

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	5,333,736	0	5,333,736	6,003,391
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 1,483,623), cash equivalents (\$ 569,525) and short-term investments (\$ 0)	2,053,148	0	2,053,148	1,233,399
6. Contract loans (including \$ 0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	7,386,884	0	7,386,884	7,236,790
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	30,013	0	30,013	27,532
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	40,318	29,763	10,555	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 32,970)	32,970	0	32,970	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	31,663	0	31,663	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	0	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ 0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$ 67,916) and other amounts receivable	72,457	4,541	67,916	0
25. Aggregate write-ins for other than invested assets	6,593	6,593	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	7,600,898	40,897	7,560,001	7,264,322
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	7,600,898	40,897	7,560,001	7,264,322
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Commissions	6,593	6,593	0	0
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	6,593	6,593	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 0 reinsurance ceded)	1,129,987	0	1,129,987	0
2. Accrued medical incentive pool and bonus amounts	0	0	0	0
3. Unpaid claims adjustment expenses	2,883	0	2,883	0
4. Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act	41,205	0	41,205	0
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	0	0	0	0
9. General expenses due or accrued	.4,105	0	4,105	473
10.1 Current federal and foreign income tax payable and interest thereon (including \$ 0 on realized gains (losses))	0	0	0	0
10.2 Net deferred tax liability	0	0	0	5,235
11. Ceded reinsurance premiums payable	8,457	0	8,457	0
12. Amounts withheld or retained for the account of others	0	0	0	0
13. Remittances and items not allocated	0	0	0	0
14. Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	141,366	0	141,366	20,472
16. Derivatives	0	0	0	0
17. Payable for securities	0	0	0	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$ 0 authorized reinsurers, \$ 0 unauthorized reinsurers and \$ 0 certified reinsurers)	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ 0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	84,949	0	84,949	0
23. Aggregate write-ins for other liabilities (including \$ 0 current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)	1,412,952	0	1,412,952	26,180
25. Aggregate write-ins for special surplus funds	XXX	XXX	47,269	0
26. Common capital stock	XXX	XXX	1,000,000	1,000,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	6,146,351	6,146,351
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(1,046,571)	91,791
32. Less treasury stock, at cost:				
32.1 \$ 0 shares common (value included in Line 26)	XXX	XXX	0	0
32.2 \$ 0 shares preferred (value included in Line 27)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	6,147,049	7,238,142
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	7,560,001	7,264,322
DETAILS OF WRITE-INS				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501. ACA Section 9010 Subsequent Fee Year Assessment	XXX	XXX	47,269	0
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	47,269	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	3,607	0	0
2. Net premium income (including \$ 0 non-health premium income).....	XXX	2,868,773	0	0
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(41,205)	0	0
4. Fee-for-service (net of \$ 0 medical expenses).....	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	2,827,568	0	0
Hospital and Medical:				
9. Hospital/medical benefits	0	2,164,317	0	0
10. Other professional services	0	56,938	0	0
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	0	0	0	0
13. Prescription drugs	0	244,356	0	0
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	0	0	0
16. Subtotal (Lines 9 to 15)	0	2,465,611	0	0
Less:				
17. Net reinsurance recoveries	0	0	0	0
18. Total hospital and medical (Lines 16 minus 17)	0	2,465,611	0	0
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$ 93,921 cost containment expenses	0	204,683	0	0
21. General administrative expenses	0	1,330,863	505	1,783
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only)	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	4,001,157	505	1,783
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	(1,173,589)	(505)	(1,783)
25. Net investment income earned	0	115,985	78,795	118,221
26. Net realized capital gains (losses) less capital gains tax of \$ 0	0	2,173	0	(247)
27. Net investment gains (losses) (Lines 25 plus 26)	0	118,158	78,795	117,974
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 0)] (amount charged off \$ 0)].....	0	0	0	0
29. Aggregate write-ins for other income or expenses	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(1,055,431)	78,290	116,191
31. Federal and foreign income taxes incurred	XXX	0	12,981	19,165
32. Net income (loss) (Lines 30 minus 31)	XXX	(1,055,431)	65,309	97,026
DETAILS OF WRITE-INS				
0601.....	XXX			
0602.....	XXX			
0603.....	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above).....	XXX	0	0	0
0701.....	XXX			
0702.....	XXX			
0703.....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above).....	XXX	0	0	0
1401.....				
1402.....				
1403.....				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above).....	0	0	0	0
2901.....				
2902.....				
2903.....				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above).....	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	7,238,142	0	0
34. Net income or (loss) from Line 32	(1,055,431)	65,309	97,026
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	5,235	(3,460)	(5,235)
39. Change in nonadmitted assets	(40,897)	0	0
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	1,000,000	1,000,000
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	0	6,146,351	6,146,351
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	(1,091,093)	7,208,200	7,238,142
49. Capital and surplus end of reporting period (Line 33 plus 48)	6,147,049	7,208,200	7,238,142
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.
CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	2,803,942	0	0
2. Net investment income	88,348	27,621	65,341
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	2,892,290	27,621	65,341
5. Benefit and loss related payments	1,408,081	0	0
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	1,482,889	470	1,730
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	19,165	0	0
10. Total (Lines 5 through 9)	2,910,135	470	1,730
11. Net cash from operations (Line 4 minus Line 10)	(17,845)	27,151	63,611
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	1,980,509	0	128,769
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,980,509	0	128,769
13. Cost of investments acquired (long-term only):			
13.1 Bonds	1,282,975	5,938,476	6,106,639
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	500,000	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,282,975	6,438,476	6,106,639
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	697,534	(6,438,476)	(5,977,870)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	7,146,351	7,146,351
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	140,060	899	1,306
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	140,060	7,147,250	7,147,657
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	819,749	735,925	1,233,398
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	1,233,398	0	0
19.2 End of period (Line 18 plus Line 19.1)	2,053,148	735,925	1,233,398

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

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STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	0	0	0	0	0	0	0	0	0	0
2. First Quarter	399	0	0	0	0	0	0	399	0	0
3. Second Quarter	399	0	0	0	0	0	0	399	0	0
4. Third Quarter	407	0	0	0	0	0	0	407	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	3,607	0	0	0	0	0	0	3,607	0	0
Total Member Ambulatory Encounters for Period:										
7. Physician	1,825	0	0	0	0	0	0	1,825	0	0
8. Non-Physician	477	0	0	0	0	0	0	477	0	0
9. Total	2,302	0	0	0	0	0	0	2,302	0	0
10. Hospital Patient Days Incurred	211	0	0	0	0	0	0	211	0	0
11. Number of Inpatient Admissions	51	0	0	0	0	0	0	51	0	0
12. Health Premiums Written (a)	2,943,886	0	0	0	0	0	0	2,943,886	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	2,902,681	0	0	0	0	0	0	2,902,681	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	1,408,081	0	0	0	0	0	0	1,408,081	0	0
18. Amount Incurred for Provision of Health Care Services	2,465,611	0	0	0	0	0	0	2,465,611	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 2,943,886

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

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

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
CVS Caremark	15,723	0	0	0	0	15,723
0199999. Individually listed claims unpaid	15,723	0	0	0	0	15,723
0299999 Aggregate accounts not individually listed-uncovered	0	0	0	0	0	0
0399999 Aggregate accounts not individually listed-covered	8,882	1,024	385	0	0	10,291
0499999 Subtotals	24,605	1,024	385	0	0	26,014
0599999 Unreported claims and other claim reserves						1,103,973
0699999 Total amounts withheld						0
0799999 Total claims unpaid						1,129,987
0899999 Accrued medical incentive pool and bonus amounts						0

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	0	0	0	0	0	0
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare	0	1,408,081	0	1,129,987	0	0
7. Title XIX - Medicaid	0	0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	0	1,408,081	0	1,129,987	0	0
10. Healthcare receivables (a)	0	72,457	0	0	0	0
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0
13. Totals (Lines 9-10+11+12)	0	1,335,624	0	1,129,987	0	0

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

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operations

Bright Health Insurance Company of Ohio, Inc. (the "Company") is incorporated in the State of Ohio, dually licensed as a health maintenance organization (HMO) and a life, accident and health insurer, and is a wholly owned subsidiary of Bright Health Management, Inc. (BHM). BHM is a wholly owned subsidiary of Bright Health, Inc. (Bright Health), a for-profit privately held company. The Company was incorporated October 26, 2017, and received its license from the Ohio Department of Insurance (the "Department") on April 23, 2018. The Company contracts with the Center for Medicare and Medicaid Services (CMS) to provide Medicare Advantage policies for Medicare eligible enrollees effective January 1, 2019.

A. Accounting Practices

The statutory financial statements of the Company have been prepared in conformity with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP), the NAIC Annual Instructions, and other accounting practices, as prescribed or permitted by the Department.

No significant differences exist between the practices prescribed and permitted by the State of Ohio and those prescribed and permitted by the NAIC SAP which materially affect the statutory basis net (loss) income and capital and surplus, as illustrated in the table below:

	F/S SSAP #	F/S Page	F/S Line #	September 30, 2019	December 31, 2018
NET INCOME (LOSS)					
(1) State basis (Page 4, Line 32, Column 2 & 4)	XXX	XXX	XXX	\$ (1,055,431)	\$ 97,026
(2) State prescribed practices that increase/(decrease) NAIC SAP:	---	---	---	\$ -	\$ -
(3) State permitted practices that increase/(decrease) NAIC SAP:	---	---	---	\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ (1,055,431)</u>	<u>\$ 97,026</u>
SURPLUS					
(1) State basis (Page 3, Line 33, Column 3 & 4)	XXX	XXX	XXX	\$ 6,147,049	\$ 7,238,142
(2) State prescribed practices that increase/(decrease) NAIC SAP:	---	---	---	\$ -	\$ -
(3) State permitted practices that increase/(decrease) NAIC SAP:	---	---	---	\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ 6,147,049</u>	<u>\$ 7,238,142</u>

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

C. The preparation of these statutory basis financial statements in conformity with the NAIC Annual Statement Instructions and the NAIC SAP include certain amounts that are based on the Company's estimates and judgments. These estimates require the Company to apply complex assumptions and judgments, often because the Company must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to hospital and medical benefits, claims unpaid, Medicare risk adjustment factor estimates and Part D risk corridor premium adjustment estimates. The Company adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of net income in the period in which the estimate is adjusted.

D. Accounting Policy

Basis of Presentation - The Company prepares its statutory financial statements on the basis of accounting practices prescribed and permitted by the Department. These statutory practices differ from accounting principles generally accepted in the United States of America (GAAP).

Health Premiums are earned ratably over the terms of the related insurance contracts or policies. Expenses incurred in connection with acquiring new business, including acquisition costs such as sales commissions, are charged to operations as incurred. Premiums billed and collected in advance are recorded as premiums received in advance.

Total hospital and medical expenses are recognized in the period in which services are provided. Health care expenses also include an estimate of the cost of services provided to members by providers, which have been incurred but not yet reported. The estimate for incurred but not reported claims is based on actuarial projections of costs using historical paid claims data. Estimates are continually monitored and reviewed and, as settlements are made or estimates adjusted, differences are reflected in current operations. Such estimates are subject to the impact of changes in the regulatory environment and economic conditions. Given the inherent variability of such estimates, the actual liability could differ significantly from the amounts provided.

Accounting policy disclosures that are required by the NAIC Annual Statement instructions are as follows:

(1 - 2) Bonds and short-term investments, and certain cash equivalent investments, are stated at amortized cost if they meet NAIC designation of one or two and stated at the lower of amortized cost or fair value if they meet an NAIC designation of three or higher. Amortization of bond premium or accretion of discount is calculated using the constant-yield interest method. Bonds and short-term investments are valued and reported using market prices published by the Securities Valuation Office of the NAIC ("SVO") in accordance with the NAIC Valuations of Securities manual prepared by the SVO or an external pricing service.

(3 - 12) No significant change.

(13) Health care receivables consist of pharmacy rebate receivables for its enrollees estimated based on the most current data available from data the Company's unaffiliated pharmacy benefit manager, CVS. Health care receivables are considered nonadmitted assets under NAIC SAP if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the statutory basis statements of admitted assets, liabilities, and capital and surplus (see Note 28).

The Company has also deemed the following to be significant changes in accounting policies and/or differences between statutory practices and GAAP.

LIABILITIES

- **Claims Unpaid** – Claims unpaid include claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and liabilities for physician, hospital and other medical cost disputes.

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied and centrally controlled. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates and other relevant factors. The Company estimates such liabilities for outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of September 30, 2019; however actual payments may differ from those established estimates.

The Company contracts with hospitals, physicians and other providers of health care, primarily within the Mercy Health Network, under capitated and discounted fee for service arrangements, including a hospital per diem to provide medical care to enrollees. Capitated providers are at risk for the cost of medical care services provided to the Company's enrollees; however, the Company is ultimately responsible for the provision of services should the capitated provider be unable to provide the contracted services.

STATEMENTS OF OPERATIONS

- **Net Premium Income and Change in Reserves for Rate Credits** – Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. Net premium income is shown net of reinsurance premiums paid and reinsurance premiums incurred but not paid in the statutory basis statements of operations.

Effective January 1, 2019 net premium income includes premium under the Medicare Advantage program, which includes CMS premium. It also includes premium under the Medicare Part D program, which includes CMS premium, member premium and CMS low-income premium subsidy for the Company's insurance risk coverage. Net income is recognized ratably over the period in which eligible individuals are entitled to receive covered benefits.

Net premium income includes amounts under the CMS risk adjustment program and change in reserves for rate credits includes changes to the estimate related to the CMS risk corridor program. Changes to estimates related to these programs are recorded in the period they become known.

Medicare Advantage and Part D prescription drug plans are subject to medical loss ratio requirements under the ACA. Plans with medical loss ratios that fall below certain targets are required to rebate ratable portions of premiums annually.

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

Total hospital and medical expenses also include amounts incurred for risk sharing and gain sharing amounts that are based on the underlying contractual provisions with the respective providers. In addition, adjustments to claims unpaid estimates are reflected in the period once the change in estimate is identified and included in total hospital and medical expenses in the statutory basis statements of operations.

- **General Administrative Expenses** – Pursuant to the terms of the management agreement (see Note 10), the Company pays a management fee to BHM in exchange for administrative and management services. Costs for items not included within the scope of the management agreement are directly expensed as incurred. A detailed review of the administrative expenses of the Company and BHM is performed to determine the allocation between claims adjustment expenses and general administrative expenses to be reported in the statutory basis statements of operations.

E. Going Concern

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

2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

The company had no changes in accounting principles or correction of errors as of September 30, 2019 or December 31, 2018.

3. BUSINESS COMBINATIONS AND GOODWILL

Not applicable.

4. DISCONTINUED OPERATIONS

Not applicable.

5. INVESTMENTS

A-N. No significant change.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

No significant change.

7. INVESTMENT INCOME

A-B. No significant change.

8. DERIVATIVE INSTRUMENTS

A-F. No significant change.

9. INCOME TAXES

A-G. No significant change.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

A-N. Material Related Party Transactions

The Company has a management services agreement with BHM to provide the Company with personnel, information systems, claims processing, billing and enrollment, supplies and other services for the performance of all necessary and appropriate management services and functions. As compensation for the management services performed the Company pays a management fee that is the greater of a percentage of premiums or actual cost. Management fees charged to operations began during 2019. As of September 30, 2019 management fees charged to the Company were \$1,490,682.

The Company has a Tax Sharing Agreement with Bright Health.

The Company's parent, BHM, infused capital totaling \$7,146,351 during 2018. As of September 30, 2019 the Company has not received any capital infusions.

11. DEBT

A-B. No significant change.

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

A-I. The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding plans, postemployment benefits, and compensated absence plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of BHM which provides services to the Company under the terms of a management agreement.

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

(1-13) No significant change.

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A-E. No significant change.

F. All Other Contingencies

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

The ACA and the related federal and state regulations will continue to impact how the Company does business and could restrict revenue and enrollment growth in certain products and market segments, increase medical and administrative costs of the Company, or put the Company at risk for loss of business. Health care regulation, including the ACA and other regulatory reform initiatives, or additional changes in existing laws and regulations or their interpretations, could have a material adverse effect on the Company's business, results of operations and financial condition. The ACA may create new or expand existing opportunities for business growth, but due to its complexity, the long-term impact of the ACA remains difficult to predict and is not yet fully known.

Because of the nature of its businesses, the Company is frequently made party to a variety of regulatory inquiries, including market conduct reviews and other examinations of its business and reporting practices, audits and investigations by state insurance and health and welfare departments, state attorneys general, and the Office of the Inspector General.

When the Company (during its regular review of pending litigation and legal or regulatory matters) has determined that a material loss is reasonably possible, the matter is disclosed. In accordance with Statutory Accounting Principles, when litigation and regulatory matters present loss contingencies that are both probable and estimable, the Company accrues the estimated loss by a change to shareholder's net income. Estimates of losses resulting from legal or regulatory matters are inherently difficult to predict and amount of the loss accrued represents the Company's best estimate, which may differ materially from the amount of the ultimate amount of the loss. The Company provides disclosure for any material pending litigation or legal or regulatory action, including accruals, range of losses, or a statement that such information cannot be estimated.

15. LEASES

A-B. According to the management agreement between the Company and BHM (see Note 10), operating leases for the rental of office facilities and equipment are the responsibility of BHM. Fees associated with the lease agreements are included as a component of the Company's management fee agreement.

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

No significant change

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

A-C. The Company did not participate in any transfer of receivables, financial assets, or wash sales as of September 30, 2019 and December 31, 2018.

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

A-B. The Company had no operations from uninsured or partially insured plans as of September 30, 2019 or December 31, 2018.

C. Medicare or Other Similarly Structured Cost Reimbursement Contracts

The Medicare Part D program is a partially insured plan. The Company recorded a payable in liability for amounts held under uninsured plans in the statutory basis statements of admitted assets, liabilities and capital and surplus of \$43,417 as of September 30, 2019 for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a receivable of \$31,663 and a payable of \$41,532 for the Medicare Part D Coverage Gap Discount program as amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively, in the statutory basis statements of admitted assets, liabilities and capital and surplus.

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

No significant change.

20. FAIR VALUE MEASUREMENTS

The NAIC defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

LEVEL 1 – Inputs are unadjusted quoted prices in active markets that are accessible at the measurement date for identical assets or liabilities.

LEVEL 2 – Inputs are quoted prices for similar assets or liabilities in active markets or quoted prices in markets that are not active, or inputs that are observable, either directly or indirectly, for substantially the full term of the asset or liability.

LEVEL 3 - Inputs are unobservable and significant to the fair value measurement.

The estimated fair values of bonds, short-term investments and cash equivalent investments are based on quoted market prices, where available. The Company contracts with a vendor, Clearwater Analytics, to utilize their software to assist in accounting for its investments. The Company obtains one price for each security primarily from its custodian, or if unavailable, the Company is able to obtain pricing overrides from other acceptable sources or methods. However, based upon the relatively high rating of its investments, this is generally not required.

The Company is ultimately responsible for determining fair value, as well as the appropriate level within the fair value hierarchy, based on the significant of unobservable inputs, however it relies on the expertise of Clearwater to assist with the determination of fair value and identification of any impaired securities.

A. Fair Value

(1-5) The Company does not have any financial assets that are measured and reported at fair value in the statutory basis financial statements of admitted assets, liabilities, and capital and surplus at September 30, 2019 and December 31, 2018.

B. Fair Value Combination – Not applicable.

C. Aggregate Fair Value Hierarchy

The aggregate fair value by hierarchy of all financial instruments as of September 30, 2019 and December 31, 2018 is presented in the table below:

Type of Financial Instrument	September 30, 2019					Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)		
U.S. government securities	\$ 2,947,595	\$ 2,932,526	\$ 2,947,595	\$ -	\$ -	\$ -	\$ -
U.S. agency securities	1,218,559	1,210,156	-	1,218,559	-	-	-
Corporate debt securities	1,202,346	1,191,054	-	1,202,346	-	-	-
Total bonds	\$ 5,368,500	\$ 5,333,736	\$ 2,947,595	\$ 2,420,905	\$ -	\$ -	\$ -

Type of Financial Instrument	December 31, 2018					Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)		
U.S. government securities	\$ 3,234,251	\$ 3,236,971	\$ 3,234,251	\$ -	\$ -	\$ -	\$ -
U.S. agency securities	1,384,580	1,383,689	-	1,384,580	-	-	-
Corporate debt securities	1,381,646	1,382,731	-	1,381,646	-	-	-
Total bonds	\$ 6,000,477	\$ 6,003,391	\$ 3,234,251	\$ 2,766,226	\$ -	\$ -	\$ -

Included as Level 1 in U.S. government securities in the fair value hierarchy tables above are U.S. Treasury securities of \$2,947,595 and \$3,234,251 as of September 30, 2019 and December 31, 2019 respectively.

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

E. The Company was not required to measure any investments at the NAV practical expedient as of September 30, 2019 and December 31, 2018.

21. OTHER ITEMS

A-H. Not applicable.

22. EVENTS SUBSEQUENT

No significant change.

23. REINSURANCE

Effective January 1, 2019 the Company entered into an agreement with Swiss Re Life & Health America, Inc. (Swiss Re) in which Swiss Re provides excess loss reinsurance coverage to the Company on its policies. Ceded premiums of \$75,113 have been included in net premium income, in the statutory basis statements of operations as of September 30, 2019.

The Company recorded \$8,457 for unpaid reinsurance premiums as ceded reinsurance premiums payable in the statutory statements of admitted assets, liabilities, and capital and surplus as of September 30, 2019.

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

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

Yes () No (X)

(2) Have any policies issued by the Company been reinsured with a company charted in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

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

Yes () No (X)

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

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

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

Yes () No (X)

B. Uncollectible Reinsurance – Not applicable.

C. Commutation of Ceded Reinsurance – Not applicable.

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

24. RESTROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION

A. The Company estimates accrued retrospective premium adjustments for its health insurance business based on mathematical calculations in accordance with contractual terms.

B. Estimated accrued retrospective premiums due from the Company are recorded in aggregate health policy reserves in the statutory basis statement of admitted assets, liabilities, capital and surplus and an adjustment to change in reserve for rate credits in the statutory basis statements of operations.

C. Effective January 1, 2019 the Company's Medicare business is subject to retrospectively rated features based on the actual medical loss ratios experienced on the Medicare line of business. The formula is calculated pursuant to the ACA guidance. The total amount of direct premiums written for Medicare line of business subject to this retrospectively rated feature was \$2,943,886, representing 100% of total direct premiums written as of September 30, 2019.

Effective January 1, 2019 the Company has Medicare Part D risk corridor amounts from CMS which are subject to a retrospectively rated feature related to Part D premiums. The Company has estimated accrued retrospective premiums related to certain Part D premiums based on guidelines determined by CMS. The formula is tiered and based on the bid medical loss ratio. The amount of Medicare Part D premiums subject to this retrospective rating feature was \$310,334, representing 11% of total direct written premiums as of September 30, 2019.

Effective January 1, 2019 the Company has risk adjustment amounts from CMS which are subject to a redetermination feature related to Medicare premiums. The Company has estimated premium adjustments for changes to each member's health score based on guidelines determined by CMS. The total amount of Medicare direct premiums written for which a portion is subject to redetermination features was \$2,943,886, representing 100% of total direct written premiums as of September 30, 2019.

D. Effective January 1, 2019 the Company is required to maintain a specific minimum loss ratio on its Medicare line of business. As of September 30, 2019 the Company's annual estimated loss ratios on the Medicare line of business were in excess of the minimum requirement and as a result no medical loss ratio rebate liability was required.

E. Risk-Sharing Provisions of the Affordable Care Act

(1) The Company did not write any accident and health premiums subject to the risk-sharing provisions of the ACA as of September 30, 2019 and December 31, 2018.

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

Reserves for incurred claims and claims adjustment expenses were \$-0- as of December 31, 2018 as there were no policies written with effective dates prior to January 1, 2019. As a result, there is no prior year development as of September 30, 2019 and December 31, 2018.

26. INTERCOMPANY POOLING ARRANGEMENTS

A-G. The Company did not have any intercompany pooling arrangements.

27. STRUCTURED SETTLEMENTS

Not applicable.

28. HEALTH CARE RECEIVABLES

A. Effective January 1, 2019 the Company has contract provisions in its agreement with its unaffiliated pharmacy benefit manager (PBM), CVS, in which pharmacy amounts are rebated to the Company on its enrollees. Pharmacy rebates receivable are recorded when reasonably estimated or billed by CVS in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the PBM and adjusted for significant changes in contract provisions with the PBM.

The Company evaluates admissibility of all pharmaceutical rebates receivable based on the administration of the underlying PBM contract. The Company has non-admitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of Statements of Statutory Accounting Principles No. 84, *Certain Health Care Receivables and Receivables under Government Insured Plans (SSAP No. 84)* from the statutory basis statements of admitted assets, liabilities and capital and surplus.

For the pharmaceutical management agreement for which all the total pharmacy rebates receivable can be admitted based on the admissibility criteria of SSAP No. 84, the pharmacy rebate transaction history is as follows:

Quarter	Reported on Financial Statements	Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
9/30/2019	\$ 72,457	\$ -	\$ -	\$ -	\$ -
6/30/2019	112,116	71,357	15,199	-	-
3/31/2019	31,370	58,444	16,142	37,763	-

B. The Company has no risk-sharing receivables as of September 30, 2019 and December 31, 2018.

29. PARTICIPATING POLICIES

The Company did not have any participating contracts as of September 30, 2019 and December 31, 2018.

30. PREMIUM DEFICIENCY RESERVES

The following table summarizes the Company's premium deficiency reserves as of September 30, 2019 and December 31, 2018:

	September 30, 2019
1. Liability carried for premium deficiency reserves	\$ _____ -
2. Date of the most recent evaluation of this liability	12/31/2018
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

	December 31, 2018
1. Liability carried for premium deficiency reserves	\$ _____ -
2. Date of the most recent evaluation of this liability	12/31/2018
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

31. ANTICIPATED SALVAGE AND SUBROGATION

No significant change.

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change: _____

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []

3.3 If the response to 3.2 is yes, provide a brief description of those changes.
 Bright Health Company of Georgia was incorporated and licensed in Georgia.

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. _____

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
 If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
 If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2018

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

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

6.4 By what department or departments?
 Ohio Department of Insurance

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A []

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A []

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]

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

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

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

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.
GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [] No []
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended? Yes [] No []

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

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No []

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No []

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No []

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0

13. Amount of real estate and mortgages held in short-term investments: \$ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No []

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$ 0	\$ 0
14.22 Preferred Stock	\$ 0	\$ 0
14.23 Common Stock	\$ 0	\$ 0
14.24 Short-Term Investments	\$ 0	\$ 0
14.25 Mortgage Loans on Real Estate	\$ 0	\$ 0
14.26 All Other	\$ 0	\$ 0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$ 0	\$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$ 0	\$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No []

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

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

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

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.
GENERAL INTERROGATORIES

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

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

1 Name of Custodian(s)	2 Custodian Address
US Bank National Association	800 Nicollet Mall, Minneapolis, MN 55402

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No []

17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
US Bancorp Asset Management, Inc.	U.....
Internally Managed	I.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets? Yes [] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [] No []

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
111912	US Bancorp Asset Management, Inc.	8KUMV9E1J751BFMLFD23	SEC	NO.....

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

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- Issuer or obligor is current on all contracted interest and principal payments.
- The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No []

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No []

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.
GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent 90.5 %

1.2 A&H cost containment percent 3.3 %

1.3 A&H expense percent excluding cost containment expenses 51.0 %

2.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

2.2 If yes, please provide the amount of custodial funds held as of the reporting date \$ 0

2.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

2.4 If yes, please provide the balance of the funds administered as of the reporting date \$ 0

3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X]

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only							9 Deposit-Type Contracts
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums & Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	
1. Alabama	AL	N	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0
36. Ohio	OH	L	2,943,886	0	0	0	0	2,943,886	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0
59. Subtotal		XXX	0	2,943,886	0	0	0	2,943,886	0
60. Reporting Entity Contributions for Employee Benefit Plans		XXX	0	0	0	0	0	0	0
61. Totals (Direct Business)		XXX	0	2,943,886	0	0	0	2,943,886	0
DETAILS OF WRITE-INS									
58001.		XXX							
58002.		XXX							
58003.		XXX							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG..... 1 R - Registered - Non-domiciled RRGs..... 0

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0

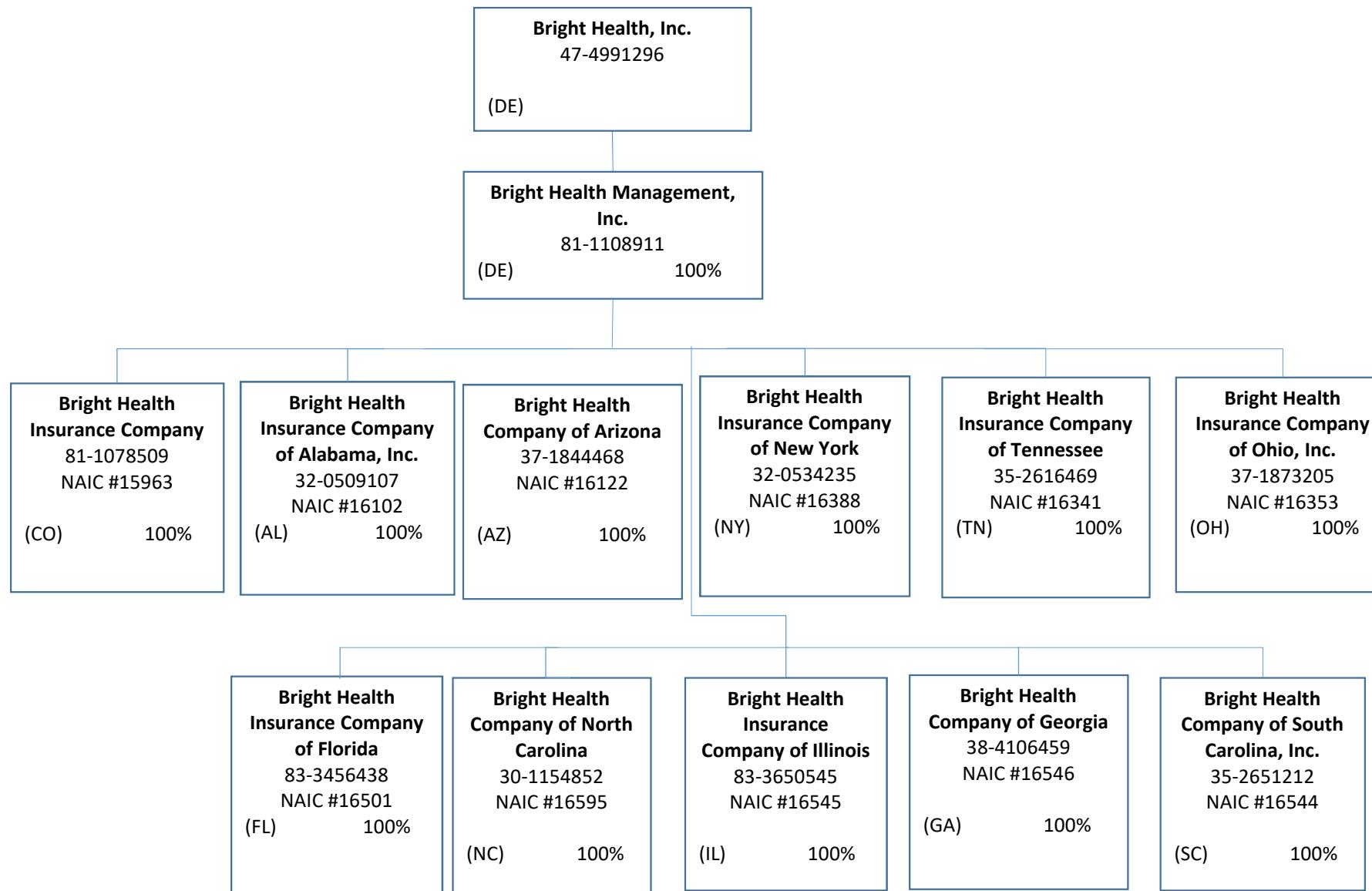
N - None of the above - Not allowed to write business in the state..... 56

Premiums are allocated on the situs of the contract.

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

Schedule Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

Explanation:

1.

Bar Code:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

NONE**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

NONE**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

NONE**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	6,003,391	0
2. Cost of bonds and stocks acquired	1,282,975	6,106,639
3. Accrual of discount	26,022	25,797
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	2,173	(247)
6. Deduct consideration for bonds and stocks disposed of	1,980,509	128,769
7. Deduct amortization of premium	316	29
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7+8-9+10)	5,333,736	6,003,391
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	5,333,736	6,003,391

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	6,048,978	846,908	1,619,457	7,497	5,978,240	6,048,978	5,283,925	5,854,570
2. NAIC 2 (a)	49,716	0	0	94	84,328	49,716	49,810	148,821
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	6,098,694	846,908	1,619,457	7,591	6,062,568	6,098,694	5,333,735	6,003,391
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	6,098,694	846,908	1,619,457	7,591	6,062,568	6,098,694	5,333,735	6,003,391

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

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

SI02

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value Statement Value	2 Price Value	3 Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals					

NONE**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of short-term investments acquired	39,795	886,890
3. Accrual of discount	205	3,169
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	40,000	890,000
7. Deduct amortization of premium	0	59
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards
NONE

Schedule DB - Part B - Verification - Futures Contracts
NONE

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

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

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives
NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	135,064	0
2. Cost of cash equivalents acquired	1,150,006	8,521,246
3. Accrual of discount	0	958
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	715,545	8,387,140
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	569,525	135,064
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	569,525	135,064

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

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

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

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

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

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation and Adminis- trative Symbol/ Market Indicator (a)
912828-2S-8	UNITED STATES TREASURY		.09/13/2019	HSBC SECURITIES (USA) FXD INC		19,915	20,000		14
912828-6U-9	UNITED STATES TREASURY		.07/09/2019	BANK OF NOVA SCOTIA		40,286	40,000		129
912828-6V-7	UNITED STATES TREASURY		.09/18/2019	US Bank		40,247	40,000		258
912828-7A-2	UNITED STATES TREASURY		.09/13/2019	BNP Paribas		39,847	40,000		138
912828-7C-8	UNITED STATES TREASURY		.09/12/2019	CITIGROUP GLOBAL MARKETS INC.		40,100	40,000		114
912828-C5-7	UNITED STATES TREASURY		.09/18/2019	BNP Paribas		40,283	40,000		423
912828-D7-2	UNITED STATES TREASURY		.09/10/2019	BANK OF NOVA SCOTIA		50,279	50,000		30
912828-F9-6	UNITED STATES TREASURY		.07/08/2019	HSBC SECURITIES (USA) FXD INC		50,145	50,000		190
912828-RR-3	UNITED STATES TREASURY		.09/19/2019	NATWEST SECURITIES		40,211	40,000		278
912828-U6-5	UNITED STATES TREASURY		.09/16/2019	BANK OF NOVA SCOTIA, NEW YORK		39,977	40,000		208
912828-V7-2	UNITED STATES TREASURY		.07/09/2019	BANK OF NOVA SCOTIA		39,994	40,000		331
912828-W5-5	UNITED STATES TREASURY		.09/13/2019	HSBC SECURITIES (USA) FXD INC		40,077	40,000		33
912828-W8-9	UNITED STATES TREASURY		.09/19/2019	BANK OF NOVA SCOTIA		40,153	40,000		355
912828-WG-1	UNITED STATES TREASURY		.09/18/2019	BNP SECURITIES		40,306	40,000		347
912828-WR-7	UNITED STATES TREASURY		.09/16/2019	HSBC SECURITIES (USA) FXD INC		40,213	40,000		182
0599999. Subtotal - Bonds - U.S. Governments						602,031	600,000		3,032
3133EH-LY-7	FEDERAL FARM CREDIT BANKS FUNDING CORP		.07/16/2019	KEYBANC CAPITAL MARKETS INC		39,922	40,000		94
3133EK-LQ-7	FEDERAL FARM CREDIT BANKS FUNDING CORP		.07/03/2019	WELLS FARGO SECURITIES LLC		50,354	50,000		150
3133EK-RE-8	FEDERAL FARM CREDIT BANKS FUNDING CORP		.07/16/2019	US Bank		44,893	45,000		76
3135G0-W3-3	FEDERAL NATIONAL MORTGAGE ASSOCIATION		.09/05/2019	INDUSTRIAL AND COMMERCIAL BANK OF CHINA		44,843	45,000		0
3199999. Subtotal - Bonds - U.S. Special Revenues						180,013	180,000		320
037833-DL-1	APPLE INC		.09/04/2019	GOLDMAN, SACHS & CO.		9,998	10,000		0
24422E-VA-4	JOHN DEERE CAPITAL CORP		.09/09/2019	HSBC SECURITIES (USA) FXD INC		9,987	10,000		0
254687-FJ-0	WALT DISNEY CO		.09/03/2019	JP MORGAN SECURITIES LLC		14,967	15,000		0
69371R-03-3	PACCAR FINANCIAL CORP		.09/23/2019	MLPFS INC FIXED INCOME		9,998	10,000		0
88579Y-BL-4	3M CO		.08/19/2019	WELLS FARGO SECURITIES LLC		19,924	20,000		0
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						64,864	65,000		0
8399997. Total - Bonds - Part 3						846,908	845,000		3,352
8399998. Total - Bonds - Part 5						XXX	XXX		XXX
8399999. Total - Bonds						846,908	845,000		3,352
8999997. Total - Preferred Stocks - Part 3						0	XXX		XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX		XXX
8999999. Total - Preferred Stocks						0	XXX		XXX
9799997. Total - Common Stocks - Part 3						0	XXX		XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX		XXX
9799999. Total - Common Stocks						0	XXX		0
9899999. Total - Preferred and Common Stocks						0	XXX		0
9999999 - Totals						846,908	XXX		3,352

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues 0

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE D - PART 4

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

1 CUSIP Ident- ification	2 Description	3 For- eign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consid- eration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Con- tractual Maturity Date	22 NAIC Design- ation and Admini- strative Symbol /Market Indicator (a)	
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amor- tization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recogn- ized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value								
.912828-3S-7	UNITED STATES TREASURY		.09/18/2019	VARIOUS	130,027	.130,000	129,010	129,389	0	402	0	402	0	0	129,791	0	237	237	2,945	.01/31/2020	1	
.912828-F8-0	UNITED STATES TREASURY		.08/31/2019	Maturity @ 100.00	130,000	.130,000	128,812	129,423	0	578	0	578	0	0	130,000	0	0	0	0	2,113	.08/31/2019	1
.912828-F3-9	UNITED STATES TREASURY		.09/30/2019	Maturity @ 100.00	130,000	.130,000	128,923	129,444	0	556	0	556	0	0	130,000	0	0	0	0	2,275	.09/30/2019	1
.912828-J5-0	UNITED STATES TREASURY		.07/09/2019	CITIGROUP GLOBAL MARKETS INC.	129,420	.130,000	127,578	128,483	0	672	0	672	0	0	129,155	0	264	264	1,533	.02/29/2020	1	
.912828-U3-2	UNITED STATES TREASURY		.09/13/2019	INC.	139,784	.140,000	137,014	138,323	0	1,357	0	1,357	0	0	139,680	0	104	104	1,168	.11/15/2019	1	
.912828-I6-3	UNITED STATES TREASURY		.09/19/2019	VARIOUS	129,816	.130,000	127,979	128,701	0	767	0	767	0	0	129,468	0	349	349	2,138	.03/15/2020	1	
.912828-IW-6	UNITED STATES TREASURY		.07/31/2019	Maturity @ 100.00	130,000	.130,000	128,929	129,513	0	487	0	487	0	0	130,000	0	0	0	0	2,113	.07/31/2019	1
.912828-XE-5	UNITED STATES TREASURY		.09/19/2019	8122	29,916	.30,000	29,420	29,610	0	197	0	197	0	0	29,807	0	109	109	363	.05/31/2020	1	
0599999. Subtotal - Bonds - U.S. Governments					948,963	950,000	937,664	942,886	0	5,015	0	5,015	0	0	947,901	0	1,062	1,062	14,647	XXX	XXX	
.313383-VN-8	FEDERAL HOME LOAN BANKS		.09/13/2019	Maturity @ 100.00	70,000	.70,000	69,563	69,778	0	222	0	222	0	0	70,000	0	0	0	0	1,400	.09/13/2019	1
.31339H-6L-2	FEDERAL FARM CREDIT BANKS FUNDING CORP		.08/01/2019	VARIOUS	74,912	.75,000	74,292	74,572	0	217	0	217	0	0	74,788	0	124	124	1,458	.01/10/2020	1	
.3135G0-M2-6	FEDERAL NATIONAL MORTGAGE ASSOCIATION		.07/26/2019	Maturity @ 100.00	110,000	.110,000	107,995	109,088	0	912	0	912	0	0	110,000	0	1,100	1,100	0	.07/26/2019	1	
.3137EA-EM-7	FREDDIE MAC		.09/05/2019	VARIOUS	105,336	.105,000	104,980	104,987	0	6	0	6	0	0	104,993	0	343	343	2,078	.04/23/2020	1	
3199999. Subtotal - Bonds - U.S. Special Revenues					360,249	360,000	356,830	358,425	0	1,356	0	1,356	0	0	359,781	0	467	467	6,037	XXX	XXX	
.0258M0-DP-1	AMERICAN EXPRESS CREDIT CORP		.08/15/2019	Maturity @ 100.00	100,000	.100,000	99,397	99,714	0	286	0	286	0	0	100,000	0	0	0	0	2,250	.08/15/2019	1FE
.14912L-6F-3	CATERPILLAR FINANCIAL SERVICES CORP		.08/19/2019	PERSHING LLC	19,996	.20,000	19,846	19,910	0	.62	0	.62	0	0	19,972	0	23	23	.325	.12/01/2019	1FE	
.172967-LF-6	CITIGROUP INC		.09/23/2019	KEYBANC CAPITAL MARKETS INC.	15,003	.15,000	14,858	14,914	0	.61	0	.61	0	0	14,975	0	.28	.28	.444	.01/10/2020	1FE	
.24422E-TQ-2	JOHN DEERE CAPITAL CORP		.09/09/2019	JP MORGAN SECURITIES LLC	24,990	.25,000	24,714	24,815	0	106	0	106	0	0	24,921	0	.69	.69	.547	.03/13/2020	1FE	
.375558-BR-3	GILEAD SCIENCES INC		.09/20/2019	Maturity @ 100.00	77,000	.77,000	76,054	76,519	0	481	0	481	0	0	77,000	0	0	0	0	1,425	.09/20/2019	1FE
.86787E-AR-8	SUNTRUST BANK		.09/04/2019	VARIOUS	34,992	.35,000	34,592	34,750	0	157	0	157	0	0	34,906	0	.85	.85	.865	.01/31/2020	1FE	
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					271,981	272,000	269,461	270,622	0	1,154	0	1,154	0	0	271,775	0	205	205	5,856	XXX	XXX	
8399997. Total - Bonds - Part 4					1,581,192	1,582,000	1,563,954	1,571,933	0	7,524	0	7,524	0	0	1,579,457	0	1,735	1,735	26,539	XXX	XXX	
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	0	XXX	0	XXX	0	0	XXX	0	XXX	XXX	XXX	XXX	XXX	
8399999. Total - Bonds					1,581,192	1,582,000	1,563,954	1,571,933	0	7,524	0	7,524	0	0	1,579,457	0	1,735	1,735	26,539	XXX	XXX	
8999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	0	XXX	0	XXX	0	0	XXX	0	XXX	XXX	XXX	XXX	XXX	
8999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
9799997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
9799998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	0	XXX	0	XXX	0	0	XXX	0	XXX	XXX	XXX	XXX	XXX	
9799999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
9899999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
9999999 - Totals					1,581,192	XXX	1,563,954	1,571,933	0	7,524	0	7,524	0	0	1,579,457	0	1,735	1,735	26,539	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....0

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

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

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

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

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

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

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
NONE

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE Bright Health Insurance Company of Ohio, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0599999. Total - U.S. Government Bonds						0	0	0
1099999. Total - All Other Government Bonds						0	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds						0	0	0
2499999. Total - U.S. Political Subdivisions Bonds						0	0	0
3199999. Total - U.S. Special Revenues Bonds						0	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	0
4899999. Total - Hybrid Securities						0	0	0
5599999. Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0
6099999. Subtotal - SVO Identified Funds						0	0	0
6599999. Subtotal - Bank Loans						0	0	0
7799999. Total - Issuer Obligations						0	0	0
7899999. Total - Residential Mortgage-Backed Securities						0	0	0
7999999. Total - Commercial Mortgage-Backed Securities						0	0	0
8099999. Total - Other Loan-Backed and Structured Securities						0	0	0
8199999. Total - SVO Identified Funds						0	0	0
8299999. Total - Bank Loans						0	0	0
8399999. Total Bonds						0	0	0
31846V-54-2	FIRST AMER:TRS OBLG Z		08/28/2019	1.790		100,000	0	22
8599999. Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO						100,000	0	22
31846V-56-7	FIRST AMER:GVT OBLG Z	SD	09/04/2019	1.790		10,316	.17	143
31846V-56-7	FIRST AMER:GVT OBLG Z		09/30/2019	1.790		459,209	383	0
8699999. Subtotal - All Other Money Market Mutual Funds						469,525	400	143
8899999 - Total Cash Equivalents						569,525	400	165