

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2023 OF THE CONDITION AND AFFAIRS OF THE

Humana Medical Plan of Michigan, Inc.

NA NA		0119 NAIC Company C	ode <u>14224</u> Employer's	ID Number <u>27-3991410</u>
Organized under the Laws of	, ,	1 1	, State of Domicile or Port of	Entry MI
Country of Domicile		United States	of America	
Licensed as business type:		Health Maintenan	ce Organization	
Is HMO Federally Qualified?	Yes[] No[X]			
Incorporated/Organized	11/16/2010		Commenced Business _	02/29/2012
Statutory Home Office	18610 Fenkel	l Street ,		Detroit, MI, US 48223-2378
	(Street and N	umber)	(City or	r Town, State, Country and Zip Code)
Main Administrative Office		500 W. N (Street and		
(City o	Louisville, KY, US 40202 r Town, State, Country and Zip 0			502-580-1000 vrea Code) (Telephone Number)
		,		,, ,
Mail Address	P.O. Box 740036 (Street and Number or P			Louisville, KY, US 40201-7436 r Town, State, Country and Zip Code)
Primary Location of Books an	d Records	500 W. I	Main St.	
	Louisville, KY, US 40202	(Street and	Number)	502-580-1000
(City o	r Town, State, Country and Zip (Code)	(A	rea Code) (Telephone Number)
Internet Website Address		www.hum	ana.com	
Statutory Statement Contact	Bryan	Oberholtzer	·	502-580-1077
	DOIINQUIRIES@humana.com	(Name)		(Area Code) (Telephone Number) 502-580-2099
	(E-mail Address)			(FAX Number)
B 0.550	D D 1	OFFIC	_	0 M · D
President & CEO VP, Associate General	Bruce Dale E	Broussard	Chief Financial Officer _	Susan Marie Diamond
Counsel & Corporate Secretary	Joseph Matthe	w Ruschell	SVP, Chief Actuary	Vanessa Marie Olson
		ОТН		
	Assistant Corporate Secretary ESG Strategy		, Associate VP, Tax	John-Paul William Felter, SVP, Chief Accounting Officer & Controller
Jeremy Leon Gaskill, VP,	Medicare Regional President P, Chief Compliance Officer		#, SVP, EG Medical	Robert Martin Marcoux Jr., VP & Treasurer George Renaudin II, President, Medicare & Medicaid
Frederick William Roth #	, VP, Medicare Supplement	Leah Sonnenschein Schrau	denbach #, SVP, Chief Risk icer	Michael Poul Tilton, SVP, Specialty & Retiree Solutions
Ralph Martin Wil	son, Vice President			
Bruce Dal	e Broussard	DIRECTORS O Stephanie Luc	R TRUSTEES cido Herpers #	Joseph Matthew Ruschell
				·
State of	Kentucky Jefferson	SS:		
County of	Jellerson			
all of the herein described as statement, together with relat condition and affairs of the sa in accordance with the NAIC rules or regulations require respectively. Furthermore, the	seets were the absolute properlied exhibits, schedules and explid reporting entity as of the reporting and Statement Instructions differences in reporting not rele scope of this attestation by the	by of the said reporting entity, anations therein contained, and and period stated above, an and Accounting Practices and alter to accounting practice the described officers also income the said reporting practice and described officers also income the said reporting practice and the said reporting practice and the said reporting practice and the said reporting entitles and the said reporting entities are said reporting entities.	free and clear from any liens nnexed or referred to, is a full a d of its income and deductions d Procedures manual except t is and procedures, according ludes the related correspondir	porting entity, and that on the reporting period stated above, so or claims thereon, except as herein stated, and that this and true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed to the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief, go electronic filing with the NAIC, when required, that is an or be requested by various regulators in lieu of or in addition
Bruce Dale Br President &		Joseph Matth VP, Associate General Secre	Counsel & Corporate	Robert Martin Marcoux, Jr. VP & Treasurer
Subscribed and sworn to before 8th day of		nber, 2023	a. Is this an original filing b. If no, 1. State the amendm 2. Date filed	ent number
Julia Wentworth Notary Public January 10, 2025				

ASSETS

		OLIO	0 1011 101		4
		1	Current Statement Date 2	3	4 December 31
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1.	Bonds			69,977,425	58,913,903
2.	Stocks:			, ,	
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate:				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	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 (\$				
	(\$153,968,112) and short-term				
	investments (\$0)				52,644,803
	Contract loans (including \$0 premium notes)				0
	Derivatives			0	0
	Other invested assets			0	0
	Receivables for securities			0	0
	Securities lending reinvested collateral assets			0	0
	Aggregate write-ins for invested assets			0	0
	Subtotals, cash and invested assets (Lines 1 to 11)	224, 186, 544	0	224 , 186 , 544	111,558,706
	Title plants less \$0 charged off (for Title insurers	0	0		0
	only)			458,378	0
	Premiums and considerations:	430,370	0	430,370	432,077
	15.1 Uncollected premiums and agents' balances in the course of collection	158 754	28 604	130, 060	74 026
	15.2 Deferred premiums, agents' balances and installments booked but	150,754	20,094	100,000	74,020
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$9,279,802)	9.742.656	0	9,742,656	9.348.597
16.	Reinsurance:	-, , -		, , ,	.,. ,
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17.	Amounts receivable relating to uninsured plans	287,414	68,574	218,840	1,231,482
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0	1,194,309
	Net deferred tax asset			3,043,429	3,043,429
	Guaranty funds receivable or on deposit			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
	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
	Receivables from parent, subsidiaries and affiliates			0	0
	Health care (\$			15,909,138	
	Aggregate write-ins for other than invested assets	8, 107,055	8, 107,655	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	273,286,261	19,597,215	253,689,045	134,884,671
27.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts			0	
	Total (Lines 26 and 27)	273,286,261	19,597,215	253,689,045	134,884,671
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.	Comment of the first test to the first test test test test test test test t				
	Summary of remaining write-ins for Line 11 from overflow page			0	0
	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	2 742 221		0	0
	Prepaid Commissions				0
	Prepaid Expenses			0	0
	Provider Contracts		' '	0	0
	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	8,107,655	8,107,655	0	0

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPI		Current Period	T	Prior Year
		1 Cayarad	2	3 Total	4
1.	Claims unpaid (less \$0 reinsurance ceded)	Covered 63 185 888	Uncovered 5 310 935	Total 68 496 823	Total 47 468 598
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses				
4.	Aggregate health policy reserves, including the liability of	,,,			
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	1,397,127	0	1,397,127	1,198,696
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued	1,382,155	0	1,382,155	842,456
10.1	9 1 7	005 004	0	005 004	0
10.0	(including \$				0
10.2	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				0
13.	Remittances and items not allocated				
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	7,749,606	0	7,749,606	923,850
16.	Derivatives				0
17.	Payable for securities			0	67,437
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties (with \$0				
	authorized reinsurers, \$0 unauthorized				
	reinsurers and \$	0	0	0	0
20.	Reinsurance in unauthorized and certified (\$0)	0	0	0	0
04	companies Net adjustments in assets and liabilities due to foreign exchange rates				
21. 22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$			22, 170,007	
20.	current)	178,578	0	178,578	196,990
24.	Total liabilities (Lines 1 to 23)				
25.	Aggregate write-ins for special surplus funds				
26.	Common capital stock	XXX	XXX	1,000	1,000
27.	Preferred capital stock				0
28.	Gross paid in and contributed surplus				85,015,056
29.	Surplus notes				0
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	6, 121, 123	(12,405,437)
32.	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26	2004	2004		2
	\$	XXX	XXX	0	0
	\$0 shares preferred (value included in Line 27	VVV	VVV	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				72,610,619
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	253,689,045	134,884,671
	DETAILS OF WRITE-INS				,,
2301.	Miscellaneous Payable	143.806	0	143.806	167,506
2302.	Unclaimed Property		0		29,484
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)	178,578	0	178,578	196,990
2501.		xxx	XXX		
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.					
3002.					
3003.	Common of complaints with inc fact inc 20 from conflourness				
3098.	Summary of remaining write-ins for Line 30 from overflow page			0	0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	U	0

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31	
		1 Uncovered	2 Total	3 Total	4 Total	
1.	Member Months				296,735	
2.	Net premium income (including \$0 non-health					
	premium income)	XXX	469,988,400	277,801,234	366,033,280	
3.	Change in unearned premium reserves and reserve for rate credits	XXX	0	0	0	
	Fee-for-service (net of \$0 medical expenses)				0	
	Risk revenue				0	
	Aggregate write-ins for other health care related revenues				0	
	Aggregate write-ins for other non-health revenues					
8.	Total revenues (Lines 2 to 7)	XXX	469,988,400	277,801,234	366,033,280	
	Hospital and Medical:					
	Hospital/medical benefits					
	Other professional services					
	Outside referrals				0	
	Emergency room and out-of-area		' '	, ,	9,106,011	
	Prescription drugs					
	Aggregate write-ins for other hospital and medicallncentive pool, withhold adjustments and bonus amounts				0	
					2, 127, 584	
	Subtotal (Lines 9 to 15)	აა,იია, 116	310,136,398	245,091,103	325,944,153	
	Less: Net reinsurance recoveries	_	0		0	
	Net reinsurance recoveries			245,691,103		
	Non-health claims (net)			, ,	025,944,100	
	Claims adjustment expenses, including \$36,205,223 cost					
20.	containment expenses	0	37 988 016	9 458 338	12 848 634	
21.	General administrative expenses		37,956,250			
	Increase in reserves for life and accident and health contracts				33, 132,233	
	(including \$0 increase in reserves for life only).	0	0	0	(19.131.000)	
23.	Total underwriting deductions (Lines 18 through 22)				350,143,996	
	Net underwriting gain or (loss) (Lines 8 minus 23)				15,889,284	
	Net investment income earned				2,534,206	
26.	Net realized capital gains (losses) less capital gains tax of					
	\$(26,452)					
27.	Net investment gains (losses) (Lines 25 plus 26)	0	5,635,962	1,370,464	2,505,112	
28.	Net gain or (loss) from agents' or premium balances charged off [(amount					
	recovered \$0)					
	(amount charged off \$0)]			0	0	
29.	Aggregate write-ins for other income or expenses	0	3	7	10	
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	VVV	28 921 502	3 057 632	18 304 406	
31.	Federal and foreign income taxes incurred				(457,648)	
	Net income (loss) (Lines 30 minus 31)	XXX	22,767,370	2,331,119	18,852,054	
	DETAILS OF WRITE-INS	7000	22,707,070	2,001,110	10,002,004	
0601.	SETALE OF WATE-ING	YYY				
0603.						
	Summary of remaining write-ins for Line 6 from overflow page			_	0	
	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0	
0701.	rotals (Lines 0001 timough 0000 plus 0000)(Line o above)			_		
0702.						
0702.						
,						
	Summary of remaining write-ins for Line 7 from overflow page		0		٥٥	
	, , , , ,		,	0	0	
1401.						
1402.						
1403	O					
	Summary of remaining write-ins for Line 14 from overflow page		0	0	0	
	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0	
	Miscellaneous Income		3	7	10	
2902.						
2903						
	Summary of remaining write-ins for Line 29 from overflow page			0	0	
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	3	7	10	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	1	2	3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	72,610,619	47,260,294	47,260,294
34.	Net income or (loss) from Line 32	22,767,370	2,331,119	18,852,054
35.	Change in valuation basis of aggregate policy and claim reserves	0	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	55,856	(185,323)	(150,403)
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax	0	0	(4.178.191)
39.	Change in nonadmitted assets			
40	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
	Change in surplus notes			0
42.	Cumulative effect of changes in accounting principles			
43.				U
44.	Capital Changes:			
	44.1 Paid in			0
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus	0	0	0
45.	Surplus adjustments:			
	45.1 Paid in	0	10,000,000	10,000,000
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital	0	0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus		0	0
48.	Net change in capital & surplus (Lines 34 to 47)		12,743,453	25,350,325
49.	Capital and surplus end of reporting period (Line 33 plus 48)	91, 137, 179	60,003,747	72,610,619
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	CASH FLOW			
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	526,788,391	306,812,663	365,728,452
2.	Net investment income	5,811,862	1,249,596	2,368,452
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	532,600,253	308,062,260	368,096,904
5.	Benefit and loss related payments	358,936,362	247,608,429	325,671,787
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	60,630,726	17,493,597	38,498,590
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$(36,365) tax on capital gains (losses)	4,727,736	(519,494)	(110,941)
10.	Total (Lines 5 through 9)	424,294,824	264,582,532	364,059,436
11.	Net cash from operations (Line 4 minus Line 10)	108,305,430	43.479.728	4,037,469
11.	Net cash from operations (Line 4 minus Line 10)	100,303,430	43,479,720	4,037,409
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	, ,	, ,	, ,
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	65,000	67,437
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	11,750,043	5,766,555	6,877,673
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	22,986,363	42,979,661	44,033,337
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	67,437	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	23,053,800	42,979,661	44,033,337
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(11,303,757)	(37,213,106)	(37, 155, 664)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	10,000,000	10,000,000
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	4,562,644	(11,697,424)	(9,195,434)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	4,562,644	(1,697,424)	804,566
	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).	101 564 317	A 560 100	(32 313 830)
18.		101,004,017		(02,313,029)
19.	Cash, cash equivalents and short-term investments: 19.1 Beginning of year	52 644 902	84 0±0 433	84 0E0 455
	19.1 beginning or year	154,209,120	89,527,629	52,644,803

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

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &	nensive	4	5	6	7	8	9	10	11	12	13	14
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
1. Prior Year	24,291	0	0	0	0	0	0	24,291	0	0	0	0	0	
2. First Quarter	33,478	0 .	0	0	0	0	0	33,478	0	0	0	0	0	
Second Quarter	36,901	0 .	0	0	0	0	0	36,901	0	0	0	0	0	
4. Third Quarter	39,915	0 .	0	0	0	0	0	39,915	0	0	0	0	0	
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	
Current Year Member Months	319,833	0	0	0	0	0	0	319,833	0	0	0	0	0	
Total Member Ambulatory Encounters for Period:														
7 Physician	750 , 131	0	0	0	0	0	0	750 , 131	0	0	0	0	0	
8. Non-Physician	432,662	0	0	0	0	0	0	432,662	0	0	0	0	0	
9. Total	1,182,793	0	0	0	0	0	0	1,182,793	0	0	0	0	0	
10. Hospital Patient Days Incurred	91,533	0	0	0	0	0	0	91,533	0	0	0	0	0	
11. Number of Inpatient Admissions	9,112	0	0	0	0	0	0	9,112	0	0	0	0	0	
12. Health Premiums Written (a)	469,988,400	0	0	0	0	0	0	469,988,400	0	0	0	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	469,988,400	0	0	0	0	0	0	469,988,400	0	0	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	358,892,767	(6,640).	0	0	0	0	0	358,899,407	0	0	0	0	0	
18. Amount Incurred for Provision of Health Care Services	370,758,598	(2,671)	0	0	0	0	0	370,761,268	0	0	0	0	0	

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

299999 Aggregate accounts not individually listed-uncovered 77,666 113,943 3,87 43 24,21 849,780 19999 Aggregate accounts not individually listed-covered 77,666 113,943 3,87 43 24,21 849,780 19999 Subtolas 5,443,911 876,535 25,811 290 1962,240 5,667,786 19999 Polytopted claims and other claim reserves 5,549999 Total amounts withheld 5,687,898 5,99999 Total amounts withheld 5,687,89999 Total amounts withheld 5,848,888,888,888,888,888,888,888,888,88	Aging Analysis of Unpaid Claims										
	1	2	3	4	•	6	7				
299999 Aggregate accounts not individually listed-uncovered 77,666 113,943 3,87 43 24,21 849,780 19999 Aggregate accounts not individually listed-covered 77,666 113,943 3,87 43 24,21 849,780 19999 Subtolas 5,443,911 876,535 25,811 290 1962,240 5,667,786 19999 Polytopted claims and other claim reserves 5,549999 Total amounts withheld 5,687,898 5,99999 Total amounts withheld 5,687,89999 Total amounts withheld 5,848,888,888,888,888,888,888,888,888,88	Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total				
299999 Aggregate accounts not individually listed-uncovered 77,666 113,943 3,87 43 24,21 849,780 19999 Aggregate accounts not individually listed-covered 77,666 113,943 3,87 43 24,21 849,780 19999 Subtolas 5,443,911 876,535 25,811 290 1962,240 5,667,786 19999 Polytopted claims and other claim reserves 5,549999 Total amounts withheld 5,687,898 5,99999 Total amounts withheld 5,687,89999 Total amounts withheld 5,848,888,888,888,888,888,888,888,888,88	Claims Unpaid (Reported)										
0399999 Aggregate accounts not individually listed-covered 4,736,245 762,593 25,811 290 162,240 5,687,178 0499999 Subtotals 5,443,911 876,535 29,668 333 186,481 6,536,928 0599999 Unreported claims and other claim reserves 61,959,985 0699999 Total amounts withheld 0 0799999 Total claims unpaid 68,496,823											
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0399999 Aggregate accounts not individually listed-covered 4,736,245 762,593 25,811 290 162,240 5,687,178 0499999 Subtotals 5,443,911 876,535 29,668 333 186,481 6,536,928 0599999 Unreported claims and other claim reserves 61,959,985 0699999 Total amounts withheld 0 0799999 Total claims unpaid 68,496,823	0299999 Aggregate accounts not individually listed-uncovered	707,666	113,943	3,857	43	24,241	849,750				
0499999 Subtotals 5,443,911 876,535 29,668 333 186,481 6,536,928 059999 Unreported claims and other claim reserves 61,959,895 069999 Total amounts withheld 6799999 Total claims unpaid 68,496,823	0399999 Aggregate accounts not individually listed-covered	4,736,245	762,593	25,811	290	162,240	5,687,178				
0599999 Unreported claims and other claim reserves 61,959,895 0699999 Total amounts withheld 0 0799999 Total claims unpaid 68,496,823	049999 Subtotals	5,443,911	876,535	29,668	333	186,481	6,536,928				
0799999 Total claims unpaid 68,496,823	0599999 Unreported claims and other claim reserves						61,959,895				
0799999 Total claims unpaid 68,496,823	0699999 Total amounts withheld						0				
	0799999 Total claims unpaid						68,496,823				
	0899999 Accrued medical incentive pool and bonus amounts						3,324,473				

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR	Claim	ıs Paid	Liab		5	6
	Year t	to Date	End of Curr	ent Quarter		
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
Comprehensive (hospital and medical) individual	(6,640)	0	0	0	(6,640)	0
2. Comprehensive (hospital and medical) group			0	0	0	0
3. Medicare Supplement					0	0
4. Dental Only					0	0
5. Vision Only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare	15,639,445	340,259,428	7,350,056	61,146,767	22,989,501	47,468,598
8 Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	15,632,805	340,259,428	7,350,056	61,146,767	22,982,861	47,468,598
14. Health care receivables (a)	(4,940)	27,209,393	0	0	(4,940)	17,335,663
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	2,601,068		0	3,324,473	2,601,068	2,618,079
17. Totals (Lines 13 - 14 + 15 + 16)	18,238,813	313,449,502	7,350,056	64,471,240	25,588,869	32,751,013

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

NOTES TO THE FINANCIAL STATEMENTS

1. <u>Summary of Significant Accounting Policies and Going Concern</u>

A. Accounting Practices

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

The Michigan Department of Insurance (the Department) recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Michigan Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SSAP) has been adopted as a component of prescribed or permitted practices by the State of Michigan. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations from the Codification currently exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SSAP and practices prescribed and permitted by the State of Michigan is shown below:

			F/S Line			
	SSAP#	F/S Page	#	 2023	_	2022
Net Income						
 Humana Medical Plan of Michigan, Inc. Michigan basis 	XXX	xxx	XXX	\$ 22,767,370	\$	18,852,054
2. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-		-
3. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-		-
4. NAIC SSAP	XXX	XXX	XXX	\$ 22,767,370	\$	18,852,054
Surplus						
5. Humana Medical Plan of Michigan, Inc. Michigan basis	XXX	XXX	XXX	\$ 91,137,179	\$	72,610,619
6. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-		-
7. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-		-
8. NAIC SSAP	XXX	XXX	XXX	\$ 91,137,179	\$	72,610,619

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2-4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value. Common stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

NOTES TO THE FINANCIAL STATEMENTS

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

- (5) Not Applicable.
- (6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) Not Applicable.
- (8) Not Applicable.
- (9) Not Applicable.
- (10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

(12) The Company has not modified its capitalization policy from the prior period.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straightline method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax basis of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.

- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.
- (14) Not Applicable.
- (15) Not Applicable.
- D. Going Concern

Management of the Company has evaluated the Company's ability to continue as a going concern under SSAP No. 1, *Accounting Policies, Risks & Uncertainties, and Other Disclosures* (SSAP No. 1). Based on this evaluation, Management has determined that there is no substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

Not Applicable.

- 3. <u>Business Combinations and Goodwill</u>
 - A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

NOTES TO THE FINANCIAL STATEMENTS

D. Impairment Loss

Not Applicable.

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

Not Applicable.

4. <u>Discontinued Operations</u>

Not Applicable.

5. <u>Investments</u>

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

- D. Loan-Backed Securities
 - Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from industry market sources.
 - (2) Not Applicable.
 - (3) Not Applicable.
 - (4) The Company does not have any investments in an other-than-temporary impairment position at September 30, 2023.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at September 30, 2023:

(a) The aggregate amount of unrealized losses:

 1. Less than Twelve Months
 \$ (825,109)

 2. Twelve Months or Longer
 \$ (3,537,248)

 $(b) \quad \text{The aggregate related fair value of securities with unrealized losses:} \\$

Less than Twelve Months
 Twelve Months or Longer
 13,828,558
 22,227,848

- (5) Unrealized losses are primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) The Company has no repurchase agreements or securities lending transactions.
 - (2) The Company has not pledged any of its assets as collateral.
 - (3-7) 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

NOTES TO THE FINANCIAL STATEMENTS

J. Real Estate

Not Applicable.

K. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

- L. Restricted Assets
 - (1) Restricted Assets (Including Pledged)

	1	2	3	4	ļ	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	,	Current ear mitted	Total Current Year Admitted Restricted (1 minus 4)	Percentage Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Percentage 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 to sale –								
excluding FHLB								
capital stock	_	_		_	_	_	_	_
i. FHLB capital								
stock	-	-		-	-	-	-	-
 On deposit with states 	1,472,986	1,478,012	(5,	026)	-	1,472,986	0.54%	0.58%
k. On deposit with other								
regulatory bodies	-	-		-	-	-	-	-
Pledged 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	\$ 1,472,986	\$ 1,478,012	\$ (5,	026)	-	\$ 1,472,986	0.54%	0.58%

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

(3) Detail of Other Restricted Assets Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

(4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Not Applicable.

M. Working Capital Finance Investments

Not Applicable.

N. Offsetting and Netting of Assets and Liabilities

Not Applicable.

O. 5GI* Securities

Not Applicable.

P. Short Sales

Not Applicable.

Q. Prepayment Penalty and Acceleration Fees

NOTES TO THE FINANCIAL STATEMENTS

R. Share of Cash Pool by Asset Type

Not Applicable.

6. <u>Joint Ventures, Partnerships and Limited Liability Companies</u>

- A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.
- B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

Investment Income

A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.

B. The total amount excluded was \$0.

8. <u>Derivative Instruments</u>

Not Applicable.

9. Income Taxes

The Inflation Reduction Act (Act) was enacted on August 16, 2022 and included a new corporate alternative minimum tax (CAMT). The Act and the CAMT go into effect for tax years beginning after 2022. The Company has not determined as of September 30, 2023 if it will incur a CAMT liability in 2023. The quarterly financial statements do not include an estimated impact of the CAMT, because a reasonable estimate cannot be made. The Company has determined it will be an applicable corporation for 2023 as the average adjusted financial statement income for Humana Inc. and Subsidiaries exceeds the thresholds.

No material change since year-end December 31, 2022.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-B. The Company has several management contracts with Humana Inc. and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2022 and 2021 were \$28,522,356 and \$26,075,489, respectively. As a part of this agreement, Humana Inc. makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana Inc. not be able to fulfill its obligations.

The Company has various related party agreements with no material change since year-end December 31, 2022.

No dividends or returns of capital were paid by the Company as of September 30, 2023.

C. (1) Detail of Material Related Party Transactions

Not Applicable.

(2) Detail of Material Related Party Transactions Involving Services

Not Applicable.

(3) Detail of Material Related Party Transactions Exchange of Assets and Liabilities

Not Applicable.

(4) Detail of Amounts Owed To/From a Related Party

- D. At September 30, 2023, the Company reported \$7,749,606 due to Humana Inc. Amounts due to or from parent are generally settled within 90 days.
- E. Not Applicable.
- F. The Company has a parental guarantee with Humana Inc. in accordance with certain regulatory requirements.
- G. All outstanding shares of the Company are owned by the Parent Company.
- H. Not Applicable.
- Not Applicable.
- J. Not Applicable.
- K. Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

	L.	Not Applicable.
	M.	All SCA Investments
		Not Applicable.
	N.	Investment in Insurance SCA
		Not Applicable.
	O.	SCA Loss Tracking
		Not Applicable.
11.	Deb	<u>ot</u>
	A.	Debt Including Capital Notes
		The Company has no debentures outstanding.
		The Company has no capital notes outstanding.
		The Company does not have any reverse repurchase agreements.
	B.	Federal Home Loan Bank (FHLB) Agreements
		The Company does not have any FHLB agreements.
12.		irement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretiremer lefit Plans
	AI	D. Defined Benefit Plans
		Not Applicable.
	E.	Defined Contribution Plans
		Not Applicable.
	F.	Multiemployer Plans
		Not Applicable.
	G.	Consolidated/Holding Company Plans
		No material change since year-end December 31, 2022.
	H.	Postemployment Benefits and Compensated Absences
		Not Applicable.
	I.	Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
		Not Applicable.
13.	Cap	sital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations
	A.	The Company has \$1.00 par value common stock with 1,000 shares authorized and 1,000 shares issued and 1,000 outstanding. All shares are common stock shares.
	B.	The Company has no preferred stock outstanding.
	CI	E. No material change since year-end December 31, 2022.
	F.	There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
	G.	Not Applicable.
	H.	Not Applicable.
	I.	Not Applicable.
	J.	The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$55,856
	K.	Not Applicable.
	L.	Not Applicable.
	M.	Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

14. <u>Liabilities, Contingencies and Assessments</u>

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

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

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of September 30, 2023.

15. Leases

Not Applicable.

 Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no investment in Financial Instruments with Off-Balance Sheet Risk or Concentrations of Credit Risk.

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

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Not Applicable.

C. Wash Sales

Not Applicable.

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

A. ASO Plans

Not Applicable.

B. ASC Plans

Not Applicable.

- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract
 - (1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of its Medicare or other similarly structured cost based reimbursement contracts.
 - (2) As of September 30, 2023, the Company has recorded a receivable from CMS of \$172,140 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any receivables greater than 10% of the Company's accounts receivable from uninsured accident and health plans or \$10,000.
 - (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or other similarly structured cost based reimbursement contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.
 - (4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

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

NOTES TO THE FINANCIAL STATEMENTS

20. Fair Value Measurements

A. (1) The fair value of financial assets at September 30, 2023 were as follows:

	Level 1		Level 2		Level 3		Value (NAV)		Total	
a. Assets at fair value										
Bonds										
U.S. governments	\$		-	\$	-	\$ -	\$	-	\$	-
Tax-exempt municipal			-		-	-		-		-
Residential mortgage and										
other-backed			-		-	-		-		-
Corporate debt securities			-		732,757	-		-		732,757
Total bonds			-		732,757	-		-		732,757
Total assets at fair value/NAV	\$		-	\$	732,757	\$ -	\$	-	\$	732,757
b. Liabilities at fair value	\$		-	\$	-	\$ -	\$	-	\$	
Total liabilities at fair value	\$		-	\$	-	\$ -	\$	-	\$	_

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2022 and September 30, 2023.

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Not Applicable.

- (3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2022 and September 30, 2023.
- (4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities 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 benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended September 30, 2023.
- (5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

Type of Financial													Net A	Asset		Not Practic	able	
	Instrument	ent Aggregate Fair Value		Admitted Assets Level 1		Level 1	Level 2		Level 3			Value (NAV)		(Carrying Value)		alue)		
	Bonds and cash																	
	equivalents	\$	217,591,364	\$	223,945,537	\$	153,968,112	\$	63,623,252	\$		-	\$	-	5	5	-	

D. Financial Instruments for which Not Practicable to Estimate Fair Values

NOTES TO THE FINANCIAL STATEMENTS

21. Other Items

A. Extraordinary Items

The emergence and spread of the novel coronavirus, or COVID-19, beginning in the first quarter of 2020 has impacted the Company's business. During periods of increased incidences of COVID-19, there was a reduction in non-COVID-19 hospital admissions and lower overall healthcare system consumption that decreased utilization. Likewise COVID-19 treatment and testing costs increased utilization. During 2022, the Company experienced lower overall utilization of the healthcare system than anticipated, as the reduction in COVID-19 utilization following the increased incidence associated with the Omicron variant outpaced the increase in non-COVID-19 utilization. The significant disruption in utilization during 2020 also impacted the Company's ability to implement clinical initiatives to manage health care costs and chronic conditions of its members, and appropriately document their risk profiles, and, as such, affecting 2021 revenue under the risk adjustment payment model for Medicare Advantage plans. Finally, changes in utilization patterns and actions taken in 2021 as a result of the COVID-19 pandemic, including the suspension of certain financial recovery programs for a period of time and shifting the timing of claim payments and provider capitation surplus payments, impacted claim reserve development and operating cash flows for 2021.

The COVID-19 National Emergency declared in 2020 was terminated on April 10, 2023 and the Public Health Emergency expired on May 11, 2023.

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures and Unusual Items

Not Applicable.

D. Business Interruption Insurance Recoveries

Not Applicable.

E. State Transferable and Non-transferable Tax Credits

Not Applicable.

- F. Subprime Mortgage Related Risk Exposure
 - (1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management's practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.
 - (2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

- (3) Direct exposure through other investments:
 - a. Residential mortgage backed securities No substantial exposure noted.
 - b. Commercial mortgage backed securities No substantial exposure noted.
 - c. Collateralized debt obligations No substantial exposure noted.
 - d. Structured securities No substantial exposure noted.
 - e. Equity investment in SCAs No substantial exposure noted.
 - f. Other assets No substantial exposure noted.
 - g. Total No substantial exposure noted.
- (4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

The Company does not have sub-prime mortgage risk.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

G. Retained Assets

Not Applicable.

H. Insurance Linked Securities

Not Applicable.

22. Events Subsequent

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through November 6, 2023 for the Statutory Statement issued on November 6, 2023.

NOTES TO THE FINANCIAL STATEMENTS

23. Reinsurance

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 10.0 percent 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 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes() No(X)

Section 2 - Ceded Reinsurance Report - Part A

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

Yes() No(X)

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

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.
- B. The Company records accrued retrospective premium as an adjustment to earned premiums.
- C. The amount of net premiums written by the Company at September 30, 2023 that are subject to retrospective rating features was \$469,988,400, or 100.00% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act

Not Applicable.

E. Risk Sharing Provisions of the Affordable Care Act

NOTES TO THE FINANCIAL STATEMENTS

25. Change in Incurred Claims and Claim Adjustment Expenses

Benefits and loss adjustment expenses payable, net of health care receivables, as of December 31, 2022, were \$33,032,815. As of September 30, 2023, \$18,480,780 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$7,389,891 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$7,162,144 favorable prior-year development since December 31, 2022. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$7,167,887 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

26. Intercompany Pooling Arrangements

Not Applicable.

27. Structured Settlements

The Company has no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate 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 181 Days after Billing		
12/31/2023	\$ -	\$ -	\$ -	\$ -	\$ -		
9/30/2023	16,233,181	16,233,181	-	-	-		
6/30/2023	14,798,868	14,581,269	14,328,726	-	-		
3/31/2023	11,716,224	11,920,713	11,718,108	116,208	-		
12/31/2022	8,007,352	7,258,343	7,258,343	-	-		
9/30/2022	8,328,149	7,701,902	7,666,766	-	35,136		
6/30/2022	9,559,015	9,005,749	8,907,978	-	97,772		
3/31/2022	9,973,768	7,812,223	6,695,505	63,786	1,052,933		
12/31/2021	7,892,622	7,712,748	7,703,240	-	9,508		
9/30/2021	8,038,802	7,952,796	7,817,118	99,261	36,418		
6/30/2021	9,397,706	9,311,696	9,256,196	-	55,500		
3/31/2021	7,203,951	7,100,164	7,084,995	-	15,169		

B. Risk Sharing Receivables

Not Applicable.

29. Participating Policies

The Company has no participating policies.

30. <u>Premium Deficiency Reserves</u>

Not Applicable.

31. Anticipated Salvage and Subrogation

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requirin Domicile, as required by the Model Act?					Yes [] No	[X]			
1.2	If yes, has the report been filed with the domiciliary state?					Yes [] No	[]			
2.1		Yes [] No	[X]							
2.2	If yes, date of change:				<u> </u>						
3.1	Is the reporting entity a member of an Insurance Holding Company S is an insurer?		Yes [X] No	[]						
3.2	Have there been any substantial changes in the organizational chart	since the prior quarter end?				Yes [] No	[X]			
3.3											
3.4		Yes [X] No	[]							
3.5	3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.										
4.1		Yes [] No	[X]							
4.2	If yes, provide the name of the entity, NAIC Company Code, and stat ceased to exist as a result of the merger or consolidation.	e of domicile (use two letter state abbreviation) for a	ny entity	that has							
	1 Name of Entity		3 Domicile								
	Not Applicable.										
5.	If the reporting entity is subject to a management agreement, includin-fact, or similar agreement, have there been any significant change if yes, attach an explanation.				Yes [] No [Х]	N/A [
6.1	6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.										
6.2	State the as of date that the latest financial examination report becardate should be the date of the examined balance sheet and not the date of the examined balance					12/	31/202	20			
6.3	State as of what date the latest financial examination report became the reporting entity. This is the release date or completion date of the date).	e examination report and not the date of the examina	tion (bal	ance she	eet	04/	25/202	22			
6.4	By what department or departments? Michigan Department of Insurance										
6.5	Have all financial statement adjustments within the latest financial extatement filed with Departments?				Yes [X] No []	N/A [
6.6	Have all of the recommendations within the latest financial examinat	ion report been complied with?			Yes [X] No []	N/A [
7.1	Has this reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?					Yes [] No	[X]			
7.2	If yes, give full information:										
8.1	Is the company a subsidiary of a bank holding company regulated by					Yes [] No	[X]			
8.2	If response to 8.1 is yes, please identify the name of the bank holding										
8.3	Is the company affiliated with one or more banks, thrifts or securities					Yes [] No	[X]			
8.4	If response to 8.3 is yes, please provide below the names and locatic regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commis	e Office of the Comptroller of the Currency (OCC), the	he Feder	al Depos							
	1	2	3	4	5	6					
	Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC					

GENERAL INTERROGATORIES

5.1	similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional	Yes [X] No []
	relationships; (b) Full fair populate timely and understandable displayure in the periodic reports required to be filed by the reporting entity:	
	(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.	
9.11	If the response to 9.1 is No, please explain:	
9.2	Has the code of ethics for senior managers been amended?	Yes [X] No []
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).	
	Ethics Every Day was amended in June 2023 to update content based on operational changes, clarify content where necessary and perform general document maintenance.	
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [] No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).	
	FINANCIAL	
10.1		
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$	0
	INVESTMENT	
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)	Yes [] No [X]
11.2	If yes, give full and complete information relating thereto:	ies [] NO [X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	0
13.	Amount of real estate and mortgages held in short-term investments:	
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?	Yes [] No [X]
14.2	If yes, please complete the following:	
	1 Prior Year-End	2 Current Quarter
	Book/Adjusted	Book/Adjusted
	Carrying Value	Carrying Value
	Bonds	\$0
	Preferred Stock	\$0
	Common Stock \$0	\$0
	Short-Term Investments \$ 0 Mortgage Loans on Real Estate \$ 0	\$0
	All Other \$ 0	\$0 \$0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$0
	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?	Yes [] No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?] No [] N/A []
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date:	
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	
	16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$0
	16.3 Total navable for securities lending reported on the liability nage	4 ()

GENERAL INTERROGATORIES

For all agreements the	I Functions, Custod	or trust company in accordance ial or Safekeeping Agreements of equirements of the NAIC Finance	e with Section of the NAIC Fi	1, III - General nancial Conditio	Examination C on Examiners F	landbook?	Yes	[X] No [
	1							
JP Morgan Chase	Name of Custo	dian(s)		ess e: NY1-C512, Brooklyn,				
For all agreements the location and a comple		h the requirements of the NAIC	Financial Con	dition Examine	rs Handbook, p	rovide the name,		
1 Name	(s)	2 Location(s)		(3 Complete Expla	nation(s)		
Have there been any If yes, give full information		name changes, in the custodian	(s) identified ir	17.1 during the	e current quarte	er?	Yes	[] No [X
1 Old Custo	odian	2 New Custodian	Date	3 of Change		4 Reason		
make investment dec	isions on behalf of t ccess to the investn	estment advisors, investment m he reporting entity. For assets th nent accounts"; "handle secur	nat are manage rities"]	ed internally by	uding individuals	s that have the authority t ne reporting entity, note a	o Is	
BLACKROCK FINANCIAL	Name of Firm of MANAGEMENT, INC	or Individual	2 Affilia U	ition				
17.5097 For those firr	ns/individuals listed	in the table for Question 17.5, d nore than 10% of the reporting e	do any firms/ind	dividuals unaffil			Yes	[X] No [
17.5098 For firms/ind total assets ເ	ividuals unaffiliated under management	with the reporting entity (i.e. des aggregate to more than 50% of	signated with a the reporting e	"U") listed in the	e table for Que	stion 17.5, does the	Yes	[X] No [
For those firms or ind table below.	ividuals listed in the	table for 17.5 with an affiliation	code of "A" (at	filiated) or "U" ((unaffiliated), pr	ovide the information for	the	
1		2			3	4		5
Central Registration		Name of Firm or Individual						Investment Management
	DI VCKDOCK ETNIVICI			Logal Entity	dontifier (LEI)	Pagiatarad With		Agreement
		AL MANAGEMENT, INC		549300LVXY1VJ		Registered With		Agreement (IMA) Filed
Have all the filing required in the street i	uirements of the Pur	AL MANAGEMENT, INCposes and Procedures Manual	of the NAIC In	/estment Analy	KE13M84sis Office been	followed?		Agreement (IMA) Filed
Have all the filing required in the filing re	uirements of the Pur GI securities, the rep in necessary to perm available. or is current on all co is an actual expectal	AL MANAGEMENT, INC	of the NAIC In owing element curity does not payments. ontracted intere	zestment Analy s for each self- exist or an NAl	sis Office been designated 5GI C CRP credit ra	followed?security:	Yes	Agreement (IMA) Filed DS
Have all the filing required in the filing re	direments of the Pur direments of the Pur directions and the Pur dir	poses and Procedures Manual of the second procedures and Procedures Manual of the second procedure and principal pri	of the NAIC In owing element curity does not payments. ontracted interes ollowing eleme c Designation r by an NAIC Cl or examination e PL security w	restment Analy restment Analy restment Analy restment Analy rest and self- rest and principa rest and	sis Office been designated 5GI C CRP credit ra designated PL security. apacity as a NF nce regulators.	followed?security: ating for an FE or PL GI security:	Yes	Agreement (IMA) Filed DS
Have all the filing required from the filing required from the filing required from the filing required from the filing from t	uirements of the Pur uirements of the Pur GI securities, the rep n necessary to perm available. or is current on all co s an actual expectal ty self-designated 5 LGI securities, the re is purchased prior to nitly is holding capit gnation was derived vate letter rating hel nitly is not permitted ty self-designated P	poses and Procedures Manual of the post of the second procedures and principal procedures and principal pr	of the NAIC In owing element curity does not payments. ontracted intere- collowing eleme c Designation r by an NAIC Cl or examination c PL security w	restment Analy	sis Office been designated 5GI C CRP credit ra designated PL security. apacity as a NF nce regulators.	followed?security: ating for an FE or PL GI security:	Yes	Agreement (IMA) Filed DS
By self-designating 50 a. Documentation security is not b. Issuer or obligo c. The insurer has the reporting end. The reporting e. The NAIC Design on a current prid. The reporting end the reporting end the reporting end. The security was been a current prid. The reporting end a the reporting end to the	Lirements of the Pur Lirements	poses and Procedures Manual of the second procedures of the second procedures and principal prin	of the NAIC In owing element curity does not payments. ontracted interes collowing eleme collowing eleme collowing nainteres collowing eleme collowing element collowin	vestment Analy vestment Analy s for each self- exist or an NAI est and principa nts of each self- eported for the RP in its legal of by state insura ith the SVO. rtifying the follo	sis Office been designated 5GI C CRP credit ra designated PL security. apacity as a NF nce regulators. wing elements security. s legal capacity	followed? security: sating for an FE or PL GI security: RSRO which is shown of each self-designated	Yes	Agreement (IMA) Filed DS

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages: 1.3 A&H expense percent excluding cost containment expenses 8.5 % Yes [] No [X] 2.1 Do you act as a custodian for health savings accounts? 2.2 Yes [] No [X] Do you act as an administrator for health savings accounts? 2.3 2.4 Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No [] 3.

Yes [] No []

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of

3.1

domicile of the reporting entity? ...

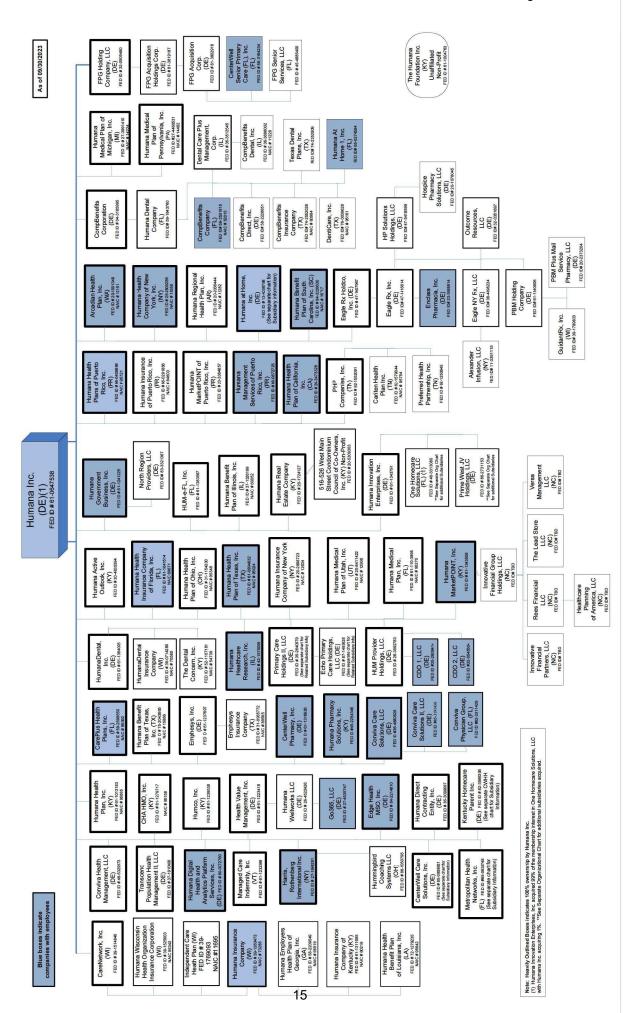
SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date											
NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5	6 Type of Reinsurance	7 Type of	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating		
		-									
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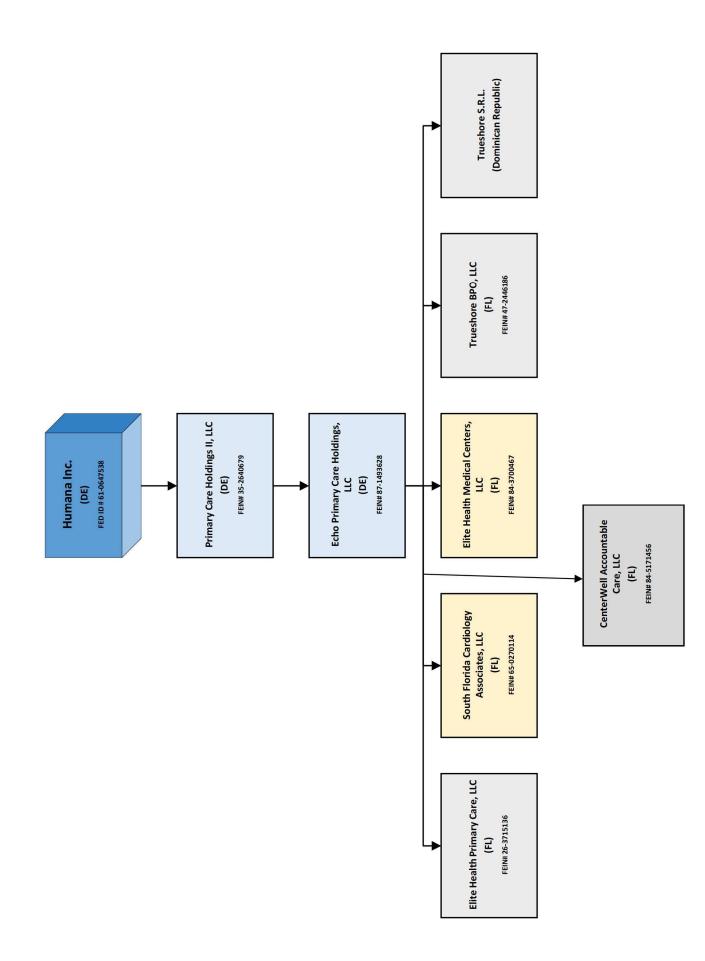
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories 10 Federal Life and Annuity Premiums & Other Employees Health Accident and Health Total Columns 2 Active Renefite CHIP Title Program Deposit-Type Premiums States, etc. (a) Title XVIII Title XIX XXI Premiums sideration Premiums Through 8 Contracts .0 .0 .0 ..0 .0 .0 ..0 ΑL .0 Alaska 3. Arizona ΑZ .0 .0 .0 .0 . 0 .0 .0 .0 0 4. Arkansas AR .N. n n n n n .0 n ٥ 0 5. California CA .N. .0 .0 .0 .0 .0 .0 .0 .0 0 Colorado0 6. CO .N... .0 .0 .0 .0 .0 .0 .0 0 Connecticut СТ .0 .0 .0 .0 .N. .0 .0 .0 .0 .0 DE .0 .0 .0 .0 .0 .0 .0 0 9. District of Columbia DC .0 .0 .0 .0 .0 .0 .0 .0 0 10. Florida N 0 0 0 0 0 .0 0 0 0 11. Georgia GΑ N 0 0 0 0 0 0 0 0 0 12. Hawaii н N 0 0 0 0 0 0 0 0 0 13. Idaho .. .0 .0 ID .N... .0 .0 .0 .0 .0 .0 .0 14. Illinois0 .0 .0 .0 .0 .0 .0 .0 .0 IL .N. 15. IN .0 .0 .0 .0 .0 .0 .0 16. .0 .0 .0 .0 .0 .0 .0 .0 0 17. Kansas KS .0 .0 .0 .0 .0 .0 .0 .0 0 18 Kentucky .. ΚY N n n 0 n n 0 n ٥ 0 19. Louisiana LA N. .0 .0 .0 . 0 .0 .0 .0 .0 0 20. Maine .. .0 .0 ME .N.. .0 .0 .0 .0 .0 .0 .0 21. Maryland0 .0 .0 .0 .0 .0 .0 .0 .0 MD .N. 22. Massachusetts0 .0 .0 .0 .0 .0 .0 MA .0 .N. 23. Michigan .0 .469,988,400 .0 469,988,400 0 .0 0 24. Minnesota MN .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 .0 .0 .0 .0 .N. .0 .0 .0 .0 .0 29 NV .0 .0 .0 .0 .0 .0 .0 .0 0 30. New Hampshire NH .N. .0 .0 .0 .0 .0 .0 .0 .0 0 31. New Jersey .. 0 .0 0 .0 0 .0 .0 .0 0 32 New Mexico NM N ٥ ٥ ٥ ٥ ٥ ٥ Λ ٥ ٥ 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 .0 .0 .0 .0 .0 .0 .0 .0 .0 .N. 36. .0 .0 .0 .0 .0 .0 .0 .0 .0 ОН 37. Oklahoma 0 38 Oregon ... OR .0 .0 .0 .0 . 0 .0 .0 .0 0 39 Pennsylvania PΑ .N. n n 0 n n 0 n ٥ 0 40. Rhode Island RI .N. .0 .0 .0 .0 .0 .0 .0 .0 .0 41. South Carolina0 .0 SC .N.. .0 .0 .0 .0 .0 .0 .0 South Dakota 42. SD .0 .0 .0 .0 .N. .0 .0 .0 .0 .0 43. .0 .0 .0 .0 .0 .0 .0 0 ΤN 44. .0 .0 .0 0 ΤX .0 .0 .0 .0 .0 45. Utah . UT N 0 0 0 0 0 .0 0 0 0 46. Vermont ... VT N 0 0 0 0 0 0 0 0 0 47. Virginia VA N 0 0 0 0 0 0 0 0 0 48. Washington WA .0 0 .N... .0 .0 .0 .0 .0 .0 .0 West Virginia WV 49. .0 .0 .0 .0 .0 .0 .0 .0 .0 .N. 50 WI .0 .0 .0 .0 .0 .0 .0 0 51. .0 .0 .0 .0 .0 .0 .0 .0 0 Wyoming .. .N. 52. American Samoa AS .0 .0 .0 .0 .0 .0 .0 .0 0 53 Guam GU N n n 0 n 0 0 n ٥ 0 Puerto Rico 54. PR N. .0 .0 .0 . 0 .0 .0 .0 .0 0 U.S. Virgin Islands .. VI 55. ..N... .0 .0 .0 .0 .0 .0 .0 .0 .0 Northern Mariana 56. MP .0 .0 .0 Islands .. .N. .0 .0 .0 .0 .0 0 57. Canada CAN .0 ..0 .0 .0 .0 .0 .0 .0 .0 ..N... 58. Aggregate Other . OT XXX .0 . 0 . 0 . 0 .0 0 .0 .0 59. Subtotal . .XXX. .0 .469,988,400 .0 .0 .0 .469,988,400 .0 .0 Reporting Entity
Contributions for Employe 60. Benefit Plans XXX . 0 . 0 .0 0 469,988,400 469,988,400 61 Totals (Direct Business) XXX 0 0 0 0 0 0 DETAILS OF WRITE-INS 58001 XXX. .0 .0 .0 .0 .0 ..0 .0 ..0 .0 58002 XXX 58003. XXX. 58998 Summary of remaining write-ins for Line 58 from overflow page Totals (Lines 58001 through XXX n . 0 . 0 . 0 . 0 .0 .0 .0 0 58999. 58003 plus 58998)(Line 58 0 n 0 0 0 0 0 ٥ 0

above)	7001	Ū	U	•	- U	Ü	Ū	Ü	Ü		
(a) Active Status Counts:										-	
1. L - Licensed or Chartered - L	censed insur	ance carrier or	domiciled RR0	Э	2 4. Q - C	Qualified - Qua	lified or accred	ited reinsurer			. 0
2. R - Registered - Non-domicile	ed RRGs				0 5. N - N	None of the abo	ove - Not allow	ed to write bus	iness in the sta	ate	55
3 E Eligible Poporting optition	c aligible or a	approved to writ	o curplue linos	in the state	0						

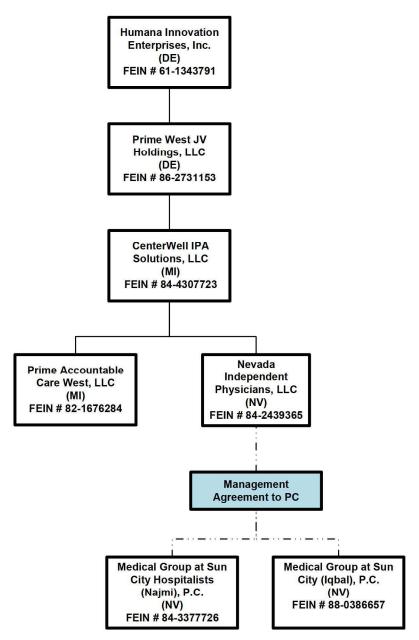


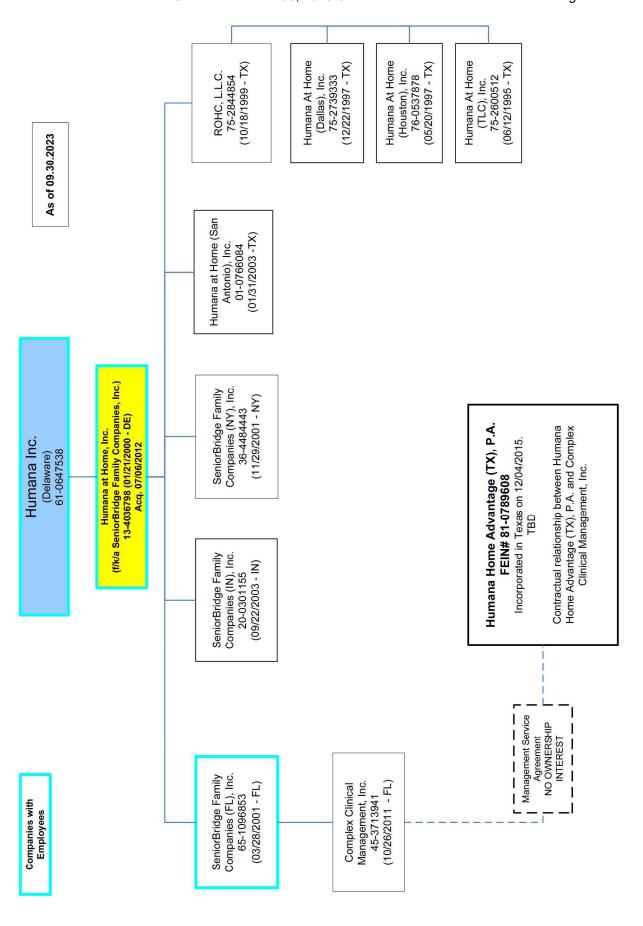
Echo Primary Care Holdings Organization Chart

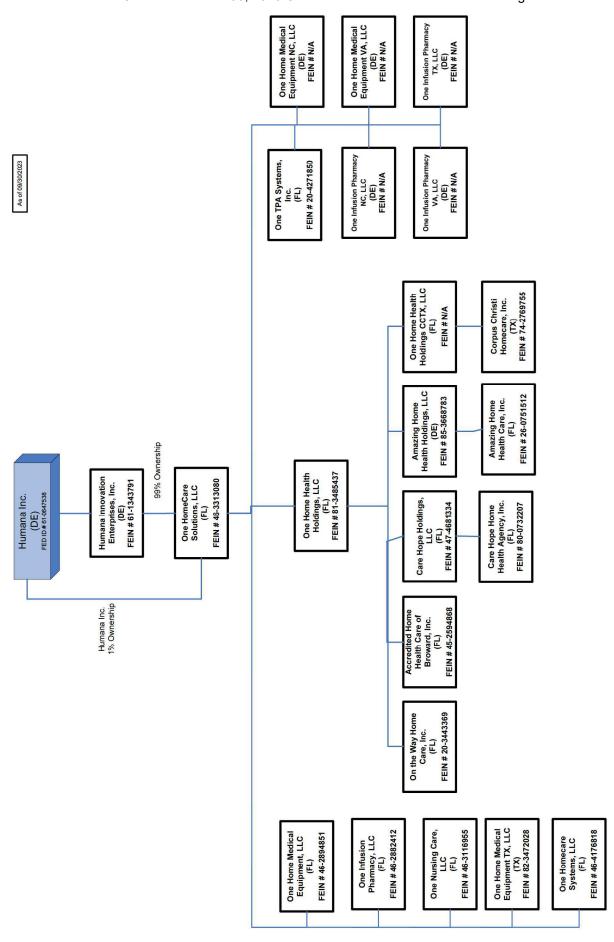


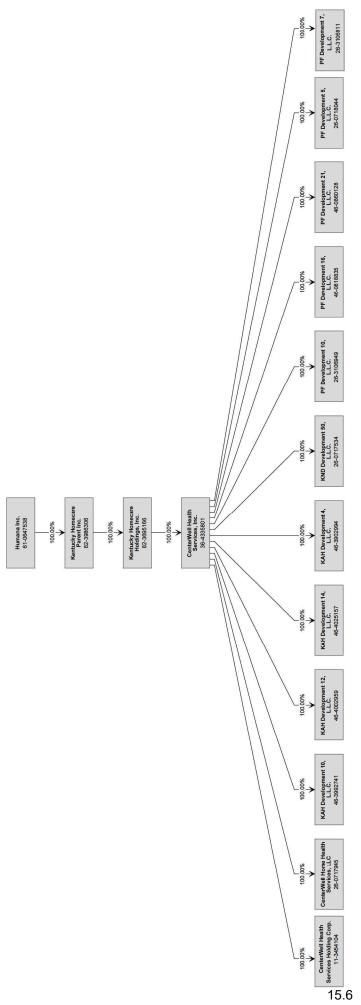
Prime West Organizational Chart

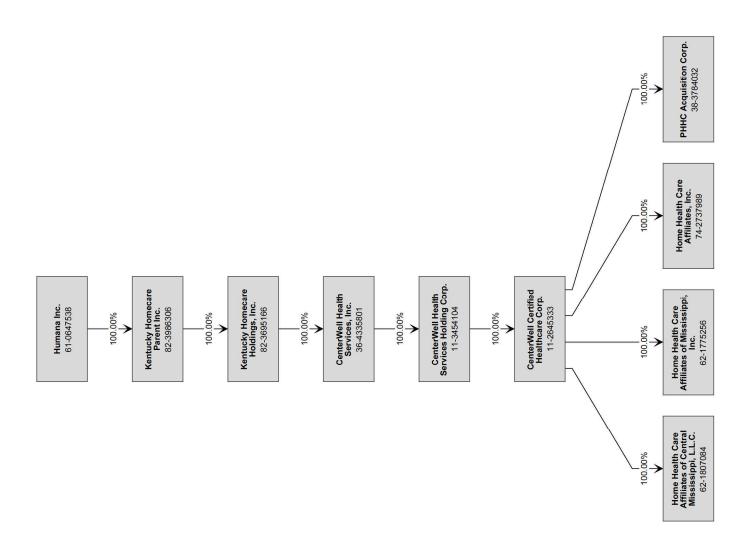
As of 09/30/2023

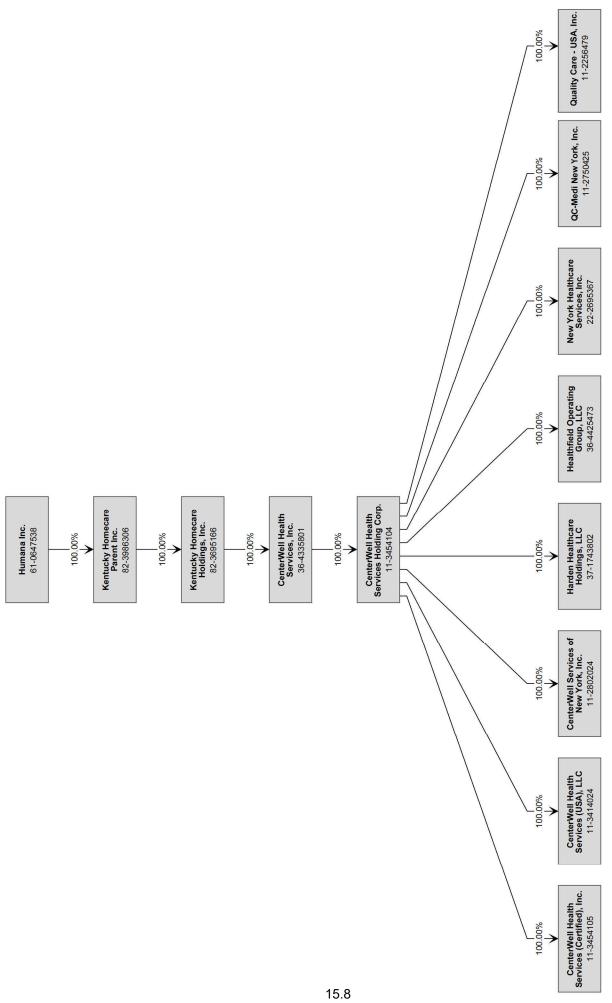


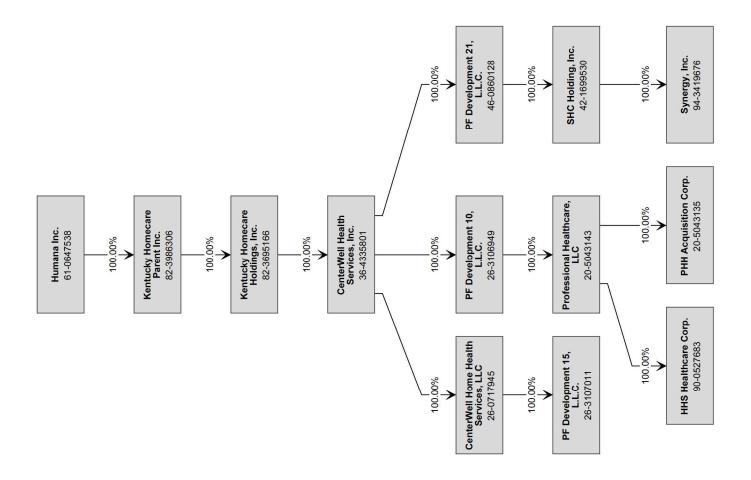


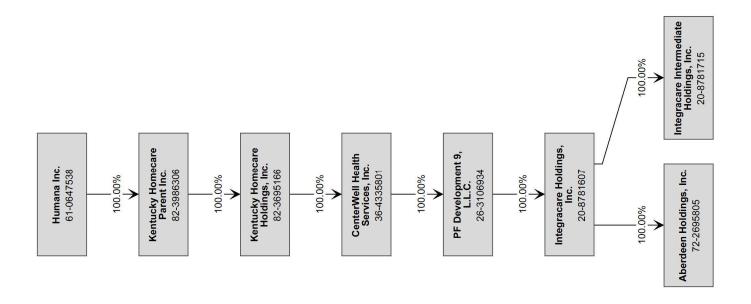


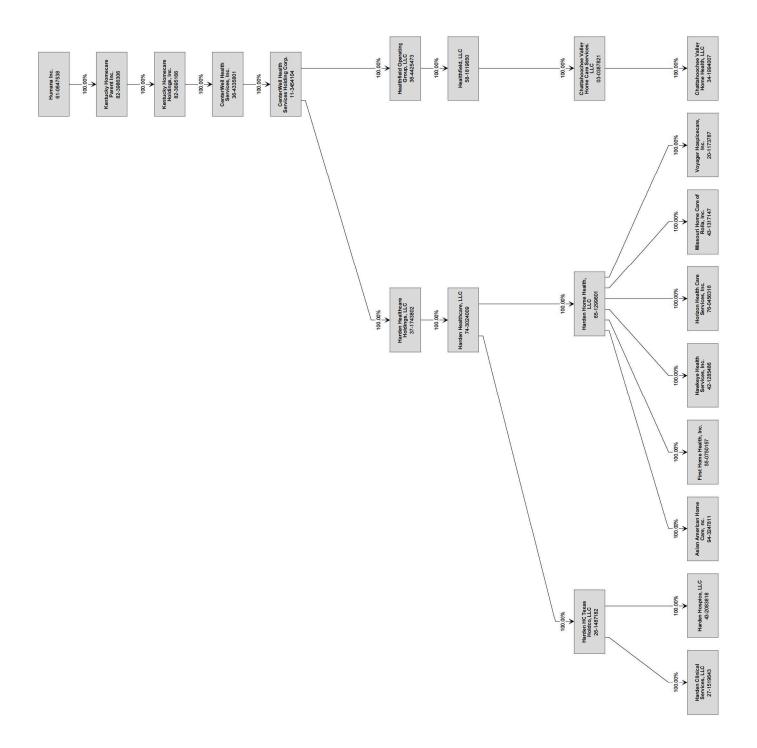


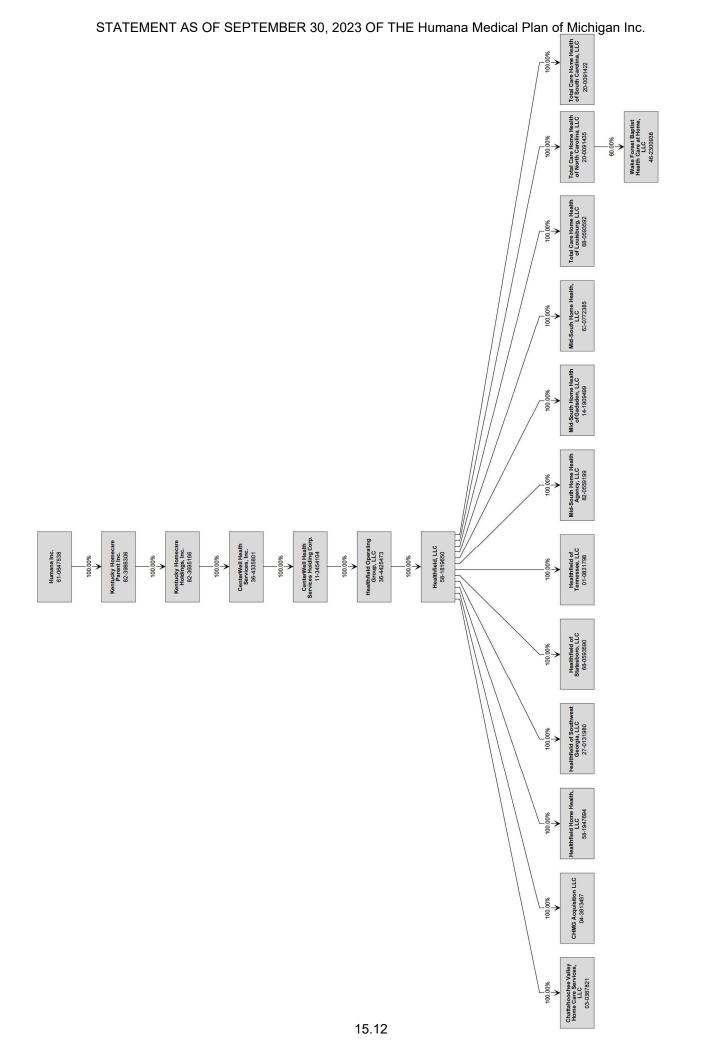


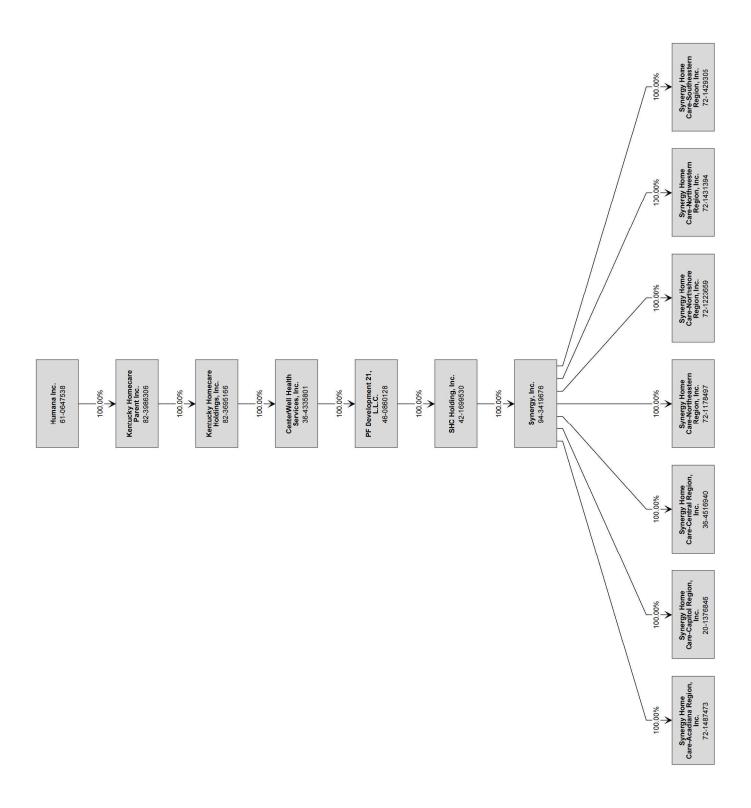


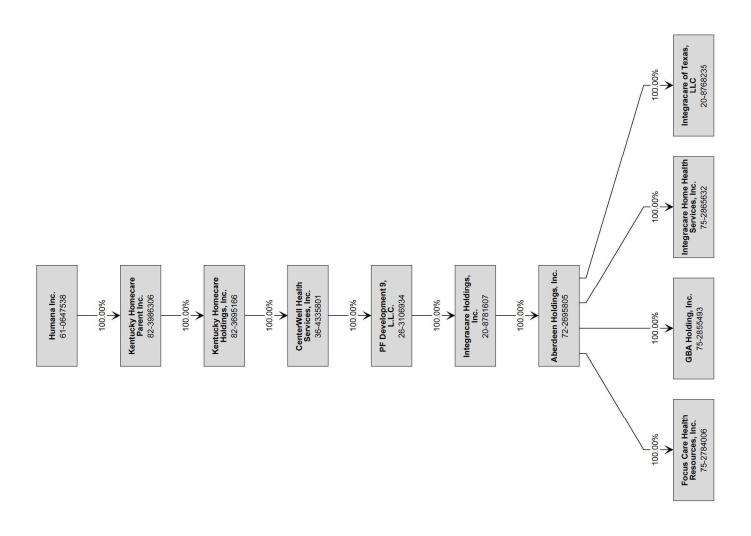


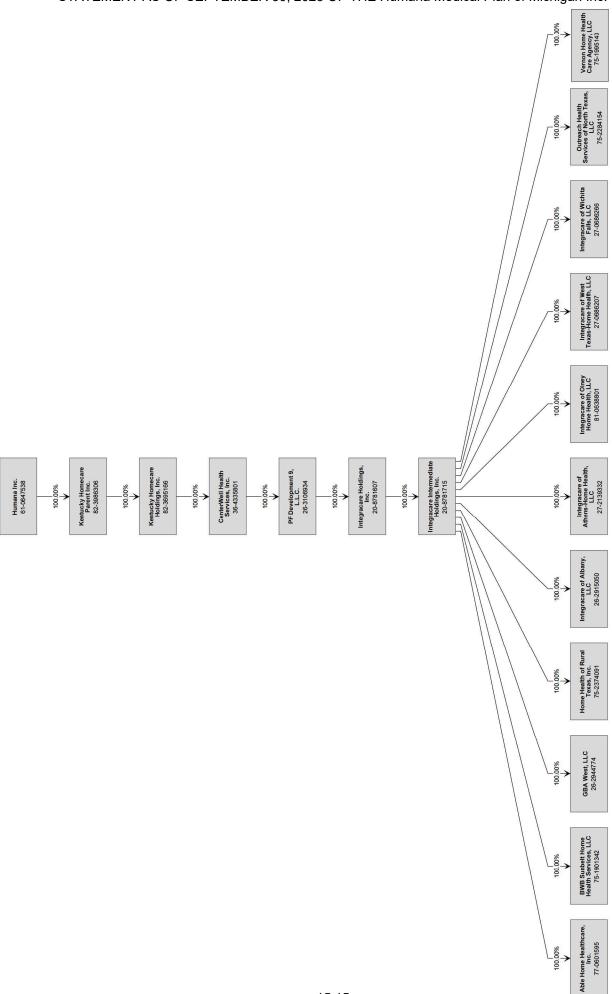


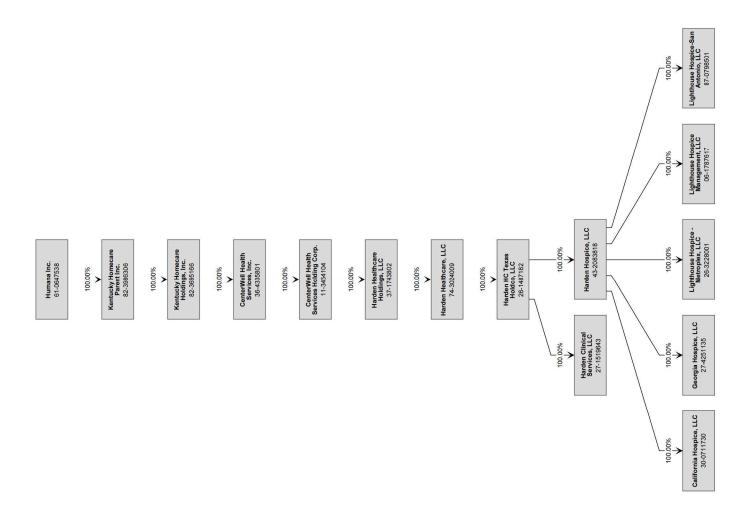


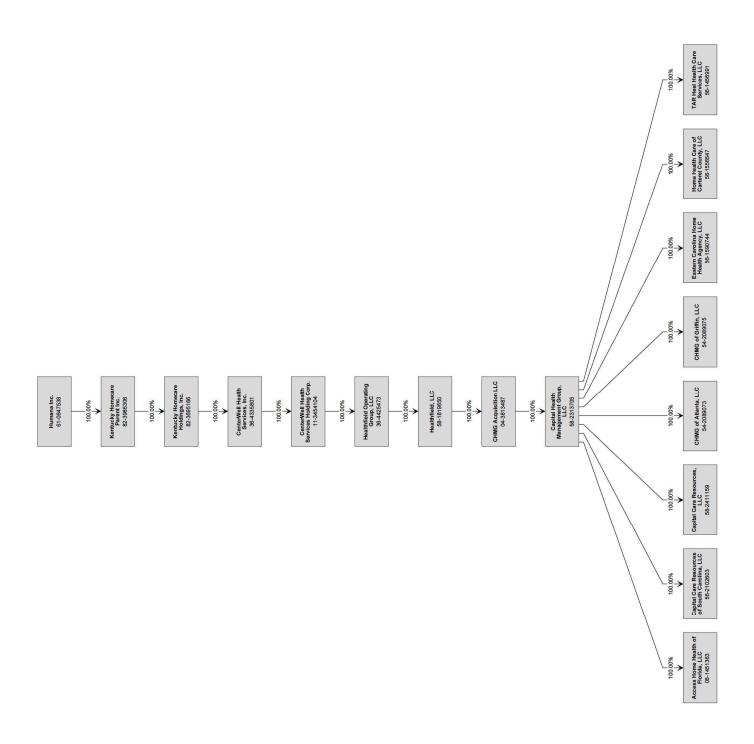


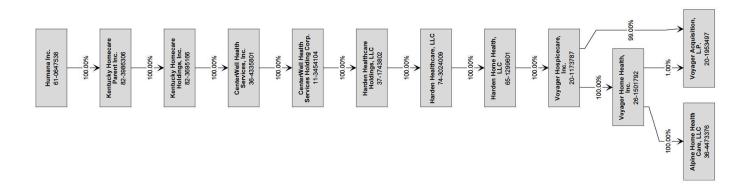


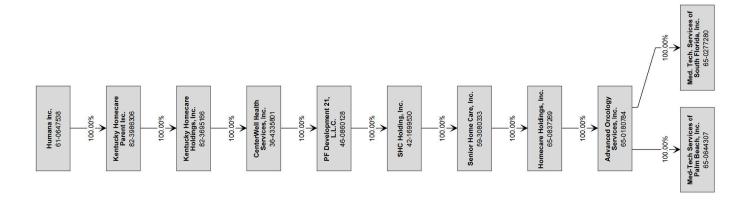












SCHEDULE Y

				FA		4 - DLIAI	L OF INSURANC		IOLL	TING CONFAINT	SISILIVI				
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						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent. Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	,
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
Oodc	Group Hame	Oode	Number	ROOD	Oil	international)	516-526 West Main Street Condomium Council of	tion	Littly	(Name of Emity/r croom)	Other)	tage	Entity(ies)/1 croon(s)	(103/110)	4
. 0119	Humana Inc.	00000	20-5309363				Co-Owners Inc	KY	NIA	Humana Real Estate Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	12151	20-1001348				Arcadian Health Plan, Inc.	WA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	39-1514846				CareNetwork Inc.	WI	NIA	Humana Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	FL	IA	Humana Inc	Ownership		Humana Inc	NO	0
. 0119	Humana Inc.	95754	62-1579044				Cariten Health Plan Inc.	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	35-2608414				CDO 1. LLC	DE	NIA	HUM Provider Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	32-0545504				CDO 2. LLC	DE	NIA	HUM Provider Holdings, LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	95158	61-1279717				CHA HMO, Inc.	KY	14	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	52015	59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	04-3185995				CompBenefits Company	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	11228	36-3686002				CompBenefits Dental. Inc.	IL	I A	Dental Care Plus Management, Corp.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	58-2228851				CompBenefits Direct. Inc.	DE	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	NO	0
. 0119		60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company	Owner Strip	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	45-3713941				Complex Clinical Management. Inc.	FL	NIA	SeniorBridge Family Companies (FL). Inc	Ownership	100.000	Humana Inc	NO	0
		00000							NIA		•	100.000			
. 0119	Humana Inc.		42-1575099 36-4880828				Humana Healthcare Research, Inc.	IL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000					Conviva Care Solutions, LLC						Humana Inc.	NO	0
. 0119	Humana Inc.	15886	75-2043865				Humana Benefit Plan of Texas, Inc.	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	36-3512545				Dental Care Plus Management, Corp	IL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	95161	76-0039628				DentiCare, Inc.	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	88595	31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	61-1237697				Emphesys, Inc.	DE	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	59-3164234				CenterWell Senior Primary Care (FL), Inc	FL	NI A	FPG Acquisition Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	81-3802918				FPG Acquisition Corp.	DE	NI A	FPG Acquisition Holdings Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	81-3819187				FPG Acquisition Holdings Corp	DE	NIA	FPG Holding Company, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	32-0505460				FPG Holding Company, LLC	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	45-4685400				FPG Senior Services, LLC	FL	NIA	FPG Acquisition Corp	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	27-1649291				Harris, Rothenberg International Inc	NY	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	61-1223418				Health Value Management, Inc	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	26-3592783				HUM Provider Holdings, LLC	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-4835394				Humana Active Outlook, Inc	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2739333				Humana At Home (Dallas), Inc	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	76-0537878				Humana At Home (Houston), Inc	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0274594				Humana At Home 1, Inc	FL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	13-4036798				Humana at Home, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	60052	37-1326199				Humana Benefit Plan of Illinois, Inc	IL	I A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	59-1843760				Humana Dental Company	FL	NIA	CompBenefits Corporation	Ownership	100.000	Humana Inc.	NO	0
1							Humana Employers Health Plan of Georgia, Inc.	1						1	
. 0119	Humana Inc.	95519	58-2209549					GA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	61-1241225				Humana Government Business, Inc	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc	NO	0
1							Humana Health Benefit Plan of Louisiana, Inc.	1						1	
. 0119	Humana Inc.	95642	72-1279235					LA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	13558	26-2800286				Humana Health Company of New York, Inc	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
0.110	l	20274					Humana Health Insurance Company of Florida,			l	l	400.00-	l		
. 0119	Humana Inc.	69671	61-1041514				Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3473328				Humana Health Plan of California, Inc	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	95024	61-0994632				Humana Health Plan of Texas, Inc	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	95885	61-1013183				Humana Health Plan, Inc	KY	IA	Humana Inc	Ownership	100.000	Humana Inc	NO	0

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						Name of Securities			Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	1
		NAIC	ID	F11		if Publicly Traded	Names of	ciliary	to	Dina athe O anton Hald here	Attorney-in-Fact,	Provide	I IIti	Re-	, '
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	(U.S. or International)	Parent, Subsidiaries Or Affiliates	Loca- tion	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Influence, Other)	Percen-	Ultimate Controlling Entity(ies)/Person(s)	quired? (Yes/No)	
. 0119	Humana Inc	95721	66-0406896	ROOD	CIK	international)	Humana Health Plans of Puerto Rico. Inc	PR	Littly	Humana Inc	Ownership	tage 100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	61-0647538		0000049071	NYSE	Humana Inc.	DE	UDP	See Footnote 1	Other	0.000	See Footnote 1	NO	2
. 0119	Humana Inc.	00000	61-1343791		0000043071	NIOL	Humana Innovation Enterprises. Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	73288	39–1263473				Humana Insurance Company	WI	IA	CareNetwork. Inc.	Ownership.	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	84603	66-0291866				Humana Insurance of Puerto Rico, Inc	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc	PR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	61-1343508				Humana MarketPOINT, Inc.	KY	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	14224	27-3991410				Humana Medical Plan of Michigan, Inc	MI	RE	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc	PA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	12908	20-8411422				Humana Medical Plan of Utah, Inc.	UT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	l l
. 0119	Humana Inc Humana Inc.	95270	61-1103898 45-2254346				Humana Medical Plan, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	45-2254346 61-1316926				Humana Pharmacy Solutions, Inc.	NY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	12282	20-2036444				Humana Regional Health Plan. Inc.	AR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0110	Tuliana in C		1022120				Humana Wisconsin Health Organization			That the targe management, The	omici omp		Thumana Tho		1
. 0119	Humana Inc	95342	39-1525003				Insurance Corporation	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	61-1364005				HumanaDental, Inc.	DE	NI A	Humana Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	27-4535747				Go365, LLC	DE	NI A	HumanaWellworks LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	61-1239538				Humco, Inc.	KY	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	86-1050795				Hummingbird Coaching Systems LLC	0H	NIA	Harris, Rothenberg International Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc Humana Inc.	11695	39-1769093 61-1232669				Independent Care Health Plan	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc	NO	0 0
. 0119	Humana Inc	00000	20-5569675				Conviva Group Holdings, LLC	VI	NIA	Metropolitan Health Networks. Inc	Ownership	100.000	Humana Inc.		
. 0119	Humana Inc.	00000	20-5904436				Conviva Medical Center Management, LLC	DE	NIA	Conviva Group Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	81-2957926				Conviva Speciality, LLC	FL	NIA	Conviva Group Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0879131				METCARE of Florida. Inc.	FL	NIA	Conviva Group Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	62-1552091				PHP Companies, Inc.	TN	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	62-1250945				Preferred Health Partnership, Inc	TN	NI A	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-1724127				Humana Real Estate Company	KY	NI A	Humana Inc.	Ownership	100.000	Humana Inc		0
. 0119	Humana Inc.	00000	46-1225873				Conviva Health MSO of Texas, Inc	DE	NI A	Conviva Group Holdings, LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	75-2844854				ROHC, L.L.C.	TX	NI A	Humana at Home, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-1096853				SeniorBridge Family Companies (FL), Inc	FL	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-0301155				SeniorBridge Family Companies (IN), Inc	IN	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	36-4484443 01-0766084				SeniorBridge Family Companies (NY), Inc	NY	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc Humana Inc.	00000	01-0766084 74-2352809				Humana At Home (San Antonio), Inc Texas Dental Plans. Inc	IX	NIA	Humana at Home, Inc	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	54739	52-1157181				The Dental Concern. Inc.	KY	IA	HumanaDental Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2600512				Humana At Home (TLC), Inc.	TX	NIA	ROHC. L.L.C.	Ownership	100.000	Humana Inc.	NO	0
			2000012				Humana Digital Health and Analytics Platform			, ב.ב.יי					
. 0119	Humana Inc	00000	80-0072760				Services, Inc.	DE	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	46-5329373				Conviva Health Management, LLC	DE	NI A	Conviva Group Holdings, LLC	Ownership	100.000	Humana Inc	NO	0
	l						Humana Management Services of Puerto Rico,			l		40	l., .		1 . '
. 0119	Humana Inc.	00000	66-0872725				Inc	PR	NI A	Humana Inc.	Ownership	100.000	Humana Inc	NO	0

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						Exchange		Domi-	ship		Management,	ship		Filing	
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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	auired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	
. 0119	Humana Inc.	00000	83-3321367			, , , , , , , , , , , , , , , , , , ,	North Region Providers, LLC	DE	NIA	Humana Government Business. Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	35-2640679				Primary Care Holdings II, LLC	DE	NIA	Humana Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	37-1910409				LLC	DE	NIA	Humana Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	84-2214810				Edge Health MSO, Inc.	DE	NIA	Humana Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	84-3226630				Humana Benefit Plan of South Carolina, Inc.	SC	IA	Humana Inc	Ownership	100.000	Humana Inc		0
. 0119	Humana Inc	00000	11-3391115				Alexander Infusion, LLC	NY	NIA	Eagle NY Rx, LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	36-4898224				Eagle NY Rx, LLC	DE	NI A	Eagle Rx, Inc.	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	47-1407967				Eagle Rx Holdco, Inc	DE	NI A	Humana Inc	Ownership	100.000	Humana Inc		0
. 0119	Humana Inc	00000	47-1416614				Eagle Rx, Inc.	DE	NI A	Eagle Rx Holdco, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	23-3068914				Enclara Pharmacia, Inc	DE	NI A	Eagle Rx, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	39-1789830				GuidantRx, Inc.	WI	NI A	PBM Holding Company	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	61-1340806				PBM Holding Company	DE	NI A	Eagle Rx, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	20-2373204				PBM Plus Mail Service Pharmacy, LLC	DE	NIA	PBM Holding Company	Ownership		Humana Inc	NO	0
. 0119	Humana Inc.	00000	85-3191430				Conviva Care Solutions II, LLC	DE	NI A	Conviva Care Solutions, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	85-3099097				Humana Direct Contracting Entity, Inc	DE	NI A	Humana Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	85-0858631	l			CenterWell Care Solutions, LLC	DE	NI A	Humana Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-1493628	l			Echo Primary Care Holdings, LLC	DE	NI A	Primary Care Holdings II. LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	45-2594868				Accredited Home Health of Broward, Inc	FL	NI A	One Home Health Holdings, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	26-0751512				Amazing Home Health Care, Inc.	FL	NI A	Amazing Home Health Holdings, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	85-3668783				Amazing Home Health Holdings, LLC	DE	NI A	One Home Health Holdings, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	47-4681334				Care Hope Holdings, Inc.	FL	NIA	One Home Health Holdings, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	80-0732207				Care Hope Home Health Agency, Inc.	FL	NI A	Care Hope Holdings, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	74-2769755				Corpus Christi Home Care, Inc.	TX	NIA	One Home Health Holdings CCTX, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	20-3443369				On the Way Home Care, Inc.	FL	NIA	One Home Health Holdings, LLC	Ownership.		Humana Inc.		0
. 0119	Humana Inc.	00000	81-3485437			•••••	One Home Health Holdings, LLC	FL	NIA	One Homecare Solutions, LLC	Ownership		Humana Inc.		
. 0119	Humana Inc	00000	82-2018741			•••••	One Home Health Holdings CCTX. LLC	TX	NIA	One Home Health Holdings, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	46-2894851				One Home Medical Equipment, LLC	FL	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	82-3472028			•••••	One Home Medical Equipment TX, LLC	TX	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	46-3116955				One Nursing Care. LLC	FL	NIA	One Homecare Solutions, LLC	Ownership		Humana Inc.		0
. 0110	namana IIIO.	00000					one marsting vare, LLV			Humana Innovation Enterprises. Inc 99%	omioi sirip		Franking 1110.		1
. 0119	Humana Inc.	00000	46-3313080	l			One Homecare Solutions, LLC	FL	NIA	Humana Inc 1%	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	46-4176818				One Homecare Systems. LLC	FL	NI A	One Homecare Solutions, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	46-2882412				One Infusion Pharmacy, LLC	FL	NI A	One Homecare Solutions, LLC	Ownership.		Humana Inc.		
. 0119	Humana Inc.	00000	20-4271850				One TPA Systems, Inc.	FL	NI A	One Homecare Solutions, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	83-2136817				Pharaoh JV. LLC	DE	NI A	Primary Care Holdings II, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	72-2695805				Aberdeen Holdings, Inc.	TX	NIA	Integracare Holdings, Inc.	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	77-0601595				Able Home Healthcare, Inc.	TX	NIA	Integracare Intermediate Holdings, Inc	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	06-1451363				Access Home Health of Florida, LLC	DE	NIA	Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	65-0180784				Advanced Oncology Services, Inc.	FL	NIA	Homecare Holdings. Inc.	Owner ship		Humana Inc.		0
. 0119	Humana Inc	00000	36-4473376				Alpine Home Health Care. LLC	FL	NIA	Voyager Home Health, Inc.	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	11-3306095				American Homecare Management Corp.	DE	NIA	Missouri Home Care of Rolla, Inc.	Ownership	100.000	Humana Inc.		0
-		00000						CA	NIA		Ownership				
. 0119	Humana Inc.		94-3247811				Asian American Home Care, Inc.			Harden Home Health, LLC			Humana Inc.		0
. 0119	Humana Inc.	00000	75-1901342				BWB Sunbelt Home Health Services, LLC	TX	NIA	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	30-0711730				California Hospice, LLC	TX	NIA	Harden Hospice, LLC	Ownership	100.000	Humana Inc.	NO	0
0440		00000	50 0400000				Capital Care Resources of South Carolina, LLC	1		0 14 1 11 111 11		400 000	l		1
. 0119	Humana Inc.	00000	56-2102603					GA	NIA	Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc	00000	58-2411159				Capital Care Resources, LLC	GA	NI A	Capital Health Management Group, LLC	Ownership	100.000	Humana Inc	NO	0

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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
. 0119	Humana Inc.	00000	58-2313705				Capital Health Management Group, LLC	GA	NIA	CHMG Acquisition LLC	Ownership	100.000	Humana Inc	NO	0
							Chattahoochee Valley Home Care Services, LLC							ļ	
. 0119	Humana Inc.	00000	03-0387821					GA	NI A	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	0
0110	Illumina Inc	00000	34-1994007				Chadden was Nathan Hama Haaldh 11.0	GA	NIA	Chattahoochee Valley Home Care Services, LLC	Ownership	100.000	Humana Inc.	NO	_
. 0119	Humana Inc.	00000					Chattahoochee Valley Home Health, LLC	GA	NIA		Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	04-3813487 54-2089073				CHMG Acquisition LLC	GA	NIA	Healthfield, LLC Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	54-2089073 54-2089075				CHMG of Griffin, LLC	GA	NIA		Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	56-1590744				Eastern Carolina Home Health Agency, LLC	NC	NIA	Capital Health Management Group, LLC Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	55-0750157				First Home Health, Inc.	WV	NIA	Harden Home Health, LLC	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	75-2784006				Focus Care Health Resources. Inc.	TX	NIA	Aberdeen Holdings, Inc.	Ownership	100.000	Humana Inc.	NO]0
. 0119	Humana Inc.	00000	75-2784006 75-2855493				GBA Holding, Inc.	TX	NIA	Aberdeen Holdings, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-2944774				GBA West, LLC	TX	NIA	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	11-2645333				CenterWell Certified Healthcare Corp.	DE	NIA	CenterWell Health Services Holding Corp	Ownership		Humana Inc.	NO	
. 0119	numana mc.	00000	11-2040000				CenterWell Health Services (Certified). Inc.	DE	NIA	centerment hearth services hording corp	owner strip	100.000	nullaria iiic.	NO	0
. 0119	Humana Inc.	00000	11-3454105				denterment hearth dervices (dertiffed), flic.	DE	NIA	CenterWell Health Services Holding Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	11-3414024				CenterWell Health Services (USA) LLC	DE	NIA	CenterWell Health Services Holding Corp	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	11-3454104				CenterWell Health Services Holding Corp	DE	NIA	CenterWell Health Services, Inc	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	36-4335801				CenterWell Health Services, Inc.	DE	NIA	Kentucky Homecare Holdings, Inc.	Ownership	100.000	Humana Inc.		
. 0119	Humana Inc.	00000	11-2802024				CenterWell Services of New York, Inc.	NY	NIA	CenterWell Health Services Holding Corp	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	27-4251135				Georgia Hospice, LLC	TX	NIA	Harden Hospice, LLC	Ownership.	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	64-0730826				Gilbert's Home Health Agency. Inc.	MS	NIA	Home Health Care Affiliates. Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	27-1519643				Harden Clinical Services, LLC	TX	NIA	Harden HC Texas Holdco. LLC	Ownership		Humana Inc.	NO	
. 0119	Humana Inc.	00000	26-1487182				Harden HC Texas Holdco. LLC	TX	NIA	Harden Healthcare, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	37-1743802				Harden Healthcare Holdings, LLC	DE	NIA	CenterWell Health Services Holding Corp	Ownership.		Humana Inc.		0
. 0119	Humana Inc.	00000	74-3024009				Harden Healthcare, LLC	TX	NIA	Harden Healthcare Holdings, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	65-1299601				Harden Home Health, LLC	DE	NIA	Harden Healthcare, LLC	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	43-2083818				Harden Hospice, LLC	TX	NIA	Harden HC Texas Holdco. LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	42-1285486				Hawkeye Health Services, Inc.	IA	NIA	Harden Home Health, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	58-1947694				Healthfield Home Health, LLC	GA	NIA	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	27-0131980				Healthfield of Southwest Georgia, LLC	GA	NIA	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	68-0593590				Healthfield of Statesboro, LLC	GA	NIA	Healthfield, LLC	Ownership.	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	01-0831798				Healthfield of Tennessee, LLC	GA	NI A	Healthfield, LLC	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	36-4425473				Healthfield Operating Group, LLC	DE	NI A	CenterWell Health Services Holding Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	58-1819650				Healthfield, LLC	DE	NIA	Healthfield Operating Group, LLC	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc.	00000	90-0527683				HHS Healthcare Corp.	DE	NIA	Professional Healthcare, LLC	Ownership	100.000	Humana Inc.	NO	0
					1		Home Health Care Affiliates of Central			., .			1		1
. 0119	Humana Inc.	00000	62-1807084				Mississippi, L.L.C	MS	NIA	CenterWell Certified Healthcare Corp	Ownership	100.000	Humana Inc	NO	0
							Home Health Care Affiliates of Mississippi,							ļ	
. 0119	Humana Inc.	00000	62-1775256				Inc	MS	NI A	CenterWell Certified Healthcare Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	74-2737989				Home Health Care Affiliates, Inc	MS	NI A	CenterWell Certified Healthcare Corp	Ownership		Humana Inc.		0
. 0119	Humana Inc.	00000	56-1556547				Home Health Care of Carteret County, LLC	NC	NIA	Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2374091				Home Health of Rural Texas, Inc.	TX	NIA	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-0494759				Home Health Services, Inc.	UT	NI A	HHS Healthcare Corp.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0837269				Homecare Holdings, Inc.	FL	NI A	Senior Home Care, Inc	Ownership	100.000	Humana Inc.		0
. 0119	Humana Inc.	00000	76-0456316				Horizon Health Care Services, Inc.	TX	NIA	Harden Home Health, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-8781607				Integracare Holdings, Inc	DE	NIA	PF Development 9, L.L.C.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2865632				Integracare Home Health Services, Inc	TX	NI A	Aberdeen Holdings, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-8781715				Integracare Intermediate Holdings, Inc	DE	NIA	Integracare Holdings, Inc	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	26-2915050				Integracare of Albany, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc	NO	0

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		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
. 0119	Humana Inc.	00000	27-2139332				Integracare of Athens-Home Health, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc	00000	81-0638801				Integracare of Olney Home Health, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	20-8768235				Integracare of Texas, LLC	TX	NI A	Aberdeen Holdings, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	27-0686207				Integracare of West Texas-Home Health, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc.	00000	27-0686266				Integracare of Wichita Falls, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	46-3992741				KAH Development 10, L.L.C.	DE	NI A	CenterWell Health Services, Inc	Ownership		Humana Inc.	N0	0
. 0119	Humana Inc.	00000	46-4002959				KAH Development 12, L.L.C.	DE	NI A	CenterWell Health Services, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	46-4025157				KAH Development 14, L.L.C.	DE	NI A	CenterWell Health Services, Inc	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	46-3902994				KAH Development 4, L.L.C.	DE	NI A	CenterWell Health Services, Inc	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc	00000	82-3695166				Kentucky Homecare Holdings, Inc	DE	NI A	Kentucky Homecare Parent Inc	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc.	00000	82-3986306				Kentucky Homecare Parent Inc.	DE	NI A	Humana Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-0717945				CenterWell Home Health Services, LLC	DE	NIA	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	1 1
. 0119	Humana Inc.	00000	26-0717534				KND Development 50, L.L.C.	DE	NI A	CenterWell Health Services, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3228001				Lighthouse Hospice - Metroplex, LLC	TX	NIA	Harden Hospice, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	06-1787617				Lighthouse Hospice Management, LLC	TX	NIA	Harden Hospice, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-0798501				Lighthouse Hospice-San Antonio, LLC	TX	NIA	Harden Hospice, LLC	Ownership	100.000	Humana Inc.	NO	
. 0119	Humana Inc.	00000	47-1818578				Loving Peace Hospice, Inc.	IL	NIA	Hospice Development Company 3, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0277280				Med. Tech. Services of South Florida, Inc	FL	NIA	Advanced Oncology Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-1033439				Med-Tech Services of Dade, Inc.	FL	NIA	Homecare Holdings, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0644307				Med-Tech Services of Palm Beach, Inc	FL	NIA	Advanced Oncology Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	82-0559199				Mid-South Home Health Agency, LLC	AL GA	NIA	Horizon Health Network LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.		14-1909499				Mid-South Home Health of Gadsden, LLC		NIA	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	63-0772385 65-1285069				Mid-South Home Health, LLC	DE	NIA	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	22-2695367				Missouri Home Care of Rolla, Inc.	NV	NIA	*	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	55-0633030				New York Healthcare Services, Inc	NY	NIA	CenterWell Health Services Holding Corp First Home Health. Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	22-3690699				· , .	TX	NIA	CenterWell Health Services Holding Corp	Ownership	100.000			
. 0119	numana inc.	00000	22-3090099				OHS Service Corp	۱۸	NIA	Centerwerr hearth services hording corp	owner strip	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2284154				Outreach hearth services of North Texas, LLC	TX	NI A	Integracare Intermediate Holdings, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	26-3106949				PF Development 10. L.L.C.	DE	NIA	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3107011			•••••	PF Development 15. L.L.C.	DE	NI A	CenterWell Home Health Services, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	46-0818835				PF Development 16, L.L.C.	DE	NIA	CenterWell Health Services, Inc.	Ownership		Humana Inc.	NO	
. 0119	Humana Inc.	00000	46-0860128				PF Development 21. L.L.C.	DE	NI A	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-0718044				PF Development 5. L.L.C.	DE	NI A	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3106911				PF Development 7, L.L.C.	DE	NI A	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3106934	l			PF Development 9. L.L.C.	DE	NI A	CenterWell Health Services, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	75-2378887				PHH Acquisition Corp.	DE	NI A	Professional Healthcare, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	33-1178066				PHHC Acquisition Corp.	DE	NI A	CenterWell Certified Healthcare Corp	Ownership	100.000	Humana Inc.	NO	0
										99% owned by Professional Healthcare, LLC					
. 0119	Humana Inc.	00000	20-5143963				Professional Healthcare at Home, LLC	CA	NI A	and 1% owned by PHH Acquisition Corp	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-5043143				Professional Healthcare, LLC	DE	NI A	PF Development 10, L.L.C.	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc.	00000	11-2750425				QC-Medi New York, Inc.	NY	NI A	CenterWell Health Services Holding Corp	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc.	00000	11-2256479				Quality Care - USA, Inc	NY	NI A	CenterWell Health Services Holding Corp	Ownership	100.000	Humana Inc.	N0	0
. 0119	Humana Inc.	00000	59-3080333				Senior Home Care, Inc.	FL	NI A	SHC Holding, Inc	Ownership		Humana Inc.	N0	0
. 0119	Humana Inc.	00000	42-1699530				SHC Holding, Inc.	DE	NI A	PF Development 21, L.L.C.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-0494757				Southern Nevada Home Health Care, Inc	NV	NI A	Home Health Services, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	72-1487473				Synergy Home Care-Acadiana Region, Inc	LA	NIA	Synergy, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-1376846				Synergy Home Care-Capitol Region, Inc	LA	NIA	Synergy, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	36-4516940				Synergy Home Care-Central Region, Inc	LA	NI A	Synergy, Inc.	Ownership	100.000	Humana Inc	NO	0

				FA		4 - DE I AI	L OF INSURANCE		TOLD	ING COMPANT	SISIEIVI				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
. 0119	Humana Inc.	00000	72-1178497				Synergy Home Care-Northeastern Region, Inc.	LA	NI A	Synergy, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	72-1223659				Synergy Home Care-Northshore Region, Inc	LA	NI A	Synergy, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	72-1431394				Synergy Home Care-Northwestern Region, Inc.	LA	NI A	Synergy, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	72-1429305				Synergy Home Care-Southeastern Region, Inc.	LA	NI A	Synergy, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	94-3419676				Synergy, Inc.	LA	NIA	SHC Holding, Inc.	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	56-1456991				TAR Heel Health Care Services, LLC	NC	NIA	Capital Health Management Group, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	68-0593592				Total Care Home Health of Louisburg, LLC Total Care Home Health of North Carolina, LLC	GA	NI A	Healthfield, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-0091435				lotal care home health of North Carolina, LLC	GA	NIA	Healthfield, LLC	Ownership		Humana Inc.	NO	0
. 0119	numana Inc	00000	20-0091435				Total Care Home Health of South Carolina. LLC	GA	NIA	Healthfield, LLC	Ownership		Humana Inc.	NU	0
. 0119	Humana Inc.	00000	20-0091422				Total oale nome nearth of south caloffila, LLC	GA	NIA	Healthfield. LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	62-1669388				Van Winkle Home Health Care. Inc.	MS	NIA	Home Health Care Affiliates, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	75-1995143			•••••	Vernon Home Health Care Agency, LLC	TX	NIA	Integracare Intermediate Holdings, Inc	Ownership		Humana Inc.	NO	0
. 0110	numana mo.	00000	70 1000140			•••••	Terrior Home Hearth Gare Agency, LLG	۱۸		1% by Voyager Home Health, Inc. and 99% by	Owner Strip.		numana mo	١٧٠	0
. 0119	Humana Inc.	00000	20-1953497				Voyager Acquisition, L.P.	TX	NI A	Voyager Hospicecare, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-1501792				Voyager Home Health, Inc.	DE	NI A	Voyager Hospicecare, Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	20-1173787				Voyager Hospicecare, Inc.	DE	NI A	Harden Home Health, LLC	Ownership		Humana Inc.	NO	0
										60% owned by Total Care Home Health of					
							Wake Forest Baptist Health Care at Home, LLC			North Carolina, LLC and 40% owned by Wake					
. 0119	Humana Inc.	00000	46-2300938					NC	NI A	Forest University Baptist Medical Center .	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	84-3700467				Elite Health Medical Centers, LLC	FL	NI A	Echo Primary Care Holdings, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	26-3715136				Elite Health Primary Care, LLC	FL	NI A	Echo Primary Care Holdings, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	65-0270114				South Florida Cardiology Associates, LLC	FL	NI A	Echo Primary Care Holdings, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	47-2446186				Trueshore BPO, LLC	FL	NI A	Echo Primary Care Holdings, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000					Trueshore S.R. I.	DOM	NI A	Echo Primary Care Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	74-3052911				The Home Team of Kansas LLC	MO	NI A	Harden Home Health, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	84-5171456				CenterWell Accountable Care, LLC	FL	NI A	Echo Primary Care Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-3584872				One Home Medical Equipment NC, LLC	DE	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-3611188				One Home Medical Equipment VA, LLC	DE	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-3832743				One Infusion Pharmacy NC, LLC	DE	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	87-3881471				One Infusion Pharmacy VA, LLC	DE	NIA	One Homecare Solutions, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	45-4020797				Amicus Medical Center LLC	FL	NIA	Conviva Medical Center Management, LLC	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	27-3974953 27-1085323				Amicus Medical Group, Inc.	FL	NIA	Conviva Medical Center Management, LLC Conviva Medical Center Management, LLC	Ownership		Humana Inc.	NO	0
		00000	27-1085323				Amicus Medical Services Organization, LLC	FL	NIA	9 .	Ownership			NO	0
. 0119 . 0119	Humana Inc	00000	20-1078045 47-5418599				Hospice Pharmacy Solutions, LLC	DE	NIA	HP Solutions Holdings, LLC Eagle Rx. Inc.	Ownership		Humana Inc.	NO	0
. 0119		00000	47-5418599 32-0351697				Outcome Resources, LLC	DE	NIA	Eagle Rx. Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc	00000	32-0351697 88-3465849?				Innovative Financial Group Holdings, LLC	NC	NIA	Humana MarketPOINT. Inc.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	88-3465849? 83-2232570?				Innovative Financial Group Holdings, LLC	NC	NIA	Innovative Financial Group Holdings, LLC.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	84-5189010?				Healthcare Planning of America, LLC	NC	NIA	Innovative Financial Group Holdings, LLC.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	47-4085710?				Rees Financial	NC	NIA	Innovative Financial Group Holdings, LLC . Innovative Financial Group Holdings, LLC .	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	84-2258899?				The Lead Store LLC	NC	NIA	Innovative Financial Group Holdings, LLC.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	82-4202700				Versa Management LLC	NC	NIA	Innovative Financial Group Holdings, LLC.	Ownership		Humana Inc.	NO	0
. 0119	Humana Inc.	00000	86-2731153				Prime West JV Holdings, LLC	NC	NIA	Humana Innovation Enterprises, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	84-4307723				CenterWell IPA Solutions. LLC	MI	NIA	Prime West JV Holdings, LLC	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc.	00000	82-1676284				Prime Accountable Care West	MI	NIA	CenterWell IPA Solutions, LLC	Ownership		Humana Inc.	NO	0
_	Humana Inc.	00000	84-2439365				Nevada Independent Physicians. LLC	NV	NIA	CenterWell IPA Solutions, LLC	Ownership		Humana Inc.	NO	0
	Humana Inc.	00000	03-0523544				A and A Healthcare, Inc	FL	NIA	Vitality Home Care, Inc	Ownership		Humana Inc.	NO	0
	Humana Inc.	00000	45-2401497				All About Home Care, LLC	FI	NIA	Vitality Home Care, Inc	Ownership		Humana Inc.	NO	0
. บาเช	Humana THC	00000	40-7401431				nii nuuul mume vale, LLU	ГЬ	NTA	vitality nume vale, inc	Omiret 2111h		Humand Hit	INU	∪

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
. 0119	Humana Inc.	00000	11-3836040				Altercare of Palm Beach County, LLC	FL	NI A	Vitality Home Care, Inc	Ownership	100.000	Humana Inc.	NO	0
. 0119	Humana Inc	00000	20-0110337				Altercare, LLC	FL	NI A	Vitality Home Care, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	20-7287186				Balanced Home Healthcare, Inc	FL	NI A	Vitality Home Care, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	20-1903568				Bridges Home Health Care, Inc	FL	NI A			100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	46-3433197				Medstar Home Health, LLC	FL		Trident Home Health, LLC	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	20-5123865				M-SAC, Inc.	FL	NI A	Vitality Home Care, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc		45-2823888				Quality Living Home Healthcare, LLC						Humana Inc	NO	0
. 0119	Humana Inc	00000	35-2486995				Trident Home Health, LLC	FL	NI A	Vitality Home Care, Inc	Ownership	100.000	Humana Inc	NO	0
. 0119	Humana Inc	00000	81-4466479				Trilogy Home Health Care of SW FL, Inc			Vitality Home Care, Inc				NO	0
. 0119	Humana Inc		81-3442232				Trilogy Home Healthcare of NE FL, Inc	DE		Vitality Home Care, Inc			Humana Inc	NO	0
. 0119	Humana Inc		81-2022629				Vitality HHS Holdings, Inc			CenterWell Health Services (USA), LLC	Ownership		Humana Inc	NO	0
. 0119	Humana Inc		81-2019673				Vitality Home Care, Inc						Humana Inc	NO	0
. 0119	Humana Inc	00000					One Infustion Pharmacy (TX), LLC	DE	NI A	One HomeCare Solutions, LLC	Ownership	100.000	Humana Inc	NO	0
1															

Asterisk	Explanation
0000001	Humana Inc., a Delaware corporation and ultimate parent company in the holding company system, is a publicly traded company on the New York Stock Exchange and ownership fluctuates daily.
0000001	Humana Inc., a Delaware corporation and ultimate parent company in the holding company system, is a publicly traded company on the New York Stock Exchange and ownership fluctuates daily.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	AUGUST FILING	
2.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
	Explanation:	
1.	This type of business is not written.	
	Par Codo:	

1. Medicare Part D Coverage Supplement [Document Identifier 365]

OVERFLOW PAGE FOR WRITE-INS

Addition	ial Write-ins for Assets Line 25				
			Current Statement Date)	4
		1	2	3	
				Net Admitted Assets	Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
2504.	Deposits	444,615	444,615	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	444,615	444,615	0	0

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	Mongage Loans	1	2
		'	Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in lest parallel smitmer less less less less less less less le		
9.	Total foreign exchange change in book value/recased invessment excess accrued sterest seems to the contract of		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets		_
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	58,913,903	22,006,561
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount	10,305	49,750
4.	Unrealized valuation increase (decrease)	55,856	(150,403)
5.	Total gain (loss) on disposals	(125,964)	(36,827)
6.	Deduct consideration for bonds and stocks disposed of	11,750,043	6,810,236
7.	Deduct amortization of premium	112,995	178,278
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	69 , 977 , 425	58,913,903
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	69,977,425	58,913,903

15. Total Bonds and Preferred Stock

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation Book/Adjusted Book/Adjusted Book/Adjusted Book/Adjusted Book/Adjusted Non-Trading Activity Carrying Value Carrying Value Carrying Value Carrying Value Acquisitions Dispositions Carrying Value Beginning During During During End of End of End of December 31 NAIC Designation of Current Quarter Current Quarter Current Quarter Current Quarter First Quarter Second Quarter Third Quarter Prior Year **BONDS** 1. NAIC 1 (a)134,793,572 ..680,313,654 .662,348,874 1,077,761 .143,776,340 .134,793,572 .153,836,113 83,892,706 2. NAIC 2 (a) 28.608.814 160.983.805 .157.010.000 ..337.063 . 21.872.731 . 28.608.814 32.919.683 15,487,050 ... 1,968,7836,005 (5,357) ..2,534,999 1,968,783 .. 1,957,420 .1,226,396 . 209,064 ... 1,273 4. NAIC 4 (a) 214,369 . 209,064 ..210,336 .207,796 5. NAIC 5 (a) 6. NAIC 6 (a) 0 7. Total Bonds 165,580,233 841,297,459 819,364,879 1.410.739 168.398.440 165,580,233 188,923,552 100,813,948 PREFERRED STOCK 8. NAIC 1 10. NAIC 3 11. NAIC 4 13. NAIC 6 0 0 0 0 0 14. Total Preferred Stock

841.297.459

819.364.879

168 398 440

165.580.233

188.923.552

100.813.948

1.410.739

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

165.580.233

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Ozon Equivalents)	1	2
			_
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	52,445,989	84,317,175
2.	Cost of cash equivalents acquired	3, 188, 497, 087	2,696,133,460
3.	Accrual of discount	3,084,099	840,388
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration received on disposals	3,090,059,063	2,728,842,063
7.	Deduct amortization of premium	0	2,973
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	153,968,112	52,445,989
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	153,968,112	52,445,989

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

			SHOW All L	ong-Term Bonds and Stock Acquired During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
	UNITED STATES TREASURY		07/03/2023	CITADEL SECURITIES LLC		492,657	500,000		
	UNITED STATES TREASURY		08/30/2023	BMOCM/BONDS		602,626	600,000	0	1.B FE
	ubtotal - Bonds - U.S. Governments					1,095,283	1,100,000	255	XXX
	FEDERAL HOME LOAN MORTGAGE CORPORATION -		07/06/2023	CitiGroup		724,944	747,606	1,246	
	ubtotal - Bonds - U.S. Special Revenues					724,944	747,606	1,246	XXX
	AMERICAN HONDA FINANCE CORP			CITIGROUP GLOBAL MARKETS INC.			100,000		1.G FE
19828T-AB-2	COLUMBIA PIPELINES OPERATING COMPANY LLC			BONY/TORONTO DOMINION SECURITI			95,000	0	2.A FE
	FISERV INC			WELLS FARGO SECURITIES			125,000	0	2.B FE
375558-BZ-5	GILEAD SCIENCES INC			CITIGROUP GLOBAL MARKETS INC.			35,000	0	2.A FE
502431-AQ-2	L3HARRIS TECHNOLOGIES INC			Bank of America Securities			70,000	0	2.B FE
	MARSH & MCLENNAN COMPANIES INC		09/06/2023	Bank of America Securities			100,000	0	1.G FE
	NORFOLK SOUTHERN CORP			WELLS FARGO SECURITIES		109,776	110,000	0	2.A FE
	S&P GLOBAL INC			Bank of America Securities		19,978	20,000	0	1.G FE
	THERMO FISHER SCIENTIFIC INC		08/07/2023	GOLDMAN		105,000	105,000	0	1.G FE
	ubtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					758, 126	760,000	0	XXX
2509999997. T	otal - Bonds - Part 3					2,578,353	2,607,606	1,501	XXX
2509999998. T	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. T	otal - Bonds					2,578,353	2,607,606	1,501	XXX
4509999997. T	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. T	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. T	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
	otal - Common Stocks					0	XXX	0	XXX
	otal - Preferred and Common Stocks					0	XXX	0	XXX
600999999999999						2.578.353	XXX	1.501	
- 100000000 - I						2,010,000	/VV\	1,301	////

SCHEDULE D - PART 4

					Show All Lo	ng-Term Bo	onds and Stoc	ck Sold, Red	deemed or C	Otherwise	Disposed o	of During th	ne Current Quai	rter						
1	2	3	4	5	6	7	8	9	10	CI	nange In Boo	ok/Adjusted	Carrying Value	16	17	18	19	20	21	22
										11	12	13	14 1	15						NAIC
																				Desig-
																				nation,
																				NAIC
													Total To	otal						Desig-
												Current	Change in For	eign				Bond		nation
												Year's		nange Book/				Interest/		Modifier
									Prior Year		Current	Other Than	Adjusted Char	nge in Adjuste				Stock	Stated	and
									Book/	Unrealized	Year's	Temporary	Carrying Bo	ook Carryin				Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		usted Value a	_	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-		Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-		rying Disposa			(Loss) on	During	Maturity	
ification	Description	eign		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized		alue Date	Disposal		Disposal	Year	Date	Symbol
677521-YD-2			. 08/01/2023 .	Maturity @ 100.00		10,000	10,000	11,413	10,192	0	(192)		(192)	010,			0	500	. 08/01/2023 .	. 1.B FE
	9. Subtotal - Bonds - U.S. Political Startzona St. Transn Brd Excise Tax Rev	ubdivis			ossessions	10,000	10,000	11,413	10, 192	0	(192)		(192)	0 10,			0	500	XXX	XXX
040649-MB-8 3131XX-WS-6	FH ZM4257 - RMBS		. 07/01/2023 .	Maturity @ 100.00 Pavdown	•		10,0002,468		10,166		(166)		(166)(250)		168			500	. 07/01/2023 . . 09/01/2047 .	. 1.B FE
3131AA-WS-6	FH ZT1476 - RMBS		. 09/01/2023 .	Paydown	•			37			(250)		(250)		35				. 02/01/2047 .	1.A
3132AU-19-9	FH SD0829 - RMRS		. 09/01/2023 .	Paydown	•••••	17.450		18.001		n	(4)	n	(533)	0		,	n	355	. 02/01/2048 .	. 1.A . 1.A
3132DN-E2-5	FH SD1053 - RMBS	l	. 09/01/2023 .	Paydown		4.021	4,021	4,039	4,039	n	(18)		(18)	0	-			91	. 06/01/2052 .	1
3132DN-G5-6	FH SD1120 - RMBS	I	. 09/01/2023 .	Pavdown		7.797	7.797	7.929	7.929		(132)	0	(132)	0		0	0	213	. 06/01/2052 .	. 1.A
3132DN-NS-8	FH SD1301 - RMBS		. 09/01/2023 .	Paydown		61,064	61,064		62,496	0	(1,433)	0	(1,433)	061,	064	0	0		. 07/01/2052 .	. 1.A
3132DN-QH-9	FH SD1356 - RMBS		. 09/01/2023 .	Paydown		14,009	14,009	14,313	14,308	0	(300)	0	(300)	014,	009	0	0	434	. 07/01/2052 .	. 1.A
3132DN-VJ-9	FH SD1517 - RMBS		. 09/01/2023 .	Paydown		790	790 .	791	791	0	(1)	0	(1)	0	790	00	0	25	. 09/01/2052 .	. 1.A
3132DQ-WL-6	FEDERAL HOME LOAN MORTGAGE CORPORATION		. 09/01/2023 .	Paydown		9,991	9,991	9,688	0	0	303	0	303	0 9,	991	00	0	66	. 06/01/2053 .	. 1.A
3132DV-LA-1	FH SD7521 - RMBS		. 09/01/2023 .	Paydown		3,499		3,745	3,762	0	(263)	0	(263)	0 3,	199	00	0	58	. 07/01/2050 .	. 1.A
	FH SD7523 - RMBS		. 09/01/2023 .	Paydown		1,873	1,873	1,997	2,008	0	(135)	0	(135)		373	0	0	31	. 08/01/2050 .	. 1.A
3132DV-LV-5	FH SD7540 - RMBS		. 09/01/2023 .	Paydown		2,590	2,590	2,731	2,732	0	(142)	0	(142)	0 2,		0	0	43	. 05/01/2051 .	. 1.A
31334Y-P5-0	FH QA2244 - RMBS		. 09/01/2023 .	Paydown		657	657	698	714	0	(57)	0	(57)		557	00	0	13	. 07/01/2046 .	. 1.A
3133AG-BN-8	FH QB9045 - RMBS		. 09/01/2023 .	Paydown		1,738	1,738	1,788	1,785	0	(47)	0	(47)		738	0	0	22	. 02/01/2051 .	. 1.A
3133AG-BR-9	FH QB9048 - RMBS		. 09/01/2023 .	Paydown		2, 138		2, 191	2, 191	0	(53)		(53)	02,		0	0	30	. 02/01/2051 .	. 1.A
3133AS-KA-0	FH QC7489 - RMBS		. 09/01/2023 .	Paydown		1,446		1,469		0	(22)	0	(22)	1,		0	0	20	. 09/01/2051 .	. 1.A
3133BG-C6-3	FH QE6393 - RMBS		. 09/01/2023 .	Paydown	•••••	49,304	49,304	49,597	49,583	0	(279)	0	(279)	049,		0	0		. 07/01/2052 .	. 1.A
3133BJ-NS-7 3133BM-Q6-5	FH QE8501 - RMBS		. 09/01/2023 .	Paydown		50 , 180	50,180	50,478	50,464	0	(284)	0	(284)	050,		0	0		. 08/01/2052 .	. 1.A
31336M-Q0-5	FH RA4414 - RMBS		. 09/01/2023 .	Paydown			45,778 .	6.987	7.009		(423)		(423)	0				111	. 09/01/2052 . . 01/01/2051 .	. I.A
3133KM-RT-4	FH RAS898 - RMRS		. 09/01/2023 .	Paydown		968	968	984	983		(455)		(45)		968				. 09/01/2051 .	1.7
3133KN-KX-0	FH RA6610 - RMBS		. 09/01/2023 .	Paydown		21,873	21,873	22,383	22,369	0	(496)	0	(496)	021.		0	0	432	. 01/01/2052 .	1.4
3133KP-YM-4	FEDERAL HOME LOAN MORTGAGE CORPORATION		. 09/01/2023 .	Paydown		1.388	1.388	1.352	00	0	36	0	36	0	-	0	0	26	. 09/01/2052 .	1 A
3133KQ-XY-7	FH RA8795 - RMBS		. 09/01/2023 .	Pavdown		86.236			0	0	(1.967)	0	(1.967)	086		0	0		. 04/01/2053 .	. 1.A
3140HD-7A-6	FN BK0888 - RMBS		. 09/01/2023 .	Paydown		1,966	1,966	2,123	2,316	0	(349)	0	(349)	1,	-	0	0	52	. 07/01/2048 .	. 1.A
3140J7-U6-0	FN BM3304 - RMBS		. 09/01/2023 .	Paydown		17	17	18	18	0	(1)	0	(1)	0	17	0	0	0	. 12/01/2047 .	. 1.A
3140J8-UX-9	FN BM4197 - RMBS		. 09/01/2023 .	Paydown		204	204	217	222	0	(17)		(17)		204	00	0	4	. 03/01/2047 .	. 1.A
3140MR-2N-6	FN BW0780 - RMBS		. 09/01/2023 .	Paydown		2,392		2,421	2,421	0	(29)		(29)	0		0	0	65	. 08/01/2052 .	. 1.A
3140MY-AD-4	FN BW6303 - RMBS		. 09/01/2023 .	Paydown		45,445	45,445	45,878	45,861	0	(416)	0	(416)	45	-	0	0	1,514	. 08/01/2052 .	. 1.A
3140QE-AP-7	FN CA6313 - RMBS		. 09/01/2023 .	Paydown		1,298	1,298	1,386	1,413	0	(114)	0	(114)		298	0	0	26	. 07/01/2050 .	. 1.A
3140QE-DX-7	FN CA6417 - RMBS		. 09/01/2023 .	Paydown		215	215	230	233	0	(18)		(18)		215	0	0	4	. 07/01/2050 .	. 1.A
O I HOUL IN I	FN CA6610 - RMBS		. 09/01/2023 .	Paydown		173	173	185	188	0	(15)		(15)		173	0	0	4	. 08/01/2050 .	. 1.A
	FN CA7012 - RMBS		. 09/01/2023 .	Paydown		4, 148	4,148	4,254		J0	(108)	0	(108)	4,			0	56	. 09/01/2050 .	. 1.A
3140QF-4E-6 3140QG-3C-9	FN CA8020 - RMBS		. 09/01/2023 .	Paydown		1,797				0	(112)	0	(112)	0	-	0	0	29	. 12/01/2050 . . 02/01/2051 .	. I.A
3140QG-3C-9	FN CA8850 - RMBS		. 09/01/2023 .	Paydown		3, 128	3,128		3,339		(210)		(210)	0				52	. 02/01/2051 .	. I.A
3140QG-ZQ-3	FN CB1274 - RMBS		. 09/01/2023 .	Paydown						u	(129)	۰۰	(129)	0				49	. 02/01/2051 .	1.A
3140QL=MY=9	FN CB1274 - RMBS		. 09/01/2023 .	Paydown	•••••	1.272	1.272			n	(124)	n	(124)	0		,		25	. 01/01/2051 .	
3140QM-VP-6	FN CB2421 - RMRS		. 09/01/2023 .	Paydown	•	3.410	3,410	3,596	3.588	n	(178)	n	(178)		110	n	n	70	. 12/01/2051 .	1 A
3140QP-BA-4	FN CB3632 - RMBS		. 09/01/2023 .	Paydown		106,617	106,617	110,032	110,010	n	(3,393)		(3,393)	0			0		. 05/01/2052 .	1.A
3140QP-BG-1	FN CB3638 - RMBS		. 09/01/2023 .	Paydown		4,608	4,608	4,683	4,682	0	(74)	0	(74)	0		0	0	141	. 05/01/2052 .	. 1.A
	FN CB4337 - RMBS	ļ	. 09/01/2023 .	Paydown		7, 128	7,128	7,259	7,257	0	(129)		(129)	7		0	0	203	. 08/01/2052 .	. 1.A
	FN CR4340 - RMRS	1	09/01/2023	Paydown		1 062	1 062	1 067	1 066		(4)	0	(4)		162			32	08/01/2052	1 1

SCHEDULE D - PART 4

					Show All Lo	ng-Term Bo	onds and Stoo	ck Sold, Red	deemed or C	Otherwise	Disposed o	of During th	he Current (Quarter							
1	2	3	4	5	6	7	8	9	10	CI	nange In Bo	ok/Adjusted	Carrying Valu	ıe	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's		Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than			Adjusted	Foreign			Stock	Stated	and
									Book/	Lingadizad			,	Change in	•	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of					Unrealized Valuation		Temporary	Carrying	Book	Carrying Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		Гот	Dianagal	Nama	Shares of	Consid-		Astual	Adjusted		(Amor-	Impairment	Value	/Adjusted		-	-				
	Di-ti	For- eian		Name	Stock		Par Value	Actual	Carrying	Increase/	tization)/	Recog-		Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on Disposal	During	Maturity	strative
ification	Description	eign		of Purchaser	Slock	eration		Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposai	Year	Date	Symbol
3140QQ-F6-7	FN CB4688 - RMBS		. 09/01/2023 .	Paydown		46,233	46,233	47,591	47,565	0	(1,333)	0	(1,333) .	0	46,233	0	0	0	1,533	. 09/01/2052 .	1.A
110110111 01	FN FM1001 - RMBS		. 09/01/2023 .	Paydown		58	58	62	65	0	(6)	0	(6) .	0	58	0	0	0	1	. 11/01/2048 .	1.A
3140X6-UC-3	FN FM3278 - RMBS		. 09/01/2023 .	Paydown		41	41	43	45	0	(4)	0	(4) .	0	41	0	0	0	1	. 11/01/2048 .	1.A
014000 01 2	FN FM5297 - RMBS		. 09/01/2023 .	Paydown		37	37	39	40	0	(3)	0	(3) .	0	37	0	0	0	1	. 11/01/2050 .	1.A
3140X8-G6-8	FN FM4720 - RMBS		. 09/01/2023 .	Paydown		1,469	1,469	1,570	1,595	0	(126)	0	(126).	0	1,469	0	0	0	29	. 10/01/2050 .	1.A
3140X8-UU-9	FN FM5094 - RMBS		. 09/01/2023 .	Paydown		6,685	6,685	7,144	7,452	0	(767)	0	(767) .	0	6,685	0	0	0	155	. 06/01/2049 .	1.A
3140X8-Y6-8	FN FM5232 - RMBS		. 09/01/2023 .	Paydown		23	23	25	25	0	(2)		(2) .	0	23	0	0	0	0	. 06/01/2050 .	1.A
3140X8-Y7-6	FN FM5233 - RMBS		. 09/01/2023 .	Paydown		324	324	345	347	0	(23)		(23) .	0	324	0	0	0	7	. 11/01/2050 .	1.A
3140X9-JB-2	FN FM5657 - RMBS		. 09/01/2023 .	Paydown		21	21	22	23	0	(2)		(2) .	0	21	0	0	0	0	. 12/01/2050 .	1.A
3140X9-JK-2	FN FM5665 - RMBS		. 09/01/2023 .	Paydown		81	81	86	89	0	(8)	0	(8) .	0	81	0	0	0	2	. 08/01/2048 .	1.A
3140X9-TY-1	FN FM5966 - RMBS		. 09/01/2023 .	Paydown		2,251	2,250	2,303	2,301	0	(51)	0	(51) .	0	2,251	0	0	0	29	. 02/01/2051 .	1.A
3140X9-UJ-2	FN FM5984 - RMBS		. 09/01/2023 .	Paydown		6,348	6,348	6,558	6,553	0	(205)	0	(205) .	0	6,348	0	0	0	84	. 02/01/2051 .	1.A
3140XB-QD-5	FN FM7651 - RMBS		. 09/01/2023 .	Paydown		51,510	51,510	52,822	52,919	0	(1,409)	0	(1,409) .	0	51,510	0	0	0	1,541	. 09/01/2049 .	1.A
3140XB-X7-0	FN FM7901 - RMBS		. 09/01/2023 .	Paydown		742	742	777	775	0	(33)	0	(33) .	0	742	0	0	0	12	. 07/01/2051 .	1.A
3140XC-4Z-8	FN FM8939 - RMBS		. 09/01/2023 .	Paydown		2,034	2,034	2,053	2,053	0	(18)	0	(18) .	0	2,034	0	0	0	26	. 10/01/2051 .	1.A
3140XC-YX-0	FN FM8825 - RMBS		. 09/01/2023 .	Paydown		1, 122	1,122	1,141	1,140	0	(18)	0	(18) .	0	1,122	0	0	0	15	. 09/01/2051 .	1.A
3140XD-2J-4	FN FM9776 - RMBS		. 09/01/2023 .	Paydown		24,842	24,842	25,510	25,510	0	(668)	0	(668).	0	24,842	0	0	0	493	. 11/01/2051 .	1.A
3140XF-H3-8	FN FS0249 - RMBS		. 09/01/2023 .	Paydown		4,877	4,877	5,072	5,065	0	(188)	0	(188) .	0	4,877	0	0	0	98	. 01/01/2052 .	1.A
	FN FS0251 - RMBS		. 09/01/2023 .	Paydown		15, 181	15, 181	15,736	15,714	0	(533)	0	(533) .	0	15, 181	0	0	0	309	. 01/01/2052 .	1.A
3140XF-HY-0	FN FS0246 - RMBS		. 09/01/2023 .	Paydown		829	829	866	864	0	(34)	0	(34) .	0	829	0	0	0	17	. 01/01/2052 .	1.A
3140XF-LL-3	FN FS0330 - RMBS		. 09/01/2023 .	Paydown		13,431	13,431	13,887	13,871	0	(439)	0	(439) .	0	13,431	0	0	0	266	. 01/01/2052 .	1.A
3140XG-7F-0	FN FS1793 - RMBS		. 09/01/2023 .	Paydown		18,894	18,894	18,993	18,989	0	(95)	0	(95) .	0	18,894	0	0	0	510	. 05/01/2052 .	1.A
3140XG-CH-0	FN FS0971 - RMBS		. 09/01/2023 .	Paydown		4,708	4,708	4,735	4,734	0	(26)	0	(26) .	0	4,708	0	0	0	107	. 01/01/2052 .	1.A
3140XG-VJ-5	FN FS1516 - RMBS		. 09/01/2023 .	Paydown		42,751	42,751	42,717	42,716	0	35	0	35 .	0	42,751	0	0	0	1,034	. 05/01/2052 .	1.A
	FN FS1551 - RMBS		. 09/01/2023 .	Pavdown		2.338	2,338			0	(18)	0	(18)	0	2.338	0	0	0	68	. 03/01/2050 .	1.A
3140XG-ZA-0	FN FS1636 - RMBS		. 09/01/2023 .	Pavdown		53, 108	53, 108	53,232	53,220	0	(112)	0	(112)	0	53, 108	0	0	0	1,376	. 04/01/2052 .	1.A
3140XH-3U-9	FN FS2610 - RMBS		. 09/01/2023 .	Pavdown		7.013	7,013	7, 121	7.119	0	(106)	0	(106)	0	7.013	0	0	0	210	. 08/01/2052 .	1.A
3140XH-6Y-8	FN FS2686 - RMBS		. 09/01/2023 .	Pavdown		15.500	15.500	15.612	15.612	0	(112)	0	(112)	0	15.500	0	0	0	489	. 08/01/2052 .	1.A
3140XJ-LC-5	FN FS3022 - BMBS		. 09/01/2023 .	Paydown		867	867	843	0	0	24	0	24	0	867	0	0	0	17	. 10/01/2052 .	1.A
3140XJ-QG-1	FN FS3154 - RMBS		. 09/01/2023 .	Paydown		2.313		2,284		0	28	0	28	0	2.313	0	0	0	72	. 07/01/2052 .	1.A
31410L-XE-7	FN 890877 - RMBS		. 09/01/2023 .	Pavdown		104	104	111	115		(11)	0	(11)	n	104			0	2	. 07/01/2048 .	1.A
31418C-MG-6	FN MA3058 - BMBS	l	. 09/01/2023 .	Paydown		7.684	7.684	8.312	8.747	n	(1.063)		(1.063)	n	7.684	n	n	0	203	. 07/01/2047 .	1.A .
31418C-U7-7	FN MA3305 - RMBS		. 09/01/2023 .	Paydown		108	108	115	119	0	(11)	0	(11)	0	108	0	0	0	2	. 03/01/2048 .	1 A
31418C-V2-7	EN MA3332 - RMRS		. 09/01/2023 .	Pavdown		135	135	144	149	0	(15)	0	(15)	0	135	0	0	0	3	. 04/01/2048 .	1 A
31418D-HL-9	FN MA3834 - RMRS		. 09/01/2023 .	Paydown		2,303		2,407		0	(177)		(177) .	0		0	0	0	46	. 11/01/2049 .	1 A
35563P-JF-7	SCRT 2019-1 MA - CMO/RMRS		. 09/01/2023 .	Paydown		2.408	2,408	2.422	2.428	0	(20)		(20)	0	2.408	0	0	0	56	. 07/25/2058 .	1 A
35563P-KG-3	SCRT 2019-2 MA - CMO/RMBS		. 09/01/2023 .	Pavdown	• • • • • • • • • • • • • • • • • • • •	615	615	624	621	n	(20)		(6)	٥	615	n	n	n	14	. 08/26/2058 .	1 A
	SCRT 2019-2 MA - CMO/RMBS	l	. 09/01/2023 .	Pavdown	• • • • • • • • • • • • • • • • • • • •	1.382	1,382	1.444	1.428	n	(46)		(46)	٥	1.382	n	n	n	32	. 10/25/2058 .	1 A
	SCRT 2019-3 MA - CMO/RMBS	l	. 09/01/2023 .	Paydown	•••••	862	862	880	875	n	(46)		(14)	۰	862	n	n	n	17	. 02/25/2059 .	1.A
	VIRGINIA ST PUB SCH AUTH SPL OBLIG PRINC		. 08/01/2023 .	Maturity @ 100.00	•••••	15,000	15,000	18,575		n	(302)		(302)	٥	15.000	n	n	n	750	. 08/01/2023 .	1.A FE
	99. Subtotal - Bonds - U.S. Special Re	Venue		matarity & 100.00	• • • • • • • • • • • • • • • • • • • •	951.501	951.501	975.422	871.894		(20,479)		(20,479)	۰	951.501	0	0		26.414	XXX	XXX
		venue		Maturity & 100 00		- , , ,		/		0		0	. , .,				•	0	-		
00912X-BC-7	AIR LEASE CORP		. 07/03/2023 .	Maturity @ 100.00	•	25,000	25,000	24,795	24,978	0	22		22		25,000	0	0	0	969	. 07/03/2023 .	2.B FE
	HOWMET AEROSPACE INC BX 2019-XL A - CMBS		. 08/02/2023 . . 07/15/2023 .	Various	•	6,000	6,000	6,030	5,925	84	(4)	0	80			0	(5)	(5)	208	. 10/01/2024 .	3.A FE
				Paydown			10,989	10,989	10,989	······0	······0	0		0	,	0	0	0	375	. 10/15/2036 .	1.A FE
	BX 2021-SOAR A - CMBS		. 07/17/2023 .	Paydown	•	4,093	4,093 .	4,093 28,276	4,093 28,608		0		(211)		4,093	0			131	. 06/15/2038 .	1.A FE
UOD IUH-AA-1	LDA ZZLEZ A - LANDA			LEAVOOND			28 39/	28 2/h	28 608	. ()	(211)	1 ()	(211)	()	28 39/	. ()		. ()	Yh'h		LAFE

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold. Redeemed or Otherwise Disposed of During the Current Quarter

					Show All Fo	ng-rerm Bo	onds and Sto	ck Sola, Red	deemed or C	Jinerwise i	Jisposea (ט זכ טuring נו	ne Gurrent	Quarter							
1	2	3	4	5	6	7	8	9	10	Ch	nange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-			Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
36262W-AJ-5	GSMBS 21PJ8 A8 - CMO/RMBS		. 09/01/2023 .	Paydown		1,623	1,623	1,660	1,659	0	(36)	0	(36)	0	1,623	0	0	0	26	. 01/25/2052 .	1.A FE
36318W-AK-6	GALXY XV ARR - CDO		. 07/17/2023 .	Paydown		9,008	9,008	9,008	9,008	0	0	0	0	0	9,008	0	0	0	388	. 10/15/2030 .	1.A FE
46591J-AA-4	JPMCC 2019-BROOK A - CMBS		. 08/10/2023 .	Various		15,237	16,352	16,352	16,352	0	0	0	0	0	16,352	0	(1,115)	(1,115)	657	. 09/17/2029 .	1.A FE
	JPMMT 2112 A4 - CMO/RMBS		. 09/01/2023 .	Paydown		4,575	4,575	4,651	4,646	0	(71)	0	(71)	0	4,575	0	0	0	74	. 02/25/2052 .	1.A FE
	JPMMT 2021-INV5 A2A - CMO/RMBS			Paydown		1,391	1,391	1,407	1,407	0	(15)	0	(15)	0	1,391	0	0	0	23	. 12/26/2051 .	1.A FE
	JPMMT 221 A4 - CMO/RMBS			Paydown		4,428	4,428	4,388	4,391	0	37	0	37	0	4,428	0	0	0	72	. 07/25/2052 .	1.A FE
	NAVSL 2021-E A - ABS			Paydown		2,786	2,786	2,786	2,786	0	1	0	1	0	2,786	0	0	0	18	. 12/16/2069 .	1.A FE
	PENSKE TRUCK LEASING CO LP					50,000	50,000	49,996	49,999	0	1	0	1	0	50,000	0	0	0	2,063		2.B FE
	TIA III A - CDO		. 07/17/2023 .			14,732	14,732	14,732	14,732	0	0	0	0	0	14,732	0	0	0	654	. 01/16/2031 .	1.A FE
	99. Subtotal - Bonds - Industrial and M	liscella	aneous (Un	naffiliated)		178,258	179,373	179, 161	179,571	84	(277)	0	(193)	0	179,377	0	(1,119)	(1,119)	6,622	XXX	XXX
	97. Total - Bonds - Part 4					1,139,759	1,140,874	1,165,996	1,061,657	84	(20,948)	0	(20,864)	0	1,140,879	0	(1,119)	(1,119)	33,537	XXX	XXX
	98. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Bonds					1,139,759	1,140,874	1,165,996	1,061,657	84	(20,948)	0	(20,864)	0	1,140,879	0	(1,119)	(1,119)	33,537	XXX	XXX
450999999	97. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
450999999	98. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
450999999	99. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
598999999	97. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
598999999	98. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
598999999	99. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	99. Total - Preferred and Common Sto	ocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
600999999						1,139,759	XXX	1.165.996	1.061.657	84	(20.948)	0	(20.864)	0	1.140.879	0	(1,119)	(1.119)	33.537	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By **NONE**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month	Fnd	Depository	/ Balances
IVIOLITI	LIIU	Depository	Dalalices

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter						
			Amount of	Amount of	6	7	8	1			
			Interest Received	Interest Accrued	· ·	•	Ü				
		Rate of	During Current	at Current							
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*			
BANK OF NY New York, NY		0.000	0	0	14 , 150	14,468	12,976	XXX.			
JP MORGAN CHASE New York, NY		0.000	0	0	7,954	5,341	7,352	XXX.			
US BANK Knoxville,TN		0.000	0	0	(5,678,183)	(2,502,395)	(1,899,900)	XXX.			
JP Morgan Time Deposit		4.950	7,102	0	2,096,417	1,714,825	2,120,580	XXX.			
0199998. Deposits in 0 depositories that do not											
exceed the allowable limit in any one depository (See					_						
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX			
0199999. Totals - Open Depositories	XXX	XXX	7,102	0	(3,559,663)	(767,760)	241,007	XXX			
0299998. Deposits in 0 depositories that do not											
exceed the allowable limit in any one depository (See	100/	100/	0	0	0	0	0	2004			
instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX			
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	(2.552.222)	0	0	XXX			
0399999. Total Cash on Deposit	XXX	XXX	7,102	0	(3,559,663)	(767,760)	241,007	XXX			
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX			
			•	•	• • • • • • • • • • • • • • • • • • • •	•	•				
0599999. Total - Cash	XXX	XXX	7,102	0	(3,559,663)	(767,760)	241,007	XXX			

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	Miled Elid of Culter	5	6	7	8	q
	_		7	J	O	Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	UNITED STATES TREASURY			0.000	10/12/2023		0	
	UNITED STATES TREASURY		09/29/2023		10/19/2023	14,960,550	0	4,383
	UNITED STATES TREASURY		09/19/2023	0.000	10/10/2023		0	17,587
	UNITED STATES TREASURY		09/28/2023	0.000	10/24/2023		0	4,396
0019999999.	Subtotal - Bonds - U.S. Governments - Issuer Obligations					51,886,299	0	54,909
0109999999.	Total - U.S. Government Bonds					51,886,299	0	54,909
	Total - All Other Government Bonds					0	0	0
	Fotal - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999.	Total - U.S. Political Subdivisions Bonds					0	0	0
	FEDERAL HOME LOAN BANKS						0	4,333
	FEDERAL HOME LOAN BANKS		09/20/2023				0	5,149
	FEDERAL HOME LOAN BANKS		09/27/2023	0.000	······		0	5,849
	FEDERAL HOME LOAN BANKS		09/29/2023	0.000	10/23/2023		0	2,918
	Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations					38,137,567	0	18,249
0909999999.	Total - U.S. Special Revenues Bonds					38,137,567	0	18,249
	American Electric Power Company, Inc.		09/01/2023				0	18,400
	Curmins Inc.		09/28/2023				0	2,263
	Diageo Capital plc		09/14/2023				0	10,238
	General Mills, Inc.			0.000	10/05/2023		0	3,547
	Intercontinental Exchange, Inc.		08/28/2023		10/13/2023		0	20,967
	Johnson Controls International plc			0.000			0	
	Toyota Industries Commercial Finance, In		09/06/2023	0.000	10/23/2023	,,	0	19,988
	Virginia Electric and Power Company		09/06/2023	0.000	10/19/2023		0	
	Fotal - Industrial and Miscellaneous (Unaffiliated) Bonds					28,922,262	0	91,999
	Total - Hybrid Securities					28,922,262	0	91,999
	Total - Parent, Subsidiaries and Affiliates Bonds					0	<u> </u>	0
	Subtotal - Unaffiliated Bank Loans					0	0	0
	Fotal - Issuer Obligations					118.946.128	0	165.157
	Total - Residential Mortgage-Backed Securities					118,946,128	<u> </u>	165, 157
	Total - Commercial Mortgage-Backed Securities					0	<u> </u>	0
	Total - Commercial Mortgage-Backed Securities Total - Other Loan-Backed and Structured Securities					0	0	0
	Total - Other Loan-Backed and Structured Securities Total - SVO Identified Funds					0	0	0
	Total - SYO Identified Funds Fotal - Affiliated Bank Loans					0	U	0
	Total - Unaffiliated Bank Loans					0	0	0
24799999999. 25099999999.						0	0	165, 157
			00 (00 (0000	5 000		118,946,128	0	165, 15/
481202-23-9	JPNCRGAN: US_TRS-HM_CAP		09/29/2023	5.200		35,021,985	0	
	Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO	l on	08/31/2023	0.300		35,021,985	0	18,872
	······································	. I SD	08/31/2023	0.300			0	0
	Subtotal - All Other Money Market Mutual Funds					0	0	0
000999999999	Total Cash Equivalents					153,968,112	0	184,029