044952

(LA)BU-----100%

LHCG CCXVI, LLC

88-0582397

(LA)BU-----100%

LHCG CXI, LLC

82-2140184

(TX)BU-----100%

LHCG CVIII, LLC

82-1666299

(LA)BU-----100%

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

UnitedHealth Group Incorporated
(DE) 41-1321939

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LHC Group, Inc.
71-0918189

(DE) BU 42060 100%

Louisiana Health
Care Group, LLC
71-0917926

(LA) BU----- 100%

AAA Home Health,
Inc.
72-1187363
(LA) BU----- 100%

Acadian Home
Health Care
Services, LLC
71-0917929
(LA) BU----- 100%

Acadian
HomeCare of New
Iberia, LLC
46-1076268
(LA) BU----- 75%

Acadian
HomeCare, LLC
(3)
71-0917930
(LA) BU----- 100%

Baton Rouge
HomeCare, LLC
72-1506691
(LA) BU----- 100%

Beauregard
Memorial Hospital
HomeCare, LLC
26-3410883
(LA) BU----- 67%

Heart of Hospice,
LLC
47-1410565
(SC) BU----- 100%

Hood Home Health
Service, LLC
34-1994325
(LA) BU----- 67%

Vital Hospice, Inc.
20-5232641
(LA) BU----- 100%

Louisiana
HomeCare of
Plaquemine, LLC
26-2367190
(LA) BU----- 100%

Southeast
Louisiana
HomeCare, LLC
26-4020490
(LA) BU----- 75%

LHC Group Health
Clinic, LLC
86-2405954
(LA) BU----- 100%

LHCG CCV, LLC
87-1462016
(LA) BU----- 100%

LHCG X, LLC
20-3122072
(LA) BU----- 100%

LHCG LXVII, LLC
47-4283509
(LA) BU----- 67%

LHCG LXXII, LLC
47-5634097
(LA) BU----- 100%

LHCG LXXVI, LLC
81-1091347
(LA) BU----- 85%

LHCG LXXVIII,
LLC
81-3720770
(LA) BU----- 90%

LHCG V, LLC
68-0538825
(LA) BU----- 67%

Louisiana
Physical Therapy
Services of
Harahan, LLC
85-1606845
(LA) BU----- 100%

River West Home
Care, LLC
26-0802303
(DE) BU----- 100%

Egan Health Care
Corporation
72-1133426
(LA) BU----- 100%

Egan Healthcare
of Northshore, Inc.
72-1437928
(LA) BU----- 100%

LHCG VI, LLC
72-1568177
(LA) BU----- 100%

LHCG VIII, LLC
87-0713147
(LA) BU----- 67%

LLC-II, LLC
20-3171358
(LA) BU----- 100%

LHCG XII, LLC
20-3373056
(LA) BU----- 84.083%

LHCG XIII, LLC
20-8068308
(LA) BU----- 67%

LHCG XIV, LLC
20-8072593
(LA) BU----- 85%

LHCG XLIII, LLC
46-2588378
(LA) BU----- 100%

LHCG XV, LLC
27-0818309
(LA) BU----- 67%

Palliative Care at
Heart, LLC
38-4089979
(SC) BU----- 100%

Richardson
Medical Center
HomeCare, LLC
57-1204158
(LA) BU----- 67%

Egan Healthcare
of Plaquemines,
Inc.
72-1430044
(LA) BU----- 100%

Egan Hospice
Services of the
Northshore, LLC
26-1101454
(LA) BU----- 100%

LHCG XVI, LLC
27-1032201
(LA) BU----- 100%

Louisiana
HomeCare of
Northwest
Louisiana, LLC
72-1510431
(LA) BU----- 67%

Palmetto Express,
LLC
72-1504648
(LA) BU----- 100%

Louisiana
Extended Care
Hospital of
Kenner, LLC
26-4691864
(LA) BU----- 75%

Louisiana
HomeCare of
Delhi, LLC
72-1510211
(LA) BU----- 67%

Louisiana
HomeCare of
Minden, LLC
72-1518559
(LA) BU----- 67%

LHCG CXXVI, LLC
32-0533814
(LA) BU----- 100%

Louisiana
HomeCare of
Monroe, LLC
72-1508052
(LA) BU----- 67%

St. James
HomeCare, L.L.C.
71-0918190
(LA) BU----- 100%

LHCG XLIV, LLC
Xx-xxxxxxx
(LA) BU----- 100%

Louisiana Home
Health of
Feliciana, LLC
37-1863351
(LA) BU----- 100%

Louisiana Home
Health of
Hammond, LLC
26-4021300
(LA) BU----- 100%

Louisiana
HomeCare of
North Louisiana,
LLC
04-3684185
(LA) BU----- 100%

Louisiana
Physical Therapy,
LLC
71-0917927
(LA) BU----- 100%

Patient's Choice
Hospice and
Palliative Care of
Louisiana, LLC
72-1513421
(LA) BU----- 67%

Louisiana
HomeCare of
Slidell, LLC
41-2071626
(LA) BU----- 67%

Louisiana Hospice
Group, LLC
45-2744395
(LA) BU----- 60%

Louisiana In-Home
Healthcare
Partnership-I, LLC
30-0962065
(LA) BU----- 100%

Louisiana
HomeCare of
Miss-Lou, LLC
47-0902218
(LA) BU----- 100%

Tri-Parish
Community
HomeCare, LLC
71-0917928
(LA) BU----- 100%

Louisiana
HomeCare of
Kenner, LLC
26-4020996
(LA) BU----- 100%

Louisiana
HomeCare of
Raceland, LLC
26-4020922
(LA) BU----- 100%

Louisiana
Physical Therapy
Services of
Lafayette, LLC
86-3380313
(LA) BU----- 100%

Northshore
Extended Care
Hospital, LLC
83-2429969
(LA) BU----- 52%

Louisiana Hospice
and Palliative
Care, LLC
71-0918184
(LA) BU----- 100%

Louisiana In-Home
Partner-I, LLC
81-4832564
(LA) BU----- 100%

Louisiana
Physical Therapy
Services of
Bossier City, LLC
82-4272020
(LA) BU----- 100%

Oak Shadows of
Jennings, LLC
48-1300301
(LA) BU----- 91%

Louisiana Home
Health of Houma,
L.L.C.
26-4021213
(LA) BU----- 100%

Louisiana
HomeCare of
Lutcher, LLC
26-4021094
(LA) BU----- 100%

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

UnitedHealth Group Incorporated

(DE)41-1321939

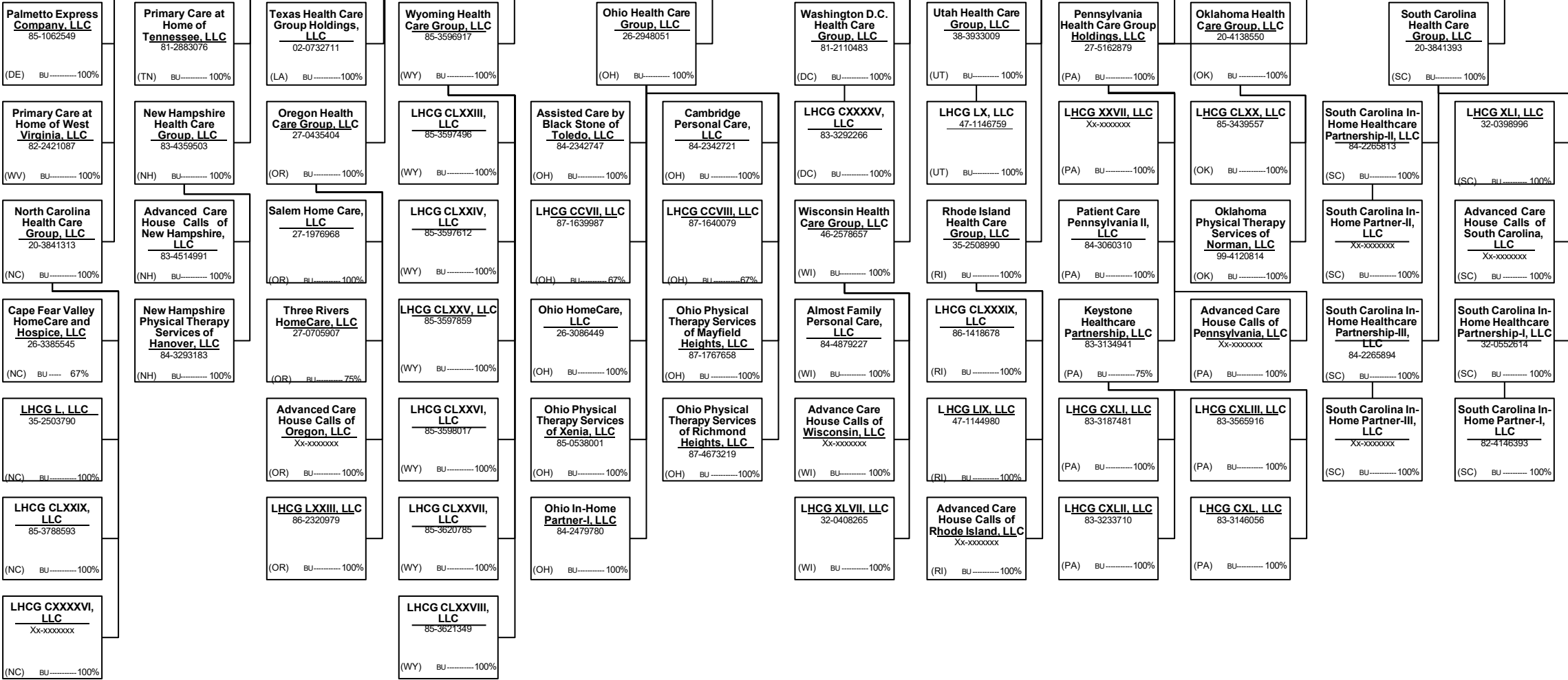
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Continued on Next Page

LHC Group, Inc.

71-0918189

(DE) BU 42060 100%



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

UnitedHealth Group Incorporated

(DE)41-1321939

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LHC Group, Inc.

71-0918189

(DE) BU 42060 100%

Texas Health Care Group, LLC

62-1850044

(TX) BU 100%

Virginia Health Care Group, LLC

06-1762010

(VA) BU 100%

Washington Health Care Group, LLC

26-3811771

(WA) BU 100%

West Virginia Health Care Group, LLC

87-0748651

(WV) BU 100%

Idaho Health Care Group, LLC

27-2498964

(ID) BU 100%

Massachusetts Health Care Group, LLC

38-3932998

(MA) BU 100%

LHC CXCI, LLC

86-2900948

(TX) BU 100%

Red River HomeCare, LLC

81-0627339

(TX) BU 100%

LHCG CCI, LLC

87-1012762

(VA) BU 100%

Virginia HomeCare, LLC

06-1762015

(VA) BU 100%

Assured Capital Partners, Inc.

88-0369557

(NV) BU 100%

Washington HomeCare and Hospice of Central Basin, LLC

26-4568497

(WA) BU 100%

Preston Memorial HomeCare, LLC

27-1446056

(WV) BU 100%

LHCG LXXXVII, LLC

37-1847660

(WV) BU 90%

Grant Memorial HomeCare and Hospice, LLC

26-2578433

(WV) BU 67%

Boone Memorial HomeCare, LLC

20-8826558

(WV) BU 100%

LHCG XVII, LLC

27-2544802

(ID) BU 100%

LHCG CXCI, LLC

86-2320979

(MA) BU 100%

LHC CXCI, LLC

86-2947633

(TX) BU 100%

Texas Health Care Group of The Golden Triangle, LLC

27-0075424

(TX) BU 81.25%

LHCG CCIV, LLC

87-2102125

(VA) BU 100%

Advanced Care House Calls of Virginia, LLC

Xx-xxxxxx

(VA) BU 100%

Northwest Healthcare Alliance, Inc.

91-1738970

(WA) BU 100%

Advanced Care House Calls of Washington, LLC

Xx-xxxxxx

(WA) BU 100%

St. Mary's Medical Center Home Health Services, LLC

26-0730248

(WV) BU 67%

LHCG LXXXIX, LLC

81-5300843

(WV) BU 100%

Housecalls Home Health and Hospice, LLC

37-1533130

(WV) BU 100%

Home Care Plus, Inc.

55-0668235

(WV) BU 100%

LHCG XXI, LLC

27-3529180

(ID) BU 100%

Massachusetts Physical Therapy Services of Framingham, LLC

88-2854292

(MA) BU 100%

Rivercrest Home Health Care, Inc.

46-0504059

(TX) BU 100%

LHCG CLIX, LLC

Xx-xxxxxx

(TX) BU 100%

LHCG CXCI, LLC

87-0821919

(VA) BU 100%

LHCG LXXX, LLC

Xx-xxxxxx

(VA) BU 100%

LHCG LXIII, LLC

61-1739528

(WA) BU 100%

LHCG CLXXXV, LLC

85-3845250

(WA) BU 100%

Wetzel County HomeCare, LLC

26-0274385

(WV) BU 100%

LHCG XCI, LLC

81-5322329

(OH) BU 100%

West Virginia HomeCare, LLC

26-3043290

(WV) BU 83.3%

LHCG LII, LLC

46-4704340

(WV) BU 100%

Advanced Care House Calls of Idaho, LLC

Xx-xxxxxx

(ID) BU 100%

Massachusetts Physical Therapy Services of Quincy Bay, LLC

88-2058110

(MA) BU 100%

Texas Physical Therapy Services of Burleson, LLC

88-2072971

(TX) BU 100%

Home Care Connections, Inc.

33-1025322

(TX) BU 100%

Texas Physical Therapy Services of Tyler, LLC

99-2611865

(TX) BU 100%

LHCG CXCVIII, LLC

87-0821493

(VA) BU 100%

Northeast Washington Home Health, Inc.

27-0555075

(WA) BU 100%

LHCG CLXXXVI, LLC

85-3864696

(WA) BU 100%

LHC HomeCare of West Virginia LLC

26-3042468

(WV) BU 100%

LHCG XC, LLC

81-5306967

(WV) BU 100%

West Virginia Physical Therapy Services of Charleston, LLC

83-3393205

(WV) BU 100%

Princeton Community HomeCare, LLC

83-0474005

(WV) BU 67%

Idaho In-Home Partner-I, LLC

84-2311184

(ID) BU 100%

LHCG LVIII, LLC

47-1271229

(MA) BU 100%

Texas Physical Therapy Services of Baytown, LLC

86-3380429

(TX) BU 100%

LHCG CCXXXIV, LLC

92-3832140

(TX) BU 100%

LHCG XXXIII, LLC

45-4894023

(TX) BU 70%

LHCG CXCVIII, LLC

87-0821493

(VA) BU 100%

Washington Physical Therapy Services of Mill Creek, LLC

33-2103763

(WA) BU 100%

LHCG CLXXXVI, LLC

85-3864696

(WA) BU 100%

Jackson County Home Health, LLC

26-3042590

(WV) BU 100%

LHCG XCII, LLC

81-5344998

(OH) BU 100%

West Virginia Physical Therapy Services of Charleston, LLC

83-3393205

(WV) BU 100%

Roane HomeCare, LLC

41-2219637

(WV) BU 100%

Kambros, LLC

84-4763920

(ID) BU 100%

LHCG LVIII, LLC

47-1271229

(MA) BU 100%

Advanced Care House Calls of Texas, LLC

Xx-xxxxxx

(TX) BU 100%

LHCG CCXXXV, LLC

92-3828235

(TX) BU 100%

LHCG CXXXVII, LLC

38-4052246

(TX) BU 100%

Mountaineer HomeCare, LLC

26-3042733

(WV) BU 100%

HNH Birdie One, LLC

85-2016675

(ID) BU 100%

Heart 'n Home Hospice and Palliative Care, LLC

52-2440817

(ID) BU 100%

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

UnitedHealth Group Incorporated
(DE) 41-1321939

Continued from Previous Page

Continued on Next Page

LHC Group, Inc.
71-0918189
(DE) BU 42060 100%

Tennessee Health
Care Group, LLC
20-3427231
(TN) BU 100%

LHC HomeCare of
Tennessee, LLC
26-2678253
(TN) BU 100%

LHCG LXII, LLC
32-0442009
(TN) BU 100%

LHCG LXXXVIII,
LLC
30-0965267
(TN) BU 67%

Tennessee
Physical Therapy
Services of
Kingsport, LLC
83-2129924
(TN) BU 100%

Advanced Care
House Calls of
Tennessee, LLC
Xx-xxxxxxx
(TN) BU 100%

Tennessee
Physical Therapy
Services of
Knoxville, LLC
83-2743288
(TN) BU 100%

Innovative Senior
Care Home Health
of Rhode Island,
LLC
45-2502463
(DE) BU 100%

Health at Home
Holdings, LLC
87-0934507
(DE) BU 100%

Elk Valley
Professional
Affiliates, Inc.
62-1193858
(TN) BU 100%

Lifeline Home
Health Care of
Springfield, LLC
20-8826801
(TN) BU 100%

Arkansas Home
Health Providers-
IV, LLC
47-1754828
(AR) BU 100%

LHCG C, LLC
82-1229536
(MS) BU 100%

Tennessee
Physical Therapy
Services of Mt.
Juliet, LLC
86-2321464
(TN) BU 100%

Tennessee
Physical Therapy
Services of
Memphis, LLC
87-2087086
(TN) BU 100%

West Tennessee
HomeCare, LLC
26-2947894
(TN) BU 67%

Health at Home
Holdings -
Charlotte, LLC
87-1136405
(DE) BU 100%

Health at Home
Holdings -
Alabama, LLC
87-1045915
(DE) BU 100%

Health at Home
Holdings -
Albuquerque, LLC
87-1045845
(DE) BU 100%

Health at Home
Holdings -
Arizona, LLC
87-1284003
(DE) BU 100%

Health at Home
Holdings - Boston,
LLC
87-1166127
(DE) BU 100%

Cedar Creek Home
Health Care
Agency, LLC
62-1358032
(TN) BU 100%

LHCG CXXXIV,
LLC
35-2605467
(TN) BU 75%

LHCG CLXII, LLC
85-2210023
(TN) BU 100%

LHCG XCIII, LLC
81-5266120
(TN) BU 100%

University of TN
Medical Center
HomeCare
Services, LLC
20-8912707
(TN) BU 67%

Woods Home
Health, LLC
27-1260681
(TN) BU 100%

Lifeline Home
Health Care of
Union City, LLC
06-1793261
(TN) BU 100%

Innovative Senior
Care Home Health
of Charlotte, LLC
27-4318872
(DE) BU 100%

Innovative Senior
Care Home Health
of Alabama, LLC
30-0781533
(DE) BU 100%

Innovative Senior
Care Home Health
of Albuquerque,
LLC
27-2065054
(DE) BU 100%

Nurse on Call of
Arizona, LLC
38-3904633
(DE) BU 100%

Innovative Senior
Care Home Health
of Boston, LLC
26-3445981
(DE) BU 100%

Elk Valley Health
Services, LLC
62-1204869
(TN) BU 100%

LHCG CXXXV,
LLC
38-4049207
(TN) BU 100%

LHCG XCIV, LLC
81-5274714
(TN) BU 100%

LHCG XCIX, LLC
81-5377954
(MS) BU 100%

LHCG CXXXII, LLC
37-1866838
(TN) BU 100%

HMC Home Health,
LLC
27-1362827
(TN) BU 75%

Lifeline of West
Tennessee, LLC
26-0609961
(TN) BU 100%

Health at Home
Holdings - Detroit,
LLC
87-1107918
(DE) BU 100%

Health at Home
Holdings -
Durham, LLC
87-1166046
(DE) BU 100%

Health at Home
Holdings -
Edmond, LLC
87-1136266
(DE) BU 100%

Health at Home
Holdings - High
Point, LLC
87-1165951
(DE) BU 100%

Gericare, LLC
62-1160679
(TN) BU 100%

LHCG CXXXVI,
LLC
38-4049205
(TN) BU 100%

LHCG XCV, LLC
81-5297025
(TN) BU 100%

LHCG XCVI, LLC
81-5306890
(TN) BU 100%

LHCG CXXXIII,
LLC
32-0540219
(TN) BU 100%

Innovative Senior
Care Home Health
of Hartford, LLC
45-2502527
(DE) BU 100%

Medical Center
Home Health, LLC
26-2947990
(TN) BU 100%

Innovative Senior
Care Home Health
of Detroit, LLC
26-2611755
(DE) BU 100%

Innovative Senior
Care Home Health
of Durham, LLC
27-2620181
(DE) BU 100%

Innovative Senior
Care Home Health
of Edmond, LLC
27-2619513
(DE) BU 100%

Innovative Senior
Care Home Health
of High Point, LLC
45-2952600
(DE) BU 100%

Elk Valley Home
Health Care
Agency, LLC
62-1193854
(TN) BU 100%

LHCG CXI, LLC
86-1394064
(TN) BU 100%

LHCG XCVII, LLC
81-5322529
(TN) BU 100%

LHCG XCVIII, LLC
81-5345526
(MS) BU 100%

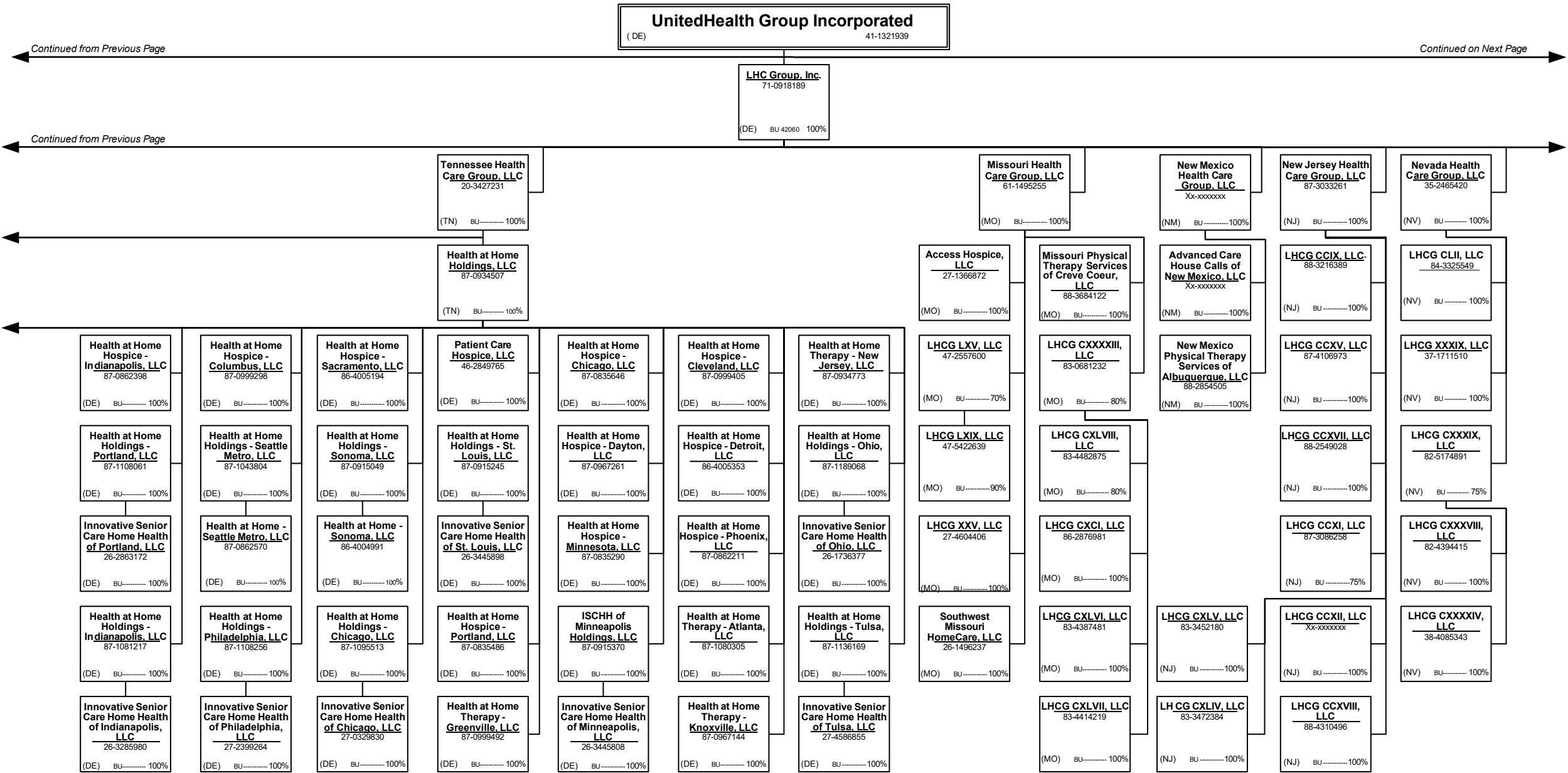
Morristown-
Hamblen
HomeCare and
Hospice, LLC
26-2792774
(TN) BU 100%

LHCG CCXIV, LLC
87-3076026
(RI) BU 100%

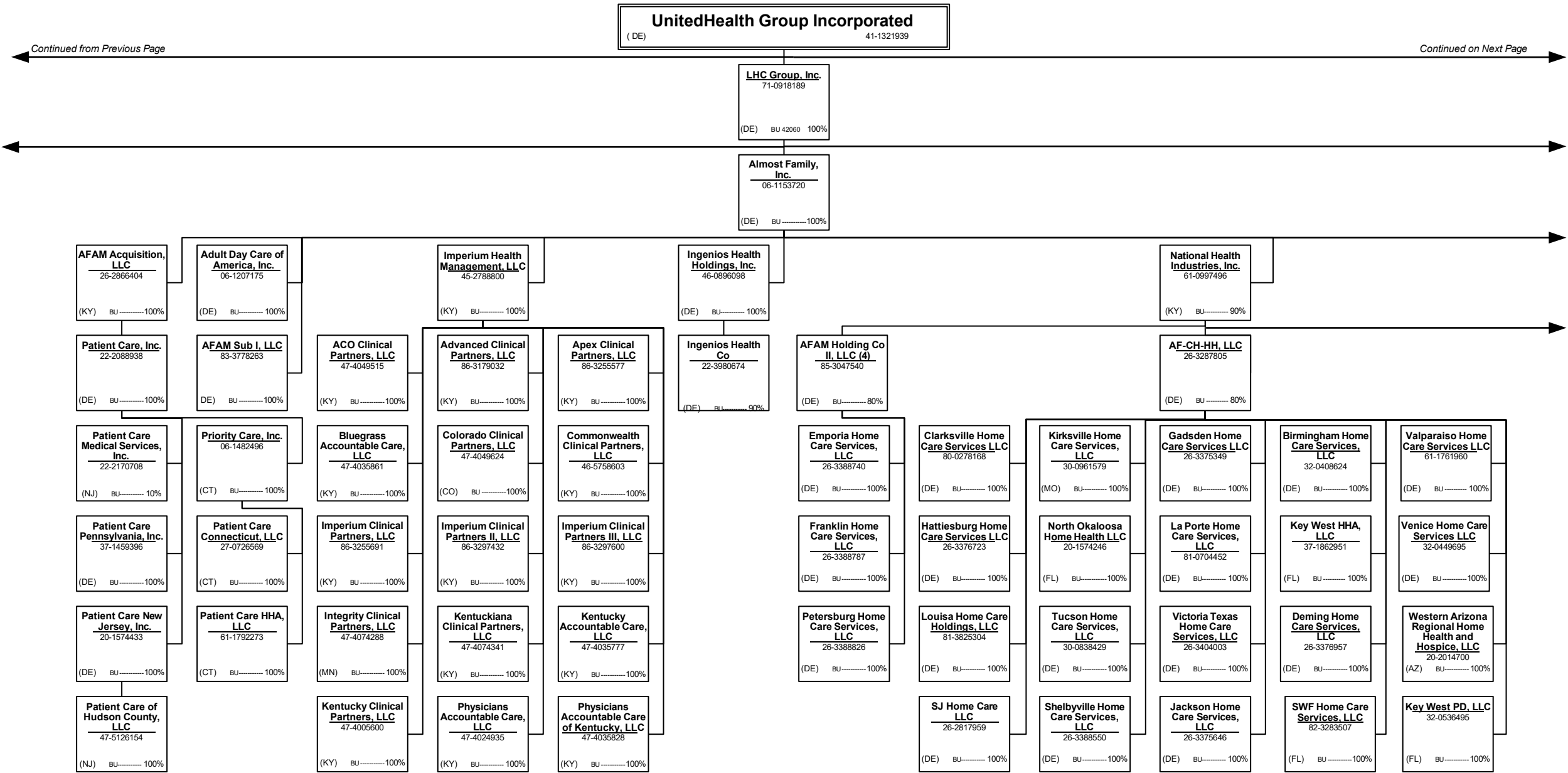
LHCG CCXXX,
LLC
92-0578697
(TN) BU 100%

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

40.12



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



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

UnitedHealth Group Incorporated

(DE)41-1321939

LHC Group, Inc.

71-0918189

(DE)BU 42060100%

Almost Family, Inc.

06-1153720

(DE)BU100%

National Health Industries, Inc.

61-0997496

(KY)BU 90%

BRACOR, Inc.

16-1270177

(NY)BU100%

AFAM Holding Co, LLC (4)

83-3778238

(DE)BU80%

AFAM Holding Co VI, LLC (4)

99-1645529

(NC)BU80%

Patient's Choice Homecare, LLC

55-0832250

(CT)BU 100%

Connecticut Home Health Care, Incorporated

06-1254084

(CT)BU 100%

Scranton Quincy Home Care Services LLC

38-3857848

(DE)BU100%

Fulton Home Care Services LLC

26-3385091

(DE)BU 99%

Blue Island Home Care Services LLC

38-3859193

(DE)BU99%

Brevard HMA Home Health LLC

27-3142265

(FL)BU100%

Brevard HMA Hospice LLC

27-3142339

(FL)BU 100%

Centre Home Care LLC

20-4408565

(AL)BU 100%

Crossroads Home Care Services, LLC

26-3376835

(DE)BU ---- 99%

Tomball Texas Home Care Services, LLC

45-2856177

(DE)BU ---- 99%

Youngstown Home Care Services LLC

27-5284765

(DE)BU100%

Mooreville Home Care Services, LLC

36-4794488

(DE)BU100%

Western Region Health Corporation

16-1365147

(NY)BU100%

Willcare, Inc.

16-1202250

(NY)BU 100%

Wilkes-Barre Home Care Services LLC

26-3594822

(DE)BU100%

Weatherford Home Care Services, LLC

26-3375892

(DE)BU 100%

Florence Home Care Services, LLC

26-3376655

(DE)BU100%

Fort Payne Home Care LLC

20-4408510

(AL)BU100%

Fort Smith HMA Home Health, LLC

27-1014059

(AR)BU100%

Galesburg Home Care LLC

20-4828017

(DE)BU 99%

Granite City Home Care Services LLC

26-3376889

(DE)BU99%

Waukegan Hospice LLC

20-4885028

(DE)BU 99%

York Home Care Services LLC

30-0708462

(DE)BU100%

AFAM Holding Co VII, LLC (4)

99-4147356

(DE)BU80%

Litson Certified Care, Inc.

13-3792263

(NY)BU100%

Litson Health Care, Inc.

14-1630316

(NY)BU 100%

Mayes County HMA Home Health LLC

45-4406785

(OK)BU 100%

Helena Home Care Services LLC

26-3384769

(DE)BU100%

Jourdanton Home Care Services, LLC

26-3376587

(DE)BU 100%

Lancaster Home Care Services, LLC

26-3376587

(DE)BU100%

Louisa Home Care Services LLC

26-3385143

(DE)BU 100%

Northampton Home Care LLC

26-1266166

(DE)BU100%

West Grove Home Care, LLC

26-1266308

(DE)BU 100%

Cleveland Home Care Services, LLC

26-3388524

(DE)BU100%

Knoxville Home Care Services LLC

38-3940574

(DE)BU100%

Wichita Falls Texas Home Care, LLC

20-5280925

(TX)BU 100%

Oklahoma City Home Care Services LLC

26-3388890

(DE)BU100%

Pottstown Home Care Services, LLC

26-3385581

(DE)BU 100%

Red Bud Home Care Services, LLC

26-3385035

(DE)BU ---- 99%

Sharon Home Care Services LLC

37-1745728

(DE)BU 100%

Spokane Home Care Services LLC

27-3788721

(DE)BU100%

Lakeland Home Care Services LLC

27-3073250

(DE)BU100%

AFAM Holding Co VIII, LLC (4)

99-4712866

(DE)BU80%

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

UnitedHealth Group Incorporated

(DE)41-1321939

LHC Group, Inc.

71-0918189

(DE) BU 42060 100%

Almost Family, Inc.

06-1153720

(DE) BU -----100%

National Health Industries, Inc.

61-0997496

(KY) BU -----90%

Berwick Home Care Services LLC

26-3376776

(DE) BU -----100%

AFAM Holding Co IV, LLC (4)

92-2908587

(OK) BU -----80%

Clinton Home Health & Hospice LLC

45-4406745

(OK) BU -----100%

Woodward Home Care Services LLC

26-3375945

(DE) BU -----100%

Ponca City Home Care Services LLC

20-4345976

(OK) BU -----100%

AFAM Holding Co III, LLC (4)

86-3137505

(DE) BU -----80%

Almost Family ACO Services of Kentucky, LLC

61-1166649

(KY) BU -----100%

AFAM Holding Co V, LLC (4)

93-2670946

(DE) BU -----80%

El Dorado Home Care Services, LLC

26-4626302

(DE) BU -----100%

Springdale Home Care Services, LLC

26-3389049

(DE) BU -----100%

Almost Family PC of SW Florida, LLC

26-1261522

(FL) BU -----100%

Almost Family PC of West Palm, LLC

26-1263982

(FL) BU -----100%

BHC Services, Inc.

06-1137222

(NY) BU -----80%

Caretenders of Cleveland, Inc.

61-1306845

(KY) BU -----100%

Caretenders of Columbus, Inc.

61-1302995

(KY) BU -----100%

Caretenders Visiting Services of District 6, LLC

30-0425709

(KY) BU -----100%

Caretenders Visiting Services of District 7, LLC

30-0425714

(KY) BU -----100%

Caretenders Visiting Services of Gainesville, LLC

30-0425715

(FL) BU -----100%

Caretenders Visiting Services of Hernando County, LLC

20-5826497

(FL) BU -----100%

Caretenders Visiting Services of Kentuckiana, LLC

20-3021812

(KY) BU -----100%

Caretenders Visiting Services of Orlando, LLC

30-0425717

(KY) BU -----100%

Caretenders Visiting Services of Pinellas County, LLC

20-5826531

(FL) BU -----100%

Caretenders Visiting Services of Southern Illinois, LLC

20-5826553

(IL) BU -----100%

Almost Family PC of Ft. Lauderdale, LLC

26-1260724

(FL) BU -----100%

Almost Family ACO Services of South Florida, LLC

46-5765971

(FL) BU -----100%

Almost Family PC of Kentucky, LLC

26-1259925

(KY) BU -----100%

Caretenders of Jacksonville, LLC

20-5890994

(FL) BU -----100%

Caretenders Visiting Services of St. Augustine, LLC

20-2910357

(FL) BU -----100%

Caretenders Visiting Services of St. Louis, LLC

20-5826598

(MO) BU -----100%

Caretenders Visiting Services Employment Company, Inc.

61-1326749

(KY) BU -----100%

Caretenders VS of Ohio, LLC

26-3706241

(OH) BU -----100%

IN Homecare Network North, LLC

46-3020499

(IN) BU -----100%

NP Services of IN, LLC

82-3009527

(IN) BU -----100%

Caretenders VS of SE Ohio, LLC

45-1139239

(OH) BU -----100%

Caretenders Visiting Services of Ocala, LLC

20-4522444

(FL) BU -----100%

Caretenders VNA of Ohio, LLC

27-3756374

(OH) BU -----100%

Caretenders VS of Boston, LLC

26-1258759

(MA) BU -----100%

Caretenders VS of Central KY, LLC

26-1259391

(KY) BU -----100%

Caretenders VS of Lincoln Trail, LLC

26-3632764

(KY) BU -----100%

Illinois Home Care Holdings, LLC

32-0505528

(DE) BU -----80%

Caretenders VS of Western KY, LLC

26-1258938

(KY) BU -----100%

HHA of Wisconsin, LLC

37-1826396

(WI) BU -----100%

Home Health of Jefferson Co, LLC

38-4003190

(KY) BU -----60%

Caretenders VS of Louisville, LLC

26-1264112

(KY) BU -----100%

IN HomeCare Network Central, LLC

46-3029953

(IN) BU -----100%

Mederi Caretenders VS of Broward, LLC

26-1264504

(FL) BU -----100%

Mederi Caretenders VS of SE FL, LLC

26-1264234

(FL) BU -----100%

Mederi Caretenders VS of SW FL, LLC

26-1264384

(FL) BU -----100%

Mederi Caretenders VS of Tampa, LLC

26-1248096

(FL) BU -----100%

Mederi Private Care, LLC

83-4371904

(FL) BU -----100%

NP Services of KY, LLC

82-2998879

(KY) BU -----100%

NP Services of NC, LLC

82-3026260

(NC) BU -----100%

NP Services of OH, LLC

82-4255048

(OH) BU -----100%

Princeton Home Health, LLC

20-5081107

(AL) BU -----100%

Midwest Hospice, LLC

Xx-xxxxxxx

(AR) BU -----100%

Long Term Solutions, Inc.

04-3485196

(MA) BU -----100%

LTS At Home, LLC

85-1275334

(DE) BU -----100%

Cambridge Home Health Care Holdings, Inc.

20-0591577

(DE) BU -----100%

Cambridge Home Health Care, Inc.

34-1772291

(OH) BU -----100%

Cambridge Home Health Care, Inc./ Private

34-1772292

(OH) BU -----100%

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

UnitedHealth Group Incorporated

(DE)41-1321939

LHC Group, Inc.

71-0918189

(DE) BU 42060 100%

Almost Family, Inc.

06-1153720

(DE) BU -----100%

National Health Industries, Inc.

61-0997496

(KY) BU ----- 90%

Black Stone Operations, LLC

90-1028083

(OH) BU ----- 100%

OMNI Home Health Holdings, Inc.

45-2638400

(DE) BU ----- 100%

Black Stone of Northeast Ohio, LLC

47-2166181

(OH) BU ----- 100%

Blackstone Group, LLC

20-1902460

(OH) BU -----100%

Black Stone of Cincinnati, LLC

27-4109221

(OH) BU -----100%

Blackstone Health Care, LLC

31-1462432

(OH) BU ----- 100%

Black Stone of Dayton, LLC

27-4109305

(OH) BU -----100%

OMNI Home Health Services, LLC

26-2010556

(DE) BU ----- 100%

Black Stone of Northwest Ohio, LLC

90-1020734

(OH) BU ----- 100%

Black Stone of Central Ohio, LLC

27-1746397

(OH) BU -----100%

Assisted Care by Black Stone of Cincinnati, LLC

27-4109484

(OH) BU ----- 100%

Home Health Care by Black Stone of Cincinnati, LLC

27-4109403

(OH) BU -----100%

Advanced Geriatric Education & Consulting, LLC

26-1666243

(OH) BU ----- 100%

Assisted Care by Black Stone of Dayton, LLC

27-4109638

(OH) BU -----100%

OMNI Home Health- District 4, LLC

20-1657488

(FL) BU -----100%

Home Health Agency- Central Pennsylvania, LLC

20-1497787

(FL) BU ----- 100%

Home Health Agency- Collier, LLC

20-0832146

(FL) BU -----100%

Home Health Agency- Hillsborough, LLC

59-3757325

(FL) BU ----- 100%

OMNI Home Health- Jacksonville, LLC

59-3754764

(FL) BU -----100%

Assisted Care by Black Stone of Northwest Ohio, LLC

47-3253280

(OH) BU ----- 100%

Assisted Care by Black Stone of Central Ohio, LLC

27-1755138

(OH) BU -----100%

Care Advisors by Black Stone, LLC

27-0564326

(OH) BU ----- 100%

MJ Nursing at Black Stone, LLC

26-3831640

(OH) BU -----100%

S&B Health Care, LLC

31-1487353

(OH) BU ----- 100%

Home Health Care by Black Stone of Dayton, LLC

27-4109553

(OH) BU -----100%

Home Health Agency- Pennsylvania, LLC

59-3757322

(FL) BU -----100%

Home Health Agency- Indiana, LLC

20-1408322

(FL) BU ----- 100%

Home Health Agency- Pinellas, LLC

59-3757320

(FL) BU -----100%

OMNI Home Health- District 1, LLC

20-0527436

(FL) BU ----- 100%

OMNI Home Health- District 2, LLC

20-0527566

(FL) BU -----100%

Home Health Care by Black Stone of Northwest Ohio, LLC

34-1708719

(OH) BU ----- 100%

Home Health Care by Black Stone of Central Ohio, LLC

27-1755342

(OH) BU -----100%

OMNI Home Health- Hernando, LLC

59-3741300

(FL) BU -----100%

OMNI Health Management, LLC

04-3630085

(FL) BU ----- 100%

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

UnitedHealth Group Incorporated

(DE)41-1321939

LHC Group, Inc.

71-0918189

(DE) BU 42060 100%

Almost Family, Inc.

06-1153720

(DE) BU -----100%

National Health Industries, Inc.

61-0997496

(KY) BU -----90%

OMNI Home Health Holdings, Inc.

45-2638400

(DE) BU -----100%

SunCrest Healthcare, Inc.

20-3701127

(GA) BU -----100%

Substantively Controlled LHC Group Entities

HH Health System-Jackson, LLC

87-2027148

(AL) BU -----

SunCrest Home Health - Southside, LLC

45-2283548

(GA) BU -----60%

SunCrest Healthcare of West Tennessee, LLC

37-1550880

(TN) BU -----100%

SunCrest Companion Services, LLC

26-3549012

(TN) BU -----100%

Almost Family ACO Services of Tennessee, LLC

47-0979130

(TN) BU -----100%

BGR Acquisition, LLC

51-0606314

(FL) BU -----100%

SunCrest Healthcare of East Tennessee, LLC

26-3548962

(TN) BU -----100%

SunCrest Home Health of MO, Inc.

27-0678903

(MO) BU -----100%

SunCrest Healthcare of Middle TN, LLC

71-1017674

(TN) BU -----100%

SunCrest Outpatient Rehab Services, LLC

26-1910553

(TN) BU -----100%

SunCrest Home Health of AL, Inc.

27-0678962

(AL) BU -----100%

SunCrest Home Health of Manchester, Inc.

27-3742641

(TN) BU -----100%

SunCrest LBL Holdings, Inc.

27-3742739

(TN) BU -----100%

SunCrest Home Health of Claiborne County, Inc.

45-1448026

(TN) BU -----100%

SunCrest Home Health of Georgia, Inc.

26-1911187

(GA) BU -----100%

SunCrest Home Health of South GA, Inc.

27-0678757

(GA) BU -----100%

SunCrest Home Health of Nashville, Inc.

27-2258905

(TN) BU -----100%

SunCrest Telehealth Services, Inc.

27-4199760

(TN) BU -----100%

Trigg County Home Health, Inc.

26-3539405

(KY) BU -----100%

Tennessee Nursing Services of Morristown, Inc.

62-1049414

(TN) BU -----100%

LHCG CLXI, LLC

85-0788038

(GA) BU -----67%

SunCrest Outpatient Rehab Services of TN, LLC

27-0311512

(TN) BU -----100%

SunCrest Home Health of Tampa, LLC

27-3742788

(FL) BU -----100%

UnitedHealth Group Incorporated
(DE) 41-1321939

Continued from Previous Page *Continued on Next Page*

CentrifyHealth, LLC
Xx-xxxxxxx
(DE) BU 41900 100%

H&W Indemnity (SPC), Ltd.(8)
98-0213198
AAIN of AA-3770473
BU 10012
(Cayman Islands) 100%

Massachusetts Assurance Company, Ltd. PIC (4)
Xx-xxxxxxx
BU 44621
(Cayman Islands) 99.9%

UHC International Services, Inc.(71)
41-1913059
(DE) BU 80600 100%

FMG Holdings, LLC(4)
35-2456267
(DE) BU 10310 98.7%

UnitedHealth International Inc.
41-1917398
(DE) BU 80110 100%

Hygeia Corporation
36-4331825
(DE) BU 80103 100%

UnitedHealthcare International Finance S.à r.l.
Xx-xxxxxxx
BU 81160
(Luxembourg) 100%

Bordeaux (Barbados) Holdings I, S.r.l.
98-1396690
BU 81600
(Barbados) 100%

Bordeaux (Barbados) Holdings II, S.r.l.
98-1396559
BU 81610
(Barbados) 100%

FrontierMEDEX, Inc.
52-2230470
(MN) BU 80151 100%

Travel Express Incorporated
52-1431155
(MD) BU 80152 100%

Hygeia Corporation (Ontario)
98-1106075
BU 80105
(Canada) 100%

UnitedHealthcare International I B.V.
98-1100512
Xx-xxxxxxx
BU 80300
(Netherlands) 100%

UnitedHealthcare Consulting & Assistance Service (Beijing) Co., Ltd.
98-1200034
(China) 80135 100%

UHCG - FZE
98-1103713
BU 80262
(UAE) 100%

UnitedHealthcare Global Medical (UK) Limited(7)
98-1029201
(United Kingdom) 100%

Exploration for Mine Clearance LLC
98-1259260
BU ----
(Iraq) 100%

Frontier MEDEX Tanzania Limited (1)
98-1172769
BU 48266
(Tanzania) 99%

Optum Health & Technology (Hong Kong) Limited
xx-xxxxxxx
BU 48220
(Hong Kong) 100%

Optum Health & Technology (India) Private Limited(4)
98-1095799
BU 48210
(India) 99.99%

Optum Health & Technology (Singapore) Pte. Ltd.
98-1097886
BU 48471
(Singapore) 100%

FrontierMEDEX US, Inc.(4)
33-1219808
BU 80150
(DE) 78.91%

UHG International (Ireland) Unlimited Company
Xx-xxxxxxx
BU 81370
(Ireland) 100%

Bordeaux International Holdings, Inc. (4)
82-3147824
(DE) BU 83000 88.89%

UHG Holdings 1 (Ireland) Unlimited Company (4)
Xx-xxxxxxx
BU 83220
(Ireland) 69.68%

Bordeaux UK Holdings I Limited (4)
98-1390574
BU 83010
(UK) 100%

Bordeaux International Financing, Inc.
99-1659726
(DE) BU 83250 100%

UHG Holdings 2 (Ireland) Unlimited Company
Xx-xxxxxxx
BU 8320
(Ireland) 100%

UnitedHealthcare Europe S.à r.l.
98-1199679
BU 81090
(Luxembourg) 100%

UnitedHealth Group International Finance (Ireland) Unlimited Company
98-1422474
BU 81350
(Ireland) 100%

UHG Holdings 3 (Ireland) Unlimited Company
Xx-xxxxxxx
BU 83240
(Ireland) 100%

UHC Finance (Ireland) Limited
98-1388279
BU 81500
(Ireland) 100%

Aquitania Chilean Holding SpA
98-1399975
(Chile) BU 83040 100%

Optum Operations (Ireland) Unlimited Company
98-1097761
BU 81210
(Ireland) 100%

Optum Health Solutions (Ireland) Limited
Xx-xxxxxxx
BU ----
(Ireland) 100%

Optum Services (Ireland) Limited
98-1307821
BU 81200
(Ireland) 100%

Optum Ireland Health Services Limited
Xx-xxxxxxx
BU 81240
(Ireland) 100%

Bordeaux Holding SpA
98-1398490
(Chile) BU 83050 100%

UHG Holdings UK VII Limited
Xx-xxxxxxx
BU 83210
(UK) 100%

Bordeaux Holdings, LLC
Xx-xxxxxxx
(DE) BU 83200 100%

EMIS Group Limited
Xx-xxxxxxx
BU 83025
(England&Wales) 100%

Ascribe Limited
Xx-xxxxxxx
BU ----
(England&Wales) 100%

Dovetail Digital Limited
Xx-xxxxxxx
BU ----
(England&Wales) 100%

Pinnacle Health Partnership LLP
Xx-xxxxxxx
BU ----
(England&Wales) 100%

EMIS Health India Private Limited (4)
Xx-xxxxxxx
BU ----
(India) 90%

RX Systems Limited
Xx-xxxxxxx
BU ----
(England&Wales) 100%

Egton Medical Information Systems Limited
Xx-xxxxxxx
BU ----
(England&Wales) 100%

ASC Computer Software (NZ) Limited
Xx-xxxxxxx
BU ----
(New Zealand) 100%

Footman-Walker Associates Limited
Xx-xxxxxxx
(England&Wales) 100%

Ascribe Limited
Xx-xxxxxxx
BU ----
(Kenya) 100%

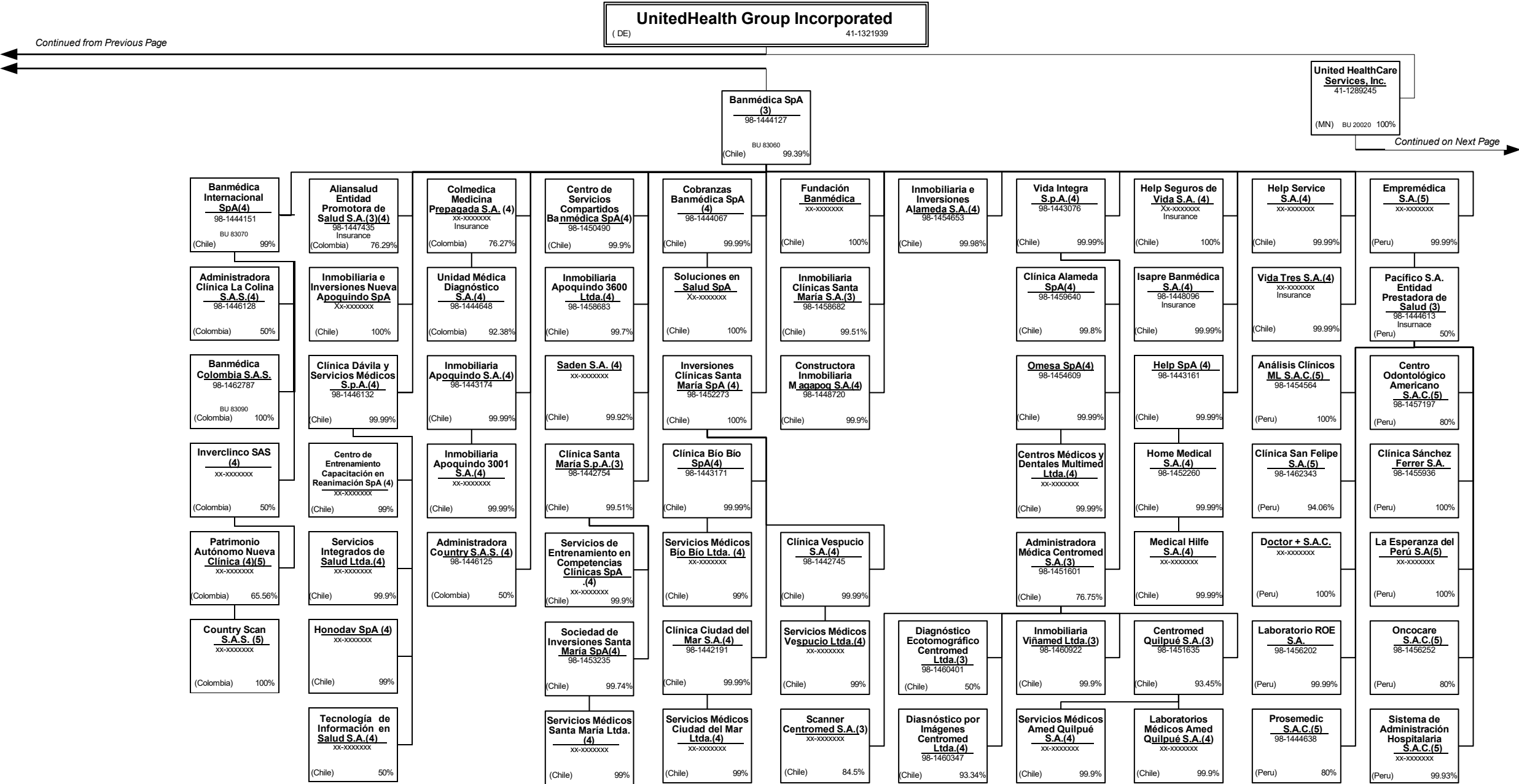
Healthcare Gateway Limited
Xx-xxxxxxx
BU ----
(England&Wales) 100%

Proxemis Limited (3)
Xx-xxxxxxx
BU ----
(England&Wales) 50%

ASC Computer Software Pty. Ltd.
Xx-xxxxxxx
BU ----
(Australia) 100%

To Banmédica SpA

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

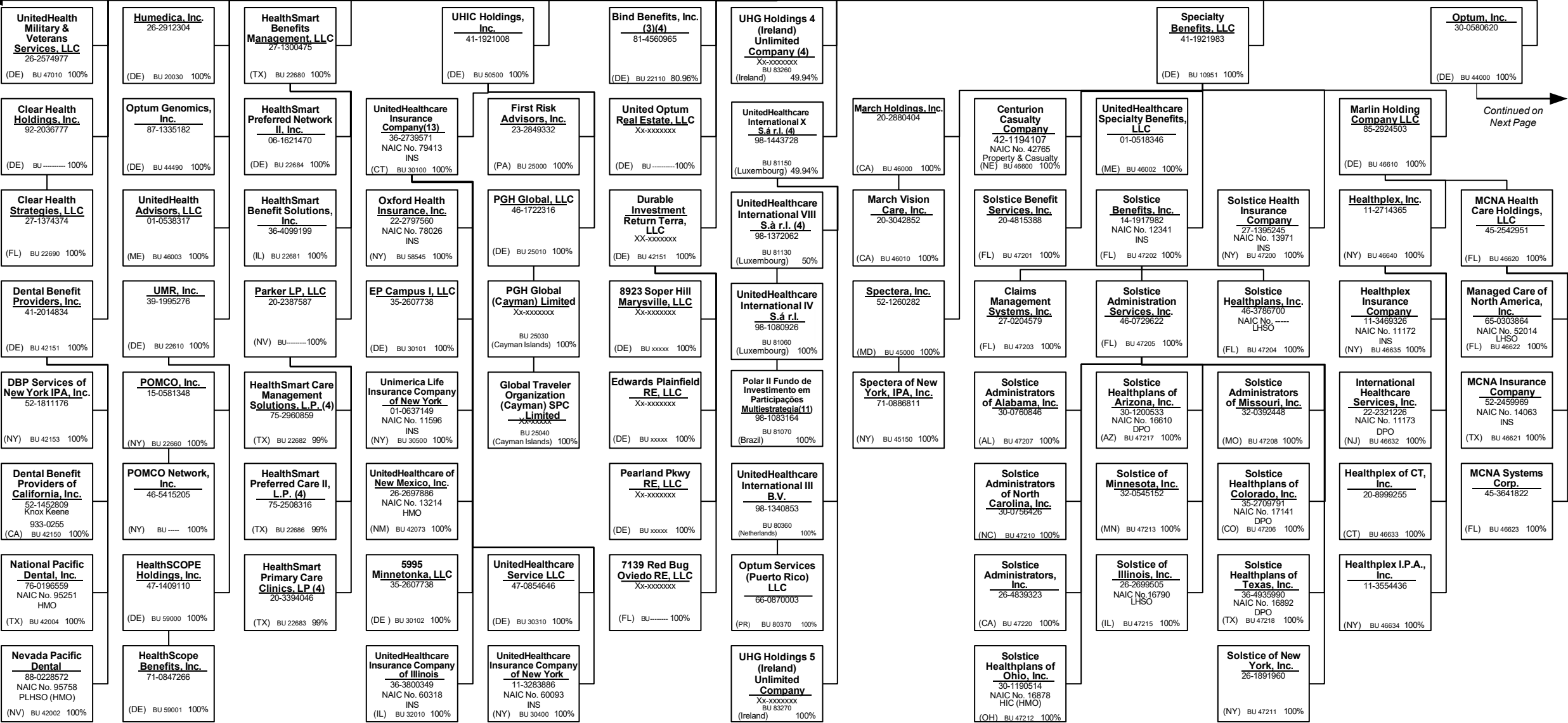




SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

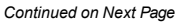
United HealthCare Services, Inc.
(MN) 41-1289245 100%

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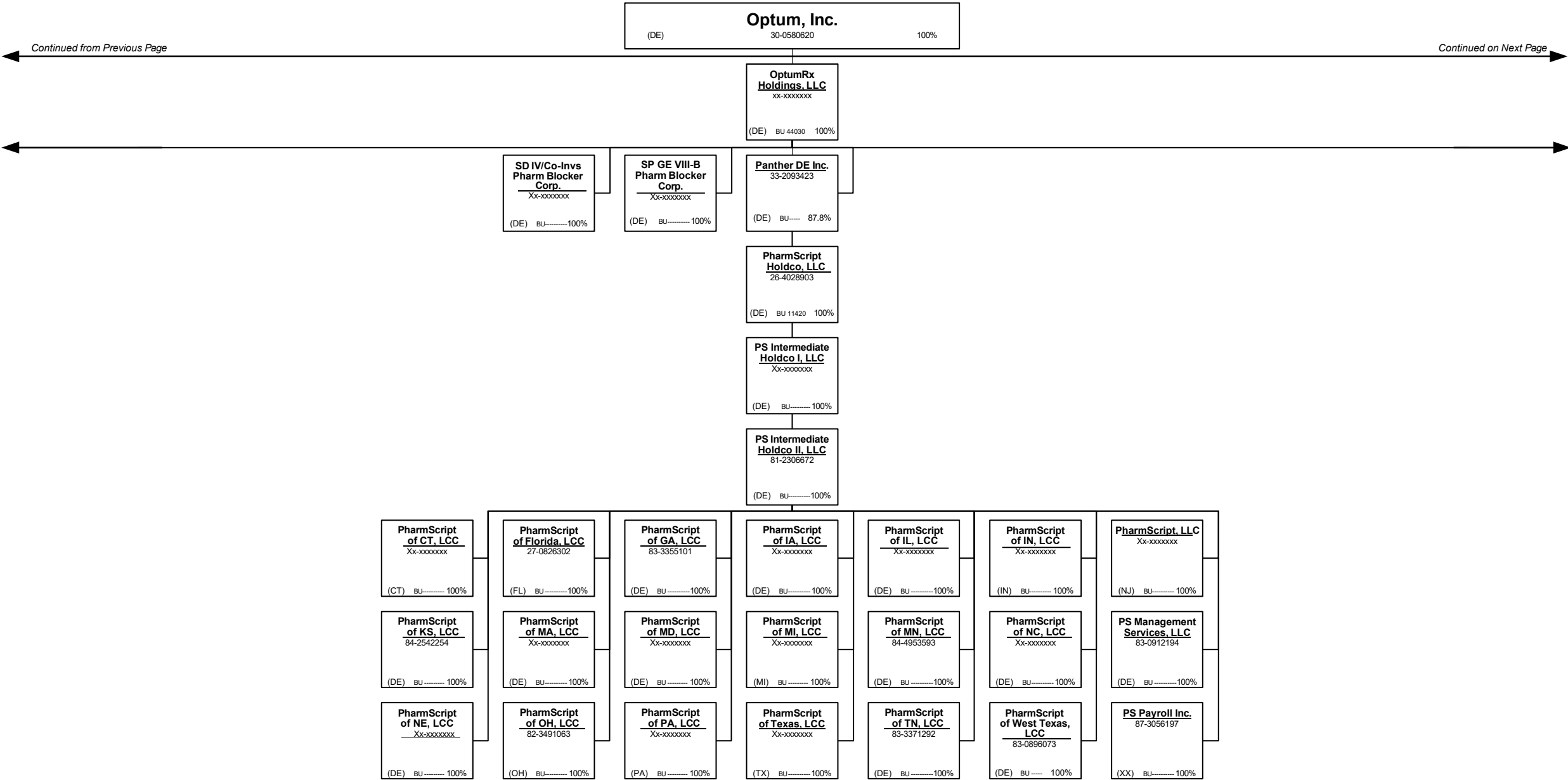


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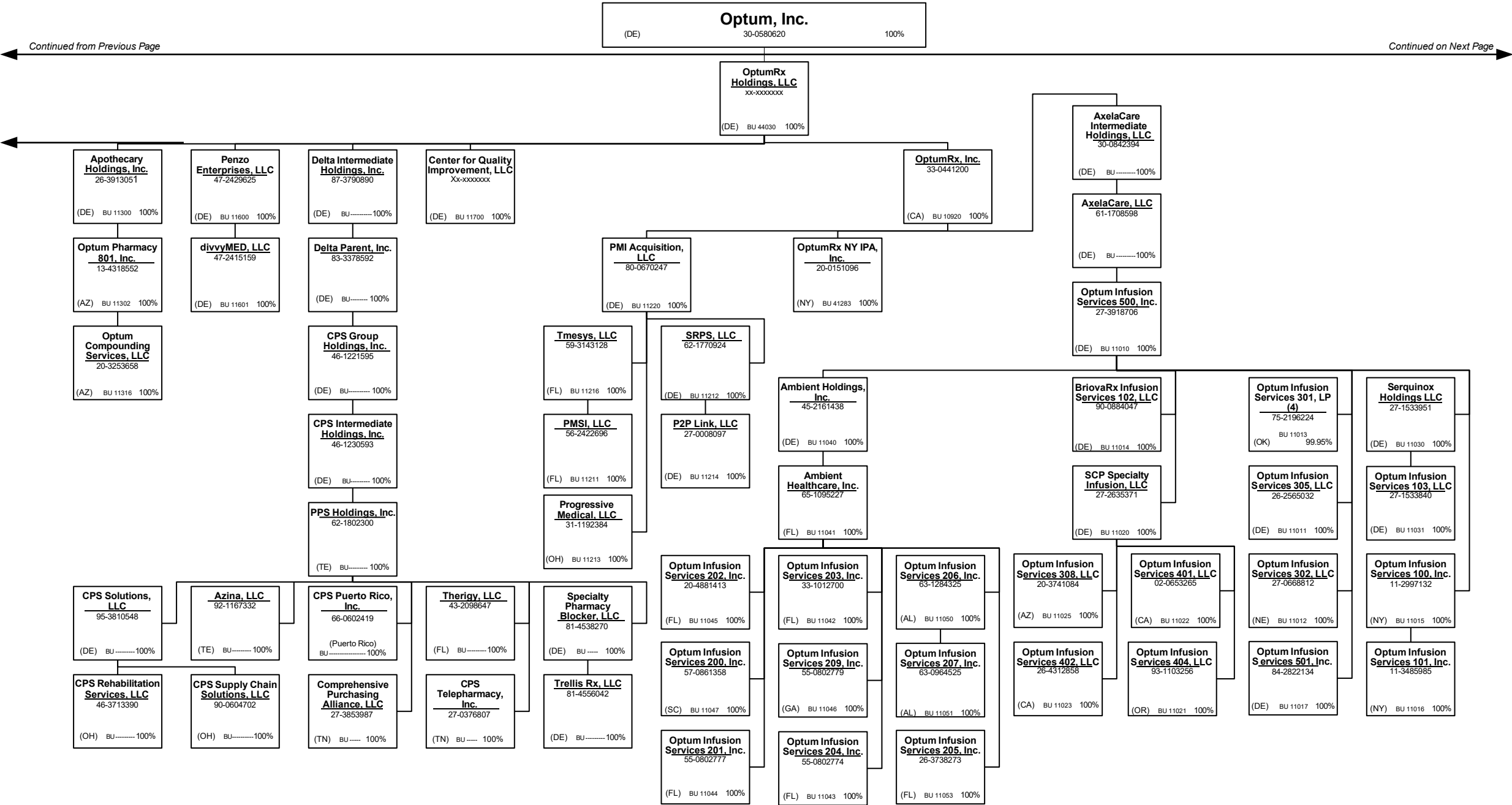
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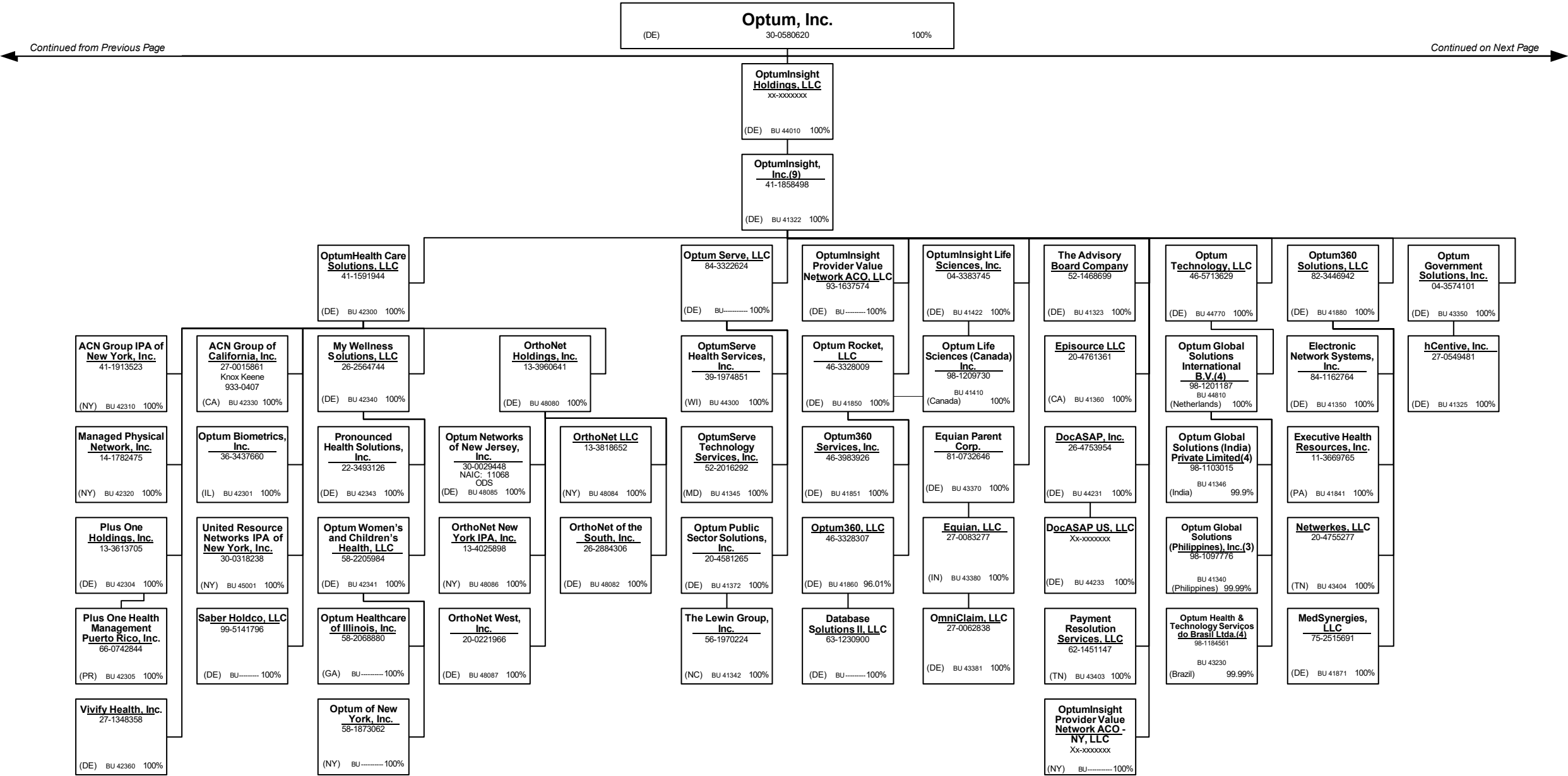
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



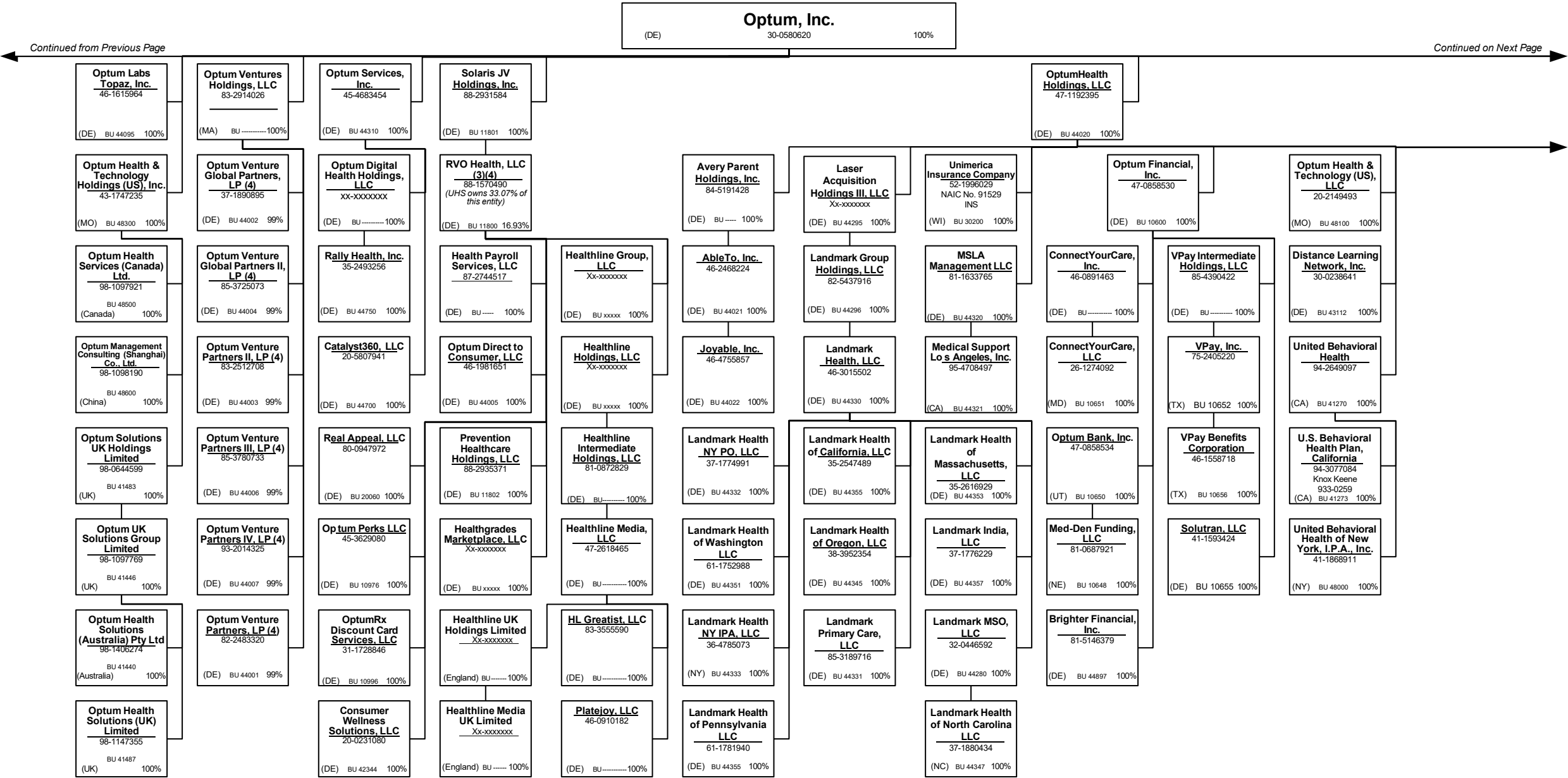
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



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



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



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graph TD; Optum[Optum, Inc.  
30-0580620 100%]; Optum --> OptumHealth[OptumHealth Holdings, LLC  
47-1192395]; OptumHealth --> RestoreOMH1[Restore OMH Intermediate Holdings, Inc.  
86-2955057]; RestoreOMH1 --> RestoreOMH2[Restore OMH Holdings, Inc.  
86-2957267]; RestoreOMH2 --> RefreshParent[Refresh Parent Holdings, Inc.  
82-1945585]; RefreshParent --> RefreshIntermediate[Refresh Intermediate Holdings, Inc.  
82-1945667]; RefreshIntermediate --> RefreshMental[Refresh Mental Health, Inc.  
82-1945238]; RefreshMental --> Row1[Row 1 of Subsidiaries]; RefreshMental --> Row2[Row 2 of Subsidiaries]; RefreshMental --> Row3[Row 3 of Subsidiaries];
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The organizational chart for Optum, Inc. (30-0580620, 100%) shows a hierarchical structure. Optum, Inc. is the parent company, which owns OptumHealth Holdings, LLC (47-1192395). OptumHealth Holdings, LLC owns Restore OMH Intermediate Holdings, Inc. (86-2955057), which in turn owns Restore OMH Holdings, Inc. (86-2957267). Restore OMH Holdings, Inc. owns Refresh Parent Holdings, Inc. (82-1945585). Refresh Parent Holdings, Inc. owns Refresh Intermediate Holdings, Inc. (82-1945667), which owns Refresh Mental Health, Inc. (82-1945238). Refresh Mental Health, Inc. is the parent of 33 subsidiaries, organized into three rows of 11 companies each. Each subsidiary box includes the company name, its state abbreviation in parentheses, its business unit code in parentheses, and its ownership percentage.

Row 1 of Subsidiaries:

- A Better Way Therapy, L.L.C. (NE) BU-----100%
- Advaned Therapy, Associates, LLC (OK) BU----- 100%
- Affirmations Psychological Services, LLC (OH) BU-----100%
- Body Image Therapy Center Intensive, LLC (MD) BU-----100%
- Refresh Management, LLC (DE) BU 44025 100%
- Sanvello Health Holdings, LLC(3) (DE) BU 20400 100%
- Daybreak Real Estate, LLC (TN) BU-----100%
- Discovery Counseling & Consulting, LLC (VA) BU ---- 100%
- Fairhaven Holdings, LLC (TN) BU-----100%
- Fairhaven Real Estate, LLC (TN) BU-----100%
- Phoenix Mental Health and Wellness PLLC (AZ) BU 45144 100%
- OhioSolutions.org LLC (OH) BU-----100%
- Refresh Kentucky, LLC (KY) BU-----100%

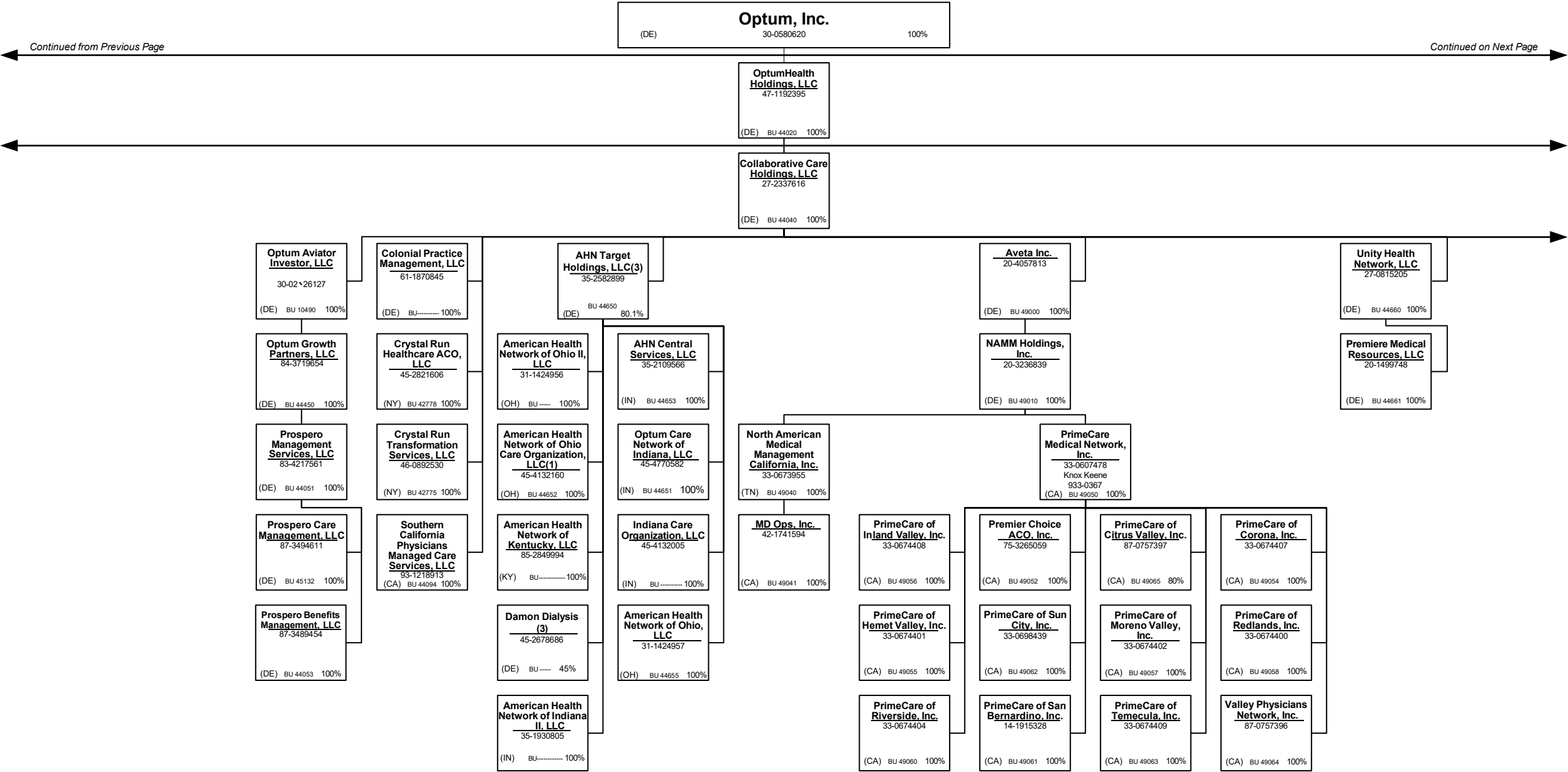
Row 2 of Subsidiaries:

- Integrated Behavioral Health, LLC (LA) BU ---- 100%
- Partial Hospital Systems, Inc. (TN) BU 45146 100%
- Amigo Family Counseling, LLC (OH) BU-----100%
- Refresh New Jersey Psych Health LLC (NJ) BU ---- 100%
- Coastal Counseling Center, Inc. (VA) BU ---- 100%
- Sanvello Health Inc. (DE) BU 20410 100%
- Capstone Behavioral Health, Inc. (NE) BU ---- 100%
- The Center for Cognitive and Behavioral Therapy of Greater Columbus, Inc. (OH) BU ---- 100%
- The Center for Eating Disorders Management, Inc. (NH) BU ---- 100%
- Xplor Counseling, LLC (HI) BU-----100%
- Oren Meyers, Ph.D., LLC (OH) BU-----100%
- A+ Learning and Development Centers, LLC (OH) BU-----100%
- Edelson & Associates, Inc. (KY) BU-----100%

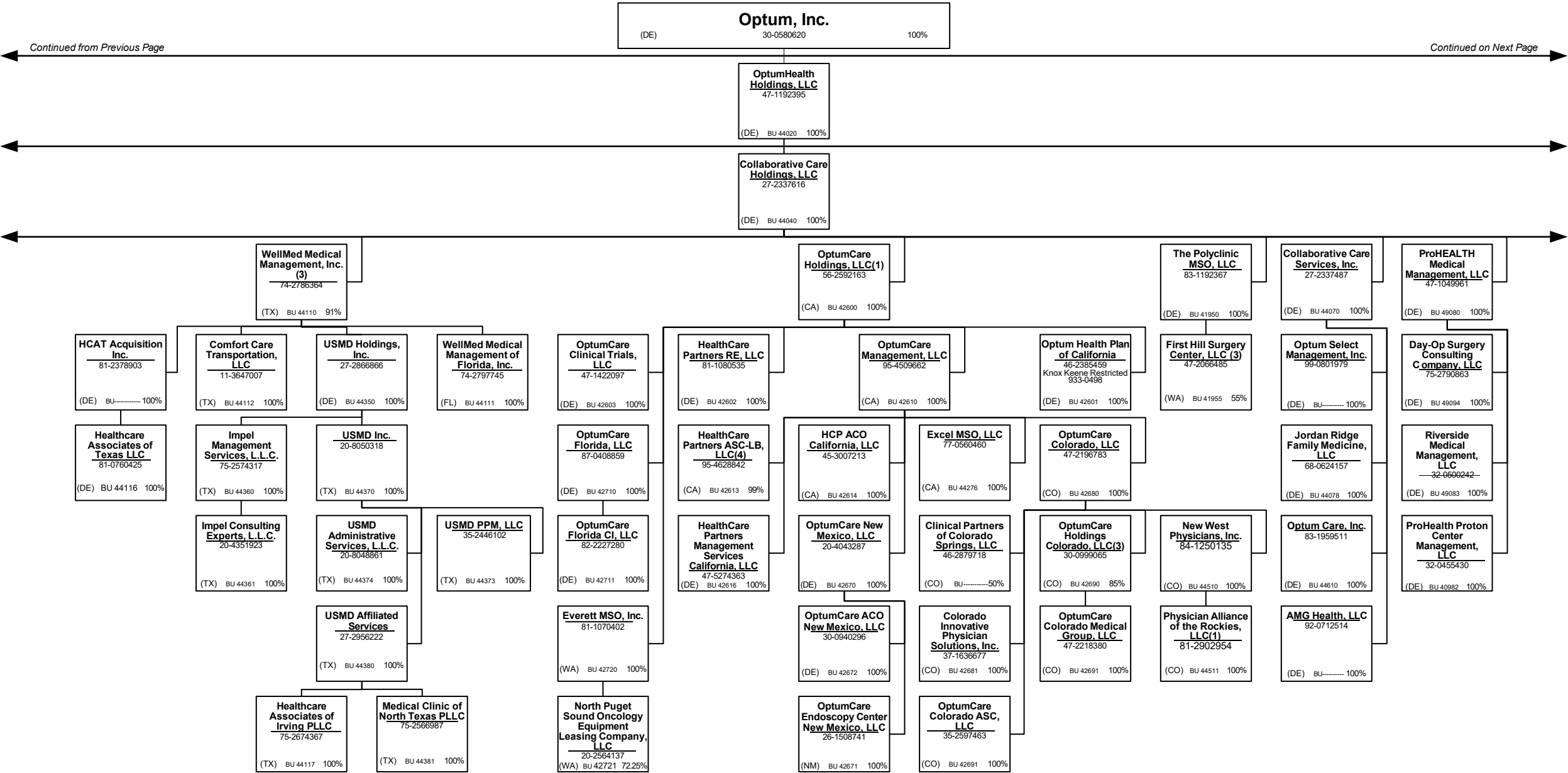
Row 3 of Subsidiaries:

- Optum Behavioral Care of Delaware, Inc. (DE) BU-----100%
- Optum Behavioral Care of Ohio, Inc. (OH) BU----- 100%
- Optum Behavioral Care of Virginia, Inc. (VA) BU-----100%
- Sundance Behavioral Resources, LLC (UT) BU-----100%
- Awesome MSO, LLC (MN) BU 43998 100%

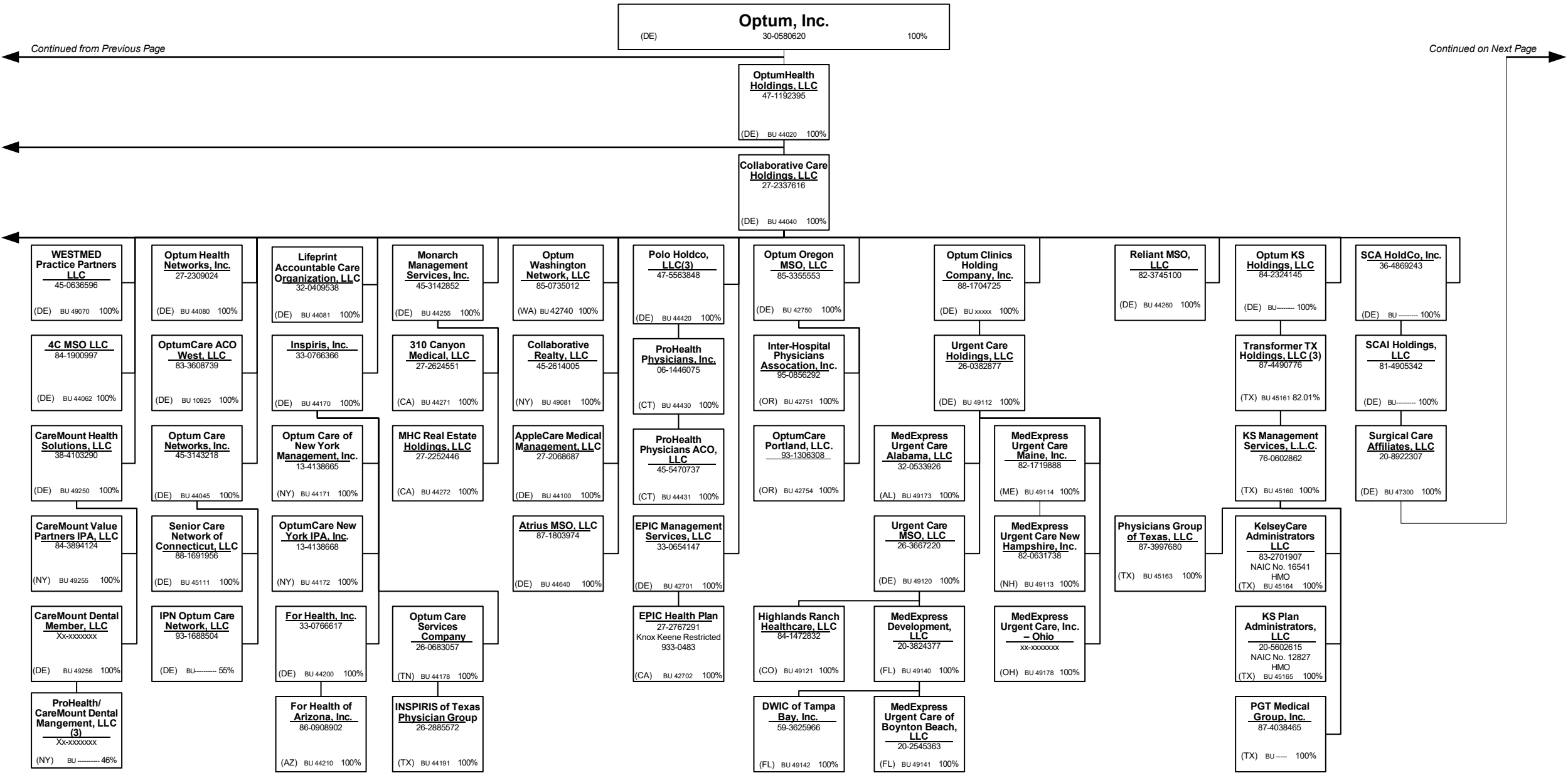
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



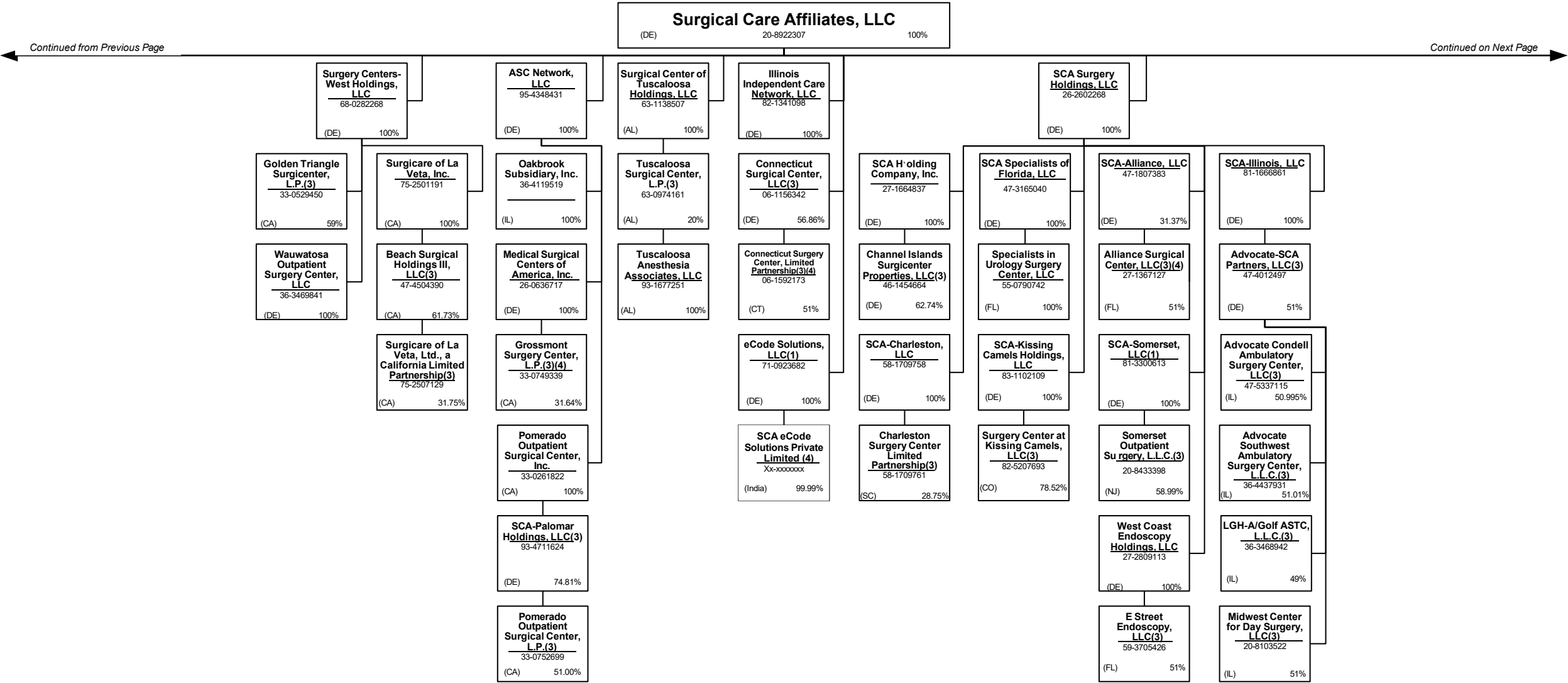
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



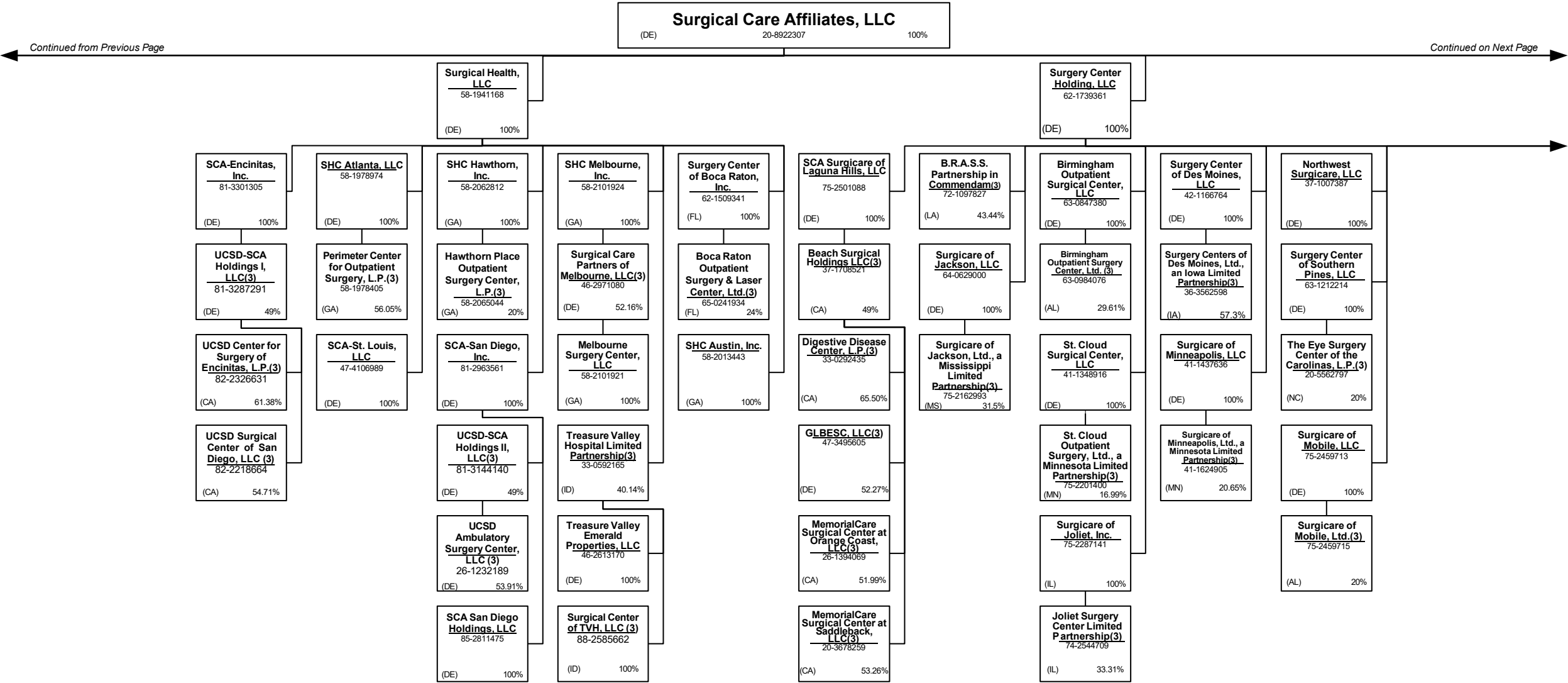
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
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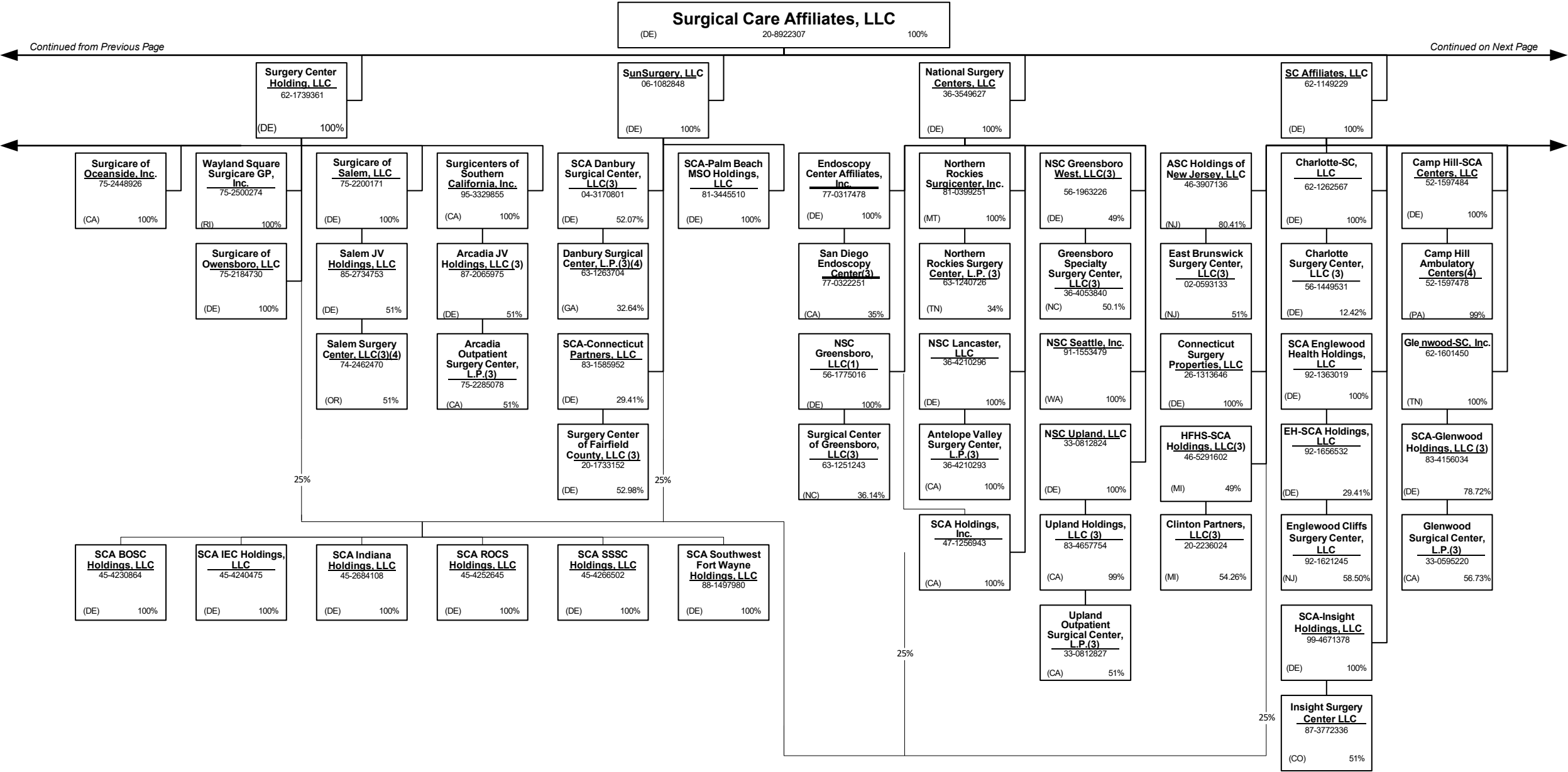
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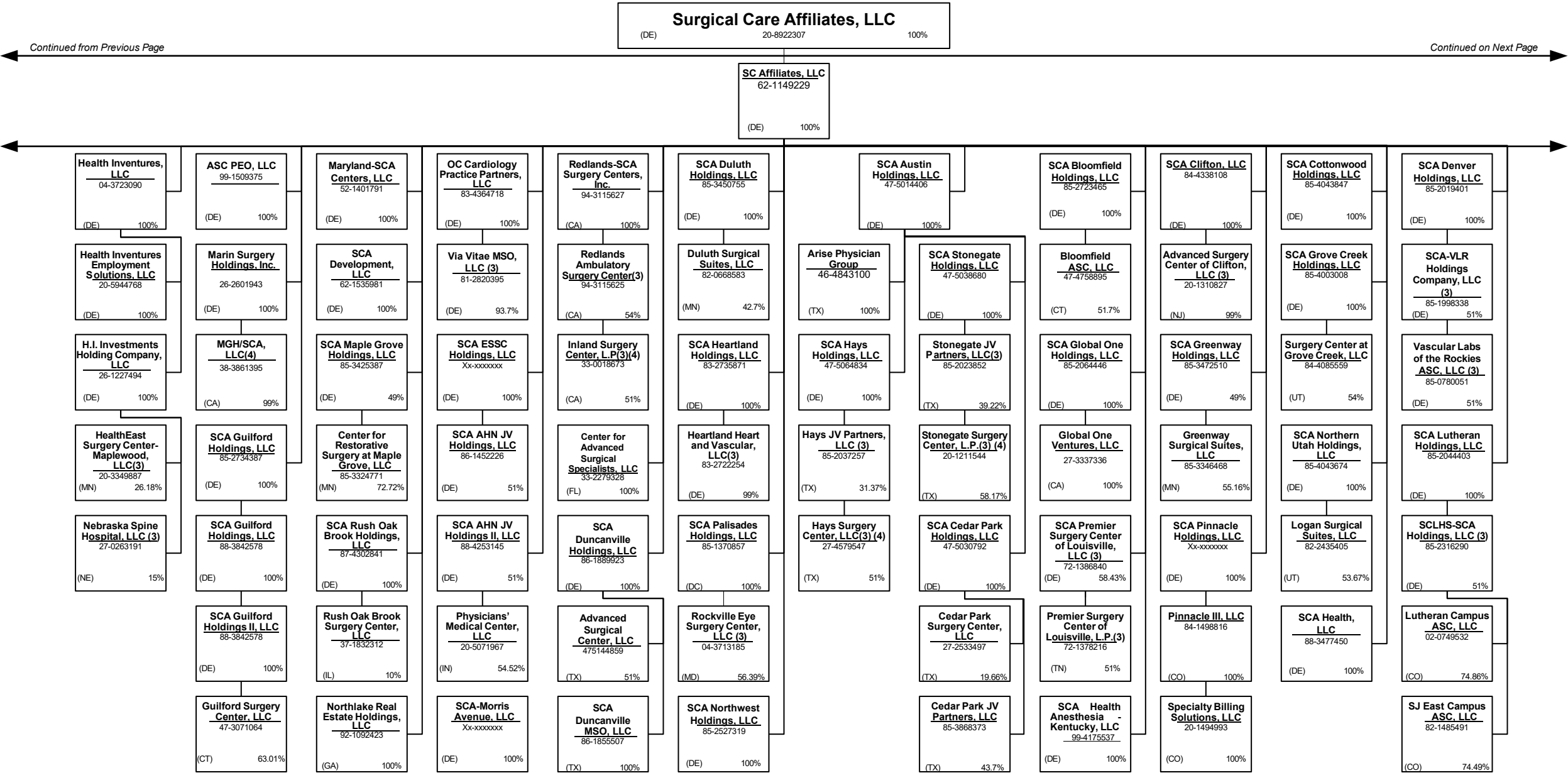
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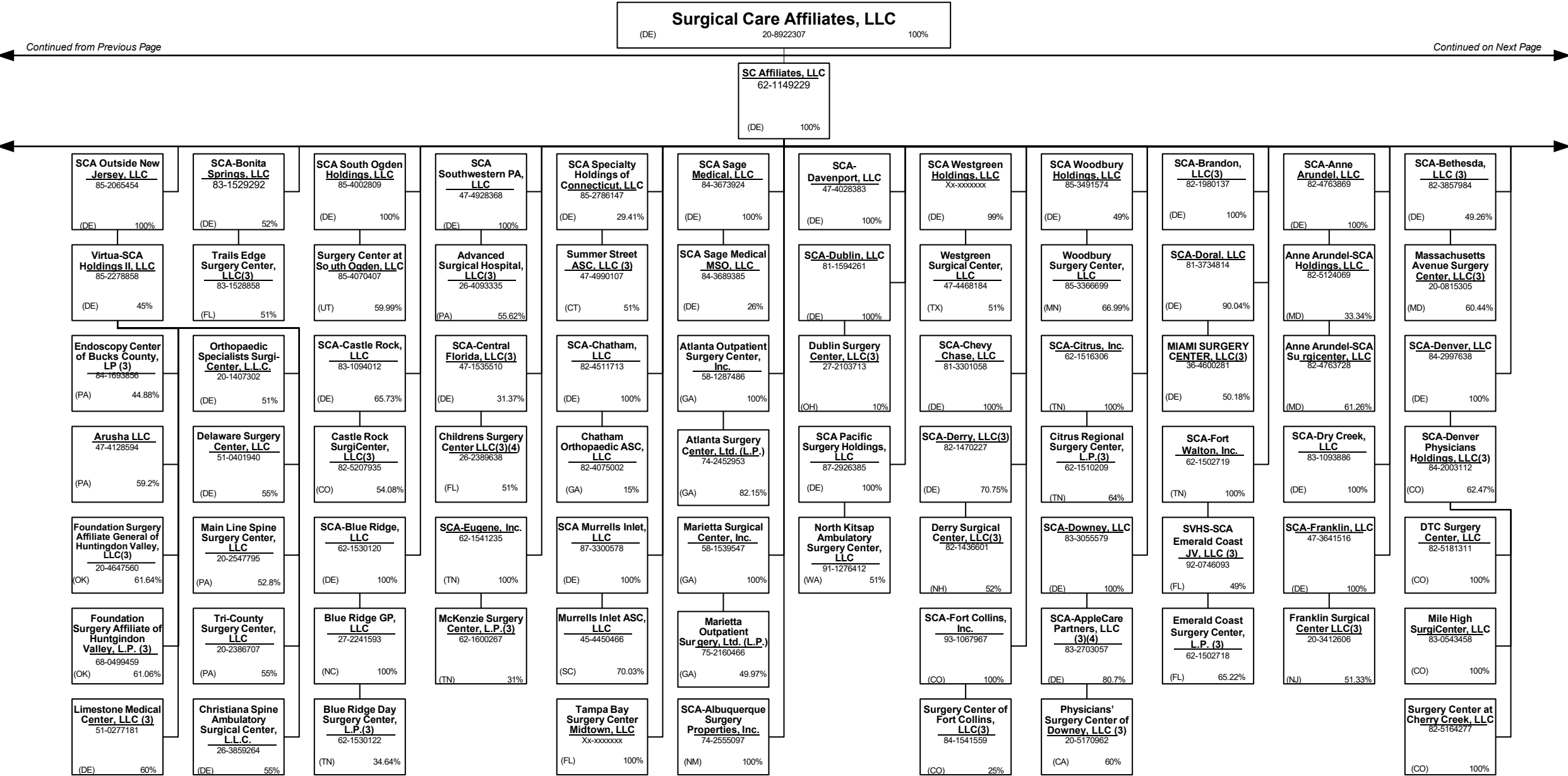


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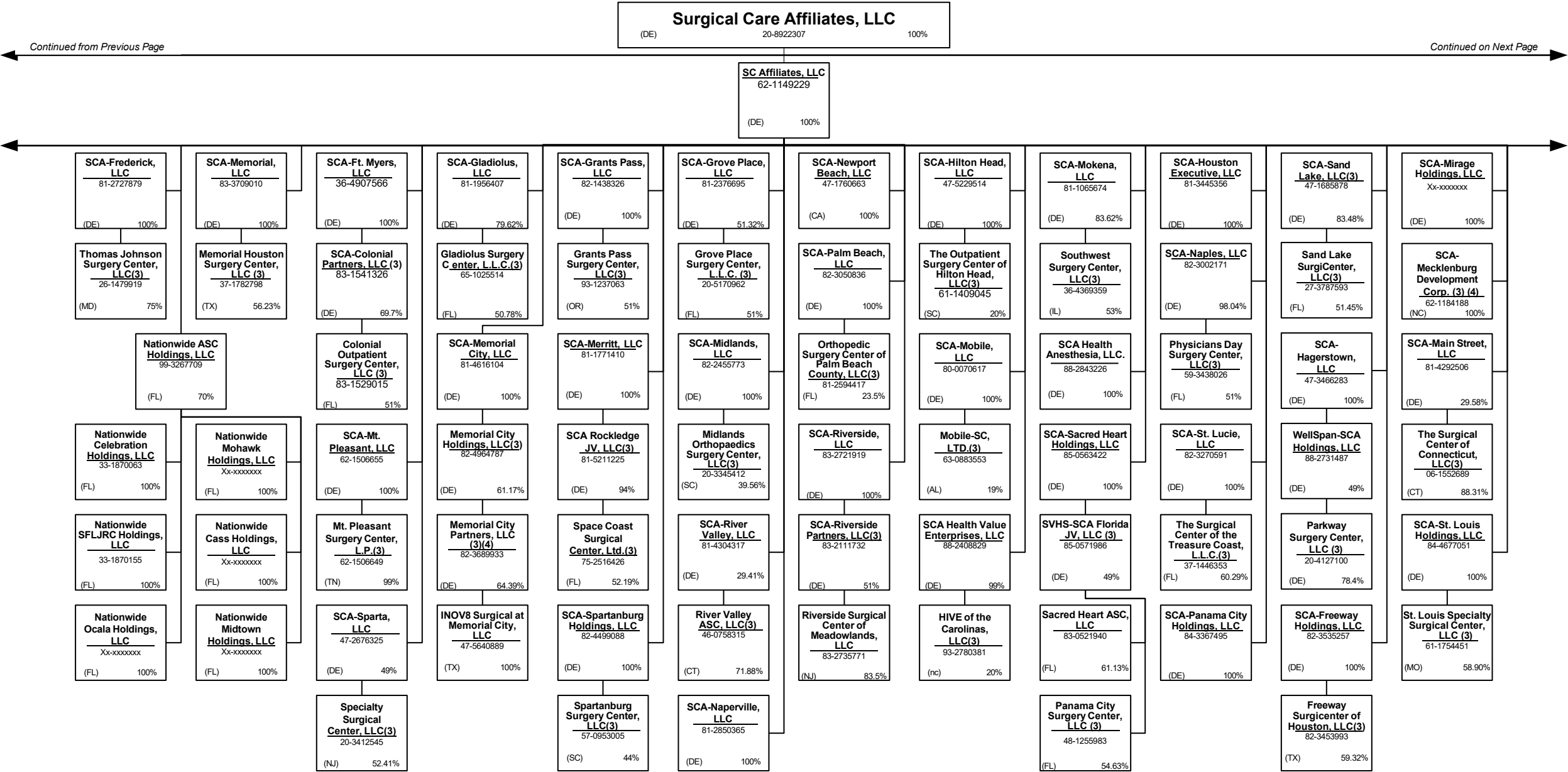


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

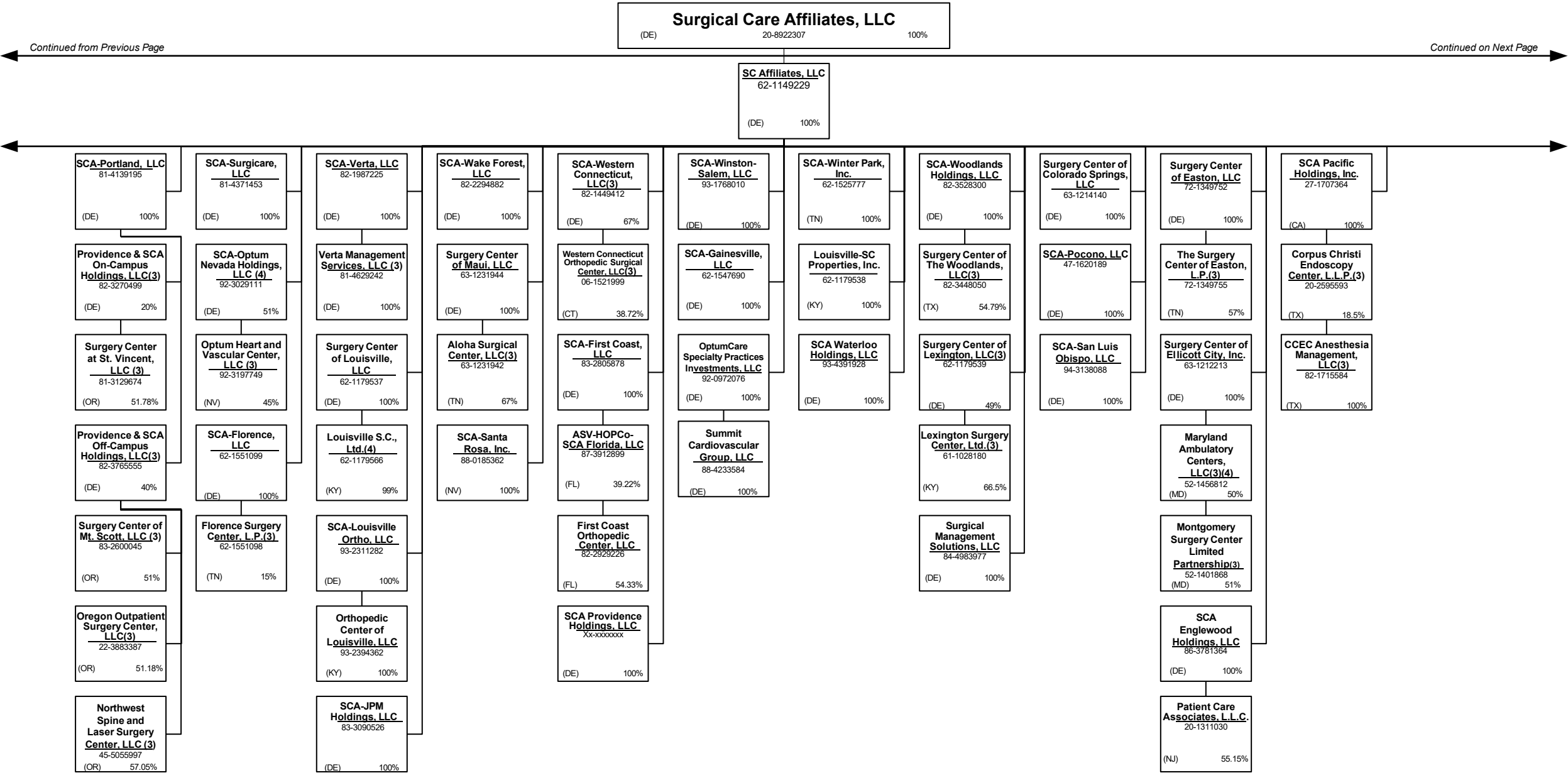
PART 1 - ORGANIZATIONAL CHART



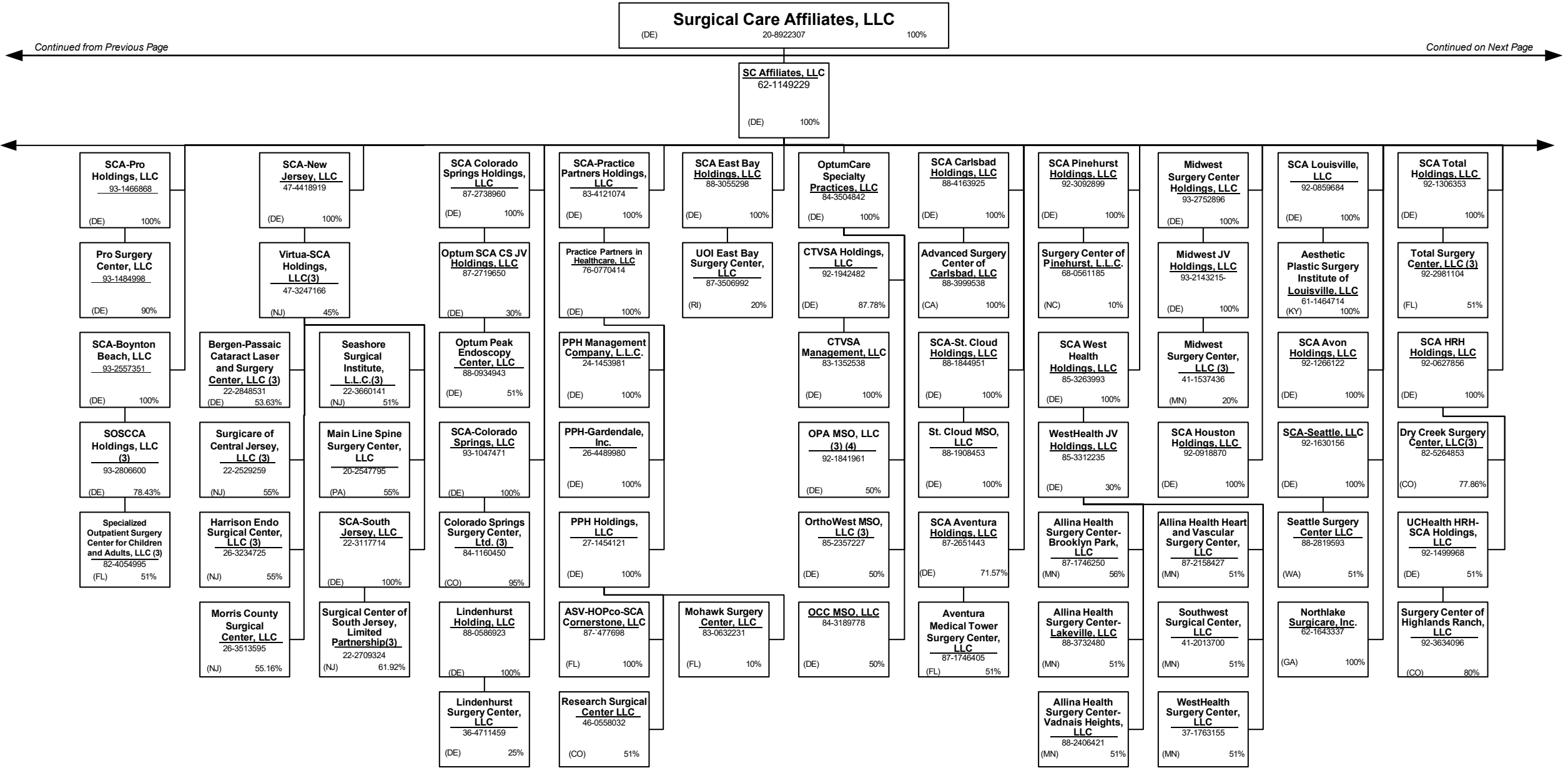
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



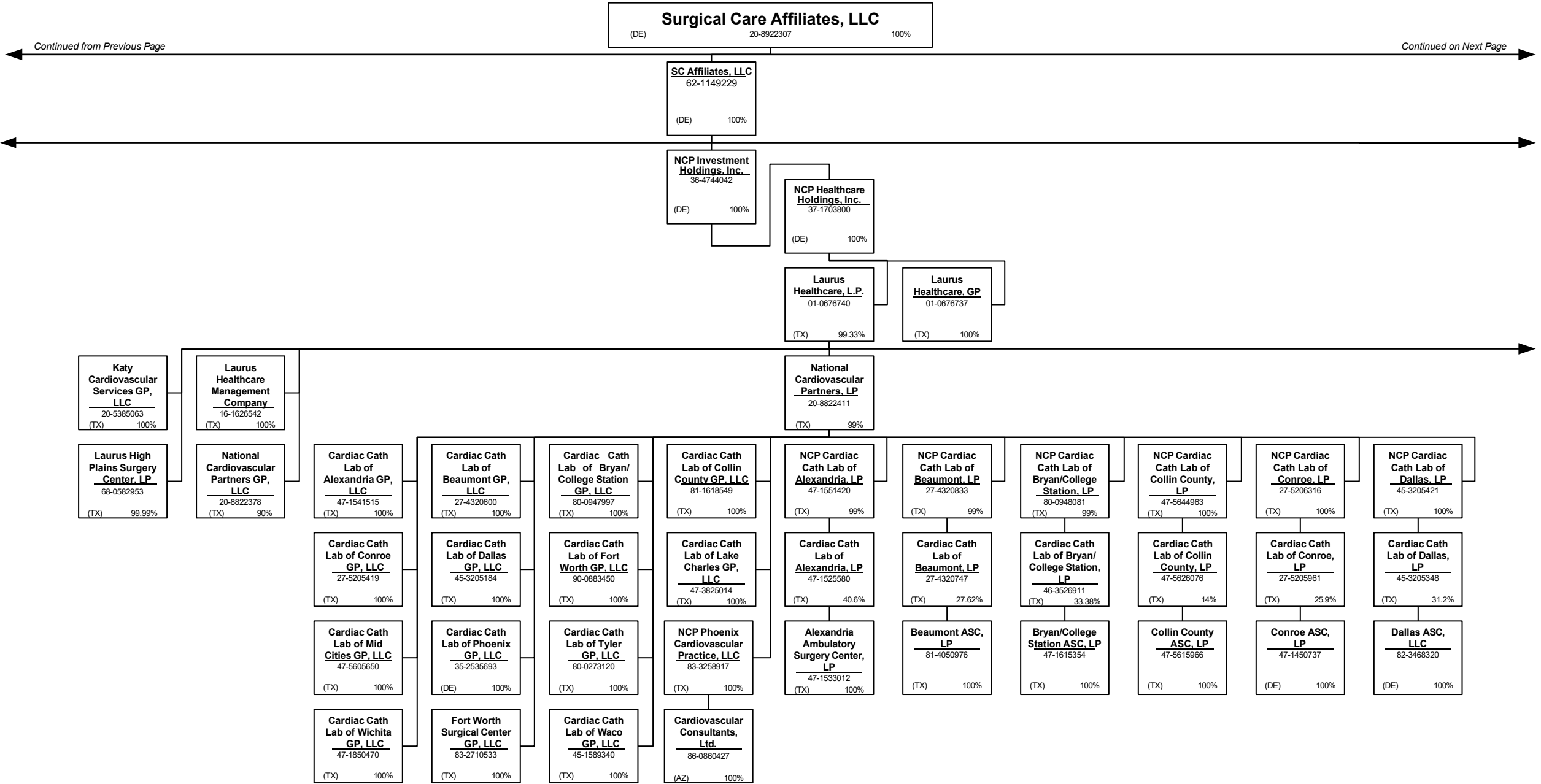
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



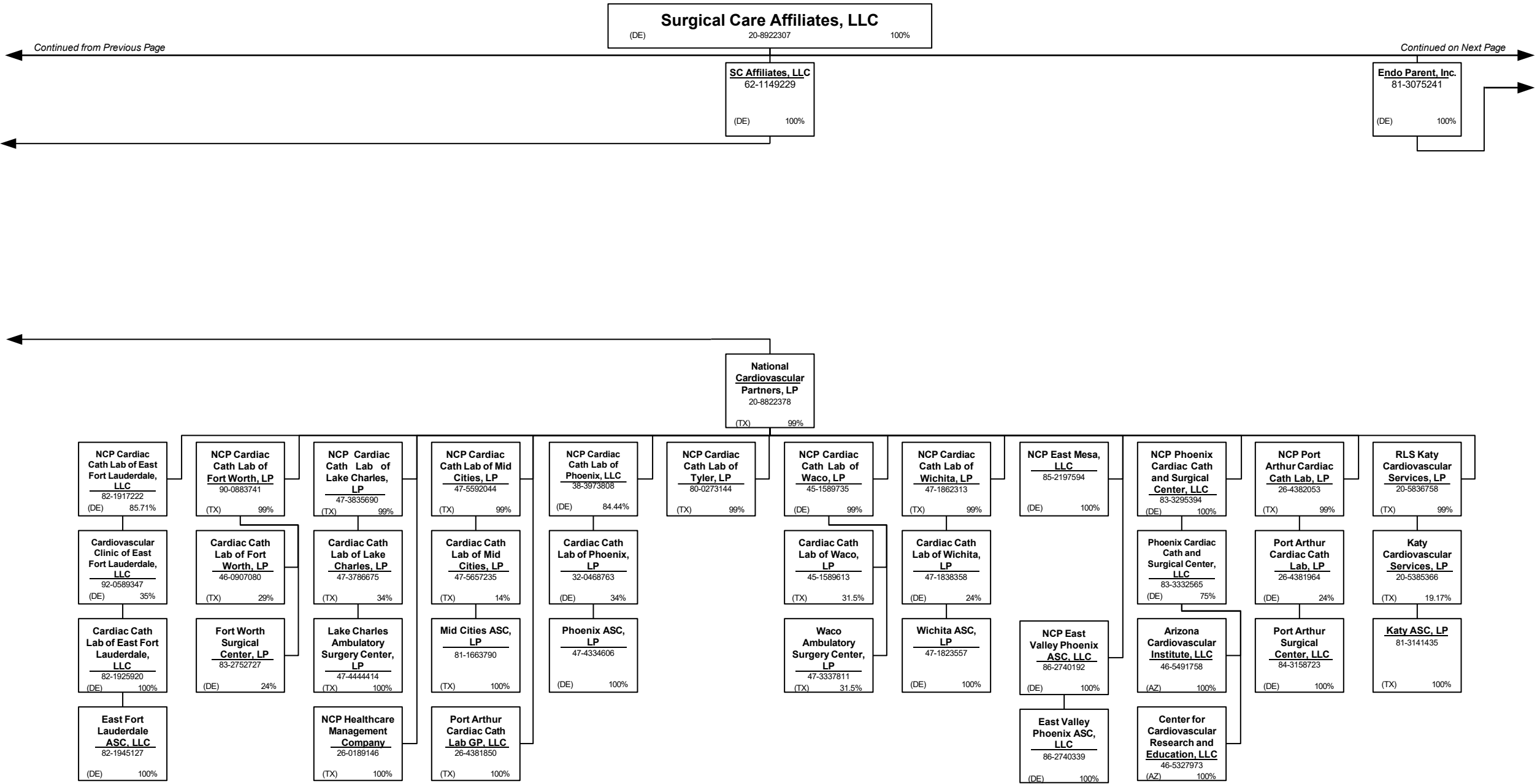
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



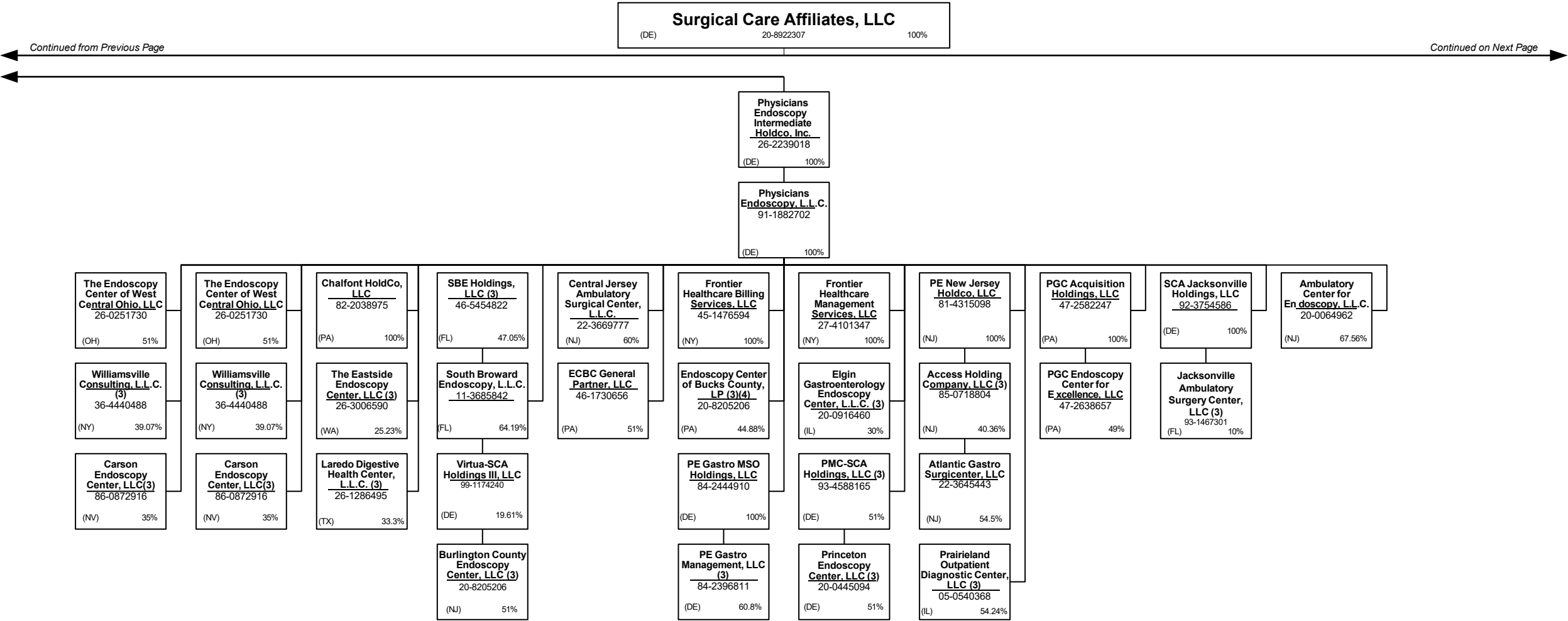
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

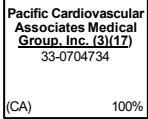


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PART 1 - ORGANIZATIONAL CHART



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PART 1 - ORGANIZATIONAL CHART





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

Beneficially Owned Legal Entities					
Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
4C Medical Group, PLC	AZ	45-2402948	Christopher Stalberg, M.D., PLLC	AZ	26-4651320
A.G. Dikengil, Inc.	NJ	22-3149900	Cielo House, Inc.	CA	27-1655973
AbleTo Behavioral Health Services of Michigan, P.C.	MI	85-4328419	Cognitive-Behavioral Therapy Center of Western North Carolina, P.A.	NC	20-3056794
AbleTo Behavioral Health Services of New Jersey, P.C.	NJ	85-4306375	Colonial Family Practice, L.L.C.	SC	02-0626080
AbleTo Behavioral Health Services, PC	CT	47-5519672	Columbia Counseling Center P.A.	MD	52-2052733
AbleTo Licensed Clinical Social Worker Services, P.C.	CA	85-0739865	Connect Medical, P.C.	NY	32-0551188
AbleTo Psychiatry Health Services, P.C.	MA	88-2290313	Crystal Run Healthcare Physicians LLP	NY	13-3843560
AHN Accountable Care Organization, LLC	IN	45-4171713	David C. Anderholm, M.D., P.A.	MN	41-1879063
AHN Surgery Center Holdings, LLC	IN	82-5224188	David Moen, M.D. P.C.	NY	81-5101448
Aleph Psychological Services, Inc.	CA	46-3477124	David R. Ferrell, M.D., P.C.	NV	45-2380022
Ambulatory Partner Holdings, LLC	NY	88-2464526	DBT and EMDR Specialists, P.A.	MN	47-3322541
American Health Netw ork of Indiana, LLC	IN	35-2108729	Digestive Diseases Diagnostic & Treatment Center, LLC	NY	26-1319443
Angie Coil FNP, PLLC	AZ	81-2112951	Doc Martins, PLLC	AZ	20-0419099
AppleCare Hospitalists Medical Group, Inc.	CA	14-1890491	Durable Medical Equipment, Inc.	MA	04-3106404
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269	East Side Endoscopy, L.L.C.	NY	91-1665997
AppleCare Medical Group, Inc.	CA	33-0898174	Elite Focus Clinic, Inc., a Professional Corporation	CA	47-3861802
ARTA Western California, Inc.	CA	33-0658815	Empire Physicians' Medical Group, Inc.	CA	33-0181426
Astra Medical Clinic, PLLC	AZ	86-0882561	Endoscopy Center of Western New York, L.L.C.	NY	36-4427974
Atrius Health Ambulatory Surgery Center, LLC	MA	--	Eugene Center for Anxiety and Stress, LLC	OR	83-2740282
Atrius Health, Inc.	MA	04-3397450	Eugene Therapy, LLC	OR	90-0624377
Beaver Medical Group, P.C.	CA	33-0645967	Everett Physicians, Inc. P.S.	WA	81-1625636
Behavioral Solutions, P.C.	MA	04-3316367	Evolve, LLC	WI	61-1752488
Bexar Imaging Center, LLC	TX	22-3858211	Family Counseling Associates of Salem Andover LLC	NH	27-0820363
California Spring Holdings, PC	CA	81-0881243	Ferrell Physician Services, P.C.	NY	87-4007730
Carbondale Counseling Associates, PLLC	IL	47-1130641	First Step Services, PLLC	NC	51-0484581
Cardiothoracic & Vascular Surgical Associates, P.A.	FL	59-3338654	Five Rivers South L.L.C.	MN	92-0459013
CARE Clinics LLC	MN	46-4814778	Flagstaff Family Physicians, PLLC	AZ	86-0959327
CARE Free Counseling LLC	MN	88-0822778	Good Samaritan Medical Practice Association, Inc., A Medical Group	CA	95-3969271
CareMount Health Solutions ACO, LLC	NY	n/a	Great South Bay Endoscopy Center, LLC	NY	46-3055867
Carnegie Hill Endoscopy, LLC	NY	27-0385539	Greater Phoenix Collaborative Care, P.C.	AZ	27-2337725
Carolina Behavioral Care, P.A.	NC	56-1780933	Gunn Behavioral Care of California, P.C.	CA	27-3237563
Carroll Counseling Center LLC	MD	52-2072546	Gunn Behavioral Holdco, P.C.	CA	92-3292446
Centers for Family Medicine, GP	CA	33-0483510	HealthCare Partners Affiliates Medical Group	CA	95-4526112

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

Beneficially Owned Legal Entities					
Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
HealthCare Partners ASC-HB, LLC	CA	26-4247365	Landmark Medical of Ohio, Professional Corporation	OH	82-4864947
HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760	Landmark Medical of Oregon, P.C.	OR	47-2926188
HealthCare Partners Medical Group, P.C.	CA	95-4340584	Landmark Medical of Pennsylvania, PC	PA	81-1605378
Heron Ridge Assoc., P.L.C.	MI	80-0020865	Landmark Medical of Rhode Island, PC	RI	84-2830065
Homecare Dimensions of Florida, Inc.	TX	81-0884465	Landmark Medical of Tennessee, PC	TN	30-1288593
Homecare Dimensions, Inc.	TX	74-2758644	Landmark Medical of Texas, PA	TX	83-2296389
IN Style OPTICAL, LLC	MA	27-3296953	Landmark Medical of Utah, PC	UT	84-2660339
Inland Faculty Medical Group, Inc.	CA	33-0618077	Landmark Medical of Virginia, P.C.	VA	85-0839774
Inspiris Medical Services of New Jersey, P.C.	NJ	45-2563134	Landmark Medical of Washington, PC	WA	47-3028655
INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674	Landmark Medical, P.C.	NY	47-1588943
INSPIRIS of New York Medical Services, P.C.	NY	13-4168739	Level2 Medical Services, P.A.	DE	84-5003916
INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670	Level2 Medical Services, P.A. New Jersey	NJ	87-2684015
Jonathan E. Goldberg, Ph.D., Inc.	MA	26-3013277	Level2 Medical Services, P.C. Alaska	AK	87-2600511
Joyce Marter & Associates, P.C.	IL	26-3478896	Level2 Medical Services, P.C. California	CA	92-1153396
K.P. Counseling, Ltd.	IL	30-0089259	Level2 Medical Services, P.C. Utah	UT	87-0989804
Kelsey-Seybold Medical Group, PLLC	TX	76-0386391	Liberty Endoscopy Center, LLC	NY	46-4588779
Keys Counseling, Inc.	IN	30-0358493	Life Strategies Counseling, Inc.	AR	20-0468524
KS Pharm, LLC	TX	84-2355006	LifeSolutions Counseling Associates, P.C.	IN	26-3292877
KS SC, LLC	TX	84-2241460	Long Island Digestive Endoscopy Center, LLC	NY	45-4714972
Landmark Medical of Arkansas, P.A.	AR	85-0997438	Manhattan Endoscopy Center, LLC	NY	27-1510596
Landmark Medical of California, PC	CA	47-4553619	March Vision Care Group, Incorporated	CA	95-4874334
Landmark Medical of Connecticut, PC	CT	83-2295301	March Vision Care IPA, Inc.	NY	27-3115058
Landmark Medical of Florida, P.A.	FL	85-0838149	March Vision Care of Texas, Inc.	TX	45-4227915
Landmark Medical of Idaho, PC	ID	92-0496439	MAT-RX DEVELOPMENT, L.L.C.	TX	43-1967820
Landmark Medical of Kansas, P.A.	KS	82-4633545	Mat-Rx Fort Worth GP, L.L.C.	TX	35-2262695
Landmark Medical of Kentucky, P.S.C.	KY	82-4881602	ME Urgent Care Nebraska, Inc.	NE	81-0936574
Landmark Medical of Louisiana, a Professional Corporation	LA	82-4881732	MedExpress Employed Services, Inc.	DE	81-1265129
Landmark Medical of Massachusetts, PLLC	MA	81-5364097	MedExpress Primary Care Arizona, P.C.	AZ	81-4550969
Landmark Medical of Michigan, P.C.	MI	86-3599871	MedExpress Primary Care Arkansas, P.A.	AR	84-4234388
Landmark Medical of Mississippi, P.C.	MS	82-5084178	MedExpress Primary Care Kansas, P.A.	KS	81-4605885
Landmark Medical of Missouri, P.C.	MO	82-4857713	MedExpress Primary Care Maryland, P.C.	MD	82-3384324
Landmark Medical of New Hampshire, P.C.	NH	85-1174070	MedExpress Primary Care Massachusetts, P.C.	MA	82-1096099
Landmark Medical of North Carolina, P.C.	NC	82-4256752	MedExpress Primary Care Minnesota P.C.	MN	81-4396738

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

Beneficially Owned Legal Entities					
Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265	MedExpress, Inc. – Delaware	DE	45-5436856
MedExpress Primary Care South Carolina, P.C.	SC	83-0764858	Mental Health Resources, PLLC	TN	62-1396317
MedExpress Primary Care Texas, P.A.	TX	84-2500750	MH Physician Three Holdco, a Medical Corporation	CA	27-4691544
MedExpress Primary Care Virginia, P.C.	VA	82-3395792	MHCH, Inc.	CA	80-0507474
MedExpress Primary Care West Virginia, Inc.	WV	82-4401181	MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508
MedExpress Primary Care Wisconsin, S.C.	WI	81-4563448	Midtown Medical, L.P.	CA	83-2873776
MedExpress Urgent Care – New Jersey, P.C.	NJ	45-5388778	Mindscapes Counseling, PLLC	CT	47-2117693
MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2089623	Mobile Medical Services of New Jersey, PC	NJ	81-2977678
MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280	Mobile Medical Services, P.C.	NY	30-0445773
MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120	Monarch Health Plan, Inc.	CA	22-3935634
MedExpress Urgent Care California, P.C.	CA	82-0930142	Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660
MedExpress Urgent Care Connecticut, P.C.	CT	81-1956812	NAMM Medical Group Holdings, Inc.	CA	56-2627070
MedExpress Urgent Care Idaho, P.C.	ID	82-1135336	NC Center For Resiliency, PLLC	NC	47-2693055
MedExpress Urgent Care Illinois, P.C.	IL	47-4308614	New Perspectives Center for Counseling & Therapy, L.L.C.	OR	93-1173779
MedExpress Urgent Care Iowa, P.C.	IA	81-5353472	New York Licensed Clinical Social Work, P.C.	NY	86-3891057
MedExpress Urgent Care Kansas, P.A.	KS	47-1919283	Northern California Physicians Network, Inc., a Professional Corporation	CA	81-1573604
MedExpress Urgent Care Minnesota P.C.	MN	81-1125396	Northlight Counseling Associates, Inc.	AZ	86-0646417
MedExpress Urgent Care Missouri P.C.	MO	47-3132625	Northwest Medical Group Alliance, LLC	WA	91-1699944
MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747	NPN IPA Washington, PLLC	WA	61-1855159
MedExpress Urgent Care Oregon, P.C.	OR	82-1919436	Oakland Psychological Clinic, P.C.	MI	38-2481929
MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765	OHR Physician Group, P.C.	OR	93-0979031
MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706	Optum Behavioral Care of California, P.C.	CA	84-4887072
MedExpress Urgent Care Texas, P.A.	TX	47-5147441	Optum Behavioral Care of Colorado, P.C.	CO	93-2952612
MedExpress Urgent Care Washington, P.C.	WA	82-2443118	Optum Behavioral Care of Connecticut, P.C.	CT	93-2339326
MedExpress Urgent Care Wisconsin, S.C.	WI	81-4281678	Optum Behavioral Care of Kansas, P.A.	KS	93-3404672
MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667	Optum Behavioral Care of New Jersey, P.C.	NJ	85-0666386
MedExpress Urgent Care, P.C. – Indiana	IN	90-0929572	Optum Behavioral Care of North Carolina, P.C.	NC	85-1959641
MedExpress Urgent Care, P.C. – Maryland	MD	45-3461101	Optum Behavioral Care of Texas, P.A.	TX	84-3152209
MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908	Optum Behavioral Care Therapy Services of Illinois, P.C.	IL	99-4597708
MedExpress Urgent Care, P.C. – Michigan	MI	46-4793937	Optum Care Washington, PLLC	WA	91-0214500
MedExpress Urgent Care, P.C. – Oklahoma	OK	47-1824365	Optum Clinic, P.A.	TX	75-2778455
MedExpress Urgent Care, P.C. – Tennessee	TN	45-4973138	Optum Everycare, P.C.	PR	66-1026448
MedExpress Urgent Care, P.S.C. - Kentucky	KY	83-1565124	Optum Medical Care of New Jersey, P.C.	NJ	22-3624559

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

Beneficially Owned Legal Entities			Beneficially Owned Legal Entities		
Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
Optum Medical Care, P.C.	NY	13-3544120	Prospero Medical Services New Jersey, P.C.	NJ	84-3844362
Optum Medical Group (Rhodes), P.C.	NV	88-0310956	Prospero Medical Services, P.A.	FL	87-2406404
Optum Medical Group II (Rhodes), P.C.	NV	86-0857176	Psychiatry Services of New York, P.C.	NY	85-0921665
Optum Medical Group, P.A.	KS	46-2662506	Psychiatry Specialists, S.C.	IL	27-3409538
Optum Medical Services of California, P.C.	CA	30-0826311	Psychological Healthcare, PLLC	NY	16-1484552
Optum Medical Services of Colorado, P.C.	CO	45-5424191	Queens Endoscopy ASC, LLC	NY	27-4189294
Optum Medical Services, P.C.	NC	45-3866363	Red Oak Counseling, Ltd.	WI	20-0785644
Optum Urgent Care, PLLC	NY	46-1883579	Redlands Family Practice Medical Group, Inc.	CA	56-2627067
OptumCare Portland, LLC	OR	93-1306308	Refresh Canopy Cove, Inc.	FL	82-3603285
Oregon Healthcare Resources, LLC	OR	27-3674492	Refresh Connecticut, PLLC	CT	84-2663780
Ortho Physician Partners, P.C.	WA	93-3367856	Refresh Evolve, LLC	WI	83-4507157
OW Physician Partners, P.C.	CA	85-4386308	Refresh In-Home Counseling LLC	IL	82-5351068
Pacific Cardiovascular Associates Medical Group, Inc.	CA	33-0704734	Refresh Pennsylvania, LLC	PA	84-1756547
PE Healthcare Associates, LLC	NY	27-4496894	Reliant Medical Group The Endoscopy Center, LLC	MA	20-5251393
Peninsula Psychological Center, Inc., P.S.	WA	91-1885912	Reliant Medical Group, Inc.	MA	04-2472266
Perspectives of Troy, P.C.	MI	38-2592367	RICBT, Inc.	RI	33-0999953
Physician United PLLC	AZ	84-3476733	Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097
Physicians Medical Group of San Jose, Inc.	CA	94-2722082	Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379
Physicians Medical Holdings	CA	86-2631012	Saad A. Shakir, M.D., Inc.	CA	77-0398259
Pilot Holdings, P.C.	CA	87-3931756	Saddleback Medical Group, Inc.	CA	33-0571462
Pinnacle Medical Group, Inc.	CA	33-0795271	San Bernardino Medical Group, Inc.	CA	95-3088615
Polyclinic Holdings, P.C.	WA	83-3042027	San Diego Physicians Medical Group, Inc.	CA	33-0457134
POLYCLINIC MANAGEMENT SERVICES COMPANY, LLC	WA	46-0508606	Sanvello Behavioral Health Services, P.A.	DE	84-1754732
Primary Care Associated Medical Group, Inc.	CA	33-0527335	Saris Counseling, LLC	WI	n/a
ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253	Seattle Psychology, P.L.L.C.	WA	46-3238571
ProHEALTH Care Associates, L.L.P.	NY	11-3355604	Sequoia Physician Holdings, P.C.	CA	99-2070439
ProHEALTH Medical NY, P.C.	NY	47-1388406	Serenity Family and Psychological Counseling Center, P.C.	CA	45-3802527
ProHealth Physicians, P.C.	CT	06-1469068	Shark Holdings, P.C.	CA	87-3142148
ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535	Sherman Counseling Management, S.C.	WI	47-5082677
Prospero Health Partners Florida, Inc.	FL	85-0775386	Silicon Valley TMS of Monterey Bay, GP	CA	81-3200297
Prospero Health Partners New York, P.C.	NY	82-2400620	Southwest Internal Medicine Group, Roberto Ruiz, M.D., PLLC	AZ	86-0516447
Prospero Health Partners North Carolina, P.C.	NC	84-4569314	Spring Behavioral Health of New Jersey, LLC	NJ	82-3087236
Prospero Health Partners, P.C.	MN	84-3234753	Springfield Psychological, P.C.	PA	23-2833266

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

Beneficially Owned Legal Entities

Entity Name	Juris.	Federal Tax ID
St. Vincent IPA Medical, L.P.	CA	95-4729595
Surgical Eye Experts, LLC	MA	65-1321064
Surprise Health Center, PLLC	AZ	86-1047772
Susan Albright P.L.C.	AZ	20-5176158
Talbert Medical Group, P.C.	CA	93-1172065
The Corvallis Clinic, P.C.	OR	93-1221257
The Polyclinic, PLLC	WA	91-0369070
The Potter's House Family & Children Treatment Center, LLC	GA	20-8357849
The Salveo Center, PLLC	WA	80-0281838
The Tabor Therapy Group, Inc.	IL	46-5461304
Triangle Counseling Agency, Inc.	NC	26-2552129
USMD Diagnostic Services, LLC	TX	27-2803133
USMD of Arlington GP, L.L.C.	TX	73-1662757
Warner Family Practice, P.C.	AZ	86-0462952
WellMed Florida Medicare ACO, LLC	TX	84-2233329
WellMed Florida Services, PLLC	TX	45-2158334
WellMed Foundation Medicare ACO, LLC	TX	84-2193803
WellMed Medical Group, P.A.	TX	74-2574229
WellMed MSSPACO, LLC	TX	84-2178104
WellMed Netw ork Medicare ACO, LLC	TX	84-2204650
WellMed Netw ork of Florida, Inc.	TX	35-2314192
WellMed Netw orks, Inc.	TX	74-2889447
WellMed of Las Cruces, Inc.	TX	92-0183013
WellMed Texas Medicare ACO, LLC	TX	84-2219968
XLHome Michigan, P.C.	MI	46-3537245
XLHome Northeast, P.C.	NJ	45-5530241
XLHome Oklahoma, Inc.	OK	46-2931689
XLHome, P.C.	MD	27-3543997
Yorktow n ASO LLC	DE	99-1074356
Yorkville Endoscopy, LLC	NY	46-0857425

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

PART 1 - ORGANIZATIONAL CHART

Organizational Chart Footnotes

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE UnitedHealthcare of New England, Inc.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
2504.	Miscellaneous Receivables	703	703	0	0
2505.	Prepaid Commissions	150	150	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	853	853	0	0

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

		1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504.	Prepaid Expenses	0	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0