

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

**ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2019

OF THE CONDITION AND AFFAIRS OF THE

**Optum Insurance of Ohio, Inc.**

NAIC Group Code	<u>0707</u>	NAIC Company Code	<u>69647</u>	Employer's ID Number	<u>31-0628424</u>
	(Current)		(Prior)		
			Ohio		

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

Country of Domicile \_\_\_\_\_ United States of America \_\_\_\_\_

Licensed as business type: \_\_\_\_\_ Life, Accident and Health [  ] Fraternal Benefit Societies [  ] \_\_\_\_\_

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 \_\_\_\_\_ 9800 Health Care Lane; MS: MN006-W500 \_\_\_\_\_ 952-979-7329  
(Street and Number) (City or Town, State, Country and Zip Code)Mail Address \_\_\_\_\_ 9800 Health Care Lane; MS: MN006-W500 \_\_\_\_\_ Minnetonka, MN, US 55343  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)Primary Location of Books and Records \_\_\_\_\_ 9800 Health Care Lane; MS: MN006-W500 \_\_\_\_\_ 952-979-7329  
(Street and Number) (City or Town, State, Country and Zip Code)Internet Website Address \_\_\_\_\_ [www.optumrx.com](http://www.optumrx.com)Statutory Statement Contact \_\_\_\_\_ Tanner Scott Pearson \_\_\_\_\_ 952-979-7329  
(Name) (Area Code) (Telephone Number)  
tanner\_pearson5@uhc.com \_\_\_\_\_ 952-931-4651  
(E-mail Address) (FAX Number)**OFFICERS**

President, Chief Executive Officer	John Michael Prince	Chief Financial Officer, Chairman of the Board	Jeffrey David Grosklags
Secretary	Karen Elizabeth Peterson	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**

Daniel Christopher Davis	Jeffrey David Grosklags	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 there from 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  
Chief Financial Officer, Chairman of the Board

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.....

## ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	2,604,977	0	2,604,977	2,343,613
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0	0	0	0
2.2 Common stocks .....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	0	0	0	0
3.2 Other than first liens .....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....	0	0	0	0
4.2 Properties held for the production of income (less \$ 0 encumbrances) .....	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances) .....	0	0	0	0
5. Cash (\$ 376,698,589 , Schedule E - Part 1), cash equivalents (\$ 1,240,168 , Schedule E - Part 2) and short-term investments (\$ 0 , Schedule DA) .....	377,938,757	0	377,938,757	263,930,682
6. Contract loans (including \$ 0 premium notes) .....	0	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0	0
9. Receivables for securities .....	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	380,543,734	0	380,543,734	266,274,295
13. Title plants less \$ 0 charged off (for Title insurers only) .....	0	0	0	0
14. Investment income due and accrued .....	29,133	0	29,133	10,431
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	0	0	0	0
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums) .....	0	0	0	0
15.3 Accrued retrospective premiums (\$ 0 ) and contracts subject to redetermination (\$ 0 ) .....	0	0	0	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 .....	119,858,652	179,419	119,679,233	84,501,091
18.1 Current federal and foreign income tax recoverable and interest thereon .....	6,074,125	0	6,074,125	4,513,564
18.2 Net deferred tax asset .....	534,760	288,979	245,781	873,648
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 (\$ 0 ) and other amounts receivable .....	0	0	0	0
25. Aggregate write-ins for other than invested assets .....	178,501	0	178,501	56,252
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	507,218,905	468,398	506,750,507	356,229,281
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0	0
28. Total (Lines 26 and 27) .....	507,218,905	468,398	506,750,507	356,229,281
<b>DETAILS OF WRITE-INS</b>				
1101. .....				
1102. .....				
1103. .....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0	0
2501. State Income Tax Recoverable .....	178,501	0	178,501	56,252
2502. .....				
2503. .....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	178,501	0	178,501	56,252

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ ..... 0 (Exh. 5, Line 9999999) less \$ ..... 0 included in Line 6.3 (including \$ ..... 0 Modco Reserve) ..... 0	0	0
2. Aggregate reserve for accident and health contracts (including \$ ..... 0 Modco Reserve) ..... 0	0	0
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... 0 Modco Reserve) ..... 0	0	0
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11) ..... 0	0	0
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11) ..... 0	0	0
5. Policyholders' dividends/refunds to members \$ ..... 0 and coupons \$ ..... 0 due and unpaid (Exhibit 4, Line 10) ..... 0	0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ ..... 0 Modco) ..... 0	0	0
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ ..... 0 Modco) ..... 0	0	0
6.3 Coupons and similar benefits (including \$ ..... 0 Modco) ..... 0	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6 ..... 0	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ ..... 0 discount; including \$ ..... 0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14) ..... 0	0	0
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts ..... 0	0	0
9.2 Provision for experience rating refunds, including the liability of \$ ..... 0 accident and health experience rating refunds of which \$ ..... 0 is for medical loss ratio rebate per the Public Health Service Act ..... 0	0	0
9.3 Other amounts payable on reinsurance, including \$ ..... 0 assumed and \$ ..... 0 ceded ..... 0	0	0
9.4 Interest maintenance reserve (IMR, Line 6) ..... 57,883	57,883	71,210
10. Commissions to agents due or accrued-life and annuity contracts \$ ..... 0 accident and health \$ ..... 0 and deposit-type contract funds \$ ..... 0 ..... 0	0	0
11. Commissions and expense allowances payable on reinsurance assumed ..... 0	0	0
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) ..... 1,458,398	1,458,398	1,438,037
13. Transfers to Separate Accounts due or accrued (net) (including \$ ..... 0 accrued for expense allowances recognized in reserves, net of reinsured allowances) ..... 0	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6) ..... 0	0	0
15.1 Current federal and foreign income taxes, including \$ ..... 0 on realized capital gains (losses) ..... 0	0	0
15.2 Net deferred tax liability ..... 0	0	0
16. Unearned investment income ..... 0	0	0
17. Amounts withheld or retained by reporting entity as agent or trustee ..... 0	0	0
18. Amounts held for agents' account, including \$ ..... 0 agents' credit balances ..... 0	0	0
19. Remittances and items not allocated ..... 0	0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates ..... 0	0	0
21. Liability for benefits for employees and agents if not included above ..... 0	0	0
22. Borrowed money \$ ..... 0 and interest thereon \$ ..... 0 ..... 0	0	0
23. Dividends to stockholders declared and unpaid ..... 0	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7) ..... 0	0	0
24.02 Reinsurance in unauthorized and certified (\$ ..... 0 ) companies ..... 0	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$ ..... 0 ) reinsurers ..... 0	0	0
24.04 Payable to parent, subsidiaries and affiliates ..... 89,825,719	89,825,719	164,340,080
24.05 Drafts outstanding ..... 0	0	0
24.06 Liability for amounts held under uninsured plans ..... 349,200,429	349,200,429	121,622,439
24.07 Funds held under coinsurance ..... 0	0	0
24.08 Derivatives ..... 0	0	0
24.09 Payable for securities ..... 0	0	0
24.10 Payable for securities lending ..... 0	0	0
24.11 Capital notes \$ ..... 0 and interest thereon \$ ..... 0 ..... 0	0	0
25. Aggregate write-ins for liabilities ..... 21,270	21,270	16,265
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25) ..... 440,563,699	440,563,699	287,488,031
27. From Separate Accounts Statement ..... 0	0	0
28. Total liabilities (Lines 26 and 27) ..... 440,563,699	440,563,699	287,488,031
29. Common capital stock ..... 2,727,274	2,727,274	2,727,274
30. Preferred capital stock ..... 0	0	0
31. Aggregate write-ins for other than special surplus funds ..... 0	0	0
32. Surplus notes ..... 0	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1) ..... 4,990,293	4,990,293	4,990,293
34. Aggregate write-ins for special surplus funds ..... 0	0	0
35. Unassigned funds (surplus) ..... 58,469,241	58,469,241	61,023,683
36. Less treasury stock, at cost:		
36.1 ..... 0 shares common (value included in Line 29 \$ ..... 0 ) ..... 0	0	0
36.2 ..... 0 shares preferred (value included in Line 30 \$ ..... 0 ) ..... 0	0	0
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ ..... 0 in Separate Accounts Statement) ..... 63,459,534	63,459,534	66,013,976
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) ..... 66,186,808	66,186,808	68,741,250
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) ..... 506,750,507	506,750,507	356,229,281
<b>DETAILS OF WRITE-INS</b>		
2501. Unclaimed Property ..... 21,270	21,270	16,265
2502. ..... 0	0	0
2503. ..... 0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page ..... 0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) ..... 21,270	21,270	16,265
3101. ..... 0	0	0
3102. ..... 0	0	0
3103. ..... 0	0	0
3198. Summary of remaining write-ins for Line 31 from overflow page ..... 0	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above) ..... 0	0	0
3401. ..... 0	0	0
3402. ..... 0	0	0
3403. ..... 0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page ..... 0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) ..... 0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.**  
**SUMMARY OF OPERATIONS**

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11) .....	0	0
2. Considerations for supplementary contracts with life contingencies .....	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	46,730	29,613
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....	13,327	14,512
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1) .....	28,214	0
7. Reserve adjustments on reinsurance ceded .....	0	0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0	0
8.2 Charges and fees for deposit-type contracts .....	0	0
8.3 Aggregate write-ins for miscellaneous income .....	58,965,794	62,068,465
9. Total (Lines 1 to 8.3) .....	59,054,065	62,112,590
10. Death benefits .....	0	0
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) .....	0	0
13. Disability benefits and benefits under accident and health contracts .....	0	0
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0	0
15. Surrender benefits and withdrawals for life contracts .....	0	0
16. Group conversions .....	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	0	0
18. Payments on supplementary contracts with life contingencies .....	0	0
19. Increase in aggregate reserves for life and accident and health contracts .....	0	0
20. Totals (Lines 10 to 19) .....	0	0
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	28,214	0
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) .....	0	0
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6) .....	18,942,440	17,280,461
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	573,568	348,718
25. Increase in loading on deferred and uncollected premiums .....	0	0
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0	0
27. Aggregate write-ins for deductions .....	0	0
28. Totals (Lines 20 to 27) .....	19,544,222	17,629,179
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	39,509,843	44,483,411
30. Dividends to policyholders and refunds to members .....	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	39,509,843	44,483,411
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....	8,224,729	9,250,315
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	31,285,114	35,233,096
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ 0 (excluding taxes of \$ 0 transferred to the IMR) .....	0	0
35. Net income (Line 33 plus Line 34) .....	31,285,114	35,233,096
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	68,741,250	47,880,336
37. Net income (Line 35) .....	31,285,114	35,233,096
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ 24 .....	87	54
39. Change in net unrealized foreign exchange capital gain (loss) .....	0	0
40. Change in net deferred income tax .....	(444,904)	272,317
41. Change in nonadmitted assets .....	1,605,261	(1,376,209)
42. Change in liability for reinsurance in unauthorized and certified companies .....	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease .....	0	0
44. Change in asset valuation reserve .....	0	0
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1) .....	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period .....	0	0
47. Other changes in surplus in Separate Accounts Statement .....	0	0
48. Change in surplus notes .....	0	0
49. Cumulative effect of changes in accounting principles .....	0	0
50. Capital changes:		
50.1 Paid in .....	0	0
50.2 Transferred from surplus (Stock Dividend) .....	0	0
50.3 Transferred to surplus .....	0	0
51. Surplus adjustment:		
51.1 Paid in .....	0	0
51.2 Transferred to capital (Stock Dividend) .....	0	0
51.3 Transferred from capital .....	0	0
51.4 Change in surplus as a result of reinsurance .....	0	0
52. Dividends to stockholders .....	(35,000,000)	(14,000,000)
53. Aggregate write-ins for gains and losses in surplus .....	0	731,656
54. Net change in capital and surplus for the year (Lines 37 through 53) .....	(2,554,442)	20,860,914
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	66,186,808	68,741,250
<b>DETAILS OF WRITE-INS</b>		
08.301. Service Fee Revenue .....	58,965,794	62,068,465
08.302. .....		
08.303. .....		
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above) .....	58,965,794	62,068,465
2701. .....		
2702. .....		
2703. .....		
2798. Summary of remaining write-ins for Line 27 from overflow page .....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above) .....	0	0
5301. Correction of prior year error .....	0	731,656
5302. .....		
5303. .....		
5398. Summary of remaining write-ins for Line 53 from overflow page .....	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above) .....	0	731,656

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.**  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	0	0
2. Net investment income .....	56,098	98,004
3. Miscellaneous income .....	58,994,008	63,204,665
4. Total (Lines 1 through 3) .....	59,050,106	63,302,669
5. Benefit and loss related payments .....	0	0
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(174,546,942)	97,804,513
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ .....	0	9,785,290
10. Total (Lines 5 through 9) .....	(164,761,652)	111,067,148
11. Net cash from operations (Line 4 minus Line 10) .....	223,811,758	(47,764,479)
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	2,000,000	0
12.2 Stocks .....	0	0
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	111	55
12.7 Miscellaneous proceeds .....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	2,000,111	55
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	2,289,434	19,565
13.2 Stocks .....	0	0
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	2,289,434	19,565
14. Net increase (decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(289,323)	(19,510)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	35,000,000	14,000,000
16.6 Other cash provided (applied) .....	(74,514,360)	314,248,755
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(109,514,360)	300,248,755
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	114,008,075	252,464,766
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	263,930,682	11,465,916
19.2 End of year (Line 18 plus Line 19.1) .....	377,938,757	263,930,682

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

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## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts	0		0	0	0	0	0	0	0
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX	0	0	XXX	XXX	0	XXX
3. Net investment income	.46,730	0	0	0	0	0	0	.46,730	0
4. Amortization of Interest Maintenance Reserve (IMR)	..13,327	0	0	0	0	0	0	..13,327	0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0	0	0	0	0	0	0
6. Commissions and expense allowances on reinsurance ceded	28,214	28,214	0	0	0	0	0	0	0
7. Reserve adjustments on reinsurance ceded	0	0	0	0	0	0	XXX	0	0
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0	0	0	0	XXX	0	0
8.2 Charges and fees for deposit-type contracts	0	0	0	0	0	XXX	XXX	0	0
8.3 Aggregate write-ins for miscellaneous income	58,965,794	0	0	0	0	0	0	58,965,794	0
9. Totals (Lines 1 to 8.3)	59,054,065	28,214	0	0	0	0	0	0	59,025,851
10. Death benefits	0	0	0	0	0	XXX	XXX	0	0
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0	0	0	0	XXX	XXX	0	0
12. Annuity benefits	0	XXX	XXX	0	0	XXX	XXX	0	XXX
13. Disability benefits and benefits under accident and health contracts	0	0	0	0	0	0	XXX	0	0
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0	0	0	0	XXX	0	0
15. Surrender benefits and withdrawals for life contracts	0	0	0	0	0	XXX	XXX	0	0
16. Group conversions	0	0	0	0	0	0	XXX	0	0
17. Interest and adjustments on contract or deposit-type contract funds	0	0	0	0	0	0	XXX	0	0
18. Payments on supplementary contracts with life contingencies	0	0	0	0	0	XXX	XXX	0	0
19. Increase in aggregate reserves for life and accident and health contracts	0	0	0	0	0	0	XXX	0	0
20. Totals (Lines 10 to 19)	0	0	0	0	0	0	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	28,214	28,214	0	0	0	0	0	0	XXX
22. Commissions and expense allowances on reinsurance assumed	0	0	0	0	0	0	XXX	0	0
23. General insurance expenses and fraternal expenses	18,942,440	0	0	0	0	0	0	18,942,440	0
24. Insurance taxes, licenses and fees, excluding federal income taxes	573,568	0	0	0	0	0	0	0	573,568
25. Increase in loading on deferred and uncollected premiums	0	0	0	0	0	0	XXX	0	0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0	0	0	0	XXX	0	0
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	19,544,222	28,214	0	0	0	0	0	0	19,516,008
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	39,509,843	0	0	0	0	0	0	39,509,843	0
30. Dividends to policyholders and refunds to members	0	0	0	0	0	0	XXX	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	39,509,843	0	0	0	0	0	0	39,509,843	0
32. Federal income taxes incurred (excluding tax on capital gains)	8,224,729	0	0	0	0	0	0	0	8,224,729
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	31,285,114	0	0	0	0	0	0	31,285,114	0
34. Policies/certificates in force end of year	0	0	0	0	0	0	XXX	0	0
<b>DETAILS OF WRITE-INS</b>									
08.301. Service Fee Revenue	58,965,794	0	0	0	0	0	0	58,965,794	0
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	58,965,794	0	0	0	0	0	0	58,965,794	0
2701.									
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(a)</sup> .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Amortization of Interest Maintenance Reserve (IMR) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Commissions and expense allowances on reinsurance ceded .....	28,214	.0	.0	28,214	.0	.0	.0	.0	.0	.0	.0	.0
7. Reserve adjustments on reinsurance ceded .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.2 Charges and fees for deposit-type contracts .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.3 Aggregate write-ins for miscellaneous income .....	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	28,214	0	0	28,214	0	0	0	0	0	0	0	0
10. Death benefits .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Matured endowments (excluding guaranteed annual pure endowments) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Coupons, guaranteed annual pure endowments and similar benefits .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15. Surrender benefits and withdrawals for life contracts .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Group conversions .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Interest and adjustments on contract or deposit-type contract funds .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Payments on supplementary contracts with life contingencies .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Increase in aggregate reserves for life and accident and health contracts .....	0	0	0	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	28,214	.0	.0	28,214	.0	.0	.0	.0	.0	.0	.0	XXX
22. Commissions and expense allowances on reinsurance assumed .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. General insurance expenses .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
25. Increase in loading on deferred and uncollected premiums .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Aggregate write-ins for deductions .....	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	28,214	0	0	28,214	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
30. Dividends to policyholders and refunds to members .....	0	0	0	0	0	0	0	0	0	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
32. Federal income taxes incurred (excluding tax on capital gains) .....	0	0	0	0	0	0	0	0	0	0	0	0
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	0	0	0	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year .....	0	0	0	0	0	0	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>												
08.301. ....												
08.302. ....												
08.303. ....												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....	0	0	0	0	0	0	0	0	0	0	0	0
2701. ....												
2702. ....												
2703. ....												
2798. Summary of remaining write-ins for Line 27 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Include premium amounts for preneed plans included in Line 1 .....0

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(c) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

Analysis of Operations by Lines of Business - Group Life Insurance  
**N O N E**

Analysis of Operations by Lines of Business - Individual Annuities  
**N O N E**

Analysis of Operations by Lines of Business - Group Annuities  
**N O N E**

Analysis of Operations by Lines of Business - Accident and Health  
**N O N E**

Analysis of Increase in Reserves During the Year - Individual Life Insurance  
**N O N E**

Analysis of Increase in Reserves During the Year - Group Life Insurance  
**N O N E**

Analysis of Increase in Reserves During the Year - Individual Annuities  
**N O N E**

Analysis of Increase in Reserves During the Year - Group Annuities  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....		(a) .....	33,827
1.1 Bonds exempt from U.S. tax .....		(a) .....	0
1.2 Other bonds (unaffiliated) .....		(a) .....	0
1.3 Bonds of affiliates .....		(a) .....	0
2.1 Preferred stocks (unaffiliated) .....		(b) .....	0
2.11 Preferred stocks of affiliates .....		(b) .....	0
2.2 Common stocks (unaffiliated) .....		0	0
2.21 Common stocks of affiliates .....		0	0
3. Mortgage loans .....		(c) .....	0
4. Real estate .....		(d) .....	0
5. Contract loans .....		0	0
6. Cash, cash equivalents and short-term investments .....		(e) .....	25,903
7. Derivative instruments .....		(f) .....	0
8. Other invested assets .....		0	0
9. Aggregate write-ins for investment income .....		0	0
10. Total gross investment income .....		40,624	59,730
11. Investment expenses .....		(g) .....	13,000
12. Investment taxes, licenses and fees, excluding federal income taxes .....		(g) .....	0
13. Interest expense .....		(h) .....	0
14. Depreciation on real estate and other invested assets .....		(i) .....	0
15. Aggregate write-ins for deductions from investment income .....		0	0
16. Total deductions (Lines 11 through 15) .....			13,000
17. Net investment income (Line 10 minus Line 16) .....			46,730
<b>DETAILS OF WRITE-INS</b>			
0901. .....			
0902. .....			
0903. .....			
0998. Summary of remaining write-ins for Line 9 from overflow page .....		0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....		0	0
1501. .....			
1502. .....			
1503. .....			
1598. Summary of remaining write-ins for Line 15 from overflow page .....		0	0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....		0	0

(a) Includes \$ 121 accrual of discount less \$ 28,191 amortization of premium and less \$ 23,672 paid for accrued interest on purchases.  
 (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.  
 (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.  
 (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.  
 (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.  
 (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.  
 (g) Includes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.  
 (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.  
 (i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....	0	0	0	0	0
1.1 Bonds exempt from U.S. tax .....	0	0	0	0	0
1.2 Other bonds (unaffiliated) .....	0	0	0	0	0
1.3 Bonds of affiliates .....	0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	0	0	0	0	0
2.11 Preferred stocks of affiliates .....	0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	0	0	0	0	0
2.21 Common stocks of affiliates .....	0	0	0	0	0
3. Mortgage loans .....	0	0	0	0	0
4. Real estate .....	0	0	0	0	0
5. Contract loans .....	0	0	0	0	0
6. Cash, cash equivalents and short-term investments .....	0	0	0	111	0
7. Derivative instruments .....	0	0	0	0	0
8. Other invested assets .....	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	0	0	0	111	0
<b>DETAILS OF WRITE-INS</b>					
0901. .....					
0902. .....					
0903. .....					
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## EXHIBIT - 1 PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
<b>FIRST YEAR (other than single)</b>															
1. Uncollected .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
2. Deferred and accrued .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
3. Deferred , accrued and uncollected:															
3.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
3.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
3.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
3.4 Net (Line 1 + Line 2) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
4. Advance .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
5. Line 3.4 - Line 4 .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
6. Collected during year:															
6.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
7. Line 5 + Line 6.4 .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
8. Prior year (uncollected + deferred and accrued - advance) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
9. First year premiums and considerations:															
9.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
9.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
9.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
9.4 Net (Line 7 - Line 8) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
<b>SINGLE</b>															
10. Single premiums and considerations:															
10.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
10.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
10.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
10.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
<b>RENEWAL</b>															
11. Uncollected .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
12. Deferred and accrued .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
13. Deferred, accrued and uncollected:															
13.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
13.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
13.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
13.4 Net (Line 11 + Line 12) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
14. Advance .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
15. Line 13.4 - Line 14 .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
16. Collected during year:															
16.1 Direct .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
16.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
16.3 Reinsurance ceded .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
16.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
17. Line 15 + Line 16.4 .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
18. Prior year (uncollected + deferred and accrued - advance) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
19. Renewal premiums and considerations:															
19.1 Direct .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
19.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
19.3 Reinsurance ceded .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
19.4 Net (Line 17 - Line 18) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
<b>TOTAL</b>															
20. Total premiums and annuity considerations:															
20.1 Direct .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
20.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
20.3 Reinsurance ceded .....	668,346	0	625,296	42,127	0	0	0	0	0	0	0	923	0		
20.4 Net (Lines 9.4 + 10.4 + 19.4) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**EXHIBIT - 1 PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>															
21. To pay renewal premiums .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
22. All other .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>															
23. First year (other than single):															
23.1 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
23.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
23.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
24. Single:															
24.1 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
24.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
24.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
25. Renewal:															
25.1 Reinsurance ceded .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		
25.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
25.3 Net ceded less assumed .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		
26. Totals:															
26.1 Reinsurance ceded (Page 6, Line 6) .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		
26.2 Reinsurance assumed (Page 6, Line 22) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
26.3 Net ceded less assumed .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		
<b>COMMISSIONS INCURRED (direct business only)</b>															
27. First year (other than single) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
28. Single .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
29. Renewal .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		
30. Deposit-type contract funds .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
31. Totals (to agree with Page 6, Line 21) .....	28,214	0	28,214	0	0	0	0	0	0	0	0	0	0		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7			
	1	Accident and Health							
		2 Life	3 Cost Containment						
1. Rent .....	0	0	0	64,561	0	64,561			
2. Salaries and wages .....	0	0	0	1,059,390	0	1,059,390			
3.11 Contributions for benefit plans for employees .....	0	0	0	238,569	0	238,569			
3.12 Contributions for benefit plans for agents .....	0	0	0	0	0	0			
3.21 Payments to employees under non-funded benefit plans .....	0	0	0	5,113	0	5,113			
3.22 Payments to agents under non-funded benefit plans .....	0	0	0	0	0	0			
3.31 Other employee welfare .....	0	0	0	3,849	0	3,849			
3.32 Other agent welfare .....	0	0	0	0	0	0			
4.1 Legal fees and expenses .....	0	0	0	14,103	0	14,103			
4.2 Medical examination fees .....	0	0	0	133	0	133			
4.3 Inspection report fees .....	0	0	0	9	0	9			
4.4 Fees of public accountants and consulting actuaries .....	0	0	0	141,080	0	141,080			
4.5 Expense of investigation and settlement of policy claims .....	0	0	0	7,455	0	7,455			
5.1 Traveling expenses .....	0	0	0	31,769	0	31,769			
5.2 Advertising .....	0	0	0	70,912	0	70,912			
5.3 Postage, express, telegraph and telephone .....	0	0	0	57,387	0	57,387			
5.4 Printing and stationery .....	0	0	0	17,852	0	17,852			
5.5 Cost or depreciation of furniture and equipment .....	0	0	0	19,413	0	19,413			
5.6 Rental of equipment .....	0	0	0	3,971	0	3,971			
5.7 Cost or depreciation of EDP equipment and software .....	0	0	0	135,570	0	135,570			
6.1 Books and periodicals .....	0	0	0	1,414	0	1,414			
6.2 Bureau and association fees .....	0	0	0	1,743	0	1,743			
6.3 Insurance, except on real estate .....	0	0	0	15,165	0	15,165			
6.4 Miscellaneous losses .....	0	0	0	0	0	0			
6.5 Collection and bank service charges .....	0	0	0	6,539	0	6,539			
6.6 Sundry general expenses .....	0	0	0	0	0	0			
6.7 Group service and administration fees .....	0	0	0	16,756,389	0	16,756,389			
6.8 Reimbursements by uninsured plans .....	0	0	0	0	0	0			
7.1 Agency expense allowance .....	0	0	0	0	0	0			
7.2 Agents' balances charged off (less \$ ..... recovered) .....	0	0	0	0	0	0			
7.3 Agency conferences other than local meetings .....	0	0	0	0	0	0			
8.1 Official publication (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0			
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0			
9.1 Real estate expenses .....	0	0	0	0	0	0			
9.2 Investment expenses not included elsewhere .....	0	0	0	13,000	0	13,000			
9.3 Aggregate write-ins for expenses .....	0	0	0	290,054	0	290,054			
10. General expenses incurred .....	0	0	0	18,942,440	13,000	(b) (a) 18,955,440			
11. General expenses unpaid Dec. 31, prior year .....	0	0	0	1,438,037	0	1,438,037			
12. General expenses unpaid Dec. 31, current year .....	0	0	0	1,458,398	0	1,458,398			
13. Amounts receivable relating to uninsured plans, prior year .....	0	0	0	0	0	0			
14. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0	0	0			
15. General expenses paid during year (Lines 10+11-12-13-14) .....	0	0	0	18,922,079	13,000	0			
<b>DETAILS OF WRITE-INS</b>									
09.301. Other professional fees .....	0	0	0	290,054	0	290,054			
09.302.									
09.303.									
09.398. Summary of remaining write-ins for Line 9.3 from overflow page .....	0	0	0	0	0	0			
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above) .....	0	0	0	290,054	0	290,054			

(a) Includes management fees of \$ 2,178,618 to affiliates and \$ 0 to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$ 0 ; 2. Institutional \$ 0 ; 3. Recreational and Health \$ 0 ; 4. Educational \$ 0 ; 5. Religious \$ 0 ; 6. Membership \$ 0 ; 7. Other \$ 0 ; 8. Total \$ 0

**EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)**

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes .....	0	0	3,922	0	0	3,922
2. State insurance department licenses and fees .....	0	0	84,856	0	0	84,856
3. State taxes on premiums .....	0	0	11,502	0	0	11,502
4. Other state taxes, including \$ for employee benefits .....	0	0	395,511	0	0	395,511
5. U.S. Social Security taxes .....	0	0	77,777	0	0	77,777
6. All other taxes .....	0	0	0	0	0	0
7. Taxes, licenses and fees incurred .....	0	0	573,568	0	0	573,568
8. Taxes, licenses and fees unpaid Dec. 31, prior year .....	0	0	0	0	0	0
9. Taxes, licenses and fees unpaid Dec. 31, current year .....	0	0	0	0	0	0
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) .....	0	0	573,568	0	0	573,568

**EXHIBIT 4 - DIVIDENDS OR REFUNDS**

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums .....		
2. Applied to shorten the endowment or premium-paying period .....		
3. Applied to provide paid-up additions .....		
4. Applied to provide paid-up annuities .....		
5. Total Lines 1 through 4 .....		
6. Paid in cash .....		
7. Left on deposit .....		
8. Aggregate write-ins for dividend or refund options .....		
9. Total Lines 5 through 8 .....		
10. Amount due and unpaid .....		
11. Provision for dividends or refunds payable in the following calendar year .....		
12. Terminal dividends .....		
13. Provision for deferred dividend contracts .....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13 .....		
15. Total Lines 10 through 14 .....		
16. Total from prior year .....		
17. Total dividends or refunds (Lines 9 + 15 - 16) .....		
<b>DETAILS OF WRITE-INS</b>		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page .....		
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....		

**NONE**

**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. 1958 CSO 4.00% CRVM ALB CRF	251,505	0	251,505	0	0
0100002. 1958 CSO 4.00% NLP ALB CRF	62,578	0	62,578	0	0
0100003. 1958 CSO 5.50% CRVM ALB CNF	1,032,930	0	1,032,930	0	0
0100004. 1958 CSO 6.00% CRVM ALB CNF	94,493	0	94,493	0	0
0100005. 1980 CSO 4.50% CRVM ALB CNF	906,153	0	906,153	0	0
0100006. 1980 CSO 4.50% NLP ANB CRF	7,400	0	7,400	0	0
0100007. 1980 CSO 5.00% CRVM ALB CNF	1,367,703	0	1,367,703	0	0
0100008. 1980 CSO 5.50% CRVM ALB CNF	5,397,078	0	5,397,078	0	0
0100009. 1980 CSO 5.50% CRVM ALB CRF	1,681	0	1,681	0	0
0100010. 1980 CSO 7.0%/D20/5.5% NLP ALB CRF	43,007	0	43,007	0	0
0100011. 1980 CSO 7.00% NLP ALB CRF	374,934	0	374,934	0	0
0199997. Totals (Gross)	9,539,462	0	9,539,462	0	0
0199998. Reinsurance ceded	9,539,462	0	9,539,462	0	0
0199999. Life Insurance: Totals (Net)	0	0	0	0	0
0200001. 83a 6.25%	9,636	XXX	9,636	XXX	0
0200002. 83a 7.25%	20,251	XXX	20,251	XXX	0
0200003. a-2000 5.25%	5,807	XXX	5,807	XXX	0
0200004. a-2000 5.50%	3,670	XXX	3,670	XXX	0
0200005. a-2000 7.00%	8,990	XXX	8,990	XXX	0
0200006. Deferred Accum at various rates	6,442,984	XXX	6,442,984	XXX	0
0299997. Totals (Gross)	6,491,338	XXX	6,491,338	XXX	0
0299998. Reinsurance ceded	6,491,338	XXX	6,491,338	XXX	0
0299999. Annuities: Totals (Net)	0	XXX	0	XXX	0
0399998. Reinsurance ceded	0	0	0	0	0
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. 1959 ADB - 1958 CSO 4.5%	50	0	50	0	0
0499997. Totals (Gross)	50	0	50	0	0
0499998. Reinsurance ceded	50	0	50	0	0
0499999. Accidental Death Benefits: Totals (Net)	0	0	0	0	0
0500001. 1952 INTERCO DISA - 1958 CSO 3%	66	0	66	0	0
0599997. Totals (Gross)	66	0	66	0	0
0599998. Reinsurance ceded	66	0	66	0	0
0599999. Disability-Active Lives: Totals (Net)	0	0	0	0	0
0600001. 1952 INTERCO DISA - 1958 CSO 3%	12,614	0	12,614	0	0
0699997. Totals (Gross)	12,614	0	12,614	0	0
0699998. Reinsurance ceded	12,614	0	12,614	0	0
0699999. Disability-Disabled Lives: Totals (Net)	0	0	0	0	0
0799998. Reinsurance ceded	0	0	0	0	0
0799999. Miscellaneous Reserves: Totals (Net)	0	0	0	0	0
9999999. Totals (Net) - Page 3, Line 1	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**EXHIBIT 5 - INTERROGATORIES**

1.1 Has the reporting entity ever issued both participating and non-participating contracts? ..... Yes [ ] No [ X ]  
 1.2 If not, state which kind is issued.  
     Non-participating .....

2.1 Does the reporting entity at present issue both participating and non-participating contracts? ..... Yes [ ] No [ X ]  
 2.2 If not, state which kind is issued.  
     Non-participating .....

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? ..... Yes [ X ] No [ ]  
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4. Has the reporting entity any assessment or stipulated premium contracts in force? ..... Yes [ ] No [ X ]  
 If so, state:  
 4.1 Amount of insurance? ..... \$ ..... 0  
 4.2 Amount of reserve? ..... \$ ..... 0  
 4.3 Basis of reserve:  
     4.4 Basis of regular assessments:  
     4.5 Basis of special assessments:  
     4.6 Assessments collected during the year ..... \$ ..... 0

5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? ..... Yes [ ] No [ X ]  
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: ..... \$ ..... 0  
 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: ..... \$ ..... 0  
 Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements ..... \$ ..... 0  
 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:  
     7.3 State the amount of reserves established for this business: ..... \$ ..... 0  
 7.4 Identify where the reserves are reported in the blank:

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: ..... \$ ..... 0  
 8.2 State the amount of reserves established for this business: ..... \$ ..... 0  
 8.3 Identify where the reserves are reported in the blank:

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: ..... \$ ..... 0  
 9.2 State the amount of reserves established for this business: ..... \$ ..... 0  
 9.3 Identify where the reserves are reported in the blank:

**EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR**

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
9999999 - Total (Column 4, only)			

**NONE**

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS <sup>(a)</sup>

	1	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
<b>ACTIVE LIFE RESERVE</b>		Total											
1. Unearned premium reserves .....		0	0	0	0	0	0	0	0	0	0	0	0
2. Additional contract reserves (b) .....		0	0	0	0	0	0	0	0	0	0	0	0
3. Additional actuarial reserves-Asset/Liability analysis .....		0	0	0	0	0	0	0	0	0	0	0	0
4. Reserve for future contingent benefits .....		46	46	0	0	0	0	0	0	0	0	0	0
5. Reserve for rate credits .....		0	0	0	0	0	0	0	0	0	0	0	0
6. Aggregate write-ins for reserves .....		0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross) .....		46	46	0	0	0	0	0	0	0	0	0	0
8. Reinsurance ceded .....		46	46	0	0	0	0	0	0	0	0	0	0
9. Totals (Net) .....		0	0	0	0	0	0	0	0	0	0	0	0
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims .....		0	0	0	0	0	0	0	0	0	0	0	0
11. Additional actuarial reserves-Asset/Liability analysis .....		0	0	0	0	0	0	0	0	0	0	0	0
12. Reserve for future contingent benefits .....		0	0	0	0	0	0	0	0	0	0	0	0
13. Aggregate write-ins for reserves .....		0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross) .....		0	0	0	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded .....		0	0	0	0	0	0	0	0	0	0	0	0
16. Totals (Net) .....		0	0	0	0	0	0	0	0	0	0	0	0
17. TOTAL (Net) .....		0	0	0	0	0	0	0	0	0	0	0	0
<b>TABULAR FUND INTEREST</b>		0	0	0	0	0	0	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>													
0601. ....													
0602. ....													
0603. ....													
0698. Summary of remaining write-ins for Line 6 from overflow page .....		0	0	0	0	0	0	0	0	0	0	0	0
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above) .....		0	0	0	0	0	0	0	0	0	0	0	0
1301. ....													
1302. ....													
1303. ....													
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0	0	0	0	0	0	0	0
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance .....	206,464	0	6,377	200,087	0	0
2. Deposits received during the year .....	0	0	0	0	0	0
3. Investment earnings credited to the account .....	3,617	0	118	3,499	0	0
4. Other net change in reserves .....	(4,709)	0	256	(4,965)	0	0
5. Fees and other charges assessed .....	0	0	0	0	0	0
6. Surrender charges .....	0	0	0	0	0	0
7. Net surrender or withdrawal payments .....	44,612	0	1,505	43,107	0	0
8. Other net transfers to or (from) Separate Accounts .....	0	0	0	0	0	0
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....	160,760	0	5,246	155,514	0	0
10. Reinsurance balance at the beginning of the year .....	(206,464)	0	(6,377)	(200,087)	0	0
11. Net change in reinsurance assumed .....	0	0	0	0	0	0
12. Net change in reinsurance ceded .....	(45,704)	0	(1,131)	(44,573)	0	0
13. Reinsurance balance at the end of the year (Lines 10+11-12) .....	(160,760)	0	(5,246)	(155,514)	0	0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13) .....	0	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

## PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct	137,320	0	137,269	0	0	0	0	0	.51	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	137,320	0	137,269	0	0	0	0	0	.51	0	0
1.4 Net	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted	0	0	0	0	0	0	0	0	0	0	0
2.11 Direct	0	0	0	0	0	0	0	0	0	0	0
2.12 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.13 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.14 Net	0	0	(b)	0	0	(b)	0	(b)	0	0	0
2.2 Other	0	0	0	0	0	0	0	0	0	0	0
2.21 Direct	0	0	0	0	0	0	0	0	0	0	0
2.22 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.23 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.24 Net	0	0	(b)	0	0	(b)	0	(b)	0	(b)	0
3. Incurred but unreported:											
3.1 Direct	0	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	(b)	0	0	(b)	0	(b)	0	(b)	0
4. TOTALS	4.1 Direct	137,320	0	137,269	0	0	0	0	.51	0	0
	4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
	4.3 Reinsurance ceded	137,320	0	137,269	0	0	0	0	.51	0	0
	4.4 Net	0	(a)	0	(a)	0	0	(a)	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ 0 in Column 2, \$ 0 in Column 3 and \$ 0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$ 0

Individual Annuities \$ 0, Credit Life (Group and Individual) \$ 0, and Group Life \$ 0, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ 0

Credit (Group and Individual) Accident and Health \$ 0, and Other Accident and Health \$ 0 are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

## PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements During the Year:											
1.1 Direct	1,267,474	0	1,258,178	9,133	0	0	0	0	163	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	1,267,474	0	1,258,178	9,133	0	0	0	0	163	0	0
1.4 Net	(d) 0	0	0	0	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct	137,320	0	137,269	0	0	0	0	0	51	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	137,320	0	137,269	0	0	0	0	0	51	0	0
2.4 Net	0	0	0	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers December 31, current year			0	0	0	0	0	0	0	0	0
4. Liability December 31, prior year:											
4.1 Direct	47,273	0	47,110	0	0	0	0	0	163	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	47,273	0	47,110	0	0	0	0	0	163	0	0
4.4 Net	0	0	0	0	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers December 31, prior year			0	0	0	0	0	0	0	0	0
6. Incurred Benefits											
6.1 Direct	1,357,521	0	1,348,337	9,133	0	0	0	0	51	0	0
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	1,357,521	0	1,348,337	9,133	0	0	0	0	51	0	0
6.4 Net	0	0	0	0	0	0	0	0	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ 0 in Line 1.1, \$ 0 in Line 1.4.

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

(d) Includes \$ 0 premiums waived under total and permanent disability benefits.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**EXHIBIT OF NON-ADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only) .....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	179,419	1,967,619	1,788,200
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset .....	288,979	106,040	(182,939)
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software .....	0	0	0
21. Furniture and equipment, including health care delivery assets .....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable .....	0	0	0
25. Aggregate write-ins for other than invested assets .....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	468,398	2,073,659	1,605,261
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
28. Total (Lines 26 and 27) .....	468,398	2,073,659	1,605,261
<b>DETAILS OF WRITE-INS</b>			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	0	0	0

## **OPTUM INSURANCE OF OHIO, INC.**

### **NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018**

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#### **1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN**

##### **Organization and Operation**

Optum Insurance of Ohio, Inc. (the "Company"), licensed as a life, accident, and health insurer, is domiciled in the State of Ohio. The Company is a wholly owned subsidiary of OptumRx PBM of Maryland, LLC (the "Parent") and its ultimate parent company is UnitedHealth Group Incorporated ("UnitedHealth Group"). UnitedHealth Group is a publicly held company trading on the New York Stock Exchange.

The Company is licensed to sell life, annuity, and accident and health insurance products in 48 states and the District of Columbia. The Company entered into a coinsurance agreement with Protective Life Insurance Company ("Protective") on April 30, 1997 to cede the risk associated with its life and annuity contracts. Under this agreement, Protective agreed to administer certain life and annuity contracts originally written by the Company and to pay for any claims arising under the insurance contracts. As of December 31, 2019 and 2018, all of the Company's insurance contracts were 100% ceded to Protective under the coinsurance agreement.

The Company has entered into a contract with an affiliate which assigned its client contracts to the Company. The contract requires the Company to provide certain Medicare Part D benefits solely to employer groups. Under such contract, the Company only provides Medicare Part D benefits to employer groups that will directly reimburse it for the cost of the prescription drugs and does not subject the Company to any insurance risk. As part of offering these services, the Company operates as a national Medicare Prescription Drug Plan ("PDP") sponsor under Part D of the Medicare program. The Company holds an agreement with the Department of Health and Human Services, and Centers for Medicare and Medicaid Services ("CMS") to operate as a national PDP sponsor. As an approved national PDP sponsor, the Company is able to provide PDP Medicare benefits to employer groups wishing to contract indirectly with CMS to offer prescription drug benefits to eligible members. The Company is able to offer benefits to all retirees of an employer group regardless of their state of residence by providing adequate access to pharmacy providers. Employer groups and unions located in all 50 states are within the Company's target market; the insured Medicare-eligible members of these organizations may reside anywhere in the United States and its territories.

As a PDP plan sponsor, the Company only facilitates the information flow of the PDP benefits and reimbursements between the employer groups and CMS. In addition to charging a service fee for the PDP services, the Company does facilitate the collection for the reimbursement of the drug spend from the employer groups, however, 100% of these payments are remitted back to the affiliated pharmaceutical benefit manager ("PBM"). The Company does not administer or make claims payments on behalf of the employer groups; that is the sole responsibility of the PBM. The PBM provides specific reporting on drug spend to the Company, who in turn provides it to CMS to facilitate any reimbursements due to the employer groups. The Company does not arrange for the provision of medical services for these employer groups.

##### **A. Accounting Practices**

The statutory basis financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (the "Department").

The Department recognizes only statutory accounting practices, prescribed or permitted by the State of Ohio, for determining and reporting the financial condition and results of operations of a life, accident, and health insurer, for determining its solvency under Ohio Insurance Law. The state prescribes the use of the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures manual ("NAIC SAP") in effect for the accounting periods covered in the statutory basis financial statements.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

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

	SSAP #	F/S Page #	F/S Line #	December 31, 2019	December 31, 2018
<b>Net Income</b>					
(1) Company state basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 31,285,114	\$ 35,233,096
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	<u>\$ 31,285,114</u>	<u>\$ 35,233,096</u>
<b>Capital and Surplus</b>					
(5) Company state basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 66,186,808	\$ 68,741,250
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(7) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	<u>\$ 66,186,808</u>	<u>\$ 68,741,250</u>

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

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 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. As of December 31, 2019, there are no amounts in the statutory basis financial statements that the Company believes contain material estimates and judgements.

**C. Accounting Policy**

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

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

- (1) The Company holds no short-term investments.
- (2) Bonds are stated at book/adjusted carrying value if they meet NAIC designation of one through five and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of six. The Company does not have any mandatory convertible securities or Securities Valuation Office of the NAIC ("SVO") identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds are valued and reported using market prices published by the SVO in accordance with the NAIC Valuation of Securities manual prepared by the SVO or an external pricing service;
- (3-4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;
- (6) The Company holds no loan-backed securities;
- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;

- (8) The Company has no investment interests with respect to joint ventures, partnerships or limited liability companies;
- (9) The Company holds no derivatives;
- (10) The Company has reviewed the statutory requirements for establishing a premium deficiency reserve ("PDR"). Given the nature of the Company's operations, no PDR was required to be established as of December 31, 2019 and 2018. If required, the Company would anticipate investment income as a factor in the PDR calculation (see Note 30);
- (11) The Company does not administer or make claims payments on behalf of the employer groups for the Medicare Part D activity. The Company cedes 100% of the risk and administrative functions associated with its life and annuity contracts. As a result, the Company does not report any unpaid claims adjustment expenses or claims adjustment expenses in the statutory basis financial statements of admitted assets, liabilities, and capital and surplus and the statutory basis statements of operations, respectively;
- (12) The Company does not carry any fixed assets on the statutory basis financial statements;
- (13) The Company does not have any health care receivables.

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

## **ASSETS**

### ***Cash and Invested Assets***

- Bonds include U.S. government and agency securities with a maturity of greater than one year at the time of purchase;
- Certain debt investments categorized as available-for-sale or held-to-maturity under GAAP are presented at the lower of book/adjusted carrying value or fair value in accordance with the NAIC designations in the statutory basis financial statements, whereas under GAAP, these investments are shown at fair value or book/adjusted carrying value, respectively;
- Cash and cash equivalents in the statutory basis financial statements represent cash balances and investments with original maturities of one year or less from the time of acquisition, whereas under GAAP, the corresponding caption of cash, cash equivalents, and short-term investments includes cash balances and investments that will mature in one year or less from the balance sheet date;
- The Company has no short-term investments;
- Cash represents cash held by the Company in operating accounts;
- Cash equivalents include money-market funds. Cash equivalents have original maturity dates of three months or less from the date of acquisition. Money-market funds are reported at fair value or net asset value ("NAV") as a practical expedient;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. The Company has not recognized any realized capital gains or losses on sales of investments in 2019 or 2018 and as a result, no amounts have been transferred to the interest maintenance reserve ("IMR");
- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in the statutory basis statements of operations. The new cost basis is not changed for subsequent recoveries in fair value. The Company has not recorded any other-than-temporary impairments ("OTTI") for the years ended December 31, 2019 and 2018;

- The NAIC SAP required the following captions to be taken into consideration in the reconciliation of the statutory basis statements of cash flows: cash, including cash overdrafts, cash equivalents, and short-term investments, which can include restricted cash reserves, with original maturities of one year or less from the time of acquisition, whereas under GAAP, pursuant to Accounting Standards Update 2016-18, *Statement of Cash Flows, Restricted Cash*, the statements of cash flows reconcile the corresponding captions of cash, cash equivalents and restricted cash with maturities of three months or less. Short-term investments with a final maturity of one year or less from the balance sheet date are not included in the reconciliation of GAAP cash flows. In addition, there are classification differences within the presentation of the cash flow categories between GAAP and NAIC SAP. The statutory basis statements of cash flows are prepared in accordance with the NAIC Annual Statement Instructions.

#### **Other Assets**

- **Investment Income Due and Accrued** — Investment income earned and due as of the reporting date, in addition to investment income earned but not paid or collected until subsequent periods, is reported as investment income due and accrued in the statutory basis statements of admitted assets, liabilities, and capital and surplus. The Company evaluates the collectability of the amounts due and accrued and amounts determined to be uncollectible are written off in the period in which the determination is made. In addition, the remaining balance is assessed for admissibility and any balance greater than 90 days past due is considered a nonadmitted asset.
- **Amounts Receivable Relating to Uninsured Plans** — Receivables for amounts held under uninsured plans represent amounts due from employer groups participating in the Medicare Part D program for service fees as well as reimbursement for drug spend due back to the affiliated PBM. Amounts receivable relating to uninsured plans also includes pharmacy rebates for the Medicare Part D program that are due from the Company's affiliated PBM, who collects the rebates directly from the pharmaceutical manufacturers and subsequently remits the amounts to the Company. The Company in turn passes the rebates through to the participating employer groups. A corresponding payable in the same amount for pharmaceutical rebates due to the participating employer groups from the Company is included in liability for amounts held under uninsured plans.
- **Current Federal Income Tax Recoverable** — The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses, the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal income tax return of UnitedHealth Group. A current federal income tax recoverable is recognized when the Company's allocated intercompany estimated payments are more than its actual calculated obligation based on the Company's stand-alone federal income tax return (see Note 9).
- **Net Deferred Tax Asset** — The NAIC SAP provides for an amount to be recorded for deferred taxes on temporary differences between the financial reporting and tax bases of assets, subject to a valuation allowance and admissibility limitations on deferred tax assets (see Note 9). In addition, under the NAIC SAP, the change in deferred tax assets is recorded directly to unassigned surplus in the statutory basis financial statements, whereas under GAAP, the change in deferred tax assets is recorded as a component of the income tax provision within the income statement and is based on the ultimate recoverability of the deferred tax assets. Based on the admissibility criteria under the NAIC SAP, any deferred tax assets determined to be nonadmitted are charged directly to surplus and excluded from the statutory basis financial statements, whereas under GAAP, such assets are included in the balance sheet.
- **State Income Tax Recoverable** — State income tax recoverable represents amounts that are expected to be recovered as a result of an overpayment of estimated tax carrybacks, or items for which the reporting entity has authority to recover under a state regulation or statute. The Company reports such a recoverable as aggregate write-ins for other than invested assets in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

## **LIABILITIES**

- **Interest Maintenance Reserve** — The Company maintains an IMR. The IMR is designed to defer recognition of realized capital gains and losses, due to interest rate changes on fixed-income investments, and to amortize those gains and losses into future investment income over the remaining life of the investments sold. To the extent the deferral of capital losses results in a net asset, such amount will be nonadmitted and excluded from the statutory basis statements of admitted assets, liabilities, and capital and surplus. Due to the nature of the Company's invested assets holdings, no asset valuation reserve is required to be established.

The IMR is determined based on a formula prescribed by the NAIC whereby the Company defers the portion of realized capital gains and losses on sales of fixed-income investments, principally bonds, attributable to changes in the general level of interest rates and amortizes these deferrals over the remaining period to maturity based on groupings of individual securities sold in five year bands, rather than recognize the realized gains and losses currently. Under GAAP, realized capital gains and losses are reported in the statements of operations on a pre-tax basis in the period that the asset giving rise to the gain or loss is sold and calculation of allowances are provided where there has been a decline in value deemed other-than-temporary, in which case, the provision for such decline is charged to earnings.

- **General Expenses Due or Accrued** — General expenses that are due as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general expenses due or accrued in the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- **Payable to Parent, Subsidiaries, and Affiliates, Net** — In the normal course of business, the Company has various transactions with related parties (see Note 10). The Company reports any unsettled amounts owed as amounts payable to parent, subsidiaries, and affiliates, net, in the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- **Liability for Amounts Held Under Uninsured Plans** — Liability for amounts held under uninsured plans consists of amounts due to Medicare Part D employer groups for pharmacy rebates which will be paid once received by the Company from the affiliated PBM. A corresponding receivable in the same amount for pharmaceutical rebates due to the Company from the affiliated PBM is included in amounts receivable relating to uninsured plans. In addition, liability for amounts held under uninsured plans includes credits received from CMS which in turn will be passed through to the participating employer groups and amounts due back to the self-insured employer groups for pharmaceutical rebates that have been credited to the self-insured employer groups accounts that are in excess of amounts due for the facilitation services and drug spend reimbursement and for overpayments related to terminated groups.

## **CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS**

- **Nonadmitted Assets** — Certain assets, including certain deferred tax assets and certain amounts receivable relating to uninsured plans, are considered nonadmitted assets under the NAIC SAP and are excluded from the statutory basis statements of admitted assets, liabilities, and capital and surplus and charged directly to unassigned surplus. Under GAAP, such assets are included in the balance sheet.
- **Restricted Cash Reserves** — The Company held regulatory deposits in the amount of \$3,845,145 and \$3,583,671 as of December 31, 2019 and 2018, respectively, in compliance with the various states requirements for qualification purposes as a domestic and foreign insurer. These restricted cash reserves consist principally of money market funds and government obligations and are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds and cash equivalents in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Interest earned on these deposits accrues to the Company.
- **Minimum Capital and Surplus** — Under the laws of the State of Ohio, the Company's domiciliary state, the Department requires the Company to maintain a minimum capital and surplus equal to \$2,500,00.

Risk-based capital ("RBC") is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. The Department requires the Company to maintain minimum capital and surplus equal to the greater of the state statute as outlined above, or the company action level as calculated by the RBC formula, or the level needed to avoid action pursuant to the trend test in the RBC formula. The Company is in compliance with the required amount.

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

The Company has \$66,186,808 and \$68,741,250 in total statutory basis capital and surplus as of December 31, 2019 and 2018, respectively, which is in compliance with the required amounts where it is licensed to do business.

### **STATEMENTS OF OPERATIONS**

- **Net Investment Income** — Net investment income includes investment income collected during the period, as well as the change in investment income due and accrued on the Company's holdings. Amortization of premium or discount on bonds and certain external investment management costs are also included in net investment income (see Note 7).
- **Service Fee Revenue** — Service fee revenue consists primarily of revenue received for the facilitation services performed on behalf of the employer groups that self-insure the PDP Medicare Part D benefits of their retiree population. Under these contracts, the Company recognizes revenue in the period in which the related services are performed. For employer groups electing to self-invoice, the Company estimates service fee revenue in the period the service relates and adjusts this estimate in the following period when the invoice and payment is received. The Company does not make claims payments on behalf of the employer groups; that is the sole responsibility of the PBM. The employer groups retain the risk of financing drug spend for their retirees, and the Company administers, on a pass-through basis, the payment of customer funds to the affiliated PBM.
- **General Insurance Expenses** — Pursuant to the terms of the Management Services Agreement (the "Agreement") (see Note 10), the Company pays a management fee to an affiliate in exchange for administrative and management services. Costs for items not included within the scope of the Agreement are directly expensed as incurred.
- **Insurance Taxes, Licenses and Fees, Excluding Federal Income Taxes ("Insurance TL&F")** — Insurance TL&F represents insurance assessments, state taxes on premium and income and state insurance department licenses and fees. Insurance TL&F is recognized when incurred.
- **Federal Income Taxes Incurred** — The provision for federal income taxes incurred is calculated based on applying the statutory federal income tax rate of 21% to net income before federal income taxes subject to certain adjustments (see Note 9).

### **REINSURANCE**

- **Reinsurance Ceded** — All of the Company's direct life and annuity business has been ceded to Protective. Accordingly, for the years ended December 31, 2019 and 2018, the Company had no amounts for net premiums and annuity considerations for life and accident and health contracts, no net benefits incurred, and no net aggregate reserves and contract claims for life, accident and health contracts in the statutory basis financial statements.

### **OTHER**

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

The Company has four self-insured employer groups that accounted for 87.9% and 93.3% of total service fee revenue for the years ended December 31, 2019 and 2018, respectively. The Company has two self-insured employer groups that accounted for 84.6% and 86.5% of amounts due related to the facilitation of the Medicare Part D benefits, which is a component of amounts receivable relating to uninsured plans as of December 31, 2019 and 2018, respectively.

**Recently Issued Accounting Standards** — The Company reviewed all recently issued guidance in 2019 and 2018 that has been adopted for 2019 or subsequent years' implementation and has determined that none of the items would have a significant impact to the statutory basis financial statements.

#### **D. Going Concern**

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

## 2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

No changes in accounting principles or correction of errors have been recorded during the year ended December 31, 2019.

During 2018, the Company determined that it had understated service fee revenue and amounts receivable relating to uninsured plans by \$1,136,200 for the year ended December 31, 2017. In addition, current federal income tax recoverable and federal income taxes incurred were understated by \$393,969. Lastly, state taxes receivable and insurance taxes, licenses and fees, excluding federal income taxes were understated by \$10,575. Had the above adjustment been recorded in the 2017 statutory basis financial statements, the increase to net income and total assets would have been of \$731,656. Due to the significance, the cumulative effect of this prior year error was corrected by the Company in accordance with the Statement of Statutory Accounting Principles ("SSAP") No. 3, *Accounting Changes and Corrections of Errors*, and is reflected in the statutory basis statements of changes in capital and surplus as correction of prior year error for the period ended December 31, 2018.

## 3. BUSINESS COMBINATIONS AND GOODWILL

**A–D.** The Company was not party to a business combination during the years ended December 31, 2019 and 2018, and does not carry goodwill in its statutory basis statements of admitted assets, liabilities, and capital and surplus.

## 4. DISCONTINUED OPERATIONS

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

**(1–4)** The Company did not have any discontinued operations disposed of or classified as held for sale during 2019 and 2018.

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

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

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

## 5. INVESTMENTS AND OTHER INVESTED ASSETS

As of December 31, 2019 and 2018, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of \$377,938,757 and \$263,930,682, respectively, are as follows:

	2019				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$ 2,604,977	\$ 10,049	\$ -	\$ 597	\$ 2,614,429
Total bonds	\$ 2,604,977	\$ 10,049	\$ -	\$ 597	\$ 2,614,429

	2019				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
Less than one year	\$ 126,647	\$ -	\$ -	\$ 597	\$ 126,050
One to five years	\$ 2,478,330	\$ 10,049	\$ -	\$ -	\$ 2,488,379
Total bonds	\$ 2,604,977	\$ 10,049	\$ -	\$ 597	\$ 2,614,429

	2018				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$ 2,343,613	\$ 98	\$ -	\$ 18,766	\$ 2,324,945
Total bonds	\$ 2,343,613	\$ 98	\$ -	\$ 18,766	\$ 2,324,945

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2019 and 2018:

	2019					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ -	\$ -	\$ 126,050	\$ (597)	\$ 126,050	\$ (597)
Total bonds	\$ -	\$ -	\$ 126,050	\$ (597)	\$ 126,050	\$ (597)
	2018					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ -	\$ -	\$ 2,305,204	\$ 18,766	\$ 2,305,204	\$ 18,766
Total bonds	\$ -	\$ -	\$ 2,305,204	\$ 18,766	\$ 2,305,204	\$ 18,766

The unrecognized unrealized losses on investments in U.S. government and agency securities at December 31, 2019 and 2018, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. As a result of this review, no OTTIs were recorded by the Company as of December 31, 2019 and 2018.

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

**D. Loan- Backed Securities**

**(1-5)** The Company has no loan-backed securities.

**E. Dollar Repurchase Agreements and/or Securities Lending Transactions** — Not applicable.

**F. Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.

**G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.

**H. Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.

**I. Reverse Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.

**J. Real Estate** — Not applicable.

**K. Low-Income Housing Tax Credits (“LIHTC”)** — Not applicable.

**L. Restricted Assets —**

**(1)** Restricted assets, including pledged securities as of December 31, 2019 and 2018, are presented below:

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted										Percentage	
	Current Year		Total Separate S/A Assets	Supporting G/A Activity (b)	Total (1 Plus 3)	Total from Prior Year	Increase/ (Decrease) (5 Minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)	
	1	2										
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0 %	0 %	
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	-	0 %	0 %	
c. Subject to repurchase agreements	-	-	-	-	-	-	-	-	-	0 %	0 %	
d. Subject to reverse repurchase agreement	-	-	-	-	-	-	-	-	-	0 %	0 %	
e. Subject to dollar repurchase agreement	-	-	-	-	-	-	-	-	-	0 %	0 %	
f. Subject to dollar reverse repurchase agreement	-	-	-	-	-	-	-	-	-	0 %	0 %	
g. Placed under option contracts	-	-	-	-	-	-	-	-	-	0 %	0 %	
h. Letter stock or securities restricted as to sale—excluding FHLB capital stock	-	-	-	-	-	-	-	-	-	0 %	0 %	
i. FHLB capital stock	-	-	-	-	-	-	-	-	-	0 %	0 %	
j. On deposit with states	3,845,145	-	-	-	3,845,145	3,583,671	261,474	-	3,845,145	1 %	1 %	
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	-	0 %	0 %	
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	-	0 %	0 %	
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	-	0 %	0 %	
n. Other restricted assets	-	-	-	-	-	-	-	-	-	0 %	0 %	
o. Total restricted assets	<u>\$ 3,845,145</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 3,845,145</u>	<u>\$ 3,583,671</u>	<u>\$ 261,474</u>	<u>\$ -</u>	<u>\$ 3,845,145</u>	<u>1 %</u>	<u>1 %</u>	

(a) Subset of column 1  
 (b) Subset of column 3  
 (c) Column 5 divided by Asset Page, Column 1, Line 28  
 (d) Column 9 divided by Asset Page, Column 3, Line 28

**(2-4)** The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2019 or 2018.

**M. Working Capital Finance Investments — Not applicable.**

**N. Offsetting and Netting of Assets and Liabilities**

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

**O. 5GI Securities**

The Company does not have any investments with an NAIC designation of 5GI as of December 31, 2019 and 2018.

**P. Short Sales — Not applicable.**

**Q. Prepayment Penalty and Acceleration Fees**

The Company does not have any prepayment penalty and acceleration fees as of December 31, 2019.

**6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES**

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

**7. INVESTMENT INCOME**

**A.** The Company excludes all investment income due and accrued amounts that are over 90 days past due from the statutory basis statements of admitted assets, liabilities, and capital and surplus.

**B.** There were no investment income amounts excluded from the statutory basis financial statements.

**8. DERIVATIVE INSTRUMENTS**

**A-B.** The Company has no derivative instruments.

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**9. INCOME TAXES**

**A. Deferred Tax Asset/Liability**

**(1)** The components of the net deferred tax asset at December 31, 2019 and 2018, are as follows:

	2019			2018			Change		
	1 Ordinary	2 Capital	3 Col 1+2 Total	4 Ordinary	5 Capital	6 Col 4+5 Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 Col 7+8 Total
(a) Gross deferred tax assets	\$ 534,814	\$ -	\$ 534,814	\$ 979,704	\$ 12	\$ 979,716	\$ (444,890)	\$ (12)	\$ (444,902)
(b) Statutory valuation allowance adjustments	-	-	-	-	12	12	-	(12)	(12)
(c) Adjusted gross deferred tax assets (1a - 1b)	534,814	-	534,814	979,704	-	979,704	(444,890)	-	(444,890)
(d) Deferred tax assets nonadmitted	288,979	-	288,979	106,040	-	106,040	182,939	-	182,939
(e) Subtotal net admitted deferred tax asset (1c - 1d)	245,835	-	245,835	873,664	-	873,664	(627,829)	-	(627,829)
(f) Deferred tax liabilities	-	54	54	16	-	16	(16)	54	38
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	<u>\$ 245,835</u>	<u>\$ (54)</u>	<u>\$ 245,781</u>	<u>\$ 873,648</u>	<u>\$ -</u>	<u>\$ 873,648</u>	<u>\$ (627,813)</u>	<u>\$ (54)</u>	<u>\$ (627,867)</u>

**(2)** The components of the adjusted gross deferred tax assets admissibility calculation under SSAP No. 101, *Income Taxes—A Replacement of SSAP No. 10R and SSAP No. 10*, are as follows:

Admission Calculation Components SSAP No. 101	2019			2018			Change		
	1 Ordinary	2 Capital	3 (Col 1 + 2) Total	4 Ordinary	5 Capital	6 (Col 4 + 5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7 + 8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 176,414	\$ -	\$ 176,414	\$ 873,648	\$ -	\$ 873,648	\$ (697,234)	\$ -	\$ (697,234)
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	69,368	-	69,368	-	-	-	69,368	-	69,368
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	69,368	-	69,368	-	-	-	69,368	-	69,368
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	9,891,154	XXX	XXX	10,180,140	XXX	XXX	(288,986)
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	53	-	53	16	-	16	37	-	37
(d) Deferred tax assets admitted as the result of application of SSAP No. 101	<u>\$ 245,835</u>	<u>\$ -</u>	<u>\$ 245,835</u>	<u>\$ 873,664</u>	<u>\$ -</u>	<u>\$ 873,664</u>	<u>\$ (627,829)</u>	<u>\$ -</u>	<u>\$ (627,829)</u>
Total (2(a) + 2(b) + 2(c))	<u>\$ 245,835</u>	<u>\$ -</u>	<u>\$ 245,835</u>	<u>\$ 873,664</u>	<u>\$ -</u>	<u>\$ 873,664</u>	<u>\$ (627,829)</u>	<u>\$ -</u>	<u>\$ (627,829)</u>

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

	2019	2018
(a) Ratio percentage used to determine recovery period and threshold limitation amount	9,247 %	12,999 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	\$ 65,941,027	\$ 67,867,602

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**(4)** The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2019 and 2018, is presented below:

Impact of Tax-Planning Strategies	2019		2018		Change	
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col 1 - 3) Ordinary	6 (Col 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage.						
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 534,814	\$ -	\$ 979,704	\$ -	\$ (444,890)	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 245,835	\$ -	\$ 873,664	\$ -	\$ (627,829)	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
(b) Does the Company's tax-planning strategies include the use of reinsurance?			Yes		No	X

**B. Unrecognized Deferred Tax Liabilities**

**(1-4)** There are no unrecognized deferred tax liabilities for the years ended December 31, 2019 and 2018.

**C. Significant Components of Income Taxes**

**(1)** The current federal income taxes incurred for the years ended December 31, 2019 and 2018 are as follows:

	1 2019	2 2018	3 (Col 1 - 2) Change
1. Current income tax			
(a) Federal	\$ 8,224,729	\$ 9,250,315	\$ (1,025,586)
(b) Foreign	<u>-</u>	<u>-</u>	<u>-</u>
(c) Subtotal	8,224,729	9,250,315	(1,025,586)
(d) Federal income tax on net capital gains	-	-	-
(e) Utilization of capital loss carryforwards	-	-	-
(f) Other	<u>-</u>	<u>-</u>	<u>-</u>
(g) Total federal and foreign income taxes incurred	<u>\$ 8,224,729</u>	<u>\$ 9,250,315</u>	<u>\$ (1,025,586)</u>

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**(2-4)** The tax effect of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2019 and 2018, are as follows:

	1 2019	2 2018	3 (Col 1 - 2) Change
<b>2</b> Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ -	\$ -	\$ -
(2) Unearned premium reserve	- -	- -	- -
(3) Policyholder reserves	- -	- -	- -
(4) Investments	- -	- -	- -
(5) Deferred acquisition costs	- -	- -	- -
(6) Policyholder dividends accrual	- -	- -	- -
(7) Fixed assets	- -	- -	- -
(8) Compensation and benefits accrual	- -	- -	- -
(9) Pension accrual	- -	- -	- -
(10) Receivables—nonadmitted	37,678	413,200	(375,522)
(11) Net operating loss carryforward	- -	- -	- -
(12) Tax credit carryforward	- -	- -	- -
(13) Other (including items <5% of total ordinary tax assets)	<u>497,136</u>	<u>566,504</u>	<u>(69,368)</u>
(99) Subtotal	534,814	979,704	(444,890)
(b) Statutory valuation allowance adjustment	- -	- -	- -
(c) Nonadmitted	<u>288,979</u>	<u>106,040</u>	<u>182,939</u>
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	<u>245,835</u>	<u>873,664</u>	<u>(627,829)</u>
(e) Capital:			
(1) Investments	- -	- -	- -
(2) Net capital loss carryforward	- -	- -	- -
(3) Real estate	- -	- -	- -
(4) Other (including items <5% of total capital tax assets)	<u>- -</u>	<u>12</u>	<u>(12)</u>
(99) Subtotal	- -	12	(12)
(f) Statutory valuation allowance adjustment	- -	12	(12)
(g) Nonadmitted	<u>- -</u>	<u>- -</u>	<u>- -</u>
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	<u>- -</u>	<u>- -</u>	<u>- -</u>
(i) Admitted deferred tax assets (2d + 2h)	<u>245,835</u>	<u>873,664</u>	<u>(627,829)</u>
<b>3</b> Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	- -	16	(16)
(2) Fixed assets	- -	- -	- -
(3) Deferred and uncollected premium	- -	- -	- -
(4) Policyholder reserves	- -	- -	- -
(5) Other (including items <5% of total ordinary tax liabilities)	<u>- -</u>	<u>- -</u>	<u>- -</u>
(99) Subtotal	<u>- -</u>	<u>16</u>	<u>(16)</u>
(b) Capital:			
(1) Investments	42	- -	42
(2) Real estate	- -	- -	- -
(3) Other (including items <5% of total capital tax liabilities)	<u>12</u>	<u>- -</u>	<u>12</u>
(99) Subtotal	<u>54</u>	<u>- -</u>	<u>54</u>
(c) Deferred tax liabilities (3a99 + 3b99)	<u>54</u>	<u>16</u>	<u>38</u>
<b>4</b> Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 245,781</u>	<u>\$ 873,648</u>	<u>\$ (627,867)</u>

The other ordinary deferred tax asset of \$497,136 and \$566,504 for 2019 and 2018, respectively, consists of intangibles. The other capital deferred tax liability of \$12 for 2019 consists of unrealized gains. The other capital deferred tax asset of \$12 for 2018 consists of unrealized losses.

The Company assessed the potential realization of the gross deferred tax assets and established a valuation allowance of \$0 and \$12 to reduce the gross deferred tax assets to \$534,814 and \$979,704 as of December 31, 2019 and 2018, respectively, which represents the amount of the asset estimated to be recoverable via carryback of losses and reduction of future taxes. The change in the valuation allowance is attributable to the change in timing of deductibility of expenses, the change in federal income tax rates, and/or expectations for future taxable income.

**D.** The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income before federal income taxes incurred. A summarization of the significant items causing this difference as of December 31, 2019 and 2018 is as follows:

	2019		2018	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	\$ 8,297,067	21%	\$ 9,341,516	21%
Other current year items	(2,798)	0%	(4,696)	0%
Tax effect of nonadmitted assets	375,522	1%	(341,702)	(1)%
Prior year true-up	(146)	0%	(17,120)	0%
Change in statutory valuation allowance	(12)	0%	—	0%
 Total statutory income taxes	 \$ 8,669,633	 22%	 \$ 8,977,998	 20%
 Federal income taxes incurred	 \$ 8,224,729	 21%	 \$ 9,250,315	 21%
Change in net deferred income tax	444,904	1%	(272,317)	(1)%
 Total statutory income taxes	 \$ 8,669,633	 22%	 \$ 8,977,998	 20%

**E.** At December 31, 2019, the Company had no net operating loss carryforwards.

Current federal income taxes recoverable of \$6,074,125 and \$4,513,564 as of December 31, 2019 and 2018, respectively, are included in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Federal income taxes paid, net of refunds were \$9,785,290 and \$13,262,635 in 2019 and 2018, respectively.

Federal income taxes incurred of \$8,224,875 and \$9,267,290 for 2019 and 2018, respectively, are available for recoupment in the event of future net losses.

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

**F.** Prior to July 23, 2015, the Company filed its tax return independently of UnitedHealth Group. Upon acquisition of the Company in 2015, the Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The entities included within the consolidated return are included in NAIC Statutory Statement Schedule Y—Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses, the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal income tax return of UnitedHealth Group. UnitedHealth Group currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The IRS has completed exams on UnitedHealth Group's consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group's 2017, 2018 and 2019 tax returns are under review by the IRS under its Compliance Assurance Program. With the exception of a few states, UnitedHealth Group is no longer subject to income tax examinations prior to the 2013 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2014 and forward. The Company does not believe any adjustments that may result from these examinations will be material to the Company.

**G. Tax Contingencies** — Not applicable.

**H. Repatriation Transition Tax** — Not applicable.

**I. Alternative Minimum Tax Credit** — Not applicable.

## 10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

### A–O. Material Related Party Transactions

Management believes that the Company's transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.

Effective January 1, 2019, the Company entered into a Management Services Agreement (the "Agreement") with United HealthCare Services, Inc. ("UHS"). This Agreement has been approved by the Department and will replace the previous agreement with OptumRx Holdings I, Inc. UHS will provide similar services to the Company under a revised fee structure that is changing from an allocation of the expenses to a percentage of revenue charge based on UHS' expenses for services or use of assets provided to the Company.

UHS provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for UHS to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, and treasury and investment functions. The amount charged to the Company for the management and operational services provided by UHS are calculated pursuant to the Agreement. In 2018, the Company utilized the services of affiliates for certain administrative functions through the agreement with OptumRx Holdings I, Inc. Management fees of \$2,178,618 and \$1,311,943 in 2019 and 2018, respectively, are included in general insurance expenses in the statutory basis statements of operations.

Effective January 1, 2019, the Company entered into a revised Shared Services Agreement with OptumRx PBM of Illinois, Inc. to provide pharmacy benefit management services. This Agreement has been approved by the Department.

The Company has a Tax Sharing Agreement with UnitedHealth Group (see Note 9).

The Company paid dividends of \$35,000,000 and \$14,000,000 in 2019 and 2018, respectively, to its Parent (see Note 13).

At December 31, 2019 and 2018, the Company reported \$89,825,719 and \$164,340,080, respectively, as amounts due to parent, subsidiaries, and affiliates, net which are included in the statutory basis statements of admitted assets, liabilities, and capital and surplus. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.

The Company has not extended any guarantees or undertakings for the benefit of an affiliate or related party.

The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.

The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.

The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.

The Company does not have any investments in foreign insurance subsidiaries.

The Company does not hold any investments in a downstream noninsurance holding company.

The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.

The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.

## 11. DEBT

**A-B.** The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2019 and 2018.

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

**A-I.** The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, and compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of Optum Services, Inc., an affiliate, which is under common control with UHS and OptumRx Holdings I, Inc., which provides/provided services to the Company under the terms of the Agreement (see Note 10).

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

- (1-2) The Company has 4,000,000 shares authorized and 1,363,637 shares issued and outstanding of \$2 par value common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Parent.
- (3) Under the laws of the State of Ohio, all dividends and other distributions to shareholders must be reported to the Superintendent of the Department (the "Superintendent"). Extraordinary dividends or other extraordinary distributions must be approved by the Superintendent in advance. An extraordinary dividend or distribution includes any dividend distribution of cash or other property, whose fair market value, together with that of other dividends or distributions made within the preceding twelve months, exceeds the greater of ten percent of the insurer's surplus or the net income of the insurer for the twelve-month period. A statement of the effect of the proposed dividend on the surplus and the reasonableness of surplus in relation to the outstanding liabilities and financial needs is also required.
- (4) The Company paid an ordinary cash dividend of \$35,000,000 and \$14,000,000 on September 27, 2019 and September 26, 2018, respectively, to the Parent, which was approved by the Department and recorded as a reduction to unassigned surplus in the statutory basis statements of admitted assets, liabilities, and capital and surplus.
- (5) The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- (6) There are no restrictions placed on the Company's unassigned surplus.
- (7) The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- (8) The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- (9) The Company does not have any special surplus funds.
- (10) The portion of unassigned surplus, excluding net income and dividends, reduced (or represented) by each item below is as follows:

	2019	2018	Change
Unrealized capital gains on investments	\$ 165	\$ 110	\$ 55
Net deferred income taxes	534,760	979,688	(444,928)
Nonadmitted assets	<u>(468,398)</u>	<u>(2,073,659)</u>	<u>1,605,261</u>
 Total	 <u>\$ 66,527</u>	 <u>\$ (1,093,861)</u>	 <u>\$ 1,160,388</u>

- (11-13) The Company does not have any outstanding surplus notes and has never been a party to a quasi-reorganization.

### 14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

#### A. Contingent Commitments

The Company has no contingent commitments.

#### B. Assessments

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

#### C. Gain Contingencies

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

#### D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits — Not applicable.

#### E. Joint and Several Liabilities — Not applicable.

**F. All Other Contingencies**

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

The Affordable Care Act ("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, restrict premium growth rates for certain products and market segments, increase the Company's medical and administrative costs, expose the Company to an increased risk of liability (including increasing the Company's liability in federal and state courts for coverage determinations and contract interpretation), or put the Company at risk for loss of business. In addition, the Company's statutory basis results of operations, financial condition, and cash flows could be materially adversely affected by such changes. 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.

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

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

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

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

There are no assets that the Company considers to be impaired at December 31, 2019 and 2018.

**15. LEASES**

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

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

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

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

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

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

**A-B.** The Company has no operations from Administrative Services Only Contracts or Administrative Services Contracts in 2019 and 2018.

**C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract**

The Company offers to coordinate the Medicare Part D program benefits for employer groups on a self-insured basis. 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 \$286,983,569 and \$83,019,646 at December 31, 2019 and 2018, respectively, for the cost reimbursements under the Medicare Part D program for the catastrophic reinsurance, low-income subsidies, and Gap Discount that the Company has received that are due back to the self-insured employer groups.

The Company has also recorded a receivable and corresponding payable of \$28,480,867 and \$11,473,438 in amounts receivable relating to uninsured plans and liability for amounts held under insured plans in the statutory basis statements of admitted assets, liabilities, and capital and surplus as of December 31, 2019 and 2018, respectively for pharmacy rebates that the PBM has collected that are due back to the Company and ultimately due back to the self-insured employer groups.

The Company has also recorded a receivable of \$91,198,366 and \$73,027,653 from the self-insured employer groups for amounts due related to the facilitation of the Medicare Part D benefits and for the reimbursement of the drug spend due back to the PBM in amounts receivable relating to uninsured plans in the statutory basis statements of admitted assets, liabilities, and capital and surplus as of December 31, 2019 and 2018, respectively. In addition, the Company has recorded a payable of \$33,735,993 and \$27,129,355 for amounts due back to the self-insured groups for pharmaceutical rebates that have been credited to the self-insured employer groups accounts that are in excess of amounts due for the facilitation services and drug spend reimbursement and for overpayments related to terminated groups in liability for amounts held under insured plans in the statutory basis statements of admitted assets, liabilities, and capital and surplus as of December 31, 2019 and 2018, respectively.

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

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2019 and 2018.

**20. FAIR VALUE MEASUREMENT**

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

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

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

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

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

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

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

**A. Fair Value****(1) Fair Value Measurements at Reporting Date**

The following table presents information about the Company’s financial assets that are measured and reported at fair value at December 31, 2019 and December 31, 2018 in the statutory basis statements of admitted assets, liabilities, and capital and surplus according to the valuation techniques the Company used to determine their fair values:

Description for Each Class of Asset or Liability	December 31, 2019				
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total perpetual preferred stocks	_____	_____	_____	_____	_____
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total bonds	_____	_____	_____	_____	_____
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total common stock	_____	_____	_____	_____	_____
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	_____	_____	_____	_____	_____
Total derivatives	_____	_____	_____	_____	_____
Money-market funds	1,240,168	-	-	-	1,240,168
Separate account assets	_____	_____	_____	_____	_____
Total assets at fair value/NAV	<u>\$ 1,240,168</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 1,240,168</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	_____	_____	_____	_____	_____

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Description for Each Class of Asset or Liability	December 31, 2018				
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total perpetual preferred stocks	_____	_____	_____	_____	_____
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total bonds	_____	_____	_____	_____	_____
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	_____	_____	_____	_____	_____
Total common stock	_____	_____	_____	_____	_____
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	_____	_____	_____	_____	_____
Total derivatives	-	-	-	-	-
Money-market funds	1,240,058	-	-	-	1,240,058
Separate account assets	_____	_____	_____	_____	_____
Total assets at fair value/NAV	<u>\$ 1,240,058</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 1,240,058</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

There were no transfers between Levels 1 and 2 during the years ended December 31, 2019 and 2018.

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.
- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2019 or 2018.
- (4) The Company has no investments reported with a fair value hierarchy of Level 2 or Level 3 and therefore has no valuation technique to disclose.
- (5) The Company has no derivative assets and liabilities to disclose.

**B. Fair Value Combination** — Not applicable.

**C. Aggregate Fair Value Hierarchy**

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

Type of Financial Instrument	December 31, 2019					Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)		
U.S. government and agency securities	\$ 2,614,429	\$ 2,604,977	\$ 2,614,429	\$ -	\$ -	\$ -	\$ -
Cash equivalents	<u>1,240,168</u>	<u>1,240,168</u>	<u>1,240,168</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total bonds and cash equivalents	<u>\$ 3,854,597</u>	<u>\$ 3,845,145</u>	<u>\$ 3,854,597</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

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 and agency securities	\$ 2,324,945	\$ 2,343,613	\$ 2,324,945	\$ -	\$ -	\$ -	\$ -
Cash equivalents	<u>1,240,058</u>	<u>1,240,058</u>	<u>1,240,058</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total bonds and cash equivalents	<u>\$ 3,565,003</u>	<u>\$ 3,583,671</u>	<u>\$ 3,565,003</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

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

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

**21. OTHER ITEMS**

**A. Unusual or Infrequent Items**

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2019 and 2018.

**B. Troubled Debt Restructuring: Debtors**

The Company has no troubled debt restructurings as of December 31, 2019 and 2018.

**C. Other Disclosures**

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

**D. Business Interruption Insurance Recoveries**

The Company has not received any business interruption insurance recoveries during 2019 and 2018.

**E. State Transferable and Non-transferable Tax Credits**

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

**F. Sub-Prime Mortgage-Related Risk Exposure**

**(1-4)** The Company does not have any sub-prime mortgage-related risk exposure as of December 31, 2019 and 2018.

**G. Retained Assets**

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

**H. Insurance-Linked Securities Contracts**

As of December 31, 2019, the Company is not aware of any possible proceeds of insurance-linked securities.

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

**22. EVENTS SUBSEQUENT**

Subsequent events have been evaluated through February 28, 2020, which is the date these statutory basis financial statements were available for issuance.

**TYPE I — Recognized Subsequent Events**

Any material Type I events subsequent to December 31, 2019, have been recognized in the statutory basis financial statements and corresponding disclosures.

**TYPE II — Non-Recognized Subsequent Events**

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

**23. REINSURANCE**

The Company, through a 100% coinsurance agreement, reinsures all of its direct life and annuity business with Protective. The Company has no net premiums and annuity considerations for life and accident and health contracts, no net benefits incurred, no net policyholder liabilities, and no net aggregate reserves and contract claims for life and accident and health contracts in the statutory basis financial statements as of December 31, 2019 and 2018.

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The effect of the external reinsurance agreement outlined above on premiums for life and accident and health contracts—net and benefits under life and accident and health insurance contracts is presented below:

	2019	2018
Premiums and annuity considerations for life and accident and health contracts:		
Direct	\$ 668,346	\$ 701,948
Ceded: Nonaffiliate	<u>(668,346)</u>	<u>(701,948)</u>
Premiums for life and accident and health contracts - net	<u>\$ -</u>	<u>\$ -</u>
Benefits under life and accident and health insurance contracts, annuity contracts, and deposit type contracts		
Direct	\$ 2,659,366	\$ 1,018,929
Ceded: Nonaffiliate	<u>(2,659,366)</u>	<u>(1,018,929)</u>
Benefits under life and accident and health insurance contracts, annuity contracts, and deposit type contracts - net	<u>\$ -</u>	<u>\$ -</u>

Due to the 100% coinsurance agreement with Protective, the Company does not recognize any reinsurance recoverables. In addition, liabilities associated with aggregate reserves for life and accident and health contracts (includes annuity contracts) of \$16,043,576 and \$17,061,557, liability for deposit-type contracts of \$160,760 and \$206,464, and liabilities for contracts claims of \$137,320 and \$47,273 at December 31, 2019 and 2018, respectively, have been 100% ceded to Protective in accordance with the agreement. Accordingly, the Company reports no benefit expenses and liabilities for this activity in the statutory basis statements of operations and statutory basis statements of admitted assets, liabilities, and capital and surplus, respectively.

**A. Ceded Reinsurance Report**

**Section 1 — General Interrogatories**

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

Yes ( )      No (X)

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

Yes ( )      No (X)

**Section 2 — Ceded Reinsurance Report—Part A**

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

Yes ( )      No (X)

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

Yes ( )      No (X)

**Section 3 — Ceded Reinsurance Report—Part B**

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

The Company estimates there should be no aggregate reduction in surplus for termination of all reinsurance agreements as of December 31, 2019.

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

Yes ( )      No (X)

**B. Uncollectible Reinsurance** — During 2019 and 2018, there were no uncollectible reinsurance recoverables.

**C. Commutation of Ceded Reinsurance** — There was no commutation of reinsurance in 2019 or 2018.

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

**E-G. Affiliated Captive Reinsurers** — Not applicable.

**24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION**

**A-C.** The Company does not have any retrospectively rated contracts or contracts subject to redetermination as of December 31, 2019 or 2018.

**D.** The Company does not have any business subject to specific minimum loss ratio requirements as of December 31, 2019 and 2018.

**E. Risk-Sharing Provisions of the Affordable Care Act**

**(1-5)** The Company did not write accident and health premiums in 2019 and 2018 subject to the risk-sharing provisions of the ACA.

**25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES**

**A-B.** The Company has no net incurred claims or claims adjustment expenses as all claims and administrative activities are the responsibility of Protective pursuant to the 100% coinsurance agreement.

**26. INTERCOMPANY POOLING ARRANGEMENTS**

**A-G.** The Company did not have any intercompany pooling arrangements in 2019 or 2018.

**27. STRUCTURED SETTLEMENTS**

**A-B.** The Company did not have structured settlements in 2019 or 2018.

**28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE**

**A.** The Company does not have any pharmacy rebates receivable.

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

**29. PARTICIPATING POLICIES**

The Company did not have any participating contracts in 2019 or 2018.

**30. PREMIUM DEFICIENCY RESERVES**

The Company has not recorded any PDR as of December 31, 2019 or 2018. The analysis of PDR was completed as of December 31, 2019 and 2018. If needed, the Company would consider anticipated investment income when calculating the PDR.

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The following table summarizes the Company's PDR as of December 31, 2019 and 2018:

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

**31. RESERVES FOR LIFE CONTRACTS AND ANNUITY CONTRACTS**

The Company has no reserves for life contracts and annuity contracts as all activity and calculation of amounts are the responsibility of Protective pursuant to the 100% coinsurance agreement (see Note 23).

- (1) The Company waives deduction of deferred fractional premiums upon death of an insured and returns any portion of the final premium beyond the date of death. Reserves for these benefits are included in Exhibit 5, Life Insurance. Reserve for surrender values in excess of reserves, if any, as legally computed are reported in Exhibit 5, Life Reserves.
- (2) Extra premiums are charged according to underwriting classifications. For substandard policies, reserves are calculated by computing the regular reserve for the plan and adding one half of the extra premium charge for the year to that reserve.
- (3) The Company had \$0 of insurance in-force at December 31, 2019, for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio. Reserves to cover the above insurance totaled the gross amount of \$0 at December 31, 2019.
- (4) Tabular Interest has been determined by formulas as prescribed by the NAIC.

The Tabular Less Actual Reserve Released has been determined by formula as prescribed by the NAIC.

Tabular Cost has been determined by a formula as prescribed by the NAIC.

- (5) For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest, the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.
- (6) The Company made no other changes to the reserving methodology during 2019.

## 32. ANALYSIS OF ANNUITY ACTUARIAL RESERVES AND DEPOSIT-TYPE CONTRACT LIABILITIES BY WITHDRAWAL CHARACTERISTICS

At December 31, 2019, total annuity actuarial reserves, deposit-type contract funds, and other liabilities without life or disability contingencies by withdrawal characteristics are as follows:

### A. Individual Annuities:

	2019				
	<u>General Account</u>	<u>Separate Account with Guarantees</u>	<u>Separate Account Nonguaranteed</u>	<u>Total</u>	<u>% of Total</u>
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	- %
b. At book value less current surrender charge of 5% or more	-	-	-	-	- %
c. At fair value	-	-	-	-	- %
d. Total with market value adjustment or at fair value (total of a through c)	-	-	-	-	- %
e. At book value without adjustment (minimal or no charge or adjustment)	6,442,984	-	-	6,442,984	99 %
(2) Not subject to discretionary withdrawal	48,354	-	-	48,354	1 %
(3) Total (gross: direct + assumed)	6,491,338	-	-	6,491,338	
(4) Reinsurance ceded	6,491,338	-	-	6,491,338	100 %
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -	\$ -	
(6) Amount included in A(1)b above that will move to A(1)e in the year after the statement date:	\$ -	\$ -	\$ -	\$ -	

### B. Group Annuities:

	2019				
	<u>General Account</u>	<u>Separate Account with Guarantees</u>	<u>Separate Account Nonguaranteed</u>	<u>Total</u>	<u>% of Total</u>
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	- %
b. At book value less current surrender charge of 5% or more	-	-	-	-	- %
c. At fair value	-	-	-	-	- %
d. Total with market value adjustment or at fair value (total of a through c)	-	-	-	-	- %
e. At book value without adjustment (minimal or no charge or adjustment)	-	-	-	-	- %
(2) Not subject to discretionary withdrawal	-	-	-	-	- %
(3) Total (gross: direct + assumed)	-	-	-	-	- %
(4) Reinsurance ceded	-	-	-	-	
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -	\$ -	
(6) Amount included in B(1)b above that will move to B(1)e in the year after the statement date:	\$ -	\$ -	\$ -	\$ -	

### C. Deposit-Type Contracts (no life contingencies):

	2019				
	<u>General Account</u>	<u>Separate Account with Guarantees</u>	<u>Separate Account Nonguaranteed</u>	<u>Total</u>	<u>% of Total</u>
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	- %
b. At book value less current surrender charge of 5% or more	-	-	-	-	- %
c. At fair value	-	-	-	-	- %
d. Total with market value adjustment or at fair value (total of a through c)	-	-	-	-	- %
e. At book value without adjustment (minimal or no charge or adjustment)	-	-	-	-	- %
(2) Not subject to discretionary withdrawal	160,760	-	-	160,760	100 %
(3) Total (gross: direct + assumed)	160,760	-	-	160,760	100 %
(4) Reinsurance ceded	160,760	-	-	160,760	
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -	\$ -	
(6) Amount included in C(1)b above that will move to C(1)e in the year after the statement date:	\$ -	\$ -	\$ -	\$ -	

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**D.** The Company coinsures 100% of its annuity actuarial reserves, deposit-type contract funds, and other liabilities to Protective. As a result, there are no amounts shown in the reconciliation of annuity reserves and deposit fund liabilities to Aggregate Reserves for Life Policies and Contracts Exhibit and Deposit Funds and Other Liabilities without Life or Disability Contingencies Exhibit, of the Life, Accident and Health Annual Statement and the corresponding lines in the Separate Accounts Statement as the activity is required to be reported on a net basis.

**2019**

Life Accident & Health Annual Statement						
(1) Exhibit 5, Annuities Section, Total (net)				\$	-	
(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)					-	
(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1					-	
(4) Subtotal					-	
Separate Accounts Annual Statement						
(5) Exhibit 3, Line 0299999, Column 2					-	
(6) Exhibit 3, Line 0399999, Column 2					-	
(7) Policyholder dividend and coupon accumulations					-	
(8) Policyholder premiums					-	
(9) Guaranteed interest contracts					-	
(10) Other contract deposit funds					-	
(11) Subtotal					-	
(12) Combined Total				\$	-	

**33. ANALYSIS OF LIFE ACTUARIAL RESERVES BY WITHDRAWAL CHARACTERISTICS**

**A-E.** At December 31, 2019, total life actuarial reserves by withdrawal characteristics are as follows:

	2019					
	General Account			Separate Account - Guaranteed and Nonguaranteed		
	Account Value	Cash Value	Reserve	Account Value	Cash Value	Reserve
A. Subject to discretionary withdrawal, surrender values, or policy loans:						
(1) Term Policies with Cash Value	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Universal Life	-	-	-	-	-	-
(3) Universal Life with Secondary Guarantees	-	-	-	-	-	-
(4) Indexed Universal Life	-	-	-	-	-	-
(5) Indexed Universal Life with Secondary Guarant	-	-	-	-	-	-
(6) Indexed Life	-	-	-	-	-	-
(7) Other Permanent Cash Value Life Insurance	-	-	-	-	-	-
(8) Variable Life	-	-	-	-	-	-
(9) Variable Universal Life	-	-	-	-	-	-
(10) Miscellaneous Reserves	-	-	-	-	-	-
B. Not subject to discretionary withdrawal or no cash values:						
(1) Term Policies without Cash Value	XXX	XXX	9,539,462	XXX	XXX	-
(2) Accidental Death Benefits	XXX	XXX	50	XXX	XXX	-
(3) Disability - Active Lives	XXX	XXX	66	XXX	XXX	-
(4) Disability - Disabled Lives	XXX	XXX	12,614	XXX	XXX	-
(5) Miscellaneous Reserves	XXX	XXX	-	XXX	XXX	-
C. Total (Gross: Direct + Assumed)	-	-	9,552,192	-	-	-
D. Reinsurance Ceded	-	-	9,552,192	-	-	-
E. Total (Net) (C) - (D)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

F. The Company coinsures 100% of its life reserves to Protective. As a result, there are no amounts shown in the reconciliation of total life actuarial reserves disclosed to Aggregate Reserves for Life Policies and Contracts Exhibit of the Life, Accident and Health Annual Statement and the corresponding lines in the Separate Accounts Statement as the activity is required to be reported on a net basis.

	2019	2018
Life & Accident & Health Annual Statement		
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ -	\$ -
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	- -	- -
(3) Exhibit 5, Disability - Active Lives Section, Total (net)	- -	- -
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)	- -	- -
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)	- -	- -
(6) Subtotal	- -	- -
Separate Accounts Annual Statement:		
(7) Exhibit 3, Line 0199999, Column 2	- -	- -
(8) Exhibit 3, Line 0499999, Column 2	- -	- -
(9) Exhibit 3, Line 0599999, Column 2	- -	- -
(10) Subtotal (Lines (7) through (9))	- -	- -
(11) Combined Total ((6) and (10))	<u>\$ -</u>	<u>\$ -</u>

**34. PREMIUM AND ANNUITY CONSIDERATIONS DEFERRED AND UNCOLLECTED**

The Company reports no premium and annuity considerations deferred and uncollected as the administration, billing and subsequent collections for all life, annuity, and accident and health contracts are the responsibility of Protective pursuant to the 100% coinsurance agreement.

**35. SEPARATE ACCOUNTS**

**A-C.** The Company does not have separate account business as of December 31, 2019 and 2018.

**36. LOSS/CLAIM ADJUSTMENT EXPENSES**

**A-B.** The Company has no claims adjustment expenses as all administrative activities are the responsibility of Protective pursuant to the 100% coinsurance agreement.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES  
 GENERAL**

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]						
1.2	If yes, complete Schedule Y, Parts 1, 1A and 2							
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]						
1.3	State Regulating? .....	Ohio						
1.4	Is the reporting entity publicly traded or a member of a publicly traded group? .....	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]						
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....	0000731766						
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
2.2	If yes, date of change: .....							
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made. ....	12/31/2016						
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....	12/31/2016						
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....	05/30/2018						
3.4	By what department or departments? .....							
	Ohio Department of Insurance .....							
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> ]						
3.6	Have all of the recommendations within the latest financial examination report been complied with? .....	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]						
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:							
	4.11 sales of new business? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
	4.12 renewals? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:							
	4.21 sales of new business? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
	4.22 renewals? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
	If yes, complete and file the merger history data file with the NAIC.							
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.							
<table border="1"> <tr> <td style="text-align: center;">1 Name of Entity</td> <td style="text-align: center;">2 NAIC Company Code</td> <td style="text-align: center;">3 State of Domicile</td> </tr> <tr> <td>.....</td> <td>.....</td> <td>.....</td> </tr> </table>			1 Name of Entity	2 NAIC Company Code	3 State of Domicile	.....	.....	.....
1 Name of Entity	2 NAIC Company Code	3 State of Domicile						
.....	.....	.....						
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
6.2	If yes, give full information: .....							
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]						
7.2	If yes,							
	7.21 State the percentage of foreign control; .....	0.0 %						
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).							
<table border="1"> <tr> <td style="text-align: center;">1 Nationality</td> <td style="text-align: center;">2 Type of Entity</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> </table>			1 Nationality	2 Type of Entity	.....	.....		
1 Nationality	2 Type of Entity							
.....	.....							

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.**  
**GENERAL INTERROGATORIES**

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 [ X ] No [ ]  
 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
Optum Bank, Inc. ....	Salt Lake City, Utah .....	NO.	NO.	YES.	NO.

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
 Baker Tilly Virchow Krause, LLP, Minneapolis, MN

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]  
 10.2 If the response to 10.1 is yes, provide information related to this exemption: ....  
 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]  
 10.4 If the response to 10.3 is yes, provide information related to this exemption: ....  
 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]  
 10.6 If the response to 10.5 is no or n/a, please explain: ....  
 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
 William C. Hines, Consulting Actuary, Milliman, Inc., 201 Edgewater Drive, Suite 289, Wakefield, MA 01880-6215 .....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]  
 12.11 Name of real estate holding company ....  
 12.12 Number of parcels involved ..... 0  
 12.13 Total book/adjusted carrying value ..... \$ .....

12.2 If, yes provide explanation: ....

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**  
 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]  
 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]  
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]  
 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]  
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
 c. Compliance with applicable governmental laws, rules and regulations;  
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
 e. Accountability for adherence to the code.  
 14.11 If the response to 14.1 is No, please explain: ....  
 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ X ] No [ ]  
 14.21 If the response to 14.2 is yes, provide information related to amendment(s).  
 Non-material updates to existing Code. ....  
 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]  
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s). ....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]

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

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

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]

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

20.11 To directors or other officers.....	\$ ..... 0
20.12 To stockholders not officers.....	\$ ..... 0
20.13 Trustees, supreme or grand (Fraternal Only).....	\$ ..... 0

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

20.21 To directors or other officers.....	\$ ..... 0
20.22 To stockholders not officers.....	\$ ..... 0
20.23 Trustees, supreme or grand (Fraternal Only).....	\$ ..... 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]

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

21.21 Rented from others.....	\$ ..... 0
21.22 Borrowed from others.....	\$ ..... 0
21.23 Leased from others .....	\$ ..... 0
21.24 Other .....	\$ ..... 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ .....	0
22.22 Amount paid as expenses .....	\$ ..... 0
22.23 Other amounts paid .....	\$ ..... 0

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

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

**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [ X ] No [ ]

24.02 If no, give full and complete information relating thereto

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)  
Not Applicable.

24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? ..... Yes [ ] No [ ] N/A [ X ]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. .... \$ ..... 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs. .... \$ ..... 0

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

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

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ ..... 0
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ ..... 0
24.103 Total payable for securities lending reported on the liability page. ....	\$ ..... 0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). ....  Yes [ X ]  No [ ]

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

25.21 Subject to repurchase agreements .....	\$ ..... 0
25.22 Subject to reverse repurchase agreements .....	\$ ..... 0
25.23 Subject to dollar repurchase agreements .....	\$ ..... 0
25.24 Subject to reverse dollar repurchase agreements .....	\$ ..... 0
25.25 Placed under option agreements .....	\$ ..... 0
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ ..... 0
25.27 FHLB Capital Stock .....	\$ ..... 0
25.28 On deposit with states .....	\$ ..... 3,845,145
25.29 On deposit with other regulatory bodies .....	\$ ..... 0
25.30 Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ ..... 0
25.31 Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ ..... 0
25.32 Other .....	\$ ..... 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....

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

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

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

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

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108 .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ ]
26.42 Permitted accounting practice .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ ]
26.43 Other accounting guidance .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ ]

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: .....  Yes [ ]  No [ ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

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

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

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

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

1 Name of Custodian(s)	2 Custodian's Address
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... Yes [ ] No [ X ]

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

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

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. 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
Internally Managed .....	I.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.06 For those firms or individuals listed in the table for 28.05 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
.....	.....	.....	.....	.....

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

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total	.....	0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	2,604,977	2,614,429	9,451
30.2 Preferred stocks .....	.0	0	0
30.3 Totals .....	2,604,977	2,614,429	9,451

30.4 Describe the sources or methods utilized in determining the fair values:

For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ ] No [ X ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

.....

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

32.2 If no, list exceptions:

.....

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

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

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

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

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

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

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

## OTHER

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... \$ 0

36.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

**GENERAL INTERROGATORIES**

37.1 Amount of payments for legal expenses, if any? .....\$ .....0

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

38.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

**Life, Accident and Health Companies/Fraternal Benefit Societies:**

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U.S. business only ..... \$ ..... 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ ..... 0

1.31 Reason for excluding:  
.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ..... \$ ..... 0

1.5 Indicate total incurred claims on all Medicare Supplement insurance. ..... \$ ..... 0

1.6 Individual policies:  
Most current three years:  
1.61 Total premium earned ..... \$ ..... 0  
1.62 Total incurred claims ..... \$ ..... 0  
1.63 Number of covered lives ..... 0

All years prior to most current three years  
1.64 Total premium earned ..... \$ ..... 0  
1.65 Total incurred claims ..... \$ ..... 0  
1.66 Number of covered lives ..... 0

1.7 Group policies:  
Most current three years:  
1.71 Total premium earned ..... \$ ..... 0  
1.72 Total incurred claims ..... \$ ..... 0  
1.73 Number of covered lives ..... 0

All years prior to most current three years  
1.74 Total premium earned ..... \$ ..... 0  
1.75 Total incurred claims ..... \$ ..... 0  
1.76 Number of covered lives ..... 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	0	0
2.2 Premium Denominator	0	0
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator	46	91
2.5 Reserve Denominator	0	0
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Does this reporting entity have Separate Accounts? ..... Yes [ ] No [ X ]

3.2 If yes, has a Separate Accounts Statement been filed with this Department? ..... Yes [ ] No [ ] N/A [ ]

3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? ..... \$ ..... 0

3.4 State the authority under which Separate Accounts are maintained:  
Not Applicable. ....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? ..... Yes [ ] No [ X ]

3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? ..... Yes [ ] No [ X ]

3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? ..... \$ ..... 0

4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

4.1 Amount of loss reserves established by these annuities during the current year: ..... \$ ..... 0

4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
P&C Insurance Company And Location	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

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

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

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

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

6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [ X ]

6.2 If the answer to 6.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
.....	.....	.....	.....	.....	.....	.....

7. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

7.1 Direct Premium Written ..... \$ ..... 625,296
7.2 Total Incurred Claims ..... \$ ..... 1,348,337
7.3 Number of Covered Lives ..... 1,500

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

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

8.1 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 [ ]

**Life, Accident and Health Companies Only:**

9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? ..... Yes [ X ] No [ ]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid ..... \$ ..... 1,612,135
9.22 Received ..... \$ ..... 0

10.1 Does the reporting entity write any guaranteed interest contracts? ..... Yes [ ] No [ X ]

10.2 If yes, what amount pertaining to these lines is included in:

10.21 Page 3, Line 1 ..... \$ ..... 0
10.22 Page 4, Line 1 ..... \$ ..... 0

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: ..... \$ ..... 4,990,293

12. Total dividends paid stockholders since organization of the reporting entity:

12.11 Cash ..... \$ ..... 56,000,000
12.12 Stock ..... \$ ..... 0

13.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: ..... Yes [ ] No [ X ]

Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? ..... Yes [ ] No [ ]

13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
13.31 Earned premium ..... 0 ..... 0 ..... 0			
13.32 Paid claims ..... 0 ..... 0 ..... 0			
13.33 Claim liability and reserve (beginning of year) ..... 0 ..... 0 ..... 0			
13.34 Claim liability and reserve (end of year) ..... 0 ..... 0 ..... 0			
13.35 Incurred claims ..... 0 ..... 0 ..... 0			

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41	<\$25,000	0	0
13.42	\$25,000 - 99,999	0	0
13.43	\$100,000 - 249,999	0	0
13.44	\$250,000 - 999,999	0	0
13.45	\$1,000,000 or more	0	0

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools? .....\$ .....0

**Fraternal Benefit Societies Only:**

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? ..... Yes [ ] No [ ]

15. How often are meetings of the subordinate branches required to be held? .....  
.....

16. How are the subordinate branches represented in the supreme or governing body? .....  
.....

17. What is the basis of representation in the governing body? .....  
.....

18.1 How often are regular meetings of the governing body held? .....  
.....

18.2 When was the last regular meeting of the governing body held? .....  
.....

18.3 When and where will the next regular or special meeting of the governing body be held? .....  
.....

18.4 How many members of the governing body attended the last regular meeting? ..... 0

18.5 How many of the same were delegates of the subordinate branches? ..... 0

19. How are the expenses of the governing body defrayed? .....  
.....

20. When and by whom are the officers and directors elected? .....  
.....

21. What are the qualifications for membership? .....  
.....

22. What are the limiting ages for admission? .....  
.....

23. What is the minimum and maximum insurance that may be issued on any one life? .....  
.....

24. Is a medical examination required before issuing a benefit certificate to applicants? ..... Yes [ ] No [ ]

25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? ..... Yes [ ] No [ ]

26.1 Are notices of the payments required sent to the members? ..... Yes [ ] No [ ] N/A [ ]

26.2 If yes, do the notices state the purpose for which the money is to be used? ..... Yes [ ] No [ ]

27. What proportion of first and subsequent year's payments may be used for management expenses?  
 27.11 First Year ..... 0.0 %  
 27.12 Subsequent Years ..... 0.0 %

28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? ..... Yes [ ] No [ ]

28.2 If so, what amount and for what purpose? ..... \$ .....0

29.1 Does the reporting entity pay an old age disability benefit? ..... Yes [ ] No [ ]

29.2 If yes, at what age does the benefit commence? ..... 0

30.1 Has the constitution or have the laws of the reporting entity been amended during the year? ..... Yes [ ] No [ ]

30.2 If yes, when? .....  
.....

31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? ..... Yes [ ] No [ ]

32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? ..... Yes [ ] No [ ]

32.2 If so, was an additional reserve included in Exhibit 5? ..... Yes [ ] No [ ] N/A [ ]

32.3 If yes, explain .....  
.....

33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? ..... Yes [ ] No [ ]

33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? ..... Yes [ ] No [ ] N/A [ ]

34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? ..... Yes [ ] No [ ]

35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? ..... Yes [ ] No [ ]

35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus? .....  
.....

Date	Outstanding Lien Amount
.....	.....

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

\$000 omitted for amounts of life insurance

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Life Insurance in Force</b> (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	62,601	61,651	68,229	72,929	78,602
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	15	7,347	7,959	8,725	11,126
3. Credit life (Line 21, Col. 6) .....	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4) .....	0	0	0	0	0
5. Industrial (Line 21, Col. 2) .....	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4) .....	0	0	0	0	0
7. Total (Line 21, Col. 10) .....	62,616	68,998	76,188	81,654	89,728
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....	0	0	0	XXX	XXX
<b>New Business Issued</b> (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	0	0	0	0	0
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) .....	0	0	0	0	0
10. Credit life (Line 2, Col. 6) .....	0	0	0	0	0
11. Group (Line 2, Col. 9) .....	0	0	0	0	0
12. Industrial (Line 2, Col. 2) .....	0	0	0	0	0
13. Total (Line 2, Col. 10) .....	0	0	0	0	0
<b>Premium Income - Lines of Business</b> (Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2) .....	0	0	0	0	0
15.1 Ordinary-life insurance (Line 20.4, Col. 3) .....	0	0	0	0	0
15.2 Ordinary-individual annuities (Line 20.4, Col. 4) .....	0	0	0	0	0
16 Credit life (group and individual) (Line 20.4, Col. 5) .....	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6) .....	0	0	0	0	0
17.2 Group annuities (Line 20.4, Col. 7) .....	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8) .....	0	0	0	0	0
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9) .....	0	0	0	0	0
18.3 A & H-other (Line 20.4, Col. 10) .....	0	0	0	0	0
19. Aggregate of all other lines of business (Line 20.4, Col. 11) .....	0	0	0	0	0
20. Total .....	0	0	0	0	0
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	506,750,507	356,229,281	185,935,612	87,073,300	151,930,638
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	440,563,699	287,488,031	138,055,276	46,648,777	118,840,323
23. Aggregate life reserves (Page 3, Line 1) .....	0	0	0	0	0
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 .....	0	0	0	XXX	XXX
24. Aggregate A & H reserves (Page 3, Line 2) .....	0	0	0	0	0
25. Deposit-type contract funds (Page 3, Line 3) .....	0	0	0	0	0
26. Asset valuation reserve (Page 3, Line 24.01) .....	0	0	0	1,803	12,102
27. Capital (Page 3, Lines 29 and 30) .....	2,727,274	2,727,274	2,727,274	2,727,274	2,727,274
28. Surplus (Page 3, Line 37) .....	63,459,534	66,013,976	45,153,062	37,697,249	30,363,041
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	223,811,758	(47,764,479)	9,660,138	4,458,719	12,348,461
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	66,186,808	68,741,250	47,880,336	40,426,326	33,102,417
31. Authorized control level risk - based capital .....	713,135	522,083	90,468	134,538	126,661
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1) .....	0.7	0.9	17.1	5.3	10.9
33. Stocks (Lines 2.1 and 2.2) .....	0.0	0.0	0.0	0.0	0.2
34. Mortgage loans on real estate(Lines 3.1 and 3.2) .....	0.0	0.0	0.0	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3) .....	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short-term investments (Line 5) .....	99.3	99.1	82.9	94.7	89.0
37. Contract loans (Line 6) .....	0.0	0.0	0.0	0.0	0.0
38. Derivatives (Page 2, Line 7) .....	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8) .....	0.0	0.0	0.0	0.0	0.0
40. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10) .....	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11) .....	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1) .....	0	0	0	0	0
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) .....	0	0	0	0	0
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), .....	0	0	0	0	0
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
48. Affiliated mortgage loans on real estate .....	0	0	0	0	0
49. All other affiliated .....	0	0	0	0	0
50. Total of above Lines 44 to 49 .....	0	0	0	0	0
51. Total Investment in Parent included in Lines 44 to 49 above .....	0	0	0	0	0
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2) .....	468,398	2,073,659	697,450	5,461	0
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	506,750,507	356,229,281	185,935,612	87,073,300	151,930,638
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income) .....	46,730	29,613	23,036	21,797	24,772
55. Realized capital gains (losses) (Page 4, Line 34, Column 1) .....	0	0	0	0	0
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	87	54	12	0	0
57. Total of above Lines 54, 55 and 56 .....	46,817	29,667	23,048	21,797	24,772
<b>Benefits and Reserve Increases (Page 6)</b>					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8) .....	0	0	0	0	0
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	0	0	0	0	0
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	0	0	0	0	0
61. Increase in A & H reserves (Line 19, Col. 6) .....	0	0	0	0	0
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	0	0	0	0	0
<b>Operating Percentages</b>					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0 .....	0.0	0.0	0.0	0.0	0.0
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0 .....	8.0	8.2	5.9	6.1	5.3
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
<b>A &amp; H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2) .....	0	0	0	0	0
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2) .....	0	0	0	0	0
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2) .....	0	0	0	0	0
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) .....	0	0	0	0	0
<b>Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)</b>					
72. Industrial life (Page 6.1, Col. 2) .....	0	0	0	0	0
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12) .....	0	0	14,438,628	7,329,370	12,220,683
74. Ordinary - individual annuities (Page 6, Col. 4) .....	0	0	0	0	0
75. Ordinary-supplementary contracts .....	XXX	0	0	0	0
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7) .....	0	0	0	0	0
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9) .....	0	0	0	0	0
78. Group annuities (Page 6, Col. 5) .....	0	0	0	0	0
79. A & H-group (Page 6.5, Col. 3) .....	0	0	0	0	0
80. A & H-credit (Page 6.5, Col. 10) .....	0	0	0	0	0
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10) .....	0	0	0	0	0
82. Aggregate of all other lines of business (Page 6, Col. 8) .....	31,285,114	35,233,096	0	0	0
83. Fraternal (Page 6, Col. 7) .....	0	0	0	0	0
84. Total (Page 6, Col. 1) .....	31,285,114	35,233,096	14,438,628	7,329,370	12,220,683

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

Yes [ ] No [ ]

If no, please explain: .....

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

## EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance
	1	2	3	4	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	7 Policies	8 Certificates	
	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance					
1. In force end of prior year .....	.0	0	1,629	.68,998	0	0	0	0	68,998
2. Issued during year .....	0	0	0	0	0	0	0	0	0
3. Reinsurance assumed .....	0	0	0	0	0	0	0	0	0
4. Revived during year .....	0	0	1	.258	0	0	0	0	.258
5. Increased during year (net) .....	0	0	16	.650	0	0	0	0	650
6. Subtotals, Lines 2 to 5 .....	0	0	17	.908	0	0	0	0	908
7. Additions by dividends during year .....	XXX	0	XXX	0	XXX	0	XXX	0	0
8. Aggregate write-ins for increases .....	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8) .....	0	0	1,646	.69,906	0	0	0	0	.69,906
Deductions during year:									
10. Death .....	0	0	.30	.1,410	0	0	XXX	0	1,410
11. Maturity .....	0	0	0	0	0	0	XXX	0	0
12. Disability .....	0	0	0	0	0	0	XXX	0	0
13. Expiry .....	0	0	0	0	0	0	0	0	0
14. Surrender .....	0	0	.61	2,501	0	0	0	0	2,501
15. Lapse .....	0	0	.39	2,760	0	0	0	0	2,760
16. Conversion .....	0	0	0	0	0	0	XXX	XXX	0
17. Decreased (net) .....	0	0	.16	.619	0	0	0	0	.619
18. Reinsurance .....	0	0	0	0	0	0	0	0	0
19. Aggregate write-ins for decreases .....	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19) .....	0	0	146	.7,290	0	0	0	0	.7,290
21. In force end of year (b) (Line 9 minus Line 20) .....	0	0	1,500	.62,616	0	0	0	0	.62,616
22. Reinsurance ceded end of year .....	XXX	0	XXX	.62,616	XXX	0	XXX	XXX	.62,616
23. Line 21 minus Line 22 .....	XXX	0	XXX	0	XXX	(a)	XXX	XXX	0
<b>DETAILS OF WRITE-INS</b>									
0801. ....									
0802. ....									
0803. ....									
0898. Summary of remaining write-ins for Line 8 from overflow page .....	0	0	0	0	0	0	0	0	0
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....	0	0	0	0	0	0	0	0	0
1901. ....									
1902. ....									
1903. ....									
1998. Summary of remaining write-ins for Line 19 from overflow page .....	0	0	0	0	0	0	0	0	0
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above) .....	0	0	0	0	0	0	0	0	0

Life, Accident and Health Companies Only:

(a) Group \$ .....0 ; Individual \$ .....0

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates .....0 , Amount \$ .....0

Additional accidental death benefits included in life certificates were in amount \$ .....0 , Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [ ] No [ ]

If not, how are such expenses met?

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)

**ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR**

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends .....	XXX	0	XXX	0
25. Other paid-up insurance .....	0	0	102	795
26. Debit ordinary insurance .....	XXX	XXX	0	0

**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing .....	0	0	.5	15
28. Term policies - other .....	0	0	0	0
29. Other term insurance - decreasing .....	XXX	0	XXX	0
30. Other term insurance .....	XXX	0	XXX	0
31. Totals (Lines 27 to 30) .....	0	0	.5	15
Reconciliation to Lines 2 and 21:				
32. Term additions .....	XXX	0	XXX	0
33. Totals, extended term insurance .....	XXX	XXX	0	0
34. Totals, whole life and endowment .....	0	0	1,495	62,601
35. Totals (Lines 31 to 34) .....	0	0	1,500	62,616

**CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS**

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial .....	0	0	0	0
37. Ordinary .....	0	0	62,616	0
38. Credit Life (Group and Individual) .....	0	0	0	0
39. Group .....	0	0	0	0
40. Totals (Lines 36 to 39) .....	0	0	62,616	0

**ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE**

	Credit Life		Group	
	1 Number of Individual Policies	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies .....	XXX	XXX	XXX	
42. Number in force end of year if the number under ceded group is deducted on a pro-rata basis .....				XXX
43. Federal Employees' Group Life Insurance included in Line 21 .....				
44. Servicemen's Group Life Insurance included in Line 21 .....				
45. Group Permanent Insurance included in Line 21 .....				

**ADDITIONAL ACCIDENTAL DEATH BENEFITS**

46. Amount of additional accidental death benefits in force end of year under ordinary policies	775
---	-----

**BASIS OF CALCULATION OF ORDINARY TERM INSURANCE**

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc., policies and riders included above.
47.1 Commuted amount .....
47.2 Level amount on parent or family policies .....

**POLICIES WITH DISABILITY PROVISIONS**

Disability Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium .....	0	0	48	2,524	0	0	0	0
49. Disability Income .....	0	0	0	0	0	0	0	0
50. Extended Benefits .....	0	0	XXX	XXX	0	0	0	0
51. Other .....	0	0	0	0	0	0	0	0
52. Total .....	0	(a)	0	48 (a)	2,524	0 (a)	0	0 (a)

(a) See the Annual Audited Financial Reports section of the annual statement instructions

**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year .....	0	0	0	0
2. Issued during year .....	0	0	0	0
3. Reinsurance assumed .....	0	0	0	0
4. Increased during year (net) .....	0	0	0	0
5. Total (Lines 1 to 4) .....	0	0	0	0
Deductions during year:				
6. Decreased (net) .....	(4)	0	0	0
7. Reinsurance ceded .....	4	0	0	0
8. Totals (Lines 6 and 7) .....	0	0	0	0
9. In force end of year .....	0	0	0	0
10. Amount on deposit .....	0	(a) .....	0	(a) .....
11. Income now payable .....	0	0	0	0
12. Amount of income payable .....	(a)	0	(a)	(a) 0

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year .....	0	0	0	0
2. Issued during year .....	0	0	0	0
3. Reinsurance assumed .....	0	0	0	0
4. Increased during year (net) .....	0	0	0	0
5. Totals (Lines 1 to 4) .....	0	0	0	0
Deductions during year:				
6. Decreased (net) .....	(1)	(292)	0	0
7. Reinsurance ceded .....	1	292	0	0
8. Totals (Lines 6 and 7) .....	0	0	0	0
9. In force end of year .....	0	0	0	0
Income now payable:				
10. Amount of income payable .....	(a)	0	XXX	XXX
Deferred fully paid:				
11. Account balance .....	XXX	(a)	0	XXX
Deferred not fully paid:				
12. Account balance .....	XXX	(a)	0	XXX

ACCIDENT AND HEALTH INSURANCE

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year .....	0	0	0	0	0	0
2. Issued during year .....	0	0	0	0	0	0
3. Reinsurance assumed .....	0	0	0	0	0	0
4. Increased during year (net) .....	0	XXX	0	XXX	0	XXX
5. Totals (Lines 1 to 4) .....	0	XXX	0	XXX	0	XXX
Deductions during year:						
6. Conversions .....	0	XXX	XXX	XXX	XXX	XXX
7. Decreased (net) .....	(1)	XXX	0	XXX	0	XXX
8. Reinsurance ceded .....	1	XXX	0	XXX	0	XXX
9. Totals (Lines 6 to 8) .....	0	XXX	0	XXX	0	XXX
10. In force end of year .....	0	(a)	0	(a)	0	(a) 0

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

		1 Deposit Funds Contracts		2 Dividend Accumulations Contracts	
		3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year .....					
2. Issued during year .....					
3. Reinsurance assumed .....					
4. Increased during year (net) .....					
5. Totals (Lines 1 to 4) .....					
Deductions During Year:					
6. Decreased (net) .....					
7. Reinsurance ceded .....					
8. Totals (Lines 6 and 7) .....					
9. In force end of year .....					
10. Amount of account balance .....				(a)	(a)

**NONE**

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.**  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS <sup>(b)</sup>**

Allocated by States and Territories

States, Etc.	Active Status (a)	1	Direct Business Only						7 Deposit-Type Contracts	
			Life Contracts		4	5	6	Total Columns 2 through 5		
			2 Life Insurance Premiums	3 Annuity Considerations						
1. Alabama	AL	L	3,477	0	0	0	0	3,477	0	
2. Alaska	AK	L	0	0	0	0	0	0	0	
3. Arizona	AZ	L	2,603	0	0	0	0	2,603	0	
4. Arkansas	AR	L	683	0	0	0	0	683	0	
5. California	CA	L	95,354	462	0	0	0	95,816	0	
6. Colorado	CO	L	5,789	0	0	0	0	5,789	0	
7. Connecticut	CT	L	6,160	0	0	0	0	6,160	0	
8. Delaware	DE	L	0	0	0	0	0	0	0	
9. District of Columbia	DC	L	0	0	0	0	0	0	0	
10. Florida	FL	L	35,857	6,155	0	0	0	42,012	0	
11. Georgia	GA	L	10,242	0	0	0	0	10,242	0	
12. Hawaii	HI	L	1,047	0	0	0	0	1,047	0	
13. Idaho	ID	L	608	0	0	0	0	608	0	
14. Illinois	IL	L	6,557	0	0	0	0	6,557	0	
15. Indiana	IN	L	9,429	0	0	0	0	9,429	0	
16. Iowa	IA	L	4,469	0	0	0	0	4,469	0	
17. Kansas	KS	L	2,123	0	0	0	0	2,123	0	
18. Kentucky	KY	L	34,381	0	363	0	0	34,744	0	
19. Louisiana	LA	L	15,450	0	0	0	0	15,450	0	
20. Maine	ME	N	0	0	0	0	0	0	0	
21. Maryland	MD	L	1,131	0	0	0	0	1,131	0	
22. Massachusetts	MA	L	1,077	0	0	0	0	1,077	0	
23. Michigan	MI	L	28,199	0	0	0	0	28,199	0	
24. Minnesota	MN	L	1,489	0	0	0	0	1,489	0	
25. Mississippi	MS	L	7,966	0	0	0	0	7,966	0	
26. Missouri	MO	L	1,144	0	0	0	0	1,144	0	
27. Montana	MT	L	0	0	0	0	0	0	0	
28. Nebraska	NE	L	540	0	0	0	0	540	0	
29. Nevada	NV	L	9,395	0	0	0	0	9,395	0	
30. New Hampshire	NH	L	524	0	0	0	0	524	0	
31. New Jersey	NJ	L	0	0	0	0	0	0	0	
32. New Mexico	NM	L	1,625	0	0	0	0	1,625	0	
33. New York	NY	N	409	0	0	0	0	409	0	
34. North Carolina	NC	L	13,517	0	0	0	0	13,517	0	
35. North Dakota	ND	L	550	0	0	0	0	550	0	
36. Ohio	OH	L	223,348	35,484	560	0	0	259,392	0	
37. Oklahoma	OK	L	1,176	0	0	0	0	1,176	0	
38. Oregon	OR	L	2,907	0	0	0	0	2,907	0	
39. Pennsylvania	PA	L	2,890	0	0	0	0	2,890	0	
40. Rhode Island	RI	L	0	0	0	0	0	0	0	
41. South Carolina	SC	L	3,036	0	0	0	0	3,036	0	
42. South Dakota	SD	L	608	0	0	0	0	608	0	
43. Tennessee	TN	L	35,955	0	0	0	0	35,955	0	
44. Texas	TX	L	28,067	0	0	0	0	28,067	0	
45. Utah	UT	L	0	0	0	0	0	0	0	
46. Vermont	VT	L	0	0	0	0	0	0	0	
47. Virginia	VA	L	18,751	26	0	0	0	18,777	0	
48. Washington	WA	L	1,092	0	0	0	0	1,092	0	
49. West Virginia	WV	L	2,649	0	0	0	0	2,649	0	
50. Wisconsin	WI	L	3,022	0	0	0	0	3,022	0	
51. Wyoming	WY	L	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 Alien	OT	XXX	0	0	0	0	0	0	0	
59. Subtotal		XXX	625,296	42,127	923	0	0	668,346	0	
60. Reporting entity contributions for employee benefits plans		XXX	0	0	0	0	0	0	0	
61. Dividends or refunds applied to purchase paid-up additions and annuities		XXX	0	0	0	0	0	0	0	
62. Dividends or refunds applied to shorten endowment or premium paying period		XXX	0	0	0	0	0	0	0	
63. Premium or annuity considerations waived under disability or other contract provisions		XXX	0	0	0	0	0	0	0	
64. Aggregate or other amounts not allocable by State		XXX	0	0	0	0	0	0	0	
65. Totals (Direct Business)		XXX	625,296	42,127	923	0	0	668,346	0	
66. Plus reinsurance assumed		XXX	0	0	0	0	0	0	0	
67. Totals (All Business)		XXX	625,296	42,127	923	0	0	668,346	0	
68. Less reinsurance ceded		XXX	625,296	42,127	923	0	0	668,346	0	
69. Totals (All Business) less Reinsurance Ceded		XXX	0	0	(c)	0	0	0	0	
DETAILS OF WRITE-INS										
58001.		XXX								
58002.		XXX								
58003.		XXX								
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	
9401.		XXX								
9402.		XXX								
9403.		XXX								
9498.	Summary of remaining write-ins for Line 94 from overflow page	XXX	0	0	0	0	0	0	0	
9499.	Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX	0	0	0	0	0	0	0	

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 49 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..... 8

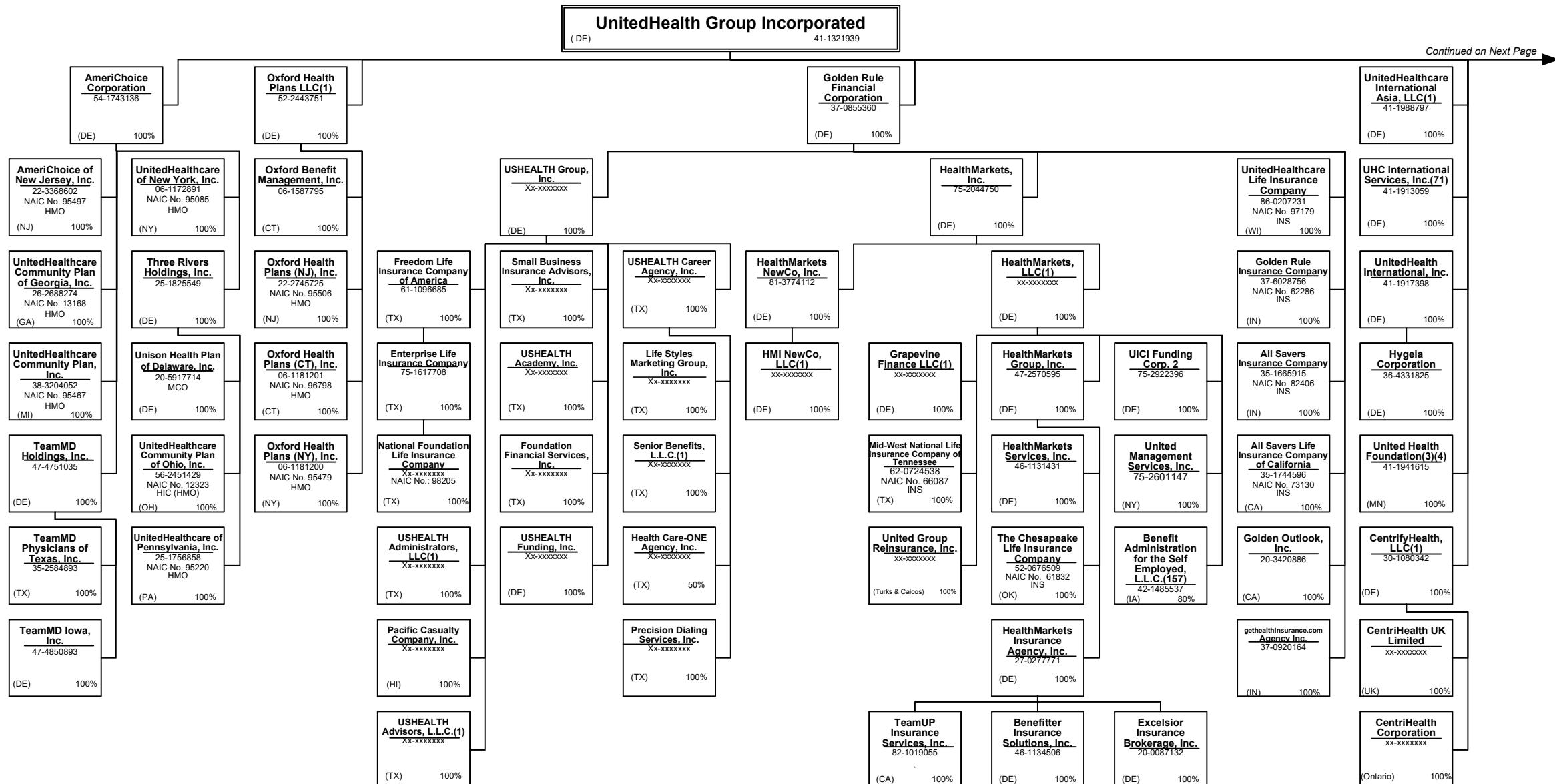
(b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations

Schedule T is being presented based on member residency.

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10, or with Schedule H, Part 1, Line 1, indicate which: Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10..

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

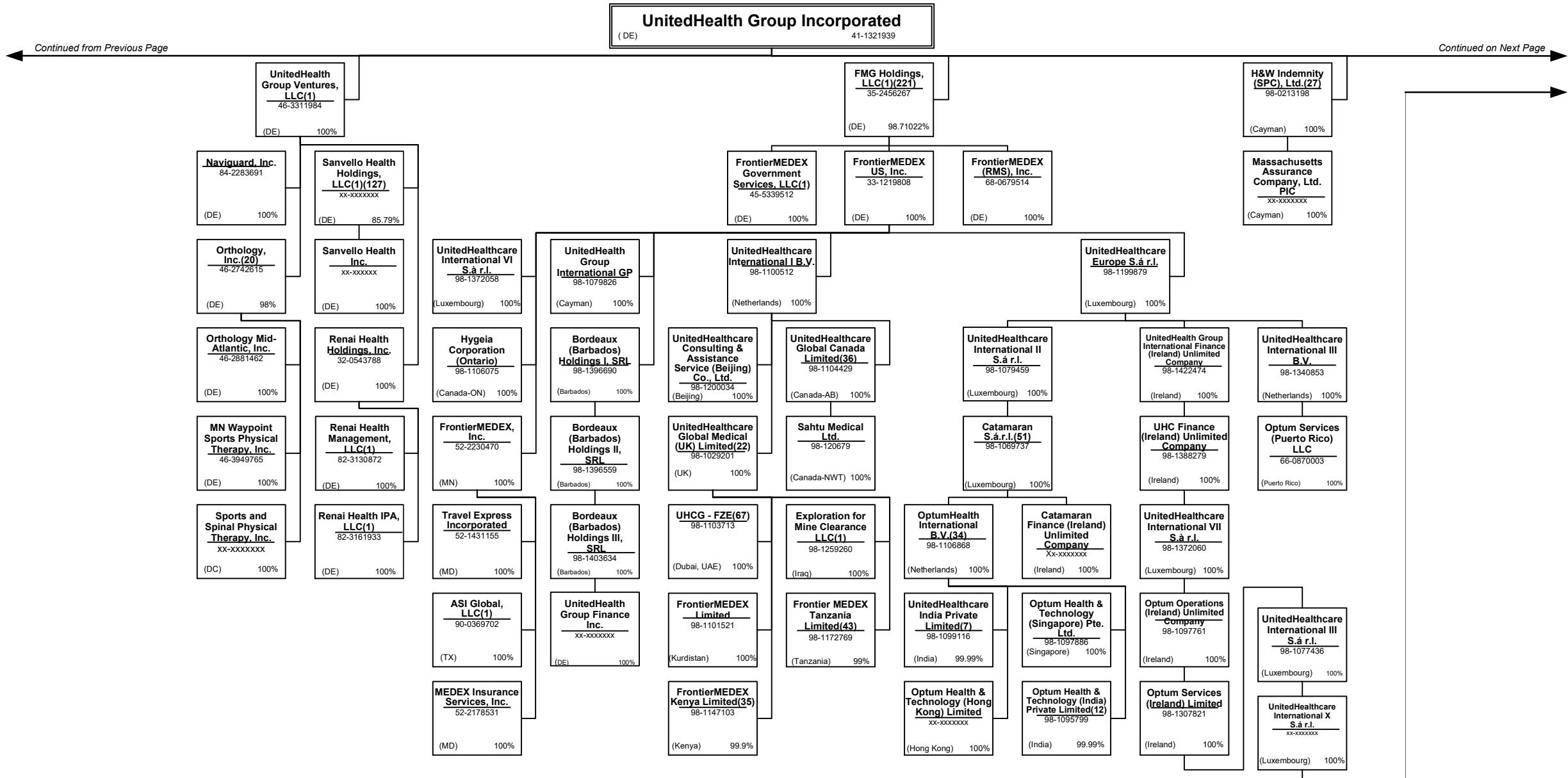
## PART 1 – ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.

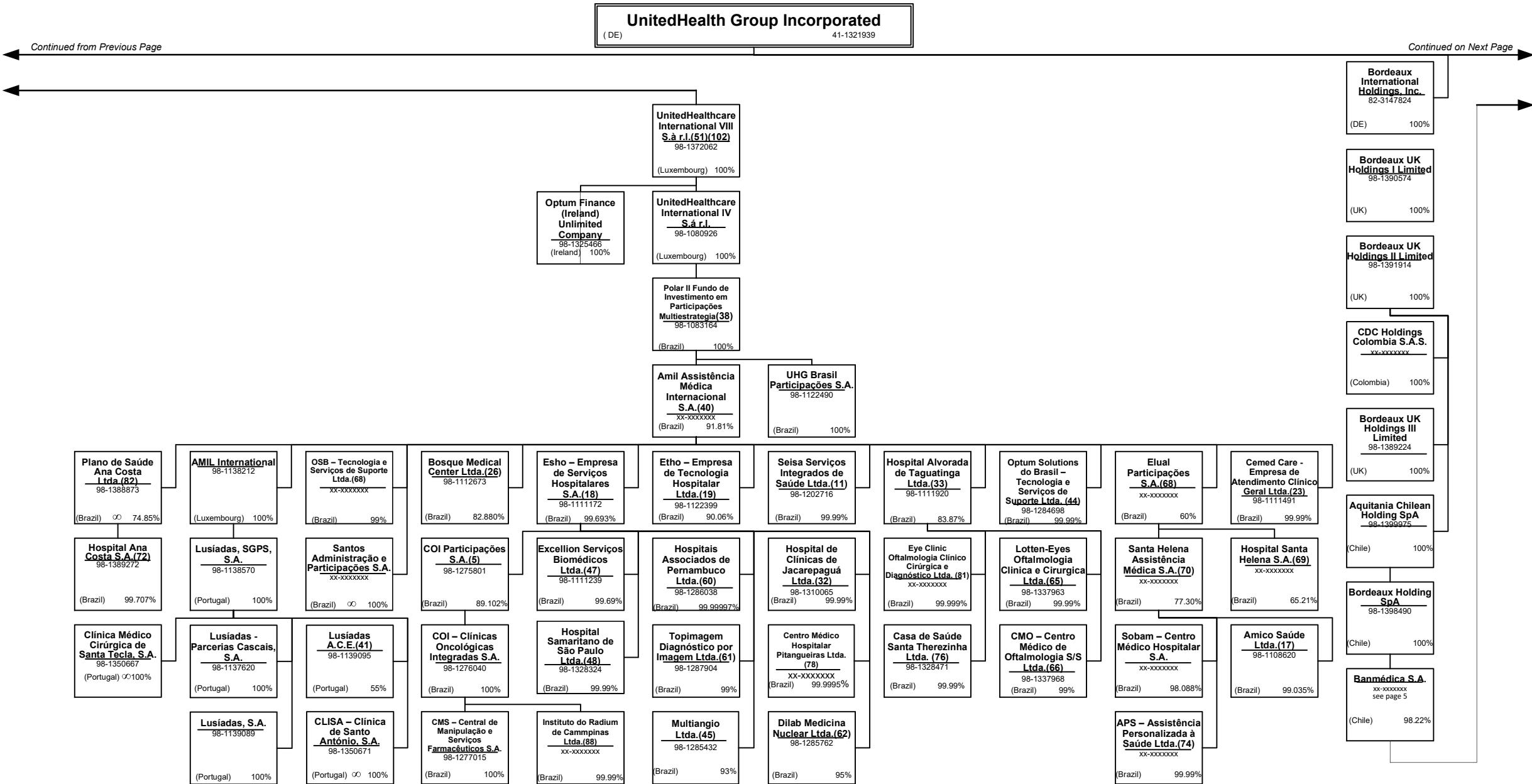
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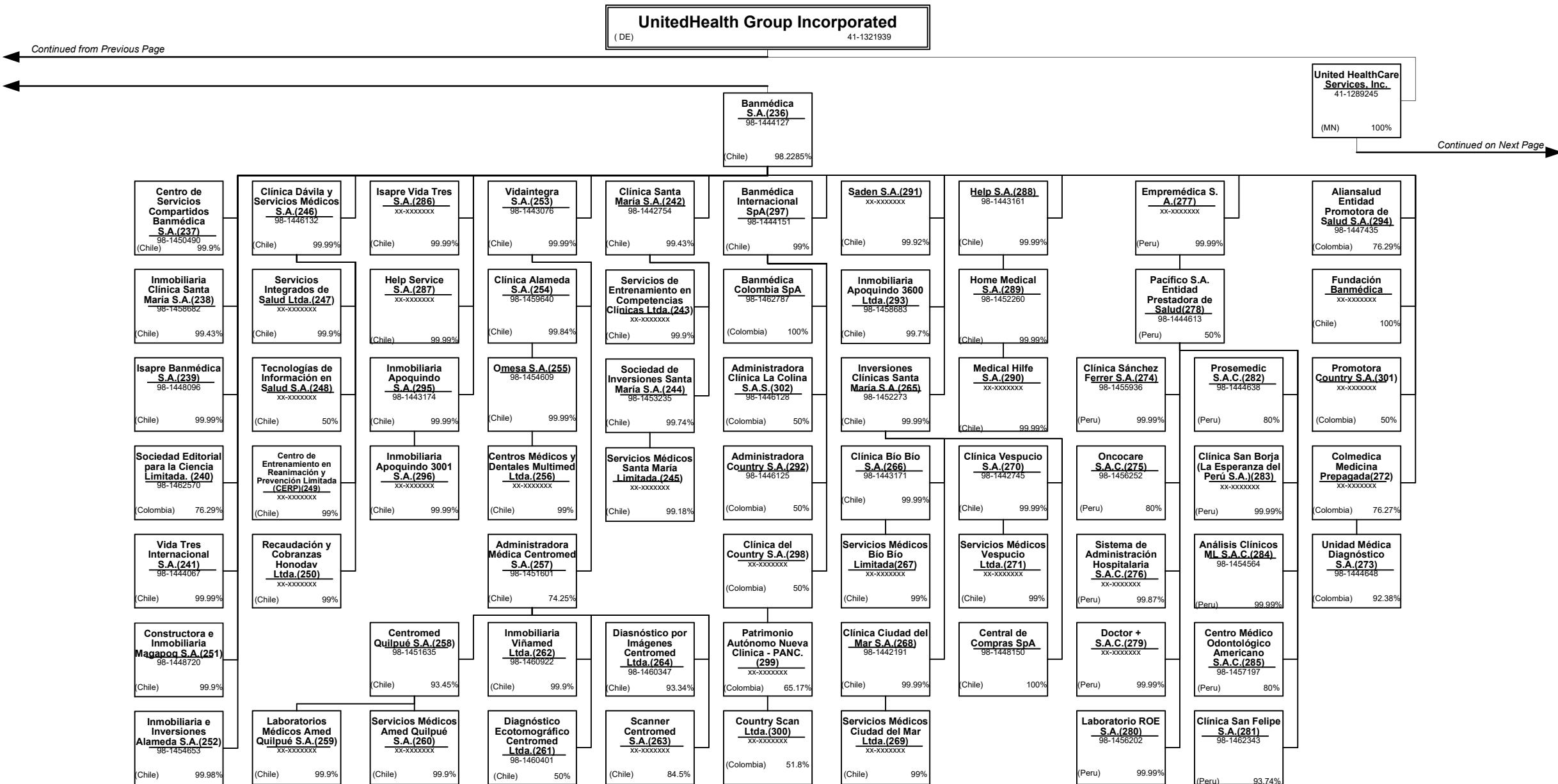
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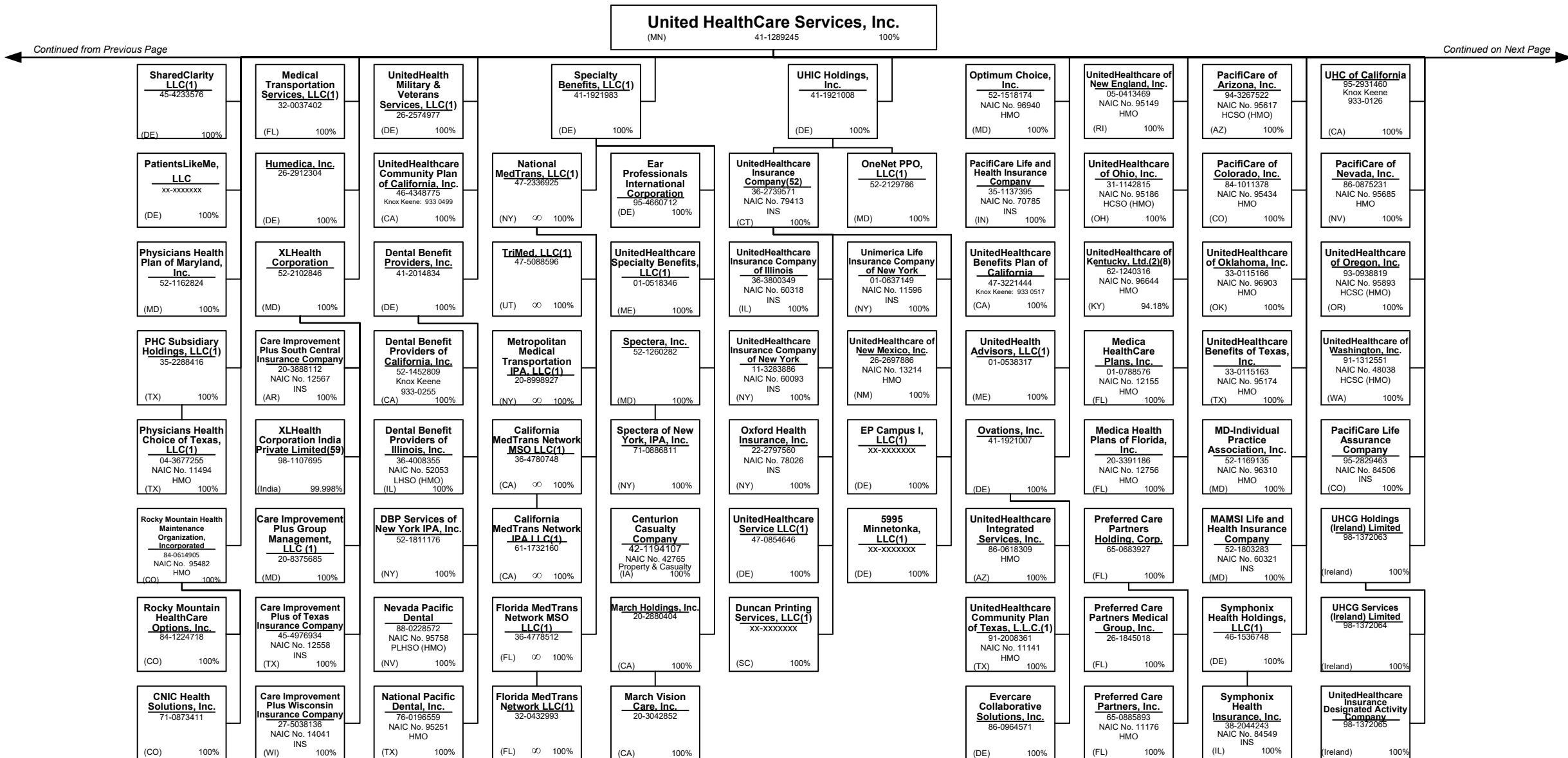
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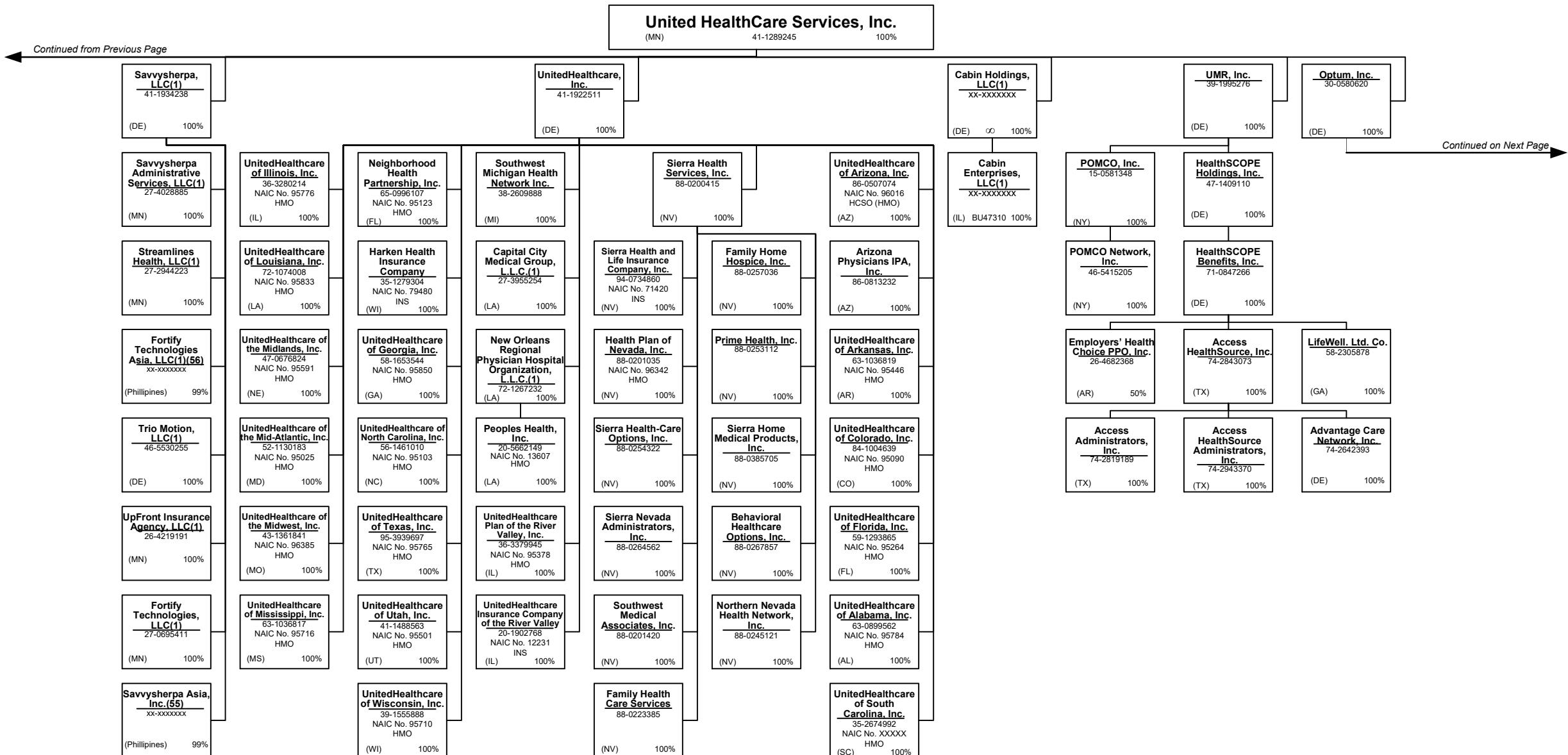
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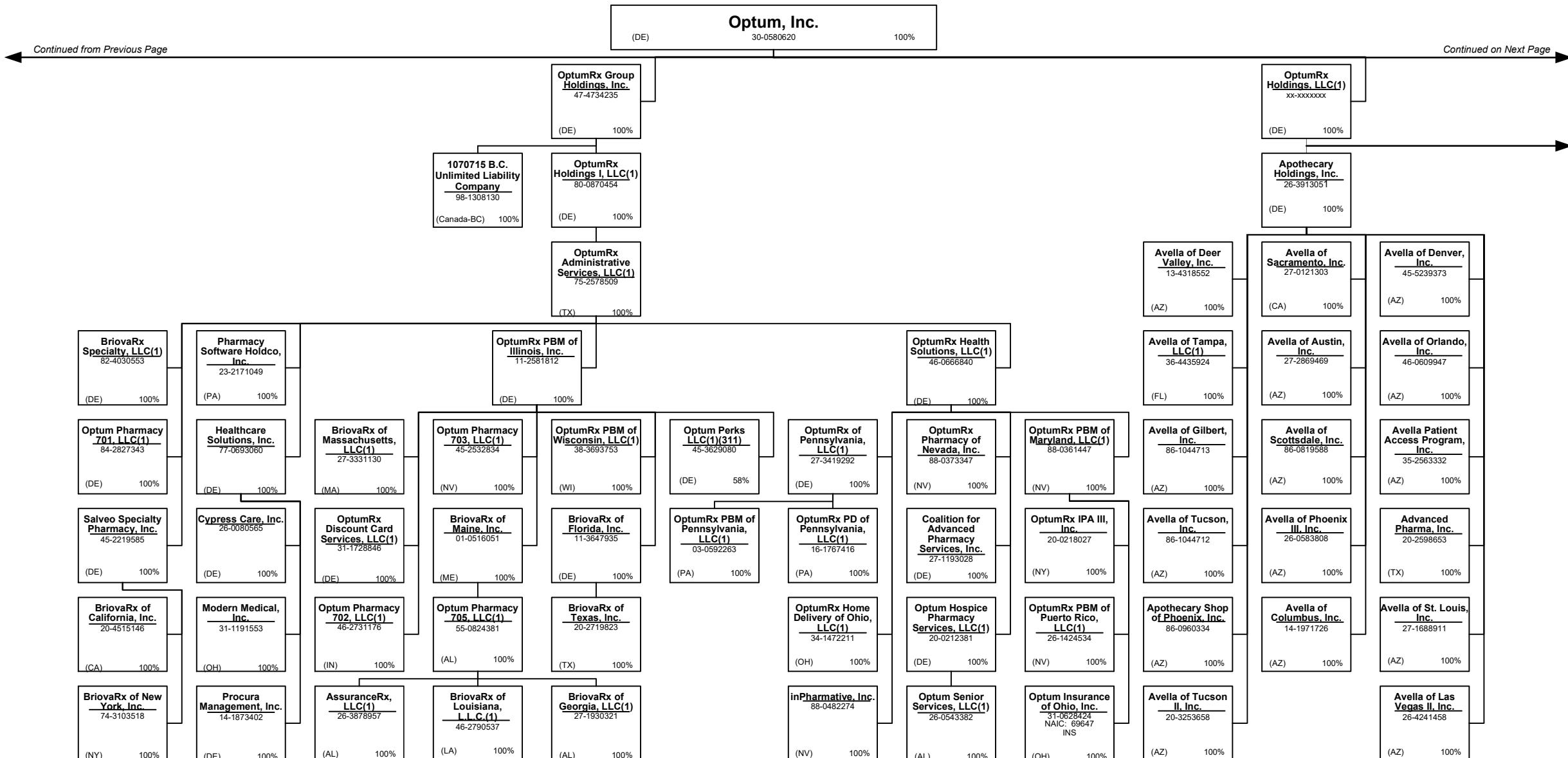


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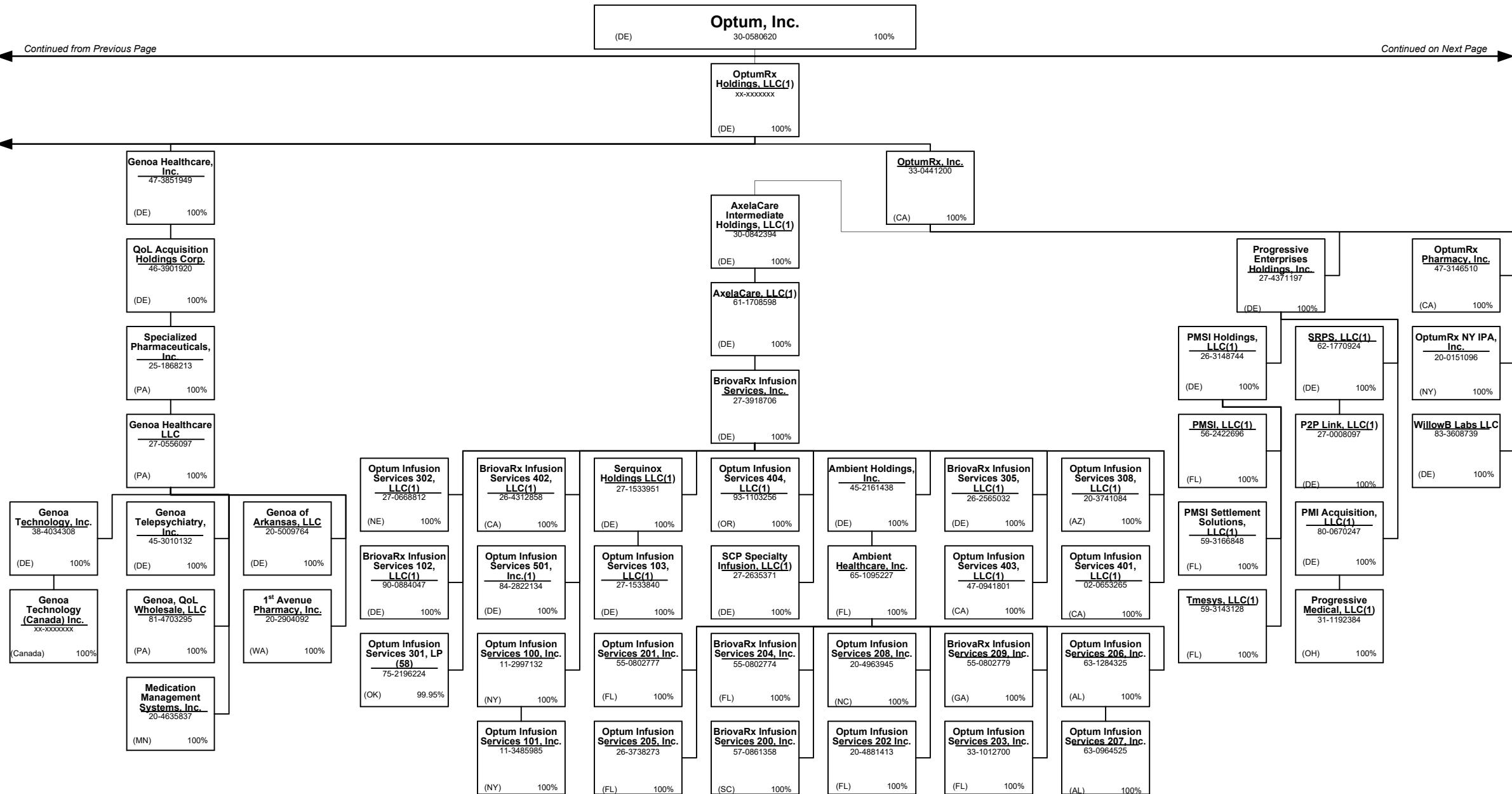
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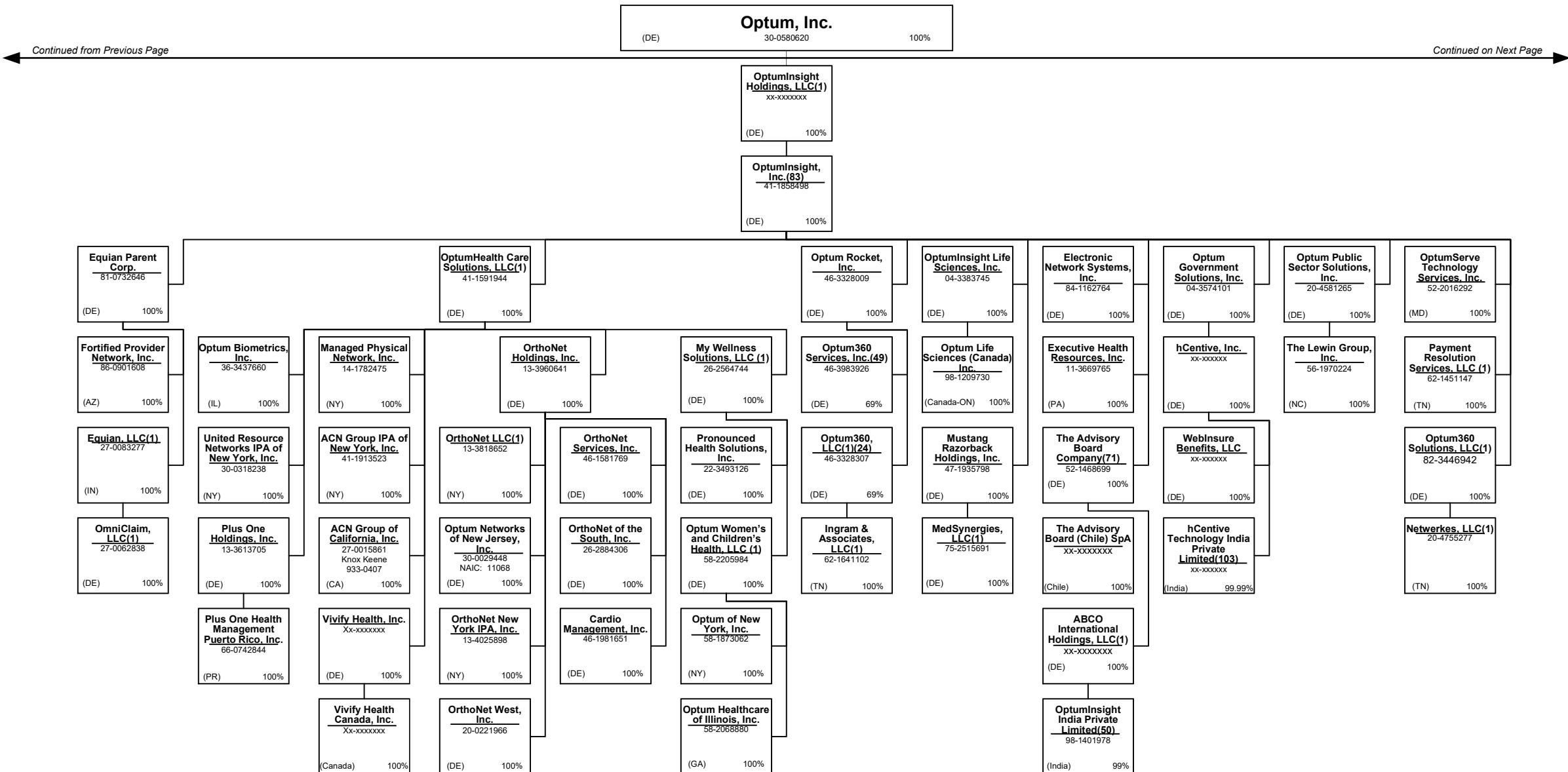
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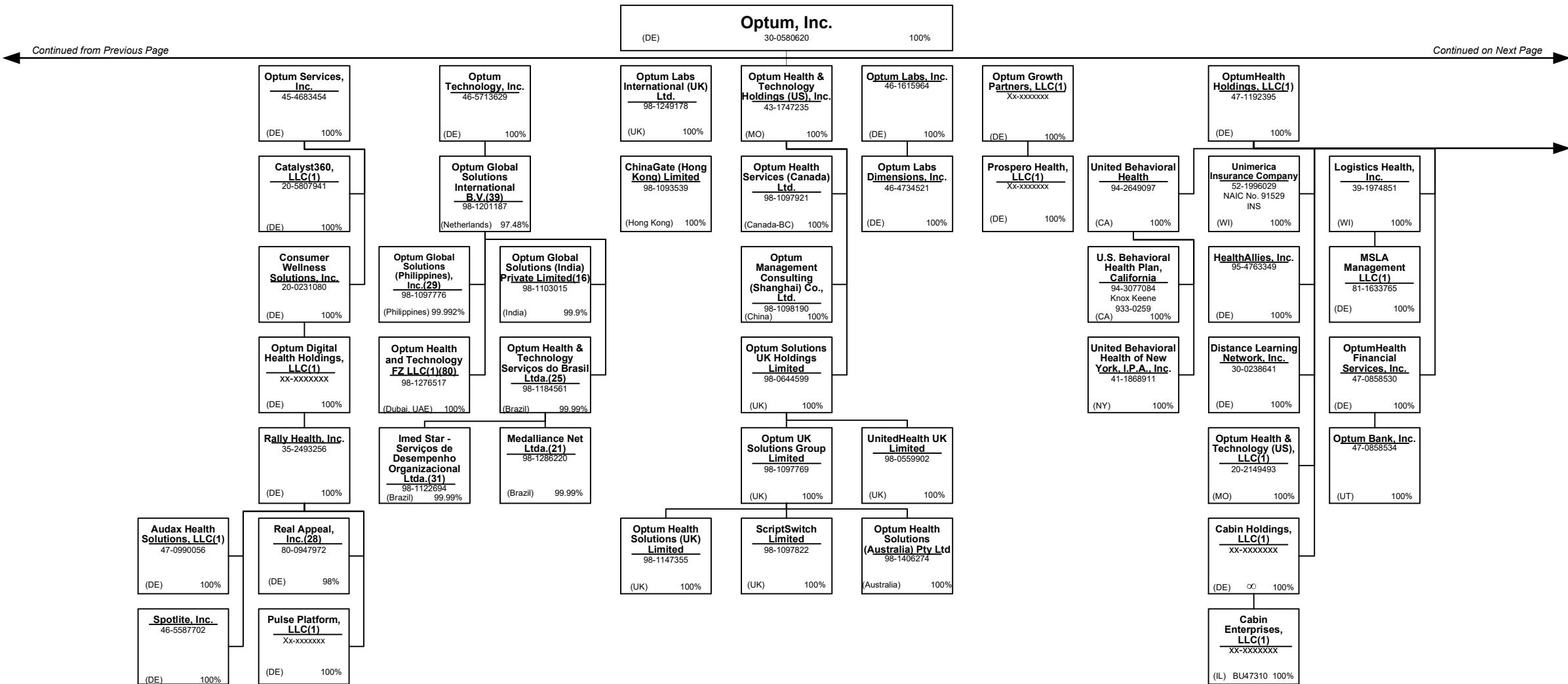


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**PART 1 – ORGANIZATIONAL CHART**



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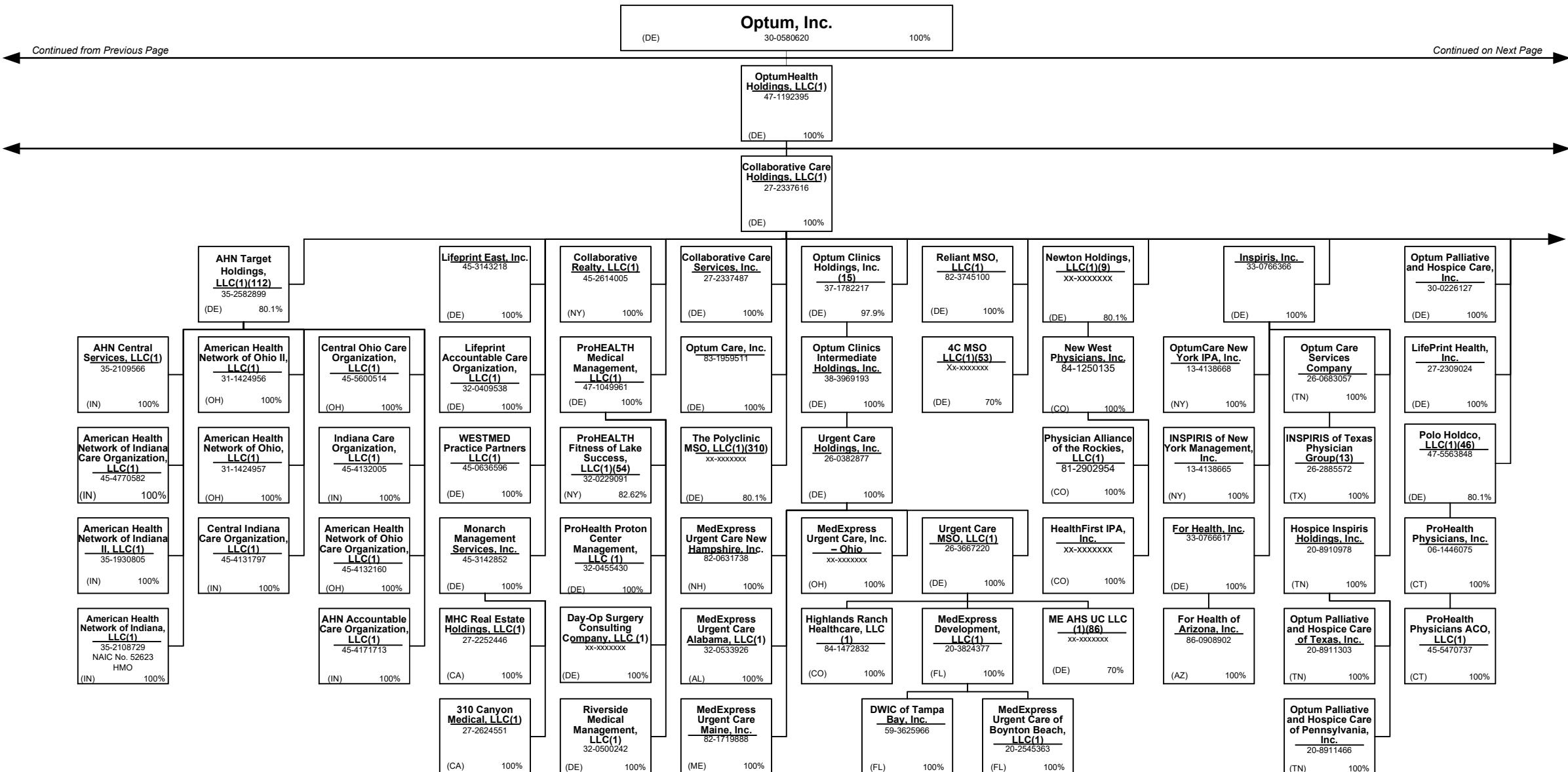
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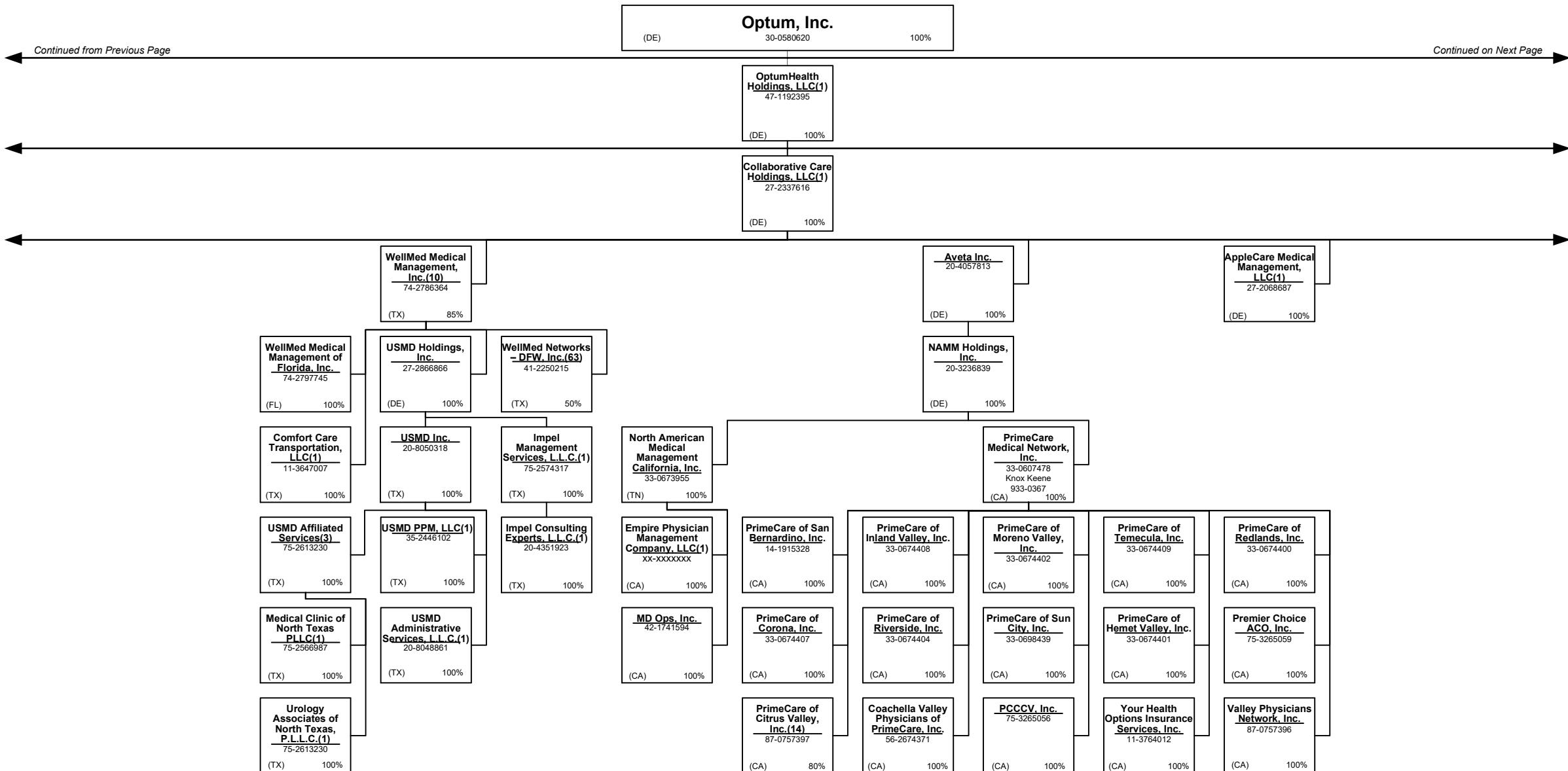
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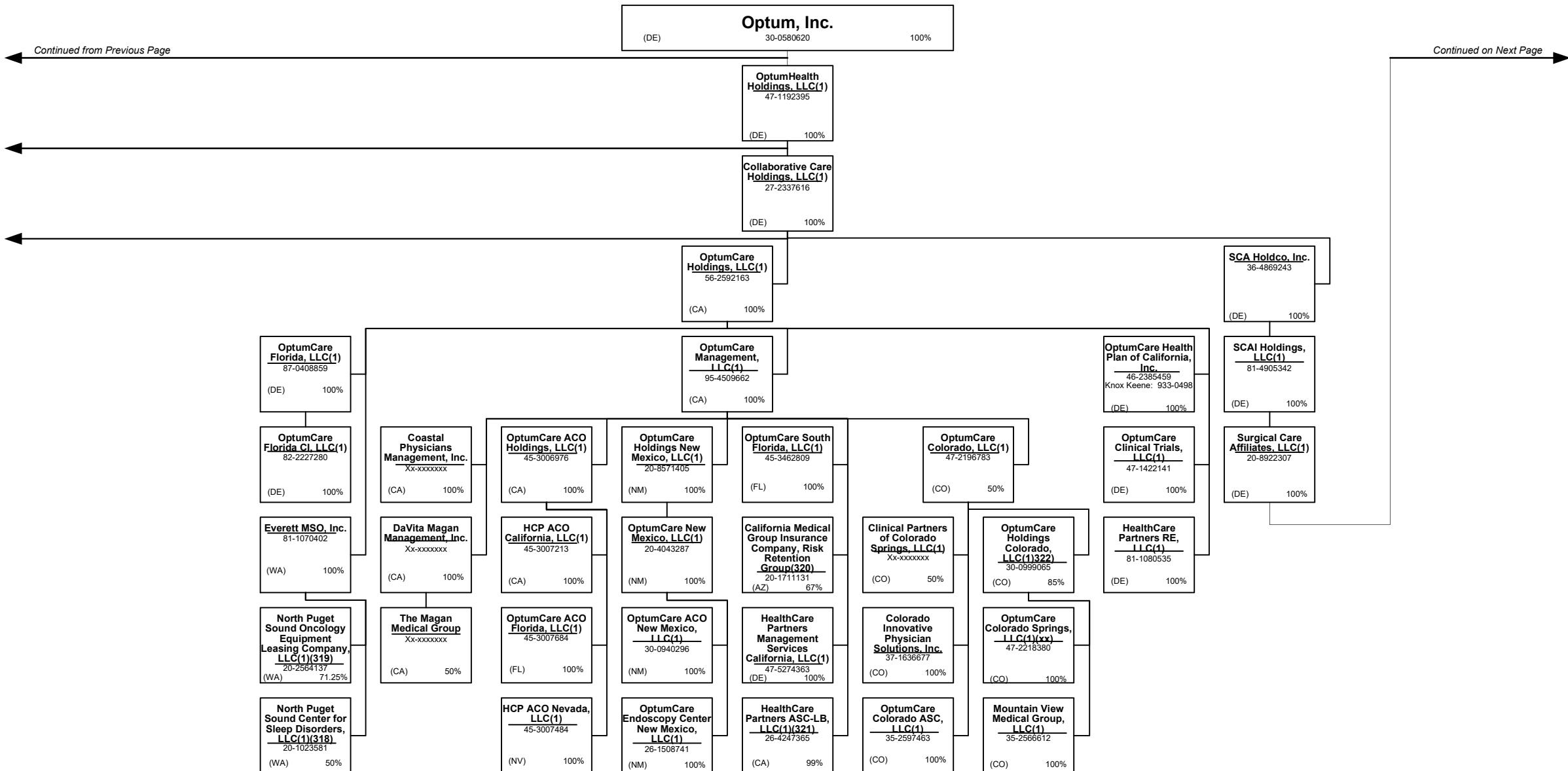
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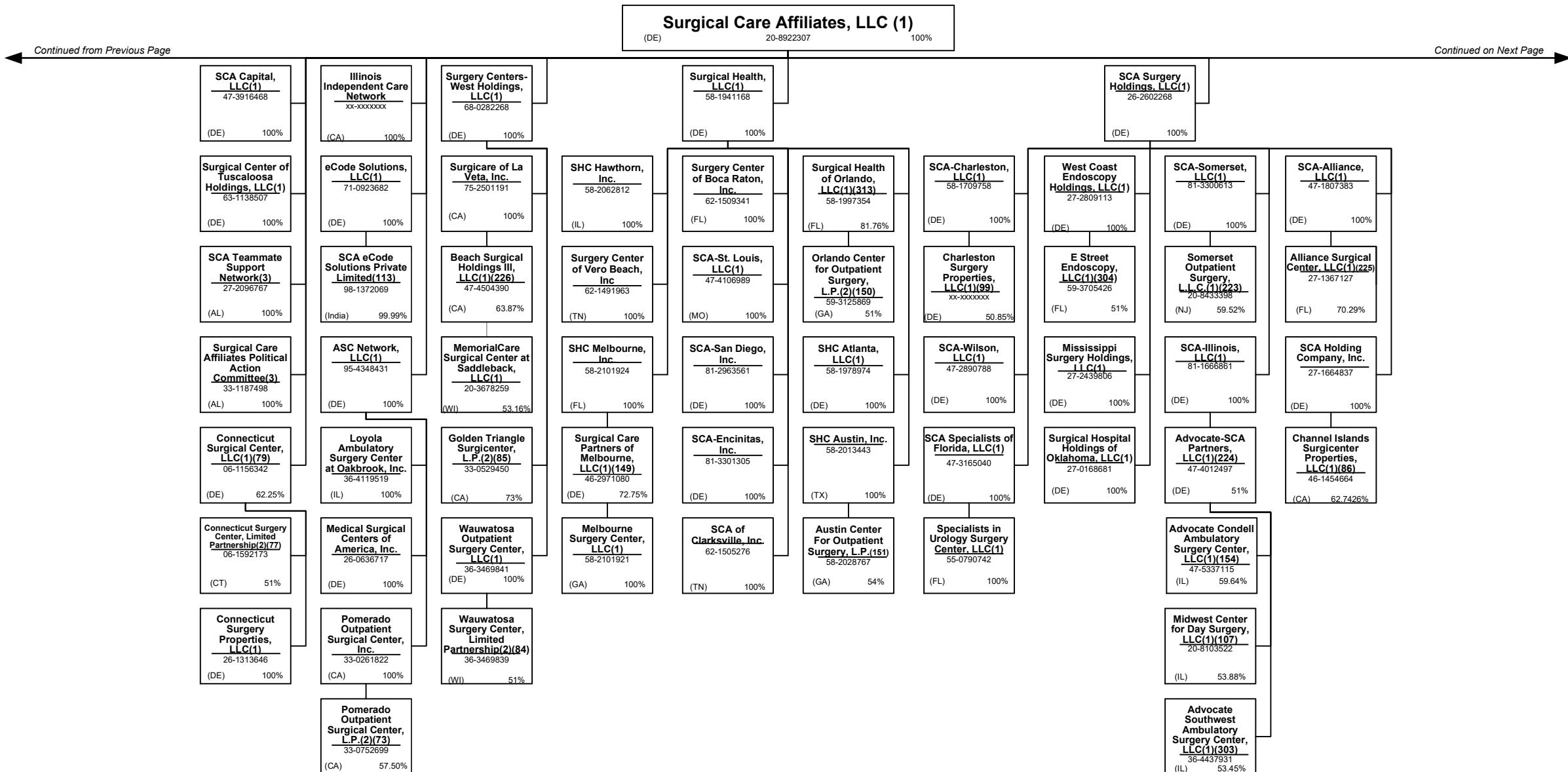
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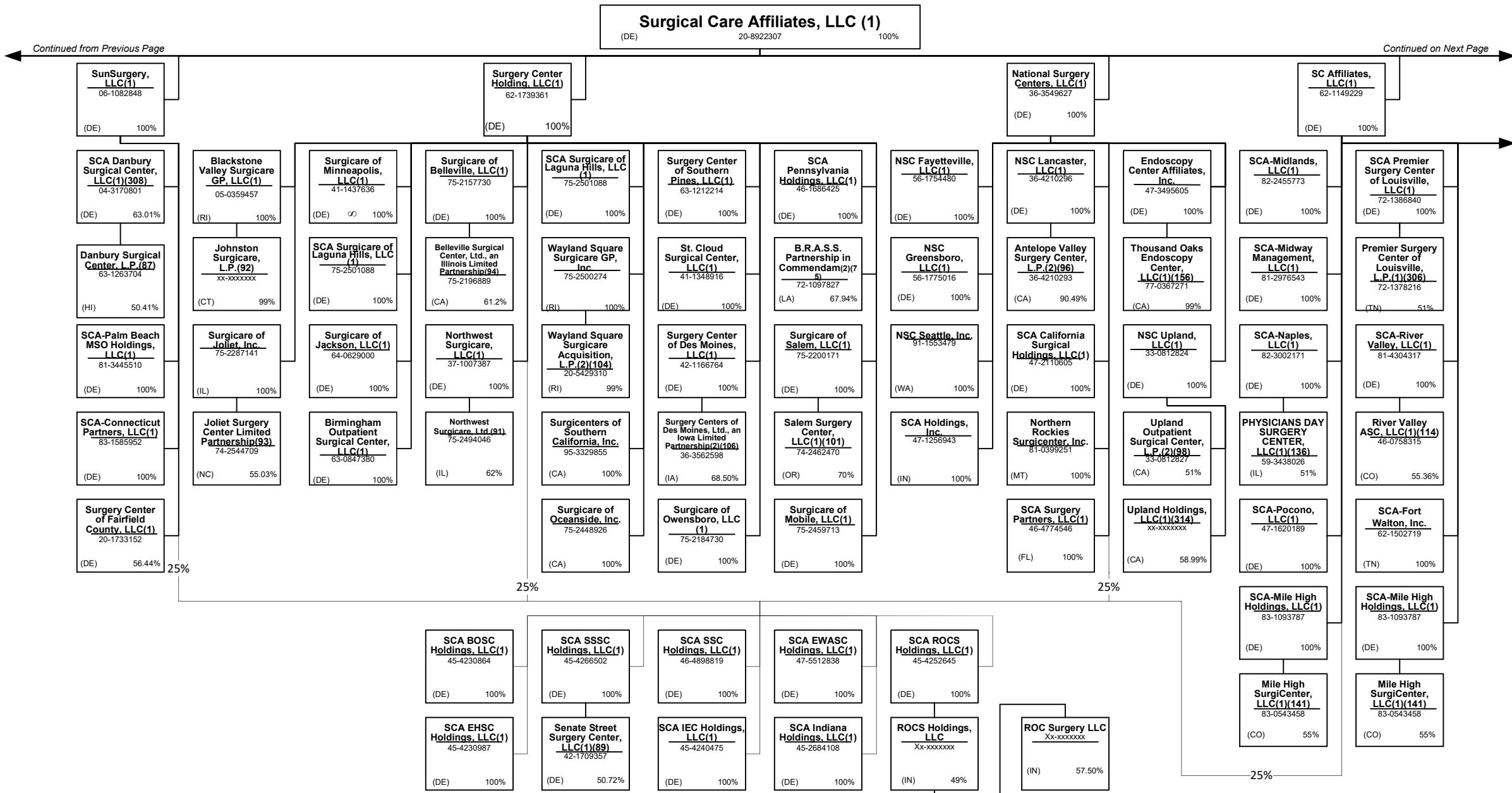


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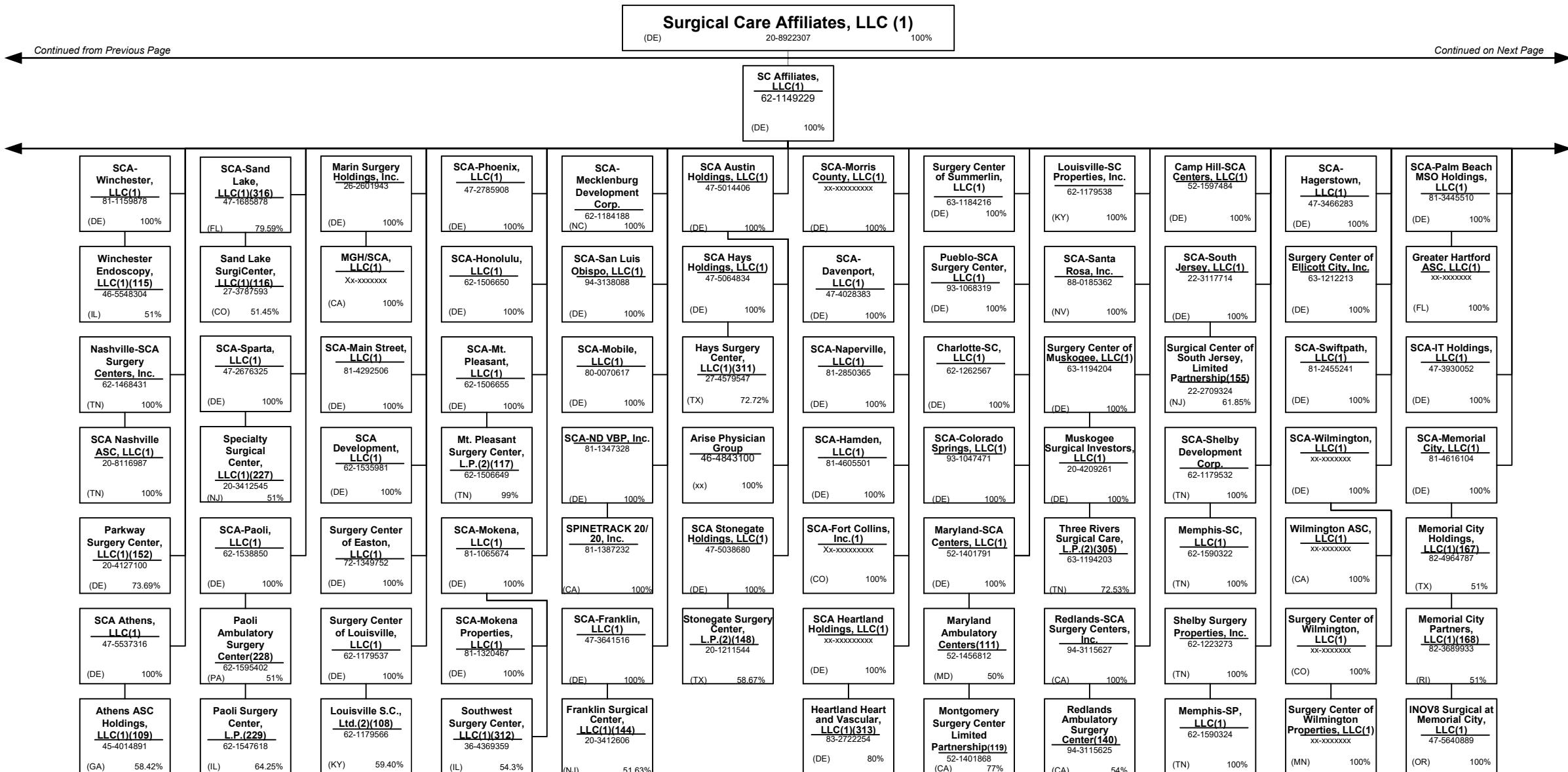


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**PART 1 – ORGANIZATIONAL CHART**



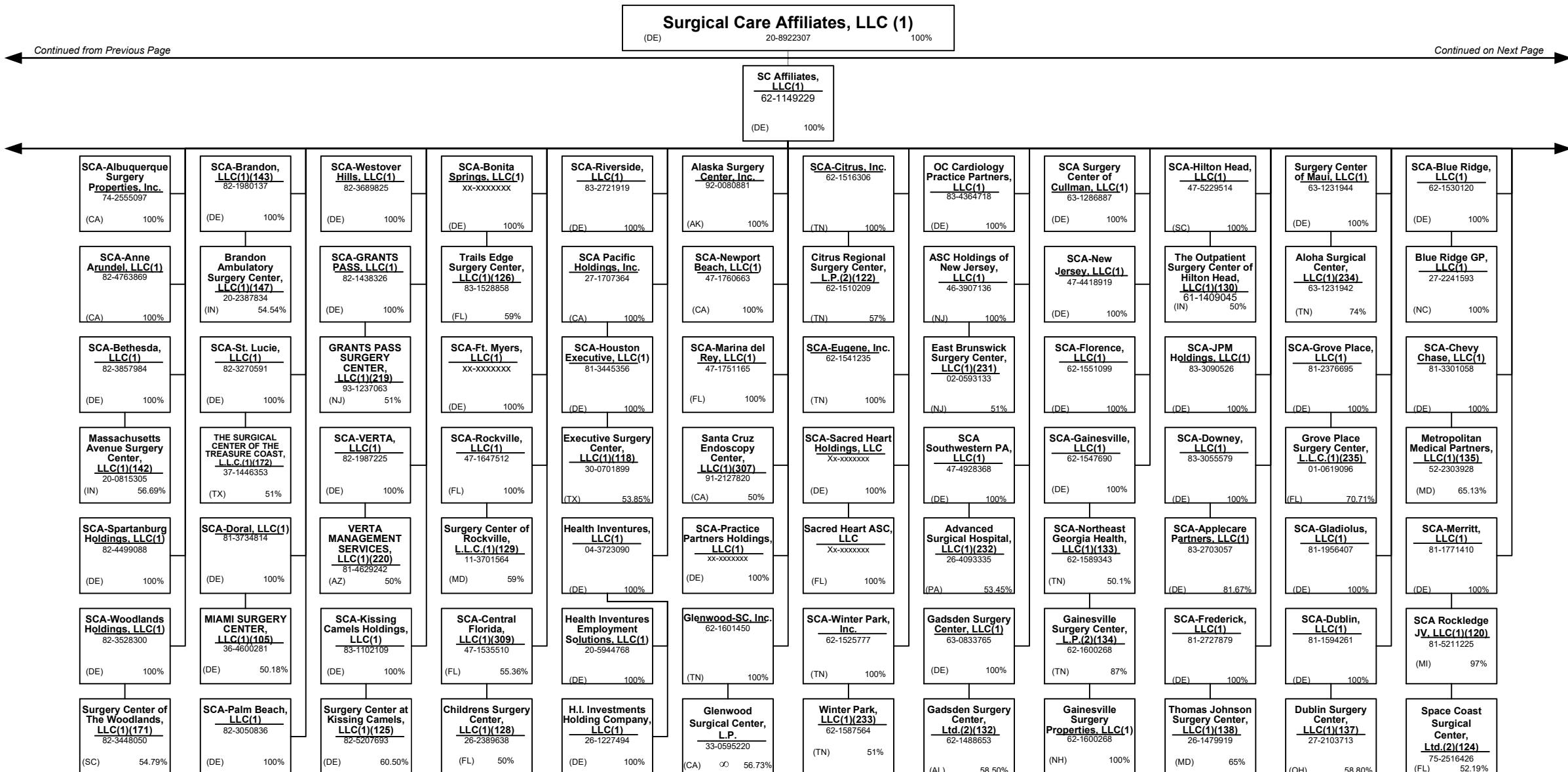
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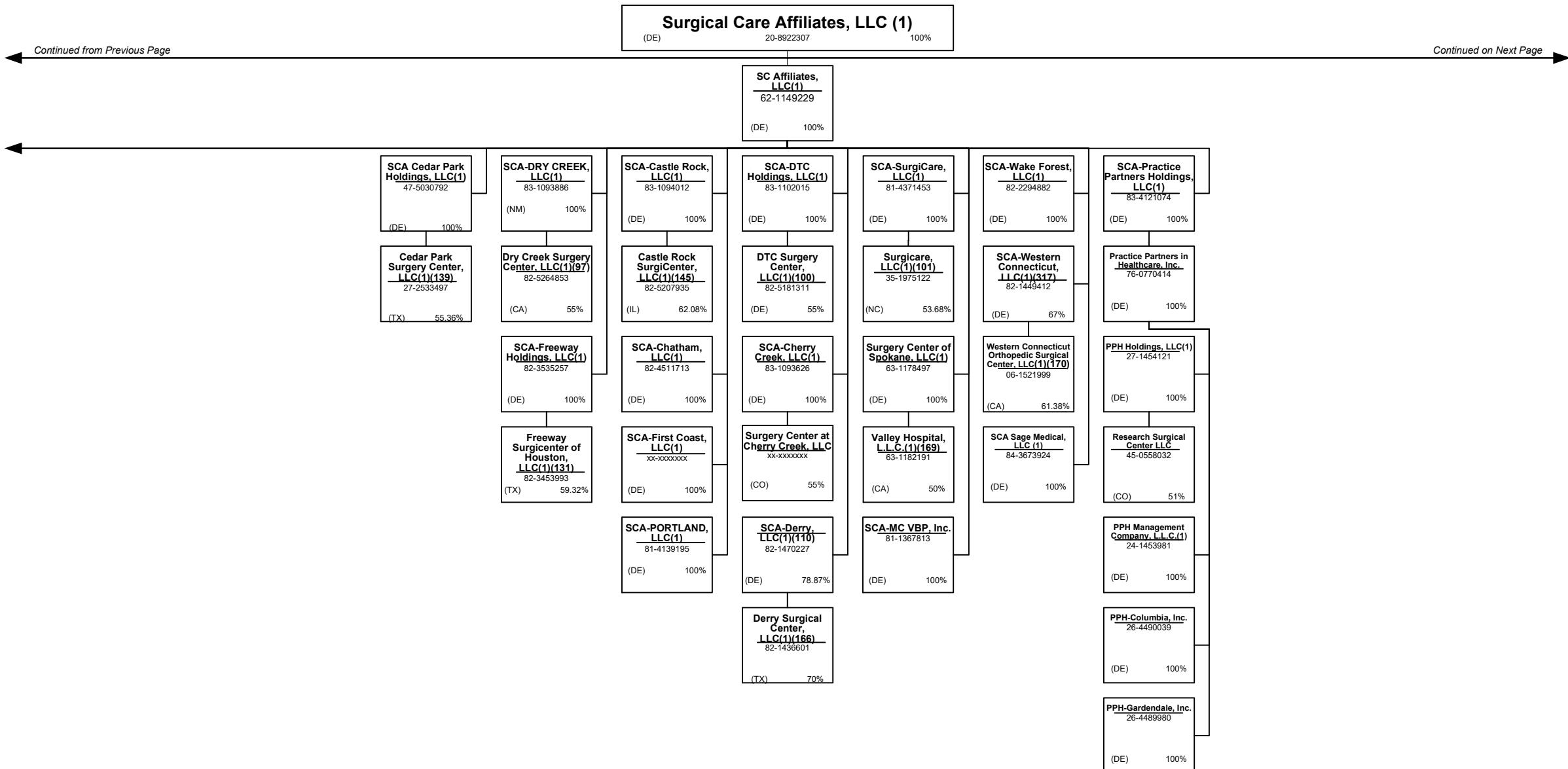
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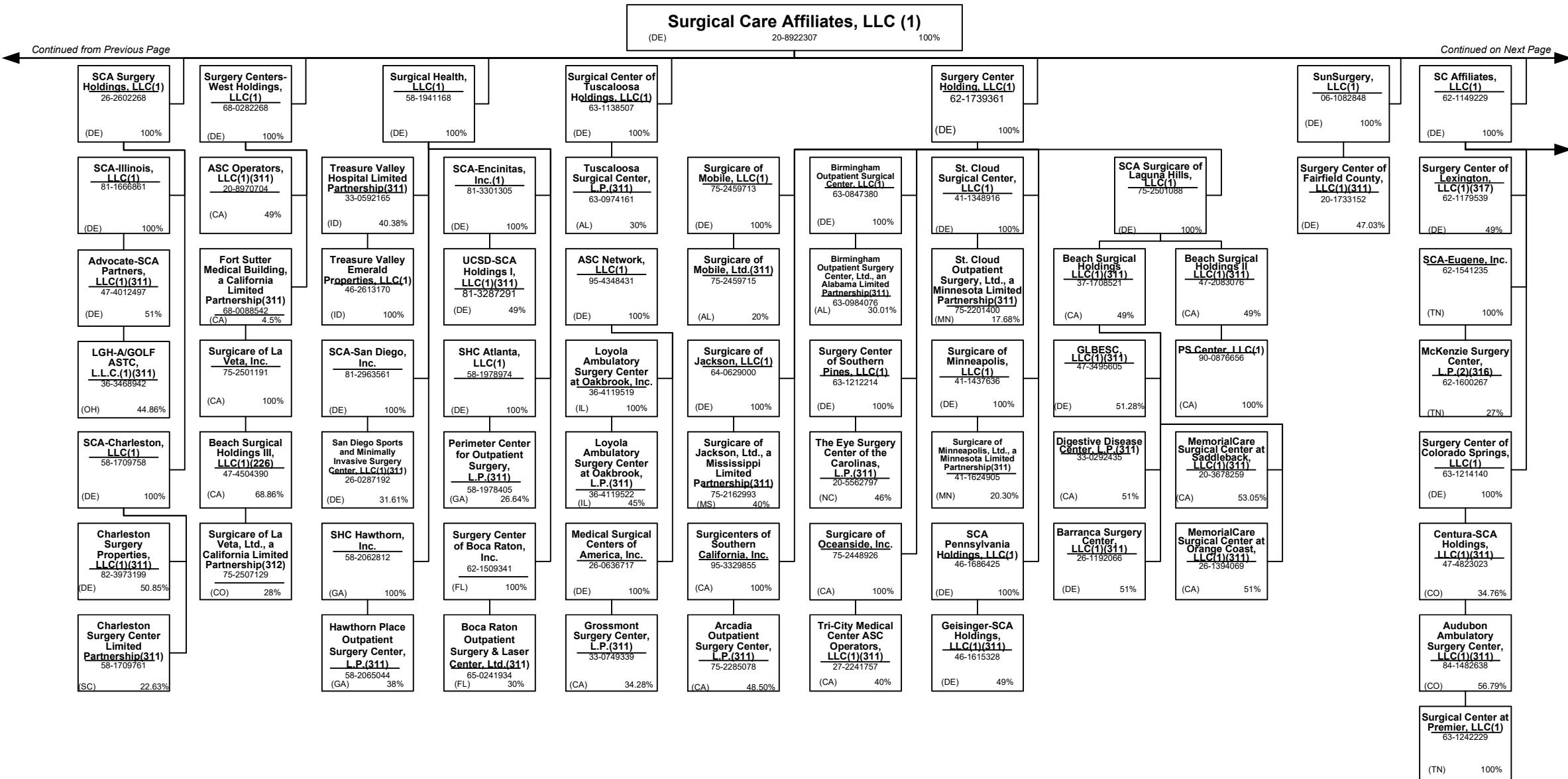
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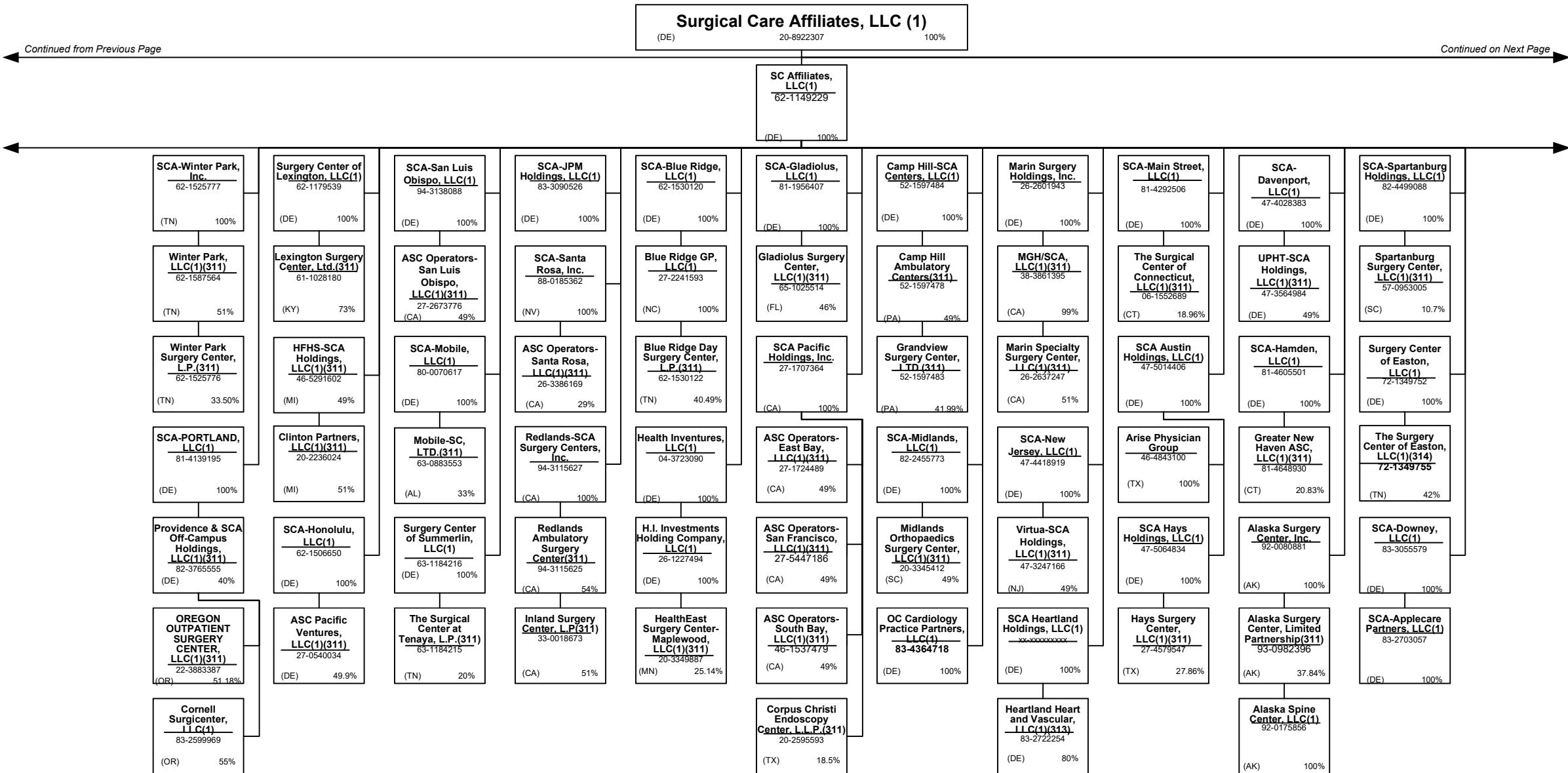
NOTE: All Companies below are minority owned entities of Surgical Care Affiliates, LLC.



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## PART 1 – ORGANIZATIONAL CHART

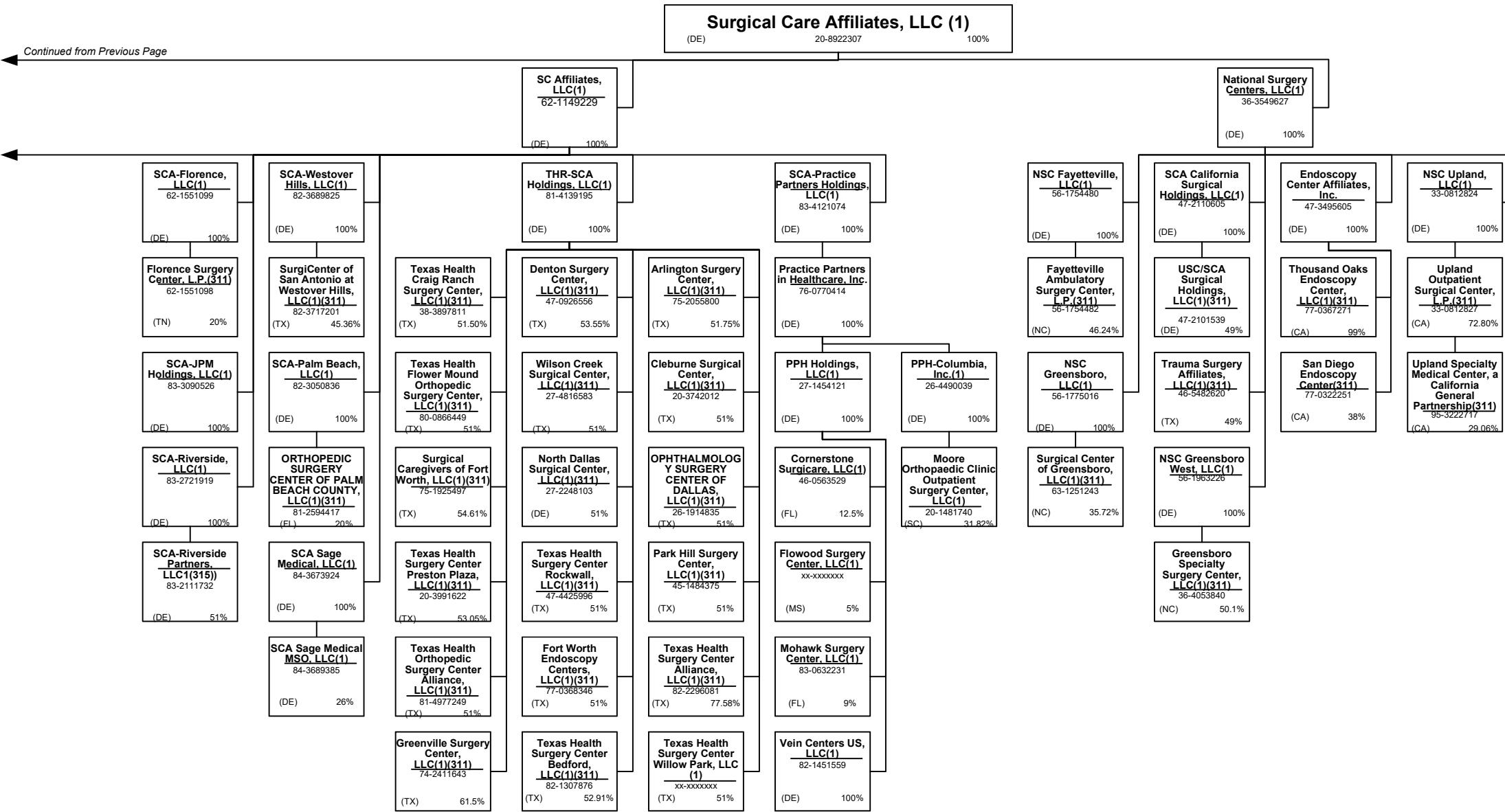
NOTE: All Companies below are minority owned entities of Surgical Care Affiliates, LLC.



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

## PART 1 – ORGANIZATIONAL CHART

NOTE: All Companies below are minority owned entities of Surgical Care Affiliates, LLC.



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

## PART 1 – ORGANIZATIONAL CHART

## Physician Owned Entities

Entity Name	Domiciliary Location	ID Number	Entity Name	Domiciliary Location	ID Number	Entity Name	Domiciliary Location	ID Number
4CMHT, LLC	AZ	--	Hospitalist Medicine Physicians of Cortland County, PLLC	NY	--	INSPIRIS of Minnesota Medical Services, P.C.	MN	27-3909401
A.G. Dkengil, Inc.	NJ	22-349300	Hospitalist Medicine Physicians of Cuyahoga County Ltd.	OH	--	INSPIRIS of New York Medical Services, P.C.	NY	13-4188739
A.T. LLC	AZ	--	Hospitalist Medicine Physicians of Davidson County, PLLC	NC	--	INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670
Allan J Ebbin, MD, P.C.	NV	86-0499345	Hospitalist Medicine Physicians of Delaware, P.A.	DE	--	INSPIRIS of Tennessee Medical Services, P.C.	TN	27-5248756
AppleCare Hospitalists Medical Group, Inc.	CA	11-1890491	Hospitalist Medicine Physicians of Durham County, PLLC	NC	--	Integrated Physician Technology LLC	CA	--
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269	Hospitalist Medicine Physicians of Forsyth County, PLLC	NC	--	March Vision Care Group, Incorporated	CA	95-4874334
AppleCare Medical Group, Inc.	CA	33-0898174	Hospitalist Medicine Physicians of Fredericksburg, LLC	VA	--	Marvin McBride Medical Services, P.C.	MD	27-2800856
ARTA Health Network, P.C.	CA	46-1772418	Hospitalist Medicine Physicians of Fiona Royal, LLC	VA	--	MAT-RX DEVELOPMENT, LLC	TX	43-1967820
ARTA Western California, Inc.	CA	33-0858815	Hospitalist Medicine Physicians of Harnett County, P.L.C.	NC	--	Ma-Rx Fort Worth GP, L.L.C.	TX	35-2262635
Aspectus, Inc.	MA	04-3403101	Hospitalist Medicine Physicians of Imperial County, Inc.	CA	--	ME Urgent Care Nebraska, Inc.	NE	81-0936574
Bessler, MD, PLLC	NV	--	Hospitalist Medicine Physicians of Indiana, LLC	IN	--	MedExpress Employee Services, Inc.	DE	81-265129
Better Health Value Network, LLC	WA	47-4349079	Hospitalist Medicine Physicians of Iowa, PLLC	IA	--	MedExpress Primary Care Arizona, P.C.	AZ	81-4550869
California Spring Holdings, PC	CA	81-0881243	Hospitalist Medicine Physicians of Kanawha County, PLLC	WV	--	MedExpress Primary Care Arkansas, P.A.	AR	Applied for
Car, PLLC	TN	--	Hospitalist Medicine Physicians of Kentucky, PLLC	KY	--	MedExpress Primary Care Kansas, P.A.	KS	81-4605885
Centers for Family Medicine, GP	CA	33-0483510	Hospitalist Medicine Physicians of Los Angeles County, Inc.	CA	--	MedExpress Primary Care Maryland, P.C.	MD	82-3384324
Cogen Healthcare of Pennsylvania, Inc.	PA	--	Hospitalist Medicine Physicians of Louisiana, LLC	LA	--	MedExpress Primary Care Massachusetts, P.C.	MA	82-1056093
Cogen Healthcare of Texas, P.A.	TX	--	Hospitalist Medicine Physicians of Marathon County, Ltd.	WI	--	MedExpress Primary Care Minnesota, P.C.	MINN	81-4356738
Critical Care Physicians of Illinois, LLC	IL	--	Hospitalist Medicine Physicians of Michigan, PLLC	MI	--	MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265
Dallas Inpatient Specialist, PLLC	TX	--	Hospitalist Medicine Physicians of Mississippi, LLC	MS	--	MedExpress Primary Care South Carolina, P.C.	SC	83-0764858
David Moen, M.D. P.C.	NY	81-5101448	Hospitalist Medicine Physicians of Monterey County, Inc.	CA	--	MedExpress Primary Care Texas, P.A.	TX	84-2500750
David R. Ferrell, M.D., P.C.	NV	45-2180022	Hospitalist Medicine Physicians of Multiple Practice Sites, LLC	DE	--	MedExpress Primary Care Virginia, P.C.	VA	82-3395792
Day-OP Center Of Long Island Inc.	NY	11-2811353	Hospitalist Medicine Physicians of New York, PLLC	NY	--	MedExpress Primary Care West Virginia, Inc.	WV	82-4401181
Empire Physicians' Medical Group, Inc.	CA	33-0181426	Hospitalist Medicine Physicians of Ohio County, PLLC	WV	--	MedExpress Primary Care Wisconsin, S.C.	WI	81-4583448
Everett Physicians, Inc. P.S.	WA	81-1625636	Hospitalist Medicine Physicians of Rapides Parish, L.L.C.	LA	--	MedExpress Urgent Care - New Jersey, P.C.	NJ	45-5388778
First Hill SurgeryCenter, LLC	WA	47-2066485	Hospitalist Medicine Physicians of Richland County, Ltd.	OH	--	MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2099623
Fountain Hills Family Practice, PC	AZ	--	Hospitalist Medicine Physicians of Samaritan, PLLC	NY	--	MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280
Greater Phoenix Collaborative Care, P.C.	AZ	27-2137725	Hospitalist Medicine Physicians of San Bernardino County, Inc.	CA	--	MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120
HealthCare Partners Affiliates Medical Group	CA	95-4526112	Hospitalist Medicine Physicians of San Luis Obispo County, Inc.	CA	--	MedExpress Urgent Care California, P.C.	CA	82-0900142
HealthCare Partners ASC-HB, LLC	CA	26-4247365	Hospitalist Medicine Physicians of Summit County, Ltd.	OH	--	MedExpress Urgent Care Connecticut, P.C.	CT	81-95682
HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760	Hospitalist Medicine Physicians of Sylvania Ltd.	OH	--	MedExpress Urgent Care Idaho, P.C.	ID	82-1135236
HealthCare Partners Medical Group (Coats), Ltd.	NV	88-0213519	Hospitalist Medicine Physicians of Texas, PLLC	TX	--	MedExpress Urgent Care Illinois, P.C.	IL	47-4308614
HealthCare Partners Medical Group, P.C.	CA	95-4340584	Hospitalist Medicine Physicians of Washington County, LLC	PA	--	MedExpress Urgent Care Iowa, P.C.	IA	81-5353472
Homecare Dimensions of Florida, Inc.	TX	--	Hospitalist Medicine Physicians of West Virginia, PLLC	WV	--	MedExpress Urgent Care Kansas, P.A.	KS	47-1919283
Homecare Dimensions, Inc.	TX	--	Hospitalist Medicine Physicians of Wisconsin Rapids, Ltd.	WI	--	MedExpress Urgent Care Minnesota, P.C.	MN	81-1125356
Hospitalist Medicine Physicians of Wood County, PLLC	WV	--	Hospitalist Medicine Physicians of Wisconsin, Ltd.	WI	--	MedExpress Urgent Care Missouri, P.C.	MO	47-3132625
Hospitalist Medicine of North Carolina, PLLC	NC	--	IN Style OPTICAL, LLC	MA	27-3296953	MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747
Hospitalist Physician of Broome County, PLLC	NY	--	Independent Physician Management LLC	CA	--	MedExpress Urgent Care Oregon, P.C.	OR	82-1919436
Hospitalist Medicine Physicians of Albany County, PLLC	NY	--	Inland Faculty Medical Group, Inc.	CA	33-0618077	MedExpress Urgent Care Rhode Island, P.C.	RI	81-9362765
Hospitalist Medicine Physicians of Ashland County, Ltd.	OH	--	Inpatient Services, PC	CO	--	MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706
Hospitalist Medicine Physicians of Buncombe County, PLLC	NJ	--	Insilis Medical Services of New Jersey, P.C.	NJ	45-2533134	MedExpress Urgent Care Texas, P.A.	TX	47-5117411
Hospitalist Medicine Physicians of Calhoun County, PLLC	MI	--	INSPIRIS of Alabama Medical Services, P.C.	AL	27-2295095	MedExpress Urgent Care Washington, P.C.	VA	82-2413118
Hospitalist Medicine Physicians of California, Inc.	CA	--	Insilis of Arizona Medical Services, P.C.	AZ	26-2895318	MedExpress Urgent Care Wisconsin, S.D.	WI	81-4281679
Hospitalist Medicine Physicians of Charleston, PLLC	WV	--	INSPIRIS of Florida Medical Services, P.A.	FL	450820510	MedExpress Urgent Care, no. - West Virginia	WV	26-4546400
Hospitalist Medicine Physicians of Connecticut, LLC	CT	--	INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674	MedExpress Urgent Care, P.C. - Georgia	GA	47-1804667

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

## PART 1 – ORGANIZATIONAL CHART

## Physician Owned Entities

Entity Name	Domiciliary Location	ID Number	Entity Name	Domiciliary Location	ID Number	Entity Name	Domiciliary Location	ID Number
MedExpress Urgent Care, F.C. - Indiana	IN	90-0929572	ProHEALTH Accountable Care Medical Group, PLLC	NY	45-4489117	Sound Physicians of Wyoming LLC	WY	“
MedExpress Urgent Care, F.C. - Maryland	MD	45-3461101	ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394	South Sound Hospitalist Physicians, PLLC	MA	“
MedExpress Urgent Care, F.C. - Massachusetts	MA	47-1857908	ProHEALTH Care Associates of New Jersey LLP	NJ	47-6659263	Surgicare of La Veta, Ltd.	CA	75-2507123
MedExpress Urgent Care, F.C. - Michigan	MI	46-4733307	ProHEALTH Medical NY, P.C.	NY	“	Talbert Medical Group, P.C.	CA	93-1172065
MedExpress Urgent Care, F.C. - Oklahoma	OK	47-1824355	ProHealth Physicians, P.C.	CT	06-1463068	TeamMD Physicians, P.C.	IA	30-0445773
MedExpress Urgent Care, F.C. - Pennsylvania	PA	26-3750502	ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535	The Everett Clinic, PLLC	VA	31-0214500
MedExpress Urgent Care, F.C. - Tennessee	TN	45-4973138	ProHEALTH Urgent Care Medicine, PLLC	NY	48-183579	The Polyclinic, PLLC	VA	31-0363073
MedExpress Urgent Care, F.C. - Virginia	VA	45-3123110	Prospero Health Partners, P.C.	MN	84-1234753	Urgent Care New York, P.C.	NY	82-2400620
MedExpress Urgent Care, F.S.C. - Kentucky	KY	83-1565124	Prospero Medical Services New Jersey, P.C.	NJ	84-0841362	Urology Specialists Pediatric Division, (McBeath), PLLC	NV	“
MedExpress, Inc. - Delaware	DE	45-5436856	Redlands Family Practice Medical Group, Inc.	CA	56-2627067	USMD Cancer Treatment Centers GP, LLC.	TX	80-0845498
Memorial Healthcare IPA, GP	CA	95-4688463	Reliant Medical The Endoscopy Center, L.C.	MA	“	USMD Cancer Treatment Centers, LLC.	TX	26-2245431
Metro 1 Stone Management, Ltd.	TX	59-3392213	Rhythm Merger Sub, PC	CA	“	USMD Diagnostic Services, LLC	TX	27-2803133
MH Holdings One, a Medical Corporation	CA	27-4607374	Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097	USMD of Arlington GP, LLC.	TX	73-1662757
MH Merger Sub, a Medical Corporation	CA	27-4607208	Riverside Imaging Center, Inc.	NJ	“	Vein Ablation Specialists and Consultants LLC	AZ	“
MH Physician Three Holdco, a Medical Corporation	CA	27-4691514	Riverside Pediatric Group, P.C.	NJ	22-0824559	Wanderer Merger Sub, A Medical Corporation	CA	“
MHCH, Inc.	CA	90-0507474	Robert A. Besser, MD, PLLC	NV	“	Waypoint Minnesota PC	MN	46-2854394
MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508	Robert B. McBeath, M.D. II, P.C.	NV	86-0857176	Waypoint Minnesota Sports PC	MN	46-2949765
Mobile Medical Services, P.C.	NV	30-0415773	Robert B. McBeath, M.D. III, P.C.	NV	46-2862506	WellMed DFW Medicare ACO, LLC	TX	84-2204650
Mobile-SC, LTD.	AL	63-0883553	Robert B. McBeath, M.D. Professional Corporation	NV	88-0310956	WellMed Florida Medicare ACO, LLC	TX	84-2233329
Monarch Health Plan, Inc.	CA	22-3935634	Robert J. Fauer, MD, P.C.	AZ	“	WellMed Greater Texas Medicare ACO, LLC	TX	34-2178104
Monarch HealthCare, A Medical Group, Inc.	CA	33-0587680	Saddleback Outpatient Surgery Center, LLC	CA	75-2507128	WellMed Medical Group, PA.	TX	74-2574229
Monarch Hospice, LLC	CA	30-0606451	San Bernardino Medical Group, Inc.	CA	“	WellMed Network of Florida, Inc.	TX	35-231192
Mosaic Management Services, Inc.	CA	20-5892451	Sanvello Behavioral Health Services of Texas, P.A.	TX	84-3152209	WellMed Networks - DFW, Inc.	TX	41-2250215
NAMM Medical Group Holdings, Inc.	CA	56-2627070	Sanvello Behavioral Health Services, P.A.	DE	84-754732	WellMed Networks, Inc.	TX	74-2889447
NAMM-MGH, Inc.	CA	61-1627269	Sound Inpatient Physicians - Michigan, PLLC	MI	“	WellMed of Las Cruces, Inc.	TX	32-0183013
Nagara Hospitalist, P.C.	NY	“	Sound Inpatient Physicians Medical Group, Inc.	CA	“	WellMed Tampa/Orlando Medicare ACO, LLC	TX	84-2193003
Nifty After Fifty/Monarch, LLC	CA	26-2995765	Sound Inpatient Physicians of Ohio, LLC	OH	“	WellMed Texas Medicare ACO, LLC	TX	84-2219963
Northridge Medical Group, Inc.	CA	95-4748023	Sound Physicians Emergency Medicine of Kentucky, PLLC	KY	“	West Valley Internal Medicine Associates, LLC.	AZ	“
Northwest Medical Group Alliance, LLC	WA	91-1659344	Sound Physicians Emergency Medicine of Michigan, PLLC	MI	“	West Valley Urgent Care, LLC	AZ	“
NPN IPA Washington, PLLC	WA	61-1855159	Sound Physicians Emergency Medicine of South Carolina, LLC	SC	“	WNO Medical, PLLC	TX	45-2158334
Optum Clinic, P.A.	TX	75-2778455	Sound Physicians Emergency Medicine of Texas, PLLC	TX	“	XLHome Michigan, P.C.	MI	46-3537245
Optum Medical Services of California, P.C.	CA	30-0826311	Sound Physicians Emergency Medicine of West Virginia, PLLC	WV	“	XLHome Northeast, P.C.	NJ	45-5530241
Optum Medical Services of Colorado, P.C.	CO	45-5424191	Sound Physicians Intensivists of Washington, PLLC	VA	“	XLHome Oklahoma, Inc.	OK	46-2931683
Optum Medical Services, P.C.	NC	45-3866363	Sound Physicians of Mayo, PLLC	ID	“	XLHome, P.C.	MD	27-3543997
Perham Physical Therapy, LTC	MN	20-5608977	Sound Physicians of Illinois, LLC	IL	“			
Physician Associates of the Greater San Gabriel Valley	CA	“	Sound Physicians of Indiana, LLC	IN	“			
Physician Partners Medical Group, Inc.	CA	30-0516435	Sound Physicians of Iowa, PLLC	IA	“			
PhysiciansCare Network, LLC	WA	“	Sound Physicians of Kankakee, Illinois, LLC	IL	“			
Polyclinic Holdings, P.C.	WA	83-3042027	Sound Physicians of Massachusetts, Inc.	MA	“			
Polyclinic Management Services Company, LLC	WA	“	Sound Physicians of Nebraska, LLC	NE	“			
PrimaryCare Associated Medical Group, Inc.	CA	33-0527335	Sound Physicians of New Jersey, LLC	NJ	“			
Prime Community Care, Inc.	CA	30-0516440	Sound Physicians of New York, PLLC	NY	“			
PrimeCare Medical Group of Chino Valley, Inc.	CA	33-0645768	Sound Physicians of North Carolina, PLLC	NC	“			
Professional Coverage Services, PLLC	TN	“	Sound Physicians of South Carolina, LLC	SC	“			

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

## PART 1 – ORGANIZATIONAL CHART

**Notes**

All legal entities on the Organization Chart are Corporations unless otherwise indicated.

(1) Entity is a Limited Liability Company  
 (2) Entity is a Partnership  
 (3) Entity is a Non-Profit Corporation  
 (4) Control of the Foundation is based on sole membership, not the ownership of voting securities  
 (5) COI Participações S.A. is 89.10289% owned by Esho – Empresa de Serviços Hospitalares S.A. and 10.8971% owned by COIPAR Participações S.A.  
 (6) TBD  
 (7) UnitedHealthcare India Private Limited is 99.999335% owned by OptumHealthInternational B.V. and 0.000665% owned by UnitedHealth International, Inc. OptumHealth International BV holds 100% of the issued preference shares.  
 (8) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.  
 (9) Newton Holdings, LLC, is 80.1% owned by Collaborative Care Holdings, LLC and the remaining 19.9% is owned by outside shareholders.  
 (10) WellMed Medical Management, Inc. is 85% owned by Collaborative Care Holdings, LLC and 15% owned by WMG Healthcare Partners, L.P.  
 (11) Seisa Serviços Integrados de Saúde Ltda is 99.99% owned by Amil Assistência Médica Internacional S.A. and 0.00001% owned by Cemed Care – Empresa de Atendimento Clínico Geral Ltda.  
 (12) Optum Health & Technology (India) Private Limited is 99.9995% owned by OptumHealth International B.V. and 0.0005 % owned by United Behavioral Health.  
 (13) INSPIRIS of Texas Physician Group is a Texas non-profit (taxable) whose sole member is Inspiris Services Company.  
 (14) PrimeCare of Citrus Valley, Inc. is 80% owned by PrimeCare Medical Network, Inc. and 20% owned by Citrus Valley Medical Associates, Inc.  
 (15) Optum Clinics Holdings, Inc. is 97.9% owned by Collaborative Care Holdings, LLC and 2.1% is owned by external shareholders.  
 (16) Optum Global Solutions (India) Private Limited is 99.999466 % owned by Optum Global Solutions International BV and 0.000534% UnitedHealth International, Inc. as nominee of Optum Global Solutions International BV per India requirement to have two shareholders.  
 (17) Amico Saúde Ltda. is 98.927933% owned by Santa Helena Assistência Médica S.A. and 1.072067% owned by Cemed Care – Empresa de Atendimento Clínico Geral Ltda.  
 (18) Esho – Empresa de Serviços Hospitalares S.A. is 99.667% owned by Amil Assistência Médica Internacional S.A. and the remaining 0.31798923769% is owned by external shareholders and 0.01462081847% is owned by Treasury Shares.  
 (19) Etho – Empresa de Tecnologia Hospitalar Ltda. 82.642% owned by Amil Assistência Médica Internacional S.A. and 17.358% owned by an external shareholder.  
 (20) Orthology, Inc. is 98% owned by UnitedHealth Group Ventures, LLC and 2% owned by external shareholders.  
 (21) Medalliance Net Ltda. is owned 99.999985% by Optum Health & Technology Serviços do Brasil Ltda. and 0.000015% by UHG Brasil Participações S.A.  
 (22) Branch offices in Iraq and Uganda.  
 (23) Cemed Care Empressa de Atendimento Clínico Geral Ltda. Is 99.999996% owned by Amil Assistência Médica Internacional S.A. and 0.000004% owned by Esho – Empresa de Serviços Hospitalares S.A.

(24) Optum 360, LLC is 69% owned by Optum Rocket, Inc; the remaining 31% is owned by external holders.  
 (25) Optum Health & Technology Serviços do Brasil Ltda. is 99.998364% owned by Optum Global Solutions International B.V. and the remaining 0.001636% is owned by OptumInsight, Inc.  
 (26) Bosque Medical Center Ltda. is 82.64% owned by Amil Assistência Médica Internacional S.A. and 17.3521% owned by Esho – Empresa de Serviços Hospitalares S.A.  
 (27) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.  
 (28) Real Appeal, Inc. is 98% owned by Rally Health, and the remaining 2% is owned by external shareholders.  
 (29) Optum Global Solutions (Philippines), Inc. is 99.992% owned by Optum Global Solutions International B.V., and the remaining 0.008% is held by individual shareholders who are directors of the company.  
 (30) Amil Clinical Research Participações Ltda. is 99.95% owned by Esho – Empresa de Serviços Hospitalares S.A. and 0.05% owned by Cemed Care – Empresa de Atendimento Clínico Geral Ltda.  
 (31) Imed Star Serviços de Desempenho Organizacional Ltda. is 99.99998% owned by Optum Health & Technology Serviços do Brasil Ltda and 0.00002% owned by UHG Brasil Participações S.A.  
 (32) Hospital de Clínicas de Jacarepaguá Ltda. is 99.99999% owned by Esho – Empresa de Serviços Hospitalares S.A. and 0.000001% is owned by Cemed Care – Empresa de Atendimento Clínico Geral Ltda.  
 (33) Hospital Alvorada Taguatinga Ltda. is 83.87% owned by Amil Assistência Médica Internacional S.A., 8.62433% by Bosque Medical Center Ltda., and 7.49% is owned by Hospital Samaritano de São Paulo Ltda.  
 (34) Registered as foreign shareholder in Brazil.  
 (35) FrontierMEDEX Kenya Limited is 99.9% owned by UnitedHealthcare Global Medical (UK) Limited and 0.1% owned by UnitedHealthcare International I B.V.  
 (36) UnitedHealthcare Global Canada Limited is registered in Nova Scotia and Newfoundland& Labrador.  
 (37) The limited partners of UnitedHealth Group International, L.P. include FMG Holdings, LLC (29.39634%), and UnitedHealth Group Incorporated (70.60366%).  
 (38) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.  
 (39) Optum Global Solutions International B.V. is 97.48% owned by Optum Technology, Inc. and 2.52% is owned by OptumHealth International B.V.  
 (40) Amil Assistência Médica Internacional S.A. is 91.81% owned by Polar II Fundo de Investimento em Participações and the remaining 8.19% is owned by the former controlling shareholders of Amil Assistência Médica Internacional S.A.  
 (41) Lusíadas A.C.E. is 55% owned by Lusíadas, SGPS, S.A., 10% owned by Lusíadas – Parcerias Cascais, S.A., 20% owned by Lusíadas, S.A., 5% owned by Clínica Médico Cirúrgica de Santa Tecla, S.A. and 10% owned by CLISA – Clínica de Santo António, S.A.  
 (42) TBD  
 (43) Frontier Medex Tanzania Limited is 99% owned by UnitedHealthcare Global Medical (UK) Limited. The remaining 1% is owned by a former officer of Frontier MEDEX Limited and is being transferred to UnitedHealthcare International I BV.  
 (44) Optum Solutions do Brasil – Tecnologia e Serviços de Suporte Ltda., is 99.9999% owned by Amil Assistência Médica Internacional S.A. and the remaining 0.0001% (1 quota) is owned by Cemed Care – Empresa de Atendimento Clínico Geral Ltda.  
 (45) Multiangio Ltda. is 93% owned by Esho – Empresa de Serviços Hospitalares S.A. and the remaining 7% is owned by external shareholders.  
 (46) Polo Holdco, LLC is 80.1% owned by Collaborative Care Holdings, LLC and the remaining 19.9% being owned by an outside third party.  
 (47) Excellion Serviços Biomédicos Ltda is 99.99997% owned by Esho – Empresa de Serviços Hospitalares S.A. and 0.000003% is owned by Cemed Care - Empresa de Atendimento Clínico Geral Ltda.  
 (48) Hospital Samaritano de São Paulo Ltda. is 99.999998% owned by Esho – Empresa de Serviços Hospitalares S.A. and the remaining 0.0000002% is owned by Hospital Alvorada Taguatinga Ltda.  
 (49) Optum360 Services, Inc. is 69% owned by Optum Rocket, Inc. and the remaining 31% is owned by external investors.  
 (50) OptumInsight India Private Limited is 99% owned by ABCO International Holdings, LLC and 1% owned by The Advisory Board Company.  
 (51) Branch office located in the United States.  
 (52) UnitedHealthcare Insurance Company has a representative office in Beijing, China.  
 (53) 4C MSO LLC, is 70% owned by Collaborative Care Holdings, LLC and 30% is owned by 5C Holdings LLC.  
 (54) ProHEALTH Fitness of Lake Success, LLC is 82.62% owned by ProHEALTH Medical Management, LLC and 17.38% by an external shareholder.  
 (55) Savvysherp Asia, Inc. is 99% owned by Savvysherp, LLC and the remaining 1% is owned by a number of individual shareholders.  
 (56) Fortify Technologies Asia, LLC is 99% owned by Savvysherp, LLC and the remaining 1% is owned by a number of individual shareholders.  
 (57) Virtual Therapeutics Corporation is 67% owned by Savvysherp, LLC and the remaining 33.4% is owned by an outside third party.  
 (58) BriovaRx Infusion Services 301, LP is 99.95% owned by AxelaCare Holdings, Inc. with the remaining 0.05% interest as a limited partner being held by BriovaRx Infusion Services 305, LLC.  
 (59) XLHealth Corporation holds 99.998%, UnitedHealth International, Inc. holds .002%.  
 (60) Hospitais Associados de Pernambuco Ltda. is 99.99992% owned by Esho – Empresa de Serviços Hospitalares S.A. and the remaining 0.00008% is owned by Hospital Alvorada Taguatinga Ltda.  
 (61) Topimagem Diagnóstico por Imagem Ltda. is 99% owned by Esho – Empresa de Serviços Hospitalares S.A., and the remaining 1% interest is owned by external shareholders.  
 (62) Dilab – Medicina Nuclear Ltda is 95% owned by Esho – Empresa de Serviços Hospitalares S.A. and the remaining 5% is owned by external shareholders.  
 (63) WellMed Networks – DFW, Inc. is 50% owned by WellMed Networks, Inc. and 50% owned by USMD Inc. WellMed Medical Management, Inc. controls 100% of WellMed Networks – DFW.  
 (64) Clínica Oftalmológica Danilo de Castro Sociedade Simples is 99.66% owned by Hospital Alvorada de Taguatinga Ltda. and the remaining 0.333333% is owned by Lotten-Eyes Oftalmologia Clínica e Cirurgica Ltda.  
 (65) Lotten-Eyes Oftalmologia Clínica e Cirurgica Ltda. is 99.99% owned by Hospital Alvorada de Taguatinga Ltda. and the remaining 0.000012% is owned by Esho – Empresa de Serviços Hospitalares S.A.  
 (66) CMO – Centro Médico de Oftalmologia S/S Ltda. is 99% owned by Hospital Alvorada de Taguatinga Ltda. and the remaining 1% is owned by Lotten-Eyes Oftalmologia Clínica e Cirurgica Ltda.  
 (67) UHCG-FZE is registered in the Dubai Silicon Oasis free zone.  
 (68) Elual Participações S.A. is 60% owned by Amil Assistência Médica Internacional S.A. and 40% by Esho – Empresa de Serviços Hospitalares S.A.

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

## PART 1 – ORGANIZATIONAL CHART

Notes

All legal entities on the Organization Chart are Corporations unless otherwise indicated.

(69) Hospital Santa Helena S.A. is 65.21% owned by Elual Participações S.A. and 33.60% owned by Esho – Empresa de Serviços Hospitalares S.A. and 1.19% is owned by external shareholder

(70) Santa Helena Assistência Médica S.A. is 77.30% owned by Elual Participações S.A. and The remaining 22.29222% is owned by Amil Assistência Médica Internacional S.A. and 0.40649% is owned by external shareholder.

(71) Registered branches in Australia and the UK.

(72) Hospital Ana Costa S.A. is 99.52% owned by Plano de Saúde Ana Costa Ltda., 0.375900% is owned by Hospital Alvorada de Taguatinga Ltda. and 0.104634107% is owned by external shareholders.

(73) The remaining 42.50% is owned by multiple sources.

(74) The remaining 0.0001% is owned by Amil Assistência Médica Internacional S.A.

(75) The remaining 32.06% is owned by multiple sources.

(76) Hospital Alvorada de Taguatinga Ltda. decreased its ownership in Casa de Saúde Santa Therezinha S.A. from 100% to 99.99%. The remaining 0.000001% is owned by Esho – Empresa de Serviços Hospitalares S.A.

(77) The remaining 49% is owned by multiple sources.

(78) The remaining 0.0005% is owned by Hospital Alvorada Taguatinga Ltda.

(79) The remaining 37.75% is owned by multiple sources.

(80) Registered in the Dubai Healthcare City free zone.

(81) Hospital Alvorada Taguatinga Ltda. owns 99.99944% of Eye Clinic Oftalmologia Clínico Cirúrgica e Diagnóstico Ltda. and the remaining 0.00056% is owned by Lotten-Eyes Oftalmologia Clínica e Cirúrgica Ltda.

(82) Plano de Saúde Ana Costa Ltda. is 74.85961% owned by Amil Assistência Médica. Internacional S.A. and the remaining 25.14039% is owned by Santos Administração e Participações S.A.

(83) OptumInsight, Inc. is registered as foreign shareholders in Brazil.

(84) The remaining 49% is owned by multiple sources.

(85) The remaining 27% is owned by multiple sources.

(86) The remaining 37.26% is owned by multiple sources.

(87) The remaining 49.59% is owned by multiple sources.

(88) COI Clínicas Oncológicas Integradas S.A. owns 99.999997% of Instituto do Radium de Campinas Ltda. And the remaining 0.000003% is owned by Esho – Empresa de Serviços Hospitalares S.A.

(89) The remaining 49.28% is owned by multiple sources..

(90) The remaining 23.55% is owned by multiple sources.

(91) The remaining 38% is owned by multiple sources.

(92) The remaining 1% is owned by multiple sources.

(93) The remaining 44.97% is owned by multiple sources.

(94) The remaining 38.80% is owned by multiple sources.

(95) TBD

(96) The remaining 9.51% is owned by multiple sources.

(97) The remaining 45% is owned by multiple sources.

(98) The remaining 49% is owned by multiple sources.

(99) The remaining 49.15% is owned by multiple sources.

(100) The remaining 45% is owned by multiple sources.

(101) The remaining 30% is owned by multiple sources.

(102) UnitedHealthcare International X S.á.r.l. holds 100% of the common shares, 403,948,524 common shares.

UnitedHealthcare International III S.á.r.l. holds 100% of the preferred shares, 513,899,520 preferred shares.

(103) The remaining 0.01% is held by UnitedHealth International, Inc.

(104) The remaining 1% is owned by multiple sources.

(105) The remaining 49.82% is owned by multiple sources.

(106) The remaining 32.05% is owned by multiple sources.

(107) The remaining 46.12% is owned by multiple sources.

(108) The remaining 40.60% is owned by multiple sources.

(109) The remaining 41.58% is owned by multiple sources.

(110) The remaining 21.13% is owned by multiple sources.

(111) The remaining 50% is owned by multiple sources.

(112) The remaining 19.9% is owned by Nineteen.Nine Holdings, LLC.

(113) The remaining 0.01% is owned by an individual shareholder.

(114) The remaining 44.64% is owned by multiple sources.

(115) The remaining 49% is owned by multiple sources.

(116) The remaining 48.55% is owned by multiple sources.

(117) The remaining 1% is owned by multiple sources.

(118) The remaining 46.15% is owned by multiple sources.

(119) The remaining 23% is owned by multiple sources.

(120) The remaining 3% is owned by multiple sources.

(121) TBD

(122) The remaining 43% is owned by multiple sources.

(123) TBD

(124) The remaining 47.81% is owned by multiple sources.

(125) The remaining 39.5% is owned by multiple sources.

(126) The remaining 41% is owned by multiple sources.

(127) The co-founders of Pacifica Labs, Inc. own the remaining 14.21%.

(128) The remaining 50% is owned by multiple sources.

(129) The remaining 41% is owned by multiple sources.

(130) The remaining 50% is owned by multiple sources.

(131) The remaining 40.68% is owned by multiple sources.

(132) The remaining 51.50% is owned by multiple sources.

(133) The remaining 49.9% is owned by multiple sources.

(134) The remaining 13% is owned by multiple sources.

(135) The remaining 34.87% is owned by multiple sources.

(136) The remaining 46.48% is owned by multiple sources.

(137) The remaining 41.20% is owned by multiple sources.

(138) The remaining 35% is owned by multiple sources.

(139) The remaining 48.06% is owned by multiple sources.

(140) The remaining 46% is owned by multiple sources.

(141) The remaining 45% is owned by multiple sources.

(142) The remaining 43.31% is owned by multiple sources.

(143) The remaining 49.02% is owned by multiple sources.

(144) The remaining 47.36% is owned by multiple sources.

(145) The remaining 37.92% is owned by multiple sources.

(146) The remaining 27.47% is owned by multiple sources.

(147) The remaining 45.46% is owned by multiple sources.

(148) The remaining 41.33% is owned by multiple sources.

(149) The remaining 27.25% is owned by multiple sources.

(150) The remaining 49% is owned by multiple sources.

(151) The remaining 45% is owned by multiple sources.

(152) The remaining 26.31% is owned by multiple sources.

(153) The remaining 26.96% is owned by multiple sources.

(154) The remaining 40.35% is owned by multiple sources.

(155) The remaining 38.14% is owned by multiple sources.

(156) The remaining 1% is owned by another source.

(157) The remaining 20% is owned by an individual manager of the entity.

(158-165) TBD

(166) The remaining 30% is owned by multiple sources.

(167) The remaining 49% is owned by multiple sources.

(168) The remaining 49% is owned by multiple sources.

(169) The remaining 50% is owned by multiple sources.

(170) The remaining 38.62% is owned by multiple sources.

(171) The remaining 45.21% is owned by multiple sources.

(172) The remaining 49% is owned by multiple sources.

(173-218) TBD

(219) The remaining 49% is owned by multiple sources.

(220) The remaining 50% is owned by multiple sources.

(221) Hygeia Corporation, a Delaware corporation, acquired a 1.28978% ownership interest in FMG Holdings LLC, a Delaware limited liability company.

(223) The remaining 40.48% is owned by multiple sources.

(224) The remaining 49% is owned by multiple sources.

(225) The remaining 48.7% is owned by multiple sources.

(226) The remaining 36.13% is owned by multiple sources.

(227) The remaining 49% is owned by multiple sources.

(228) The remaining 49% is owned by multiple sources.

(229) The remaining 35.75% is owned by multiple sources.

(230) The remaining 74% is owned by multiple sources.

(231) The remaining 49% is owned by multiple sources.

(232) The remaining 46.55 is owned by multiple sources.

(233) The remaining 49% is owned by multiple sources.

(234) The remaining 26% is owned by multiple sources.

(235) The remaining 29.29% is owned by multiple sources

(236) The remaining 1.77% is owned by external shareholders.

(237) The remaining 0.1% is owned by Inversiones Clínicas Santa María S.A.

(238) Minority ownership is held by third party shareholders. Corporate name is Inmobiliaria Santa María S.A.

(239) The remaining 0.0001% is owned by Clínica Dávila y Servicios Médicos S.A.

(240) Constructora Inmobiliaria Megapóq S.A. owns 1 share.

(241) The remaining 0.0001% is owned by Saden S.A.

(242) Minority ownership is held by several third party shareholders.

(243) In accordance to a capital increase executed on 2018, Clínica Santa María S.A. owns 99.9% of the shares. Minority ownership is held by Sociedad de Inversiones Santa María S.A.

(244) The remaining 0.2569% is owned by Clínica Dávila y Servicios Médicos S.A.

(245) The remaining 0.8238% is owned by Clínica Santa María S.A.

(246) The remaining 0.009% is owned by Clínica Santa María S.A.

(247) The remaining 0.10% is owned by Clínica Santa María S.A.

(248) The remaining 50% is owned by Clínica Santa María S.A.

(249) The remaining 1% is owned by Servicios Integrados de Salud Ltda.

(250) The remaining 1% is owned by Servicios Integrados de Salud Ltda.

(251) The remaining 0.1% is owned by Inmobiliaria Apoquindo 3600 Ltda.

(252) The remaining 0.02% is owned by Saden S.A.

(253) The remaining 0.0001% is owned by Saden S.A.

(254) The remaining 0.159% is owned by Saden S.A.

(255) The remaining 0.01% is owned by Saden S.A.

(256) The remaining 0.01% is owned by Clínica Dávila y Servicios Médicos S.A.

(257) The remaining 25.75% is owned by several third party shareholders.

(258) The remaining 6.55% is owned by third party shareholders.

(259) The remaining 0.1% is owned by Servicios Amed Quilpué S.A.

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

## PART 1 – ORGANIZATIONAL CHART

All legal entities on the Organization Chart are Corporations unless otherwise indicated.

(260) The remaining 0.1% is owned by Laboratorios Médicos Amed Quilpué S.A.

(261) The remaining 50% is owned by Gorki Osorio Vargas (25%) and Danilo Valderrama Torrealba (25%).

(262) The remaining 0.1% is owned by Simón Sacks Link.

(263) The remaining 15.5% is owned by third party shareholders.

(264) The remaining 6.66% is owned by Centromed Quilpué S.A.

(265) The remaining 0.000065% is owned by Clínica Dávila y Servicios Médicos S.A.

(266) The remaining 0.0001% is owned by Banmédica S.A.

(267) The remaining 1% is owned by Saden S.A.

(268) The remaining 0.0001% is owned by Banmédica S.A.

(269) The remaining 1% is owned by Saden S.A.

(270) The remaining 0.0001% is owned by Banmédica S.A.

(271) The remaining 1% is owned by Saden S.A.

(272) Inmobiliaria Megapoq S.A owns 1 share (0,0000%)

(273) The remaining 7.62% is owned by Banmédica Colombia S.A. (7.619%), Juan Guillermo Ruiz (0.000142%) and Servicios Legales Corporativos Ltda. (0.000142%).

(274) No information of the minority shareholder(s) has been provided.

(275) No information of the minority shareholder(s) has been provided.

(276) No information of the minority shareholder(s) has been provided.

(277) No information of the minority shareholder(s) has been provided.

(278) The other shareholder, with the other 50% is El Pacífico-Peruano Suiza Compañía de Seguros y Reaseguros S.A., part of the Credicorp Group

(279) No information of the minority shareholder(s) has been provided.

(280) No information of the minority shareholder(s) has been provided.

(281) No information of the minority shareholder(s) has been provided.

(282) No information of the minority shareholder(s) has been provided.

(283) No information of the minority shareholder(s) has been provided.

(284) No information of the minority shareholder(s) has been provided.

(285) No information of the minority shareholder(s) has been provided.

(286) The remaining 0.0001% is owned by Clínica Dávila y Servicios Médicos S.A.

(287) The remaining 0.00004% is owned by Saden S.A.

(288) The remaining 0.00004% is owned by Saden S.A.

(289) The remaining 0.0017% is owned by Saden S.A.

(290) The remaining 0.0001% is owned by Saden S.A.

(291) The remaining 0.08% is owned by Clínica Dávila y Servicios Médicos S.A.

(292) The remaining 50% is owned by CDC Holdings Colombia S.A.S.

(293) No information of the other shareholder(s) has been provided.

(294) The remaining 0.3% is owned by Inmobiliaria Apoquindo 3001 S.A.

Notes

(294) Inmobiliaria Megapoq S.A owns 1 share (0,0000%)

(295) The remaining 0.0001% is owned by Saden S.A.

(296) The remaining 0.0008% is owned by Vida Tres Internacional S.A.

(297) The remaining 0.01% is owned by Saden S.A.

(298) The remaining 50% is owned by CDC Holdings Colombia S.A.S.

(299) No information of the other shareholder(s) has been provided

(300) No information of the other shareholder(s) has been provided

(301) Banmédica S.A. owns 9.67% and Promotora del Country S.A. (Colombia) owns 0.23%. This Patrimony has two business units (Conuntry and Hill).

(302) The remaining 50% is owned by CDC Holdings Colombia S.A.S.

(303) The remaining 46.55% is owned by multiple sources.

(304) The remaining 49% is owned by multiple sources

(305) The remaining 27.47% is owned by multiple sources

(306) The remaining 49% is owned by multiple sources

(307) The remaining 50% is owned by multiple sources.

(308) The remaining 36.99% is owned by multiple sources.

(309) The remaining 44.64% is owned by multiple sources.

(310) The remaining 19.9% is owned by an external third party.

(311) The remaining 42% is owned by OptumRx Health Solutions, LLC.

(312) The remaining 45.7% is owned by multiple sources.

(313) The remaining 18.24 is owned by multiple sources.

(314) The remaining 41.01 is owned by multiple sources.

(315) This entity has numerous direct and indirect subsidiaries domiciled in several different states. Certain of these entities were divested and certain others had (or have planned) name changes, internal reorganizations and/or changes in legal entity formation. Given the complicated and developing nature of this situation, additional details will be forthcoming.

(316) The remaining 20.41% is owned by multiple sources.

(317) The remaining 33% is owned by multiple sources.

(318) The remaining 50% is owned by an outside third party.

(319) The remaining 28.75% is owned by an outside third party.

(320) The remaining 33% is owned by an outside third party.

(321) The remaining 1% is owned by an outside third party.

(322) The remaining 15% is owned by an outside third party.

(323) UnitedHealth Group International Holdings I Inc. has the following ownership: UHG – 70.60366 ordinary shares AND 100 shares of Series A Preferred Stock; FMG Holdings, LLC – 29.39634 ordinary shares

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.  
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