



HEALTH QUARTERLY STATEMENT
AS OF MARCH 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
Humana Medical Plan of Michigan, Inc.

NAIC Group Code01190119NAIC Company Code14224Employer's ID Number27-3991410
(Current)(Prior)

Organized under the Laws ofMichigan, State of Domicile or Port of EntryMI

Country of DomicileUnited States of America

Licensed as business type:Health Maintenance Organization

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

Incorporated/Organized11/16/2010Commenced Business02/29/2012

Statutory Home Office18610 Fenkell StreetDetroit, MI, US 48223-2378
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office500 W. Main St.Louisville, KY, US 40202502-580-1000
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail AddressP.O. Box 740036Louisville, KY, US 40201-7436
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records500 W. Main St.Louisville, KY, US 40202502-580-1000
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.humana.com

Statutory Statement ContactBryan Oberholtzer502-580-1077
(Name)(Area Code) (Telephone Number)

DOIINQUIRIES@humana.com502-580-2099
(E-mail Address)(FAX Number)

OFFICERS

President & CEOBruce Dale BroussardChief Financial OfficerSusan Marie Diamond

VP, Associate General Counsel & Corporate SecretaryJoseph Matthew RuschellVP & TreasurerRobert Martin Marcoux Jr.

OTHER

Courtney Danielle Durall, Assistant Corporate Secretary & Director, ESG Strategy	Daniel Kevin Feld, Associate VP, Tax	John-Paul William Felter, SVP, Chief Accounting Officer & Controller
Jeremy Leon Gaskill, VP, Medicare Regional President	John Stephen Littig, SVP, EG Medical	Sean Joseph O'Reilly, SVP, Chief Compliance Officer
William Mark Preston, VP, Investments	George Renaudin II, President, Medicare & Medicaid	Frederick William Roth, VP, Medicare Supplement
Leah Sonnenschein Schraudenbach, SVP, Chief Risk Officer	Gilbert Alan Stewart #, SVP, Medicare Divisional Leader	Ralph Martin Wilson, Vice President

DIRECTORS OR TRUSTEES

Bruce Dale Broussard

Stephanie Lucido Herpers

Joseph Matthew Ruschell

State ofKentuckySS:

County ofJefferson

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

Bruce Dale BroussardPresident & CEO

Joseph Matthew RuschellVP, Associate General Counsel & Corporate Secretary

Robert Martin Marcoux, Jr.VP & Treasurer

Subscribed and sworn to before me this18th day ofApril, 2024

a. Is this an original filing?Yes [X] No []

b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

Julia Wentworth
Notary Public
January 10, 2025

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	73,000,136	0	73,000,136	73,013,466
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 (\$3,185,438), cash equivalents (\$88,365,714) and short-term investments (\$0)	91,551,152	0	91,551,152	73,980,103
6. Contract loans (including \$0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	164,551,288	0	164,551,288	146,993,569
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	483,334	0	483,334	422,481
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	22,976	19,700	3,277	121,791
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$2,222,612) and contracts subject to redetermination (\$22,381,868)	24,604,479	0	24,604,479	9,441,830
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	4,174,749	68,988	4,105,761	1,467,759
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	2,883,745
18.2 Net deferred tax asset	4,239,813	0	4,239,813	4,239,813
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$15,515,141) and other amounts receivable	25,366,369	9,850,578	15,515,791	17,010,580
25. Aggregate write-ins for other than invested assets	2,311,185	2,311,185	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	225,754,192	12,250,449	213,503,743	182,581,568
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	225,754,192	12,250,449	213,503,743	182,581,568
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Commissions	1,999,311	1,999,311	0	0
2502. Provider Contracts	311,874	311,874	0	0
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	2,311,185	2,311,185	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded)	73,617,271	5,546,277	79,163,548	79,852,280
2. Accrued medical incentive pool and bonus amounts	3,367,526	0	3,367,526	4,832,015
3. Unpaid claims adjustment expenses	430,805	0	430,805	419,222
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	2,999,810	0	2,999,810	2,924,226
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	420,336	0	420,336	18,183
9. General expenses due or accrued	1,149,171	0	1,149,171	1,354,750
10.1 Current federal and foreign income tax payable and interest thereon (including \$575 on realized gains (losses))	4,611,434	0	4,611,434	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated	129,480	0	129,480	122,811
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	6,044,529	0	6,044,529	2,909,181
16. Derivatives	0	0	0	0
17. Payable for securities	47,640	0	47,640	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	14,642,723	0	14,642,723	9,102,577
23. Aggregate write-ins for other liabilities (including \$15,134 current)	43,919	0	43,919	183,222
24. Total liabilities (Lines 1 to 23)	107,504,644	5,546,277	113,050,921	101,718,466
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000	1,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	85,015,056	85,015,056
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	15,436,765	(4,152,955)
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0)	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	100,452,821	80,863,101
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	213,503,743	182,581,568
DETAILS OF WRITE-INS				
2301. Unclaimed Property	43,919	0	43,919	39,417
2302. Premium Payable	0	0	0	143,806
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)	43,919	0	43,919	183,222
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	116,200	96,121	442,179
2. Net premium income (including \$0 non-health premium income).....	XXX	192,734,667	145,021,896	643,841,329
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	0	0	0
4. Fee-for-service (net of \$0 medical expenses)	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	192,734,667	145,021,896	643,841,329
Hospital and Medical:				
9. Hospital/medical benefits	10,821,484	122,504,713	88,635,284	477,312,046
10. Other professional services	208,870	2,364,511	3,077,723	15,242,413
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	402,711	4,558,897	3,060,210	16,389,704
13. Prescription drugs	1,431,090	16,200,669	8,851,623	18,532,769
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	909,183	2,145,850	5,212,829
16. Subtotal (Lines 9 to 15)	12,864,155	146,537,973	105,770,690	532,689,762
Less:				
17. Net reinsurance recoveries	0	0	0	0
18. Total hospital and medical (Lines 16 minus 17)	12,864,155	146,537,973	105,770,690	532,689,762
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$ 14,007,092 cost containment expenses	0	14,730,513	10,240,220	54,729,063
21. General administrative expenses	0	12,475,652	12,332,940	54,309,577
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only) .	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	12,864,155	173,744,137	128,343,850	641,728,401
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	18,990,530	16,678,046	2,112,928
25. Net investment income earned	0	2,263,960	1,546,619	8,038,789
26. Net realized capital gains (losses) less capital gains tax of \$ 575	0	3,235	(176,082)	22,310
27. Net investment gains (losses) (Lines 25 plus 26)	0	2,267,195	1,370,537	8,061,098
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)].....	0	0	0	0
29. Aggregate write-ins for other income or expenses	0	1	3	4
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	21,257,727	18,048,586	10,174,030
31. Federal and foreign income taxes incurred	XXX	4,610,860	3,864,849	3,206,587
32. Net income (loss) (Lines 30 minus 31)	XXX	16,646,867	14,183,737	6,967,443
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Miscellaneous Income	0	1	3	4
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	1	3	4

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	80,863,101	72,610,619	72,610,619
34. Net income or (loss) from Line 32	16,646,867	14,183,737	6,967,443
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	(7,667)	64,404	80,741
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	0	0	1,104,718
39. Change in nonadmitted assets	2,950,520	(1,003,774)	99,581
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	19,589,720	13,244,367	8,252,483
49. Capital and surplus end of reporting period (Line 33 plus 48)	100,452,821	85,854,986	80,863,101
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

	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	178,028,986	177,897,423	645,354,114
2. Net investment income	2,223,919	1,630,250	8,184,036
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	180,252,906	179,527,673	653,538,150
5. Benefit and loss related payments	143,577,286	98,506,137	511,279,702
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	24,451,020	11,777,990	108,018,874
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 63,799 tax on capital gains (losses)	(2,883,745)	(1,194,309)	4,933,370
10. Total (Lines 5 through 9)	165,144,561	109,089,818	624,231,946
11. Net cash from operations (Line 4 minus Line 10)	15,108,344	70,437,855	29,306,204
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	2,413,645	2,771,111	27,523,610
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	47,640	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,461,286	2,771,111	27,523,610
13. Cost of investments acquired (long-term only):			
13.1 Bonds	2,424,984	9,718,630	41,618,428
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	0	2,093,934	67,437
13.7 Total investments acquired (Lines 13.1 to 13.6)	2,424,984	11,812,565	41,685,865
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)	36,302	(9,041,454)	(14,162,255)
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	0	0
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)	2,426,403	8,066,686	6,191,351
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	2,426,403	8,066,686	6,191,351
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) .	17,571,049	69,463,087	21,335,300
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	73,980,103	52,644,803	52,644,803
19.2 End of period (Line 18 plus Line 19.1)	91,551,152	122,107,890	73,980,103

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

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
1. Prior Year	40,800	0	0	0	0	0	0	40,800	0	0	0	0	0	0
2. First Quarter	38,340	0	0	0	0	0	0	38,340	0	0	0	0	0	0
3. Second Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	116,200	0	0	0	0	0	0	116,200	0	0	0	0	0	0
Total Member Ambulatory Encounters for Period:														
7 Physician	300,304	2	0	0	0	0	0	300,302	0	0	0	0	0	0
8. Non-Physician	161,651	0	0	0	0	0	0	161,651	0	0	0	0	0	0
9. Total	461,955	2	0	0	0	0	0	461,953	0	0	0	0	0	0
10. Hospital Patient Days Incurred	42,884	0	0	0	0	0	0	42,884	0	0	0	0	0	0
11. Number of Inpatient Admissions	4,085	0	0	0	0	0	0	4,085	0	0	0	0	0	0
12. Health Premiums Written (a)	192,734,667	143,806	0	0	0	0	0	192,590,862	0	0	0	0	0	0
13. Life Premiums Direct	0	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	0
15. Health Premiums Earned.....	192,734,667	143,806	0	0	0	0	0	192,590,862	0	0	0	0	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services.....	143,577,286	58,709	0	0	0	0	0	143,518,578	0	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	146,537,973	58,709	0	0	0	0	0	146,479,264	0	0	0	0	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 192,590,862

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

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UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	58,709	0	0	0	58,709	0
2. Comprehensive (hospital and medical) group	0	0	0	0	0	0
3. Medicare Supplement	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0
5. Dental only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	32,116,589	109,028,316	5,700,798	73,462,750	37,817,387	79,852,280
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)	32,175,298	109,028,316	5,700,798	73,462,750	37,876,096	79,852,280
14. Health care receivables (a)	45,052	25,320,667	0	0	45,052	30,479,627
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	2,373,672	0	2,204,793	1,162,733	4,578,465	4,832,015
17. Totals (Lines 13 - 14 + 15 + 16)	34,503,918	83,707,649	7,905,591	74,625,483	42,409,508	54,204,668

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

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

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:

	SSAP #	F/S Page	F/S Line #		2024	2023
Net Income						
1. Humana Medical Plan of Michigan, Inc. Michigan basis	xxx	xxx	xxx	\$	16,646,867	\$ 6,967,443
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	\$	<u>16,646,867</u>	<u>6,967,443</u>
Surplus						
5. Humana Medical Plan of Michigan, Inc. Michigan basis	xxx	xxx	xxx	\$	100,452,821	\$ 80,863,101
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	\$	<u>100,452,821</u>	<u>80,863,101</u>

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 straight-line 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. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

D. Impairment Loss

Not Applicable.

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

Not Applicable.

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

(1) 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 March 31, 2024.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at March 31, 2024:

(a) The aggregate amount of unrealized losses:

1. Less than Twelve Months	\$	(429,745)
2. Twelve Months or Longer	\$	(2,538,749)

(b) The aggregate related fair value of securities with unrealized losses:

1. Less than Twelve Months	\$	19,678,394
2. Twelve Months or Longer	\$	21,987,611

(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

Not Applicable.

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)

Restricted Asset Category	1	2	3	4	5	6	7
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	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	-	-	-	-	-	-	-
j. On deposit with states	1,469,609	1,471,294	(1,685)	-	1,469,609	0.65%	0.69%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-
l. 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	\$ 1,469,609	\$ 1,471,294	\$ (1,685)	-	\$ 1,469,609	0.65%	0.69%

(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

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

R. Share of Cash Pool by Asset Type

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

- 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.

7. 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.

- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued		Amount
1.	Gross	\$ 483,334
2.	Nonadmitted	\$ -
3.	Admitted	\$ 483,334

- D. The aggregate deferred interest.

		Amount
Aggregate Deferred Interest	\$	-

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

		Amount
Cumulative amounts of PIK interest included in the current principal balance	\$	-

8. Derivative Instruments

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 went into effect for tax years beginning after 2022. The Company is an applicable corporation for 2024 as the average adjusted financial statement income for Humana Inc. and Subsidiaries for the applicable three-tax-year period exceeds the \$1 billion income-based threshold. However, the Company does not expect to incur a CAMT liability in 2024 as its regular tax liability is expected to exceed the tentative minimum tax. Further, no other taxable entities or taxable groups within the Company’s structure are expected to exceed the average adjusted financial statement income threshold. The Company has not made an accounting policy election to disregard CAMT when evaluating the need for a valuation allowance for its non-CAMT DTAs.

No material change since year-end December 31, 2023.

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, 2023 and 2022 were \$49,245,071 and \$28,522,356, 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, 2023.

No dividends or returns of capital were paid by the Company as of March 31, 2024.

- 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.

NOTES TO THE FINANCIAL STATEMENTS

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

Not Applicable.

- D. At March 31, 2024, the Company reported \$6,044,529 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.
- I. Not Applicable.
- J. Not Applicable.
- K. Not Applicable.
- L. Not Applicable.
- M. All SCA Investments
Not Applicable.
- N. Investment in Insurance SCA
Not Applicable.
- O. SCA Loss Tracking
Not Applicable.

11. Debt

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

- A.-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, 2023.
- H. Postemployment Benefits and Compensated Absences
Not Applicable.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
Not Applicable.

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

- A. 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.

NOTES TO THE FINANCIAL STATEMENTS

- B. The Company has no preferred stock outstanding.
- C.-E. No material change since year-end December 31, 2023.
- 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 \$(7,667).
- K. Not Applicable.
- L. Not Applicable.
- M. Not Applicable.

14. Liabilities, Contingencies and Assessments

- 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 March 31, 2024.

15. Leases

Not Applicable.

16. 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.

NOTES TO THE FINANCIAL STATEMENTS

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 March 31, 2024, the Company has recorded a receivable from CMS of \$4,073,848 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. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

20. Fair Value Measurements

A. (1) The fair value of financial assets at March 31, 2024 were as follows:

	Level 1		Level 2		Level 3		Net Asset Value (NAV)		Total
a. Assets at fair value									
Bonds									
U.S. governments	\$	-	\$	-	\$	-	\$	-	-
Tax-exempt municipal		-		54,176		-		-	54,176
Residential mortgage and other-backed		-		-		-		-	-
Corporate debt securities		-		601,128		-		-	601,128
Total bonds		-		655,304		-		-	655,304
Total assets at fair value/NAV	\$	-	\$	655,304	\$	-	\$	-	655,304
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, 2023 and March 31, 2024.

(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, 2023 and March 31, 2024.
- (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 March 31, 2024.

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

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

Type of Financial								Net Asset	Not Practicable
Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3			Value (NAV)	(Carrying Value)
Bonds and cash									
equivalents	\$ 157,344,369	\$ 161,365,850	\$ 88,365,715	\$ 68,978,654	\$ -	\$ -	\$ -	\$ -	-

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

Not Applicable.

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.

NOTES TO THE FINANCIAL STATEMENTS

G. Retained Assets

Not Applicable.

H. Insurance Linked Securities

Not Applicable.

22. Events Subsequent

On April 4, 2024, the Company requested to pay a dividend to Humana Inc. of \$10,000,000, of which, \$10,000,000 was extraordinary. The Company received approval to pay the dividend from the Department on May 2, 2024. The Company has not yet paid the \$10,000,000 dividend to Humana Inc..

The Company is not aware of any other 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 May 6, 2024 for the Statutory Statement issued on May 6, 2024.

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.

The Company estimates accrued retrospective premium adjustments for its Commercial business based on experience to date, knowledge of the marketplace, and the terms of the risk corridors program with HHS.

NOTES TO THE FINANCIAL STATEMENTS

- B. The Company records accrued retrospective premium as an adjustment to earned premiums.
- C. The amount of net premiums written by the Company at March 31, 2024 that are subject to retrospective rating features was \$192,734,667, 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

Not Applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

Benefits and loss adjustment expenses payable, net of health care receivables, as of December 31, 2023, were \$54,623,890. As of March 31, 2024, \$34,892,116 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$7,936,614 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$11,795,159 favorable prior-year development since December 31, 2023. 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 \$11,795,144 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
12/31/2024	\$ -	\$ -	\$ -	\$ -	\$ -
9/30/2024	-	-	-	-	-
6/30/2024	-	-	-	-	-
3/31/2024	15,385,705	15,385,705	-	-	-
12/31/2023	16,477,354	16,227,393	16,178,792	-	-
9/30/2023	16,798,439	16,395,139	16,027,804	351,217	-
6/30/2023	16,312,879	15,642,790	15,658,540	13,817	1,050
3/31/2023	13,790,194	13,573,294	13,511,735	60,418	1,027
12/31/2022	8,007,352	7,235,874	7,179,286	9,817	1,718
9/30/2022	8,328,149	7,729,325	7,889,730	(160,405)	-
6/30/2022	9,559,015	9,294,555	9,275,796	18,759	-
3/31/2022	9,973,768	7,820,312	6,720,915	49,557	1,049,840

- B. Risk Sharing Receivables

Not Applicable.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

Not Applicable.

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of 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

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

Yes [] No [X]

2.2

If yes, date of change:

3.1

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

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

If the response to 3.2 is yes, provide a brief description of those changes.
NA

3.4

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

Yes [X] No []

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.

0000049071

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

4.2

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

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
Not Applicable.		

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

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

6.1

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

12/31/2020

6.2

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

12/31/2020

6.3

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

04/25/2022

6.4

By what department or departments?
Michigan Department of Insurance

6.5

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

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

6.6

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

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

7.1

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

Yes [] No [X]

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

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

Yes [] No [X]

8.4

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

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

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []

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 [] No [X]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
.....

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

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

Yes [] No [X]

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:
.....

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:

\$.....

0

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 Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$.....0	\$.....0
14.22 Preferred Stock	\$.....0	\$.....0
14.23 Common Stock	\$.....0	\$.....0
14.24 Short-Term Investments	\$.....0	\$.....0
14.25 Mortgage Loans on Real Estate	\$.....0	\$.....0
14.26 All Other	\$.....0	\$.....0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$.....0	\$.....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$.....0	\$.....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? Yes [] No [] N/A []
If no, attach a description with this statement.
.....

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.

\$.....

0

16.2

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

\$.....

0

16.3

Total payable for securities lending reported on the liability page.

\$.....

0

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

GENERAL INTERROGATORIES

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

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase	4 Metro Tech Center, 6th Floor, Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Charline Ottley

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
BLACKROCK FINANCIAL MANAGEMENT, INC	U.....
Humana Inc.	I.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []
- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107105	BLACKROCK FINANCIAL MANAGEMENT, INC	549300LVXY1VJKE13M84	The SEC	DS.....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]
20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]
21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

83.3 %

1.2 A&H cost containment percent

7.3 %

1.3 A&H expense percent excluding cost containment expenses

6.9 %
- 2.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒
- 2.2

If yes, please provide the amount of custodial funds held as of the reporting date

\$.0
- 2.3

Do you act as an administrator for health savings accounts?

Yes ☐ No ☒
- 2.4

If yes, please provide the balance of the funds administered as of the reporting date

\$.0
3.

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

Yes ☒ No ☐
- 3.1

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

Yes ☐ No ☐

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1	2	3	4	5	6	7	8	9	10
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
			NONE						

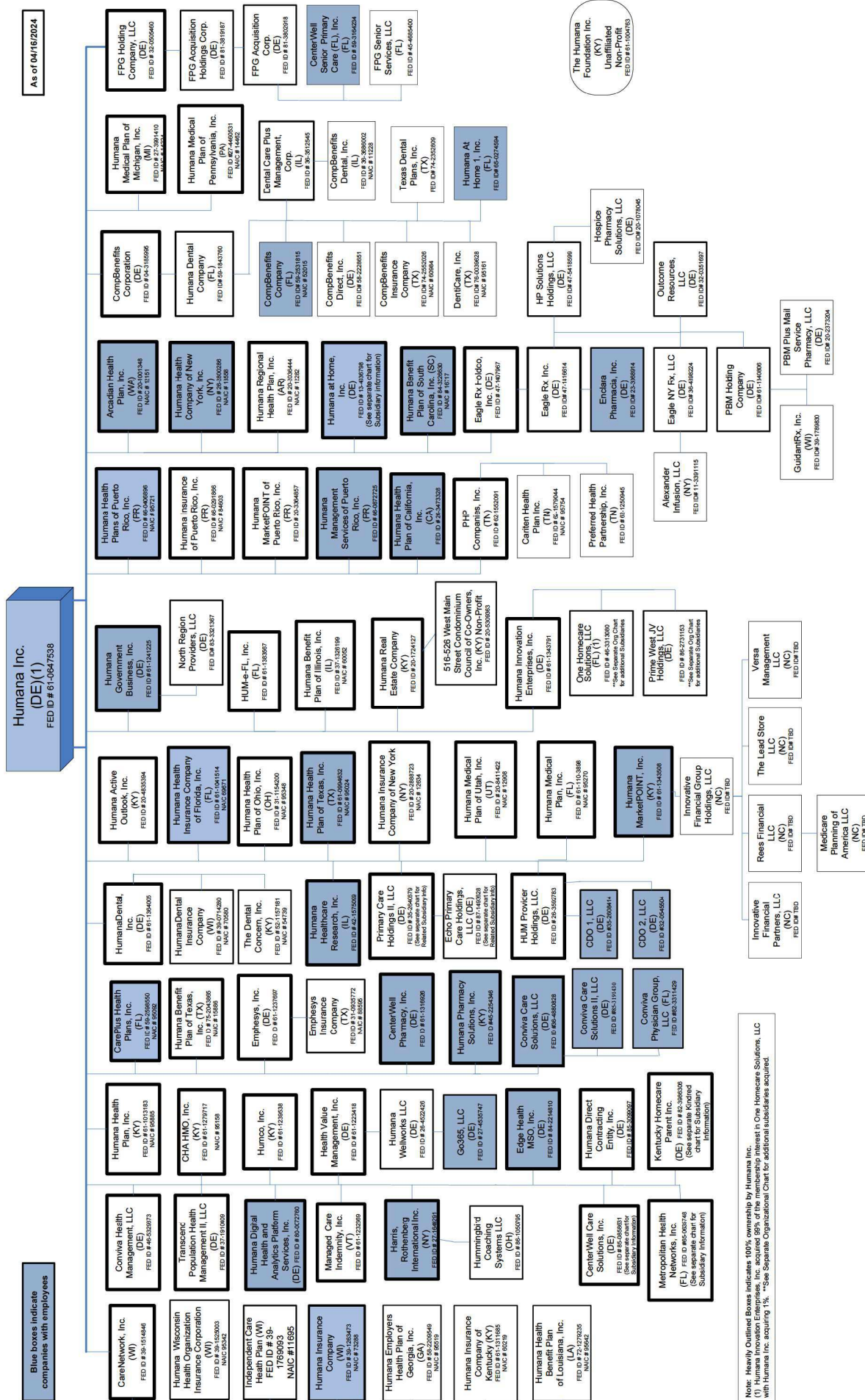
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories											
		1	Direct Business Only								
		Active Status (a)	2	3	4	5	6	7	8	9	10
States, etc.			Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2.	Alaska	AK ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3.	Arizona	AZ ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4.	Arkansas	AR ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5.	California	CA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6.	Colorado	CO ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7.	Connecticut	CT ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8.	Delaware	DE ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9.	District of Columbia	DC ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10.	Florida	FL ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
11.	Georgia	GA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
12.	Hawaii	HI ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
13.	Idaho	ID ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
14.	Illinois	IL ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
15.	Indiana	IN ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
16.	Iowa	IA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17.	Kansas	KS ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.	Kentucky	KY ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19.	Louisiana	LA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
20.	Maine	ME ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
21.	Maryland	MD ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
22.	Massachusetts	MA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
23.	Michigan	MI ..L..	143,806	192,590,862	.....0	.....0	.....0	.....0	.....0	192,734,667	.....0
24.	Minnesota	MN ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
25.	Mississippi	MS ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
26.	Missouri	MO ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
27.	Montana	MT ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
28.	Nebraska	NE ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
29.	Nevada	NV ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
30.	New Hampshire	NH ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
31.	New Jersey	NJ ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
32.	New Mexico	NM ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
33.	New York	NY ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
34.	North Carolina	NC ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
35.	North Dakota	ND ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
36.	Ohio	OH ..L..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
37.	Oklahoma	OK ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
38.	Oregon	OR ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
39.	Pennsylvania	PA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
40.	Rhode Island	RI ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
41.	South Carolina	SC ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
42.	South Dakota	SD ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
43.	Tennessee	TN ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
44.	Texas	TX ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
45.	Utah	UT ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
46.	Vermont	VT ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
47.	Virginia	VA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
48.	Washington	WA ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
49.	West Virginia	WV ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
50.	Wisconsin	WI ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
51.	Wyoming	WY ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
52.	American Samoa	AS ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
53.	Guam	GU ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
54.	Puerto Rico	PR ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
55.	U.S. Virgin Islands	VI ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
56.	Northern Mariana Islands	MP ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
57.	Canada	CAN ..N..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58.	Aggregate Other Aliens	OT ..XXX..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
59.	Subtotal	XXX	143,806	192,590,862	.....0	.....0	.....0	.....0	.....0	192,734,667	.....0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
61.	Totals (Direct Business)	XXX	143,806	192,590,862	0	0	0	0	0	192,734,667	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	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

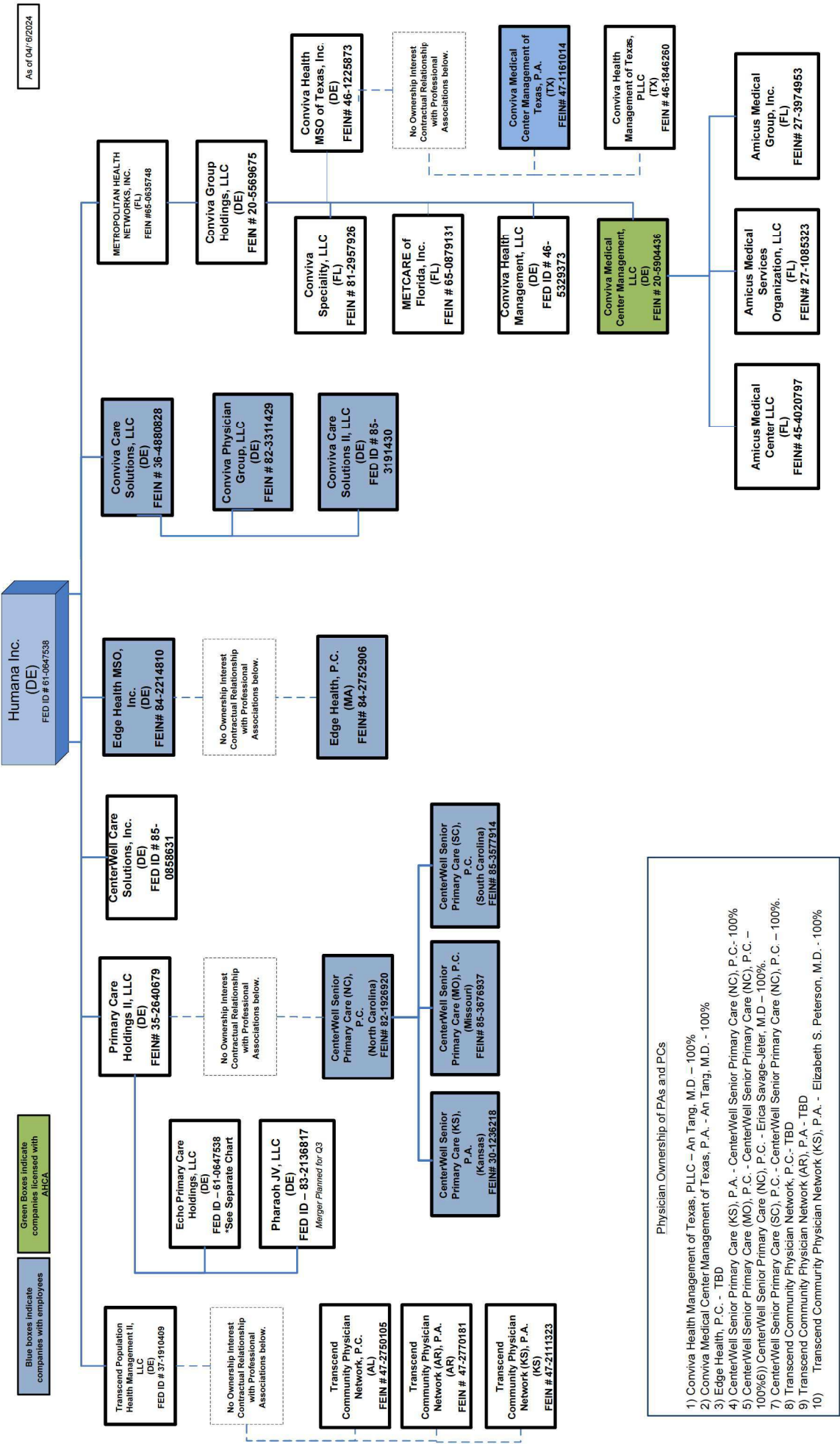
(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	2	4. Q - Qualified - Qualified or accredited reinsurer.....	0
2. R - Registered - Non-domiciled RRGs.....	0	5. N - None of the above - Not allowed to write business in the state.....	55
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.	0		

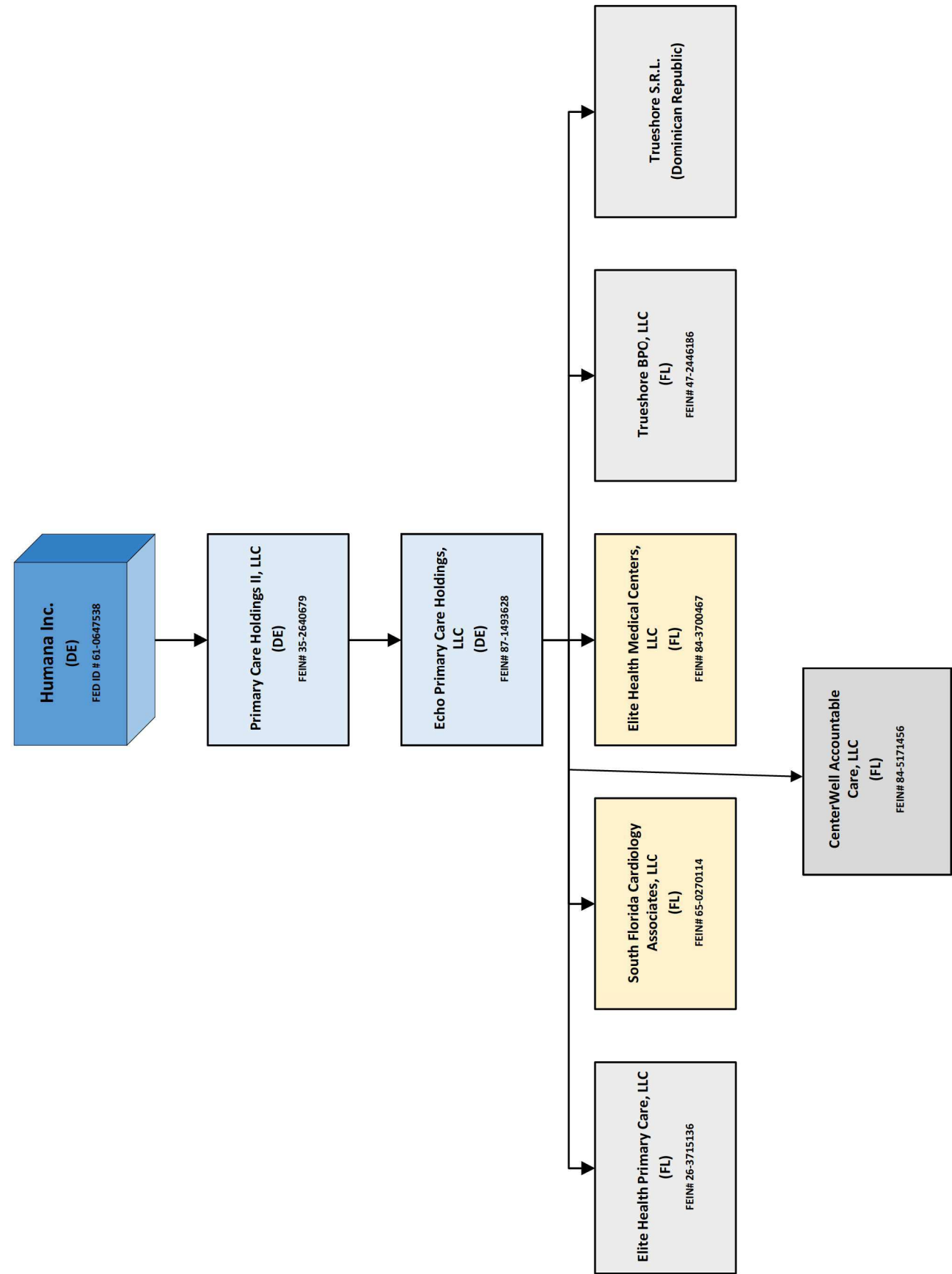
STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.



Note: Heavily Outlined Boxes indicates 100% ownership by Humana Inc.
 (†) Humana Innovation Enterprises, Inc. acquired 99% of the membership interest in One Homecare Solutions, LLC with Humana Inc. acquiring 1%. **See Separate Organizational Chart for additional subsidiaries acquired

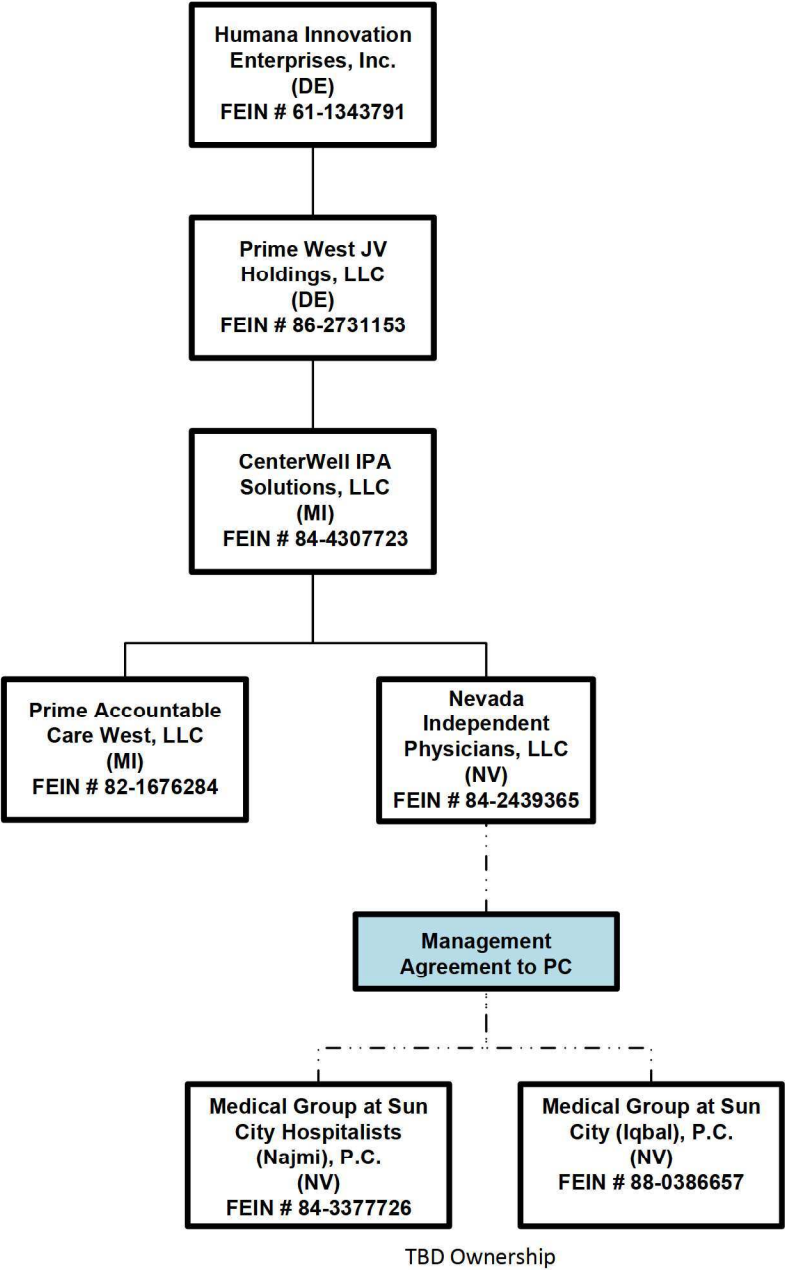


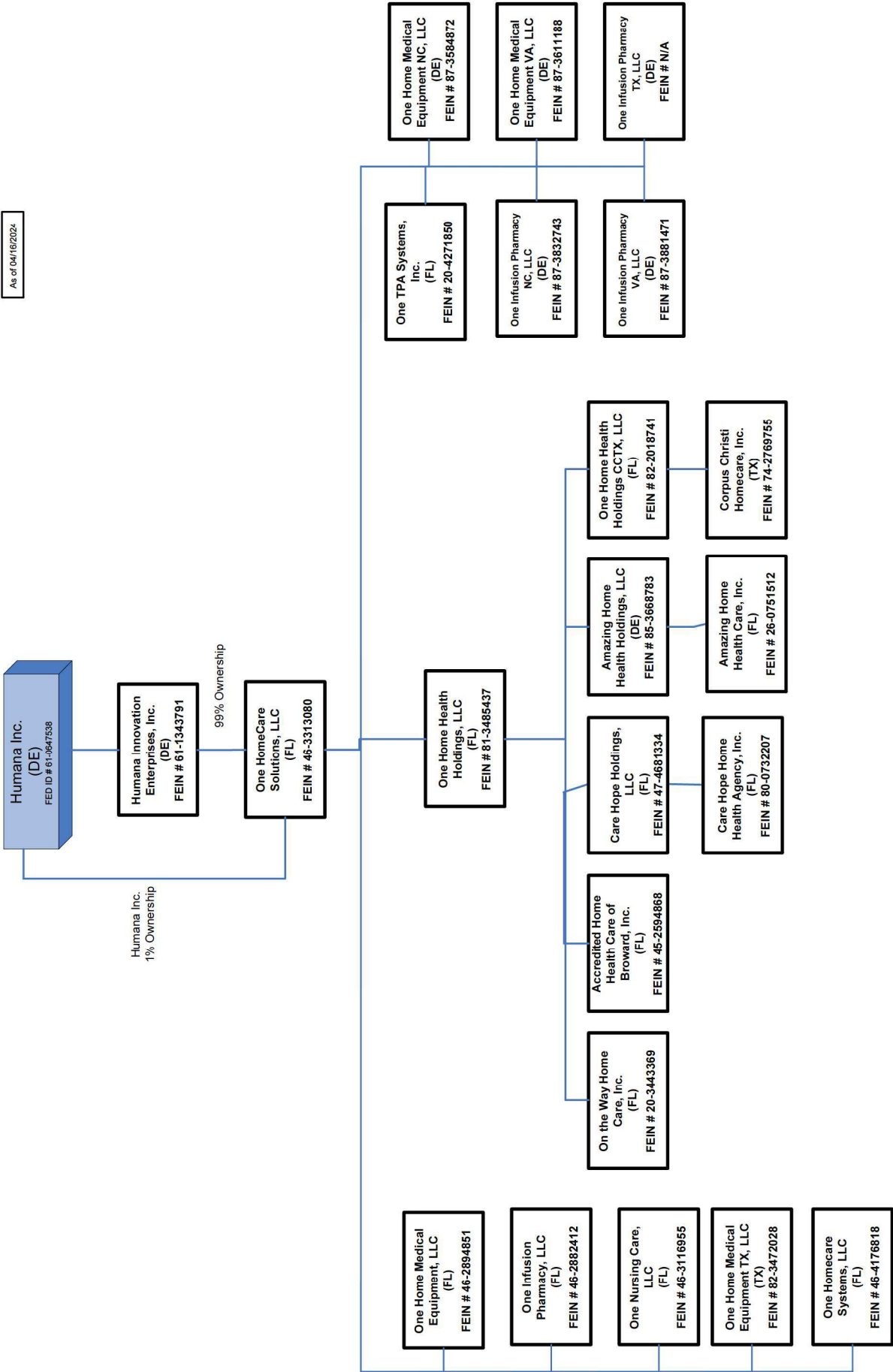
Echo Primary Care Holdings Organization Chart

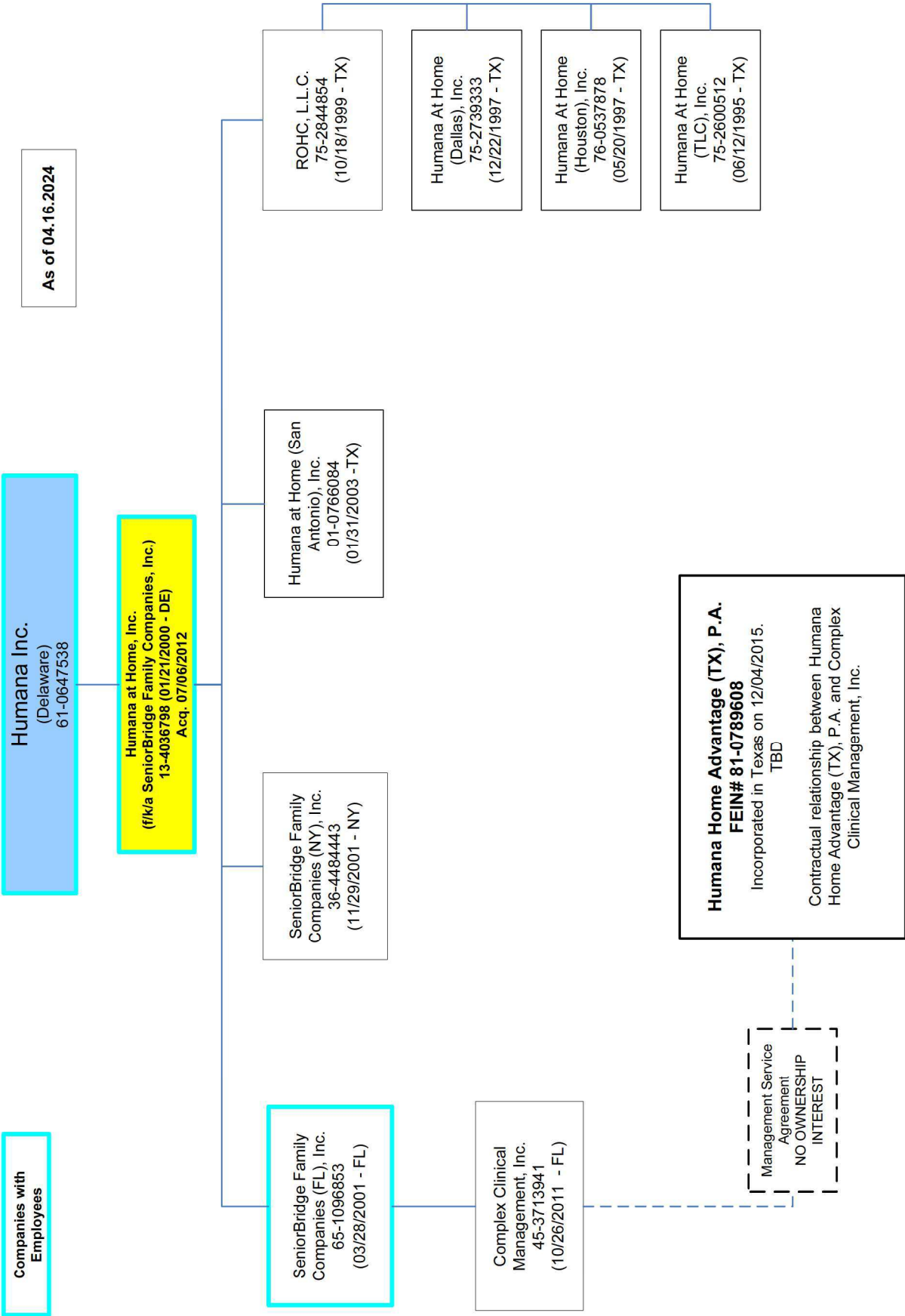


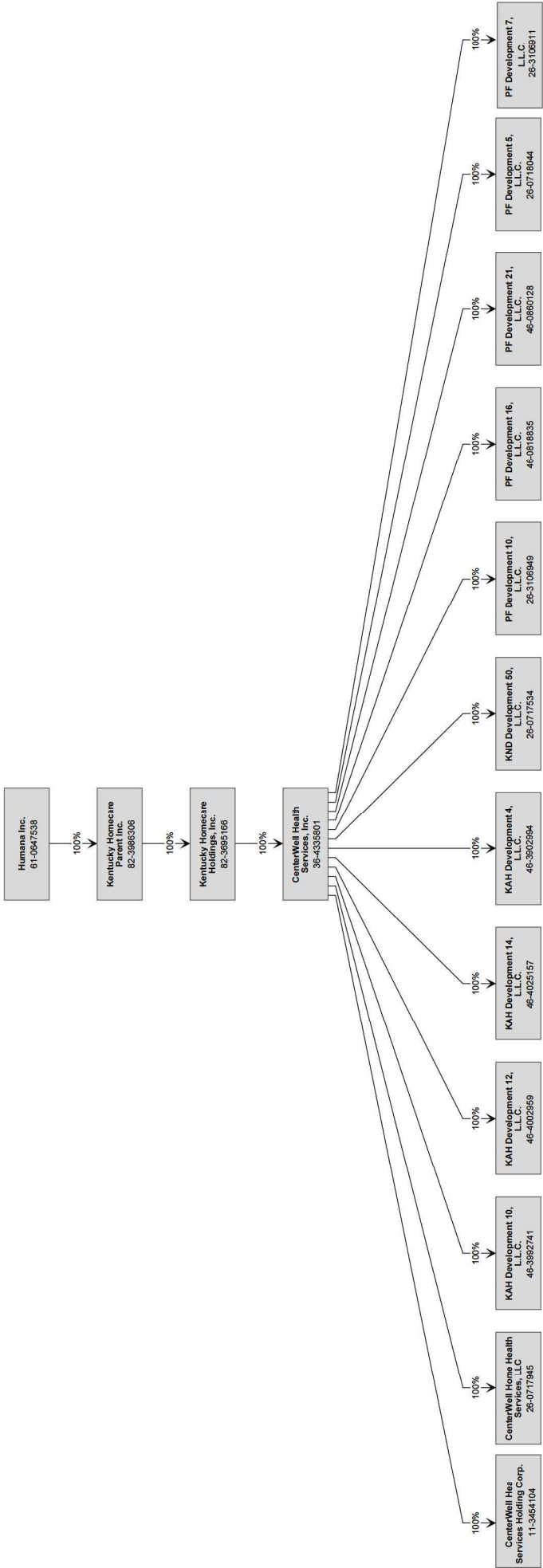
**Prime West
Organizational Chart**

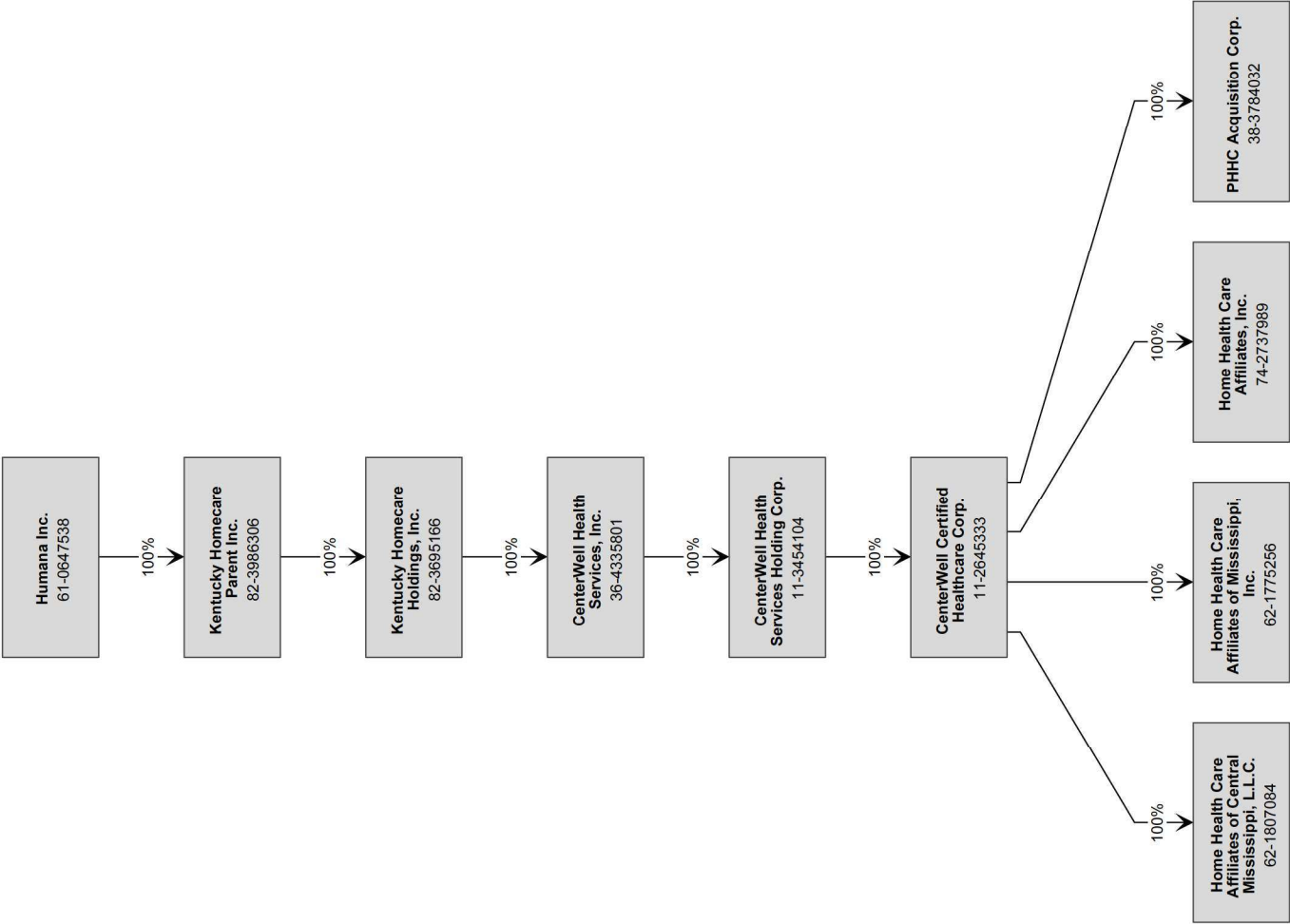
As of 04/16/2024

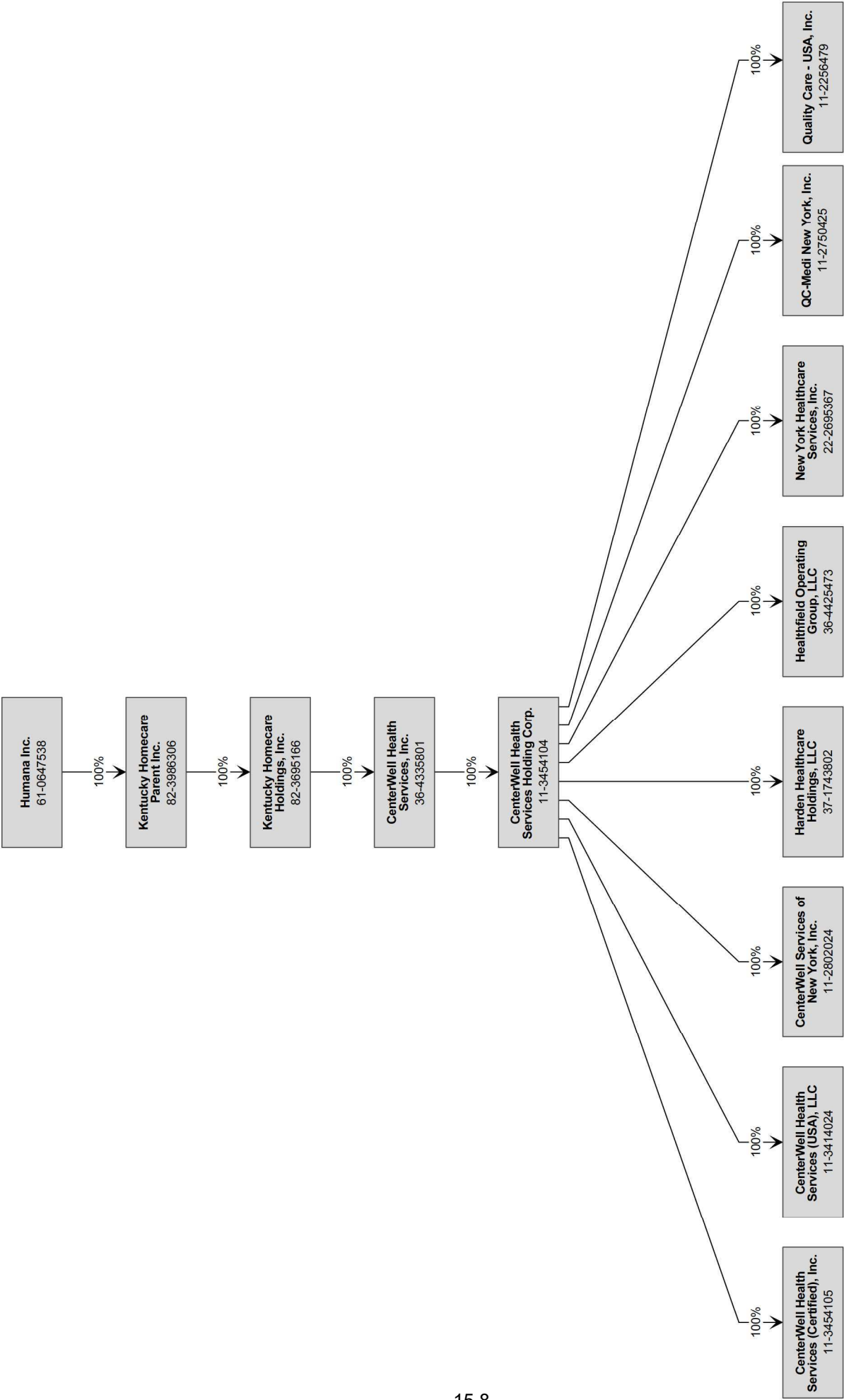


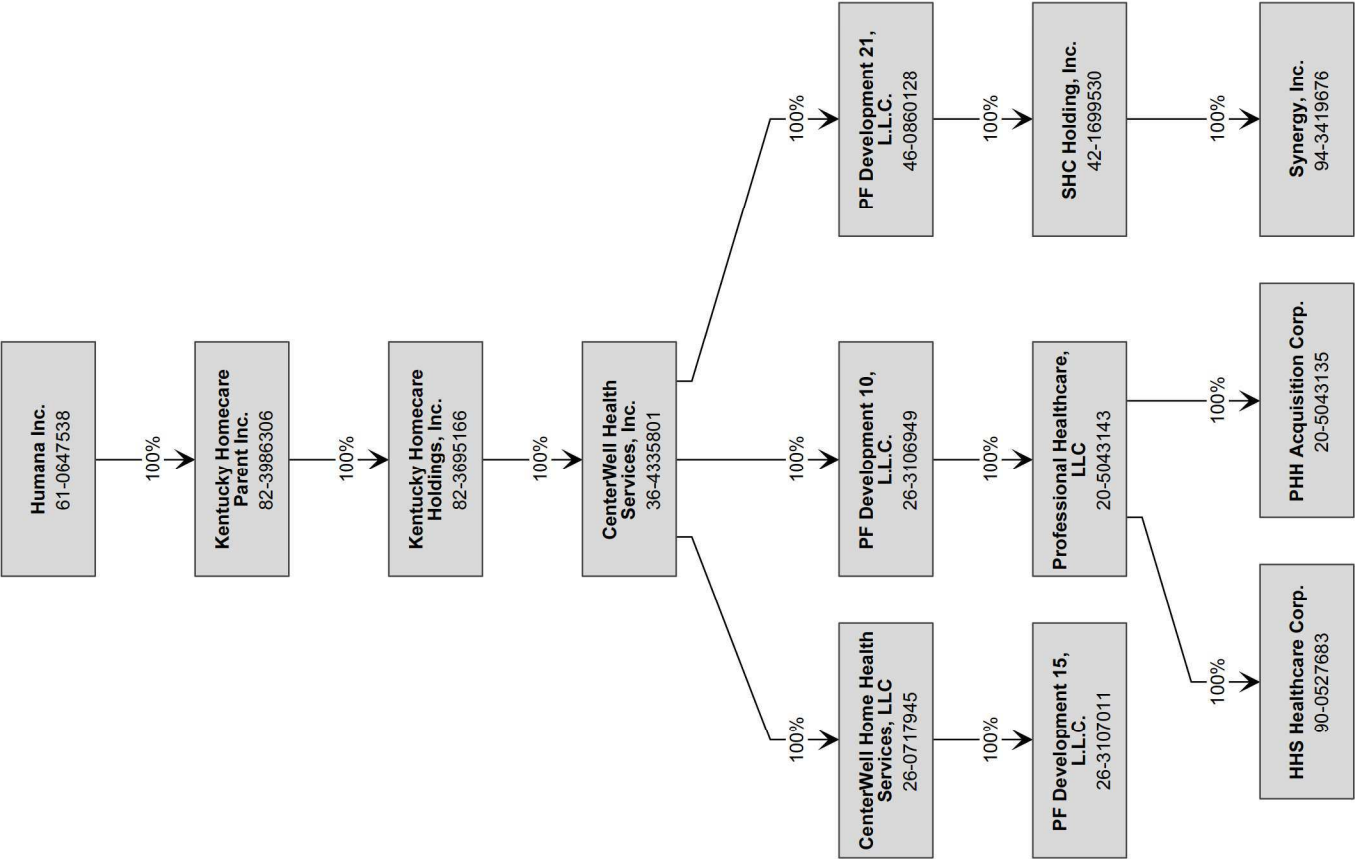


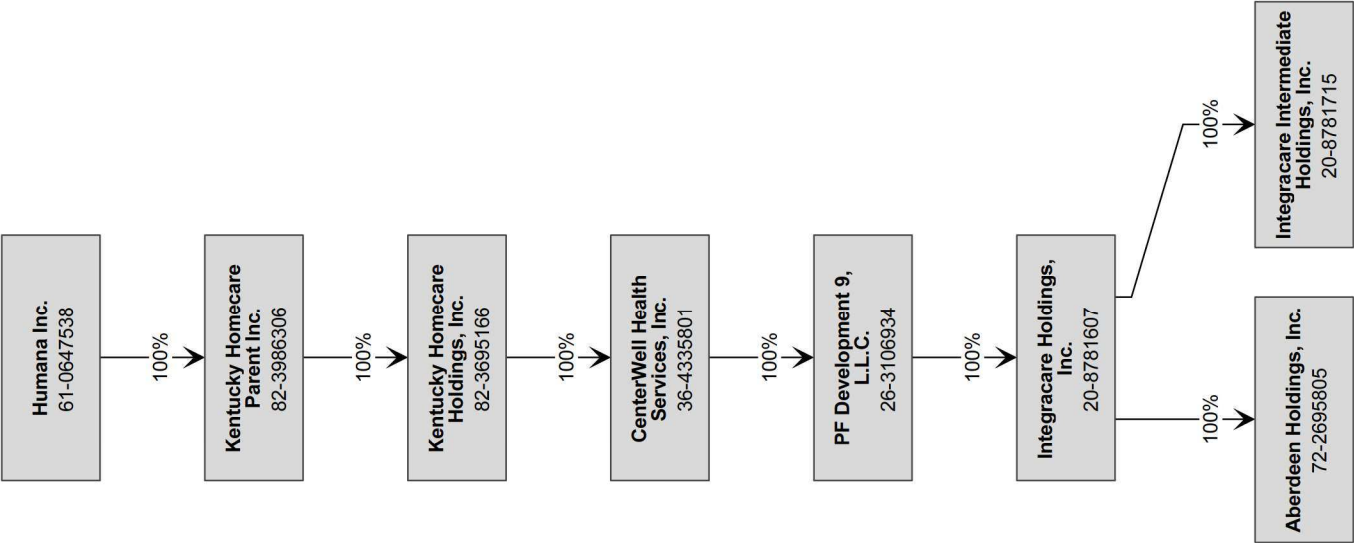


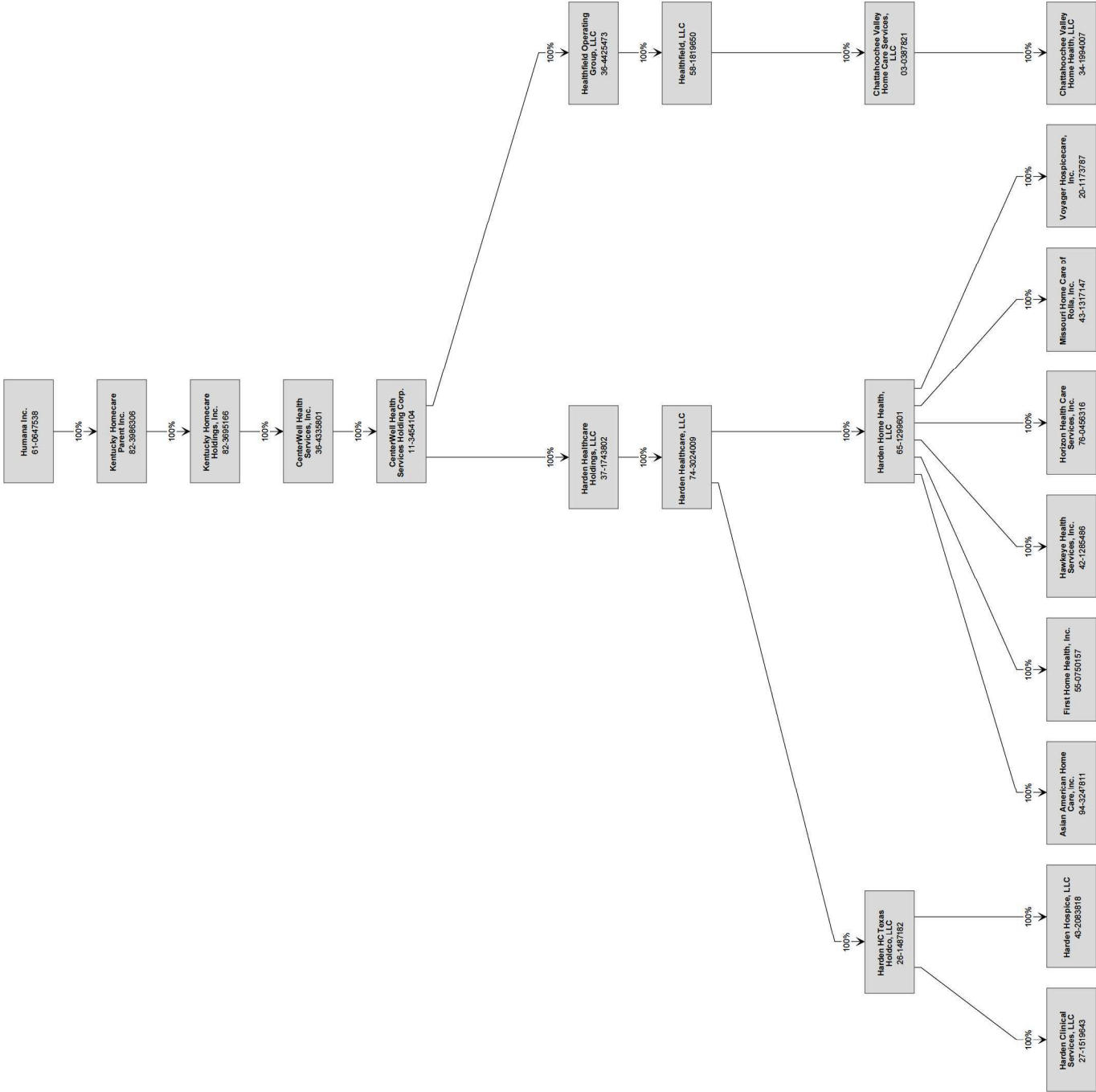


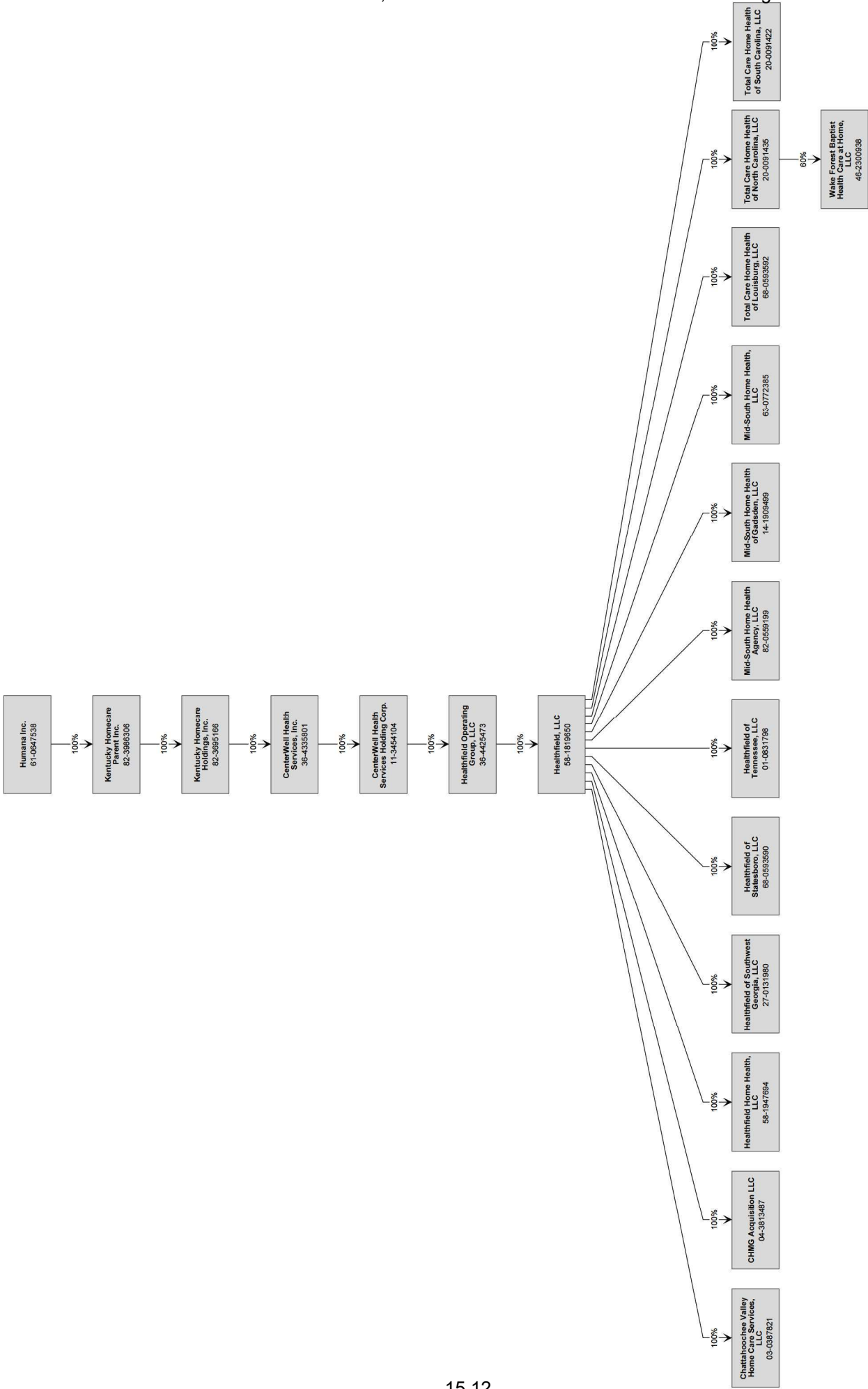


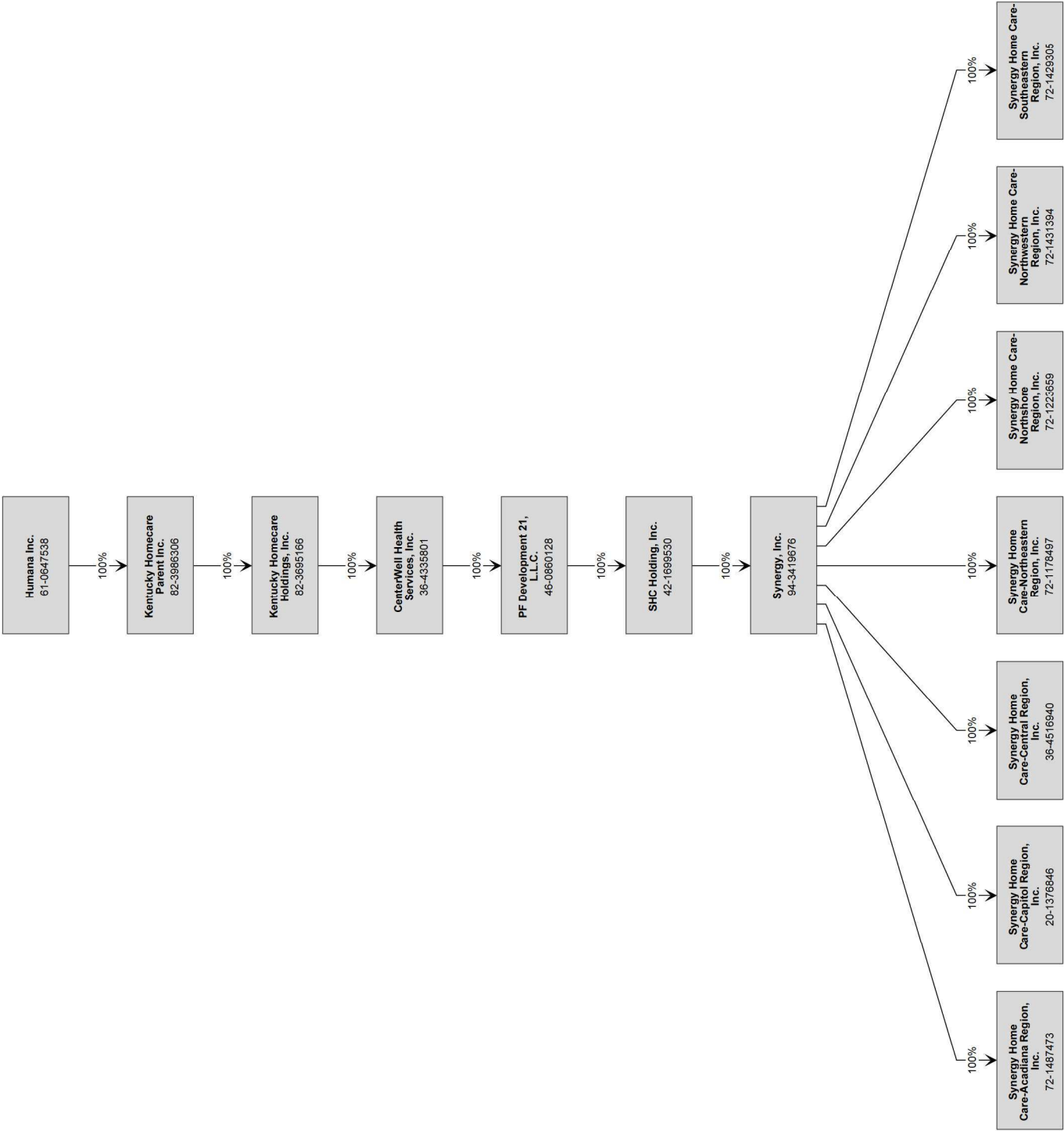


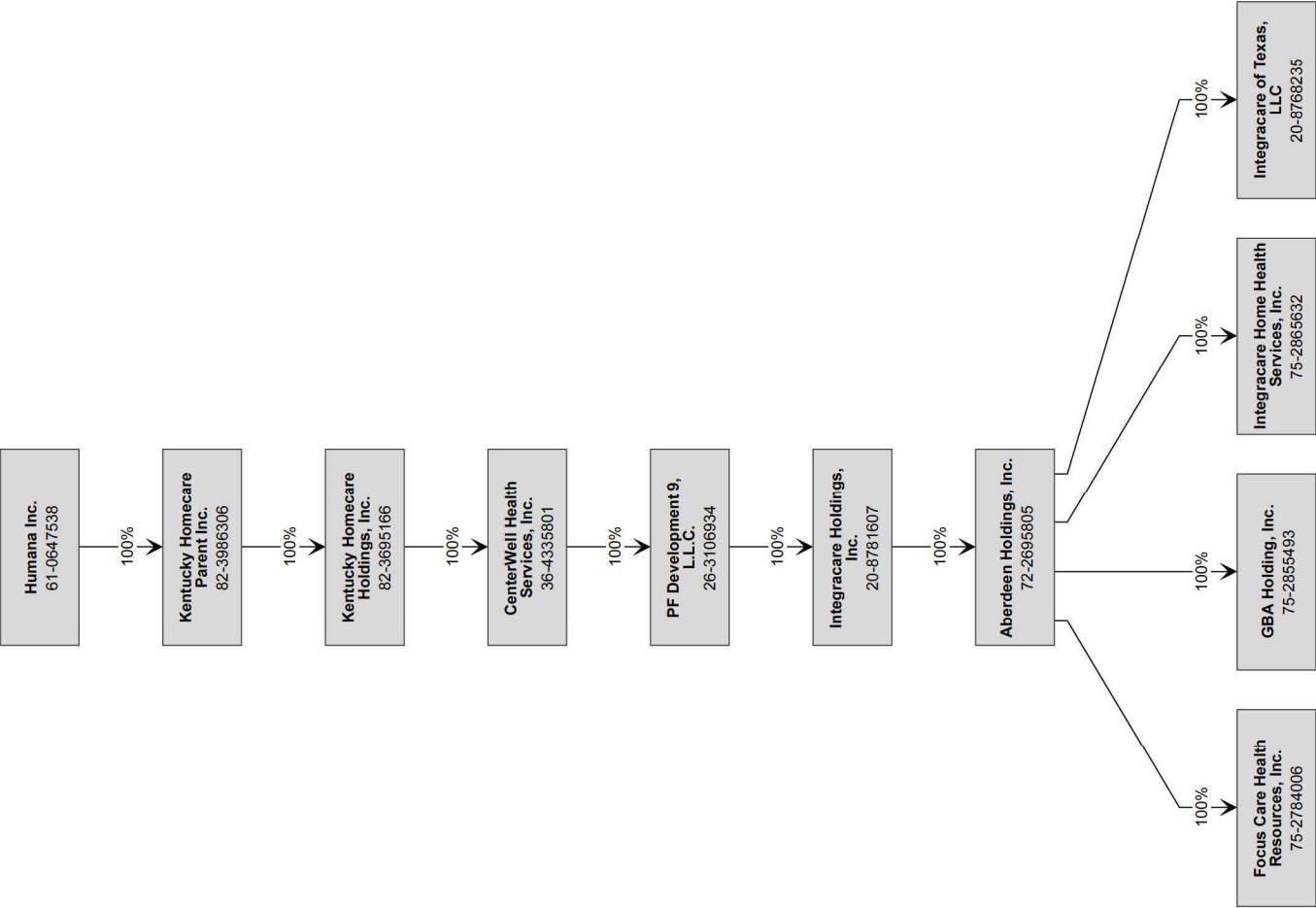


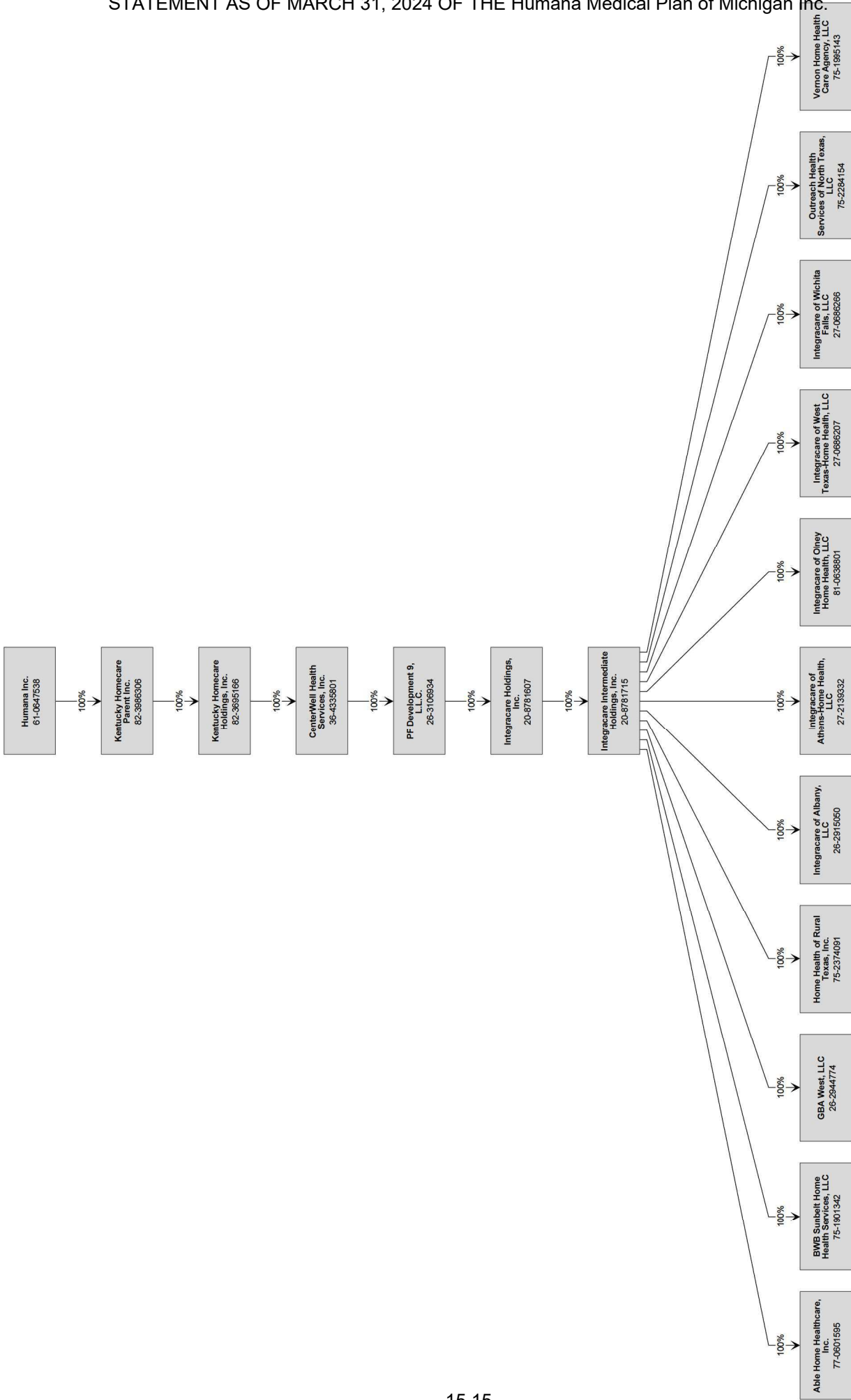


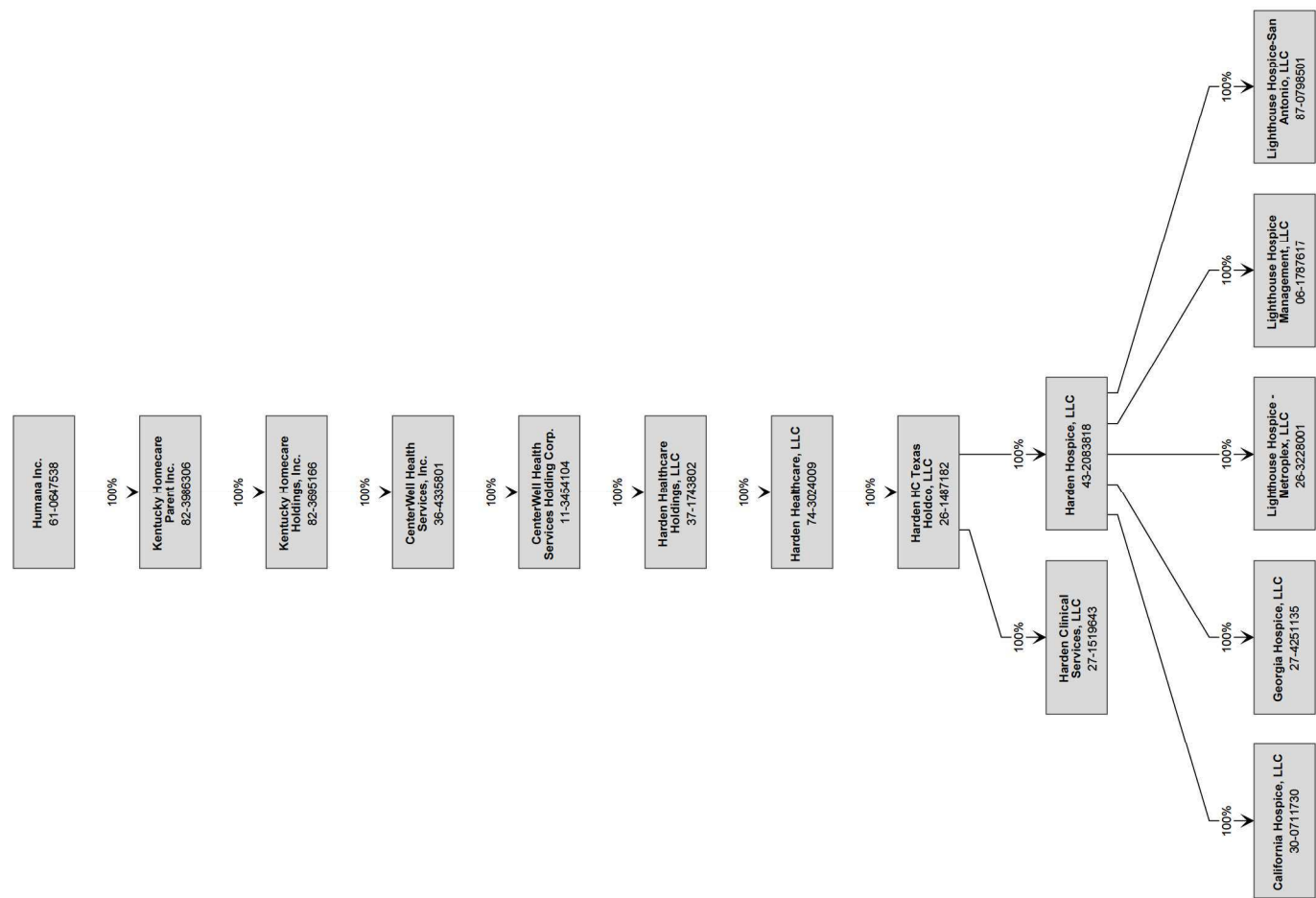


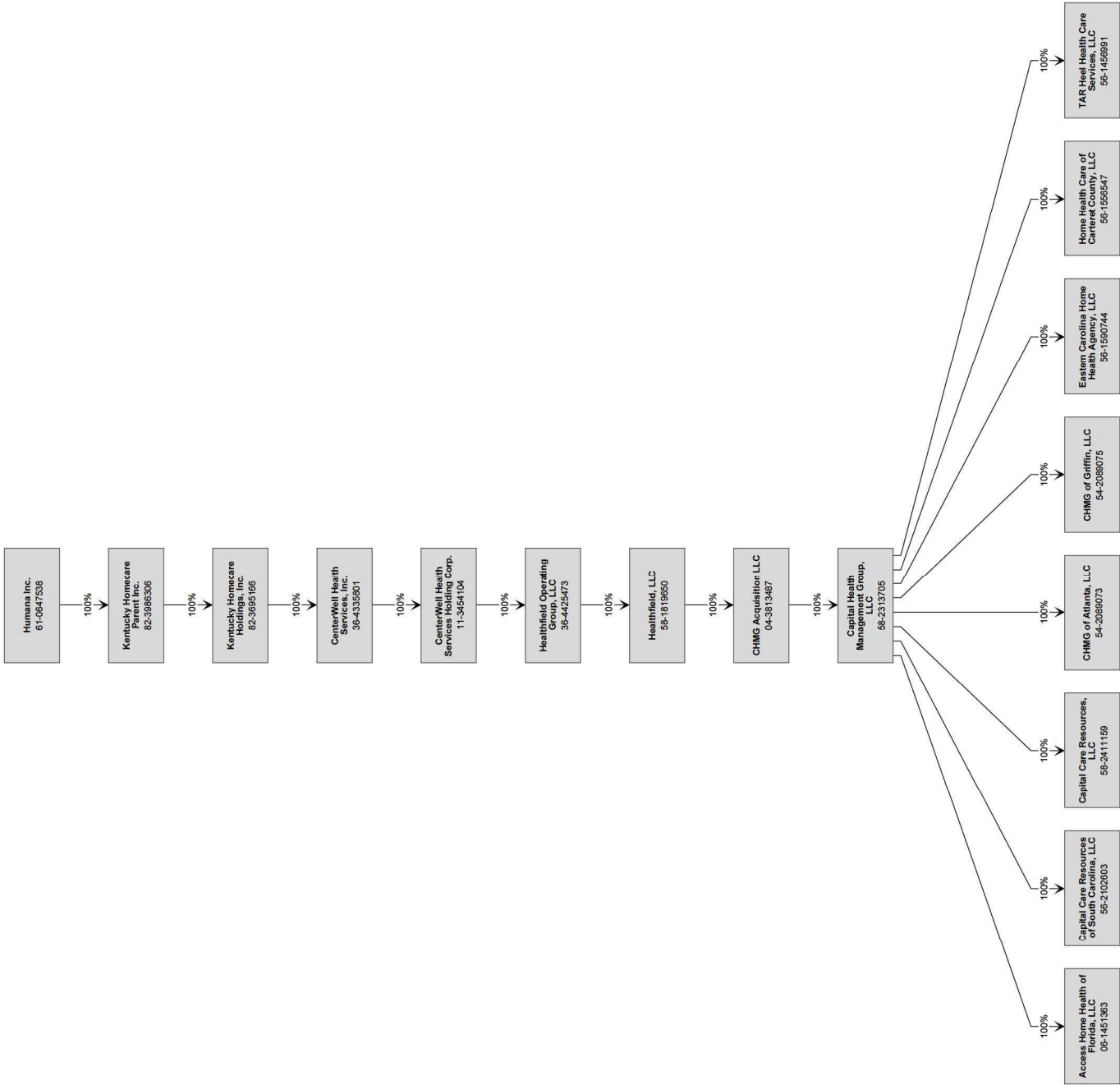


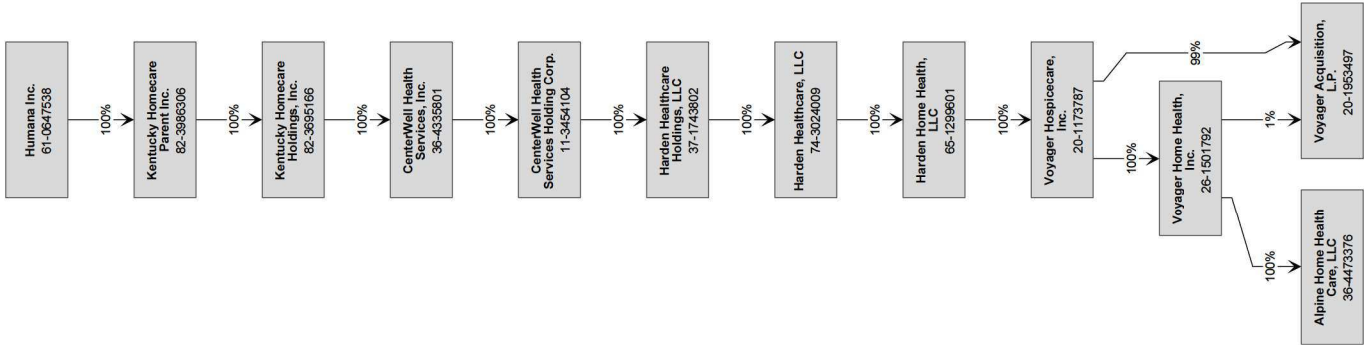


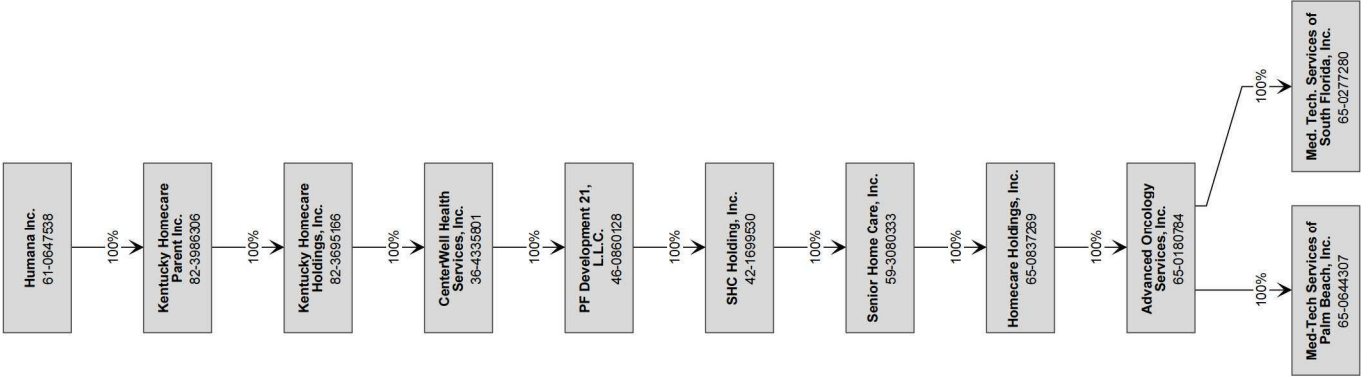












STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119	Humana Inc.	00000	20-5309363				516-526 West Main Street Condominium Council of 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	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	.. FL	..... IA	Humana Inc.	Ownership	100.000	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	..... IA	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 Corporation	.. DE	..... NIA	Humana Inc.	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	11228	36-3686002				CompBenefits Dental, Inc.	.. IL	..... IA	Dental Care Plus Management, Corp.	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	00000	58-2228951				CompBenefits Direct, Inc.	.. DE	..... NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	60984	74-2552026				CompBenefits Insurance Company	.. TX	..... IA	Humana Dental Company	Ownership	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
. 0119	Humana Inc.	00000	42-1575099				Humana Healthcare Research, Inc.	.. IL	..... NIA	Humana Inc.	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	00000	36-4880828				Conviva Care Solutions, LLC	.. DE	..... NIA	Humana Inc.	Ownership	100.000	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	..... NIA	Humana Inc.	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	00000	59-3164234				CenterWell Senior Primary Care (FL), Inc.	.. FL	..... NIA	FPG Acquisition Corp.	Ownership	100.000	Humana Inc.	.. NO	... 0
. 0119	Humana Inc.	00000	81-3802918				FPG Acquisition Corp.	.. DE	..... NIA	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	..... NIA	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	..... IA	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
							Humana Employers Health Plan of Georgia, Inc.								
. 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
							Humana Health Benefit Plan of Louisiana, Inc.								
. 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
							Humana Health Insurance Company of Florida, Inc.								
. 0119	Humana Inc.	69671	61-1041514					.. 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

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119 ...	Humana Inc.	95721	66-0406896 ..	.....	.....	.....	Humana Health Plans of Puerto Rico, Inc. ....	.. PR.....	.. IA.....	Humana Inc.	Ownership.....	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 ..	.....	.....	.....	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.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	14224	27-3991410 ..	.....	.....	.....	Humana Medical Plan of Michigan, Inc. ....	.. WI.....	.. 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.....	... 0
. 0119 ...	Humana Inc.	95270	61-1103898 ..	.....	.....	.....	Humana Medical Plan, Inc. ....	.. FL.....	.. IA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	45-2254346 ..	.....	.....	.....	Humana Pharmacy Solutions, Inc. ....	.. KY.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	61-1316926 ..	.....	.....	.....	CenterWell Pharmacy, Inc. ....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	12282	20-2036444 ..	.....	.....	.....	Humana Regional Health Plan, Inc. ....	.. AR.....	.. IA.....	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
. 0119 ...	Humana Inc.	95342	39-1525003 ..	.....	.....	.....	Humana Wisconsin Health Organization 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.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	27-4535747 ..	.....	.....	.....	Go365, LLC .....	.. DE.....	.. NIA.....	HumanaWellworks LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	61-1239538 ..	.....	.....	.....	Humco, Inc. ....	.. KY.....	.. NIA.....	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. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	86-1050795 ..	.....	.....	.....	Hummingbird Coaching Systems LLC .....	.. OH.....	.. NIA.....	Harris, Rothenberg International Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	11695	39-1769093 ..	.....	.....	.....	Independent Care Health Plan .....	.. WI.....	.. IA.....	CareNetwork, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	61-1232669 ..	.....	.....	.....	Managed Care Indemnity, Inc. ....	.. VT.....	.. IA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	20-5569675 ..	.....	.....	.....	Conviva Group Holdings, LLC .....	.. DE.....	.. NIA.....	Metropolitan Health Networks, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 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.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	62-1552091 ..	.....	.....	.....	PHP Companies, Inc. ....	.. TN.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	62-1250945 ..	.....	.....	.....	Preferred Health Partnership, Inc. ....	.. TN.....	.. NIA.....	PHP Companies, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	20-1724127 ..	.....	.....	.....	Humana Real Estate Company .....	.. KY.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	46-1225873 ..	.....	.....	.....	Conviva Health MSO of Texas, Inc. ....	.. DE.....	.. NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	75-2844854 ..	.....	.....	.....	ROHC, L.L.C. ....	.. TX.....	.. NIA.....	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	36-4484443 ..	.....	.....	.....	SeniorBridge Family Companies (NY), Inc. ....	.. NY.....	.. NIA.....	Humana at Home, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	01-0766084 ..	.....	.....	.....	Humana At Home (San Antonio), Inc. ....	.. TX.....	.. NIA.....	Humana at Home, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	74-2352809 ..	.....	.....	.....	Texas Dental Plans, Inc. ....	.. TX.....	.. NIA.....	Humana Dental Company	Ownership.....	100.000 ...	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
. 0119 ...	Humana Inc.	00000	80-0072760 ..	.....	.....	.....	Humana Digital Health and Analytics Platform Services, Inc. ....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	46-5329373 ..	.....	.....	.....	Conviva Health Management, LLC .....	.. DE.....	.. NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	66-0872725 ..	.....	.....	.....	Humana Management Services of Puerto Rico, Inc. ....	.. PR.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc.	00000	83-3321367 ..	.....	.....	.....	North Region Providers, LLC .....	.. DE.....	.. NIA.....	Humana Government Business, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119 ...	Humana Inc. ....	.... 00000	35-2640679 ..				Primary Care Holdings II, LLC .....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	37-1910409 ..				Transcend Population Health Management II, 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. ....	.... NO.....	.... 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.....	.. NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-1407967 ..				Eagle Rx Holdco, Inc. ....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-1416614 ..				Eagle Rx, Inc. ....	.. DE.....	.. NIA.....	Eagle Rx Holdco, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	23-3068914 ..				Enclara Pharmacia, Inc. ....	.. DE.....	.. NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	39-1789830 ..				GuidantRx, Inc. ....	.. WI.....	.. NIA.....	PBM Holding Company	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	61-1340806 ..				PBM Holding Co. ....	.. DE.....	.. NIA.....	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.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	85-3191430 ..				Conviva Care Solutions II, LLC .....	.. DE.....	.. NIA.....	Conviva Care Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	85-3099097 ..				Humana Direct Contracting Entity, Inc. ....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	85-0858631 ..				CenterWell Care Solutions, Inc. ....	.. DE.....	.. NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	87-1493628 ..				Echo Primary Care Holdings, LLC .....	.. DE.....	.. NIA.....	Primary Care Holdings II, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	45-2594868 ..				Accredited Home Health of Broward, Inc. ....	.. FL.....	.. NIA.....	One Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	26-0751512 ..				Amazing Home Health Care, Inc. ....	.. FL.....	.. NIA.....	Amazing Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	85-3668783 ..				Amazing Home Health Holdings, LLC .....	.. DE.....	.. NIA.....	One Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-4681334 ..				Care Hope Holdings, Inc. ....	.. FL.....	.. NIA.....	One Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	80-0732207 ..				Care Hope Home Health Agency, Inc. ....	.. FL.....	.. NIA.....	Care Hope Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	74-2769755 ..				Corpus Christi Home Care, Inc. ....	.. TX.....	.. NIA.....	One Home Health Holdings CCTX, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-3443369 ..				On the Way Home Care, Inc. ....	.. FL.....	.. NIA.....	One Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	81-3485437 ..				One Home Health Holdings, LLC .....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	82-2018741 ..				One Home Health Holdings CCTX, LLC .....	.. TX.....	.. NIA.....	One Home Health Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-2894851 ..				One Home Medical Equipment, LLC .....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	82-3472028 ..				One Home Medical Equipment TX, LLC .....	.. TX.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-3116955 ..				One Nursing Care, LLC .....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-3313080 ..				One Homecare Solutions, LLC .....	.. FL.....	.. NIA.....	Humana Inc. - 1%	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-4176818 ..				One Homecare Systems, LLC .....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-2882412 ..				One Infusion Pharmacy, LLC .....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-4271850 ..				One TPA Systems, Inc. ....	.. FL.....	.. NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	83-2136817 ..				Pharaoh JV, LLC .....	.. DE.....	.. NIA.....	Primary Care Holdings II, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	72-2695805 ..				Aberdeen Holdings, Inc. ....	.. TX.....	.. NIA.....	Integracare Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	77-0601595 ..				Able Home Healthcare, Inc. ....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	66-1451363 ..				Access Home Health of Florida, LLC .....	.. DE.....	.. NIA.....	Capital Health Management Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	65-0180784 ..				Advanced Oncology Services, Inc. ....	.. FL.....	.. NIA.....	Homecare Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	36-4473376 ..				Alpine Home Health Care, LLC .....	.. CO.....	.. NIA.....	Voyager Home Health, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	11-3306095 ..				American Homecare Management Corp. ....	.. DE.....	.. NIA.....	Missouri Home Care of Rolla, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	94-3247811 ..				Asian American Home Care, Inc. ....	.. CA.....	.. NIA.....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	75-1901342 ..				BWB Sunbelt Home Health Services, LLC .....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	30-0711730 ..				California Hospice, LLC .....	.. TX.....	.. NIA.....	Harden Hospice, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	56-2102603 ..				Capital Care Resources of South Carolina, LLC .....	.. GA.....	.. NIA.....	Capital Health Management Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	58-2411159 ..				Capital Care Resources, LLC .....	.. GA.....	.. NIA.....	Capital Health Management Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.... 00000	58-2313705 ..				Capital Health Management Group, LLC .....	.. GA.....	.. NIA.....	CHMG Acquisition LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119	Humana Inc. ....	.... 00000	03-0387821 ..	.....	.....	.....	Chattahoochee Valley Home Care Services, LLC ..	.. GA.....	..... NIA.....	Healthfield, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	34-1994007 ..	.....	.....	.....	Chattahoochee Valley Home Health, LLC .....	.. GA.....	..... NIA.....	Chattahoochee Valley Home Care Services, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	04-3813487 ..	.....	.....	.....	CHMG Acquisition LLC .....	.. GA.....	..... NIA.....	Healthfield, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	54-2089073 ..	.....	.....	.....	CHMG of Atlanta, LLC .....	.. GA.....	..... NIA.....	Capital Health Management Group, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	54-2089075 ..	.....	.....	.....	CHMG of Griffin, LLC .....	.. GA.....	..... NIA.....	Capital Health Management Group, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	56-1590744 ..	.....	.....	.....	Eastern Carolina Home Health Agency, LLC ....	.. NC.....	..... NIA.....	Capital Health Management Group, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	55-0750157 ..	.....	.....	.....	First Home Health, Inc. ....	.. WV.....	..... NIA.....	Harden Home Health, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 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	75-2855493 ..	.....	.....	.....	GBA Holding, Inc. ....	.. TX.....	..... NIA.....	Aberdeen Holdings, Inc.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	26-2944774 ..	.....	.....	.....	First Home Health, Inc. ....	.. 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.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	11-3454105 ..	.....	.....	.....	CenterWell Health Services (Certified), Inc. ....	.. 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.....	.. 100.000	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. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	36-4335801 ..	.....	.....	.....	CenterWell Health Services, Inc. ....	.. DE.....	..... NIA.....	Kentucky Homecare Holdings, Inc.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	11-2802024 ..	.....	.....	.....	CenterWell Services of New York, Inc. ....	.. NY.....	..... NIA.....	CenterWell Health Services Holding Corp. ..	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	27-4251135 ..	.....	.....	.....	Georgia Hospice, LLC .....	.. TX.....	..... NIA.....	Harden Hospice, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 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.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	26-1487182 ..	.....	.....	.....	Harden HC Texas Holdco, LLC .....	.. TX.....	..... NIA.....	Harden Healthcare, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	37-1743802 ..	.....	.....	.....	Harden Healthcare Holdings, LLC .....	.. DE.....	..... NIA.....	CenterWell Health Services Holding Corp. ..	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	74-3024009 ..	.....	.....	.....	Harden Healthcare, LLC .....	.. TX.....	..... NIA.....	Harden Healthcare Holdings, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	65-1299601 ..	.....	.....	.....	Harden Home Health, LLC .....	.. DE.....	..... NIA.....	Harden Healthcare, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 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. ....	... NO.....	... 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.....	... 0
. 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.....	..... NIA.....	Healthfield, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	36-4425473 ..	.....	.....	.....	Healthfield Operating Group, LLC .....	.. DE.....	..... NIA.....	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. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	90-0527683 ..	.....	.....	.....	HHS Healthcare Corp. ....	.. DE.....	..... NIA.....	Professional Healthcare, LLC	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	62-1807084 ..	.....	.....	.....	Home Health Care Affiliates of Central Mississippi, L.L.C. ....	.. MS.....	..... NIA.....	CenterWell Certified Healthcare Corp.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	62-1775256 ..	.....	.....	.....	Home Health Care Affiliates of Mississippi, Inc. ....	.. MS.....	..... NIA.....	CenterWell Certified Healthcare Corp.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	74-2737989 ..	.....	.....	.....	Home Health Care Affiliates, Inc. ....	.. MS.....	..... NIA.....	CenterWell Certified Healthcare Corp.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 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.....	..... NIA.....	HHS Healthcare Corp.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	65-0837269 ..	.....	.....	.....	Homecare Holdings, Inc. ....	.. FL.....	..... NIA.....	Senior Home Care, Inc.	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 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.....	..... NIA.....	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.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	26-2915050 ..	.....	.....	.....	Integracare of Albany, LLC .....	.. TX.....	..... NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0
. 0119	Humana Inc. ....	.... 00000	27-2139332 ..	.....	.....	.....	Integracare of Athens-Home Health, LLC .....	.. TX.....	..... NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	.. 100.000	Humana Inc. ....	... NO.....	... 0

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119 ...	Humana Inc. ....	.....00000	81-0638801 ..	.....	.....	.....	Integracare of Olney Home Health, LLC .....	.. TX.....	.....NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	20-8768235 ..	.....	.....	.....	Integracare of Texas, LLC .....	.. TX.....	.....NIA.....	Aberdeen Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	27-0686207 ..	.....	.....	.....	Integracare of West Texas-Home Health, LLC ..	.. TX.....	.....NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	27-0686266 ..	.....	.....	.....	Integracare of Wichita Falls, LLC .....	.. TX.....	.....NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	46-3992741 ..	.....	.....	.....	KAH Development 10, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	46-4002959 ..	.....	.....	.....	KAH Development 12, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	46-4025157 ..	.....	.....	.....	KAH Development 14, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	46-3902994 ..	.....	.....	.....	KAH Development 4, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	82-3695166 ..	.....	.....	.....	Kentucky Homecare Holdings, Inc. ....	.. DE.....	.....NIA.....	Kentucky Homecare Parent Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	82-3986306 ..	.....	.....	.....	Kentucky Homecare Parent Inc. ....	.. DE.....	.....NIA.....	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.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	26-0717534 ..	.....	.....	.....	KND Development 50, L.L.C. ....	.. DE.....	.....NIA.....	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.....	100.000 ...	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.....	.... 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.....	.....NIA.....	Horizon Health Network LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	14-1909499 ..	.....	.....	.....	Mid-South Home Health of Gadsden, LLC .....	.. GA.....	.....NIA.....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	63-0772385 ..	.....	.....	.....	Mid-South Home Health, LLC .....	.. DE.....	.....NIA.....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	65-1285069 ..	.....	.....	.....	Missouri Home Care of Rolla, Inc. ....	.. MO.....	.....NIA.....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	22-2695367 ..	.....	.....	.....	New York Healthcare Services, Inc. ....	.. NY.....	.....NIA.....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	55-0633030 ..	.....	.....	.....	Nursing Care-Home Health Agency, Inc. ....	.. WV.....	.....NIA.....	First Home Health, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	75-2284154 ..	.....	.....	.....	Outreach Health Services of North Texas, LLC ..	.. TX.....	.....NIA.....	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.....	.....NIA.....	Kindred Hospice Services, L.L.C.	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.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	46-0860128 ..	.....	.....	.....	PF Development 21, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	26-0718044 ..	.....	.....	.....	PF Development 5, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	26-3106911 ..	.....	.....	.....	PF Development 7, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	26-3106934 ..	.....	.....	.....	PF Development 9, L.L.C. ....	.. DE.....	.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	75-2378887 ..	.....	.....	.....	PHH Acquisition Corp. ....	.. DE.....	.....NIA.....	Professional Healthcare, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	33-1178066 ..	.....	.....	.....	PHHC Acquisition Corp. ....	.. DE.....	.....NIA.....	CenterWell Certified Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	20-5143963 ..	.....	.....	.....	Professional Healthcare at Home, LLC .....	.. CA.....	.....NIA.....	99% owned by Professional Healthcare, LLC and 1% owned by PHH Acquisition Corp.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	20-5043143 ..	.....	.....	.....	Professional Healthcare, LLC .....	.. DE.....	.....NIA.....	PF Development 10, L.L.C.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	11-2750425 ..	.....	.....	.....	QC-Medi New York, Inc. ....	.. NY.....	.....NIA.....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	11-2256479 ..	.....	.....	.....	Quality Care – USA, Inc. ....	.. NY.....	.....NIA.....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	59-3080333 ..	.....	.....	.....	Senior Home Care, Inc. ....	.. FL.....	.....NIA.....	SHC Holding, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	42-1699530 ..	.....	.....	.....	SHC Holding, Inc. ....	.. DE.....	.....NIA.....	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.....	.....NIA.....	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.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	36-4516940 ..	.....	.....	.....	Synergy Home Care-Central Region, Inc. ....	.. LA.....	.....NIA.....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	72-1178497 ..	.....	.....	.....	Synergy Home Care-Northeastern Region, Inc. ....	.. LA.....	.....NIA.....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	72-1223659 ..	.....	.....	.....	Synergy Home Care-Northshore Region, Inc. ...	.. LA.....	.....NIA.....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	.....00000	72-1431394 ..	.....	.....	.....	Synergy Home Care-Northwestern Region, Inc. ....	.. LA.....	.....NIA.....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119 ...	Humana Inc. ....	.... 00000	72-1429305 ..	.....	.....	.....	Synergy Home Care-Southeastern Region, Inc. ....	.. LA.....	NIA.....	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 ....	.. GA.....	NIA.....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-0091435 ..	.....	.....	.....	Total Care Home Health of North Carolina, LLC ..	.. GA.....	NIA.....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-0091422 ..	.....	.....	.....	Total Care Home Health of South Carolina, LLC ..	.. GA.....	NIA.....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	62-1669388 ..	.....	.....	.....	Van Winkle Home Health Care, Inc. ....	.. MS.....	NIA.....	Home Health Care Affiliates, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	75-1995143 ..	.....	.....	.....	Vernon Home Health Care Agency, LLC ....	.. TX.....	NIA.....	Integracare Intermediate Holdings, Inc. ...	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-1953497 ..	.....	.....	.....	Voyager Acquisition, L.P. ....	.. TX.....	NIA.....	1% by Voyager Home Health, Inc. and 99% by Voyager Hospicecare, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	26-1501792 ..	.....	.....	.....	Voyager Home Health, Inc. ....	.. DE.....	NIA.....	Voyager Hospicecare, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-1173787 ..	.....	.....	.....	Voyager Hospicecare, Inc. ....	.. DE.....	NIA.....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	46-2300938 ..	.....	.....	.....	Wake Forest Baptist Health Care at Home, LLC ..	.. NC.....	NIA.....	60% owned by Total Care Home Health of North Carolina, LLC and 40% owned by Wake Forest University Baptist Medical Center .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	84-3700467 ..	.....	.....	.....	Elite Health Medical Centers, LLC ....	.. FL.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	26-3715136 ..	.....	.....	.....	Elite Health Primary Care, LLC ....	.. FL.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	65-0270114 ..	.....	.....	.....	South Florida Cardiology Associates, LLC ....	.. FL.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-2446186 ..	.....	.....	.....	Trueshore BPO, LLC ....	.. FL.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	84-5171456 ..	.....	.....	.....	Trueshore S.R. I. ....	.. DOM.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	87-3584872 ..	.....	.....	.....	CenterWell Accountable Care, LLC ....	.. FL.....	NIA.....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	87-3611188 ..	.....	.....	.....	One Home Medical Equipment NC, LLC ....	.. DE.....	NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	87-3832743 ..	.....	.....	.....	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.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	27-3974953 ..	.....	.....	.....	Amicus Medical Group, Inc. ....	.. FL.....	NIA.....	Conviva Medical Center Management, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	27-1085323 ..	.....	.....	.....	Amicus Medical Services Organization, LLC ...	.. FL.....	NIA.....	Conviva Medical Center Management, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-1078045 ..	.....	.....	.....	Hospice Pharmacy Solutions, LLC ....	.. DE.....	NIA.....	HP Solutions Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-5418599 ..	.....	.....	.....	HP Solutions Holdings, LLC ....	.. DE.....	NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	32-0351697 ..	.....	.....	.....	Outcome Resources, LLC ....	.. DE.....	NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	88-3465849? ..	.....	.....	.....	Innovative Financial Group Holdings, LLC ....	.. NC.....	NIA.....	Humana MarketPOINT, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	83-2232570? ..	.....	.....	.....	Innovative Financial Partners, LLC ....	.. NC.....	NIA.....	Innovative Financial Group Holdings, LLC .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	84-5189010? ..	.....	.....	.....	Medicare Planning of America LLC ....	.. NC.....	NIA.....	Innovative Financial Group Holdings, LLC .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	47-4085710? ..	.....	.....	.....	Rees Financial LLC ....	.. NC.....	NIA.....	Innovative Financial Group Holdings, LLC .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	84-2258899? ..	.....	.....	.....	The Lead Store LLC ....	.. NC.....	NIA.....	Innovative Financial Group Holdings, LLC .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	82-4202700 ..	.....	.....	.....	Versa Management LLC ....	.. NC.....	NIA.....	Innovative Financial Group Holdings, LLC .	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	86-2731153 ..	.....	.....	.....	Prime West JV Holdings, LLC ....	.. DE.....	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, LLC ....	.. MI.....	NIA.....	CenterWell IPA Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	84-2439365 ..	.....	.....	.....	Nevada Independent Physicians, LLC ....	.. NV.....	NIA.....	CenterWell IPA Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	03-0523544 ..	.....	.....	.....	A and A Homecare, Inc ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	45-2401497 ..	.....	.....	.....	All About Home Care Management, LLC ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	11-3836040 ..	.....	.....	.....	Altercare of Palm Beach County, LLC ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-0110337 ..	.....	.....	.....	Altercare, LLC ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-7287186 ..	.....	.....	.....	Balanced Home Healthcare, Inc. ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0
. 0119 ...	Humana Inc. ....	.... 00000	20-1903568 ..	.....	.....	.....	Bridges Home Health, Inc. ....	.. FL.....	NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	... 0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0119 ...	Humana Inc. ....	..... 00000	46-3433197 ..	.....	.....	.....	Medstar Home Health, LLC .....	.. FL.....	..... NIA.....	Trident Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	20-5123865 ..	.....	.....	.....	M-SAC, Inc. ....	.. FL.....	..... NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	45-2823888 ..	.....	.....	.....	Quality Living Home Health Care, LLC .....	.. FL.....	..... NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	35-2486995 ..	.....	.....	.....	Trident Home Health, LLC .....	.. FL.....	..... NIA.....	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 .....	.. DE.....	..... NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	81-3442232 ..	.....	.....	.....	Trilogy Home Healthcare of NE FL, Inc .....	.. DE.....	..... NIA.....	Vitality Home Care, Inc	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	81-2022629 ..	.....	.....	.....	Vitality HHS Holdings, Inc .....	.. DE.....	..... NIA.....	CenterWell Health Services (USA), LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	81-2019673 ..	.....	.....	.....	Vitality Home Care, Inc .....	.. DE.....	..... NIA.....	Vitality HHS Holdings, Inc	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000 ....	.....	.....	.....	.....	One Infusion Pharmacy (TX), LLC .....	.. DE.....	..... NIA.....	One HomeCare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0
. 0119 ...	Humana Inc. ....	..... 00000	82-3311429 ..	.....	.....	.....	Conviva Physician Group, LLC .....	.. FL.....	..... NIA.....	Conviva Care Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.... NO.....	.... 0

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.

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.

Bar Code:

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



NONE

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended 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 carrying value		
7. Deduct current year's other than temporary impairment 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

	1	2
	Year to Date	Prior Year Ended 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 interest paid and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
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

	1	2
	Year to Date	Prior Year Ended 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
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	73,013,466	58,913,903
2. Cost of bonds and stocks acquired	2,424,984	41,618,428
3. Accrual of discount	17,380	20,850
4. Unrealized valuation increase/(decrease)	(7,667)	80,741
5. Total gain (loss) on disposals	3,810	59,656
6. Deduct consideration for bonds and stocks disposed of	2,413,645	27,523,610
7. Deduct amortization of premium	38,192	156,501
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)	73,000,136	73,013,466
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	73,000,136	73,013,466

STATEMENT AS OF MARCH 31, 2024 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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	116,491,720	867,304,179	874,467,836	1,260,511	110,588,576	0	0	116,491,720
2. NAIC 2 (a)	23,487,074	253,296,937	231,776,000	151,502	45,159,513	0	0	23,487,074
3. NAIC 3 (a)	1,947,799	0	0	910	1,948,710	0	0	1,947,799
4. NAIC 4 (a)	221,094	0	70,000	(9,501)	141,593	0	0	221,094
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	142,147,688	1,120,601,117	1,106,313,836	1,403,423	157,838,392	0	0	142,147,688
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	142,147,688	1,120,601,117	1,106,313,836	1,403,423	157,838,392	0	0	142,147,688

(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:

NAIC 1 \$ 50,893,928 ; NAIC 2 \$ 33,944,329 ; NAIC 3 \$ 0 NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

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

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	78,018,349	52,445,989
2. Cost of cash equivalents acquired	1,292,976,994	4,363,272,733
3. Accrual of discount	1,431,901	4,591,691
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	1,284,061,531	4,342,292,063
7. Deduct amortization of premium	0	0
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)	88,365,714	78,018,349
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	88,365,714	78,018,349

Schedule A - Part 2 - Real Estate Acquired and Additions Made
N O N E

Schedule A - Part 3 - Real Estate Disposed
N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made
N O N E

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

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made
N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid
N O N E

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation, NAIC Designation Modifier and SVO Admini- strative Symbol
00287Y-DU-0	ABBVIE INC .....	.....	.....02/22/2024	MORGAN STANLEY CO .....	.....	.....39,874 .....	.....40,000 .....	.....0	1.G FE
01626P-AU-0	ALIMENTATION COUCHE-TARD INC .....	.....	.....02/06/2024	WELLS FARGO SECURITIES .....	.....	.....75,000 .....	.....75,000 .....	.....0	2.A FE
03040W-BD-6	AMERICAN WATER CAPITAL CORP .....	.....	.....02/20/2024	US BANCORP INVESTMENTS INC. ....	.....	.....99,681 .....	.....100,000 .....	.....0	2.A FE
03740M-AD-2	AON NORTH AMERICA INC .....	.....	.....03/15/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....210,470 .....	.....210,000 .....	.....572	2.A FE
04316J-AH-2	ARTHUR J. GALLAGHER & CO. ....	.....	.....02/12/2024	Bank of America Securities .....	.....	.....69,805 .....	.....70,000 .....	.....0	2.B FE
0778FP-AM-1	BELL TELEPHONE COMPANY OF CANADA OR BELL .....	.....	.....03/15/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....59,266 .....	.....60,000 .....	.....295	2.A FE
0778FP-AN-9	BELL TELEPHONE COMPANY OF CANADA OR BELL .....	.....	.....02/12/2024	RBC CAPITAL MARKETS .....	.....	.....139,817 .....	.....140,000 .....	.....0	2.A FE
110122-EJ-3	BRISTOL-MYERS SQUIBB CO .....	.....	.....02/14/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....19,849 .....	.....20,000 .....	.....0	1.F FE
17275R-BU-5	CISCO SYSTEMS INC .....	.....	.....02/21/2024	WELLS FARGO SECURITIES .....	.....	.....94,618 .....	.....95,000 .....	.....0	1.E FE
172967-PF-2	CITIGROUP INC .....	.....	.....02/06/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....45,000 .....	.....45,000 .....	.....0	1.G FE
26442U-AS-3	DUKE ENERGY PROGRESS LLC .....	.....	.....03/15/2024	MORGAN STANLEY CO .....	.....	.....54,348 .....	.....55,000 .....	.....39	1.D FE
26884T-AZ-5	ERAC USA FINANCE LLC .....	.....	.....02/05/2024	Bank of America Securities .....	.....	.....34,969 .....	.....35,000 .....	.....0	1.G FE
277432-AY-6	EASTMAN CHEMICAL CO .....	.....	.....03/15/2024	Various .....	.....	.....114,718 .....	.....115,000 .....	.....159	2.B FE
29273V-AU-4	ENERGY TRANSFER LP .....	.....	.....03/15/2024	GOLDMAN .....	.....	.....63,936 .....	.....60,000 .....	.....1,179	2.B FE
29273V-AY-6	ENERGY TRANSFER LP .....	.....	.....01/10/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....49,830 .....	.....50,000 .....	.....0	2.B FE
30161N-BN-0	EXELON CORP .....	.....	.....02/22/2024	JP MORGAN SECS INC., - FIXED INCOME .....	.....	.....59,901 .....	.....60,000 .....	.....0	2.B FE
37045X-EP-7	GENERAL MOTORS FINANCIAL COMPANY INC .....	.....	.....03/15/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....66,190 .....	.....65,000 .....	.....1,123	2.B FE
373334-KW-0	GEORGIA POWER CO .....	.....	.....02/20/2024	JP MORGAN SECS INC., - FIXED INCOME .....	.....	.....89,711 .....	.....90,000 .....	.....0	2.A FE
494553-AD-2	KINDER MORGAN INC .....	.....	.....01/29/2024	BANK OF NYC/MIZUHO SEC .....	.....	.....124,793 .....	.....125,000 .....	.....0	2.B FE
571748-BW-1	MARSH & MCLENNAN COMPANIES INC .....	.....	.....02/14/2024	WELLS FARGO SECURITIES .....	.....	.....174,732 .....	.....175,000 .....	.....0	1.G FE
595620-AZ-8	MIDAMERICAN ENERGY CO .....	.....	.....01/22/2024	MUFG SECURITIES AMERICAS INC. ....	.....	.....19,915 .....	.....20,000 .....	.....0	1.F FE
61747Y-FG-5	MORGAN STANLEY .....	.....	.....03/15/2024	GOLDMAN .....	.....	.....84,802 .....	.....85,000 .....	.....743	1.E FE
639057-AN-8	NATWEST GROUP PLC	C.....	.....02/26/2024	RBS SECURITIES INC. / EQUITIES .....	.....	.....342,000 .....	.....342,000 .....	.....0	1.G FE
665772-CY-3	NORTHERN STATES POWER CO .....	.....	.....02/22/2024	MUFG SECURITIES AMERICAS INC. ....	.....	.....44,826 .....	.....45,000 .....	.....0	1.E FE
775109-DF-5	ROGERS COMMUNICATIONS INC .....	.....	.....02/07/2024	CITIGROUP GLOBAL MARKETS INC. ....	.....	.....113,987 .....	.....115,000 .....	.....0	2.C FE
842400-HZ-9	SOUTHERN CALIFORNIA EDISON CO .....	.....	.....03/15/2024	Bank of America Securities .....	.....	.....24,512 .....	.....25,000 .....	.....246	1.G FE
92343V-GW-8	VERIZON COMMUNICATIONS INC .....	.....	.....02/20/2024	MORGAN STANLEY CO .....	.....	.....29,618 .....	.....30,000 .....	.....0	2.A FE
927804-GP-3	VIRGINIA ELECTRIC AND POWER CO .....	.....	.....03/15/2024	Various .....	.....	.....78,817 .....	.....80,000 .....	.....296	1.F FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						2,424,984	2,427,000	4,651	XXX
2509999997. Total - Bonds - Part 3						2,424,984	2,427,000	4,651	XXX
2509999998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
2509999999. Total - Bonds						2,424,984	2,427,000	4,651	XXX
4509999997. Total - Preferred Stocks - Part 3						0	XXX	0	XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks						0	XXX	0	XXX
5989999997. Total - Common Stocks - Part 3						0	XXX	0	XXX
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks						0	XXX	0	XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0	XXX
6009999999 - Totals						2,424,984	XXX	4,651	XXX

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..912828-4N-7	UNITED STATES TREASURY		02/01/2024	BMOCM/BONDS		961,912	1,000,000	957,031	957,305	0	797	0	797	0	958,103	0	3,810	3,810	6,240	05/15/2028	1.A
0109999999. Subtotal - Bonds - U.S. Governments						961,912	1,000,000	957,031	957,305	0	797	0	797	0	958,103	0	3,810	3,810	6,240	XXX	XXX
..419792-VX-1	HAWAII ST		01/01/2024	Maturity @ 100.00		10,000	10,000	11,525	10,000	0	0	0	0	0	10,000	0	0	0	250	01/01/2024	1.C FE
..677522-NQ-3	OHIO ST		03/15/2024	Maturity @ 100.00		40,000	40,000	48,063	40,245	0	(245)	0	(245)	0	40,000	0	0	0	1,000	03/15/2024	1.A FE
0509999999. Subtotal - Bonds - U.S. States, Territories and Possessions						50,000	50,000	59,588	50,245	0	(245)	0	(245)	0	50,000	0	0	0	1,250	XXX	XXX
..512462-XB-3	LAKEVILLE MINN INDPT SCH DIST NO 194		02/01/2024	Maturity @ 100.00		30,000	30,000	37,594	30,087	0	(87)	0	(87)	0	30,000	0	0	0	750	02/01/2024	1.A FE
..796269-VM-7	SAN ANTONIO TEX INDPT SCH DIST		02/15/2024	Maturity @ 100.00		10,000	10,000	11,514	10,039	0	(39)	0	(39)	0	10,000	0	0	0	250	02/15/2024	1.A FE
0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						40,000	40,000	49,108	40,126	0	(126)	0	(126)	0	40,000	0	0	0	1,000	XXX	XXX
..3131XX-WS-6	FH ZM4257 - RMBS		03/01/2024	Paydown		1,382	1,382	1,471	1,521	0	(139)	0	(139)	0	1,382	0	0	0	9	09/01/2047	1.A
..3132AD-T9-9	FH ZT1476 - RMBS		03/01/2024	Paydown		23	23	25	26	0	(3)	0	(3)	0	23	0	0	0	0	02/01/2048	1.A
..3132DM-4N-2	FH SD0829 - RMBS		03/01/2024	Paydown		8,363	8,363	8,626	8,612	0	(249)	0	(249)	0	8,363	0	0	0	52	01/01/2052	1.A
..3132DN-E2-5	FH SD1053 - RMBS		03/01/2024	Paydown		3,158	3,158	3,173	3,172	0	(13)	0	(13)	0	3,158	0	0	0	22	06/01/2052	1.A
..3132DN-G5-6	FH SD1120 - RMBS		03/01/2024	Paydown		23,068	23,068	23,457	23,448	0	(380)	0	(380)	0	23,068	0	0	0	160	06/01/2052	1.A
..3132DN-NS-8	FH SD1301 - RMBS		03/01/2024	Paydown		33,602	33,602	34,405	34,381	0	(779)	0	(779)	0	33,602	0	0	0	273	07/01/2052	1.A
..3132DN-QH-9	FH SD1356 - RMBS		03/01/2024	Paydown		47,257	47,257	48,283	48,259	0	(1,003)	0	(1,003)	0	47,257	0	0	0	429	07/01/2052	1.A
..3132DN-VJ-9	FH SD1517 - RMBS		03/01/2024	Paydown		848	848	849	849	0	(1)	0	(1)	0	848	0	0	0	6	09/01/2052	1.A
..3132DV-SZ-4	FH SD8064 - RMBS		03/01/2024	Paydown		4,904	4,904	4,692	4,691	0	214	0	214	0	4,904	0	0	0	39	05/01/2050	1.A
..3132DV-LA-1	FH SD7521 - RMBS		03/01/2024	Paydown		2,491	2,491	2,667	2,679	0	(188)	0	(188)	0	2,491	0	0	0	10	07/01/2050	1.A
..3132DV-LC-7	FH SD7523 - RMBS		03/01/2024	Paydown		1,377	1,377	1,469	1,477	0	(99)	0	(99)	0	1,377	0	0	0	6	08/01/2050	1.A
..3132DV-LV-5	FH SD7540 - RMBS		03/01/2024	Paydown		1,668	1,668	1,759	1,758	0	(90)	0	(90)	0	1,668	0	0	0	7	05/01/2051	1.A
..31334Y-P5-0	FH QA2244 - RMBS		03/01/2024	Paydown		431	431	457	467	0	(37)	0	(37)	0	431	0	0	0	2	07/01/2046	1.A
..3133AG-BN-8	FH QB9045 - RMBS		03/01/2024	Paydown		1,097	1,097	1,128	1,127	0	(30)	0	(30)	0	1,097	0	0	0	4	02/01/2051	1.A
..3133AG-BR-9	FH QB9048 - RMBS		03/01/2024	Paydown		2,152	2,152	2,206	2,205	0	(53)	0	(53)	0	2,152	0	0	0	8	02/01/2051	1.A
..3133AS-KA-0	FH QC7489 - RMBS		03/01/2024	Paydown		2,292	2,292	2,329	2,327	0	(35)	0	(35)	0	2,292	0	0	0	7	09/01/2051	1.A
..3133BG-C6-3	FH QE6393 - RMBS		03/01/2024	Paydown		17,316	17,316	17,419	17,416	0	(104)	0	(104)	0	17,316	0	0	0	101	07/01/2052	1.A
..3133BJ-NS-7	FH QE8501 - RMBS		03/01/2024	Paydown		38,029	38,029	38,255	38,249	0	(220)	0	(220)	0	38,029	0	0	0	224	08/01/2052	1.A
..3133BM-C6-5	FH QF0477 - RMBS		03/01/2024	Paydown		28,431	28,431	28,701	28,700	0	(269)	0	(269)	0	28,431	0	0	0	206	09/01/2052	1.A
..3133KK-3X-5	FH RA4414 - RMBS		03/01/2024	Paydown		5,695	5,695	6,053	6,069	0	(374)	0	(374)	0	5,695	0	0	0	21	01/01/2051	1.A
..3133KM-RT-4	FH RA5898 - RMBS		03/01/2024	Paydown		443	443	450	450	0	(7)	0	(7)	0	443	0	0	0	1	09/01/2051	1.A
..3133KN-KX-0	FH RA6610 - RMBS		03/01/2024	Paydown		10,263	10,263	10,503	10,495	0	(231)	0	(231)	0	10,263	0	0	0	53	01/01/2052	1.A
..3133KP-YM-4	FEDERAL HOME LOAN MORTGAGE CORPORATION -		03/01/2024	Paydown		1,833	1,833	1,785	1,786	0	47	0	47	0	1,833	0	0	0	16	09/01/2052	1.A
..3133KQ-KY-7	FH RA8795 - RMBS		03/01/2024	Paydown		61,300	61,300	62,698	62,667	0	(1,367)	0	(1,367)	0	61,300	0	0	0	662	04/01/2053	1.A
..3140HD-7A-6	FN BK0888 - RMBS		03/01/2024	Paydown		619	619	668	732	0	(114)	0	(114)	0	619	0	0	0	4	07/01/2048	1.A
..3140J7-U6-0	FN BM3304 - RMBS		03/01/2024	Paydown		8	8	8	8	0	0	0	0	0	8	0	0	0	0	12/01/2047	1.A
..3140J8-UX-9	FN BM4197 - RMBS		03/01/2024	Paydown		140	140	148	151	0	(12)	0	(12)	0	140	0	0	0	1	03/01/2047	1.A
..3140MR-ZN-6	FN BW0780 - RMBS		03/01/2024	Paydown		6,201	6,201	6,278	6,274	0	(73)	0	(73)	0	6,201	0	0	0	47	08/01/2052	1.A
..3140MY-AD-4	FN BW6303 - RMBS		03/01/2024	Paydown		43,347	43,347	43,760	43,790	0	(443)	0	(443)	0	43,347	0	0	0	428	08/01/2052	1.A
..3140O9-MM-2	FN CA2163 - RMBS		03/01/2024	Paydown		10,627	10,627	10,563	10,563	0	65	0	65	0	10,627	0	0	0	89	08/01/2048	1.A
..3140OE-AP-7	FN CA6313 - RMBS		03/01/2024	Paydown		557	557	595	606	0	(49)	0	(49)	0	557	0	0	0	3	07/01/2050	1.A
..3140OE-DX-7	FN CA6417 - RMBS		03/01/2024	Paydown		129	129	137	140	0	(11)	0	(11)	0	129	0	0	0	1	07/01/2050	1.A
..3140OE-KY-7	FN CA6610 - RMBS		03/01/2024	Paydown		83	83	89	90	0	(7)	0	(7)	0	83	0	0	0	0	08/01/2050	1.A
..3140OE-VJ-5	FN CA7012 - RMBS		03/01/2024	Paydown		4,330	4,330	4,441	4,441	0	(111)	0	(111)	0	4,330	0	0	0	14	09/01/2050	1.A
..3140OF-4E-6	FN CA8020 - RMBS		03/01/2024	Paydown		1,092	1,092	1,159	1,160	0	(68)	0	(68)	0	1,092	0	0	0	5	12/01/2050	1.A
..3140OG-3C-9	FN CA8894 - RMBS		03/01/2024	Paydown		2,542	2,542	2,714	2,711	0	(169)	0	(169)	0	2,542	0	0	0	10	02/01/2051	1.A
..3140OG-Z0-3	FN CA8850 - RMBS		03/01/2024	Paydown		2,789	2,789	2,891	2,887	0	(97)	0	(97)	0	2,789	0	0	0	8	02/01/2051	1.A
..3140QL-MY-9	FN CB1274 - RMBS		03/01/2024	Paydown		1,790	1,790	1,870	1,867	0	(77)	0	(77)	0	1,790	0	0	0	8	08/01/2051	1.A

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident- ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..31400M-ST-7	FN CB2657 - RMBS		03/01/2024	Paydown		1,364	1,364	1,391	1,389	0	(26)	0	(26)	0	1,364	0	0	0	7	01/01/2052	1.A
..31400M-VP-6	FN CB2421 - RMBS		03/01/2024	Paydown		2,058	2,058	2,171	2,164	0	(106)	0	(106)	0	2,058	0	0	0	10	12/01/2051	1.A
..31400P-BA-4	FN CB3632 - RMBS		03/01/2024	Paydown		88,402	88,402	91,233	91,199	0	(2,798)	0	(2,798)	0	88,402	0	0	0	723	05/01/2052	1.A
..31400P-BG-1	FN CB3638 - RMBS		03/01/2024	Paydown		3,477	3,477	3,534	3,533	0	(56)	0	(56)	0	3,477	0	0	0	28	05/01/2052	1.A
..31400P-ZB-6	FN CB4337 - RMBS		03/01/2024	Paydown		8,279	8,279	8,431	8,426	0	(147)	0	(147)	0	8,279	0	0	0	80	08/01/2052	1.A
..31400P-ZE-0	FN CB4340 - RMBS		03/01/2024	Paydown		4,299	4,299	4,317	4,315	0	(16)	0	(16)	0	4,299	0	0	0	33	08/01/2052	1.A
..31400Q-F6-7	FN CB4688 - RMBS		03/01/2024	Paydown		45,971	45,971	47,322	47,311	0	(1,340)	0	(1,340)	0	45,971	0	0	0	414	09/01/2052	1.A
..3140X4-DF-0	FN FM1001 - RMBS		03/01/2024	Paydown		41	41	44	46	0	(4)	0	(4)	0	41	0	0	0	0	11/01/2048	1.A
..3140X6-UC-3	FN FM3278 - RMBS		03/01/2024	Paydown		26	26	27	28	0	(3)	0	(3)	0	26	0	0	0	0	11/01/2048	1.A
..3140X8-3F-2	FN FM5297 - RMBS		03/01/2024	Paydown		22	22	24	24	0	(2)	0	(2)	0	22	0	0	0	0	11/01/2050	1.A
..3140X8-G6-8	FN FM4720 - RMBS		03/01/2024	Paydown		1,046	1,046	1,118	1,137	0	(91)	0	(91)	0	1,046	0	0	0	6	10/01/2050	1.A
..3140X8-UU-9	FN FM5094 - RMBS		03/01/2024	Paydown		5,704	5,704	6,096	6,352	0	(648)	0	(648)	0	5,704	0	0	0	32	06/01/2049	1.A
..3140X8-Y6-8	FN FM5232 - RMBS		03/01/2024	Paydown		32	32	35	35	0	(3)	0	(3)	0	32	0	0	0	0	06/01/2050	1.A
..3140X8-Y7-6	FN FM5233 - RMBS		03/01/2024	Paydown		103	103	110	111	0	(7)	0	(7)	0	103	0	0	0	1	11/01/2050	1.A
..3140X9-JB-2	FN FM5657 - RMBS		03/01/2024	Paydown		18	18	19	19	0	(2)	0	(2)	0	18	0	0	0	0	12/01/2050	1.A
..3140X9-JK-2	FN FM5665 - RMBS		03/01/2024	Paydown		39	39	42	43	0	(4)	0	(4)	0	39	0	0	0	0	08/01/2048	1.A
..3140X9-TY-1	FN FM5966 - RMBS		03/01/2024	Paydown		1,261	1,261	1,290	1,289	0	(28)	0	(28)	0	1,261	0	0	0	4	02/01/2051	1.A
..3140X9-UJ-2	FN FM5984 - RMBS		03/01/2024	Paydown		3,185	3,185	3,291	3,288	0	(102)	0	(102)	0	3,185	0	0	0	11	02/01/2051	1.A
..3140XB-QD-5	FN FM7651 - RMBS		03/01/2024	Paydown		31,110	31,110	31,903	31,989	0	(879)	0	(879)	0	31,110	0	0	0	245	09/01/2049	1.A
..3140XB-X7-0	FN FM7901 - RMBS		03/01/2024	Paydown		1,687	1,687	1,766	1,760	0	(73)	0	(73)	0	1,687	0	0	0	7	07/01/2051	1.A
..3140XC-4Z-8	FN FM8939 - RMBS		03/01/2024	Paydown		2,044	2,044	2,064	2,063	0	(18)	0	(18)	0	2,044	0	0	0	7	10/01/2051	1.A
..3140XC-YX-0	FN FM8825 - RMBS		03/01/2024	Paydown		656	656	667	667	0	(10)	0	(10)	0	656	0	0	0	2	09/01/2051	1.A
..3140XD-2J-4	FN FM9776 - RMBS		03/01/2024	Paydown		8,056	8,056	8,272	8,271	0	(216)	0	(216)	0	8,056	0	0	0	40	11/01/2051	1.A
..3140XF-H3-8	FN FS0249 - RMBS		03/01/2024	Paydown		10,432	10,432	10,849	10,818	0	(386)	0	(386)	0	10,432	0	0	0	52	01/01/2052	1.A
..3140XF-H5-3	FN FS0251 - RMBS		03/01/2024	Paydown		24,592	24,592	25,491	25,435	0	(843)	0	(843)	0	24,592	0	0	0	127	01/01/2052	1.A
..3140XF-HY-0	FN FS0246 - RMBS		03/01/2024	Paydown		441	441	460	459	0	(18)	0	(18)	0	441	0	0	0	2	01/01/2052	1.A
..3140XF-LL-3	FN FS0330 - RMBS		03/01/2024	Paydown		9,783	9,783	10,115	10,097	0	(314)	0	(314)	0	9,783	0	0	0	44	01/01/2052	1.A
..3140XG-7F-0	FN FS1793 - RMBS		03/01/2024	Paydown		38,195	38,195	38,395	38,389	0	(194)	0	(194)	0	38,195	0	0	0	301	05/01/2052	1.A
..3140XG-CH-0	FN FS0971 - RMBS		03/01/2024	Paydown		4,607	4,607	4,633	4,633	0	(25)	0	(25)	0	4,607	0	0	0	27	01/01/2052	1.A
..3140XG-VJ-5	FN FS1516 - RMBS		03/01/2024	Paydown		70,618	70,618	70,563	70,559	0	59	0	59	0	70,618	0	0	0	570	05/01/2052	1.A
..3140XG-WM-7	FN FS1551 - RMBS		03/01/2024	Paydown		1,118	1,118	1,127	1,126	0	(8)	0	(8)	0	1,118	0	0	0	8	03/01/2050	1.A
..3140XG-ZA-0	FN FS1636 - RMBS		03/01/2024	Paydown		60,069	60,069	60,210	60,189	0	(121)	0	(121)	0	60,069	0	0	0	452	04/01/2052	1.A
..3140XH-3U-9	FN FS2610 - RMBS		03/01/2024	Paydown		6,826	6,826	6,932	6,929	0	(103)	0	(103)	0	6,826	0	0	0	52	08/01/2052	1.A
..3140XH-6Y-8	FN FS2686 - RMBS		03/01/2024	Paydown		8,153	8,153	8,212	8,216	0	(63)	0	(63)	0	8,153	0	0	0	75	08/01/2052	1.A
..3140XH-JL-2	FN FS2066 - RMBS		03/01/2024	Paydown		18,021	18,021	17,078	17,076	0	945	0	945	0	18,021	0	0	0	111	06/01/2052	1.A
..3140XH-NC-7	FN FS2186 - RMBS		03/01/2024	Paydown		10,209	10,209	9,803	9,801	0	408	0	408	0	10,209	0	0	0	66	06/01/2052	1.A
..3140XJ-LC-5	FN FS3022 - RMBS		03/01/2024	Paydown		358	358	347	348	0	10	0	10	0	358	0	0	0	2	10/01/2052	1.A
..3140XJ-QG-1	FN FS3154 - RMBS		03/01/2024	Paydown		1,173	1,173	1,159	1,159	0	14	0	14	0	1,173	0	0	0	12	07/01/2052	1.A
..3140XL-5L-8	FN FS5350 - RMBS		03/01/2024	Paydown		146,591	146,591	140,361	140,336	0	6,256	0	6,256	0	146,591	0	0	0	968	10/01/2052	1.A
..31410L-XE-7	FN 890877 - RMBS		03/01/2024	Paydown		83	83	89	89	0	(25)	0	(25)	0	83	0	0	0	1	07/01/2048	1.A
..31418C-MG-6	FN MA3058 - RMBS		03/01/2024	Paydown		5,841	5,841	6,318	6,652	0	(812)	0	(812)	0	5,841	0	0	0	40	07/01/2047	1.A
..31418C-U7-7	FN MA3305 - RMBS		03/01/2024	Paydown		66	66	70	73	0	(7)	0	(7)	0	66	0	0	0	0	03/01/2048	1.A
..31418C-V2-7	FN MA3332 - RMBS		03/01/2024	Paydown		91	91	97	101	0	(10)	0	(10)	0	91	0	0	0	1	04/01/2048	1.A
..31418D-HL-9	FN MA3834 - RMBS		03/01/2024	Paydown		1,630	1,630	1,703	1,755	0	(125)	0	(125)	0	1,630	0	0	0	8	11/01/2049	1.A
..35563P-JF-7	SCRT 2019-1 MA - CMO/RMBS		03/01/2024	Paydown		1,638	1,638	1,648	1,650	0	(11)	0	(11)	0	1,638	0	0	0	9	07/25/2058	1.A
..35563P-KG-3	SCRT 2019-2 MA - CMO/RMBS		03/01/2024	Paydown		578	578	587	583	0	(5)	0	(5)	0	578	0	0	0	3	08/26/2058	1.A

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Medical Plan of Michigan Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident-ification	Description	For-eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog-nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con-tractual Maturity Date	NAIC Desig-nation, NAIC Desig-nation Modifier and SVO Admini-strative Symbol
..35563P-LH-0	SCRT 2019-3 MA - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	979	979	1,024	1,009	0	(30)	0	(30)	0	979	0	0	0	6	10/25/2058	1.A
..35563P-ML-0	SCRT 2019-4 MA - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	715	715	730	725	0	(10)	0	(10)	0	715	0	0	0	4	02/25/2059	1.A
0909999999. Subtotal - Bonds - U.S. Special Revenues						1,003,366	1,003,366	1,011,347	1,011,923	0	(8,558)	0	(8,558)	0	1,003,366	0	0	0	7,524	XXX	XXX
..056054-AA-7	BX 2019-XL A - CMBS .....	.....	02/15/2024	Paydown .....	.....	33,599	33,599	33,599	33,599	0	0	0	0	0	33,599	0	0	0	369	10/15/2036	1.A FE
..05608W-AA-2	BX 2021-SOAR A - CMBS .....	.....	02/15/2024	Paydown .....	.....	4,566	4,566	4,566	4,566	0	0	0	0	0	4,566	0	0	0	48	06/15/2038	1.A FE
..05610H-AA-1	BX 22LP2 A - CMBS .....	.....	02/15/2024	Paydown .....	.....	1,197	1,197	1,192	1,199	0	(2)	0	(2)	0	1,197	0	0	0	13	02/16/2027	1.A FE
..11134L-AF-6	BROADCOM CORP .....	.....	01/15/2024	Maturity @ 100.00 .....	.....	95,000	95,000	94,901	94,999	0	1	0	1	0	95,000	0	0	0	1,722	01/15/2024	2.B FE
..36262W-AJ-5	GSMB 21PJ8 A8 - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	1,627	1,627	1,665	1,661	0	(33)	0	(33)	0	1,627	0	0	0	7	01/25/2052	1.A FE
..36318W-AK-6	GALXY XV ARR - CDO .....	.....	01/16/2024	Paydown .....	.....	31,198	31,198	31,198	31,198	0	0	0	0	0	31,198	0	0	0	528	10/15/2030	1.A FE
..46592W-AF-3	JPMIT 2112 A4 - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	3,672	3,672	3,734	3,726	0	(54)	0	(54)	0	3,672	0	0	0	15	02/25/2052	1.A FE
..46653X-AE-0	JPMIT 2021-INV5 A2A - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	1,252	1,252	1,266	1,265	0	(13)	0	(13)	0	1,252	0	0	0	5	12/26/2051	1.A FE
..46654W-AH-4	JPMIT 221 A4 - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	2,210	2,210	2,190	2,194	0	16	0	16	0	2,210	0	0	0	9	07/25/2052	1.A FE
..63942E-AA-6	NAVSL 2021-E A - ABS .....	.....	03/15/2024	Paydown .....	.....	2,651	2,651	2,651	2,651	0	0	0	0	0	2,651	0	0	0	4	12/16/2069	1.A FE
..64110L-AG-1	NETFLIX INC .....	.....	03/01/2024	Maturity @ 100.00 .....	.....	70,000	70,000	76,631	70,258	0	(258)	0	(258)	0	70,000	0	0	0	2,013	03/01/2024	2.B FE
..78353H-KL-2	RYDER SYSTEM INC .....	.....	03/18/2024	Maturity @ 100.00 .....	.....	20,000	20,000	19,981	19,999	0	1	0	1	0	20,000	0	0	0	365	03/18/2024	2.B FE
..87272H-AA-8	TIA III A - CDO	C.....	01/16/2024	Paydown .....	.....	21,395	21,395	21,395	21,395	0	0	0	0	0	21,395	0	0	0	372	01/16/2031	1.A FE
..893647-BE-6	TRANSDIGM INC .....	.....	03/25/2024	Call @ 100.00 .....	.....	70,000	70,000	74,855	69,879	346	(225)	0	121	0	70,000	0	0	0	2,345	03/15/2026	4.A FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						358,367	358,367	369,823	358,589	346	(568)	0	(222)	0	358,367	0	0	0	7,816	XXX	XXX
2509999997. Total - Bonds - Part 4						2,413,645	2,451,733	2,446,897	2,418,189	346	(8,699)	0	(8,353)	0	2,409,836	0	3,810	3,810	23,830	XXX	XXX
2509999998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999999. Total - Bonds						2,413,645	2,451,733	2,446,897	2,418,189	346	(8,699)	0	(8,353)	0	2,409,836	0	3,810	3,810	23,830	XXX	XXX
4509999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals						2,413,645	XXX	2,446,897	2,418,189	346	(8,699)	0	(8,353)	0	2,409,836	0	3,810	3,810	23,830	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 1 - CASH

E13

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due and Accrued	Amount Received During Year
.....	UNITED STATES TREASURY .....	.....	03/28/2024	0.000	04/18/2024	20,947,938	0	12,250
.....	UNITED STATES TREASURY .....	.....	03/13/2024	0.000	04/25/2024	3,985,943	0	11,129
0019999999.	Subtotal - Bonds - U.S. Governments - Issuer Obligations					24,933,880	0	23,379
0109999999.	Total - U.S. Government Bonds					24,933,880	0	23,379
0309999999.	Total - All Other Government Bonds					0	0	0
0509999999.	Total - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999.	Total - U.S. Political Subdivisions Bonds					0	0	0
.....	FEDERAL HOME LOAN BANKS .....	.....	02/29/2024	0.000	04/05/2024	999,412	0	4,692
0819999999.	Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations					999,412	0	4,692
0909999999.	Total - U.S. Special Revenues Bonds					999,412	0	4,692
.....	Bristol-Myers Squibb Company .....	.....	03/27/2024	0.000	04/05/2024	8,994,680	0	6,650
.....	DCAT, LLC .....	.....	02/29/2024	0.000	04/02/2024	5,999,107	0	28,587
.....	Diageo Capital plc .....	.....	03/26/2024	0.000	04/08/2024	4,994,721	0	4,525
.....	Dominion Energy, Inc. ....	.....	03/15/2024	0.000	04/12/2024	4,991,551	0	13,057
.....	Kenvue Inc. ....	.....	03/27/2024	0.000	04/05/2024	5,996,460	0	4,425
.....	Pacific Life Short Term Funding LLC .....	.....	03/28/2024	0.000	05/21/2024	3,970,389	0	2,369
.....	Parker-Hannifin Corporation .....	.....	02/14/2024	0.000	04/03/2024	3,998,802	0	28,148
.....	Republic Services, Inc. ....	.....	03/26/2024	0.000	04/09/2024	4,994,000	0	4,500
.....	The Sherwin-Williams Company .....	.....	03/18/2024	0.000	04/16/2024	4,988,750	0	10,500
.....	Thomson Reuters Corporation .....	.....	03/27/2024	0.000	04/24/2024	4,982,526	0	3,799
.....	Verizon Communications Inc. ....	.....	03/27/2024	0.000	04/09/2024	4,993,978	0	3,764
1019999999.	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					58,904,964	0	110,323
1109999999.	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					58,904,964	0	110,323
1309999999.	Total - Hybrid Securities					0	0	0
1509999999.	Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
1909999999.	Subtotal - Unaffiliated Bank Loans					0	0	0
2419999999.	Total - Issuer Obligations					84,838,256	0	138,393
2429999999.	Total - Residential Mortgage-Backed Securities					0	0	0
2439999999.	Total - Commercial Mortgage-Backed Securities					0	0	0
2449999999.	Total - Other Loan-Backed and Structured Securities					0	0	0
2459999999.	Total - SVO Identified Funds					0	0	0
2469999999.	Total - Affiliated Bank Loans					0	0	0
2479999999.	Total - Unaffiliated Bank Loans					0	0	0
2509999999.	Total Bonds					84,838,256	0	138,393
4812C2-23-9	JPMORGAN:US TRS+HM CAP .....	.....	03/28/2024	5.130 .....	.....	3,527,458	47,640	0
8209999999.	Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO					3,527,458	47,640	0
8AMMF0-41-6	US BANK MONEY MARKET (MMDA) 20 IT&C	SD.....	02/29/2024	0.300 .....	.....	0	0	0
8309999999.	Subtotal - All Other Money Market Mutual Funds					0	0	0
.....
.....
8609999999.	Total Cash Equivalents					88,365,715	47,640	138,393