

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2018

OF THE CONDITION AND AFFAIRS OF THE

Optum Insurance of Ohio, Inc.

NAIC Group Code	0707	0707	NAIC Company Code	69647	Employer's ID Number	31-0628424
	(Current)	(Prior)				

Organized under the Laws of _____, State of Domicile or Port of Entry _____ OH _____

Country of Domicile _____ United States of America _____

Incorporated/Organized _____ 10/19/1948 Commenced Business _____ 12/05/1978

Statutory Home Office _____ 50 W. Broad Street, Suite 1800 _____ Columbus, OH, US 43215
(Street and Number) _____ (City or Town, State, Country and Zip Code)Main Administrative Office _____ 1600 McConnor Parkway _____
(Street and Number) _____ Schaumburg, IL, US 60173-6801 _____ 800-282-3232
(City or Town, State, Country and Zip Code) _____ (Area Code) (Telephone Number)Mail Address _____ 1600 McConnor Parkway _____ Schaumburg, IL, US 60173-6801
(Street and Number or P.O. Box) _____ (City or Town, State, Country and Zip Code)Primary Location of Books and Records _____ 1600 McConnor Parkway _____
(Street and Number) _____ Schaumburg, IL, US 60173-6801 _____ 800-282-3232
(City or Town, State, Country and Zip Code) _____ (Area Code) (Telephone Number)

Internet Website Address _____ www.optumrx.com _____

Statutory Statement Contact _____ Jennifer Ann Mosher _____ 952-979-7959
(Name) _____ jen_mosher@uhc.com _____ 952-931-4651
(E-mail Address) _____ (Area Code) (Telephone Number) _____ (FAX Number)**OFFICERS**

President & Chief Executive Officer	John Michael Prince	Secretary	Karen Elizabeth Peterson
Chairman & Chief Financial Officer	Jeffrey David Grosklags	Treasurer	Peter Marshall Gill #

OTHER

Nyle Brent Cottington #, Vice President	Daniel Christopher Davis, Vice President	Kirsten Colleen Hines, Assistant Secretary
Heather Anastasia Lang, Assistant Secretary	David John Oberg, Assistant Secretary	

DIRECTORS OR TRUSTEES

Jeffrey David Grosklags	Edward Andrew Lagerstrom	Daniel Christopher Davis #
Ellen Ruth Nelson #	John Michael Prince	

State of _____	State of _____	State of _____
County of _____	County of _____	County of _____

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

John Michael Prince
President & Chief Executive Officer

Karen Elizabeth Peterson
Secretary

Jeffrey David Grosklags
Chairman & Chief Financial Officer

Subscribed and sworn to before me this
day of _____

Subscribed and sworn to before me this
day of _____

Subscribed and sworn to before me this
day of _____

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

b. If no,

1. State the amendment number.....

2. Date filed.....

3. Number of pages attached.....



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,025	0	0	0	4,025
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		4,025	0	0	0	4,025
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	347,939	0	(a)	0	0	0	0	12	347,939
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	48	0	0	0	0	0	0	0	48
23. In force December 31 of current year	12	347,987	0	(a)	0	0	0	0	12	347,987

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2018

NAIC Group Code 0707

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX			
4. Other considerations					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)						
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance prior year \$ _____, current year \$ _____

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$, current year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,056	0	0	0	4,056
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		4,056	0	0	0	4,056
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		17,527	0	0	0	17,527
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		5,857	0	0	0	5,857
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		23,384	0	0	0	23,384
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	16	1,461,406	0	(a)	0	0	0	0	16	1,461,406
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(3)	(1,025,620)	0	0	0	0	0	0	(3)	(1,025,620)
23. In force December 31 of current year	13	435,786	0	(a)	0	0	0	0	13	435,786

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Arkansas

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		578	0	0	0	578
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		578	0	0	0	578
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	91,663	0 (a)	0	0	0	0	0	3	91,663
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	.16	0	0	0	0	0	0	0	.16
23. In force December 31 of current year	3	91,679	0 (a)	0	0	0	0	0	3	91,679

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF California

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		105,660	0	0	0	105,660
2. Annuity considerations		368	0	0	0	368
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		106,028	0	0	0	106,028
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		26,618	0	0	0	26,618
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		327,377	0	0	0	327,377
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		353,995	0	0	0	353,995
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	176	17,141,412	0	(a)	0	0	0	0	176	17,141,412
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(13)	(1,102,006)	0	0	0	0	0	0	(13)	(1,102,006)
23. In force December 31 of current year	163	16,039,406	0	(a)	0	0	0	0	163	16,039,406

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Colorado

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		6,729	0	0	0	6,729
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		6,729	0	0	0	6,729
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	14	811,588	0	(a)	0	0	0	0	14	811,588
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	568	0	0	0	0	0	0	0	568
23. In force December 31 of current year	14	812,156	0	(a)	0	0	0	0	14	812,156

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Connecticut

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		6,160	0	0	0	6,160
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		6,160	0	0	0	6,160
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					5 No. of Policies					
20. In force December 31, prior year	3	250,000	0	(a)	0	0	0	0	3	250,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	3	250,000	0	(a)	0	0	0	0	3	250,000

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2018

NAIC Group Code 0707

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX			
4. Other considerations					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)						
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance prior year \$ _____, current year \$ _____

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$, current year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INSURANCE					
	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF District of Columbia

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ .....	....., current year \$				
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ .....	....., current year \$				
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ .....	....., current year \$				
ACCIDENT AND HEALTH INSURANCE					
	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Florida

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		39,543	0	0	0	39,543
2. Annuity considerations		780	0	0	0	780
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		40,323	0	0	0	40,323
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		99,239	0	0	0	99,239
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		4,207	0	0	0	4,207
12. Surrender values and withdrawals for life contracts		36,976	0	0	0	36,976
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		140,422	0	0	0	140,422
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.61	3,800,407	0	(a)	0	0	0	0	.61	3,800,407
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(.6)	(336,465)	0	0	0	0	0	0	(.6)	(336,465)
23. In force December 31 of current year	55	3,463,942	0	(a)	0	0	0	0	55	3,463,942

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Georgia
NAIC Group Code 0707

DURING THE YEAR 2018
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	10,095		0	0	0	10,095
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	10,095		0	0	0	10,095
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	62,562		0	0	0	62,562
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	0		0	0	0	0
12. Surrender values and withdrawals for life contracts	0		0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	62,562		0	0	0	62,562
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.31	1,320,010	0	(a)	0	0	0	0	.31	1,320,010
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(.3)	(291,341)	0	0	0	0	0	0	(.3)	(291,341)
23. In force December 31 of current year	28	1,028,669	0	(a)	0	0	0	0	28	1,028,669

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,047	0	0	0	1,047
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,047	0	0	0	1,047
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	50,000	0	(a)	0	0	0	0	1	50,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	1	50,000	0	(a)	0	0	0	0	1	50,000

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Idaho

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		728	0	0	0	728
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		728	0	0	0	728
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	516,500	0	(a)	0	0	0	0	3	.516,500
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(270,000)	0	0	0	0	0	0	(1)	(270,000)
23. In force December 31 of current year	2	246,500	0	(a)	0	0	0	0	2	246,500

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Illinois

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	4,789	0	0	0	4,789
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	4,789	0	0	0	4,789
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	64,837	0	0	0	64,837
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	64,837	0	0	0	64,837
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	22	744,962	0	(a)		0	0	0	22	744,962
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	(3)	(147,935)	0	0		0	0	0	(3)	(147,935)
23. In force December 31 of current year	19	597,027	0	(a)		0	0	0	19	597,027

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	13,249		0	0	0	13,249
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,249	0	0	0	0	13,249
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	184,018		0	0	0	184,018
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	0		0	0	0	0
12. Surrender values and withdrawals for life contracts	183,900		0	0	0	183,900
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	367,918		0	0	0	367,918
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.38	1,616,081	0 (a)	0	0	0	0	0	.38	1,616,081
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(274,150)	0	0	0	0	0	0	(1)	(274,150)
23. In force December 31 of current year	37	1,341,931	0 (a)	0	0	0	0	0	37	1,341,931

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,435	0	0	0	4,435
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		4,435	0	0	0	4,435
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		58,000	0	0	0	58,000
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		58,000	0	0	0	58,000
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	268,667	0	(a)	0	0	0	0	7	268,667
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	484	0	0	0	0	0	0	0	484
23. In force December 31 of current year	7	269,151	0	(a)	0	0	0	0	7	269,151

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,184	0	0	0	2,184
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,184	0	0	0	2,184
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	9	191,776	0	(a)		0	0	0	9	191,776
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	(1)	(10,000)	0	0		0	0	0	(1)	(10,000)
23. In force December 31 of current year	8	181,776	0	(a)		0	0	0	8	181,776

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Kentucky

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		40,970	0	0	0	40,970
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		40,970	0	0	0	40,970
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		59,436	0	0	0	59,436
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		10,607	0	0	0	10,607
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		70,043	0	0	0	70,043
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	148	3,553,634	0	(a)		0	0	0	148	3,553,634
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	(18)	(271,283)	0	0		0	0	0	(18)	(271,283)
23. In force December 31 of current year	130	3,282,351	0	(a)		0	0	0	130	3,282,351

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	363	363	0	0	0
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	363	363	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	13,343		0	0	0	13,343
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,343		0	0	0	13,343
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	2,278	0	0	0	0	2,278
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	2,278	0	0	0	0	2,278
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.48	1,321,969	0	(a)	0	0	0	0	.48	1,321,969
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(.3)	(71,326)	0	0	0	0	0	0	(.3)	(71,326)
23. In force December 31 of current year	45	1,250,643	0	(a)	0	0	0	0	45	1,250,643

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Maryland

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,469	0	0	0	1,469
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,469	0	0	0	1,469
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	152,270	0	(a)	0	0	0	0	3	152,270
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	3	152,270	0	(a)	0	0	0	0	3	152,270

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Massachusetts

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		763	0	0	0	763
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		763	0	0	0	763
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	63,477	0	(a)	0	0	0	0	1	63,477
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	1	31,000	0	0	0	0	0	0	1	31,000
23. In force December 31 of current year	2	94,477	0	(a)	0	0	0	0	2	94,477

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Michigan

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		47,507	0	0	0	47,507
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		47,507	0	0	0	47,507
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		15,000	0	0	0	15,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		1,275	0	0	0	1,275
12. Surrender values and withdrawals for life contracts		11,504	0	0	0	11,504
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		27,779	0	0	0	27,779
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.41	2,271,037	0	(a)	0	0	0	0	.41	2,271,037
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	-(.5)	(65,732)	0	0	0	0	0	0	-(.5)	-(65,732)
23. In force December 31 of current year	36	2,205,305	0	(a)	0	0	0	0	36	2,205,305

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,727	0	0	0	1,727
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,727	0	0	0	1,727
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		141,289	0	0	0	141,289
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		141,289	0	0	0	141,289
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	11	259,003	0	(a)	0	0	0	0	11	259,003
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	376	0	0	0	0	0	0	0	376
23. In force December 31 of current year	11	259,379	0	(a)	0	0	0	0	11	259,379

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Mississippi

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,925	0	0	0	7,925
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		7,925	0	0	0	7,925
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	580,936	0	(a)	0	0	0	0	8	.580,936
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	532	0	0	0	0	0	0	0	532
23. In force December 31 of current year	8	581,468	0	(a)	0	0	0	0	8	581,468

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Missouri
NAIC Group Code 0707

DURING THE YEAR 2018
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	1,144		0	0	0	1,144
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,144	0	0	0	0	1,144
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	2,211	0	0	0	0	2,211
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	2,211	0	0	0	0	2,211
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	150,742	0	(a)	0	0	0	0	3	150,742
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	(120)	0	0	0	0	0	0	0	(120)
23. In force December 31 of current year	3	150,622	0	(a)	0	0	0	0	3	150,622

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Montana

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year										
17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Nebraska

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,029	0	0	0	1,029
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,029	0	0	0	1,029
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	5	255,100	0	(a)	0	0	0	0	5	255,100
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(200,000)	0	0	0	0	0	0	(1)	(200,000)
23. In force December 31 of current year	4	55,100	0	(a)	0	0	0	0	4	55,100

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Nevada

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		8,776	0	0	0	8,776
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		8,776	0	0	0	8,776
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	775,889	0	(a)	0	0	0	0	12	775,889
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	(3,325)	0	0	0	0	0	0	0	(3,325)
23. In force December 31 of current year	12	772,564	0	(a)	0	0	0	0	12	772,564

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF New Hampshire

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		524	0	0	0	524
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		524	0	0	0	524
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	113,916	0 (a)	0	0	0	0	0	2	113,916
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	802	0	0	0	0	0	0	0	802
23. In force December 31 of current year	2	114,718	0 (a)	0	0	0	0	0	2	114,718

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF New Jersey

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX		XXX	
4. Other considerations						
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	2,250	0	(a)		0	0	0	1	2,250
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0		0	0	0	0	0
23. In force December 31 of current year	1	2,250	0	(a)		0	0	0	1	2,250

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF New Mexico

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,647	0	0	0	1,647
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,647	0	0	0	1,647
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	278,250	0	(a)	0	0	0	0	7	278,250
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	7	278,250	0	(a)	0	0	0	0	7	278,250

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF New York

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		961	0	0	0	961
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		961	0	0	0	961
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	62,396	0	(a)	0	0	0	0	2	62,396
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	(28,119)	0	0	0	0	0	0	0	(28,119)
23. In force December 31 of current year	2	34,277	0	(a)	0	0	0	0	2	34,277

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF North Carolina

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		11,556	0	0	0	11,556
2. Annuity considerations		12,000	0	0	0	12,000
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		23,556	0	0	0	23,556
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		60,000	0	0	0	60,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		8,681	0	0	0	8,681
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		68,681	0	0	0	68,681
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	22	1,719,158	0	(a)		0	0	0	22	1,719,158
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	(5)	(375,140)	0	0		0	0	0	(5)	(375,140)
23. In force December 31 of current year	17	1,344,018	0	(a)		0	0	0	17	1,344,018

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF North Dakota

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		600	0	0	0	600
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		600	0	0	0	600
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	31,008	0	(a)		0	0	0	1	31,008
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0		0	0	0	0	0
23. In force December 31 of current year	1	31,008	0	(a)		0	0	0	1	31,008

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Ohio

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		244,553	0	0	0	244,553
2. Annuity considerations		2,257	0	0	0	2,257
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		246,810	0	0	0	246,810
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		391,566	0	0	0	391,566
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		3,557	0	0	0	3,557
12. Surrender values and withdrawals for life contracts		398,718	0	0	0	398,718
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		793,841	0	0	0	793,841
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	Total	
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount					9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	891	26,645,301	0	(a)	0	0	0	0	891	26,645,301
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(65)	(1,858,652)	0	0	0	0	0	0	(65)	(1,858,652)
23. In force December 31 of current year	826	24,786,649	0	(a)	0	0	0	0	826	24,786,649

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	808	808	0	0	0
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	808	808	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Oklahoma

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,098	0	0	0	1,098
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,098	0	0	0	1,098
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		8,144	0	0	0	8,144
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		8,144	0	0	0	8,144
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	151,470	0	(a)	0	0	0	0	2	151,470
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	2	151,470	0	(a)	0	0	0	0	2	151,470

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Oregon

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,659	0	0	0	3,659
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		3,659	0	0	0	3,659
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	336,276	0	(a)	0	0	0	0	7	336,276
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(100,000)	0	0	0	0	0	0	(1)	(100,000)
23. In force December 31 of current year	6	236,276	0	(a)	0	0	0	0	6	236,276

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Pennsylvania

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,997	0	0	0	2,997
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,997	0	0	0	2,997
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		1,110	0	0	0	1,110
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		1,110	0	0	0	1,110
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	10	122,360	0	(a)	0	0	0	0	10	122,360
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(3)	(40,328)	0	0	0	0	0	0	(3)	(40,328)
23. In force December 31 of current year	7	82,032	0	(a)	0	0	0	0	7	82,032

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2018

NAIC Group Code 0707

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX			
4. Other considerations					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)						
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance prior year \$ _____, current year \$ _____

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$, current year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF South Carolina

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,931	0	0	0	4,931
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		4,931	0	0	0	4,931
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		14,543	0	0	0	14,543
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		14,543	0	0	0	14,543
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	272,387	0	(a)	0	0	0	0	12	272,387
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	1	80,340	0	0	0	0	0	0	1	80,340
23. In force December 31 of current year	13	352,727	0	(a)	0	0	0	0	13	352,727

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF South Dakota

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		619	0	0	0	619
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		619	0	0	0	619
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	5	66,223	0	(a)	0	0	0	0	5	66,223
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	5	66,223	0	(a)	0	0	0	0	5	66,223

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Tennessee

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	24,133		0	0	0	24,133
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	24,133	0	0	0	0	24,133
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	33,250		0	0	0	33,250
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	0		0	0	0	0
12. Surrender values and withdrawals for life contracts	0		0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	33,250		0	0	0	33,250
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	19	932,688	0	(a)	0	0	0	0	19	932,688
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(33,717)	0	0	0	0	0	0	(2)	(33,717)
23. In force December 31 of current year	17	898,971	0	(a)	0	0	0	0	17	898,971

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Texas

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	27,348		0	0	0	27,348
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	27,348	0	0	0	0	27,348
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	32,528		0	0	0	32,528
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	0		0	0	0	0
12. Surrender values and withdrawals for life contracts	9,426		0	0	0	9,426
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	41,954		0	0	0	41,954
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.53	3,024,342	0	(a)	0	0	0	0	.53	3,024,342
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(.4)	(308,741)	0	0	0	0	0	0	(.4)	(308,741)
23. In force December 31 of current year	49	2,715,601	0	(a)	0	0	0	0	49	2,715,601

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	0		0	0	0	0
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	1,145	0	0	0	0	1,145
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	1,145	0	0	0	0	1,145
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	77,000	0	(a)	0	0	0	0	2	77,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	2	77,000	0	(a)	0	0	0	0	2	77,000

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Vermont
NAIC Group Code 0707

DURING THE YEAR 2018
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year										
17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

NONE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	19,112		0	0	0	19,112
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	19,112	0	0	0	0	19,112
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	50,000		0	0	0	50,000
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	1,159		0	0	0	1,159
12. Surrender values and withdrawals for life contracts	29,931		0	0	0	29,931
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	81,090		0	0	0	81,090
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.32	2,924,383	0	(a)	0	0	0	0	.32	2,924,383
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(.2)	(303,718)	0	0	0	0	0	0	(.2)	(303,718)
23. In force December 31 of current year	30	2,620,665	0	(a)	0	0	0	0	30	2,620,665

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Washington

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,004	0	0	0	1,004
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,004	0	0	0	1,004
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		25,000	0	0	0	25,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		290	0	0	0	290
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		25,290	0	0	0	25,290
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					5 No. of Policies					
20. In force December 31, prior year	6	324,423	0	(a)	0	0	0	0	6	324,423
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(110,900)	0	0	0	0	0	0	(2)	(110,900)
23. In force December 31 of current year	4	213,523	0	(a)	0	0	0	0	4	213,523

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF West Virginia

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,671	0	0	0	2,671
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,671	0	0	0	2,671
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount		
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	512,991	0	(a)	0	0	0	0	8	.512,991
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	28	0	0	0	0	0	0	0	28
23. In force December 31 of current year	8	513,019	0	(a)	0	0	0	0	8	513,019

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,118	0	0	0	3,118
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		3,118	0	0	0	3,118
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					5 No. of Policies					
20. In force December 31, prior year	12	569,506	0	(a)	0	0	0	0	12	.569,506
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(50,000)	0	0	0	0	0	0	(1)	-(50,000)
23. In force December 31 of current year	11	519,506	0	(a)	0	0	0	0	11	519,506

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Wyoming

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year										
17. Incurred during current year Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance prior year \$, current year \$,
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$,
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products, and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		78	0	0	0	78
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		78	0	0	0	78
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	24,729	0	(a)	0	0	0	0	1	24,729
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(24,729)	0	0	0	0	0	0	(1)	(24,729)
23. In force December 31 of current year	0	0	0	(a)	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

NONE



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

DIRECT BUSINESS IN THE STATE OF Grand Total

NAIC Group Code 0707

DURING THE YEAR 2018

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		678,540	0	0	0	678,540
2. Annuity considerations		15,405	0	0	0	15,405
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		693,945	0	0	0	693,945
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		1,056,744	0	0	0	1,056,744
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		10,198	0	0	0	10,198
12. Surrender values and withdrawals for life contracts		1,316,824	0	0	0	1,316,824
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		2,383,766	0	0	0	2,383,766
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					5 No. of Policies					
20. In force December 31, prior year	1,771	76,187,525	0	(a)	0	0	0	0	1,771	76,187,525
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(142)	(7,189,153)	0	0	0	0	0	0	(142)	(7,189,153)
23. In force December 31 of current year	1,629	68,998,372	0	(a)	0	0	0	0	1,629	68,998,372

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	1,171	1,171	0	0	0
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,171	1,171	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	85,722
2. Current year's realized pre-tax capital gains/(losses) of \$ 0 transferred into the reserve net of taxes of \$ 0	0
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	85,722
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	14,512
6. Reserve as of December 31, current year (Line 4 minus Line 5)	71,210

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2018	14,512	0	0	14,512
2. 2019	13,327	0	0	13,327
3. 2020	12,703	0	0	12,703
4. 2021	10,019	0	0	10,019
5. 2022	8,182	0	0	8,182
6. 2023	6,311	0	0	6,311
7. 2024	4,817	0	0	4,817
8. 2025	3,946	0	0	3,946
9. 2026	2,799	0	0	2,799
10. 2027	1,890	0	0	1,890
11. 2028	1,666	0	0	1,666
12. 2029	1,457	0	0	1,457
13. 2030	1,229	0	0	1,229
14. 2031	1,001	0	0	1,001
15. 2032	794	0	0	794
16. 2033	587	0	0	587
17. 2034	362	0	0	362
18. 2035	120	0	0	120
19. 2036	0	0	0	0
20. 2037	0	0	0	0
21. 2038	0	0	0	0
22. 2039	0	0	0	0
23. 2040	0	0	0	0
24. 2041	0	0	0	0
25. 2042	0	0	0	0
26. 2043	0	0	0	0
27. 2044	0	0	0	0
28. 2045	0	0	0	0
29. 2046	0	0	0	0
30. 2047	0	0	0	0
31. 2048 and Later	0	0	0	0
32. Total (Lines 1 to 31)	85,722	0	0	85,722

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year							
2. Realized capital gains/(losses) net of taxes - General Account							
3. Realized capital gains/(losses) net of taxes - Separate Accounts							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account							
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution							
8. Accumulated balances (Lines 1 through 5 - 6 + 7)							
9. Maximum reserve							
10. Reserve objective							
11. 20% of (Line 10 - Line 8)							
12. Balance before transfers (Lines 8 + 11)							
13. Transfers							
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero							
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)							

NONE

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.	1	Exempt Obligations	2,343,613	XXX	XXX	2,343,613	0.0000	0	0.0000	0	0.0000	0
2.		Highest Quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
3.		High Quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
4.		Medium Quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
5.		Low Quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
6.		Lower Quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8.		Total Unrated Multi-class Securities Acquired by Conversion	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9.		Total Long-Term Bonds (Sum of Lines 1 through 8)	2,343,613	XXX	XXX	2,343,613	XXX	0	XXX	0	XXX	0
PREFERRED STOCK												
10.	1	Highest Quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11.		High Quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12.		Medium Quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13.		Low Quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14.		Lower Quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16.		Affiliated Life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17.			Total Preferred Stocks (Sum of Lines 10 through 16)	0	XXX	XXX	0	XXX	0	XXX	0	XXX
SHORT - TERM BONDS												
18.	1	Exempt Obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19.		Highest Quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20.		High Quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21.		Medium Quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22.		Low Quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23.		Lower Quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25.			Total Short - Term Bonds (Sum of Lines 18 through 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX
DERIVATIVE INSTRUMENTS												
26.	1	Exchange Traded	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27.		Highest Quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28.		High Quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29.		Medium Quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30.		Low Quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31.		Lower Quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32.	6	In or Near Default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33.		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34.		Total (Lines 9 + 17 + 25 + 33)	2,343,613	XXX	XXX	2,343,613	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
31		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality	0	0	XXX	0	0.0010	0	0.0050	0	0.0065	0
36.		Farm Mortgages - CM2 - High Quality	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
37.		Farm Mortgages - CM3 - Medium Quality	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
38.		Farm Mortgages - CM4 - Low Medium Quality	0	0	XXX	0	0.0105	0	0.0300	0	0.0375	0
39.		Farm Mortgages - CM5 - Low Quality	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
40.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
41.		Residential Mortgages - All Other	0	0	XXX	0	0.0013	0	0.0030	0	0.0040	0
42.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	0	0	XXX	0	0.0010	0	0.0050	0	0.0065	0
44.		Commercial Mortgages - All Other - CM2 - High Quality	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
45.		Commercial Mortgages - All Other - CM3 - Medium Quality	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality	0	0	XXX	0	0.0105	0	0.0300	0	0.0375	0
47.		Commercial Mortgages - All Other - CM5 - Low Quality	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
Overdue, Not in Process:												
48.		Farm Mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
49.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
50.		Residential Mortgages - All Other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
51.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
52.		Commercial Mortgages - All Other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
In Process of Foreclosure:												
53.		Farm Mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
54.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
55.		Residential Mortgages - All Other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
56.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
57.		Commercial Mortgages - All Other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
59.		Schedule DA Mortgages	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

Asset Valuation Reserve - Equity Component
N O N E

Asset Valuation Reserve Replications (Synthetic) Assets
N O N E

Schedule F - Claims
N O N E

Schedule H - Part 1 - Analysis of Underwriting Operations
N O N E

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2. - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	0	0	0	0	0	0	0	0	0
2. Advance premiums	0	0	0	0	0	0	0	0	0
3. Reserve for rate credits	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year	0	0	0	0	0	0	0	0	0
5. Total premium reserves, prior year	0	0	0	0	0	0	0	0	0
6. Increase in total premium reserves	0	0	0	0	0	0	0	0	0
B. Contract Reserves:									
1. Additional reserves (a)	0	0	0	0	0	0	0	0	0
2. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year.	0	0	0	0	0	0	0	0	0
5. Increase in contract reserves	0	0	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	0	0	0	0	0	0	0	0	0
2. Total prior year	0	0	0	0	0	0	0	0	0
3. Increase	0	0	0	0	0	0	0	0	0

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year	0	0	0	0	0	0	0	0	0
1.2 On claims incurred during current year	0	0	0	0	0	0	0	0	0
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	0	0	0	0	0	0	0	0	0
2.2 On claims incurred during current year	0	0	0	0	0	0	0	0	0
3. Test:									
3.1 Lines 1.1 and 2.1	0	0	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year	0	0	0	0	0	0	0	0	0
3.3 Line 3.1 minus Line 3.2	0	0	0	0	0	0	0	0	0

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0	0	0	0	0	0	0	0	0
2. Premiums earned	0	0	0	0	0	0	0	0	0
3. Incurred claims	0	0	0	0	0	0	0	0	0
4. Commissions	0	0	0	0	0	0	0	0	0
B. Reinsurance Ceded:									
1. Premiums written	1,171	1,171	0	0	0	0	0	0	0
2. Premiums earned	1,171	1,171	0	0	0	0	0	0	0
3. Incurred claims	163	163	0	0	0	0	0	0	0
4. Commissions	0	0	0	0	0	0	0	0	0

(a) Includes \$0 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims	0	0	163	163
2. Beginning Claim Reserves and Liabilities	0	0	0	0
3. Ending Claim Reserves and Liabilities	0	0	163	163
4. Claims Paid	0	0	0	0
B. Assumed Reinsurance:				
5. Incurred Claims.....	0	0	0	0
6. Beginning Claim Reserves and Liabilities	0	0	0	0
7. Ending Claim Reserves and Liabilities	0	0	0	0
8. Claims Paid	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....	0	0	163	163
10. Beginning Claim Reserves and Liabilities	0	0	0	0
11. Ending Claim Reserves and Liabilities	0	0	163	163
12. Claims Paid	0	0	0	0
D. Net:				
13. Incurred Claims.....	0	0	0	0
14. Beginning Claim Reserves and Liabilities	0	0	0	0
15. Ending Claim Reserves and Liabilities	0	0	0	0
16. Claims Paid	0	0	0	0
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses	0	0	0	0
18. Beginning Reserves and Liabilities	0	0	0	0
19. Ending Reserves and Liabilities	0	0	0	0
20. Paid Claims and Cost Containment Expenses	0	0	0	0

Schedule S - Part 1 - Section 1

N O N E

Schedule S - Part 1 - Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
0399999. Total Life and Annuity - U.S. Affiliates					0	0
0699999. Total Life and Annuity - Non-U.S. Affiliates					0	0
0799999. Total Life and Annuity - Affiliates					0	0
68136 ... 63-0169720 ... 04/01/1997 ... Protective Life Insurance Company				TN	0	47,110
0899999. Life and Annuity - U.S. Non-Affiliates					0	47,110
1099999. Total Life and Annuity - Non-Affiliates					0	47,110
1199999. Total Life and Annuity					0	47,110
1499999. Total Accident and Health - U.S. Affiliates					0	0
1799999. Total Accident and Health - Non-U.S. Affiliates					0	0
1899999. Total Accident and Health - Affiliates					0	0
68136 ... 63-0169720 ... 04/01/1997 ... Protective Life Insurance Company				TN	0	163
1999999. Accident and Health - U.S. Non-Affiliates					0	163
2199999. Total Accident and Health - Non-Affiliates					0	163
2299999. Total Accident and Health					0	163
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					0	47,273
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					0	0
9999999 Totals - Life, Annuity and Accident and Health					0	47,273

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/01/1997 .. Protective Life Insurance Company	TN	CO/I..	OL	68,998,373	8,886,371	10,566,954	640,047	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/01/1997 .. Protective Life Insurance Company	TN	CO/I..	OA..	0	7,225,745	7,771,317	10,638	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/01/1997 .. Protective Life Insurance Company	TN	CO/I..	SC	0	200,087	0	43,260	0	0	0	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0
1199999. Total General Account Authorized				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
2299999. Total General Account Unauthorized				0	0	0	0	0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates				0	0	0	0	0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
3399999. Total General Account Certified				0	0	0	0	0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized				0	0	0	0	0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized				0	0	0	0	0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates				0	0	0	0	0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified				0	0	0	0	0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified				0	0	0	0	0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)				0	0	0	0	0	0	0	0	0	0	0
9999999 - Totals				68,998,373	16,312,203	18,338,271	693,945	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
.....68136 ..63-0169720 ..04/01/1997 ..Protective Life Insurance Company ..TN.....SS/I.....A.....							1,171	25	66	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							1,171	25	66	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							1,171	25	66	0	0	0	0
1199999. Total General Account Authorized							1,171	25	66	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified							1,171	25	66	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified							0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified							0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							1,171	25	66	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							0	0	0	0	0	0	0
9999999 - Totals							1,171	25	66	0	0	0	0

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE S - PART 6Five Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

	1 2018	2 2017	3 2016	4 2015	5 2014
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	695	835	833	971	983
2. Commissions and reinsurance expense allowances	0	0	0	0	0
3. Contract claims	1,019	772	842	1,355	457
4. Surrender benefits and withdrawals for life contracts	0	0	0	0	0
5. Dividends to policyholders	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserve for life and accident and health contracts	(1,070)	(1,045)	(989)	(529)	(690)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9. Aggregate reserves for life and accident and health contracts	16,312	18,338	19,384	20,373	20,902
10. Liability for deposit-type contracts	0	0	0	0	0
11. Contract claims unpaid	47	.95	10	269	70
12. Amounts recoverable on reinsurance	0	0	0	0	0
13. Experience rating refunds due or unpaid	0	0	0	0	0
14. Policyholders' dividends (not included in Line 10)	0	0	0	0	0
15. Commissions and reinsurance expense allowances due	0	0	0	0	0
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	0	0	0	0
23. Funds deposited by and withheld from (F)	0	0	0	0	0
24. Letters of credit (L)	0	0	0	0	0
25. Trust agreements (T)	0	0	0	0	0
26. Other (O)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	266,274,295	0	266,274,295
2. Reinsurance (Line 16)	0	0	0
3. Premiums and considerations (Line 15)	0	0	0
4. Net credit for ceded reinsurance	XXX	16,359,567	16,359,567
5. All other admitted assets (balance)	89,954,986	0	89,954,986
6. Total assets excluding Separate Accounts (Line 26)	356,229,281	16,359,567	372,588,848
7. Separate Account assets (Line 27)	0	0	0
8. Total assets (Line 28)	356,229,281	16,359,567	372,588,848
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	0	16,105,830	16,105,830
10. Liability for deposit-type contracts (Line 3)	0	206,464	206,464
11. Claim reserves (Line 4)	0	47,273	47,273
12. Policyholder dividends/reserves (Lines 5 through 7)	0	0	0
13. Premium & annuity considerations received in advance (Line 8)	0	0	0
14. Other contract liabilities (Line 9)	71,210	0	71,210
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0	0	0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)	0	0	0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)	0	0	0
19. All other liabilities (balance)	287,416,821	0	287,416,821
20. Total liabilities excluding Separate Accounts (Line 26)	287,488,031	16,359,567	303,847,598
21. Separate Account liabilities (Line 27)	0	0	0
22. Total liabilities (Line 28)	287,488,031	16,359,567	303,847,598
23. Capital & surplus (Line 38)	68,741,250	XXX	68,741,250
24. Total liabilities, capital & surplus (Line 39)	356,229,281	16,359,567	372,588,848
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	16,105,830		
26. Claim reserves	47,273		
27. Policyholder dividends/reserves	0		
28. Premium & annuity considerations received in advance	0		
29. Liability for deposit-type contracts	206,464		
30. Other contract liabilities	0		
31. Reinsurance ceded assets	0		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	16,359,567		
34. Premiums and considerations	0		
35. Reinsurance in unauthorized companies	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers	0		
37. Reinsurance with Certified Reinsurers	0		
38. Funds held under reinsurance treaties with Certified Reinsurers	0		
39. Other ceded reinsurance payables/offsets	0		
40. Total ceded reinsurance payable/offsets	0		
41. Total net credit for ceded reinsurance	16,359,567		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	4,025	.0	.0	.0	0	4,025
2. Alaska	AK	.0	.0	.0	.0	0	0
3. Arizona	AZ	4,056	.0	.0	.0	0	4,056
4. Arkansas	AR	578	.0	.0	.0	0	578
5. California	CA	105,660	368	.0	.0	0	106,028
6. Colorado	CO	6,729	.0	.0	.0	0	6,729
7. Connecticut	CT	6,160	.0	.0	.0	0	6,160
8. Delaware	DE	.0	.0	.0	.0	0	0
9. District of Columbia	DC	.0	.0	.0	.0	0	0
10. Florida	FL	39,543	780	.0	.0	0	40,323
11. Georgia	GA	10,095	.0	.0	.0	0	10,095
12. Hawaii	HI	1,047	.0	.0	.0	0	1,047
13. Idaho	ID	728	.0	.0	.0	0	728
14. Illinois	IL	4,789	.0	.0	.0	0	4,789
15. Indiana	IN	13,249	.0	.0	.0	0	13,249
16. Iowa	IA	4,435	.0	.0	.0	0	4,435
17. Kansas	KS	2,184	.0	.0	.0	0	2,184
18. Kentucky	KY	40,970	.0	363	.0	0	41,333
19. Louisiana	LA	13,343	.0	.0	.0	0	13,343
20. Maine	ME	.0	.0	.0	.0	0	0
21. Maryland	MD	1,469	.0	.0	.0	0	1,469
22. Massachusetts	MA	763	.0	.0	.0	0	763
23. Michigan	MI	47,507	.0	.0	.0	0	47,507
24. Minnesota	MN	1,727	.0	.0	.0	0	1,727
25. Mississippi	MS	7,925	.0	.0	.0	0	7,925
26. Missouri	MO	1,144	.0	.0	.0	0	1,144
27. Montana	MT	.0	.0	.0	.0	0	0
28. Nebraska	NE	1,029	.0	.0	.0	0	1,029
29. Nevada	NV	8,776	.0	.0	.0	0	8,776
30. New Hampshire	NH	524	.0	.0	.0	0	524
31. New Jersey	NJ	.0	.0	.0	.0	0	0
32. New Mexico	NM	1,647	.0	.0	.0	0	1,647
33. New York	NY	961	.0	.0	.0	0	961
34. North Carolina	NC	11,556	12,000	.0	.0	0	23,556
35. North Dakota	ND	600	.0	.0	.0	0	600
36. Ohio	OH	244,553	2,257	808	.0	0	247,618
37. Oklahoma	OK	1,098	.0	.0	.0	0	1,098
38. Oregon	OR	3,659	.0	.0	.0	0	3,659
39. Pennsylvania	PA	2,997	.0	.0	.0	0	2,997
40. Rhode Island	RI	.0	.0	.0	.0	0	0
41. South Carolina	SC	4,931	.0	.0	.0	0	4,931
42. South Dakota	SD	619	.0	.0	.0	0	619
43. Tennessee	TN	24,133	.0	.0	.0	0	24,133
44. Texas	TX	27,348	.0	.0	.0	0	27,348
45. Utah	UT	.0	.0	.0	.0	0	0
46. Vermont	VT	.0	.0	.0	.0	0	0
47. Virginia	VA	19,112	.0	.0	.0	0	19,112
48. Washington	WA	1,004	.0	.0	.0	0	1,004
49. West Virginia	WV	2,671	.0	.0	.0	0	2,671
50. Wisconsin	WI	3,118	.0	.0	.0	0	3,118
51. Wyoming	WY	.0	.0	.0	.0	0	0
52. American Samoa	AS	.0	.0	.0	.0	0	0
53. Guam	GU	.0	.0	.0	.0	0	0
54. Puerto Rico	PR	.0	.0	.0	.0	0	0
55. U.S. Virgin Islands	VI	78	.0	.0	.0	0	.78
56. Northern Mariana Islands	MP	.0	.0	.0	.0	0	0
57. Canada	CAN	.0	.0	.0	.0	0	0
58. Aggregate Other Alien	OT	.0	.0	.0	.0	0	0
59. Total		678,540	15,405	1,171	0	0	695,116

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	98-1308130				1070715 B.C. Unlimited Liability Company	CAN	N/A	OptumRx Group Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2624551				310 Canyon Medical, LLC	CA	N/A	Monarch Management Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2607738				5995 Minnetonka, LLC	DE	N/A	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1401978				ABCO India Private Limited	IND	N/A	ABCO International Holdings, LLC	Ownership	99.065	UnitedHealth Group Incorporated		
		00000	98-1401978				ABCO India Private Limited	IND	N/A	The Advisory Board Company	Ownership	0.935	UnitedHealth Group Incorporated		
		00000	41-1913523				ABCO International Holdings, LLC	DE	N/A	The Advisory Board Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-0015861				ACN Group IPA of New York, Inc.	NY	N/A	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1446128				ACN Group of California, Inc.	CA	IA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1446125				Administradora Clínica La Colina S.A.S.	COL	N/A	Banmédica Internacional SpA	Ownership	50.00	UnitedHealth Group Incorporated		1
		00000	98-1451601				Administradora Country S.A.	COL	N/A	Banmédica S.A.	Ownership	50.00	UnitedHealth Group Incorporated		1
		00000	20-2598653				Administradora Médica Centromed S.A.	CHL	N/A	VidaIntegra S.A.	Ownership	74.250	UnitedHealth Group Incorporated		2
		00000	26-4093335				Advanced Pharma, Inc.	TX	N/A	Apothecary Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							Advanced Surgical Hospital, LLC	PA	N/A	SCA Southwestern PA, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2
							Advocate Condell Ambulatory Surgery Center, LLC	IL	N/A	Advocate-SCA Partners, LLC	Ownership	59.645	UnitedHealth Group Incorporated		2
							Advocate Sherman Ambulatory Surgery Center, LLC	IL	N/A	Advocate-SCA Partners, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Advocate Southwest Ambulatory Surgery Center, LLC	IL	N/A	Advocate-SCA Partners, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2
							Advocate-SCA Partners, LLC	DE	N/A	SCA-Illinois, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2
							Aeromil Táxi Aéreo Ltda.	BRA	N/A	Anil Assistência Médica Internacional S.A.	Influence	20.00	UnitedHealth Group Incorporated		5
							AHN Accountable Care Organization, LLC	IN	N/A	American Health Network of Indiana, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							AHN Central Services, LLC	IN	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							AHN Target Holdings, LLC	DE	N/A	Collaborative Care Holdings, LLC	Ownership	80.100	UnitedHealth Group Incorporated		2
										Aiaska Surgery Center, Limited Partnership					
							Alaska Spine Center, LLC	AK	N/A		Influence	100.00	UnitedHealth Group Incorporated		5
							Alaska Surgery Center, Inc.	AK	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Alaska Surgery Center, Limited Partnership	AK	N/A	Alaska Surgery Center, Inc.	Influence	37.845	UnitedHealth Group Incorporated		5
							Aliansalud Entidad Promotora de Salud S.A.	COL	IA	Banmédica S.A.	Ownership	76.290	UnitedHealth Group Incorporated		2
0707	UnitedHealth Group Incorporated	82406	35-1665915				All Savers Insurance Company	IN	IA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
							All Savers Life Insurance Company of California	CA	IA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
							Alliance Surgical Center, LLC	FL	N/A	SCA-Alliance, LLC	Ownership	51.285	UnitedHealth Group Incorporated		2
							Aloha Surgical Center, LLC	TN	N/A	Surgery Center of Maui, LLC	Ownership	74.000	UnitedHealth Group Incorporated		2
							Ambient Healthcare, Inc.	FL	N/A	Ambient Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							Ambient Holdings, Inc.	DE	N/A	BriovaRx Infusion Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							American Health Network of Indiana Care Organization, LLC	IN	N/A	AHN Target Holdings, LLC	Ownership	80.100	UnitedHealth Group Incorporated		2
							American Health Network of Indiana II, LLC	IN	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	52623	35-2108729				American Health Network of Indiana, LLC	IN	IA	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							American Health Network of Ohio Care Organization, LLC	OH	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							American Health Network of Ohio II, LLC	OH	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							American Health Network of Ohio, LLC	OH	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							AmeriChoice Corporation	DE	N/A	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
							AmeriChoice Health Services, Inc.	DE	N/A	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	95497	22-3368602				AmeriChoice of New Jersey, Inc.	NJ	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
							Amico Saúde Ltda.	BRA	N/A	Amil Assistência Médica Internacional S.A.	Ownership	92.920	UnitedHealth Group Incorporated		2
							Amico Saúde Ltda.	BRA	N/A	Cimed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership	1.072	UnitedHealth Group Incorporated		2
										Polar II Fundo de Investimento em Participações Multiestratégia	Ownership	91.810	UnitedHealth Group Incorporated		2
							Amil Assistência Médica Internacional S.A.	BRA	IA						

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Rela-tion- ship to Report-ing Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	98-1109085				Amil Clinical Research Participações Ltda.	BRA	NIA	Esho - Empresa de Serviços Hospitalares S.A.	Ownership	99.950	UnitedHealth Group Incorporated		
		00000	98-1109085				Amil Clinical Research Participações Ltda.	BRA	NIA	Cemed Care - Empresa de Atendimento Clínico Geral Ltda.	Ownership	0.050	UnitedHealth Group Incorporated		
		00000	98-1138212				AMIL International	LUX	NIA	Amil Assistência Médica Internacional S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1454564				Analisis Clínicos ML S.A.C.	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	99.990	UnitedHealth Group Incorporated		1
		00000	36-4210293				Antelope Valley Surgery Center, L.P.	CA	NIA	NSC Lancaster, LLC	Ownership	83.490	UnitedHealth Group Incorporated		2
		00000	26-3913051				Apothecary Holdings, Inc.	DE	NIA	OptumRx Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-0960334				Apothecary Shop of Phoenix, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-2068687				AppleCare Medical Management, LLC	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000					APS - Assistência Personalizada à Saúde Ltda.	BRA	IA	Santa Helena Assistência Médica S.A.	Ownership	99.990	UnitedHealth Group Incorporated		
		00000					APS - Assistência Personalizada à Saúde Ltda.	BRA	IA	Amil Assistência Médica Internacional S.A.	Ownership	0.010	UnitedHealth Group Incorporated		
		00000	98-1399975				Aquitania Chilean Holding SpA	CHL	NIA	Bordeaux UK Holdings II Limited	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2285078				Arcadia Outpatient Surgery Center, L.P.	CA	NIA	Surgicenters of Southern California, Inc.	Influence	37.000	UnitedHealth Group Incorporated		5
		00000	46-4843100				Arise Physician Group	TX	NIA	SCA Austin Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-0813232				Arizona Physicians IPA, Inc.	AZ	IA	UnitedHealthcare, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2055800				Arlington Surgery Center, LLC	TX	NIA	THR-SCA Holdings, LLC	Influence	52.754	UnitedHealth Group Incorporated		5
		00000	46-3907136				ASC Holdings of New Jersey, LLC	NJ	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	95-4348431				ASC Network, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-8970704				ASC Operators, LLC	CA	NIA	Surgery Centers-West Holdings, LLC	Influence	49.000	UnitedHealth Group Incorporated		
		00000	27-1724489				ASC Operators-East Bay, LLC	CA	NIA	SCA Pacific Holdings, Inc.	Influence	49.000	UnitedHealth Group Incorporated		
		00000	27-5447186				ASC Operators-San Francisco, LLC	CA	NIA	SCA Pacific Holdings, Inc.	Influence	49.000	UnitedHealth Group Incorporated		
		00000	27-2673776				ASC Operators-San Luis Obispo, LLC	CA	NIA	SCA-San Luis Obispo, LLC	Influence	49.000	UnitedHealth Group Incorporated		
		00000	26-3386169				ASC Operators-Santa Rosa, LLC	CA	NIA	SCA-Santa Rosa, Inc.	Influence	39.000	UnitedHealth Group Incorporated		
		00000	46-1537479				ASC Operators-South Bay, LLC	CA	NIA	SCA Pacific Holdings, Inc.	Influence	49.000	UnitedHealth Group Incorporated		
		00000	27-0540034				ASC Pacific Ventures, LLC	DE	NIA	SCA-Honolulu, LLC	Influence	49.900	UnitedHealth Group Incorporated		
		00000	90-0369702				ASI Global, LLC	TX	NIA	FrontierMEDEX, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-3878957				AssuranceRx, LLC	AL	NIA	BriovaRx, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-4014891				Athens ASC Holdings, LLC	GA	NIA	SCA Athens, LLC	Ownership	58.420	UnitedHealth Group Incorporated		2
		00000	47-0990056				Audax Health Solutions, LLC	DE	NIA	Rally Health, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	58-2028767				Austin Center for Outpatient Surgery, L.P.	GA	NIA	SHC Austin, Inc.	Ownership	51.000	UnitedHealth Group Incorporated		2
		00000	27-2869469				Avella of Austin, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	14-1971726				Avella of Columbus, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	13-4318552				Avella of Deer Valley, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-5239373				Avella of Denver, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-1044713				Avella of Gilbert, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-4241458				Avella of Las Vegas II, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-0609947				Avella of Orlando, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-0583808				Avella of Phoenix III, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-0121303				Avella of Sacramento, Inc.	CA	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-0819588				Avella of Scottsdale, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-1688911				Avella of St. Louis, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	36-4435924				Avella of Tampa, LLC	FL	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-3253658				Avella of Tucson II, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-1044712				Avella of Tucson, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	35-2563332				Avella Patient Access Program, Inc.	AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-4057813				Aveta Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	30-0842394				AxelaCare Intermediate Holdings, LLC	DE	NIA	OptumRx, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	61-1708598				AxelaCare, LLC	DE	NIA	AxelaCare Intermediate Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	72-1097827				B.R.A.S.S. Partnership in Commendam	LA	NIA	Surgery Center Holding, LLC	Ownership	67.940	UnitedHealth Group Incorporated		2
		00000	62-1601445				Bakersfield-SC, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		

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PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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		.00000	98-1462787				Banmédica Colombia SpA	.COL	.N/A	Banmédica Internacional SpA	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1444151				Banmédica Internacional SpA	.CHL	.N/A	Banmédica S.A.	Ownership	99.00	UnitedHealth Group Incorporated			
		.00000	98-1444151				Banmédica Internacional SpA	.CHL	.N/A	Saden S.A.	Ownership	1.00	UnitedHealth Group Incorporated			
		.00000	98-1444127				Banmédica S.A.	.CHL	.N/A	Bordeaux Holding SpA	Ownership	98.229	UnitedHealth Group Incorporated		2	
		.00000	26-1192066				Barranca Surgery Center, LLC	.DE	.N/A	Beach Surgical Holdings LLC	Influence	51.00	UnitedHealth Group Incorporated		5	
		.00000	47-2083076				Beach Surgical Holdings II LLC	.CA	.N/A	SCA Surgicare of Laguna Hills, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
		.00000	47-4504390				Beach Surgical Holdings III, LLC	.CA	.N/A	Surgicare of La Veta, Inc.	Ownership	68.860	UnitedHealth Group Incorporated		2	
		.00000	37-1708521				Beach Surgical Holdings LLC	.CA	.N/A	SCA Surgicare of Laguna Hills, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
		.00000	88-0267857				Behavioral Healthcare Options, Inc.	.NV	.N/A	Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
							Belleville Surgical Center, Ltd., an Illinois Limited Partnership	.IL	.N/A	Surgicare of Belleville, LLC	Ownership	61.200	UnitedHealth Group Incorporated		2	
							Birmingham Outpatient Surgery Center, Ltd., an Alabama Limited Partnership	.AL	.N/A	Birmingham Outpatient Surgical Center, LLC	Influence	30.220	UnitedHealth Group Incorporated		5	
							Birmingham Outpatient Surgical Center, LLC	.DE	.N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
							Blackstone Valley Surgicare GP, LLC	.DE	.N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
							Blue Ridge Day Surgery Center, L.P.	.TN	.N/A	Blue Ridge GP, LLC	Influence	38.208	UnitedHealth Group Incorporated		5	
							Blue Ridge GP, LLC	.NC	.N/A	SCA-Blue Ridge, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
							Boca Raton Outpatient Surgery & Laser Center, Ltd.	.FL	.N/A	Surgery Center of Boca Raton, Inc.	Influence	20.00	UnitedHealth Group Incorporated		5	
							Boca Raton Outpatient Surgery & Laser Center, Ltd.	.FL	.N/A	Surgery Center of Boca Raton, Inc.	Influence	10.00	UnitedHealth Group Incorporated		5	
							Bordeaux (Barbados) Holdings I, SRL	.BRB	.N/A	UnitedHealth Group International L.P.	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux (Barbados) Holdings II, SRL	.BRB	.N/A	Bordeaux (Barbados) Holdings I, SRL	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux (Barbados) Holdings III, SRL	.BRB	.N/A	Bordeaux (Barbados) Holdings II, SRL	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux Holding SpA	.CHL	.N/A	Aquitania Chilean Holding SpA	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux International Holdings, Inc.	.DE	.N/A	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux UK Holdings I Limited	.GBR	.N/A	Bordeaux International Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux UK Holdings II Limited	.GBR	.N/A	Bordeaux UK Holdings I Limited	Ownership	100.00	UnitedHealth Group Incorporated			
							Bordeaux UK Holdings III Limited	.GBR	.N/A	Bordeaux UK Holdings II Limited	Ownership	100.00	UnitedHealth Group Incorporated			
							BOSC Holdings, LLC		.N/A	SCA BOSC Holdings, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
							Bosque Medical Center Ltda.	.BRA	.N/A	Amil Assistência Médica Internacional S.A.	Ownership	82.581	UnitedHealth Group Incorporated			
										Esho – Empresa de Serviços Hospitalares S.A.	Ownership					
											Ownership	17.419	UnitedHealth Group Incorporated			
										SCA-Brandon, LLC	Ownership	54.540	UnitedHealth Group Incorporated		2	
										BriovaRx Infusion Services 100, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 101, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 102, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 103, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 200, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 201, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 202, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 203, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 204, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 205, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 206, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 207, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 208, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 209, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 301, LP	Ownership	99.950	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 301, LP	Ownership	0.050	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 302, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 305, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
										BriovaRx Infusion Services 308, LLC	SCP Specialty Infusion, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	02-0653265				BriovaRx Infusion Services 401, LLC	CA	N/A	SCP Specialty Infusion, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-4312858				BriovaRx Infusion Services 402, LLC	CA	N/A	SCP Specialty Infusion, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-0941801				BriovaRx Infusion Services 403, LLC	CA	N/A	SCP Specialty Infusion, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	93-1103256				BriovaRx Infusion Services 404, LLC	OR	N/A	SCP Specialty Infusion, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-3918706				BriovaRx Infusion Services, Inc.	DE	N/A	AxelaCare, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-4515146				BriovaRx of California, Inc.	CA	N/A	Salveo Specialty Pharmacy, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	11-3647935				BriovaRx of Florida, Inc.	DE	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-1930321				BriovaRx of Georgia, LLC	AL	N/A	BriovaRx, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-2731176				BriovaRx of Indiana, LLC	IN	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-2790537				BriovaRx of Louisiana, L.L.C.	LA	N/A	BriovaRx, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	01-0516051				BriovaRx of Maine, Inc.	ME	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-3331130				BriovaRx of Massachusetts, LLC	MA	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-2532834				BriovaRx of Nevada, LLC	NV	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	74-3103518				BriovaRx of New York, Inc.	NY	N/A	Salveo Specialty Pharmacy, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-2719823				BriovaRx of Texas, Inc.	TX	N/A	BriovaRx of Florida, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-4030553				BriovaRx Specialty, LLC	DE	N/A	OptumRx Administrative Services, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	55-0824381				BriovaRx, LLC	AL	N/A	BriovaRx of Maine, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-2314634				BSH Holdings, LLC	IN	N/A	SCA Indiana Holdings, LLC	Influence	49.00	UnitedHealth Group Incorporated		5
		00000	47-4278378				Cabin Enterprises, LLC	DE	N/A	Cabin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-4264867				Cabin Holdings, LLC	DE	N/A	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	61-1732160				California MedTrans Network IPA LLC	CA	N/A	California MedTrans Network MSO LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4780748				California MedTrans Network MSO LLC	CA	N/A	National MedTrans, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-1597478				Camp Hill Ambulatory Centers		N/A	Camp Hill-SCA Centers, LLC	Influence	49.00	UnitedHealth Group Incorporated		5
		00000	52-1597484				Camp Hill-SCA Centers, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-3955254				Capital City Medical Group, L.L.C.	LA	N/A	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-1981651				Cardio Management, Inc.	DE	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-8375685				Care Improvement Plus Group Management, LLC	MD	N/A	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	12558	45-4976934			Care Improvement Plus of Texas Insurance Company	TX	IA	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	12567	20-3888112			Care Improvement Plus South Central Insurance Company	AR	IA	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	14041	27-5038136			Care Improvement Plus Wisconsin Insurance Company	WI	IA	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1328471				Casa de Saúde Santa Therezinha S.A.	BRA	N/A	Hospital Alvorada de Taguatinga Ltda.	Ownership	99.99	UnitedHealth Group Incorporated		2
		00000	98-1328471				Casa de Saúde Santa Therezinha S.A.	BRA	N/A	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	0.00	UnitedHealth Group Incorporated		2
		00000	82-5207935				Castle Rock SurgiCenter, LLC	CO	N/A	SCA-Castle Rock, LLC	Ownership	55.00	UnitedHealth Group Incorporated		2
		00000	20-5807941				Catalyst360, LLC	DE	N/A	Optum Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1328471				Catamaran Finance (Ireland) Unlimited Company	IRL	N/A	Catamaran S.á.r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1069737				Catamaran S.á.r.l.	LUX	N/A	UnitedHealthcare Europe S.á.r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2533497				CDC Holdings Colombia S.A.S.	COL	N/A	Bordeaux UK Holdings II Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1111491				Cedar Park Surgery Center, LLC	TX	N/A	SCA Cedar Park Holdings, LLC	Ownership	51.93	UnitedHealth Group Incorporated		2
		00000	98-1111491				Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	BRA	N/A	Anil Assistência Médica Internacional S.A.	Ownership	99.99	UnitedHealth Group Incorporated		2
		00000	98-1111491				Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	BRA	N/A	Esho – Empresa de Serviços Hospitalares	Ownership	0.00	UnitedHealth Group Incorporated		2
		00000	98-1448150				Central de Compras SpA	CHL	N/A	Inversiones Clínicas Santa María S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-4131797				Central Indiana Care Organization, LLC	IN	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-5600514				Central Ohio Care Organization, LLC	OH	N/A	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-1080342				CentriHealth, LLC	DE	N/A	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					CentriHealth UK Limited	GBR	N/A	CentriHealth, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Centro de Entrenamiento en Reanimación y Prevención Limitada (CERP)	CHL	N/A	Clínica Dávila y Servicios Médicos S.A.	Ownership	99.00	UnitedHealth Group Incorporated		

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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 Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000				Centro de Entrenamiento en Reanimación y Prevención Limitada (CERP)		CHL	NIA	Servicios Integrados de Salud Ltda.	Ownership.....	1.000	UnitedHealth Group Incorporated		
		00000	98-1450490			Centro de Servicios Compartidos Banmédica S.A.		CHL	NIA	Banmédica S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated .....	.1	
		00000				Centro Médico Hospitalar Pitangueiras Ltda.		BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000				Centro Médico Hospitalar Pitangueiras Ltda.		BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership.....	0.001	UnitedHealth Group Incorporated		
		00000	98-1457197			Centro Médico Odontológico Americano S.A.C.		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud Esho – Empresa de Serviços Hospitalares	Ownership.....	80.000	UnitedHealth Group Incorporated .....	.1	
		00000	98-1310461			Centro Médico PJ Ltda.		BRA	NIA	S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1310461			Centro Médico PJ Ltda.		BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership.....	0.001	UnitedHealth Group Incorporated		
		00000	98-1451635			Centromed Quilpué S.A.		CHL	NIA	Administradora Médica Centromed S.A.	Ownership.....	93.450	UnitedHealth Group Incorporated	2	
		00000				Centros Médicos y Dentales Multimed Ltda.		CHL	NIA	Onresa S.A.	Ownership.....	99.990	UnitedHealth Group Incorporated		
		00000	47-4823023			Centros Médicos y Dentales Multimed Ltda.		CHL	NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership.....	0.010	UnitedHealth Group Incorporated		
		00000	46-1454664			Centura-SCA Holdings, LLC		CO	NIA	Surgery Center of Colorado Springs, LLC	Influence.....	34.760	UnitedHealth Group Incorporated .....	.5	
		00000				Channel Islands Surgicenter Properties, LLC		DE	NIA	SCA Holding Company, Inc.	Ownership.....	62.743	UnitedHealth Group Incorporated .....	.2	
		00000	58-1709761			Charleston Surgery Center Limited Partnership		SC	NIA	SCA-Charleston, LLC	Influence.....	20.343	UnitedHealth Group Incorporated .....	.5	
		00000	82-3973199			Charleston Surgery Properties, LLC		DE	NIA	SCA-Charleston, LLC	Ownership.....	50.850	UnitedHealth Group Incorporated .....	.2	
		00000	62-1262567			Charlotte-SC, LLC		DE	NIA	SC Affiliates, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	26-2399638			Childrens Surgery Center, LLC		FL	NIA	SCA-Central Florida, LLC	Ownership.....	52.202	UnitedHealth Group Incorporated .....	.2	
		00000	98-1093539			ChinaGate (Hong Kong) Limited		CHN	NIA	Optum, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	62-1510209			Citrus Regional Surgery Center, L.P.		TN	NIA	SCA-Citrus, Inc.	Ownership.....	57.000	UnitedHealth Group Incorporated .....	.2	
		00000	20-3742012			Cleburne Surgical Center, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence.....	51.000	UnitedHealth Group Incorporated .....	.5	
		00000	98-1459640			Clínica Alameda S.A.		CHL	NIA	VidaIntegra S.A.	Ownership.....	99.841	UnitedHealth Group Incorporated		
		00000	98-1459640			Clínica Alameda S.A.		CHL	NIA	Saden S.A.	Ownership.....	0.159	UnitedHealth Group Incorporated		
		00000	98-1443171			Clínica Bío Bío S.A.		CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1442191			Clínica Ciudad del Mar S.A.		CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1446132			Clínica Dávila y Servicios Médicos S.A.		CHL	NIA	Banmédica S.A.	Ownership.....	99.991	UnitedHealth Group Incorporated		
		00000	98-1446132			Clínica Dávila y Servicios Médicos S.A.		CHL	NIA	Clínica Santa María S.A.	Ownership.....	0.009	UnitedHealth Group Incorporated		
		00000				Clínica del Country S.A.		COL	NIA	Banmédica Internacional SpA	Ownership.....	50.000	UnitedHealth Group Incorporated .....	.1	
		00000	98-1350667			Clínica Médico Cirúrgica de Santa Tecla, S.A.		PRT	NIA	Lusíadas, SGPS, S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1337965			Clinica Oftalmologica Danilo de Castro		BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership.....	99.660	UnitedHealth Group Incorporated .....	.2	
		00000	98-1337965			Sociedad Simples		BRA	NIA	Lotten-Eyes Oftalmología Clínica e Cirurgica Ltda.	Ownership.....	0.333	UnitedHealth Group Incorporated .....	.2	
		00000	98-1337965			Sociedad Simples		BRA	NIA	Cirurgica Ltda.	Ownership.....				
		00000				Clínica San Borja (La Esperanza del Perú S.A.)		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership.....	99.990	UnitedHealth Group Incorporated .....	.1	
		00000	98-1462343			Clínica San Felipe S.A.		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership.....	93.740	UnitedHealth Group Incorporated .....	.1	
		00000	98-1455936			Clínica Sánchez Ferrer S.A.		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership.....	99.990	UnitedHealth Group Incorporated .....	.1	
		00000	98-1442754			Clínica Santa María S.A.		CHL	NIA	Banmédica S.A.	Ownership.....	99.433	UnitedHealth Group Incorporated .....	.2	
		00000	98-1442745			Clínica Vespucio S.A.		CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	20-2236024			Clinton Partners, LLC		MI	NIA	HFHS-SCA Holdings, LLC	Influence.....	51.780	UnitedHealth Group Incorporated .....	.5	
		00000	98-1350671			CLISA – Clínica de Santo Antônio, S.A.		PRT	NIA	Lusíadas, SGPS, S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1337968			CMO – Centro Médico de Oftalmología S/S Ltda.		BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership.....	99.000	UnitedHealth Group Incorporated		
		00000	98-1337968			CMO – Centro Médico de Oftalmología S/S Ltda.		BRA	NIA	Lotten-Eyes Oftalmología Clínica e Cirurgica Ltda.	Ownership.....	1.000	UnitedHealth Group Incorporated		
		00000	98-1277015			CMS – Central de Manipulação e Serviços Farmacêuticos S.A.		BRA	NIA	COI – Clínicas Oncológicas Integradas S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	71-0873411			CNIC Health Solutions, Inc.		CO	NIA	Rocky Mountain Health Maintenance Organization, Incorporated	Ownership.....	100.000	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca-tion	Rela-tion-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? (Y/N)	*
		00000	56-2674371			Coachella Valley Physicians of PrimeCare, Inc.	CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	27-1193028			Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx Health Solutions, LLC	Ownership.....	93.266	UnitedHealth Group Incorporated			
		00000	27-1193028			Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx PBM of Maryland, LLC	Ownership.....	5.341	UnitedHealth Group Incorporated			
		00000	27-1193028			Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	Optum Hospice Pharmacy Services, LLC	Ownership.....	1.277	UnitedHealth Group Incorporated			
		00000	27-1193028			Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx Home Delivery of Ohio, LLC	Ownership.....	0.116	UnitedHealth Group Incorporated			
		00000	98-1276040			COI - Clínicas Oncológicas Integradas S.A.	BRA	NIA	COI Participações S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	98-1275801			COI Participações S.A.	BRA	NIA	Esho - Empresa de Serviços Hospitalares S.A.	Ownership.....	89.102	UnitedHealth Group Incorporated		2	
		00000	27-2337616			Collaborative Care Holdings, LLC	DE	NIA	OptumHealth Holdings, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	27-2337487			Collaborative Care Services, Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	45-2614005			Collaborative Realty, LLC	NY	NIA	Collaborative Care Holdings, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	84-1160450			Colmedica Medicina Prepagada	COL	NIA	Banmédica S.A.	Ownership.....	76.270	UnitedHealth Group Incorporated		2	
		00000	11-3647007			Colorado Springs Surgery Center, Ltd.	CO	NIA	SCA-Colorado Springs, LLC	Ownership.....	95.000	UnitedHealth Group Incorporated		2	
		00000	06-1592173			Comfort Care Transportation, LLC	TX	NIA	WellMed Medical Management, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	26-1313646			Connecticut Surgery Center, Limited Partnership	CT	NIA	Connecticut Surgical Center, LLC	Ownership.....	51.000	UnitedHealth Group Incorporated		2	
		00000	06-1156342			Connecticut Surgery Properties, LLC	DE	NIA	Connecticut Surgical Center, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	98-1448720			Connecticut Surgical Center, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership.....	73.039	UnitedHealth Group Incorporated		2	
		00000	00-0231080			Constructora e Imobiliaria Magaopq S.A.	CHL	NIA	Banmédica S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated			
		00000	20-2595593			Constructora e Imobiliaria Magaopq S.A.	CHL	NIA	Immobiliaria Apoquindo 3600 Ltda.	Ownership.....	0.100	UnitedHealth Group Incorporated			
		00000	26-0080565			Consumer Wellness Solutions, Inc.	DE	NIA	Optum Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	63-1263704			Corpus Christi Endoscopy Center, L.P.	TX	NIA	SCA Pacific Holdings, Inc.	Influence.....	18.500	UnitedHealth Group Incorporated		5	
		00000	52-1811176			Country Scan Ltda.	COL	NIA	Patrónimo Autónomo Nueva Clínica - PANC.	Ownership.....	51.800	UnitedHealth Group Incorporated		2	
		00000	52-1452809			Cypress Care, Inc.	DE	NIA	Healthcare Solutions, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		05053	36-4008355			Danbury Surgical Center, L.P.	GA	NIA	SCA Danbury Surgical Center, LLC	Ownership.....	50.419	UnitedHealth Group Incorporated		2	
		00000	41-2014834			Day-Op Surgery Consulting Company, LLC	DE	NIA	ProHEALTH Medical Management, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	47-0926556			DBP Services of New York IPA, Inc.	NY	NIA	Dental Benefit Providers, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	52-1452809			Dental Benefit Providers of California, Inc.	CA	IA	Dental Benefit Providers, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	52-1452809			Dental Benefit Providers of Illinois, Inc.	IL	IA	Dental Benefit Providers, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	41-2014834			Dental Benefit Providers, Inc.	DE	NIA	United HealthCare Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	47-0926556			Denton Surgery Center, LLC	TX	NIA	TH-SCA Holdings, LLC	Influence.....	63.995	UnitedHealth Group Incorporated		5	
		00000	82-1436601			Derry Surgical Center, LLC	NH	NIA	SCA-Derry, LLC	Ownership.....	71.000	UnitedHealth Group Incorporated		2	
		00000	98-1460401			Diagnóstico Ecotomográfico Centromed Ltda.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership.....	50.000	UnitedHealth Group Incorporated		2	
		00000	98-1460347			Diagnóstico por Imágenes Centromed Ltda.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership.....	93.340	UnitedHealth Group Incorporated			
		00000	98-1460347			Diagnóstico por Imágenes Centromed Ltda.	CHL	NIA	Centromed Quipué S.A.	Ownership.....	6.660	UnitedHealth Group Incorporated			
		00000	33-0292435			Digestive Disease Center, L.P.	CA	NIA	Beach Surgical Holdings LLC	Influence.....	51.000	UnitedHealth Group Incorporated		5	
		00000	98-1285762			Dilab Medicina Nuclear Ltda.	BRA	NIA	S.A.	Ownership.....	95.000	UnitedHealth Group Incorporated		2	
		00000	30-0238641			Distance Learning Network, Inc.	DE	NIA	OptumHealth Holdings, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	98-1460401			Doctor + S.A.C.	PER	NIA	Pacifico S.A. Entidad Prestadora de Salud	Ownership.....	99.900	UnitedHealth Group Incorporated		1	
		00000	82-5264853			Dry Creek Surgery Center, LLC	CO	NIA	SCA-DRY CREEK, LLC	Ownership.....	55.000	UnitedHealth Group Incorporated		2	
		00000	82-581311			DTC Surgery Center, LLC	CO	NIA	SCA-DTC Holdings, LLC	Ownership.....	55.000	UnitedHealth Group Incorporated		2	
		00000	27-2103713			Dublin Surgery Center, LLC	OH	NIA	SCA-Dublin, LLC	Ownership.....	53.657	UnitedHealth Group Incorporated		2	
		00000	59-3625966			Duncan Printing Services, LLC	SC	NIA	UnitedHealthcare Insurance Company	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	59-3705426			DWIC of Tampa Bay, Inc.	FL	NIA	MedExpress Development, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	95-4660712			E Street Endoscopy, LLC	FL	NIA	West Coast Endoscopy Holdings, LLC	Ownership.....	51.000	UnitedHealth Group Incorporated		2	
		00000	02-0593133			Ear Professionals International Corporation	DE	NIA	Specialty Benefits, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated			
		00000	02-0593133			East Brunswick Surgery Center, LLC	NJ	NIA	ASC Holdings of New Jersey, LLC	Ownership.....	51.000	UnitedHealth Group Incorporated		2	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	71-0923682			eCode Solutions, LLC	DE	NIA		Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	84-1162764			Electronic Network Systems, Inc.	DE	NIA		OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1339173			Elual Participações S.A.	BRA	NIA		Anil Assistência Médica Internacional S.A.	Ownership	60.00	UnitedHealth Group Incorporated		
		00000	98-1339173			Elual Participações S.A.	BRA	NIA		Esho – Empresa de Serviços Hospitalares S.A.	Ownership	40.00	UnitedHealth Group Incorporated		
		00000	33-0181426			Empire Physician Management Company, LLC	CA	NIA		North American Medical Management California, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3495605			Empire Physicians' Medical Group, Inc.	CA	NIA		NAMM Medical Group Holdings, Inc.	Influence	100.00	UnitedHealth Group Incorporated		.5
		00000	47-3495605			Emprêmedica S.A.	PER	NIA		Banmédica S.A.	Ownership	99.99	UnitedHealth Group Incorporated		.1
		00000	98-1111239			Endoscopy Center Affiliates, Inc.	DE	NIA		National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0701899			EP Campus I, LLC	DE	NIA		UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1111239			Esho – Empresa de Serviços Hospitalares S.A.	BRA	NIA		Anil Assistência Médica Internacional S.A.	Ownership	99.667	UnitedHealth Group Incorporated		.2
		00000	98-1122399			Etho – Empresa de Tecnologia Hospitalar Ltda.	BRA	NIA		Anil Assistência Médica Internacional S.A.	Ownership	90.060	UnitedHealth Group Incorporated		.2
		00000	86-0964571			Evercare Collaborative Solutions, Inc.	DE	NIA		Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1111239			Excellion Serviços Biomédicos Ltda.	BRA	NIA		Esho – Empresa de Serviços Hospitalares S.A.	Ownership	99.99	UnitedHealth Group Incorporated		.2
		00000	98-1111239			Excellion Serviços Biomédicos Ltda.	BRA	NIA		Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership	0.00	UnitedHealth Group Incorporated		.2
		00000	11-3669765			Executive Health Resources, Inc.	PA	NIA		OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0701899			Executive Surgery Center, LLC	TX	NIA		SCA-Houston Executive, LLC	Ownership	54.090	UnitedHealth Group Incorporated		.2
		00000	98-1259260			Exploration for Mine Clearance LLC	JRQ	NIA		UnitedHealthcare Global Medical (UK) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0223385			Family Health Care Services	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0257036			Family Home Hospice, Inc.	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	56-1754482			Fayetteville Ambulatory Surgery Center, L.P.	NC	NIA		NSC Fayetteville, LLC	Influence	46.244	UnitedHealth Group Incorporated		.5
		00000	62-1551098			Florence Surgery Center, L.P.	TN	NIA		SCA-Florence, LLC	Influence	30.000	UnitedHealth Group Incorporated		.5
		00000	32-0432993			Florida MedTrans Network LLC	FL	NIA		Florida MedTrans Network MSO LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4778512			Florida MedTrans Network MSO LLC	FL	NIA		National MedTrans, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2456267			FMG Holdings, LLC	DE	NIA		UnitedHealth Group Incorporated	Ownership	98.710	UnitedHealth Group Incorporated		
		00000	35-2456267			FMG Holdings, LLC	DE	NIA		Hygeia Corporation	Ownership	1.290	UnitedHealth Group Incorporated		
		00000	86-0908902			For Health of Arizona, Inc.	AZ	NIA		For Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0766617			For Health, Inc.	DE	NIA		Inspiris, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	68-0088542			Fort Sutter Medical Building, a California Limited Partnership	CA	NIA		Surgery Centers-West Holdings, LLC	Influence	.4500	UnitedHealth Group Incorporated		.5
		00000	77-0368346			Fort Worth Endoscopy Centers, LLC	TX	NIA		THR-SCA Holdings, LLC	Influence	.51.000	UnitedHealth Group Incorporated		.5
		00000	27-0695411			Fortify Technologies, LLC	MN	NIA		Savvysherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3412606			Franklin Surgical Center, LLC	NJ	NIA		SCA-Franklin, LLC	Ownership	54.290	UnitedHealth Group Incorporated		.2
		00000	82-3453993			Freeway Surgicenter of Houston, LLC	TX	NIA		SCA-Freeway Holdings, LLC	Ownership	59.320	UnitedHealth Group Incorporated		.2
		00000	98-1172769			Frontier Medex Tanzania Limited	TZA	NIA		UnitedHealthcare Global Medical (UK) Limited	Ownership	99.000	UnitedHealth Group Incorporated		.2
		00000	68-0679514			FrontierMEDEX (RMS), Inc.	DE	NIA		FMG Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-5339512			FrontierMEDEX Government Services, LLC	DE	NIA		FMG Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1147103			FrontierMEDEX Kenya Limited	KEN	NIA		UnitedHealthcare Global Medical (UK) Limited	Ownership	99.900	UnitedHealth Group Incorporated		
		00000	98-1147103			FrontierMEDEX Kenya Limited	KEN	NIA		UnitedHealthcare International I B.V.	Ownership	.0100	UnitedHealth Group Incorporated		
		00000	98-1101521			FrontierMEDEX Limited	JRQ	NIA		UnitedHealthcare Global Medical (UK) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-1219808			FrontierMEDEX US, Inc.	DE	NIA		FMG Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-2230470			FrontierMEDEX, Inc.	MN	NIA		FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1101521			Fundación Banmédica	CHL	NIA		Banmédica S.A.	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Relation- ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		.00000	63-0833765				Gadsden Surgery Center, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	62-1488653				Gadsden Surgery Center, Ltd.	AL	N/A	Gadsden Surgery Center, LLC	Ownership	58.500	UnitedHealth Group Incorporated		2
		.00000	62-1600268				Gainesville Surgery Center, L.P.	TN	N/A	SCA-Northeast Georgia Health, LLC	Ownership	87.000	UnitedHealth Group Incorporated		2
		.00000	46-1615328				Gainesville Surgery Properties, LLC	DE	N/A	Gainesville Surgery Center, L.P.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	27-0556097				Geisinger-SCA Holdings, LLC	DE	N/A	SCA Pennsylvania Holdings, LLC	Influence	49.000	UnitedHealth Group Incorporated		.5
		.00000	47-3851949				Genoa Healthcare LLC	PA	N/A	Specialized Pharmaceuticals, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	20-5009764				Genoa Healthcare, Inc.	DE	N/A	OptumRx Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	38-4034308				Genoa of Arkansas, LLC	AR	N/A	Genoa Healthcare LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	45-3010132				Genoa Technology (Canada) Inc.	CAN	N/A	Genoa Technology, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	81-4703295				Genoa Telepsychiatry, Inc.	DE	N/A	Genoa Healthcare LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	37-0920164				Genoa, Qd Wholesale, LLC	DE	N/A	Genoa Healthcare LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	65-1025514				gethealthinsurance.com Agency Inc.	IN	N/A	Golden Rule Financial Corporation	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	47-3495605				Gladiolus Surgery Center, LLC	FL	N/A	SCA-Gladiolus, LLC	Influence	45.981	UnitedHealth Group Incorporated		.5
		.00000	33-0595220				GLBESC, LLC	DE	N/A	Beach Surgical Holdings LLC	Influence	51.280	UnitedHealth Group Incorporated		.5
		.00000	62-1601450				Glenwood Surgical Center, L.P.	CA	N/A	Glenwood-SC, Inc.	Ownership	45.070	UnitedHealth Group Incorporated		2
		.00000	98-1260839				Glenwood-SC, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	20-3420886				GLGC Medical Ltd.	CAN	N/A	UnitedHealthcare Global Canada Limited	Influence	49.000	UnitedHealth Group Incorporated		.5
		.00000	37-0855360				Golden Outlook, Inc.	CA	N/A	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.0707	UnitedHealth Group Incorporated	62286	3057283		Golden Rule Financial Corporation	DE	N/A	UnitedHealth Group Incorporated	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	33-0529450				Golden Rule Insurance Company	IN	N/A	Golden Rule Financial Corporation	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	52-1597483				Golden Triangle Surgicenter, L.P.	CA	N/A	Surgery Centers-West Holdings, LLC	Ownership	72.000	UnitedHealth Group Incorporated		2
		.00000	93-1237063				Grandview Surgery Center, LTD.	PA	N/A	Camp Hill Ambulatory Centers	Influence	41.993	UnitedHealth Group Incorporated		.5
		.00000	81-4648930				GRANTS PASS SURGERY CENTER, LLC	OR	N/A	SCA-GRANTS PASS, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
		.00000	36-4053840				Greater New Haven ASC, LLC	CT	N/A	SCA-Hamden, LLC	Influence	20.830	UnitedHealth Group Incorporated		.5
		.00000	74-2411643				Greensboro Specialty Surgery Center, LLC	NC	N/A	NSC Greensboro West, LLC	Influence	50.100	UnitedHealth Group Incorporated		.5
		.00000	33-0749339				Greenville Surgery Center, LLC	TX	N/A	THR-SCA Holdings, LLC	Influence	57.500	UnitedHealth Group Incorporated		.5
		.00000	33-0749339				Grossmont Surgery Center, L.P.	CA	N/A	Medical Surgical Centers of America, Inc.	Influence	33.280	UnitedHealth Group Incorporated		.5
		.00000	01-0619096				Grossmont Surgery Center, L.P.	CA	N/A	SunSurgery, LLC	Influence	1.000	UnitedHealth Group Incorporated		.5
		.00000	98-0213198				Grove Place Surgery Center, L.L.C.	FL	N/A	SCA-Grove Place, LLC	Ownership	52.580	UnitedHealth Group Incorporated		.2
		.00000	26-1227494				H&W Indemnity (SPC), Ltd.	CYM	N/A	UnitedHealth Group Incorporated	Ownership	100.000	UnitedHealth Group Incorporated		
		.0707	UnitedHealth Group Incorporated	79480	35-1279304		H.I. Investments Holding Company, LLC	DE	N/A	Health Inventures, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	58-2065044				Harken Health Insurance Company	WI	N/A	UnitedHealthcare, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	27-4579547				Hawthorn Place Outpatient Surgery Center, L.P.	GA	N/A	SHC Hawthorn, Inc.	Influence	38.000	UnitedHealth Group Incorporated		.5
		.00000	20-5944768				Hays Surgery Center, LLC	TX	N/A	SCA Hays Holdings, LLC	Influence	27.270	UnitedHealth Group Incorporated		.5
		.00000	04-3723090				hCentive, Inc.	DE	N/A	Optum Government Solutions, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-0153069				Health Inventures Employment Solutions, LLC	DE	N/A	Health Inventures, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.0707	UnitedHealth Group Incorporated	96342	88-0201035		Health Inventures, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	95-4763349				Health Net Services (Cayman) PIC	CYM	N/A	H&W Indemnity (SPC), Ltd.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	77-0693060				Health Plan of Nevada, Inc.	NV	N/A	Sierra Health Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	20-3349887				HealthAllies, Inc.	DE	N/A	OptumHealth Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-1443161				Healthcare Solutions, Inc.	DE	N/A	OptumRx Administrative Services, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-1452260				HealthEast Surgery Center-Maplewood, LLC	MN	N/A	H.I. Investments Holding Company, LLC	Influence	25.962	UnitedHealth Group Incorporated		.5
		.00000	98-1452260				HealthFirst IPA, Inc.	CO	N/A	New West Physicians, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-1443161				Help S.A.	CHL	N/A	Banmédica S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	20-8910978				Help Service S.A.	CHL	N/A	Banmédica S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000					Hemonefro - Hemodialise e Nefrologia Ltda	BRA	S.A.	Esho - Empresa de Serviços Hospitalares	Influence	28.500	UnitedHealth Group Incorporated		.5
		.00000	46-5291602				HFHS-SCA Holdings, LLC	MI	N/A	SC Affiliates, LLC	Influence	49.000	UnitedHealth Group Incorporated		.5
		.00000	84-1472832				Highlands Ranch Healthcare, LLC	CO	N/A	Urgent Care MSO, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-1452260				Home Medical S.A.	CHL	N/A	Help S.A.	Ownership	99.998	UnitedHealth Group Incorporated		
		.00000	98-1452260				Home Medical S.A.	CHL	N/A	Saden S.A.	Ownership	0.002	UnitedHealth Group Incorporated		
		.00000	20-8910978				Hospice Inspiris Holdings, Inc.	TN	N/A	Inspiris, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	98-1286038				Hospitais Associados de Pernambuco Ltda.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000					Hospital Alvorada de Taguatinga Ltda.	BRA	NIA	Anil Assistência Médica Internacional S.A.	Ownership.	82.595	UnitedHealth Group Incorporated		2
		00000					Hospital Alvorada de Taguatinga Ltda.	BRA	NIA	Bosque Medical Center Ltda.	Ownership.	9.310	UnitedHealth Group Incorporated		2
		00000	98-1389272				Hospital Alvorada de Taguatinga Ltda.	BRA	NIA	Hospital Samaritano de São Paulo Ltda.	Ownership.	8.094	UnitedHealth Group Incorporated		2
		00000	98-1389272				Hospital Ana Costa S.A.	BRA	NIA	Plano de Saúde Ana Costa Ltda.	Ownership.	98.670	UnitedHealth Group Incorporated		2
		00000	98-1389272				Hospital Ana Costa S.A.	BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership.	1.042	UnitedHealth Group Incorporated		2
		00000	98-1310065				Hospital de Clínicas de Jacarepaguá Ltda.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1310065				Hospital de Clínicas de Jacarepaguá Ltda.	BRA	NIA	Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership.	0.000	UnitedHealth Group Incorporated		
		00000	98-1328324				Hospital Samaritano de São Paulo Ltda.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership.	99.990	UnitedHealth Group Incorporated		2
		00000	98-1328324				Hospital Samaritano de São Paulo Ltda.	BRA	NIA	Anico Saúde Ltda.	Ownership.	0.000	UnitedHealth Group Incorporated		2
		00000	98-1332673				Hospital Santa Helena S.A.	BRA	NIA	Etiual Participações S.A.	Ownership.	65.210	UnitedHealth Group Incorporated		2
		00000	98-1332673				Hospital Santa Helena S.A.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership.	33.600	UnitedHealth Group Incorporated		2
		00000	26-2912304				Humedica, Inc.	DE	NIA	United HealthCare Services, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	36-4331825				Hygeia Corporation	DE	NIA	UnitedHealth International, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1106075				Hygeia Corporation (Ontario)	CAN	NIA	UnitedHealth Group International L.P.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	45-4148032				IEC Holdings, LLC	IN	NIA	SCA IEC Holdings, LLC	Influence.	49.000	UnitedHealth Group Incorporated		5
		00000	82-1341098				Illinois Independent Care Network	DE	NIA	Surgical Care Affiliates, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1122694				Imed Star – Serviços de Desempenho Organizacional Ltda.	BRA	NIA	Optum Health & Technology Serviços do Brasil Ltda.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1122694				Imed Star – Serviços de Desempenho Organizacional Ltda.	BRA	NIA	UHG Brasil Participações S.A.	Ownership.	0.000	UnitedHealth Group Incorporated		
		00000	20-4351923				Impel Consulting Experts, L.L.C.	TX	NIA	Impel Management Services, L.L.C.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	75-2574317				Impel Management Services, L.L.C.	TX	NIA	USMD Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	26-0711388				Indian River Surgery Properties, LLC	FL	NIA	Surgery Center of Vero Beach, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	45-4132005				Indiana Care Organization, LLC	IN	NIA	AHN Target Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	62-1641102				Ingram & Associates, LLC	TN	NIA	Optum360, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	33-0018673				Inland Surgery Center, L.P.	CA	NIA	Redlands Ambulatory Surgery Center	Influence.	51.000	UnitedHealth Group Incorporated		5
		00000					Immobiliaria Apoquindo 3001 S.A.	CHL	NIA	Immobiliaria Apoquindo S.A.	Ownership.	99.999	UnitedHealth Group Incorporated		
		00000					Immobiliaria Apoquindo 3001 S.A.	CHL	NIA	Vida Tres Internacional S.A.	Ownership.	0.001	UnitedHealth Group Incorporated		
		00000	98-1458683				Immobiliaria Apoquindo 3600 Ltda.	CHL	NIA	Bannmédia S.A.	Ownership.	99.700	UnitedHealth Group Incorporated		
		00000	98-1458683				Immobiliaria Apoquindo 3600 Ltda.	CHL	NIA	Immobiliaria Apoquindo 3001 S.A.	Ownership.	0.300	UnitedHealth Group Incorporated		
		00000	98-1443174				Immobiliaria Apoquindo S.A.	CHL	NIA	Bannmédia S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1458682				Immobiliaria Clínica Santa María S.A.	CHL	NIA	Bannmédia S.A.	Ownership.	99.433	UnitedHealth Group Incorporated		2
		00000	98-1454653				Immobiliaria e Inversiones Alameda S.A.	CHL	NIA	Bannmédia S.A.	Ownership.	99.980	UnitedHealth Group Incorporated		
		00000	98-1454653				Immobiliaria e Inversiones Alameda S.A.	CHL	NIA	Saden S.A.	Ownership.	0.020	UnitedHealth Group Incorporated		
		00000	98-1460922				Immobiliaria Viñamed Ltda.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership.	99.900	UnitedHealth Group Incorporated		2
		00000	47-5640889				INOV8 Surgical at Memorial City, LLC	TX	NIA	Memorial City Partners, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	88-0482274				inPharmative, Inc.	NV	NIA	OptumRx Health Solutions, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	13-4138668				INSPIRIS of New York IPA, Inc.	NY	NIA	Inspiris, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	13-4138665				INSPIRIS of New York Management, Inc.	NY	NIA	Inspiris, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	26-2885572				INSPIRIS of Texas Physician Group	TX	NIA	Optum Care Services Company	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	33-0766366				Inspiris, Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1452273				Inversiones Clínicas Santa María S.A.	CHL	NIA	Bannmédia S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1448096				Isapre Bannmédia S.A.	CHL	IA	Bannmédia S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	20-5337793				Isapre Vida Tres S.A.	CHL	IA	Bannmédia S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	20-5337793				Johnston Surgicare, L.P.	RI	NIA	Blackstone Valley Surgicare GP, LLC	Ownership.	99.000	UnitedHealth Group Incorporated		
		00000	74-2544709				Johnston Surgicare, L.P.	RI	NIA	Surgicare of Joliet, Inc.	Ownership.	1.000	UnitedHealth Group Incorporated		
		00000					Joliet Surgery Center Limited Partnership	IL	NIA	Surgicare of Joliet, Inc.	Ownership.	54.030	UnitedHealth Group Incorporated		2

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
		00000	98-1456202				Laboratorio ROE S.A.	.PER.	.N/A.	Pacifico S.A. Entidad Prestadora de Salud	Ownership.	99.990	UnitedHealth Group Incorporated		.1
		00000					Laboratorios Médicos Amed Quipué S.A.	.CHL.	.N/A.	Centromed Quipué S.A.	Ownership.	99.90	UnitedHealth Group Incorporated		2
		00000	61-1028180				Lexington Surgery Center, Ltd.	.KY.	.N/A.	Surgery Center of Lexington, LLC	Influence.	73.000	UnitedHealth Group Incorporated		5
		00000	36-3468942				LGH-A/GOLF ASTC, L.L.C.	.OH.	.N/A.	Advocate-SCA Partners, LLC	Influence.	36.950	UnitedHealth Group Incorporated		5
		00000	81-4465348				Liberty Anesthesia Services, LLC	.IL.	.N/A.	Winchester Endoscopy, LLC	Ownership.	51.000	UnitedHealth Group Incorporated		2
							Lifeprint Accountable Care Organization, LLC	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	32-0409538				Lifeprint East, Inc.	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	45-3143218				LifePrint Health, Inc.	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	27-2309024				Logistics Health, Inc.	.WI.	.N/A.	OptumHealth Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	39-1974851				Lotten-Eyes Oftalmología Clinica e Cirurgica Ltda.	.BRA.	.N/A.	Hospital Alvorada de Taguatinga Ltda.	Ownership.	99.990	UnitedHealth Group Incorporated		2
		00000	98-1337963				Lotten-Eyes Oftalmología Clinica e Cirurgica Ltda.			Esbo - Empresa de Serviços Hospitalares S.A.	Ownership.	0.000	UnitedHealth Group Incorporated		2
		00000	98-1337963				Louisville S.C., Ltd.	.KY.	.N/A.	Surgery Center of Louisville, LLC	Ownership.	65.400	UnitedHealth Group Incorporated		2
		00000	62-1179566				Louisville-SC Properties, Inc.	.KY.	.N/A.	SC Affiliates, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	62-1179538				Loyola Ambulatory Surgery Center at Oakbrook, Inc.	.IL.	.N/A.	ASC Network, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	36-4119519				Loyola Ambulatory Surgery Center at Oakbrook, L.P.	.IL.	.N/A.	Loyola Ambulatory Surgery Center at Oakbrook, Inc.	Influence.	45.000	UnitedHealth Group Incorporated		.5
		00000	98-1137620				Lusíadas - Parcerias Cascais, S.A.	.PRT.	.N/A.	Lusíadas, SGPS, S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	Lusíadas, SGPS, S.A.	Ownership.	55.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	Lusíadas, S.A.	Ownership.	20.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	CLISA - Clínica de Santo António, S.A.	Ownership.	10.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	Lusíadas - Parcerias Cascais, S.A.	Ownership.	10.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	Clínica Médico Cirúrgica de Santa Tecla, S.A.	Ownership.	5.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	.PRT.	.N/A.	Lusíadas, SGPS, S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas, S.A.	.PRT.	.N/A.	AMIL International	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1138570				MAMSI Insurance Resources, LLC	.MD.	.N/A.	OneNet PPO, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	52-2129787				MAMSI Life and Health Insurance Company	.MD.	.IA.	United HealthCare Services, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	60321	52-1803283			Managed Physical Network, Inc.	.NY.	.N/A.	OptumHealth Care Solutions, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	14-1782475			March Holdings, Inc.	.CA.	.N/A.	Specialty Benefits, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	20-2880404			March Vision Care, Inc.	.CA.	.N/A.	March Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	20-3042852			Marin Specialty Surgery Center, LLC	.CA.	.N/A.	MGH/SCA, LLC	Influence.	51.000	UnitedHealth Group Incorporated		.5
		00000	00000	26-2637247			Marin Surgery Holdings, Inc.	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	26-2601943			Maryland Ambulatory Centers	.MD.	.N/A.	Maryland-SCA Centers, LLC	Ownership.	50.000	UnitedHealth Group Incorporated		2
		00000	00000	52-1456812			Maryland-SCA Centers, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	52-1401791			Massachusetts Assurance Co., Ltd.	.CYM.	.N/A.	Collaborative Care Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	20-0815305			Massachusetts Avenue Surgery Center, LLC	.MD.	.N/A.	SCA-Bethesda, LLC	Ownership.	56.690	UnitedHealth Group Incorporated		2
		00000	00000	62-1600267			McKenzie Surgery Center, L.P.	.TN.	.N/A.	SCA-Eugene, Inc.	Ownership.	92.000	UnitedHealth Group Incorporated		2
							North American Medical Management								
		00000	00000	42-1741594			MD Ops, Inc.	.CA.	.N/A.	California, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	96310	52-1169135		MD-Individual Practice Association, Inc.	.MD.	.IA.	United HealthCare Services, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	83-1183650		ME AHS UC LLC	.DE.	.N/A.	Urgent Care MSO, LLC	Ownership.	70.000	UnitedHealth Group Incorporated		2
							Optum Health & Technology Serviços do Brasil Ltda.	.BRA.	.N/A.						
		00000	00000	00000	98-1286220		Medalliance Net Ltda.	.BRA.	.N/A.	UHG Brasil Participações S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	98-1286220		Medalliance Net Ltda.	.BRA.	.N/A.	FrontierMEDEX, Inc.	Ownership.	0.000	UnitedHealth Group Incorporated		
		00000	00000	00000	52-2178531		MEDEX Insurance Services, Inc.	.MD.	.N/A.	Urgent Care MSO, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	20-3824377		MedExpress Development, LLC	.FL.	.N/A.	Urgent Care Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	32-0533926		MedExpress Urgent Care Alabama, LLC	.AL.	.N/A.	Urgent Care Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	82-1719888		MedExpress Urgent Care Maine, Inc.	.ME.	.N/A.	Urgent Care Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	00000	00000	82-0631738		MedExpress Urgent Care New Hampshire, Inc.	.NH.	.N/A.	Urgent Care Holdings, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca-tion	Rela-tion-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? (Y/N)	*
		00000	20-2545363				MedExpress Urgent Care of Boynton Beach, LLC	FL	NIA	MedExpress Development, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					MedExpress Urgent Care, Inc. - Ohio	OH	NIA	Urgent Care Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	12756	20-3391186				Medica Health Plans of Florida, Inc.	FL	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	12155	01-0788576				Medica HealthCare Plans, Inc.	FL	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-0636717				Medical Hilfe S.A.	CHL	NIA	Home Medical S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	32-0037402				Medical Surgical Centers of America, Inc.	DE	NIA	ASC Network, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-4635837				Medical Transportation Services, LLC	FL	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2515691				Medication Management Systems, Inc.	MN	NIA	Genoa Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-2101921				MedSynergies, LLC	DE	NIA	Mustang Razorback Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-4964787				Melbourne Surgery Center, LLC	GA	NIA	Surgical Care Partners of Melbourne, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3699933				Memorial City Holdings, LLC	DE	NIA	SCA-Memorial City, LLC	Ownership	51.00	UnitedHealth Group Incorporated	2	
		00000	82-3699933				Memorial City Partners, LLC	DE	NIA	Memorial City Holdings, LLC	Ownership	51.00	UnitedHealth Group Incorporated	2	
		00000	26-1394069				MemorialCare Surgical Center at Orange Coast, LLC	CA	NIA	Beach Surgical Holdings, LLC	Influence	51.00	UnitedHealth Group Incorporated		.5
		00000	20-3678259				MemorialCare Surgical Center at Saddleback, LLC	CA	NIA	Beach Surgical Holdings, LLC	Influence	53.050	UnitedHealth Group Incorporated		.5
		00000	62-1590322				Memphis-SC, LLC	TN	NIA	SCA-Shelby Development Corp.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1590324				Memphis-SP, LLC	TN	NIA	Shelby Surgery Properties, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-2303928				Metropolitan Medical Partners, LLC	MD	NIA	SCA-Chevy Chase, LLC	Ownership	60.830	UnitedHealth Group Incorporated		.2
		00000	20-8998927				Metropolitan Medical Transportation IPA, LLC	NY	NIA	National MedTrans, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	38-3861395				MGH/SCA, LLC	CA	NIA	Marin Surgery Holdings, Inc.	Influence	49.000	UnitedHealth Group Incorporated		.5
		00000	27-2252446				MHC Real Estate Holdings, LLC	CA	NIA	Monarch Management Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-460281				MIAMI SURGERY CENTER, LLC	DE	NIA	SCA-Doral, LLC	Ownership	50.180	UnitedHealth Group Incorporated		.2
		00000	20-3345412				Midlands Orthopaedics Surgery Center, LLC	SC	NIA	SCA-Midlands, LLC	Influence	49.000	UnitedHealth Group Incorporated		.5
		00000	20-8103522				Midwest Center for Day Surgery, LLC	IL	NIA	Advocate-SCA Partners, LLC	Ownership	53.224	UnitedHealth Group Incorporated		.2
		00000	83-0543458				Mile High SurgiCenter, LLC	CO	NIA	SCA-Mile High Holdings, LLC	Ownership	55.000	UnitedHealth Group Incorporated		.2
		00000	27-2439806				Mississippi Surgery Holdings, LLC	DE	NIA	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-3949765				MN Waypoint Sports Physical Therapy, Inc.	DE	NIA	Orthology, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-0883553				Mobile-SC, LTD.	AL	NIA	SCA-Mobile, LLC	Influence	33.000	UnitedHealth Group Incorporated		.5
		00000	31-1191553				Modern Medical, Inc.	OH	NIA	Healthcare Solutions, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-3142852				Monarch Management Services, Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-1401868				Montgomery Surgery Center Limited Partnership	MD	NIA	Maryland Ambulatory Centers	Ownership	77.000	UnitedHealth Group Incorporated		.2
		00000	81-1633765				MSLA Management LLC	DE	NIA	Logistics Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506649				Mt. Pleasant Surgery Center, L.P.	TN	NIA	SCA-Mt. Pleasant, LLC	Ownership	98.000	UnitedHealth Group Incorporated		.2
		00000	98-1285432				Multiangiyo Ltda.	BRA	NIA	Esho - Empresa de Servicos Hospitalares S.A.	Ownership	93.000	UnitedHealth Group Incorporated		.2
		00000	20-4209261				Muskogee Surgical Investors, LLC	OK	NIA	Surgery Center of Muskogee, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1935798				Mustang Razorback Holdings, Inc.	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-2564744				My Wellness Solutions, LLC	DE	NIA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3236839				NAMM Holdings, Inc.	DE	NIA	Aveta Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1468431				Nashville-SCA Surgery Centers, Inc.	TN	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-2336925				National MedTrans, LLC	NY	NIA	Specialty Benefits, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	95251	76-0196559				National Pacific Dental, Inc.	TX	IA	Dental Benefit Providers, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	00000	36-3549627				National Surgery Centers, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	95123	65-0996107				Neighborhood Health Partnership, Inc.	FL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	00000	20-4755277				Netwerkes, LLC	TN	NIA	Optum360 Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	95758	88-0228572				Nevada Pacific Dental	NV	IA	Dental Benefit Providers, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	72-1267232				New Orleans Regional Physician Hospital Organization, L.L.C.	LA	NIA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	84-1250135				New West Physicians, Inc.	CO	NIA	Newton Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Newton Holdings, LLC	DE	NIA	Collaborative Care Holdings, LLC	Ownership	80.100	UnitedHealth Group Incorporated		.2

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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 Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	33-0673955			North American Medical Management California, Inc.		TN	NIA	NAMM Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2248103			North Dallas Surgical Center, LLC		DE	NIA	THR-SCA Holdings, LLC	Influence	51.00	UnitedHealth Group Incorporated		.5
		00000	88-0245121			Northern Nevada Health Network, Inc.		NV	NIA	Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1240726			Northern Rockies Surgery Center, L.P.		TN	NIA	Northern Rockies Surgicenter, Inc.	Ownership	51.00	UnitedHealth Group Incorporated		.2
		00000	81-0399251			Northern Rockies Surgicenter, Inc.		MT	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-1007387			Northwest Surgicare, LLC		DE	NIA	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2494046			Northwest Surgicare, Ltd., an Illinois Limited Partnership		IL	NIA	Northwest Surgicare, LLC	Ownership	61.00	UnitedHealth Group Incorporated		.2
		00000	56-1754480			NSC Fayetteville, LLC		DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	56-1775016			NSC Greensboro, LLC		DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4210296			NSC Lancaster, LLC		DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	91-1553479			NSC Seattle, Inc.		WA	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0812824			NSC Upland, LLC		DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1454609			Omesa S.A.		CHL	NIA	VidaIntegra S.A.	Ownership	99.99	UnitedHealth Group Incorporated		
		00000	98-1454609			Omesa S.A.		CHL	NIA	Saden S.A.	Ownership	0.01	UnitedHealth Group Incorporated		
		00000	98-1456252			Oncocare S.A.C.		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	80.00	UnitedHealth Group Incorporated		.2
		00000	52-2129786			OneNet PPO, LLC		MD	NIA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-1914835			OPHTHALMOLOGY SURGERY CENTER OF DALLAS, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.00	UnitedHealth Group Incorporated		.5
		0707	UnitedHealth Group Incorporated	96940	52-1518174	Optimum Choice, Inc.		MD	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-0858534	3202702		Optum Bank, Inc.		UT	NIA	OptumHealth Financial Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-3437660			Optum Biometrics, Inc.		IL	NIA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-0683057			Optum Care Services Company		TN	NIA	Inspiris, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1959511			Optum Care, Inc.		DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-1782217			Optum Clinics Holdings, Inc.		DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	38-3969193			Optum Clinics Intermediate Holdings, Inc.		DE	NIA	Optum Clinics Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1325466			Optum Digital Health Holdings, LLC		DE	NIA	Consumer Wellness Solutions, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1103015			Optum Finance (Ireland) Unlimited Company		IRL	NIA	UnitedHealthcare International VIII S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1103015			Optum Global Solutions (India) Private Limited		IND	NIA	Optum Global Solutions International B.V.	Ownership	99.99	UnitedHealth Group Incorporated		
		00000	98-1097776			Optum Global Solutions (India) Private Limited		IND	NIA	UnitedHealth International, Inc.	Ownership	0.001	UnitedHealth Group Incorporated		
		00000	98-1201187			Optum Global Solutions (Philippines), Inc.		PHL	NIA	Optum Global Solutions International B.V.	Ownership	99.992	UnitedHealth Group Incorporated		.2
		00000	98-1201187			Optum Global Solutions International B.V.		NLD	NIA	Optum Technology, Inc.	Ownership	97.480	UnitedHealth Group Incorporated		
		00000	04-3574101			Optum Global Solutions International B.V.		NLD	NIA	OptumHealth International B.V.	Ownership	2.520	UnitedHealth Group Incorporated		
		00000	98-1095799			Optum Government Solutions, Inc.		DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1095799			Optum Health & Technology (Hong Kong) Limited		CHN	NIA	OptumHealth International B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1095799			Optum Health & Technology (India) Private Limited		IND	NIA	OptumHealth International B.V.	Ownership	99.999	UnitedHealth Group Incorporated		
		00000	98-1095799			Optum Health & Technology (India) Private Limited		IND	NIA	United Behavioral Health	Ownership	0.001	UnitedHealth Group Incorporated		
		00000	98-1097886			Optum Health & Technology (Singapore) Pte. Ltd.		SGP	NIA	OptumHealth International B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1095879			Optum Health & Technology (UK) Limited		GBR	NIA	Optum UK Solutions Group Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-2149493			Optum Health & Technology (US), LLC		MO	NIA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	43-1747235			Optum Health & Technology Holdings (US), Inc.		MO	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1184561			Optum Health & Technology Serviços do Brasil Ltda.		BRA	NIA	Optum Global Solutions International B.V.	Ownership	99.996	UnitedHealth Group Incorporated		
		00000	98-1184561			Optum Health & Technology Serviços do Brasil Ltda.		BRA	NIA	OptumInsight, Inc.	Ownership	0.004	UnitedHealth Group Incorporated		
		00000	98-1276517			Optum Health and Technology FZ-LLC		ARE	NIA	Optum Global Solutions International B.V.	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
		00000	98-1097921				Optum Health Services (Canada) Ltd.	CAN	N/A	Optum Health & Technology Holdings (US), Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1406274				Optum Health Solutions (Australia) Pty Ltd	AUS	N/A	Optum UK Solutions Group Limited	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1147355				Optum Health Solutions (UK) Limited	GBR	N/A	Optum UK Solutions Group Limited	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	58-2068880				Optum Healthcare of Illinois, Inc.	GA	N/A	Optum Women's and Children's Health, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	20-0212381				Optum Hospice Pharmacy Services, LLC	DE	N/A	OptumRx Health Solutions, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		09647	31-0628424				Optum Insurance of Ohio, Inc.	OH	RE	OptumRx PBM of Maryland, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-4734521				Optum Labs Dimensions, Inc.	DE	N/A	Optum Labs, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1249178				Optum Labs International (UK) Ltd.	GBR	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-1615964				Optum Labs, Inc.	DE	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1209730				Optum Life Sciences (Canada) Inc.	CAN	N/A	OptumInsight Life Sciences, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1098190				Optum Management Consulting (Shanghai) Co., Ltd.	CHN	N/A	Optum Health & Technology Holdings (US), Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	90-1001805				Optum Nevada Accountable Care Organization LLC	DE	N/A	Collaborative Care Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	58-1873062				Optum of New York, Inc.	NY	N/A	Optum Women's and Children's Health, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1097761				Optum Operations (Ireland) Unlimited Company	IRL	N/A	UnitedHealthcare International VII S.à r.l.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	20-8911466				Optum Palliative and Hospice Care of Pennsylvania, Inc.	TN	N/A	Hospice Inspiris Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	20-8911303				Optum Palliative and Hospice Care of Texas, Inc.	TN	N/A	Hospice Inspiris Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	30-0226127				Optum Palliative and Hospice Care, Inc.	DE	N/A	Collaborative Care Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	20-4581265				Optum Public Sector Solutions, Inc.	DE	N/A	OptumInsight, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-3328009				Optum Rocket, Inc.	DE	N/A	OptumInsight, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	26-0543382				Optum Senior Services, LLC	AL	N/A	Optum Hospice Pharmacy Services, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1307821				Optum Services (Ireland) Limited	IRL	N/A	Optum Operations (Ireland) Unlimited Company	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	66-0870003				Optum Services (Puerto Rico) LLC	PR	N/A	UnitedHealthcare International III B.V.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	45-4683454				Optum Services, Inc.	DE	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1284698				Optum Solutions do Brasil - Tecnologia e Serviços de Suporte Ltda.	BRA	N/A	Optum Global Solutions International B.V.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1284698				Optum Solutions do Brasil - Tecnologia e Serviços de Suporte Ltda.	BRA	N/A	OptumInsight, Inc.	Ownership.....	0.00	UnitedHealth Group Incorporated		
		00000	98-0644599				Optum Solutions UK Holdings Limited	GBR	N/A	Optum Health & Technology Holdings (US), Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-5713629				Optum Technology, Inc.	DE	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1097769				Optum UK Solutions Group Limited	GBR	N/A	Optum Solutions UK Holdings Limited	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	58-2205984				Optum Women's and Children's Health, LLC	DE	N/A	My Wellness Solutions, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	30-0580620	3119994			Optum, Inc.	DE	UIP	United HealthCare Services, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-3983926				Optum360 Services, Inc.	DE	N/A	Optum Rocket, Inc.	Ownership.....	69.00	UnitedHealth Group Incorporated		2
		00000	82-3446942				Optum360 Solutions, LLC	DE	N/A	OptumInsight, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-3328307				Optum360, LLC	DE	N/A	Optum Rocket, Inc.	Ownership.....	69.00	UnitedHealth Group Incorporated		2
		00000	41-1591944				OptumHealth Care Solutions, LLC	DE	N/A	OptumInsight, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	47-0858530				OptumHealth Financial Services, Inc.	DE	N/A	OptumHealth Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	47-1192395				OptumHealth Holdings, LLC	DE	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1106868				OptumHealth International B.V.	NLD	N/A	Catamaran S.á.r.l.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	04-3383745				OptumInsight Holdings, LLC	DE	N/A	Optum, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	41-1858498				OptumInsight Life Sciences, Inc.	DE	N/A	OptumInsight, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	75-2578509				OptumInsight, Inc.	DE	N/A	OptumInsight Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	31-1728846				OptumRx Administrative Services, LLC	TX	UIP	OptumRx Holdings I, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	47-4734235				OptumRx Discount Card Services, LLC	DE	N/A	OptumRx PBM of Illinois, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	46-0666840				OptumRx Group Holdings, Inc.	DE	UIP	OptumRx Administrative Services, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	OptumRx Health Solutions, LLC					DE	UIP	OptumRx Health Solutions, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

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		00000	80-0870454				OptumRx Holdings I, LLC	DE	UIP	OptumRx Group Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000					OptumRx Holdings, LLC	DE	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	34-1472211				OptumRx Home Delivery of Ohio, LLC	OH	NIA	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	20-0218027				OptumRx IPA III, Inc.	NY	NIA	OptumRx PBM of Maryland, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	20-0151096				OptumRx NY IPA, Inc.	NY	NIA	OptumRx, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	27-3419292				OptumRx of Pennsylvania, LLC	DE	NIA	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	11-2581812				OptumRx PBM of Illinois, Inc.	DE	NIA	OptumRx Administrative Services, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	88-0361447				OptumRx PBM of Maryland, LLC	NV	UDP	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	03-0592263				OptumRx PBM of Pennsylvania, LLC	PA	NIA	OptumRx of Pennsylvania, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	26-1424534				OptumRx PBM of Puerto Rico, LLC	NV	NIA	OptumRx PBM of Maryland, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	38-3693753				OptumRx PBM of Wisconsin, LLC	WI	NIA	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	16-1767416				OptumRx PD of Pennsylvania, LLC	PA	NIA	OptumRx of Pennsylvania, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	88-0373347				OptumRx Pharmacy of Nevada, Inc.	NV	NIA	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	47-3146510				OptumRx Pharmacy, Inc.	DE	NIA	OptumRx, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	33-0441200				OptumRx, Inc.	CA	NIA	OptumRx Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	22-3883387				OREGON OUTPATIENT SURGERY CENTER, LLC	OR	NIA	Providence & SCA Off-Campus Holdings, LLC	Influence	51.180	UnitedHealth Group Incorporated		.5		
		00000	59-3125869				Orlando Center for Outpatient Surgery, L.P.	GA	NIA	Surgical Health of Orlando, Inc.	Ownership	58.699	UnitedHealth Group Incorporated		.2		
		00000	46-2881462				Orthology Mid-Atlantic, Inc.	DE	NIA	Orthology, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	46-2742615				Orthology, Inc.	DE	NIA	UnitedHealth Group Ventures, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	13-3960641				OrthoNet Holdings, Inc.	DE	NIA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	13-3818652				OrthoNet LLC	NY	NIA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	13-4025898				OrthoNet New York IPA, Inc.	NY	NIA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	11068	30-0029448			OrthoNet of the Mid-Atlantic, Inc.	DE	IA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	26-2884306				OrthoNet of the South, Inc.	DE	NIA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	46-1581769				OrthoNet Services, Inc.	DE	NIA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
		00000	20-0221966				OrthoNet West, Inc.	DE	NIA	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							ORTHOPEDIC SURGERY CENTER OF PALM BEACH COUNTY, LLC	FL	NIA	SCA-Palm Beach, LLC	Influence	20.00	UnitedHealth Group Incorporated		.5		
							Ovations, Inc.	DE	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Benefit Management, Inc.	CT	NIA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Health Insurance, Inc.	NY	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Health Plans (CT), Inc.	CT	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Health Plans (NJ), Inc.	NJ	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Health Plans (NY), Inc.	NY	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							Oxford Health Plans LLC	DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated				
							P2P Link, LLC	DE	NIA	SPPS, LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							Pacifica Labs, Inc.	DE	NIA	Victory Rollover Holdings LLC	Ownership	100.00	UnitedHealth Group Incorporated				
							PaciFiCare Life and Health Insurance Company										
							70785	35-1137395		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							84506	95-2829463		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							95617	94-3267522		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							95434	84-1011378		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							95685	86-0875231		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							00000	98-1444613		PaciFiCare of Colorado, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							00000	62-1595402		PaciFiCare of Nevada, Inc.	Ownership	100.00	UnitedHealth Group Incorporated				
							00000	62-1547618		PaciFiCare S.A. Entidad Prestadora de Salud	PER	NIA	Empremédica S. A.	Ownership	50.00	UnitedHealth Group Incorporated	
							00000	45-1484375		Paoli Ambulatory Surgery Center	PA	NIA	SCA-Paoli, LLC	Ownership	51.00	UnitedHealth Group Incorporated	
							00000	20-4127100		Paoli Surgery Center, L.P.	TN	NIA	Paoli Ambulatory Surgery Center	Ownership	64.250	UnitedHealth Group Incorporated	
							00000	46-3034062		Park Hill Surgery Center, LLC	TX	NIA	THR-SCA Holdings, LLC	Influence	51.00	UnitedHealth Group Incorporated	
							00000	63-1271644		Parkway Surgery Center, LLC	DE	NIA	SCA-Hagerstown, LLC	Ownership	63.300	UnitedHealth Group Incorporated	
							00000			PASC Real Estate, LLC	CO	NIA	Pueblo Ambulatory Surgery Center, LLC	Influence	25.000	UnitedHealth Group Incorporated	
							00000			Pasteur Plaza Surgery Center GP, Inc.	DE	NIA	ASC Network, LLC	Ownership	100.00	UnitedHealth Group Incorporated	
							00000			Patrimonio Autónomo Nueva Clínica - PANCA	COL	NIA	Clinica del Country S.A.	Ownership	65.170	UnitedHealth Group Incorporated	
							00000			Patrimonio Autónomo Nueva Clínica - PANCA	COL	NIA	Banmédica Internacional SpA	Ownership	9.590	UnitedHealth Group Incorporated	
							00000			Payment Resolution Services, LLC	TN	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated	
							00000	75-3265056		PCCV, Inc.	CA	NIA	PrimeCare Medical Network, Inc.	Ownership	100.00	UnitedHealth Group Incorporated	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
.0707	UnitedHealth Group Incorporated	00000	20-5662149			Peoples Health, Inc. Perham Physical Therapy, LTD. Perimeter Center for Outpatient Surgery, L.P.	L.A. MN. NIA.	I.A.	New Orleans Regional Physician Hospital Organization, L.L.C. Orthology, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	58-1978405			Pharmacy Software Holdco, Inc. PHC Subsidiary Holdings, LLC	GA. PA. TX.	NIA.	SHC Atlanta, LLC OptumRx Administrative Services, LLC United HealthCare Services, Inc.	Influence.... Ownership.... Ownership....	18.643.... 100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....	.5		
		00000	23-2171049			Physician Alliance of the Rockies, LLC PHYSICIANS DAY SURGERY CENTER, LLC	CO. FL.	NIA.	New West Physicians, Inc. SCA-Naples, LLC	Ownership.... Ownership....	100.00.... 51.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....	2		
		00000	35-2288416			Physicians Health Choice of Texas, LLC Physicians Health Plan of Maryland, Inc.	TX. MD.	I.A.	PHC Subsidiary Holdings, LLC United HealthCare Services, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	81-2902954			Plano de Saúde Ana Costa Ltda. Plano de Saúde Ana Costa Ltda.	BRA. BRA.	I.A.	Amil Assistência Médica Internacional S.A. Santos Administração e Participações S.A.	Ownership.... Ownership....	74.860.... 25.140....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	59-3438026			Plus One Health Management Puerto Rico, Inc.	PR.	NIA.	Plus One Holdings, Inc. OptumHealth Care Solutions, LLC	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	04-3677255			PMI Acquisition, LLC PMI Holdings, LLC	DE. DE.	NIA.	Progressive Enterprises Holdings, Inc. Progressive Enterprises Holdings, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	52-1162824			PMI Settlement Solutions, LLC PMI, LLC	FL. FL.	NIA.	PMI Holdings, LLC UnitedHealthcare International IV S.á r.l.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	98-1388873			Polar II Fundo de Investimento em Participações Multiestrategia Polo Holdco, LLC	BRA. DE.	NIA.	UnitedHealthcare International IV S.á r.l. Collaborative Care Holdings, LLC	Ownership.... Ownership....	100.00.... 80.100....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	66-0742844			POMCO Network, Inc. POMCO of Florida Ltd., Inc.	NY. FL.	NIA.	UMR, Inc. UMR, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	13-3613705			POMCO West, Inc. POMCO, Inc.	DE. NY.	NIA.	POMCO, Inc. UMR, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	80-0670247			Pomcoplus, LLC Pomerado Outpatient Surgical Center, Inc.	NY. CA.	NIA.	UMR, Inc. ASC Network, LLC	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	26-3148744			Pomerado Outpatient Surgical Center, L.P. Preferred Care Partners Holding, Corp.	CA. FL.	NIA.	Pomerado Outpatient Surgical Center, Inc. United HealthCare Services, Inc.	Ownership.... Ownership....	57.500.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....	2		
		00000	59-3166848			Preferred Care Partners Medical Group, Inc. Preferred Care Partners, Inc.	FL. FL.	I.A.	Preferred Care Partners Holding, Corp. Preferred Care Partners Holding, Corp.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	56-2422696			Premier Choice ACO, Inc. Premier Surgery Center of Louisville, L.P.	CA. TN.	NIA.	PrimeCare Medical Network, Inc. SCA Premier Surgery Center of Louisville, LLC	Ownership.... Ownership....	100.00.... 51.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	98-1083164			Prime Health, Inc. PrimeCare Medical Network, Inc.	NY. CA.	NIA.	Sierra Health Services, Inc. NAMM Holdings, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	47-5563948			PrimeCare of Citrus Valley, Inc. PrimeCare of Corona, Inc.	CA. CA.	NIA.	PrimeCare Medical Network, Inc. PrimeCare Medical Network, Inc.	Ownership.... Ownership....	80.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	46-5415205			PrimeCare of Hemet Valley, Inc. PrimeCare of Inland Valley, Inc.	CA. CA.	NIA.	PrimeCare Medical Network, Inc. PrimeCare Medical Network, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	65-0392785			PrimeCare of Moreno Valley, Inc. PrimeCare of Redlands, Inc.	CA. CA.	NIA.	PrimeCare Medical Network, Inc. PrimeCare Medical Network, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	46-2975338			PrimeCare of Riverside, Inc. PrimeCare of San Bernardino, Inc.	CA. CA.	NIA.	PrimeCare Medical Network, Inc. PrimeCare Medical Network, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	15-0581348			PrimeCare of Sun City, Inc. PrimeCare of Temecula, Inc.	CA. CA.	NIA.	PrimeCare Medical Network, Inc. PrimeCare Medical Network, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	45-0482796			Procura Management, Inc. Progressive Enterprises Holdings, Inc.	DE. DE.	NIA.	Healthcare Solutions, Inc. OptumRx, Inc.	Ownership.... Ownership....	100.00.... 100.00....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	33-0261822			Progressive Medical, LLC ProHEALTH Fitness of Lake Success, LLC	OH. NY.	NIA.	PMMI Acquisition, LLC ProHEALTH Medical Management, LLC	Ownership.... Ownership....	100.00.... 82.620....	UnitedHealth Group Incorporated.... UnitedHealth Group Incorporated....			
		00000	33-0752699			ProHEALTH Medical Management, LLC	DE.	NIA.	Collaborative Care Holdings, LLC	Ownership....	80.00....	UnitedHealth Group Incorporated....			
		00000	65-0683927												
		00000	26-1845018												
		00000	11176	65-0885993											
		00000	75-3265059												
		00000	72-1378216												
		00000	88-0253112												
		00000	33-0607478												
		00000	87-0757397												
		00000	33-0674407												
		00000	33-0674401												
		00000	33-0674408												
		00000	33-0674402												
		00000	33-0674400												
		00000	33-0674404												
		00000	14-1915328												
		00000	33-0698439												
		00000	33-0674409												
		00000	14-1873402												
		00000	27-4371197												
		00000	31-1192384												
		00000	32-0229091												
		00000	47-1049961												

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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(es)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		.00000	45-5470737				ProHealth Physicians ACO, LLC	.CT.	.N/A.	ProHealth Physicians, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	06-1446075				ProHealth Physicians, Inc.	.CT.	.N/A.	Polo Holdco, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	32-0455430				ProHealth Proton Center Management, LLC	.DE.	.N/A.	ProHEALTH Medical Management, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	22-3493126				Promotora Country S.A.	.COL.	.N/A.	Banmédica S.A.	Ownership.	50.00	UnitedHealth Group Incorporated		.3
		.00000	98-1444638				Pronounced Health Solutions, Inc.	.DE.	.N/A.	My Wellness Solutions, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	90-0876656				Prosemadic S.A.C.	.PER.	.N/A.	Pacifico S.A. Entidad Prestadora de Salud	Ownership.	80.00	UnitedHealth Group Incorporated		.1
		.00000	62-1488737				PS Center, LLC	.CA.	.N/A.	Beach Surgical Holdings II LLC	Influence.	100.00	UnitedHealth Group Incorporated		.5
		.00000	93-1068319				Pueblo Ambulatory Surgery Center, LLC	.CO.	.N/A.	SC Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	46-3901920				Pulse Platform, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	52-2016292				Qd Acquisition Holdings Corp.	.DE.	.N/A.	Rally Health, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	35-2493256				Quality Software Services, Inc.	.MD.	.N/A.	Genoa Healthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	80-0947972				Rally Health, Inc.	.DE.	.N/A.	OptumInsight, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	82-3745100				Real Appeal, Inc.	.DE.	.N/A.	Optum Digital Health Holdings, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	32-0543788				Recaudación y Cobranzas Honodav Ltda.	.CHL.	.N/A.	Rally Health, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	82-3161933				Recaudación y Cobranzas Honodav Ltda.	.CHL.	.N/A.	Clínica Dávila y Servicios Médicos S.A.	Ownership.	99.00	UnitedHealth Group Incorporated		
		.00000	94-3115625				Redlands Ambulatory Surgery Center	.CA.	.N/A.	Servicios Integrados de Salud Ltda.	Ownership.	1.00	UnitedHealth Group Incorporated		
		.00000	94-3115627				Redlands-SCA Surgery Centers, Inc.	.CA.	.N/A.	Redlands-SCA Surgery Centers, Inc.	Ownership.	54.00	UnitedHealth Group Incorporated		.2
		.00000	32-0500242				Reliant MSO, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	95482	84-0614905			Reliant Health Holdings, Inc.	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	84-1009248				Renai Health Holdings, Inc.	.DE.	.N/A.	UnitedHealth Group Ventures, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	47004	84-1224718			Renai Health IPA, LLC	.DE.	.N/A.	Renai Health Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	45-4148369				Renai Health Management, LLC	.DE.	.N/A.	Renai Health Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	74-2462470				River Valley ASC, LLC	.CT.	.N/A.	SCA-River Valley, LLC	Ownership.	57.540	UnitedHealth Group Incorporated		.2
		.00000	45-2219585				Riverside Medical Management, LLC	.DE.	.N/A.	ProHEALTH Medical Management, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	77-0322251				Rocky Mountain Health Maintenance Organization, Incorporated	.CO.	.IA.	United HealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	26-0287192				Rocky Mountain Health Management Corporation	.CO.	.N/A.	Rocky Mountain Health Maintenance Organization, Incorporated	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	27-3787593				Rocky Mountain HealthCare Options, Inc.	.CO.	.IA.	Rocky Mountain Health Maintenance Organization, Incorporated	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	91-2127820				ROCS Holdings, LLC	.IN.	.N/A.	SCA ROCS Holdings, LLC	Influence.	49.00	UnitedHealth Group Incorporated		.5
		.00000	41-1934238				Saden S.A.	.CHL.	.N/A.	Banmédica S.A.	Ownership.	99.920	UnitedHealth Group Incorporated		
		.00000	62-1149229				Saden S.A.	.CHL.	.N/A.	Clínica Dávila y Servicios Médicos S.A.	Ownership.	0.080	UnitedHealth Group Incorporated		
		.00000	47-5537316				Salem Surgery Center, LLC	.OR.	.N/A.	Surgicare of Salem, LLC	Ownership.	67.000	UnitedHealth Group Incorporated		.2
		.00000	47-5014406				Salveo Specialty Pharmacy, Inc.	.DE.	.N/A.	OptumRx Administrative Services, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	45-4230864				San Diego Endoscopy Center	.CA.	.N/A.	Endoscopy Center Affiliates, Inc.	Influence.	42.000	UnitedHealth Group Incorporated		.5
		.00000	45-4230864				San Diego Sports and Minimally Invasive Surgery Center, LLC	.DE.	.N/A.	SCA-San Diego, Inc.	Influence.	31.608	UnitedHealth Group Incorporated		.5
		.00000	91-2127820				Sand Lake SurgiCenter, LLC	.FL.	.N/A.	SCA-Sand Lake, LLC	Ownership.	52.450	UnitedHealth Group Incorporated		.2
		.00000	41-1934238				Santa Cruz Endoscopy Center, LLC	.CA.	.N/A.	SCA Pacific Holdings, Inc.	Ownership.	50.000	UnitedHealth Group Incorporated		.2
		.00000	62-1149229				Santa Helena Assistência Médica S.A.	.BRA.	.N/A.	Etual Participações S.A.	Ownership.	65.210	UnitedHealth Group Incorporated		.2
		.00000	47-5537316				Santa Helena Assistência Médica S.A.	.BRA.	.N/A.	Anil Assistência Médica Internacional S.A.	Ownership.	33.600	UnitedHealth Group Incorporated		.2
		.00000	45-4230864				Santos Administração e Participações S.A.	.BRA.	.N/A.	Anil Assistência Médica Internacional S.A.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	27-4028885				Savvyshera Administrative Services, LLC	.MN.	.N/A.	Savvyshera, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	41-1934238				Savvyshera Asia, Inc.	.PHL.	.N/A.	Savvyshera, LLC	Ownership.	99.990	UnitedHealth Group Incorporated		.2
		.00000	47-5537316				Savvyshera, LLC	.DE.	.N/A.	UnitedHealth Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	47-5014406				SC Affiliates, LLC	.DE.	.N/A.	Surgical Care Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	45-4230864				SCA Athens, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	45-4230864				SCA Austin Holdings, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		.00000	45-4230864				SCA BOSC Holdings, LLC	.DE.	.N/A.	National Surgery Centers, LLC	Ownership.	25.000	UnitedHealth Group Incorporated		
		.00000	45-4230864				SCA BOSC Holdings, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership.	25.000	UnitedHealth Group Incorporated		
		.00000	45-4230864				SCA BOSC Holdings, LLC	.DE.	.N/A.	SunSurgery, LLC	Ownership.	25.000	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Rela- tion- ship to Report- ing Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	45-4230864				SCA BOSC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-2110605				SCA California Surgical Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3916468				SCA Capital, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-5030792				SCA Cedar Park Holdings, LLC	DE	N/A	SCA Austin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	04-3170801				SCA Danbury Surgical Center, LLC	DE	N/A	SunSurgery, LLC	Ownership	67.00	UnitedHealth Group Incorporated		2
		00000	62-1535981				SCA Development, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372069				SCA eCode Solutions Private Limited	IND	N/A	eCode Solutions, LLC	Ownership	99.99	UnitedHealth Group Incorporated		2
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EWASC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA Hays Holdings, LLC	DE	N/A	SCA Austin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-5064834				SCA Heartland Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4869243				SCA HoldCo, Inc.	DE	N/A	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-1664837				SCA Holding Company, Inc.	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1256943				SCA Holdings, Inc.	CA	N/A	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	20-8116987				SCA Nashville ASC, LLC	TN	N/A	Nashville-SCA Surgery Centers, Inc.	Ownership	99.00	UnitedHealth Group Incorporated		
		00000	20-8116987				SCA Nashville ASC, LLC	TN	N/A	SC Affiliates, LLC	Ownership	1.00	UnitedHealth Group Incorporated		
		00000	62-1505276				SCA of Clarksville, Inc.	TN	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-1707364				SCA Pacific Holdings, Inc.	CA	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-1686425				SCA Pennsylvania Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Premier Surgery Center of Louisville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										SCA-Merritt, LLC	Ownership	97.00	UnitedHealth Group Incorporated		2
										National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										SCA Specialists of Florida, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SCA Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SCA Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SCA Surgery Holdings, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
										SCA Austin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										SCA Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(es)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	75-2501088				SCA Surgicare of Laguna Hills, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2096767				SCA Teammate Support Network	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	74-2555097				SCA-Albuquerque Surgery Properties, Inc.	NM	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1807383				SCA-Alliance, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-4763869				SCA-Anne Arundel, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3857984				SCA-Bethesda, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1530120				SCA-Blue Ridge, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					SCA-Bonita Springs, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-1980137				SCA-Brandon, LLC	DE	N/A	SC Affiliates, LLC	Ownership	50.980	UnitedHealth Group Incorporated		2
		00000	81-3336088				SCA-Brazil, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1094012				SCA-Castle Rock, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1535510				SCA-Central Florida, LLC	FL	N/A	SC Affiliates, LLC	Ownership	55.360	UnitedHealth Group Incorporated		2
		00000	58-1709758				SCA-Charleston, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-4511713				SCA-Chatham, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1093626				SCA-Cherry Creek, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3301058				SCA-Chevy Chase, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1516306				SCA-Citrus, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	93-1047471				SCA-Colorado Springs, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1585952				SCA-Connecticut Partners, LLC	DE	N/A	SunSurgery, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-4028383				SCA-Davenport, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-1470227				SCA-Derry, LLC	DE	N/A	SC Affiliates, LLC	Ownership	78.873	UnitedHealth Group Incorporated		2
		00000	81-3734814				SCA-Doral, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1093886				SCA-DRY CREEK, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1102015				SCA-DTC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1594261				SCA-Dublin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3301305				SCA-Encinitas, Inc.	DE	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1541235				SCA-Eugene, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1551099				SCA-First Coast, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	93-1067967				SCA-Florence, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1502719				SCA-Fort Collins, Inc.	CO	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3641516				SCA-Fort Walton, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2727879				SCA-Franklin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3535257				SCA-Frederick, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1547690				SCA-Freeway Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1956407				SCA-Ft. Myers, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1956407				SCA-Gainesville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1956407				SCA-Gladiolus, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-1438326				SCA-GRANTS PASS, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2376695				SCA-Grove Place, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3466283				SCA-Hagerstown, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4605501				SCA-Hamden, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-5228514				SCA-Hilton Head, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506650				SCA-Honolulu, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3445356				SCA-Houston Executive, LLC	DE	N/A	SCA Pacific Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4905342				SCA Holdings, LLC	DE	N/A	SCA HoldCo, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1666861				SCA-Illinois, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3930052				SCA-IT Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1102109				SCA-Kissing Camels Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4229506				SCA-Main Street, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1367813				SCA-Marina del Rey, LLC	CA	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1184188				SCA-MC VBP, Inc.	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4616104				SCA-Mecklenburg Development Corp.	NC	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1771410				SCA-Merritt, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- centage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	82-2455773			SCA-Midlands, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-2976543			SCA-Midway Management, LLC	IL.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	83-1093787			SCA-Mile High Holdings, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	80-0070617			SCA-Mobile, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-1320467			SCA-Mokena Properties, LLC	DE.. N/A	SCA-Mokena, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-1065674			SCA-Mokena, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	62-1506655			SCA-Mt. Pleasant, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-2850365			SCA-Naperville, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-3002171			SCA-Naples, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-1347328			SCA-ND VBP, Inc	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-4418919			SCA-New Jersey, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-1760663			SCA-Newport Beach, LLC	CA.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
						Scanner Centromed S.A.	CHL.. N/A	Administradora Médica Centromed S.A.	Ownership..	84.50 ..	UnitedHealth Group Incorporated			2	
		00000	62-1589343			SCA-Northeast Georgia Health, LLC	TN.. N/A	SCA-Gainesville, LLC	Ownership..	50.10 ..	UnitedHealth Group Incorporated			2	
		00000	81-3445510			SCA-Palm Beach MSO Holdings, LLC	DE.. N/A	SunSurgery, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-3050836			SCA-Palm Beach, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	62-1538850			SCA-Paoli, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-2785908			SCA-Phoenix, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-1620189			SCA-Pocono, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-4139195			SCA-PORTLAND, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-4304317			SCA-River Valley, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-1647512			SCA-Rockville, LLC	FL.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-2963561			SCA-San Diego, Inc.	DE.. N/A	Surgical Health, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	94-3138088			SCA-San Luis Obispo, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-1685878			SCA-Sand Lake, LLC	FL.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	88-0185362			SCA-Santa Rosa, Inc.	NV.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	62-1179532			SCA-Shelby Development Corp.	TN.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-3300613			SCA-Somerset, LLC	DE.. N/A	SCA Surgery Holdings, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	22-3117714			SCA-South Jersey, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-2676325			SCA-Sparta, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-4499088			SCA-Spartanburg Holdings, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-4106989			SCA-St. Louis, LLC	DE.. N/A	Surgical Health, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-3270591			SCA-St. Lucie, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-4371453			SCA-SurgiCare, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-2455241			SCA-Swiftpath, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-1987225			SCA-VERTA, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-2294882			SCA-Wake Forest, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-1449412			SCA-Western Connecticut, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-3689825			SCA-Westover Hills, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000				SCA-Wilmington, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	47-2890788			SCA-Wilson, LLC	DE.. N/A	SCA Surgery Holdings, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	81-115878			SCA-Winchester, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	62-1525777			SCA-Winter Park, Inc.	TN.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	82-3528300			SCA-Woodlands Holdings, LLC	DE.. N/A	SC Affiliates, LLC	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	27-2635371			SCP Specialty Infusion, LLC	DE.. N/A	BriovaRx Infusion Services, Inc.	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	45-3629080			Script Relief LLC	DE.. N/A	OptumRx Health Solutions, LLC	Influence..	42.00 ..	UnitedHealth Group Incorporated			5	
		00000	98-1097822			ScriptSwitch Limited	GBR.. N/A	Optum UK Solutions Group Limited	Ownership..	100.00 ..	UnitedHealth Group Incorporated				
		00000	98-1202716			Seisa Serviços Integrados de Saúde Ltda.	BRA.. N/A	Amil Assistência Médica Internacional S.A.	Ownership..	99.990 ..	UnitedHealth Group Incorporated			2	
		00000	98-1202716			Seisa Serviços Integrados de Saúde Ltda.	BRA.. N/A	Cemed Care - Empresa de Atendimento Clínico Geral Ltda.	Ownership..	0.00 ..	UnitedHealth Group Incorporated			2	
		00000	42-1709357			Senate Street Surgery Center, LLC	IN.. N/A	SCA SSSC Holdings, LLC	Ownership..	50.720 ..	UnitedHealth Group Incorporated			2	
		00000	27-1533951			Serquinox Holdings LLC	DE.. N/A	BriovaRx Infusion Services, Inc.	Ownership..	100.00 ..	UnitedHealth Group Incorporated				

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
		00000				Servicios de Entrenamiento en Competencias Clínicas Ltda.	CHL NIA	Clínica Santa María S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated				
		00000				Servicios de Entrenamiento en Competencias Clínicas Ltda.	CHL NIA	Sociedad de Inversiones Santa María S.A.	Ownership.....	0.100	UnitedHealth Group Incorporated				
		00000				Servicios Integrados de Salud Ltda.	CHL NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated				
		00000				Servicios Integrados de Salud Ltda.	CHL NIA	Clínica Santa María S.A.	Ownership.....	0.100	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Amed Quilpué S.A.	CHL NIA	Centromed Quilpué S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Amed Quilpué S.A.	CHL NIA	Laboratorios Médicos Amed Quilpué S.A.	Ownership.....	0.100	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Bio Bío Limitada	CHL NIA	Clínica Bio Bío S.A.	Ownership.....	99.000	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Bio Bío Limitada	CHL NIA	Saden S.A.	Ownership.....	1.000	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Ciudad del Mar Ltda.	CHL NIA	Clínica Ciudad del Mar S.A.	Ownership.....	99.000	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Ciudad del Mar Ltda.	CHL NIA	Saden S.A.	Ownership.....	1.000	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Santa María Limitada	CHL NIA	Sociedad de Inversiones Santa María S.A.	Ownership.....	99.176	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Santa María Limitada	CHL NIA	Clínica Santa María S.A.	Ownership.....	0.824	UnitedHealth Group Incorporated				
		00000				Servicios Médicos Vespucio Ltda.	CHL NIA	Clínica Vespucio S.A.	Ownership.....	99.000	UnitedHealth Group Incorporated				
		00000	45-4233576			SharedClarity LLC	DE NIA	United HealthCare Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	58-1978974			SHC Atlanta, LLC	DE NIA	Surgical Health, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	58-2013443			SHC Austin, Inc.	GA NIA	Surgical Health, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	58-2062812			SHC Hawthorn, Inc.	GA NIA	Surgical Health, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	58-2101924			SHC Melbourne, Inc.	GA NIA	Surgical Health, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	62-1223273			Shelby Surgery Properties, Inc.	TN NIA	SC Affiliates, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		0707	UnitedHealth Group Incorporated			Sierra Health and Life Insurance Company, Inc.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		71420	94-0734860			Sierra Health Services, Inc.	NV NIA	UnitedHealthcare, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	88-020415			Sierra Health-Care Options, Inc.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	88-0254322			Sierra Home Medical Products, Inc.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	88-0385705			Sierra Nevada Administrators, Inc.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	88-0264562			Sistema de Administración Hospitalaria S.A.C.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000				Sobam – Centro Médico Hospitalar S.A.	PER NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership.....	99.870	UnitedHealth Group Incorporated				
		00000				Sociedad de Inversiones Santa María S.A.	BRA NIA	Santa Helena Asistencia Médica S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	98-1453235			Sociedad de Inversiones Santa María S.A.	CHL NIA	Clínica Santa María S.A.	Ownership.....	99.743	UnitedHealth Group Incorporated				
		00000	98-1453235			Sociedad Editorial para la Ciencia Limitada.	CHL NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership.....	0.257	UnitedHealth Group Incorporated				
		00000	98-1462570			Somerset Outpatient Surgery, L.L.C.	COL NIA	Banmédica S.A.	Ownership.....	76.290	UnitedHealth Group Incorporated				2
		00000	20-8433398			Southwest Medical Associates, Inc.	NJ NIA	SCA-Somerset, LLC	Ownership.....	59.999	UnitedHealth Group Incorporated				2
		00000	88-0201420			Southwest Michigan Health Network Inc.	NV NIA	Sierra Health Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	38-2609888			Southwest Michigan Health Network Inc.	MI NIA	UnitedHealthcare, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	36-4369359			Southwest Surgery Center, LLC	IL NIA	SCA-Mokena, LLC	Ownership.....	44.670	UnitedHealth Group Incorporated				2
		00000	75-2516426			Space Coast Surgical Center, Ltd.	FL NIA	SCA Rockledge JV, LLC	Ownership.....	52.190	UnitedHealth Group Incorporated				2
		00000	57-0953005			Spartanburg Surgery Center, LLC	SC NIA	SCA-Spartanburg Holdings, LLC	Influence.....	10.700	UnitedHealth Group Incorporated				5
		00000	55-0790742			Specialists in Urology Surgery Center, LLC	FL NIA	SCA Specialists of Florida, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	25-1868213			Specialized Pharmaceuticals, Inc.	PA NIA	Qd Acquisition Holdings Corp.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	41-1921983			Specialty Benefits, LLC	DE NIA	United HealthCare Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	20-3412545			Specialty Surgical Center, LLC	NJ NIA	SCA-Sparta, LLC	Ownership.....	51.000	UnitedHealth Group Incorporated				2
		00000	71-0868611			Spectera of New York, IPA, Inc.	NY NIA	Spectera, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	52-1260282			Spectera, Inc.	MD NIA	Specialty Benefits, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	81-1387232			SPINETRACK 20/20, Inc.	CA NIA	SCA-ND VBP, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	46-5587702			Sports and Spinal Physical Therapy, Inc.	DC NIA	Orthology, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	62-1770924			Spotlite, Inc.	DE NIA	Rally Health, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	45-4148167			SRPS, LLC	DE NIA	Progressive Enterprises Holdings, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated				
		00000	75-2201400			SSSC Holdings, LLC	IN NIA	SCA SSSC Holdings, LLC	Influence.....	49.000	UnitedHealth Group Incorporated				5
		00000				St. Cloud Outpatient Surgery, Ltd., a Minnesota Limited Partnership	MN NIA	St. Cloud Surgical Center, LLC	Influence.....	23.383	UnitedHealth Group Incorporated				5

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- cen- tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	41-1348916				St. Cloud Surgical Center, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-1211544				Stonegate Surgery Center, L.P.	TX	N/A	SCA Stonegate Holdings, LLC	Ownership	56.834	UnitedHealth Group Incorporated		2
		00000	27-2944223				Streamlines Health, LLC	MN	N/A	Savvysherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	06-1082848				SunSurgery, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-5207693				Surgery Center at Kissing Camels, LLC	CO	N/A	SCA-Kissing Camels Holdings, LLC	Ownership	55.000	UnitedHealth Group Incorporated		2
		00000	62-1739361				Surgery Center Holding, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-0581955				Surgery Center of Athens, LLC	GA	N/A	Athens ASC Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1509341				Surgery Center of Boca Raton, Inc.	FL	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506370				Surgery Center of Clarksville, L.P.	TN	N/A	Surgical Health, LLC	Ownership	99.900	UnitedHealth Group Incorporated		2
		00000	63-1214140				Surgery Center of Colorado Springs, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	42-1166764				Surgery Center of Des Moines, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	72-1349752				Surgery Center of Easton, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1212213				Surgery Center of Ellicott City, Inc.	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-1733152				Surgery Center of Fairfield County, LLC	DE	N/A	SunSurgery, LLC	Influence	43.204	UnitedHealth Group Incorporated		5
		00000	62-1179539				Surgery Center of Lexington, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1179537				Surgery Center of Louisville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1231944				Surgery Center of Maui, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1194204				Surgery Center of Muskogee, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	11-3701564				Surgery Center of Rockville, L.L.C.	MD	N/A	SCA-Rockville, LLC	Ownership	59.000	UnitedHealth Group Incorporated		2
		00000	63-1212214				Surgery Center of Southern Pines, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1178497				Surgery Center of Spokane, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1184216				Surgery Center of Summerlin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3448050				Surgery Center of The Woodlands, LLC	TX	N/A	SCA-Woodlands Holdings, LLC	Ownership	55.510	UnitedHealth Group Incorporated		2
		00000	62-1491963				Surgery Center of Vero Beach, Inc.	TN	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgery Center of Wilmington Properties, LLC	NC	N/A	Surgery Center of Wilmington, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgery Center of Wilmington, LLC	NC	N/A	SCA-Wilmington, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
			26-1767806				Surgery Center of Wilson, LLC	NC	N/A	SCA-Wilson, LLC	Ownership	76.450	UnitedHealth Group Incorporated		2
							Surgery Centers of Des Moines, Ltd., an Iowa Limited Partnership	IA	N/A	Surgery Center Holding, LLC	Ownership	67.950	UnitedHealth Group Incorporated		2
							Surgery Centers-West Holdings, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Care Affiliates Political Action Committee	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Surgical Care Affiliates, LLC	DE	N/A	SCAI Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Care Partners of Melbourne, LLC	DE	N/A	SHC Melbourne, Inc.	Ownership	74.740	UnitedHealth Group Incorporated		2
							Surgical Caregivers of Fort Worth, LLC	TX	N/A	THR-SCA Holdings, LLC	Influence	56.423	UnitedHealth Group Incorporated		5
							Surgical Center at Premier, LLC	TN	N/A	Audubon Ambulatory Surgery Center, LLC	Influence	100.00	UnitedHealth Group Incorporated		5
							Surgical Center of Greensboro, LLC	NC	N/A	NSC Greensboro, LLC	Influence	35.720	UnitedHealth Group Incorporated		5
							Surgical Center of South Jersey, Limited Partnership	NJ	N/A	SCA-South Jersey, LLC	Ownership	61.853	UnitedHealth Group Incorporated		2
							Surgical Center of Tuscaloosa Holdings, LLC	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Health of Orlando, Inc.	FL	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Health, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Hospital Holdings of Oklahoma, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
										Surgical Hospital Holdings of Oklahoma, LLC	Ownership	56.000	UnitedHealth Group Incorporated		2
							Surgical Hospital of Oklahoma, L.L.C.	OK	N/A						
							Surgicare of Belleville, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Jackson, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Jackson, Ltd., a Mississippi Limited Partnership	MS	N/A	Surgicare of Jackson, LLC	Influence	40.00	UnitedHealth Group Incorporated		5
							Surgicare of Joliet, Inc.	IL	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of La Veta, Inc.	CA	N/A	Surgery Centers-West Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Minneapolis, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
		00000	41-1624905			Surgicare of Minneapolis, Ltd., a Minnesota Limited Partnership		MN	NIA	Surgicare of Minneapolis, LLC	Influence	20.000	UnitedHealth Group Incorporated		.5
		00000	75-2459713			Surgicare of Mobile, LLC		DE	NIA	Surgery Center Holding, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2459715			Surgicare of Mobile, Ltd.		AL	NIA	Surgicare of Mobile, LLC	Influence	20.000	UnitedHealth Group Incorporated		.5
		00000	75-2448926			Surgicare of Oceanside, Inc.		CA	NIA	Surgery Center Holding, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2184730			Surgicare of Owensboro, LLC		DE	NIA	Surgery Center Holding, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2200171			Surgicare of Salem, LLC		DE	NIA	Surgery Center Holding, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	35-1975122			Surgicare, LLC		IN	NIA	SCA-SurgiCare, LLC	Ownership	53.680	UnitedHealth Group Incorporated		.2
		00000	82-3717201			SurgiCenter of San Antonio at Westover Hills, LLC		TX	NIA	SCA-Westover Hills, LLC	Influence	45.360	UnitedHealth Group Incorporated		.5
		00000	95-3329855			Surgicenters of Southern California, Inc.		CA	NIA	Surgery Center Holding, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-1536748			Symphonix Health Holdings, LLC		DE	NIA	United HealthCare Services, Inc.	Influence	100.000	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	84549	38-2044243			Symphonix Health Insurance, Inc.		IL	IA	Symphonix Health Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-4751035			TeamMD Holdings, Inc.		DE	NIA	AmeriChoice Corporation	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-4850893			TeamMD Iowa, Inc.		DE	NIA	TeamMD Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000				Tecnologías de Información en Salud S.A.		CHL	NIA	Clinica Santa María S.A.	Ownership	50.000	UnitedHealth Group Incorporated		
		00000				Tecnologías de Información en Salud S.A.		CHL	NIA	Clinica Dávila y Servicios Médicos S.A.	Ownership	50.000	UnitedHealth Group Incorporated		
		00000	38-3897811			Texas Health Craig Ranch Surgery Center, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.500	UnitedHealth Group Incorporated		.5
		00000	80-0866449			Texas Health Flower Mound Orthopedic Surgery Center, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.000	UnitedHealth Group Incorporated		.5
		00000	81-4977249			Texas Health Orthopedic Surgery Center Alliance, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.000	UnitedHealth Group Incorporated		.5
		00000	82-2296081			Texas Health Surgery Center Alliance, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	77.583	UnitedHealth Group Incorporated		.5
		00000	82-1307876			Texas Health Surgery Center Bedford, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.010	UnitedHealth Group Incorporated		.5
		00000	20-3991622			Texas Health Surgery Center Preston Plaza, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	53.048	UnitedHealth Group Incorporated		.5
		00000	47-4425996			Texas Health Surgery Center Rockwall, LLC		TX	NIA	THR-SCA Holdings, LLC	Influence	51.000	UnitedHealth Group Incorporated		.5
		00000	52-1468699			The Advisory Board (Chile) SpA		CHL	NIA	The Advisory Board Company	Ownership	100.000	UnitedHealth Group Incorporated		
		00000				The Advisory Board Company		DE	NIA	OptumInsight, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-5562797			The Eye Surgery Center of the Carolinas, L.P.		NC	NIA	Surgery Center of Southern Pines, LLC	Influence	46.000	UnitedHealth Group Incorporated		.5
		00000	56-1970224			The Lewin Group, Inc.		NC	NIA	Optum Public Sector Solutions, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	61-1409045			The Outpatient Surgery Center of Hilton Head, LLC		SC	NIA	SCA-Hilton Head, LLC	Ownership	50.000	UnitedHealth Group Incorporated		.2
		00000	72-1349755			The Surgery Center of Easton, L.P.		TN	NIA	Surgery Center of Easton, LLC	Ownership	57.000	UnitedHealth Group Incorporated		.2
		00000	63-1184215			The Surgical Center at Tenaya, L.P.		TN	NIA	Surgery Center of Summerlin, LLC	Influence	20.000	UnitedHealth Group Incorporated		.5
		00000	06-1552689			The Surgical Center of Connecticut, LLC		CT	NIA	SCA-Main Street, LLC	Influence	62.120	UnitedHealth Group Incorporated		.5
		00000	37-1446353			THE SURGICAL CENTER OF THE TREASURE COAST, L.L.C.		FL	NIA	SCA-St. Lucie, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
		00000	26-1479919			Thomas Johnson Surgery Center, LLC		MD	NIA	SCA-Frederick, LLC	Ownership	65.000	UnitedHealth Group Incorporated		.2
		00000	77-0367271			Thousand Oaks Endoscopy Center, LLC		CA	NIA	Endoscopy Center Affiliates, Inc.	Ownership	99.000	UnitedHealth Group Incorporated		.2
		00000	25-1825549			Three Rivers Holdings, Inc.		DE	NIA	AmeriChoice Corporation	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	63-1194203			Three Rivers Surgical Care, L.P.		TN	NIA	Muskogee Surgical Investors, LLC	Ownership	72.538	UnitedHealth Group Incorporated		.2
		00000	59-3143128			Tmesys, LLC		FL	NIA	PMSI Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1287904			Topimagen Diagnóstico por Imagen Ltda.		BRA	S.A.	Esho - Empresa de Servicios Hospitalares	Ownership	89.000	UnitedHealth Group Incorporated		.2
		00000	46-5482620			Trails Edge Surgery Center, LLC		FL	NIA	SCA-Bonita Springs, LLC	Ownership	59.000	UnitedHealth Group Incorporated		.2
		00000	52-1431155			Trauma Surgery Affiliates, LLC		TX	NIA	National Surgery Centers, LLC	Influence	49.000	UnitedHealth Group Incorporated		.5
		00000	46-2613170			Travel Express Incorporated		MD	NIA	FrontierMEDEX, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	33-0592165			Treasure Valley Emerald Properties, LLC		ID	NIA	Treasure Valley Hospital Limited Partnership	Influence	100.000	UnitedHealth Group Incorporated		.5
		00000				Treasure Valley Hospital Limited Partnership		ID	NIA	Surgical Health, LLC	Influence	40.375	UnitedHealth Group Incorporated		.5

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

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		00000	27-2241757				Tri-City Medical Center ASC Operators, LLC ..	CA ..	N/A ..	Surgicare of Oceanside, Inc.	Influence ..	40.000 ..	UnitedHealth Group Incorporated5 ..
		00000	47-5088596				TrilMed, LLC ..	UT ..	N/A ..	National MedTrans, LLC	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	46-5530255				Trio Motion, LLC ..	DE ..	N/A ..	Savvysherp, LLC	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	63-0974161				Tuscaloosa Surgical Center, L.P.	AL ..	N/A ..	Surgical Center of Tuscaloosa Holdings, LLC	Influence ..	30.000 ..	UnitedHealth Group Incorporated .....		.5 ..
		00000	94-3077084				U.S. Behavioral Health Plan, California ..	CA ..	IA ..	United Behavioral Health	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	81-3287291				UCSD-SCA Holdings I, LLC ..	DE ..	N/A ..	SCA-Encinitas, Inc.	Influence ..	49.000 ..	UnitedHealth Group Incorporated .....		.5 ..
		00000	81-3144140				UCSD-SCA Holdings II, LLC ..	DE ..	N/A ..	SCA-San Diego, Inc.	Influence ..	47.961 ..	UnitedHealth Group Incorporated .....		.5 ..
		00000	98-1388279				UHC Finance (Ireland) Unlimited Company ..	IRL ..	N/A ..	UnitedHealth Group International Finance (Ireland) Unlimited Company	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1113428				UHC Global Health Services BC Ltd.	CAN ..	N/A ..	UnitedHealthcare Global Canada Limited	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1913059				UHC International Services, Inc.	DE ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	95-2931460				UHC of California	CA ..	IA ..	UnitedHealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	82-3143073				UHCFI LLC	DE ..	N/A ..	OptumRx, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1103713				UHCG - FZE	ARE ..	N/A ..	UnitedHealthcare Global Medical (UK) Limited	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1372063				UHCG Holdings (Ireland) Limited	IRL ..	N/A ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1372064				UHCG Services (Ireland) Limited	IRL ..	N/A ..	UHC Holdings (Ireland) Limited	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1122490				UHC Brasil Participações S.A.	BRA ..	N/A ..	Polar II Fundo de Investimento em Participações Multiestratégia	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1921008				UHC Holdings, Inc.	DE ..	N/A ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	39-1995276				UMR, Inc.	DE ..	N/A ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1444648				Unidad Médica Diagnóstico S.A.	COL ..	N/A ..	Colmedica Medicina Prepagada	Ownership ..	92.380 ..	UnitedHealth Group Incorporated		
		00000	98-1444648				Unidad Médica Diagnóstico S.A.	COL ..	N/A ..	Bannédica Colombia S.A.	Ownership ..	7.620 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	91529	52-1996029				Unimérica Insurance Company	WI ..	IA ..	OptumHealth Holdings, LLC	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	11596	01-0637149				Unimérica Life Insurance Company of New York	NY ..	IA ..	UnitedHealthcare Insurance Company	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	00000	25-1877716				Unison Administrative Services, LLC	PA ..	N/A ..	Three Rivers Holdings, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	00000	20-5917714				Unison Health Plan of Delaware, Inc.	DE ..	IA ..	Three Rivers Holdings, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	00000	94-2649097				United Behavioral Health	CA ..	N/A ..	OptumHealth Holdings, LLC	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1868911				United Behavioral Health of New York, I.P.A., Inc.	NY ..	N/A ..	United Behavioral Health	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1941615				United Health Foundation	MN ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1289245	3410132			United HealthCare Services, Inc.	MN ..	UIP ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	30-0318238				United Resource Networks IPA of New York, Inc.	NY ..	N/A ..	OptumHealth Care Solutions, LLC	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	01-0538817				UnitedHealth Advisors, LLC	ME ..	N/A ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1321939	4665014	0000731766 ..	New York Stock Exchange ..	UnitedHealth Group Incorporated	DE ..	UIP ..	Self ..	Ownership ..	0.000 ..	UnitedHealth Group Incorporated .....		.2 ..
		00000	98-1422474				UnitedHealth Group International Finance (Ireland) Unlimited Company	IRL ..	N/A ..	UnitedHealthcare Europe S.á r.l.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1079826				UnitedHealth Group International GP	CYU ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-1080118				UnitedHealth Group International L.P.	CYU ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	70.604 ..	UnitedHealth Group Incorporated		
		00000	98-1080118				UnitedHealth Group International L.P.	CYU ..	N/A ..	FMG Holdings, LLC	Ownership ..	29.396 ..	UnitedHealth Group Incorporated		
		00000	46-3311984				UnitedHealth Group Ventures, LLC	DE ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	41-1917398				UnitedHealth International, Inc.	DE ..	N/A ..	UnitedHealth Group Incorporated	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	26-2574977				UnitedHealth Military & Veterans Services, LLC	DE ..	N/A ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	98-0559902				UnitedHealth UK Limited	GBR ..	N/A ..	Optum Solutions UK Holdings Limited	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95174	33-0115163				UnitedHealthcare Benefits of Texas, Inc.	TX ..	IA ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	47-3221444				UnitedHealthcare Benefits Plan of California	CA ..	IA ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		
		00000	46-4348775				UnitedHealthcare Community Plan of California, Inc.	CA ..	IA ..	United HealthCare Services, Inc.	Ownership ..	100.000 ..	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 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? (Y/N)	*
..0707	UnitedHealth Group Incorporated	13168	26-2688274			UnitedHealthcare Community Plan of Georgia, Inc.		GA	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	12323	56-2451429			UnitedHealthcare Community Plan of Ohio, Inc.		OH	IA	Three Rivers Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	11141	91-2008361			UnitedHealthcare Community Plan of Texas, L.L.C.		TX	IA	Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95467	38-3204052			UnitedHealthcare Community Plan, Inc.		MI	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1200034			UnitedHealthcare Consulting & Assistance Service (Beijing) Co., Ltd.		CHN	NIA	UnitedHealthcare International I B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1199879			UnitedHealthcare Europe S.à r.l.		LUX	NIA	UnitedHealthcare International VI S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1029201			UnitedHealthcare Global Medical (UK) Limited		GBR	NIA	UnitedHealthcare International I B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1099116			UnitedHealthcare India Private Limited		IND	NIA	OptumHealth International B.V.	Ownership	99.99	UnitedHealth Group Incorporated		
		00000	98-1099116			UnitedHealthcare India Private Limited		IND	NIA	UnitedHealth International, Inc.	Ownership	0.001	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	79413	36-2739571			UnitedHealthcare Insurance Company		CT	IA	UHC Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	60318	36-3800349			UnitedHealthcare Insurance Company of Illinois		IL	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	60093	11-3283886			UnitedHealthcare Insurance Company of New York		NY	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	12231	20-1902768			UnitedHealthcare Insurance Company of the River Valley		IL	IA	UnitedHealthcare Services Company of the River Valley, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372065			UnitedHealthcare Insurance Designated Activity Company		IRL	IA	UHC Holdings (Ireland) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	00000	86-0618309			UnitedHealthcare Integrated Services, Inc.		AZ	IA	Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1988797			UnitedHealthcare International Asia, LLC		DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1100512			UnitedHealthcare International I B.V.		NLD	NIA	UnitedHealth Group International L.P.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1079459			UnitedHealthcare International II S.à r.l.		LUX	NIA	UnitedHealthcare International VI S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1340853			UnitedHealthcare International III B.V.		NLD	NIA	UnitedHealthcare Europe S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1077436			UnitedHealthcare International III S.à r.l.		LUX	NIA	Optum Services (Ireland) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372054			UnitedHealthcare International IV B.V.		NLD	NIA	OptumHealth International B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1080926			UnitedHealthcare International IV S.à r.l.		LUX	NIA	UnitedHealthcare International VIII S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372058			UnitedHealthcare International VI S.à r.l.		LUX	NIA	UnitedHealth Group International L.P.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372060			UnitedHealthcare International VII S.à r.l.		LUX	NIA	UHC Finance (Ireland) Unlimited Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372062			UnitedHealthcare International VIII S.à r.l.		LUX	NIA	UnitedHealthcare International X S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372064			UnitedHealthcare International X S.à r.l.		LUX	NIA	UnitedHealthcare International III S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	97179	86-0207231			UnitedHealthcare Life Insurance Company		WI	IA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95784	63-0899562			UnitedHealthcare of Alabama, Inc.		AL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	96016	86-0507074			UnitedHealthcare of Arizona, Inc.		AZ	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95446	63-1036819			UnitedHealthcare of Arkansas, Inc.		AR	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95090	84-1004639			UnitedHealthcare of Colorado, Inc.		CO	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95264	59-1293365			UnitedHealthcare of Florida, Inc.		FL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95850	58-1653544			UnitedHealthcare of Georgia, Inc.		GA	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95776	36-3280214			UnitedHealthcare of Illinois, Inc.		IL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		96644	62-1240316			UnitedHealthcare of Kentucky, Ltd.		KY	IA	United HealthCare Services, Inc.	Ownership	94.883	UnitedHealth Group Incorporated		
		96644	62-1240316			UnitedHealthcare of Kentucky, Ltd.		KY	IA	UnitedHealthcare, Inc.	Ownership	5.117	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95833	72-1074008			UnitedHealthcare of Louisiana, Inc.		LA	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95716	63-1036817			UnitedHealthcare of Mississippi, Inc.		MS	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95149	05-0413469			UnitedHealthcare of New England, Inc.		RI	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	13214	26-2697886			UnitedHealthcare of New Mexico, Inc.		NM	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, 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 Loca- tion	Rela- tionship 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 Per- cen- tage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
0707	UnitedHealth Group Incorporated	95085	06-1172891			UnitedHealthcare of New York, Inc.	NY	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95103	56-1461010			UnitedHealthcare of North Carolina, Inc.	NC	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95186	31-1142815			UnitedHealthcare of Ohio, Inc.	OH	IA	UnitedHealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	96903	33-0115166			UnitedHealthcare of Oklahoma, Inc.	OK	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95893	93-0938819			UnitedHealthcare of Oregon, Inc.	OR	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95220	25-1756858			UnitedHealthcare of Pennsylvania, Inc.	PA	IA	Three Rivers Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95765	95-3939697			UnitedHealthcare of Texas, Inc.	TX	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95025	52-1130183			UnitedHealthcare of the Mid-Atlantic, Inc.	MD	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95591	47-0676824			UnitedHealthcare of the Midlands, Inc.	NE	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	96385	43-1361841			UnitedHealthcare of the Midwest, Inc.	MO	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95501	41-1488563			UnitedHealthcare of Utah, Inc.	UT	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	48038	91-1312551			UnitedHealthcare of Washington, Inc.	WA	IA	UnitedHealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	95710	39-1555888			UnitedHealthcare of Wisconsin, Inc.	WI	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
						UnitedHealthcare Plan of the River Valley, Inc.	IL	IA	UnitedHealthcare Services Company of the River Valley, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		95378	36-3379945			UnitedHealthcare Service LLC	DE	NIA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-0854646			UnitedHealthcare Services Company of the River Valley, Inc.	DE	NIA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	36-3355110			UnitedHealthcare Specialty Benefits, LLC	ME	NIA	Specialty Benefits, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	01-0518346			UnitedHealthcare, Inc.	DE	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	41-1922511			UpFront Insurance Agency, LLC	MN	NIA	Savvysherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	26-4219191			UPHT-SCA Holdings, LLC	DE	NIA	SCA-Davenport, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
		00000	47-3564984			Upland Outpatient Surgical Center, L.P.	CA	NIA	NSC Upland, LLC	Ownership	72.80	UnitedHealth Group Incorporated		2	
		00000	33-0812827			Upland Specialty Medical Center, a California General Partnership	CA	NIA	Upland Outpatient Surgical Center, L.P.	Influence	29.06	UnitedHealth Group Incorporated		5	
		00000	95-3222717			Urgent Care Holdings, Inc.	DE	NIA	Optum Clinics Intermediate Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	26-0382877			Urgent Care MSO, LLC	DE	NIA	Urgent Care Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	26-3667220			Urology Associates of North Texas, P.L.L.C.	TX	NIA	USMD Affiliated Services	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	75-2613230			USC/SCA Surgical Holdings, LLC	DE	NIA	USCA California Surgical Holdings, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
		00000	47-2101539			USMD Administrative Services, L.L.C.	TX	NIA	USMD Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	20-8048861			USMD Affiliated Services	TX	NIA	USMD Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-2956222			USMD Holdings, Inc.	DE	NIA	WellMed Medical Management, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-2866866			USMD Inc.	TX	NIA	USMD Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	20-8050318			USMD PPM, LLC	TX	NIA	USMD Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	35-2446102			Valley Hospital, L.L.C.	WA	NIA	Surgery Center of Spokane, LLC	Ownership	50.00	UnitedHealth Group Incorporated		2	
		00000	63-1182191			Valley Physicians Network, Inc.	CA	NIA	PrimeCare Medical Network, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	87-0757396			VERTA MANAGEMENT SERVICES, LLC	DE	NIA	SCA-VERTA, LLC	Ownership	50.00	UnitedHealth Group Incorporated		2	
		00000	81-4629242			Victory Rollover Holdings LLC	DE	NIA	UnitedHealth Group Ventures, LLC	Ownership	85.79	UnitedHealth Group Incorporated			
		00000				Victory Rollover Holdings LLC	DE	NIA	Pacifica Labs, Inc.	Ownership	14.21	UnitedHealth Group Incorporated			
		00000	98-1444067			Vida Tres Internacional S.A.	CHL	NIA	Banmédica S.A.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	98-1443076			VidaIntegra S.A.	CHL	NIA	Banmédica S.A.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000				Virtual Therapeutics Corporation	DE	NIA	United HealthCare Services, Inc.	Ownership	33.00	UnitedHealth Group Incorporated		2	
		00000	47-3247166			Virtua-SCA Holdings, LLC	NJ	NIA	SCA-New Jersey, LLC	Influence	49.00	UnitedHealth Group Incorporated		5	
		00000	36-3469841			Wauwatosa Outpatient Surgery Center, LLC	DE	NIA	Surgery Centers-West Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	36-3469839			Wauwatosa Surgery Center, Limited Partnership	WI	NIA	Wauwatosa Outpatient Surgery Center, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2	
		00000	20-5429310			Wayland Square Surgicare Acquisition, L.P.	RI	NIA	Wayland Square Surgicare GP, Inc.	Ownership	99.00	UnitedHealth Group Incorporated		2	
		00000	75-2500274			Wayland Square Surgicare GP, Inc.	RI	NIA	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	74-2797745			WebInsure Benefits, LLC	DE	NIA	hCative, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	74-2786364			WelIMed Medical Management of Florida, Inc.	FL	NIA	WellIMed Medical Management, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-2809113			WelIMed Medical Management, Inc.	TX	NIA	Collaborative Care Holdings, LLC	Ownership	80.00	UnitedHealth Group Incorporated		2	
		00000	06-1521999			West Coast Endoscopy Holdings, LLC	DE	NIA	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	06-1521999			Western Connecticut Orthopedic Surgical Center, LLC	CT	NIA	SCA-Western Connecticut, LLC	Ownership	59.586	UnitedHealth Group Incorporated		2	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domi-ciliary Loca-tion	10 Relation-ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner-ship Provide Percent-age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re-quired? (Y/N)	16 *
		.00000	45-0636596				WESTMED Practice Partners LLC	DE	N/A	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000					WillowB Labs LLC	DE	N/A	OptumRx, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000					Wilmington ASC, LLC	NC	N/A	SCA-Wilmington, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	27-4816583				Wilson Creek Surgical Center, LLC	TX	N/A	THR-SCA Holdings, LLC	Influence	51.000	UnitedHealth Group Incorporated		.5
		.00000	46-5548304				Winchester Endoscopy, LLC	IL	N/A	SCA-Winchester, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
		.00000	62-1525776				Winter Park Surgery Center, L.P.	TN	N/A	Winter Park, LLC	Influence	32.000	UnitedHealth Group Incorporated		.5
		.00000	62-1525776				Winter Park Surgery Center, L.P.	TN	N/A	SCA-Winter Park, Inc.	Influence	1.000	UnitedHealth Group Incorporated		.5
		.00000	62-1587564				Winter Park, LLC	TN	N/A	SCA-Winter Park, Inc.	Ownership	51.000	UnitedHealth Group Incorporated		.2
		.00000	52-2102846				XLHealth Corporation	MD	N/A	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	98-1107695				XLHealth Corporation India Private Limited	IND	N/A	XLHealth Corporation	Ownership	99.998	UnitedHealth Group Incorporated		
		.00000	98-1107695				XLHealth Corporation India Private Limited	IND	N/A	UnitedHealth International, Inc.	Ownership	0.002	UnitedHealth Group Incorporated		
		.00000	11-3764012				Your Health Options Insurance Services, Inc.	CA	N/A	PrimeCare Medical Network, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		

Asterisk	Explanation
1	TBD - Majority and/or Minority or additional shareholder information will be disclosed in a future reporting period.
2	The remaining percentage is owned by either: 1) non-affiliated entity(ies), 2) external shareholders, 3) outside investors or 4) multiple sources.
3	Currently undergoing a liquidation procedure.
4	Represents a physician or physicians' owned entity, where the entity is deemed to be influenced by the ultimate owner.
5	Represents a minority-owned entity (with respect to the ultimate owner), where the ultimate owner is deemed to have influence over the entity.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
41-1913523	ACN Group IPA of New York, Inc.		0	0	.0	0	154,107	0		.0	154,107	0
27-0015861	ACN Group of California, Inc.		(5,000,000)	0	0	0	10,972,266	0		0	5,972,266	0
82406	35-1665915	All Savers Insurance Company	(475,000,000)	0	0	0	(47,493,306)	44,675		0	(522,448,631)	1,049
73130	35-1744596	All Savers Life Insurance Company of California	0	0	.0	0	(6,924)	0		0	(6,924)	0
54-1743136	AmeriChoice Corporation		173,000,000	(75,000,000)	.0	0	0	0		0	98,000,000	0
95497	22-3368602	AmeriChoice of New Jersey, Inc.	0	0	.0	0	(352,511,855)	0		0	(352,511,855)	0
86-0813232	Arizona Physicians IPA		(25,000,000)	0	0	0	(691,365,070)	0		0	(716,365,070)	0
30-0842394	AxelaCare Intermediate Holdings, LLC		0	0	.0	0	178,362,650	0		0	178,362,650	0
88-0267857	Behavioral Healthcare Options, Inc.		0	0	.0	0	6,795,157	0		0	6,795,157	0
81-0881243	California Springs Holdings PC		6,910,000	0	0	0	0	0		0	6,910,000	0
12558	45-4976934	Care Improvement Plus of Texas Insurance Company	(15,000,000)	0	.0	0	(253,162,349)	0		0	(268,162,349)	0
12567	20-3888112	Care Improvement Plus South Central Insurance Company	0	0	.0	0	(353,078,427)	(5,420)		0	(353,083,847)	.54
14041	27-5038136	Care Improvement Plus Wisconsin Insurance Company	0	4,000,000	.0	0	(45,442,495)	0		0	(41,442,495)	0
52-1811176	DBP Services of New York IPA, Inc.		0	0	.0	0	1,959,368	0		0	1,959,368	0
52-1452809	Dental Benefit Providers of California, Inc.		(5,000,000)	0	.0	0	(7,412,983)	0		0	(12,412,983)	0
52053	36-4008355	Dental Benefit Providers of Illinois, Inc.	0	0	.0	0	(40,582)	0		0	(40,582)	0
41-2014834	Dental Benefit Providers, Inc.		0	0	.0	0	182,241,717	0		0	182,241,717	0
37-0855360	Golden Rule Financial Corporation		557,000,000	0	.0	0	0	0		0	557,000,000	0
62286	37-6028756	Golden Rule Insurance Company	(82,000,000)	0	.0	0	(216,614,411)	0		0	(298,614,411)	0
27-2337725	Greater Phoenix Collaborative Care, P.C.		0	0	.0	0	122	0		0	122	0
98-0213198	H&W Indemnity (SPC), Ltd.		0	0	.0	0	0	0		0	0	31,080,188
79480	35-1279304	Harken Health Insurance Company	(20,000,000)	0	.0	0	.777,132	0		0	(19,222,868)	0
96342	88-0201035	Health Plan of Nevada, Inc.	(145,000,000)	0	.0	0	(980,321,468)	(3,284,486)		0	(1,128,605,954)	40,405
13-4138668	INSPIRIS of New York IPA, Inc.		0	0	.0	0	282,834,924	0		0	282,834,924	0
45-3143218	Lifeprint East, Inc.		0	0	.0	0	103,215,260	0		0	103,215,260	0
27-2309024	LifePrint Health, Inc.		0	0	.0	0	3,056,067,613	0		0	3,056,067,613	0
60321	52-1803283	MAMSI Life and Health Insurance Company	0	0	.0	0	(16,674,456)	(118,629)		0	(16,793,085)	3,785
95-4874334	March Vision Care Group, Inc.		(6,910,000)	0	.0	0	26,933,254	0		0	20,023,254	0
96310	52-1169135	MD-Individual Practice Association, Inc.	(30,000,000)	0	.0	0	(25,473,965)	(303,694)		0	(55,777,659)	.9,872
12756	20-3391186	Medica Health Plans of Florida, Inc.	0	0	.0	0	8,624	0		0	8,624	0
12155	01-0788576	Medica HealthCare Plans, Inc.	(5,000,000)	0	.0	0	(72,096,210)	0		0	(77,096,210)	0
22-3935634	Monarch Health Plan, Inc.		0	0	.0	0	0	(3,942,481)		0	(3,942,481)	0
47-2336925	National MedTrans, LLC		0	0	.0	0	4,875,023	0		0	4,875,023	0
95251	76-0196559	National Pacific Dental, Inc.	(1,800,000)	0	.0	0	(1,112,512)	0		0	(2,912,512)	0
95123	65-0996107	Neighborhood Health Partnership, Inc.	(44,000,000)	0	.0	0	(81,624,477)	0		0	(125,624,477)	0
95758	88-0228572	Nevada Pacific Dental	0	0	.0	0	(295,588)	0		0	(295,588)	0
72-1267232	New Orleans Regional Physician Hospital Organization, L.L.C.		0	0	.0	0	(826,667,940)	0		0	(826,667,940)	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

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96940	52-1518174	Optimum Choice, Inc.	(10,000,000)	0	0	0	(39,494,040)	(228,418)		0	(49,722,458)	1,251
69647	31-0628424	Optum Insurance of Ohio, Inc.	(14,000,000)	0	0	0	(10,956,547)	0		0	(24,956,547)	0
41-1591944		OptumHealth Care Solutions, Inc.	0	0	0	0	275,713,891	0		0	275,713,891	0
41-1858498		OptumInsight, Inc.	0	0	0	0	372,344,816	0		0	372,344,816	0
01-0516051		OptumRx, Inc.	0	0	0	0	7,200,345,063	0		0	7,200,345,063	0
13-3818652		OrthoNet LLC	0	0	0	0	1,285,451	0		0	1,285,451	0
30-0029448		OrthoNet of the Mid-Atlantic, Inc.	0	0	0	0	(24,347)	0		0	(24,347)	0
78026	22-2797560	Oxford Health Insurance, Inc.	(390,000,000)	0	0	0	(919,112,682)	(60,252)		0	(1,309,172,934)	2,281,691
.96798	06-1181201	Oxford Health Plans (CT), Inc.	(50,000,000)	0	0	0	(285,729,226)	(1,672,256)		0	(337,401,482)	10,279
.95506	22-2745725	Oxford Health Plans (NJ), Inc.	(38,000,000)	0	0	0	(110,816,497)	1,619,813		0	(147,196,684)	951,150
.95479	06-1181200	Oxford Health Plans (NY), Inc.	(25,000,000)	0	0	0	(138,963,104)	0		0	(163,963,104)	0
52-2443751		Oxford Health Plans LLC	113,000,000	0	0	0	0	0		0	113,000,000	0
70785	35-1137395	PacificCare Life and Health Insurance Company	(3,400,000)	0	0	0	(1,333,774)	161		0	(4,733,613)	12,290
.84506	95-2829463	PaciFiCare Life Assurance Company	0	0	0	0	104,913	0		0	104,913	0
.95617	94-3267522	PaciFiCare of Arizona, Inc.	(6,000,000)	0	0	0	(1,576,364)	(2,319)		0	(7,578,683)	0
.95434	84-1011378	PaciFiCare of Colorado, Inc.	(27,000,000)	0	0	0	(1,148,067,771)	(4,222,907)		0	(1,179,290,678)	0
.95685	86-0875231	PaciFiCare of Nevada, Inc.	0	0	0	0	(241,026)	(587)		0	(241,613)	0
13607	20-5662149	People's Health, Inc.	0	0	0	0	826,667,940	0		0	826,667,940	0
11494	04-3677255	Physicians Health Choice of Texas, LLC	0	10,000,000	0	0	(599,774,551)	(311,072)		0	(590,085,623)	330
11176	65-0885893	Preferred Care Partners, Inc.	0	0	0	0	(729,114,102)	0		0	(729,114,102)	0
33-0607478		PrimeCare Medical Network, Inc.	(65,000,000)	0	0	0	265,329,148	0		0	200,329,148	0
.95482	84-0614905	Rocky Mountain Health Maintenance Organization, Inc.	0	0	0	0	(74,687,769)	0		0	(74,687,769)	0
.47004	84-1224718	Rocky Mountain HealthCare Options, Inc.	0	0	0	0	(923,015)	0		0	(923,015)	0
.71420	94-0734860	Sierra Health and Life Insurance Company	(150,000,000)	0	0	0	(2,116,487,285)	(59,583)		0	(2,266,546,868)	(40,405)
88-0201420		Southwest Medical Associates, Inc.	0	0	0	0	207,501,109	0		0	207,501,109	0
71-0886811		Spectra of New York, IPA, Inc.	0	0	0	0	34,298	0		0	34,298	0
52-1260282		Spectra, Inc.	0	0	0	0	23,860,408	0		0	23,860,408	0
.84549	38-2044243	Symponix Health Insurance	0	55,000,000	0	0	(302,460,305)	0		0	(247,460,305)	0
94-3077084		U.S. Behavioral Health Plan, California	0	0	0	0	48,666,233	0		0	48,666,233	0
95-2931460		UHC of California	(50,000,000)	0	0	0	(1,089,514,870)	0		0	(1,139,514,870)	0
.91529	52-1996029	Unimerica Insurance Company	(18,000,000)	0	0	0	(35,170,926)	11,359,492		0	(41,811,434)	(4,741,135)
.11596	01-0637149	Unimerica Life Insurance Company of New York	0	0	0	0	(1,423,838)	0		0	(1,423,838)	0
20-5917714		Unison Health Plan of Delaware, Inc.	(35,000,000)	0	0	0	(1,231,130)	(3,937,573)		0	(40,168,703)	0
94-2649097		United Behavioral Health	0	0	0	0	1,505,191,000	0		0	1,505,191,000	0
41-1868911		United Behavioral Health of New York, I.P.A., Inc.	0	0	0	0	1,798,006	0		0	1,798,006	0
41-1289245		United HealthCare Services, Inc.	2,822,000,000	(409,000,000)	0	0	12,252,969,100	0		0	14,665,969,100	0
41-1321939		UnitedHealth Group Incorporated	0	0	0	0	2,248,956,966	0		0	2,248,956,966	0
.95174	33-0115163	UnitedHealthcare Benefits of Texas, Inc.	(20,000,000)	0	0	0	(2,499,211,749)	(4,757,933)		0	(2,523,969,682)	38,352
47-3221444		UnitedHealthcare Benefits Plan of California	0	0	0	0	(118,344)	0		0	(118,344)	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.

SCHEDULE Y
PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

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46-4348775	UnitedHealthcare Community Plan of California, Inc.	(40,000,000)	75,000,000	0	0	(8,351,571)	0	0	0	26,648,429	0	0
13168	26-2688274	UnitedHealthcare Community Plan of Georgia, Inc.	0	0	0	0	2,280	0	0	2,280	0	0
12323	56-2451429	UnitedHealthcare Community Plan of Ohio, Inc.	(25,000,000)	0	0	(484,360,601)	9,898,523	0	0	(499,462,078)	18,462,343	0
11141	91-2008361	UnitedHealthcare Community Plan of Texas, L.L.C.	0	30,000,000	0	0	(281,430,826)	(2,584,381)	0	(254,015,207)	148,243	0
95467	38-3204052	UnitedHealthcare Community Plan, Inc.	(18,000,000)	0	0	0	(165,439,881)	4,201,499	0	(179,238,382)	1,207,667	0
79413	36-2739571	UnitedHealthcare Insurance Company	(1,295,000,000)	250,000,000	0	0	(9,805,486,137)	142,702,777	0	(10,707,783,360)	(467,852,784)	0
60318	36-3800349	UnitedHealthcare Insurance Company of Illinois	(65,000,000)	0	0	0	(164,732,524)	540,405	0	(229,192,119)	87,196	0
60093	11-3283886	UnitedHealthcare Insurance Company of New York	0	0	0	0	(552,996,181)	(70,689,059)	0	(623,685,240)	283,685,417	0
12231	20-1902768	UnitedHealthcare Insurance Company of the River Valley	0	0	0	0	(179,835,631)	525,580	0	(179,310,051)	130,438	0
97179	86-0207231	UnitedHealthcare Life insurance Company	0	0	0	0	(45,202,639)	(15,023)	0	(45,217,662)	(12,290)	0
95784	63-0899562	UnitedHealthcare of Alabama, Inc.	(5,000,000)	0	0	0	(16,043,987)	(94,750)	0	(21,138,737)	0	0
96016	86-0507074	UnitedHealthcare of Arizona, Inc.	(8,000,000)	0	0	0	(14,221,080)	(135,265)	0	(22,356,345)	0	0
95446	63-1036819	UnitedHealthcare of Arkansas, Inc.	(3,300,000)	0	0	0	(12,337,845)	(64,841)	0	(15,702,686)	0	0
95090	84-1004639	UnitedHealthcare of Colorado, Inc.	0	0	0	0	(16,324,773)	(104,874)	0	(16,429,647)	0	0
95264	59-1293865	UnitedHealthcare of Florida, Inc.	(65,000,000)	0	0	0	(392,136,019)	(2,500,082)	0	(459,636,101)	0	0
95850	58-1653544	UnitedHealthcare of Georgia, Inc.	0	0	0	0	(49,310,328)	(361,566)	0	(49,671,894)	0	0
95776	36-3280214	UnitedHealthcare of Illinois, Inc.	(5,500,000)	0	0	0	(23,239,317)	(189,296)	0	(28,928,613)	.56	0
96644	62-1240316	UnitedHealthcare of Kentucky, Ltd.	0	0	0	0	(19,219,677)	(160,358)	0	(19,380,035)	0	0
95833	72-1074008	UnitedHealthcare of Louisiana, Inc.	0	0	0	0	(276,890,193)	(9,124,265)	0	(286,014,458)	453,507	0
95716	63-1036817	UnitedHealthcare of Mississippi, Inc.	0	0	0	0	(115,997,080)	1,030,943	0	(114,966,137)	297,735	0
95149	05-0413469	UnitedHealthcare of New England, Inc.	0	0	0	0	(281,504,581)	(1,544,549)	0	(283,049,130)	2,622,094	0
13214	26-2697886	UnitedHealthcare of New Mexico	(10,000,000)	0	0	0	(99,520,740)	1,611,257	0	(107,909,483)	585,145	0
95085	06-1172891	UnitedHealthcare of New York, Inc.	0	0	0	0	(1,068,301,751)	.0	0	(1,068,301,751)	0	0
95103	56-1461010	UnitedHealthcare of North Carolina, Inc.	(30,000,000)	0	0	0	(54,691,016)	(563,269)	0	(85,254,285)	0	0
95186	31-1142815	UnitedHealthcare of Ohio, Inc.	(30,000,000)	0	0	0	(8,477,273)	(58,492)	0	(38,535,765)	0	0
96903	33-0115166	UnitedHealthcare of Oklahoma, Inc.	(22,500,000)	0	0	0	(73,500,809)	.0	0	(96,000,809)	0	0
95893	93-0938819	UnitedHealthcare of Oregon, Inc.	0	0	0	0	(232,091,905)	.0	0	(232,091,905)	0	0
95220	25-1756858	UnitedHealthcare of Pennsylvania, Inc.	(55,000,000)	0	0	0	(230,597,295)	(1,239,032)	0	(286,836,327)	0	0
95765	95-3939697	UnitedHealthcare of Texas, Inc.	(8,000,000)	0	0	0	(15,558,290)	(177,422)	0	(23,735,712)	197	0
95025	52-1130183	UnitedHealthcare of the Mid-Atlantic, Inc.	0	0	0	0	(157,058,648)	(1,002,542)	0	(158,061,190)	.74	0
95591	47-0676824	UnitedHealthcare of the Midlands, Inc.	(15,000,000)	0	0	0	(610,122,416)	(12,433,781)	0	(637,556,197)	0	0
96385	43-1361841	UnitedHealthcare of the Midwest, Inc.	(25,000,000)	0	0	0	(272,320,017)	(32,191,490)	0	(329,511,507)	130,535,806	0
95501	41-1488563	UnitedHealthcare of Utah, Inc.	0	0	0	0	(696,697,980)	(811,366)	0	(697,509,346)	0	0
48038	91-1312551	UnitedHealthcare of Washington, Inc.	(10,500,000)	0	0	0	(182,557,822)	.0	0	(193,057,822)	0	0
95710	39-1555888	UnitedHealthcare of Wisconsin, Inc.	(175,000,000)	0	0	0	(1,287,073,071)	(8,472,962)	0	(1,470,546,033)	0	0

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....95378	36-3379945	UnitedHealthcare Plan of the River Valley, Inc.	0	60,000,000	0	0	(617,273,132)	(6,108,850)		0	(563,381,982)	0
47-0854646		UnitedHealthcare Service LLC	0	0	0	0	904,374	0		0	904,374	0
01-0518346		UnitedHealthcare Specialty Benefits, LLC	0	0	0	0	22,230	0		0	22,230	0
35-2314192		WellMed Network of Florida, Inc.	0	0	0	0	882,670,634	0		0	882,670,634	0
74-2889447		WellMed Networks, Inc.	0	0	0	0	2,619,166,239	0		0	2,619,166,239	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4. Will an actuarial opinion be filed by March 1?	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?	YES
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING	
11. 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?	YES
<p>The following supplemental reports are required to be filed as part of your annual statement filing <u>if your company is engaged in the type of business covered by the supplement. 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.</u> 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.</p>	
MARCH FILING	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
34. Will the Worker's Compensation Carve-Out Supplement be filed by March 1?	.....	NO
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	.....	NO
36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....	NO
37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....	NO
38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....	NO
39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....	NO
40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	.....	NO

APRIL FILING

41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?	.....	YES
42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....	NO
43. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	.....	NO
44. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	.....	NO
45. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	.....	YES
46. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	.....	NO
47. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	.....	NO
48. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	.....	NO
49. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	.....	NO
50. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	.....	NO
51. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	.....	NO
52. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	.....	NO

AUGUST FILING

53. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanations:		

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Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
14. Trusteed Surplus Statement [Document Identifier 490]

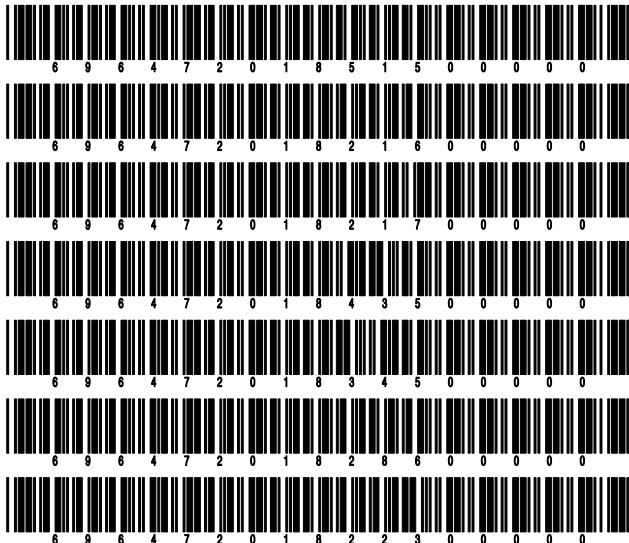


SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

15. Participating Opinion for Exhibit 5 [Document Identifier 371]
16. 
17. Actuarial Opinion on X-Factors [Document Identifier 442]
18. 
19. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]
20. 
21. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
22. 
23. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
24. 
25. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
26. 
27. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
28. 
29. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
30. 
31. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
32. 
33. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]
34. 
35. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
36. 
37. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
38. 
39. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
40. 
41. Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436]
42. 
43. Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437]
44. 
45. Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII [Document Identifier 438]
46. 
47. Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII [Document Identifier 439]
48. 
49. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
50. 
51. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
52. 
53. Supplemental Schedule O [Document Identifier 465]
54. 
55. Medicare Part D Coverage Supplement [Document Identifier 365]
56. 
57. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
58. 
59. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
60. 
61. Relief from the Requirements for Audit Committees [Document Identifier 226]
62. 
63. VM-20 Reserves Supplement [Document Identifier 456]
64. 
65. Long-Term Care Experience Reporting Forms [Document Identifier 306]
66. 
67. Interest-Sensitive Life Insurance Products Report Forms [Document Identifier 280]
68. 
69. Credit Insurance Experience Exhibit [Document Identifier 230]
70. 
71. Analysis of Annuity Operations by Lines of Business [Document Identifier 510]
72. 

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

47. Analysis of Increase in Annuity Reserves During the Year
[Document Identifier 515]
48. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
49. Supplemental Health Care Exhibit's Expense Allocation Report
[Document Identifier 217]
50. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D
[Document Identifier 435]
51. Supplemental Term and Universal Life Insurance Reinsurance Exhibit
[Document Identifier 345]
52. Variable Annuities Supplement [Document Identifier 286]
53. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Optum Insurance of Ohio, Inc.
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ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 - General Expenses	11
Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 - Dividends or Refunds	11
Exhibit 5 - Aggregate Reserve for Life Contracts	12
Exhibit 5 - Interrogatories	13
Exhibit 5A - Changes in Bases of Valuation During The Year	13
Exhibit 6 - Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 - Deposit-Type Contracts	15
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1	16
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes To Financial Statements	19
Overflow Page For Write-ins	55
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10

ANNUAL STATEMENT BLANK (Continued)

Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	SI12
Schedule DB - Part C - Section 2	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Verification	SI14
Schedule DL - Part 1	E24
Schedule DL - Part 2	E25
Schedule E - Part 1 - Cash	E26
Schedule E - Part 2 - Cash Equivalents	E27
Schedule E - Part 2 - Verification Between Years	SI15
Schedule E - Part 3 - Special Deposits	E28
Schedule F	36
Schedule H - Accident and Health Exhibit - Part 1	37
Schedule H - Part 2, Part 3 and Part 4	38
Schedule H - Part 5 - Health Claims	39
Schedule S - Part 1 - Section 1	40
Schedule S - Part 1 - Section 2	41
Schedule S - Part 2	42
Schedule S - Part 3 - Section 1	43
Schedule S - Part 3 - Section 2	44
Schedule S - Part 4	45
Schedule S - Part 5	46
Schedule S - Part 6	47
Schedule S - Part 7	48
Schedule T - Part 2 Interstate Compact	50
Schedule T - Premiums and Annuity Considerations	49
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule Y - Part 1A - Detail of Insurance Holding Company System	52
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	53
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	54